

County Offices
Newland
Lincoln
LN1 1YL

8 January 2015

Children and Young People Scrutiny Committee

A meeting of the Children and Young People Scrutiny Committee will be held on **Friday, 16 January 2015 at 10.00 am in Committee Room One, County Offices, Newland, Lincoln LN1 1YL** for the transaction of the business set out on the attached Agenda.

Yours sincerely



Tony McArdle
Chief Executive

Membership of the Children and Young People Scrutiny Committee
(18 Members of the Council and 5 Added Members)

Councillors J D Hough (Chairman), B Adams (Vice-Chairman), W J Aron, Mrs J Brockway, J P Churchill, S R Dodds, A G Hagues, B W Keimach, Ms T Keywood-Wainwright, C R Oxby, Mrs H N J Powell, Mrs S Ransome, Mrs L A Rollings, Mrs N J Smith, S M Tweedale, L Wootten, R Wootten and Mrs S M Wray

Added Members

Church Representatives: Mr S C Rudman, Mr P Thompson and Mrs G Wright

Parent Governor Representatives: Mr C V Miller and Mrs E Olivier-Townrow

**CHILDREN AND YOUNG PEOPLE SCRUTINY COMMITTEE AGENDA
FRIDAY, 16 JANUARY 2015**

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10 CONSIDERATION OF EXEMPT INFORMATION
In accordance with Section 100(A)(4) of the Local Government Act 1972, the following agenda item has not been circulated to the press and public on the grounds that it is considered to contain exempt information as defined in Paragraph 3 of Schedule 12A of the Local Government Act 1972, as amended. The press and public may be excluded from the meeting for the consideration of this item of business.

11 Child and Adolescent Mental Health Services Review
(To receive an exempt report which provides the Committee with an overview of the Commissioning Review of the Child and Adolescent Mental Health Service)

To Follow

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|---|--|
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| Please note: for more information about any of the following please contact the Democratic Services Officer responsible for servicing this meeting | |
| <ul style="list-style-type: none">• Business of the meeting• Any special arrangements• Copies of reports | |
| Contact details set out above. | |
| All papers for council meetings are available on: www.lincolnshire.gov.uk/committeerecords | |



**CHILDREN AND YOUNG PEOPLE
SCRUTINY COMMITTEE
28 NOVEMBER 2014**

PRESENT: COUNCILLOR J D HOUGH (CHAIRMAN)

Councillors B Adams (Vice-Chairman), W J Aron, Mrs J Brockway, S R Dodds, A G Hagues, B W Keimach, C R Oxby, Mrs S Ransome, Mrs L A Rollings, Mrs N J Smith, S M Tweedale, L Wootten, Mrs S M Wray, Mrs H N J Powell, C L Strange and T M Trollope-Bellew

Added Members

Church Representatives: Mr S C Rudman, Mr P Thompson and Mrs G Wright

Parent Governor Representatives: Mr C V Miller and Mrs E Olivier-Townrow

Councillors: D Brailsford and C J Davie attended the meeting as observers

Officers in attendance:-

Debbie Barnes (Executive Director of Children's Services), Keith Batty (Director of Programme, CfBT Education Services), Andy Birch (Head of Secondary School Improvement), Maggie Freeman (14 - 19 Commissioner), Philip Garner (Health Improvement Programme Manager), Clare Hughes (Principal Development Officer) Tony Warnock (Operations and Financial Advice Manager), Tracy Johnson (Scrutiny Officer) and Rachel Wilson (Democratic Services Officer)

49 APOLOGIES FOR ABSENCE / REPLACEMENT MEMBERS

Apologies for absence were received from Councillors J P Churchill, T Keyword-Wainwright and R Wootten.

The Chief Executive reported that having received notice under Regulation 13 of the Local Government (Committees and Political Groups) Regulations 1990, he had appointed Councillors C L Strange and T M Trollope-Bellew as a replacement members on the Committee in place of Councillors J P Churchill and R Wootten respectively, for this meeting only, and Councillor Mrs H N J Powell in place of the vacancy until further notice.

50 DECLARATIONS OF MEMBERS' INTERESTS

It was requested that the following interests be noted:-

Mr S Rudman – a close relative was involved in the adoption process.

Councillor B Adams – had been put forward as a prospective trustee of Inspire+

Councillor Mrs L A Rollings – worked closely with Cherry Willingham School's Sports Partnership.

51 MINUTES OF THE MEETING HELD ON 24 OCTOBER 2014

RESOLVED

That the minutes of the meeting held on 24 October 2014 be agreed and signed by the Chairman as a correct record.

52 PHYSICAL EDUCATION (PE), SCHOOL SPORT AND PHYSICAL ACTIVITY

The Committee received a report which provided an update on how the participation of children and young people in Physical Education (PE), school sport and physical activity was being sustained and enhanced in light of increasing childhood obesity and the Olympic/Paralympic legacy.

A number of officers were in attendance to represent partners including Keith Batty (Director of Programmes, CfBT Education Services), Andy Birch (Head of Secondary School Improvement, CfBT Education Services); Navaz Sutton (Children and Young People Manager, Lincolnshire Sport); Andy Allen (Chair of Lincolnshire School Games Organisers); Jon Clack (Headteacher of Great Ponton CE Primary School and Ambassador Head Teacher for the Youth Sport Trust and Trustee for Inspire+); and Phillip Garner (Health Improvement Manager, Public Health (LCC)), and take part in a discussion with the Members of the Committee.

Members were provided with the opportunity to ask questions to the officers present in relation to the information contained within the report and some of the points raised during discussion included the following:

- PE and sport was seen as a good opportunity in terms of improving health and wellbeing. One of the main drivers for the past 5-7 years had been the amount of funding which was available for PE and Sport;
- Around 44% of schools opened up their facilities for the use of the local community. Some of the reasons schools stated for not doing this included staffing costs and the need for additional insurance. It was noted that most of the groups that did use school facilities were pre-school age groups;
- A challenge would be how to continue to secure funding in the future, and ensure that investment continued to come into the county;
- The Youth Sport Trust was working with around 28,000 children, and approximately 1,000 were involved with Change for Life and the Legacy Challenge;
- Councillor N J Smith reported that she had attended the launch of the Change for Life and Legacy Challenge Programmes, which had been a very good event. It was noted that one of the teachers had spoken passionately about

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the difference the programmes had made to some of the children, not just physically, but also mentally;

- Concerns were raised regarding the use of the sports premium to bring external agencies into schools, as it was thought there should be more emphasis on teachers taking the lead on providing activities. Members were assured that staff within schools were being developed to deliver these programmes and activities, and schools were working closely with the Sports Partnerships to ensure that this was happening. It was noted that PE teachers should be working alongside the coaches;
- It was commented that sometimes the experience of trying a different activity – through an external coach that visited a school – could lead to a child taking an interest in that activity and seeking out an after school club;
- It was queried whether there was any way of predicting when levels of childhood obesity would start to fall below the national average;
- It was also queried whether there was any national incentive to bring back the free swimming scheme for under 16's? Members were advised that this was a programme which had finished 18 months ago, and it was not thought there was any national drive at this time to reinstate it. It was also noted that the cost to provide the free swimming in Lincolnshire had been £1.6m, funded by £800,000 from central government and £800,000 from the County Council, and it would this level of funding which would need to be found in order to reinstate this for under 16's and older people;
- There had been a big influx of coaches going into schools, mostly from private agencies. However, there were some pro-active coaching companies. It was noted that there was still work to be done;
- There were a number of funding streams that went into a raft of different initiatives. The Sports Premium went directly to the primary schools, and it was unclear what would happen to this funding after 2016. In relation to local authority funding of these activities, Lincolnshire, as well as other authorities, would be facing significant budget reductions, and priorities would need to be examined. The proposed budget for Children's Services would be presented to this Committee at its meeting in January 2015;
- In terms of childhood obesity, it was noted that the authority would only need to work with 30 year 6 children, in order to move to below the national average;
- It was difficult to recruit parents for the Fit Kids programme, but it was found that for those children whose parents got involved with the programme, it did have good results;
- There was a need for a constructive and helpful conversation around childhood obesity;
- There was a need to encourage more traditional playground games. Members were advised that some schools were training children as playground leaders to encourage other children into being more active in the playground;
- 24% of schools were not involved in the Schools Games programmes. It was noted that this could be for a number of reasons including cost and transport issues. However, the offer did go out to all schools as it was a national programme. Nationally, there were some proactive schools who had a strong drive to be involved;

- Changing rooms had always been found to be a barrier in encouraging more children to play sports, particularly children who were already overweight as they did not want to change in front of other children. It was noted that providing changing facilities in primary schools had always been a challenge, but some secondary schools were starting to address the issue and installing cubicle changing facilities, similar to those found at swimming pools;
- It was noted that whilst there had been increased participation in playground activity, it became too combative and competitive for girls, and it found that at key stage 1 and 2, participation from girls started to decrease;
- A difference in parental attitudes towards boys and girls weight was identified through the Fit Kids programme – it was believed that boys would grow out of it but that there was a need for girls to look after themselves. However, it was found that overweight boys were likely to be less active as they got older;
- It was thought that there was a need for more monitoring and tracking of children's weight through primary school, as currently they were weighed in the reception class and again in year 6;
- The work being done was positive, but it was thought there was more need for a cultural change as parents would drop children off at the school gates in the car, and pick them up again. There was a need for more work to be done with parents;
- It was important for parents to encourage their children to take part in sporting activities;
- Gender issues in the approach to sport had been identified, with girls more focused on the health and fitness aspects rather than competitive sports. This had led some schools to offer aerobics type classes in order to engage girls in physical activity;
- Members did not want work on obesity to become target driven, and they wanted the work to go beyond the 30/40 children that would be required to bring Lincolnshire's figures in line with the national average;
- It was suggested that the Fit Kids model should be extended to parents to get them more engaged;
- A vast number of teachers were being trained within the County to continue the Legacy;
- There was a stronger agenda coming through in terms of activity in schools which recognised the differences between boys and girls, and encouraging all clubs to engage more with girls. It was more complex than just 'sport for all';
- It was commented that the majority of obese children were mirrors of their parents, and unless the parents were engaged in programmes such as Fit Kids first, this could create conflicts between the children and parents;
- It had been found that there was reluctance from parents to have discussions regarding their child's weight;
- Information on the Change for Life programme would be going to all schools;
- There was a need to address physical activity education as part of the initial training for primary school teachers, so it could be built into everyday lessons. A piece of work carried out by Partners had discovered that trainee teachers generally received between 4-6 hours of PE training during their teacher training. It was thought that this needed to be integrated more into the full

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year of training. Partners were starting to work on this with Bishop Grosseteste College;

- Some schools were working towards offering their sports facilities to the local communities. However, it was often the cost of ensuring a caretaker was on the premises during out of school hours that prohibited schools from opening their facilities to the community. Opportunities were being offered in Sixth Forms for students to be employed as leisure assistants to alleviate the pressure on caretakers;
- It was noted that there were sports science and sports development courses offered at the University of Lincoln but no PE courses, and it was important to realise that these subjects were not the same;
- It was suggested that it could be helpful if the Fit Kids programme could be developed into a cross curriculum project;
- It was a decision for the governors whether schools could open on a weekend so the community could make use of their facilities;
- It was hoped that sports teachers realised that there were many different sports available and any child should be able to try out any sport;
- It was considered important that in primary schools, the teachers participated in the PE lessons with the children, rather than just directing them;
- It was requested that when this Committee considered the budget, members drilled down into the budget and scrutinised it carefully to ensure that funding for the schemes discussed continued so the work could carry on;
- It was requested that officers came back to this meeting in the future with an action plan on how childhood obesity could be tackled;

RESOLVED

That the briefing paper be noted and that the Committee support the work of the Partners.

53 SCHOOL IMPROVEMENT OFFER - TACKLING SCHOOL PERFORMANCE & CLOSING THE GAP

Consideration was given to a report which set out the Lincolnshire School Improvement Offer for 2014-15 and detailed the role of both Lincolnshire County Council and CfBT in the delivery of that offer.

Members were advised that there were a lot of changes taking place within the world of education, and negotiations were underway to determine a model of sector led improvement for Lincolnshire. It was noted that CfBT was extremely supportive of the changes and through its core contract with LCC, continued to be the key strategic partner for the delivery of school improvement in Lincolnshire.

The Committee was provided with the opportunity to ask questions to the officers present in relation to the information contained within the report, and some of the points raised during discussion included the following:

- There were 15-25 schools and 10-15 academies on average per year which were causing concern;

- It was queried how problems were able to develop in schools so they caused concern, as education advisors made regular visits and whether there was anything that the authority could do to be more pro-active? Members were assured that there were internal mechanisms in place for ensuring that the work of the education advisors was robust. Some examples of why problems arose could include members of staff covering for long term illness, or if a head teacher left and there were problems finding a replacement;
- If a school was starting to experience difficulties, CfBT would investigate and support the school before they became serious problems;
- It was commented that there had been a lot of negative publicity regarding the primary school in Middle Rasen, and it was queried whether there were any areas for improvement. The Committee was informed that this was the school media reported that Ofsted inspectors had criticised and indicated that the school could not be judged as outstanding as the children had had limited experience of children from other cultures and backgrounds. This reporting implied that the school would never be judged as outstanding. The Executive Councillor for Adult Care and Health Services, Children's Services would be writing to Ofsted to raise concerns over this issue;
- Members commented that Middle Rasen Primary School was considered locally to be an excellent school with an excellent head teacher. It was suggested that Ofsted was reacting to issues in other parts of the country. The school had a strong RE curriculum, where the children had the opportunity to understand and study other religions and cultures;
- It was noted that Supplementary schools were not part of the CfBT contract;
- From the Diocese perspective, they found the work of CfBT very good, and it was commented that they were always very quick to engage the Diocese if there was a church school in trouble. The collaboration between CfBT and the local authority was good and schools were supported;
- It was confirmed that the Closing the Gap conference would be taking place on 8 January 2015, and would be held at the Epic Centre.

RESOLVED

That the School Improvement Offer, and the respective roles of Lincolnshire County Council and CfBT within the delivery of the offer be noted.

54 LINCOLNSHIRE SAFEGUARDING BOARDS SCRUTINY SUB-GROUP - UPDATE

Consideration was given to a report which provided the Children and Young People Scrutiny Committee with an overview of the activities of the Lincolnshire Safeguarding Boards Scrutiny Sub-Group, and in particular the Sub-Group's consideration of child safeguarding matters.

The Committee received an update from Councillor C R Oxby, Chairman of the Lincolnshire Safeguarding Boards Scrutiny Sub-Group. It was reported that the Sub-Group had last met on 15 October 2014, and as part of the meeting, an update from

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the Independent Chair of the Lincolnshire Safeguarding Children Board (LSCB) on the work of the LSCB and its sub-groups had been received. It was noted that two serious case reviews were in progress and were due to finish by the end of the year.

An update on child sexual exploitation (CSE) had also been considered and discussion around how to educate children and young people of the risks of CSE had taken place. The Play Chelsea's Choice, had been highlighted as an excellent way of educating young people in secondary schools, but it was suggested that children in Years 5 and 6 in primary schools should also be educated around the risks of CSE.

The Sub-Group also considered the outcomes from two audits undertaken on the Pre-Birth Protocol and Child Protection Plans.

The next meeting of the Scrutiny Sub-Group was scheduled for 7 January 2015 where it was due to receive a further update on CSE, along with the LSCB's Neglect Strategy and the outcomes from the Section 11 audit undertaken by all the LSCB's partner agencies.

RESOLVED

That the draft minutes of the meeting of the Lincolnshire Safeguarding Boards Scrutiny Sub-Group, held on 15 October 2014 be noted.

55 PERFORMANCE - QUARTER 2 2014/15

Consideration was given to a report which provided key performance information for Quarter 2 2014/15 that was relevant to the work of the Children and Young People Scrutiny Committee.

Members were guided through the performance information, and provided with the opportunity to ask questions to the officers present in relation to the information contained within the report and during discussion, some of the points raised included the following:

- There had been some issues in terms of recruitment and retention of foster carers, as there had been an increase in the number of children looked after. It was noted that this was not just a local issue. This had put pressure on the authority in terms of the number of foster carers who were available, and residential placements would only be used as a last resort. There was a lot of work ongoing in relation to the recruitment of more foster carers;
- In terms of the number of moves of Looked After Children, it was noted that some of the moves would have included successful moves back to the child's parents, or other family members, or successful adoptions. But as they were moves they would still be recorded;
- It was commented that the performance of 16-18 year old Looked After Children who were participating in learning was disappointing, but this was subject to focused monitoring and intervention.

RESOLVED

That the performance information presented be noted.

56 SCHOOL IMPROVEMENT - PROPOSAL FOR A WORKING GROUP

The Committee received a report which set out a proposal to establish a working group to contribute to the work being undertaken by officers on the future school improvement offer.

Members were advised that it had been previously proposed to carry out a scrutiny review by a Task and Finish Group into school improvement. However, as work was ongoing on a new school led approach and the future Local Authority offer, there was a risk that a scrutiny review would duplicate the work being undertaken by officers. Additionally, there were concerns that this was too early in the process to be conducting a time limited scrutiny review as the review would be completed in mid-2015 and the current contract was not due to end until January 2017.

It was instead proposed that member involvement through a working group would be preferable to a task and finish group. This would provide members with the opportunity to work with officers to understand and feedback on the current practice for school improvement and what future practice would be. A working group was not time limited and work would be able to start immediately which would enable members to become involved in the process whilst the new school led approach was being developed, and to work with officers on the new Local Authority school improvement officer as it developed. The terms of reference for the School Improvement Working Group would be:

1. To examine with officers what support the current School Improvement Service offered to schools and academies and how effective it was;
2. To examine with officers the role of teaching schools in Lincolnshire in improving educational standards;
3. To make recommendations on improvements to the existing School Improvement offer for schools and academies within the constraints of the funding that the County Council was able to invest.

It was suggested that three members would be an appropriate number to form a working group, and the following agreed to be part of the working group:

- Mrs E Olivier-Townrow (Added Member)
- Councillor S R Dodds
- Councillor Mrs J Brockway

RESOLVED

1. That the establishment of a working group to contribute to the work being undertaken by officers on the future school improvement offer;
2. That the membership for the working group be agreed as above.

57 SCHOOL FUNDING ARRANGEMENTS 2015/16

Consideration was given to a report which provided the Committee with information relating to changes the Local Authority (LA) would be making to the school funding formula from April 2015. The proposals were supported by the Schools Forum on 8 October 2014 and were then formally approved by the Executive Councillor on 22 October 2014.

Officers explained the reforms to school funding arrangements which took place in 2013/14, and explained the proposals which had been developed following extensive work from officers in the summer of 2014 to develop an alternative approach which would ensure compliance with the DfE's regulation whilst not materially altering the funding provided for pupils with high levels of Special Educational Needs (SEN).

The Committee was provided with the opportunity to ask questions to the officers present in relation to the information contained within the report, and some of the points raised during discussion included the following:

- Transitional protection would be put in place to ensure there was no loss of funding to individual schools in 2015/16;
- The Committee congratulated the team for the work which had been done to ensure that any reductions to individual school budgets were kept to a minimum in the medium and long term;
- It was noted that these changes would not affect pupils with Band 1 – 5 statements.

RESOLVED

That the report be noted.

58 IMPROVING EMPLOYMENT AND SKILLS IN LINCOLNSHIRE'S
GROWING BUSINESS SECTORS

Consideration was given to a report which explained the range of skills funding available and also showed a real need to fill vacancies as the county's economy grew. There was a new opportunity for important local partnerships to have greater control of skills provision. The Greater Lincolnshire Local Enterprise Partnership (GLLEP) would be choosing what additional training provision to buy through new EU funds, with advice from important local partnerships and LCC, as a member of the LEP and as the secretariat to the LEP, should take advantage of this opportunity.

The Committee was advised that this was an exciting opportunity, as the Government had set up LEP's with the private sector, and were being asked to make decisions, and so locally there would be a lot more influence in how this funding was used. Officers had been working with some of the larger businesses in the county such as Butlins, Petwood Hotel etc. to try and identify what their training needs would be in the future. It was thought that there would be an increasing requirement for a much higher level of skills.

It was important to note that improving skills was not just about apprenticeships, but also graduates, and ensuring there were opportunities for young people leaving university. Members were informed that it could be difficult to recruit the right people in sectors such as agri-food, manufacturing and the visitor economy. The LEP would be deciding and directing how skills funding would be spent in the future.

Members were provided with the opportunity to ask questions to the officers present in relation to the information contained within the report and some of the points raised during discussion included the following:

- It had been calculated that approximately 200,000 people would be required between 2014 and 2022 to fill vacancies to grow Lincolnshire's economy;
- It was estimated that there would be a need for 182,000 jobs in the construction industry in the next four years, but there was a significant shortfall in the number of people training for these jobs;
- 99% of businesses in the UK were classed as small businesses;
- There was a need for more work to be carried out in relation to apprenticeships, and driving this forward needed to be discussed with Lincolnshire businesses such as Lindum construction;
- If the skills challenge was not addressed in the right way there could be problems in the long term. It was important that the County Council had a view in terms of how the skills agenda could be influenced;
- It was queried whether there was any room within what the LEP wanted to do with skills to work with people who were 'unemployable' – those people who frequently managed to get interviews, but had still not been able to find employment. Could 'employability' skills training be provided?
- There was a need to find a way to work with higher education and further education providers to encourage young people to stay in the county, and also to attract young people from other areas;
- It was important to determine what skills would be needed in the county for the next few years and then work with higher education establishments to ensure they know what would be needed from them;
- Careers advice in schools was very important, but it was currently fragmented;
- It was commented that there was a pressure on schools to stop delivering vocational subjects, with more emphasis being placed on GCSE's. However, some pupils preferred the vocational subjects, and were better suited to that style of learning;
- There was a need for a school of medicine in Lincoln, and after Christmas 2014, work would start to try and deliver this. However, it was acknowledged that this was something which could take several years to achieve;
- It was reported that Lincolnshire had recently been awarded £8.5million from the EU Leader programme, which was for rural businesses and community projects;
- It was suggested that there was a need to get young people to think about their future and the types of jobs they would like to do from a younger age, possibly in the last year of primary school;
- It was noted that the figures and projections had been produced by the Warwick Institute. Officers could work with businesses to find out what they

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needed over the next six months, but anything longer than that was difficult for businesses to identify;

- It was reported that 60% of Lincolnshire businesses were planning on expanding, and 30% would be taking on more employees, so there would be opportunities in the coming year;
- Businesses considered employability skills to be more desirable in a young person than industry skills. They wanted people who were willing to learn;
- Skills were high on the political agenda;
- There was a need to publicise Lincolnshire more, as people were not always aware of the developments taking place within the county;
- It would be useful if employers could be encouraged to invest in apprenticeship schemes;
- It was noted that within the Greater Lincolnshire area there were approximately 44,000 small businesses.

It was requested that a further report come back to a future meeting of the Committee which included an action plan for improving the skills offer of Lincolnshire.

RESOLVED

1. That the report presented be noted;
2. That an action plan be brought back to a future meeting of the Committee.

59 CHILDREN AND YOUNG PEOPLE SCRUTINY COMMITTEE WORK
 PROGRAMME 2015

Consideration was given to a report which provided the Committee with an opportunity to consider its work programme for the coming year.

The Scrutiny Officer advised that there were no changes to the work programme.

RESOLVED

1. That the content of the work programme be agreed;
2. That the content of the Children's Services Forward Plan be noted.

The meeting closed at 1.45 pm

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Open Report on behalf of Debbie Barnes, Executive Director of Children's Services

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| Report to: | Children and Young People Scrutiny Committee |
| Date: | 16 January 2015 |
| Subject: | Children's Services Budget 2014/15 and 2015/16 |

Summary:

This report invites the Children and Young People Scrutiny Committee to consider a report on Children's Services budgets for 2014/15 and 2015/16. The views of the Scrutiny Committee will be reported to the Executive prior to finalisation of the 2015/16 budget proposals for the full Council's consideration in February 2015.

Actions Required:

The Children and Young People Scrutiny Committee is invited:

- (1) To consider the report.
- (2) To agree any comments to be passed to the Executive in relation to this item.

1. Background

The Council's Executive will finalise budget proposals for 2015/16, prior to their consideration by the full Council in February 2015. To assist with that process, this report sets out the position for Children's Services non-schools budgets. To provide context, the report briefly outlines:

- Children's Services vision and principles;
- Children's Services commissioning strategies and activities delivered through these strategies, performance and current spending levels;
- Savings achieved since the 2010 Comprehensive Spending Review;
- The forecast financial position for the current year (2014/15);
- The significant unfunded budget pressures for 2015/16;
- The Fundamental Budget Review (FBR) proposals for delivering revenue savings in 2015/16;
- Brief proposals for the capital programme.

2. Children's Services Vision and Principles

Vision

Our Vision is for:

“Every Child, in every part of the County to achieve their potential”

Principles

Our principles, which underpin how we will commission and deliver services to achieve our vision are:

- **Early Help:** Strong protective universal services accessible to all with a range of early help available so children have the best start in life and families have extra help when they need it;
- **Safeguarding:** A shared responsibility to ensure children are safe at home, school and in their community;
- **Aspiration:** Children are able to thrive and cope with life challenges;
- **Learning and Achievement:** All children being the best they can be with targeted interventions to close the gap so vulnerable children achieve as well as their peers;
- **Best Use of Resources:** Integrated commissioning with a focus on best value, improved outcomes and community engagement.

3. Children Services commissioning strategies and activities delivered through these strategies, performance and current spending levels

The following commissioning strategies are within the Children's Services arena:

- Readiness for School;
- Learn & Achieve;
- Readiness for Adult Life;
- Children are Safe & Healthy.

The overall funding for these four commissioning strategies is £102.281m, of which £39.508m (39%) is determined as a high priority service with the remaining services being a medium priority.

Readiness for School

The vast majority of our youngest children have access to a wide range of good or outstanding pre-school learning opportunities, which provides high quality early education to help children to develop the skills needed to interact confidently with their peers and adults. Children's Centres are an essential element of our early help offer which support parents in the challenging but rewarding job of bringing up their children. They provide access to health services as well as parenting advice

and guidance and support parents in their own aspirations back into education or employment. All this supports children's readiness for school. Services include:

- Healthy child programme (due to transfer to the Council as commissioner October 2015);
- Children's Centre activities;
- Early education (disadvantaged 2, universal 3 & 4 year olds accessing 15 hrs of education);
- Therapy Services.

Learn & Achieve

As children progress through their primary years and into secondary, they develop further as independent learners. Through education, they explore their own creativity and express their own ideas and thinking, drawing on their individual talents. Well supported and skilfully challenged, students will excel in their chosen subjects and core curriculum. It is important that at every stage of learning and development, parents are provided with meaningful information and guidance to help them support their child's learning, development and achievement of full potential.

However, we know that children who live in poverty, children who are looked after and other vulnerable groups do not do as well in education as their peers and the data indicates that they under perform. As education is an important pathway out of poverty, it is right that we focus our efforts on ensuring all children have access to the same life chances.

Services include:

- School Support Services
- Statementing process and interventions (to be replaced with new health, education and social care plan);
- Out of school team who support children who are excluded;
- Home to school / college transport;
- School admissions.

There is a need to reflect on successes and consider new ways of achieving these services to meet the changing education landscape.

Readiness for Adult Life

There is a need for an increasingly stronger link between education providers, local business and industry. Information about the current and anticipated local and regional economies needs to be used to fire young people's imaginations and support them in planning for their futures so they can be prepared and ready for adult life and independence where possible. There is a need to ensure that all young people especially the most vulnerable are supported to make positive and healthy life decisions.

Services include:

- 14-19 education / training and apprenticeship;
- Career guidance;

- Teenage pregnancy;
- Supported accommodation / lodgings;
- Leaving Care;
- Learning disability and physical disability transition;
- School Nursing;
- Positive activities for young people.

Children are Safe & Healthy

All children deserve the chance to grow up in a loving, secure family and our services aim to support parents and carers to improve children's lives. Safeguarding is everyone's business: universal services such as schools, health and childcare providing information and advice, so they enjoy good physical and mental health; live a healthy lifestyle working in partnership with targeted and specialist services to support parents, children and young people requiring additional support. Some children will always require extra help because of the disadvantages they face. The key is to ensure children receive services at the first onset of problems.

Services include:

- School Nursing;
- Child protection (contract, referral and assessment);
- Looked after Children;
- Fostering and adoption;
- Residential homes;
- Child and Adolescent Mental Health Service (through a Section 75);
- Children with disabilities;
- Family support.

Performance

Children's Services has continued to deliver high quality services whilst achieving the significant savings required by the 2010 Comprehensive Spending Review.

School performance at key stage 4 continues to compare well within the region, with 54% of pupils achieving 5+ A*-C including English and Maths compared to the East Midlands figure of 53% and a Statistical Neighbours average of 54%. The percentage of Lincolnshire pupils achieving the English Baccalaureate is particularly impressive with 26.4% achieving this measure compared to the national figure of 22.5% and a Statistical Neighbours average of 21.4%. The attainment gap between our most disadvantaged pupils and their peers continues to narrow although not at the rate we would like to see. Please note these are provisional 2014 results.

Front line social care performance exceeds national and statistical neighbours on the majority of indicators (e.g. timeliness of social care assessments was 92%, compared to a national average of 74%). The numbers of looked after children remain low at 43 per 10,000 compared with the England average of 60.

Adoption performance exceeds the new timeframes – the average time (days) between a child entering care and moving in with its adoptive family is 511 compared with the England average of 628, which is remarkable and leading the way nationally.

However, the new Ofsted framework, changing legislation and demand management place considerable pressure on the service.

Current spending levels

The DfE's s.251 benchmarking information for 2014/15 highlights the fact that Lincolnshire's overall spending on Children's Services is comparatively low, with a significantly greater amount of available funding being spent on home to school and college transport. The key statistics show that of the 150 local authorities, the county has the:

- 22nd lowest level of funding from Dedicated Schools Grant. This finances schools' delegated budgets and some central local authority services. Lincolnshire's funding of £4,554 per pupil compares to the England mean of £4,989.
- 2nd lowest planned spending on Looked After Children. This includes Fostering, Adoption, Residential care, and Leaving Care support, etc. Lincolnshire's planned spending of £146 per pupil compares to the England mean of £277 per pupil.
- 62nd lowest planned spending on Safeguarding children. This includes social work. Lincolnshire's planned spending of £159 per pupil compares to the England mean of £161 per pupil.
- 5th highest planned spending on home to school and college transport. Lincolnshire's planned spending of £244 per pupil compares to the England mean of £120 per pupil.

Value for Money data

The 2013/14 CIPFA looked after children benchmarking exercise highlights Lincolnshire's low cost of children in residential and foster care amongst 77 other local authorities. Lincolnshire's low cost of looked after children (3rd lowest) has been as a result of the local authority's foster carers and the high composition of individuals placed within it – 88% placed in local authority foster carers compared to 59% of benchmarked local authorities.

The exercise also identified Lincolnshire's approach to spending more on preventive services, highlighting the early help approach to effectively support and safeguard children as soon as problems emerge.

4. Savings achieved since 2010/11

Since the Comprehensive Spending Review of 2010, Children's Services has worked hard to deliver a significant level of savings, in full and on time. Children's Services has delivered savings of £27.631m in the period 2010/11 to 2013/14, and DMT remains confident that this year's savings of £2.626m will be delivered in full.

5. Forecast financial position for 2014/15

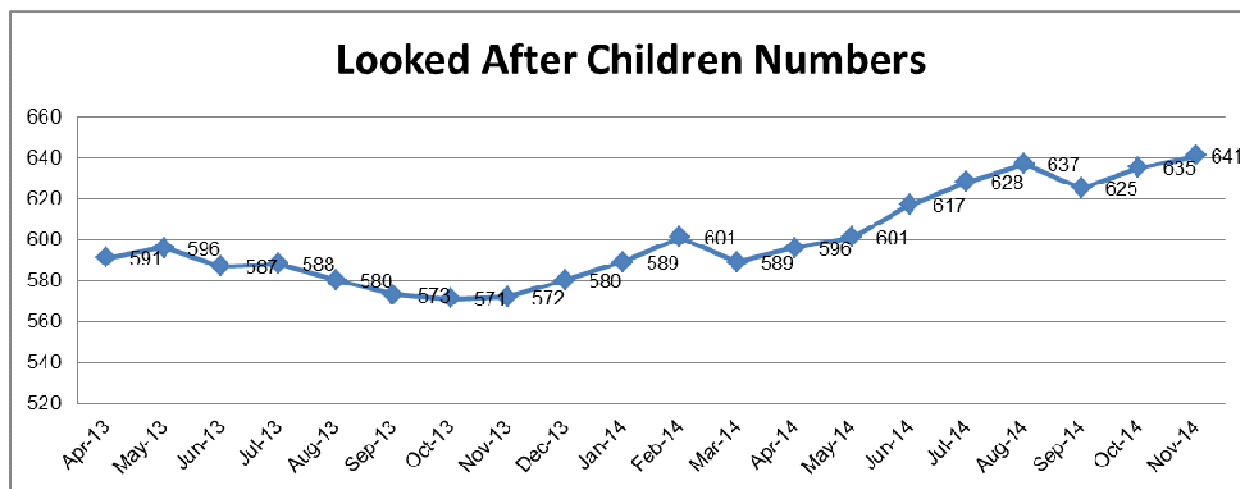
Recent budget monitoring reports to the Executive have indicated that Children's Services is projecting to underspend by circa £0.7m at 31 March 2015. However, there remains a degree of uncertainty regarding the outturn position for home to school / college transport and for children's social care. Numerous, unpredictable factors can influence expenditure on school transport, and these volatile budgets are being closely managed. There have been significant and growing pressures on children's social care budgets caused by an increase in the number of Children Looked After.

Despite the current uncertainty, Children's Services nevertheless remains confident that an underspending will arise at the end of this financial year.

6. Significant budget pressures for 2015/16

Children's Social Care

Children's Services is facing financial challenges within the Children are Safe & Healthy commissioning strategy due to the sharp rise in looked after children, which the Local Authority has a statutory obligation in safeguarding young individuals. Such external demands of its services cannot be controlled. The Local Authority has statutory duties to safeguard children and these services are subject to significant regulation and inspection.



From November 2013 to November 2014 numbers have risen from 571 looked after children to 641, which have therefore had an implication operationally and financially on those regulated services. The overall regulated services pressure is £1.515m, and these include: an increase in Out of County Residential placements (£0.869m); Fostering service payments (£0.107m); Regulation 24 payments (£0.268m) and special guardianship orders (£0.271m). The pressures identified are based on the current (or actual) position of looked after children, therefore if the trend continues to rise using the prior 12 months data, the budget pressures will be

much greater putting Children's Services in a much more challenging financial position to one that is currently portrayed.

Lincolnshire has 88% of looked after children within internal foster carers, which is the most cost effective approach and the reason why Lincolnshire's cost per child is much lower than comparable Local Authorities. The intention is to uplift foster carer rates by 2% for inflation to maintain the high composition of internal foster carers in Lincolnshire, and very much avoids having to pay high cost placements (£0.018m).

| | 2011/12 | 2012/13 | 2013/14 | 2014/15 |
|---------------------------------------|---------|---------|---------|---------|
| Out of County Residential Placements | 12 | 12 | 13 | 24 |
| Out of County Fostering Placements | 4 | 12 | 18 | 24 |
| Foster Placements | 360 | 387 | 376 | 380 |
| Regulation 24 Placements | 38 | 28 | 71 | 93 |
| Special Guardianship Order Placements | 62 | 92 | 139 | 175 |

Children's Services will always strive to achieve best value whilst ensuring the individual's needs are met, but with in-house capacity full and having to manage complex children, it often leads to making placements out of county. Children's Services management team are considering / developing options of how even greater value for money can be achieved.

Home to School Transport

Home to School Transport costs has seen a gradual increase in the cost per day by £0.002m. This trend is expected to continue in 2015/16 with the full year pressure being £0.380m. Such a pressure is a result of market factors affecting transport delivery and the procurement methodology, with the latter being subject to a fundamental review.

7. The Fundamental Budget Review proposals for delivering revenue savings in 2015/16

The Council expects to have to save £90m on non-school budgets over the next four years; a Fundamental Budget Review (FBR) process has been underway throughout 2014 to develop proposals for dealing with that, and Children's Services is required to contribute to those savings.

Through the FBR process, Children's Services has identified savings to be delivered in 2015/16, which are summarised below. Children's Services are undertaking an impact assessment on those proposals in light of proposals to decommission service activities. Based on this decision, the full year of those savings requiring consultation will fall into 2016/17.

| Saving Proposed | 2015/16 | 2016/17 |
|--|---------|---------|
| Reducing a limited number of commissioned activities in children's centres but retain those services most directly affecting the outcomes which are prioritised. | £0.935m | £0.662m |

| | | |
|---|----------------|----------------|
| Reducing commissioned contracts in SEND <i>Altering the delivery model of short break contracts that deliver a range of activities for children with disabilities. A reserve has been established to remodel the service delivery model and to develop the market.</i> | £0.393m | £0.428m |
| School Improvement Service – changing to a new delivery model <i>The changing relationship of schools having converted to academy status has resulted in a reduction of LA responsibilities. These savings will be borne through contract negotiations. In addition, there is a plan to remodel the provision to move towards a sector led approach.</i> | £0.5m | |
| Music Service – changing to a new delivery model <i>The LCC contribution is being removed in a staged process, therefore in time the service will be a fully traded model. Central government grants will remain with the service. The music service is exploring the benefits to a staff mutual approach to service delivery to maximise income</i> | £0.204m | |
| Supported accommodation for young people <i>Partial decommissioning of supported accommodation by reducing housing related support from support for YP aged 17-25 to only those 16/17 year olds plus care leavers (statutory duty). Public Health will continue to commission services for vulnerable young people aged 18-25.</i> | £0.530m | |
| Positive activities for young people <i>Further reduction of activities as communities deliver positive activities to young people.</i> | £0.174m | |
| Initiatives in schools <i>Consult and remodel services which support schools to address health outcomes using universal services to promote positive health messages</i> | £0.408m | |
| Other savings include: <i>SMT restructure and staff related costs insurance charge reduction/ capital volume variation, and other back office functions</i> | £1.113m | |
| | £4.257m | £1.090m |

Children's Services is proposing to deliver savings of £5.347m overall, which will be profiled across 2015/16 (£4.257m) and 2016/17 (£1.090m)

8. Capital

Schools

Children's Services manage and maintain a comprehensive annual capital programme of individual projects which is overseen by the Children's Services Capital Programme Board. All projects that comprise the programme are separated into related and prioritised work streams and are managed to the standards laid down by the LCC Programme Centre:

- Projects to meet Statutory Provision of School Places (Basic Need);
- School Condition Repair & Maintenance (including essential health & safety requirements);
- School Suitability and Modernisation (including SEN);
- Early Education;
- Other children's services capital.

Pressure on school places is a challenge being faced by local authorities across the country. Medium and long-term forward planning to ensure sufficient school places are provided in sustainable school buildings is vital to meet the local authority's statutory duty for school place planning.

The vast majority of pressure on school places is currently in the primary sector. The school place planning process clearly identifies geographical areas which are the "hot spots". These tend to be in urban areas where demand for places is expected to be significantly above the number of places available in reception and other KS1 classes if additional places are not provided.

Children's Services have DfE allocated funding up to 2017 (£11.434m: 2015/16 and £12.006m: 2016/17) for basic need. Thereafter there is no clear indication regarding how the DfE plan to invest in sufficiency of places. Indications suggest a continuation of Basic Need allocations along with some targeted funding that can be bid for directly by the Local Authority, or in association with academies. Analysis of potential site options at schools has been carried out to estimate the capital costs of addressing the shortfall of primary school places across the county through the combined use of temporary and permanent build.

The service has requested that all capital funding made available by the DfE for schools is passed on to Children's Services to enable it to manage this critical issue.

Non-schools

Capital has previously been used to provide extensions to the properties of foster carers and adoptive parents in specific circumstances. Priority has been given to ensuring the suitability of accommodation for children with disabilities and to enable properties to be developed to provide increased living space for siblings to be placed together for permanence or adoption. Grants have also been used to provide suitable transport to enable siblings and groups of children to be safely transported. In 2014/15, £0.2m of capital funding was provided for foster care provision. The capital budget has ensured that a number of foster care solutions

have been provided within Lincolnshire's internal foster care provision for sibling groups and complex children who might otherwise have been placed in more expensive external provision. All grants are subject to a legal agreement.

Considering the growing demands on internal foster care provision resulting from the increase in looked after children numbers, a request of £0.5m is being made for capital funding to ensure the cost per child is maintained at acceptable levels.

9. Conclusion

With regard to revenue funding, Children's Services has had considerable success in delivering the very significant savings required through the four year Comprehensive Spending Review. Although there continues to be growing pressures around children's social care, Children's Services remains on course to deliver £30.267m of savings in full and on time, whilst delivering high standard services over that period. In addition, the service has worked extremely hard to manage internally a number of other budget pressures, through reducing costs and re-aligning budgets.

A request however has been made for the Council to fund the cost pressure in 2015/16 resulting from the increase in looked after children and complexity of children (£1.515m). Children's Services will always strive to achieve best value whilst ensuring the individual's needs are met.

To support the high composition of internal foster carers in Lincolnshire, a request is being made to provide a 2% carer inflationary uplift (£0.018m).

Home to School Transport costs has seen a gradual increase in the cost per day as a result of market factors affecting transport delivery. A request is being made for this pressure to be supported (£0.380m).

With regard to capital funding, there continues to be significant pressure to provide the required statutory provision for basic need. Children's Services has asked that the Council pass through the DfE grants that are expected to be made available, and fund separately £0.5m in relation to foster carers and adoptive parents.

10. Consultation

a) Policy Proofing Actions Required

Not applicable

11. Background Papers

No background papers within Section 100D of the Local Government Act 1972 were used in the preparation of this report.

This report was written by Mark Popplewell, Assistant Head of Finance, Children's and Specialist Services. mark.popplewell@lincolnshire.gov.uk

Open Report on behalf of Debbie Barnes, Executive Director for Children's Services

| | |
|------------|---|
| Report to: | Children and Young People Scrutiny Committee |
| Date: | 16 January 2015 |
| Subject: | Ofsted Inspection of children in need of help and protection, children looked after and care leavers |

Summary:

Her Majesty's Inspectors (HMI (Ofsted)) are required to carry out inspections under section 136 of the Education and Inspections Act 2006 (EIA). Her Majesty's Chief Inspector (HMCI) has the power to carry out inspections of certain local authority children's services functions as listed in section 135 of the EIA if he deems it appropriate. The inspection this report refers to is an inspection of the local authority functions with regard to the help, care and protection of children and young people.

All local authorities are required to be inspected under this framework within a three-year period.

Lincolnshire Children's Services was subject to an inspection of their services for children in need of help and protection, children looked after and care leavers during October / November 2014 and the outcomes are attached in the attached paper. A review of the Lincolnshire Safeguarding Children Board (LSCB) was conducted at the same time and this report is also attached.

Actions Required:

The Children and Young People Scrutiny Committee is invited to consider the attached report and make comment.

1. Background

During October and November 2014 Lincolnshire Children's Services was subject to a 4 week inspection of their services for children in need of help and protection, children looked after and care leavers. A review of the Lincolnshire Safeguarding Children Board (LSCB) was conducted at the same time.

The scope of the inspection of the Local Authority included:

- Those children and young people at risk of harm (but who have not yet reached the 'significant harm' threshold) and for whom a preventative service would provide the help that they and their family need to reduce the likelihood of that risk of harm escalating and reduce the need for statutory intervention
- Those children and young people referred to the local authority, including those for whom urgent action has to be taken to protect them; those subject to further assessment and those subject to child protection enquiries
- Those who become the subject of a multi-agency child protection plan setting out the help that will be provided for them and their families to keep them safe and to promote their welfare
- Those children and young people who have been assessed as no longer needing a child protection plan, but who may have continuing needs for help and support
- Those children and young people who are receiving (or whose families are receiving) social work services where there are significant levels of concern about children's safety and welfare, but these have not reached the significant harm threshold or the threshold to become looked after
- Those children and young people who are missing from education or being offered alternative provision
- Those children and young people looked after either by being accommodated under section 20 or those 'in care' during or as a result of proceedings under section 31 of the Children Act 1989 and those accommodated through the police powers of protection and emergency protection orders
- Those children aged 16 or 17 who are preparing to leave care and qualify as 'eligible'; those aged 16 or 17 who have left care and qualify as 'relevant'; those young people aged 18 and above and qualify as 'former relevant'; and those young people aged 18 to 25 who qualify as 'former relevant children pursuing further education or training' including those children living in homes of multiple occupation
- Those children and young people who have left care to return home, or are living with families under a special guardianship order, residence order or adoption order.

During the 4 week inspection, the inspection activities included:

- Sampling of children's cases in order to judge the quality of front-line practice and management and the difference this makes to the lives of children, young people, their families and carers – this included discussions with social work staff, including their managers and other professionals working with the child or young person
- Testing the decision-making at all stages of a child's journey: early help; referral and assessment; children in need; child protection planning; continuing support; the decision to remove a child from home; permanence

planning; placement decisions, including work to support return home; leaving care

- Meeting with children, young people, parents and carers
- Shadowing staff in their day-to-day work, for example observing practice in the duty team, the work of social workers with children and families and the work of independent reviewing officers
- Observing practice in multi-agency meetings such as child protection strategy meetings, child protection conferences, looked after children reviews and resource panels.

Reviewing evidence collected during the inspection, the inspectors make judgements on the **overall effectiveness** of services and arrangements for children looked after, care leavers and children who need help and protection.

The overall effectiveness judgement is a cumulative judgement derived from:

- The experiences and progress of children who need help and protection
- The experiences and progress of children looked after and achieving permanence including graded judgements on:
 - Adoption performance
 - The experiences and progress of care leavers
 - Leadership management and governance

Inspectors make their judgements on a four-point scale:

- Outstanding
- Good
- Requires Improvement
- Inadequate

2. Conclusion

The attached report outlines the Ofsted judgement on the inspection of children in need of help and protection, children looked after and care leavers as well as Ofsted's review of the Lincolnshire Safeguarding Children Board.

3. Consultation

a) Policy Proofing Actions Required

n/a

4. Appendices

| | |
|---|--|
| These are listed below and attached at the back of the report | |
| Appendix A | Ofsted Inspection Report of Children's Services and LSCB |

5. Background Papers

No background papers within Section 100D of the Local Government Act 1972 were used in the preparation of this report.

This report was written by Debbie Barnes who can be contacted on 01522 553210 or at Debbie.barnes@lincolnshire.gov.uk.

Lincolnshire County Council

Inspection of services for children in need of help and protection, children looked after and care leavers

and

Review of the effectiveness of the local safeguarding children board¹

Inspection date: 22 October 2014 – 12 November 2014

Report published: 6 January 2015

The overall judgement is that children’s services are good

The local authority leads effective services that meet the requirements for good. It is Ofsted’s expectation that, as a minimum, all children and young people receive good help, care and protection.²

The judgements on areas of the service that contribute to overall effectiveness are:

| | |
|--|-------------|
| 1. Children who need help and protection | Good |
| 2. Children looked after and achieving permanence | Good |
| 2.1 Adoption performance | Outstanding |
| 2.2 Experiences and progress of care leavers | Good |
| 3. Leadership, management and governance | Good |

¹ Ofsted produces this report under its power to combine reports in accordance with section 152 of the Education and Inspections Act 2006. This report includes the report of the inspection of local authority functions carried out under section 136 of the Education and Inspection Act 2006 and the report of the review of the Local Safeguarding Children Board carried out under the Local Safeguarding Children Boards (Review) Regulations 2013.

² A full description of what the inspection judgements mean can be found at the end of this report.

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The local authority

Summary of findings

Children's services in Lincolnshire are good because:

Leadership and management

- Governance in Lincolnshire is effective and partnership arrangements are robust. The local authority has developed a sound infrastructure across the county that supports vulnerable children well.
- The local authority has a good understanding of its strengths and weaknesses. It is a learning organisation and is strong in many areas of performance management. A greater focus on quality assurance process to assess the impact of practice on outcomes for children, would strengthen this further.
- A strong approach to corporate parenting is evidenced by the far-reaching developments promoted for children looked after and care leavers. This could be further strengthened by an increased focus on the educational attainments of children looked after and outcomes for care leavers.
- An effective early help strategy, supported by considerable investment and joint commissioning arrangements, means that families are being offered the right help at the right time. The quality and organisation of early help services ensures that families are receiving highly effective support.
- The views of Lincolnshire children and young people feature strongly in the planning of service improvement.
- A comprehensive workforce strategy ensures that practitioners have access to good quality training and supervision. A recent investment in additional social work posts is helping to assure manageable caseloads.
- A child sexual exploitation (CSE) strategy and action plan has only recently been developed. It is based on a thorough analysis of the prevalence and nature of CSE in Lincolnshire. This has led to increased awareness-raising activity and the establishment of a multi-agency team who share intelligence about perpetrators, provide advice to other practitioners and work with young people most at risk. It is too soon to evaluate the impact of this strategy.

Adoption

- High priority is given to children achieving timely permanence through adoption, with 68 Lincolnshire children being adopted during the past 12 months. Children are well prepared for their new families and offered effective adoption support.

Social work practice

- The voice and involvement of children in Lincolnshire has been enhanced by the introduction of the Signs of Safety model and communication tools. There is good engagement in case work, child protection conferences and statutory reviews.
- Thresholds are understood and appropriately applied at each stage of the child's journey. Most children receive timely, good quality assessments, and when they are the subject of court proceedings these usually conclude within 26 weeks. A small minority of children looked after do not have their assessment updated when their circumstances change and so do not have plans that accurately reflects their needs.
- Children only become looked after when it is their best interests, and the majority of children looked after are able to live with foster carers and within the local authority boundary. Some services for children looked after are particularly strong with innovative features, for example, Cafcass Plus and the Extended Contact pilot.

Care leavers

- The Lincolnshire Leaving Care Service is highly effective in keeping in touch with all care leavers. Personal Advisers maintain frequent contact with care leavers who are unstable and exhibiting chaotic and risky behaviours. Pathway plans for some care leavers do not ensure that all of their wide ranging needs are addressed.
- There is a wide range of services, including mental and physical health, employment and education workers and a parenting support worker, who work in the service to improve the health and engagement of care leavers. Many interventions reduce risks, gradually building engagements in services and improving outcomes.

What does the local authority need to improve?

Priority and immediate action

1. Cease the use of bed and breakfast accommodation for homeless 16 and 17 year-olds and young people leaving care, and ensure that there is suitable accommodation for all care leavers.

Areas for improvement

Leadership and management

2. Undertake a review of quality assurance activity with regard to work with individual children, and increase the emphasis of auditing activity on the impact of practice on outcomes.
3. Improve the rate of progress and education outcomes for children looked after by strengthening the quality of their personal education plans and maximise the impact of pupil premium funding on raising achievement for both children looked after and adopted.
4. Maximise learning from complaints made by children looked after by ensuring that they are analysed to identify trends and inform service improvements.
5. Ensure that recent improvements in the work on child sexual exploitation relating to both prevention and protection are subject to review and evaluation, so that impact can be understood.
6. Ensure that all relevant staff working with children are able to identify the early signs of sexual exploitation, and that they are confident in their use of relevant risk assessment tools.

Social work practice

7. Review and strengthen the process and recording of child protection section 47 enquiries to ensure that: expectations for multi-agency checks are defined; their findings are clearly recorded by social workers; summaries and recommendations are explicitly linked to this information and to the assessment undertaken; and management decision-making points are clearly defined.
8. Ensure that where an assessment concerns the impact of domestic abuse it is informed by the Domestic Abuse, Stalking and Harassment (DASH) risk assessment undertaken by the police.
9. Ensure that robust assessment, planning and information sharing are in place for all children looked after which is relevant to their current needs and changing circumstances. This should include children who are returning home, those where placement planning and identification are current issues, and those moving to a new placement or leaving care.
10. Introduce a chronology tool that is fit for purpose, consistently used and reliably tells a child's story, so that social workers and managers are accurately informed in their assessments and decision-making.
11. Ensure that 16 and 17 year-olds who are homeless or potentially homeless understand their entitlements and that, for those who do not remain with their friends or families, their legal status is considered and clearly recorded in assessments.

12. Ensure that social work reports are made available to families sufficiently in advance of child protection conferences and that all key reports are available prior to children's looked after review meetings.

Care Leavers

13. Improve the quality of Pathway Plans so that they feature carefully considered objectives with specific actions and timescales to measure progress and ensure that their review benefits from meetings which are appropriately chaired.
14. Ensure that where looked after young people aged 16 and 17 years of age leave care before they reach 18 years of age, the leaving care decision is informed by the young person's readiness and preparation.
15. Take action to reduce offending rates of care leavers, and those who receive a custodial sentence.

The local authority's strengths

16. Safeguarding is a key priority and is underpinned by effective governance and strong partnerships.
17. Early help services for children and families are well targeted and coordinated. Children's centres and schools play an active role in delivering services for children.
18. The local authority's Troubled Families programme, Families Working Together, has effectively engaged and 'turned around' families involved with the service.
19. When child protection concerns are identified, children are quickly safeguarded. Strategy meetings lead to swift action. Initial child protection conferences are held promptly and child protection conferences are mostly well attended by agencies. Advocacy for children is used well throughout the child protection process.
20. The recently introduced 'Signs of Safety' social work practice model is leading to improved engagement with children and parents.
21. Lessons learned from serious case reviews and recommendations for the local authority are informing training programmes and are helping to shape social work practice.
22. The effective use of the Public Law Outline and the Cafcass Plus pilot has helped to improve the timeliness of care proceedings.
23. Children looked after are well supported by a sound infrastructure that includes some innovative services, for example Cafcass Plus and the Extended Contact pilot.

24. Children looked after are seen regularly by their social workers and report that they feel listened to and have good relationships with them. Care plans are regularly reviewed and permanency for children is considered early in the planning process.
25. The local authority is successful in ensuring timely adoption for children when this is in their best interests, and children in Lincolnshire are adopted quicker than the national average.
26. The local authority's commissioned care leavers' service is good at keeping in touch with young people who have left care and ensuring that they receive good quality support services.
27. The local authority has an effective workforce development strategy. A comprehensive package of training and support is offered for new social workers. Multi-agency training is offered to social work staff and those in other agencies who deliver the early help offer.

Progress since the last inspection

28. The last Ofsted inspection of Lincolnshire's safeguarding arrangements was in June 2010 when the local authority was judged to be outstanding for overall effectiveness. That inspection was undertaken under a different framework and focused on safeguarding processes rather than on outcomes for children.
29. The current Director of Children's Services has been in post since 2012 and, since that time, a very solid foundation has been established to support children in need of early help and protection, children looked after and care leavers. The success of the local authority in ensuring that most children looked after live in in-house placements has been extremely cost effective without compromising on quality. This has contributed to funding being available for workforce and service development, some of which is creative and innovative.
30. Partnership working is an asset in this local authority, which is self-aware and clear about its vision for vulnerable children who live in the county. Performance management, though strong in many areas, could be further improved by ensuring that quality assurance has an increased focus on outcomes for children.
31. Much work has been done to ensure that the provision and coordination of early help in Lincolnshire has continued to progress. This has meant that the local authority has been able to continue to focus its specialist services on the children who need them most. The integration and co-location of staff, and the relatively new advisory and consultant roles, have further strengthened the support provided to local families in need.

32. The implementation of the solution-focused Signs of Safety model across children's services, and as a model that underpins early help, is beginning to change thinking and practice, particularly in the prevalence of the voice of the child in assessments. Implementation has been supported by a training programme that has been widely taken up by staff across the children's partnership.
33. The two areas for development highlighted in the 2011 unannounced inspection of contact, referral and assessment services have been addressed. However, the client record system, which was highlighted in the 2010 Ofsted inspection as a problem, is acknowledged by the local authority as being no longer fit for purpose, and there is a plan to replace it in April 2015.
34. The learning from serious case reviews has been good, with significant improvements being made in the timeliness and quality of strategy discussions, the quality of case supervision and the effectiveness of escalation processes. The consistency and recording of multi-agency checks within child protection enquiries, identified through the Family V serious case review, still needs further attention to be good and so continues to be an area for improvement.
35. The last Ofsted inspection of Lincolnshire's services for looked after children was in June 2010. The local authority was judged to be good. All the areas for improvement identified in the last inspection have been addressed and good progress has been made. There is a good range of support services available for children.
36. Services for children looked after for whom adoption is the plan are exceptional; children are prepared well and most move to their families without delay.
37. The local authority has commissioned Barnardo's to deliver its care leavers' service for some years now, and it ensures that care leavers receive a good service through a robust contract monitoring process.

Summary for children and young people

- Families receive help very quickly when they have problems. They often go to their local children's centre or get adults in school to help them. The people who want to make things better for children organise meetings with families to plan what needs to happen to help families' with their problems.
- Social workers know children well. Some children may have a change of social worker because they move jobs or leave the area but this does not affect too many children. Social workers take the time to listen to children and their families. This means that children can get the help they need quickly and they understand what is planned for them.
- If children need to be cared for by Lincolnshire County Council, the social workers make good plans for them. They ask children for their views and, for most of them, the right decisions are made. Where children will live and with whom is decided as quickly as possible. Social workers try very hard to keep children with their brothers or sisters or other family members. If they need to be adopted, this is done quickly and almost all children adopted find the right family.
- If a child is in care there is a specific service to help them do well at school. Most of them go to a good school, behave well and attend regularly. Some children are not yet making enough progress or getting good enough results. The Council has been asked to check the quality of children's education plans and to make sure that children and young people get all the support they need to succeed.
- As children grow older, many want to set up their own home. A participation group has produced some creative tools to assist young people, such as a video and a smartphone app. Personal advisers help young people to find good accommodation and encourage them to continue to learn, train or get a job. There are still some who are not working or in training and a few who get into trouble. The staff need to improve pathway plans to make sure that all young people leaving care are well prepared to lead successful lives.
- The Director of Children's Services and politicians, as well as staff, really listen to young people, and they are influencing decision-making. The Young Inspectors, Voice4Choice and the Care Leavers' Participation Group represent young people and they challenge adults to make things better for children and young people.

Information about this local authority area³

Children living in this area

- Approximately 140,000 children and young people under the age of 18 years live in Lincolnshire. This is 19.5% of the total population in the area.
- Approximately 17% of the local authority's children are living in poverty.
- The proportion of children entitled to free school meals:
 - in primary schools is 13.8% (the national average is 18%)
 - in secondary schools is 11% (the national average is 15.7%).
- Children and young people from minority ethnic groups account for 10% of all children living in the area, compared with 21.5% in the country as a whole.
- The largest minority ethnic groups of children and young people in the area are White-Eastern European and Dual Heritage (School Census Jan 2014).
- The proportion of children and young people with English as an additional language:
 - in primary schools is 8.2% (the national average is 18.7%)
 - in secondary schools is 5.5% (the national average is 14.3%).

Child protection in this area

- At 31st March 2014, 3,724 children had been identified through assessment as being formally in need of a specialist children's service. This is a reduction from 3,383 at 31st March 2013.
- At 31st March 2014, 342 children and young people were the subject of a child protection plan. This is an increase from 294 at 31st March 2013.
- At 31st March 2014, 22 children lived in a privately arranged fostering placement. This is an increase from 6 at 31st March 2013.

Children looked after in this area

- At 31st March 2014, 606 children were being looked after by the local authority (a rate of 43.4 per 10,000 children). This is an increase from 585 (42.1 per 10,000 children) at 31st March 2013. Of this number:
 - 35 (or 5.8%) live outside the local authority area
 - 31 live in residential children's homes, of whom 22.6% live out of the authority area

³ The local authority was given the opportunity to review this section of the report and has updated it with local un-validated data where this was available.

- 5 live in residential special schools 4, of whom 20% live out of the authority area
 - 412 live with foster families, of whom 6.6% live out of the authority area
 - 32 live with parents, of whom 15.6% live out of the authority area
 - 8 are unaccompanied asylum-seeking children.
- In the last 12 months:
- there have been 68 adoptions
 - 40 children became subjects of special guardianship orders
 - 277 children ceased to be looked after, of whom 2.5% subsequently returned to be looked after
 - 8 children and young people ceased to be looked after and moved on to independent living
 - 19 children and young people ceased to be looked after and are now living in houses of multiple occupation.

Other Ofsted inspections

- The local authority operates six children's homes and one secure unit. Ofsted judged six of them to be good or outstanding in their most recent inspection.

Other information about this area

- The Director of Children's Services has been in post since March 2012.
- The Chair of the LSCB has been in post since October 2009.

⁴ These are residential special schools that look after children for fewer than 295 days.

Inspection judgements about the local authority

| Key judgement | Judgement grade |
|---|-----------------|
| The experiences and progress of children who need help and protection | Good |
| <p>Summary</p> <p>Children and families in Lincolnshire are helped by the right services at the right time. The organisation and quality of early help services, particularly children’s centres, targeted youth support and Families Working Together (the Troubled Families programme), are highly effective. Practitioners working in universal services receive good advice and support from Early Help Consultants and Early Support Care Co-ordination. They see supporting families as a shared responsibility and they understand and apply thresholds appropriately. This has helped to maintain the proportions of re-referrals to social care and of children who become the subject of child protection processes below the national averages.</p> <p>The recording of child protection enquiries requires improvement to become good, and the absence of a useful chronology tool means that it is more difficult for those who need to make a decision quickly to understand the important events in a child’s journey. The Domestic Abuse, Stalking and Harassment (DASH) risk assessment undertaken by the police is not routinely shared and this potentially affects the quality of information received and acted upon by social care.</p> <p>Early help and social work assessments are strong and help is provided quickly through the Team Around the Child, Child in Need and Child Protection planning and review processes. Where necessary, timely strategy discussions take place and always include the police, health and social care. Decisions made are safe and appropriate. The introduction of the solution-focused Signs of Safety model has enhanced the involvement of children in Lincolnshire, with good engagement with children in direct work and in child protection conferences. The local authority has demonstrated its commitment to learning from feedback by the way it is utilising the Principal Child and Family Social Worker and the Munro Champions to work alongside young people, to make sure that feedback drives improvement. Children over 10 years old who are subject to a child protection conference are always offered an advocate.</p> <p>Through careful analysis, partners now understand the scale of the problem of children going missing and sexual exploitation in Lincolnshire and services are good overall. Good quality direct work is taking place with children who are at risk of sexual exploitation. Though good progress has been made in educating professionals in this area of practice, further sustained work is needed to ensure that this knowledge is applied in identifying risk. Services to children who go missing or who are at risk of sexual exploitation have previously been inconsistent; although the current response has markedly improved through the establishment of dedicated</p> | |

services, these developments are recent and their impact has not yet been evaluated.

38. Well-trained local practitioners understand current processes, apply appropriate thresholds and provide highly effective support to local families. Early help assessments have increased year-on-year since the process was introduced in 2008. Between April and September this year, 1,298 early help assessments were undertaken that progressed to a Team Around the Child (TAC) plan of support. Of these, 73 per cent were closed in the same period, because either the needs of the child had been met (32%), or because they had reduced to the point where they could be met by a single agency (41%). This is evidence that a large majority of children had been successfully supported through this process.
39. The Early Help Steering group (EHSG) is successfully driving improvement. There is considerable multi-agency investment in a wide range of services to provide prompt support to families. The joint financial contribution of schools, through the schools forum, demonstrates a strong commitment to ensuring that early help services make a positive difference to the lives and well-being of children and families in Lincolnshire. Referrals to children's social care are low and reducing. The low rate of repeat referrals shows that support provided through the TAC process is working well. Partners report significant improvement, particularly over the past few months, and access to early help services is simple and straightforward. The step up and down process works well, resulting in families being provided with the right level of support at the right time.
40. Children's centres, targeted youth support and the Families Working Together (FWT) services are central to ensuring effective provision and intervention. Services are easily accessible and are improving outcomes for children, young people and families who require additional support. Health visitors work effectively with children's centre staff to support vulnerable families with young children. Health assessments at age two are used to identify issues as early as possible. There is good sharing of data between health services and children's centres, including live-birth data, leading to prompt support for young parents. Older young people have easy access to school-based nurses who offer drop-in counselling sessions.

41. There is good take-up of the LSCB training programme amongst early help practitioners and schools, including training on child sexual exploitation. A recent conference aimed at raising awareness was particularly successful, with staff reporting increased confidence in identifying risks of sexual exploitation among young people. Multi-agency training is offered to all schools and covers issues such as E-safety, digital citizenship, crime and alcohol awareness. Some powerful learning experiences, such as the play 'Chelsea's Choice', reached over 5,000 young people. Specific programmes of support are targeting young people in special schools. These aim to address specific challenges encountered by the most vulnerable young people, such as emotional well-being, homophobic bullying, racism and, more generally, how to keep safe in their day-to-day life in and out of school.
42. The co-location of 0–19 teams has improved communication and promoted integrated practice. Inspectors saw many examples of highly effective early help practice which prevented escalation to statutory services. There is good access to services for children with a disability and special needs through the Early Support Care Co-ordination (ESCO) service as well as specific support for families from a diverse range of minority ethnic groups provided by the Ethnic Minority & Travellers Education Group (EMTEG).
43. Early help assessments are of good quality. Services and actions are clearly focused on improving and monitoring outcomes for children. The appointment of early help consultants has been a significant development. Their work is improving practice and ensuring consistency. The role and expertise of the early help consultants (EHC) have been particularly welcomed by schools. The EHCs are supporting lead professionals to ensure that assessments are clear and that families understand them. They also check that practice is of high quality and that staff in universal services receive timely advice and support. Schools particularly welcome their offer of individual and group supervision, and this is leading to more children being supported well at an early stage.

44. Overall absence rates of all children in Lincolnshire match the national rate for primary and secondary schools. Children and young people missing from school are successfully tracked and located. In 2013/14 a total of 857 referrals were made and 87% of cases were successfully closed. The register is not closed until the child is found. A range of data from different sources, including from the police, is used to track young people, and schools have guidance on the actions to take following withdrawal of a child from school. About half (77 out of 134) the children and young people who receive less than 25 hours of education attend the hospital school. The others access a bespoke programme with alternative providers who are quality assured by the local authority. The authority maintains a list of children and young people who are electively home educated, and monitors the quality of their education effectively, including liaising with 11 to 16-year-olds from traveller families. In August this year, 443 young people were registered as home educated and all but one had suitable provision. Additional risk assessments are undertaken for children who are children in need or subject to a child protection plan, as well as those children who are not seen or where families refuse visits.
45. Young people age 16 or 17 who are homeless or at risk of homelessness are supported well by the Families Working Together Youth Homeless Project, with skilled mediation proving to be particularly effective in helping young people to remain with their friends or family. Of the 125, 16 and 17 year-olds, referred to the project between January and September 2014, 15% were referred for a social work assessment because of the complexity of their needs. Where such an assessment concludes that a young person is a child in need then they are accommodated under section 20 of the Children Act 1989. Thirteen were initially placed in bed and breakfast accommodation, for an aggregate total of 56 nights. The early help assessments seen by inspectors did not demonstrate that their entitlement to be assessed under section 17 and section 20 of the Children Act 1989 had been explained to them. This is a weakness.
46. Where professionals or members of the public are worried about a child, they receive a helpful and well-co-ordinated response from the Customer Service Centre. Call advisors screen contacts and provide clear information and advice. The need for consent is clearly explained. Early help advisors, who are qualified social workers, screen referrals and provide good quality specialist consultation to professionals with concerns. Time is taken to help the referrer decide how the family can be supported. A head teacher told inspectors that, 'We are never, ever turned away'. Feedback is consistently provided to referrers, and any disagreement about thresholds is resolved through discussion or escalation processes. Referrals are quickly progressed to area teams for assessment. Almost all contacts, which meet the threshold for referral, result in a social care assessment, and almost all assessments result in an offer of help. Thresholds for children's social care are clear and are consistently and thoughtfully applied.

47. The criteria used by the local authority to identify whether a referral should be responded to by a social worker within 24 hours did not include situations where a child is at risk of domestic abuse or because they have gone missing. When identified by inspectors, the local authority took immediate action to remedy this shortfall.
48. The response by the emergency duty team to concerns about children outside office hours is good. The team has access to appropriate training, and opportunities to work alongside daytime colleagues, which helps to keep their practice up to date.
49. Once the referral is transferred to a locality team children are swiftly allocated and managers make clear and well-recorded decisions about what social workers need to do next. Social care assessments are undertaken by qualified social workers and are of good quality in a very large majority of cases. They include family history, strengths and needs, and they explore the important aspects of children's lives. They are completed in a timescale that meets the needs of the child.
50. In a small minority of cases seen, children were not always seen quickly enough following referral and, though this did not adversely affect the children concerned, potentially it could have done. The local authority has taken decisive action to strengthen their oversight of practice in this area.
51. Social Workers spend time getting to know children, young people and their families. As a result, they have a good understanding of children's lives and experiences. Case records demonstrate that they are exploring family homes and are tuned into children's feelings and worries. Social workers use Signs of Safety 'three houses' tools to help children to explain their worries and dreams and this is helping them to understand children better. Social workers speak warmly and confidently about the families they are working with and are rightly proud when children's lives improve. Inspectors were impressed with the direct work being undertaken by the children with disabilities team, for example, using iPads to communicate with disabled children.
52. The police do not routinely share the specific risks highlighted through their Domestic Abuse, Stalking and Harassment (DASH) risk assessment and this potentially affects the quality of information received and acted upon by social care.

53. Where there are concerns that a child may be at risk of harm, strategy discussions and meetings are convened in good time in the very large majority of cases, including out of office hours. These meetings always include health, police and social care and records are comprehensive. This is an area of good practice. For disabled children, specialist health representatives contribute to these meetings, ensuring that the child's complex needs and histories are taken into account. Discussions include consideration of past harm, and social workers use 'danger statements' to make clear to parents the things that agencies are most worried about. Plans are safe and appropriate and decisions are clear.
54. The recording and analysis of child protection enquiries and decision-making points are not always clear. In a small minority of assessments seen, a coherent account of what information other agencies have shared, and how this has contributed to the risk assessment, is missing. This potentially affects the quality of the analysis and resultant plan.
55. Where help is needed, the family does not have to wait until the end of the assessment for this to be provided. The consideration of ethnicity is evident and the views of children and parents are consistently included. Children in need have a clear and useful plan outlining the help to be provided, and these plans are regularly reviewed. Social workers in Family Assessment Support Teams (FAST) work closely and creatively with co-located targeted support teams to ensure that families get the help that is likely to make the most difference to them.
56. The use of chronologies is inconsistent and key information was missing from many of the chronologies seen by inspectors. Social workers say that the integrated children's system (ICS) tool inhibits them in this task and this is acknowledged by the local authority, which has taken steps to ensure that this will be addressed when they implement their plan for a new client information system in April 2015.
57. When a decision is taken that the assessment should include a full child protection enquiry, these are undertaken in good time and children are consistently seen alone. Decisions are taken appropriately to progress to a child protection conference, and where they do not, the child's support needs are fully considered including the need for an early help service, if the decision is taken not to offer a social work service.
58. The involvement of children in child protection conferences is strong, and advocates help to ensure that their experience is positive. Conferences are well chaired, discussions are detailed and risks and strengths are discussed, leading to the right decisions being made.

59. In a small minority of cases, social workers' reports to child protection conferences were not shared with parents in enough time for them to be read and understood before the conference. This meant that parents were not sufficiently prepared for the meeting.
60. Core groups are regular, well-attended and are ensuring that agreed actions are progressed. Where change is not achieved, parents are appropriately challenged, particularly where there are concerns about neglect. Outcomes for children have improved or are improving in the majority of cases.
61. A very small minority of child protection outline plans do not provide a helpful summary of what needs to change and required actions. The limitations of the local ICS system mean that the plan agreed during the conference is not updated when the detailed plan is agreed, other than in the Core Group minutes. The local authority is aware of this and the issue will be resolved when their plan for a new client information system is implemented in April 2015.
62. Children who go missing from home or care receive a good response from the social workers in the Barnardo's Step-change service. Since the team was established in June 2014, 390 missing episodes have been screened and 231 return interviews have been undertaken. The team, together with the police missing person's coordinator, are carefully analysing missing and absent episodes to ensure that children who need a return interview receive one. An appropriate criterion that considers risk factors is used to determine priority. Social workers in this team describe themselves as a 'bridge', enabling young people and their families to receive the right help. Services for children at risk of going missing or of CSE are planned to be further strengthened through the co-location of the Step-change service with the multi- agency CSE team.
63. There was a significant underestimation of demand in the commissioning of the Barnardo's Step-change service, reducing its initial effectiveness. In one case, difficulties contacting a child led to a delay of 22 days in a return interview being undertaken. This meant that the assessment of need was delayed. This had been addressed by the local authority prior to the inspection, and the capacity of this service has been enhanced to meet demand.

64. Children and young people at risk of sexual exploitation are well supported by the very recently established multi-agency Safe team. The team includes staff from the police, the youth offending service and children's services (social care and family support), and it oversees and engages with those young people in Lincolnshire who are most at risk of sexual exploitation. Although it is too early to see the full impact of this service, case work demonstrates that it is beginning to make a difference. The creative tools developed by family support workers have brought structure and focus to this work. Inspectors saw examples where police action had disrupted the activities of alleged perpetrators, for example through the use of abduction notices. The regular Safe team tasking meeting identifies high risk cases and then tracks them, shares intelligence and identifies themes; meeting membership also includes the named nurse for vulnerable children and young people.
65. Social workers in other service areas are not yet consistently considering the risk and impact of CSE early enough in their assessments and plans. All partner agencies have identified CSE Champions, and a four-level training programme is being delivered across the partnership, but it is acknowledged that the task of educating and training all relevant professionals has been huge and that there is still work to do to address what one manager described as 'pockets of limited knowledge'.
66. Domestic abuse is addressed well in assessments and plans, with appropriate and accessible help being provided to victims and children, leading to positive outcomes. Multi-agency risk assessment conference (MARAC) arrangements are well-embedded, with good multi-agency attendance. Managers ensure that actions are progressed within five days of the meeting.
67. Multi-agency public protection arrangements (MAPPA) are managed well with robust criteria, effective communication between members and consistent multi-agency attendance. The 'Stop Abuse' initiative, where police can quickly report an incident of concern relating to a child, has led to 800 notifications to the public protection unit between January and September 2014.
68. Where there are concerns that a professional or carer may present a risk to a child, the Local Authority Designated Officer (LADO) ensures that allegations are investigated thoroughly. Risk is understood and appropriate action is taken. The involvement of LADOs in training and auditing activity is further strengthening this area of work.
69. There were 22 children living in private fostering arrangements in 2013–14. These children receive a good service, with statutory visits by dedicated social workers in the FAST teams taking place within timescales and assessments reflecting children's needs.

70. Feedback from families is sought through a variety of means, including surveys. The Principal Child and Family Social Worker is working with Munro champions, who represent locality teams, and with young people to ensure that the learning from feedback is informing improvements in social work practice. The Transition Board, which includes senior managers from Adults Services, Children's Services, Health, and Commissioning, is informed by feedback from the Shadow Transition Board comprised of disabled young people.

| Key judgement | Judgement grade |
|---|------------------------|
| The experiences and progress of children looked after and achieving permanence | Good |
| <p>Summary</p> <p>Children looked after by Lincolnshire County Council benefit from a range of strong and innovative services. They only become looked after when it is in their best interests. A large majority of children looked after are able to live with foster carers and within the local authority boundary.</p> <p>The local authority effectively applies the Public Law Outline and has successfully reduced the timescales by which care proceedings are concluded through the local family courts. Permanence is secured for the majority of children without delay.</p> <p>Social workers know the children they work with well and appropriately assess their needs. They ensure that the views of children looked after inform planning decisions taken during their review meetings, which they are encouraged to attend. Feedback from children and their families is utilised to drive improvements in services.</p> <p>For a small minority of children, assessments are not updated when their circumstances change, particularly when they return home. This means that the care plan does not always reflect their needs. Health assessments and social workers' reports are not always made available for children's review meetings. This means that the review is not always fully informed and able to plan for children effectively.</p> <p>Many children looked after attend a good or better school. The very large majority attend regularly and behave well. Education outcomes require further improvement, particularly in writing for primary school pupils and in the proportion of young people in secondary schools making the expected levels of progress in English and mathematics. Children looked after have access to good support for their emotional needs and have access to specialist services for substance or alcohol misuse, or if they go missing, or are at risk of child sexual exploitation.</p> <p>Adoption performance against national indicators exceeds good. Adoption for all children is considered at the very earliest point in planning, and effective tracking monitors their journey to permanence. Innovative and creative practice means that very few children wait too long or have their plans changed from adoption.</p> <p>Care leavers have stable and enduring relationships with their personal advisers and the majority of care leavers are effectively prepared for their transition to adulthood. Pathway plans do not always consider the full range of needs of care leavers and an insufficient choice of accommodation for care leavers means that a very small number, often those in crisis, are living in bed and breakfast accommodation,</p> | |

which is unacceptable. Currently 11 care leavers are in custody.

71. Children become looked after appropriately following robust assessment of their needs, including their need for protection. Decisions are timely and appropriately approved by managers.
72. Children looked after benefit from support from social workers who take the time to build meaningful relationships and seek to fully understand their views; this is an area of strong practice. Feedback from the majority of children spoken with during the inspection was positive about their relationships with their social workers, and indicated that they felt their views were sought and taken into consideration.
73. The local authority correctly applies the Public Law Outline (PLO) to ensure that children and families are effectively supported through pre-proceedings work. This includes the use of clear pre-proceedings letters, family group conferences and parallel planning to ensure that children are able to live in appropriate placements that meet their needs, staying with their birth family where this is possible. The majority of children who return home benefit from robust assessment and planned support to ensure that their move home is safe and successful. Timeliness of pre-proceedings work is ensured through good quality professional relationships and oversight of case work. However, cases are not tracked prior to an application being made to the court, which potentially could lead to delay or drift.
74. In a small minority of cases seen by inspectors, assessments have not been fully updated prior to children returning home and plans do not all contain sufficiently clear information regarding the services to support these re-formed families.
75. Whilst the majority of children looked after live in stable placements, in which they can build lasting relationships with their carers, there has been a drop in performance in this area since 2010 when it was 72%. In 2012–2013, 69.8% of children looked after remained in the same placement for more than two years, which was still higher than the average for statistical neighbours (68%) and England (67%). However, the local authority's data for the first six months of 2014–15 show stability to have fallen further to 64.4%. The local authority has recently commissioned an independent consultant to research the reasons for this decline in performance and, in the interim, resources have been invested in improved psychological support to foster carers. Reviews of foster carers caring for teenagers, the group most vulnerable to breakdown, are also held more frequently to ensure that the right level of support is offered.

76. Children spoken to during this inspection confirmed that they understand what they can expect from their social workers and carers. The local authority has been proactive in this area, and provides children with a 'coming into care pack' that explains what being looked after means, how to complain, and about the children looked after pledge. The local authority is also currently developing a phone app as an addition to this pack for children looked after to use on their smartphones. It is a highly imaginative tool that allows a live link to their social worker; provides locality information on health and leisure facilities; and enables children to prepare information for their looked after child review and provide feedback following the meeting. It includes a pen picture of their allocated social worker and diary reminders of important events. All data on the app is securely and automatically uploaded to ICS. This is a good practice example.
77. The majority of children looked after have care plans that ensure timely decisions and actions are taken to enhance their lives. Their emotional health needs are supported through the effective use of Strength and Difficulty Questionnaires; a new dedicated looked after Child and Adolescent Mental Health (CAMHS) team and access to the online counselling service known as 'Kooth'.
78. Whilst the majority of children have timely initial health assessments, this is not yet achieved for all children looked after, and the quality and timeliness of some still require improvement. The local authority and health colleagues are aware of this and have trained a pool of GPs to undertake the initial health assessments. There is a system to quality assure and improve these assessments and plans.
79. Young people misusing drugs and alcohol have access to commissioned services to help them reduce risks associated with this. Safety plans are used for children looked after to identify areas of risk while they are looked after. These plans also include information about how professionals should respond to critical events, such as going missing, and how to help children to minimise risk.
80. Between June and October 2014, 34 looked after young people went missing a total of 85 times. Return interviews were undertaken with children on 63 occasions. Children looked after who go missing are prioritised by the Barnardo's Step-change service. Information is shared with the child's social worker in order to be able to better understand risks and patterns. Where a risk of sexual exploitation is identified, the multi-agency Safe team provides good quality support to looked after young people. Four looked after young people are currently receiving targeted help from this service. Any incident of bullying is dealt with by the school and as part of review meetings.

81. Education outcomes for children looked after require improvement. The most recent validated results (2013), for a small cohort of 43 pupils, show that 85% of children looked after in primary schools made the expected progress in reading, which was above the national figure for children looked after (77%). In mathematics, 75% of pupils made the expected progress, in line with the national average (74%). However, in writing, 75% of pupils made the expected progress, which was below the national average of 81%. Only 22 children took the tests in 2014. Un-validated results for 2014 show that in reading 67% of pupils made the expected progress and just over half made the expected progress in writing (52%) and in mathematics (57%). These results are well below those for all pupils in Lincolnshire.
82. Key stage 4 results fluctuate year-on-year due to the small cohort size. In past years, GCSE results compared favourably with those of similar authorities and the national average. Progress was also comparable. The proportion of children looked after achieving five good GCSEs including English and mathematics (26%) was above average in 2012 but dropped to 16% in 2013 in line with the national average for children looked after (15.3%). Of the 51 young people who took their GCSEs in 2014, 17 entered care in Year 11 and over a third attended a school for children with special needs. The attainment gap between pupils who are looked after and their peers remains wide. In 2014, a small proportion of looked after pupils made the expected progress in English (23%) and mathematics (30%). Latest published results for 2014 show that in Lincolnshire 15% of young people achieved five good GCSEs including English and mathematics against the national average of 12%.
83. Children looked after attend good alternative provision in the Teaching and Learning Centre. Almost all receive the minimum requirement of 25 hours of education each week, and those who do not are carefully tracked and supported. They follow part-time and bespoke timetables to improve their attendance and engagement in learning. A very small number of young people only study for a few hours each week. Staff are relentless in trying to find creative ways to support their learning. A good development is the catch-up initiative in Year 12, specifically designed for looked after students who did not achieve a GCSE in English and mathematics. All Year 11 looked after students are encouraged to continue their education or training as part of the raising participation age initiative. The majority of young people attend college or a school's sixth form. A few follow work-based learning courses. The latest data show that, of the cohort of 51 young people who left school in July 2013, six young people were not in education, employment or training by May 2014.

84. Schools are very complimentary about the support and advice provided by members of the Virtual School's Looked-After Children Education Service (LACES). The LACES team and the recently appointed head of the virtual school are increasingly effective in monitoring the impact of pupil premium funding to ensure that children looked after are supported well and make better progress in their learning. The very large majority (75%) of pupils attend good or better schools. Pupils are not moved unnecessarily and, in the past academic year, the small number of looked after pupils attending less than good schools made similar progress to those in good schools. The LACES team frequently checks the quality of personal education plans and challenges schools' designated teachers to improve these further.
85. The plans usually provide a good overview of pupils' attendance, welfare and emotional well-being. However, targets contained within personal education plans (PEPs) for progress and attainment are often too general, and the impact of pupil premium funding on raising achievement is not always clearly demonstrated.
86. Schools report that exclusions are used as a last resort and are challenged by the LACES team. The Director of Children's Services is informed promptly of any exclusions. No looked after pupil placed in a Lincolnshire school was permanently excluded in 2013/2014. Two pupils placed out of county were permanently excluded that year. There are no permanent exclusions to date for this academic year. Rates of fixed-term exclusions follow the national trend. These are mostly due to persistent disruptive behaviour and serious incidents. In the last academic year, a total of 59 young people placed in Lincolnshire schools and 29 in out-of-county schools received at least one fixed-term exclusion. Members of the LACES team monitor exclusions and attend re-integration meetings in schools to offer strategies and advice.
87. Attendance is good overall and compares well with that of all pupils. An individual absence plan is completed for all pupils whose attendance falls below 85%. Performance is reported to children's services senior managers and to the Corporate Parenting Panel. Senior leaders and elected members have a good oversight of children's achievement.
88. Children looked after access a range of extra-curricular and recreational activities. These include confidence-building events and cultural or sport outings. Foster carers are clear about their delegated authority to organise these activities for the children they care for. The Duke of Edinburgh programme offers young people many volunteering opportunities and challenging activities, and enhances their future potential and options through completion of this nationally recognised award. Currently 9% of children looked after are undertaking the award and the Corporate Parenting Panel is seeking to promote these opportunities more widely.

89. The views of children are a strong feature in planning and review arrangements. Children Looked After are provided with a range of opportunities to participate effectively in meetings about them. This includes the use of advocacy, pre-meetings with their IROs, participation forms, active participation within meetings and letters to children who have chosen not to attend certain meetings to update them of the discussion and outcomes. Statutory reviews are chaired well in a style that ensures that all relevant matters are considered whilst also delivering the meeting in a style that supports and encourages input from the child, their family and carers, and other professionals.
90. Social workers' reports for review meetings are not sufficiently detailed and lack robust analysis of placement planning. Assessments are not consistently updated when children's needs, risks and circumstances significantly change, especially when a decline is noted. Safety plans are not consistently reviewed when the child's circumstances change. This means that current needs and risks are not always being considered and planned for effectively to lead to a reduction in risk for the child. Between April 2014 and September 2014, 26.3% of social workers' reports for the review and 30.9% of health assessments were not available at the review meeting.
91. Contact arrangements for children looked after are thoughtfully and appropriately managed to ensure that children are able to maintain and build relationships with their families that can be sustained over time where it is safe to do so. Foster carers are often actively involved in the practical arrangements to ensure that children have good contact with family members, including providing transport and liaising with other foster carers to ensure that brothers and sisters can stay in touch where this is agreed in their care plan.
92. Children who are placed outside the local authority are living in placements that were judged to be at least good by Ofsted. They have positive relationships and regular visits with their social workers and have planned access to appropriate health and education services to meet their needs. The local authority has clear notifying arrangements to inform other local authorities when children are placed outside Lincolnshire.
93. The majority of children and young people are successfully placed within Lincolnshire and the majority of children looked after live in foster placements. The local authority's unvalidated September 2014 data records that 75.5% of children looked after are living with foster carers. The use of external placements is very low and this compares very well against other local authorities' performance. The use of external placements is primarily for children with complex needs, and these placements are commissioned on an individual basis to meet identified need.

94. A recently formed recruitment team has been established to streamline the process of recruiting both foster carers and adopters. The checks and assessments of foster carers are completed within timescales and meet statutory requirements. The assessments are analytical and identify the strengths and areas for development. The supervision of carers is robust and focuses on the needs of children in placements and how well the carers are managing these needs. The majority of foster carers have completed the required qualification, although the number of connected and kinship carers completing this remains a challenge. The approval status of foster carers and their progress is reviewed annually by their supervising social worker. Children and young people's views inform foster carers' reviews, and examples of this were seen. All reviews are signed by team managers to ensure management oversight.
95. The sharing of written information between social workers and those caring for children looked after is not sufficiently timely in all cases to ensure that children's new carers fully understand the child's needs and experiences and therefore how to provide them with safe and appropriate care.
96. The local authority reviewed all cases for children looked after without a clear permanence plan in 2013; plans for the majority of these children and young people have now been progressed. For children and young people in long-term foster placements, the option of permanence through special guardianship orders (SGOs) has been explored. There are currently 174 children living with their special guardian. The arrangements to support SGOs are well embedded through assessing support needs and providing means-tested financial support. SGO's are further strengthened through the use of supervision orders and child in need services where this is relevant and in the best interests of children.
97. The majority of children are able to live with their permanent family without delay. The local authority has a range of creative initiatives to support children in achieving permanence. This includes Cafcass Plus and the Extended Contact fostering option. Children are prepared well for planned placement moves through discussions and visits with their prospective carers prior to moving into the placement.
98. For children currently entering care proceedings, assessments and decision making are carried out within clear timescales which meet the child's needs; the conclusion of final proceedings meets or improves on the expected target of 26 weeks. Excellent relationships have been developed between the local authority, Cafcass and the judiciary and this is supporting the very strong practice in securing swift action and shorter court timescales for the vast majority of children. The local Judge reported 'there are terrific working relationships ... they present their concerns, have their independence, and cooperate in the best interests of children.'

99. Social work reports and assessments for court applications are good quality; the local judge has seen significant improvement in quality over the past 18 months and now rates them highly. This has been supported through the seconded case manager from Cafcass working with legal services and practitioners to drive improvements. The local authority recognised the success of this seconded role and recently established it as a permanent post.
100. There is a well-established council for children looked after and care leavers called Voices for Choices (V4C). There is an executive group of young people that meets monthly and three area-based sub-groups that meet quarterly. All four groups contribute to the local authority's 'Big Conversation' programme, which brings together young people, elected members and managers from children's services and Barnardo's Leaving Care Service to develop and improve the services that children and young people receive. Inspectors attended a very positive meeting, with those young people present having a clear role in participating and influencing service delivery to support other children looked after and young people. The local authority is effectively accountable to V4C and they routinely update and respond to issues raised by young people. V4C is linked with the Corporate Parenting Panel and the children and young people affirm that they are listened to and feel that they influence changes in the local authority. For example, the recently redesigned ePEP and review forms have been developed with young people and a 'coming into care' smartphone app has been designed with their input and there is a plan for this to be launched imminently.
101. Professionals take into account the ethnic background of children looked after and endeavour to provide for their diverse cultural, ethical or religious needs. Social workers are vigilant about children and young people's understanding of English, and translators are readily accessible. At school, children looked after access one-to-one tuition funded through the pupil premium. This helps to improve their speaking, reading and writing skills. Additional support and advice is available through the Ethnic Minority and Traveller Education Team (EMTET).
102. The use of life story work to help children looked after to understand their histories and early experiences requires improvement to ensure that all children benefit from this important work. The local authority is aware of this and is currently in the process of recruiting to two full-time posts which will focus on this area of work.

103. The use of placements made under regulation 24 of the Care Planning, Placement and Case Review (England) Regulations 2010, whilst significantly improved over the past 12 months, is an area acknowledged by operational managers to be an 'evolving picture'. There remains a degree of confusion for a small number of social workers about the correct use of the regulation that concerns the temporary approval of a connected person and this is being addressed by the local authority through the reinforcement of a recently issued procedure.
104. The structure of the social care service has been designed in a way to minimise changes of social worker. A small minority of children have experienced frequent changes of social worker and this has hampered the development of effective relationships with their social worker. This has resulted from a mixture of staff promotion and sickness as well as from staff leaving the service.

The graded judgment for adoption performance is that it is outstanding

105. Adoption is considered very early in the planning process for all children. The local authority effectively twin tracks children's plans, and there is purposeful drive to achieve timely outcomes for children to live with adopters. For children with final care plans for adoption, dedicated children's adoption workers focus exclusively on developing their plans. There are excellent examples of potential links made between prospective adopters and children during their assessment due to close working in this team. This has resulted in panel considering approvals and matches at the same panel, achieving timely permanence for children.
106. Securing permanence through adoption is a high priority. In response to a dip in performance in 2012–2013, decisive action was taken to understand this picture, commissioning a diagnostic report and a subsequent action plan. This action plan has been well executed and has led to improvements in the structure to support adoption work and redefine practice to achieve timely outcomes. This is underpinned by robust adoption policy and a clear understanding within children's services of the shared aims for continued adoption improvement.

107. Performance on the Department for Education (DfE) adoption scorecard and the most recently available DfE data demonstrates that this authority performs well against the expected national targets. The average time between a child entering care and moving in with their adopted family is 393 days, which is significantly better than the England figure of 546 days. The authority has robustly analysed its performance on the timeliness of 232 days between receiving court authority to place and achieving a match to an adoptive family. This figure is slightly higher than the national average of 224 days. This resulted from a slip in timeliness for a few children, which the authority has now addressed. Current performance for the number of children adopted is on an increasing trajectory, with 68 children adopted in the last 12 months.
108. The number of children waiting longer than the expected timescale to be matched with adopters is very low. Currently there are 26 children waiting for an adoptive placement, and only seven of these have been waiting longer than the expected timescale. These children are closely monitored by senior managers to ensure that they do not experience drift and delay. There are currently four children where the plan for adoption has not been achieved, and for these children alternative permanence options are in progress. Where there has been delay, there has been no adverse impact on the children.
109. There is effective recruitment of adopters and a year-on-year increase over the last three years, from 30 adopters approved in 2011–2012 to 50 approved in 2013–2014. Assessments are timely: the average number of days between application and approval is 175 days, which compares favourably to the figure for England of 217 days. Adopters report very positively on their experience from initial contact through to being recommended for approval at panel.
110. Specific recruitment campaigns target adopters with the right skills, such as those able to care for brothers and sisters and older children. In 2013–2014, out of 53 groups of brothers and sisters assessed as needing placements together, this has been achieved for the vast majority. Achieving permanence through adoption for these children whilst placing them together remains a focused priority for the dedicated recruitment team. There are fast-track, priority processes to respond to such enquirers. There are currently 13 approved adopters waiting for a match, and activity is progressing with 10 of these to explore links with specific children.

111. The Adoption Reform grant has been used effectively to drive improvements and create extra posts to enhance recruitment activity, progress adoptions and strengthen adoption support. This includes a family finder coordinator, who is integral to effectively monitoring and securing matches for children. This role actively supports close links with the East Midlands Consortium, voluntary adoption agencies and the National Adoption Register to progress timely wider searches for adopters for children. Adoption activity days are proving successful in securing adopter-led matches for some older children and those with complex needs. There is regular scrutiny through weekly meetings of the progress of all children who do not have a confirmed match within 12 weeks; senior managers review their progress at a dedicated panel. This is a recent addition to provide support and challenge to practice to find creative solutions and avoid delay.
112. Fostering to adopt is in development. There are currently two sets of foster carers specifically recruited to foster to adopt, but no children have yet been considered a suitable match for the fostering to adopt placements. Twelve interested people attended a recent information day on fostering to adopt to learn more, and it is the plan to continue developing this option as part of securing permanency at an early stage and avoiding a second move for children.
113. Children are extremely well supported to prepare them to live with their future families. Social workers are skilled in direct work and use a variety of tools which are meaningful to the child to help them transfer their attachments to their new family. This helps children to settle quickly, and the very low numbers of disruptions, only one child in 2012-13, shows that children are well prepared and matched. There is effective scrutiny and challenge by an experienced and well-established panel and agency decision-maker. The analysis of adoption performance is captured within the annual report to inform ongoing improvement.
114. Social workers prepare excellent life story books for children placed for adoption. These are individual and personal for each child and support children sensitively to understand their family history and identity. Later life letters are equally child-centred and provide children with a factual and sensitive account of their life history.

115. Adoption support is effective and provided at different levels of need. Children and adoptive families do not experience delays in accessing or receiving support as this support is not limited post adoption order. It is provided by a discreet team of workers who are qualified and trained in therapy and psychotherapy and offer direct short-term and long-term interventions for children and adopters. There are many examples of highly effective work to help children to make sense of their situations at key stages of their lives. For adopters, this support equips them with theory and supportive strategies to respond effectively to the child. This reduces stress in relationships and supports stability. There are currently 29 children receiving adoption support.
116. Birth parents are able to access independent counselling through Birth Ties, and parents are increasingly using this service for support. Support for adopted adults is timely, and the team responded to 91 requests for birth record counselling during 2013–2014 in addition to 40 referrals from birth parents and 31 enquiries from birth relatives.
117. Not all schools are utilising the pupil premium to support adopted children and families, which means that some adopted children do not get the right support in school.

The graded judgment about the experience and progress of care leavers is that it is good

118. Contract and performance management of the Barnardo's Leaving Care Service by the local authority is effective. This includes close and frequent scrutiny of care leavers who are not in education, employment or training (NEET) or not in suitable accommodation. Personal advisors receive regular supervision and have manageable caseloads averaging 20 young people. This allows them to spend sufficient time supporting young people. They work alongside transition social workers in the children looked after teams, who hold statutory responsibility for completing pathway plans of children looked after aged 16 to 18 years. This arrangement allows personal advisors to construct effective, enduring relationships from an early point with looked after young people entitled to a leaving care service.
119. Risks to care leavers are generally well assessed. Safety plans and risk assessments are regularly updated in the majority of cases seen. The service is effective in staying in touch with all care leavers, including a significant minority who live outside the county. Staff have intensive levels of contact with care leavers who are experiencing a chaotic period, using effective relationships to stabilise behaviours.

120. Half of all pathway plans seen by inspectors were judged as requiring improvement, with plans lacking specificity, particularly concerning independence skills development. The quality of plans seen is generally better when young people are in stable placements, particularly those who are 'Staying Put'. The plan format was designed by young people, and their views are strongly evident. A scaling system allows young people to self-assess and plot their progress on key outcomes with their personal advisers.
121. Pathway Plans seen were less effective with care leavers who were in unstable, chaotic phases. It is recognised that engaging young people in structured planning when they are in turbulent periods of their lives is challenging, but careful, detailed, specific plans and timely reviews are particularly vital for this group of care leavers. The Leaving Care Service does not have a policy outlining how biannual Pathway Plan reviews for relevant and former relevant young people will be chaired. Rectifying this would improve the quality of the review and help to ensure that the delivery of the plan is effective.
122. Most care leavers (92%) in Lincolnshire live in suitable accommodation and the majority of care leavers live in supported lodgings or housing schemes when they reach 18 years of age. All care leavers spoken to by inspectors said that their accommodation was safe and pleasant. Staff routinely complete a property risk assessment to determine 'suitability'. A dedicated supported lodgings worker is increasing the supply of supported lodgings providers, predominantly in family homes.
123. Thirty-five care leavers remain with their foster carers under 'Staying Put' arrangements and there is a commitment to increase the number of 'Staying Put' and supported lodgings placements to allow more young people reaching 18 years of age to remain in family settings. Young people not in suitable accommodation, which includes 11 young people in custody, are closely monitored and tracked through the contract monitoring process.
124. Bed and Breakfast placements are still used by this local authority for a very small number of care leavers. It is recognised that these placements are usually made when young people are presenting challenging, disruptive and aggressive behaviours, though such provision is unlikely to meet their needs. Two care leavers were in bed and bed accommodation at the time of the inspection and one 17-year-old young woman was recently placed in bed and breakfast accommodation for three months before an appropriate alternative could be identified. Lincolnshire has recognised the need for more supported lodging provision, particularly for care leavers with complex needs, and a commissioning programme has commenced to attract suitable providers.

125. Transition planning for disabled care leavers is highly effective in Lincolnshire, and commences with adult services at an early stage. Strategic and operational arrangements for transition planning are comprehensive and integrated. Young people with additional needs who do not meet the threshold for adult services are also comprehensively supported through highly effective, integrated joint transition planning.
126. The health needs of care leavers receive effective attention. Care leavers are supported to register with universal services and to attend their appointments. A dedicated nurse works alongside personal advisers to signpost and support care leavers engaging with targeted and specialist health services. Care leavers access contraception card schemes, pregnancy testing, chlamydia screening and teenage pregnancy services through well designed service pathways. Good engagement with the substance misuse service was a particularly prominent feature in cases seen. Care leavers with identified mental or emotional ill health are well supported by two CAMHS practitioners who engage solely with care leavers. A health passport is not currently available to care leavers, though this is currently under development.
127. The majority of care leavers are effectively supported, through phased approaches, to build their independence skills. A range of methods are used, including individual work with personal advisors and preparation undertaken in supported lodgings or housing settings. An accredited scheme for the attainment of independence skills is being developed. Foster carers are being encouraged to provide skills training for young people in their care aged 16 years and over.
128. There are 19 care leavers who are parents. Most of these young people receive additional support from a dedicated parenting support worker in the Leaving Care Service, who works alongside personal advisers to ensure effective intervention to develop and sustain good parenting skills.
129. The majority (61%) of Lincolnshire care leavers are in education, employment or training (EET), which is close to statistical neighbour and national averages. The local authority has invested in three dedicated posts in the Leaving Care Service to work alongside personal advisers to increase participation levels in good quality programmes, tailored to the needs of the young person. Care Leavers who are NEET (not in education, employment or training) are closely tracked and the reasons regularly reported and reviewed.

130. There is an effective two-day, and a longer 13-week, work preparation programme. An established care leaver apprenticeship scheme in Lincolnshire has been operational since 2007. The preparation programme entails placements with employers, with the objective of building skills and confidence in order that dropout rates in subsequent apprenticeship programmes are reduced. There are 45 young people on preparation programmes and 20 young people on apprenticeship schemes. Apprenticeships are sought both with the local authority and a range of employers across the county.
131. Lincolnshire has a strategic commitment to increase participation rates for its Care Leavers in both these schemes. Care Leavers on work preparation programmes are incentivised with a £10 per day payment in addition to their benefit payments. A 'Care To Work' quality mark has been awarded to Lincolnshire, demonstrating the high standards of service supporting care leavers in their journeys towards employment.
132. Most care leavers who completed Year 11 school studies in 2014 are in education, training or employment (86%). Seventy per cent are attending further education or sixth forms at schools. Six care leavers are in some form of training. Fourteen per cent of 16 and 17 year-old care leavers are 'NEET'. There are 19 Care Leavers attending university, and they are supported by bursaries and assistance with accommodation in holidays.
133. A dedicated service supports 64 unaccompanied asylum seeking care leavers. There is an effective range of services, some of which are co-located, supporting this group of care leavers quickly into suitable accommodation, education and employment. Care leavers spoke positively of the support they receive. Unaccompanied asylum seeking care leavers are effectively supported to engage in education, training and employment. Fifty-eight out of 64 Care Leavers in this group are either working or attending college and three attend university.
134. The proportion of children looked after aged 16 years who remain looked after when they reach 18 years of age is significantly lower in Lincolnshire than in other authorities. In March 2013 this was 49%, compared with statistical neighbour and England averages of 66% and 68% respectively. There are currently 24 young people who left care before their 18th birthday. The local authority has yet to analyse the reasons for this and so does not know whether young people are leaving care prematurely.

135. Care Leavers' participation, involvement and influence within the Leaving Care Service is good. An active participation group meets regularly and strongly influences important aspects of service design and provision. Recent initiatives have included the production of some highly innovative tools to assist their peers in acquiring independence skills. This includes a video, and a 'smartphone app', both of which will be launched imminently. Care leavers themselves have developed the Care Leavers Pledge in Lincolnshire, and they have also been involved in the redesign of the pathway plan and review forms. Basic and more detailed written information is provided on care leaver rights and entitlements and they are offered an independent advocacy service. Care leavers achievements are celebrated at annual award ceremonies, which they both value and enjoy.

| Key judgement | Judgement grade |
|---|------------------------|
| Leadership, management and governance | Good |
| <p>Summary</p> <p>A strong senior leadership team ensures that the effective use of resources is ensuring exceptional early help services. There is effective governance in Lincolnshire and partnership arrangements are robust. A recent self-evaluation shows elected members and senior managers have a good overall understanding of the strengths and weaknesses in their work with local communities.</p> <p>Regular meetings take place between the Chief Executive, the DCS and the Chair of the LSCB. Links between the key strategic groups and boards are clearly evident and are making a difference. The Corporate Parenting Panel is both active and aspirational for children looked after and care leavers, though it has not yet delivered improvements in all aspects of their lives.</p> <p>Priorities are clearly identified, with safeguarding being a key local authority priority. Progress is carefully tracked and monitored. Elected members on the Children and Young People Scrutiny Committee are conscious of their role in improving services and, through their task and finish groups, have developed a good understanding of front line services.</p> <p>A joint-commissioning process is in place and is effectively managed through the Children’s Services Commissioning team. Commissioned services, such as the Barnado’s Step-change and the Care Leavers Service, are meeting some challenging targets as well as experiencing a rigorous contract monitoring process. Effective performance management results in action being taken quickly when poor performance is identified. Learning is taken from a range of sources and members and senior managers enthusiastically promote the participation of children and young people and ensure that their views are listened to and used to inform service improvement. Whilst thematic audits have improved practice, the quality assurance undertaken on the auditing of children’s case file records would be improved by an increased focus on outcomes.</p> <p>The Child Sexual Exploitation strategy and action plan is leading to positive service developments, but these are too recent to evaluate impact.</p> <p>The detailed workforce development strategy has included recent and ongoing investment in social care and early help services. The strategy is putting a clear emphasis on ensuring that practitioners have the right environment and support to effectively carry out their roles. This is having a positive impact on safe practice and ongoing professional development.</p> | |

136. Elected members across the political spectrum, together with senior officers, share a vision of strong and continually improving services. Safeguarding children is a key priority for the authority and this is evidenced, for example, by the ongoing investment in early help and social care services and by the priority given to ensuring that tier 2 mental health services are available to children and young people. The authority makes best use of limited resources to ensure that vulnerable children are safeguarded.
137. Lines of accountability are clear in Lincolnshire, and relationships between the local authority and strategic partners are strong and characterised by mutual challenge. There is a well-established, experienced senior leadership team that is committed to providing consistently high quality services. Links between the Chief Executive, the Director of Children's Services and the LSCB Independent Chair are strong, with regular meetings taking place.
138. The joint strategic needs assessment (JSNA) captures prevalence relating to mental health, substance misuse and domestic abuse. The local authority is seeking to further improve the quality of the data captured, and is being proactive in consulting with service users to ascertain whether their needs could have been better met by existing support services.
139. Priorities are set out in the Children and Young People's Plan and these are aligned with priorities of the Health and Wellbeing Board and the LSCB. The Children and Young People's Strategic Partnership acts as the commissioning arm of the Health and Wellbeing Board and joint commissioning arrangements are robustly managed through the Children's Services Commissioning Team. The strategic partnership has worked on some key areas of improvement, such as the Youth Housing Strategy, child poverty and the response to Child Sexual Exploitation (CSE). The use of schools forum funding for early help has led to an important shared understanding that early help is not just the responsibility of local authority children's services.
140. The Health and Wellbeing Board is well established, with the right agencies represented at the right level. It has good links with the LSCB. A Public Protection Board brings together agencies that have responsibilities for safeguarding in Lincolnshire, including the Adults Safeguarding Board and MAPPA Safer Communities. The Lead Member for Children is a member of the Health and Wellbeing Board, the LSCB and the Children and Young People's Strategic Partnership Board. This all contributes to a high degree of coherence between the different bodies involved in planning for children in Lincolnshire.

141. The Children and Young People Scrutiny Committee provides robust scrutiny of services for children and young people. Elected members on this committee have good insight and knowledge of their communities and the issues faced by children's services. In June 2014, a Scrutiny Committee task and finish group conducted a review of frontline social work and safeguarding services over a six-month period using a rigorous methodology. The action plan established from their recommendations is now monitored by the committee. Members visit children's homes and are involved with senior managers in quarterly safeguarding assurance visits to locality teams, when they talk to staff and sample case files. Senior managers are visible and undertake quarterly locality roadshows.
142. The local authority is an active and aspirational corporate parent. There are well-established links between the Corporate Parenting Panel and the scrutiny committee for children's services, with the chair of the Corporate Parenting Panel reporting to alternate committee meetings. The panel chair and members seek to actively hear the voices of children and young people through attendance at a variety of forums and events. The Corporate Parenting Panel identified the need to raise the profile of the role of corporate parenting with elected members, and the councillor development days held to address this are excellent practice; the scrutiny committee is monitoring attendance to ensure that all councillors attend.
143. The ambition of the Corporate Parenting Panel has not yet delivered improvements in all aspects of the lives of children looked after and care leavers, particularly with regard to the use of bed and breakfast accommodation, pathway planning for care leavers and the education attainment of children looked after.
144. Although children looked after are provided with full information about how to complain, the local authority does not currently analyse complaints from children looked after as a separate issue within its annual report. This means it cannot be sure that it understands the themes and issues prompting complaints from this group of children.
145. The appointment of a CSE Co-ordinator has assisted the local authority to understand and analyse the prevalence and nature of CSE in the county, and this analysis has led to a robust action plan, which is monitored by the LCSB. This has resulted in some positive service developments, which are too recent to evaluate for impact.

146. The local authority works hard to promote a culture of learning and its self-assessment is informed by a range of good-quality performance data and analysis, serious case reviews (SCRs) and individual and thematic case file audit findings (both internal and multi-agency), as well as by feedback from service users. The learning from thematic audits is evident: for example, a recent report on an internal audit concerning domestic abuse led to a range of improvements which has contributed to a better functioning MARAC.
147. The children's case file auditing aspect of the local authority's quality assurance process does not have sufficient focus on outcomes. Seventeen of the 30 case audits tracked during this inspection were found to have over-optimistic findings and were too focused on the process of practice rather than on how the quality of practice is improving outcomes for children.
148. A stakeholders' engagement group supports the implementation of the Children and Young People's Participation Strategy. The Voices for Choices group of children looked after is particularly active and has been involved in the training of social workers, contract tendering processes, designing a 'coming into care' app as well as interactive apps for the FAB! (fantastic, amazing, brilliant) award event that celebrates the achievements of children looked after and care leavers. The Munro Champions group is an effective forum, giving a voice to practitioners and service users that is informing service improvement. The Young Inspectors Group and their programme of inspections of local services are making a tangible difference to services provided to all young people in Lincolnshire.
149. A comprehensive workforce development strategy is in place which is clearly aligned to achieving service priorities. It encompasses behaviour statements, a practitioner capability framework and the evidence-based approaches adopted by the local authority to improving outcomes. This is supported by a comprehensive package of training in the 'Signs of Safety' tools and solution focussed methodology for social work staff and those in other agencies who deliver the early help offer. This new approach is a strength, which is beginning to have a positive impact on how professionals work with families and listen to the voices of children. A recent successful bid to the Department for Education's 'Innovations Fund' will provide extra funding to evaluate the use of this innovative approach.
150. New social workers are well supported through the ASYE (assessed and supported year in employment) programme and all social workers are further developed through good access to training, membership of Research in Practice and corporate membership of the College of Social Work. There is commitment to regular quality supervision, though there is no evidence of reflective casework discussion in written records. Appraisals are undertaken annually and personal developments are put into place informed by two observations of practice undertaken by the practice supervisor during the preceding year.

151. Management oversight of casework is strong. Managers ensure that they know the cases for which they are responsible, and they help social workers to think creatively about how to effect change. Management information is used effectively to track timescales for key pieces of work, such as assessments and statutory visits. The local authority has evidenced its commitment to manageable social work caseloads by investing in new social work posts. Caseloads currently average between 15 and 19 in the FAST teams, 17 in the children with disability teams and 18 to 22 in the LAC teams.

The Local Safeguarding Children Board (LSCB)

The Local Safeguarding Children Board is good

The arrangements in place to evaluate the effectiveness of what is done by the authority and board partners to safeguard and promote the welfare of children are good.

Summary of findings

The LSCB is good because:

Partnership Arrangements

- Strong and effective partnership working is delivering excellent early help to children and families.
- The Board has contributed to the creation of a solid partnership of governance and accountability where key partners are accountable to one another.
- The Public Protection Board enhances networking across service boundaries in both adult and children's services.
- Multi-agency audit findings are carefully considered, and subsequent action plans are routinely monitored.
- Thresholds are understood and applied well by partner agencies.
- The Board challenges partners and holds them to account to improve the multi-agency arrangements for safeguarding children.
- The multi-agency training plan is comprehensive, and responsive to emerging issues and evaluation.
- There is evidence of widespread multi-agency attendance on training courses and e-learning, including by staff working in the independent sector.

Learning from serious incidents

- There is a clear process and independent gatekeeping to manage significant incidents.
- Learning from serious case reviews (SCR's) impacts positively on service development and informs training.

Child Sexual Exploitation

- The CSE work stream now includes a clear overview of CSE. This is promoting an

effective response to referrals, which are carefully monitored.

What does the LSCB need to improve?

Priority and immediate action

There are no areas for priority and immediate action.

Areas for improvement

152. Ensure that evidence of impact on practice is collected and analysed systematically to help the LSCB to measure its effectiveness more accurately and consistently.
153. Ensure that an evaluation of the impact of recent CSE initiatives relating to prevention, protection, prosecution and disruption is undertaken and that the right support is being made available to victims.
154. Ensure that the views of children and young people play an increasing role in the work of the Board and in any service developments that it oversees.

Inspection judgement about the LSCB

155. Clear governance arrangements enable the LSCB to meet its statutory obligations. Board membership is of a sufficiently senior level and the breadth of membership of the Board and its sub-groups is good. Attendance is good, promoting a consistent approach to the work of the Board. All member agencies contribute to the budget of the LSCB. Regular meetings with the Chief Executive, the DCS and other senior managers ensure that the safeguarding of children is on everyone's agenda.
156. The Board agrees priorities at an Annual General Meeting, and approves the forthcoming year's work programme and budget. An Annual Report sets out the work of the Board in accordance with current requirements, and additional clarity is provided by the business plan. The Board and its sub-groups are effectively supported by a team of staff under the management of the LSCB Business Manager. There are clear lines of communication between the Chief Executive of the local authority, the DCS and the Independent Chair of the LSCB which ensure that the areas of accountability for which they have responsibility are effectively managed. There are well-established scrutiny arrangements which enable elected members to provide challenge to both the Children's and the Adults Safeguarding Boards.

157. The LSCB has been influential in developing the current governance structures. The establishment of the Public Protection Board is one of the ways in which this has been achieved. This is chaired by the Independent Chair of the LSCB and brings together Chairs and Business Managers of all Boards which have responsibilities for safeguarding in Lincolnshire, including the Adults Safeguarding Board, MAPPA, Community Safety, Prevent, The Health Safeguarding Steering Group and Domestic Abuse Steering Group. This demonstrates a collective commitment to work in partnership, and acknowledges that there is a range of shared issues for which the various groups are responsible.
158. The Independent Chair maintains a challenge log, seen by inspectors, which lists the challenge made to agencies and senior managers together with agreed actions. LSCB member agencies moderate each other's section 11 Audit work, submitted annually as part of the three-yearly cycle. This enables a greater level of detailed understanding of the work of partners, encourages challenge into the system, and helps to develop a more consistent approach to the section 11 process.
159. The Independent Chair plays an active and pivotal role in the safeguarding agenda. He maintains regular contact with frontline practice. For example, he and the LSCB Business Manager meet regularly with CP Conference Chairs, from whom he receives clear descriptions of issues relating to child protection practice. This allows him to ensure that front-line practice issues are incorporated into the work of the Board.
160. The LSCB has a Multi-Agency Audit Plan, and is working with the local authority's quality assurance team to ensure that children's safety is a routine feature of all future children's audit work. A recently appointed LSCB auditor will further ensure that an effective focus is maintained on audit responsibilities. A key element of the role of the newly appointed auditor linked to the LSCB will be to establish closer links between service users and the Board, to increase the influence of young people on its work. Inspectors have seen examples of training and awareness-raising projects being directly influenced by the views of young people.
161. The Chair of the Significant Incident Review Group (SIRG) is a senior manager from a voluntary sector organisation. The SIRG incorporates SCR responsibilities within a wider remit, including a focus on excellence, so that the Board can disseminate good practice. Recent enhancements to the Team Around the Child (TAC) have been made following the publication of a local report into the suicide of a young person.

162. The legal adviser to the Board offers moderation of author narrative reports (Individual Management Reviews) to assure quality and consistency, and routinely attends the Board's Strategic Management Group and the SIRG, offering support to the SCR process through to publication and beyond. Each key agency has nominated a Senior Liaison Officer, the conduit through which information regarding significant incidents is processed. This promotes a consistent gatekeeping process, which is challenged periodically by SIRG members if matters subsequently come to light which they believe ought to have been presented to SIRG for discussion.
163. Training officers linked to the LSCB are briefed in advance of SCR publication, so that they can develop plans to roll-out the learning, including staff briefings and e-learning. Examples of such training include a focus on pre-birth assessments, the provision of emergency cover, and sessions about the SCR process itself.
164. A comprehensive range of training is available to partners, and the Annual Training Plan is influenced by learning from SCR's, local and national, as well as other key issues discussed by the range of sub-groups which report to the Board. Examples of training delivered as a direct result of learning from SCR's include a focus on pre-birth assessments, the provision of emergency cover, and sessions about the SCR process itself. Training is well attended throughout the partnership, a reflection in part on the practice of fining those who do not attend. Training is widely accessible. For example, the independent sector can access training events for a small fee.
165. Training staff linked to the Board evaluate the impact of training which they provide; they have recently improved their evaluation process by seeking feedback from participants, some weeks after the training has been delivered, regarding the impact which the training they received has had on their work.
166. The LSCB is confident that thresholds are well understood and embedded within the partnership. The Chair and Business Manager report that the availability of guidance for practitioners, and the TAC arrangements are working effectively.
167. Policies, procedures and guidance are overseen by the Policy, Procedure, Education and Training sub-group of the LSCB which ensures that procedures are up to date, compliant with statutory guidance and effectively disseminated throughout the partnership. Through this sub-group, agencies are empowered to bring forward policy and procedural gaps which has led, for example, to the development of a protocol about working with injuries to non-mobile babies.

168. CSE is a strategic and operational priority. The increased national focus has added further impetus and this led to a self-assessment being undertaken against the findings of recently published reports concerning CSE. The appointment of a CSE Co-ordinator accountable to the Board led to a risk analysis being undertaken. The subsequent report discusses LSCB priorities and considers prevalence, prevention, support to victims, disruption activity and prosecution and refers to the resources already deployed. A CSE strategy and action plan has been developed by the relevant sub-group, ratified by the LSCB, and a multi-agency CSE service has now been established, which is co-ordinated with personnel responsible for missing children. This works with children and young people most at risk, provides a source of advice and guidance and supports awareness-raising activity. The LSCB protocol for missing children and young people is up to date and reflects statutory guidance. It makes links with CSE and other forms of vulnerability and with the procedure concerning children and young people missing from education.
169. In response to the large number of children looked after placed within Lincolnshire by other local authorities, the Board receives quarterly reports about the various screening and contact arrangements which are in place. These are designed to ensure that children placed in Lincolnshire are known to relevant organisations, and that they are safe. Following concerns being expressed by the Board Chair to the DCS about the safeguarding of residents within a private children's home, swift and protective action was taken by the local authority.
170. CSE work does not currently encompass the wider role played by other services in Lincolnshire, for example: licensing, taxis, hotels, and fast food outlets. The Board is aware of this and is developing its strategic approach to this.
171. The CSE risk assessment identified issues with the quality of data relating to children and young people at risk of experiencing CSE and the need to ensure that support services for the victims of CSE are effectively quantified or co-ordinated. Activity to address these issues is being progressed through the CSE action plan.
172. The Board provides ad hoc opportunities for children and young people to influence its work through the Learning by Listening initiative, for example, improving the availability of substance misuse information to young people and involving young people in training. The involvement of young people is not yet a consistent feature in LSCB-driven service improvements.
173. The LSCB largely identifies the need for service improvement through audit findings and learning from SCRs. A more systematic gathering of evidence of impact of service developments on practice would assist the LSCB to measure its effectiveness more accurately and consistently.

What the inspection judgements mean

The local authority

An **outstanding** local authority leads highly effective services that contribute to significantly improved outcomes for children and young people who need help and protection and care. Their progress exceeds expectations and is sustained over time.

A **good** local authority leads effective services that help, protect and care for children and young people and those who are looked after and care leavers have their welfare safeguarded and promoted.

In a local authority that **requires improvement**, there are no widespread or serious failures that create or leave children being harmed or at risk of harm. The welfare of looked after children is safeguarded and promoted. Minimum requirements are in place, however, the authority is not yet delivering good protection, help and care for children, young people and families.

A local authority that is **inadequate** is providing services where there are widespread or serious failures that create or leave children being harmed or at risk of harm or result in children looked after or care leavers not having their welfare safeguarded and promoted.

The LSCB

An **outstanding** LSCB is highly influential in improving the care and protection of children. Their evaluation of performance is exceptional and helps the local authority and its partners to understand the difference that services make and where they need to improve. The LSCB creates and fosters an effective learning culture.

An LSCB that is **good** coordinates the activity of statutory partners and monitors the effectiveness of local arrangements. Multi-agency training in the protection and care of children is effective and evaluated regularly for impact. The LSCB provides robust and rigorous evaluation and analysis of local performance that identifies areas for improvement and influences the planning and delivery of high-quality services.

An LSCB **requires improvement** if it does not yet demonstrate the characteristics of good.

An LSCB that is **inadequate** does not demonstrate that it has effective arrangements in place and the required skills to discharge its statutory functions. It does not understand the experiences of children and young people locally and fails to identify where improvements can be made.

Information about this inspection

Inspectors have looked closely at the experiences of children and young people who have needed or still need help and/or protection. This also includes children and young people who are looked after and young people who are leaving care and starting their lives as young adults.

Inspectors considered the quality of work and the difference adults make to the lives of children, young people and families. They read case files, watched how professional staff work with families and each other and discussed the effectiveness of help and care given to children and young people. Wherever possible, they talked to children, young people and their families. In addition the inspectors have tried to understand what the local authority knows about how well it is performing, how well it is doing and what difference it is making for the people who it is trying to help, protect and look after.

The inspection of the local authority was carried out under section 136 of the Education and Inspections Act 2006.

The review of the Local Safeguarding Children Board was carried out under section 15A of the Children Act 2004.

Ofsted produces this report of the inspection of local authority functions and the review of the local safeguarding children board under its power to combine reports in accordance with section 152 of the Education and Inspections Act 2006.

The inspection team consisted of Seven of Her Majesty's Inspectors (HMI) and three Associate Inspectors from Ofsted.

The inspection team

Lead inspector: Fiona Millns HMI

Deputy lead inspector: Carolyn Spray HMI

Team inspectors: Stephanie Murray HMI, Jansy Kelly HMI, Fiona Parker HMI, Marianick Ellender-Gele HMI, Lynn Radley HMI, Nick Stacy AI, Nancy Meehan AI and Paul Johnson AI.

Quality assurance manager: John Gregg Senior Her Majesty's Inspector.

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Open Report on behalf of Debbie Barnes, Executive Director for Children's Services

| | |
|------------|---|
| Report to: | Children and Young People Scrutiny Committee |
| Date: | 16 January 2015 |
| Subject: | Corporate Parenting Panel Update |

Summary:

The work of the Corporate Parenting Panel remains critical in promoting life chances and opportunities for vulnerable children, Looked After Children and care leavers. Members act as champions on behalf of these groups of children and young people. The Panel meets on a quarterly basis and includes representatives from looked after children and foster carers.

Through the presentation of reports, performance information, and Visiting Members responsibilities, the Panel scrutinise that the arrangements for the safety and welfare of Looked After Children and care leavers are in accordance with what every good parent would want for their own child.

It is agreed that the minutes of the Corporate Parenting Panel be presented to the Children and Young People Scrutiny Committee, and the draft minutes of the meeting held on 18th September 2014 are attached.

Actions Required:

The Children and Young People Scrutiny Committee is asked to note the work of the Corporate Parenting Panel and to consider the matters raised and addressed.

1. Background

The Panel meet quarterly and is continually evolving and is very pro-active in seeking information to inform Members about the quality of services provided by the Local Authority and partner agencies, as evidenced in the recording of the minutes.

2. Conclusion

The ongoing scrutiny process looking at how well we meet our respective responsibilities and the different aspects of a child and young person's needs is

pivotal to the work of the Corporate Parenting Panel. The attached minutes provide an account of the work undertaken since the previous Panel held on 5th June 2014.

3. Consultation

a) Policy Proofing Actions Required

n/a

4. Appendices

| | |
|---|--|
| These are listed below and attached at the back of the report | |
| Appendix A | Corporate Parenting Panel Minutes 18/09/2014 |

5. Background Papers

No background papers within Section 100D of the Local Government Act 1972 were used in the preparation of this report.

This report was written by Tara Jones, who can be contacted on 01522 552686 or tara.jones@lincolnshire.gov.uk.

**CORPORATE PARENTING PANEL
18 SEPTEMBER 2014**

PRESENT: COUNCILLOR D BRAILSFORD (CHAIRMAN)

Councillors A G Hagues, J R Hicks, J D Hough (Vice-Chairman), R J Hunter-Clarke, P J O'Connor and L Wootten.

Added Members: Mary-Beth Pepperdine (V4C The Children in Care Council).

Officers/invited guests in attendance: Karen Bailey (Looked After Children Educational Services Manager); Kieran Barnes (Virtual Head of Looked After Children); Clive Chambers (Barnardo's); Lee Crisp (Homes Manager, Spalding); Judith Gilbert (Democratic Services Officer); Jan Gunter (Consultant Nurse Safeguarding – NHS Lincolnshire); Samantha Harrison (Principal Performance Officer); Colin Hopkirk (Participation Officer); Laura Hyatt (Regulation 33 Officer); Tracy Johnson (Scrutiny Officer), Carolyn Knight (Acting Team Manager Independent Chairs); Janet Morris (Team Manager – Fostering Services North); Richard Porter (Principal Performance Officer) and Janice Spencer (Assistant Director Children's Safeguarding).

13. APOLOGIES FOR ABSENCE

Apologies for absence were received from Theresa Buhryn (Performance Development and Reviewing Manager); Jean Burbidge (Lincolnshire Community Health Services); Dave Clarke (Secure Unit Principal); Polly Coombes (Foster Carer); Sheridan Dodsworth (Children's Service Manager – SEND); Samantha Edwards (Lincolnshire Partnership NHS Foundation Trust); John Harris (Children's Service Manager Regulated – North and Fostering); Tara Jones (Children's Service Manager Regulated - South and Adoption); Kerry Mitchell (Barnardo's); Jinny Niven (Customer Relations and Complaints Manager) and Ted Normandale (National Youth Advocacy Service).

At this point in the meeting, the Chairman invited introductions from Kieran Barnes (Virtual Head of Looked After Children); Carolyn Knight (Acting Team Manager Independent Chairs) and Lee Crisp (Homes Manager, Spalding).

14. DECLARATIONS OF MEMBERS' INTERESTS

No declarations of Members' interests were made at this stage of the proceedings.

15. MINUTES OF THE MEETING HELD ON THE 5 JUNE 2014

RESOLVED

That the Minutes of the Meeting held on the 5 June 2014 were confirmed and signed by the Chairman as a correct record subject to the following amendment:

"the Panel was informed that the Independent Reviewing Officers would be reviewing each Looked After Child every six *months*".

The Panel also received confirmation that the Care Nurse would be recruited to undertake a wide range of duties as well as taking responsibility for the "Red and Blue" books.

16. V4C THE LOOKED AFTER CHILDREN COUNCIL QUARTERLY MINUTES AND WEB APPLICATION

The Participation Officer presented to the Panel Minutes from the V4C meetings held on 24 June and 22 July 2014.

The Panel was informed that young people felt it important that time be built into the FAB Awards which would give them an opportunity to chat and socialise with old friends.

The Panel was also informed that some members of the V4C group worked with Manchester Metropolitan University to design their own "Step Up" course which had been focussed on what it felt like to be a Looked After Child from a child's perspective. The young people also worked alongside Social Workers in order that the Social Workers had a greater understanding of the impact that their actions and decisions had on Looked After Children. The young people worked together in teams and voiced their concerns and their views on how they felt issues could be more appropriately addressed and resolved by Social Workers. It was felt that the quieter members of the Group joined in discussions enthusiastically. Members of the team had been invited to visit Manchester Metropolitan University again on 1 October 2014.

The Panel received reassurance that all Social Workers in Lincolnshire received regular training sessions and were receiving regular updates on how they were being perceived by Looked After Children.

It was noted that work was progressing with a new logo which was currently being designed by young people.

The Panel was informed that a newsletter was being designed which would be circulated to every Foster Carer in Lincolnshire. The newsletter would include information about the young people in their care and the staff currently looking after them.

(Councillor R J Hunter-Clarke joined the meeting at 10.25 pm)

The Panel was informed that work was ongoing with the Digital Engagement Team to develop a new Web Application which was expected to be launched by Christmas.

RESOLVED

That the reports be noted and Lincolnshire County Council ensure that formal responses be given to V4C on any issues raised by them.

17. LOOKED AFTER CHILDREN PERFORMANCE INDICATORS – SIX MONTHLY UPDATE – (JANUARY 2014 – JUNE 2014)

The Panel received Looked After Children Performance Indicators from January 2014 to June 2014.

The Panel was informed that the number of Looked After Children had increased to 628 in Lincolnshire and foster placements were becoming increasingly a choice for children entering the care system. The Panel received reassurance that performance targets were always carefully monitored and officers felt the current performance target to be very satisfactory.

The Panel was also informed that this quarter had shown a significant increase in the number of Looked After Children. This continued the increasing trend of the previous quarter's target. It was noted that the majority of children who were placed in foster care, and the number of carers available, had not kept pace with the increase in demand. It had not always been possible to identify the optimal match for each individual child and, as a result of this, placement moves had occurred. Furthermore, the Panel was informed that the service was also managing young people with increasingly complex needs. It was reported that there was much competition from independent foster carers in Lincolnshire and the Fostering Team had been given £300,000 to further develop a Recruitment Strategy to attract carers into the service. It was reported that 77 foster carers had been recruited last year and 44 foster carers had already been recruited this year. It was confirmed that if Looked After Children were living with family relatives then the family relatives would receive the same financial payment as foster carers.

The Panel was informed that the target for Looked After Children who had received an up-to-date health check reduced during the month of July. However, the target at the end of the year was still expected to be achieved despite this dip in July. Proposals had been made for the development of dedicated clinics, where all initial health assessments would be conducted by Paediatricians, which would improve the timeliness of assessments and improve the quality of the Health Plans for young people. It was confirmed that performance target information continued to be monitored on a weekly basis.

The Panel noted that the target for Looked After Children who had a Personal Education Plan was disappointing as the target had been narrowly missed. It was, however, noted that significant effort and resources had been applied to improve the number of completed Personal Education Plans along with an aim to improve the quality of these plans. The Panel was informed that generally Looked After Children

found the Personal Education Plans boring with too many repetitive questions as well as them being too time-consuming to complete. It was agreed that the Looked After Children Educational Services Manager should revisit the form and it be made more user-friendly.

Officers reported that they were aware of all Looked After Children who had mental health problems who were leaving care along with the challenges of finding suitable employment for them. It was also noted that some young asylum people were unable to find employment as they had no right to work in the United Kingdom.

RESOLVED

That the report be noted and the Personal Education Plans be revamped to ensure that they are more user-friendly.

18. CORPORATE PARENTING STRATEGY

Colin Hopkirk, Participation Officer, presented the Corporate Parenting Strategy for any final comments and sign-off by the Panel. The Panel was informed that comments had been received by V4C and a young people's version of the Strategy would also be produced. Colin was thanked for all his hard work in producing and delivering the Strategy and it was confirmed that he would take responsibility in ensuring the aims of the Strategy were adhered to.

The Panel voiced concerns as to the best way to promote the Corporate Parenting Strategy within Lincolnshire County Council. It was suggested that if possible the Corporate Parenting Strategy should form part of the Full Council Agenda in order to be able to target all Councillors who had a responsibility within the Strategy. It was noted, however, that the Corporate Parenting Strategy had formed part of a Councillor Development Session which was attended by eighteen Councillors who had received the Strategy very positively. It was felt that this should form part of any future Councillors' Induction training.

The Panel was informed that training would be available for Councillors who visited children's homes to ensure that any future visits they made were as successful as possible. It was felt that a residential staff member should also attend any future Councillor training as staff members were fully conversant with the young people they looked after. It was also suggested that training should be considered which highlighted the lifestyles of young people along with some of the issues which were faced by them.

RESOLVED

1. That any reference in the Corporate Parenting Strategy to Working Groups be changed to Committees.
2. A Corporate Parenting Strategy aimed at young people be produced and circulated to all partner agencies.
3. The Corporate Parenting Strategy be presented to the Children and Young People Scrutiny Committee on a yearly basis and to the Corporate Parenting Panel on a six monthly basis.

4. That the Corporate Parenting Strategy be circulated to all partner agencies.
5. That the possibility of the Corporate Parenting Strategy being presented to full Council be investigated.

19. DUKE OF EDINBURGH AWARDS AND LOOKED AFTER CHILDREN

The Panel was informed that 32 Looked After Children aged between 14 and 24 started the Duke of Edinburgh Awards between April 2012 – April 2014 and, out of the 32 who commenced, eleven young people completed the Awards. The Panel was informed that feedback from Looked After Children, who had completed the Awards, found that the Awards enhanced and strengthened their relationship with peers and that the Awards improved their confidence level.

The Panel agreed that the Duke of Edinburgh Awards should be included as part of the Looked After Children's Personal Education Plan. The Panel was informed that not all schools in Lincolnshire promoted the Duke of Edinburgh Awards and some schools were even over-subscribed for the Awards.

RESOLVED

1. That the report be noted and the Duke of Edinburgh Awards be included in the Looked After Children's Personal Education Plans in order to try to increase the participation rate of the Awards.
2. That the recording of information relating to the number of Looked After Children participating in the Awards be investigated.

20. VISITING MEMBERS' QUARTERLY REPORT AND VISITING MEMBER FEEDBACK

The Panel was informed that there were errors in the Log of Quarterly Visits to Children's Homes April 2014 – March 2015 as some visits which had taken place had not been recorded or had been recorded incorrectly. The Panel felt that one single point of contact would alleviate the errors which had previously occurred.

Councillor A G Hagues gave a verbal update to the Panel on his visit to 91 Eastgate, Sleaford, on the 26 August 2014. He reported that the children were in good spirits on his visit and were excited about their impending visit to the cinema. The Panel was informed that there was good interaction between the children and the staff and there was a general feeling of 91 Eastgate being a happy home. The visitors' log was completed on arrival and departure, the home was very clean and tidy and the building and grounds appeared to be in a good state of repair. The Panel was informed that the office accommodation appeared to be very cramped and there was little desk space for the staff to work comfortably.

RESOLVED

That Tracy Johnson, Scrutiny Officer, act as Co-ordinator to receive the Visiting Members' reports and that a Visiting Member be invited to give a

presentation on their visit to a Children's Home to the next meeting of the Corporate Parenting Panel.

21. BARNARDO'S LEAVING CARE SERVICE ANNUAL REPORT

The Panel received the Care Service Annual Report from Barnardo's who was commissioned by Lincolnshire County Council to deliver Leaving Care provision for all young people in Lincolnshire who were eligible as determined by the Children (Leaving Care) Act 2010.

The Panel was informed that most young people in care leave by the time they were 18, compared to their peers who stayed at home until their mid-20s. It was, however, noted that the Staying Put initiative, which had been piloted in Lincolnshire, was having a positive impact in enabling Looked After Children to remain living with foster carers beyond their 18th birthday where this was agreed to be in the young person's best interests.

The aims of the Leaving Care Service were to:-

- help care leavers achieve their full potential as they made the transition into adulthood;
- ensure care leavers had suitable accommodation and were well prepared for independent living;
- ensure that care leavers were in Education, Employment and Training and were able to financially support themselves without additional state benefits;
- support care leavers in being good citizens and making a positive contribution to society; and
- support care leavers in being good parents ensuring that they were supported in meeting their children's needs.

The Panel was informed that Barnardo's had commissioned training for some services in the use of "Five to Thrive", a model for promoting positive parenting messages. In recognition of the additional challenges that becoming a parent can have for young people, staff from the Leaving Care Service had been one of the first cohorts trained. It was also confirmed that the agreement referred to in the report regarding addressing barriers to young people accessing education or training had been implemented.

RESOLVED

That the report be noted.

22. BARNARDO'S BEYOND CARE CAMPAIGN – A GUIDE FOR COUNCILLORS ON CARE LEAVERS' ACCOMMODATION

The Panel received a briefing report informing them that Barnardo's was campaigning to improve the accommodation and support given to young people as they left care across the country.

The Panel noted that when young people left care, the local authority was responsible for helping them find somewhere safe and suitable to live. The Panel was informed that bed and breakfast accommodation was only used in an emergency situation in Lincolnshire.

RESOLVED

That the report be noted.

23. REGULATION 33 REPORTS – SIX MONTHLY SUMMARY – (FEBRUARY 2014 – JULY 2014)

The Panel received the Regulation 33 report which informed them that Health and Safety case records and disclosure checks were up-to-date. It was also noted that training was taking place to meet staff requirements and the need for development particularly with regard to the safety of young people.

The Panel was informed that managers and staff in homes had built excellent relationships with the young people they supported and they worked very hard to ensure that the care of the young people was paramount. The Panel noted that staff often worked extra hours to ensure that the young people were well looked after and the Panel received an example of this when a young person was in hospital on his birthday and staff arranged to visit him and hold a birthday picnic for him at the hospital.

It was noted that activities and days out were arranged on the preferences of the young people and the Panel was informed that the young people from Albion Street and Eastgate had been particularly engaged on the National Arts Award at Bronze level.

The Panel was informed that young people had engaged well with the National Arts Award at Bronze level in the Albion Street and Eastgate homes.

The Panel was also informed that the demand for short-term respite care at Strut House was oversubscribed and parents were encouraged to consider the Haven for short-term respite care.

RESOLVED

That the report be noted.

24. COMPLIMENTS, COMMENTS AND COMPLAINTS - SIX MONTHLY UPDATE – (JANUARY 2014 – JUNE 2014)

The Panel received a report informing them that four complaints had been received from children in Lincolnshire County Council care from 1 January 2014 to 30 June 2014. It was noted that one of these complaints had now been progressed to a Stage 2 complaint. No compliments or comments had been received from Looked After Children during this period.

As there were no officers in attendance to present the report, the Chairman asked for any comments the Panel had to be recorded and forwarded to the report writer.

These included:

- future reports should refer to children and young people and not just young people;
- future reports should indicate the length of time it had taken to resolve any complaints as well as the statutory timescales in order that the Panel was able to ascertain if complaints were resolved in statutory timescales;
- a comparison be made to the number of complaints received in previous years.

The Panel was informed that a new complaints leaflet was currently being formulated and the Panel was invited to comment on the versions which would be circulated to them in due course.

RESOLVED

That the report be noted and any future reports presented to the Panel to contain the additional information as outlined above.

(Councillor A G Hagues and Jan Hunter left the meeting at 12.55 pm)

25. FOSTERING SERVICE ANNUAL REPORT

The Panel received a report which informed them of the work of the Fostering Service in accordance with the requirements of the Care Standards Act 2000, Fostering Services 2011, and Fostering National Minimum Standards which provided key service performance and developments over the past twelve months.

The Panel was informed that Lincolnshire County Council had made an investment to recruit additional Foster Carers which proved to be challenging. A Recruitment Team was also being developed to undertake this work.

It was noted that there was now much demand for the "Kinship Care" scheme which involved the care of young people by carers known to them well but not necessarily related to the young person.

It was queried why there was no training provided to foster carers on the education of Looked After Children. It was noted that post approval training on education was offered once a term but was not included in the list within the Annual Report. It was also noted that there was other training provided which was not included in the list. The Panel requested that a comprehensive list of all training provided to foster carers be included in the Annual Report and emphasised the importance of Looked After Children being supported by foster carers in all their educational needs.

RESOLVED

That the report be noted and that a comprehensive list of all training provided to foster carers be included in future Annual Reports.

26. FOSTERING SERVICE STATEMENT OF PURPOSE

The Panel received a report informing them of the requirements of the Care Standards Act 2000, Fostering Services Regulations 2011 and the National Minimum Standards 2010. The report also provided a clear written Statement of Purpose which set out the aims and objectives of the Fostering Service and the facilities and services which it provided.

RESOLVED

That the report be noted and any comments the Panel wished to make to be sent directly to Janice Spencer, Assistant Director Children's Safeguarding, as soon as possible.

27. ADOPTION STATEMENT OF PURPOSE 2014

The Panel received a report informing them of the Adoption Service in accordance with the requirements of the Care Standards Act 2000, National Minimum Standards 2003, and the Adoption and Children Act 2002. The report set out the relevant performance information and identified the key developments within the service over the last twelve months.

RESOLVED

That the report be noted and any comments the Panel wished to make to be sent directly to Janice Spencer, Assistant Director Children's Safeguarding, as soon as possible.

28. CORPORATE PARENTING PANEL WORK PROGRAMME 2014/2015

The Scrutiny Officer introduced this item and it was agreed that Barnardo's Compliments and Complaints annual report be presented at the same meeting as the Compliments, Complaints and Comments annual report which would be received at the March 2015 meeting. It was agreed that a six monthly update on the Corporate Parenting Strategy would also be discussed at the March 2015 meeting.

RESOLVED

That the Work Programme presented be amended accordingly.

29. PROPOSED DATES FOR 2015 CORPORATE PARENTING PANEL MEETINGS

The Panel received and agreed proposed dates for the 2015 Corporate Parenting Panel Meetings.

RESOLVED

That the Corporate Parenting Panel meetings in 2015 be held on the following dates:

Thursday 12 March 2015 – 10 am

Thursday 11 June 2015 – 10 am

Thursday 10 September 2015 – 10 am

Thursday 10 December 2015 – 10 am

The Chairman closed the meeting at 1.15 pm.

Policy and Scrutiny

Open Report on behalf of Glen Garrod, Director of Adult Care

| | |
|------------|---|
| Report to: | Children and Young People Scrutiny Committee |
| Date: | 16 January 2015 |
| Subject: | All-Age Autism Strategy for Lincolnshire 2015 - 2018 |

Summary:

This report invites the Children and Young People Scrutiny Committee to consider a report on the All Age Autism Strategy for Lincolnshire 2015 – 2018 which is due to be considered by the Executive on 3 February 2015. The views of the Scrutiny Committee will be reported to the Executive as part of its consideration of this item.

Actions Required:

- (1) To consider the attached report and to determine whether the Committee supports the recommendation(s) to the Executive set out in the report.
- (2) To agree any additional comments to be passed to the Executive in relation to this item.

1. Background

The Executive is due to consider the report on the All Age Autism Strategy for Lincolnshire 2015 - 2018. The full report to the Executive is attached at Appendix 1 to this report.

2. Conclusion

Following consideration of the attached report, the Committee is requested to consider whether it supports the recommendation(s) in the report and whether it wishes to make any additional comments to the Executive. The Committee's views will be reported to the Executive.

3. Consultation

a) Policy Proofing Actions Required

Not applicable

4. Appendices

| | |
|--|---|
| These are listed below and attached at the back of the report. | |
| Appendix 1 | Report and Appendices to the Executive on All Age Autism Strategy for Lincolnshire 2015 - 2018. |

5. Background Papers

No background papers within Section 100D of the Local Government Act 1972 were used in the preparation of this report.

This report was written by Rob Barber, who can be contacted on 01522 555380 or robert.barber@lincolnshire.gov.uk.

Open Report on behalf of Glen Garrod, Director of Adult Care

| | |
|---------------------|---|
| Report to: | Executive |
| Date: | 03 February 2015 |
| Subject: | All-Age Autism Strategy for Lincolnshire 2015 - 2018 |
| Decision Reference: | I008262 |
| Key decision? | Yes |

Summary:

As a proactive development Adult Care and Children's Services, alongside the Lincolnshire Autism Partnership Board and other key stakeholders, have worked together to develop a joint strategy for Lincolnshire for people with autism of all ages.

The purpose of this strategy is to set out the strategic direction to ensure that people with autism in Lincolnshire are able to live fulfilling and rewarding lives within autism-friendly communities that understand their needs and make reasonable adjustments, so that there is access to and support from mainstream public services and wider community networks.

The draft All-Age Autism Strategy for Lincolnshire 2015 - 2018 has been produced following extensive consultation and engagement activity carried out during 2013 and 2014 with people with lived experience of autism, family members and carers, and multi-agency key stakeholders in Lincolnshire.

Recommendation(s):

That the Executive:

1. Approve the draft All-Age Autism Strategy for Lincolnshire 2015 - 2018 attached at Appendix A to this report.
2. Agree that the Lincolnshire Autism Partnership Board will monitor and oversee the delivery of the strategy and action plan.

Alternatives Considered:

1. Nationally the Government has introduced an adults only autism strategy and an option was to follow suit for Lincolnshire.

Reasons for Recommendation:

There is no autism strategy currently in existence for people in Lincolnshire.

Health and social care partners, alongside people with lived experience of autism, their carers and other key stakeholders consider that a strategy is essential to provide a strategic framework to develop autism services and improve the lives of people with autism in Lincolnshire.

1. Background

1.1 National Strategy

Fulfilling and rewarding lives, the Government's strategy for adults with autism in England, was published in 2010 with the following key aims;

- To help adults with autism to access the services they need easily and free of discrimination
- To improve diagnosis
- To increase awareness of autism across health, care and community services

A recent refresh of the national strategy, *Think Autism*, was published in 2014 and puts a focus on the need for more autism-friendly communities.

1.2 What is Autism?

Autism is a lifelong condition which can be very disabling. It is a spectrum disorder, which means everyone that has autism experiences it differently and is affected in different ways. There are some things that all people who have an autism spectrum disorder will have difficulties with, which include:

- Social Communication
- Social Interaction
- Social Imagination

People with an autism spectrum disorder often experience sensory difficulties such as over- or under-sensitivity to sounds, touch, tastes, smells, light or colours. It is also more likely that people who have an autism spectrum disorder will experience higher levels of stress than someone who does not have an autism spectrum disorder. This makes mental health problems more likely.

Many people with an autism spectrum disorder are able to live independent lives. Others may need some support or to access services to achieve their full potential. It is common to have accompanying learning disabilities and whilst with reasonable adjustments many people can access mainstream services, some people will require specialist support.

A study cited by the National Autistic Society suggests there are over 700,000 people in the UK with autism – more than 1 in 100 individuals. It is estimated that nearly 6,000 people in Lincolnshire have an autism spectrum disorder, a figure which is predicted to increase. By including people such as family members, carers, friends, professionals in health, social care and education, and other members of the community, the numbers affected by an autism spectrum disorder are much greater.

1.3 Lincolnshire's Approach

The Lincolnshire Autism Partnership was formed in 2010, following the publication of the national strategy, *Fulfilling and rewarding lives*. It was set up to advise on all aspects of implementation associated with national and local autism policy and is made up of people with autism, carers, representatives of community and voluntary groups and professionals from the statutory sectors.

In line with the national strategy, the original intention was to produce an adults' autism strategy for Lincolnshire and a 3-month public consultation was conducted in 2013 in order to help inform its development.

Having comprehensively evaluated all of the feedback from the consultation, a number of key themes arose. One area which received repeated discussion and focus was the transition from children's to adults' services. We recognise that transition is often a very difficult time for individuals with an autism spectrum disorder and as such it is critical that improvements are made to enable a more seamless service so that individuals feel sufficiently supported through the transition from children and young people to adult services.

With this in mind Lincolnshire took the proactive decision to develop an all-age autism strategy. A further engagement process commenced in 2014 conducted by the National Development Team for Inclusion (NDTi), which additionally incorporated themes and key stakeholders representing children and young people, as well as adults.

In addition, an independent review of the services in Lincolnshire for individuals with autism was jointly commissioned by the Lincolnshire Safeguarding Children's Board (LSCB) and the Children's Services directorate management team during 2014. The aim of this review, which was undertaken by the National Autistic Society, was to review the way in which agencies in Lincolnshire respond to children and young people who have autism. This review included a wide range of consultation with services, individuals with lived experience and carers, and the recommendations from the review have been incorporated within this draft strategy.

1.4 Our Vision

The national strategy for adults with autism, *Fulfilling and rewarding lives*, sets out the Government's overarching vision;

'All adults with autism are able to live fulfilling and rewarding lives within a society that accepts and understands them. They can get a diagnosis and access support if they need it, and they can depend on mainstream public services to treat them fairly as individuals, helping them make the most of their talents.'

The vision for Lincolnshire expands on the national vision by incorporating the need to achieve fulfilling and rewarding lives for people with autism of all ages. We want to build the capacity and understanding of our community and services to deliver the best possible experience for people living with autism and to enable them to fulfil their potential as local citizens.

Our vision is for a strategic model that has the lives of people living with autism and their family/carers at its heart. It takes into account common life events and domains, and the life journey from cradle to the grave, providing a set of clear points of possible support and intervention to help prevent problems and damaging crises, or to reduce the impact of the crisis if it cannot be avoided. It is a model that recognises everyone's fundamental needs, rights and aspirations.

1.5 Strategic Principles

The draft Strategy itself incorporates a proposal for 8 Strategic Principles that underpin the development and model for the Strategy. These are as follows;

- Equalities-based
- Reflects parity of esteem
- Strengths-based
- Person-centred
- Proactive and preventive
- Safe
- Local, mainstream and inclusive
- Ambitious but sustainable

The consultation of 2013 and the engagement process completed in 2014 with people with lived experience of autism and other stakeholders have highlighted key issues and emerging themes. This has resulted in the development of building blocks for action, which incorporate all of these themes, many of which are overlapping and have things in common, and will inform how and what we deliver locally for our citizens living with autism.

An action plan has been developed, which incorporates four key working groups to deliver the Autism Strategy, and has underpinning measurable objectives. It will be overseen by the Lincolnshire Autism Partnership Board, which will take a leadership role and be accountable for the delivery of the plan. Work is being undertaken to develop and strengthen the Lincolnshire Autism Partnership, including a review of the membership, to ensure that it is fit to meet this purpose.

1.6 Draft Strategy Consultation

As detailed earlier in this report, a 3-month public consultation was conducted in 2013, along with a series of engagement activities during the 2014. Additionally,

the independent review of autism services for children and young people in Lincolnshire, produced by the National Autistic Society, included a wide range of consultation with services, individuals with lived experience and carers. The feedback gathered from these exercises has been used to inform the draft strategy that has been developed.

Following the production of the draft All-Age Autism Strategy for Lincolnshire, a further consultation process commenced in early November 2014 to review the document and ensure that the strategy reflected the views and comments received through the consultation and engagement processes previously undertaken.

The draft strategy was made available to the public via the LCC website and an online questionnaire provided the opportunity for individuals to respond on the proposed 8 Strategic Principles and building blocks for action. Information was also circulated to all members of the Lincolnshire Autism Partnership, along with stakeholders who had participated in engagement events held during Spring/Summer 2014.

As part of the process, the draft strategy was presented to a number of key stakeholders from health, social care and partner organisations for review and comment at the following meetings:

- Adult Care Executive Departmental Management Team
- Children's Services Departmental Management Team
- Specialist Adult Services Delivery Board
- Women and Children's Delivery Board
- Joint Commissioning Board
- Corporate Management Board
- Health and Wellbeing Board
- Children and Young People Strategic Partnership
- Lincolnshire Children Safeguarding Board
- South West Lincolnshire CCG Governing Body
- East Lincolnshire CCG Governing Body
- West Lincolnshire CCG Executive Committee
- West Lincolnshire CCG Governing Body
- South Lincolnshire CCG Clinical Committee
- South Lincolnshire CCG Governing Body

The consultation concluded on 19 December 2014 and all feedback has been reviewed and, where necessary, the strategy has been amended accordingly.

1.7 Legal Implications

In 2010 the Government published the Adult Autism Strategy *Fulfilling and Rewarding Lives* and the statutory guidance that supported it. Following the release of *Think Autism* in 2014, which refreshed the national strategy, proposed revisions to the autism statutory guidance were submitted for consultation. This revised draft statutory guidance sets a clear direction for how health and social care can continue to implement the national autism strategy and to further improve

mainstream services to accelerate progress towards the vision of fulfilled and rewarding lives for people with autism.

The consultation on the draft statutory guidance ran from 7 November 2014 to 19 December 2014. In liaison with members of the Lincolnshire Autism Partnership, Commissioning Officers from both Lincolnshire County Council and the four CCG's in Lincolnshire have submitted a response to the consultation. In developing the All Age Autism Strategy for Lincolnshire the contents of the revised statutory guidance have been taken into account to ensure that we comply with all necessary requirements.

The Council's duty under the Equality Act 2010 needs to be taken into account when coming to a decision.

The Council must, in the exercise of its functions, have due regard to the need to:

- Eliminate discrimination, harassment, victimisation and any other conduct that is prohibited by or under the Equality Act 2010;
- Advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it;
- Foster good relations between persons who share a relevant protected characteristic and persons who do not share it: Equality Act 2010 section 149(1). The relevant protected characteristics are age; disability; gender reassignment; pregnancy and maternity; race; religion or belief; sex; sexual orientation: section 149(7).

Having due regard to the need to advance equality of opportunity involves having due regard, in particular, to the need to:

- Remove or minimise disadvantages suffered by persons who share a relevant protected characteristic that are connected to that characteristic;
- Take steps to meet the needs of persons who share a relevant protected characteristic that are different from the needs of persons who do not share it;
- Encourage persons who share a relevant protected characteristic to participate in public life or in any other activity in which participation by such persons is disproportionately low.
- The steps involved in meeting the needs of disabled persons that are different from the needs of persons who are not disabled include, in particular, steps to take account of disabled persons' disabilities.
- Having due regard to the need to foster good relations between persons who share a relevant protected characteristic and persons who do not share it involves having due regard, in particular, to the need to tackle prejudice, and promote understanding.

- Compliance with the duties in this section may involve treating some persons more favourably than others.

This duty cannot be delegated and must be discharged by the decision-maker. To discharge the statutory duty the decision-maker must analyse all the relevant material with the specific statutory obligations in mind. If a risk of adverse impact is identified consideration must be given to measures to avoid that impact as part of the decision making process.

In considering the Council's duty, an Impact Analysis was undertaken on the production of the autism strategy to address the potential for negative impact under each protected characteristic. This is a live document and will be amended as appropriate as the strategy and action plan is delivered.

The Impact Analysis identifies the following possible adverse effects on people with different protected characteristics are impacted differently:

- Failure of the strategy to deliver improved opportunities for people with autism
- Lack of resources or other factors may limit access to services
- Failure of the strategy to provide autism awareness training to health and social care staff
- People with multiple disabilities, including autism, might be disadvantaged if diagnostic services change
- Failure to diagnose at an early or appropriate time might have a negative effect on the individuals mental health or other aspects of their physical health

The strategy as such covers all individuals with autism regardless of their protected characteristic. It is clear, however, that the delivery of services to meet the needs of people with autism will have to be sensitive to the requirements of people with different protected characteristics. As the Action Plan is developed and moves towards delivery the Equality Act duties will be taken into account in the design of services.

Lincolnshire's Child Poverty Strategy is based on four strategic themes. This will provide the foundation for tackling child poverty and improving life chances of children, young people and their families in Lincolnshire:

- Economic poverty
- Poverty of access
- Poverty of aspiration
- Best use of resources

The All Age Autism Strategy for Lincolnshire does not directly address the issues of child poverty and contains no elements that would conflict with the child poverty strategy.

The Council must have regard to the Joint Strategic Needs Assessment (JSNA). The strategy addresses the need to raise awareness of autism and improve the diagnostic pathway. It also makes clear the need for better data recording and reporting processes. All improvements in data quality will assist needs analysis work, which will inform the JSNA.

The Joint Health and Wellbeing Strategy for Lincolnshire 2013 – 2018 aims to inform and influence decisions about health and social care services in Lincolnshire so that they are focused on the health and wellbeing needs of people in our county.

There are five main themes, with an additional theme of 'mental health' running throughout the document:

- Promoting healthier lifestyles
- Improve health and wellbeing of older people
- Delivering high quality systematic care for major causes of ill health and disability
- Improve health and social outcomes for children and reduce inequalities
- Tackling the social determinants of health

The key themes incorporated within the autism strategy align with and are consistent with many of the themes and cross-cutting issues running through the Health and Wellbeing Strategy for Lincolnshire.

There is an emphasis on ensuring that appropriate support is provided to people with autism and that accessibility to mainstream public services and all aspects of community life is available. This social inclusion will aid the development of healthier lifestyles for those people living with autism. Improvements in service provision will be developed, including a fundamental review of the pre and post diagnostic pathways, to ensure that high quality systematic care is delivered. The implementation of autism-friendly communities through increasing public awareness and understanding of autism will help promote equality for those people who have the condition. The proposed strategy also aims to address and include the needs of families and carers of people with autism, who need to have appropriate support themselves to provide the crucial role they undertake.

There are two other significant national policy drivers that affect the lives of children and adults with autism:

- The Children and Families Act (2014) introduces a system of support for children and young people with special educational needs from 0-25, focusing on outcomes, engagement and participation of parents and young people, joint commissioning, coordinated Education Health and Care (EHC) plans and personalisation
- The Care Act (2014) includes Local Authorities' duty to assess and address the needs of adults in need of care and support (including those transitioning from children's services) and their carers, promote wellbeing and provide preventative support, integration with NHS and information.

2. Conclusion

The vision for the All-Age Autism Strategy for Lincolnshire is ambitious. It challenges us to work together in partnership as commissioners and providers across a number of agencies in statutory and non-statutory services, with people and their families living with autism and with our community at large.

The strategy was developed through consultation, engagement and sharing ideas and experiences with key people in services and communities: commissioners and providers from health, social care, education, criminal justice, housing, employment and other care services in the statutory and voluntary sector. This process has highlighted the key issues that form the basis of the strategy and the approach has been underpinned by the eight strategic principles.

We have translated the key themes into a local offer and a clear action plan. The action plan incorporates four key strategic programmes to deliver the Autism Strategy, and has underpinning measurable objectives. It will be overseen by the Lincolnshire Autism Partnership Board, which will take a leadership role and be accountable for the delivery of the plan.

Subject to agreement, it is expected that the All-Age Autism Strategy for Lincolnshire 2015 – 2018 will be formally launched in the spring of 2015.

3. Legal Comments:

The Council has the power to adopt the proposed strategy. The report contains assurance that it has been developed by reference to statutory guidance.

The decision is consistent with the Policy Framework and within the remit of the Executive.

4. Resource Comments:

There are no direct financial implications arising from the acceptance of the recommendations in this report. In the event that implementation of the strategy does require additional finance in future this will need to be considered as part of the annual budget setting process.

5. Consultation

a) Has Local Member Been Consulted?

n/a

b) Has Executive Councillor Been Consulted?

Yes

c) Scrutiny Comments

The Children and Young People Scrutiny Committee will consider this report at its meeting on 16 January 2015. The Adults Scrutiny Committee will also consider this report at its meeting on 23 January 2015. Comments from these meetings will be presented to the Executive on 3 February 2015.

d) Policy Proofing Actions Required

n/a

6. Appendices

| | |
|---|--|
| These are listed below and attached at the back of the report | |
| Appendix A | Draft All-Age Autism Strategy for Lincolnshire 2015 - 2018 |

7. Background Papers

The following background papers as defined in the Local Government Act 1972 were relied upon in the writing of this report.

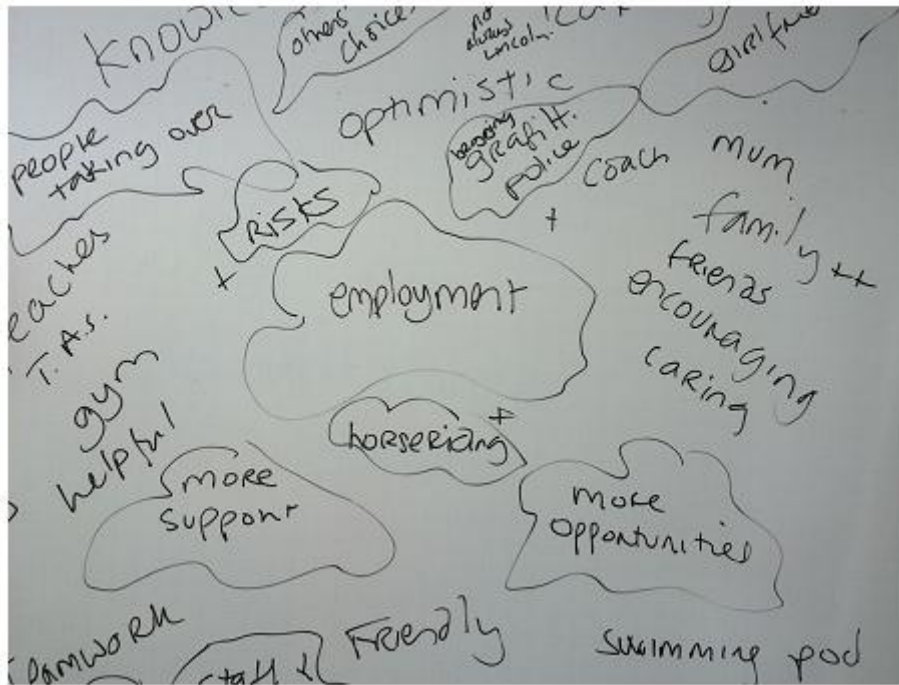
| Document title | Where the document can be viewed |
|--|---|
| Independent review of services for children and young people with autism in Lincolnshire | |
| Think Autism - Fulfilling and Rewarding Lives, the strategy for adults with autism in England: an update | https://www.gov.uk/government/publications/think-autism-an-update-to-the-government-adult-autism-strategy |

This report was written by Rob Barber, who can be contacted on 01522 555380 or robert.barber@lincolnshire.gov.uk.

Lincolnshire's All-Age Autism Strategy 2015-2018



Devised by Edana Minghella & Rich Watts at the National Development Team for Inclusion (NDTi) in collaboration with people living with autism, family carers and multi-agency key stakeholders in Lincolnshire.



Our support, our issues, our priorities – produced during engagement activity by people with autism in Lincolnshire



NHS
Lincolnshire East
Clinical Commissioning Group

NHS
Lincolnshire West
Clinical Commissioning Group

NHS
South Lincolnshire
Clinical Commissioning Group

NHS
South West Lincolnshire
Clinical Commissioning Group

Forewords

Councillor Bradwell – Executive Councillor for Adult Care, Health Services and Children's Services

We have an ambitious vision for Lincolnshire, which includes expanding on the national vision, to help people with autism fulfil their potential and lead fulfilling and rewarding lives. We want to build on our understanding of our communities and services to deliver the best possible experience for people living with autism.

We recognise that transition into adult services is often a very difficult time for those with an autism spectrum disorder. It is critical that improvements are made to enable a more seamless service, so that children and young people feel sufficiently supported as they progress through the life journey into adulthood and have continuing opportunities to access support if they need it, depend on mainstream public services to treat them fairly as individuals and help make the most of their talents. With this in mind we took the decision to develop an all-age autism strategy and we welcome as many public services, partner organisations and members of the community as possible to be involved in the delivery of the action plan.

Councillor Patricia Bradwell

Allan Kitt – Chief Officer, South West Lincolnshire CCG

One of the key achievements in the development of Lincolnshire's all-age autism strategy is the joined up approach to its development, which has included people with lived experience, carers, local authority, clinical commissioning groups and service providers. Autism can have an impact on so many areas of an individual's life that we needed to make sure the strategy reflected this.

As Lincolnshire moves towards a neighbourhood teams model through the Lincolnshire Health and Care Programme, a strategy with joint working and improving access to services at its core could not be more timely.

I look forward to the developments the strategy will bring, which will include the introduction of autism champions within all of our commissioned services, coproduced training packages and a strengthened Autism Partnership Board.

Allan Kitt

Sharon Jeffreys - Chair of the Lincolnshire Autism Partnership Board

As the newly appointed Chair of the Lincolnshire Autism Partnership Board I am both proud and excited by the proposed changes afoot within the Lincolnshire all-age autism strategy. The nature of an autism spectrum disorder is that everyone with a lived experience of it will experience their autism differently. We know that having autism can often be stressful and does in fact increase the likelihood of having mental health problems. However, we also know that some of the key aspects to having autism are extremely positive.

This means that the services and facilities throughout Lincolnshire need to have not only a good understanding of autism spectrum disorders, a flexible approach to making themselves accessible but also to be able to see the full potential and strengths that having autism can bring.

This strategy and the developments within the Autism Partnership Board will be instrumental in increasing and embedding a wider understanding of living with an autism spectrum disorder, including Asperger's, and I give my personal commitment to doing all that I can to champion the rights of individuals with an autism spectrum disorder to access services with reasonable adjustments as required.

Sharon Jeffreys

DRAFT

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1. Introduction

Fulfilling and rewarding lives, the Government's strategy for adults with autism in England, was published in 2010 with the following key aims;

- To help adults with autism to access the services they need easily and free of discrimination
- To improve diagnosis
- To increase awareness of autism across health, care and community services

Autism is a lifelong condition which can be very disabling. It is a spectrum disorder. This is because everyone that has autism experiences it differently and is affected in different ways. There are some things that all people who have an autism spectrum disorder will have difficulties with. These include:

- Social Communication
- Social Interaction
- Social Imagination

People with an autism spectrum disorder often experience sensory difficulties such as over- or under-sensitivity to sounds, touch, tastes, smells, light or colours. It is also more likely that people who have an autism spectrum disorder will experience higher levels of stress than someone who does not have an autism spectrum disorder. This makes mental health problems more likely.

Many people with an autism spectrum disorder are able to live independent lives. Others may need some support or to access services to achieve their full potential. It is common to have accompanying learning disabilities and whilst with reasonable adjustments many people can access mainstream services, some people will require specialist support.

A study cited by the National Autistic Society suggests there are over 700,000 people in the UK with autism – more than 1 in 100 individuals. In 2011, the Office for National Statistics estimated there were at least 623,000 people with autism living in the UK, many of whom will require access to mental health, learning disability and social care services at some point in their lives.

In response to the national strategy, along with the recent refresh, *Think Autism*, published in 2014, and taking into account the key findings from the National Autistic Society (2014) *Independent review of services for Children and Young People with Autism in Lincolnshire*, the decision was made to establish an All-Age Autism Strategy. This Strategy covers children, young people and adults living with autism in Lincolnshire (including those placed out of county) and their families/carers.

This strategy also applies to people who have autism alongside other conditions, for example a learning disability and/or mental health problem. The aims of this Strategy are:

- To share an ambitious model for promoting and enabling the best care, support, enablement and social inclusion of people with autism of all ages and their families / carers in Lincolnshire
- To inspire commissioners and providers in the local authority, health and non-statutory sectors to commission and deliver a better future for local people living with autism
- To ensure Lincolnshire reflects national policy and adheres to current legislation
- To ensure Lincolnshire uses resources efficiently and effectively

2. Local challenges

It is estimated that nearly 6,000 people in Lincolnshire have an autism spectrum disorder, a figure which is predicted to increase. By including people such as family members, carers, friends, professionals in health, social care and education, and other members of the community, the numbers affected by an autism spectrum disorder are much greater.

Determining the exact number of people living with an autism spectrum disorder in the county is extremely difficult, as very little data is available. A key issue is the gap in terms of estimated numbers of people with autism and the capacity of the NHS to offer diagnosis. It is estimated that around 50% of people with autism do not have a learning disability and many of these are at present unknown to the NHS or to the local authority. It is also recognised that there may be many people who are not disabled by their traits of autism spectrum disorder and so would not benefit from a diagnosis.

Until adequate data sets are developed, the Department of Health national prevalence study, published by the Projecting Adult Needs and Service Information Systems (PANSI), offers the most comprehensive guide to potential numbers. The total projected number of people in Lincolnshire with an autistic spectrum disorder aged 18-64, with equivalent data for England, published by PANSI shows the following:

| Year | 2012 | 2014 | 2016 | 2018 | 2020 |
|---|---------|---------|---------|---------|---------|
| Projected number 18-64 in Lincolnshire | 4,191 | 4,237 | 4,288 | 4,343 | 4,381 |
| Projected number 18-64 in England | 330,100 | 333,209 | 336,987 | 340,327 | 342,917 |

Source: Projecting Adult Needs and Service Information Systems (PANSI), 2013

In terms of those under 18 years of age, it is projected that there are 1737 living with an autism spectrum disorder. This is based on the national research indicating that 1.1% of the UK population has an autism spectrum disorder and applies this prevalence rate to the population of Lincolnshire using data from the Office for National Statistics population estimates for mid-2013.

3. The journey for Lincolnshire so far

The Lincolnshire Autism Partnership was formed in 2010, following the publication of the national strategy, *Fulfilling and rewarding lives*. It was set up to advise on all aspects of implementation associated with national and local autism policy and is made up of people with autism, carers, representatives of community and voluntary groups and professionals from the statutory sectors.

On 17 February 2012, Lincolnshire County Council and NHS Lincolnshire gave approval for the development of a countywide strategy for adults with autism.

Engagement with individuals who have lived experience and those who have accessed services is key to a successful strategy. The first stage in this was a 3-month public consultation, which was conducted at the beginning of 2013. Having comprehensively evaluated all of the feedback from the consultation a number of key themes arose. One area which received repeated discussion and focus was the transition from children's to adults' services. We recognise that transition is often a very difficult time for individuals with an autism spectrum disorder and as such it is critical that improvements are made to enable a more seamless service so that individuals feel sufficiently supported through the transition from children and young people to adult services.

In 2014 an independent review of the services in Lincolnshire for individuals with autism was jointly commissioned by the Lincolnshire Safeguarding Children's Board (LSCB) and the Children's Services directorate management team. The aim of this review, which was undertaken by the National Autistic Society, was to review the way in which agencies in Lincolnshire respond to children and young people who have autism. This review included a wide range on consultation with services, individuals with lived experience and carers, the recommendations from the review have been incorporated within the action plan section of this strategy.

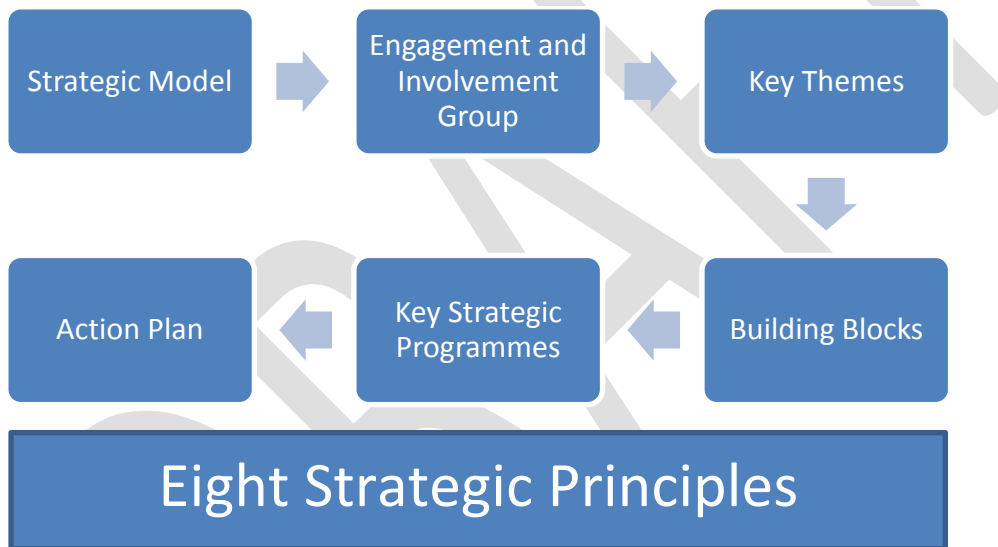
With this in mind Lincolnshire took the proactive decision to develop an all-age autism strategy. The introduction of the Children and Families Act (2014) highlights the need to consider the difficulty transition causes, as the legislation includes support for children and young people with special education needs up to the age of 25. We know that it is important for transition for children and young people with complex needs to be individualised, and that increasing awareness and knowledge of autism will help ensure that all services know this to be the case.

A Head of Commissioning for Autism has been appointed within Lincolnshire. Sharon Jeffreys, who has recently commenced in post, is an autism diagnostic practitioner who previously worked as a Nurse Consultant specialising in autism within both mental health and learning disability service provision.

A further engagement process commenced in 2014 conducted by the National Development Team for Inclusion (NDTi), which additionally incorporated themes and key stakeholders representing children and young people, as well as adults. This included two engagement events (held in Grantham and Lincoln) for people with lived experience of autism, family carers and multi-agency stakeholders. Specific engagement was targeted with Health Leads from each of the four CCG's within Lincolnshire and with officers from Children's Services at Lincolnshire County Council.

The key themes and findings from the *Independent review of services for Children and Young People with Autism in Lincolnshire*, which include a breadth of engagement, have also been incorporated within the vision and development of the strategy. Additionally, an Autism Strategy Involvement Group was established consisting of a variety of people with lived experience of autism or a family member of someone with autism. This strategy has, therefore, been devised in collaboration with a host of key stakeholders.

Figure 1: Development of the Strategy



A number of actions in response to the national strategy are already underway or have in fact already been implemented. Some of these are detailed below. These will be built upon further as the action plan for Lincolnshire's All-Age Autism Strategy is delivered.

What we have achieved so far and how it links to our key strategic programmes:

| What We Did | Key Strategic Programme |
|--|---|
| There are Annual Lincolnshire Conferences with a key focus on Autism. The engagement events highlighted these as a positive opportunity for parents, carers and professionals to learn together | Awareness raising and training |
| <p>The <i>Independent review of services for Children and Young People with Autism in Lincolnshire</i> highlighted some teams and organisations whose work has been highly regarded within the engagement process. These include:</p> <ul style="list-style-type: none"> - Early Support and Care Coordination - Pathfinder and Outreach Team (Social and Communication including Autism) - Parent Programmes - Action for Children Services (particularly their short breaks service) | Service Provision Awareness raising and Training |
| Children's Services Learning and Development Team are delivering the Cygnet training for practitioners, a two day course delivered four times a year | Awareness raising and training |
| Education Psychology Service and Health are delivering a two day generic autism course for parents/carers and practitioners, this has been delivered three times during 2014 | Awareness raising and training |
| Schools can access training through the educational psychology provision or pathfinder outreach team on request | Awareness raising and training |
| Some teams have commissioned their own one-off autism training, for example fostering, short breaks, public protection unit (police) | Awareness raising and training |
| GP's attended a regional training event in May 2012 aimed at improving access to primary health care services for adults with autism. Work is underway to incorporate autism into the monitoring of treatment and co-morbidity by GP practices | Awareness raising and training |
| Improved diagnostic services were piloted by Lincolnshire Partnership NHS Foundation Trust for an 18 month period to October 2013 | Service provision |
| A 3-month public consultation was completed at the beginning of 2013 to gain feedback from key stakeholders to help inform proposals for an Adults Autism Strategy for Lincolnshire | Involvement and collaboration with people with lived experience and carers at every stage |
| Lincolnshire County Council commissioned a series of awareness-raising sessions for staff across health and social care and provides training and e-learning materials for partner agencies | Awareness raising and training |

| | |
|--|---|
| Basic autism awareness is now part of mandatory training provided to mental health services | Awareness raising and training |
| Following an evaluation of the proposed Adults Autism Strategy, it was agreed that this would be adapted into an All-Age Autism Strategy and further engagement work has been conducted with key stakeholders during 2014 to help formulate the Strategy | Involvement and collaboration with people with lived experience and carers at every stage |
| A booklet of top tips for GPs for diagnosing, supporting and meeting the needs of people on the autistic spectrum has been developed and distributed to GP surgeries throughout the county | Awareness raising and training |
| Autism has been specifically defined as a key element to the role of one of the heads of commissioning in Lincolnshire. The person appointed to this role has previously worked as an autism specialist practitioner and has lots of experience of developing services for and working with people who have an autism spectrum disorder. We feel that this demonstrates the seriousness with which autism has been prioritised in Lincolnshire | Service provision |

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4. Our vision

The national strategy for adults with autism, *Fulfilling and rewarding lives*, sets out the Government's overarching vision;

'All adults with autism are able to live fulfilling and rewarding lives within a society that accepts and understands them. They can get a diagnosis and access support if they need it, and they can depend on mainstream public services to treat them fairly as individuals, helping them make the most of their talents.'

We have an ambitious vision for Lincolnshire, which includes expanding on the national vision to achieve fulfilling and rewarding lives for people with autism of all ages. We want to build the capacity and understanding of our community and services to deliver the best possible experience for people living with autism and to enable them to fulfil their potential as local citizens.

Our vision is for a strategic model that has the lives of people living with autism and their family/carers at its heart. It takes into account common life events and domains, and the life journey from cradle to the grave, providing a set of clear points of possible support and intervention to help prevent problems and damaging crises, or to reduce the impact of the crisis if it cannot be avoided. It is a model that recognises everyone's fundamental needs, rights and aspirations and features a number of critical building blocks, all underpinned by eight core principles, as shown in Figure 3: Our strategic principles.

Figure 2: Our strategic model



The vision is as challenging as it is ambitious. It challenges us to work together in partnership with each other as commissioners and providers across a number of agencies in statutory and non-statutory services, with people and their families living with autism and with our community at large.

This strategy was developed through consultation, engagement and sharing ideas and experiences with key people in services and communities: commissioners and providers from health, social care, education, criminal justice, housing, employment and other care services in the statutory and voluntary sector. Most significantly, an Autism Strategy Involvement Group, composed of a wide variety of people with autism or with a family member with autism, was set up expressly to support the development of the strategy.

5. Our strategic principles

Eight strategic principles underpin the strategy and are critical to understanding it. These principles also operate as a template to help us implement our action plan. The principles are shown below.

Figure 3: Our strategic principles



Each one of these principles has a critical significance in the development, implementation and evaluation of the strategy. However, it is acknowledged that reasonable adjustments will be key to making this meaningful. These are explored in more detail below.

Strategic Principle 1: Equalities-based

- People with autism have the same rights to access available services and opportunities as anyone else in the county
- People with autism have the same rights as everyone else for housing, employment, education, training, money, meaningful activity, health and wellbeing and relationships

- All citizens with autism, regardless of their ability or disability, age, gender ethnicity, sexuality, or faith are entitled to equal access to services

Strategic Principle 2: Reflects parity of esteem

- People with autism and their families have access to services to enable both physical and mental wellbeing
- If people with autism become unwell their mental health problems and/or learning disability needs are treated on a par with physical health problems and needs

Strategic Principle 3: Strengths-based

- People with autism are citizens with qualities, strengths, gifts, skills and capabilities to offer to the community.
- Service development, improvement, delivery and training will be enhanced and improved with the contributions of people living with autism.

Strategic Principle 4: Person-centred

- Our approach will be person-centred, both for people living with autism and for families
- Everyone is unique; services will be tailored to need, preferences and aspirations and focused on person-centred outcomes
- The autistic spectrum is itself diverse and there is a wide variety of issues, needs, capabilities, etc. within it
- The person with autism has a right to their own voice, needs, wishes and preferences and with appropriate help to do so, if necessary, through access to advocacy for those that meet the respective eligibility criteria
- Families' and carers' needs and aspirations must be taken into account
- Families and carers are a valuable resource and support for people with autism
- Families and carers should be seen as partners in the provision of care

Strategic Principle 5: Proactive and preventive

- The life course presents a natural and relatively predictable journey to enable key support to be provided in a timely and proactive manner, to anticipate difficulties, prevent crises and prevent issues early on leading to further problems later in life
- Early intervention is essential, with or without a formal diagnosis
- Services will be geared to understanding current needs, thinking ahead, anticipating change, and planning for the future

Strategic Principle 6: Safe

- Safeguarding children and adults who may be vulnerable is a priority in Lincolnshire

- This includes protecting people with autism and their carers within Lincolnshire or placed out of county
- Children and young people with autism have the right to thrive in school and at home without fear of bullying
- Community safety is a key issue for people living with autism
- Safety and risks must be balanced against the desire for independence of each individual
- Independent advocacy, including peer advocacy, is a key way of ensuring safety and support for people living with autism who meet the respective eligibility criteria to receive this service

Strategic Principle 7: Local, mainstream and inclusive:

- Services should be mainstream and local wherever possible
- Specialist education support should be available to children and young people throughout their education, taking into account the particular requirements of young people living with autism (such as need for consistency) to enable them to thrive in and contribute to mainstream education where possible
- Mainstream health services, including primary care, should be accessible to all, including those living with autism
- Specialist health services should be available at times of greatest need, with a clear focus, remit and timescale
- Specialist health and social care services, if needed, should be provided close to home where possible
- Services need to ensure they make reasonable adjustments to enable people with autism to be heard, contribute and benefit from universal health, education and care services

Strategic Principle 8: Ambitious but sustainable

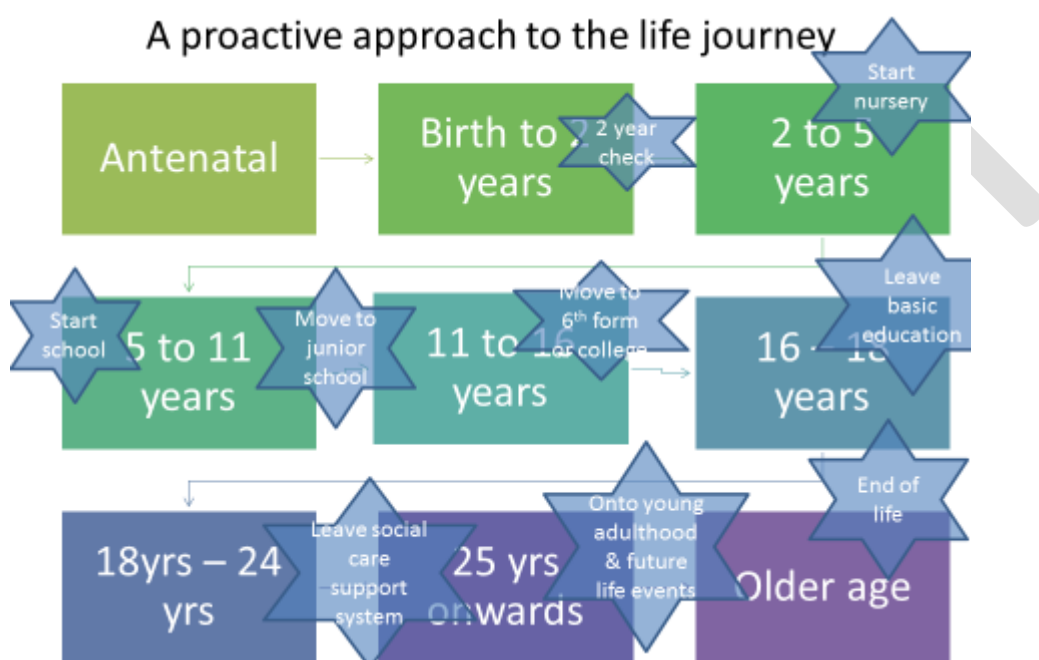
- Lincolnshire's Strategy aims to embrace the vision within the national strategy but to go beyond it by providing fulfilling and rewarding lives for people with autism of all ages. We want Lincolnshire to be the best county in the country for people living with autism, who will have the opportunity to co-produce local policy and practice and be welcomed as active members of our community
- We will make sure our approach to autism is forward thinking and sustainable and planned with forthcoming policy and legislation in mind
- Sustainability includes embedding change through training and awareness raising, that will be co-produced and co-delivered by people living with autism
- Sustainability also includes building on existing good practice and positive services and ensuring they are fit for the future

6. The life journey: a proactive approach

A central part of our strategy is the concept of the life journey. Although everyone is an individual, there is some predictability to the life journey and the events that act as markers of change along the way.

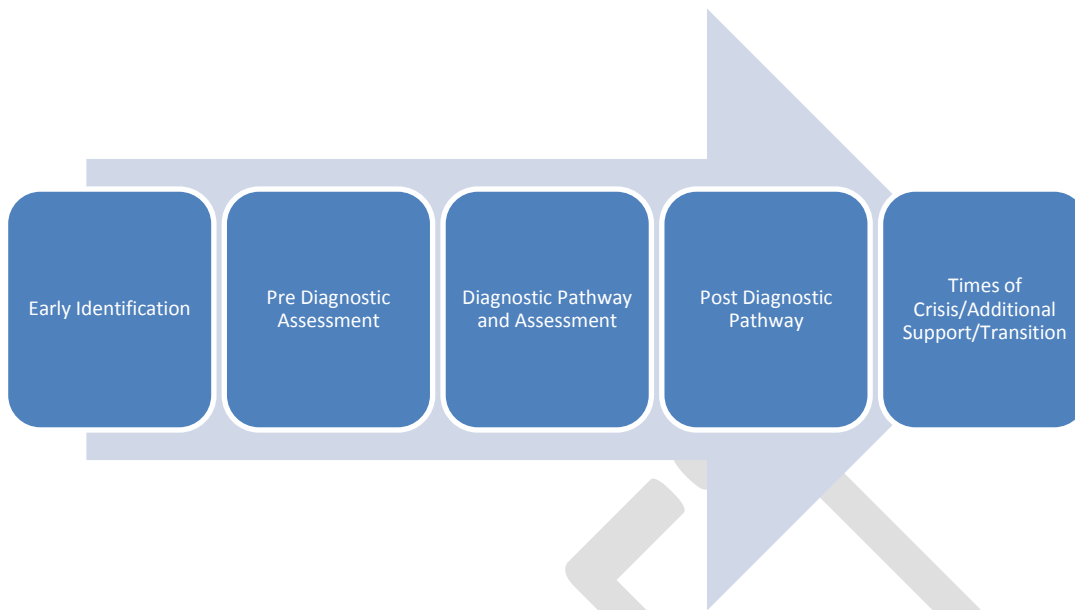
Taking a life journey approach allows us to anticipate possible hurdles, support families through potentially difficult periods, work proactively to prevent problems getting worse and becoming crises. Transitional moments identified in the life journey are opportunities to provide help and support and target resources to times that are likely to represent most need.

Figure 4: The life journey with transitional moments



Reflecting *Think Autism*, at the core of the strategy is the person with autism (and their family / carers) and their life journey, presenting windows of opportunity to provide the “right support at the right time”, proactively and preventively.

Figure 5: The Autism Journey



As mentioned throughout the strategy, how an autism spectrum is experienced and impacts on an individual can be very varied. It is therefore really important that individuals can access the right support at the right time for them. This means that the autism journey runs alongside the life journey shown in figure 4 and can occur at any stage of the transitional moments described.

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7. Existing service in place across Lincolnshire for Autism Spectrum Disorder

One of the key messages from the engagement activity was that many individuals and their families had difficulty in accessing services. All services have a legal requirement to make reasonable adjustments for those who require it. This includes reasonable adjustments for individuals with an autism spectrum disorder. One of the aims of this strategy is to work towards services being easily accessible for people with an autism spectrum disorder.

We want to work closely with primary care services including GP's and mainstream health services to promote accessibility for all and raise awareness of autism. We aim to ensure involvement from education within our action plan and to have representation from schools and colleges within the Autism Partnership Board.

Mental health and learning disability services will need to ensure that they are making reasonable adjustments for people with autism. We recognise that this will only be possible if all services have autism on their agenda and if the awareness and profile of autism is high. One of the key roles of this strategy and the Autism Partnership Board will be to make sure all services are aware of their responsibilities around people with autism and ensure that the voice of those with lived experience is heard.

The annual autism conferences were highlighted within engagement events as an opportunity for joint learning across those who access and provide services. Although, it was acknowledged that resources to enable to access this were sometimes difficult for some agencies. The *Independent review of services for Children and Young People with Autism in Lincolnshire* recommended an increase in events such as this.

The local authority and Clinical Commissioning Groups in Lincolnshire are in the process of developing an 'Expert by Experience Practitioner' to lead by example and promote co-production at every stage of the commissioning cycle. If approved, this role will be instrumental in the promotion and awareness raising of the autism strategy and the delivery and monitoring of the action plan.

The table in Appendix C details a selection of the current autism service provision in Lincolnshire across health, social care, provider and voluntary sectors. Please note that this is not a definitive list and is the starting point to maintaining a live document of service provision that is both accessible and meaningful for people with autism and their families.

8. Action plan and developing local offer

The consultation and engagement process completed with people with lived experience of autism and other stakeholders has highlighted the key issues that form the basis of our Strategy. Details of the aspirations identified by key stakeholders through this piece of work and the emerging themes are detailed in Appendix B. This has resulted in the development of building blocks for action, which incorporate all of these themes, many of which are overlapping and have things in common, and will inform how and what we deliver locally for our citizens living with autism. The approach is underpinned by our eight strategic principles.

Figure 6: Building blocks for action



We have translated our building blocks into a local offer and a clear action plan. The action plan incorporates four key strategic programmes to deliver the Autism Strategy, and has underpinning measurable objectives. It will be overseen by the Autism Partnership Board, which will take a leadership role and be accountable for the delivery of the plan.

Figure 7: Our four key strategic programmes to deliver the Autism Strategy



A key facet to the action plan for delivery of the strategy will be to establish working groups for each of these four strategic programmes to push the agenda forward in each specific area. An appropriate Lead for each programme will need to be assigned, along with key stakeholders who can provide the necessary skills and knowledge to help deliver the agreed actions. For each of the four working groups we will establish the following:

- An agreed agenda and set of outcomes for each working group to be structured utilising the strategic model
- Terms of Reference that will include the 8 strategic principles
- Updates from each working group will be fed into the Autism Partnership Board, who will oversee progress and delivery of the overall Strategy and Action Plan

Examples of what these four working groups will focus on are provided in more detail below.

Awareness raising and training

We will develop a tiered programme of awareness-raising and training that will be co-developed and co-delivered with people with lived experience of autism. Target audiences with clear learning outcomes will be identified.

In line with *Think Autism*, awareness training will be offered beyond 'services' and extend into communities to build and strengthen community capacity to support people with autism. This will link in with our development of autism-friendly communities. Equality and diversity training will be integrated into our awareness and training programme. In line with the *Independent review of services for Children and Young People with Autism in Lincolnshire* we will ensure that this also includes awareness raising around the higher end of the autism spectrum (including Asperger's Syndrome).

We propose to seek funding and/or sponsorship to develop community awareness training and provide support opportunities for the community, including employers, education, criminal justice system, clubs and cinemas and universal services, such as banks and public transport to help create autism friendly communities.

Involvement and collaboration with people with lived experience and carers at every stage

We propose to build on and strengthen the existing Autism Partnership Board. We aim to do this by:

- Broadening the remit to include children and adults
- Reviewing and widening the membership to include partners from children's services, education, paediatric, GP's and other clinicians, criminal justice (including police and probation) and other relevant colleagues and ensuring there is senior representation regularly in attendance
- Increasing membership of people with autism and inviting young people with autism to join the Board
- Alternating the time and venue of the Board to give more opportunities for members to attend
- Reviewing the terms of reference in order to focus the Autism Partnership Board on being accountable for delivering Lincolnshire's Autism Strategy and its key programmes.

We propose to ensure that people with lived experience and carers are involved at each stage of service development, delivery and review. This may include for example:

- Recruitment
- Training
- Service delivery
- Outcome measurement
- Service user and carer feedback

Data systems and information gathering

We will develop improved data systems across health, mental health and social care to ensure we capture the right information to enable commissioners and providers to understand needs, service use and costs.

We will establish a partnership between Public Health, social care, primary and secondary healthcare and local groups to develop better ways of recording and collecting data specified here.

Service provision

We will carry out a service review to identify strengths, gaps, overlaps and areas for development, looking at services for people with autism and for carers and families.

We anticipate that the service review will enable us to see the priorities for development of service provision, which is likely to include pathways for:

- Diagnostic assessment
- Post diagnostic support
- Access to services when needed (such as health, social care, times of crisis)
- Access to support for carers
- Specific key areas such as sleep or sensory difficulties
- Transition from children and young people to adult services

We will develop a central information hub for people with autism to provide information and advice about autism and local service availability, in a variety of media and formats and co-produced with people living with autism.

We recognise the geographical challenges in ensuring access to services for all who require them across Lincolnshire, and that pathways need to consider this challenge so that there is equity across the county.

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9. Lincolnshire's All-Age Autism Strategy – Initial Action Plan

| Task | Timescale | Key Strategic Programme |
|---|----------------|---|
| Establish working groups for each of the four key strategic programmes, to include the following; <ul style="list-style-type: none"> • Appoint a working group Lead • Appoint working group members with appropriate interest/skills/knowledge • Establish Terms of Reference • Each working group will draw up their own specific agenda and agreed outcomes | April 2015 | All |
| Strengthen the Autism Partnership Board to ensure that it is fit for purpose in leading on and overseeing the implementation of Lincolnshire's All-Age Autism Strategy. This includes <ul style="list-style-type: none"> • Ensuring consistent representation from key stakeholders • Ensuring additional representation from schools and clinical services • A re-launch of the Autism Partnership Board to commence in 2015. This will aim to model coordinated working across services | April 2015 | Involvement and collaboration with people with lived experience and carers at every stage |
| In line with 'Transforming Care' all people with autism admitted to hospital will have a review to assure that they need to be in hospital and that: <ul style="list-style-type: none"> • they are safe • their care needs are being met • future planning is in place | April 2015 | Service provision |
| Undertake an autism awareness and training needs analysis to: <ul style="list-style-type: none"> • provide a baseline to monitor progress and development • strengthen training expectations and opportunities across health, social care and partner agencies | July 2015 | Awareness raising and training |
| Provide basic autism awareness as part of mandatory training to mental health and physical health services. Develop a range of training opportunities that local employers can access or purchase for their workforce and to provide training materials for carers and other stakeholders. | September 2015 | Awareness raising and training |

| | | |
|--|----------------|---|
| <p>We aim to promote an autism-friendly society in which the community and all public services are inclusive of people with autism.</p> <p>This will include a review of all service specifications that we commission to ensure that they are fit for purpose for people with autism.</p> <p>This will enable us to identify further pathway development within all services as required.</p> | September 2015 | Service provision |
| <p>Work towards the development of shared health, education and social care assessments and accompanying shared documentation in place for people with autism.</p> | March 2016 | Service provision |
| <p>We will aim to agree mechanisms for pooled budgets for Specialist Adult Services to facilitate integrated health and social care for people with autism.</p> | March 2016 | Service provision |
| <p>Pathways:</p> <ul style="list-style-type: none"> • Introduce an efficient diagnostic and post diagnostic pathway for children and adults • Pathways to recognise that the earlier the diagnosis the better for the person • Pathway to be fast tracked for adults to avoid lengthy and costly processes and long waiting times • The pathway will be co-designed by a multi-disciplinary team and people living with autism | March 2016 | Service provision |
| <p>Our ambition is to promote community networks and the wide range of support that people with lived experience and their carers can provide to each other. This is likely to be an outcome of the transformation of the Autism Partnership Board.</p> | March 2016 | Service provision |
| <p>We will work with existing information sources to develop a local information hub where families and people with autism can access advice and information about autism and local autism services and other services that they may require.</p> | March 2016 | Service provision |
| <p>Introduce autism champions within every local school who will work together with children and young people with autism and their families to:</p> <ul style="list-style-type: none"> • create autism-friendly environments • tackle bullying • increase social inclusion • support and champion the talents and | March 2016 | Involvement and collaboration with people with lived experience and carers at every stage |

| | | |
|--|------------|---|
| contributions of people with autism | | |
| <p>Introduce autism champions within each Neighbourhood Team who will work together with people with autism and their families to:</p> <ul style="list-style-type: none"> • create autism-friendly environments • tackle bullying • increase social inclusion • support and champion the talents and contributions of people with autism | March 2016 | Involvement and collaboration with people with lived experience and carers at every stage |
| All the services that we commission will be expected to identify a local autism champion. | March 2016 | Involvement and collaboration with people with lived experience and carers at every stage |
| Establish integrated information and intelligence across Adult and Children's Services enabling us to know and understand our local population and their care needs and pathways and local spend. | March 2016 | Data systems and information gathering |
| Identify key partners within Public Health, social care, primary and secondary healthcare and local groups to develop better ways of recording and collecting data. | March 2016 | Data systems and information gathering |
| Develop a range of measures which will enable us to evaluate the impact of our strategy for people living with autism in our communities. | March 2016 | All |
| Ensure that mental health services are accessible to individuals with autism, where eligibility criteria is met and that reasonable adjustments are made to enable this. This will include clarifying eligibility criteria's within mental health services and guidance for referrers so that individuals are not passed from service to service. | March 2016 | All |
| Ensure that physical health services are accessible to individuals with autism, where eligibility criteria is met and that reasonable adjustments are made to enable this. This will include clarifying eligibility criteria's within physical health services and guidance for referrers so that individuals are not passed from service to service. | March 2016 | All |
| Review the current transitions pathway from children and young people to adult services to ensure reasonable adjustments and accessibility for people with autism, working collaboratively with Children's and Adults Services. | March 2016 | Service provision |

| | | |
|--|--|---------------------------------------|
| <p>Develop an ongoing local autism friendly community, demonstrated in a range of ways such as shops displaying autism friendly signs, autism friendly cinema screenings , local autism champions in key universal services (banks, libraries, CJS, police stations, public transport, taxi services, sports and leisure centres, district councils, primary care services).</p> | <p>March 2018 (We will report update on progress annually)</p> | <p>Awareness raising and training</p> |
| <p>The progress of the strategy and action plan will be reviewed annually by the Autism Partnership Board and updates made available to all relevant stakeholders.</p> | <p>Annually</p> | <p>All</p> |

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Acknowledgements

Following the engagement activity led by the National Development Team for Inclusion (NDTi), they have requested acknowledgements and special thanks to the following:

- All individuals and organisations who have been involved in the engagement events during 2014 to help inform the adaptations to produce Lincolnshire's All-Age Autism Strategy
- All the members of the Autism Strategy Involvement Group (actual and virtual) whose sharing of their experience and ideas from the position of lived experience of autism has had a major impact on this work
- Debbie Marshall
- Andrew Wells

The owners of this strategy would like to thank the following for their hard work and dedication to the development of this strategy and innovative thinking that has formed the action plan:

- Everyone who participated in the public consultation conducted in 2013 for the original Adults Autism Strategy for Lincolnshire that was proposed for implementation
- All members of the Autism Partnership Board

Special thanks to Edana Minghella and Rich Watts at the National Development Team for Inclusion for capturing the aspirations and vision of people living with autism, family carers and multi-agency key stakeholders in Lincolnshire, which forms the basis of this strategy.

Appendix A: Policy Drivers

The following are the key, current national policy drivers that form the framework for autism in England.

The National Autism Strategy *Fulfilling and Rewarding Lives* (2010) was refreshed in 2014 with the publication of *Think Autism*, and which will be supported by a Code of Practice, due to be published in early 2015. Both apply to adults with autism.

Key actions and challenges from both include:

- Increasing awareness and understanding in services and in the community
- Developing timely diagnostic pathways
- Increasing access to mainstream services
- Building local capacity and capability
- Improving access to work
- Improving social inclusion
- Listening to the views and aspirations of people living with autism.

For children, a Multidisciplinary National Autism Plan was introduced in 2003 to improve assessment, diagnosis and interventions for children.

The NICE guideline of 2013 focuses on developing early recognition, referral and diagnosis of children and young people, through a local pathway overseen by a multi-agency board. The guideline includes recommendations regarding, for example, data collection and audit of the autism pathway.

There are two other significant national policy drivers that affect the lives of children and adults with autism:

- The Children and Families Act (2014) introduces a system of support for children and young people with special educational needs from 0-25, focusing on outcomes, engagement and participation of parents and young people, joint commissioning, coordinated Education Health and Care (EHC) plans and personalisation
- The Care Act (2014) includes Local Authorities' duty to assess and address the needs of adults in need of care and support (including those transitioning from children's services) and their carers, promote wellbeing and provide preventative support, integration with NHS and information.

Appendix B: Aspirations, Key Themes and Building Blocks for Action

1. Person-centred aspirations

Working from a person's perspective rather than from a service's perspective we co-devised person-centred outcomes with people living with autism and their families, as well as practitioners. These outcomes are what people in Lincolnshire want their all-age autism strategy to achieve, and so are captured in the first person 'I' for the person with autism or a parent/carer.

The person-centred outcomes are of two kinds: outcomes at key life stages during childhood and young adulthood, and then outcomes in key life areas when someone is an adult.

Antenatal and birth

- As a parent, my increased chances of having a child with additional needs (for example due to premature birth, low birth weight or having other children with additional needs) are recognised and supported by my antenatal team
- As a new parent, I know that my midwife, health visitor and GP will be made aware of my increased chances of having a child with additional needs and know how to help prepare and support me and the family

Birth to 5 years (examples)

- As a parent, I am confident that my concerns about my child's different development will be heard by my child health team
- As a parent, I will get the support and parent training needed to help me recognise my child's differences and cope with any unusual behaviours
- As a parent I will get timely effective support to manage my child's difficulties with basic needs, such as problems with sleeping, eating, and toileting, so that these are less likely to become long-standing problems that will affect future education and socialising

The school years

- I am confident that if my child is presenting traits of autism I will have the opportunity to access a timely full assessment and diagnostic pathway
- With or without a diagnosis of autism I will have an education, health and care needs assessment and a care plan focused on outcomes that will take into account my views, interests and aspirations. This will be reviewed and change over time as I develop
- I am confident that if my behaviour affects my ability to get the most out of school (e.g. not attending), this will be noticed early on and I will get timely support to get back on track to prevent problems escalating
- I know I will get the right support with my education to support my learning and this will take into account some of the specific issues related to how my autism presents, such as an individual plan showing how I cope with change
- I am confident that teachers and other staff, not just specialist SEND practitioners, have good awareness and understanding of autism
- I am confident that I need not fear bullying at school. If I do experience bullying my teachers will provide me with the best possible support and prevent further bullying

- I have the opportunity for mixing with other children and young people outside of school and taking part in the same ordinary out of school activities that other young people enjoy
- If I need extra help with my mental health needs I can get timely access to children's and young people's mental health services. These services will make reasonable adjustments to meet my needs and have knowledge and expertise in working with autism
- As a parent I am confident that there are good channels of communication between the teachers and the family so that critical information about my child's progress and school experience can be shared and that my input and needs as a carer are recognised

At times of transition (for example, moving schools or moving onto college or sixth form)

- I am informed about and have had the opportunity to discuss the educational choices available to me for college or further education
- A transition plan is developed which reflects my individual needs. For example; I have had an opportunity to visit my preferred college and to familiarise myself with it, including the journey to it
- As a parent I will be able to access a school for my child where teachers and other staff are aware of the differences in a child who may have autism and know how best to support the child's learning, development and play

Based on the engagement conducted, the following section details the outcomes people living with autism and their families want the strategy to support them to achieve across different aspects of their adult lives.

Housing

- I will have the opportunity to live and participate in my local community
- If I need daily living support I know I will receive the support I need to enable me to live as independently as I can and wish to
- If I live in the family home, I and my family are confident that if and when my parents or family are no longer able to support me, I will be able to access alternative options for supported accommodation close to home, depending on my needs

Health and Wellbeing

- I am confident of having the right type and level of support I need at the right time to promote and maintain my mental and physical health, wellbeing and safety
- I am confident I have the same choices and opportunities to access mental and physical health and wellbeing services as the rest of the population and that having autism will not preclude me from accessing services, as reasonable adjustments will be made to reflect my individual needs
- I am confident that any mental health or learning disability needs I have will be treated with parity of esteem with any physical health needs I may have

- I am confident that health professionals are aware of how I may experience pain and health problems because of my autism (for example I may find it difficult to recognize pain or to explain how I am feeling) and if necessary will put in place extra safeguards to ensure my wellbeing and that the way I experience pain and health problems is understood
- I am confident health professionals will see beyond my autism to any other health conditions I may have, for example that health professionals are aware that my autism may mask health problems I am experiencing
- I am aware that if I meet the eligibility criteria through a social care assessment I have a right to access advocacy whenever I want it
- I know how to get an eligibility assessment, which may provide opportunities for respite to enable us to maintain a health family life
- I know where to get help and advice to enable me to go about my daily life and access services and opportunities

Money

- I have the same opportunities to earn money as everybody else
- I am confident of being able to access the financial support and state benefits I am entitled to, to enable me to be as independent as possible
- I am confident that if I need it, there will be support to help me manage my money and that if my financial affairs go awry because of my autism, there will be a safety net for me
- I am protected from people or organisations who may wish to exploit my autism for their financial gain
- As a parent, I know my son or daughter will be able to access financial support regardless of my own status

Work

- I can be confident that I will have a fair and equal opportunity to get and keep work
- I can be confident that I will be paid the right level of money for my skills, commensurate with colleagues doing the same work
- There is the right kind of support available for me to get and keep a job, including support for applications, interviews and when facing difficulties at work
- I am confident that there is support available to me to manage discrimination and bullying in the workplace
- I am confident that there is support available for people who employ me or work with me
- Employers and my colleagues are supported to understand that time is needed for me to meet expectations in the workplace

- Employers are supported to recognise that I could be the best person to employ for some types of jobs

Education and Training

- I will have a regularly updated health, education and care needs assessment, which will take into account my needs, abilities and aspirations
- I am confident I will get the help and support I need to make the most of my school education
- As I leave statutory education, I can be confident of getting the advice and support I need to enter further education or training depending on my needs and aspirations
- I will get support to stay in further education or training to give me the best chances of employment afterwards
- As a parent I will be able to access parenting skills courses to help me support my child, manage difficult behaviours and look after myself

Relationships and Social Inclusion

- I am confident that it is me who determines what I want to do, not someone else
- I have as many opportunities to socialise as other people without autism, irrespective of where I live in the county
- Social activities and opportunities available to me match my age and/or interests, and are not simply determined by my having autism
- I know that if I need it, I will have support to access social situations
- In social situations it is recognised that because of my autism, I may need space and time to reflect or do other things that make me feel more comfortable and enable me to enjoy and contribute more fully
- I am confident that I can access support, such as buddy schemes, to help me make and sustain relationships
- I am confident that I will be able to get help to extricate myself from relationships where I am at risk of being exploited or of inadvertently coming into contact with the Criminal Justice System
- My value as a person is recognised by services who seek and support my involvement in co-producing services, information and advice and training

Throughout the life journey (examples of aspirations that should be available at any point)

- As a parent or an individual wishing to access an assessment, I am confident that there is a clear, timely and effective pathway to being able to receive an assessment to consider a diagnosis of autism

- As a parent, carer or an individual with a diagnosis I am confident that post-diagnostic support is available. To help me understand the diagnosis and how the condition will affect me or the person I am caring for
- As a parent/ carer I will be able to access education for my child (including nursery) where the staff are aware of the differences in a child who may have autism and know how best to support the child's development
- As an individual with an autism spectrum disorder, carer or parent, I know where to go to get information and advice about autism and local autism services for myself or my child

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2. Themes and building blocks for action

Whilst producing this strategy, a number of themes emerged from our work with partners, colleagues and people with autism and their families. For example, it was clear that people wanted much more awareness and understanding about autism in the community at large and amongst professionals and services. This increased awareness and understanding would underpin many of the other themes identified, such as equality of access to services and opportunities, proactive interventions and social inclusion. More service-oriented themes included the need for a clear diagnostic pathway – and this was something both professionals and people living with autism called for.

Figure 5: Themes arising from the person-centred outcomes that inform strategic actions needed



Some of these themes overlap with each other or have things in common with each other. As such, we have developed a number of building blocks for action, which need to be in place to turn this strategy into a reality.



We discuss each of these building blocks below. Some work has already started for some of the building blocks, which we highlight below where it has happened.

Creating autism-friendly communities

“I want to be accepted as who I am within my local community. I want people and organisations in my community to have opportunities to raise their awareness and acceptance of autism” – Think Autism

Communities need to be better informed and more aware, so that they can understand, support and appreciate the value of people with autistic spectrum disorders

The community is defined as a geographical locality and the myriad of people who are linked to it through residence, work, business, education, training or regular visits. It includes within it ‘communities of interest’ such as faith communities and people from diverse groups.

Services within health and social care recognise the needs of people living with autism but we also recognise that it is in the wider community where people with autism live most of their lives. Our strategy therefore includes the whole community not just the parts of the community that identify as ‘services’.

Information and data

People with autism have been described as “some of the most excluded, and least visible, people in the UK” – Think Autism

Information and data at the individual level

Information about people living with autism is poor nationally; our position in Lincolnshire reflects that. *Think Autism* now requires local authorities to improve data collection.

In Lincolnshire, Public Health data shows there were 11.54 children with autism as the primary stated need per 1,000 pupils – higher than the national average. There are no figures available for adults with autism locally. Best estimates are 4,237 adults (18-64) in 2014 predicted to rise to 4,343 by 2018.

It is essential that we have more information about people with autism and their families, the care and services they access and their outcomes. We need more information on the needs of diverse groups of people with autism to ensure there is equality of access, experience and outcomes. We also need improved data to ascertain costs. Currently local spend on autism is impossible to quantify so we are unable to know whether we are using resources effectively and efficiently.

Information and data at a service level

An initial mapping of services for this strategy revealed that a range of services and opportunities are available for people with autism in Lincolnshire but:

- There is a risk of fragmentation, lack of co-ordination, gaps and overlaps

- Many people, including other services, do not know what is available and there is no central service map
- Many services – even those within the statutory sector – rely on passionate individuals and goodwill and are therefore unsustainable
- Some services – especially those that are user-led – are run with little or even no funding
- Services tend to be focused in Lincoln or Grantham and much of the rural part of the county is poorly served.

Information about services, rights, resources and facilities is also needed by families and people living with autism to ensure they can access the services they need when they need them.

Partnership and leadership

We already have an Autism Partnership Board with a broad multi-agency membership, including some members living with autism, which provides us with a good foundation. However, it is limited in its population remit (adults only), focus, membership and authority, and we recognise that we need to develop the Board in these areas in order to ensure that we have the necessary strengths within the Partnership to achieve and build upon the vision and aims of the Strategy.

There are also other local ‘partnership’ groups that have been established, for example led by Lincolnshire’s paediatric lead for autism, which we need to work in conjunction with, incorporate into the Partnership itself and ensure that we are not working towards any conflicting goals or causing confusion amongst people living with autism.

Awareness and training

The groundwork for developing this Strategy highlighted a strong need for increased awareness of autism and improved training to improve the skills of staff in mainstream services in recognising, supporting and caring for people with autism.

A training group reports to the current Partnership Board and currently includes people with autism. The training group’s remit and objectives need to be broadened, strengthened and clarified to reflect this Strategy.

Co-production

“It is central... that all actions, nationally and locally, should be taken forward in a co-productive way that involves and engages people with autism and their families and carers as partners, respecting the insight and expertise that their experience and lives bring” – Think Autism

By co-production we mean working with people with autism as partners in:

- Their own care
- Developing policy
- Designing and delivering training
- Designing and delivering services
- Evaluating policy, training and services.

There is evidence that engaging people as active participants in their own care and in service development can achieve a variety of benefits including improving care and experience, ensuring care systems are accountable and responsive and making better use of scarce resources.

Lincolnshire has a strong presence of people living with autism influencing policy and developing service. People with autism and their families are keen to be further involved and this strategy reflects how we want and intend for people who are personally affected by autism to be involved.

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Appendix C: Existing service in place across Lincolnshire for Autism Spectrum Disorder

The table below details a selection of the current autism service provision in Lincolnshire across health, social care, provider and voluntary sectors. Please note that this is not a definitive list and is the starting point to maintaining a live document of service provision that is both accessible and meaningful for people with autism and their families.

| Service | Do services have or provide the following types of skills/assistance? | | | | | |
|--|---|-------------------------------------|-------------------------------------|--|---|-------------------------------------|
| | Diagnostic accredited practitioners | Make reasonable adjustments | Specialist care and interventions | Staff receive specific training in ASD | Social inclusion opportunities (housing, education, employment) | Support for families and carers |
| Green Light Team | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | | <input checked="" type="checkbox"/> |
| LD Health Liaison Nurses | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | | <input checked="" type="checkbox"/> |
| Inpatient Assessment Treatment Unit | | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | | <input checked="" type="checkbox"/> |
| Locked Rehab | | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | | <input checked="" type="checkbox"/> |
| Low Secure Rehab | | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | | <input checked="" type="checkbox"/> |
| CAST (Community Assertive Support Team) | | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | | <input checked="" type="checkbox"/> |
| CRHT (Crisis Resolution Home Treatment Team) | | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | | <input checked="" type="checkbox"/> |
| CMHT (Community Mental Health Teams) | | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | | <input checked="" type="checkbox"/> |
| IAPT (Improving Access to Psychological Therapies) | | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | | <input checked="" type="checkbox"/> |
| CAMHS (Child & Adolescent Mental Health Services) | | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | | <input checked="" type="checkbox"/> |
| Inpatient Team | | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | | | <input checked="" type="checkbox"/> |
| ESCO (Early Support and Care Coordination) | | <input checked="" type="checkbox"/> | | | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| Birth to Five Team | | <input checked="" type="checkbox"/> | | | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| TAC (Team Around the Child) | | <input checked="" type="checkbox"/> | | | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| Autism Pathfinder Outreach | | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| Autism Care | | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| Action for Children | | <input checked="" type="checkbox"/> | | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| Adult ADHD Lincolnshire (ADHD & Autism) | | <input checked="" type="checkbox"/> | | | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| Boulevard Care | | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| CANadda | | <input checked="" type="checkbox"/> | | | | <input checked="" type="checkbox"/> |

| Service | Do services have or provide the following types of skills/assistance? | | | | | |
|--|---|-------------------------------------|-------------------------------------|--|---|-------------------------------------|
| | Diagnostic accredited practitioners | Make reasonable adjustments | Specialist care and interventions | Staff receive specific training in ASD | Social inclusion opportunities (housing, education, employment) | Support for families and carers |
| Dimensions | | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| GAIN (Grantham Autistic Information Network) | | <input checked="" type="checkbox"/> | | | | <input checked="" type="checkbox"/> |
| HASS (Housing and Support Solutions) | | <input checked="" type="checkbox"/> | | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | |
| Heritage Care | | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| Home From Home Care | | <input checked="" type="checkbox"/> | | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | |
| Kisimul Group | | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | |
| Lincolnshire Autistic Society | | <input checked="" type="checkbox"/> | | | | <input checked="" type="checkbox"/> |
| Linkage Community Trust | | <input checked="" type="checkbox"/> | | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| Mencap | | <input checked="" type="checkbox"/> | | | <input checked="" type="checkbox"/> | |
| Navigation Support Care Services | | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| PAACT (Parents and Autistic Children Together) | | <input checked="" type="checkbox"/> | | | | <input checked="" type="checkbox"/> |
| Thera Trust | | <input checked="" type="checkbox"/> | | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| Voyage Care | | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |

Services currently available for young people and families: taken directly from the 2014 Independent review of services for children and young people with autism in Lincolnshire

Education

Schools – there was clear feedback from parent/carers and young people that Special provision was particularly good in meeting the needs of children with autism. However, there was a strong feedback that there was limited understanding of how to support children with autism in mainstream provision. The mainstream primary school that the review team met with demonstrated a good understanding of autism and a variety of support options.

Colleges – the review team found evidence that the colleges had a clear provision of support in place, however, there were concerns raised by parent/carers about lack of real choice about which college young people would be able to attend due to Transport Policy stating that they had to access their closest college. There was a feeling that support was tailored to what was available locally.

Pathfinder Outreach – the review team were given very positive feedback about the support in schools that was provided. The difficulties raised were regarding a limited amount of support going into Secondary provision. The Aim 4 Lincs Award that schools can work towards appeared to be excellent in terms of developing good autism practice.

Education Psychology Service – the EP service appeared to work with the more complex children as well as providing a variety of parent support programmes to parent/carers.

Children's Services

Birth to Five – the service provides a range of support for children and families, and works closely with transition into schools and with ESCO. They also provide parent support programmes to parent/carers. There was a feeling from some of the families that they were not receiving as much support as they would like.

Children with Disabilities Team (CWD) – the support provided was tailored towards those children with complex needs, and Customer Services appear to have a good understanding of who to refer to them. They had clear review procedures in place for children. They have noticed an increase in referrals of young children with very complex needs, and expressed that issues around sleep and sensory processing differences are a big unmet need. There was a feeling that other teams don't fully understand the parameters that the team works within regarding who they can support. They had many children with autism, even more so within the Occupational Therapy (OT) side.

Targeted Team – they were spread across the Localities and each team had 'champions' for different aspects, including autism. They included Family Support Workers and Targeted Support Workers for the young person.

FAST Team – the main entry point for Safeguarding concerns, their assessments would refer to any other appropriate services, including CWD or TAC, if need is indicated.

Team around the Child (TAC) – the team is currently being developed to enable them to provide support and guidance for other agencies to set up the first meeting and move on from there. They have recently had 600 professionals come on briefings about the new services and work closely with ESCO regarding which route a child/family should take, TAC or ESCO.

Residential Services (Beacon) – has seven young people, all of whom have very complex needs. There were high levels of expertise within the Home, but there was a need for more complex Psychology input to be going in. There were concerns raised about the disability knowledge of Social Workers in the Looked after Children team, and a proposal has been made for children at Beacon to be managed within the CWD team.

Residential Services (Short Breaks) – this was clearly a service that is highly in demand from families, and is able to provide a variety of respite options dependent on individual needs. They can provide emergency accommodation but this can result in cancellations for others. They had good relationships with Beacon, CWD, Schools and Families and a good understanding of autism.

Residential Services (Mainstream & Secure) – both settings had some autism understanding, clear behaviour intervention strategies and individualised programmes of support.

Families Working Together – as Lincolnshire's response to the Troubled Families Programme, this came across as an innovative service which was extremely personalised to the young person and their family. They had several young people and parent/carers who have autism and/or ADHD, many of whom had not been able to access universal services.

Health

CAMHS – various tiers of support are offered by CAMHS. Children with autism, with or without the diagnosis come into the service frequently, although there were difficulties with accessing the service as discussed previously. They often get children with autism re-referred to them, particularly with difficulties with behaviour and sleep.

Community Paediatrics – there was clear feedback that there are currently extremely high numbers of referrals for assessment for autism. The team was meeting parents who felt strongly that they needed the diagnosis in order to access any support. The team was experiencing a difference in numbers of referrals between the North and South of the County, with a higher number in the North. There were clear frustrations evident about the lack of appropriate services to refer children onto, particularly regarding those with mental health difficulties and behavioural challenges. This echoed the previous concerns raised by young people and parent/carers.

There appeared to be a limited amount of staff for supporting with Community Nursing and Specialist Health Visitor support, and the support was not consistent across the county. There had been an increase in young children being referred; 'challenging behaviour', sleep difficulties, specific health needs and family support were often reasons for referrals. The OT service had found there was a high need for Sensory Integration Therapy, which they were currently unable to provide. Speech and Language Therapy see children with autism and have a good understanding of how to refer onto wider services.

Partner Agencies

Action for Children – they provided a variety of services for young people; including domiciliary care in the home, short breaks through after school clubs, holiday clubs and youth clubs, and a buddying service. Approximately 60% of the children who access their short breaks services have autism. The review team had some very positive feedback about their services, although there was some frustration amongst the families that the short-term nature of the buddying service made it inaccessible for their child with autism.

Police – the review team met with a representative from the Public Protection Unit who felt they came into contact with young people and their families in some capacity on a daily basis. Their officers had recently had training from Nigel Evans at Autism West Midlands; an ex-police officer who delivers autism training for the Criminal Justice System.

Youth Offending Team – they take a person-centred approach to their work, supporting the young person and their parent/carers with identified behaviours alongside advice, support and signposting to other agencies. They have three Nurse Specialists from CAMHS who they will refer any young people who are in need of an assessment for autism.

East Midlands Ambulance Service (EMAS) – they don't keep any written records of patients, other than those which they pass to the Hospital. All crews have Communication Booklets for those with limited communication, and are trained to ask about any systems or care plans that are in place. They have the knowledge to make reasonable adjustment and would be interested in on-line training. In some situations, their system can 'flag' complex safeguarding issues or extreme medical needs, but this is only on a short term basis as it can impact on the speed of their information systems.

Housing (Framework & LEAP) – it appeared that both organisations were coming into contact with young adults who were in real need of help as had no support. Both found there was no clear pathway of where to find additional support for those with autism, and a lack of early intervention may have resulted in some of the difficulties.

Advice Services

Many of the agencies discussed gave advice and signposting to parent/carers, some being a key part of their role, others something they did in addition.

Parent Partnership Service (PPS) – have a high number of parent/carers of children with autism on their caseload, and the service plays a key role in giving independent advice regarding education. PPS did try to do 'Drop-In' clinics at one point. They are very aware of how geographical location of support services can put some people off attending. They had a group of parent volunteers trained previously in preparation for the new diagnostic pathway that had been suggested, although as they were never used, they are now not available.

Parent Support Organisations

There is a wide network of support organisations across the county for families to access, who provide a variety of options, ranging from informal meet-ups through to representations at strategic

planning meetings. The challenge of these groups is that they tended to be run by a small amount of dedicated volunteers.

Parent Programmes

It was evident that a great range of programmes were available for parent/carers across the county, and the feedback from those who had attended was generally extremely positive. Approximately half of the parents spoken to had been able to access Parent Programmes.

It was very clear that there was a wide range of things on offer, and that the inclusion of the Autism Seminars for Families was a positive step in terms of supporting those who had missed out on EarlyBird or had done it several years previously.

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Appendix D: Consultation Feedback

The following information is taken directly from the 2014 Independent Review of Services for Children and Young People with Autism in Lincolnshire

Feedback from young people with autism

The review team spoke to four young people directly and received completed questionnaires from another three. The majority of who were attending different schools across the county. Two of the young people were also in part-time employment, in addition to being at school or college.

Some of the young people gave positive feedback about liking specific subjects and teachers, and having the opportunity to see friends at school and some positive support from Teaching Assistants (TA's), but the majority of the feedback regarding school was overwhelmingly negative. A key theme was the teachers not understanding them, not having the support they needed and issues around bullying.

The issue of school staff not accepting the diagnosis, which was also raised by the parent/carers, was summed up by one young person;

"I feel disrespected when people say 'you're not very autistic' – it's patronising"

The review team had mixed feedback about their experiences of other Specialists, some had had positive experiences with Paediatricians and others felt unhappy about having to see a different person each time. It was noted that there were not good experiences with GPs, with limited understanding of the child and their autism a factor.

The two young people who had part time employment were both working in the catering industry and saw this as a potential future career.

Feedback from parents and/or carers

The review team spoke to four parent/carers directly (only one Father was represented) and had completed questionnaires from another nine (completed in the main by the Mother). There was also liaison with representatives from different parent organisations which reflected similar points.

Key themes from the parent/carers were limited understanding in schools, lack of information and support following a diagnosis and limitations in which services they are able to access.

School – taking the parent/carers directly spoken to and the completed questionnaires together, there were eleven children in mainstream, three in special provision, and another one due to start school in September represented. The feedback from the three in special provision was very positive, particularly regarding support provided in school and wider support available including therapies.

The feedback from those in mainstream provision was largely negative. Several comments about lack of support and limited understanding about autism; additional comments also made about not being able to access Statutory Assessments or Statements. There were strong feelings that the

schools did not understand their child's needs, particularly if they weren't demonstrating 'challenging behaviours'. One parent summed this up; *"because he 'conforms', school don't necessarily 'see' the internal anxieties, they come out at home"*

Diagnosis process – the feedback on the pathway to diagnosis was quite mixed. The more positive comments mentioned getting good support through the process from a SENCO, or getting a diagnosis at the appointment, or simply rated the experience as positive. The more negative comments, of which there were a higher amount, commented on long waiting times, traumatic, impersonal and insensitive responses and not child friendly. Key points that were raised from the majority of families were about the process being too long and frequent delays in receiving written reports.

Wider support – a variety of different professional groups or services were mentioned when asked about wider support, including Action for Children, Parent Partnership Service, Education Psychology Service, Outreach, Education Welfare Officers, Community Health Services and CAMHS. Key points that were raised were about not being able to see the same person consistently and inability to access CAMHS.

Consultation on the Draft Strategy

In order to ensure that the proposed All-Age Autism Strategy for Lincolnshire reflected the views and opinions of stakeholders involved in the prior consultation and engagement activity, a further consultation process was undertaken from 12 November 2014 to 19 December 2014 to gather feedback and comment on the document.

The draft strategy was circulated to all members of the Lincolnshire Autism Partnership, along with all individuals who had been involved in the engagement events held during 2014. Details were also issued to health and social care professionals and presentations on the draft strategy were made to a number of Boards, including the Lincolnshire Health and Wellbeing Board, each of the four Lincolnshire Clinical Commissioning Group Governing Bodies, the Children and Young People Strategic Partnership and the Lincolnshire Safeguarding Children Board amongst others.

The draft strategy was promoted and made available through dedicated information webpages on the Lincolnshire County Council website, so that members of the public had access to it and were able to offer their thoughts via an online questionnaire. Hard copy paper versions of the questionnaire and an easy read version were also made available.

Out of the 67 responses received through the questionnaire, there was 98.5% approval of the eight strategic principles proposed within the draft strategy and 100% approval of the building blocks for action. This provides a consensus of positive confirmation that stakeholder views have been accurately interpreted.

Some of the key themes and comments arising from the consultation responses are detailed below:

"Definitely a need for support and advocacy into adult services and further awareness for families as to how to access this support."

"Post 16 & post 18 transition is a massive gap. With the new bill it will be better in the future but it is the current group of 'able' functioning young people not in employment education or training needs to be addressed & their overall wellbeing & mental health."

"Please do all these things - All will be amazing - incredible - and much appreciated."

"There needs to be more events such as concerts for people with autism like the Autism Rocks by the NAS for example in London and more access to social inclusion in the community."

"Our daughter was not listened to in the past and had a breakdown. It has taken several years to rebuild her confidence and she still has trouble trusting people. She actually cried when I read through these principles to her as she doesn't believe they will come true! So now it's up to you to make sure they do!!"

"I feel there needs to be a focus also on people living with autism who also have a learning disability, where this additional disability impacts significantly on an individuals' ability to understand such principals, and how we can support them to participate in mainstream."

"More services need to be put in place to meet the need of mental health issues of autism."

"Please help with awareness, please work with employees, please help support transition."

"Parents of autistic children and adults worry about the future and what will become of their child when they are no longer able to care for them - this client group need to be reassured by this strategy."

"Peer groups should be educated about friends/family who have autism. There is still a lot of ignorance and fear of the unexpected as socially some autistic people do not present with usual behaviours."

"Partnership from the county council across to and including NHS should be strengthened and developed."

"There needs to be reflected in any services commissioned a recognition that Autism is a lifelong condition and support provided for people with Autism should be planned on a lifelong basis with smooth transition from child to adult."

"Much more needs to be done. People are diagnosed and then totally unsupported further."

"We acknowledge that this is start of long process and it will take time to get it right."

"More in-depth professional training needed."

"Better links need to be forged with housing associations/district councils/RSL's for minor and major adaptations."

"Equity of provision across the county."

Open Report on behalf of Richard Wills, Director responsible for Democratic Services

| | |
|------------|---|
| Report to: | Children and Young People Scrutiny Committee |
| Date: | 16 January 2015 |
| Subject: | Potential Topics for Scrutiny Reviews |

Summary:

This report invites the Children and Young People Scrutiny Committee to identify potential topics for its next scrutiny review taking into account the activities contained in the four commissioning strategies for Children's Services.

Actions Required:

Members of the Children and Young People Scrutiny Committee are invited to identify potential topics for a future scrutiny review.

1. Background

As reported at the last Children and Young People Scrutiny Committee meeting on 28 November 2014, it had been proposed to carry out a scrutiny review into school improvement. However, due to work already ongoing by officers into a new school led school improvement approach and the new Local Authority offer, there was a risk that a scrutiny review would be duplicating this work and it was agreed that the Committee would establish a school improvement working group to work with officers instead.

As it is no longer proposed to carry out a scrutiny review into school improvement, the Committee is invited to suggest alternative topics for a scrutiny review, taking into account the four commissioning strategies for Children's Services.

The four commissioning strategies consist of the different activities which come under Children's Services, and these are summarised below.

Children are Safe and Healthy

This commissioning strategy aims to ensure all children and young people will be safe and healthy, and consists of the following services:

- School Nursing
- Child protection (contract, referral and assessment)
- Looked after Children

- Fostering and adoption
- Residential homes
- CAMHS
- Children with disabilities
- Family support

This strategy will support the key priorities of the Lincolnshire Health & Wellbeing Strategy to improve health and social outcomes for children and young people and to reduce inequalities. The strategy focuses on keeping children and young people protected and safe from harm and how through working with partner agencies, effective safeguarding systems can be developed to improve identification and multi-agency intervention strategies to safeguard children & young people.

Readiness for School

This commissioning strategy aims to ensure all children will be ready to learn when they start school enabling them to achieve their full potential. It consists of the following areas:

- Healthy child programme
- Children Centres
- Early education (2, 3 & 4 year olds accessing 15 hours of education)
- Therapy Services

The delivery of this strategy will enable Children's Centres to provide a range of jointly commissioned activities with health services which support child development, child and family health, school readiness, parenting skills, and life chances. As part of an integrated approach to supporting children and families, the Healthy Child Programme offers every family a programme of screening tests, immunisations, developmental reviews, and information and guidance to support parenting and healthy choices.

Learn and Achieve

This commissioning strategy aims to ensure all children and young people will learn and achieve, enabling them to reach their potential. It consists of the following services:

- School Support Services including education welfare and behavioural support
- School Improvement
- Statementing process and interventions (to be replaced with new health, education and social care plan)
- Out of school team / School admissions
- Home to school/college transport

The strategy will continue to build on the existing strong relationships with schools and learning providers to better respond to their needs in an evolving and changing relationship. Within the new legislative context of education, there will be an infrastructure of highly effective school support services to respond to the needs of

all types of schools and enable them to have access to services which will help them thrive.

Readiness for Adult Life

This commissioning strategy aims to ensure all young people will be prepared and ready for adult life, and consists of the following services:

- 14-19 education / training and apprenticeship
- Career guidance
- Teenage pregnancy
- Supported accommodation/lodgings
- Leaving Care
- Positive activities for young people

This strategy looks to ensure services support the legislative reforms, resulting from the Children & Families Act 2014, embedding the joint commissioning and Local Offer arrangements for children and young people with special educational needs and disabilities. The Youth Offer will provide the commissioning framework to ensure young people are supported so they can achieve their potential and will enable working with partner agencies to respond to the challenges of raising the participation age (RPA). This will include a range of innovative strategies to tackle youth employment and promote collaboration to ensure a sustainable post 16 training and education offer.

Approval of Scrutiny Reviews

When considering whether to approve a potential scrutiny review, the Overview and Scrutiny Management Committee will consider the following guidelines which have been agreed as a basis for making decisions on topics for scrutiny reviews.

It is important that in-depth reviews are:-

- **deliverable within a set timetable**
- **sufficiently focused on a particular aspect of a service**
- **not duplicating other significant review activity**
- **not related to a specific individual grievance or complaint**

Reviews should also:-

- **contribute to the overall objectives of the organisation**
- **reflect community concerns**
- **lead to potential achievable outcomes or improvements for the people of Lincolnshire**

2. Conclusion

Members of the Committee are invited to consider the activities under each of the four commissioning strategies and identify any potential topics for a scrutiny review. Any suggestions from the Committee will be considered and discussed by

the Chairman, the Vice Chairman and relevant officers at the next pre-meeting. If a suitable topic is identified, a scoping document for a scrutiny review of that topic will be drafted and brought back to the Committee for consideration. If agreed by the Committee, it will then be taken to the Overview and Scrutiny Management Committee for approval. It is proposed that any review will commence in May/June 2015 after the General and District elections have taken place.

3. Consultation

a) Policy Proofing Actions Required

No policy proofing is required for this report.

4. Background Papers

No background papers within Section 100D of the Local Government Act 1972 were used in the preparation of this report.

This report was written by Tracy Johnson, who can be contacted on 01522 552164 or tracy.johnson@lincolnshire.gov.uk.

Open Report on behalf of Richard Wills, Director responsible for Democratic Services

| | |
|------------|---|
| Report to: | Children and Young People Scrutiny Committee |
| Date: | 16 January 2015 |
| Subject: | Children and Young People Scrutiny Committee Work Programme 2015 |

Summary:

This item enables the Children and Young People Scrutiny Committee to consider its own work programme for the coming year.

Actions Required:

- (1) To comment and agree on the content of the work programme, as set out in Appendix A to this report.
- (2) To note the content of the Children's Services Forward Plan, as set out in Appendix B to this report.

1. Background

Current Work Programme

At every meeting of the Committee, Members are invited to consider their future Work Programme and to agree on items to be included in the Work Programme. The current work programme for the Committee is attached at Appendix A to this report.

Forward Plan

Also attached at Appendix B for the Committee's consideration is a list of the intended decisions of the Executive or Executive Councillor for Adult Care and Health Services, Children's Services, which fall within the remit of the Children and Young People Scrutiny Committee.

Scrutiny Activity Definitions

Set out below are the definitions used to describe the types of scrutiny, relating to the items:

Budget Scrutiny - The Committee is scrutinising the previous year's budget, the current year's budget or proposals for the future year's budget.

Pre-Decision Scrutiny - The Committee is scrutinising a proposal, prior to a decision on the proposal by the Executive, the Executive Councillor or a senior officer.

Performance Scrutiny - The Committee is scrutinising periodic performance, issue specific performance or external inspection reports.

Policy Development - The Committee is involved in the development of policy, usually at an early stage, where a range of options are being considered.

Consultation - The Committee is responding to (or making arrangements to respond to) a consultation, either formally or informally. This includes pre-consultation engagement.

Status Report - The Committee is considering a topic for the first time where a specific issue has been raised or members wish to gain a greater understanding.

Update Report - The Committee is scrutinising an item following earlier consideration.

Scrutiny Review Activity - This includes discussion on possible scrutiny review items; finalising the scoping for the review; monitoring or interim reports; approval of the final report; and the response to the report.

2. Conclusion

That consideration is given to the content of this report.

3. Consultation

a) Policy Proofing Actions Required

No policy proofing is required for this report.

4. Appendices

| | |
|---|---|
| These are listed below and attached at the back of the report | |
| Appendix A | Children and Young People Scrutiny Committee Work Programme |
| Appendix B | Children's Services Forward Plan |

5. Background Papers

No background papers within Section 100D of the Local Government Act 1972 were used in the preparation of this report.

This report was written by Tracy Johnson, who can be contacted on 01522 552164 or Tracy.Johnson@lincolnshire.gov.uk.

CHILDREN AND YOUNG PEOPLE SCRUTINY COMMITTEE

Theme: “That every child, in every part of the county should achieve their potential”

Chairman: Councillor John Hough

Vice Chairman: Councillor Bob Adams

| 16 January 2015 | | |
|--|--|---|
| Item | Contributor | Purpose |
| Children’s Services Budget 2014/15 and 2015/16 | Debbie Barnes Executive Director of Children's Services | Budget Scrutiny |
| Outcomes from Ofsted Inspection | Debbie Barnes | Status Report |
| Corporate Parenting Panel Update | Cllr David Brailsford Chairman of the Panel | Member Report |
| All Age Autism Strategy for Lincolnshire | Robert Barber Commissioning Officer Adult Care Sheridan Dodsworth Children's Service Manager - SEND | Pre-Decision Scrutiny (Executive Decision on 3 February 2015) |
| Potential Topics for Scrutiny Reviews | Tracy Johnson Scrutiny Officer | Scrutiny Review Activity |
| Child and Adolescent Mental Health Services (CAMHS) (EXEMPT) | Andrew McLean Children's Service Manager - Commissioning | Pre-Decision Scrutiny (Executive Decision on 3 February 2015) |

| 6 March 2015 | | |
|---|--|--|
| Item | Contributor | Purpose |
| Proposal to expand capacity at Spalding Monkshouse Primary School (Final Decision) | John O'Connor Children's Service Manager – Education Support | Pre-Decision Scrutiny (Executive Councillor decision on 20 March 2015) |
| Proposal to expand capacity at Lincoln Bishop King Church of England Primary School (Final Decision) | John O'Connor | Pre-Decision Scrutiny (Executive Councillor decision on 20 March 2015) |
| Review of Accountability Framework for the Chair of the LSCB, Lead Member for Children's Services and the Director of Children's Services | Debbie Barnes Paul Burnett Independent Chair Leicestershire and Rutland LSCB | Status Report |
| Theme Performance: Quarter 3 | Sally Savage Chief Commissioning Officer – Children's | Performance Scrutiny |

| 6 March 2015 | | |
|--|--|----------------|
| Item | Contributor | Purpose |
| School Performance 2014 (including Closing the Gap data) | Keith Batty Director of CfBT Education Services | Status Report |
| Stamford Endowed Schools Scholarship Tapering- Interim (4th Year) Review | Keith Batty | Update Report |
| Lincolnshire Safeguarding Boards Scrutiny Sub-Group Update | Cllr Ron Oxby Chairman of the Sub-Group | Member Report |

| 24 April 2015 | | |
|---|--|---|
| Item | Contributor | Purpose |
| Frontline Social Workers and Safeguarding Scrutiny Review – First Monitoring Update | Janice Spencer Assistant Director – Children's (Safeguarding) | Scrutiny Review Activity |
| Consultation on the future of Brocklesby Park Primary School and potential closure (Final Decision) | John O'Connor | Pre-Decision Scrutiny (Executive Councillor decision in May 2015) |
| Lincolnshire Safeguarding Children Board (LSCB) Neglect Strategy | Andrew Morris LSCB Business Manager | Status Report |
| Strategic Priorities for 16 - 19(25) Education and Training for 2015/16 – Action Plan | Maggie Freeman 14-19 Commissioner | Status Report |
| Corporate Parenting Panel Update | Cllr David Brailsford | Member Report |
| Additional Item | | |

| 5 June 2015 | | |
|--|---|----------------------|
| Item | Contributor | Purpose |
| Implementation of SEND Reforms – Lessons Learned | Sheridan Dodsworth John O'Connor | Status Report |
| Theme Performance: Quarter 4 | Sally Savage | Performance Scrutiny |
| Lincolnshire Safeguarding Boards Scrutiny Sub-Group Update | Cllr Ron Oxby | Member Report |
| Anti Bullying | Sophie Whitehead Anti Bullying Officer | Status Report |
| Additional Item | | |
| Additional Item | | |

| 24 July 2015 | | |
|---|--|----------------|
| Item | Contributor | Purpose |
| Corporate Parenting Panel Update | Cllr David Brailsford | Member Report |
| Improving Employment and Skills in Lincolnshire's Growing Business Sectors - Update | Maggie Freeman Clare Hughes Principal Development Officer (Skills) | Update Report |
| Additional Item | | |
| Additional Item | | |
| Additional Item | | |
| Additional Item | | |

| 11 September 2015 | | |
|--|--------------------|----------------|
| Item | Contributor | Purpose |
| Impact of the Inclusion Review Action Plan on Pupil Exclusions | John O'Connor | Update Report |
| Lincolnshire Safeguarding Boards Scrutiny Sub-Group Update | Cllr Ron Oxby | Member Report |
| Additional Item | | |
| Additional Item | | |
| Additional Item | | |
| Additional Item | | |

Items to be Scheduled

| | | |
|---|--|---------------|
| Child Poverty Action Plan Themes - Poverty of Access, Economic Poverty, Poverty of Aspiration | Andrew McLean Children's Service Manager - Commissioning | Update Report |
|---|--|---------------|

Theme Outcomes

The Children and Young People Scrutiny Committee is aligned to the five principles set out in the Children and Young People's Plan 2012-2015:

- 1. Early Intervention and Prevention**
 - Strong universal services, providing early action and intensive support to vulnerable children and young people.
- 2. Safeguarding and Best Start in Life**
 - Ensuring children are safe in every environment.
 - Encouraging community responsibility for safeguarding.
- 3. Aspiration and Well Being**

- Ensuring all those working with children champion the importance of aspiration.
- Develop self-esteem, self-belief and resilience in all children, young people and their families.

4. Learning and Achievement

- All children being the best that they can be.
- Closing the gap between vulnerable groups and children living in disadvantaged communities.

5. Best Use of Resources

- Integrating delivery with a focus on outcomes, life chances and opportunities.
- Effective use of resources to provide better services locally.
- Empower communities, creating opportunities for them to engage.

For more information about the work of this Committee please contact Tracy Johnson, Scrutiny Officer, on 01522 552164 or by e-mail at tracy.johnson@lincolnshire.gov.uk

FORWARD PLAN OF DECISIONS RELATING TO CHILDREN'S SERVICES FROM 2 FEBRUARY 2015

| DEC REF | MATTERS FOR DECISION | DATE OF DECISION | DECISION MAKER | PEOPLE/GROUPS CONSULTED PRIOR TO DECISION | DOCUMENTS TO BE SUBMITTED FOR DECISION | HOW TO COMMENT ON THE DECISION BEFORE IT IS MADE AND THE DATE BY WHICH COMMENTS MUST BE RECEIVED | RESPONSIBLE PORTFOLIO HOLDER AND CHIEF OFFICER | KEY DECISION YES/NO | DIVISIONS AFFECTED |
|------------------------|--|------------------|---|---|--|---|---|---------------------|--|
| I008262 New! | Approval of Lincolnshire's All-Age Autism Strategy 2015-2018 | 3 February 2015 | Executive | Public consultation, Clinical Commissioning Group Governing Bodies, Joint Commissioning Board, Health and Wellbeing Board, Adults Scrutiny Committee and Children and Young People Scrutiny Committee | Report | Commissioning Officer, Adult Care Tel: 01522 555380 Email: robert.barber@lincolnshire.gov.uk | Executive Councillor: Adult Care and Health Services, Children's Services and Director of Adult Care | Yes | All Divisions |
| I008379 New! | Child and Adolescent Mental Health Service Review | 3 February 2015 | Executive | Key Stakeholder Groups | Exempt Report | Commissioning and Development Manager Tel: 01522 553258 Email: jonas.gibson@lincolnshire.gov.uk | Executive Councillor: Adult Care and Health Services, Children's Services and Executive Director of Children's Services | Yes | All Divisions |
| I008261 | Proposal regarding the future of Brocklesby Park Primary School (decision to go to Statutory Notice) | 3 February 2015 | Executive Councillor: Adult Care and Health Services, Children's Services | Interested parties as DfE guidance including parents, school staff, neighbouring schools, County and Parish Councils, MPs, Trade Unions and Diocese | Report | Children's Service Manager - Education Support Tel: 01522 553213 Email: john.o'connor@lincolnshire.gov.uk | Executive Councillor: Adult Care and Health Services, Children's Services and Executive Director of Children's Services | No | Ancholme Cliff; Market Rasen Wolds; North Wolds |
| I008266 | Proposal to expand capacity at Spalding Monkshouse Primary School (final decision) | 20 March 2015 | Executive Councillor: Adult Care and Health Services, Children's Services | Interested parties as DfE guidance including parents, school staff, neighbouring schools, County and District Councils, MPs, Trade Unions and Diocese | Report | Children's Service Manager - Education Support Tel: 01522 553213 Email: john.o'connor@lincolnshire.gov.uk | Executive Councillor: Adult Care and Health Services, Children's Services and Executive Director of Children's Services | Yes | Spalding East and Moulton; Spalding Elloe; Spalding South; Spalding West |

| | | | | | | | | | |
|------------------------|--|---------------|---|---|--------|---|---|-----|---|
| I008333 New! | Proposal to expand capacity at Lincoln Bishop King Church of England Primary School (Final Decision) | 20 March 2015 | Executive Councillor: Adult Care and Health Services, Children's Services | Interested parties as DfE guidance including parents, school staff, neighbouring schools, County and District Councils, MPs, Trade Unions and Diocese | Report | Head of Service for Education Services Tel: 01522 553213 Email: john.o'connor@lincolnshire.gov.uk | Executive Councillor: Adult Care and Health Services, Children's Services and Executive Director of Children's Services | Yes | Lincoln Birchwood; Lincoln Boultham; Lincoln Bracebridge; Lincoln East; Lincoln Glebe; Lincoln Hartsholme; Lincoln Moorland; Lincoln North; Lincoln Park; Lincoln West |
|------------------------|--|---------------|---|---|--------|---|---|-----|---|