
Haringey Schools Forum

THURSDAY, 21ST MAY, 2015 at 15:45 HRS FOR 16:00 HRS – HARINGEY
PROFESSIONAL DEVELOPMENT CENTRE, DOWNHILLS PARK ROAD, TOTTENHAM,
LONDON, N17 6AR

AGENDA

1. CHAIR'S WELCOME

2. APOLOGIES AND SUBSTITUTE MEMBERS

Clerk to report.

3. DECLARATIONS OF INTEREST

Declarations are only required where an individual member of the Forum has a pecuniary interest in an item on the agenda.

4. MINUTES OF THE MEETINGS OF 25 FEBRUARY 2015 (PAGES 1 - 8)

5. MATTERS ARISING

6. HIGH NEEDS UPDATE (PAGES 9 - 20)

To provide the Forum with an update.

7. ADMINISTRATIVE ARRANGEMENTS FOR THE ALLOCATION OF CENTRAL GOVERNMENT GRANTS PAID TO SCHOOLS VIA THE LOCAL AUTHORITY (PAGES 21 - 26)

To comply with the Schools Forum (England) Finance Regulations in informing members of the arrangements for administering grants paid to schools.

8. EARLY HELP (PAGES 27 - 70)

To up-date Schools Forum on the delivery, performance and developments of Early Help

9. MEMBERSHIP AND FEEDBACK FROM WORKING PARTIES: (VERBAL) (PAGES 71 - 76)

- Early Years
- High Needs
- Traded services (presentation attached)

10. WORK PLAN 2014/15 (PAGES 77 - 80)

To inform the Forum of the proposed work plan for 2014-15 and provide members with an opportunity to add additional items.

11. ANY OTHER URGENT BUSINESS

12. DATE OF FUTURE MEETINGS

- 8 July 2015

**MINUTES OF THE SCHOOLS FORUM MEETING
WEDNESDAY 25 FEBRUARY 2015**

Schools Members:

Headteachers: **Special (1)** - Martin Doyle (Riverside),
Children's Centres (1) - *Julie Vaggers (Rowland Hill),
Primary (7) *Dawn Ferdinand, (The Willow), Fran Hargrove (St Mary's CE), *Will Wawn (Bounds Green) Cal Shaw (Chestnuts), Julie D'Abreu (A)(Devonshire Hill), Nic Hunt (A)(Weston Park) James Lane (A)(St Francis de Sales)
Secondary (2) Helen Anthony (A) (Fortismere), *Tony Hartney (Gladesmore),
Primary Academy (1) *Sharon Easton (A) (St Paul's and All Hallows),
Secondary Academies (2) *Elma McElligott (Woodside), Michael McKenzie (A) (Alexandra Park)

Governors: **Special (1)** Michael Connah (A)(Riverside)
Children's Centres (1) *Melian Mansfield (Pembury)
Primary (7) Miriam Ridge (Our Lady of Muswell), Asher Jacobsberg (A) (Welbourne), *Louis Fisher (Earlsmead), *Laura Butterfield (Coldfall),* Andreas Adamides,(Stamford Hill), *Zena Brabazon (Seven Sisters) and *Lorna Walker (Rokesly Infants)
Secondary (3) *Liz Singleton (Northumberland Park),* Imogen Pennell (Highgate Wood), Keith Embleton (Hornsey)
Primary Academy (1) *Liza Sheikh Wali (A)
Secondary Academy (1) Marianne McCarthy(A) (Heartlands),

Non School Members:- **Non – Executive Councillor** - * Cllr Wright
Professional Association Representative - * Niall O'Connor
Trade Union Representative -Pat Forward (A)
14-19 Partnership - June Jarrett
Early Years Providers - *Susan Tudor-Hart
Faith Schools - Mark Rowland
Pupil Referral Unit –* Gordon McEwan

Observers:- **Cabinet Member for CYPS** (*Cllr Ann Waters)

Also attending: Steve Worth, Finance Manager (Schools and Learning)
Carolyn Banks, Clerk to Forum
Jon Abbey, Interim Director of Children Services
Katherine Heffernan, Head of Finance (CCAPS)
Charlotte Pomery, Assistant Director for Commissioning
Anne Woods, Head of Audit and Risk Management
Vikki Monk- Meyer, Head of Integrated Services

- * Members present
- A Apologies given

TONY HARTNEY IN THE CHAIR

MINUTE NO.	SUBJECT/DECISION	ACTION BY

1	CHAIR'S WELCOME The Chair, welcomed everyone to the meeting.	
2.	APOLOGIES AND SUBSITITUTE MEMBERS	
2.1	Apologies for absence received from Helen Anthony, Pat Forward, Michael Connah, James Lane, Nic Hunt, Michael McKenzie, Julie D'Abreu and Marianne McCarthy.	
2.2	There were no substitute members. The Clerk advised that Cllr Charles Wright had been appointed by the Council as the Non Executive Councillor and Niall O'Connor had been nominated by the Teachers Panel as the Professional Association representative. The Forum confirmed these appointments and both were welcomed to the meeting.	
3	DECLARATION OF INTEREST (Agenda Item 3) There were no declarations made	
4	MINUTES OF MEETINGS HELD ON 15 JANUARY 2015	
4.1	The minutes of the meetings held on 15 January 2015 were agreed as a correct record.	
5.	MATTERS ARISING	
	Matters Arising :- 5 7.2 MM reminded the Forum that JA/NA had agreed to provide the Schools Forum with details of the impact of the publicity in respect of take up of 3 year old places. 6.6 Cllr Waters confirmed that the SLA on trade union facilities time was being finalised and would be circulated to governors.	JA/NA LF/ Cllr Waters
6.	THE SCHOOLS 2015/16 INTERNAL AUDIT PROGRAMME AND FEEDBACK ON 2014/15 AUDIT WORK	
6.1	The Forum was reminded that internal audit undertook a programme of school audit reviews to ensure that schools comply with the requirements of the Schools Finance Manual and the risks associated with the key financial and non financial processes.	
6.2	The Forum noted feedback on the 2014/14 audit work and follow up from 2013/14, together with the programme of schools to be audited during 2015/16. AW informed the meeting that schools were chosen for audit as a result of a combination of a cyclical process and on the basis of risk. Although there was no audit of the SFVS the test programme given to schools should provide schools with sufficient assurance that the SFVS was being applied appropriately.	
6.3	The Forum noted that there had been support provided to school staff through briefing sessions. Additionally a well attended and received training session on audit and risk management had recently been delivered to school governors. It was pleasing to note that there was an improving picture, with around 50% of schools now receiving substantial assurance. MM expressed the importance of ensuring that reports were shared with governors. In response to a query from LSW it was noted that there were common themes of poor practice such as a lack of inventories,	

	decent asset management and basic financial practices. SW advised that the SFVS would help schools in this regard as a basic wealth of information and good practice. AW also advised that it would be useful for schools to examine their previous audit report and ensure that previous recommendations had been acted upon.	
6.4	Resolved: That the planned programme of audit work for 2015/16 as set out in Appendix A and the initial feedback on audit work completed in 2014/15 be noted.	
7.	HIGH NEEDS BLOCK	
7.1	SW reminded the Forum of the changes to the way special schools, special units and special providers were funded. In preparation for the changes the Forum had agreed to transfer £4.1m from the High needs to the schools block for delegation to schools, of which £0.5m would be retained as a contingency to support schools.	
7.2	The High Needs Working Party had now been reconvened and was monitoring information on the progress of the budget.	
7.3	Although the centrally retained services budget was showing an overall projected underspend for 2014/15 of £99K due to vacant posts the Commissioning budget was showing an overspend of £511k. However as the Forum had previously agreed to roll forward the remainder of the contingency of £452K set aside in 2013/14 as a HNB contingency for 2014/15 there would be sufficient to cover the projected overspend and an estimated balance of £40k which could be carried forward to 2015/16. In particular the Forum noted that there was budgetary pressure with the independent and voluntary schools. However the Council had now restructured and created a commissioning function to ensure better control in this area. Also there was some concern around the higher education top up, especially as this was a new area of responsibility; and, School Forum members required more information expressing that there was some uncertainty about numbers and locations of students.	
7.4	The budget for 2015/16 which reflected previous decisions made by the Forum to transfer funds from the Schools Block either to provide for the pressures within the block or to create the new in-year Fair access budget following the recommended top slicing of secondary school lump sums. The Forum also noted elements of the HNB which would be "recouped" for academies before the remainder was paid to the Council. The net position was a balance of £0.563m to offset the pressure of £0.702m, which it was agreed would be used to create a "bringing in" fund to expand provision in borough, reducing expensive out borough placements and a contingency to deal with unavoidable budget pressures.	
7.5	In response to a query around speech and language sufficiency VMM advised that this was an area for further investigation to ensure that it was being effectively provided. VMM also advised that work was being done around support being provided to the increasing number of people with autism.	
7.6	The Forum reminded the LA that a report on the Early help strategy was expected at the next meeting. JA advised that this would be transparent	CP

	and would clearly show models of help, where money was being spent and there would be an impact assessment. JA also advised that this report had not been available earlier as it was important to allow sufficient time in order to demonstrate impact. It was noted that £1m was being allocated for developments in this area. The Forum supported ZB's view that it was important to demonstrate case studies with outcomes, to show that the process was rigorous and good value for money.	
7.7	DF expressed some concern over pressures being placed on main stream teachers with the increase in placing pupils with special needs in the mainstream settings. The Forum noted that the particular circumstances of individual pupil would be taken into account before they were placed. JA also advised that there was a Primary In-year Fair Access Panel which would look at this, although there were particular pressures on year's 6 and 10.	
	<p>Resolved:-</p> <ol style="list-style-type: none"> 1. That the High Needs Block remains at the 2014-15 level, amended as summarised in Table 3. (One abstention) 2. That the Schools Forum endorse the Council's proposal that the balance of £0.563m i.e. used to create a 'bringing in' fund to expand provision in borough, reducing expensive out borough placements and a contingency to deal with unavoidable budget pressures. 3. That the remaining DSG High Needs Block (HNB) roll forward of £40k be set aside as a contingency for the High Needs Block in 2015-16. 	
8.	PATHWAY TO EARLY SUPPORT FOR CHILDREN UNDER 5 WITH COMPLEX SPECIAL EDUCATIONAL NEEDS AND DISABILITIES (SEND)	
8.1	The Early Support offer which drew together health, education and social care services set out how support and intervention for young children with complex health or disabilities is provided. The offer was available to children who met the identified criteria. VMM provided information on how support according to individual child profiles would be accessed through the IASP panel from April 2015. The changes were partly due to the SEND reforms and the increased responsibilities being placed on Local Authorities coupled with a broader approach to places other than Local Authority, including to the voluntary sector.	
8.2	The Forum noted the increasing number of children waiting to access a suitable early education or childcare place and the need to increase places. In addition the Forum was reminded of changes and the rationale behind it and improvements proposed to be made. An initial allocation of funding of £395,000 was agreed from the DSG High Needs block from April 2015, which would be used to fund the support needs of children in order for them to access a 15 hour per week, 38 weeks of the year funded early learning place. It was also noted that demand was likely to increase further and therefore this should be reviewed on an annual basis.	
8.3	In response to a query from LSW it was noted that there may be a need	

	for further training, and sharing good practice, including with partner agencies and there was a need to formalise the outreach support provided.	
8.4	JV expressed some concerns as to how quickly the funding would follow placements as often children were placed for a short period of time. CP advised that there was a need to consider flexible options of support. Also she advised where childcare places were required they would be provided, irrespective of any future proposals for children's centres. The Forum also noted that the Local Authority was currently funding a significant amount of expertise found within nurseries.	
	<p>Resolved:</p> <ol style="list-style-type: none"> 1. That Haringey's early support approach and the intention for a robust pathway to be in place from April 2015 be noted and an update be presented to the next meeting. 2. That £395,000 from the High Needs Block from April 2015 to fund the support requirements of children with complex SEND accessing funded early learning places be agreed. (One abstention). 3. That the sum allocated on an annual basis to determine future levels of funding required be reviewed. 4. That Schools Forum reviews the funding, and impact of the funding, in light of the wider changes to early years proposed by the Council over the coming year. 	CP/VM M
9.	THE FINAL IMPLEMENTATION OF CHANGES TO FULL TIME NURSERY CLASS PLACE PROVISION IN HARINGEY'S SCHOOLS FOR SEPTEMBER 2015	
9.1	The Forum was reminded of the impact of implementing the final stages of changes to full time place provision as agreed by the Council in February 2012, which included the reduction of full time places for 3 and 4 year olds from 675 to 118 by September 2015.	
9.2	As a result of DfE changes to funding arrangements there was an increased target for participation rates for 3 and 4 year olds to 96%, which it was noted would lead to an additional net amount of £400,000 in DSG funding if this target was reached.	
9.3	The report set out three options for the profile of the 118 places for September 2015 and confirmed the Dedicated School Grant (DSG) funding required to meet the cost of the providing full time places for 2014-15 and 2015-16. There was a consensus, which was also favoured by the Early Years Working Group that Option 3 be chosen whereby the places were distributed according to principles of allocating all schools with a children's centre 10 places each. This option it was noted prioritised schools with children's centres due to their ability to offer access to integrated support for those children accessing a full time place in these settings, and their families, The remaining places would be distributed across all schools based on the current allocation ratio. It was also noted that Option 3 enabled the most vulnerable families to access provision close to where they lived. In response to a query as to what	

	<p>happened if schools did not wish to take up their allocation it was noted that there were ongoing discussions as to whether they should be allocated to Nursery schools. The Forum noted that should schools decide before-hand not to take-up places they will not get funding and therefore there will be no clawback, but if they agree to take places and are funded on that basis, but don't fill them then there will be clawback.</p>	
9.4	<p>Full time place provision was no longer sustainable as the funding that formerly under-pinned it was no longer available and the funding rate of £6 per hour for two year olds placed future pressure on the overall Early years block. Consequently the Forum noted the Council's intention to undertake a further review of full time nursery class place provision in Haringey Schools to inform proposals for the future of full time place provision from September 2016 onwards.</p>	
	<p>Resolved:-</p> <ol style="list-style-type: none"> 1. That the options for the final distribution of full time place provision across Haringey's Nursery School classes and Nursery Schools from September 2015 be reviewed. 2. That option 3 be agreed as the preferred option to be taken forward with schools and the principle to be applied if any school did not wish to take its allocation, with further discussions around implementation to be considered by the Early Years Working Group. 3. That the final profile of full time place provision be confirmed following consultation with all affected schools. 4. That the intention to consult schools on the provision of full time place provision from September 2016 and beyond be noted and further consideration be given by the Early Years Working Group. 	
10.	TERMS OF REFERENCE FOR HIGH NEEDS AND EARLY YEARS WORKING GROUPS	
10.1	The Forum agreed the revised terms of reference for both the High Needs and Early Years working parties.	
10.2	With regard to the membership of the Early Years Working Group it was agreed that Dawn Ferdinand and Sharon Easton be appointed as primary Headteacher representatives and Zena Brabazon be appointed as a further primary governor representative.	
10.3	In response to a query from LB as to the origin of the initial membership SW advised that it had previously been agreed by the Forum. The Forum agreed that Gordon McEwan be added to the membership as an Alternative provider. It was also agreed that it was not appropriate for the Working Group to be chaired by an officer. SW confirmed that he would seek further membership and the Forum would be updated at a subsequent meeting.	SW
11.	MEMBERSHIP AND FEEDBACK FROM WORKING PARTIES;-	
11.1	<p><u>Early Years</u> MM advised that the Working Party had given consideration to the Early</p>	

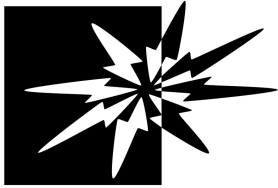
	Years single funding formula, child care subsidy, pupil premium and changes to full time nursery class places.	
11.2	<u>High Needs</u> SW informed the meeting that the Working Party has met ahead of this meeting to discuss the report on this agenda and to agree their proposed terms of reference. It was noted that the Working party would be meeting on a more frequent basis in the future.	
11.3	<u>Traded Services</u> JA advised that the Traded Services Fair held on 24 February had been successful with good engagement from schools. A more detailed tabled report was noted. In response to a query from LB it was noted that the programme board would continue to meet.	
12.	WORKPLAN 2014/15	
	The updated workplan for 2014/15 was noted subject to the addition of specific update on early help and on the Pathway to early support for children with SEND. It was also agreed that there should be an update in 2016/17 on the development of the Traded Services model of provision.	
13.	ANY OTHER URGENT BUSINESS SW advised the Forum that within the Growth Fund there was provision for funding bulge classes and the LA's commitment to guarantee funding. A request had been received from a one form entry school with 37 pupils in a KS1 class, which would be moving to KS2 in September 2015, and which under the current criteria would not be eligible for additional funding as two classes. WW suggested that with the support of the LA the school be able to refuse any casual admission and that funding be provided initially for one year only, which depending upon the reduction in pupil numbers would be reviewed. Resolved:- That funding be provided for an initial one year period from the Growth Fund and that the school be allowed to refuse casual admissions and the matter be reviewed in a year's time.	
14.	DATE OF FUTURE MEETINGS <ul style="list-style-type: none"> • 21 May 2015 • 8 July 2015 	

The meeting closed at 6 pm

TONY HARTNEY

CHAIR

This page is intentionally left blank



Haringey Council

**Agenda Item
6**

Report Status

For information/note
For consultation & views
For decision

Report to Haringey Schools Forum – 21 May 2015

Report Title: Schools forum Update High Needs Block

Author: Vikki Monk-Meyer

Contact: 0208 489 3205 Email: Vikki.monk-meyer@haringey.gov.uk

Purpose: Information and planning

Recommendations:

**Set performance indicators on spend
Drill down report on out borough placements**

1. Report

1.0 SEND Reforms:

The SEND reforms 2014 have changed the legislation over duties to provide support to children from multiple agencies. The key features of the reform agenda are:

- A requirement for the Authority and local Schools to publish their 'Special Educational Needs Offer' for Families and Young People with SEN and Disabilities on their websites
- Education, Health and Social Care Plans (EHC plans) to replace statements, but the threshold to remain as the child's significant learning need. These to be issued within 20 weeks
- The use of a personal budget for services within the Education, Health and Care Plan
- Extension of the EHC plan to 25 years for Young People in Education
- The extension of the duty to include children and young people in Youth Offending Services
- Joint Commissioning between Health, Education and Social Care

Some aspects of the reforms are outside the scope of this paper, however a brief update will be given on key areas for the schools forum.

1.1 Population of children with SEN and Disabilities:

Haringey has 1414 children and young people with Statements of SEN and 499 Young People with Learning Difficulty Assessments. All of the children's statements will be converted into Education Health and Care plans over the next three years, and most of the Young People's Learning Difficulty Assessments (LDD). The conversion of the LDD will depend on whether the Young Person is choosing to stay in Education until 25 years, and their request for a conversion, as the SEND code is clear that the request for an Education, Health and Care Plan is required from the Young Person themselves. For Young People who require less adjustment they may choose not to have their LDD converted, however it is expected that most will request a conversion or have a conversion requested by an advocate.

1.2 Presenting needs on statements

The Young People with Statements of SEN in Haringey have identified on their statement the following primary needs:

- Autism - 525 children and young people
- Moderate learning difficulties - 309 children and young people
- Communication Difficulties -184 children and young people

- Emotional and Behavioural difficulties - 161 children and young people
- Physical Disabilities - 87 children and young people
- Severe learning difficulties (e.g. associated with Down Syndrome, William's Syndrome, epilepsy) - 36 children and young people
- Profound and Multiple Learning difficulties – 34 children and young people
- Profound Hearing impairment - 33 children and young people
- Specific literacy difficulties – 30 children and young people
- Visual Impairment - 22 children and young people

Two children and young people have medical needs without a special educational need. Some children have more than one diagnosis. The majority of statements are issued as a result of a significant cognitive difficulty as a result of Autism, general learning difficulty and/or behaviour or language difficulty. The numbers given above are as a result of primary diagnosis, however many children may have a co-occurring need.

1.3 Services in children's statements funded from top up costs:

The types of support outlined in children's statements is as follows:

- 42 children have specialist teaching hours
- 300 children have 20 hours or under of special needs assistant time, with 285 of these with 15 hours or similar
- 265 have over 20 hours or support
- 270 have 32 hours of support.
- 218 have meal time assistant time

Time from a special needs assistant still represents the most frequent request for support, both from parents and schools.

1.4 Schools funded from High Needs block in statements:

The high needs block budget funds the special schools places in borough, and the following in terms of special school placements out of borough:

Independent non-maintained placement spend is broken down as follow:

Day provision = £3,693,498.28
Residential provision = £2,999,085.46

The CIPFA 2014 benchmarking club report provided a comparison of spend on placements made to independent non-maintained day provision with the other 4 Local Authorities in the benchmarking club (Hackney, Lewisham, Waltham Forrest and Southwark).

Haringey spends more on independent day placements across all categories of need compared to the average across the Local Authorities in the local benchmarking group.

Haringey spends on average £1,446 per week for day pupils with severe learning difficulties compared with the group average of £731 per pupil per week.

For Pupils with behavioural, emotional and social difficulties attending independent day provision, the average Haringey spend is £1,403 per week compared to the group average cost of £883 per week.

For pupils with autism attending independent day provision, Haringey spends on average per pupil per week £1,609 compared to group average cost of £1,239.

With residential placements at independent schools, Haringey spends less on average per place per week compared to the other local boroughs for the following needs: autistic spectrum disorder, moderate learning difficulty, severe learning difficulty, speech, language and communication needs but spends more on residential independent placements for behavioural, emotional and social difficulty needs; £2,593 compared to mean weekly cost across the four boroughs of £1,410.

The patterns of spend on placement, and the underlying reasons for this, require further analysis, however it is an increasing rather than reducing pattern.

For spends by destination please see appendix 1

2. SEND reforms update:

Haringey's Local Offer for children with SEND and Disabilities is now operational and can be found on the Haringey website. There will be a survey of parents and carers in June 2015 around the content and functionality of this site.

2.1 Education Health and Care Plans AssessmentsThe new assessment process for the Education Health and Care plans is now in use. 15 EHC plans have been issued with 115 in progress. We are continuing to have requests of the EHC assessments at the rate of approximately 20 per month with 16 agreed to go to completion representing 192 new plans per year.

2.2 Conversions

The timetable for converting the statements to EHC's has been published on the local offer website and sent to schools. There are 200 young people in the first co-hort of year 11 and year 13, with 23 young people in out borough placements. The first cohort was to be completed by May 2015, however we have stated a delay in issuing. These will now be completed by July 2015.

2.3 Personal Budgets

The personal budgets policy has been published on the website. This outlines the current use of a personal budget for respite and support, and nursing support for children with significant medical needs. The personal budget is

currently being used in only a limited fashion for education support e.g. when children are over borough boundaries and local therapy services cannot be accessed.

2.4 Early Years

There is small working party established to look at the delivery of the services to those children with complex needs in Early Years settings. Specifically the group are looking at bandings for top up funding, with work on the delivery styles needed to provide services for this group of children.

2.5 Youth Offending

Work is just starting around converting statements into EHC for those in youth offending services, and also processes for requesting, assessing and resourcing EHC plans for those young people in secure settings.

3. Implications of the SEND Reforms for the High Needs Block Budget

Extending the age range for people funded within the high needs block means less 'throughput' in terms of finance. There will be an increased demand on the budget for the post 16 group. Resourcing into the statements (now EHC's) rarely decreases over the years during the annual review process. This means that the budget as it stands may not be sufficient to meet the needs of the extended age ranges, unless work can be done to move budget from other budget lines e.g. the out borough group. There are current limitations on how effectively this can be achieved due to:

- Limited placements in borough for the post 16 group
- Limited places and services in borough for the BESD group of young people.

Further analysis on the reasons for out borough placements, and quarterly report on destinations and costs would inform on place planning for this complex group.

Vikki Monk-Meyer

Head of Service SEN and Disabilities

Information also taken from the SEND Commissioning Report written by Catherine Kane April 2015

Appendix to show placements for children costing over £50,000
 Schools forum Update 15th May 2015

	No of Students	Company Name/Service Provider	Service Provided	Type of School	School Name	Borough of School	School Type
£572,898.4 3	7	Ambitious about Autism	School Fees	Day	Tree House School	Haringey	Special - Charity
£555,399.9 8	8	Transitional Care Ltd/TCES	School Fees	Day	East London School (Stratford)	Newham	Special - Independent
£513,889.0 1	8	NAS Services Ltd	School Fees	Day & Residential	Radlett Lodge & Sybil Elgar	Hertfordshire	Special - Independent
£357,360.0 0	2	Coxlease School Priory	School Fees	Residential	Coxlease	Hampshire	Special - Independent
£352,000.0 0	1	Tadley Horizon Court Priory	School Fees	Residential	Tadley Horizon School	Basingstoke & Dean	Special - Independent
£330,002.2 0	7	NLI School Ltd (ta The Holmewood School)	School Fees	Day	The Holmewood School	Barnet	Special - Independent
£281,034.6 7	7	Woodcroft School	School Fees	Day	Woodcroft School	Essex	Special - Independent
£272,682.4 8	5	Acorn Care & Education Ltd	School Fees	Day	Kestrel House School	Haringey	Special - Independent

Appendix to show placements for children costing over £50,000
 Schools forum Update 15th May 2015

	No of Students	Company Name/Service Provider	Service Provided	Type of School	School Name	Borough of School	School Type
£264,000.00	11	Side by Side (Children) Ltd	School Fees	Day	Side by Side School	Hackney	Special - Independent
£257,805.00	1	The Hesley Group	School Fees	Residential	Fullerton House	Doncaster	Special - Independent
£239,064.69	7	Kisharon	School Fees	Day	Kisharon	Barnet	Special - Independent
£195,635.00	1	Young Epilepsy	School Fees	Residential	St Piers (NCYPE)	Surrey	Special - Charity
£182,408.58	1	MacIntyre Care	School Fees	Residential	MacIntyre	Buckinghamshire	Special - Charity
£170,432.84	1	SENAD Limited	School Fees	Residential	Alderwasley Hall School	Derbyshire	Special - Independent
£164,782.25		BINOH	Additional Support		Beis Malka Girls School	Hackney	Independent - Mainstream

Appendix to show placements for children costing over £50,000
 Schools forum Update 15th May 2015

	No of Students	Company Name/Service Provider	Service Provided	Type of School	School Name	Borough of School	School Type
£163,598.68	3	Hillcrest Autism Services Ltd	School Fees	Day	Hillingdon Manor School	Hillingdon	Special - Independent
£161,244.00	1	St Elizabeth's Centre	School Fees	Residential	St Elizabeth's School	Hertfordshire	Special - Charity
£141,266.10		Menorah Grammar School	School Fees/Additional Support	Day	Menorah Grammar School	Barnet	Independent - Mainstream
£116,229.36	2	Southover Education Ltd	School Fees	Day	Southover Partnership	Enfield	Special - Independent
£100,750.71	1	London Borough of Wandsworth	School Fees	Residential	Bradstow School		
£85,039.15	1	SENAD Limited	School Fees	Residential	Bladon House School	Derbyshire	Special - Independent
£85,018.83	3	Fairley House School	School Fees	Day	Fairley House	Westminster	Special - Independent
£84,000.00	1	Kedleston Schools (London) Limited	School Fees	Day	Leaways School	Hackney	Special - Independent

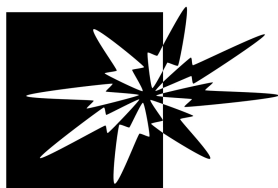
Appendix to show placements for children costing over £50,000
 Schools forum Update 15th May 2015

	No of Students	Company Name/Service Provider	Service Provided	Type of School	School Name	Borough of School	School Type
£81,000.00	1	Tavistock & Portman NHS FT	School Fees	Day	Gloucester House (Daleham Gardens)	Camden	Special - Day State
£80,561.50	6	Yesodey Hatorah Primary Girls School	Additional Support/S</OT		Yesodey Hatorah Primary School for Girls	Hackney	Independent - Mainstream
£70,460.24	3	Egerton Rothesay School Ltd	School Fees	Day	Egerton Rothesay School	Hertfordshire	Special - Independent
£68,136.00	2	Mary Hare Schools	School Fees	Residential	Mary Hare Grammar for the Deaf	West Berkshire	Special - Charity
£61,458.00	1	West Heath 2000	School Fees	Residential	New School at West Heath 2000	Kent	Special - Independent
£61,167.48	2	Hillcrest Care Ltd	School Fees	Residential	Hillcrest Park School	Oxfordshire	Special - Independent
£50,892.24	7	Woodcroft School	School Fees	Day	Woodcroft School	Essex	Special - Independent

Appendix to show placements for children costing over £50,000

Schools forum Update 15th May 2015

This page is intentionally left blank



Haringey Council

The Children and Young People's Service

**Agenda Item
7**

Report Status

For information/note
For consultation & views
For decision

Report to Haringey Schools Forum – 21 May 2015

Report Title: Administrative arrangements for the allocation of central government grants paid to schools via the authority.

Authors:

Steve Worth – Finance Manager (Schools and Learning)
Contact: 0208 489 3708 Email: Stephen.worth@haringey.gov.uk

Purpose: To comply with the Schools Forum (England) Finance Regulations in informing members of the arrangements for administering grants paid to schools.

Recommendations:

That members note the report.

1. Introduction.

1.1. The Schools Forum (England) Finance Regulations require that:

The authority must consult the schools forum annually in respect of the authority's functions relating to the schools budget, in connection with the following—

(a) arrangements for the education of pupils with special educational needs;

(b) arrangements for the use of pupil referral units and the education of children otherwise than at school;

(c) arrangements for early years provision;

(d) administrative arrangements for the allocation of central government grants paid to schools via the authority.

The authority may consult the forum on such other matters concerning the funding of schools as they see fit.

1.2. This report sets out the administrative arrangements for (d), the allocation of central government grants paid to schools via the local authority.

2. School Grants.

2.1. The grants are administered by the LA's Corporate Finance Team, primarily the Schools and Learning Team. The major grants are set out below.

Dedicated Schools Grant (DSG).

2.2. Forum members will be familiar with the arrangements for the allocation of the DSG. It is split into three blocks, for high needs, early years and schools. In the latter two areas the LA is allowed to retain budgets centrally with the approval of the Forum. Budgets so retained cannot be higher than in 2012-13. Although the LA is entitled to retain funding for high needs the practice in Haringey is to consult with the Forum on all proposed retentions, in most cases following earlier consultation with working parties.

2.3. The Forum receives reports on the proposed use of the DSG between December and, normally, February. Following decisions on centrally retained budgets, de-delegation and on the Growth Fund the remaining budgets are delegated through the three funding formulae in use:

- 2.3..1. The Schools Funding Formula, agreed in consultation with the Forum, working parties and schools. The individual school allocations are now calculated using a pro-forma provided by the Education Funding Agency (EFA). Once the EFA have validated and approved the pro-forma the amount to be 'recouped' from the DSG and paid directly to academies is calculated. The balance is paid to the LA in 25 instalments and passed on to maintained schools through 12 equal monthly cash advances. Payments to maintained schools are paid net of de-delegated sums.
- 2.3..2. The Early Years Single Funding Formula, agreed in consultation with the Early Years Working Party, the Forum and early years providers. The LA is responsible for paying the free entitlement to all providers, including academies and free schools and Private, Voluntary and Independent (PVI) settings. Schools, including academies and free schools receive payment through the monthly cash advance, and PVI's are paid by the Early Years Team on an agreed periodic pattern. PVI funding is adjusted throughout the year to reflect actual numbers in the setting. For maintained provision the allocations are indicative but are not changed during the year; any adjustments being made in the next financial year.
- 2.3..3. The special school and alternative provision providers are funded at £10k per agreed place, for the latter at £8k until August 2015. The EFA will 'recoup' funding for academies and the remainder is paid through the monthly cash advance.
- 2.4. Two year old funding is also paid through the DSG and payments administered by the Early Years Team.
- 2.5. Payments will also be made to schools from centrally retained budgets, including special educational needs funding, Growth Fund payments etc. and are generally made through the monthly cash advance.
- 2.6. Any DSG unspent at the end of the year must be carried forward for the purposes of the Schools Budget. The outcome for the previous year is reported to the July Forum meeting.
- 2.7. The Chief Finance Officer (CFO) must certify that the DSG is being used as required by the School and Early Years Finance Regulations and must produce a note to the LA's accounts showing DSG received and allocated.

Pupil Premium.

- 2.8. For pupils in KS1 to KS4, including reception classes, this is calculated by the EFA using data they hold. It includes funding for those deemed to be from a deprived background, identified as having been eligible for free school meals at any time in the last six years, children of service

families, and children adopted from care. The money for maintained schools is passed to the LA and paid in its entirety to schools through the monthly cash advance. The actual allocation is not confirmed until the June after the start of the financial year.

- 2.9. For the first time in 2015-16 pupil premium is paid in respect of eligible three and four year olds in early years settings. The administrative arrangements for this are still being formulated.
- 2.10. The LA also receives funding for current Looked After Children (LAC). This funding is controlled by the Head of the Virtual School. In Haringey a small sum is retained for the overall benefit of LAC with the bulk of the funding passed to the school in which the pupil is placed. If that is a Haringey school it is paid through the monthly advance.
- 2.11. The CFO must certify that the Pupil Premium and following grants have been allocated as required by the grant conditions attached to them.

Education Funding Agency (EFA) Post 16 Students.

- 2.12. The funding is calculated by the EFA using its formula and contracts with the LA on the payments to be received in respect of maintained schools. The LA has to certify at the year end that all payments have been passed to the appropriate school. This is done through the monthly cash advance. Payments from the EFA will also be received in respect of bursaries that are also passed to schools.

Universal Infants Free School Meals.

- 2.13. Introduced in 2014-15 the first academic year will see two tranches. The first received in June 2014 was based on estimates and covered the period September 2014 to March 2015. This was passed on to maintained schools in its entirety in one lump sum through the cash advance. The second tranche will be received in May and will pay the summer term allocation plus adjustments for autumn and spring terms to reflect actual take-up of meals.

Devolved Formula Capital

- 2.14. This is calculated using a lump sum plus an amount per pupil. The grant is received by the LA for maintained, non voluntary aided schools and passed on in its entirety through the cash advance in equal instalments.

Summer Schools.

- 2.15. The DfE makes a provisional allocation for each local authority's summer schools funding. A schedule of schools taking part in the programme in each local authority is issued by the DfE based on an amount per eligible pupil per week identified by each participating secondary school that will run a summer school. The DfE make an

allocation of 50% of projected funding in June and this is paid to maintained schools as a lump sum through cash advances as soon as possible thereafter.

- 2.16. Summer schools funding allocations are adjusted in October when schools submit confirmation that the summer schools took place and the number of eligible pupils who confirmed they would attend.

Year 7 Catch-Up.

- 2.17. The grant is paid for Year 7 pupils not achieving specified levels in numeracy and literacy. It is paid as a lump sum per pupil and normally comes to LAs for maintained schools in February and is paid as a lump sum through cash advances as soon as possible thereafter.

PE and Sports.

- 2.18. This funding has been used to fund improvements to the provision of PE and sport, for the benefit of primary-aged pupils. It is paid in two tranches, in October and April and is passed on to schools as lump sums through the nearest possible cash advance.

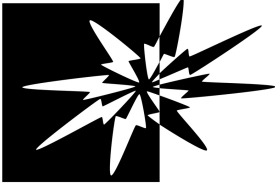
School Direct (NCTL).

- 2.19. Paid to lead schools participating in the programme. The funding is paid to LAs for maintained schools and passed on through cash advances.

Miscellaneous Grants.

- 2.20. The main grants are set out above. In addition some smaller or more limited grants may become available during the course of the year that will be administered in accordance with their accompanying Conditions of Grant.

This page is intentionally left blank



Haringey Council

**Agenda Item
8**

Report Status

For information/note
For consultation & views
For decision

Report to Haringey Schools Forum – 21st May 2015

Report Title: Early Help report

Author: K CARR

Contact: tel Email: Kirsten.carr@haringey.gov.uk

Purpose: To up-date Schools Forum on the delivery, performance and developments of Early Help

Recommendations: To note the report

1. What is Early Help?

The aim of Early Help in Haringey is to make sure that children, young people and families benefit from the right support at the earliest opportunity to prevent difficulties (and costs) from escalating.

'Early help means providing support as soon as a problem emerges at any point in a child's life from the foundation years through to teenage years.' *Working Together to Safeguard Children (2015)*

2 Summary of Report

This report summarises the context for the delivery of Early Help in Haringey including the expectations on local authorities and agencies set out by the DfE in *Working Together to Safeguard Children (2015)* and the recommendations from the recent Ofsted thematic inspection of *Early Help: Whose responsibility? (2015)*.

The report outlines current performance and the developments towards the integrated partnership operating model for Early Help and the reconfiguration of children and young people's services. Key milestones include:

- April '15: Guidance re Early Help & Prevention service offer to schools and Children's Centres distributed.
- May '15: 850 families achieved sustained outcomes in areas relating to youth crime, anti-social behaviour, education and employment since 2013.
- June '15: Revised governance of Early Help in place.
- July '15: Consistent assessment, recording and outcomes reporting for Early Help case work via MOSAIC case management system.
- July '15: Improved understanding and access to Early Help through delivery of Early Help training, published Early Help Practitioners Guidance and revised LSCB thresholds training.
- Oct '15: Delivery through locality teams working with families at an earlier stage of intervention in place.
- Oct '15: Targeted response team working with families with higher levels of need, including children on the edge of care in place.
- Oct '15: New Front Door model for all children and young people's services in place.
- March 16: Re-focus on earlier intervention to deliver sustained outcomes for 690 families in 2015/16.
- March '16: Demonstrable impact of the wider partnership delivery of Early Help via the embedding of the outcomes framework.

3 Early Help – Context and Guidance

The importance of investing in early intervention and prevention in reducing long term costs and improving outcomes for children and families is understood and well documented and is cited by both Allen (*Early Intervention: Next Steps, 2011*) and Munro (*Review of Child Protection, May 2011*).

3.1 Working Together to Safeguard Children 2015

Working Together to Safeguard Children (DfE, 2015) sets out the legislative requirements and expectations on individual services to safeguard and promote the welfare of children and the framework for LSCBs to monitor the effectiveness of local services. This includes setting out expectations of how agencies will work together to provide early help. It states that professionals should in particular be alert to the potential need for early help for a child who:

- is disabled and has specific additional needs;
- has special educational needs;

- is a young carer;
- is showing signs of engaging in anti-social or criminal behaviour;
- is in a family circumstance presenting challenges for the child, such as substance misuse, adult mental health problems and domestic violence;
- has returned home to their family from care; and/or
- is showing early signs of abuse and/ or neglect.

3.2 Ofsted Thematic Inspection titled Early Help: Whose Responsibility? (2015)

HMCI commissioned a thematic inspection of Early Help to gain an accurate picture of how effectively local partnerships' early help services are improving children's circumstances, reducing risk and taking further action when needed. (Appendix Two)

The key recommendations include requiring LSCBs to monitor and evaluate the quality and effectiveness of early help services and to publish their findings in an annual report.

Local authorities and partner agencies delivering early help to children and families should:

- improve quality and consistency of assessments and plans;
- provide professional supervision and management oversight to all staff delivering early help, particularly in respect of whether families need more formal help;
- ensure that all early help professionals have access to effective training;
- ensure that children's needs for early help arising from parental substance misuse, mental health and domestic abuse are addressed in commissioning plans.

In addition local authorities should:

- ensure that when a child is referred children's social care there is good quality feedback given to the referrer about the outcome of the referral;
- establish effective processes for evaluating the overall impact of early help.

4. Haringey Early Help Model

4.1 Work is underway in Haringey to further develop the partnership operating model for Early Help which will enable a more co-ordinated and integrated approach to the delivery of Early Help.

The aim is to provide a continuum of help and support to respond to the different levels of need of children and families through universal, targeted and specialist services based on a model of locality-based multi-agency working.

A range of services and agencies are currently considering how best they might align and/ or commission delivery and resource to this model. These include, for example, police, housing, community safety, health services, education, employment Support (DWP), adult services, voluntary sector organisations.

4.2 The Early Help and Prevention Service including integrated family support, youth offending and youth services is reconfiguring its services towards this model as part of the wider remodelling of Children and Young People's Services. This will be in place by October 2015 and will include:

- New single Front Door for access to all children and young people's services.
- Establishing integrated multi-agency locality teams linked to the 6 NLC areas delivering Early Help including:
 - family support;
 - evidenced based parenting programmes

➤ and youth engagement.

- A multi-agency Targeted Response Service to deliver:
 - intensive family and youth support;
 - rapid response;
 - specialist posts providing consultancy, workforce development for Early Hel practitioners and some high end intervention support across - in areas of domestic abuse, child/ adult mental health and substance misuse.

There will be continued engagement with partners including children's centres and schools over the coming months to further develop and shape the model and clarify the processes which will best support schools in identifying families who may benefit from early help and accessing swift allocation of cases where needed.

5. Current Early Help and Prevention Service

5.1 Troubled Families Programme - Haringey Families First

The national Troubled Families Programme tasked local authorities with identifying and turning around the lives of their most 'troubled' families who met specific criteria linked to youth crime and anti-social behaviour; education attendance and exclusions; and unemployment.

The development of a 'whole family' approach that focuses on assessing the needs of individual children and adults and co-ordinating family support plans has significantly contributed to the success of the programme. By May 2015, Haringey achieved its target of achieving sustained outcomes for 850 families. (See 5.3 below)

The Programme has expanded for April 2015-2019 and will reach out to families with a broader range of problems which will enable a greater focus on prevention and earlier intervention.

Haringey's target is to work with 690 families in 2015/16 (3240 by 2020). Much of the work delivered through Early Help services will contribute to the outcomes of the programme. This will also require a refocus of family support resources from working with Children's Social Care cases to working with families at an earlier stage of intervention.

5.2 The Early Help Team

6 Early Help Co-ordinators and 6 Early Help Practitioners whose role it is to:

- Support access to early help services;
- Embed Early Help Assessment, Lead Professional, Team Around the Family processes;
- Assess needs;
- Deliver brief interventions;
- Co-ordinate Forums

The Early Help Team is the first point of contact for professionals who are unsure of the pathway to Early Help services. (See 'Early Help Pathway Overview' Appendix one).

5.3 The Integrated Family Support (IFS) Service

Integrated family support services (Haringey Families First, Family Intervention Programme (FIP) and the Family Support Service) delivering varying levels of family support interventions.

- 1 service manager, 6 team leaders, 36 family support workers/ key workers.
- Deliver varying levels of family support interventions.
- Average length of intervention 9-12 months.

- Average case loads 5-8 high end; 10-12 less intensive.
- Single referral route into IFS and joint case allocation.

5.4 Families accessing family support

Historically family support services in Haringey have primarily worked with families with children as part of the Child Protection Plan or Child in Need Plan. There has been a transition to create capacity within the service to work with vulnerable children and families who will benefit from earlier help. However, the data below shows that most requests for Early Help services and family support are coming directly from children's social care via First Response before they are allocated to family support (Table 2). There is still considerable work to do to promote understanding of Early Help to encourage direct referrals from children's centres, schools and health services.

5.5 What does Family Support Work do?

The Integrated Family Support workforce have a range of skills in areas such as family functioning, transitions support, evidenced based parenting support and programmes such as Strengthening Families, Strengthening Communities, and Triple P and will work together with colleagues from other services to complete Early Help Assessments, co-ordinate Team Around the Family Meetings and deliver, monitor and review the Family Support Plan.

6. Early Help & Prevention Service - Current Performance

6.1 Case Management Oversight and Quality Assurance

All case work delivered by Haringey Early Help and Prevention service will be recorded on the new children's social care case management system (MOSAIC) by end of July 2015. This will enable more robust oversight of case management and performance management including supervision of timeliness and quality of assessments, planning and review.

6.2 Performance Management Information.

A new Performance Management framework is being implemented (April 2015) which will enable more consistent and comprehensive performance reporting. More detailed monitoring including outcomes reporting will be possible once all services are on the MOSAIC case management system (July 2015). The following is a report on data that has been collated over the last two quarters for 2015/16.

Table One shows the overview of the number of cases that were open at the end of Quarter 3 and Quarter 4 in 2015/16. A total of 346 cases were open to the service at the end of March 2015. This data does not include cases that have only received information, advice and guidance/sign posting services.

Table One:

<u>Overview of cases</u>	<u>End of Q3</u> Oct-Dec 2014	<u>End of Q4</u> Jan –Mar 2015	<u>Total</u> <u>Referrals</u> Oct-Mar 2014/15
Number of cases open at end of quarter	305	346	
Number of new referrals during each quarter	180	169	349

Table 2 below shows source of referrals to the Early Help & Prevention Service since October 2014.

Table Two:

Total new referrals to Early Help and Prevention Service October – March 2014/15

	Child- ren's Centre	EH team*	Health	School	Self re- ferral	Children's Social Care		No Recours e to Public Funds	Other LA service	Un- known	Gran d Total
						First Re- sponse	Safe- guarding & Support				
Total	15	-11	17	62	6	167	58	2	18	3	349
%	4%	-3%	5%	18%	2%	48%	17%	1%	5%	1%	100%
*These figures represent escalation to more intensive family support from an Early Help practitioner intervention and have been subtracted to avoid duplication											

The majority of requests for Early Help services are coming directly from Children's Social Care (CSC) (66%). Most (48%) of these are from First Response. These are cases that have been referred into CSC and are assessed as not meeting thresholds for specialist services but may benefit from Early Help. The data currently available does not tell us about the original source of referral into First Response, for example, how many of these were from schools.

More referrals into Early Help services would be expected from agencies other than Children's Social Care. The second highest referring agency is schools (18%) but numbers are lower than one would anticipate.

17% of cases were referred by Safeguarding and Support. Some of these are 'stepped down' as they no longer meet thresholds for a Child in Need plan but would benefit from early help to further de-escalate needs and prevent re-referral. Others will be cases where the social worker is the Lead Professional and Integrated Family Support will be providing additional interventions for the whole family as part of the Social Care led Plan.

Table 3 below shows the breakdown of referrals by age:

Table 3:

Referrals into Early Help & Prevention Service by Age October – March 2014/15					
	Under 5s	Primary	Secondary	Post 16	Total
Q3 (Oct-Dec)	72	50	48	10	180
Q4 (Jan- Mar)	67	42	53	7	169
TOTAL	139	92	101	17	349
Total %	40%	26%	29%	5%	

The majority (40%) of children referred are Under 5. This data reflects the age of child within a family for whom the referral was made. It does not reflect the number and ages of children in the family that a support worker will be working with as part of a whole family approach. This data will become available when the new system is in place.

6.3 Early Help Outcomes

Families First / Troubled Families Programme Outcomes

At February 2015, Haringey had achieved outcomes for 665 families eligible for support under the Troubled Families criteria. The breakdown is as follows:

- 1) 550 families had met the crime/ASB reduction and improved education outcomes. This means that where this had been an issue for a family:
 - each child had achieved fewer than 3 fixed term exclusions and less than 15% unauthorised absences over 3 terms; **plus**
 - the family had achieved a 60% reduction in anti-social behaviour and offending rates by all children in the family had reduced by at least 33% in the last 6 months.
- 2) 29 families met the employment outcome which means they had sustained employment and were off benefits.
- 3) 86 families met all the above outcomes.

We are anticipating achieving outcomes for all 850 families by May 2015. The table below shows the breakdown of outcomes achieved by families.

Outcomes at Case Closure

In addition to the outcomes the Integrated Family Support Service reported on a wider range of outcomes at 'case closure' during Jan-March 2015. 43 cases were closed during this period. An outcomes measurement tool was developed in order to assess progress in a number of areas.

Outcomes were reported as follows:

Table 4

Additional Outcomes for Cases Closed during period Jan-March 2015				
For families where the following was an issue...	No of cases this applied to	No improvement* % of cases	Some improvement* % of Cases	Significant Improvement % of Cases
Child's relationship at home	24	25%	29%	46%
Child's relationship at school	13	0%	31%	69%
Childs emotional wellbeing at home/community	18	28%	22%	50%
Childs emotional wellbeing at school	11	0%	27%	73%
Childs development or learning	18	22%	39%	39%
School attendance	7	29%	43%	29%
Parenting capacity	22	27%	27%	45%
Exposure to DV	11	36%	36%	27%
Substance misuse	3	0%	0%	100%
Mental health	10	10%	80%	10%
Risk of harm to child	14	36%	29%	36%
Improved/ stabilised housing situation	12	25%	42%	33%
Improved finance/ debt management	14	21%	57%	21%
*Specific descriptors exist for each of these measures to help ensure consistent application.				

For the majority of families there is some or significant improvements in outcomes at case closure. More work is needed to up-skill the workforce to ensure they are confident in working with families to significantly reduce the impact of mental health, domestic violence and substance misuse. The creation of specialist posts to support wider workforce development in this area will help with this. Additionally, wider partnership workforce development and training will be offered to enable partner agencies colleagues to contribute to the collaborative effort.

7 Early Help – Key Milestones and Next Steps

Key priorities include:

- Support agencies and services in understanding and interpreting thresholds of needs and understanding Early Help.
- Development of wider partnership capacity, confident and competent to act as lead professionals for families with complex needs.
- Developing stronger links with children's centres and schools to encourage referrals to family support where this will benefit families now that capacity has been created to respond to needs at an earlier stage.

Key actions implemented and next steps are:

7.1 Early Help Operating Model and new Front Door Model (October 2015)

Engagement with partners on the proposed Early Help Operating Model and the new Front Door model has already commenced. The formal consultation on the reconfiguration of services will commence in June until mid July for implementation in October. There will be continued engagement with partners including families as the new model develops.

7.2 Early Help Governance Arrangements

Governance arrangements are being reviewed in order to ensure delivery against the five priorities within Haringey's Corporate Plan. Governance for Early Help contributes primarily to Priority One: 'Enable every child and young person to have the best start in life, with high quality education'. The Early Help Partnership Board (EHPB) will have a clear reporting link to the Priority One Board. The terms of reference are currently being up-dated to ensure appropriate representation across the partnership with decision making authority in order to be able monitor and provide strategic oversight of the implementation of Early Help across the Borough. It will be co-chaired by the Assistant Director of Early Help, Prevention and SEND (CYPS) and by a member of the Board who is external to Haringey Borough Council.

7.3 Early Help and Prevention Service – Guidance for Children's Centres and Schools (April 2015)

Guidance informed by feedback from children's centres, schools and family support services about best practice within Haringey has been distributed. It outlines the service that can be expected from the Early Help and Prevention Service, including:

- named managers as single point of contact;
- an offer of a meeting in each school to help identify support for vulnerable families;
- informing schools regularly of children currently accessing early help services.
- named family support workers linked to NLC areas and to each Children's Centre.

7.4 Early Help Training (Jan 2015 – March 2016)

Over 250 participants attended the first programme. Participants include SENCOS, Children's Centre Managers, police, health visitors, housing services and Children and Young People's Services.

7.5 Early Help Practitioners Guidance (May 2015)

The Early Help Practitioners' Guidance will outline the Early Help Assessment, Lead Professional and Team Around Family processes covered in the training and include links to forms.

7.4 LSCB Revised Thresholds Guidance (April 2015 – July 2015)

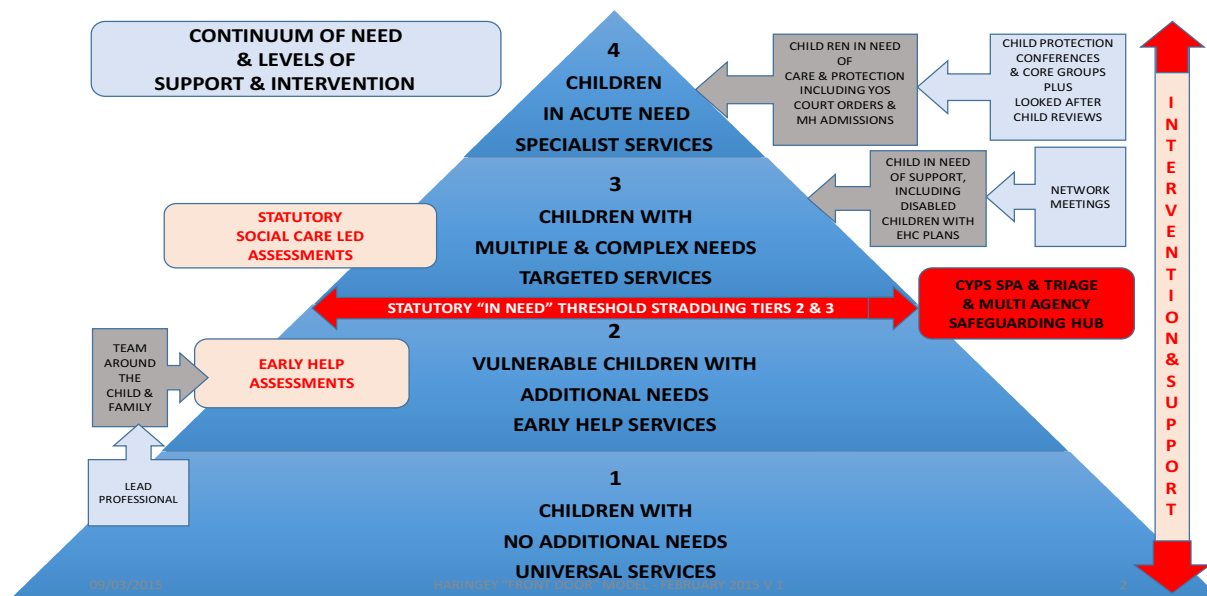
LSCB have approved revised guidance in line with pan borough thresholds guidance. Training/briefings will be rolled out to agencies and services.

7.5 Outcomes Framework for Early Help

The Early Help Outcomes framework that has been developed will enable the consistent monitoring of a wide range of outcomes. The framework includes the use of the Outcomes Star tools (Family Star Plus/My Star) which provide a consistent and validated way of working collaboratively with families to measure progress against a wide range of softer outcomes, such as, parenting skills, emotional well-being.

Appendix One

Haringey Early Help Pathway Overview



What to do and who to contact

Situation	Action required
Family has an additional need and you know what service is required.	Contact the service and submit a 'Single Agency Request/Referral Form' to the Early Help Team (ehreferral@haringey.gov.uk (t: 0208 489 5814)).
Family has more than one need identified OR family has an additional need and you are unsure what service is required.	Commence an 'Early Help Assessment' and send to Early Help Team (ehreferral@haringey.gov.uk (t: 0208 489 5814)). Contact the Early Help Team for: help with forms, Early Help Assessments, information/ advice on services available, support in carrying out Lead Professional role and organising Team Around Family.
Family where a child safeguarding issue has been identified.	If you have any concerns that an infant, child or young person may be or is at risk of significant harm or has been harmed or abused, you must make an immediate telephone contact with First Response on 020 8489 4592 / 5652 / 5762 / 4582.

This page is intentionally left blank

Early help: whose responsibility?

This thematic inspection evaluates the effectiveness of the early help services for children and families provided by local authorities and their partners. The report draws on evidence from inspection, from examining cases in 12 local authorities and from the views of children and young people, parents, carers, practitioners and managers.

Published: March 2015

Reference no: 150012



Corporate member of
Plain English Campaign
Committed to clearer communication

361

The Office for Standards in Education, Children's Services and Skills (Ofsted) regulates and inspects to achieve excellence in the care of children and young people, and in education and skills for learners of all ages. It regulates and inspects childcare and children's social care, and inspects the Children and Family Court Advisory and Support Service (Cafcass), schools, colleges, initial teacher training, further education and skills, adult and community learning, and education and training in prisons and other secure establishments. It assesses council children's services, and inspects services for looked after children, safeguarding and child protection.

If you would like a copy of this document in a different format, such as large print or Braille, please telephone 0300 123 1231, or email enquiries@ofsted.gov.uk.

You may reuse this information (not including logos) free of charge in any format or medium, under the terms of the Open Government Licence. To view this licence, visit www.nationalarchives.gov.uk/doc/open-government-licence, write to the Information Policy Team, The National Archives, Kew, London TW9 4DU, or email: psi@nationalarchives.gsi.gov.uk.

This publication is available at www.gov.uk/government/organisations/ofsted.

Interested in our work? You can subscribe to our monthly newsletter for more information and updates: <http://eepurl.com/iTrDn>.

Piccadilly Gate
Store Street
Manchester
M1 2WD

T: 0300 123 1231
Textphone: 0161 618 8524
E: enquiries@ofsted.gov.uk
W: www.ofsted.gov.uk

No. 150012

© Crown copyright 2015



Contents

Executive summary	4
Key findings	6
Recommendations	7
Introduction	9
Methodology	12
Findings from practice	13
Early help provision	13
Referrals to the local authority	18
Monitoring and evaluating the effectiveness of early help	21
Management oversight	21
Quality assurance	22
Roles and responsibilities	24
Learning from serious cases reviews	27
Conclusion	28
Annex A. Local authorities subject to this thematic inspection	30
Annex B. Serious case reviews considered	31

Executive summary

It is estimated that over two million children in the UK today are living in difficult family circumstances. These include children whose family lives are affected by parental drug and alcohol dependency, domestic abuse and poor mental health. It is crucial that these children and their families benefit from the best quality professional help at the earliest opportunity. For some families, without early help difficulties escalate, family circumstances deteriorate and children are more at risk of suffering significant harm.¹

Independent reviews and research have long championed approaches that provide early help for these children and their families. As Professor Eileen Munro highlighted in her review of child protection, 'preventative services can do more to reduce abuse and neglect than reactive services'.² It is only right that local authorities and their partners are focusing increasingly on early help and prevention services for families. Many are now establishing a more coordinated and structured approach to this crucial role.

Her Majesty's Chief Inspector commissioned this thematic inspection to gain a more accurate picture of how effectively local partnerships' early help services are improving children's circumstances, reducing risk and taking further action when needed.

Inspectors considered 56 early help cases in 12 local authorities. Encouragingly, they found that the partner agencies in all the local authorities visited were committed to improving and coordinating their early help services. In nearly all of the cases, early help was the right approach. However, in over a third, partner agencies had missed earlier opportunities to provide help, leaving these children with no support when they needed it.

In just under half of the cases reviewed, early help professionals had undertaken sound assessments of children's needs. Over half, however, were of poor quality. In some instances, professionals gave limited or no consideration to family history. In other cases, they did not collect or analyse information about fathers or male partners, even when they were part of the child's household. Inspectors were particularly concerned that, in many cases, professionals failed to speak to the child and relied solely on what parents told them.

Inspectors found evidence of effective planning in only a third of cases. These plans focused strongly on improving children's lives and were regularly reviewed to ensure

¹ In this report, 'early help' means 'providing support as soon as a problem emerges, at any point in a child's life'.

Working together to safeguard children – a guide to interagency working to safeguard and promote the welfare of children, Department for Education, 2013;

www.gov.uk/government/publications/working-together-to-safeguard-children.

² Professor Eileen Munro, *The Munro review of child protection: final report – a child-centred system*, Department for Education, 2011; www.gov.uk/government/publications/munro-review-of-child-protection-final-report-a-child-centred-system.

sustained progress. Yet in two thirds of the cases plans were ineffective. Many did not sufficiently take into account children's individual circumstances when deciding what action was needed. Plans often lacked objectives and were not regularly reviewed, so it was not always clear how actions would achieve any improvements. Inspectors found that reviews focused too much on whether actions had been completed, rather than whether they had the intended impact on the child's life.

Overall, inspectors identified serious weaknesses in the management oversight of early help cases. A small number of cases had no formal arrangements in place at all. In others, arrangements were significantly underdeveloped. Worryingly, inspectors found that Local Safeguarding Children Boards (LSCBs) were not monitoring the management oversight of early help practice.

More generally, local authorities and their partners were not fully evaluating the impact of their early help work. The majority of their audits focused too much on process and compliance and not enough on the quality of the service and the extent to which it helped improve children's lives. Many partnerships had not yet developed systems to evaluate whether the right children were receiving early help at the right time.

LSCBs were complying with their duty to produce a threshold document that sets out the different types and levels of early help for families and makes clear when any professional should refer cases to children's social care. However, very few had audited whether children were receiving the right type and level of help when they needed it. Most LSCBs were not providing enough training on early help, or working with challenging families, to those practitioners who needed it.

More encouragingly, few workers felt isolated and most said they could access a range of formal and informal support. Where they existed, early help coordinators were highly valued.

This thematic inspection also considered 84 children's cases referred to local authorities by various professionals. In most cases, local authority managers made sound decisions that these children did not need the statutory services of a social worker. However, some of these children were not directed to early help services from which they would have benefited. As a result, their circumstances deteriorated and the same, or in some cases other, professionals in the partner agencies later referred them back to children's social care. Despite training, some professionals were not sure when they should make referrals and found it difficult to interpret the local guidance. Too often, referrers did not receive feedback on the outcome of their referral and did not follow up on this.

Inspectors found considerable variability in how well local authorities and their partners were sharing accountability and coordinating early help services. The evidence indicated that the current statutory powers do not make clear the roles and responsibilities of the different agencies involved in early help provision. Without this clarity, none of the partners can give early help the priority that it requires.

Many of these findings mirror those in serious case reviews that looked at early help services. This highlights a concerning lack of progress. Many local authorities are failing to learn the lessons from serious case reviews to improve early help services. It is hoped that the findings from this thematic inspection will trigger the critical progress required to ensure that children and families receive the help they need at the earliest opportunity.

Key findings

- In all the local authority areas visited, arrangements were in place to provide early help to children and their families.
- Partner agencies in those places inspected were committed to an early help approach and improving the coordination of the local early help offer.
- Opportunities to provide early help for children and their families were missed by all statutory partners with a responsibility for this.
- Many assessments were ineffective because they failed to sufficiently analyse or focus on what the child and family needed.
- Professionals did not always identify or meet the individual needs of children within a family. Early help plans did not focus sufficiently on the child, often lacked clear objectives, failed to specify what needed to change and were not regularly or robustly reviewed.
- Management oversight of early help was often underdeveloped and failed to identify or rectify weaknesses in the work being undertaken.
- When children were referred to social care services because there were concerns about their welfare, the service or referrer often did not consider or follow through the need for early help. As a result, nothing was put in place to prevent the child's circumstances from deteriorating. This led to further referrals for statutory social care support.
- Too often, feedback on referrals was neither sought nor offered.
- Partner agencies did not fully evaluate the impact and effectiveness of their early help services.
- The planning of local services did not sufficiently recognise or address the needs of children living with parental substance misuse, mental ill health or domestic abuse.
- LSCBs were not effectively overseeing or challenging partner agencies with regard to effective early help.
- The current statutory framework does not give sufficient clarity and priority to the roles and responsibilities of individual agencies for early help provision.³

³ *Working together to safeguard children – a guide to interagency working to safeguard and promote the welfare of children*, Department for Education, 2013;
www.gov.uk/government/publications/working-together-to-safeguard-children.

- The inability to sufficiently prioritise and resource early help across agencies meant that lessons learned from serious case reviews were not being fully addressed.

Recommendations

The government should:

- strengthen and specify the roles and responsibilities of local authorities and statutory partners, setting out that they must secure sufficient provision of local early help services for children, young people and families and require that an annual plan is published by the partnership and aligned with the local joint strategic needs assessment
- require LSCBs to evaluate the quality and effectiveness of early help services and to publish their findings in the annual LSCB report.

Local authorities and partner agencies delivering early help to children and families should:

- improve the quality and consistency of assessment and plans by:
 - promoting the use of evidence- and research-informed assessment practice
 - improving the quality of analysis in assessments
 - ensuring that assessments reflect the views and experience of the child and family
 - making the purpose clearer and improving the intended outcome
 - ensuring plans are regularly reviewed and that these reviews evaluate the child's and family's progress
- provide professional supervision to all staff delivering early help and ensure that their work receives regular management oversight, particularly in respect of decisions about whether families need more formal help
- ensure that all early help professionals have access to effective training
- ensure that children's needs for early help arising from parental substance misuse, mental ill health and domestic abuse are addressed in commissioning plans.

LSCBs should:

- critically evaluate the effectiveness of early help and publish these findings in the LSCB annual report
- monitor the quality of early help assessment, planning and management oversight through effective audit arrangements
- develop and monitor local quality standards to ensure that early help professionals have access to effective supervision and management oversight

- evaluate the effectiveness of the LSCB threshold document to ensure that it is understood and used appropriately by all partner agencies and that children and families are helped effectively as a result
- monitor and evaluate whether children's emerging needs are appropriately met elsewhere when referrals to children's social care do not meet the locally agreed threshold for statutory intervention
- ensure that all professionals working with families receive effective early help training.

Local authorities should:

- ensure that when a child is referred to local authority children's social care the referrer is consistently given good-quality feedback about the outcome of the referral
- establish effective processes for evaluating the overall impact of early help.

Introduction

1. Large numbers of children and young people live in challenging family circumstances:
 - 2.6 million children in the UK are living with parents who drink hazardously; 705,000 of those are dependent on alcohol⁴
 - 110,123 adults who were parents or lived with children were treated by the National Agency for Substance Misuse in 2013–14⁵
 - 130,000 children are living in families where family life has been damaged by past or present domestic abuse⁶
 - 17,000 children are living with parents with a severe and enduring mental illness⁷
 - 657,800 concerns about children were referred to children's social care services during 2013–14⁸, an increase of 10.8% compared with the previous year.

2. Ofsted's inspections of local authority help and protection arrangements since January 2012⁹ have found evidence that many local areas have begun to establish early help services for families. The need for an increased focus on early help, intervention and prevention within the family was reinforced by Professor Eileen Munro¹⁰ in her review of child protection. Other supporting reviews include the work of Graham Allen¹¹ on the benefits of early intervention

⁴ *Swept under the carpet: children affected by parental alcohol misuse*, Alcohol Concern and The Children's Society, 2010; www.childrenssociety.org.uk/sites/default/files/tcs/swept_under_the_carpet_briefing_paper_oct_2010.pdf.

⁵ *Drug treatment in England 2013–14*, Public Health England, November 2014; www.nta.nhs.uk/uploads/drug-treatment-in-england-2013-14-commentary.pdf.

⁶ *A place of greater safety*, Co-ordinated Action Against Domestic Abuse (CAADA), 2012; www.caada.org.uk/policy/A_Place_of_greater_safety.pdf.

⁷ *Parents with mental health problems*, Mental Health Foundation, 2013; www.mentalhealth.org.uk/help-information/mental-health-a-z/P/parents/.

⁸ *Characteristics of children in need in England, 2013-14*, Statistical First Release SFR 43/2014, Department for Education, October 2014; www.gov.uk/government/uploads/system/uploads/attachment_data/file/367877/SFR43_2014_Main_T_ext.pdf.

⁹ *Inspecting local authority children's services: the framework*, Ofsted, 2014; www.gov.uk/government/publications/inspecting-local-authority-childrens-services-framework. *Arrangements for the protection of children; Inspection of services for children in need of help and protection, children looked after and care leavers; Review of the effectiveness of the local safeguarding children board*, June 2014, Ofsted; www.gov.uk/government/publications/inspecting-local-authority-childrens-services-framework.

¹⁰ Professor Eileen Munro, *Munro review of child protection: final report – a child-centred system*, Department for Education, 2011; www.gov.uk/government/publications/munro-review-of-child-protection-final-report-a-child-centred-system.

¹¹ Graham Allen, *Early intervention: smart investment, massive savings – the second independent report to Her Majesty's Government*, Cabinet Office, July 2011; www.gov.uk/government/publications/early-intervention-smart-investment-massive-savings.

programmes, Dame Clare Tickell¹² on the Early Years Foundation Stage and Frank Field's¹³ review on poverty. These reviews identified a growing body of evidence of the effectiveness of early help for children and their families.

3. In setting out the principles of an effective child protection system, Munro highlighted that 'preventative services can do more to reduce abuse and neglect than reactive services',¹⁴ making a strong argument for local agencies to provide early help to strengthen families and reduce risk. Professor Munro's recommendation for a duty to be placed on local authorities and statutory partners to provide an 'early offer of help' was not accepted by the government, as it considered the existing duty to cooperate set out in sections 10 and 11 of the Children Act 2004 to be sufficient.¹⁵
4. The revised 'Working together to safeguard children'¹⁶ guidance re-emphasises the crucial role of effective early help. It focuses on the collective responsibility of all agencies, including adult services, to identify, assess and provide effective targeted early help services. It places a duty on LSCBs to ensure that an agreed threshold document is in place so that all professionals are clear when it is their responsibility to help children and families as difficulties emerge.
5. The Department for Education's 'Statutory guidance on the roles and responsibilities of the Director of Children's Services and the Lead Member for Children's Services' refers to these important leadership roles in relation to early help, intervention and prevention with children and families. According to the guidance, Directors of Children's Services and Lead Members for Children's Services:

'should understand local need and secure provision of services taking account of the benefits of prevention and early intervention and the importance of cooperating with other agencies to offer early help to children, young people and families.'¹⁷

¹² Dame Clare Tickell, *The early years: foundations for life, health and learning*, Department for Education, 2011; www.gov.uk/government/collections/tickell-review-reports.

¹³ *The foundation years: preventing poor children becoming poor adults*, Frank Field, 2010; www.frankfield.com/campaigns/poverty-and-life-changes.aspx.

¹⁴ Professor Eileen Munro, *Munro review of child protection: final report – a child-centred system*, Department for Education, 2011; www.gov.uk/government/publications/munro-review-of-child-protection-final-report-a-child-centred-system.

¹⁵ *Full response to named day question by Tim Loughton 13 December 2011*, Department for Education; www.gov.uk/government/news/munro-review-of-child-protection-government-response.

¹⁶ *Working together to safeguard children – a guide to interagency working to safeguard and promote the welfare of children*, Department for Education, March 2013; www.gov.uk/government/publications/working-together-to-safeguard-children.

¹⁷ *Roles and responsibilities of the Director of Children's Services and the Lead Member for Children's Services*, Department for Education, 2013; www.gov.uk/government/publications/directors-of-childrens-services-roles-and-responsibilities.

6. Further research¹⁸ identifies that neglect and emotional abuse are associated with the most damaging long-term consequences for children. The research found a range of challenges for practitioners in providing help when concerns for children begin to emerge. These included the following:
- there was no shared threshold for intervention across partnerships
 - professionals found it difficult to identify these types of abuse and to decide when a threshold for action had been reached
 - these forms of harm to children were rarely acted on without a trigger incident
 - professionals often had high thresholds for recognising emotional abuse and neglect and were reluctant to act
 - thresholds for access to children's social care were high, which may deter referrals.

The research provided extensive evidence that thresholds for access to children's social care were too high. It also reported that professionals gave parents 'too many chances' to demonstrate that they could look after a child, often in the face of substantial evidence to the contrary and regardless of the further harm to children.

7. The National Foundation for Education Research¹⁹ conducted a series of research studies focusing on the development of early help across local authority partnerships. Its findings identify both challenges and good practice and recognise that more work is needed by local authorities and their partners to establish consistently strong early help arrangements. They note that individual practitioner skills and knowledge varies and that this is pivotal in identifying children's early help needs. 'Working together to safeguard children' places a clear responsibility on LSCBs to ensure that professionals are engaged in effective training to help them identify children's needs early.
8. Ofsted has included the inspection of early help provision by local authorities and their partners within the inspection arrangements since January 2012. Inspection reports since that time show clearly that a wide range of professionals are engaged in supporting children early as concerns emerge. For some children, outcomes are improving as a result of early identification and assessment, and the help provided has reduced risks. For others, early identification has led to children being referred promptly so they are appropriately protected by statutory children's social care services.

¹⁸ Carolyn Davies and Harriet Ward, *Safeguarding children across services: messages from research*, Department for Education, 2011; www.gov.uk/government/publications/safeguarding-children-across-services-messages-from-research.

¹⁹ *We should have been helped from day one: a unique perspective from children, families and practitioners*, Local Authorities Research Consortium, Research in Practice and National Foundation for Education Research, September 2013; www.nfer.ac.uk/publications/LRCF01/LRCF01_home.cfm.

9. However, inspection findings reflect much of the research evidence. Local authorities and their partners face significant challenges in maintaining consistency and quality of practice, and in understanding roles and responsibilities for early help provision. The strategic vision of local authorities and their partners and their response to the early help needs of children require strengthening in many local authorities. The quality assurance of early help work, including the quality of early help assessments and plans, needs to improve. The effectiveness of the response to identified needs, management oversight and application of locally agreed thresholds should be more consistent. In addition, there is very little evidence about the impact of early help where there are concerns about children and their families.

Methodology

10. This report summarises the findings of the thematic inspection, exploring the responses of professionals when they identify that children and their families need help.
11. Inspectors visited 12 local authority areas, which varied in size and included counties and metropolitan areas with a range of rural and urban features. They examined 56 early help cases for children in total. For each of the early help cases considered, inspectors met at least one professional from a partner agency providing support to the individual family. They also met 31 parents and six young people across the 56 cases.
12. Inspectors examined an additional 84 cases referred to children's social care alongside the social workers responsible for decision making on these cases. Of these, 47 cases received no further statutory intervention. In the remaining 37, a social worker completed either an initial or core assessment before taking the decision that no further statutory intervention was required. Inspectors also spoke to the 62 workers in partner agencies who made these referrals.
13. Inspectors met LSCB members, local authority and partner agency staff in connection with local early help commissioning and quality assurance arrangements.
14. The key areas that the thematic inspection considered were:
 - the arrangements in place in local areas to ensure that children and families needing early help are identified at the earliest opportunity
 - whether professionals use locally agreed thresholds effectively to provide an appropriate response to concerns about children
 - arrangements to assess children's needs and plans made in response
 - the extent to which professionals seek to understand the individual experiences of the child living in the family

- whether the early help provided is routinely reviewed to ensure that individual children's circumstances are improving, risk is reducing or that further action is needed
 - the extent to which professionals working with families understand their role and how to effectively escalate their concerns
 - the extent to which professionals work together to monitor and evaluate the impact of early help for children and families and how this information is used strategically
 - how effectively LSCBs evaluate multi-agency early help and whether they oversee professional training and support
 - whether professionals are aware of and use research and learning from serious case reviews in relation to early help and the impact this has on professional practice.
15. Good practice in a range of authorities is highlighted in this report. These examples illustrate particular aspects of the work; they are not intended to suggest that practice in a local authority was exemplary in every respect.
16. This report brings together themes identified across all local authorities visited for the purpose of this inspection. Not all findings in this report were evident in each local authority visited.
17. Where case studies are referenced, contextual details such as the child's age and/or gender may have been changed to maintain confidentiality.

Findings from practice

Early help provision

18. A wide range of professionals working in universal services are identifying additional needs for children and families.
19. Inspectors considered 56 early help cases. The children concerned had a variety of needs that led to professionals from different disciplines working together to support them and their families. These needs included:
- parents struggling to manage their child or children's behaviour
 - children with a learning difficulty, such as an autistic spectrum disorder
 - a child displaying inappropriate sexualised behaviour
 - parental or child isolation
 - low-level parental mental or physical ill health
 - vulnerable young parents
 - bereavement
 - parental alcohol misuse

- financial difficulties/debts
 - parental learning difficulty
 - early neglect
 - housing difficulties (overcrowding and homelessness)
 - risk of school exclusion
 - poor attachment between child and parent
 - child's low self-esteem.
20. Inspectors found that thresholds were appropriately considered and used in all but three of the early help cases examined. These cases were referred back to the local authority for further assessment as children were considered to be experiencing significant harm.
21. Inspectors closely reviewed early help cases alongside a professional involved in working with the family. They found that opportunities to intervene earlier were missed in over 40% of the cases. In a very small number of cases, despite the efforts of professionals, parents had refused offers of help and professionals appropriately judged that this refusal did not warrant referrals to children's social care at that time.
22. These missed opportunities were attributed to a number of factors, including delays in information-sharing between agencies, delays in providing services following assessment and parents not being given support when they first asked for help. Most significantly, in six of the cases, the families had long-standing identified needs that, historically, individual agencies had only responded to in a crisis. In these cases, until the current early help intervention, agencies had failed to work together to support these families at an earlier point.
23. In one case, a family was known to children's social care and received child in need services in 2011. The social work assessment at that time did not robustly assess the parents' long-term ability to respond to the children's changing needs as they got older. As the children got older, the parents, who had moderate learning difficulties, were not able to manage the children's changing needs. No one agency had a good oversight of the family's circumstances after the case had been closed. As a result, different schools responded reactively to the issues as they arose with each individual child in school rather than supporting the family and understanding the child's experiences in the family home environment. The parents always responded to schools and accepted any help willingly. This masked and deflected attention from the experiences and neglect of the children.
24. The quality of the early help assessments undertaken with families was too variable. Inspectors considered fewer than half of the assessments to be of good quality. Poor assessments routinely:

- failed to analyse information
 - were overly descriptive and so not clear about strengths and concerns
 - relied heavily on one parent's self-reporting, with limited or no input from professionals
 - did not consider the family's history nor consider the significance of the current issues
 - focused too much on the parent rather than the impact of the parent's difficulties on the child
 - contained limited information about the father or other partners even when they were part of the household.
25. Too many assessments did not include the views of children. In almost a third of cases, the inspector specifically noted the absence of the child's voice or sufficient understanding of their experiences, where this would have been expected given the child's age. In almost all of these cases the assessment was also found to be too focused on the adults' needs and not sufficiently child-focused. For example, an inspector noted:

'... the young person was not consulted despite being 15 years old. There was a lot of information about his behaviour in the assessment which attributed a sense of blame to the child. I would be uncomfortable with this young person reading the assessment as it was not child centred'.

26. Good assessments were characterised by:
- a professional speaking to the child about their experiences and asking for their thoughts and feelings about their circumstances
 - consideration of brothers' and sisters' needs individually
 - the participation and consent of both parents
 - the family's history informing the findings and decisions
 - all professionals known to the family contributing to the assessment
 - comprehensive information
 - needs, risks and strengths being clearly identified
 - sound conclusions based on good analysis of information.

In areas where professionals used a standardised assessment tool, assessments were generally of better quality. For example, in Milton Keynes, professionals

used the Signs of Safety²⁰ model for early help assessments. In one case, an inspector noted that:

'... the use of this model assisted professionals to identify strengths, needs and risks within the family ... information is gathered from the professionals who know the children and the parents; history has been considered well (which leads to a time limited emphasis to the plan); the children have all been spoken to alone and despite the very low levels of speech of the five-year-old, efforts were made to communicate with her at school by those who know her well.'

27. In another local authority, some professionals conducted early help assessments using an 'Evaluation Wheel'. This is a graphical tool that invites parents to rate their level of confidence in areas such as 'using services in the community', 'parenting skills' and 'feeling good about myself'. The areas to work on are drawn from these ratings. The exercise is then repeated when the intervention is reviewed in order to measure impact. Although simple, this tool is effective in both engaging parents and in measuring the impact of work.
28. Inspectors saw some good practice with proactive steps being taken to ascertain the child's wishes and feelings as well as understand what life was like for them in their household. In just over a quarter of assessments, inspectors found that the child was spoken to directly and that this contributed to a good assessment. In other assessments, there were good observations of very young children from professionals who knew them well. One inspector noted that:

'the worker clearly has engaged the child and you get a sense he is at the centre of the assessment. His voice can be clearly heard in the narrative.'
29. Engaging fathers or male partners living in the household, was a significant failing of early help work. Both parents were sufficiently included in the assessment and plan in only two fifths of the early help cases. Of the remaining cases, a further two fifths of fathers were excluded without rationale. A third were available but not sufficiently engaged. One fifth of fathers were not involved in early help work because they were no longer in contact with the child or as a result of significant domestic abuse.
30. In over two thirds of cases, the subject child had brothers and sisters. The majority of cases paid good attention to siblings who were also the subject of an early help assessment, high numbers of which also had an early help plan. Others were appropriately deemed not to require a plan following assessment. Some assessments grouped children's needs and did not provide details about the children's individual needs. In others, brothers and sisters were not considered. This meant that for almost a quarter of cases opportunities were

²⁰ The Signs of Safety model is a strengths-based and safety-organised assessment and planning framework for child protection practice and was originally developed in Western Australia by Turnell and Edwards; www.signsofsafety.net/signs-of-safety.

missed to assess and support these other children in the family. In one local authority, the standard early help policy, which was well known by professionals, required them to assess the needs of all children in the family. This assisted professionals to think holistically about families.

31. In just over a third of the early help cases, inspectors saw effective planning that was contributing to improving outcomes for children. This included regular reviews of plans focused on outcomes and good use of 'distance-travelled' tools that attempted to measure and evaluate the desired outcomes. Practitioners were able to evidence a wide range of improvements in the child's circumstances. These included:
- improved school attendance
 - reduced short-term school exclusions
 - reduced inappropriate sexualised behaviour
 - reduced isolation
 - improved presentation
 - immunisations being up to date where they had been absent previously
 - improved progress in meeting developmental milestones
 - academic improvements
 - improved housing and home conditions
 - care arrangements stabilising
 - improved speech and language.
32. Practitioners were also able to evidence improved parental behaviours that were having a positive impact on the child. These included:
- more consistent behaviour management and routines
 - parenting that had improved after attending a parenting course
 - increased emotional warmth demonstrated to the children
 - parents engaging with and taking advice from professionals
 - improved mental health
 - a reduction in debt
 - a reduction in drug/alcohol misuse
 - gaining employment.
33. In almost all cases, practitioners were able to verbally articulate that outcomes for children had improved, although this was often absent from written records. Written plans were not sufficiently outcome-focused so they did not assist professionals in knowing when a goal had been reached or in measuring progress towards a goal. In almost half of the early help cases, inspectors

reported deficiencies in the plan and in ongoing work. Four cases had no written plan. Some plans did not feature the needs identified in assessments. Most significantly, inspectors found that in almost three quarters of the deficient plans actions were overly focused on parents and it was not clear how the action would improve the child's outcomes. A large majority were not sufficiently specific or measurable, did not set achievable goals, contained no plans to review and did not set timescales in which changes needed to be achieved.

34. Too many plans and subsequent reviews did not clearly establish whether the child's circumstances were improving, neither did they hear from children. While almost all cases had plans, in too many instances plans were not being reviewed regularly. Because plans were not outcome-focused, where reviews took place the meetings did not effectively consider progress in relation to the plan. Plans were too often a list of actions that did not identify the outcome to be achieved for the child or how these actions would improve the child's circumstances. Many made the assumption that the issue would be remedied with the action taken; for example, many required a parent to attend parenting sessions. While the parents may have attended, there was rarely subsequent analysis about whether this attendance had improved either the parenting or the child's circumstances and experiences.

Referrals to the local authority

35. In order to consider the application of local thresholds, inspectors examined referrals to the local authority. These included cases that did not progress beyond the point of referral and those that progressed to a formal assessment followed by statutory intervention then ceasing. Inspectors spoke to 62 referring professionals as well as social work staff who made decisions about these specific referrals. Over a quarter of these professionals said they struggled to understand and apply local thresholds. They were not always sure which cases should be referred to the local authority.
36. In just over three quarters of the cases closed at the point of referral, this decision was considered to be appropriate. Professionals highlighted concerns about the child in the vast majority of these referrals. Children's social care appropriately judged that the level of concern raised did not reach the threshold for statutory intervention. However, while statutory intervention was not required, children and families would have benefited from an early help offer. The opportunity to put this in place was missed for some.
37. Almost a quarter of cases were closed inappropriately by children's social care at the point of referral. In these cases:
- risk was not well considered and action was not taken when it should have been
 - there was a re-referral for the same issue in the subsequent three months that could have been addressed with the information known originally

- the referral quality was poor and the referral was closed without children's social care speaking to the referrer to establish the reason for their decision
 - the case was closed without the completion of identified tasks.
38. The quality of referrals varied, although most provided sufficient information alongside information already known by children's social care. However, in a small number it was not clear why the referral was being made and what the concerns were about the child. This required further follow-up by children's social care and demonstrated that not all professionals had a sufficiently well-developed understanding of how to make referrals. Where referrals were of a good quality they:
- were timely
 - contained the following features:
 - concerns about the child and a rationale for referral
 - references to the locally agreed threshold document
 - clarity about how the concerns impacted on each child in the family
 - evidence that concerns had been discussed with the parent and consent had been sought and obtained
 - context and historical information, including the effectiveness of previous help
 - a balance between positive factors and risk
 - a summary of the views of other professionals
 - identification of any language barriers or the need for an interpreter.
39. Almost two thirds of the referrals that progressed to a formal assessment and were then closed involved children who had been referred previously. In the 12 months before these referrals, one fifth of children had more than one referral with one child having been referred four times. This child had not been the subject of an early help assessment and no plan was in place to meet previously identified needs. Despite previous referrals and ongoing involvement of single or multi-agency work for a small number of children at the time of the referral, only one referral from the sample was supported by an early help assessment. This indicated that early help assessments were not being used effectively to assess and identify needs for all children.
40. Professionals making these referrals clearly understood their responsibility²¹ to refer concerns about children's welfare to local authority children's social care. They understood that this was the basis of good information-sharing. What was

²¹ *Working together to safeguard children – a guide to interagency working to safeguard and promote the welfare of children*, Department for Education, March 2013;
www.gov.uk/government/publications/working-together-to-safeguard-children.

not often explored was the consideration given to locally agreed thresholds and what support the child needed as a result of the identified concerns. Almost half of the referring professionals indicated that they took no further action when children's social care closed the case. They saw their duty ending with making the referral and they did not seek to secure early help for the child. One professional indicated that they 'keep referring until children's social care accepts the case'; this was not an unusual response. In some cases, professionals referred issues that did not meet the statutory threshold and did not accept or understand the decision from children's social care. In others, professionals did not understand how to escalate concerns appropriately when disagreeing with decisions made by children's social care about next steps.

41. Local authority staff and partners were overwhelmingly positive in their verbal accounts about training that enabled them to identify and respond to children's needs. Almost all were confident about when referrals should be made to children's social care. This confidence, however, was not apparent in practice where too many referrals were made to children's social care without professionals considering the locally agreed thresholds and whether early help intervention would be more appropriate.
42. When children's social care undertook formal assessments and decided that statutory intervention was not required, practice in regard to securing support for early needs was insufficiently robust. For some children, social care took proactive steps to negotiate agreement from partner agencies to offer specific support to the family. In too many cases, children's social care ended their involvement without securing appropriate support for children. Either partners were not advised of these needs or weak arrangements were tentatively agreed. Such examples of poor arrangements included partners agreeing to 'keep an eye on things and re-refer if we are worried again' or 'school will monitor'. Such responses did not reduce the risk of future escalation and left children's needs unmet.
43. These examples demonstrate continued confusion about partnership roles and responsibilities. Some professionals are not always clear about their role and responsibility to intervene and support families when the threshold for statutory intervention is not met. Neither is it clear what role and responsibility statutory services have to ensure that children and families receive the help they need when it is not their statutory duty to provide those services.
44. 'Working together to safeguard children' requires that for referrals:

'Feedback should be given by local authority children's social care to the referrer on the decisions taken. Where appropriate, this feedback should include the reasons why a case may not meet the statutory threshold to be considered by local authority children's social care for assessment and suggestions for other sources of more suitable support.'

This element was considered as part of the thematic inspection and we found significant inconsistency in practice.

45. Inspectors examined 84 referrals made to children's social care that ended in no further statutory involvement. Of these, almost two thirds of referrers were provided with the outcome of their referral; a third were not. What was equally significant was that partner agencies did not hold children's social care to account and seek feedback on referrals. Almost one third of these referrers confirmed to inspectors that they had not been informed of the outcome of the referral they made. Many had no expectation that they would be informed of the outcome. They saw it as their role to pass information to children's social care to make decisions. A picture of poor cooperation, a lack of shared accountability by local agencies and poor compliance with statutory requirements compounds Ofsted's concern about the lack of clarity of the levers available to pursue help for families with additional needs to those provided in the universal services. Our evidence from this inspection indicates that in 30% of cases examined not all children and families with additional needs were given help when they did not meet the threshold for statutory intervention. A question remains about who is responsible in such a scenario?
46. Children's social care identified half of all children referred as having needs that did not meet the threshold for ongoing statutory intervention but who would benefit from an early help offer. Some help was offered to many of these children through interagency discussion with professionals and with parents' consent. For over a quarter of them, this opportunity was lost due to the poor coordination and shared accountability between agencies to ensure that children who need help are given support that meets their needs.

Monitoring and evaluating the effectiveness of early help

Management oversight

47. Overall, there were significant weakness in the quality and focus of supervision and management oversight of early help cases. In the large majority of cases, professionals verbally reported that they received some formal management oversight of individual cases. A small but concerning number reported that there were no formal arrangements.
48. Despite the positive verbal feedback from professionals, inspectors only saw written records of management oversight in just over half of the early help cases. In a third of these cases with a manager overseeing them, written records of management oversight were held separately from the child's file. Of those that had a written account of management oversight, fewer than half considered the effectiveness of the child's plan. Even fewer considered whether the plan was improving the child's circumstances and experiences. Managers also missed opportunities to challenge poor professional practice.

49. None of the local areas had developed a multi-agency process for the standard and quality of management oversight that should be offered to professionals who contribute early help. Each professional had different arrangements depending on the agency that employed them.
50. The significant variability and quality of management oversight across agencies meant that the effectiveness with which concerns for children were being managed and reduced across agencies was limited. One LSCB conducted a systems review and found that early help cases were not consistently reviewed by a manager. Other LSCBs were often unaware of the level and consistency of management oversight offered to individual staff on early help cases. Most LSCBs relied on section 11 audit returns to confirm that appropriate supervision and management oversight arrangements were in place. None had given sufficient scrutiny to these returns to be assured that effective management oversight, specific to early help cases, was in place.
51. All professionals felt that they were able to access a range of formal and informal support both internal to their own organisation and externally. Very few described feelings of isolation in dealing with early help work. They regularly used their peers and professional networks to seek advice. For example, in one area, a practitioner described meeting with her peers on a weekly basis to discuss cases where workers felt that they may be 'stuck'. The worker was assisted by the wide variety of skills and knowledge in the team.
52. Where early help coordinators existed they were highly valued. The large majority of professionals identified that they had good access to social workers within children's social care or within multi-agency safeguarding hub arrangements and welcomed the opportunity to test out the application of thresholds in early help cases where the child's situation did not seem to be improving.

Quality assurance

53. Quality assurance and audit activity of early help work was not well established or developed. Workers in just over a quarter of the early help cases reported that the case had been subject to a quality assurance process or audit. Some audits only looked at process and compliance factors rather than the quality, impact and outcomes of the early intervention for the child and family. Other workers reported that, although they had been aware that an audit had been undertaken, they had received no feedback on how their practice could be improved.
54. A few examples of good audits were seen. In one local authority, an audit of the initial early help assessment and plan had been undertaken approximately six weeks after the early help plan had been put in place. The audit template was good in that it sought to identify and evaluate the quality and impact of the multi-agency intervention on the experiences of the child. The audit was appropriately challenging of the lack of management oversight recorded on the

file. It made appropriately positive comments about the assessment, plan and the impact to date of the plan on the child's experiences. It sought to ensure that the children's experiences were being considered and reviewed and how the parents contributed to the plan. The audit was shared with the professional with responsibility for coordinating the early help plan and the manager so that the improvements could be embedded into the service.

55. The current approach to quality assuring and monitoring the effectiveness of early help is disparate, disjointed and significantly underdeveloped. Some LSCBs have undertaken audit activity that has a specific focus on the effectiveness of early help, although it is acknowledged by most that audits are overly process-focused and do not adequately focus on outcomes for children. Five LSCBs were yet to commission audit work that examined the quality and effectiveness of early help work.
56. Local authorities and their partners have limited information on how early help is improving children's circumstances. Local areas can point to individual targeted services that have improved outcomes for a particular group of children in relation to specific needs, for example the high take-up of the nursery offer for two-year-olds or the reduction in the number of young people not in education, employment or training. Increasingly, commissioning arrangements are including outcome measures that seek to demonstrate the impact of the service on the child and family.
57. A range of creative early help initiatives indicate a level of awareness and a commitment to respond flexibly to the diverse needs of communities, with specific instances of success for some families. Examples from different local authorities include:
 - the Freedom Programme, which supports those who have experienced domestic abuse, was adapted to meet the needs of the local South East Asian community
 - early help health professionals worked with the Traveller community to build trust and relationships, which resulted in an increase in teenage girls from the community having the HPV vaccination
 - a culturally matched worker was employed to work within and engage the Polish community, which resulted in increased numbers of Polish mothers attending specific groups
 - the joint strategic needs assessment (JSNA) identified that 57% of children with autism had limited access and support – this led to specific work to obtain the views of children with autism, which resulted in a clear autism strategy and action plan.
58. The local authority and/or partners have not developed systems to identify whether success is sustained in the long term for children and their families. Furthermore, analysis by the local authority and/or partners does not yet sufficiently focus on whether the 'right' children are receiving early help and

whether early help is reducing the numbers of children that require a statutory response. This is likely to mean that, even where outcomes for individual children can be seen to be improving through early help provision, there is no way of knowing whether early help services are targeting the most vulnerable children in the area. Partnerships find it more difficult to link success, or otherwise, between early help and those children who go on to receive statutory services or require children's social care intervention. Impact for children who receive early help and those who receive a statutory service are often seen separately and in isolation. Improved analysis that encompasses both early help and statutory services is needed to ensure that the 'right' children are receiving help when they need it and that the responsibility for help does not fall unfairly on the local authority.

Roles and responsibilities

59. The evidence on this inspection indicated that current statutory powers do not provide a sufficient focus for any one agency or partners collectively to give early help the priority that it requires. For example, referrals that did not progress to statutory intervention were not analysed to understand whether children's early help needs were met. Evidence further showed that children's needs were sometimes left unmet and no agency had overall responsibility to provide help. Again, in the absence of a duty for agencies to hold each other to account for early help arrangements, it is not known if they are effective.
60. The Munro Review recommended that the government should place a duty on local authorities and statutory partners to secure sufficient provision of local early help services for children, young people and families.²² The government's response was that 'there is sufficient legislation to realise Professor Munro's vision of a transparent and coordinated offer of early help.'²³
61. Munro recognised the need for a legal framework to secure 'shared accountability for the early help offered to children and families whose needs do not meet the threshold for a social care service.'²⁴ This thematic inspection demonstrated significant variability in the effectiveness of local shared accountability and coordination of early help services. Little has changed for many children in the absence of this duty because there is no statutory duty to enforce the shared accountability needed to deliver an effective early help offer. In many areas, a disconnect remains between statutory service provision and an early help offer for children.

²² Professor Eileen Munro, *Munro review of child protection – a child centred system*, Department for Education, 2011.

²³ *Progress report: moving towards a child centred system*, Department for Education, May 2012; www.gov.uk/government/publications/progress-report-moving-towards-a-child-centred-system.

²⁴ Professor Eileen Munro, *Munro review of child protection – a child centred system*, Department for Education, 2011; www.gov.uk/government/publications/munro-review-of-child-protection-final-report-a-child-centred-system.

62. Not all partnerships had developed a shared early help strategy. In some, the early help strategy was led by the local authority and the local authority employed staff or commissioned services to coordinate, assess and deliver early help where needs were identified by partners. In others, a multi-agency early help strategy was in place or being drafted. None, however, had scrutinised the effectiveness of the delivery of the strategy and its impact on improving outcomes for children at the earliest point or reducing the need for higher cost, more coercive help.
63. For partnerships, the JSNA was the starting point and the statutory process by which they identified current and future health and well-being needs.²⁵ Many JSNAs failed to focus sufficiently on and prioritise potential child protection issues. For example, JSNAs did not routinely identify the prevalence of parental mental ill health, drug or alcohol misuse or domestic abuse. Furthermore, even fewer identified the numbers of children living in such households. These issues are well known indicators of potential future child protection issues.²⁶ Despite this extensive research, these indicators were not yet a key focus in JSNAs and were not used as a basis for early help provision. Without this shared information, early help services cannot be targeted to the children who need them most.
64. 'Working together to safeguard children' requires the LSCB to publish a threshold document that includes an outline of the process for the early help assessment and the type and level of early help services to be provided. In all the areas visited, the LSCB either had an agreed or a draft multi-agency threshold document. 'Working together to safeguard children' places no requirement on the LSCB to evaluate the effectiveness of the application of the threshold document. Without such a duty, this inspection found that while LSCBs have complied with the duty to have a threshold document, only two areas could confirm that specific audit work had occurred to test out whether thresholds were appropriately applied for early help work. Most audits focus on the application of thresholds on statutory work and do not consider early help thresholds.
65. Many LSCBs recognised that they had not yet developed data to enable them to 'assess the effectiveness of the help being provided to children and families', as required by 'Working together to safeguard children'. Many were still working to secure regular reporting regarding early help and, at best, measurements of impact were still in the very early stages of development. Evaluation across the continuum of early help and statutory services required further significant development.

²⁵ *Joint Strategic Needs Assessment and joint health and wellbeing strategies explained*, Department of Health, 2011; www.gov.uk/government/news/jsnas-and-joint-health-and-wellbeing-strategies-explained.

²⁶ Brandon *et al.*, *Building on the learning from serious case reviews: A two year analysis of child protection database notifications 2007-2009*, Department for Education, 2010; www.gov.uk/government/publications/building-on-the-learning-from-serious-case-reviews-a-2-year-analysis-of-child-protection-database-notifications-2007-to-2009.

66. 'Working together to safeguard children'²⁷ identifies specific groups of children who would benefit from early help. Professionals should, in particular, be alert to the potential need for early help for a child who:
- is disabled and has specific additional needs
 - has special educational needs
 - is a young carer
 - is showing signs of engaging in anti-social or criminal behaviour
 - is in a family circumstance presenting challenges for the child, such as substance abuse, adult mental health, domestic violence
 - is showing early signs of abuse and/or neglect.
67. Only in one area did professionals have some awareness of this list. Not one of the 52 professionals identified young carers as a specific group. Only just over half were able to identify a specific group of children that they recognised as vulnerable. It is a cause for concern that professional awareness about such vulnerable groups was so weak and that this poor awareness could prevent them from identifying and providing early help to families.
68. LSCBs indicated that specific focus on early help training was underdeveloped. Only a quarter stated that they had delivered specific early help training across the partnership. Most advised that early help awareness was integrated into basic safeguarding training. Most early help training was facilitated on a single agency basis or by the local authority. No LSCBs were able to confirm whether all those who needed to be trained on early help had received appropriate training. Only a quarter had developed processes for monitoring and evaluating the impact of training on practice. Few professionals were able to make reference to specific early help training that they had received. As a result, professionals were limited in describing examples of the impact of training on their early help work. This meant that many LSCBs were failing to take sufficient account of the statutory duty to:
- 'monitor and evaluate the effectiveness of training, including multi-agency training, for all professionals in the area. This should cover how to identify and respond early to the needs of all vulnerable children, including unborn children, babies, older children, young carers, disabled children and those who are in secure settings'²⁸

²⁷ *Working together to safeguard children – a guide to interagency working to safeguard and promote the welfare of children*, Department for Education, March 2013, pp. 11–12;

www.gov.uk/government/publications/working-together-to-safeguard-children.

²⁸ Ibid.

Learning from serious cases reviews

69. Brandon,²⁹ et al., reviewed the cases of children subject to serious case reviews during the period 2009–2011. The research identified that 42% of cases were receiving a service from children’s social care at the time of the incident and that 23% had previously been known to children’s social care. These figures suggested that some cases were being closed prematurely by children’s social care. In a further 14%, referrals were received but not accepted for assessment by children’s social care. The research noted that thresholds to children’s social care were set too high, particularly when neglect was the primary concern. This raised significant issues about children being provided with the right help at the right time. The help and protection of children relies on all professionals being able to identify triggers that may indicate children are at risk of harm or being harmed and taking appropriate action to protect them.
70. Almost all professionals had an awareness of serious case reviews and what they were. Social work professionals working within children’s social care were most able to give practice examples of how findings from serious case reviews had informed their individual work with children or how findings had been used by the organisation to inform practice changes to whole services. While they had an awareness of serious case reviews, non-social-work professionals were less able to demonstrate the impact, with just over a quarter indicating that findings from serious case reviews had impacted directly on their practice. A small but significant group of non-social-work professionals, working with children, indicated that they had no real awareness of findings from serious case reviews.
71. A sample of the most recent findings from serious case reviews,³⁰ which relate to early help, reflect the findings of this thematic inspection. This confirms that insufficient attention is given to serious case review findings and how these inform and improve practice. In relation to early help, serious case review findings tend to identify either that early help was provided but was not successful for a variety of reasons or that the need for early help was not identified. The following is a summary of issues that relate to recent findings from the serious case reviews considered:
- a lack of focus on the child that in some cases resulted in children’s views and voices not being heard or being given value
 - thresholds not understood across partnerships and set too high, which prevented the necessary support being offered

²⁹ Brandon *et al.*, *Building on the learning from Serious Case Reviews: A two year analysis of child protection database notifications 2007-2009*, Department for Education, 2010; www.gov.uk/government/publications/building-on-the-learning-from-serious-case-reviews-a-2-year-analysis-of-child-protection-database-notifications-2007-to-2009.

³⁰ See Annex B.

- adherence to procedures over common sense protection of children and young people, even where there was clear evidence of concerns about abuse
 - poor understanding and assessment of the circumstances, including a failure to re-assess when new information became available
 - poor communication and interagency working, especially in relation to challenging decisions made by other agencies
 - workers from across the agencies lacking a suitable level of understanding of key factors relating to particular cases, such as cultural norms, mental health, legislation and domestic abuse – specialist advice was not sought where it would have improved decisions
 - delays to early help services being provided and a lack of follow-up if a child did not take up the use of the service
 - a lack of satisfactory management oversight of practice in relation to early help
 - a lack of critical analysis, which sometimes led to professional 'personal bias' not being challenged or professionals not adopting sufficient sceptical enquiry into issues which arose; accepting information at face value
 - risks from fathers/partners not sufficiently considered.
72. Almost all of this evidence reflects findings from our thematic inspection. Attention given to improving practice from the findings of serious cases reviews is not robust enough.
73. Specifically, and reflecting findings from serious case reviews, inspectors asked professionals about the training they had received to support their work with families who are reluctant or resistant to engage with professionals. Almost two thirds of professionals had received some training. As a result, they reported that their confidence in this area had improved; they felt empowered to be more questioning rather than accepting of parental responses. Training had helped them to identify triggers and warning signs, had highlighted good practice in speaking to the child and in hearing and understanding the child's experience, and had assisted in sharing concerns and information with other professionals. However, one third of professionals had not benefited from such specific training. Many commented that it would be welcome, particularly on a multi-agency basis. One professional commented:
- 'I find it difficult to talk to parents. My heart sank when dad answered the phone. We need more support in how to talk to parents about allegations.'

Conclusion

74. Evidence from Ofsted's single inspections of local authorities and from this thematic inspection shows clearly that the offer of help to families when concerns first arise is increasingly prioritised by local authorities and their

partners. As a result, more children are benefiting from better focused and coordinated support earlier. Early help workers increasingly feel part of professional networks and therefore are less isolated and more supported. The quality and effectiveness of early help services however remains too variable both between areas and within the same services. Children's need for additional support is often not identified or acted on at the right time, with earlier opportunities to provide support often missed. The assessment and planning of services for individual children are too often insufficiently focused on improving outcomes for the child. Plans are not consistently or effectively reviewed and management oversight is not rigorous enough.

75. Planning for early help services is not informed by robust needs assessments. Neglect, parental substance misuse or ill health and domestic abuse are key factors undermining the welfare of children but not enough priority is given to understanding the nature and extent of these needs in local communities. It is therefore unclear whether early help services are being commissioned effectively to best address these needs. More generally, evaluation of the overall impact of early help services is not well developed.
76. LSCBs have become more engaged in monitoring early help and in most areas have ensured the adoption of an agreed threshold framework. However, they are not routinely monitoring the application of these thresholds or, more generally, holding each other to account for their early help work.
77. At the heart of these difficulties, however, is a lack of clarity about statutory roles and responsibilities for the provision of early help. For many agencies, early help continues to appear as an add-on rather than central to or required as part of their core business of improving the life chances of children.
78. In the current scenario for local areas, where demand for help for families is increasing alongside the more formal and coercive child protection work, it is critical that there is clarity about the responsibilities of local agencies to help families early. The recommendations from this thematic inspection should be urgently considered by government so that the costs and poorer outcomes of later intervention can be avoided.

Annex A. Local authorities subject to this thematic inspection

Buckinghamshire

Bury

Gloucestershire

Harrow

Hertfordshire

Leicestershire

Lewisham

Milton Keynes

Southend-on-Sea

Walsall

Warwickshire

York

Annex B. Serious case reviews considered

Child D – Death of three-week-old baby girl in October 2012 following injury by her mother. The child's mother had multiple overlapping needs such as learning difficulties and mental health problems.

Serious case review: Child D. Published by the NSPCC on behalf of an unnamed local safeguarding children board, 2012; [Read full overview report \(PDF\)](#).

Child J – Suicide of adolescent girl in January 2013; victim of sexual assault and history of bulimia and self-harm and suicide ideation.

Muir, M., *Serious case review: Child J*, Cumbria Local Safeguarding Children Board, 2013; www.cumbrialscb.com/eLibrary/Content/Internet/537/6683/6687/6700/4182185614.pdf.

Child C – Death of 17 week old baby girl in November 2013; teenage mother significant maternal history of domestic abuse.

Haley, A., *Serious case review: Child C*, Dorset Safeguarding Children Board, 2014; [Read full overview report \(PDF\)](#).

Family A – Neglect, physical and sexual abuse of seven brothers and sisters (aged six to 14 years) between 2004 and 2011. Father from Traveller community.

Harrington, K., *Serious case review: Family A*, Southampton Local Safeguarding Children Board, 2014; [Read full overview report \(PDF\)](#).

Child H – Death of a three-year-old Somali boy and serious injury to his two-month-old brother in March 2013.

Trench, S. and Miller, G. *Serious case review: Child H*, Lambeth Safeguarding Children Board, 2014; [Read full overview report \(PDF\)](#).

Family S11– Death of a 15-year-old boy in March 2013 as a result of overdose of drugs prescribed to father.

Tudor, K., *Serious case review: overview report: in respect of Family S11*. Dorset Safeguarding Children Board, 2014; [Read full overview report \(PDF\)](#).

Young person: suicide of 14-year-old boy in April 2013 who had moved to the UK from China.

Wonnacott, J., *Overview report on the serious case review relating to: Young Person: Hiers*, Surrey Safeguarding Children Board, 2014; [Read full overview report \(PDF\)](#).

Child FW – death of a baby who suffered cardiac arrest. Family well known to wide range of family services. Report final version 12 February 2013.

Baker, G., *Serious case review: executive summary: in respect of the death of FW [executive summary]*, Worcestershire Safeguarding Children Board, 2014; [Read executive summary \(PDF\)](#).

'Daniel': Death of 14-year-old boy in November 2009 who was exposed to many risk factors.

Gallagher, C., *'Daniel': the overview report from a serious case review*, Kent Safeguarding Children Board, 2013; [Read full overview report \(PDF\)](#).

Baby H – death of four-month-old baby boy in November 2010 from serious head injury; significance of mother's young age on parenting capacity and lack of agency engagement.

Maddocks, P., *A serious case review: 'Baby H': the overview report*, Lancashire Local Safeguarding Children Board, 2013; [Read full overview report \(PDF\)](#).

Traded Services to Schools

Schools Forum – Traded Services Update

21st May 2015

What is happening with the Programme?



- ☑ The Councils is currently looking at improved access to services and support with schools ready for the Autumn Term 2015; we want to be pro-active with schools to better meet school needs.
- ☑ We want to provide improved services to reflect what schools want and need. Our pre-launch at *Alexandra Palace* on 24th February provided the initial focus for our launch of service offers.
- ☑ *Go Live!* We have launched the initial website service ready for the Summer Term. We have over 200 users who have been online and more than 90% of our schools have already used the new website.
- ☑ Most of our services are geared up to be more widely used and are becoming better prepared for providing reliable advice, higher quality support and being tailored to need. Initially at least, most services are responding positively and we have plans to extend service with sign-posted services and more online training from September 2015.

An overview of Haringey's trading activities with schools



Corporate Services	Environment Services	Schools and Learning Services
<p>Property and Estate Legal Support Healthy Schools Schools HR Health and Safety Transport Services Design and Print Translation Service</p>	<p>Schools Catering Schools Swimming Estates management Fixed Play Equipment Visits to Nurseries Schools Transport Pest Control</p>	<p>CPD Training NQT Support Schools Improvement Admissions Support Appeals Governors training and clerking Careers Support Haringey Music Pendarren Outdoor Activities Centre</p>

Earlier Phase of Work



Phase of Work	Outputs	Outcomes
<p>Phase 1: July – Jan 2015</p> <p>Putting the building blocks in place for a traded model</p> <p>Complete</p>	<p>Develop an updated set of offers from the local authority <i>Completed</i></p> <p>Analysis of current trading activity and financial performance for our services <i>Completed</i></p> <p>Identification of infrastructure and resource requirements <i>Completed</i></p> <p>Procurement of a new online IT system to support traded services <i>Online service operational</i></p> <p>A target of what income / savings are expected <i>Trading Plan approved</i></p> <p>A Programme Board set up to oversee delivery <i>Ongoing</i></p> <p>A consultation group of heads and governors to be set up <i>Ongoing</i></p>	<p>Schools understand what is the core offer and what is the traded offer <i>Complete</i></p> <p>The Local Authority better understands the ‘needs’ of schools <i>Ongoing</i></p> <p>Service teams are clear on income/savings targets associated with trading <i>Ongoing</i></p> <p>A n improved system and working approach are put in place to co-ordinate the traded offer to schools <i>Ongoing</i></p>

Ground already covered



Phase of Work	Outputs	Outcomes
<p>Phase 2: Jan 2015 – April 2015</p> <p>Traded Model goes live</p>	<p>Initial proposals containing all services to schools and price list to be presented <i>Open Day Held</i></p> <p>Appropriate systems and infrastructure in place (Traded services team, IT system, aligned billing processes) <i>On Track</i></p> <p>Open Day Market Event: 24th February 2015 <i>Open Day Held</i></p> <p>Develop clear trading principles for staff, with a workforce development programme aimed at embedding a more commercial trading ethos</p> <p><i>Now operational</i></p>	<p>Centralised and co-ordinated support to schools <i>Online</i></p> <p>Schools & LA are clear what services are traded</p> <p>Services in a stronger position to contribute to overheads, reducing subsidies required</p> <p>Schools enable to procure more services online</p> <p>Council teams clear and focused on trading</p> <p><i>Now operational</i></p>

Progress update: *Now trading*

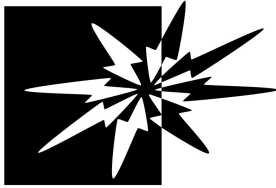
The new website



- ❑ Our online web-based service deals with defined ordering and billing processes for all schools.

The website approach:

- Enables online purchasing and course bookings for services by schools
 - Provides 2-way immediate online communication between the Council and Schools, including instant messaging
 - Automated diary links when services are purchased and due
 - One reference market gallery and shopping mall – one place for schools to find information and co-ordinate services relevant to all traded activities with the Council
- ❑ This is now ready and operational. Schools have access to support and can use the new portal (anytime, anywhere, 24/7)



Haringey Council

**Agenda Item
10**

Report Status

For information/note
For consultation & views
For decision

Report to Haringey Schools Forum – 21 May 2015

Report Title: Updated Schools Forum Work Plan 2014-15.

Author:

Steve Worth – Finance Manager (Schools and Learning)
Contact: 0208 489 3708 Email: Stephen.worth@haringey.gov.uk

Purpose: To inform the Forum of the updated work plan for 2014-15 and provide members with an opportunity to add additional items.

Recommendations:

That the updated work plan for 2014-15 is noted.

1. Schools Forum

- 1.1. It is good practice for Schools Forum to maintain a work plan so that members ensure that key issues are considered in a robust and timely way.
- 1.2. Members of the Forum are asked to consider whether there are any additional issues that should be added to the work plan for the next Academic Year.
- 1.3. This work plan will be included on the agenda for each future meeting so that members are able to review progress and make appropriate updates.

Haringey Schools Forum - Work Plan Academic Year 2014-15

21 May 2015

Arrangements for the education of pupils with special educational needs.
Arrangements for the use of pupil referral units and the education of children otherwise than at school.

Administrative arrangements for the allocation of central government grants paid to schools via the authority.

Early Years Update.

High Needs Update.

8 July 2015

Dedicated Schools Budget Outturn 2014-15

School Funding 2016-17

Outcome of Internal Audit Programme 2014-15

Forum Membership

Early Years Update:

High Needs Update.

Work plan 2015-16

This page is intentionally left blank