

Merton Council

Children and Young People

Overview and Scrutiny Panel

24 March 2015

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Committee: Children and Young People Overview and Scrutiny Panel

Date: 24th March 2015

Agenda item: 5

Wards: All

Subject: Children & Families Act 2014 Part 3; Progress on Implementation of SEN and Disabilities Elements

Lead officer: Heather Tomlinson, Interim Assistant Director, Education

Lead member(s): Cllr Maxi Martin; Cllr Martin Whelton

Forward Plan reference number: N/A

Contact officer: Gary King

Reason for Urgency: The Chair has agreed the late circulation of this report.

Recommendations:

- A. Members of the Panel note the report and implications for partner agencies
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1. PURPOSE OF REPORT AND EXECUTIVE SUMMARY

- 1.1. To inform the Panel of the progress being made to implement the Children & Families Act 2014 Part 3 reforms.
- 1.2. To inform the Panel of further action required to implement and fully embed the reforms in routine practice.
- 1.3. This update report is focussed on the key delivery areas from the Children & Families Act 2014 Part 3 and will focus on the current position and other actions that are needed to progress implementation of the reforms:

2. PROGRAMME GOVERNANCE

- 2.1 During 2014, management and oversight of the implementation of the SEN reforms in the Children and Families Act was through a Programme Board, focussed on initial planning for implementation. The Board was supported by a number of workstream groups. The Board and workstream groups were disbanded towards the end of 2014 to be replaced by a new partnership governance group for CYP 0-25 with SEN and disability (to replace two previous partnership boards – children with disabilities and transitions). Further practice and service development required to implement the Act will now be undertaken on a 'business as usual basis' overseen by the new partnership group. Members of the group are drawn from council departments, and health commissioners and providers. Parent/carer representation has been agreed to ensure the ongoing engagement and influence of parents/carers who have played a major role

in implementation thus far. The first meeting of this new group was held in February 2015.

3. CORE REQUIREMENTS

- 3.1 The Act introduces a number of core elements which Local Authorities and health organisations are required to implement – the publication of a ‘Local Offer’; the establishment of an integrated education, health and care assessment and planning framework; the provision of mediation services; the review of arrangements for preparation for adulthood and the offer of personal budgets.

Local Offer

- 3.2 The Local Offer is a statutory website for the council and was first published on 30 September 2014. (www.merton.gov.uk/localoffer). The required content under the SEND reforms is significant and will increase as practice develops and new processes become embedded within SEND practice.
- 3.3 Currently there are four established templates that organisations and internal services are invited to complete to advertise their SEN specific services in the Local Offer. These include education, health, training and other; the latter being the default or general template used by most other services.
- 3.4 As per the Children and Families Act 2014 Merton has remained faithful to the Local Offer remit of making information available for parents that is specific to children and young people with SEND. Therefore the website is not a directory of services with links that move you to other websites; rather it contains detailed information of use to parents on a ‘one stop’ basis..
- 3.5 The following summarises the information currently available in the Local Offer:
- 54 education providers (41 Primary, 7 Secondary, 3 Specialist, 3 Colleges)
 - 12 children and young people health services
 - 13 short breaks services
 - 35 early education and childcare services
 - 6 leisure services
 - 12 Information and advice articles for parents including: How to request an EHC needs assessment, Personal Budgets, Local NHS services, national advice and support.
- 3.6 As part of the implementation process, we have consulted with both parents/carers, for whom the website is primarily aimed, and with young people who, we hope, will also wish to use the resource. We have received useful feedback about the website’s ‘look and feel’ and the usefulness of

information provided. This feedback will inform further development of the website in the coming months.

3.7 The following actions are required to develop and improve the Merton local offer:

- i. The establishment of a Local Offer Steering Group to oversee what organisations are invited or approved to be part of the Merton local offer; and to oversee the information, advice and guidance available on an on-going basis.
- ii. A drive to update the Local Offer services in relation to:
 - Post-16 education and training provision
 - Apprenticeships, traineeships and supported internships
 - Information about provision to assist in preparing children and young people for adulthood
 - An updated Merton Travel Assistance policy
 - Support to help children and young people move between phases of education
 - More leisure activities
 - The local authority's accessibility strategy
 - A revised CSF complaints policy that reflects the SEN changes

Significant attention will be required to:

- Collate and verify data from different service areas before it is uploaded onto the Local Offer
- Redesign the look, feel and usability of the local offer to improve the overall user experience
- Design an approval process for external providers or organisations looking to join the Merton Local Offer
- Renew the Local Offer database contract

4. EDUCATION, HEALTH & CARE (EHC) ASSESSMENT & PLANNING

4.1 From September 2014 Merton has implemented the new statutory 20 week pathway for EHC assessments and plans as stipulated in the Children & Families Act 2014.

4.2 Multiple partner agencies have contributed towards the development of a pathway and the current EHC plan in use will inevitably be updated over the coming months as professionals and partners work together to further develop the process.

New EHC plans

- 4.3 Since September 2014 EHCP workflow is as follows:
1. No. of new EHC assessment requests – **45**
 2. No. of EHC assessment requests refused **17**
 3. No. of EHC assessment requests accepted – **18**
 4. No. of EHC assessment requests not yet presented at panel – **10**
(requests still within the first 6 weeks of the 20 week period)
 5. No. of new EHC plans issued since Sept 2014 **4**
 6. No. of new EHC plans issued since Sept 2014 within 20 weeks - **2**
(two completed in 19 weeks, one in 21 weeks and one in 29 weeks)

EHCP Transitional Arrangements

- 4.4 The transfer of all existing Statements of Special Educational Needs (SEN) and Learning Difficulty Assessments (LDAs) to EHC plans started in September 2014.
- 4.5 In line with the reforms the council has consulted on and published a summary of the process for transferring a “statement” into an EHC plan. This summary, with key information and advice, is found on the local offer database via the following link: [Transferring to an Education, Health and Care Plan \(EHCP\)](#).
- 4.6 Merton has approximately 1000 current statements that must be transferred within a maximum four year period as stipulated by the DFE guidance.
- 4.7 Below is a list of our current position as of 5 February 2015:
1. No. of transfer review meetings taken place - **68**
 2. No. of transfer reviews where an EHC plan has been written - **49**
 3. No. of transfer reviews, EHC plans written & signed off by the DMG – **24**
(19 incomplete)

Keyworking Policy

- 4.8 Keyworking is central to the principles behind the Act and the SEND Code of Practice to ensure the improvement of the overall SEND experience.
- 4.9 A SEND keyworking policy has been drafted with assistance and input from Merton’s SE7 Pathfinder champion. However, to enable and support a key working approach, the following developments are required:
- Accountability structures
 - Information sharing agreements
 - Supervision and management
 - Professional development
 - Awareness raising

The keyworking policy will be a key consideration in future service development.

Pilot EHC plans

- 4.10 To assist in implementing the reforms a Merton EHC plan pilot team started in May 2014 and initially identified thirteen children and young people cases to be piloted.
- 4.11 The aims of this pilot programme were to evaluate the assessment and planning processes for children and young people with Special Educational Needs and Disabilities that had been developed through the work streams set up by Merton to implement the Act.
- 4.12 Approximately seven (7) EHC plans have been issued from this group and much learning has been gained from the team's work with selected local mainstream and special schools and professionals. This information has been fed into the current process to better implement the reforms.

The following is an excerpt of the pilot report's findings:

Feedback from Families

- i. The process itself is beneficial, not just the plan that you have at the end
- ii. Professionals meeting and sharing information in this new way has been helpful
- iii. A holistic picture of the child is developed, not just each professional's view point
- iv. Provision is more integrated – more of something isn't necessarily the answer
- v. Thinking about aspirations and outcomes can change the focus of the support
- vi. There are some elements that were not clear, such as defining roles and responsibilities
- vii. This can be an emotionally demanding process and support and sensitivity needs to be there for families
- viii. "A thorough plan that reflected very accurately [child's] situation and our aims for his future..."
- ix. "The multidisciplinary/holistic approach was hugely useful for us, with Physio/OT/EP all contributing and in discussion for next steps"
- x. "Overall extremely happy with the EHCP process and very grateful for all the support and expertise that my [child] received, thank you"
- xi. How could the process be improved? "Possibly condensing the target setting stage and maybe some of the lengthy face to face meetings could have been done via telephone or via email. However perhaps the time spent in these meetings meant the plan was so detailed and personal"
- xii. It has been brilliant, but to do it properly it's quite an intensive process.

Feedback from professionals

- i. Professionals have reported that they would like greater clarity on their roles within the new process.
- ii. Teams have developed new formats for their professional advice. It may be helpful to work with professionals to develop guidance for writing professional advice for EHC plans. Professionals would like greater clarity about the timescales for the outcomes contained in their advice to ensure that all the advice is working to the same point in time.
- iii. All professionals who provided feedback reported that this process took significantly more time than anticipated.

Key Learning & Proposed Developments

- i. **Assessment pathway processes** have been continually refined and it is anticipated that this will need to continue over the next year and beyond. Protocols have been developed for the SEN team. These will need to be evaluated and reviewed within 6 months.
- ii. **Aspirations** - Parents have indicated that these discussions about future hopes can change the focus of the work and support around a child. There is a need for this to be sensitively approached by skilled professionals who are aware of the potential challenges these conversations may present or whether or how they are appropriate.

There may be a need for further training in this area for those undertaking key working responsibilities.
- iii. **Outcomes** - This is a key element of the process and there is need for ongoing professional development in “skilling up” the workforce so they are confident and competent in writing SMART outcomes. It will be helpful for a timescale to be provided when advice is requested to establish a common timeframe for the outcomes that all professionals are drafting.
- iv. **Roles and responsibilities** - The role of the key worker in particular has been explored throughout the pilot process. There continues to be a need to clarify key working responsibilities. A number of training and development needs have arisen as a result of the introduction of the new legislation. For example, chairing the EHCP planning meetings and writing outcomes have been raised as areas where training is needed.
- v. **Cross-agency working** - Throughout the pilot a challenge has been to engage professionals from a range of professional backgrounds. Further work will need to explore how to draw together the expertise of the range of professionals (from Education, Health and Care) working around a

child. An ongoing challenge has been the capacity of professionals to attend the EHCP planning meeting as an additional step in the process of collating the information needed to write an EHCP. The quality of the written advice submitted is important, particularly when the professional is not able to attend the EHCP planning meeting. Some professionals have said it may be helpful to offer all those being asked to provide advice with more direction regarding what should be included. Further training is needed across agencies concerning the Children and Families Act (2014)

- vi. **Preparation for Adulthood** - The pilot has only looked at this area in limited detail; further work to define pathways and processes for CYP approaching adulthood is a current priority.
- vii. **Information systems** - Record keeping and information sharing systems need to be developed which will support the new EHC assessment process. Appropriate IT support for this and also to support the drafting and redrafting of plans at venues across and beyond the borough is needed.

5. MEDIATION

- 5.1 The offer of mediation services is a new statutory requirement placed on local authorities for SEND families who want it following a disagreement or dispute with the council as part of the EHC assessment and planning process.
- 5.2 In July 2014 Merton initially undertook a soft market testing exercise to source mediation and resolution providers and create a framework agreement through which services could be commissioned at an agreed price as and when mediation is required.
- 5.3 However initial discussions proved unsatisfactory as providers asked for the council to pay a significant retainer fee to named organisations as part of a framework.
- 5.4 Subsequently, Merton has agreed to use Global Mediation for mediation and resolution services on a spot contract purchase basis in the first instance. Should demand warrant it, a commissioning process to enter a block contract may be required. .

6. PREPARATION FOR ADULTHOOD (PFA)

- 6.1 Given the age range (0-25 yrs) for whom EHC planning is required, implementation requires authorities to review existing transitions arrangements and broaden the focus of planning into what is termed 'preparation for adulthood'. Although some progress has been made in this

element of implementation of the Act, it is acknowledged that much work is still needed on PFA and this is an area which requires significant focus in the future.

- 6.2 Currently the SENDIS is reviewing the protocols for working with Adult Social Care and adults' health services, in order to promote seamless transition into adults' services when required. SENDIS is also coordinating urgent reviews of individual young people with SEND who are at the point of 19+ transition in liaison with Adult Social Care to develop appropriate pathway plans. Further work is needed to broaden the educational, training and employment opportunities for young people – a significant challenge in view of the lack of funding made available by government to implement the reforms – and to develop an appropriate 'menu' of accommodation and housing options.

7. PERSONAL BUDGETS

- 7.1 The Act requires the council to consider and make available services as part of a personal budget offer to young people and parents to meet identified outcomes within their Education Health and Care (EHC) plans.
- 7.2 In this respect from May 2014 the personal budget workstream started to identify opportunities for increased choice and control that could also deliver efficiency savings; and were reasonably simple to transfer into personal budgets.
- 7.3 As a result of the above and further work an outline Personal Budget policy statement was produced and published on the local offer. The policy contains information about how Merton will aim to deliver personal budgets, which is a "live" and evolving document; and focuses on two key areas initially identified for personal budgets - transport and short breaks.

Personal Travel Assistance Budgets (PTABs)

- 7.4 Merton has agreed a proposal to amend the way in which the council delivers its statutory obligation for children and young people with SEND that are eligible for transport services.
- 7.5 This includes offering a personal budget to:
- i. NEW EHC plan transport eligible children and young people under the new name of a "Personal Travel Assistance Budgets" or PTABs.
 - ii. Targeted existing eligible taxi users currently being paid for by the SEN transport service
 - iii. Existing pre legislation families who already receive some form of a direct payment or travel reimbursement for transporting their child/ren

or young person to school or college.

Short Breaks

- 7.6 The Act's requirement that councils consider and offer personal budgets to young people with EHC plans and their families covers both educational and social care services. Merton's current position is that it considers that at least some of its 'short breaks' services may be suitable for this funding model and we are undertaking preparatory work with a view to offering personal budgets for 'short breaks' from spring 2015.

Resource Allocation System (RAS)

- 7.7 To support the implementation of personal budgets for 'short breaks' a RAS or tool is being developed with professionals and will be consulted on with parents.
- 7.8 The RAS will allow the council to fairly and transparently allocate resources based upon needs and outcomes as part of a virtual and/or personal budget.
- 7.9 The aim is to complete the first phase of RAS development by April 2015.

8. JOINT COMMISSIONING

- 8.1 One of the key principles behind the Act is that the integrated EHC assessment and planning model is supported by integrated commissioning arrangements. In 2014, Merton's CCG agreed the funding for a number of health staff to be co-located with education and social care staff undertaking EHC planning and delivery. Interim arrangements have been made pending recruitment of permanent postholders into this team and it is recognised that significant development is still required to establish a truly integrated model.
- 8.2 A joint funding panel (Tripartite Panel) of council and CCG commissioning staff is in place to support joint commissioning of individual packages of care and/or placements of children and young people. It is expected that this panel will continue until the integrated EHC planning processes are fully embedded at which point it is considered most appropriate that funding decisions would routinely be made by the Decision Making Group at which the EHC plans are presented for approval.
- 8.3 A key outstanding statutory requirement under the new reforms is the provision of a "Designated Medical Officer" to work extensively with the SENDIS team.

9. CONSULTATION UNDERTAKEN & PROPOSED

Children & Young People

- 9.1 In October 2014 as part of the requirement of the reforms the council commissioned Merton Mencap to engage with local young people and consult on the following areas:
1. To communicate and check young people understand the key changes in the Special Educational Needs reforms in line with the Children & Families Act 2014 (Part 3) and the [SEND Code of Practice July 2014](#)
 2. To find out what young people think of the new web-based system, The Local Offer (by trial / testing)
 3. To explain Merton's Education Health & Care plan and explain cyp opportunity to contribute to the plan
 4. To find out how young people want to be involved in planning their services for their future
- 9.2 The feedback for the Local Offer is included in this report (Section 3.3) however a recommendation summary of the overall feedback is included as Appendix 3.

Local Parents

- 9.3 Parents have been consulted across all areas of the Children & Families Act 2014 Part 3 reforms and were an integral part of the various workstreams. However, following the conclusion of the workstreams from October 2014, at the parent group's request; there has been no further council led consultations.

Short Breaks & Personal Budgets

- 9.4 A Preparation for Adulthood Fair has been arranged for 9 March 2015 in which there will be some consultation with parents about personal budgets in Merton. However this is also taking place at the fair where parents will have the opportunity to meet and speak with 14+ providers and the services they have to offer for young people

10. DFE MONITORING VISIT

- 10.1 The Department for Education carried out a programme of monitoring visits in autumn 2015 to evaluate how effectively local authorities were

implementing the new reforms under the Children & Families Act 2014 (Part 3). Merton was considered to be making reasonable progress in implementing the Act's requirements and advice was provided on further development.

11. FINANCIAL AND RESOURCE IMPLICATIONS

- 11.1 Staffing and resource implications are being evaluated during the first phase of roll out. Work is taking place to clarify the functions required within services to deliver the reforms and to scope the implications for the SENDIS structure and integrated management.

12. RISK MANAGEMENT IMPLICATIONS

Staff Training

- 12.1 As the reforms continue to be implemented the current processes, policies and documentation will change. For outcomes to improve for children and young people with SEND, services are required to work in a more integrated way. Without significant multi-service and multi-agency professional development, the required level of change, including culture change, will not be achieved. A robust and integrated professional development programme is essential.

- 12.2 Failure to implement a rolling training programme will lead to a disjointed and inconsistent service.

Personal Budgets

- 12.3 If the personal budget offer is not promoted and the right systems set up the council will fail to give parents the freedom to create integrated solutions for their children and young people.
- 12.4 This will in future also lead to excessive budget pressures for services that could be made more easily available in the community.

13. APPENDICES – THE FOLLOWING DOCUMENTS ARE TO BE PUBLISHED WITH THIS REPORT AND FORM PART OF THE REPORT

None.

14. BACKGROUND PAPERS

By way of web-links

[Children & Families Act 2014 \(Part 3\)](#)

[SEN Travel and Assistance policy](#) (Merton)

[Requesting a Personal Budget](#) (pages 178 – 184 from the SEND Code of Practice)

[Home to School travel and transport statutory guidance](#) (DFE)

[Section 508A \(1\), of the Education Act 1996](#) notes

[Personal Budgets Pilot Policy Statement](#) (Merton Local Offer)

Committee: Children and Young People Overview and Scrutiny Panel

Date: 24th March 2015

Agenda item: 6

Wards: All

Subject: LA Role in Promoting Access to Childcare and Early Education

Lead officer: Allison Jones Service Manager Early Years

Lead member: Councillor Maxi Martin

Forward Plan reference number:

Contact officer: Allison Jones Service Manager Early Years

Reason for Urgency: The Chair has agreed the late circulation of this report.

Recommendations:

- A. For Children and Young People Overview and Scrutiny Panel to note the items in the report
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1 PURPOSE OF REPORT AND EXECUTIVE SUMMARY

- 1.1 The purpose of this report is to provide an update on the role of the Local Authority, and the progress made by Merton Early Years Service, in relation to the specific delivery of the Childcare Act 2006 statutory duties: promoting access to childcare and early education for families.
- 1.2 The Local Authority has a range of statutory duties underpinned by statutory guidance, which provides the framework for the promotion and access to childcare and early education for families. This is a key strand of work within the early years service. The key duties are:
- provide information, advice and assistance to parents and prospective parents on provision of childcare in their area
 - to secure sufficient childcare, so far as is reasonably practicable, for working parents, or parents who are studying or training for employment, for children aged 0 – 14 (up to 18 for disabled children)
 - to secure early years provision free of charge for every child in their area until the child reaches compulsory school age (the beginning for the term following their fifth birthday) for 3 and 4 year olds and eligible 2 year olds
 - to secure information, advice and training for specific early years providers on the following matters:
 - ✓ meeting the requirements of the Early Years Foundation Stage;
 - ✓ meeting the needs of children with special educational needs and disabilities, vulnerable and disadvantaged children;
 - ✓ effective safeguarding and child protection.

2 DETAILS

Provide information, advice and assistance to parents and prospective parents on provision of childcare in their area

- 2.1 Merton's Family Services Directory (FSD) website (www.merton.gov.uk/fsd) provides searchable detailed profiles of Merton's Ofsted registered childcare and early education providers. This is supplemented by information about types of provision, questions to ask providers and help with childcare costs.
- 2.2 The website attracts around 10,000 unique visitors (different individual users) each month and the most popular searches are for childcare.
- 2.3 This information is kept up to date with daily updates from Ofsted and providers are able to self-update their entries, which are checked for veracity before being published. Annual surveys help to supplement this updating of information.
- 2.4 For parents of children eligible for free/funded places for 3 and 4-year-olds, an annual Nursery Admissions Brochure is produced explaining the benefits of early education, how to apply for a school nursery class place and including additional information about local Private, Voluntary and Independent (PVI) providers. This is distributed through community primary schools and children's centres and is also available online.
- 2.5 For families seeking free/funded early education places in the PVI sector, the Merton Directory of Providers is published on our website. This is a register of all providers delivering the funded entitlement including their offer of delivery ie sessional offer, full day care, flexible
- 2.6 Information about the benefits of free early education for 2-year-olds and how to apply for places is currently distributed via our Childcare Brokerage Service, children's centres and partners, such as the Health Visiting Service. Information in languages other than English is also available and is additionally distributed via local community organisations which support families where English is not the first language. All this information is provided as leaflets and online.
- 2.7 Information, advice and guidance is available via email and telephone. Requests for information via these channels have diminished significantly in the past 3 to 4 years in line with the increasing usage of the FSD. Telephone and email enquiries are now usually of a more complex nature, such as when a parent has additional requirements around finding childcare. Most of these enquiries relate to free/funded early education places and the various subsidies that parents can access if they are using registered childcare.
- 2.8 Families with children with SEN or disabilities are provided with additional information about how childcare providers can support their child's additional needs via the Local Offer, which is published at www.merton.gov.uk/localoffer.
- 2.9 The borough's children's centre staff are able to provide assistance to families in their search for childcare in their area and parents are encouraged to visit their local centre if they require any support. Families already participating in children's centre services are offered information and advice, including about childcare, during sessions they attend.

- 2.10 The Service holds the Family First Quality Assurance for Family Information Services and each Children's Centre locality is working towards the Children's Centre Family First Award
- 2.11 This year there has been heightened activity regarding the promotion and access to free/funded provision for children eligible for 2 year funding. This has included borough wide campaigns such as publicity on buses, on trams and local bus stops. In addition there has been extensive locality based outreach and targeted dissemination of information to eligible families. Appendix 1

To secure sufficient childcare, so far as is reasonably practicable, for working parents, or parents who are studying or training for employment, for children aged 0 – 14 (up to 18 for disabled children)

- 2.12 To secure sufficient childcare places, local authorities **should**:
Take into account what is 'reasonably practicable' when assessing what sufficient childcare means in their area and consider :
- the state of the local childcare market, including the demand for specific types of providers in a particular locality and the amount and type of supply that currently exists;
 - the state of the labour market;
 - the quality and capacity of childcare providers and childminders registered with a childminder agency, including their funding, staff, premises, experience and expertise;
 - encourage schools in their area to offer out-of-hours childcare from 8.00am and 6.00pm;
 - encourage existing providers to expand their provision and new providers to enter the local childcare market.

Report annually to elected council members on how they are meeting their duty to secure sufficient childcare, and make this report available and accessible to parents.

- 2.13 An assessment of the childcare market is carried out which provides an overview of the supply of provision across different types of childcare across the borough. Appendix 2a and 2b showing the distribution of provision across Merton by (registered provision only). The last Childcare Sufficiency Assessment can be found at http://www.merton.gov.uk/childcare_sufficiency_report.pdf
- 2.14 For parents who are working, studying or training Merton has a good supply of Ofsted registered childcare. Ofsted registration is important not only as a quality indicator but also as it only this type of provision that parents can use if they want to claim various childcare subsidies including childcare tax credit, care to learn, salary sacrifice and nursery education funded provision.
- 2.15 The supply of childcare is fairly static on a year by year basis, with variations in accordance to type (reduction in number of child minders, increase in day nurseries and preschools). The highest number of places is concentrated within the West of

the borough and this area has seen growth in the number of places available for children aged 0-5.

- 2.16 There is a good supply of breakfast, wrap around, out of school and holiday provision for children of primary school age. From a total of 43 Primary schools, 42 of them provide some form of out of school childcare. The types of provision each school offers is published within the Primary School Admissions Brochure, promoting access and choice at the point of Primary School Application
- 2.17 There is a more mixed picture in terms of provision for children with Special Needs and disabilities, particularly for children with complex needs. There are a range of short breaks and recreational activities available, but securing provision for working parents across the wider childcare sector for children with additional needs is patchier than other types of provision.
- 2.18 The supply of places for older children (secondary age) is predominately delivered via after school clubs, leisure and youth providers, and is often not registered with Ofsted
- 2.19 Assessing sufficiency requires an overview of demand, and this can be a challenge in terms of understanding the borough wide demand for childcare. A range of “intelligence” is used which includes: snapshot of waiting lists, snapshot of vacancies, monitoring parental enquiries, liaison with school admissions to monitor take up of nursery class places and monitoring “hits” on the website. This indicates that there can be some geographical gaps in provision for babies, affordability, children with SEN and disabilities and children in first term of secondary school. However, the market often regulates itself and the LA will become a broker or a facilitator in response to specific issues ie new statutory duty for 2 year olds (1000 places) or working in partnership to secure sufficiency where there is planned population growth ie new housing or school expansion for example:

To secure early years provision free of charge for every child in their area until the child reaches compulsory school age (the beginning of the term following their fifth birthday) for 3 and 4 year olds and eligible 2 year olds

- 2.20 All maintained primary schools in Merton offer funded early education for 3 and 4 year olds, securing a high number of sessional early years places free of charge for children. Approximately 80% of all children take up their place in a school, with the remaining 20% taking up a funded place across the PVI sector, usually forming part of a full day care offer or within the independent school sector
- 2.21 Take up of the universal funded entitlement is high with 99 % of all children taking up a place. This is higher than the national average of 96% and London average of 92% (<https://www.gov.uk/government/publications/early-years-benchmarking-tool>)
- 2.22 The market model in Merton (high number of sessional places supplied by the maintained sector) has provided some challenges for the roll out of 2 year funded places. As such Merton has relatively few sessional providers delivering funded education. Plans to develop and stimulate the market have been on-going and to date there are approximately 650 available places across the market, with approximately 1000 eligible children. In January 2015, 510 children took up a funded 2 year old place, which is approximately 55% of the eligible cohort. Further

work will take place this year continuing to stimulate the market and raise the profile of the offer, promoting access to childcare and early education for families

- 2.23 Activity to securing sufficiency of places for 2 year olds is currently concentrated in areas in the east of the borough. However, there are eligible children across all areas of the borough (see appendix 3). The distribution for eligibility is broader than just the Free School Meals and Looked After Children eligibility as the 2 year old offer includes additional eligibility criteria which includes low income working families and children with SEN/Disability as defined by having an Education Health and Care Plan or claiming Disability Living Allowance.

To secure information, advice and training for specific early years providers

- 2.24 The Early Years' Service works in partnership with the range of PVI providers to secure sufficient provision that is of good (and above) quality. As such providers can be supported from the point of registration through to inspection with Ofsted. Providers can choose to receive support from the service and there are associated charges for accessing some parts of the Continuous Improvement Offer of Support. The LA is expected to secure provision for 3 and 4 year olds that is Requires Improvement and above, for 2 year olds it is expected that the LA will secure provision that is good and above.
- 2.25 Providers must evidence that they can meet the statutory requirements of delivery that includes the delivery of the Early Years Foundation Stage, safeguarding and supporting children with SEN/Disabilities. The service currently offers a range of group training, on site training, bespoke training, face to face advice and guidance specifically in relation to these particular aspects.
- 2.26 Information, advice and guidance is secured through the following:
- Signposting, web information and email correspondence
 - Continuous Improvement Offer of Support
 - Telephone advice and visits to providers
 - Provision of training and on site improvement support
- 2.27 Merton has a long standing relationship with its local childcare providers, and take up of the service offer is high with 328 registered providers signed up to the Continuous Improvement Offer of Support, 257 settings taking up a training event (1800 practitioners from these settings attended a training event)and almost 400 visits to early years settings. 568 staff from the PVI sector attended a safeguarding training event and 167 children were supported in PVI settings due to having additional needs.

3 ALTERNATIVE OPTIONS

- 3.1. There are no alternate options in relation to the Council's responsibilities for the delivery of its statutory duties. However, how Merton delivers its statutory duties is at local discretion and a range of alternative options will be considered as the service transforms and reshapes in order to meet the on-going financial pressures and efficiencies.

4 CONSULTATION UNDERTAKEN OR PROPOSED

- 4.1. There has been no specific consultation carried out as part of this report. On a yearly basis, information is collected from the early years providers which provides a detailed overview of the particular characterises of this part of the market. This is published by the Government and is used as an Early Years Benchmarking Tool. There is planned consultation in accordance with the transformation and efficiencies programme.

5 TIMETABLE

- 5.1. The next Childcare Sufficiency Assessment is due for publication in May 2015. The statutory duty to provide places for all eligible children aged 2 is from September 2014. The transformation of the service will take place from now until 2018-2019.

6 FINANCIAL, RESOURCE AND PROPERTY IMPLICATIONS

- 6.1. Funding for meeting the statutory duties is via the Early Years Block of the Dedicated Schools Grant (place funding, infrastructure support/securing sufficiency, support for children with additional needs and supporting quality) and Council funding for the Early Years Service including Family Information Service/FSD, and improving quality (training).
- 6.2. The on-going transformation and efficiencies across the service in the next 3 years, will require a review of the current offer/services with a view to reducing the offer, raising income and maximising use of self serve and channel shift so that families and providers can self serve where appropriate. There will be a minimal offer in lien with the statutory duties only.

7 LEGAL AND STATUTORY IMPLICATIONS

- 7.1. The Council has a range of duties that must be delivered in accordance with the statutory duties.

8 HUMAN RIGHTS, EQUALITIES AND COMMUNITY COHESION IMPLICATIONS

- 8.1. Take up and access to high quality childcare and early education is a key determinant of children's outcomes and research shows a lasting impact on children's progress and long term economic outcomes through the attendance of high quality early years services.

9 CRIME AND DISORDER IMPLICATIONS

- 9.1. Take up and access to high quality childcare and early education is a key determinant of children's outcomes and research shows a lasting impact on children's progress and long term economic outcomes through the attendance of high quality early years services.

10 RISK MANAGEMENT AND HEALTH AND SAFETY IMPLICATIONS

- 10.1. None specific to this report, however the LA plays a key role in supporting settings to meet their statutory duties and improve their practice . This includes managing risk (safeguarding) and ensure that the statutory childcare welfare requirements are adhered to (health and safety).

11 APPENDICES – THE FOLLOWING DOCUMENTS ARE TO BE PUBLISHED WITH THIS REPORT AND FORM PART OF THE REPORT

- 11.1 Appendix 2a and 2b shows the distribution of provision across Merton by registered provision only.
- 11.2 Appendix 3 shows eligible children across all areas of the borough.

12 BACKGROUND PAPERS

- 12.1 EARLY EDUCATION AND CHILDCARE STATUTORY GUIDANCE 2014

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Outreach and Publicity



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Appendix 2a

Locality	Childminder	Preschool / Nursery	Out of School Clubs & Wraparound	Maintained School / Academy Nursery (class)
St Helier, Morden and Wimbledon	161	37	56	18
South Mitcham	58	11	29	10
North Mitcham and Colliers Wood	96	32	46	15

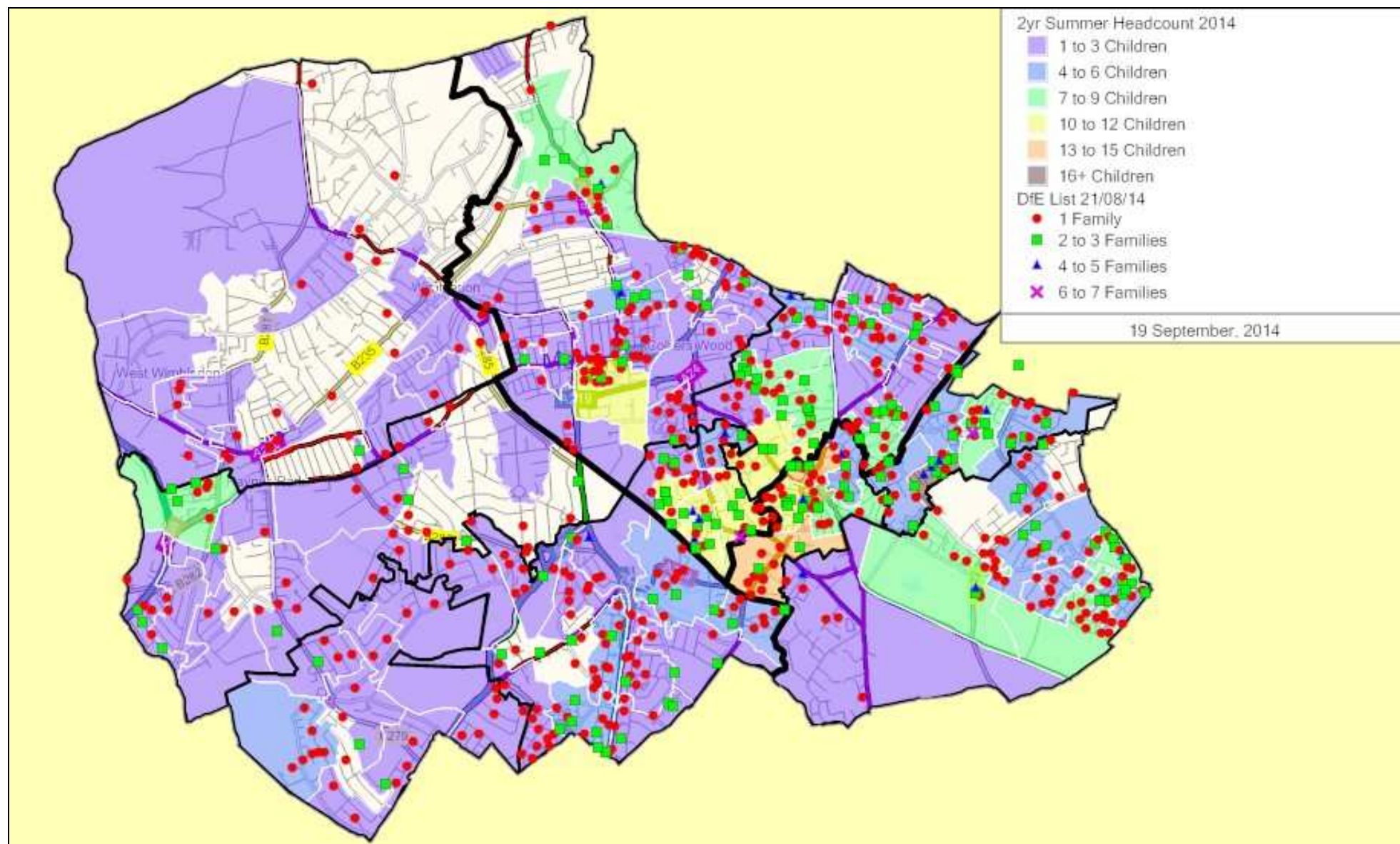
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Appendix 2b– Map of 2, 3 and 4 year olds funded providers August 2014



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Appendix 3 – Map Eligible 2 Years Olds and Take Up as of Summer 2014



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Committee: Children and Young People's Scrutiny Panel

Date: 24th March 2015

Agenda item: 7

Subject: Progress Report on Priorities for Children and Young People's Health

Lead officer: Dr Kay Eilbert, Director of Public Health

Lead member: Cllr Maxi Martin

Contact officer: Julia Groom, Consultant in Public Health (C&H),

Reason for Urgency: The Chair has agreed the late circulation of this report

RECOMMENDATIONS:

- To note and consider progress on the development and delivery of the Health and Wellbeing Strategy 2013/15 Priority 1: Giving Every Child a Healthy Start.
- To note priorities for the refreshed Health and Wellbeing Strategy for 2015/16-2017/18
- To consider opportunities for further integration and partnership work to progress the development and delivery of Priority 1 outcomes.

1. PURPOSE OF REPORT AND EXECUTIVE SUMMARY

- 1.1 The purpose of this report is to update the CYP Scrutiny Panel on the Health and Wellbeing of Children and Young People and development of refreshed priorities for the Health and Well-being Strategy 2015/16 to 2017/18.
- 1.2 Merton has made good progress on a number of health outcomes including, maintenance of a low number of babies born with low birth weight, a downward trend in overweight or obesity in 4-5 year olds which is better than London and England averages; and continuing reduction in teenage conceptions.
- 1.3 The report highlights areas for improvement including immunisation rates, halting the upward trend in overweight and obesity rates in 10-11yr olds and narrowing the gap in school readiness and educational achievement..
- 1.4 Finally the report provides an overview of next steps for 2015/16 that will enable us to improve outcomes for children and young people's health in Merton.

2. DETAILS

2.1 Introduction

2.1.1 Merton Health and Wellbeing Strategy 2013/14 included Priority 1: 'Giving every child a healthy start'. This reflected evidence set out in the Marmot Review

'Fair Society, Healthy Lives (2010)' which set out the case for focusing investment on early years and advocated a life-course approach to tackling health inequalities, demonstrating that giving every child the best start in life is crucial to reducing health inequalities across the life-course.

2.1.2 The Strategy included a commitment to further strengthening our partnership approach to preventative strategies for health and wellbeing, across all universal services and settings, and ensuring the earliest identification of health and wellbeing issues to better target services to those families that are in greatest need of support, particularly for residents living in the east of the borough.

2.1.3 The Strategy complements Merton's Children and Young People's Plan, which focuses on improving outcomes for a number of key groups of children vulnerable to poorer outcomes including safeguarding children, looked after children, youth offending/youth inclusion, and children with special educational needs and disabilities, alongside our focus on Early Intervention and Prevention.

2.1.4 The Health and Wellbeing Strategy is currently being refreshed, including outcomes for Priority 1: which has been refocused: **Good start in life – early years and achieving a strong educational base for children and young people**

The refreshed strategy takes a sharper focus on inequalities in outcomes, where we face the biggest challenges for children, young people and families, and recognises the importance of educational achievement on future health and wellbeing.

The following outcomes are proposed for 2015/16 – 2017/18:

- All babies have the best start in life
- All children and young people have good emotional wellbeing and resilience
- Children and young people make healthy lifestyle choices
- Children and young people fulfil their educational potential

The Children's Trust Board lead on the delivery of outcomes within the Health and Well-being strategy related to children and young people. The process involves priorities within the Strategy being reported to the Children's Trust Board throughout the year and high level outcomes are part of the Trust's performance indicators, which are reviewed quarterly. An annual report goes to the Health and Wellbeing Board.

In addition the Joint Strategic Needs Assessment is available online and provides detailed information on all areas of the Strategy: <http://www.merton.gov.uk/health-social-care/publichealth/jsna.htm>

2.2 Progress to Date and Plans for 2015/16 onwards

OUTCOME 1.1: All babies have the Best Start in Life

This outcome aims to provide every baby with the best start in life setting a foundation that helps reduce health inequalities across the life course.

Current Progress

Progress has focussed on the delivery of the Healthy Child Programme (0-5 years) Children's Centres interventions; the Family Nurse Partnership and improving Childhood Immunisations.

Healthy Child Programme 0-4 Years: the Healthy Child Programme 0-4 years (HCP) is a universal service that sets out an integrated approach to improving health and wellbeing and supporting families. In 2013 a review was undertaken of Children's Centres and Early Years, to review the effectiveness of current delivery models and services and the extent to which the integrated working practices between the key agencies deliver the core purpose of Children's Centres. This identified a range of good practice where health and children's centres are working together. This includes:

- Borough wide delivery of the Healthy Child Programme via Children's Centres – includes child health clinics, development reviews and health promotion
- Co-delivery of evidence based parenting programmes (Baby Incredible Years)
- New birth visit by Health Visitor includes registration with local Children's Centre
- Health Visitor attendance on Children's Centre Locality Advisory Board and participation in multi-agency targeted family work
- Specialist Health Visitor working with Early Years Integrated Service for Children with SEN and Disabilities

An Early Years Pathway Development Manager has been appointed who will also take forward some of the recommendations from the review as well as developing more integrated pathways between Health Visiting, Midwifery, Children's Centres and GP Practices provide a more seamless service.

Family Nurse Partnership (FNP): the Family Nurse partnership is now established with a team in place delivering an evidence-based preventative early intervention programme for vulnerable first time mothers under 20 years old. There are currently 17 active cases in Merton. The programme is based on a strong evidence base from a US programme and has strict eligibility criteria.

Health Visiting Services: In October 2015 responsibility for commissioning Health Visiting Services and the Family Nurse Partnership will transfer from NHS England to the Local Authority. In addition Community Health Services, including Health Visiting, are being re-procured from 2016/17. In order to inform both the safe and effective transition of services to LB Merton and the re-procurement process, Public Health, in partnership with Children, Schools and Families undertook a review of the service. Work is currently underway on both transfer and re-procurement of services.

Childhood Immunisation: NHS England has been the new commissioner for childhood immunisations across the country since April 2013. Public Health has an assurance role. LBM Scrutiny Committee have identified Childhood Immunisations as a key focus area for improvement. Scrutiny has undertaken a review including a number of engagement sessions with partners as well as commissioners to review how coverage could be improved. We are awaiting the report and recommendations. Merton CCG is working with GP practices to improve coverage. Public Health works

with the 3 GP localities to review childhood immunisation rates and share best practice to improve performance.

Breastfeeding: In September 2014 a Sutton and Merton Breastfeeding Strategic Group was established improve partnerships on breastfeeding and develop an action plan to improve sustained breastfeeding in areas of lower prevalence. The local Maternity units at St George's and Epsom and St Helier have been successful in achieving level 3 UNICEF Baby Friendly accreditation, which aims to improve breastfeeding rates. Sutton and Merton Community Services are working towards UNICEF level 3 accreditation.

The Health and Wellbeing Strategy 2015/16 to 2017/18 will focus on improving:

Childhood Immunisation as measured by MMR2 at age 5 years: There have been some increases in childhood immunisation coverage, but this is still below London and England levels and remains a priority.

- MMR2: Latest Q2, 2014/15 Merton: 76.2% which is lower than London (80.8%) and England (88.5%). Latest annual figures for 2012/13 Merton 68.9% which is again lower than London (80.8%) and England (87.7%).

OUTCOME 1.2: All children and young people have good emotional wellbeing and resilience

This outcome aims to develop a proactive approach to child mental health, wellbeing and resilience, with the provision of prompt support and early interventions to promote good mental health.

Current Progress

Parenting Strategy: Merton Parenting Strategy is currently being refreshed, setting out our approach to parenting support including the need to signpost our parents to a range of universally available services to which all parents are entitled, provide targeted services for parents who need specific support at particular times and provide mandatory interventions for those parents who are unable to seek out or engage with existing support services. The targeted parenting offer includes a range of evidence based accredited parenting programmes. The need for a targeted parenting programme is identified using a Common and Shared Assessment (CASA) or Single Assessment as part of the multi-agency support provided at the enhanced and specialist levels of our Merton Child Well Being Model (MCWBM). 78% of parents that commenced a programme during 2013-2014 completed the course.

Targeted mental health support in schools (TAMHS): This aims to transform the way that mental health support is delivered to children, to improve their mental wellbeing and tackle problems in a timely way. 23 Primary Schools and 1 Secondary school directly commissioned TAMHS in 2013/14. Tier 2 level mental health support commissioned by schools also includes learning mentors, home-school link workers, nurture groups and emotional literacy support advisors.

Specialist mental health support to children and young people: Following the NHS changes in April 2013; Tier 4 CAMHS is now commissioned by NHS England. Tier 3 CAMHS is part of the overall mental health contract provided by South West London and St George's Mental Health NHS Trust. This is commissioned through a collaborative commissioning arrangement led by Kingston CCG on behalf of Merton CCG (and other sector CCGs).

A range of Tier 2 services is available in Merton for young people and a number of CAMHS workers are embedded within the London Borough of Merton's Looked after Children's Team, Youth Offending Team and our Special Schools, working with some of most vulnerable children and young people.

The provider is currently in the process of implementing young people's IAPT (improving access to psychological therapies) and Merton CCG has identified resources to develop a single point of access (SPA) to improve access to services and reduce waiting times.

A needs assessment of CAMHS in Merton will be undertaken jointly with LBM, Merton CCG and local providers in 2015, led by Public Health. This review will inform the development of a strategy as well as identifying gaps in services and best practice for implementation.

Health and Wellbeing Strategy 2015/16 to 2017/18 will focus on improving:

- **Emotional well-being of Looked After Children** – Average strengths and difficulties score for all LAC 5-16 who have been in care for at least 12 months. A normal score is under 14. The average Merton score for 2012/13 is 14.5, however the trajectory is upwards.

OUTCOME 1.3: Children and young people make healthy lifestyle choices

This outcome aims to help young people feel confident and informed to make healthy lifestyle choices as they move into adulthood and to ensure that their parents and carers are fully informed to encourage and support them.

Current progress

Progress has focussed on delivering the National Child Measurement Programme and targeted services for child weight management; the Healthy Child Programme and School Nursing; and healthy schools:

Healthy Weight: The National Child Measurement Programme is a mandatory service that measures children in Reception and Year 6 in order to monitor trends in weight and offer support to children and families. Merton has a targeted service for child weight management, with a 12 week programme for children between ages 4-19 years. In 2013-14 in addition to the core service a number of workforce training sessions were delivered, and a 6 week obesity prevention programme focused on schools in central and east Mitcham.

In 2015 Weight management services for children and their families are being re-commissioned with an increased focus on prevention, and a Merton Healthy Weight Strategy for adults, children and families will be developed which will take a multi-agency approach to prevention and early support.

The Healthy Child Programme (HCP) 5-19 Years: a review of School Nursing Services took place in 2013, in order to inform service development and future commissioning. This included reviewing data and engaging with staff, schools, parents and young people. Service developments have included a move to a needs-based model of service allocation, reflecting the different levels of needs in schools across the Borough; addressing service pressures including the increasing demand to undertake work on safeguarding; additional investment by Public Health to fund an additional school Nurse in order to increase preventative work with schools. The service continues to deliver the National Child Measurement Programme.

The School Nursing Service together with the Health Visiting service is currently being re-procured for 2016/17, as part of wider Community Health Services re-procurement led by Merton CCG in partnership with LB Merton. This provides an opportunity for service modernisation, such as introducing enhanced mobile IT.

Healthy Schools: A Merton Healthy schools programme has been developed, which focuses on supporting the 20 schools in east of the borough. Two coordinators have been recruited to support the 2 school clusters in the east (Mitcham Town and East Mitcham) and a range of projects have been commissioned to support school in improving the health and well-being of their pupils, staff and families e.g. Healthy Eating, gardening and food growing, physical activity etc. Commissioned programmes have been based on an audit undertaken to identify gaps and support needs.

Smoking: 70% of smokers begin before their 18th birthday and vulnerable young people are more likely to smoke. Stop smoking services for young people are integrated with the LiveWell service.

In 2013/14 66 young people set a quit date and 18 were successful, which is a 27% quit rate, below London and England levels. Work is underway to increase referrals to the service by increasing links with other health professionals, schools and partners. The new priorities for 2015/16 will be to embed support in other services by training more frontline staff to provide stop smoking advice to children and young people; and to focus support on vulnerable groups more likely to smoke.

Substance Misuse: A new 'Risk and Resilience' service for young people has been commissioned which recognises the links between the use of drugs, alcohol and sexual activity and will integrate substance misuse treatment and prevention, detached youth outreach service and some sexual health promotion services. The new service will commence 2015.

Health and Wellbeing Strategy 2015/16 to 2017/18 will focus on:

- **Narrowing the gap in excess weight between east and west:** Gap between % of 10-11 year olds with obesity weight between east and west Merton 6.2% (2010/11-2012/13).

OUTCOME 1.4: Children and young people fulfil their educational potential

This is a new outcome in the refreshed Health and Wellbeing Strategy and it reflects the critical importance of educational attainment on employment opportunity, material prosperity and long term health outcomes. Although educational outcomes in Merton are improving rapidly, there is a need to continue to reduce the gap in attainment, especially improving educational outcomes for those pupils eligible for pupil premium.

Current Progress

We know that if a child is well supported in early years, the outcomes for education and life chances are significantly improved. We will therefore continue to work in partnership with parents and our Private, Voluntary and Independent sector providers to promote the values of early education; ensuring young children have had the opportunity to develop the social and emotional skills, independence and curiosity that prepares them for school. We will support families to take up the services they are entitled to, including funded places for two year olds and to register their eligibility for the new Early Years Pupil Premium.

National statistics show that children on free school meals, or those with special educational needs, are around three times more likely to be persistently absent and there is clear evidence of a link between poor attendance at school and low levels of achievement. We will work with families to improve school attendance where this is an issue and continue to work with our schools to ensure that children and young people that require more intensive targeted support receive it.

Health and Wellbeing Strategy 2015/16 to 2017/18 will focus on::

- School readiness: narrowing the gap between % of **Pupil premium** children achieving a good level of development in early Years Foundation stage and children not eligible for pupil premium (15.5% 2013/14)
- School achievement: narrowing the gap in % children achieving 5 **GCSE's** A-C including English and maths between pupil premium children and children not eligible for pupil premium (24.8% 2013/14)

2.5 Next Steps and priorities for 2015/16

2.5.1 This report has provided an overview and update on current activity to deliver priorities in the Health and Wellbeing Strategy and has set out proposed refreshed priority outcomes for 2015/16 – 2017/18. All partners, including LB Merton, Merton CCG, NHS England and the Community and Voluntary sector must work together to continue to deliver joint priorities. The following activity highlighted in this report is being undertaken in 2015/16:

- Preparation for transfer of commissioning responsibility for Health Visiting and Family Nurse Partnership from NHS England to the Local Authority (October 2015)
- Procurement of Health Visiting, Family Nurse Partnership and School Nursing services for 2016/17
- Development of Early Years integrated pathways to ensure there is effective communication and transition across services.
- Development of Multi-agency Breastfeeding Action Plan.
- Work with NHS England and GPs to increase Childhood Immunisation coverage lead by the Scrutiny focus report.
- Development of training and support for staff in children's centres in addressing parental mental health in Children's Centres
- CAMHS review to inform the development of a Strategy for Merton in line with local needs.
- Delivery of Healthy Schools Programme to 20 schools in the east of the Borough.
- Launch of Healthy weight strategy and re-commissioning of Children's Healthy Weight Management Services
- Rollout of training for front line staff on stop smoking support for children and young people
- Mobilisation of integrated 'Risk and Resilience' service of young people.

2.5.2 Changes to commissioning responsibility, potential changes to commissioning arrangements and the development of a new health infrastructure provide important opportunities to build on and strengthen Merton's approach to improving health and tackling health inequalities, working in partnership with the Health and Well-being Board and health partners in the NHS, Community and Voluntary sector. The refresh of the Health and Wellbeing Strategy in 2015 is providing an opportunity to take a more integrated approach and focus on prevention and early intervention for children and young people.

3. ALTERNATIVE OPTIONS

None

4. CONSULTATION UNDERTAKEN OR PROPOSED

Consultation with Stakeholders and HealthWatch on the refresh of the Health and Wellbeing Strategy took place January-February 2015.

5. TIMETABLE

Children's Trust Board to report to Health and Wellbeing Board on Priority 1 in Health and Wellbeing Strategy on an annual basis.

6. FINANCIAL OR RESOURCE IMPLICATIONS

7. LEGAL AND STATUTORY IMPLICATIONS

None

8. HUMAN RIGHTS, EQUALITIES AND COMMUNITY COHESION IMPLICATIONS

None

9. CHILDREN & YOUNG PEOPLE'S PLAN IMPLICATIONS

The activities identified in this report will contribute to delivery of priorities for prevention and early intervention.

10. RISK MANAGEMENT AND HEALTH AND SAFETY IMPLICATIONS

None

11. APPENDICES – THE FOLLOWING DOCUMENTS ARE TO BE PUBLISHED WITH THIS REPORT AND FORM PART OF THE REPORT

None

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Committee: Children and Young People Overview and Scrutiny Panel

Date: 24th March 2015

Agenda item: 8

Wards:

Subject: Update on Developments Affecting Children, Schools and Families Department

Lead officer: Yvette Stanley, Director of Children, Schools and Families Dept

Lead members: Cllr Maxi Martin, Cllr Martin Whelton

Forward Plan reference number: N/A

Contact officer: Paul Ballatt, Head of Commissioning, Strategy and Performance

Reason for Urgency: The Chair has agreed the late circulation of this report.

Recommendations:

A. Members of the panel note the contents of the report.

1 PURPOSE OF REPORT AND EXECUTIVE SUMMARY

- 1.1. The report provides members of the panel with information on key developments affecting Children, Schools and Families Department since the panel's last meeting in February 2015.

2 DETAILS

- 2.1 On 9 March 2015 the Department for Education confirmed that the Harris Wimbledon Free School application has received 'pre-opening' approval from the DfE. There are a number of steps to be taken before an opening date can be confirmed – including identification of a site; DfE approval of the school's proposed curriculum; a statutory consultation to be undertaken by the proposed provider – and officers will be working with the Federation and DfE/EFA to seek to ensure the delivery of the school meets our basic need school places requirement.
- 2.2 With regard to secondary school places demand, the council received an additional 161 applications this year and was able to offer every resident a secondary school place, with three schools receiving 'central offers' (where a preference place cannot be offered) slightly above their published numbers. As part of our overall secondary places strategy, officers will be progressing design work shortly at Harris Morden, Harris Merton and St. Mark's CE Academy to prepare for possible expansion when it is required – as indicated in previous reports officers will be keeping demand under constant review to determine if all these schemes will be required but it is considered prudent to undertake preliminary work at this stage to enable confirmed schemes to be progressed speedily .
- 2.3 The primary school expansion programme continues to progress well, with a major phase at Hillcross completed earlier this month, and the classrooms at Poplar Primary School due to be handed over at around the date of this meeting. The first phase of the Dundonald Primary School/Recreation Ground

has now been completed with the children's public playground now open. The school extension phase will commence next month.

- 2.4 There has been one Ofsted school inspection report published since the last panel update with Bond Primary School improving its rating from requiring improvement to good. 87% of Merton pupils are now attending schools rated as good or outstanding which is above national and London averages.
- 2.5 Brightwell Children's Home has recently been inspected – although the report of the inspection has not yet been published, inspector feedback was positive and we expect the home to retain its current rating of good.
- 2.6 Members of the panel will be aware of the current national concerns relating to the radicalisation of young people. Staff working with young people in all settings – eg in schools and youth provision; social care staff – are in key positions to identify those vulnerable to radicalisation, deter and discourage and, ultimately, to advise the police of concerns. Merton's LSCB is developing a local strategic response to this agenda and, as an initial step, key staff in CSF department are to be provided with 'Prevent' training delivered by the metropolitan police.
- 2.7 CSF department has recently been designated an outstanding employer for our work with Kingston University to enhance learning and development opportunities for social workers. This is a particularly pleasing award as the quality and range of training is a critical factor in both improving the quality of social work practice and in the recruitment and retention of social work staff.
- 2.8 The department is also part of the south London consortium of local authorities which recently received an Excellence in Public Procurement award for an innovation or initiative. The award relates to a cross borough initiative to improve procurement of placements for pupils with SEN from the private and independent sectors with a focus on quality and cost.

3 ALTERNATIVE OPTIONS

- 3.1. None for the purposes of this report.

4 CONSULTATION UNDERTAKEN OR PROPOSED

- 4.1. None for the purposes of this report.

5 TIMETABLE

- 5.1. N/A

6 FINANCIAL, RESOURCE AND PROPERTY IMPLICATIONS

- 6.1. No specific implications.

7 LEGAL AND STATUTORY IMPLICATIONS

- 7.1. No specific implications.

8 HUMAN RIGHTS, EQUALITIES AND COMMUNITY COHESION IMPLICATIONS

8.1. No specific implications.

9 CRIME AND DISORDER IMPLICATIONS

9.1. No specific implications.

10 RISK MANAGEMENT AND HEALTH AND SAFETY IMPLICATIONS

10.1. No specific implications.

11 APPENDICES – THE FOLLOWING DOCUMENTS ARE TO BE PUBLISHED WITH THIS REPORT AND FORM PART OF THE REPORT

- N/A

12 BACKGROUND PAPERS

12.1. None

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Committee: Children and Young People Overview and Scrutiny Panel

Date: 24 March 2015

Agenda item: 9

Wards: All wards

Subject: Performance monitoring

Lead officer: Paul Ballatt, Assistant Director of Commissioning, Strategy and Performance, Children Schools and Families

Lead member(s): Councillor Maxi Martin; Councillor Martin Whelton.

Forward Plan reference number: n/a

Contact officer: Naheed Chaudhry, Service Manager Policy, Planning and Performance.

Reason for Urgency: The Chair has agreed the late circulation of this report.

Recommendations: That the Children and Young People's Overview and Scrutiny Panel;

A. Note the current level of performance as at January 2015 for the reporting year 2014/15 (appendix 1)

1. **PURPOSE OF REPORT AND EXECUTIVE SUMMARY**

1.1. To provide the Children and Young People's Overview and Scrutiny Panel (CYP panel) with a regular update on the performance of the Children, Schools and Families Department and key partners. Data provided in appendix one is as at the end of January 2015. At the point of publishing this report the February 2015 data had not yet been validated (report due to be published 16 March 2015)

2. **DETAILS**

2.1. At a Children and Young People Scrutiny Panel in June 2007 it was agreed that the Children Schools and Families department would submit a regular performance report on a range of key performance indicators. This performance monitoring report would act as a 'health check' for the Panel and would be over and above the more detailed performance reports scheduled to the Panel which relate to specific areas of activities such as the annual Schools Standards report, Corporate Parenting Report, safeguarding performance report etc. This performance index is periodically reviewed and revised by Members. A new dataset was agreed at the January 2015 Scrutiny meeting and this will be implemented from April 2015 in line with the new financial year.

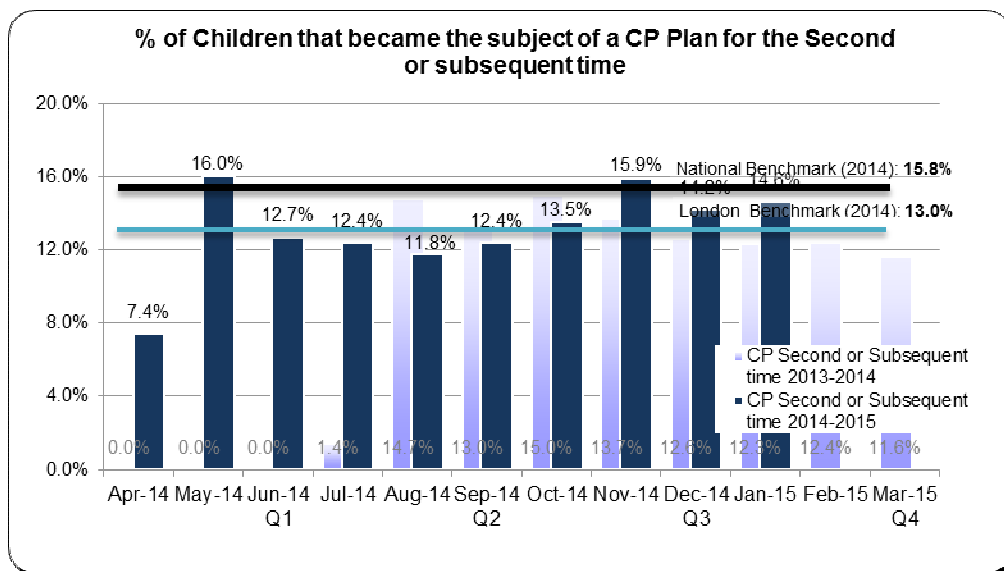
2.2. **January 2015 Performance commentary**

2.3. Appendix one presents the performance dataset for 2014/15. Comments are provided below on exception only for those indicators reporting as Red or Amber.

2.4. **Line 6 Percentage of children that became the subject of a Child Protection Plan for the second or subsequent time (NI 65) – Red.**

2.5. 15% of children subject to a child protection plan were the subject of a plan for the second or subsequent time. This indicator relates to 26 children with previous plans (new child protection plans started). A second plan is established where concerns which led to the original plan re-occur or where new concerns arise. It should be noted in January six family groups represented 15 of the 26 children on a second or

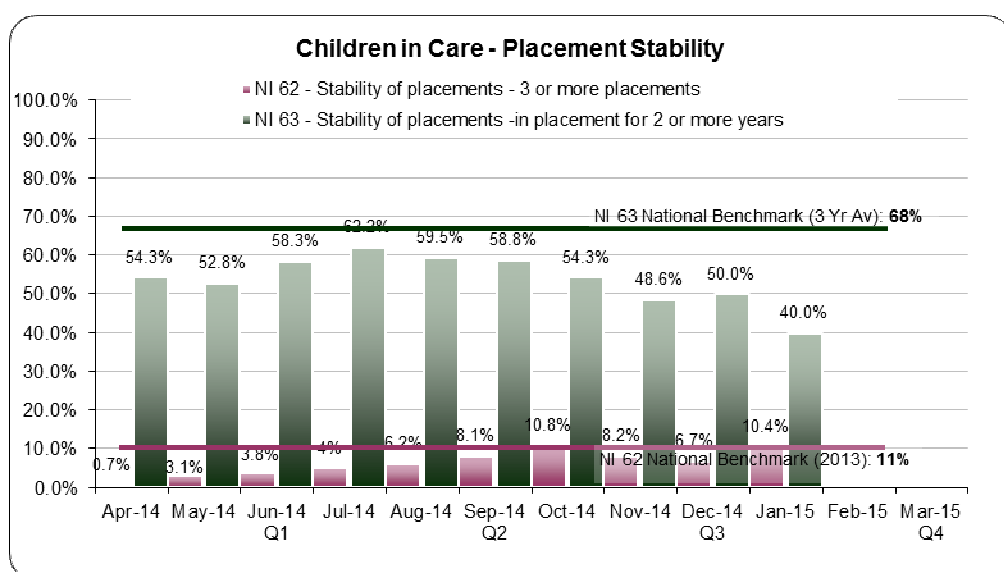
subsequent child protection plan. Due to the small numbers of children in this cohort one or two larger sibling groups can skew performance considerably. Although higher than Merton's norm, this indicator remains in line with the national average of 15.8% (CIN 2013/14) and just above the London average 13%. Members may like to note that the national average for 2013/14 (15.8%) has increased from last year (14.9% 2012/13).



2.6. **Line 12 Stability of placements of Children in Care (length of placement) – Red.**

2.7. This length of placement indicator refers to a small cohort of children under the age of 16 who have been in care for 2 and a half years or more and have been in their current placement for 2 years or more.

2.8. Of the total number of children in care only 35 children meet these criteria, 40% of these relevant children had been in a single stable placement lasting two years or more years. This equates to 14 of 35 children.



2.9. Twenty one children have not been in their placements for longer than 2 years. Again, the smaller nature of our authority and therefore smaller cohorts of children can skew performance. The national three year average for this indicator for

placement length is 68% (LAC 903). On an annual basis Merton is performing below the national benchmark, however in a like for like comparison of a three year rolling average we are in line with the national performance (Merton three year average 66%). It should be noted that the placement length indicator is complemented by the placement moves indicator (3 moves or more), Merton's January performance of 10.4% remains inline with the national benchmark of 11% (2013/14).

- 2.10. Moving forward placement stability remains a key focus for the authority and Corporate Parenting Board, a task and finish group has been established to review and where possible improve placement stability. The task and finish group is due to report to the Corporate Parenting Board in May 2015.

4 APPENDICES – THE FOLLOWING DOCUMENTS ARE TO BE PUBLISHED WITH THIS REPORT AND FORM PART OF THE REPORT


Appendix 1: CYPP performance index 2014/15 (January 2015)

5 BACKGROUND PAPERS

- 5.1.1 CSF Performance Management Framework <http://intranet/departments/csf-index/csf-performance.htm>

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Children and Young People Overview and Scrutiny Panel - Performance Index 2014/15

No.	Performance Indicators	Target 2014-15	Polarity	% Deviation	BRAG Rating (latest Outcome Period)	Apr-14	May-14	Jun-14 / Q1	Jul-14	Aug-14	Sep-14 / Q2	Oct-14	Nov-14	Dec-14 / Q3	Jan-15	Feb-15	Mar-15 / Q4	
Children's Social Care																		
1	Number of CASA's	n/a	n/a	n/a	n/a			99			90			106				Quarterly (Time lag in collating CASAs from partner agencies)
2	% of Single Assessments authorised within the statutory 45 days (Year to Date) (completed)	92%	High	3%	Green	64% (92%)	63% (90%)	59.6% (88%)	57.7% (88%)	58.0% (89%)	59.6% (90%)	59.0% (91%)	59.2% (94%)	59.5% (91%)	58.8% (90%)			YTD
3	% of Children subject of a Child Protection Plan with an allocated Social Worker	100%	High	0%	Green	100%	100%	100%	100%	100%	100%	100%	99%	100%	100%			Monthly
4	% of reviews completed within timescale for Children with Child Protection Plans (NI 67)	n/a	High	n/a	n/a	93%	92%	90%	92%	93%	93%	94%	84%	87%	95%			YTD (Apr-Dec figures revised Mar 2015)
5	% of Children subject of a Child Protection Plan who had a 4 weekly CP visit in timescale (child seen)	n/a	High	n/a	n/a	92%	94%	95%	93%	93%	82%	77%	74%	89%	93%			Monthly
6	% of Children that became the subject of a Child Protection Plan for the Second or subsequent time (NI 65)	10%	Low	20%	Red	7%	16%	13%	12%	12%	12%	13%	16%	14%	15%			Cumulative YTD (Apr-Dec figures revised Mar 2015)
7	% of Children in Care with an allocated Social Worker	100%	High	0%	Green	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%			YTD (Aug & Nov figures revised Mar 2015)
8	Children in Care rate per 10,000	n/a	n/a	n/a	n/a	31.9	35.0	34.1	34.6	35.0	34.8	36.3	37.2	35.4	33.5			End of the month snapshot
9	Number of children who ceased to be Looked After Children who were adopted	13	High	34% (1 CYP)	Green	0	0	0	2	2	3	3	3	3	6			Cumulative YTD
10	Number of agency special guardianship orders granted					1	1	4	5	5	6	6	6	6	6			Cumulative YTD
11	Stability of placements of Children in Care - number of moves (3 or more moves in the year) (NI 62)	15%	Low	2%	Green	1%	3%	4%	5%	6%	8%	11%	8%	7%	10%			YTD
12	Stability of placements of Children in Care - length of placement (NI 63)	75%	High	5%	Red	54%	53%	58%	62%	59%	59%	54%	49%	50%	40%			End of the month snapshot (Jun, Nov & Dec figures revised Mar 2015)
13	Children in Care cases which were reviewed within required timescales (NI 66)	100%	High	10%	Green	100%	100%	100%	100%	99%	94%	99%	96%	94%	95%			YTD
14	% of Children in Care participating in their reviews in month	90%	High	10%	Green	87%	87%	89%	76%	75%	70%	50%	73%	58%	96%			Monthly with Quarter YTD (May - Jul & Oct-Dec figures revised Feb 2015)
15	Timeliness of adoption placements post best interest decision (NI 61)	n/a	n/a	n/a	n/a	n/a	n/a	100%	100%	100%	100%	100%	100%	100%	100%			YTD
16	Rate of proven re-offending by young people in the youth justice system (NI 19)	1.1	n/a	n/a	n/a			1.11			0.95			0.98				Quarterly
17	First Time Entrants (FTEs) to the Youth Justice System aged 10-17 (Cumulative)	80	Low	% (1CYP)	Green	4	12	14	23	27	34	42	43	50	51			YTD
18	Young Offenders NEET rate (Not in Education, Employment or Training)	n/a	n/a	n/a	n/a			4.8% 11 cyp			4.7% 11 cyp			3.7% 8 cyp				Quarterly Q3: November 16 - 18 NEET - supervised YOTS
20	Youth Justice Caseload per worker	n/a	n/a	n/a	n/a			8.2			6.9			8.3				Monthly
Education <i>*For Attendance and Exclusion indicators the Merton 2012-2013 relates to academic year 2011-2012; National & London benchmarks may for previous academic years.</i>																		
19	Youth service participation rate	2,000	High	0%	n/a													Annual Measure
21	Secondary School Persistent absence (LA) 15% threshold	n/a	n/a	n/a	n/a													Annual Measure 2.5 terms, internal data, 5 schools
22	Secondary persistent absenteeism (15% absence)	8%	n/a	n/a	n/a													Annual Measure 2.5 terms DfE Published SFR maintained and academies
23	Secondary fixed term exclusions (percentage of pupils on roll)	10%	Low	2%	n/a													Annual Measure Provisional AY 2012-2013, internal data, maintained and academies
24	% of BAME Pupil Exclusions Fixed - Secondary	n/a	n/a	n/a	n/a													Annual Measure Provisional AY 2012-2013, internal data, maintained and academies
25	Primary fixed term exclusions (percentage of pupils on roll)	0.6%	Low	0.5%	n/a													Annual Measure Provisional AY 2012-2013, internal data, maintained and academies
26	% of BAME Pupil Exclusions Fixed - Primary	n/a	n/a	n/a	n/a													Annual Measure Provisional AY 2012-2013, internal data, maintained and academies
27	Secondary permanent exclusions (Number YTD Acad. Yr)	19	Low	4 children per quarter	Green	2	2	2	5	7	0	1	1	1	2			August End of Acad. Yr YTD. September start of the new Acad. Yr.
28	Number/% of BAME Pupil Exclusions Permanent - Secondary	n/a	n/a	n/a	n/a													Annual Measure Provisional AY 2012-2013, internal data, maintained and academies
29	Primary permanent exclusions (Number YTD Acad. Yr)	0	Low	1 child	Green	0	0	0	0	0	0	0	0	0	0			August End of Acad. Yr YTD (August data interim until November). September start of the new Acad. Yr.
30	Number/% of BAME Pupil Exclusions Permanent - Primary	n/a	n/a	n/a	n/a													

31	Number of managed moves - Primary	n/a	n/a	n/a	n/a			1			0			0				Cumulative YTD Academic Year
32	All SEN statements issued in 26 weeks (without exceptions)	n/a	High	n/a	n/a	100%	96%	97%	94%	95%								Cumulative YTD Academic Year
33	All SEN statements issued in 26 weeks (with and without exceptions)	95%	High	5%	n/a	100%	83%	85%	85%	87%								Cumulative YTD Academic Year
34	Education, Health and Care plans issued within timescale (20 weeks)	TBC	High	TBC	new measure										50%			Cumulative YTD Academic Year, from 1 September 2014 only to be reported in January 2015.
35	SEN Statements Issued	n/a	n/a	n/a	n/a			87			31							Cumulative YTD, up until 1 September only
35b	Education, Health and Care plans issued	n/a	High	n/a	n/a									1				Cumulative YTD, from 1 September 2014
36	% outcome of all Children Centre Ofsted inspections good or outstanding	100%	High	0%	Green			100%			100%			100%				Cumulative YTD
37	% of total 0-4 year estimated ACORN estimated population from areas of deprivation (IDACI 30%) whose families have accessed children's centre services	75%	High	n/a	Green			39.2%			55.7%			66.6%				Cumulative YTD
Road Accidents																		
38	CYP Road accidents - reported incidents Fatal/Serious/Slight	n/a	n/a	n/a	n/a													Calendar Year annual measure. 2014 data available circa April 2015.