



**CHILDREN, YOUNG PEOPLE AND EDUCATION
CABINET BOARD**

*Immediately Following Scrutiny Committee on
THURSDAY, 14 JANUARY 2016*

COMMITTEE ROOMS 1/2, PORT TALBOT CIVIC CENTRE

PART 1

1. To agree the Chairman for this Meeting
2. To receive any declarations of interests from Members
3. To receive the Minutes of the previous Children, Young People and Education Cabinet Board held on 3rd December 2015
(Pages 5 - 8)
4. To receive the Forward Work Programme 2014/15 (Pages 9 - 12)

To receive the Report of the Director of Social Services, Health and Housing

5. Hillside Secure Children's Home - CSSIW Inspection
(Pages 13 - 30)

To receive the Report of the Head of Transformation

6. Establishment of a Temporary Governing Body for the New All-through Welsh-Medium School Replacing YG Ystalyfera and YGG Y Wern Schools (Pages 31 - 38)

7. Establishment of a Temporary Governing Body for the Proposed New Primary School Replacing Melin Infant and Melin Junior Schools (*Pages 39 - 46*)
8. Governance Arrangements for the New All Through 3-16 School Replacing Traethmelyn Primary, Cwrt Sart Comprehensive, Glanafan Comprehensive and Sandfields Comprehensive Schools (*Pages 47 - 52*)
9. Pupil Attendance Update Report (*Pages 53 - 56*)

To receive the Reports of the Head of Children and Young People Services

10. Update on the Looked After Children's Strategy (*Pages 57 - 64*)
11. Update on the CSSIW Action Plan (*Pages 65 - 84*)
12. Any urgent items (whether public or exempt) at the discretion of the Chairman pursuant to Statutory Instrument 2001 No 2290 (as amended)
13. Access to Meetings - to resolve to exclude the public for the following items pursuant to Regulation 4 (3) and (5) of Statutory Instrument 2001 No. 2290 and the relevant exempt paragraphs of Part 4 of Schedule 12A to the Local Government Act 1972.

PART 2

To receive the Private Report of the Head of Children and Young People Services

14. Supported Lodgings Service - Contract Extension (Exempt Under Paragraph 14) (*Pages 85 - 90*)

To receive the Private Report of the Head of Education Improvement

15. School Improvement Performance, Priorities and Capacity Exempt Under Paragraph 14 (*Pages 91 - 234*)

S.Phillips
Chief Executive

Civic Centre
Port Talbot

Thursday, 7th January 2016

Cabinet Board Members:

Councillors: P.A.Rees and P.D.Richards

Notes:

- (1) *If any Cabinet Board Member is unable to attend, any other Cabinet Member may substitute as a voting Member on the Committee. Members are asked to make these arrangements direct and then to advise the committee Section.*
- (2) *The views of the earlier Scrutiny Committee are to be taken into account in arriving at decisions (pre decision scrutiny process).*

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EXECUTIVE DECISION RECORD
CABINET BOARD - 3 DECEMBER 2015
CHILDREN, YOUNG PEOPLE AND EDUCATION

Cabinet Board Members:

Councillors: E.V.Latham (Chairperson) and J.Rogers

Officers in Attendance:

A.Thomas, J.Hodges and Mrs.J.Woodman-Ralph

1. **APPOINTMENT OF CHAIRPERSON**

Agreed that Cllr.E.V.Latham be appointed Chairperson for the meeting.

2. **MINUTES OF THE PREVIOUS CHILDREN, YOUNG PEOPLE AND EDUCATION CABINET BOARD HELD ON 22 OCTOBER, 2015**

Decision:

Noted by the Committee

3. **FORWARD WORK PROGRAMME 2014/15**

Decision:

Noted by the Committee

4. **PERFORMANCE INDICATOR DATA - QUARTER 2 INCLUDING THE KEY PRIORITIES INDICATORS**

Decision:

That the report be noted.

5. **EDUCATION PERFORMANCE INDICATOR DATA - QUARTER 2**

Decision:

That the report be noted.

6. **ALL COMPOSITE DATA ON PUPIL PERFORMANCE 14 - 15
(ANNUAL REPORT)**

Decision:

That the report be noted.

7. **SCHOOLS ADMISSIONS POLICY 17/18 PERMISSION TO CONSULT**

Decision:

That the School Admissions arrangements as contained in the circulated report for 2017/2018 be approved for consultation.

Reason for Decision:

To enable the Authority to meet its statutory duties.

Implementation of Decision

The decision will be implemented after the three day call-in period.

8. **RE-ORGANISATION AND INCLUSION OF THE PROVISION OF
PUPILS WHO RECEIVE THEIR EDUCATION OTHERWISE THAN AT
SCHOOL**

Decisions:

1. That Officers amend the Equality Impact Assessment to reflect the changes discussed in the Scrutiny Committee held prior to the Cabinet Board and that having given due regard to the amended Equality Impact Assessment the following be approved:
2. That the Council's Engage Service close;

3. Alternative arrangements be developed for pupils who would receive their education via the Education Outside of the School setting and Engage Service through a suitable provision which would be managed by the governing body of the school(s) to be confirmed at a site(s) to be identified;
4. Delegated authority be granted to the Head of Transformation to confirm the school(s) to manage the alternative provision and to identify the site(s).

Reasons for Decisions:

1. To enable the Local Authority to support schools in providing an inclusive education for all pupils.
2. To enable the Local Authority to ensure that pupils who have to be taught out of school due to exclusion, health or social, emotional, behavioural difficulties receive an education appropriate to their needs.

Implementation of Decisions:

The decisions will be implemented after the three day call-in period.

9. **ESTYN INSPECTION OF HILLSIDE SECURE CENTRE**

Decision:

That the report be noted.

10. **ACCESS TO MEETINGS**

Decision:

That pursuant to Regulation 4 (3) and (5) of Statutory Instrument 2001. No. 2290, the public be excluded for the following items of business which involved the likely disclosure of exempt information as defined in Paragraphs 13 and 14 of Part 4 of Schedule 12A to the Local Government Act 1972

11. **HILLSIDE MANAGERS REPORT EXEMPT UNDER PARAGRAPH 13**

Decision:

That the report be noted.

12. **HILLSIDE (THE CHILDREN'S HOME (WALES))**

Decision:

That the report be noted.

13. **CHILDREN AND YOUNG PEOPLE SERVICES SUPPORTED
ACCOMMODATION NEEDS UPDATE**

Decision:

That the report be noted.

CHAIRPERSON

2015/2016 FORWARD WORK PLAN (DRAFT)

CHILDREN, YOUNG PEOPLE AND EDUCATION CABINET BOARD

Meeting Date and Time	Agenda Items	Type (Decision, Monitoring or Information)	Rotation (Topical, Annual, Biannual, Quarterly, Monthly)	Contact Officer/Head of Service
11th Feb 16	Children’s			
	Children’s Services Staff Survey	Information	Annual	Karen Jones
	Changes to the Social Services and Wellbeing Act and introducing “When I am ready scheme”	Decision	Topical	Andrew Jarrett
	Local Safeguarding Annual Report	Monitoring	Annual	Nick Jarman
	CYPS Monthly Key Priority Indicators	Monitoring	Monthly	Angela Thomas
	Western Bay Youth Offending Board Data Report (Quarter 2)	Monitoring	Quarterly	Caroline Dyer
	Western Bay – Short Quality Screening (SQS) of Youth Offending work in Western Bay, Bridgend, NPT, Swansea LA areas.	Monitoring	Topical	Nick Jarman
	Petty Cash Procedures within Children’s Services	Information	Topical	Angela Thomas
	Education			
	Childcare Facilities within Schools	Decision	Annual	Nicola Hire/C.Millis
	Schools Admissions Policy 17/18 – Results of Consultation	Decision	Annual	Helen Lewis

Children, Young People and Education Cabinet Board – Forward Work Programme (DRAFT)

Meeting Date and Time	Agenda Items	Type (Decision, Monitoring or Information)	Rotation (Topical, Annual, Biannual, Quarterly, Monthly)	Contact Officer/Head of Service
10th March 16	Children's			
	P.I.Data – Quarter 3 Including Monthly Key Priority Indicators	Monitoring	Quarterly	David Harding/AJT
	Hillside Secure Centre Placement Fees 16/17	Information	Annual	Nick Jarman
	6 monthly Complaints Monitoring Report	Monitoring	6 monthly	Angela Thomas
	Market Position Statement (Children's Services)	Decision	Topical	Nick Jarman/Aileen Flynn
	Education			
	P.I. Data - Quarter 3	Monitoring	Quarterly	Carl Glover/CM
	6 Monthly School Standard Monitoring Progress Report	Monitoring	6 Monthly	Helen Morgan-Rees/Chris Millis
	Inclusion Business Plans 16/17 (to include an overview of the 14/15)	Decision	Annual	Andrew Thomas

Children, Young People and Education Cabinet Board – Forward Work Programme (DRAFT)

Meeting Date and Time	Agenda Items	Type (Decision, Monitoring or Information)	Rotation (Topical, Annual, Biannual, Quarterly, Monthly)	Contact Officer/ Head of Service
7th April 16	Children's			
	Family Support Strategy	Decision	Annual	Andrew Jarrett
	Fostering Inspection Report	Monitoring	Annual	Andrew Jarrett
	Hillside Education Provision Contract	Decision	Annual	Nick Jarman
	CYPS Monthly Key Priority Indicators	Monitoring	Monthly	Angela Thomas
	Education			
	Families First Report	Monitoring	Annual	C.Millis/Neil Thomas
	WESP – Update on the response from W.G	Information	Topcial	C.Millis
	Welsh in Education Strategic Plan 2016 (next 3 year plan)	Decision required to Commend to Council for Approval	3 yearly	Chris Millis/Mike Daley
	Music Review – Update Report	Information	Topcial	Wayne Pedrick/CM
	Attendance Report – Jan, Feb, March	Monitoring	Quarterly	Andrew Thomas/ Hayley Lervy
	Flying Start Report	Monitoring	Annual	C.Millis/Neil Thomas
	School Terms and Holiday Dates 17/18 – 19/20	Decision	Annual	Andrew Thomas
	Student Awards Report	Monitoring	Annual	A.Thomas

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**NEATH PORT TALBOT COUNTY BOROUGH COUNCIL
CHILDREN, YOUNG PEOPLE AND EDUCATION CABINET
BOARD**

**REPORT OF THE DIRECTOR OF SOCIAL SERVICES, HEALTH
AND HOUSING – N. JARMAN**

14th January 2016

SECTION B – MATTER FOR INFORMATION

WARD(S) AFFECTED: ALL

HILLSIDE SECURE CHILDREN'S HOME – CSSIW INSPECTION

Purpose of the Report:

To report to members the CSSIW Inspection Report (2015) for Hillside Secure Children's Home.

Background:

The Care and Social Services Inspectorate Wales are required to undertake an Annual Inspection of Hillside under the provisions of the Care Standards Act 2000 and associated regulations.

The primary focus of the report is to comment on the quality of life and quality of care provided to children and young people.

The report reflects against the broad areas identified within the National Minimum Standards for Children's Homes (2002) and the Children's Homes Regulations (2002).

Tri-annually Estyn Inspectors are engaged by the C.S.S.I.W to inspect and report on the education provision, which is inclusive in this year's report.

The Inspection took place on Monday 21st September –Thursday, 24th September 2015 was published on 28th December 2015.

The format and length of the Inspection report has been changed and reports under four quality themes. These are: Quality of Life, Quality of Staffing, Quality of Leadership and Management and Quality of Environment. The full report is attached. (*Appendix 1*)

Estyn have provided separate feedback specifically on the education provision.

What type of inspection was carried out:

- Three days inspection by CSSIW
- Observation of the interaction between staff and young people
- Observation of staff handover meetings
- Discussion with some staff and two Assistant Managers
- Scrutiny of 6 young people's questionnaires returned
- Scrutiny of 21 staff questionnaires returned on 23 October 2015
- Scrutiny of a random selection of files and documentation held at the centre
- Scrutiny of the physical intervention records
- Examination of the Self-Assessment of Service completed by the service and returned prior to inspection
- We did not use the Short Observational Framework for Inspection (SOFI) tool on this occasion because it was not possible to observe interactions without influencing the activity.

What has improved since the last inspection

- There had been an improvement to the multi-disciplinary approach to the outcomes for young people
- Procedures following physical intervention had been reviewed and training reviewed

Summary.

1. Quality of Life:

- Young People had a voice with supportive advocacy.

- Care Staff very supportive and engaging with Young People to provide good quality overall care.
- Good assessment, input and support to Young People and staff from specialist services.
- Good quality care plans focussed on individual needs of Young People and the young person's voice had a voice in their future plans.
- The Centre is constantly looking to improve and develop additional Support Services for the benefit of Young People.
- Psychology Support has continued to improve with greater links with developed through the Multi-Disciplinary Team approach which the Centre has adopted.
- Developed of the Comprehensive Health Assessment Tool into enhanced Health Services.
- The Centre had reviewed procedures to ensure that Placing Authorities were informed immediately as there had previously been a delay in a few instances. The Centre had also introduced a post incident weekly review meeting chaired by a Senior Manager to scrutinise incidents, identify learning, safeguarding and training outcomes in line with their aim to minimise restraints.
- Exit interview process has been reviewed and re-established to capture young people's thoughts and feelings on service quality and delivery.
- Examination of the complaints' recordings confirmed that the Centre was open to complaints and acted appropriately in response to any made.
- There were more opportunities for these young people to have 'mobility', a term used for access to the community. This was a very positive step for young people especially in preparation for their moves on away from the Centre. One Young Person was observed to go on mobility with a parent during the Inspection

- On the whole Young People are active, positively occupied and stimulated in the centre

Recommendations:

- None.

2. Quality of Staffing:

- 80% of the staff team are qualified
- Staff are registered with the Care Council for Wales
- Staff have traditionally received good quality training, although some staff considered that they would benefit from further training in mental health issues to reflect the changing needs of the young people
- Hillside has had a robust recruitment policy and procedure which had been further strengthened in the last year with permission to recruit outside of the local authority internal vacancy list
- The staff team fed back that they received good support from their individual line managers and their shift teams
- Management had responded to the staff request for a review of the rota and this had resulted in a change that was due to be implemented shortly after the inspection
- A weekly clinic with the psychologist provides clinical support time for all staff
- From 1 October 2015 one unit leader was to become a duty manager daily from 9 – 5 to relieve other unit leaders from this responsibility
- A resettlement officer had been appointed

Observations:

- Staff requested improved secure facilities to store their personal property
- There was a mixed response in questionnaires about the opportunity to contribute ideas and make suggestions about the operation of the centre, however no specific examples were given
- Many suggested that the return of sessional workers in the evenings to support further activities would be beneficial

- There could be an improvement in communication and dissemination of information
- There was feedback that on some occasions the staffing levels were low due to sickness or holidays
- It was recommended that all staff receive medication training as PRN is managed

3. Quality of Leadership Management:

- A new manager with experience of working in Hillside for many years as an assistant manager had been appointed and each of the assistant manager posts had been filled
- Hillside is well run and compliant with all Minimum Standards and Regulations.
- There is an effective Complaints System in place with evidence of effective use and practice.
- A consistent quality of service is provided through Quality Improvement Planning, a well-planned programme of care and a sound financial platform.
- Internal Data Collection and Internal and External Reporting, Monitoring and Scrutiny informs practice standards.
- Children within the Looked After system have their respective regular Looked After meetings, which again further evidences the quality of the service being provided
- A weekly post incident review meeting is convened to monitor safeguarding, learning, training outcomes
- Child Protection holds high status across the Centre.
- A separate Education Report has been sent to Hillside by Estyn.

4. Quality of Environment:

- The areas of the centre viewed were found to be clean, tidy and well furnished
- Communal areas had been re-decorated
- They had introduced a fully integrated staff personal alarm system
- The CCTV system has been fully modernised
- Improvements have been made to the response to maintenance and decoration.
- Effective building and equipment maintenance contracts are in place.

What needs to be done to improve the service.

- It was recommended that the daily recording of activities and use of outdoor space was improved
- It was recommended that some key-workers receive mentoring to enable them to be more dynamic in their approach
- There was feedback that on some occasions the staffing levels were low due to sickness or holidays
- It was recommended that all staff receive medication training as PRN is managed by the staff on the Units to support the Duty Manager administering prescribed

Appendices

CSSIW Inspection Report (2015) for Hillside Secure Children's Home.

The format and length of the Inspection focussed on the previous report's recommendations and used these as a benchmark to evidence progress within the department.

Background Papers

None

Officer Contact:

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Arolygiaeth Gofal a Gwasanaethau Cymdeithasol Cymru
Care and Social Services Inspectorate Wales

Care and Social Services Inspectorate Wales

Care Standards Act 2000

Inspection Report

Hillside Secure Centre

Off Burnside
Hillside
Neath
SA11 1UL

Type of inspection – Baseline

Dates of inspection – Monday, 21 September – Thursday, 24 September 2015

Date of publication – Monday, 28 December 2015

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Summary

About the service

Hillside Secure Centre is registered as a children's home for the purpose of restricting liberty and is the only setting of its type in Wales. The centre forms part of the overall provision of the secure estate provided in England and Wales, and in addition to the ten beds contracted by the Youth Justice Board through a service level agreement, Hillside provides a further twelve welfare beds under Section 25 of the Children Act 1989. This balance changed significantly this year following the decision of the Youth Justice Board to reduce the beds purchased from seventeen to ten. Young people are placed in Hillside through the Courts, due to their offending behaviour and to manage their vulnerability. They are also placed because they pose a significant risk to themselves or others in the community. The young people for whom the accommodation is provided are between the ages of 12 and 17 years. Approval is required from the Welsh Government for any young people under 13 years of age being placed under Section 25 of the Children Act 1989. Although Hillside is part of Neath Port Talbot Social Services Children's Department it is financially independent of the Departmental budget.

The Registered Manager of the centre is Mark Lazarus who has many years experience as an Assistant Manager at Hillside and was successful in being appointed this year following the retirement of the previous manager. He holds the qualifications required for the position and is registered with the Care Council for Wales.

What type of inspection was carried out?

This was a planned annual focused inspection of the centre which examined the Quality of Life. The inspection methodology used was:

- Three days of announced inspection visits by CSSIW
- Two days of inspection by two inspectors from ESTYN
- Some discussion with young people
- Discussion with staff members
- Observation of the interaction between staff and young people
- Observation of staff handover meetings
- Discussion with some staff and two Assistant Managers
- Scrutiny of 6 young people's questionnaires returned
- Scrutiny of 21 staff questionnaires returned on 23 October 2015
- Scrutiny of a random selection of files and documentation held at the centre
- Scrutiny of the physical intervention records
- Examination of the Self Assessment of Service completed by the service and returned prior to inspection
- We did not use the Short Observational Framework for Inspection (SOFI) tool on this occasion because it was not possible to observe interactions without influencing the activity.

What does the service do well?

The centre has managed some very complex behaviour in the last year.

What has improved since the last inspection?

- There had been an improvement to the multi-disciplinary approach to the outcomes for young people
- Procedures following physical intervention had been reviewed and training reviewed

What needs to be done to improve the service?

There was no requirement to issue any non compliance notices following this inspection. The following issues were raised:

- It was recommended that the daily recording of activities and use of outdoor space was improved
- It was recommended that some key-workers receive mentoring to enable them to be more dynamic in their approach
- There was feedback that on some occasions the staffing levels were low due to sickness or holidays
- It was recommended that all staff receive medication training as PRN is managed by the staff on the units to support the duty manager administering prescribed medication.

Quality Of Life

Overall we, CSSIW, found that young people have a voice and are encouraged to express an opinion. There are limitations on the voice of the young person in relation to their lifestyle choices due to the nature of the setting. We found that young people had a voice through weekly meetings held on each unit and recordings examined confirmed that the staff team sought feedback from the senior management for decisions they were not able to make. Young people confirmed through questionnaires that they were spoken to by the staff both prior to and following review meetings. This ensured that young people were prepared for their meetings and also able to discuss any decisions afterwards.

All of the young people were allocated key-workers and we saw an example of very good practice from one key-worker who had prepared a detailed report upon a young person in preparation for moving on. It was recommended that some key-workers receive mentoring to enable them to be more dynamic in approach. The centre had developed very useful booklets to support staff in the management of the key-working process but some staff were totally guided by these and would benefit from working more flexibly. On the whole the young people stated that they would speak to staff if unhappy, however, some did state that there were some staff with whom they did not get on with. There was also some mixed feedback from young people about how well some of the staff listened to them. The Social Services Department Complaints Officer and Independent Advocacy service visited regularly. A new advocate had been appointed through Tros Gynnal Plant and a report was provided quarterly. From April to June of 2015 visits were made every fortnight to the centre between 6 and 8 pm. During this time seven young people had taken advantage of the service. Comments from young people stated: "Advocacy helped resolve my problem and I am now happier at Hillside"; "Advocacy allowed me to have a voice independently of Hillside".

The self assessment of service forms stated that the exit interview process has been reviewed and re-established to capture young people's thoughts, feelings on service quality and delivery. Examination of the complaints recordings confirmed that the centre was open to complaints and acted appropriately in response to any made.

On the whole young people are active, positively occupied and stimulated in the centre. There are clearly restrictions to the activities that young people are able to undertake whilst at the centre given the nature of the secure element. All of the young people attend education and the structure this offers the day is important to the routine within the centre. To ensure young people do not have several weeks of no education the term times are different to mainstream and they have a maximum of two weeks off at any time in the year. The education provision was inspected by ESTYN and their report was produced independently of this report. Some young people did state that they did not have homework from school whilst others spoke positively about having been able to achieve some qualifications.

Records examined confirmed that young people were occupied in the evenings and weekends although this was balanced against some personal time. In addition to planned activities the young people were also seen to approach staff to take part in board games,

watch television together or play cards. Within the centre they had access to the external astroturf area, the gym, level 6 room (a room provided for young people at the top level of positive behaviour), the lounge area with pool table and television. They also had a cinema area for use at weekends and holidays. There was feedback from some staff that they would welcome the return of sessional staff who previously organised activities in the evenings and there was also feedback that the gym equipment could be updated. Each unit had an enclosed garden and young people were able to make use of this facility. It was noted that at the time of inspection the young people in one unit were very reluctant to go outside whilst other units had many activities to occupy the young people. It was recommended that the daily recording of activities and use of outdoor space was improved.

There were more opportunities for these young people to have 'mobility', a term used for access to the community. Thorough risk assessments were carried out before a visit was sanctioned and in order to ensure vehicle availability the staff used a booking sheet. This was a very positive step for young people especially in preparation for their moves on away from the centre. One young person was observed to go on mobility with a parent during the inspection.

Young people experience appropriate, responsive care from staff who have an up to date understanding of their individual needs and preferences. The centre had improved their referral process through the introduction of a daily multi-disciplinary team meeting and from 1 October 2015 they were trialling one unit leader acting as a permanent duty manager during office hours. This had resulted in more details being provided to the decision makers about whether or not the centre could meet the needs of young people. The young people had the benefit of a clinical psychologist and associate working full time in the centre who undertook assessments. The initial assessment, along with day-to-day observations of the care staff fed into the Care Planning Meeting and formulated the objectives, targets and actions agreed within the Placement Plan and Care Plan. Each young person's plan was monitored and managed by the Plan Coordinator and key-worker, who took responsibility for achieving the agreed placement objectives and communicating regularly with the child / young person's case worker.

The young people were supported in their health care needs with the availability of a nurse on a daily basis and the general practitioner visited weekly or when needed. This was under review at the time of inspection with a view to increase the nurse time in the home and also give responsibility for the administration of medication. At the time of inspection one young person was a self medicating diabetic with support provided by a local diabetic nurse. At the time of inspection the centre was also considering the introduction of the comprehensive health assessment tool (CHAT) produced for young people in the secure estate. The dentist was a regular visitor and if the young people required specialist health care support, they could access the local hospital through mobility with staff support. Referrals were made to the Drug and Alcohol Service and / or the Sex Offender Service for assessment, counselling, treatment or therapy in response to the initial assessment. The young people also had the support of the psychiatrist who visited the centre weekly. At the time of inspection there were several young people who required intense support for complex behaviours and for some this included extreme self harm behaviours.

The centre had introduced weekly multi-disciplinary meetings which focused upon

outcomes and linked these to the care plans for the young people. Feedback was positive about these meetings with a view that better consistency in care planning had been achieved. Examination of records confirmed that the staff team had comprehensive assessments to work from and guidelines as to how they managed these young people and the staff also maintained comprehensive records.

Young people are encouraged to manage their emotions and behaviour in a positive manner and are encouraged to look at coping strategies. Observation of the interactions between the staff and young people confirmed that staff worked to maintain appropriate boundaries and manage negative behaviour through diffusion, individual talk time and reflection. Observation of handover between staff teams confirmed that they shared information and looked to ensure consistency of approach. Any consequences of actions were considered carefully in terms of any sanctions imposed and the opportunity for reparation to overturn the sanction. The young people were also praised for not engaging in negative behaviour when challenged by other young people. As a last resort to ensure the safety of all, the staff team were all trained in physical intervention and all instances were recorded with the type of hold, the names of the young people, staff members involved, location, duration and any injuries recorded. There was also a de-brief held with the young person and staff as soon as it was possible for reflection on the incident. Following some incidents in the previous year the centre had reviewed procedures to ensure that placing authorities were informed immediately as there had previously been a delay in a few instances. The centre had also introduced a post incident weekly review meeting chaired by a senior manager to scrutinise incidents, identify learning, safeguarding and training outcomes in line with their aim to minimise restraints.

Staff training had also been reviewed with external facilitators re-introduced. Fully integrated staff personal alarm systems had also been introduced to improve responses to emergency situations. There was analysis of interventions in the previous twelve months carried out during inspection which considered the number of restraints during the year and the reason e.g. assault upon others or prevention of self-harm. There had been 600 restraints in a one year period and approximately 50% of these were to prevent self harm. Over 200 of these had been interventions to prevent the self harm of one young person. There were also a number of young people placed at Hillside who did not experience any physical intervention.

Quality Of Staffing

This inspection focused on the experience of young people using the service and their quality of life at the setting. CSSIW did not consider it necessary to look at the quality of staffing on this occasion because:

- 80% of the staff team were qualified
- Staff were registered with the Care Council for Wales
- Staff have traditionally received good quality training, although some staff considered that they would benefit from further training in mental health issues to reflect the changing needs of the young people
- Hillside has had a robust recruitment policy and procedure which had been further strengthened in the last year with permission to recruit outside of the local authority internal vacancy list
- The staff team fed back that they received good support from their individual line managers and their shift teams
- Management had responded to the staff request for a review of the rota and this had resulted in a change that was due to be implemented shortly after the inspection
- A weekly clinic with the psychologist provides clinical support time for all staff
- From 1 October 2015 one unit leader was to become a duty manager daily from 9 – 5 to relieve other unit leaders from this responsibility
- A resettlement officer had been appointed

It was noted, however, from feedback and observation that:

- Staff requested improved secure facilities to store their personal property
- There was a mixed response in questionnaires about the opportunity to contribute ideas and make suggestions about the operation of the centre, however no specific examples were given
- Many suggested that the return of sessional workers in the evenings to support further activities would be beneficial
- There could be an improvement in communication and dissemination of information
- There was feedback that on some occasions the staffing levels were low due to sickness or holidays
- It was recommended that all staff receive medication training as PRN is managed by the staff on the units.

This theme will be examined at further inspections.

Quality Of Leadership and Management

This inspection focused on the experience of young people using the service and their quality of life at the setting. CSSIW did not consider it necessary to look at the quality of leadership and management on this occasion because:

- A new manager with experience of working in Hillside for many years as an assistant manager had been appointed and each of the assistant manager posts had been filled

The self assessment of service reported that the following monitoring is undertaken:

- Hillside has contractual obligations with the Youth Justice Board, which are monitored through quarterly meetings with the YJB Monitoring Officer. Further Quality Assurance and data collation is provided by the Centre through the YJB E-Asset System. Again, this is scrutinised as part of the contract requirements of the YJB.
- Further Quality Assurance and monitoring is achieved through Local Authority Inspections i.e. Monthly Regulation 32 Officer, Local Safeguarding Board Officer, who visits on a quarterly basis
- Hillside's Senior Management Team has a Monthly Report which provides quality data on the effectiveness and performance of the service
- Each care plan is reviewed on a 28-day basis to ensure that the quality of care being provided is meeting the required need and standards
- Children within the Looked After system have their respective regular Looked After meetings, which again further evidences the quality of the service being provided
- Monitoring is identified through the primary stakeholders' point of view, the Youth Justice Board or recommendations from the Regulation 32 Officer
- Quarterly reports are taken to the Council's Children's Services Scrutiny Committee for Members to scrutinise the service
- A weekly post incident review meeting is convened to monitor safeguarding, learning, training outcomes
- A quarterly report on the use of physical restraint is provided to the LSCB and annually relayed to the YJB.

However, this theme will be considered during future inspections.

Quality Of The Environment

This inspection focused on the experience of young people using the service and their quality of life at the setting. CSSIW did not consider it necessary to look at the quality of the environment on this occasion because:

- The areas of the centre viewed were found to be clean, tidy and well furnished
- Communal areas had been re-decorated
- They had introduced a fully integrated staff personal alarm system
- There were plans to replace and fully update the CCTV system

However, the following comments are were noted:

- Some of the young people and staff considered that the bedrooms could be modernised
- More equipment could be made available for the gym.

How we inspect and report on services

We conduct two types of inspection; baseline and focused. Both consider the experience of people using services.

- **Baseline inspections** assess whether the registration of a service is justified and whether the conditions of registration are appropriate. For most services, we carry out these inspections every three years. Exceptions are registered child minders, out of school care, sessional care, crèches and open access provision, which are every four years.

At these inspections we check whether the service has a clear, effective Statement of Purpose and whether the service delivers on the commitments set out in its Statement of Purpose. In assessing whether registration is justified inspectors check that the service can demonstrate a history of compliance with regulations.

- **Focused inspections** consider the experience of people using services and we will look at compliance with regulations when poor outcomes for people using services are identified. We carry out these inspections in between baseline inspections. Focused inspections will always consider the quality of life of people using services and may look at other areas.

Baseline and focused inspections may be scheduled or carried out in response to concerns.

Inspectors use a variety of methods to gather information during inspections. These may include;

- Talking with people who use services and their representatives
- Talking to staff and the manager
- Looking at documentation
- Observation of staff interactions with people and of the environment
- Comments made within questionnaires returned from people who use services, staff and health and social care professionals

We inspect and report our findings under 'Quality Themes'. Those relevant to each type of service are referred to within our inspection reports.

Further information about what we do can be found in our leaflet 'Improving Care and Social Services in Wales'. You can download this from our website, [Improving Care and Social Services in Wales](#) or ask us to send you a copy by telephoning your local CSSIW regional office.

NEATH PORT TALBOT COUNTY BOROUGH COUNCIL

Children, Young People and Education Cabinet Board

14 January, 2016

Report of the Head of Transformation – Andrew Thomas

Matter for Decision

Wards Affected:

All

ESTABLISHMENT OF A TEMPORARY GOVERNING BODY FOR THE NEW ALL-THROUGH WELSH- MEDIUM SCHOOL REPLACING YG YSTALYFERA AND YGG Y WERN SCHOOLS.

Purpose of the Report

1. To seek approval to establish a temporary governing body for the new all-through (3-18 age range) school replacing YG Ystalyfera and YGG Y Wern Schools. For administrative purposes the working title of the school will be Ysgol Newydd Gymunedol Gymraeg.

Background

2. Cabinet at its meeting of 9th July, 2015 determined to proceed to statutory notice on the proposals to establish an all-through (3-18 age-range) school that would replace YGG Ystalyfera and YGG Y

Wern Schools. The period of consultation ended on 6th October, 2015. Cabinet will determine whether to implement the proposal when it meets on 13th January, 2016. Subject to Cabinet's final determination, the outcome of which will be verbally reported to Members of CYPE at their meeting, it is proposed that the new school will become operational on 1st September 2017 on two sites, one in the north and one in the south of the County Borough. Both YG Ystalyfera and YGG Y Wern as individual entities will close as from that date.

3. Legislation provides for the Authority to establish a temporary governing body for the new school in anticipation of approval of the proposal. Should Cabinet determine not to implement the proposal or that subsequently it is withdrawn or becomes rejected then the temporary governing body will not come into existence.
4. The process of establishing a new school requires the Authority to make arrangements for the constitution of a temporary governing body to conduct the business for the new school prior to setting up the school's permanent governing body. The temporary governing body is only empowered to make decisions about the new school. All decisions about the current schools will remain the responsibility of the existing governing bodies for those schools until they close.
5. Given that the newly established school will have a north campus based at the existing YG Ystalyfera site and a south campus based at the existing Sandfields Comprehensive/Traethmelyn Primary school site, it is important that governance arrangements are representative of Welsh-medium education across the County Borough.
6. Establishing a Temporary Governing Body
 - i) Composition

Regulations prescribe the composition of a temporary governing body and, in the case of the new school the temporary governing body shall comprise the categories and numbers of governors set out in the table overleaf.

Category of Governor	No's.
Parent Governor	6
LA Governor Representative	5
Teacher Governor	2
Staff Governor	1 or 0*
Community Governor	4
Community Minor Authority	1
Headteacher (following appointment)	1
Total:	20 (19*)

(*In relation to a temporary governing body, the Authority has discretion as to whether or not to include a staff governor)

ii) Appointment of Temporary Governors

a) LA Governor Representatives

The Authority is responsible for appointing to the temporary governing body LA governor representatives. The agreed policy for appointment is to provide priority to elected members representing wards in the catchment area of the relevant school or pupil referral unit, or other elected members.

b) Parent and Teacher Governors

In circumstances where a temporary governing body is established for a new school as a result of the discontinuance of existing schools, Regulations provide for the LA to ask the governing body of the schools being discontinued to appoint/nominate some or all of the temporary teacher and parent governors. Members are recommended to agree permit the governing bodies of the schools being discontinued to appoint/nominate the temporary teacher and parent governors.

c) Staff Governor

The Authority has the discretion whether or not to include a staff governor to the temporary governing body. Members are recommended to agree to include a staff governor and permit the governing bodies of the schools being discontinued to appoint/nominate that person.

d) Community Governor

In accordance with Regulations, this will be for the temporary governing body to consider and appoint directly.

e) Community Minor Authority Governor

In accordance with Regulations, this will be for Ystalyfera Community Council to consider and appoint directly.

f) Headteacher

The Headteacher is an ex-officio governor.

Regulations provide that where two or more schools are to be discontinued and the registered pupils at those schools are to transfer to a new school, the Headteachers of the discontinued schools are entitled to attend any meetings of the temporary governing body until such time as the Headteacher for the new school is appointed. The temporary governing body will also be encourage to enlist other (non-governors) to the governing body to ensure a balanced representation of views is heard and informs their decision making.

Financial Impact

7. There is no financial impact associated with this proposal.

Equality Impact Assessment

8. Having considered the Council's screening assessment guidance produced to assist the Council in discharging its Public Sector Equality Duty under the Equality Act 2010 it has been determined that the proposal within this report does not require an equalities impact assessment.

Workforce Impacts

9. There are no direct workforce or staffing issues in relation to this proposal, however, the temporary governing body will have a vital role to play in appointing individuals to the new school and in this regard the Council will be expecting the temporary governing body to honour the employer's pledge.

Legal Impacts

10. The recommendations contained within this report are in accordance with the Council's obligations set out in The New Maintained Schools (Wales) Regulations 2005.

Risk Management

11. Should the recommendation to create the temporary governing body not be approved then the process of organising the business for the new school, including the appointment of a Headteacher, cannot commence.

Consultation

12. There is no requirement under the Constitution for external consultation on this item. Internal consultation regarding nominations of the LA Governor Representatives has though been undertaken with the respective Ward Members.

Recommendations

13. (a) That a temporary governing body for the proposed new 3-18 'all-through' community Welsh-medium school replacing YG Ystalyfera and YGG Y Wern be established in line with the table above, and that appointments to the temporary governing body include a staff governor.
- (b) That the following appointments/procedures to populate the temporary governing body are agreed:
 - i) Parent governors are appointed by the current governing bodies, four from YG Ystalyfera and two from YGG Y Wern;
 - ii) One teacher and one staff governor is appointed by YG Ystalyfera governing body and one teacher governor by YGG Y Wern governing body;
 - iii) Nominations for LA Governors are currently being sought from elected Members, therefore, upon receipt of any nominations received delegated authority to the Cabinet Member for Education to appoint 5 LA Governors is recommended.

Reasons for Proposed Decision

14. To comply with legislative requirements for the establishment of a new school.

Implementation of Decision

15. The decision is proposed for implementation after the three day call in period.

Appendices

16. None.

List of Background Papers

Cabinet Report 9th July, 2015:

<https://democracy.npt.gov.uk/documents/g5993/Public%20reports%20pack%2009th-Jul-2015%2014.00%20Cabinet.pdf?T=10>

The New Maintained Schools (Wales) Regulations 2005:

<http://www.legislation.gov.uk/wsi/2005/2912/contents/made>

Officer Contact

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NEATH PORT TALBOT COUNTY BOROUGH COUNCIL

Children, Young People and Education Cabinet Board

14 January, 2016

Report of the Head of Transformation – Andrew Thomas

Matter for Decision

Wards Affected:

Neath East

ESTABLISHMENT OF A TEMPORARY GOVERNING BODY FOR THE PROPOSED NEW PRIMARY SCHOOL REPLACING MELIN INFANT AND MELIN JUNIOR SCHOOLS.

Purpose of the Report

1. To seek approval to establish a temporary governing body for the proposed new all-through (3-11 age range) primary school replacing Melin Infant and Melin Junior Schools. For administrative purposes the working title name of the school will be Melin Primary School.

Background

2. Cabinet at its meeting of 7th October, 2015 determined to proceed with a period of formal consultation of the proposal to establish an all-through primary school that would replace Melin Infant and

Melin Junior Schools. This period of consultation ended on 4th December, 2015.

3. Cabinet will determine whether to proceed to statutory notice on the proposals when it meets on 13th January, 2016. Subject to Cabinet's final determination, the outcome of which will be verbally reported to Members of CYPE at their meeting, it is proposed that the new primary school will become operational on 1st September 2016 on the existing sites making use of the current school buildings. Both the infant and junior schools as individual entities will close as from that date.
4. Legislation provides for the Authority to establish a temporary governing body for the new primary school in anticipation of approval of the proposal. Should Cabinet determine not to proceed with the publication of the current proposal or that subsequently it is withdrawn or becomes rejected then the temporary governing body will not come into existence.
5. The process of establishing a new school requires the Authority to make arrangements for the constitution of a temporary governing body to conduct the business for the new school prior to setting up the school's permanent governing body. The temporary governing body is only empowered to make decisions about the new primary school. All decisions about the current infant and junior schools will remain the responsibility of the existing governing bodies for those schools until they close.
6. Establishing a Temporary Governing Body

- i) Composition

Regulations prescribe the composition of a temporary governing body and, in the case of the new school the temporary governing body shall comprise the categories and numbers of governors set out in the table overleaf.

Category of Governor	No's.
Parent Governor	4
LA Governor Representative	3
Teacher Governor	1
Staff Governor	1 or 0*
Community Governor	3
Headteacher (following appointment)	1
Total:	13 (12*)

(*In relation to a temporary governing body, the Authority has discretion as to whether or not to include a staff governor)

ii) Appointment of Temporary Governors

a) LA Governor Representatives

The Authority is responsible for appointing to the temporary governing body LA governor representatives. The agreed policy for appointment is to provide priority to elected members representing wards in the catchment area of the relevant school or pupil referral unit, or other elected members.

b) Parent and Teacher Governors

In circumstances where a temporary governing body is established for a new school as a result of the discontinuance of existing schools, Regulations provide for the LA to ask the governing body of the schools being discontinued to appoint/nominate some or all

of the temporary teacher and parent governors. Members are recommended to agree permit the governing bodies of the schools being discontinued to appoint/nominate the temporary teacher and parent governors.

c) Staff Governor

The Authority has the discretion whether or not to include a staff governor to the temporary governing body. Members are recommended to agree to include a staff governor and permit the governing bodies of the schools being discontinued to appoint/nominate that person.

d) Community Governor

In accordance with Regulations, this will be for the temporary governing body to consider and appoint directly.

e) Headteacher

The Headteacher is an ex-officio governor.

Regulations provide that where two or more schools are to be discontinued and the registered pupils at those schools are to transfer to a new school, the Headteachers of the discontinued schools are entitled to attend any meetings of the temporary governing body until such time as the Headteacher for the new school is appointed. The temporary governing body will also be encourage to enlist other (non-governors) to the governing body to ensure a balanced representation of views is heard and informs their decision making.

Financial Impact

7. There is no financial impact associated with this proposal.

Equality Impact Assessment

8. Having considered the Council's screening assessment guidance produced to assist the Council in discharging its Public Sector Equality Duty under the Equality Act 2010 it has been determined that the proposal within this report does not require an equalities impact assessment.

Workforce Impacts

9. There are no direct workforce or staffing issues in relation to this proposal, however, the temporary governing body will have a vital role to play in appointing individuals to the new school and in this regard the Council will be expecting the temporary governing body to honour the employer's pledge.

Legal Impacts

10. The recommendations contained within this report are in accordance with the Council's obligations set out in The New Maintained Schools (Wales) Regulations 2005.

Risk Management

11. Should the recommendation to create the temporary governing body not be approved then the process of organising the business for the new primary school, including the appointment of a Headteacher, cannot commence.

Consultation

12. There is no requirement under the Constitution for external consultation on this item. Internal consultation regarding nominations of the LA Governor Representatives has though been undertaken with the respective Ward Members.

Recommendations

13. (a) That a temporary governing body for the proposed new 3-11 'all-through' community primary school replacing Melin Infant and Melin Junior Schools be established in line with the table above, and that appointments to the temporary governing body include a staff governor.
- (b) That the following appointments/procedures to populate the temporary governing body are agreed:
 - i) Parent governors are appointed by the current infant and junior school governing bodies, two from each respectively;

- ii) One teacher and one staff governor are jointly appointed by the current infant and junior school governing bodies. Should there be no mutual agreement between the two current governing bodies as to the identification of the individuals, the Director of Education be authorised to make the appointment from nominations submitted by each of the two governing bodies;
- iii) LA Governor Representatives will be: Cllr John Miller, Cllr Sandra Miller and Cllr Sheila Penry.

Reasons for Proposed Decision

- 14. To comply with legislative requirements for the establishment of a new school.

Implementation of Decision

- 15. The decision is proposed for implementation after the three day call in period.

Appendices

- 16. None.

List of Background Papers

- 17. Cabinet Report 7th October, 2015:
<http://www.npt.gov.uk/pdf/CabinetReport071015Melin.pdf>
The New Maintained Schools (Wales) Regulations 2005:
<http://www.legislation.gov.uk/wsi/2005/2912/contents/made>

Officer Contact

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**NEATH PORT TALBOT COUNTY BOROUGH
COUNCIL**

Children, Young People and Education Cabinet Board

14 January, 2016

**Report of the Head of Transformation –
Andrew Thomas**

Matter for Decision

Wards Affected:

Aberafan, Baglan, Briton Ferry East, Briton Ferry West, Sandfields East and Sandfields West

**GOVERNANCE ARRANGEMENTS FOR THE NEW ALL-
THROUGH 3-16 SCHOOL REPLACING TRAETHMELYN
PRIMARY, CWRT SART COMPREHENSIVE,
GLANAFAN COMPREHENSIVE AND SANDFIELDS
COMPREHENSIVE SCHOOLS.**

Purpose of the Report

1. To comply with Regulations surrounding the opening of a new school, Members are asked to formally agree:
 - i) The creation of an Instrument of Government which will establish a permanent Governing Body;
 - ii) To approve a permanent name for the new 3-16 school.

Background

2. Members will be aware that from 1st September, 2016 a new build all-through (3-16 years) school will come into existence replacing Traethmelyn Primary, Cwrt Sart Comprehensive, Glanafan Comprehensive and Sandfields Comprehensive Schools. The new school is currently under construction and located at Seaway Parade, Port Talbot.
3. Prior to the new school becoming operational Cabinet Members agreed in February, 2014 the creation of a temporary Governing Body to oversee the business of the new school.
4. Regulations state that a permanent Governing Body must be established and in place on a date agreed by the Local Authority, known as the “incorporation date”. This incorporation date is contained within the Instrument of Government and cannot be effected any later than the last day of the first term.
5. To allow time for the process of elections and appointment of governors during the early part of the autumn term, it is proposed the incorporation date will be 1st November, 2016. Until this date, the temporary governing body will continue in its current form when their role and function will then come to an end.
6. It is a legal requirement that every school must have in place an Instrument of Government. In addition to recording the incorporation date, this document also formally records the name of the school and the constitution of its governing body. The Instrument of Government must be formally created by the Local Authority.
7. Governors of the temporary Governing Body have proposed to the Authority that the name of the new school be “Ysgol Bae Baglan”. Pupils from the current four schools have been fully involved with the creation of the proposed name where a selection of shortlisted names was voted for amongst pupils. Consultation regarding the name has taken place with the Head of Planning and Senior Management Team of the Education Directorate where there have been no objections from either.

Financial Impact

8. There is no financial impact associated with this proposal.

Equality Impact Assessment

9. Having considered the Council's screening assessment guidance produced to assist the Council in discharging its Public Sector Equality Duty under the Equality Act 2010 it has been determined that the proposal within this report does not require an equalities impact assessment.

Workforce Impacts

10. There are no workforce or staffing issues directly associated with this proposal although the permanent governing body will have responsibility for the employment of staff at the school.

Legal Impacts

11. The recommendations contained within this report are in accordance with the Council's obligations set out in The New Maintained Schools (Wales) Regulations 2005.

Risk Management

12. Should the recommendation to create the permanent governing body not be approved then the Council will be in breach of its statutory obligation. Should the recommendation to name the school not be approved then an alternative name will be sought and reported back to Members at a future meeting.

Consultation

13. There is no requirement under the Constitution for external consultation on either of the recommendations within this report, however, a substantial consultation exercise has taken place with all the pupils that will attend the new school regarding its name. Likewise, internal consultation has taken place with the Head of Planning and Education Senior Management Team.

Recommendations

14. i) That the Instrument of Government (attached as Appendix A) be approved with the incorporation date of 1st November, 2016 creating a permanent Governing Body;

- ii) The name of the school will be Ysgol Bae Baglan.

Reasons for Proposed Decision

15. To comply with legislative requirements for the establishment of a new school.

Implementation of Decision

16. The decision is proposed for implementation after the three day call in period.

Appendices

17. Instrument of Government at Appendix A.

List of Background Papers

18. Cabinet Report 20th February, 2014:

[http://modern.gov.neath-portalbot.gov.uk/Data/Children,%20Young%20People%20and%20Education%20Cabinet%20Board/20140220/Agenda/\\$CYPEB-200214-REP-EL-AT.doc.pdf](http://modern.gov.neath-portalbot.gov.uk/Data/Children,%20Young%20People%20and%20Education%20Cabinet%20Board/20140220/Agenda/$CYPEB-200214-REP-EL-AT.doc.pdf)

The New Maintained Schools (Wales) Regulations 2005:

<http://www.legislation.gov.uk/wsi/2005/2912/contents/made>

Officer Contact

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Appendix A

INSTRUMENT OF GOVERNMENT - COMMUNITY SCHOOLS

1. The name of the school is:
Ysgol Bae Baglan
2. The school is a community school.
3. The name of the governing body is:
Ysgol Bae Baglan
4. The governing body shall consist of:
 - (a) Six parent governors;
 - (b) Five local authority governors;
 - (c) Two teacher governors;
 - (d) One staff governor;
 - (e) Five community governors;
 - (f) Headteacher (except at any time when he/she has given written notice to the clerk to the governing body that he/she chooses not to be a governor).
5. Total number of governors: Twenty (except at any time when the Headteacher has given notice as above that he/she chooses not to be a governor, when the total number of governors will be nineteen).
6. This instrument of government comes into effect on 1st November, 2016.
7. This instrument was made by order of Neath Port Talbot Local Authority on 14th January, 2016.

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NEATH PORT TALBOT COUNTY BOROUGH COUNCIL

Children, Young People and Education Cabinet Board

14 January, 2016

Report of the Head of Transformation – Andrew Thomas

Matter for information

Wards Affected:

All

PUPIL ATTENDANCE UPDATE

Purpose of the Report

1. To provide Members with information and data in relation to Neath Port Talbot pupil attendance for the Autumn Term 2015/16 and comparative data across Wales for the academic year 2014/15.

Background

2. Members have previously received reports outlining procedures the local authority and schools have followed in order to increase pupil attendance and ensure there remains a high priority focus in this area.
3. This report provides Members with details of the latest available data up to and including November, 2015. December data will not be validated and available until mid-January.

Attendance Data

4. Attendance across both the primary and secondary sectors increased compared with the same period last year. The primary sector increased by 0.17% during this time with the secondary sector increasing by 0.01%.
5. Pupil attendance across the primary sector for the period of available data is 95.25%. Attendance across the secondary sector for the same period is 93.65%.
6. Attendance percentages during the available data period of Autumn 2015/16 in the primary sector range from 94.41% to 97.15%. In the secondary sector attendance ranges from 92.40% to 95.21%.

The Position Across Wales

7. Members will be aware that pupil attendance is currently a priority and the focus of attention of all local authorities across Wales. In relation to the whole academic year 2014/15 Neath Port Talbot's position in relation to primary attendance was ranked 13; an improvement from ranked place 16 for the previous 2013/14 academic year. This places Neath Port Talbot primary schools in its best ranked position across Wales for the past 10 years. Over this time there has been an improvement from an average percentage of attendance of 92/93% to just short of 95% for the last academic year.
8. Within the secondary sector whilst attendance has also risen by a similar uplift of around 3% over this 10 year period from an average of 90/91% to 93.5% last academic year, the secondary sector ranking position has slipped to 15th place for 2014/15 academic year from 13th from the previous 2013/14 year. Whilst reflecting upon this, Members should take reassurance that Neath Port Talbot secondary schools have consistently increased their pupil attendance rates year-on-year for the past six consecutive.

Continuing Improvement

9. There continues to be an emphasis at both local authority and school level on the priority of increasing pupil attendance. The majority of governing bodies now routinely and regularly discuss attendance at their termly meetings providing the school leadership with challenge where needed. The Education Welfare Service assists schools by

working with individual pupils and families at an early stage where attendance becomes a concern.

10. Members will continue to be provided with regular reports on attendance and the work being undertaken and during the spring term. In addition an update report on the introduction of fixed penalty notices will also be provided to Members.

Financial Impact

11. There is no financial impact associated with this proposal.

Equality Impact Assessment

12. Having considered the Council's screening assessment guidance produced to assist the Council in discharging its Public Sector Equality Duty under the Equality Act 2010 it has been determined that this report does not require an equalities impact assessment.

Workforce Impacts

13. There are no workforce or staffing issues directly associated with this report.

Legal Impacts

14. There is no legal impact associated with this report.

Risk Management

15. Members have previously determined that they wish to include the monitoring of pupil attendance as a regular activity within their on-going work programme. Such scrutiny maintains a high-level focus on attendance amongst schools within the County Borough whilst comparing internal pupil attendance with that of other Authorities across Wales.

Consultation

16. There is no requirement under the Constitution for external consultation on this item.

Recommendations

17. That Members note the contents of this report.

Implementation of Decision

18. Not Applicable

Appendices

19. None.

List of Background Papers

20. None.

Officer Contact

21. John Burge, Principal Schools Governance Officer

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NEATH PORT TALBOT COUNTY BOROUGH COUNCIL

CHILDREN, YOUNG PEOPLE AND EDUCATION CABINET BOARD

14th January 2016

REPORT OF THE HEAD OF CHILDREN AND YOUNG PEOPLE SERVICES - A. JARRETT

MATTER FOR INFORMATION

WARDS AFFECTED: ALL

UPDATE ON THE LOOKED AFTER CHILDREN'S STRATEGY

1. **Purpose of Report**

To update Members on the progress of the Looked After Children's Strategy which was approved and implemented in January 2015.

2. **Executive Summary**

The update to the Looked After Strategy reports progress on:

- Numbers of Looked After Children
- Services to support Looked After children and reduce numbers
- Admissions to care
- Care planning
- Use of Independent foster placements
- Use of in house foster placements
- Next Steps:
 - Financial review
 - Fostering marketing strategy
 - Training and clinical support
- Financial impact of the strategy

3. **Background**

The Looked After Strategy was approved and implemented in January 2015 as a response to introducing strategies to manage the high number of Looked After Children and to place an emphasis on reducing the number of children entering or remaining in Care within Neath Port Talbot. The strategy also introduced the way in which Children's Services intended to improve outcomes for those children who do need to be looked after.

4. **Financial Impact**

Not applicable in relation to the strategy itself although it is intrinsically linked to the savings that have been agreed as a part of the Forward Financial Plan.

5. **Equality Impact Assessment**

After consideration this is not applicable.

6. **Workforce Impacts**

After consideration this is not applicable.

7. **Legal Impacts**

After consideration this is not applicable.

8. **Risk Management**

After consideration this is not applicable.

9. **Consultation**

After consideration this is not applicable.

10. **Recommendation**

That the report be noted.

11. **Reason for Proposed Decision**

After consideration this is not applicable.

12. **Implementation of Decision**

After consideration this is not applicable.

13. **Appendices**

Update on the Looked After Children's Strategy

14. **List of Background Papers**

None

15. **Officer Contract**

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UPDATE ON THE LOOKED AFTER CHILDREN'S STRATEGY
JANUARY 2016

The Looked after Children's strategy was approved and implemented in January 2015. The Strategy set out a number of ways in which the reduction of looked after children and associated costs would be achieved in a safe manner and in accordance with children's needs.

This report is intended to provide an update to the key areas of the strategy:

1. The number of Looked After children has decreased over the past 18 months in line with the targets set by the Looked after Childrens Strategy and the Forward Financial Plan. The number of Looked After Children (LAC) has reduced from 467 on 30th March 2014 to 387 by 21st December 2015. Whilst this is confirmation that the strategy is working it is important to note that further work is required to ensure that the targets set out below continue to be achieved and surpassed.

Financial Year	Projected Number Of LAC	Reduction	Rate Of LAC Per 10,000 Population
2013/14	467 (actual)		168
2014/15	441	-26	158
2015/16	411	-30	148
2016/17	371	-40	133
2017/18	345	-26	124

2. A main element of the Strategy was ensuring that support services for families to enable children to remain at home were both targeted and effective. The Family Support Strategy introduced new opportunities for how commissioned services could support Looked after Children. The Rapid Response Service has successfully intervened in placements where young people were facing a family or placement breakdown, and services provided by Action for Children have been integral to supporting young people to be rehabilitated home to their families. The Family Group

Conferencing service was initially not aimed at children who were looked after, but was able to be responsive to the service need and change its remit to offer support where children were returning from foster carer to their families.

3. The Children's Community teams and the Looked after Children's teams have all benefited from stability across the workforce. Staff have received quality training which has resulted in significant improvements in assessment, care planning and risk management.
4. The Accommodation Panel has been successful in ensuring that only children who need to be accommodated enter the Looked After Children's System. This will be further enhanced in January with the introduction of a Resource Panel, which will consider alternative and holistic mechanisms to further support children remaining within their families. The management of authorising the admission of children and young people into care has been strengthened. Senior Management approval is required prior to any child becoming Looked After, and in an emergency situation authorisation can only be given by the Head of Children's Services.
5. Permanency panel continues to track and ensure that children who are in accommodation do not drift within the care system and have a timely move to a permanent family without the need for statutory intervention whenever this is possible. In the last 12 months of the cases tracked by permanence panel:
 - 12 Special Guardianship orders have been granted, with a further 17 being considered.
 - 7 children who were looked after and living with their parents under Placement with parents regulations have had Care Orders Revoked. There are currently 16 Children currently subject to care orders where the plan is to support rehabilitation to parents or to revoke the Care Order.

6. There has been a reduction in the use of Independent foster placements for children who are under 10, however, the number of children 11 and over placed with independent carers has on the whole stayed static. It is now essential that this is re-balanced. The average cost of an IFA placement per year is £40,000 with an in house placement averaging £20,000. The more children that can be looked after by Neath Port Talbot foster carers, the greater the savings that can be made and better outcomes can be made for children who can remain within their local community.
7. The contract monitoring arrangements and reviews of commissioned services have been strengthened with the implementation of a central commissioning unit and dedicated support to Children's Services. Alongside the contract monitoring the Placement Coordinator plays a key role in ensuring that providers are held to account and that we are only paying for services that we commission and receive.
8. NPT fostering has a vacancy rate of 35% within its available placements; however with the exception of a small handful of placements where careful matching is required, all of these placements are for Children under the age of 10. We now need to increase the number of foster carers for children over the age of 11 to reduce the reliance on IFA placements. While NPT offers a reasonably competitive financial support package for foster carers looking after children under 10 and over 16, the payments for NPT foster carers looking after children aged 11 – 16 are not comparative to other fostering providers, including neighbouring Local Authorities, with NPT carers for this age range being paid on average £50 less a week per placement. This needs to be addressed in order to attract new carers to look after children in this age range. A plan has been formulated by the Service and will be placed before this Committee once the appropriate consultations have taken place.

9. A revised fostering marketing strategy is required in order to support the need to recruit new foster carers into the service. The margin between the number of people expressing an interest in applying to NPT as carers and the numbers approved needs to be reduced. Applicants report that a key factor in deciding whether to foster with NPT or another fostering service is whether a retainer is available for times when they have no placement. This is something that needs to be considered as a means of increasing the number of placements that are available with NPT carers for children over the age of 11.
10. A comprehensive training programme continues to be available to foster carers, and NPT will be participating in the Fostering Network's National training programme for carers called 'confidence in care'. The supervising social workers in the fostering team have all received specialist training to help support carers in dealing with attachment and behavioural difficulties.
11. In addition to the existing supports available for young people and carers, consideration is currently being given to exploring the use of clinical supervision and support for foster carers in order to support and maintain placements for children with challenging or complex needs. A plan has been formulated and will be presented to this Committee following appropriate consultation.

By achieving the reduction in the number of LAC within this period the Looked after Strategy was able to support achieving the £700,000 saving required of Children and Young People's Services within 2014/15 and is on target to deliver its committed savings for 2015/16.

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NEATH PORT TALBOT COUNTY BOROUGH COUNCIL

CHILDREN, YOUNG PEOPLE AND EDUCATION CABINET BOARD

REPORT OF THE HEAD OF CHILDREN AND YOUNG PEOPLE SERVICES - A. JARRETT

14th January 2016

SECTION C – MATTER FOR MONITORING

WARD(S) AFFECTED: ALL

Update on the Action Plan in regard to the Recommendations from Care and Social Services Inspectorate Wales (CSSIW) Inspection Report (April 2015)

Purpose of the Report

1. To advise Members on progress made with regards to Children and Young People Services (CYPS) compliance against the 15 Recommendations contained within the CSSIW's Inspection Report, published in April 2015.

Executive Summary

2. This report provides an update on the following 15 CSSIW Recommendations:-
 - Strong political and corporate support for children's services must continue if the improvements made are to be sustained and further consolidated.
 - The Corporate Parenting Panel should continue to focus on ensuring better outcomes for looked after children and young people are achieved and support improved mechanisms to gain the views of service users.
 - The workforce strategy must include medium to long term aims for recruitment and retention of social workers. Arrangements for deputy team managers and consultant social workers should be reviewed to ensure the capacity to carry out their responsibilities is consistent across the service.
 - Caseloads must be continuously monitored to ensure there is sufficient capacity for workers to undertake direct work with children, young people and their families.

- Leadership and development programmes should be made available to build resilience within the operational management team, and continued support is required for the development of the independent reviewing team.
- The implementation of the Participation and Engagement action plan should be given priority.
- The quality assurance framework must be systematically implemented across the service. The quality of supervision should be reviewed to ensure there is a consistent approach which represents an effective front line quality assurance process.
- The complaints service should be monitored consistently to ensure there is sufficient resource and capacity available to manage it effectively. Better organisational learning should be derived from complaints to improve the quality of services.
- The looked after children's strategy should be reviewed to ensure that services focus on emotional well-being and that the best outcomes are achieved for those children and young people in long term care.
- More interagency work is required to agree thresholds across the service particularly for decision making on stepping up and stepping down arrangements.
- The Family Support Strategy should be reviewed to ensure there is clarity about eligibility and better integration between the support services across the tiered approach to meeting need. Arrangements to support families to engage in early preventative service also should be included.
- The effectiveness of arrangements to ensure the needs of children and young people are assessed, if concerns about their wellbeing are repeated, should be strengthened.
- The multi-agency peer review group should consider trends in demand and monitor the thresholds for and the take up and effectiveness of preventative services.
- Risk assessment training should be provided for unqualified support workers, and work to promote consistency in risk management should retain a strong focus.
- Further improvement in the quality of care planning is required and in particular a greater emphasis on permanency arrangements for those in long term care.

Background

3. Neath Port Talbot CYPS was made subject to the CSSIW 'Serious Concerns Protocol in November 2012. Quarterly monitoring arrangements were put in place to assess progress made by the local authority and a subsequent Inspection in November 2013 resulted in the protocol remaining in place.

A further Inspection was undertaken in February 2015, during which, Inspectors focussed on whether sufficient progress had been made to improve the quality and consistency of services for children and young people in need of support or protection, including those who were looked after and care leavers. Inspectors also evaluated the potential for the local authority to sustain and further develop improvements in the service.

Upon completion of the CSSIW Inspection Report; the Chief Inspector (CSSIW) took the decision to recommend to the Minister, the removal of Neath Port Talbot CYPS off the Serious Concerns Protocol. However, contained with the report were 15 Recommendations that required attention.

CYPS have subsequently allocated specific project management resources; in addition to senior management oversight in ensuring that adherence to the recommendations is being progressed/achieved. **Appendix 1** outlines the progress made against the Recommendations during the period, April 2015 to December 2015.

Financial Impact

4. After consideration this is not applicable.

Equality Impact assessment

5. After consideration this is not required.

Workforce Impacts

6. After consideration this is not applicable.

Legal Impacts

8. After consideration this is not applicable.

Risk Management

9. After consideration this is not applicable.

Consultation

10. No requirement to consult.

Recommendations

11. Members continue to monitor CYPS' progress against the CSSIW recommendations.

Reasons for Proposed Decision

12. Matter for monitoring. No decision required.

Implementation of Decision

13. Not Applicable.

Appendices

14. Update on CSSIW Recommendations during the period April – December 2015.

Officer Contact

15. Ian Finnemore – Business Strategy Manager
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Email: i.finnemore@npt.gov.uk

Progress Made on CSSIW Recommendations during the period April – December 2015

Rec. No.	Recommendation	Update	Status
1	Strong political and corporate support for children's services must continue if the improvements made are to be sustained and further consolidated.	<ul style="list-style-type: none"> • The Children, Young People and Education Committee (CYPE) continues to provide the forum, whereby members can provide appropriate challenge and support. • Enquiry days have been arranged with CYPE members to discuss and acquire greater knowledge on specific aspects of CYPS e.g. child sexual exploitation. • The Corporate Parenting Panel continues to be chaired by the Leader of the Council and has strong representation from the Cabinet and wider Council • Regular Cabinet Member attendance at CYPS senior management meetings. 	Ongoing
2	The Corporate Parenting Panel should continue to focus on ensuring better outcomes for looked after children and young people are achieved and support	<ul style="list-style-type: none"> • The Corporate Parenting Panel have met on four occasions during the period. Key areas discussed in these meetings, include: • Accommodation for Care Leavers • Improving education attainment of Looked After Children • Looked After Children in the Youth Justice System 	Ongoing

Rec. No.	Recommendation	Update	Status
	improved mechanisms to gain the views of service users.	<ul style="list-style-type: none"> • National Safeguarding and Care Planning of Looked After Children and Care Leavers who exhibit Vulnerable or Risky Behaviours <p><u>Areas requiring further development during 2016</u></p> <ul style="list-style-type: none"> • Further work is required in acquiring the views of service users. 	
3.1	The workforce strategy must include medium to long term aims for recruitment and retention of social workers.	<ul style="list-style-type: none"> • As at the 31st December, there were no vacancies within CYPS. Vacancies during the entire period have been consistently low. • Weekly and fortnightly reporting of establishment oversight has occurred, via the Children’s Services Management Group (CSMG) and Senior Management Team (SMT) meetings. • Robust decisions in place to minimise risk/s arising from inappropriate appointments. • HR sign-off on all recruitment activities prior to new entrants being accepted into post. • ‘Safer Recruitment’ training delivered to all new managers. 	Ongoing
3.2	Arrangements for deputy team managers and	<ul style="list-style-type: none"> • Clear Job Descriptions in place • Task and Finish Group formed (of staff from across the 	Completed

Rec. No.	Recommendation	Update	Status
	<p>consultant social workers should be reviewed to ensure the capacity to carry out their responsibilities is consistent across the service.</p>	<p>service), to clarify roles and report back to the Practice Improvement Group</p> <ul style="list-style-type: none"> • Clear and consistent role boundaries across the service that allows for the mobility of staff to areas where the need is greatest. • Clear progression routes for staff and succession planning activities in place. • Staff aware of management expectations and deliverables for each role. • Ongoing training in place for managers and supervisors on organisational policies and procedures. • Priority management & leadership development requirements identified and bespoke programme developed • Managers can access and participate in management and learning programme, leadership development programme, Team Manager Development Programme (TMDP) and Middle Manager • All new managers (including deputy team managers) attend 2 hour introduction to people management training. • Team Manager and Principal Officer Meetings changed to 	

Rec. No.	Recommendation	Update	Status
		<p>fortnightly following consultation between CSMG & Team Managers.</p> <ul style="list-style-type: none"> • A revised Appraisal system was designed and rolled out to Senior Managers in September 2015, with the aim that all Team Managers to have an appraisal by end December 2015 and all staff to have a completed appraisal by 31st March 2016. 	
4	Caseloads must be continuously monitored to ensure there is sufficient capacity for workers to undertake direct work with children, young people and their families.	<ul style="list-style-type: none"> • The average number of cases held by qualified workers across CYPS has remained relatively low during the period, and as at 30th November 2015, numbered 13.4 • Maintaining low caseloads is a priority and this is reflected in the average caseload figure being reported to Children, Young People and Education Committee on a regular basis throughout 2015/16. • Going into 2016, further emphasis will be placed upon the safe reduction in the number of child in need cases open to the services. 	Ongoing
5	Leadership and development programmes should be made available to build resilience within the	<p><u>Leadership and Development Programme Update</u></p> <ul style="list-style-type: none"> • Ongoing training in place for managers and supervisors on organisational policies and procedures. 	Ongoing

Rec. No.	Recommendation	Update	Status
	operational management team, and continued support is required for the development of the independent reviewing team.	<ul style="list-style-type: none"> • Priority management & leadership development requirements identified and bespoke programme developed • Managers can access and participate in management and learning programme, leadership development programme, Team Manager Development Programme (TMDP) and Middle Manager. • All new managers (including deputy team managers) now attend a 2 hour introduction to people management training. <p><u>Supporting the Development of the Independent Reviewing Team</u></p> <ul style="list-style-type: none"> • During the summer of 2015, a change management process was concluded which resulted in all Conference and Review Service staff being incorporated onto the Independent Reviewing Officer (IRO) pay grade. • The Team have operated with little or no vacancies throughout the second half of 2015. <p><u>Areas requiring further development during 2016</u></p>	

Rec. No.	Recommendation	Update	Status
		<ul style="list-style-type: none"> • A system will be developed to enable Community Teams to formally provide feedback to the Conference and Review Service, to help identify and address areas for improvement. • Joint training will take place between IROs and Conference Secretaries to ensure Minutes for conferences and reviews are produced to a consistently high standard. 	
6	The implementation of the Participation and Engagement action plan should be given priority.	<ul style="list-style-type: none"> • The Performance, Quality and Practice Development Team have taken the service lead on implementing the Participation and Engagement action plan. During the period April to December 2015, the team have: • Provided training across the service on the United Nations Convention on the Rights of the Child (UNCRC). • Developed an electronically accessible participation handbook for children and young people. • Established a Participation and Engagement Working Group which incorporates children and young people within its membership. • Implemented revised Looked After Children consultation documents • In July 2015, a feedback mechanism was established for families (at point of case closure), in the form of a 	Ongoing

Rec. No.	Recommendation	Update	Status
		<p>questionnaire and designated feedback phonenumber. Responses have been limited to-date; however, work is currently underway to increase response rates.</p> <p><u>Areas requiring further development during 2016</u></p> <ul style="list-style-type: none"> • Assist in the development of systems to capture and act upon qualitative information emanating from the new Social Services and Wellbeing Act suite of questionnaires aimed at children, parents and carers. • Develop a programme of events/opportunities (during 2016) to celebrate success with children, young people and their families/carers. 	
7	The quality assurance framework must be systematically implemented across the service. The quality of supervision should be reviewed to ensure there is a consistent approach which represents an effective front line quality	<ul style="list-style-type: none"> • The Performance, Quality and Practice Manager has both provided Community Team Managers with training to enhance their auditing skills and also formulated audit tools to assist the process and promote consistency. • A monthly audit programme is in place, which has recently been modified to reflect the move towards “Peer Audits” within the service. Principal Officer audits of Supervisions form part of the monthly audit programme. • The Performance, Quality and Practice Manager will 	Ongoing

Rec. No.	Recommendation	Update	Status
	assurance process.	<p>provide a monthly report to the Principal Officer/Team Manager Meeting, outlining findings from the most recent audits and exploring any areas of practice which may be improved upon.</p> <p><u>Areas requiring further development during 2016</u></p> <ul style="list-style-type: none"> • Peer Audits to become fully embedded, with Deputy Team Managers playing a greater role in the process. • The audit process to better contribute towards future practice improvement initiatives. 	
8	The complaints service should be monitored consistently to ensure there is sufficient resource and capacity available to manage it effectively. Better organisational learning should be derived from complaints to improve the quality of services.	<ul style="list-style-type: none"> • Monthly complaints meetings with Performance, Quality & Practice Manager are in place and on-going. • Fortnightly meetings between the Complaints Officer and CYPs senior managers are in place to monitor and act upon complaints. <p><u>Areas requiring further development during 2016</u></p> <ul style="list-style-type: none"> • Further work is required to identify thematic issues arising through complaints. 	Ongoing

Rec. No.	Recommendation	Update	Status
9	The looked after children's strategy should be reviewed to ensure that services focus on emotional well-being and that the best outcomes are achieved for those children and young people in long term care.	<ul style="list-style-type: none"> • A report on the update to the Looked after Childrens Strategy will be provided to Members on 14th January 2016 • Over the past 12 months there has been a decrease in the number of looked after children in line with the targets set by the LAC strategy and Forward Financial Plan • Through the reduction of Looked after children numbers and associated costs the target saving of £700,000 has been achieved • Support services have been re-commissioned to include services to support rehabilitation of looked after children to their families and to support the prevention of placement breakdown • Improvements in workforce stability have resulted in positive improvements in assessment, care planning and risk assessments for children who are looked after • Decision making in relation to children becoming looked after has been strengthened through the use of the Accommodation Panel. Senior Management/Head of Service approval is required for all new admissions into care (including emergency placements). 	Ongoing

Rec. No.	Recommendation	Update	Status
		<ul style="list-style-type: none"> • Permanence continues to support the prevention of drift for children who are looked after and to ensure that where possible children are cared for outside of the looked after children system • The use of Independent foster placements has reduced. <p><u>Areas requiring further development during 2016</u></p> <ul style="list-style-type: none"> • To implement a resource panel in addition to the accommodation panel • To seek approval of a fostering recruitment strategy with the aim of increasing the number of placements with NPT foster carers for children aged 11 plus • To seek approval of a new foster carers finance policy • To seek approval for an additional range of support services for children with complex needs and their foster carers • To develop a new fostering marketing strategy 	
10	More interagency work is required to agree thresholds across the service particularly for decision	<ul style="list-style-type: none"> • Peer Review Meetings have been established and are working effectively. Positive working relationships have been developed between the “front door” and partner agencies. 	Ongoing

Rec. No.	Recommendation	Update	Status
	making on stepping up and stepping down arrangements	<ul style="list-style-type: none"> • During the 2nd half of 2015, the Team Around the Family (TAF), relocated into Neath Civic Centre to work more closely with CYPS partners. • A step up/down process flowchart has been devised and implemented between CYPS and TAF. • In Nov 2015, a “Single Point of Contact” (SPOC) was implemented providing, both partner agencies and members of the public, with one point of contact when wishing to raise concerns about the welfare of children. • The development of a TAF I.T. system is reaching its conclusion. One of the key aims of the system is to provide better background information with regards to previous/current involvement with children and families. The system will also provide performance management information relating to cases that are stepping up and down between TAF and CYPS. <p><u>Areas requiring further development during 2016</u></p> <ul style="list-style-type: none"> • To fully embed the SPOC • To utilize the newly available performance management information, to identify and better understand the 	

Rec. No.	Recommendation	Update	Status
		intricacies of those cases stepping up/down between TAF and CYPS.	
11	The Family Support Strategy should be reviewed to ensure there is clarity about eligibility and better integration between the support services across the tiered approach to meeting need. Arrangements to support families to engage in early preventative service also should be included.	<p><u>Family Support Strategy provides clarity with regards to eligibility and integration between support services</u></p> <ul style="list-style-type: none"> • Agreement has been received from the CSMG to implement (from Jan 2016) a “Resource Panel”, which will facilitate families in accessing a range of appropriate support services. • CYPS now have access to designated commissioning and monitoring officer support. • A programme has been devised to review all commissioned services. • A Transition Protocol has been implemented to support young people “moving” between CYPS and Community Care services. A Tracking Planning Group is in place to support relevant young people during this period of transition. <p><u>Areas requiring further development during 2016</u></p> <ul style="list-style-type: none"> • To fully embed the Resource Panel • To undertake a review of the Family Support Strategy 	Ongoing

Rec. No.	Recommendation	Update	Status
		<p><u>Support families to engage in early preventative services</u></p> <ul style="list-style-type: none"> • During the 2nd half of 2015, the TAF relocated into Neath Civic Centre, to work more closely with CYPS partners. • A step up/down process flowchart has been devised and implemented between CYPS and TAF. • In Nov 2015, a “Single Point of Contact” (SPOC) was implemented providing, both partner agencies and members of the public, with one point of contact when wishing to raise concerns about the welfare of children. • The development of a TAF I.T. system is reaching its conclusion. One of the key aims of the system is to provide better background information with regards to previous/current involvement with children and families. The system will also provide performance management information relating to cases that are stepping up and down between TAF and CYPS <p><u>Areas requiring further development during 2016</u></p> <ul style="list-style-type: none"> • To fully embed the SPOC 	

Rec. No.	Recommendation	Update	Status
12	The effectiveness of arrangements to ensure the needs of children and young people are assessed, if concerns about their wellbeing are repeated, should be strengthened.	<ul style="list-style-type: none"> • Performance management information on the number of re-referrals and multiple contacts that did not progress, are provided periodically to senior managers. • Periodic reviews of relevant contacts have been carried-out by senior managers. 	Ongoing
13	The multi-agency peer review group should consider trends in demand and monitor the thresholds for and the take up and effectiveness of preventative services	<ul style="list-style-type: none"> • The multi-agency peer review group intend undertaking this piece of work in early 2016. 	Ongoing
14	Risk assessment training should be provided for unqualified support workers, and work to promote consistency in risk management should retain a strong focus.	<ul style="list-style-type: none"> • CYPS in conjunction with Training colleagues, are currently undertaking a training needs analysis, to best establish and determine role specific training requirements for unqualified staff. <p><u>Areas requiring further development during 2016</u></p> <ul style="list-style-type: none"> • Senior managers to consider the possibility of qualified staff (already having received the training) to cascade it 	Ongoing

Rec. No.	Recommendation	Update	Status
		down through the service.	
15	Further improvement in the quality of care planning is required and in particular a greater emphasis on permanency arrangements for those in long term care.	<ul style="list-style-type: none"> • As part of the Quality Assurance Framework, audits of all plans have occurred regularly throughout 2015. • During the period 1st April – 31st December 2015, 100% of children had a permanency plan in place at their second review. • CYPS has been part of a Welsh Government led pilot aimed at capturing, recording and acting upon the personal outcomes of children and families. Childrens Plans are the key tool used in recording the work involved by all parties, in attempting to achieve these outcomes. <p><u>Areas requiring further development during 2016</u></p> <ul style="list-style-type: none"> • Improving the quality of care planning will continue to be a priority during 2016, with the Quality Assurance Group playing a key role in taking this forward. • It is the intention to fully roll-out personal outcome focused practice throughout CYPS. • All care plans are outcome focussed, and include the voice of the child. 	Ongoing

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