

BIRMINGHAM CITY COUNCIL

EDUCATION AND CHILDREN'S SOCIAL CARE OVERVIEW AND SCRUTINY COMMITTEE

WEDNESDAY, 17 MAY 2023 AT 10:00 HOURS
**IN COMMITTEE ROOMS 3 & 4, COUNCIL HOUSE, VICTORIA
SQUARE, BIRMINGHAM, B1 1BB**

A G E N D A

1 NOTICE OF RECORDING/WEBCAST

The Chair to advise/meeting to note that this meeting will be webcast for live or subsequent broadcast via the Council's Public-I microsite ([please click this link](#)) and that members of the press/public may record and take photographs except where there are confidential or exempt items.

2 APOLOGIES

To receive any apologies.

3 DECLARATIONS OF INTERESTS

Members are reminded they must declare all relevant pecuniary and other registerable interests arising from any business to be discussed at this meeting.

If a disclosable pecuniary interest is declared a Member must not participate in any discussion or vote on the matter and must not remain in the room unless they have been granted a dispensation.

If other registerable interests are declared a Member may speak on the matter only if members of the public are allowed to speak at the meeting but otherwise must not take part in any discussion or vote on the matter and must not remain in the room unless they have been granted a dispensation.

If it is a 'sensitive interest', Members do not have to disclose the nature of the interest, just that they have an interest.

- 5 - 16**
- 4 **ACTION NOTES**
- To agree the action notes of the committee meeting held on 5 April 2023.
- 17 - 24**
- 5 **ACTION TRACKER**
- To note the action tracker.
- 25 - 74**
- 6 **YOUNG PEOPLE'S SUBSTANCE USE SERVICE (10.05 - 10.45)**
- Karl Beese, Commissioning Manager - Adult Public Health, John Freeman, Commissioning Manager – Complex Care & Prevention, Adults Social Care,
Chris Baggott, Public Health Service Lead, Emma Haley, Area Manager, Aquarius, and Colette Lloyd, Service Manager, Aquarius in attendance.
- On-line: Justin Varney, Director of Public Health, Mary Orhewere, AD, Public Health, Linda Burnett, Adult Social Care, Vanessa Cusack, Senior Commissioning Officer - Public Health, Adults Social Care, Saba Rai, Behaviour Service Integration Manager, Adults Social Care, and Kevin Jones, Commissioning Support Officer, Adults Social Care.
- Members of the Children and Young People's Mental Health Inquiry from the Health and Social Care O&S Committee have been invited (Cllrs: Mick Brown (Chair), Kath Hartley, Gareth Moore, Julian Pritchard, and Paul Tilsley (Deputy Chair).
- 75 - 82**
- 7 **YOUTH SERVICE (10.45 - 11.25)**
- Soulla Yiasouma, Head of Youth Service, Jadieal Millwood (Youth Officer with Strategic Lead for Youth Violence), and Adill Hadi, Senior Youth Worker in attendance to provide evidence to the Child Criminal Exploitation Inquiry.
- 83 - 124**
- 8 **SEND ACCELERATED PROGRESS PLAN (11.25 - 12.05)**
- Sue Harrison, Strategic Director, Children and Families, and Helen Ellis, Director, SEND and Inclusion in attendance.
- 125 - 138**
- 9 **OFSTED INSPECTION OF BIRMINGHAM CHILDREN'S SERVICES (ILACS)**
- Andy Couldrick, Chief Executive, Children's Trust in attendance.

10 **WORK PROGRAMME**

The Committee to review the work programme completed during 2022/23 and recommend any issues that should be carried over or new issues to be included in the Scrutiny Work programme for 2023/24.

11 **REQUEST(S) FOR CALL IN/COUNCILLOR CALL FOR ACTION/PETITIONS RECEIVED (IF ANY)**

To consider any request for call in/councillor call for action/petitions (if received).

12 **OTHER URGENT BUSINESS**

To consider any items of business by reason of special circumstances (to be specified) that in the opinion of the Chair are matters of urgency.

13 **AUTHORITY TO CHAIR AND OFFICERS**

Chair to move:-

'In an urgent situation between meetings, the Chair jointly with the relevant Chief Officer has authority to act on behalf of the Committee'.

BIRMINGHAM CITY COUNCIL

EDUCATION AND CHILDREN'S SOCIAL CARE O&S

COMMITTEE – PUBLIC MEETING

1000 hours on Wednesday, 5 April 2023, Committee Rooms 3 & 4, Council House, Victoria Square, B1 1BB

Action Notes

Present:

Councillor Kerry Jenkins (Chair)

Councillors: Shabina Bano, Debbie Clancy, Des Hughes, and Shehla Moledina

Other Representatives: Justine Lomas, Roman Catholic Diocese, Osamugi Ogbe, Parent Governor, and Sarah Smith, Church of England Diocese

Also Present:

Cllr. Karen McCarthy, Cabinet Member for Children, Young People and Families

Sabiha Aziz, Chair of the Parent Carer Forum

Andrew Christie, Chair, Children's Trust

Andy Couldrick, Chief Executive, Children's Trust

Sue Harrison, Strategic Director, Children and Families

Kerry Madden, Strategic Improvement Programme Director

Amanda Simcox, Scrutiny Officer

Amelia Wiltshire, Overview and Scrutiny Manager

1. NOTICE OF RECORDING/WEBCAST

The Chair advised that this meeting would be webcast for live or subsequent broadcast via the Council's meeting You Tube site (www.youtube.com/channel/UCT2kT7ZRPFCXq6_5dnVnYlw) and that members of the press/public may record and take photographs except where there are confidential or exempt items.

2. APOLOGIES

Apologies were received on behalf of Cllr. Jilly Bermingham, Cllr. Simon Morrall and Rabia Shami, Parent Governor Representative.

3. DECLARATIONS OF INTERESTS

Members were reminded they must declare all relevant pecuniary and other registerable interests arising from any business to be discussed at this meeting, and none were declared.

4. ACTION NOTES

(See documents No. 1)

RESOLVED:

That the action notes of the committee meeting held on the 22nd February 2023 were agreed.

5. ACTION TRACKER

(See document No. 2)

Since publication of the papers, the structure chart for the Children and Families Directorate and the information requested regarding exclusions and part-time timetables etc., has been circulated via e-mail, and Members were to come back to the Chair and Scrutiny Office if there were any further queries on these.

RESOLVED:

That the action tracker was noted, and Members to come back to the Chair and Scrutiny Office if there were any further queries on the information e-mailed.

6. CHILDREN'S TRUST UPDATE

(See document No. 3)

Andrew Christie, Chair, Children's Trust, Andy Couldrick, Chief Executive, Children's Trust, Cllr. Karen McCarthy, Cabinet Member for Children, Young People and Families, Sue Harrison, Strategic Director, Children and Families, and Sabiha Aziz, Chair of the Parent Carer Forum, were in attendance for this item.

The Chair welcomed the attendees to the meeting and Andy Couldrick presented the headlines from the report. These included:

- Demand was rising which has impacted on an upward pressure of the number of children in care, with the significant increases in unaccompanied asylum seekers contributing to this.
- The Ofsted ILACS inspection (Inspection of Local Authority Children's Services) reflected the progress and improvements made. However, the outcomes of the inspection in March 2023 could not be shared until publication on the 18 April 2023.
- The Council has responded to the financial pressures faced by the Children's Trust, and the Children's Trust will continue to collaborate with the Council on the pressures of the rising demand, which was a national issue.
- Risks or areas of concern:
 - Domestic abuse, which was a significant driver for the demand for children services, and there were some significant gaps in provision, for instance there were no perpetrator programmes in the City.
 - Children's and parental mental ill-health and they were working with colleagues on an integrated service offer.
 - Contextual and transitional safeguarding. The Government has proposed mandatory reporting. However, what was needed was a system to be able to identify and respond collaboratively as soon as concerns were identified. A good example was the Children's Trust staff embedded in the City of Birmingham School (COBS), who work with the school to identify young people at risk early and put in an appropriate response.
 - Early intervention and prevention. The Trust was working with the Council on these programmes, and these included work around the cost of living crisis and food programmes.
- They were in a good position to respond to the challenges and the draft strategic priorities for 2023/24 were listed within the report. This included responding to Ofsted's recommendations following the recent inspection, and His Majesty's Inspectorate of Prisons (HMIPs) recommendations following the Youth Offending Service inspection (with a report due to go to Cabinet later this month).
- The new contract agreed at Cabinet reflected the view that the Children's Trust was improving quality of safeguarding services for children and families, and a ten year commitment to a continued commissioning relationship was positive.
- Recruitment and retention of staff was a national and regional challenge and the Children's Trust were struggling to appoint unqualified personnel as well as qualified social workers.

- The reviews of short breaks has caused some concern and they need to work with partners, parents, and carers regarding the universal and targeted offer, to ensure the offer for families was as impactful as possible, and they were at the beginning of this work.

Andrew Christie highlighted that in relation to rising demand pressures, it was also worth looking back further, and one of the issues Lord Warner highlighted at the time he was the Commissioner for Children's Services in Birmingham was how low referral rates were to children's social care services. This may have been a product of lack of confidence in the system, which meant that there were children who were not getting the services they should have been getting. Over 7 or 8 years there has been a change in awareness of need and strengthening of partnership arrangements.

He re-iterated how important it has been for the Children's Trust, that there has been a solid partnership between the Council and the Children's Trust, which does not always happen nationally, and he paid tribute to this.

During the discussion and in response to queries raised by Members, the main points included:

How the Contract between the Council and Children's Trust Copes with Increasing Demand

- The Children's Trust needed to demonstrate they were meeting the demand that they should, in the most efficient and effective way they can, within the context of the market in which they operated. The two main problems with the market were staffing and the placement market for children in care.
- In the review of the contract, one of the things introduced as part of the routine monthly review with the Council, which was not previously in the contract, but other Children's Trusts had nationally, was the facility that reflected they were doing all they could to avoid children going into care, whilst not avoiding care for those that absolutely needed it. Then there would be a contract adjustment to reflect that growing pressure.
- Birmingham has c.74 children in care per 10,000 children. Compared to a statistical neighbour rate of 82 children in care per 10,000 children, and core cities rate of c.84-86 per 10,000 children. This could be seen as the services having success in children remaining with their families rather than going into care.
- The Council commissioned the Chartered Institute of Public Finance and Accountancy (CIPFA) to undertake a value for money review of the Children's Trust. The outcome from this was that the Children's Trust was providing value for money and more funding may be required to deal with the growing pressures around children in care.
- The onus was on both partners, the Council and the Children's Trust, to demonstrate they were doing the best they could.

Care Placements

- There were not enough placements, including secure placements, and the reduction in mental health beds. One of the consequences of this was the significant rise in care packages per child. The government recognised and was responding to the challenges.
- The Children's Trust needed to recruit more foster carers and further work was needed to demonstrate why fostering was a great choice.
- They were exploring how they could grow more of their own residential provision, and they had ended the contract for the six children's homes that had been contracted out prior to the operation of the Children's Trust.
- They find a suitable placement for 99% of children in care, of the 1%, they need to create bespoke packages, which were challenging. The government was looking to change some of the marketisation and regulation of what was a private sector care market and explore a regional commissioning of placements so that authorities are bound to work together to meet need.

Staff Recruitment and Retention

- Social workers work for agencies because they think it gives them the opportunity to try different local authorities and agencies pay higher rates.
- The Children's Trust cannot do anything the Council cannot do, and vice versa, so they have looked at non-contract incentives.
- They are running a successful Academy programme.
- All the social workers that spoke to Ofsted as part of the inspection felt positive about working for the Children's Trust, which will assist with recruiting social workers.
- If the government makes the proposed changes, then these may assist with this issue.

Ofsted Judgment

- It was thought the Ofsted judgement was a fair one and this included recommendations that will be published in the report and built into their improvement journey.
- Ofsted was pointing to a broader partnership challenge, particularly around domestic abuse. The Children's Trust was escalating concern regarding the way the Home Office's grant money has been allocated around perpetrator's programmes, because other parts of the West Midlands were getting money that Birmingham was not.
- Also, it was about how the money was deployed and whether services support children to stay in families, rather than the funding itself.
- In addition, Ofsted felt that it was putting undue pressure on social workers, who were the only public service present in the family trying to safeguard the children, and manage a perpetrator, who nobody else was managing. Therefore, they need to find investment to fund the perpetrator's programmes that were then free to access, using Ofsted's findings to assist with this.

Short Breaks Provision

- In 2016 the Disabled Children's Service was part of the Education Service. Ofsted made a strong recommendation that it needed to be improved and should sit with all the social care services, as all social care services were governed by the same legislation.
- The guidance from government was explicit about the need to review the packages of care provided, because children's needs change over time and this needs to be reflected.
- The Children's Trust ran a programme of work to look at the Disabled Children's Service, and the need to make the reviews slightly more robust was identified. The new model needed a stronger sense of independent review, and these were reviewing officers independent of the line management of the case, who talk to the relevant stakeholders to form a view of what the right package should be. There were no savings requirements attached to this.
- Information on the packages following the reviews was given to the Committee. It was explained that some of the reasons for the changes were because what existed previously was a model where if you were eligible then you all got the same offer. The reviews highlighted that a number of those nights were not taken, and some did not need two to one care but one to one care. The objective of the reviews was not to save money, but to ensure it was as equitable as it could be and according to need.
- Andy Couldrick expressed regret that it had garnered the concern it has and acknowledged they should have done some things better sooner. For instance, there had been a delay in implementation, and they should have got back to the PCF and asked them to prepare the grounds to implement the new model. They had apologised for this oversight.
- They do want to continue to run a process that was compliant with statutory responsibilities and caused less fear and anxiety, to be equitable, and the Children's Trust will bring in external support to be an "independent pair of eyes" through the Council for Disabled Children, who were respected and will provide an analysis report.
- Sabiha Aziz, Chair of PCF expressed concern as she had flagged this earlier and had not received any response. The terminology of the Independent Reviewing Officer (IRO) was confusing as it was not referring to the same IROs for children in care, but it was the same acronym; and she questioned why the decisions were made without the service user involvement. In addition, no updates had been provided to the PCF since the end of the project to look at the service, which she had sat on; there was a discrepancy with the numbers of packages reduced; and it was felt that the Children's Trust made it difficult for families to access short breaks.
- It was agreed that the Children's Trust would confirm via e-mail the number of reduced packages.

- Andrew Christie commented that for those families that were unhappy, they have the opportunity to raise this via the complaints process.
- The Chair highlighted that parents needed to know how to apply, and it needed to be equitable for all parents. She hoped the review of the process would flag up and address the concerns raised and the Committee would like sight of this.

Partnership Working

- The progress made over the period of the Children's Trust was acknowledged, as was the transparent way it has been reported to this Committee. Andy Couldrick commented that engaging with scrutiny has been a positive part of the improvement journey.
- As the SEND improvement work gathers momentum, and universal services strengthen, then we should see less demand for early help, which should mean demand for social care services reduces.
- Cllr. Karen McCarthy highlighted that the partnership relationship between the Council, Children's Trust and wider partners was very well received by Ofsted, and the new contract with the Children's Trust develops this partnership.
- Andrew Christie suggested that Committee may be interested in the dependences set out in the Ofsted report, and the technical support, such as accommodation that was set out in the contract.
- Sue Harrison appreciated the partnership working with the Children's Trust and progress in the improvement journey. Similarly to the Children's Trust, she would like to develop a positive relationship with the Committee as they go through their improvement journey.

Parents with Children with Mental Health

- Parental distress was a significant challenge, especially as the threshold for formal mental health intervention was quite high, which inevitably means a gap was created. The best way to safeguard and support the vast majority of children was to support the parents, and the Council and the Children's Trust were collaborating with partners in the NHS and the Police to shape services in a different way, and this will take time.

The Youth Offending Service

- The Youth Offending Service was part of the Children's Trust and was built on partnership. It was inspected three years ago and reinspected more recently. Significant improvements have been made, but there was more to do, and the Local Youth Justice Board was there to drive improvements.
- The Chair highlighted that this Committee have discussed the draft plan and the Committee were impressed with the draft plan and the improvement journey.

The Chair highlighted the importance of partnership working, and the link between the work of the Children's Trust and the wider work to improve children's services. She suggested the Children's Trust comes to a future meeting(s) to discuss the Ofsted report and the review of short breaks.

RESOLVED:

That:

- The report was noted.
- Confirmation via e-mail of the number of reduced short breaks packages to be provided.
- The Children's Trust to attend a future committee meeting(s) to discuss the Ofsted report and the review of short breaks.

**7. IMPROVING SERVICES FOR CHILDREN AND FAMILIES IMPROVEMENT PROGRAMME
PROGRESS UPDATE**

(See document No. 4)

Cllr. Karen McCarthy, Cabinet Member for Children, Young People and Families, Sue Harrison, Strategic Director, Children and Families, and Kerry Madden, Strategic Improvement Programme Director, were in attendance for this item.

The Chair welcomed the attendees to the meeting and set the context for the discussion.

Kerry Madden gave the presentation which included the vision; context; and headlines regarding the key pieces of work for workstream A – implement a strong and effective Children and Families Directorate to deliver best in class services for children, young people, families, and communities; workstream B – strengthen approaches to identify, recognise and respond to the vulnerability of specific groups of children and young people; and workstream E – ensure services are sustainable, compliant, and designed to deliver best outcomes for children, young people, families and communities; and risks and challenges.

During the discussion and in response to queries raised by Members, the main points included:

Directorate Key Performance Indicators (KPIs) were Shared:

- These were the KPIs that the Directorate was scrutinised on, the targets were set in the context of the improvement journey, and the SEND KPI's had been approved by the Department for Education (DfE) and were reported to the SEND Improvement Board. Officers will cross reference the KPIs in the report to where they were reported to and include this information in future reports to the Committee.
- On page 57, the number of children and young people (aged 5-16) with an Education and Health Care Plan (EHCP) awaiting specialist placements had no RAG rating and as at quarter 3, there were 278 children and young people, which was of concern. This should be rated red, and it was the first time they were able to accurately measure this. Reassurances were given to the Committee that these children were being overseen and this will be RAG

rated and more detail will be provided next time they report to the Committee on what they were doing to support the children.

- On page 58, the percentage of new EHCPs issued within 20 weeks, excluding exception target had a target of 65%. As this was a statutory target one member of the committee felt it should be set at 100%. Sue Harrison advised that this target had been agreed by the DfE. However, officers could ask about raising the target and 100% would be an aspirational aim if the target was not raised. Officers will continue to show progress against the target, and they were also working on the quality of the EHCPs.
- Queries were raised regarding those who had a mainstream school named by type and were waiting more than 12 weeks for a placement, and when counting starts, as there was a tendency to name the school in an EHCP for a significant point in the future. It was suggested that the Director of SEND and Inclusion could attend a future committee meeting to discuss EHCPs in more detail, including timely and quality EHCPs. However, Cllr. Des Hughes commented that the right placement was more important than the quality of the EHCPs.
- Education Services and the Children's Trust were working well together and there were no children in care that do not have a school place.
- On page 31, the priority to continue to strengthen the support for learning and education provision for children ever known to a social worker was queried, Sue Harrison confirmed this was national terminology and this meant those children that had previously been known to the service, and this will be made clear the next time it was presented to the Committee.
- A member of the Committee felt that the RAG rating colours were confusing as they included blue and grey, and officers explained that this was the Council's corporate RAG rating system, and undertook to look at how this was presented next time to the Committee.
- The timescales for quarter 1, 2 and 3 were unclear, especially as the proportion of eligible pupils transported to school was showing 100% for quarter 3, and Cllr. Des Hughes was aware of someone who was entitled to home to school transport but was not getting this service. Cllr. Des Hughes to provide information outside the committee meeting to Sue Harrison.

Baselining of Services

- Cllr. Des Hughes expressed disappointment that Appendix 2: Baselining of Services within the Children and Families Directorate May/June 2023 did not provide the details of the results of the baselining.

Quarterly reporting

- Sue Harrison was happy to bring other colleagues when these were reported quarterly to future committee meetings, such as officers responsible for SEND and children excluded from school etc.
- They were working with the head teacher of the City of Birmingham School (COBS) regarding his vision and ensuring there was the right provision across the city. COBS was technically full, although some children did not attend, so they needed to work with the families to encourage their children's attendance. It was suggested that this was another area the Committee may be interested in, and the head teacher could attend a future committee meeting with Sue Harrison.

Cllr. Karen McCarthy commented that the KPI's provided were prioritised to explain what was happening, and the data does include where we started from, and we need to be showing progress. Some of the KPI's were set by the DfE, and it was suggested that the Committee may want an officer to attend to provide a better understanding of these. Also, the SEND Accelerated Progress Plan (APP) was an item at the next committee meeting which provided another opportunity for the SEND KPIs to be discussed.

The Chair informed the Committee that if they were going to look at some deep dive areas then there will need to be a discussion regarding what these will be. Cllr. Albert Bore, Chair of the Co-ordinating O&S Committee, was putting through suggestions and proposals to add more value to the work of Scrutiny, which will open up some opportunity to do some deep dive work, and there had been some really good task and finish work undertaken recently. It was thought that the Committee could make use of this approach to look at some of those key areas, and the Committee will have that discussion and come back to officers around some key focus areas.

RESOLVED:

That the report was noted.

8. WORK PROGRAMME

(See document No. 7)

The Chair informed Members that the Birmingham Safeguarding Children's Partnership (BSCP) item had been deferred from this committee meeting due to the timing of their annual report, which was not being signed off now until May 2023. There were already three substantial items on the agenda for the 17 May 2023 committee meeting, and there can be an in depth discussion at the June committee meeting on the list of items to be scheduled, taking onboard what she has said about doing some deep dive work as well.

Cllr. Des Hughes requested feedback from COBS and Sue Harrison had previously suggested that the head teacher accompanies her to a committee meeting.

Cllr. Karen McCarthy asked whether the Committee would like to have a workshop to discuss data in more depth. The Chair commented that they could discuss utilising the different approaches at the informal committee meeting in June. Also, the Committee could do visits to COBS and the Children's Trust, as she was keen to explore different ways of doing things, which would be more beneficial for people delivering those services.

The Chair and the Deputy Chair will look at the key areas to be scheduled.

RESOLVED:

That:

- The work programme was agreed.
- The Chair and the Deputy Chair to look at the key areas to be scheduled.

9. DATE AND TIME OF NEXT MEETING

RESOLVED:

Noted the next meeting was scheduled for 17th May 2023 at 1000 hours in Committee Rooms 3 & 4 and this may overrun due to there being three substantial items on the agenda.

10. REQUEST(S) FOR CALL IN/COUNCILLOR CALL FOR ACTION/PETITIONS RECEIVED (IF ANY)

None.

11. OTHER URGENT BUSINESS

None.

12. AUTHORITY TO CHAIR AND OFFICERS

RESOLVED:

In an urgent situation between meetings, the Chair jointly with the relevant Chief Officer has authority to act on behalf of the Committee.

The meeting ended at 12.10 hours.

EDUCATION AND CHILDREN'S SOCIAL CARE O&S COMMITTEE
ACTION TRACKER 2022-23

Date	Agenda Item	Action	Update
20 Jul 2022	SEND	The update was noted, and the SEND update at the 7 September 2022 committee meeting will include the contributions and points raised today.	Item discussed at the 7 September 2022 committee meeting.
		The SEND Sufficiency Report to be presented to the Committee when completed.	
		The methodology and full data on EHCP Annual Reviews to be forwarded to the Committee.	Information e-mailed to Members on 26 January 2023.
20 Jul 2022	Home to School Transport	Members agreed that a further update on the service will be provided at the 19 October 2022 committee meeting. The update will include the review of the policy, points made around communication, and the reality of how the service performed in September 2022.	Item included on the agenda for the 19 October 2022 committee meeting.
		Sue Harrison will provide Members with the timescale for the review of the policy by e-mail.	Information e-mailed to Members on 21 February 2023.
20 Jul 2022	Youth Justice Plan	Further information on education and improving employment opportunities will be forwarded.	Information e-mailed to Members on 26 January 2023.
		Officers to send useful information to the Committee during the course of what they are doing.	Ongoing.
20 Jul 2022	Work Programme	Cllr Simon Morrall to forward the e-mail he referred to regarding SENDIASS and the Chair will have discussions with officers outside the committee meeting.	SENDIASS was discussed at the 25 January 2023 committee meeting.
7 Sep 2022	SEND	A meeting with the DfE Commissioner for SEND, Director and Chair to be set up.	Meeting with the DfE Commissioner to take place on 12 October 2022.

EDUCATION AND CHILDREN'S SOCIAL CARE O&S COMMITTEE
ACTION TRACKER 2022-23

Date	Agenda Item	Action	Update
		Timescales for when the Committee can expect the SEND Strategy, SEND Sufficiency Strategy, and an Inclusion Strategy was requested.	The SEND Strategy and the Inclusion Strategy went to Cabinet in March. Awaiting confirmation of Cabinet date for the SEND Sufficiency Strategy.
		Information on how many children are affected by part-time timetables, and figures on children who haven't got a suitable school place, and support that is being provided was requested.	Included in the discussion at the 22 February 2023 committee meeting and actions from this are detailed under the 22 February 2023 committee meeting.
		Reports on the SEND Strategy, SEND Sufficiency Strategy and Inclusion Strategy to be brought to the Committee following approval by Cabinet.	The SEND Strategy and the Inclusion Strategy went to Cabinet in March. Awaiting confirmation of Cabinet date for the SEND Sufficiency Strategy.
7 Sep 2022	Cabinet Member for Children, Young People and Families	The Director to provide the details of when the BEP contract was renewed and the duration of the contract.	Information e-mailed to Members on 21 November 2022
		Tim Boyes, Chief Executive, BEP to be invited to a future meeting.	Tim Boyes attended the 22 February 2023 committee meeting for the attainment summary.
		The structure chart for the Children and Families Directorate to be provided.	Emailed on 10 October 2022 the leadership structure for the Children and Families Directorate & was awaiting what sits below the new AD portfolios. Information was e-mailed on 4 April 2023.
		Details of baselining of services within the Directorate to be shared with the Committee.	Kerry Madden's update presentation to the committee on 4 January 2023 explained that baselining had informed the detail in the Improvement Plan. The summary plan e-

EDUCATION AND CHILDREN'S SOCIAL CARE O&S COMMITTEE
ACTION TRACKER 2022-23

Date	Agenda Item	Action	Update
			mailed to Members on 24 January 2023 also references this. The information on baselining and how it contributed to the Improvement Plan will be incorporated when an update on the Improvement Plan is given at the 5 April 2023 committee meeting.
		Details for the funding bids for three free schools including timescales to be provided.	E-mailed Members the information on the 29 October 2022
		Information on how many excluded primary school children have unmet SEND needs / EHCPS was requested.	Included in the discussion at the 22 February 2023 committee meeting and actions from this are detailed under the 22 February 2023 committee meeting.
		The issues raised regarding the Children's Trust to be highlighted to them before the meeting in November 2022 so these can be covered.	E-mailed the Children's Trust.
		Information on the number of places that Special Schools accept above their Planned Admission Number. Do the plans for future Special School places take into account these numbers in addition to places required to meet the needs of children who are currently not in a Special School?	E-mail sent to Members on the 19 October 2022.
7 Sep 2022	Work Programme	Tim Boyes, Chief Executive, BEP to be invited to a future committee meeting (also agreed at the above item).	Tim Boyes has been invited to attend the 22 February 2022 committee meeting for the attainment summary. Other issues regarding BEP can be raised at this meeting.
		The Chair to meet with the DfE Commissioner and Director to discuss the SENDIASS review.	Meeting with the DfE Commissioner took place on 12 October 2022.

EDUCATION AND CHILDREN'S SOCIAL CARE O&S COMMITTEE
ACTION TRACKER 2022-23

Date	Agenda Item	Action	Update
19 Oct 2022	SEND Commissioner	The Cabinet Member, Children, Young People and Families, to report back on how the Improvement Board fits in with the Council's overall governance and decision making structures.	E-mailed Members the information on 27 February 2023.
		The Strategic Director, Children and Families to bring the Directorate's Improvement Plan to a future committee meeting.	Added to the work programme for 4 January 2023 committee meeting.
		The Commissioner to attend a committee meeting early next year.	The Commissioner attended the 25 January 2023 adjourned committee meeting.
19 Oct 2022	Home to School Transport	Janie Berry, City Solicitor, to share reputational issues and any cases the Committee should be aware of outside the committee meeting.	E-mailed Members the information on 27 April 2023.
		Janie Berry, City Solicitor to be added to the work programme to update Members on tribunals and delays etc., and feedback on how the role of Legal Services contributes and makes risk informed decisions.	Added to the work programme under 'to be scheduled'.
19 Oct 2022	Work Programme	SENDIASS to be an item on the November 2022 committee meeting.	Added as an agenda item.
		The BSCP, and the Children and Young People Plan to be moved to the January 2023 meeting.	Work Programme updated.
		The Commissioner to write to the Chair to explain the concerns of the SENDIASS item in November 2022.	SENDIASS was discussed at the adjourned 25 January 2023 committee meeting.
		Student attendance at school during their period.	Added to the work programme - to be scheduled.
		The Young People's Substance Use Service to be added to the work programme.	Programmed for the 17 May 2023 committee meeting.
30 Nov 2022	Children's Trust	A paper on unregulated placements.	Information e-mailed to Members on 26 January 2023.
		Information on the cost increases if the Early Help offer was not in place.	Information e-mailed to Members on 26 January 2023.

EDUCATION AND CHILDREN'S SOCIAL CARE O&S COMMITTEE
ACTION TRACKER 2022-23

Date	Agenda Item	Action	Update
		Cost of care and general information on the Children's Trust budget and spend.	Information e-mailed to Members on 26 January 2023.
4 Jan 2023	Children and Families Directorate Improvement Plan	Quarterly updates to be provided.	The work programme has been updated and the next update is scheduled for 5 April 2023.
		Update on the Directorate's budget to be provided.	Information e-mailed to Members on 24 January 2023.
		Details and the membership of the Head Teachers Reference Group to be e-mailed.	Details e-mailed to Members on 19 January 2023.
		A directory of the Local Offer to be provided.	Information e-mailed to Members on 8 February 2023.
22 Feb 2023	Action Tracker	The Children and Families Directorate structure chart to be provided (originally requested 7 Sep 2022).	E-mail on 4 April 2023.
		Details of the Children and Families Directorate Improvement Plan to be provided.	The next update is scheduled for 5 April 2023 committee meeting.
22 Feb 2023	School Attainment and School Improvement	More information on the school's consortia and examples of BEP's thematic projects that have helped schools across the city.	E-mailed on 27 March 2023.
		Further information on COVID 19 Catch Up Premium.	E-mailed on 27 March 2023.
		The Developing Local Provision (DLP).	E-mailed Members on 13 March 2023.
		The recruitment and retention rates of teachers in the city in comparison to other areas.	
22 Feb 2023	School Exclusions, Part-Time Timetables, & Unsuitable School Places	Officers to come back in six months with an update on the progress of the work undertaken.	Added to the Work Programme under 'to be scheduled'.
		The following information to be provided:	Information e-mailed on 4 April 2023.

EDUCATION AND CHILDREN'S SOCIAL CARE O&S COMMITTEE
ACTION TRACKER 2022-23

Date	Agenda Item	Action	Update
		<ul style="list-style-type: none"> • The total number of children currently permanently excluded and temporarily excluded. • The number of children with SEND currently excluded. • A breakdown of the figures for children suspended for less than five days and more than five days. • The current figures as the information showed that 3,000 pupils per 10,000 pupils had been suspended over the timeframe given and half of whom had an Education, Health, and Care plan (EHCP). • Children without a school place were referred to the Home Bridging Team and reassurance was requested that every child had a package of support and how many of these had a home tutor. • More information about the School Admissions (In-Year Admissions) team work to support children back into school, and the number of pupils in-year they support. • The part-time timetables and the ethnicity data only gives percentages, and the numbers were requested. • How long pupils have been on part-time timetables. • Whether those that were on part-time timetables have an unmet need (Part-time timetable: Reasons slide). • The number of children with an EHCP in a mainstream school who were awaiting a mainstream place. 	
5 Apr 2023	Children's Trust	Confirmation to be provided via e-mail of the number of reduced short breaks packages.	

EDUCATION AND CHILDREN'S SOCIAL CARE O&S COMMITTEE
ACTION TRACKER 2022-23

Date	Agenda Item	Action	Update
		The Children's Trust to attend a future committee meeting(s) to discuss the Ofsted report and the review of short breaks.	The Children's Trust will attend the May committee meeting to provide a precise of the Ofsted report. The review of short breaks has been added to the work programme under 'to be scheduled'.
5 Apr 2023	Improving Services for Children and Families Improvement Programme Progress Update	<p>The next quarterly update is due July/September 2023 and information to include:</p> <ul style="list-style-type: none"> • Where the KPIs were reported to (e.g. SEND Improvement Board). • The number of children and young people (aged 5-16) with an Education and Health Care Plan (EHCP) awaiting specialist placements to be RAG rated and more detail to be provided of what they were doing to support the children. • The priority to continue to strengthen the support for learning and education provision for children ever known to a social worker, meant those children that had previously been known to the service, and this will be made clear. • Officers to look at how the RAG ratings were presented. 	Added to the work programme under 'to be scheduled'.
		Cllr. Des Hughes to provide information (with parental permission) on the person who was entitled to home to school transport but was not getting this service to Sue Harrison.	Cllr. Des Hughes received an update from Home to School Transport / Children's Travel Service two hours after the committee meeting.

Birmingham City Council

Education and Children's Social Care

Overview and Scrutiny Committee

Date: 17th May 2023



Subject: Sexual Health Treatment & Prevention Services delivered by Aquarius Action Projects (Part of the Richmond Fellowship)

Report of: Dr Justin Varney, Director for Public Health
Cllr Khan, Cabinet Member, Health & Social Care

Report authors: Karl Beese, Commissioning Manager, Adult Public Health Services

1 Purpose

- 1.1 To provide the Education and Children's Social Care Overview and Scrutiny Committee with an Annual overview on the performance of the Young Peoples Substance Misuse Service commissioned by Public Health and delivered by Aquarius Action Projects (part of the Richmond Fellowship).

2 Recommendations

- 2.1 That the Committee notes an overview of the Birmingham Young Peoples Substance Misuse Service that will be provided by Public Health, Commissioners and Aquarius on 17th May 2023 by way of the information detailed under Appendices embedded under Point 6.

3 Any Finance Implications

- 3.1 None, the Birmingham Young Peoples Substance Misuse Service is funded through the Public Health Grant that is received by the Council.

4 Any Legal Implications

- 4.1 None, the Health and Social Care Act 2012 and associated regulations transferred the responsibility for public health from the NHS to local authorities from April 2013. Under the HSC Act 2012, local authorities have a legal duty to protect children from harm, reduce health inequalities and improve the health of their local population by ensuring that there are public health services aimed at reducing drug and alcohol misuse and is a condition of the Public Health Grant that is received into the Council.

5 Any Equalities Implications

- 5.1 None, the Birmingham Young Peoples Substance Misuse Service is open to anyone in Birmingham (predominantly 13+) and is not discriminatory towards any of the 9 protected characteristics detailed in the Equality Act 2010.

6 Appendices

Appendix 1: BCC Presentation to O&S Committee



BCC YP Substance
Misuse - Overview &

Appendix 2: Aquarius Presentation



Aquarius O&S
17.05.2023 Final.pptx

Appendix 3: Aquarius Supporting Information



Aquarius YP Service
2023 - Overview & Sc

Substance Use: Birmingham's Young Peoples Treatment Service

Presentation to Education and Children's
Social Care Overview & Scrutiny Committee
Wednesday 17th May 2023



Overview: Young People's Substance Use Service

- Non-Statutory Service; Under the HSC Act 2012, local authorities have a legal duty to protect children from harm, reduce health inequalities and improve the health of their local population by ensuring that there are public health services aimed at reducing drug and alcohol misuse.
- Delivered by Aquarius Action Projects (part of the Richmond Fellowship) with a contract end date of 31st March 2024 which aligns with procurement with the Adult Substance Use Service.
- Key commissioning intentions: Minimise the misuse of drugs, alcohol and tobacco & Reduce risk/vulnerabilities in a holistic approach.
- 2023/24 contract value: £696,555 (£673,000 in 2022/23 – 3.5% uplift). For the period 2018/19 to 2022/23 the yearly contract value had been static at £673,000.

Overview: Young People's Substance Use Service

- Aquarius work with Young People up to the age of 25 (previously 18), this aligns with other YP Services e.g. Forward Thinking Birmingham, Housing; St Basils Youth Hub/Supported Living options and Preparation for Adulthood.
- Contract Governance managed by the contract management framework with oversight via the Triple Zero Implementation Board and the PH Contracts Governance Board.
- Aquarius Utilise a comprehensive governance framework for the delivery of child/YP safeguarding. Work in accordance with the legal frameworks of The Children's Act 2004/The Care Act 2014/Working Together 2018/Birmingham Safeguarding Children's Partnership's (BSCP) Policies and Procedures.
- All staff receive specific mandatory training and supervision on Child Exploitation. built around the Aquarius child safeguarding governance framework and informed by; national guidance documents on gang activity, serious crime, knife crime, Prevent, Missing children, County Lines, and CSE.

Additional Funding from Additional Funding from the Office of Health Inequalities and Disparities (OHID)

Supplemental Substance Misuse Treatment and Recovery Grant

- This grant is to address the aims of the treatment and recovery section of the UK Government's 2021-2031 Drug Plan (From Harm to Hope) published in December 2021. This supplemental funding is to support improvements in the quality and capacity of drug and alcohol treatment 2022/23 to 2024/25.
- Additional funding: £535,865 in 2022/23, £919,611 (approx. 18.5% of the total grant of £4,946,496) in 2023/24 and at least £919,611 in 2024/25.
- The additional funding has facilitated the recruitment of additional practitioners and supervisory support which will support improvements in the quality and capacity of young people's drug and alcohol treatment in Birmingham.
- This will include; development of a YP Transitions Team, enhanced engagement with criminal justice, enhanced provision of harm reduction, increased treatment capacity, increased support for physical and mental health issues.

Future Plans

- The Triple Zero City Strategy was approved by BCC Cabinet on 21st March and along with the Needs Assessment & Executive Summary and Consultation Analysis 'You Said, We Did' will be officially launched shortly and will be published on the BCC webpage.
- In preparation for the existing contract ending on 31st March 2024, Public Health and Commissioners have developed an Implementation Plan which includes a procurement timeline, co-production with citizens and key partners, market engagement to develop the service specification and commissioning/procurement strategy development.
- Working with BCC Procurement and Legal in relation to the most appropriate and cost effective route to market which will take into account the proposed introduction of the NHS Provider Selection Regime proposed for July 2023.

Aquarius:

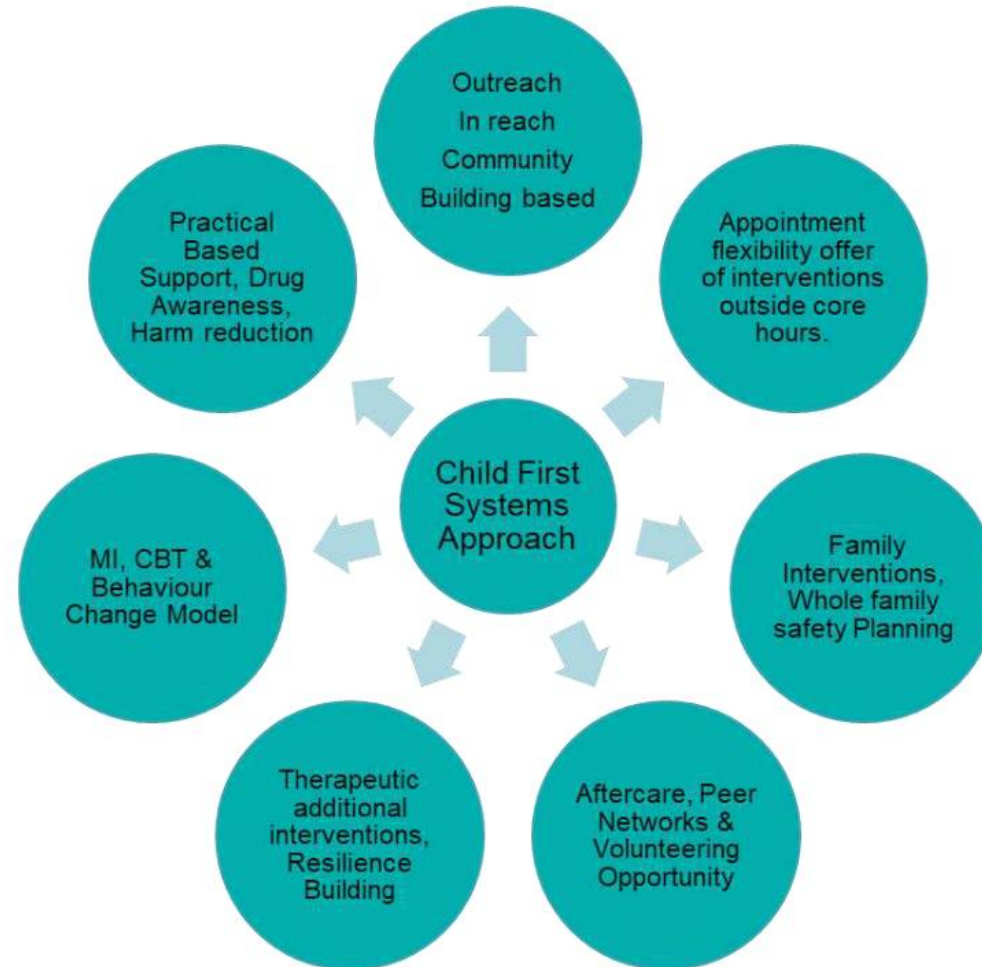
Birmingham's Young Peoples Treatment Services

OSC – 17th May 2023

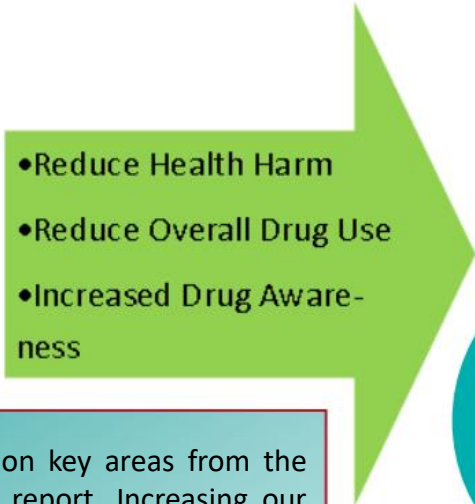


Aquarius Young People's Substance Misuse Service

Aquarius YP Service

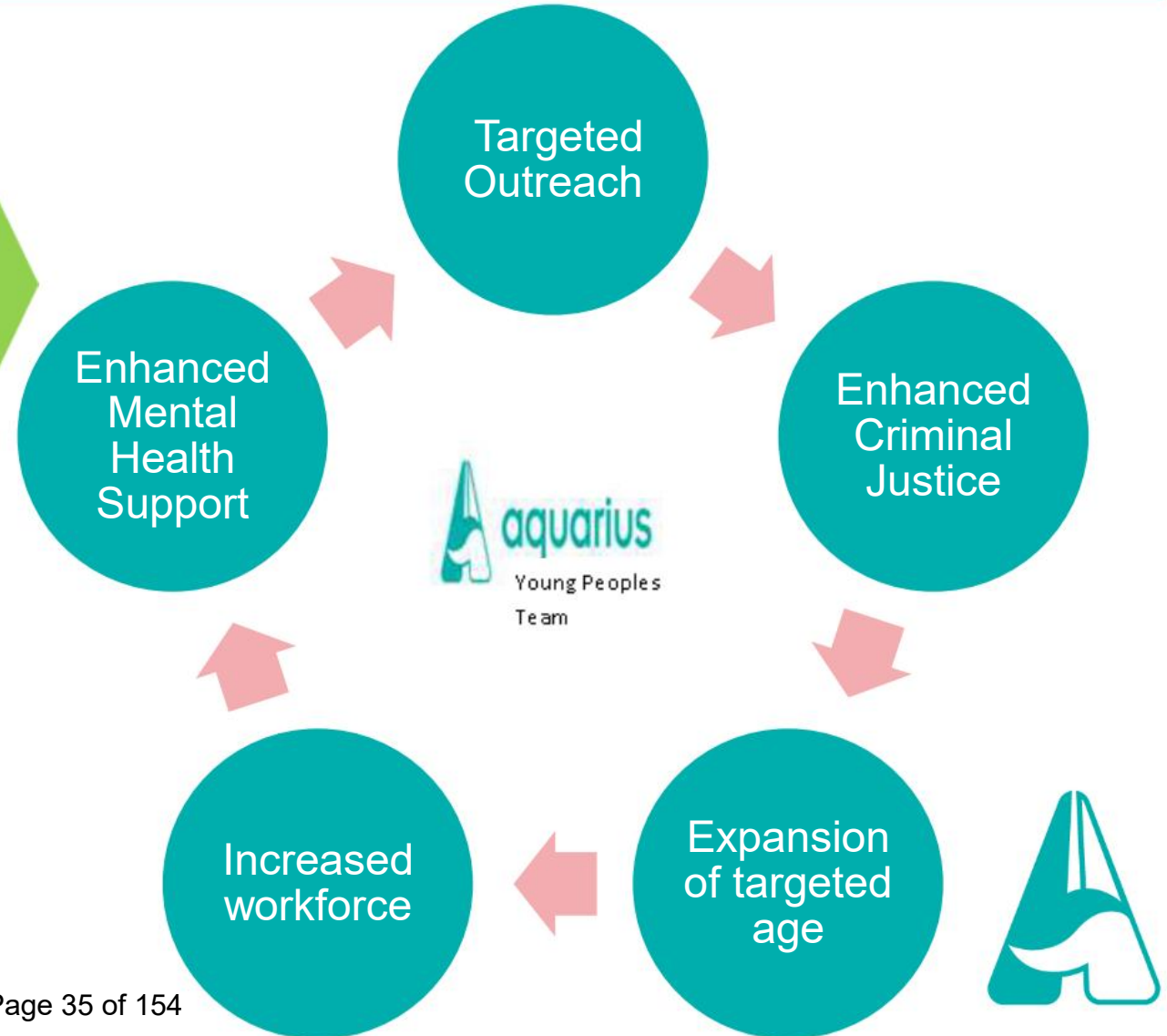


OHID – Extended Offer

- 
- Reduce Health Harm
 - Reduce Overall Drug Use
 - Increased Drug Awareness

With the additional OHID uplift we are working on key areas from the Harm to hope strategy & the Dame Carol Black report. Increasing our workforce has enabled us to focus on:

- Enhancing our existing youth Justice integrated offer and building in more targeted criminal justice work
- Creating a transitions team that aims to Marginalize the gap between Young people exiting the YP substance treatment at 18 and accessing support 18 +
- Creating a team that can deliver Early interventions in group work settings, targeted drop ins and enable engagement into treatment opportunities through assertive and targeted In reach & Outreach, with an additional focus on key areas and in supporting the night-time economy i.e., City Hots spots, Night club areas
- Improving mental health provision in house and improved pathways into external Mental Health Treatment Providers.



Aquarius YP Service Model

Self-Referrals, Referrals from Parents or Carers

Referrals via Aquarius phonline, website or email from professionals

Referrals generated through outreach events, In reach, triage & drop ins

Local Single Point of Access (Spoc)
Information advice & guidance, assessment of risk level, if high risk is identified case allocated immediately within 24 hours for assessment. Case is assessed for substance use support need (same day as received Mon-Fri) if suitable file opened on the system & transferred for allocation.

Case is discussed in allocation meeting, allocated to staff member dependent on age locality, any additional requests from the referral i.e. learning need, cultural sensitivities, gender specific worker

Brief Intervention Group Work

Focal Client Intervention

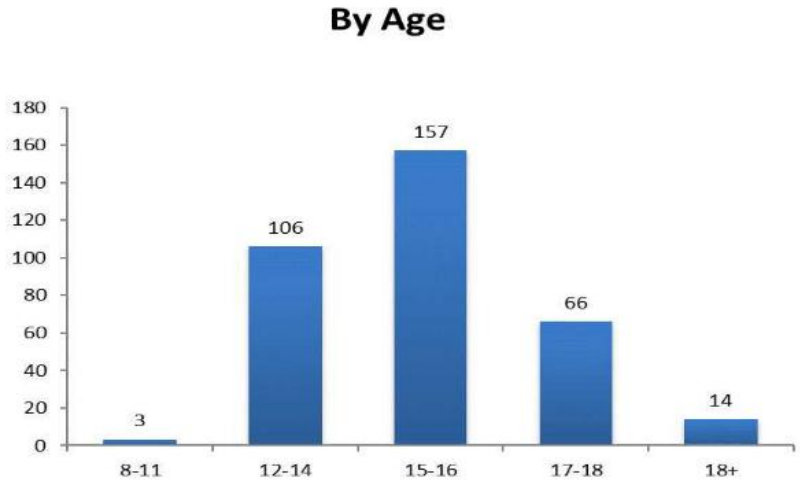
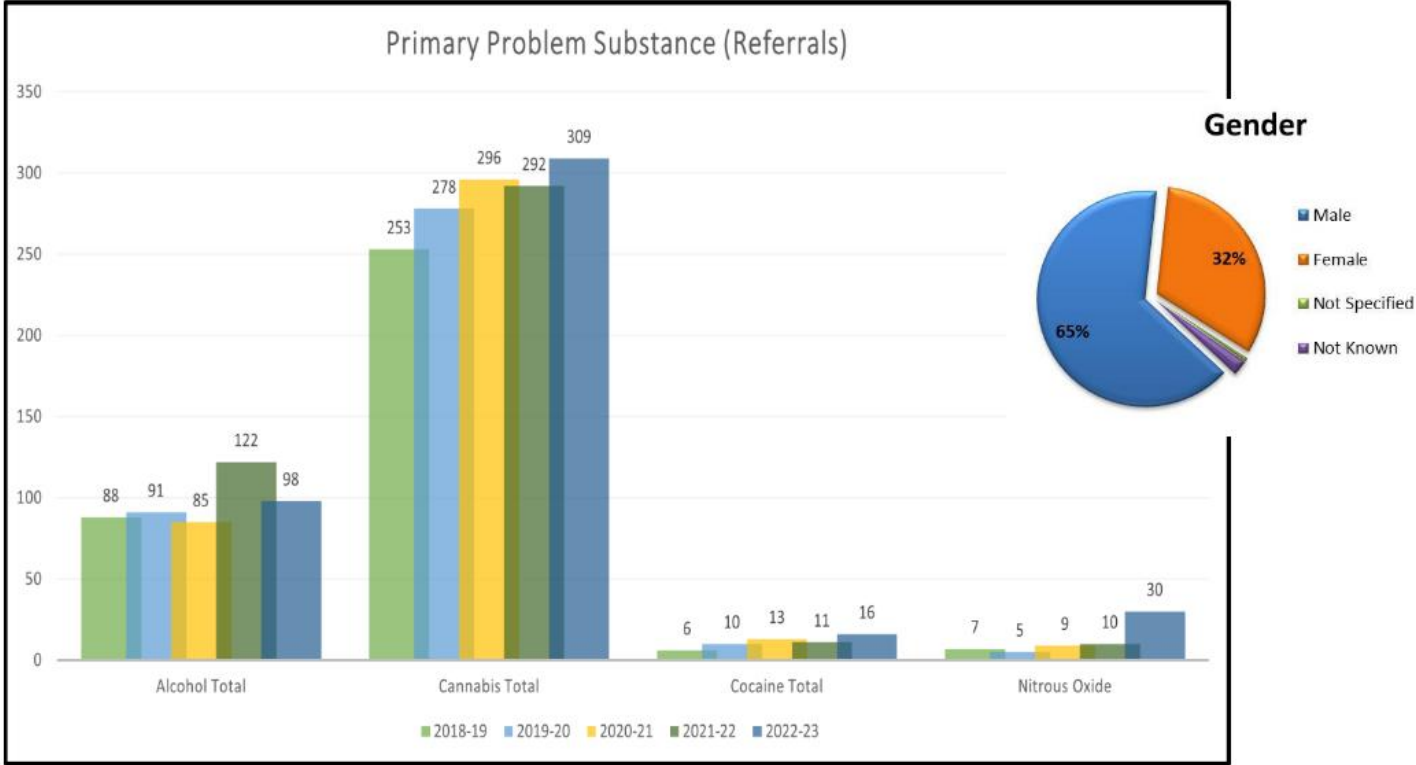
18-25 Transitions Team

Affected Other / Choices

After Care - Peer Support, Onward Referrals, Service User Network, additional group work



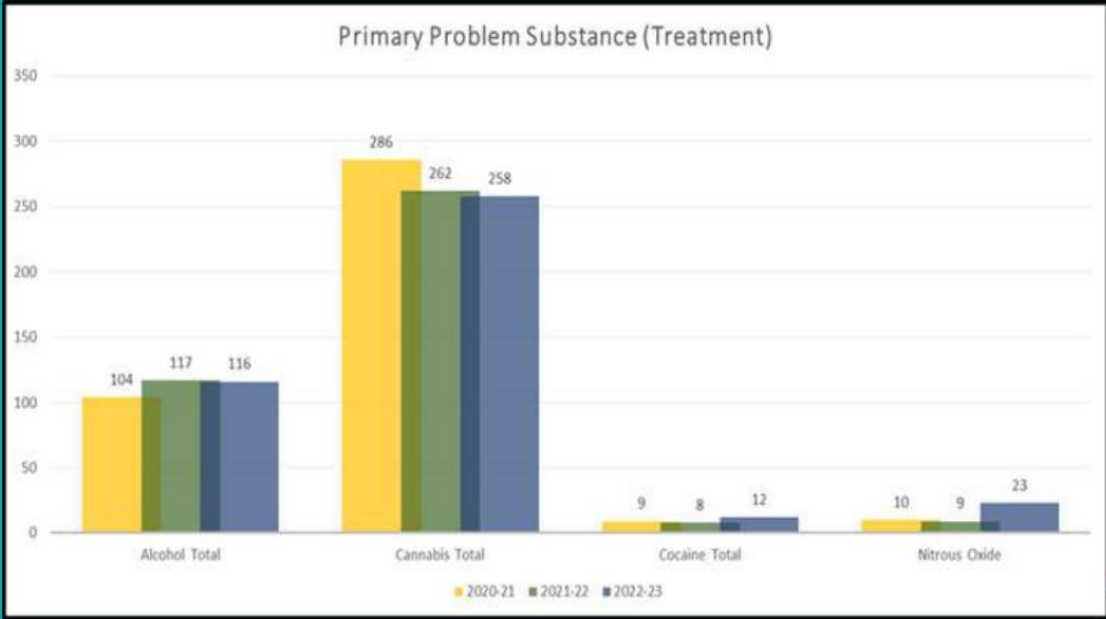
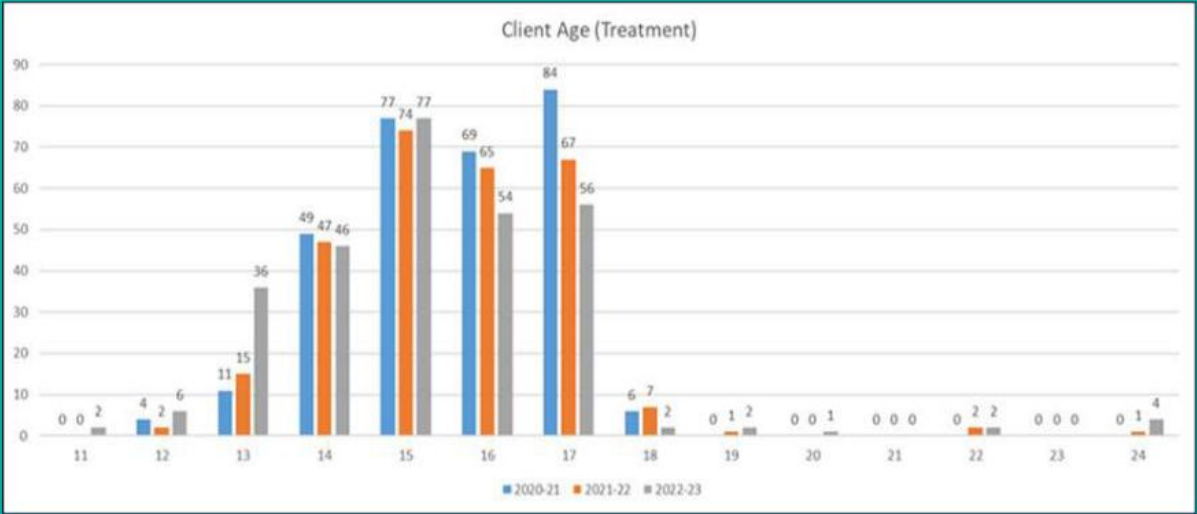
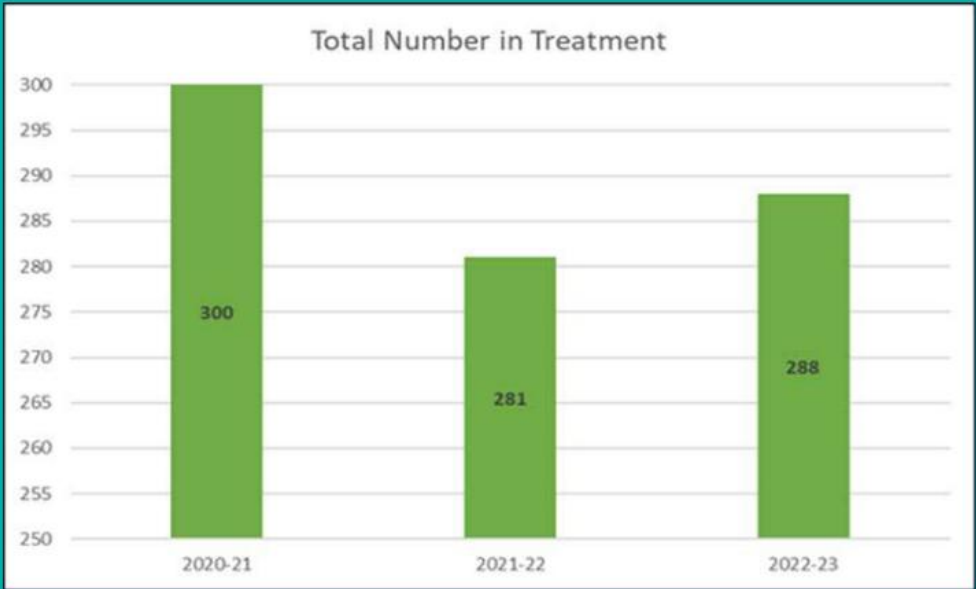
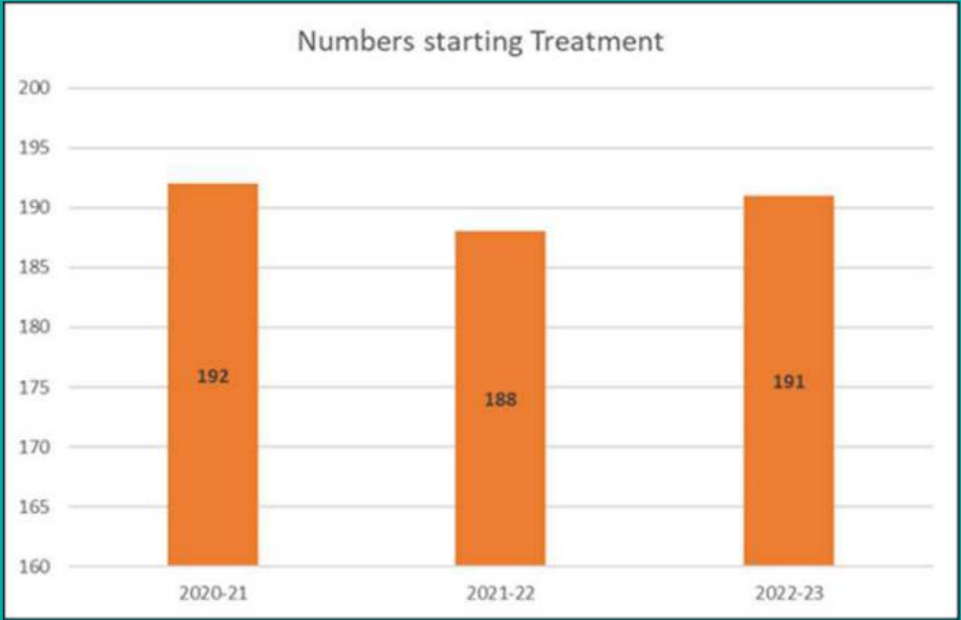
Referral Data



Our largest number of referrals are consistently from Secondary Schools & Social worker referrals (BCT) & are for Young People aged 15-16

We have seen a significant rise in referrals for Nitrous Oxide. We believe this is because of a significant rise in awareness / profiling of Nitrous Oxide, giving referrers an indication of what this substance is and the dangers it can present to young people.

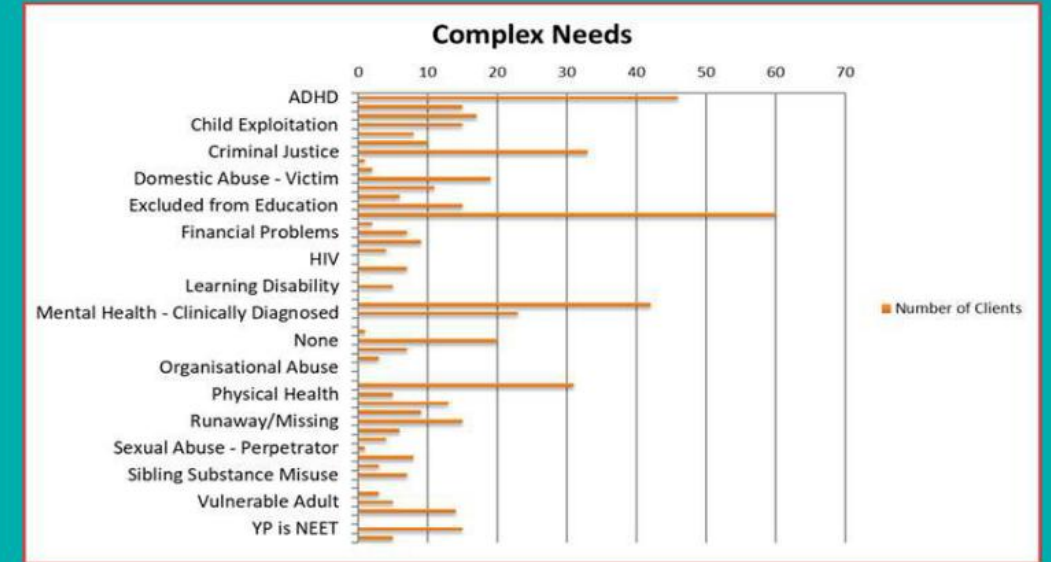
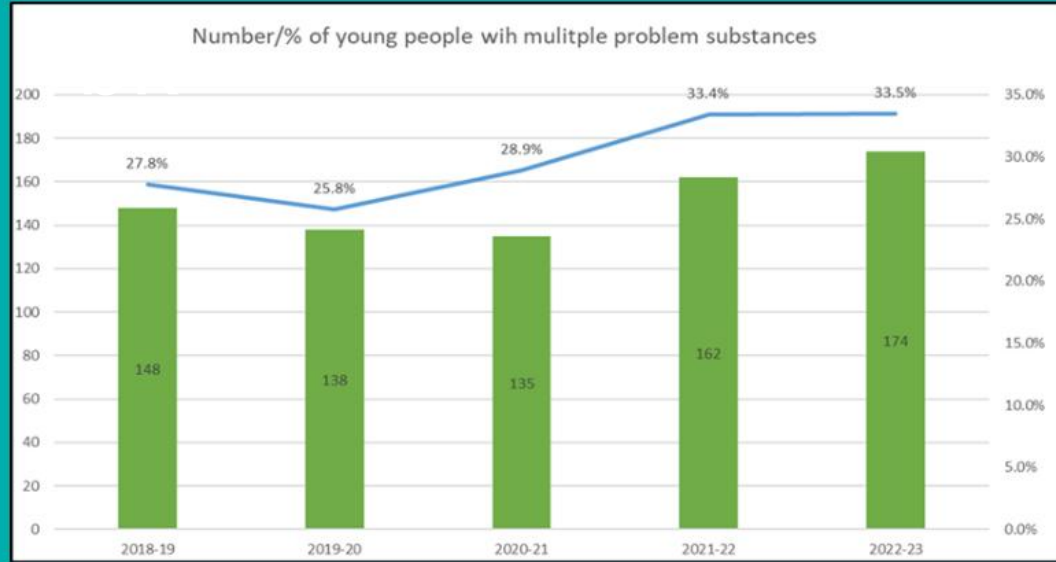




In Treatment Data



Multiple Complexities & Treatment Data



In Service Outcomes Star Snap Shot 2022 -23

Measure	Definition	Number	%
Alcohol - Positive change or Stabilised	number reporting stabilisation or positive change on their latest Outcome Star	123	79
Drugs - Positive or Stabilised number reporting stabilisation on their latest Outcome Star	number reporting and an increase or stabilisation on their latest Outcome Star	131	86
Emotional Health - Positive or Stabilised	number reporting and an increase or stabilisation on their latest Outcome Star	127	85



Complex Needs

In 2022–23 34 young people disclosed they were impacted by CCE - Child Criminal Exploitation, 111 that they were involved in crime, and 20 young people disclosed gang activity

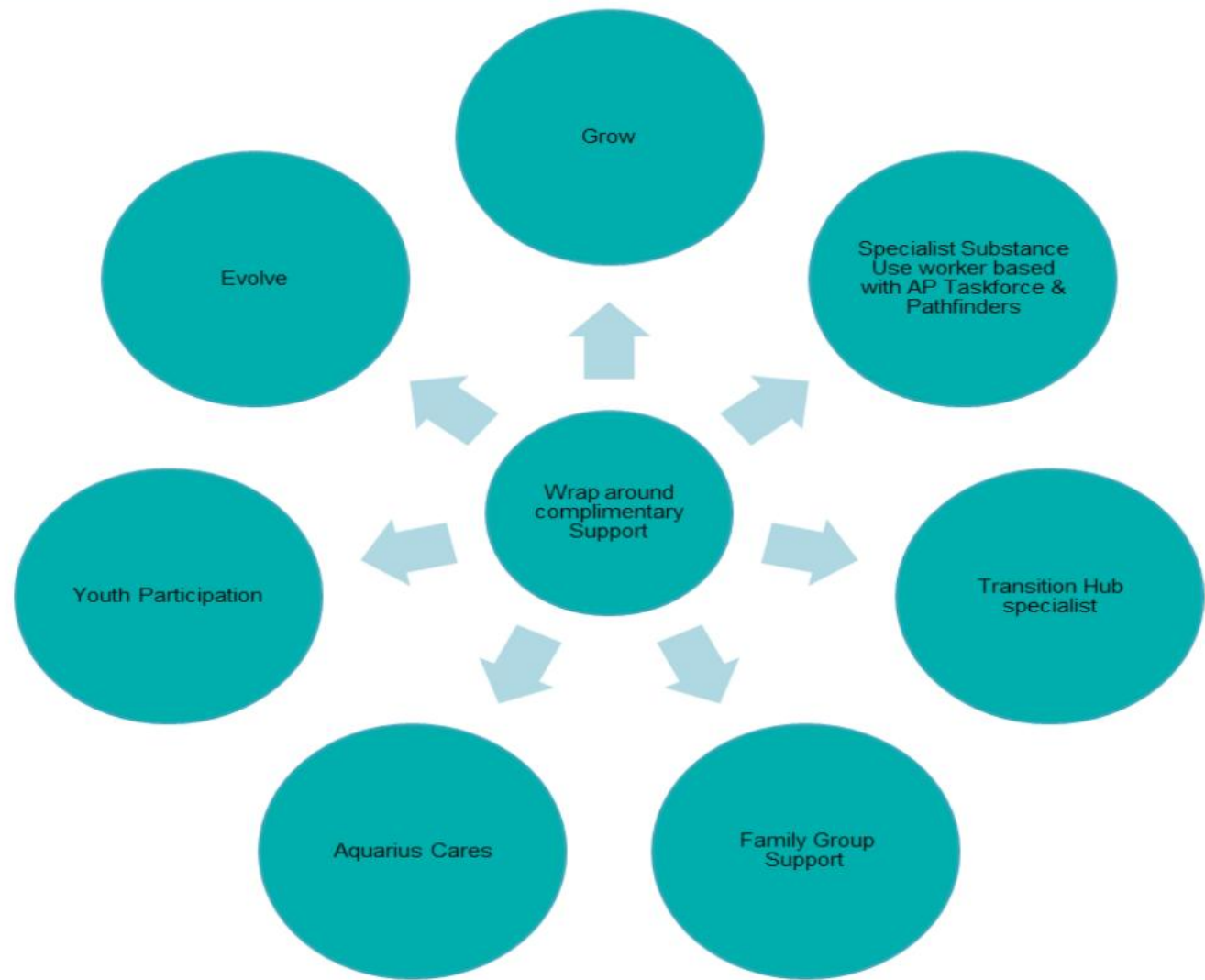
We have an integrated pathway of support with Birmingham Youth Offending teams (YOS) across Birmingham. We support the VRU and are part of the AP Taskforce. We are part of the EMPOWERU hub exploitation daily briefings and have referral pathways for exploitation with The Children's Society & Red thread. Our staff attend regular CCE—Child Criminal Exploitation & CSE—Child Sexual Exploitation training refreshers and are trained to screen & refer for CCE & CSE. Our team can deliver low level Child Exploitation interventions with consultancy from our integral service offer- Barnardo's Exploitation Worker. We stay connected in local and national Exploitation working groups and provided some consultancy for the Children's society—gender bias and exploitation report.

In 2022–23, 140 young people in service reported they had a mental health need. 83 young people at referral reported a mental health need

We have an integrated pathway of support in service with FTB Substance Misuse. Our staff can access mental health resources and consultancy through both our Richmond Fellowship and Forward-Thinking Birmingham partnerships. This consultancy alongside our fundamental methodology of CBT, Motivational Interviewing and behaviour change theory allows our staff to support with a young person's low level mental health need and their journey into accessing mental health Treatment providers if needed. We are currently working in partnership with Manchester Met University and supporting with compiling research into their mental health and substance misuse report & findings will assist with piloting mental health resources that can be used in service with our staff.



Additional Added Value



Questions & Answers

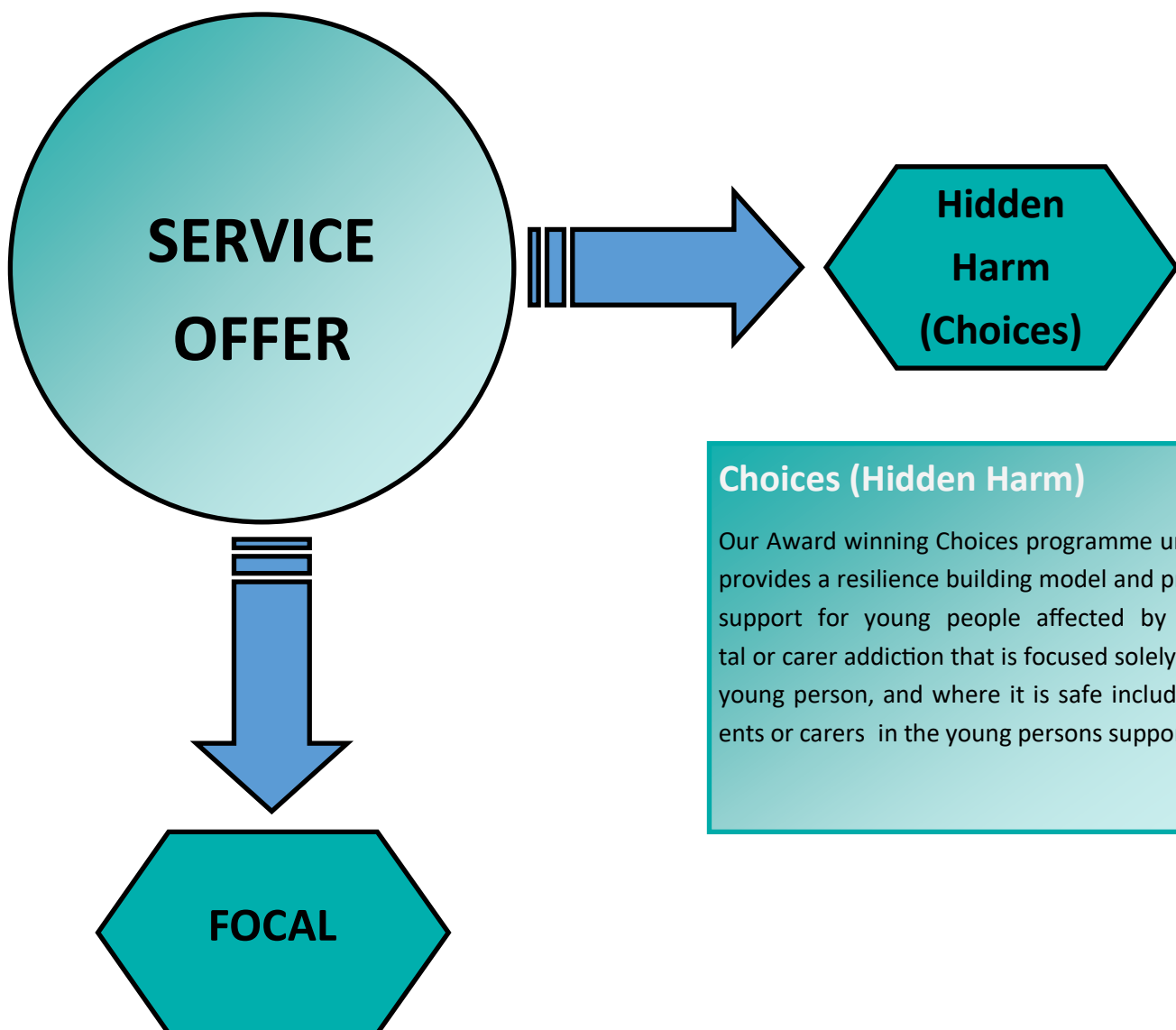


**Overcoming the harms caused
by alcohol, drugs and gambling**

Aquarius YP SPOC: 0121 622 7780



Aquarius Young People's Substance Misuse Service



Choices (Hidden Harm)

Our Award winning Choices programme uniquely provides a resilience building model and practical support for young people affected by parental or carer addiction that is focused solely on the young person, and where it is safe includes parents or carers in the young persons support plan.

Birmingham Young People's Drug and Alcohol Service (Focal/Core service)

Working closely with our partnerships this enables mental health, child exploitation, youth homelessness screening and support to be provided to all young people we work with alongside substance misuse support. Additional funding from OHID has allowed us to invest in more staff, enabling us to provide enhanced criminal justice & mental health support and build on networks for young people. Through OHID we are now able to deliver additional targeted outreach and group work to reach more young people and engage them into treatment. Through OHID we are now able to extend our young peoples support programme to young people aged 18 –25, ensuring they can access age appropriate support and a smooth transition into adult treatment if required.

Aquarius Young People's Substance Misuse Service

- From the point of access into treatment a menu of provision, support and aftercare is provided to the young person, and they can access this support at any point throughout their treatment. For example, this may be to access support from mental health provisions or to access specialist advice regarding exploitation or homelessness.
- Our team work with a systems approach. Putting the child first means for us, offering flexible hours to accommodate the young person, also changing the way we approach work with individual young people, to accommodate their learning styles i.e. Incorporating Play therapy, accommodating Kinaesthetic learning styles, at referral acknowledging any additional learning need.
- If a young person disengages or does not engage immediately upon referral, time is given to seek further support and guidance this can entail seeking assistance from partnership organisations including statutory services. We work hard to encourage engagement and cases in our team remain open to us to accommodate this.
- If a young person is referred into our service and is deemed high risk, a member of the team will contact the young person within 24hours of receiving the referral and discuss an appropriate package of support immediately.

At the point of referral our team source the best way to engage young people this could be :

At point of engagement
meeting the YP with
someone they are com-
fortable with present i.e.:

A friend or sibling
A trusted Adult

Accommodating joint
engagement visits : A
young person is more
likely to engage if they
visually see who they
are been referred to

Meeting the young
person in a setting they
feel comfortable in.

Note : Interventions
will only take place in a
confidential setting

Aquarius Young People's Substance Misuse Service

- We have seen an increase in referrals for Nitrous Oxide. As a service we believe this may be due to a raised profile of Nitrous Oxide in the local and national media, and better knowledge and awareness of Nitrous Oxide from professionals making the referrals : i.e., they know what to look out for.
- As a service we made a conscious effort to accept referrals for Vaping. This is due to referrers not knowing what Young People are vaping— there is always the possibility of young people vaping THC. Additionally we know from experience and data that at the point of referral young people often only disclose 1 substance and during treatment young people further disclose multiple drug use. We are unable to refer to smoking cessation as vapes are provided as an alternative to smoking, so our focus is given to addiction awareness & total cessation is sought.
- We saw a peak in referrals for Alcohol use after the lockdown restrictions had been lifted and referrals for alcohol continue to be higher than in 2018. We have also seen a rise in cocaine use in young people and cocaine use is still often associated with poly drug use—Alcohol & Cocaine use. As a service we recognise the dangers to vital organs—Coca ethylene is produced and we will continue to raise the profile of this danger.

An increase from 1.9%
(2018- 19)
to 8.1% (2022-23)
In referrals for Nitrous
Oxide

An increase from
0 (2018- 19)
to 77 (2022-23)
In referrals for Vaping

An increase from
1.6% (2018- 19)
to 4.3% (2022-23)
In referrals for Cocaine

We received 309 referrals for cannabis in 2022-23 , interventions with young people often result in poly drug use disclosure.

33.5% (174 young people) Disclosed Multiple Drug Use (more than 3 other substances) in treatment last year.



Aquarius Young People's Substance Misuse Service

Measure— YPOR - Young Peoples Outcomes	Definition	Number	%
Number of service users who have reduced their drug/alcohol use after 12 Weeks in Treatment	the number reporting a reduction their on their Review YPOR	121	64 %
Number of service users who have reduced their drug/alcohol use upon Successful Exit from Service	the number reporting a reduction on their Exit YPOR	64	58 %
Number of service users reporting abstinence from drug/alcohol use upon Successful Exit from Service	the number reporting abstinence on their Exit YPOR	21	19 %

In treatment a young persons outcome are measured using Outcomes Stars (Internal evaluation systems) and using YPORS— External National Young Peoples Outcomes Recording System .

We measure a young persons progress at assessment, 3 monthly intervals (More frequent if significant change has occurred)and at exit.

Because we are client led, we aim for significant change behaviour and know that a young person does not always seek abstinence.

We know by using the Treatment Outcomes Stars , which looks holistically at all contributing factors that may feed substance use, that significant changes in behaviour will result in reduced substance use or abstinence.

Measure — Treatment Outcomes Star.	Definition	Number	%
Alcohol - Positive change or Stabilised	number reporting stabilisation or positive change on their latest Outcome Star	123	79
Drugs - Positive or Stabilised number reporting stabilisation on their latest Outcome Star	number reporting and an increase or stabilisation on their latest Outcome Star	131	86
Emotional Health - Positive or Stabilised	number reporting and an increase or stabilisation on their latest Outcome Star	127	85

Service Provider Specialisms

In 2022—2023 155 young people in service disclosed they were affected by family members substance use.

For Young people who present to our service as affected others, the parental substance use of choice is often Alcohol use followed by Opiate use. We continue to use our award winning Choices model when working with children and young people impacted by parental substance use.

Young people who use substances are often exposed to intergenerational substance use. Our staff are able to uniquely combine the choices programme with motivational interviewing, harm reduction and Drug awareness to delicately acknowledge family behaviour patterns and support in breaking the cycle of a young persons substance use.

In addition our Staff are training with MPACT to compliment our existing 5 step model which works holistically to support the whole family unit.

In 2022 –23 34 young people disclosed they were impacted by CCE - Child Criminal Exploitation , 111 that they were involved in crime, and 20 young people disclosed gang activity

We have an integrated pathway of support with Birmingham Youth Offending teams (YOS) across Birmingham. We support the VRU and are part of the AP Taskforce. We are part of the EMPOWERU hub exploitation daily briefings and have referral pathways for exploitation with The Children's Society & Red thread.

Our staff attend regular CCE—Child Criminal Exploitation & CSE—Child Sexual Exploitation training refreshers and are trained to screen & refer for CCE & CSE. Our team are able to deliver low level Child Exploitation interventions with consultancy from our integral service offer- Barnardo's Exploitation Worker. We stay connected in local and national Exploitation working groups and provided some consultancy for the Children's society—gender bias and exploitation report.

In 2022– 23 , 140 young people in service reported they had a mental health need.

83 young people at referral reported a mental health need

We have an integrated pathway of support in service with FTB Substance Misuse.

Our staff are able to access mental health resources and consultancy through both our Richmond Fellowship and Forward Thinking Birmingham partnerships .This consultancy alongside our fundamental methodology of CBT, Motivational Interviewing and behaviour change theory allows our staff to support with a young persons low level mental health need and their journey into accessing mental health Treatment providers if needed. We are currently working in partnership with Manchester Met University and supporting with compiling research into their mental health and substance misuse report & findings will assist with piloting mental health resources that can be used in service with our staff.



Integrated Service Offer

PARTNERSHIP APPROACH

Partnerships continue to be ground-breaking, not only for our organization but also for our partners, and for encouraging skill-sharing and joined-up working across Birmingham and beyond. We continue to pride ourselves on having integrated service offers as listed below, and also a wide local network of Aquarius added value projects and Partnered projects.

Additionally we are part of the national Recovery Focus Network, and we can draw upon this network for expert Mental health, Domestic Abuse and Gambling advice and services.

Barnardo's

We work closely with Barnardo's. The Young people who access our Substance misuse and Barnardo's exploitation services have direct 1-2-1 support & Consultancy from a specialist worker who specialises in both substance misuse and exploitation.

St Basil

Building on our existing partnership working with St Basils. We work with team leaders across St Basils to ensure our referral pathways are still accessible to young people in St Basils properties and when they are referred into homelessness direct access services and need our support. We are additionally working within formal partnerships on the Transitions Hub Integrated Offer.

Forward Thinking Birmingham

Our staff immediately screen young people for mental health needs and FTB services are discussed if suitable. FTB also provides monthly consultancy sessions to our team and hold regular skill shares and further mental health learning to our staff. When a young person needs mental health support, to aid engagement into mental health services the FTB team are invited to get involved with outreach and joint visits with our staff

Youth Offending Team

young people accessing criminal justice are screened for substance misuse support and if identified a referral is made into our services, our team attend ODOC and triage meetings to discuss new referrals and the wider support needs of young people entering the criminal justice route. We work with YOS officers to ensure the substance misuse services we provide compliments criminal justice interventions.



Added Value

THE GROW PROJECT

The Grow project is led by young people who are affected by substance misuse whether their own substance use or a relative's. The project utilizes the garden space at Bristol Road to enable young people to develop life skills and is a welcome addition to our main service. The sessions have provided outdoor activities, healthy eating, building, and upcycling materials to a substantial number and broad spectrum of young people.

AQUARIUS CARES PROJECT

This project includes our award winning 12 session choices programme, these resilience building sessions and targeted group sessions are available to Children & Young People in care, care leavers up to 25, the wider family of children and young people and young people residing with kinship carers, who are affected and impacted through parental substance misuse.

PATHFINDERS & ALTERNATIVE PROVISION TASKFORCE

We are successfully part of the pathfinder project which works in over 40 schools in Birmingham & the COBS—(City of Birmingham Schools) Alternative Provision (AP) Taskforce project. Specialist substance misuse workers from our Aquarius team work as part of multidisciplinary teams including the children's trust, school staff, mental health workers & mentors, in the AP Taskforce (Funded through the West Midlands Violence Reduction Unit) & Pathfinders (BCT Funded) supporting families and pupils to improve lifestyle and attendance at school. Our staff members provide substance misuse consultancy to the team and deliver addiction / drug awareness services to family support workers & school staff, whilst also continuing to provide 1-2-1 substance misuse and affected others support to young people and family members and refer into the wider young people's team when needed.

TRANSITIONS HUB

Our specialist substance use worker remains in post at the St Basils transition's hub linking in with the wider transitions team. The Aquarius practitioner is providing intensive and consistent support to young people using substances based under transitions. Most recently this has included supporting YP accessing food banks, urgent medical treatments. Supporting YP into accessing recovery services and housing, facilitating access to mutual aid meetings (AA/ NA). We are utilizing a similar package of care across the wider transitions team.



Added Value

EVOLVE—SOCIAL ENTERPRISE

Evolve is our social enterprise (Café, Events Space and catering Offer) which enables and equips some of the most disadvantaged young people with the opportunities and skills to succeed in employment. In Digbeth you can find Evolve @ The Adam and Eve, this facility is staffed by young people who have been affected by issues including mental ill health, substance misuse/addiction, family breakdown, homelessness, offending and NEET. Young people who would struggle to thrive in a regular workplace receive paid and volunteer tailored employment opportunities and training in a supportive environment. Specialist 1-2-1 support ensures they are accessing all the services they need. After placement our young people move on to Education, Employment or Training. Outside operating hours our Evolve café is utilised by our Young Peoples team and becomes a safe additional space for our young people to engage in group work and events facilitated by us.

AQUARIUS CONSULTANCY & TRAINING

Our team provide substance misuse related training sessions to professionals we partner with. In the last year we have delivered sessions to the Children's trust, Family Support, social workers, GP Surgeries, Homelessness prevention services and school staff who are partnered with us through COBS & Pathfinders. In addition to delivering training our staff have access to training and consultancy internally from our Richmond Fellowship services covering, Domestic Abuse & Mental Health.

AQUARIUS & GAMCARE

Aquarius & Gam care provides Gambling Support Services throughout the West Midlands, In addition Aquarius is part of the English Gambling Hub—Partnership consortium Delivery with Gam care as the lead to prevent and reduce gambling harms among young people through early intervention and prevention and to bring all gambling education and prevention services for young people in England together as a network.

Aquarius also deliver the Young Persons' Gambling Harms Prevention Programme (YPGHPP) to professionals across the West Midlands.

WIDER PATHWAYS

- Over the years we have maintained a presence with schools, colleges and alternative education provisions throughout Birmingham. Our team continue to attend a large proportion of our 1-2-1 appointments in an education setting, working closely with the pastoral teams.
- BCT— A large proportion of our referrals are received from Birmingham Children's trust, we are well established in safeguarding, locality and family support BCT teams across Birmingham.
- We have successfully continued to embed our services with other Young peoples provisions including, Umbrella, the Princes Trust, BCC & Charity Youth Clubs, Grass roots projects and community initiatives providing opportunities for engagement with young people who may not engage through mainstream referral routes.
- Our Staff recognize that a good way to engage young people is to connect with a young person's existing professional pathways. We are adaptable in our approach and welcome outreach and In reach joint working opportunities to engage young people.

Hearing our Young People

Our steering group - Aquarius Stars has grown in strength & numbers

Meetings take place fortnightly where members attend meetings which are staffed by our Youth Participation workers & volunteers. They have attended consistently since the group was re-established post lockdown.

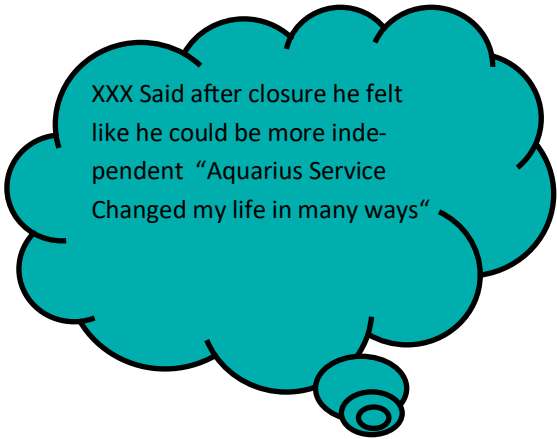
Aquarius provisions and wider substance misuse services are discussed, and these discussions are taken to the team, and wider senior management team.

Stars members have made some positive suggestions around our provisions as they sit on interview panels when we recruit staff, and recently were apart of the panel that distributed funds for activities to young people accessing our services through the Barclays awards fund. Members who have joined are committed and willing to engage and share their ideas and experiences of Substance misuse provisions, both internally and have grown in confidence to represent our service at external provider conferences and panels.


Young people who are ready to move on from the steering group have the option to volunteer with us or undertake the OCN Qualification in peer mentoring and support or wider team.

We are currently just starting up an additional steering group to support transition aged young people from the ages 18-25.

Additional to our steering groups, our Youth Participation workers are an integral part of the team, their 1-2-1 sessions with young people accessing our service are interwoven into a young persons package of care. With the support from our Youth Participation workers, young people can readily identify any external additional activities and groups they would like to attend to assist with their recovery capital.



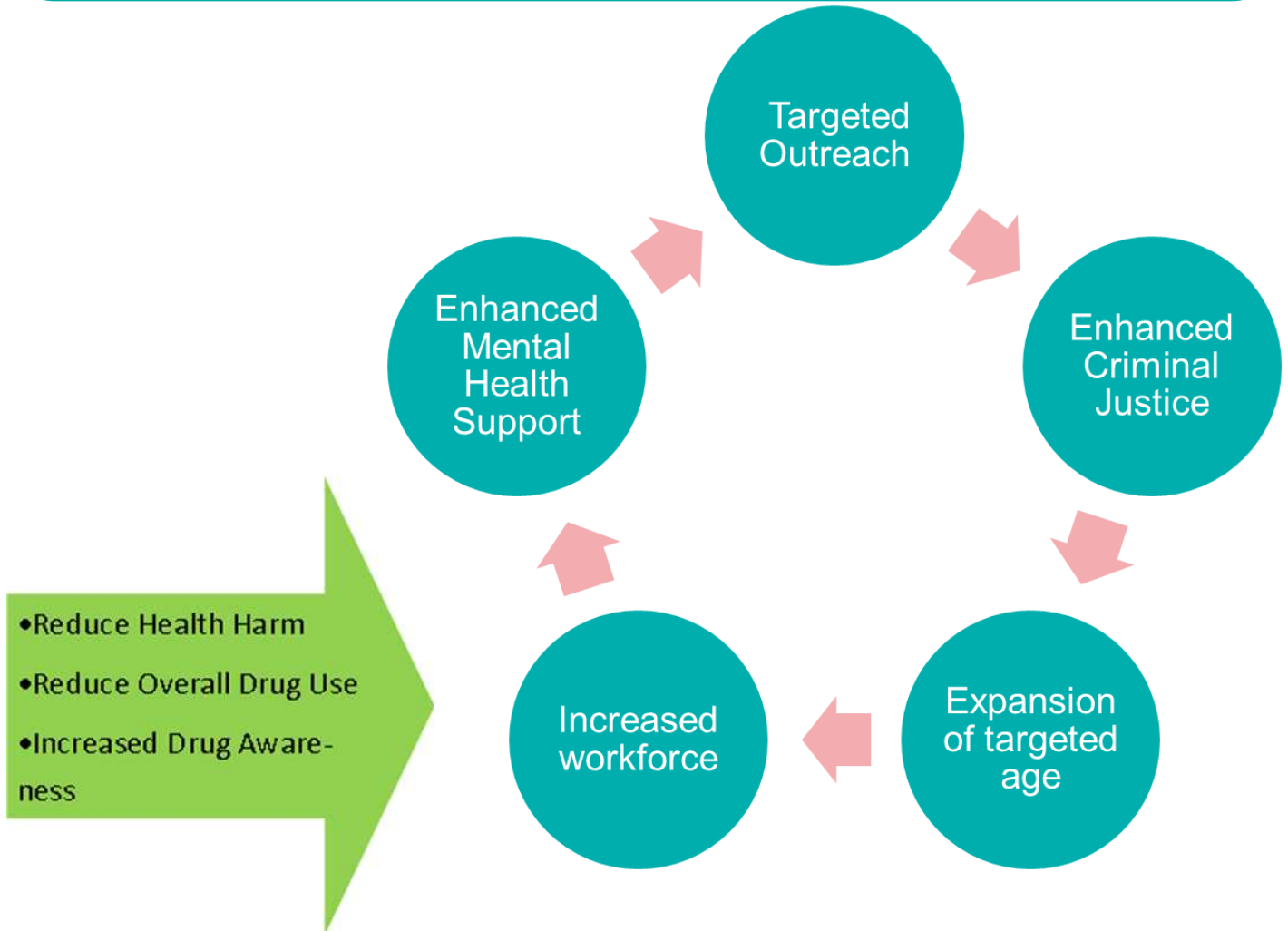
XXX Said after closure he felt like he could be more independent "Aquarius Service Changed my life in many ways"



We monitor quality & assurance

Regular feedback during treatment & after case closure is obtained from the young people that use our service & from professionals making the referrals & supporting cases

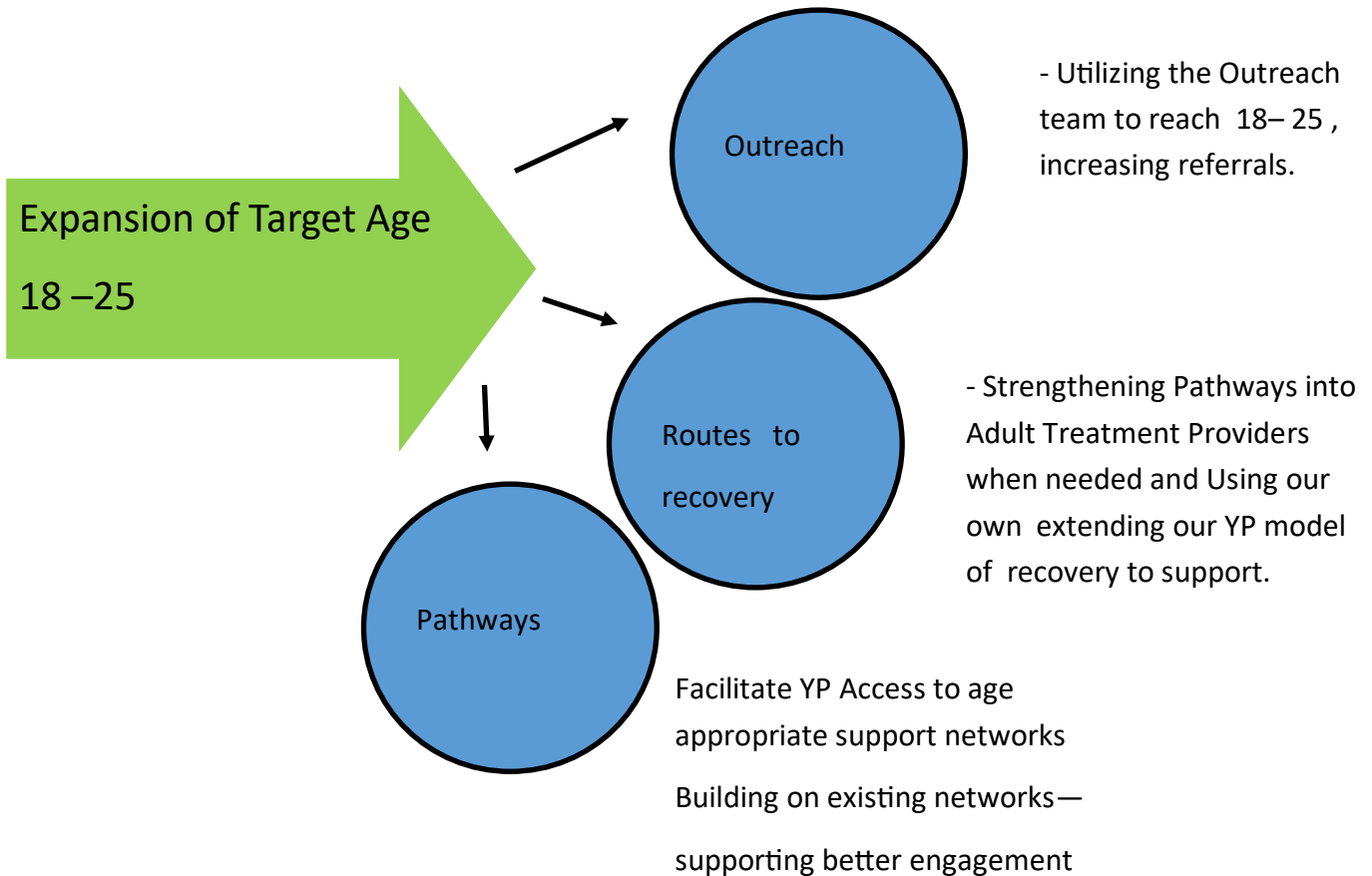
OHID Extended Offer



With the additional OHID uplift we are working on key areas from the Harm to hope strategy & the Dame Carol Black report. Increasing our workforce has enabled us to focus on:

- Enhancing our existing youth Justice integrated offer and building in more targeted criminal justice work
- Creating a transitions team that aims to Marginalize the gap between Young people exiting the YP substance treatment at 18 and accessing support 18 +
- Creating a team that can deliver Early interventions in group work settings, targeted drop ins and enable engagement into treatment opportunities through assertive and targeted In reach & Outreach.
- Improving mental health provision in house and improved pathways into external Mental Health Treatment Providers.

OHID Extended Offer



Evidence from our partner agencies suggest there is a need for a transitions service for young people aged 18-25. With the knowledge our service has we have been fortunate that with the OHID uplift we now have a team of transitions workers that compliment existing staff, who are working hard to engage with young people aged 18-25.

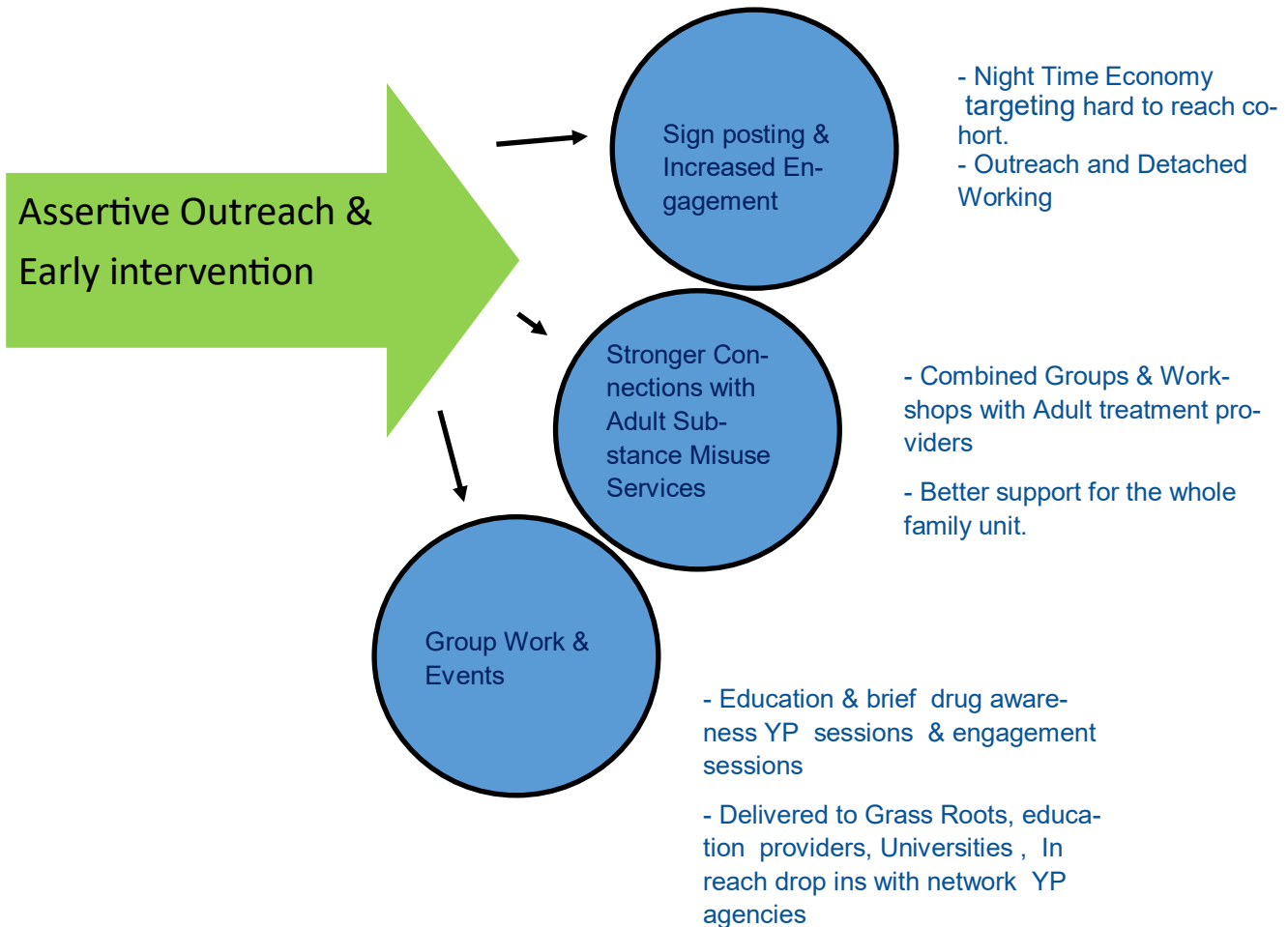
Since opening the doors to receiving referrals for this 18-25 yrs cohort in February we now have 15, 18-25 yr olds engaging in treatment, and expect this to continue to increase further.

We have strong links with homelessness providers, direct access hostels and St Basils and continue to work closely with their outreach teams across the city, and are a regular face at Lets Feed Brum, to further engage the hard to reach cohort of young people.

Additionally we are placing focus on raising awareness of Substance Misuse support and how to engage young people accessing further education, universities and employment placement providers.

We are working with adult treatment providers to provide a clear pathway for young people of transitional age to access adult provisions if they need prescribing support and offering our own unique engagement for young people to engage with our substance misuse services and mental health support.

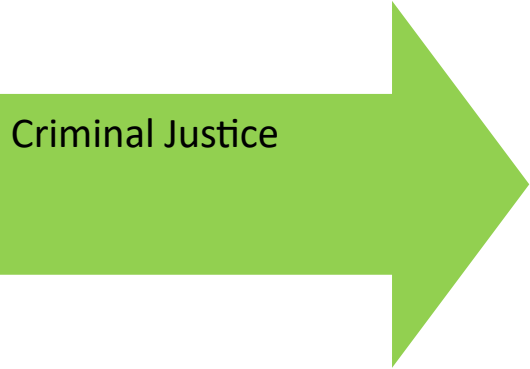
OHID Extended Offer



- Our staff get involved with local & national initiatives – i.e. the Rough Sleepers Count, Violence reduction County Lines operation Awareness week, Raising the profile of the impact of addiction and substance use to the wider community and young people. We partner up in the community with Neighborhood Policing Teams St Basils, Trident & the Rough Sleepers team to engage our client groups.
- Utilizing the Ohid funds has enabled us to enhance the way we engage young people into service and broaden our opportunity to engage— we have recently secured opportunities to engage with young people frequenting the hurst st area at the weekend reaching out to the night time economy.
- The Outreach Team has delivered and is delivering Outreach, Events, drop Ins, Targeted drug awareness sessions across the city to many local providers, at these events opportunities are created for young people to access further support on a 1-2-1 basis from our service or are signposted to other provisions if required.

OHID Extended Offer

Criminal Justice



Young Peoples Work

- Increased capacity in Youth Offending Services 1-2-1 provisions
- improved presence at YOS Hubs improving substance use consultancy to YOS staff

Group Work

- Increased group engagement with Young People not engaging with YOS who are receiving an order and using substances
- The edge of offending behaviour i.e. ASB

Wider Links

- Presence at YOI Institutes
- Wider links with neighbourhood policing teams
- Continued pathways with exploitation services & VRU team

We have connected with YOI's and we are delivering group sessions and 1-2-1's through YOI In reach to provide specialist substance use support upon a young persons release and reduce the risk of substance related crime. This quarter we have seen an increase in Post Custody Referrals.

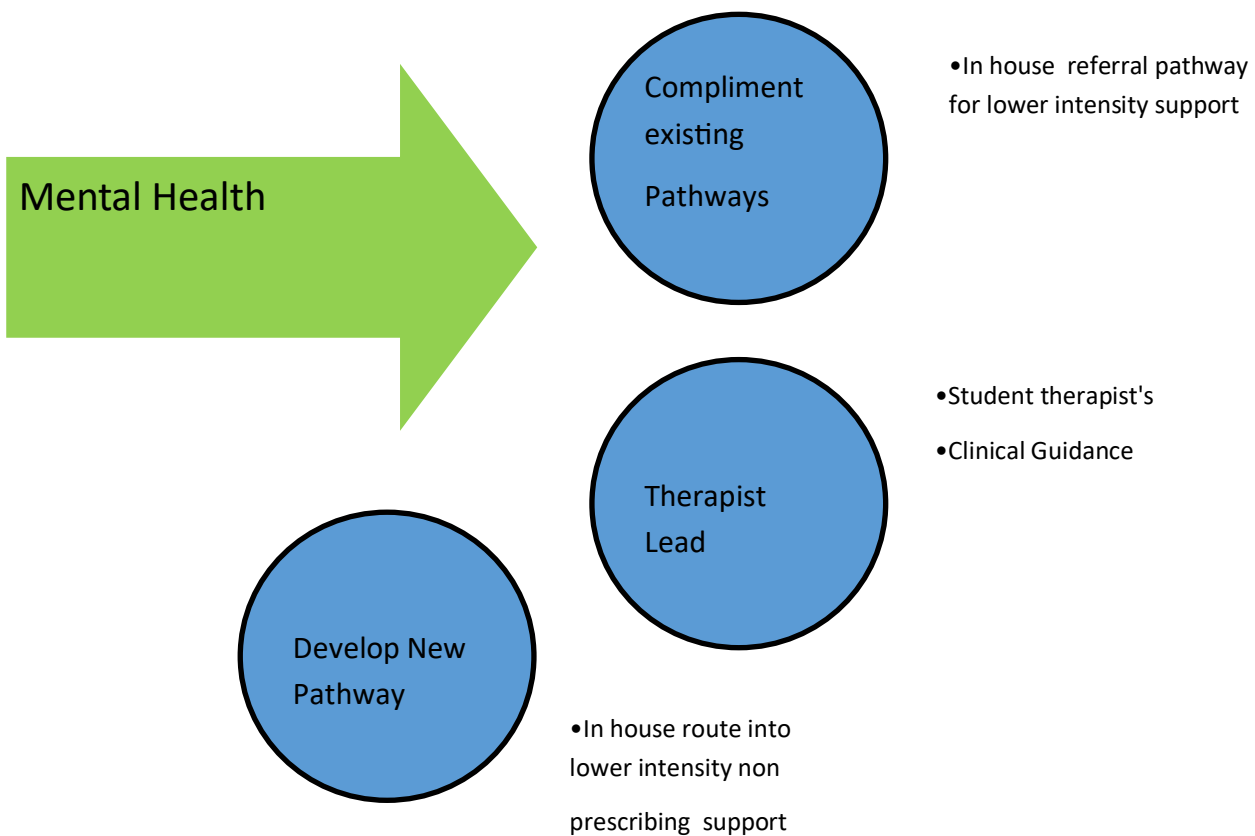
Our staff are attending multi agency Drop In's facilitated by Youth Offending

We provide Restorative Justice provision at our Bristol Road Hub & Garden space which also enables substance misuse targeted sessions.

We have worked closely in the Health Taskforce Working Group with YOS Healthcare provisions to review current health offers in the Youth Offending System.

We are building better connections with local neighbourhood police teams to keep updated with crime hotspots to help tackle substance related crime.

OHID Extended Offer



Staff Quotes“ Complexities in the transitions team are quite high and hard to navigate at times as most have complex mental health conditions, diagnosed and some undiagnosed, for example, schizophrenia, psychosis, paranoia, hallucinations, bipolar and personality disorders, depression and anxiety. due to the level of substance misuse its near impossible to get their mental health addressed. Most of the time their substance misuse is a symptom of their mental health, a coping strategy. “

“Some young people are still rough sleeping regularly and it can be very difficult to get them to engage in any meaningful activities, however this is where joint outreach with partner agencies is beneficial”

“Very little trust in services and professionals, the most vulnerable, marginalised young people in Birmingham.”

We want to compliment Birmingham mental health provisions, utilising our engagement skills and our substance misuse knowledge with a better support pathway for our Young People, in particular supporting post 18 young people. We are developing an additional pathway that compliments our existing partnership with FTB, which includes in house therapist lead and additional recovery models.

Aquarius Young People's Substance Misuse Service

Volunteering

Volunteers supporting our service are recognised as an asset to our staff and the young people accessing our service. We welcome new volunteers and appreciate those volunteers with lived experience in relation to substance use or those affected by substance misuse.

Roles for Volunteers

- Events Promotion Volunteer
- Life Skills Volunteer (groups/awareness sessions to YP)
- Home & Community visit Volunteer
- Evolve Volunteer
- GROW volunteer
- Ambassador—Steering Group
- Outreach Support Volunteer

Support for our volunteers

- Access to relevant training
- Attendance at team meetings and skill shares
- Supervision with a mentor from the young people's team
- Coffee mornings with the Wider Aquarius Services Volunteer Support Group Anchor.

Activities for Volunteers

- Finding and attending events to advertise the service
- Supporting the GROW project activities
- Accompanying practitioners on 1:1 session's
- Accompanying staff with Outreach
- Supporting Aftercare groups
- Supporting the Steering group
- Supporting Group work delivery

Dedicated Volunteer & Participation Worker

Child Criminal Exploitation

What needs to be done?

- a) What is the definition of Child Criminal Exploitation (CCE) being used in the city? If different definitions are being applied by partners, how does this impact upon the effectiveness of joint working?

CCE is accepted as child abuse that involves a young person being coerced or manipulated into committing crimes that benefit an individual or organised crime gang. Whether the young person benefits financially or not, or consents to be involved or not. It would still be regarded by Police or professionals in Health and Social Care, as abuse and exploitation. Definitions of CCE are open to interpretation and it is often an individual worker's understanding of what is CCE which would determine the response and support provided. This can lead to partners not working cohesively as risks and vulnerabilities are deemed differently. However, attending daily morning briefings as with the EMPOWERU hub allows for discussion and a more co-ordinated approach to disruption.

- b) What is the current scale and nature of CCE in Birmingham? How has this picture changed over the past four years? What are the projected risks and threats for the future?

CCE has existed for decades. If we have adults committing crime, there will be those who will use the young and vulnerable in order to evade detection by the Police and avoid incarceration. It has long been accepted within the criminal fraternity, that young people are dealt with more leniently in court and are given less custodial sentencing to avoid criminalising the young. This is the mantra used as a convincer to groom the young and deceive them into thinking, nothing serious will happen if they're caught. Unfortunately, this is believed and leads to these young people co-opting their friends to also become involved. There are young people who are in positions where they're the main provider within their family and their family come to rely on the money, they bring in. Hence parents ignoring what goes on. CCE remains a constant within society, to deal with the effects of poverty and providing a sense of belonging to young people who feel alone and unprotected. In terms of risks and threats for the future, there will be continued cases of abuse; in all its forms, young people developing mental illnesses as a result of trauma and their experiences, and more young people criminalised, which will affect their career prospects and ability to travel to other countries. CCE is still a big concern in Birmingham for young males and females, however it continues that young males are still more likely to be supported within the criminal justice system and young females supported through social care. Our data for CYP reporting CCE has stayed consistently the same for the past 4 years.

C) How are organisations informed by evidence-based practice? How do organisations capture 'what works' and 'what doesn't work', and how has this information changed their services? How is Birmingham learning from other areas, and how is this learning being implemented to make a difference? Child Criminal Exploitation 04

Via our data and analysis, we will capture the work we do with a young person in order to reflect and assess what is working, where the gaps are and areas for improvement. This process allows us as an organisation to develop knowledge base and establish a foundation to cultivate expertise. Outcome monitoring tools are used by our practitioners, with CYP that measure improvements / lack of improvement holistically in a young person's life i.e., Use of time. Where areas of good practice have had a significant positive impact of the young person this good practice has been shared within the team. For example, assertive outreach, styles of engagement. Up skilling the staff team to be able to deliver impactful interventions with appropriate training and working in partnership with other specialist agencies e.g., Barnardo's, red thread & St Giles. We will share best practice internally & externally, attend briefings, events, meetings etc to share knowledge bases, and highlight lessons learned. This is where any research, reports, or approaches would be discussed and disseminated that have any evidence-based learning to share.

d) What is the current partnership strategy in place to address CCE in the city? How is this strategy being supported and delivered through partners? What are the partnership mechanisms for collaboration, and how effective are they? How effective is its governance structure?

The NRM is the strategy used nationally which encourages all partners within Health and Social Care and the Police to adopt this mechanism. However, this strategy is not perfect as the deadlines for feedback or escalating to the next stage is not always adhered to, and the actions taken are not always adequate to safeguard the young person and their family. There have been occasions where the strategy taken using the NRM mechanism has been counterproductive and can put the young person/family in a more vulnerable position.

Aquarius has a specialist exploitation partnership worker from Barnardo's. This service level: agreement has allowed for appropriate and effective information sharing and expertise from both organisations to help disrupt CSE /CCE exploitation. Aquarius attends daily morning briefings with EMPOWERU hub with other statutory and third sector organisations to share information and allow for better collaboration.

e) Who are the key statutory organisations and what are their respective roles in addressing CCE? What investment is provided to these organisations, and has this changed over the past four years? What are the current plans for investment to meet future demands?

West Midlands Police, NRM, Local Authority Birmingham Children's Trust – Including Youth Offending Services.

The VRU teams have made a considerable presence & impacted across the city and are laying down foundations for practice within the education, courts procedures and faith alliance networks, enabling better connections with hard-to-reach CYP who are at risk of CCE.

f) What is the role of third sector and community-based organisations involved in tackling CCE? What are the key challenges they face, and what are the solutions they have identified to tackle these challenges? How effective is the cross sector working?

Historically, the third sector has always been instrumental in working within this environment, sometimes having the ability to identify CCE before statutory agencies have recognised the issue, due to their ability to be more flexible in the delivery of their service and therefore often able to reach more young people who are being abused through exploitation. Sometimes the key challenges are getting statutory agencies to see the worth of the third sector and recognise their expertise in this area. Statutory agencies have statutory guidelines to follow, which sometimes makes them unapologetically, risk averse. This sometimes can make discussions difficult because statutory officers can come with their own agenda and preconceived ideas of what they want; in contrast to what works or is needed. In order to overcome some of these obstacle's services have embedded themselves into partnerships and focus groups etc. To get their voices heard and attempt to influence the agenda to be more effective. This has assisted moving the agenda forward, which isn't perfect, (Third Sector Organisations need to be able to keep their own identity, whilst embedding practice within statutory organisations) but has allowed for more partnership working with statutory agencies. Which will only add to benefitting multidisciplinary working. Ensuring staff are invited to briefings, DPM's, Strats and other multi agency meetings would allow for more effective information sharing

Aquarius currently works in partnership with BCT, YOS and the VRU.

g) How does the Council and Partners identify and assess risk for children and young people together for CCE? How are they responding to the challenge in identifying girls and young women as victims? How are the Council and Partners working together to deliver effective interventions when children and young people are likely to be both victims and involved with committing offences at the same time?

Through NRM referral, Strategy meetings, Child In Need meetings, Child Protection meetings, Disruption Panel Meetings, Empower U hub daily briefings. Through these processes young people are discussed to highlight risks and vulnerabilities to decide on a collective way forward and a joint working mechanism to safeguard the CYP and their family.

The conversations that happen within these forums, recognise the vulnerability of girls and young women, and attempt to mitigate the risks attributed to female victims of CCE/CSE. There is a concerted effort to assist with understanding of what is happening on a street level, and the Local Authority, Police and partners are attempting to work together to achieve this in parts. However, there is room for improvement, particularly with having a consistent approach, as some young people are not given the same consideration when looking at the crime committed and victim status. In essence, sometimes victim blaming can slip into practice, which results in inconsistent decisions being made by professionals.

As an organisation our staff are trained to identify and screen for CCE & CSE in CYP and will feed this information into statutory bodies (i.e., we will refer to MASH with the screening tool completed, if the CYP is not open to statutory services or escalate concerns to the YOS officer or social worker if the CYP is already open to services.

h) How are the Council and Partners working with families to support children and young people at risk, or involved with CCE? How are schools and partners working together to reduce the risk of school exclusion?

The work done to support young people and their families is usually pulled together via a statutory process, i.e a child protection plan or child in need plan. When CCE is identified, organisations are included who have strategies to support the young person and their family who find themselves in this position, and they can manage the peripheral issues, through raising awareness with family members, devising safety plans and risk management plans with family members etc. There is an expectation for the NRM process to be undertaken by statutory services once a concern of CCE has been identified by a professional working with a young person or family.

In regard of schools and a reduction in exclusions, it depends on the school and the strength of their pastoral team. Schools focus is teaching and learning, and they are not always sympathetic to the needs of young people outside of education. They have their sharing panel process, which postpones exclusion, however, this doesn't always work. There is no further contingency once a manage move fails and a student can spend an unnecessary amount of time at home once exclusion happens. Exclusion has been a recognised issue of young people falling outside of the net into anti-social and criminalised behaviours, amongst other areas of vulnerability. This has always presented a gap in safeguarding young people, schools and partners need to get better at working together effectively to resolve this gap.

The pathfinders project and the Violence Reduction Unit (AP Taskforce) are both projects we provide substance misuse specialist workers to. These project work within schools and Alternative Provisions and support the whole family unit with socio-economic issues that may impact on a CYP attendance at school, looking to reduce the risk to the CYP from crime and anti-social behaviour and the risks associated with long term school exclusion.

What is the definition of mental health and how does this affect the demand for mental health services?

Mental health refers to the overall social well-being of a person inclusive of emotional and psychological well-being and affects how we think, feel and act. It references a person's ability to manage stress, have and build healthy relationships and have good resilience to life stresses and challenges. To have good mental health would mean the absence of mental illness or well managed mental illness, allowing the presence of contentment and a sense of purpose in life.

As a city we have seen the need for mental health provisions has grown and a contributing factor in this may well be that there is more conscious awareness about factors impacting a young person's wellbeing i.e., A teacher may be supporting a pupil in school, and can recognise low wellbeing. i.e., A young person has seen a statement on social media, identifying what poor mental health may look like. This raise in awareness then impacts the demands on mental health services / provisions. The demand will also be impacted by affordability i.e., if the provision is free or fee paying. In terms of how accessing provisions is communicated to the public, there still is a stigma, and ignorance in regard of the general public's understanding of accessing mental health provisions and a lack of understanding of the process and provisions to support mental health. We see CYP who access mental health services have a better understanding after going through the process of accessing mental health provisions, however, the experience can be varied based on the demographic of the individual. As some groups can experience a more adverse process in comparison to others.

What are the barriers to CYP accessing drug and alcohol service?

We experience a high occurrence of do not attend appointments, these can occur because a CYP does not feel they need a service (other people have seen the need), CYP don't prioritise interventions, CYP are embarrassed to attend appointments. our staff work hard to "meet the young person where they are at "resulting in an increased need of engagement appointments from our professionals, which look like: going out in the community to meet the young people, working with other professionals in the CYP life, joint appointments and attendance at relevant meetings, working with family members to engage the CYP. We are also still faced with the stigma attached to CYP using Drug and Alcohol services, and we must be creative with how we engage young people.

How long are waiting times from enquiry/referral?

Waiting times to be engaged by substance misuse services averages between 1-2 weeks.

Waiting times to be seen by substance misuse services is within 24hours if Class A substance use is referenced on a referral.

Waiting time for in-house FTB support averages between 6-12 weeks, if the need is identified.

Are these barriers exacerbated if they have a mental health issue?

Yes, the barriers are exacerbated it is difficult for a CYP to engage in treatment services if they are experiencing levels of anxiety or paranoia in particular social anxiety. CYP often use higher levels of cannabis to self-medicate when they have un-diagnosed ADD, which can also add to social anxiety. This can also feed into lack of routine, not remembering appointments etc.

For young people aged 18-25 years, they are often living independently / semi independently and have often dis-engaged with mental health support that was available to them whilst living in care or at home and lack schedule and guidance to engage in support services.

What proportion of CYP who access support from the CYP drug and alcohol service also have mental health needs? What proportion have a diagnosed mental health need and what proportion do not have a diagnosed mental health need but experience psychological distress?

Data from 22 / 23 reporting

Number with Mental Health Need / not already engaging in treatment: 119 young people = 23 %

Number already engaged with Community Mental Health Team/Receiving NICE recommended

Interventions: 58 = 11%

Number that are being treated by their GP or IAPT for their Mental Health need: 4 = 1%

What is the success rate of use of the service for those with or without a mental health issue?

Number of service users reporting improvement/stabilised in Life Satisfaction Rating or Number of service users reporting improvement/stabilised in Anxiety Rating.

Data from 22/23 reporting :

YP Outcomes Report

Number of service users reporting improvement/stabilised in Anxiety Rating: 53 =19%

Number of service users reporting improvement/stabilised in Life Satisfaction Rating: 103 = 37%

Number of service users who have reduced their drug/alcohol use upon Successful Exit from Service.	the number reporting a reduction on their Review YPOR	2022-23 (Non-Mental Health) April – March 33 (52%)	2022-23 (Mental Health) April – March 31 (67%)
Number of service users reporting abstinence from drug/alcohol use upon Successful Exit from Service	the number reporting abstinence on their Exit YPOR	2022-23 (Non-Mental Health) April – March 12 (19%)	2022-23 (Mental Health) April – March 9 (20%)

Treatment Star Outcomes – In Service

Emotional Health - Positive or Stabilised: 127 = 85%

Social Networks - Positive or Stabilised: 120 = 72%

Emotional Health - Positive or Stabilised	number reporting and an increase or stabilisation on their latest Outcome Star	2022-23 (Non-Mental Health) April – March 78 (82%)	2022-23 (Mental Health) April – March 54 (90%)
Drugs - Positive Change or Stabilised	number reporting and a positive or stabilisation on their latest Outcome Star	2022-23 (Non-Mental Health) April – March 84 (88%)	2022-23 (Mental Health) April – March 52 (84%)

Alcohol - Positive or Stabilised	number reporting and a positive or stabilisation on their latest Outcome Star	2022-23 (Non-Mental Health) April – March 75 (78%)	2022-23 (Mental Health) April – March 53 (83%)
----------------------------------	---	--	--

What is the known demand for CYP mental health support and what has been the impact of Covid on mental health of children and young people in Birmingham? Which mental health issues / service have seen the greatest increase in demand over the last 4 years?

We believe mental health provisions in Birmingham have not had the capacity to meet the demands for mental health support in Birmingham.

The COVID pandemic had an overwhelming effect on the mental health of young people. The common factors amongst young people have been anxiety, increases in self-harm, panic attacks, a lack of motivation and hopelessness. In addition, young people have been dealing with bereavement, and in some cases multiple deaths of family and friends. Furthermore, CYP have been experiencing multiple traumas, as a result of being affected by the negative, and/or aggressive behaviours of others in the household during restrictions and no access to diversionary activities. Young people had to manage feelings of loneliness and isolation, while dealing with the uncertainty of their future, and a breakdown in their routine. Which in turn impacted on mental health services, where professionals had to respond to psychosis, suicidal ideation, anxiety, and aspects of personality disorder. There has been a noticeable increase in mental health issues amongst young people since the advent of Covid 19.

As a substance misuse service, we have seen an increase in poly drug use and consistent dual diagnosis our statistics show a notable increase in alcohol use referrals when lockdown restrictions eased, and young people returned to studies. We know providing adequate dual diagnosis & combined drug treatment & mental health care treatment is needed in many substance misuse cases and this works well with in house FTB substance use services. If we are working at removing the substance of choice, sufficient mental health support needs to remain present.

CYP who use both substances and experience poor mental health have exacerbated negative life experiences resulting in poor motivation for change and feelings of hopelessness.

Within the Aquarius transitions service (18-25) we have seen the need for crisis intervention for our young people as a result of little input / accessibility from community mental health teams.

What funding is available for mental health services and how does this compare to other areas e.g., core cities? needs to be present.

Mental Health Services are funded through the Government; via the NHS, Non-statutory who are providers of Mental Health services are funded via the ICB's (Integrated Care Boards) replaced the CCG's. There was an additional fund via the Active Wellbeing Society during the pandemic.

Information publicly available shows that "NHS funding accounts for only 11% spend on mental health services but mental health problems account for 23% of the burden of disease –

WWW.kingsfund.org.uk

Nationally Central government has pledged / boosted mental health services as part of a £150million uplift up to 2025.

Birmingham is the 3rd most deprived local authority in England – (Government statistics 2019 indices of deprivation) And falls behind in Birmingham's Levelling up strategy in health, most likely because it is a deprived city in relation to its counter cities and has the youngest population with a high mental health need.

We have seen a reduction in FTB Substance misuse services, we now have 1 part time prescribing nurse and 1 part time FTB consultant. At the start of the Contract the Original Forward Thinking Birmingham offer was:

- 1 x full time Consultant child and adolescent psychiatrist.
- 1 x full time band 7 clinical nurse Substance Use specialist

What are the referral routes, assessment processes and support for CYP with psychological distress and those with a diagnosed mental health condition?

Outside of Substance Misuse core Services (i.e., the young person is not using substances (affected other or is over 18) we refer CYP generically straight to Forward Thinking Birmingham, with support from the GP or statutory services, or any other professional supporting. As cited previous waiting time is around 12 months. Young people can access the crisis team initially through a phone call, which is a 24-hour provision for young people experiencing crisis or they can present at A & E. Once picked up by FTB, CYP will be assessed, and the correct channel of support should be identified and offered. We have seen an increase in referrals not meeting the threshold for FTB support.

For Core Substance Misuse Services CYP under 18 will be SDQ (Strengths & Difficulties Questionnaire) screened for mental health by our practitioners utilising the the SDQ screening tool, this is then shared with the in house FTB team, who will then advise the next steps for the CYP support in our next monthly case discussion meeting we have on a monthly basis with FTB. If the CYP is deemed as needing FTB intervention, i.e., scores highly for emotional distress and several mental health risk indicators are present on the SDQ the FTB service is offered. Joint consultations are then offered to engage the CYP and FTB will include Parent / Carer. Often our Practitioners will assist FTB in obtaining further information from schools and family members and will complete further screening tools with the CYP i.e., Vanderbilt Screening tool – used for assessing adhd to assist FTB with the process. For those CYP who do not meet the threshold of need or support from FTB a referral will be advised by FTB and made by us (Aquarius or the FTB worker) into IAPT therapy services or alternative counselling is sought. Our staff will also incorporate low level resilience building & CBT as part of substance use interventions. For over 18's in our transitions team currently we can only utilise our FTB NMC for clinical discussion and are unable to refer into our inhouse services and we must follow the external referral pathway. The advantage of utilising this consultancy enables our staff to pick out crucial mental health indicators that will highlight any mental health concern that FTB can pick up on.

Through our FTB services we can check to see if a young person presenting or accessing our provisions is or has been open to FTB for support historically and we can use this information in supporting CYP into accessing further mental health intervention.

We do not screen CYP referred to us that are open to Youth Offending services (YOS), as at referral YOS CYP are also SDQ screened on referral / when accessing their provision, so we would not duplicate the process.

What are the expectations of children and young people and their parents and carers in relation to their mental health need?

Children, young people, and their parent/carers accessing our services, expect to access mental health services quickly when the CYP has an identified mental health need. They also expect the appropriate response from professionals, presuming that they have the answers and can support them in their time of need. CYP & Parents get frustrated with the waiting times which adds to their psychological distress and when they can't access FTB through our service route (i.e. the young person is over 18 or FTB do not feel the CYP meets the criteria for support from FTB and suggests counselling, talking therapy as an alternative)

A lot of emphasis is placed on young people 18+ to engage in community service provisions like Pause but this is with little success for our most chaotic young people. For young people 18 + using substances they are expected by mental health providers and homelessness provisions to reduce or stop their drug use before being seen or accommodated, but this is often an unrealistic expectation as mental health support and substance misuse support needs to be co-facilitated, this works better as it does in under 18's substance misuse FTB.

What support and advice is available to parents / carers?

FTB practitioners who are linked to Aquarius will liaise with parents or carers and often involve them in their treatment. Parental inclusion is less likely if a young person enters generic external counselling support or talking therapy, as it is client focussed and often does not include parental support. Pause allows CYP to access their provisions with a trusted adult or parent or carer. Low level

mental health interventions provided by us and other Young Peoples provisions like Barnardo's or family support will include parents or carers into CYP support pathways and offer advice to a parent to support a CYP with a CYP mental health.

How are the mental health needs of children and young people in care and care leavers being met?

Aquarius supports young people who are in care and care leavers, who use substances or are impacted by familial substance use and we can link CYP into our FTB service if they are using substances. We will support CYP, alongside their social worker into accessing Mental health Provisions & FTB. There remains a gap in direct FTB support for our 18 plus young people and for our 18 plus care leavers where we are reliant on a FTB referral pathway. We will liaise with a young person's 18 plus PA, and now we have an increased staff capacity to support these CYP 18+ to appointments in the community, but this is still difficult as this cohort of YP are still expected to access community hubs. Mental health services will often not complete outreach and will close appointments after 1 or 2 DNA's (Did not attend appointment).

Some of our staff feel generic Mental Health provision within the care system is inconsistent and is dependent on the ethos or commitment to supporting mental health effectively. Some care homes will set up an appropriate therapeutic community, where young people have direct face to face sessions with therapeutic staff and this works well. However, in comparison there are far too many care homes that appear to use therapeutic intervention as a tick box exercise for Ofsted and provide a mediocre provision that offers therapy via discussions with non-therapeutically trained staff. For the staff to deliver a kind of informal therapy to young people you need something more targeted and appropriate to facilitate their needs. In some of our staff's experience, young people's mental health needs are inadequately met within a high number of care homes in Birmingham. Therefore, the mental health needs of a young person in care, does not start to be embarked upon; until they leave care and start to access services in the community or access support through crisis intervention.

How well are the needs of children and young people with high end acute mental health met? What are the implications of responding to CYP in crisis on the capacity in the mental health system?

Young people with acute mental illness are generally managed under the mental health act. With every section of need within society, some fall through the net and end up in an adverse position that can result in injury or death. However, generally, once a stay in hospital has occurred; particularly after a section 3 under the mental health act. Young people tend to remain under the supervision of a mental health team until transition into adult services. As a section 3 will trigger processes within the act that obligates statutory services to remain involved until they are satisfied that the patient can cope on a lower level of intervention.

Even hospitalisation under a section 2 will trigger processes, although be it not at the same level as a section 3. If a young person develops an acute mental illness, it is more likely for them to remain in services due to the episodes they will experience and in turn enter services voluntarily or via sectioning. In supporting a young person with a mental health need in crisis, we must recognise the implications at all stages; that the establishments they can become accommodated in, can vary in standards, expertise, and professionalism, Expecting the most vulnerable to attend appointments at a scheduled time at a location that is often a bus journey away without support is often unrealistic.

How do services meet the needs of those who experience the disadvantage / barriers to services / are most vulnerable? (Consider case studies/patient stories)

Our Aquarius Team and in house FTB services have supported young people accessing in house mental health provisions very well, providing a very fluid pathway from substance misuse interventions into wider mental health support, and managing the problems faced in dual diagnosis

well, in providing interventions cohesively alongside each other, incorporating joint visits to the young people and their carers.

With the 18-25 age group, we have numerous young people who are extremely vulnerable due to facing multiple disadvantages (homelessness/ dual diagnosis/ exploitation). Often, they have had some contact with community mental health teams prior but have been closed, due to lack of engagement with these services. Through partnership working with child / vulnerable adult safeguarding teams and other key partners we can meet the young people with 'where they are at' and take the support to them through assertive outreach and community work and engaging them back into service. The wider adopted approach of meeting young people where they are at is adopted by the Rough Sleepers Project Workers and Our Aquarius Transitions Team, however, still lacks robust support from statutory Mental Health Provisions. Albeit this is improving. Having a multi-disciplinary team at accessible locations operating a drop-in basis feels more suited to this cohort, which could also provide outreach and in reach mental health services. This is an approach currently utilized with the smaller scale of the transitions hub which includes Aquarius and FTB. Additionally, we are working with St Basils to provide further drop in facilities and would like to see more presence from statutory mental health teams.

Generically CYP who enter the mental health system can be supported by a third-party organisation that provides mental health advocacy via a mental health advocate. The purpose of this advocate is to ensure their rights are observed correctly, under the mental health act, care act, and mental capacity act. Local Authorities are obligated by law to provide advocacy services or commission advocacy services to ensure the obligations of the above acts are being met appropriately, and more Children and families would benefit from knowing this knowledge, albeit this would not help the pressures that statutory mental health provisions are already faced with.

Workforce planning to enable continuity of care – NHS, Social Care, Education and third sector

Ofsted, CQC, and the inspectorate of prisons could benefit more by been more vigilant that providers are providing adequate mental health support and not just ticking boxes. Best practice can be shared until time memorial, however, as there are so many private sector providers, who ultimately have a bottom line, and their motivation is to profit. They will always consider their profit margin and do the least to meet standards, which is evident within some private sector.

There needs to be a more robust monitoring system and sanctions that have teeth for providers who transgress standards. The accountability is poor, and the powers of the inspection bodies can be too restrictive to influence affective change in the sector.

More adequate training for staff in sector (root and branch), increased powers for inspectorate, standards bar to be set higher and enforced,

Early Intervention - more education/awareness for public/ parents; to break down barriers, ignorance, stigma.

As a service we believe we are seeing more mental health awareness thus resulting in more referrals from professionals; however:

We may benefit from a system which accommodates and provides better access for CYP that normally would fear approaching mental health services & CYP that struggle to engage with traditional referral routes i.e., locality multi agency hubs, mental health in reach and outreach opportunities.

Wider Non-mental health services, having better screening knowledge, and continuous upskilling of a wider network of professionals supporting young people, that feel confident to deliver low level mental health interventions and have been directed to deliver this through a single point of contact service, to continuously reduce the backlog of referrals going to FTB and IAPT provisions.

What can we learn from other areas? Examples of best practice

Norway has a strong focus on community-based care, utilizing community-based care centres which provides universal access to psychiatrists, psychologists and other mental health provisions, not dissimilar to provisions throughout this country, including the Birmingham Local transitions Hub, outreach teams and health exchange.

Australia and New Zealand have prioritized early intervention, community-based care and a focus on reducing mental health stigma and promoting mental health wellbeing. Good examples of networking opportunities would include well promoted local authority backed conference and networking opportunities including key stakeholders, like the recent South & City College Event and the Princes Trust Connecting communities' group which run regularly and consistently and include the presence of service users (CYP) and all key young people's provisions i.e. Mental Health Services, Substance Use Services, Employability programmes and Education.

How many children and young people access support from the CYP drug and alcohol service?

For 2022 – 23 we had:

- 371 referrals into service
- 293 in treatment during the period

The Aquarius FTB partnership currently have 50 young people in service, with approximately 40 of those who have received diagnosis and treatment (high number of these are neuro- divergent).

At the start of the contract the original Forward Thinking Birmingham offer was:

- 1 x full time Consultant child and adolescent psychiatrist.
- 1 x full time band 7 clinical nurse Substance Use specialist

Can you provide an anonymised case study that illustrates what the experience is like for a young person who has substance misuse and mental health needs?

Case Study

Client 1 was referred into Aquarius for support with her regular cannabis use. Client 1 was already open to Birmingham Irish for support for emotional wellbeing but her engagement with them was limited.

Following assessment and liaising with partner agencies it was identified that client 1 would be more suited to work with our specialist CSE & substance use partnership worker due to disclosures of rape, sexual assaults and grooming.

Other past trauma included breakdown of family relationships and absent parents. Client 1 struggled with attachments and her identity and had a distinct lack of trust in professionals.

Client 1 presented in a way that indicated ADHD and also reported that she often felt suicidal and self-harmed, even when she felt happy.

Our specialist worker applied a trauma informed approach to her engagement and was able to build a rapport with Client 1, attending other appointments with her such as GP and other health appointments.

A SDQ was completed with client 1 followed by clinical discussion with our in house FTB team who recommended a Vanderbilt tool be completed followed by a referral into FTB for full assessment.

As Client 1 had built a relationship with her Aquarius partnership worker and trusted her intentions, she agreed to a referral to FTB.

An assessment took place yesterday at Aquarius offices with Client 1, her worker and the FTB NMP who is completing an assessment with follow up appointments booked.

What mental health problems can drug or alcohol use cause for children and young people?

Trends:

With the increase in popularity of synthetic cannabinoids (mamba/ spice) we are seeing an increase in poor mental health amongst its users, often psychosis. Similarly, cannabis with high THC content

can also contribute towards poor mental health (again often indicating psychosis). A specialist mental health and substance misuse service allows for more timely, appropriate evidence-based interventions providing better outcomes for young people.

We also see the use of substance to manage mood, and as a coping strategy and often CYP will present with depression and anxiety symptoms.

What 3 recommendations would you make to improve mental health support for young people with substance misuse needs?

Recommendations:

The Aquarius FTB partnership currently have 50 young people in service, with approximately 40 of those who have received diagnosis and treatment (high number of these are neuro- divergent). These would be the young people who would often not engage with the generic FTB services, so this has proved greatly beneficial for the young people and families we support. With the current staffing structure within the Aquarius FTB partnership there is little capacity to undertake psychological interventions.

Therefore, recommendations would be to continue with a diagnosis and treatment model alongside increased nursing staff to deliver psychological interventions.

Additionally, it would be good to look at commissioning some lower level psychological interventions to support and maintain YP for lower level interventions – Like CBT HIIT, and IAPT it would be hugely beneficial to have this internal.

Additional information:

All referrals are screened daily, any that are identified as high risk, which would include class A, exploitation, solvent use (including nitrous oxide) and where there may be an indication of dependency. Where this is identified we would allocate immediately and request follow up within 24 hours (we make contact and offer assessment, this isn't always taken up).

Where we are not able to get hold of the YP or their parent or carer where required we would follow this up with other professionals involved in the case or escalate where appropriate.

For all other referrals, we allocate weekly, and practitioners are expected to then have completed follow up and offered an assessment by the next week, these are allocated within a window of 5 to 10 working days.

Our staff are trained in lower-level CBT, motivational interviewing, trauma informed practice, as part of our model of work we include safety planning, we complete risk assessments and risk management plans.

This is an integrated part of the model where we would explore coping strategies, building resilience, alternative ways of coping, this would include not just around substance use but wider needs around mental health and emotional wellbeing.

At assessment we identify with YP strengths within their social network and what things they have that support them currently or what has worked to support them previously, again this is assessment across the spectrum of needs and would include where they get emotional support from and what helps them to cope, from this we will build a tool kit with CYP around how to cope with their mental health in the short term.

We explore with YP understanding thoughts, feelings and behaviours and look at how they currently cope with life and then target our interventions around how to develop coping strategies. We also

work with YP around understanding feelings and emotions and how to express these feelings and develop their emotional intelligence to articulate feelings.

If a YP presents in the period in crisis then we would also escalate, contacting A&E, emergency crisis team, and follow protocol around crisis management.

We access resources like social work toolkits, therapy aid, we also have within the partnership Richmond Fellowship who deliver IAPT services and our Aquarius Life social enterprise which has therapist attached and we are able to liaise for consultation around mental health needs and resources.

As part of our partnership with FTB we also have fortnightly clinical case management where staff are able to discuss concerns around YP and their presentation around mental health and get advice around how to support whilst awaiting direct intervention from CAMH's

Aquarius are also undertaking a research project with Manchester university (MMU), this is typically looking at the needs of YP who present with both mental health and substance misuse. What we are looking to design from this in consultation with YP is further resources and an intervention package to further assist our staff in managing lower-level intervention for YP with comorbidity of mental health and substance misuse. The research is hoping to conclude by the end of summer 2023.

Our understanding is that Birmingham Education Psychology Support currently only accept referrals from the school/ educational settings where they provide a traded service to, as well as responding to requests from SENAR regarding EHC assessment and review.

Where a YP is on an EHC plan or undergoing assessment we would link in with the EPS worker attached as required through the school.

Birmingham City Council

Education and Children's Social Care Overview and Scrutiny Committee

Date: 17 May 2023



Subject: Inquiry Evidence Gathering: Youth Service
Report of: Birmingham Youth Service
Report author: Soulla Yiasouma (Head of Service)

1 Purpose

- 1.1 This report/presentation provides the Youth Service response to the Child Criminal Exploitation Inquiry.
- 1.2 The key question for this inquiry is: how are the Council and Partners working together to reduce the risks of criminal exploitation for young people?
- 1.3 The overall outcome is to:
 - 1.3.1 Reduce the number of children and young people becoming at risk of Child Criminal Exploitation
 - 1.3.2 Improve the effectiveness of partnership working to reduce the risk of Child Criminal Exploitation
- 1.4 The Inquiry has identified key areas to explore to support its evidence gathering for this Inquiry. The key lines for this Inquiry are:
 - 1.4.1 What is the definition of Child Criminal Exploitation (CCE) being used in the city? If different definitions are being applied by partners, how does this impact upon the effectiveness of joint working?
 - 1.4.2 What is the current scale and nature of CCE in Birmingham? How has this picture changed over the past four years? What are the projected risks and threats for the future?
 - 1.4.3 How are organisations informed by evidence-based practice? How do organisations capture 'what works' and 'what doesn't work', and how has this information changed their services? How is Birmingham learning from other areas, and how is this learning being implemented to make a difference?
 - 1.4.4 What is the current partnership strategy in place to address CCE in the city? How is this strategy being supported and delivered through partners? What are the partnership mechanisms for collaboration, and how effective are they? How effective is its governance structure?

- 1.4.5 Who are the key statutory organisations and what are their respective roles in addressing CCE? What investment is provided to these organisations, and has this changed over the past four years? What are the current plans for investment to meet future demands?
- 1.4.6 What is the role of third sector and community-based organisations involved in tackling CCE? What are the key challenges they face, and what are the solutions they have identified to tackle these challenges? How effective is the cross sector working?
- 1.4.7 How does the Council and Partners identify and assess risk for children and young people together for CCE? How are they responding to the challenge in identifying girls and young women as victims? How are the Council and Partners working together to deliver effective interventions when children and young people are likely to be both victims and involved with committing offences at the same time?
- 1.4.8 How are the Council and Partners working with families to support children and young people at risk, or involved with CCE? How are schools and partners working together to reduce the risk of school exclusion?

2 Recommendations

- 2.1 That the appendix attached is noted and the information provided to the Committee is used to inform the Inquiry on reducing the risks of criminal exploitation for young people

3 Any Finance Implications

- 3.1 None

4 Any Legal Implications

- 4.1 None

5 Any Equalities Implications

- 5.1 None

6 Appendices

- 6.1 Evidence Gathering – The Youth Service – Appendix 1



Birmingham Youth Service Report – 17th May 2023

To: Education & Children's Social Care O&S Committee
 Date: 17th May 2023
 Authors: Soulla Yiasouma, Head of Youth Service

This report provides the Youth Service response to the Child Criminal Exploitation Inquiry.

1. Background Information

1.1. Birmingham Youth Service operates from 16 Centres in Birmingham and works with young people aged 11 – 25 with the core group being 13 – 19 years old. The Youth Service is an open access service open to all young people. The majority of our youth centres are in areas of high deprivation and therefore reach the most vulnerable. In addition to our youth centres, we also have some city-wide project work – Sexual Health, Youth Violence and Youth Voice.

1.2. Each Youth Centre offers:

- Information, Advice and Support to young people by a qualified youth worker
- A safe place for young people – somewhere they can be emotionally and physically safe.
- A positive relationship with a “trusted adult” (the youth worker) which is built on honesty, respect and is non-judgemental.
- The Umbrella Scheme – provides sexual health programmes, STI testing and condom distribution.
- Targeted programmes – examples include PVE, youth violence, sexual health, health and employment
- Opportunities for young people to get involved in activities, examples include drama, sports, events, residential experiences.
- Volunteering Opportunities
- Youth Participation – an opportunity for young person’s voice to be heard.
- Intensive support for NEET young people
- Resilience 2 Resolve Youth Violence programme

1.3. Birmingham Youth Service **empowers young people to achieve and live their best life by creating a safe space where they can access high quality youth service.** The Service worked with 7,010 individual young people and had 97,245 attendances in 2022/23.

2. Youth Service Contribution to CCE agenda

2.1. Our 16 safe spaces and the relationship built with the young person creates the right environment for the young person to feel safe and have a trusted adult to share their concerns and fears as well as their hopes and aspirations. It also allows the youth worker to get to know the young person and help them to overcome their challenges and barriers as well as reaching their goals and aspirations.

2.2. Through the relationship built with young people youth workers are in an excellent position to notice changes in behaviour, peer groups and other indicators of CCE. When youth workers identify concerns around a young person they will always act on these and will always try to involve young people in these actions. Examples include

- Talk to the young person
- Sharing information with school or other agency involved with the young person to see if they have noticed any concerns
- Consider sharing info with parents
- Support their friendship group to see if they have concerns
- Contact EmpowerU
- Submit a FIB form to the police if appropriate

2.3. Through our Youth Participation Work (Youth Voice) we support 45 young people to influence change to ensure that services are responsive to the needs of young people. An example of this is through the IAG (Independent Advisory group) which supports the police to listen to feedback from the community. We lead on a young person's IAG and have established a young women's IAG group to addressing the police response to violence against young women. These groups meet bimonthly. Through the young women's IAG, young women have talked to police officers about how they can change their practice to improve their relationship with young women and be more responsive.

We will be supporting 4 young people to attend the Op Sentinel Conference in June and they will be sharing their experiences of forced marriage and running a workshop with the police. There will be over 40 forces across the country attending this conference.

These young people have also met with the Home Office to discuss forced marriage and the effects on the children born from this relationship. Their voices and experiences will influence a paper with recommendations that will go to the border force about how they can improve their service.

2.4. There has been an increase in the delivery of single sex provision in the service and in particular "Girls Groups" from three groups to nine. These spaces allow for sensitive topics to be discussed with peers and youth workers in a constructive and meaningful way. We use these group to discuss exploitation, healthy relationship, misogyny and resilience.

In 2022/23 we worked with 304 young women across these nine groups

2.5. Among many examples the following highlight some of our work

- A youth worker at Clifton Road Youth Centre identified changes in behaviour and friendship group of a young person in care. Talking with the young person the youth worker was able to bring this out into the open and have the discussion with their carer's. Working together with the care home and school we have been able to support this young person to move away from this group and no longer associated with this group.
- The youth workers at Concord Youth Centre in Sparkbrook have been able to be that constant positive adult in their life and supported them to positively engage with wider organisations to address his exploitation. Through open and honest conversations and mutual respect this relationship has benefitted the young person as we are able to challenge support and advocate on his behalf, support him to understand interventions that have been put in place and be someone that is there for him and not only for what he is going through

3. Scale and risks

3.1. Youth Workers are reporting back anecdotally that the scale of CCE has increased in recent years. This observation is based on conversation we have with young people which is supported by feedback and discussions we have with parents, partners, and community stakeholders.

3.2. Factors that we have been able to identify through these conversations with young people include:-

- The cost of living crisis has left many young people vulnerable to exploitation. BYS conclude through engagement with CYP that many more young people are more likely to be exploited into criminal activities to make ends meet. This, coupled with poverty, social exclusion, and lack of support, has made them easy targets for gangs who offer them money, drugs, and a sense of belonging.
- The Covid-19 pandemic has also played a role in the rise of CCE in Birmingham. The pandemic has disrupted education, young people's development, contributed to an increased feeling of isolation and lack of support.

3.3. Youth workers have identified the following risks for young people

- The trauma associated with exploitation can have long-lasting effects on young people's mental health, leading to anxiety, depression, and other mental health issues.
- The physical risks associated with CCE are also significant, with young people being exposed to increased level of violence used as a method of control.

4. Partnership work

4.1. The Youth Service has developed some strong partnership work to ensure that we can be effective in our support young people. We will advocate on behalf of young

people as well as supporting them to access services. The importance of walking alongside the young person can make the difference as to whether they engaged with more specialist services or not.

- 4.2. The relationship developed with EmpowerU (The Contextual Safeguarding Hub) is critical to this work ensuring there is good communication between the two services enabling a joined-up response to young people.
- 4.3. The close relationship with the Violence Reduction Partnership allows for a more strategic approach to tackling this issue. Services offered to young people are looked at in a wider context ensuring that gaps are filled, and duplication of provision reduced. Examples of these include joint commissioning of activities with the VRP, establishing networks of providers for summer activities in hot spot areas and working closely with VRP when allocating resources so that they can fill the potential gaps in provision.
- 4.4. The Youth Service is part of Operation Wellington which is a police led response to supporting young people at risk. Key partners (Housing, Education, BCT, Schools, health, Violence reduction partnership and Youth Offending Service) meet regularly to share information, identify interventions to help support young people with a focus of young people exploited.
- 4.5. There is a close relationship with the Community Safety Partnership (CSP) around delivering the Resilience 2 Resolve programme (youth services response to youth violence) and we are also developing links with the Violence Against Women and Girls lead to explore how we can work more closely together on this agenda.

5. Summary and Reflection

- 5.1. The Youth Service supports young people to build their resilience and develop strategies to cope with their situations. This is based on a voluntary relationship between the **youth worker and young person centred on building a positive relationship with the young person. This relationship** is based on trust and mutual respect which supports and develops the learning experiences and personal development of the young person. Youth workers adopt a young person-centred approach and they work with the young person with no pre-set agenda and this allows the young person to navigate the relationship and set the pace. Using their skills and their professional approach they support the young person to navigate their feelings and support them to access other services.
- 5.2. It is important through our work around exploitation and when working with young people we use language that recognises young people as being victims rather than a lifestyle choice. This will help reinforce that this is about abuse and exploitation and will support young people and agencies to understand their journey.
- 5.3. The majority of our work is around early help and prevention. It is difficult to measure the preventative work we do with young people unless we explore the social return on investment. We may never know how many young people that we have actually prevented from being exploited. We raise young people's hopes and aspirations, develop their skills to be more resilient, increase their awareness around CCE and ensure that they have fun and memorable experiences. As the

saying “not everything that counts can be counted”. However, we are planning to measure the impact of the youth service more effectively with our partners.

- 5.4. In addition to the direct support we offer young people its important to recognise that this has to be a partnership approach with other agencies. We have a role to broker support for the young person and also to bridge and potential barriers that can prevent the young person engaging with these services. Our role is to support young people to positively engage with more specialist services and ensure this joined up approach offers the best possible services to our young people.

Birmingham City Council

Education and Children's Social Care Overview and Scrutiny Committee

Date: 17th May 2023



Subject: SEND Improvement Programme

**Report of: Sue Harrison (Director for
Children and Families)**

**Report author: Helen Ellis (Director for
SEND and Inclusion)**

1 Purpose

- 1.1 To provide the Overview and Scrutiny Committee with an update on the SEND Improvement Programme from inception to date.

2 Recommendations

- 2.1 Members note the report attached as Appendix 1 and agree any comments/recommendations.

3 Any Finance Implications

- 3.1 The implementation of the SEND Strategy and the Inclusion Strategy has implications for the High Needs Block of the Dedicated Schools Grant and the General Fund. The service will manage and contain the relevant costs from within the existing High Needs Block funding allocations and the General Fund including the additional resources requested via the budget setting process.

4 Any Legal Implications

- 4.1 The delivery of the SEND Strategy and the Inclusion Strategy named in this paper will support the Council to fulfil many of its statutory duties. In particular, the Council must ensure that its relevant education and training functions are exercised by the authority with a view to promoting high standards, ensuring fair access to opportunity for education and training, and promoting the fulfilment of learning potential by every person under the age of 20 and person aged 20 or over for whom an EHC plan is maintained, by virtue of section 13A of the Education Act 1996.
- 4.2 The Local area partnership was non-compliant with the SEND Code of practice in several areas. The SEND Improvement Programme will ensure that compliance is achieved and embedded in working practices.

5 Any Equalities Implications

- 5.1 Providing a fit for purpose SEND Local Offer across Birmingham which incorporates, education, health and social care, plus co-production with parents/carers, children and young people means that those children with protected characteristics under the Equalities Act 2010 who would previously have been failed by the system will have faster access to the support they need, enabling them to reach their full potential.

6 Appendices

1. Narrative Report

Birmingham City Council
Education and Children's Social Care Overview and
Scrutiny Committee
 Date: 17th May 2023



Subject: Narrative report: SEND Improvement Programme
Report of: Sue Harrison (Director for Children and Families)
Report author: Helen Ellis (Director for SEND and Inclusion)
helen.ellis@birmingham.gov.uk

1. Background and Context

1.1. In September 2018, as a result of an Ofsted/CQC Inspection of SEND services, Birmingham received a Written Statement of Action (WSOA) outlining 13 areas of significant weakness. The local area was judged unable to meet the needs of children with additional needs/SEND through appropriate provision.

1.2. A re-inspection by Ofsted and CQC from 24th to 27th May 2021 looked at Birmingham's provision (for children with additional needs/SEND) and confirmed (in the letter dated 6 Jul 2021 from the chief inspector):

"The area has made sufficient progress in addressing one of the 13 significant weaknesses identified at the initial inspection. The area has not made sufficient progress in addressing 12 significant weaknesses."

1.3. On 15 Oct 2021, the Minister wrote and informed Birmingham City Council that John Coughlan was their appointed representative under Statutory Direction to 'Direct' Birmingham in how the local area must improve the approach and the provision for children with additional needs/SEND. [The statutory direction is at this link.](#)

1.4. In December 2021, the SEND Improvement Board (SIB) convened, drawing together the most senior strategic leaders from all relevant stakeholders across Birmingham. John Coughlan chairs this group and is accountable to Ministers for the progress made by the local area to address the areas of significant weakness and to monitor the performance against the outcomes required.

1.5. The DfE and NHS England have dedicated representatives observing and checking progress via 'critical friend' analysis to help prepare the

local area for future inspection(s). We provide a detailed “stocktake” of progress to them every 6 months.

2. The Accelerated Progress Plan

- 2.1. In response, Birmingham’s SEND partnership, consisting of council, local and national health partners and school leaders developed the Accelerated Progress Plan (APP) to address the areas of significant weakness.
- 2.2. The council committed additional resources to the SEND Improvement journey and appointed a SEND Transformation Team to work with the local health and social care partners (and their sub-contractors) and educational settings. All the elements of the plan were grouped together into four Objectives:
 - System Leadership (Objective 1)
 - Getting the Basics Right (Objective 2)
 - Working Together Well (Objective 3)
 - Pathways (Objective 4)
- 2.3. This gave us four coherent units of work, each led by a project manager under the direction of the Programme Manager. The programme reported monthly to the SEND Management Group and SEND Improvement Board (chaired by John Coughlan the DfE appointed Commissioner) during 2022 and it now reports every six weeks to both groups.

3. DfE Stocktakes

- 3.1. Two DfE stocktakes have taken place to date, in June 2022 and December 2022.
- 3.2. In addressing the areas of significant weakness, the local area has made progress in many ways, and there are areas which continue to evolve before they become Business as Usual (BAU).

4. System Leadership (Objective 1)

- 4.1. Relationships with parents, carers, children and professionals are at the heart of our practice, working in partnership to achieve the best possible outcomes for each child / young person. We can address challenges and concerns through restorative practice. A refreshed [SEND Strategy](#) was approved by Cabinet on 21st March 2023 for the next five years together with a new [Inclusion Strategy](#). A launch date

of 10th July 2023 has been confirmed for both strategies. These link to the Children and Young People's Plan.

5. Birmingham SEND strategy

- 5.1. The strategy was co-produced in partnership with school leaders, parents and young people between May and October 2022. Multi-agency sessions were held to ensure a wide cross section of parents, professionals and other stakeholders.
- 5.2. We engaged with children and young people throughout the co-production of the SEND and Inclusion Strategies. The voice of the child was sourced via eight different workshops run in special schools across all age ranges plus two in the community with those who had been through education and were still in receipt of some support. Their comments were used to create the priorities and content of the strategies and also how we will measure success.
- 5.3. The SEND Strategy has eight priorities:
 1. Effective early identification of needs with appropriate and timely assessments across education, health and care
 2. Collaborative graduated approach delivered consistently across the city, ensuring the right support and provision are in place as soon as possible
 3. Smooth transition across education, health and care at every stage of a young person's life, particularly the transition to adult life
 4. A comprehensive review of the provision in educational settings across Birmingham to deliver an offer which is aligned to national and regional best practice
 5. District based model of provision, right support, right place, right time with improved access to provision which meets the needs of families, children and young people in line with the Children and Families Act 2014 and the SEND Code of Practice.
 6. Excellent communication and engagement between children and young people, families, education, health and care services, including schools.
 7. A resilient, skilled and sustained SEND partnership team that delivers impact and positive outcomes for all children and young people who have additional needs.
 8. Improved collection, publication and analysis of data to inform the Birmingham SEND priorities in supporting children and young people in the future.

6. The Local Offer website

- 6.1. Content on the SEND Local Offer website (<https://www.localofferbirmingham.co.uk/>) is regularly updated and it is designed to be easy to use and find relevant information. An [EHCP handbook](#) was developed with the Parent Carer Forum to explain the process for requesting an EHCP and the Education Health and Care Plan Needs Assessment (EHCNA) process.
- 6.2. The Local Offer website now has web pages that support service users, their families/carers, and professionals to access helpful information that will improve their experience(s).
- 6.3. The SEND Local Offer website improvements have been co-produced with various stakeholders. It's now easier to find what you want on the site, content is improved, and there is now a searchable directory of SEND support.

Parent - I have found it much easier to navigate than the previous design, there are fewer steps to find the information needed.

- 6.4. There was a 28% uplift in unique page views from 1 Jan 2023 to 1 Feb 2023 compared with the same period last year. The 27,932 unique page views is 174% of the monthly target set for visitors to the site (16,000).
- 6.5. There is an open survey to baseline the feedback regarding the Local Offer website. Responses so far show 70% of people find navigation easier and more than 60% find the content helpful.
- 6.6. There is a video on the home page which explains what the website is and what it includes: <https://youtu.be/TcAbIK6EVQ0>. The signed version is at <https://youtu.be/eG6co9SAhK0>

7. Getting the Basics Right (Objective 2)

- 7.1. There is improved timeliness in the process, and enhanced communication with transparent and consistent approaches. Families have a clearer understanding of the processes. The number of EHCPs issued within the 20-week statutory timelines has increased from 51% in July 2021 to 67% in February 2023, in line with the national indicator of 65%.
- 7.2. The way the SENAR team works has been changed (eg. focus on age groups and/or geography) to better reflect the needs of the families we

support and we have developed robust standard processes making things more efficient.

- 7.3. There has been an interim restructure of the positions (levels and deployment) which currently is operating well. Funding was approved as part of the Council's Financial Plan by Full Council on 28th February 2023 and we can now move forward with the permanent redesign of the SENAR Service. This will create a sustainable and consistent SENAR Service.
- 7.4. Over 120 new members of staff have been recruited into the SENAR service, increasing the capacity to complete casework. At the time of the last Ofsted visit in 2021 the number of staff was 24. Most of these new staff however are not permanent employees, therefore a review of the SENAR team has taken place and a restructure has been approved which is being implemented in April 2023. This will result in the appointment of permanent employees leading to improved stability of the service and reduced staff churn.
- 7.5. All SENAR staff can make and receive calls through MS Teams and there is a voicemail function when calls are received out of hours. Previously this function was not available, making it difficult for parents and carers and young people to engage with the team. All staff have standardised their email signatures and phone numbers making them easily contactable by the families we support. The service structure is shared on the SEND local offer website and updated regularly to ensure current relevant information is always available.
- 7.6. Children and young people have their needs identified and met earlier, improving outcomes and reducing uncertainty for parents, carers and children and schools. Parents and carers and young people can hold schools and other partners accountable for ensuring provision is in place.
- 7.7. Our health partners have instigated daily meetings with coordinators to ensure the management of assessments is in place. This provides assurance that the allocation of waits internally and to third-party providers are effectively managed. For February 2023 the total number of children waiting is 974 with an average wait of 47 weeks. This is a reduction from October 22, with waits of 1,866 and an average wait of 87 weeks. The forecast to meet an average wait of 33 weeks by April 23 is currently on track.
- 7.8. The Balanced System for Speech Language and Communication Needs (SCLN) has become a cornerstone of the graduated approach (universal, targeted and specialist provision) with collaborative working between professionals resulting in children and young people receiving the right support in the right place at the right time. There are challenges with the availability of qualified Speech and Language

Therapists as well as the culture change needed to deliver this work effectively. However, it is a proven and well used approach nationally that delivers significant progress for children and young people, especially effective in early years and primary phase(s) to improve outcomes for children and young people as they get older.

- 7.9. We ensure parents and education settings understand the recommended way forward for the child and then implement those next steps effectively. Where schools have returned the annual review paperwork within two weeks, SENAR has achieved an annual review completion rate of 94%. The average number of annual reviews processed monthly has increased from 352 in 2021/22 to a projected average of 690 in 2022/23.

8. SENAR

- 8.1. More timely monitoring of CYP needs and provision. More timely changes in need or provision have been considered, and where relevant, the EHCP has been updated, ensuring children's current needs are met with effective provision. The EHCP gives an up-to-date view of the child, which supports professionals in targeting intervention and support effectively.
- 8.2. We are improving the quality of the EHCP content and correspondence with families, though more needs to be done. Quality Assurance (QA) of information provided throughout the needs assessment process and QA of the draft and final EHCNA/P paperwork content takes place. Invision, a tool used by multiple Local Authorities is used to QA the EHCPs, which allows benchmarking of quality against national standards and other local authorities. We monitor time frames ensuring compliance, transparency and accountability across the local area systems and teams. We have a better Annual Review process providing more timely adjustments to the provision required by each child to meet their changing needs.
- 8.3. As a result, the support children and young people receive via universal and targeted services is greatly improved. We are removing delays between the assessment of need and the delivery of interventions, resulting in more timely interventions and better clarity for children and young people, families and professionals.

9. Transitions

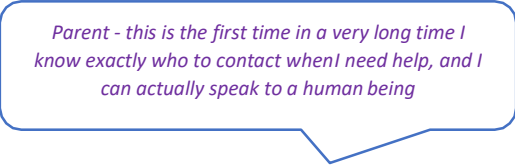
- 9.1. We ensure children, young people, and families know what setting they will be attending at the next stage of their education. The phase transfer process placed two fundamental principles of the Code of Practice as central: the presumption of mainstream education and parental preference. Effective transition planning enables timely

completion of phase transfers and orientation of children into their new settings. This includes multi-professional support to settings to allow them to meet needs confidently and competently. Where there are concerns from parents about the named placement, there is time for these to be addressed, and, where appropriate, another setting to be identified.

- 9.2. We met the Statutory Deadlines to issue school phase transfers for EHCPs in 2023, moving from a position of 0% in 2021 to:
- 2023 = 99% (2022 = 91%) of Reception placements were confirmed
 - 2023 = 99% (2022 = 97%) of Year 2 placements were confirmed
 - 2023 = 99% (2022 = 99%) of Secondary placements were confirmed

10. Working Together Well (Objective 3)

- 10.1. Professionals are improving services to families by all pulling in the same direction with one clear way of working.



Parent - this is the first time in a very long time I know exactly who to contact when I need help, and I can actually speak to a human being

- 10.2. Leaders in Health, Social Care and Education agreed to a Joint Working Protocol. And all parties are all committed to working more effectively together.
- 10.3. We have created different ways we can improve communications with parents and carers (and other stakeholders) as outlined in the new [Communications and Engagement Strategy](#). Regular newsletters are available [here](#), and a SEND Partnership Facebook page is in operation www.facebook.com/SEnDBirmingham
- 10.4. Eight 'Have your say' events were held, where parents and carers were invited to share their views and experiences of SEND support and services, co-production, and the SEND Local Offer website.

11. Co-production

- 11.1. Co-production is a pillar of how we will work with children and young people, families, and all of those within the local partnership have signed up to the co-production charter. We have recruited a co-production and engagement lead tasked with bringing clarity and

embedding co-production within the ways of working across the local SEND landscape.

- 11.2. The Co-production Framework and Charter, published in Summer 2022, sets out how organisations in the SEND Partnership will work with parents, children and young people and their families.
- 11.3. Co-production has four elements: co commissioning, co-design, co-delivery and co-assessment and parents, children and young people will be involved in all of these where appropriate.
- 11.4. Co-production must also take place at an individual level and parents, carers, children and young people must be included in the EHCNA, EHCP and Annual Review processes as equals with a say on what support is required and how it is delivered. This is a “person centred planning” approach.
- 11.5. Older children and young people have told us that they want their own voices to be heard without mediation via parents or carers. We are co-producing a young peoples’ engagement strategy with the groups of young people and relevant professionals.

12.Reducing Waiting Times

- 12.1. We have reduced waiting times in some services and have launched an electronic referral form to streamline the referral process and reduce any confusion on how referrals should be made to the local Neurodevelopmental pathway (NDP). The Local Offer website also has information that will help people have a better experience on the NDP.
- 12.2. We have worked with external partners to transfer thousands of referrals to them to reduce the number of CYP waiting for ASD assessment in the face of increased service demand. We have written to all referrers explaining changes to the process. New ASD referrals are now all directed to NDP.
- 12.3. Investment is being made in the balanced system for therapy provision across the local area. This will train staff to assess needs and provide support within their own professional context in the right place and at the right time, resulting in more timely interventions for children and young people with therapy needs.
- 12.4. This approach will also be used to deliver a graduated response across the partnership for many other services as we evolve a locality - based delivery model across Birmingham.

13. Case Management

- 13.1. We are improving data recording, case management and tracking processes. We have increased data visibility where appropriate and reduced the use of multiple spreadsheets. The aim is to have complete data for each child on NEXUS (our current case management system) enabling a full picture of the child's needs. We hope to have the full system embedded in early 2024.
- 13.2. We have effectively enhanced our tracking processes to support young people into opportunities post-16. We continue to build opportunities for young people post-16 and post-19 and ensure sustainable outcomes.

14. Complaints and appeals – an improving picture

- 14.1. In the last 12 months, there has been an average of 26 formal complaints per month compared to an average of 36 per month in 2021-22. This indicates that concerns are being resolved with parents without the need for them to make formal complaints
- 14.2. The average number of days to close a formal complaint is 18.3 days in the last 6 months compared to an average of 25 since Feb 2022. This minimises the anxiety for parents while they wait for a response.
- 14.3. In the past 12 months there have been 406 mediations compared to 158 in 2021-22. This means more concerns are being resolved informally, without parents needing to undergo the lengthy tribunal process.
- 14.4. Over the last 6 months, 31.5% of mediations overturned the existing decision (low is good). This is indicative of reasonable flexibility on the part of the LA to reach an agreement with families but also confirms the robustness of decision-making within the LA.
- 14.5. Tribunals following mediation equate to only 15% of tribunal cases (low is good). This demonstrates that even where the original LA decision has not been overturned, most parents are assured through the mediation process and do not feel the need to progress cases further.

15. Pathways (Objective 4)

- 15.1. A new Inclusion Strategy which links closely to the Children's Plan has been agreed by Cabinet. The Inclusion Strategy (which applies to all children in Birmingham) sets out the shared vision, key principles, principles of practice and contextual factors to ensure that across the partnership we are working effectively to identify and meet the needs

of Birmingham's children, young people and young adults, for the next five years. It has three key principles:

1. Recognition of the UN Convention on the Rights of the Child
2. Enabling children, young people and young adults to thrive is everyone's responsibility and success is dependent on strong and effective partnership working
3. Some children, young people and young adults currently need support in order to thrive and achieve as well as their peers.

16. Improved SEND provision in mainstream schools in Birmingham

- 16.1. Some children do not qualify for an EHCP but need additional support to thrive at school.
- 16.2. There are also some children with an EHCP who do not require a place in a special school but require specific support to make progress at school.
- 16.3. The Developing Local Provision (DLP) project is an additional £14m investment for mainstream schools and early years settings to build and develop their SEND knowledge, skills, and provision to help pupils with SEND do better within mainstream schools.
- 16.4. There is excellent evidence of the improvement that some of these projects have made to children with SEND in both secondary and primary mainstream schools (the DLP is available to all mainstream schools). An evaluation of the first phase of DLP, undertaken in October 2022, is included with this report as Appendix 1.
- 16.5. DLP has been running for over a year in Birmingham, and the projects already in place are improving the progress and outcomes for children and young people:
 - 29% increase in SEND pupils achieving the expected standard – Year 1 Phonics screening
 - 12% increase in SEND pupils on track to reach a 'Good Level of Development (GLD)*'
 - 16.5% increase in SEND pupils reaching early learning goals in Communication and Language
 - 18.6% increase in SEND pupils reaching early learning goals in Reading
 - 14% improvement in social thinking and problem-solving (57% – 71%)
 - 1 Year 8-month increase in reading age and comprehension age (Accelerated Reader)

- 37% increase in receptive and expressive language scores (16-53%)
- 16.6. As part of the DLP, the Special School Outreach Service has been developed to provide additional specialist SEND support for children and young people and school staff in our mainstream schools.
 - 16.7. Mainstream schools can now access support from special schools directly to meet the needs of more pupils through a referral system. This initiative will provide and build additional capacity across Birmingham to improve provision and outcomes for children and young people with SEND.
 - 16.8. For more information, please read the [DLP Newsletter](#).
 - 16.9. DLP 'Phase 2' is launching with a series of roadshows in April and May 2023. Using the intelligence gathered from the work over the past three years, the team(s) are working with education settings to deliver the interventions that have the greatest impact. Eg. speech and language therapists support groups of children, train staff in speech therapy, and supply speech and language programmes across the partnership of schools. This has resulted in 16.5% increase in SEND pupils reaching early learning goals in Communication and Language. There are many more examples and these will be implemented across the city as we move forward with DLP Phase 2.
 - 16.10. We have made a difference by raising the profile of children vulnerable to exclusion or suspension from school across the local area leading to improve identification and to improve outcomes.
 - 16.11. We have instigated robust processes and improved intelligence around the cohort of children with EHCPs who are out of school. With earlier identification, we can inform future practice to prevent/reduce the number of children in that cohort falling out of education. This is alongside improved identification of children and young people who do (and those who do not) need support from the Home Bridging Team. We are ensuring children with EHCPs get a better-quality educational offer thus improving their outcomes.
 - 16.12. We robustly hold partners, including schools, to account for continuing to provide education for children that previously would have been referred to the Home Bridging Team on a reduced educational offer.

17. Other quotes supporting the distance travelled so far.

Comments from a CAT teacher about how much better communication is within SENAR, and the same from the SEND lead for the FMAT academies who was a recent witness at a hearing. The praise from this witness was also very complimentary about the Tribunal team regarding keeping in the loop, explaining the process and generally being supportive of the school

Leanne Burke, our SENCO has just reported that the communication with SENAR (yourselves) has been faultless and the best amongst all the LAs we work with. This is the first time I have heard this in the 8 years we have run Riverside. Thank you so much for making our job easier and less stressful

In interactions with – particularly mainstream – schools and other services the mood in relation to dealing with us is really buoyant and positive. Things like “Do you work with so-and-so? Oh they’ve been really helpful on another case”

18. What we are doing now

- 18.1. In addition to maintaining the momentum for all of the above activities, we will also continue to evolve and enhance the following. We still have a long way to go to become the best we can be.
- 18.2. We will ensure the development of the above actions and the following activities continue so we provide the best possible quality, collaborative and partnership approaches which result in better outcomes for our children and young people in Birmingham.
- 18.3. Through multi-agency task and finish groups and through the continued reinforcement of good practice and co-production with families, we are preparing education, health and social care colleagues for the next Ofsted and CQC inspection.
- 18.4. Through embedding quality assurance (QA) systems (audits and analysis) we will learn from, share and build upon good practice. Using existing models of QA from partners internally and externally, we will improve multi-agency working, understanding between partners and the delivery of services to families and colleagues.
- 18.5. We have some distance to travel with QA but have commenced reviews and audits of: data collection and cleansing; multi-agency decision making panels; Standard Operating Procedures; co-production charter and the embedding of practice; engaging families in

processes which affect how they access the right type of provision to meet needs and the content of the plans which relate to them;

- 18.6. Induction and other handbooks in production to make learning and development and on-boarding of staff much more effective now and in the future.
- 18.7. A partnership-wide Learning and Development and Workforce Development Strategy is being evolved to ensure we attract and retain the best talent for Birmingham.
- 18.8. Collecting, collating, recording and reporting data across the partnership still needs significant work to become more effective in supporting strategic decision-making. There are plans to build a dedicated Children and Families data team in time for September 2023.
- 18.9. Plans are in place, and we now move to gain the commitment of the partnership to implement the delivery of the Inclusion Strategy, The Children and Young People's Plan and the SEND Strategy.
- 18.10. A number of health initiatives will continue to reduce the waiting times for initial assessment and accessing services. Eg. increased capacity or therapy provision, autism diagnosis.
- 18.11. DLP will continue to roll-out Phase 2 and support settings to intervene as early as possible and deliver positive outcomes and progress for children and young people.
- 18.12. Work with Adults Social Care to continue to evolve the transition process as early as possible and through providing appropriate data so that decisions and plans can be made for individuals moving from children's to adult services.

19. Conclusion

The above is not just a 'Statutory Processing' or a SENAR issue. This overarching, partnership approach requires sustained commitment from all partners to the strategic and operational goals: *Being bold* and courageous, we will provide a place where *Birmingham children thrive*.

20. Appendices

Appendix 1: October 2022 evaluation of Phase 1 of DLP.

EVALUATION OF THE DEVELOPING LOCAL PROVISION PROJECT (DLP)**OCTOBER 2022****Contents**

Purpose of the paper	3
Evidence used to compile report	3
Aims, Context, Range and Scope of DLP	3
Aims	3
Context (National and Local)	3
Principles of DLP	4
Organisation of Partnership working for the DLP	5
Range of projects supported by DLP funding	6
How the DLP is funded	7
How is the effectiveness of the DLP tracked and monitored	8
How the DLP is governed	9
The Structure	9
The Steering Group	9
The Reference Group	10
The Journey - What has happened /been done over the last year	10
EVALUATION	12
Context of evaluation	12
Engagement of schools	14
Impact on Parents and Carers and Children and Young People	14
Wider Impact of DLP as reported by schools and stakeholders	14
Partnerships causing concern	15
Funding	15
Monitoring, Reporting and Governance	15
Learning from DLP	17
Leaders of overall DLP project reported the following learning from DLP	17
Limiting factors	18
Recommendations	19
DLP – Options October 2022	20
Where should the DLP be sited in the Local Authority?	20
Option A – Schools & Families Directorate as a school improvement role led by a new LA SEND advisor	20
Option B– Pupil Support Services (PSS)	20

Option C – Accountability with AD for SEND through a BEP commission	21
Option D – Commissioning Services	21
Option 1 – Cease DLP (i.e. the initial needs and/or operating models are proved wrong)	21
Option 2 – No change - carry on as we are with recommendations included (i.e this level of spend on collaboration requires no ongoing support or scrutiny)	22
Option 3 – To make engagement in the DLP optional with prescribed LA interventions for localities who don't opt in to DLP (including all evaluation recommendations)	23
Option 4 – Carry on as we are (with recommendations included) and invest more funding in the DLP for successful consortia and networks /projects through enhanced allocations.....	23
Recommended Future Model	24
Leadership and Accountabilities of DLP.....	24
Strategic Planning of DLP	24
Delivery and Implementation	25
Funding	25

Purpose of the paper

The following report is an evaluation of the Developing Local Provision Project after the first year of its implementation. The evaluation is provided to supply leaders of the council with the requisite information to enable a decision to be made on the future of DLP. This evaluation does not relate to the Early Years DLP as this project has only been running for one term and therefore will be reported on separately in March 2023.

Evidence used to compile report

The evidence base used for this evaluation draws on a range of both quantitative and qualitative data including;

- Termly Reports from schools and termly analysis outlining progress towards KPIs, spend, engagement of schools, wider learning, and barriers/challenges
- Consortia Partner Reports and termly analysis
- Reference Group Evaluation
- Reference Group Feedback Sessions Presentations from consortia, networks on progress and impact.
- Parent/Carer Surveys
- Reviews of the views of children and young people are to be undertaken in the first half term Autumn term 2022

Aims, Context, Range and Scope of DLP

Aims

The aim of the DLP project was to enable and empower mainstream school leaders to work together in localities to identify needs and resources needed for Children and Young People (CYP) with SEND and to access the necessary provision easier and quicker to support early intervention to improve outcomes.

Context (National and Local)

The DLP project, in its entirety, is a two-year school led pilot project funded by £7m per year from the high needs budget.

The DLP is a strategy that aligns well with that of the DfE shared in February 2021, who stated their biggest area for reform was to reform SEND provision in mainstream settings by enabling schools to access resource earlier and quicker and incentivise them to work together to intervene earlier by putting a greater share of budgets into the hands of local school leaders. The DfE states that they recognise that this SEND provision would be above what an individual school would be able to arrange and thus would promote cooperation and inclusion through a clear funding incentive and accountability structure.

At the time of the initiation of the DLP project, Birmingham had failed its Local Area Inspection in 2018 and again in 2021. In both inspections the progress and outcomes, attendance, exclusions, and employment opportunities of CYP with SEND were judged as requiring improvement.

Contextual data at inception of DLP also showed that Birmingham had significantly lower numbers of CYP with SEND in mainstream schools and higher numbers in special schools, thus many CYP were

not educated in the locality in which they lived, and many were travelling significant distances to get to school. Parents and carers confidence and satisfaction were also reported as very low as a result Birmingham identified the following three strategic priorities:

- Enhance the capacity of mainstream schools and settings to work together to provide for pupils in their local area and to plan the provision that they need
- Reduce reliance on high-cost specialist placements in out of City schools
- Enable pupils to access high quality provision as close as possible to where they live

And the following related KPIs were in place – although at that time there was limited focussed work taking place to address these

- Increase the number of pupils whose needs are met within mainstream schools locally without the need of an EHCP
- Improved performance, attendance, and achievement of vulnerable pupils within localities, consortia
- Lower home to school transport costs
- Reductions in numbers of pupils in independent placement
- Reductions in NEET for pupils in vulnerable groups
- Reductions in numbers of pupils from vulnerable groups on home tuition, children out of school
- Improved satisfaction of parents and pupils (measured through surveys)

However internal locality data analysis, at the time, also reflected that priorities were different in different areas of Birmingham so that generic citywide Key performance indicators were not always appropriate.

The DLP project was therefore designed to support and address these priorities and to align their approach to the recommendations of the DfE at that time Since then the DfE Green Paper March 2022 has also been published and reinforces and validates the DLP approach reporting that they are working towards:

- *changing the culture and practice in mainstream education to be more inclusive and better at identifying and supporting needs, including through earlier intervention, and improved targeted support.*
- *Improving mainstream provision, through excellent teacher training and development and a ‘what works’ evidence programme to identify and share best practice including in early intervention*
- *By 2030, all children and young people will benefit from being taught in a family of schools, with their school, including special and alternative provision in a strong trust or with plans to join or form one, sharing expertise and resource to improve outcomes*

Principles of DLP

The principles of DLP were agreed and shared with schools. These principles were as follows:

- To facilitate and empower schools to work together collaboratively and in partnership in localities *(to better meet the needs of children and young people at the universal and targeted levels of need)*
- Recognising and valuing the participation of all schools regardless of context.
- To build solutions, breakdown barriers and develop and improve current provision and outcomes for children and young people with SEND and their families in the locality within which they live

- To strengthen the system to reduce variability and to promote and ensure inclusion and equity of provision for all
- Approach based upon transparency, openness, trust, and empowerment
- To promote and value creativity, innovation and evidence based and research led approaches
- Working towards long term sustainable improvement alongside short-term solutions
- Maximise efficient and effective use of resources with accountability for impact on the outcomes for children and young people

The expected outcomes of the project were also agreed and shared with schools:

- Objective 1: The needs of more pupils with SEND and their families at the universal and targeted levels of need are identified and met locally through increased resources, provision, and a more highly skilled workforce
- Objective 2: There is greater inclusion of children educated in their local community school and higher achievement among pupils who have special educational needs and disabilities, through more efficient and effective use of resources and as a result of effective and innovative school partnerships using evidence-based and research led approaches and strategies
- Objective 3: Outcomes and engagement, including progress and attendance for vulnerable pupils in primary and secondary schools in localities are improved and exclusions, children out of school, pupils in segregated provision including children on home tuition and children and young people who elect to home educate are reduced
- Objective 4: Improved and innovative provision for secondary pupils from vulnerable groups in the locality results in improved performance, engagement, attendance and progress and reductions in exclusions, children out of school and NEET population

Organisation of Partnership working for the DLP

Working with the Birmingham Education Partnership (BEP), it was agreed to use the existing structure of primary consortia (primary schools organised into 16 consortia partnerships) and secondary networks (6 partnerships of secondary schools in localities). It was also agreed that the DLP project work should be led by headteachers rather than SENCos. These consortia and networks had not worked around SEND previously in a highly focussed way and the strengths and leadership of these consortia and networks was variable.

Conversations with schools also indicated that schools were not always fully aware of their responsibilities around SEND or of the full context or strategic vision and direction across the LA for SEND, largely due to the many changes in leadership at all levels across Birmingham City Council.

At the time of the outset of the DLP, across the LA, the work of BCC teams and health professionals, working with EPs were building pathways within a locality so that children who would previously have been provided with EHC plans were better supported locally with the aim of involving heads to support more equitable and broader provision.

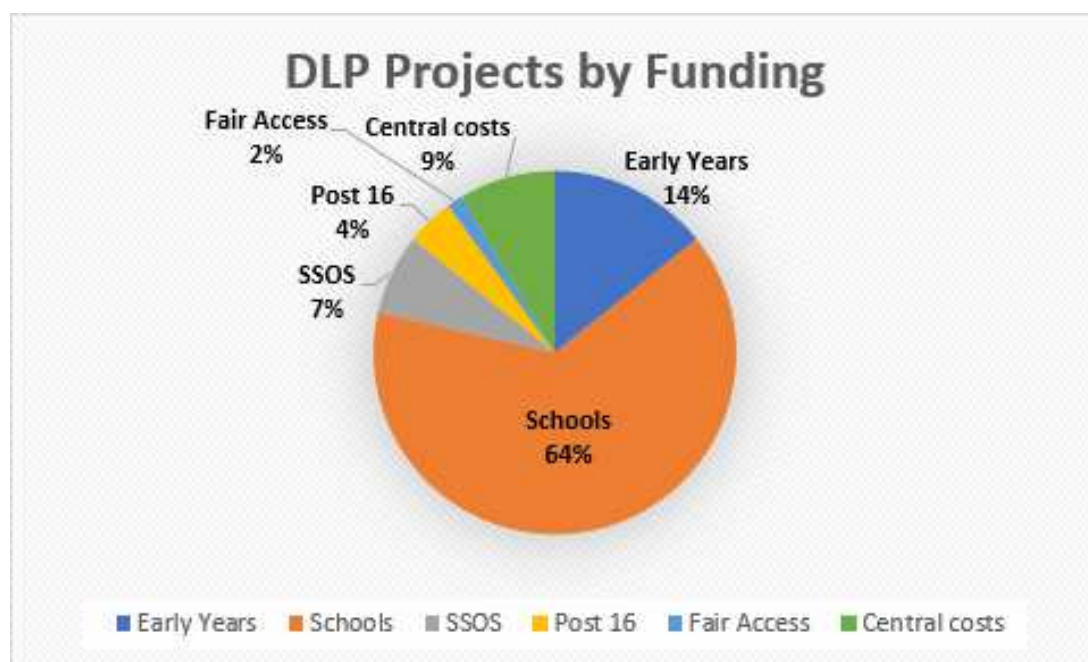
Secondary 'sharing panels' in localities were well established and had been in place since 2005

Although it was always an expectation that special schools would get involved in their consortia or network projects locally, they were not involved in meetings with the LA at the outset of the project specifically for two reasons. Firstly, some headteachers in the special school forum reported to the LA and to members of the council that special schools were unhappy at the use of the HNB for a mainstream project and as result, presented as a very real barrier to progress particularly as much

challenge from them was delivered in meetings with mainstream headteachers and with finance teams in the LA where schools were being encouraged to sign up to DLP.

Secondly, it was also agreed that it would be more prudent to bring special schools into the project later so that mainstream schools were not encouraged or tempted to defer and delegate the leadership of this project to the special schools, defeating the object of this work. However, special schools were all attached to consortia and networks to support the potential for involvement which has been achieved in some localities.

Range of projects supported by DLP funding



In addition to the 30 DLP projects being implemented across Birmingham's mainstream schools, there are four other work streams seeking to achieve strategic goals aligned to the DLP. These are

- Early Years Districts – 11 projects (allocated £1m which was shared equally across the 10 districts)
- Post 16 (1 project)
- Special Schools Outreach Service (1 citywide service)
- City wide project for vulnerable pupils not on a school roll – (Fair Access) (1 project)

Each of these four areas requires a separate decision about their future. The following evaluation focusses primarily on the projects centred on the 16 Primary Consortia and 7 Secondary Networks.

These projects involve schools and settings working together in partnership in localities with a range of partners e.g., LA support Services, Educational Psychology Services, Speech, and Language Services, SEND consultants and inspectors including ex HMI to implement a range of projects and working to an agreed set of KPIs which were developed following audits of need and analysis of SEND data for their locality. Plans and strategies have been wide and varied

For example:

- SEND and specialist training and development across partnerships of schools
- Locality SEND /DLP newsletters, websites, conferences, summer schools
- Assistant Educational Psychologists appointed to consortia
- Hubs for intensive support
- LA working with schools to reinstate pupils out of school-on-school roll
- Post 16 – directories of best practice and Quality Mark for Post 16 provision
- Early Years – stay and plays
- School SEND peer reviews with HMI and headteachers /senior leaders
- Transition – secondary schools working with 30+ feeder primaries
- SEND champions across schools

Summary of project themes

	Sp,L & C	SEMH	Autism	ADHD	Family	Consortia Specialist Worker *	External Specialist Worker *	Behaviour Support	Early Years
Sparklers (C)									
Cole Heath A/B (C)									
Erdington (N)									
Perry Barr (N)									
Sutton Coldfield (N)									
Aston Nechells (NW)									
Handsworth (NW)									
Ladywood & Soho (NW)									
Eastwards (E)									
FAYS (E)									
Saltley Plus (E)									
Hall Green (S)									
Kings Norton (S)									
Northfield (SE)									
Quinbourne (SE)									
Senneley's Park									

	Literacy	SEMH	Autism	ADHD	Family	Network Specialist Worker	External Specialist Partners	Specialist Curriculum Hubs	Transition
South West									
South									
East	*								
Central									
North - Sutton Coldfield									
North									
North West									

How the DLP is funded

The DLP was funded with £7million per year, for two years from the High Needs Budget. The initial process for allocating funding to schools was based on a formula related to the HNB formula. Each school was given a notional allocation based on a calculation using:

- factors of social deprivation worked out as a percentage (weighted at 27.5%),
- pupil numbers (57.5% weighted),
- number of low attaining pupils across a 3-year average (working below expectations) (15% weighted)

These notional amounts were agreed for each school. The average amount allocated to each primary school was £8,300 and to each secondary school, £23,300. Schools allocations were then aggregated into a total for the consortia/networks based on every schools' allocation in that locality.

Upon formal agreement of a project proposal, the funding was allocated via a Conditions of Grant Agreement between the LA and the "banker" school within a consortia/network.

The Conditions of Grant Agreement is a legal document agreed with LA officers, Legal and data Teams and schools which every DLP project lead had to sign on behalf of all schools and settings in their project, requiring them to provide termly reports on progress and impact of the project on a range of areas including engagement of schools progress towards KPIs related to pupil outcomes and budget.

The DLP budget overall was allocated in the following way:

- Schools £4.5 m
 - Early Years £1m
 - Special School Outreach £500,000
 - Post 16 £300,000
 - City wide project for vulnerable pupils not on a school roll £100,000
- Central costs for L and M of project (over 1.5 years allowing for slippage /lead in) £600,000
This includes BCC costs and those for the BEP commission

How is the effectiveness of the DLP tracked and monitored

At the outset of the project, LA Primary Strategic lead (who was a recently retired BCC headteacher from an outstanding school) and the Secondary Strategic Lead (who is the CEO of the Birmingham Education partnership) rolled out and monitored and reported on the start-up of the project, in the sector, escalating and resolving barriers to progress, sharing successes and reporting concerns to the DLP steering group. The DLP project lead and project manager report on progress to the SEND programme office monthly. This also involved strategic discussions with MAT leaders and CEOs with the BEP CEO to encourage involvement of MATs where possible, to align their work with the DLP projects in their localities

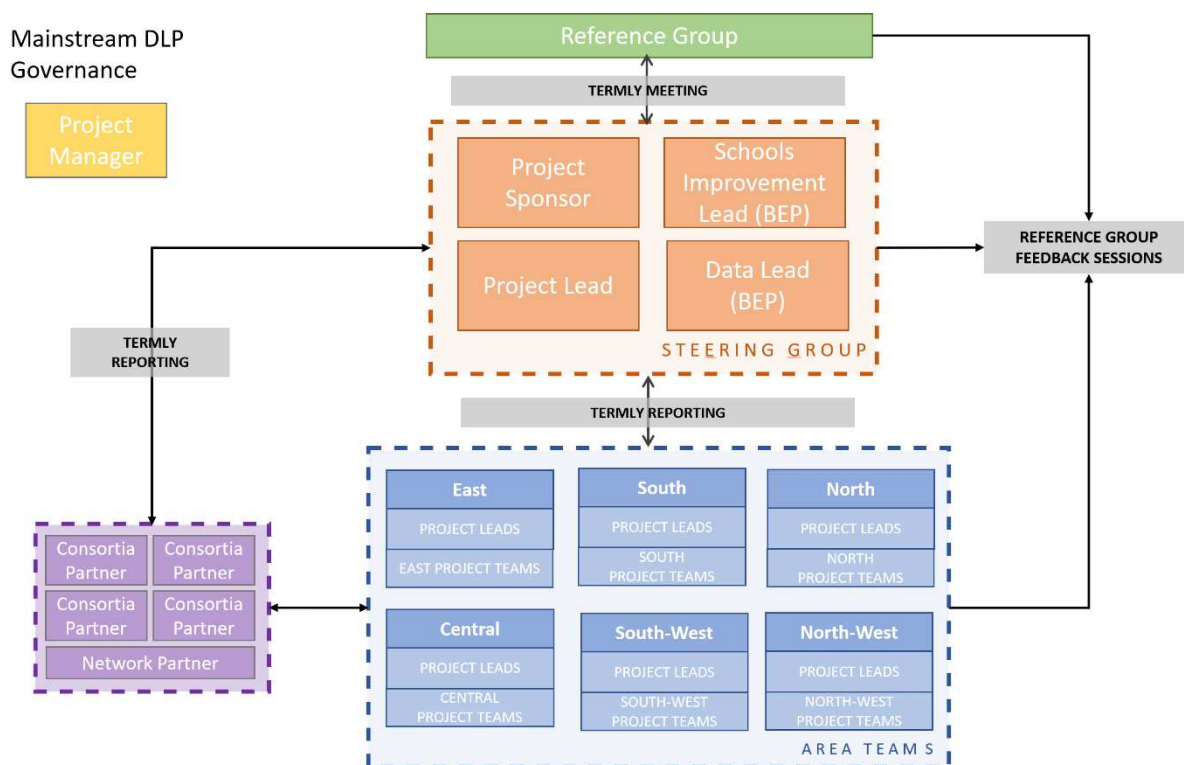
Once projects were running, Consortia and Network Partners were commissioned from BEP to offer support and challenge to the Consortia and Networks at project level. Each Consortia Partner undertakes a DLP discussion with every project lead and every school that they are involved with and provides a termly report to the DLP steering group on each project

Project Leads also submit a termly report to the DLP steering group reporting on engagement of schools, budget spend, progress towards KPIs and impact on outcomes for CYP, barriers to progress and wider learning – (See [Appendix A](#) for worked example)

These reports are analysed and areas of significant achievement, areas of concern, lack of progress or impact or under or overspend are followed up with relevant project leads. Every term each project lead reports to the Reference Group on progress and impact of project and the reference group offers significant levels of challenge and support.

How the DLP is governed

The Governance of the Mainstream DLP Project can be seen below.



The Structure

The Governance of the DLP Project was designed to align with the Primary Consortia and Secondary Networks Infrastructure that the Project was built on. This would allow for clear reporting and communication lines. Each Consortia/Network Project has a designated project lead, whom is the point of contact for all project communications, queries, and discussions via the Steering Group. They are also responsible for sending in Project Termly Reports and being the conduit/representative of the Consortia/Network at project level.

The Steering Group

The Steering Group deals with the day to day running of the project, supports projects and project leads, *offers strategic direction*, and is held accountable by the Local Authority. The Steering Group is made up of the following members:

Position	Name
DLP Project Lead	Debbie Holmes (BCC)
School Improvement/ Secondary Strategic Lead	Tim Boyes (BEP)
Data Lead	Roger McBrien (BEP)
Project Manager	Kudzai Madzivanyika (BCC)
AD BCC Rep	TBD

--	--

The Reference Group

The Reference Group is an advisory group that meets with both the Steering Group and Project leads on a termly basis. The group is instilled to provide professional recommendations, support, challenge, feedback and ensure the steering group is running the project as intended. The Reference Group is a collective of the below:

Position	Name
AD BCC Rep	TBD
DLP Project Lead	Debbie Holmes
School Improvement/Secondary Strategic Lead	Tim Boyes
Data Lead	Roger McBrien
Project Manager	Kudzai Madzivanyika
Special School Representative	Charlotte Stubbs
Secondary Head Representative	Pete Weir
Secondary Head Representative	Katherine Marston
Primary Head Representative	Oliver Wilson
Primary Head Representative	Rob Meadows
CAT, PSS Rep	Terri Cawser
CAT, PSS Rep	Rebecca Hughes
Educational Psychologist Representative	Pauline Bromfield

The Journey - What has happened /been done over the last year

- The DLP has been supported by comprehensive handbooks, both for the set up and for the implementation of the DLP.
- Training and workshops have been held at the request of headteachers or as a result of a need identified through monitoring procedures
- There has been a schedule of meetings with headteachers and MAT leaders which initially involved meetings with school leads/headteachers leading projects, both individually and as strategic groups. There has also been a regular update meeting with the reference group to both share information and to seek feedback from the sector and to inform strategy decisions. Meetings were also held for training e.g., funding and the setting up of the COGA, how to report impact, Sharing projects
- Initially meetings were convened by members to gain insights and feedback on DLP
- Meetings of the Steering group are held weekly to review and define/refine strategy.

- Strategic Lead for Primary and Secondary rolled out start up presentations to consortia and networks for buy-in and information giving
- Numerous individual meetings have been held with project leads as requested and required.
- Reference Group – Membership made up of Primary and Secondary Heads, LA Heads of SEND Services including PEP and Senior BEP Officers.
- Partnerships were provided with a SEND Audit together with the Contextual Locality data to identify priorities within their Consortia/Network
- Numerous internal communications across all services were delivered
- Produced locality contextual data which included academic performance, attendance, exclusion, and mobility of SEND which compared against Birmingham and national averages
- All projects were provided with support from SEND officers and data specialist to review and refine projects and set measurable KPIs.
- All partnerships submitted a costed project proposal (see [Appendix B](#)). Project proposals were reviewed by steering group and reference group – either approved or sent back for further detail or information
- Appointment of Consortia Partners in BEP to better support and monitor projects
- Termly Evaluation reports from CPs
- Workshop sharing good practice and measuring and reporting impact
- Post-16 project was strongly supported by BEP in start up
- City wide project for vulnerable pupils not on a school roll – supported by BEP with headteachers and monitoring through weekly meetings
- EY DLP start up and roll out
- Termly Reports and presentations to Reference Group from partnerships inc Engagement, Progress against KPIs, Parent/Carer feedback, funding, wider impact, barriers, and learnings
- Newsletter circulated with key messages and examples of impact across BCC and to schools

EVALUATION

Context of evaluation

The impact of DLP has many facets and due to the scale and range of the DLP (44 projects), it is impossible to report on all projects and progress towards their KPIs. There is a summary report with highlights to reflect the impact of many DLP projects on their KPIs on progress and outcomes for CYP.

Examples of Progress towards KPIs

Eastwards

- Percentage of children with SEND reaching Early Learning Goals (ELG) in Communication and Language (CL) in listening attention and understanding increased by **12%**
- Percentage of children with SEND reaching ELG in speaking and reading inc, comprehension increased by **14%**
- Percentage of SEND pupils at expected standard in reading at KS2 increased by **20%** from 23.2% to 43.4%

Erdington

- Number of fixed term exclusions for children using "Motional" resources reduced by **95%** from 20 to 1
- Number of fixed term exclusions for children with ADHD reduced by **93%** from 15 to 1

Kings Norton

- Percentage of CYP (EHCP and SEND SUPPORT) working at threshold of phonics decoding in year 1 increased by **24%**
- Permanent exclusions reduced by **82%** from 17 to 3

Fays

- Percentage of fixed term exclusions / suspensions reduced by **78%** from 32 to 7
- Percentage of CYP on reduced timetables reduced by **52 %** from 25 to 12 across the last 3 terms (Autumn 21, Spring 22 & Summer 22).

Saltley Plus

- Percentage of SEND children passing the phonic screening in year 1 increased by **29%**

Erdington 2

- Percentage of CYP with SEND achieving age-related expectations in speaking development (C&L) increased by **27%** from 22% to 49%

Sutton Coldfield

- Percentage of Early Years CYP making expected progress in Communication & Language increased by **22%** from 12.5 to 34.5%
- Percentage of CYP with speech and language needs working at expected levels of progress in reading, writing and maths increased by **13%**

Hall Green

- Percentage of CYP with SEND working at expected levels of progress in reading, writing and maths increased by **14%** from 8% to 22%

South West

- Attendance for the most challenging/vulnerable 1% increased by **6%** from 70% to 76%
- Reading age for the most challenging /vulnerable 1% increased by **5yrs 2 mo** from 10yr 2mo to 15yrs 4mo

North West

- Attendance for CYP with SEND increased by **4.3%** from 93% to 98%
- Reading age for CYP with SEND increased by **12 mo** from 12yr 5mo to 13yr 5mo

North West 2

- Attendance for CYP with SEND increased by **14%** from 84% - 98%
- Sentence comprehension for CYP with SEND increased by **11%** from 80% - 91%
- Word recognition for CYP with SEND increased by **11%** from 61% - 72%

East Speech and Language Therapy

- Word awareness receptive and expressive vocabulary skills within the curriculum increased by **37%** from 16% to 53%
- Language level (social thinking and problem-solving skills) increased by **14%** from 57% to 71%
- Attendance for CYP with Speech & Language Communication difficulties increased by **5%** from 81% to 86%

South

- Number of pupils with fixed term exclusion reduced by **53%** from 15 to 7pupils.
- Number of pupils referred to sharing panel reduced by **60%** from 6 to 2 pupils
- Number of pupils with Social, Emotional and Mental Health (SEMH) difficulties receiving fixed term exclusions reduced by **60%** from 15 to 5 pupils

Post 16

- Percentage of young pupil with SEND in Year 11 without employment, education, or apprenticeships (sustained destinations) reduced to **1.12%** (from 7.12% to 1.12%) for the DLP Cohort
- Percentage of young pupils with SEND in years 12-13 who are Not in Employment Education or Training (NEET) reduced to **1.69%** (from 7.4%) for the DLP Cohort

DLP City wide project for vulnerable pupils not on a school roll

- Average number of days between referral and placement reduced to **9.4** days (from 17.9 days)
- Average number of days between placement and starting schools reduced to **12.4 days** (from 37.8 days)
- Number of challenging cases waiting for more than half a term for placement reduced to **0 cases** (from 10 cases)

Engagement of schools

After one year of the implementation of the DLP project there is evidence of 90% engagement of mainstream primary and secondary schools in the DLP across Birmingham. Where schools are not engaged this is not because they have not been invited but where they may not be engaging in their consortia or network partnerships or meetings. This is also the case for special schools (where only 33% are engaged) and Resource Bases (26%), who have chosen not to engage with their locality projects although invited.

Impact on Parents and Carers and Children and Young People

Involvement of parents and carers was a non-negotiable aspect of the project proposals. All projects were required to baseline the views of parents and carers, and this was completed. However, some projects have yet to evaluate the impact of the project on the views of parents and carers due to the need for time for the project to be implemented and therefore whilst parent carer feedback generally has been good, it has not been consistently collated or analysed yet across the projects. This is a priority for the Autumn term report 2022.

Similarly, although projects individually have collected feedback (often creatively) from Children and Young People, (see [Appendix C](#) - Central newsletter) a priority for all projects this term is to survey, analyse and report the voice of CYP in relation to the DLP support they have received over the first year.

Wider Impact of DLP as reported by schools and stakeholders

Headteachers and SEND officers reported that the DLP has had a significant and wider impact on the culture in schools and across headteachers: They reported and highlighted 'significant development and improvement' in the following areas as direct impact of DLP:

- Improved collaboration and more breaking down of barriers between schools
- Schools are taking responsibility for schools and CYP in their locality ('Our' children and young people)
- Increased openness and trust to share good and bad around SEND practice and performance
- A good foundation has been laid for future locality working. We know which groups of school's work.
- There is more real and effective collaboration, engagement and relationships with the LA, BEP, Specialist Services, Mainstream and some special schools.
- Transfer of information is quicker and slicker enabling schools and LA to place children out of school on to the roll of schools due to the City wide project for vulnerable pupils not on a school roll project. Heads report that it has been a good bridge builder between schools and 'sharing panels'
- Improved and developed leadership in schools through developing leadership outside of their own schools. They have observed and learnt from other leaders
- Schools and Headteachers are driving and leading the system around SEND with SENCOs
- The reference group of headteachers and senior officers are providing strong challenge and informing strategy
- Schools are sourcing their own resources - undertaking peer reviews reflecting on their own practice and learning from others to secure improvement in their SEND provision
- Partnerships of schools are taking ownership of KPIs and have improved their understanding and reporting on impact on outcomes
- Localities and partnerships are creating their own identities in relation to SEND – DLP newsletters, summer schools, websites

- LA & Schools are sharing projects effectively (City wide project for vulnerable pupils not on a school roll and Special school Outreach Support)

Partnerships causing concern

Based on the termly reports provided by each project lead, 25% of projects have been identified as requiring some additional support. Where these have been identified additional and proven DLP leadership capacity has been secured and in almost all cases there is evidence of rapid improvements.

The common features of these partnerships who have been slower to progress are:

- They were not a strong or effective partnership that was working well together before DLP
- As a result, data collection across the partnership of school has been either slow or inconsistent and sign up for the project was slow
- They have not identified additional capacity for the leadership of the project
- They have had difficulty recruiting additional support to lead and/or administer the project
- They have had difficulty sourcing the support /expertise they need
- They are still keen to make DLP work

Funding

Whilst we agreed that we would support proposals that included costs for administrative or coordination of the project, we did not promote this at the outset mainly because of the resistance to the project and use of high needs funding - that was mainly driven by members of the council and special school headteachers – and a minority of mainstream headteachers.

However, the roll out of the project quickly identified that this was key factor in the success of projects and therefore it could be argued that administration costs at the outset should have been a requirement of project proposals. All partnerships were allocated this funding halfway through the first year to accommodate this requirement.

At the end of the first year, many consortia and networks are recording an underspend. When discussed with these partnerships, the reason for the underspend was mainly due to COVID19 which delayed the start of some projects but also led to difficulties in recruiting staff and securing the programme delivery they had chosen. Headteachers also reported that due to the relatively short lead in time and the fact that this was a radical change in culture and ways of working, and the lack of trust in the LA to honour financial commitments, they erred on the side of caution but would in the future be able to spend the amount allocated and more. Changes in the LAs financial systems and the associated blocks in the system this created, also led to issues in getting the money out to schools in a timely way.

The costs for the strategic leadership and management of the DLP have been largely paid for through the LAs central budget and a significant amount of additional and non - commissioned (and therefore unfunded) support has been provided by BEP CEO and senior leaders, especially during the roll out and set up of projects, who have remained driven and faithful to the project to ensure its success.

Monitoring, Reporting and Governance

Monitoring of the project delivery was commissioned out to BEP who appointed a team of consortia partners who were ex - or existing headteachers. Mostly this has been strong with good relationships being built with schools and valuable feedback provided to inform future planning and enabling swift resolution of issues arising. On rare occasions, existing and past close relationships of

these BEP staff with schools did not always provide an objective view or present a corporate view and approach.

Reporting of the project has improved over the year. Termly reports from schools were initially weak with little evidence of impact and the reports reflected a lack of understanding of how to measure and report impact as opposed to outputs. Schools also reported that they were not always clear on timelines for reporting and more prompts for deadlines would have helped. At the request of schools and consortia partners, a workshop on “Reporting and Key Performance Indicators” was held and was well regarded. As a result, the end of year reports were much stronger with good recording of progress over time using quantitative data, term on term, and schools now have dates for reporting for the academic year in advance.

Termly reports from consortia partners are variable. Most are strong and insightful, but some report opinion rather than fact and some reports of consortia partners does not mirror those of schools.

The governance of the project by the reference group of headteachers and Local Authority officers has been a real strength of the project. The concept of headteachers challenging and supporting each other and taking ownership and responsibility for the delivery of the DLP citywide has been wholly embraced. Headteachers especially and also LA senior SEND officers have been robust in their challenge of projects in relation to impact, appropriateness of resources, programmes and training purchased and spend.

Governance at the higher level of the LA programme management has not been as effective due to the many changes of programme management teams and systems for reporting and in the lack of resolution of issues many of which have been reported over time and not addressed.

Learning from DLP

In almost all cases the projects that were most successful most quickly had the following features:

- Partnerships that were already established and strong and who had good professional relationships made better progress.
- Partnerships who identified the need and costed their project for administration or organisational leadership to drive the project from the outset were quicker and more effective in start-up and implementation
- Partnerships where relationships were strong enabled headteachers to resolve differences of opinion without the risk of breakdown of relationships
- Where schools in the partnership signed up to and understood the need to return data at requested times and where reporting impact in quantifiable data was understood and accepted.
- Where partnerships set up and owned their own DLP Websites, newsletters, celebration events, standing agenda items at Headteacher meetings.
- Headteachers reported that working under a principle of the project that clearly stated the requirement to be creative and innovative in their thinking, enabled them to try out ambitious projects, learn what worked and what did not and to adapt and amend their thinking and resource allocation as required. This they reported was a real strength of their learning and of the DLP.
- Engagement from Special Schools was not good as a result of a decision by DLP leads at the outset to work with mainstream schools only (initially to ensure mainstream headteachers took the lead but also to reduce the very negative input from some special school headteachers that was undermining the project).

Leaders of overall DLP project reported the following learning from DLP

- DLP worked best when they had public and strong backing and leadership from members, director, and assistant director of SEND and project was aligned to a DFE strategy
- A strong project manager who highly effectively 'project managed the delivery of the project, who managed the DLP budget, who negotiated and oversaw the legal and data requirements and who removed barriers, enabling the project to run efficiently and effectively, rather than lead the project, was a significant strength and success factor of the project
- The LA working with BEP in the strategic planning and roll out of the project was invaluable and enabling. because of their knowledge of schools and their existing relationships with many headteachers and their relentless support and commitment to the DLP project from the outset.
- Headteachers rightly reported that there was Insufficient lead in time as the project required a significant change in culture and ways of working and training and development for leaders around partnership working budget management measuring impact.
- Schools requested more opportunities to see what other projects and localities were offering. (Addressed through interactive Local Offer DLP map where projects will be showcased).
- The DLP project has shown the importance of direct and sometimes difficult conversations with headteachers in support of SEND improvement. The LA needs to build its capacity to work more closely with heads and / or develop its partnership with BEP to achieve what is needed in this area.

- If the current process for monitoring is to continue, a robust Service Level Agreement needs to be in place to ensure that the quality and standard of required monitoring and reporting is delivered and underperformance of personnel is addressed robustly and proactively.
- The key messages around the requirement and benefits of accountability should have been more forcefully communicated at the outset of the project, especially for the early years DLP

Limiting factors

- Lack of a clear brief from the beginning of the project and changes of leadership at every level in BCC resulted in insecure messages and constant revisiting of vision and strategy
- Limited ownership, understanding and or strong leadership from members /leaders across the council and internal teams at the outset of the project
- Lack of confidence of schools in LA's ability to lead, sustain and deliver a project due to historic failures of similar projects and two failed SEND inspections
- Weak infrastructure in council to support setting up of a school led project –Finance Commissioning, Legal, Data
- Lack of timely development of a robust Condition of Grant Agreement & Data sharing agreement and clarity of roles of professionals to support this process
- Changes in LAs financial systems leading to blockages in allocating funding to schools
- Opposition from special schools and members of the council and some internal teams due to insufficient consultation and sign up at the outset, mostly because of the use of the HNB
- Radical change in culture and ways of working for Schools and Local Authority
- Limited culture of shared responsibility amongst schools – collaboration and relationships between headteachers weak in some areas
- Some research reflects that sharing best practice is not always the best way to improve practice and encourage collaboration with schools, therefore promoting projects above others was a risk – leading to gaps in communication.
- Weak culture of accountability in or across BCC or with schools
- COVID19 – project was rolled out at the height of COVID where schools were under significant other pressures and experiencing high staff and pupil absence and
- Lack of understanding of impact (v outputs) and how to report it in partnerships was a barrier to showing impact
- The lack of up to date LA data especially at Post 16 impeded the reporting of impact and especially for the Post 16 project the sector reported
- Lack of joined up working and support across school's directorate and especially lack of support from schools and families division which was sometimes vocalised in schools and public forums which on occasions worked against project
- Limited school improvement function or role or accountability in permanent LA structure or in BEP commission - for improving progress and outcomes of CYP for all schools and no official commission for our school improvement partnership organisation.
- Caution of schools around funding – spending and lack of security around future funding and confidence in integrity of LA

Roll out of DLP mostly across education, needs development and better communication across BCC Children's services

Recommendations

- Decision on future of DLP and funding before January 2023 - see “Options”
- Ensure members of the council and leaders own and support decision
- Leaders to make decision on where DLP is sited in permanent LA structure and agree accountable officer (AD)
- Communicate decision on future of DLP with dates, funding and timelines accountabilities /expectations across all schools and Local Area
- Agree and communicate funding formula to be implemented to schools – provide explicit advice on administrative /coordination support
- Agree where data support is going to be sourced and ensure funding is available
- Ensure Communications officer is responsible for organising and all communications
- Ensure clear guidance is given to schools on strategy and process for budget for DLP 2023 onwards asap to ensure sufficient lead in time (January 2023)
- Monitoring and reporting from BEP continues and this should be secured through a robust SLA.
- Ensure interactive map is completed for Local Offer Website efficiently
- Ensure project management is working at higher level to address and escalate and resolve barriers
- Ensure new DLP has requirement to baseline views of parent’s carers and CYP at the outset and provide specific expectations for when these need to be reported
- Review and invest time and support for the role of special schools in DLP projects and ensure there is a tighter brief for engagement of special schools and resource bases
- Review and address any inefficiencies in the Infrastructure of LA (Legal, Monitoring, Finance, School Improvement, SEND) to support the project

Where should the DLP be sited in the Local Authority?

All options are based on the following:

- a) Permanent senior SEND school improvement advisor /inspector role being created to lead project and drive SEND school improvement across all schools in Birmingham
- b) Project management or Business administration support
- c) BEP DLP contract or additional accountabilities added to existing BEP contract for supporting, monitoring, and reporting on DLP with partnerships
- d) All evaluation recommendations adopted

Option A – Schools & Families Directorate as a school improvement role led by a new LA SEND advisor

Pros

- School improvement conversations with Headteachers on SEND
- Headteacher level discussion on SEND pupil performance including attendance and suspensions
- Strong message that SEND is responsibility of everyone and not SENDCo/SEND specialists, building on the developmental work that BEP has supported to date
- This approach to further working with BEP by Schools & Families Division could result in
 - Less siloed working between schools and families teams, BEP, SEND and other services within BCC around school improvement
- DLP working through BEP provides an opportunity for growing capacity, alignment, and efficiencies in making the most of involvement and partnership with BEP
- Ability to work with heads on driving LA SEND and Inclusion Strategies

Cons

- No perceived role or remit for SEND improvement currently in this division
- Reluctance/ refusal of ownership in the schools and families division currently

Option B– Pupil Support Services (PSS)

Pros

- Knowledgeable on SEND
- Specialist teachers part of development of provision
- Good relationship with SENDCos

Cons

- Limited leverage with Heads
- Conflict of interest – supporting schools to set up services that may be in competition with their own offer
- Lack of capacity
- SEND focused rather than School improvement focused

Option C – Accountability with AD for SEND through a BEP commission

Pros

- BEP currently the chosen School Improvement partner of LA
- Relationship with many headteachers and schools already established
- Know and support the DLP currently and signed up its success

Cons

- Capacity of AD for SEND to hold BEP to account alongside so many other accountabilities
- Perception that SEND is only the responsibility of SEND services
- Relationship with heads has thus far has been “enabling” and supportive- this will need to become a more robust support and challenge function going forward
- Loss of control of High Needs Budget
- Challenge to schools from AD for SEND difficult when many areas of provision are failing

Option D – Commissioning Services

Pros

- Work would be commissioned with a tighter and more focussed brief on delivery, expectations, and outcomes
- Tight contractual arrangements
- No additional administrative burden
- Process for governance and monitoring inbuilt and managed objectively

Cons

- Business process could detract from strong focus and expectations on SEND
- Officers challenging would not have SEND background or understanding – could lose integrity of aim of project
- Relationships with schools could become business /process /bureaucratic only relationships
Reporting and monitoring too distanced from work on the ground

FUNDING AND IMPLEMENTATION OF DLP – OPTIONS

Option 1 – Cease DLP (i.e., the initial needs and/or operating models are proved wrong)

Pros

- No funding taken from the High Needs Budget
- Money could be invested in a different LA project or in increasing service capacity to deliver and support developing provision in mainstream schools
- LA has control of funding

Cons

- LA lose credibility and confidence and support of schools and especially headteachers
- Unpopular decision with most headteachers
- Infrastructure and benefits of DLP wasted /lost
- Missed opportunity to build relationships and trust with headteachers
- Loss of potential evidence of impact on pupils’ outcomes in localities

- Not following national direction of travel as reported by DfE Feb 2022 and in “Green Paper” 2022 (groups of schools working collaboratively around SEND in Localities)

Option 2 – No change - carry on as we are with recommendations included (i.e., this level of spend on collaboration requires no ongoing support or scrutiny)

Pros

- Schools know the systems, templates, and process – embeds DLP
- Popular choice with schools
- Equity across the city as all schools continue to be invited

Cons

- Risk of underspend continuing in some partnerships who are not fully committed or strong
- Risk that DLP is not developed or enhanced or proven successful partnership working is further exploited

Option 3 – To make engagement in the DLP optional with prescribed LA interventions for localities who don't opt in to DLP (including all evaluation recommendations)

Pros

- Higher chance of higher and stronger impact of projects
- Less time for LA and schools spent chasing schools and partnerships who are not fully engaged
- Risk of underspend lowered as partnerships who apply will be fully committed and have infrastructure to lead and drive project
- Data returns will be quicker
- Schools / consortia who do not participate effectively have supported interventions ensuring all vulnerable / SEND pupils can benefit > increased equity

Cons

- Lack of equity across the city for CYP accessing additional resource support from DLP
- Partnership work in some areas will continue to be weak, and where this persists supporting is expensive
- Impact on improving mainstream provision Citywide -as an LA priority – will be weakened
- Less investment in some areas for developing mainstream provision. This model still requires longer term modelling and costing

Option 4 – Carry on as we are (with recommendations included) and invest more funding in the DLP for successful consortia and networks /projects through enhanced allocations

Pros

- In successful projects potential for more impact and higher impact on pupil outcomes
- All schools develop and refine systems in place and become more successful and efficient in improving provision and outcomes through this way of working
- Further developing leadership capacity in schools in localities for SEND
- Schools taking more responsibility and ownership for improving SEND
- LA seen to support and reward success of project and achievements of school's partnerships
- Better and more opportunities for LA to build relationships, confidence, and trust with headteachers around SEND
- Capacity to lead and monitor project would be greater

Cons

1. Higher accountability for use of funding
2. We are still in the early days for some partnerships therefore limited evidence of capacity for some to deliver an enhanced project
3. Increasing inequity, strengthening the strong and accepting under performance

Recommended Future Model

Given the options listed above, below is the recommendation from the DLP Project team based on one years' evaluation. The future model of the DLP that is to be considered moving forwards includes all recommendations listed in the recommendations section on page 19.

Leadership and Accountabilities of DLP

With regards to the Leadership and Accountabilities of the DLP project at senior level, we make the below recommendations.

- The Lead and accountable SRO for the DLP is the AD for Schools and Families division.
- A responsible officer with SEND School Improvement/ inspector/advisor (DLP Lead) experience to lead and drive the DLP (and Improving Outcomes) within the Schools and Families Division (this would need to be a new post).
- Project Manager/ Business support role to support the DLP Lead with tracking all of the projects, documents, finances, meetings, communications, etc.
- Robust commission from the LA commissioning team to BEP enabling support on embedding, monitoring, reporting and challenging DLP Projects, leads and localities to ensure focus remains on impact of progress and outcomes on Children and Young People. BEP also have a role to play in providing intelligence from the sector to inform next steps & strategic direction.

Strategic Planning of DLP

The recommendation is that the Steering Group continues as it has proven vital in planning and driving the DLP Project. This Steering Group membership should be reviewed by the AD for SEND and AD for Schools and Families to ensure strategic foresight is kept but includes in its membership the DLP Lead, the DLP Support Officer and BEP School Improvement Lead and PSS Leader. The Steering Groups role is to:

- | | |
|---|--|
| • Provide leadership and direction | • Link and facilitate projects |
| • Be accountable for the impact of the project | • Provide solutions, escalate, and assist in removing blockages where relevant |
| • Monitor and challenge progress | • Ensure Governance is adhered |
| • Plan and ensure the project objectives and according to defined objectives and outcomes | • Manage and communicate to all levels of stakeholders appropriately |

Equally vital, the Reference Group, which is an advisory group of Headteachers (Primary, Secondary and Special), Principal EP, Head of PSS, EY Rep and the Steering Group, should continue to meet regularly. This group has been extremely effective by providing challenge, steer, and insight from different areas within the city. The Reference Groups role is to:

- Be an advisory group to the Steering Group
- Make recommendations where required
- Enable a sector perspective to be expressed and used to influence proposals and decisions
- To work with steering group to work through areas of concerns
- Assist in communication and marketing of the project
- To provide feedback from the sector to inform project planning
- To provide effective support and challenge to ensure the successful implementation and impact of the project
- Hold project leaders to account for effective use of funding, the progress of the projects and the impact on pupil outcomes for CYP

Delivery and Implementation

The DLP Project was rolled out to all localities with a strong message that all mainstream schools should participate and be proactive within the partnerships' project. Although the engagement of schools is high and the success overall is positive, some projects have not been as successful or shown strong enough impact to date or have proved too problematic for headteachers leading projects in localities where partnership working isn't strong. Therefore, we believe the best approach moving forwards would be the following:

- DLP should become optional for the localities (Primary Consortia and Secondary Networks) and these partnerships should write costed proposals and bid to access DLP funding

To extend and develop the DLP project further, project proposals must include at least 90% engagement of schools, menu of directed KPIs related to underperformance data, percentages of CYP to be included and directives on budget spend and reporting and involvement of Special School and RBs.

- Where schools and/or localities do not wish to participate in the DLP project, a prescribed menu of SEND intervention is provided to ensure equity and all pupils across the city have access to additional support

Funding

The funding for the mainstream schools project (excluding SSOS, EY DLP, Post-16 & the City wide project for vulnerable pupils not on a school roll – (Fair Access) that is allocated should be reduced from £4.5mil to £4mil as this was the total amount claimed by schools from the allocated amount.

- Central resource and administration costs will need to be considered separately from the allocated funding to schools depending on how LA agrees DLP should be led e.g., through existing roles and resource, through additional responsibilities (new role or added to existing role in Schools and Families)
- Funding formula agreed whereby notional amount for each school is allocated (based on same DLP funding formula) and aggregated into a total for the partnership of schools engaging. Of the schools not engaging, their notional amount will go into a central pot to fund the prescribed menu of intervention.

Birmingham City Council

Education and Children's Social Care

Overview and Scrutiny Committee

Date: 17 May 2023



Subject: Ofsted Inspection of Birmingham Children's Services (ILACS) – 20 February to 3 March 2023

Report of: Andy Couldrick, Chief Executive, Birmingham Children's Trust

Report author: Andy Couldrick, Chief Executive, Birmingham Children's Trust

1 Purpose

- 1.1 To provide a verbal precis on the Ofsted ILACS inspection which took place from 20 February to 3 March 2023. The full inspection report is appended.

2 Recommendations

- 2.1 Members to note the Ofsted findings and the overall judgement of 'Good'.

3 Any Finance Implications

- 3.1 Not applicable.

4 Any Legal Implications

- 4.1 Birmingham children's services were inspected in line with the framework for inspecting local authority children's services (ILACS).
- 4.2 Birmingham Children's Trust was established in 2017 as a wholly owned company of Birmingham City Council following formal intervention by the Department for Education. The Trust delivers statutory Children's Social Care services on behalf of the Council through a commissioning arrangement and formally commenced operations in April 2018.

5 Any Equalities Implications

- 5.1 The Trust works with and supports vulnerable children, young people and families. The Ofsted report describes this work across a wide range of Trust services.

6 Appendices

- 6.1 Ofsted ILACS report.

Inspection of Birmingham City Council local authority children's services

Inspection dates: 20 February to 3 March 2023

Lead inspector: John Roughton, His Majesty's Inspector

Judgement	Grade
The impact of leaders on social work practice with children and families	Good
The experiences and progress of children who need help and protection	Good
The experiences and progress of children in care	Good
The experiences and progress of care leavers	Good
Overall effectiveness	Good

Since the last inspection in 2018, much progress has been made by Birmingham City Council and Birmingham Children's Trust in improving the experiences and outcomes of their children. Children are now safeguarded through effective 'front door' arrangements, thorough child protection assessments and a strong response to safeguarding children at risk of exploitation. Children are supported at an early stage to remain in their families where possible. When intervention is required to protect children, it is proportionate to risk and need. When children need to come into care, their needs are met well in appropriate placements. Some children spend too long in stable placements awaiting the appropriate change in legal status to secure their permanence. Care-experienced young people benefit from a strong corporate commitment and ambition to enable them to fulfil their potential in life. Personal advisers develop supportive and encouraging relationships with young people, though for some, the earlier involvement of a personal adviser would help in their preparation for adulthood. Children in care and care-experienced young people are genuinely listened to and actively engaged in recruitment, staff training and service development. Despite significant trust investment and partnership engagement, response to domestic abuse is not proportionate to demand in the city.

Effective performance reporting and quality assurance arrangements help to ensure that leaders have a clear understanding of emerging themes and trends in practice, to which they quickly respond. Good recognition of the diversity of the population is evident throughout the overall strategic ambitions for the city and is reflected in services and support for children and families.

What needs to improve?

- The effectiveness of the response to domestic abuse.
- Earlier pre-birth assessments to support early permanence planning, and timely action to progress permanence plans for children in stable placements through changes to legal status.
- Earlier engagement of personal advisers for children leaving care.
- Consistency of written plans.

The experiences and progress of children who need help and protection: good

1. Since the inspection in 2018, Birmingham Children's Trust and partners have developed and implemented strong early help services for children and families. Children and families benefit from an effective early help offer, with services that support them at the lowest level of intervention. Children receive a timely and thorough assessment of their needs that leads to effective plans that improve their experiences.
2. Concerns about children who need help and protection receive a timely and effective response from the Children's Advice and Support Service (CASS). Clear management oversight guides workers as to immediate actions. When there are safeguarding concerns, parental consent is appropriately dispensed with. Family history and targeted safeguarding checks inform decisions on next steps. Managers mostly apply the right thresholds, with timely progression to the appropriate service, with a clear rationale for intervention. However, the quality of information from education does not always contribute effectively to decision-making in CASS. Leaders have responded during the inspection by committing additional education resources.
3. Many children who experience incidents of domestic abuse through parental conflict are triaged by the police acting as a single agency, before being referred to social care. Police make decisions on next steps without full consideration of partners' information. This means that the trust cannot be assured that the needs and risks for children experiencing domestic abuse are fully understood. During the inspection, leaders have put in quality assurance measures in response to this.

4. The emergency duty service responds to children's needs in a timely and proportionate way. The service interacts and aligns with daytime and weekend services, with effective handover arrangements to daytime services.
5. When children are identified as being at risk of harm, there is an effective response through timely child protection strategy meetings, which are overseen well by managers and result in clear actions. An education representative or sufficient information from schools is not routinely available, resulting in decisions being made without full information. Leaders have acknowledged this and taken action to ensure that appropriate representation and information are now available.
6. Child protection assessments provide a clear analysis of risks. Children are seen quickly when risks are identified. Views of children, parents and professionals are sought to inform assessments and, as a result, child protection enquiries are thorough and lead to children receiving the right level of support.
7. Children and families benefit from the timely allocation of social workers, who commence assessments promptly. The views of children and adults are threaded throughout the assessment. Strengths and protective factors are clearly identified and inform analysis and appropriate decision-making. Management oversight consistently informs next steps.
8. The threshold to proceed to initial child protection conferences is appropriately applied. Most conferences include key agencies and have a balanced focus on risks and strengths.
9. The quality of child protection and child in need plans is inconsistent. When they are stronger, written plans consider children's needs well and include their wishes and feelings. However, the inconsistent recording of the plans makes it difficult to understand how progress is monitored, as actions are not always timebound. Families would find it difficult to follow some plans without support. Safety planning is routinely considered but is inconsistently recorded and is sometimes ambiguous, and therefore difficult for families to understand.
10. Core groups and child in need meetings are held regularly and review progress against children's plans. For most meetings, the relevant professionals attend and contribute to effective decision-making. Family group conferences are routinely held and result in plans that are effective and supportive, helping children to remain in their families.
11. For a small number of children suffering long-term neglect, social work visits and management oversight are less impactful, and children remain in neglectful situations for too long. Leaders have recognised this and have implemented a new neglect strategy in response. It is too soon to see the impact of this.

12. The quality of practice and management oversight for progressing children through the pre-proceedings stage of the Public Law Outline (PLO) has improved since the last inspection. However, some children experience drift and delay in how quickly their plans are progressed, and actions often remain outstanding for too long. Senior leaders have recognised the shortfalls in pre-proceedings practice and have strengthened the service with additional resources and improved monitoring systems. However, this has not yet had a demonstrable and consistent impact for all children.
13. For unborn children who are at high risk of coming into care, planning for permanence does not routinely start at the earliest opportunity. Pre-birth assessments are of good quality but are not always commenced in a timely way, leading to delay in securing the right legal framework to protect children. Some babies are placed in foster care rather than being matched with early permanence placements. This means that some babies are not always provided with stability and security at the earliest opportunity.
14. Social workers know their children well and develop strong relationships. Children are regularly seen in line with presenting needs. Children's experiences, diversity and cultural needs are explored through creative direct work as well as meaningful conversations to inform interventions.
15. Disabled children who receive help and protection mostly receive an effective service. Social workers and staff from partner agencies understand the needs and risks of these children. Assessments and plans are detailed and purposeful, with the views of children and families consistently recorded. Children's plans are progressed through meetings that are well attended by partner agencies. Some social workers are trained in alternative methods of communication so they can confidently connect with disabled children and ensure that their wishes and feelings are gathered during visits.
16. Once children are identified as being in a private fostering arrangement, they are visited and assessed in a timely way. Children's views are consistently heard, and social workers ensure that they are safe and settled where they live.
17. When children aged 16 or 17 present as homeless, they are quickly responded to by workers from the homelessness team. A clear and effective protocol between advisory services, housing and social care provides an immediate response to children, ensuring that initial safeguarding issues are addressed. While some children become looked after, it is not clearly recorded that all are fully informed of their accommodation rights.
18. Children who are at risk of criminal and sexual exploitation are supported effectively through a specialist team, EmpowerU. Daily multi-agency meetings ensure that immediate steps are taken to address risk. When children are assessed as at high risk, disruption and child protection strategy meetings are quickly held and actions are identified to try to mitigate risks. Safety plans and

risk assessments are updated regularly, with interventions having a positive impact on children and reducing risks. When children go missing, social workers in EmpowerU review episodes of going missing and conduct return home interviews to engage children in understanding risk factors.

19. There are effective systems in place to check that pupils' welfare is safeguarded. Pupils who are missing from school are tracked and agencies share concerns at the earliest opportunity. However, at times, the range of recording systems can get in the way of rapid understanding of a child's experience.

The experiences and progress of children in care: good

20. Children enter care in a timely manner and when it is in their interests to do so. Decisions for children to come into care are appropriately overseen by a senior manager. There is a clear rationale and children reviewing their records would understand why decisions were made about them.
21. Children's identity needs are well considered when seeking an appropriate placement match. Careful consideration is given to sibling relationships, with effective together or apart assessments helping to determine appropriate placement needs. This enables children to live with their brothers and sisters when it is in their best interests.
22. Children are encouraged and supported to keep in touch with important people in their lives. Family-time arrangements are in line with children's needs. Social workers reassess arrangements when circumstances change, or children express views of not wishing to see parents.
23. Thorough court social work assessments are reducing the need for the number of expert and independent social worker assessments. This is contributing to improved timescales and, as a result, decisions about children's long-term plans are made sooner.
24. Most care plans are appropriate and in line with children's needs. They are reviewed effectively by independent reviewing officers and children are encouraged and assisted to attend their review. Children's wishes and feelings are well considered and integrated into care plans, for example, their wishes around family time.
25. Children leave care to return to their families when it is right to do so. Timely and purposeful parenting assessments are undertaken to ensure that it is safe for the child to return home. This allows children to be supported to live with their families whenever this is possible and in their best interests.
26. Very few children in care are placed at a distance from their local area. Where this is the case, children are mainly in very stable long-term placements with

connected carers. These children progress well in the care of their wider families.

27. For many children in care who live with their parents or with connected carers, there are delays in progressing special guardianship applications and the discharge of care orders, sometimes many years after it is clear that these are stable long-term placements. There is a lack of effective management review of these children to ensure that the drift and delay is addressed. This means that some children do not have the opportunity for legal permanence when the time is right for them and, in some circumstances, children remain subject to statutory social work intervention for longer than is necessary.
28. For children who are placed at home with their parents on care orders, parenting assessments are not routinely reviewed and updated to ensure that their care arrangements remain appropriate and continue to meet their needs.
29. Children in care benefit from stable relationships with their social workers, who visit them regularly and in line with their needs. Children benefit from age-appropriate direct work, which helps workers to gain their views and helps children understand their family history and experiences. Children's voices are evident in case recordings and the child's wishes are acted on when appropriate.
30. There are several forums and panels for children and young people to participate and engage with the corporate parenting board and senior leaders. The voice of children and young people is well embedded, influencing wider practice and service development. For example, consultation with young people on what makes a good and stable relationship has influenced the trust's practice model and standards.
31. When children go missing from care, there is an effective response and pertinent information is shared. However, a small number of children are not offered timely return home interviews to ensure that risks are understood at the earliest opportunity.
32. Children's physical, emotional and mental health needs are well considered and most children in care make progress in their health and development. When children have additional needs, they are supported through prompt referrals to the therapeutic emotional support service (TESS), ensuring that the earliest interventions needed by children are offered promptly.
33. The virtual school (VS) has established and embedded effective links with schools, other council departments and a wide range of external partners. Care plans and personal education plans are well integrated. This means that those with oversight of any child work together very effectively to ensure that children can make good progress. Children in care are well supported by the VS for their next steps at all transition points.

34. Most children in care are living in appropriate homes that meet their assessed needs and where they are making progress. Most children benefit from stable placements. When there are difficulties between children and carers, care planning meetings are held and support is put in place to try to avoid placement breakdowns and children having to move.
35. A small number of children live with connected carers who are meeting children's needs but are not approved by fostering panel for reasons relating to concerns about their health, vulnerabilities or outstanding police or health checks. There is a lack of risk assessment and management oversight to ensure that children remain safe and supported in these arrangements.
36. There are a small number of children with complex needs in unregistered children's homes. The trust encourages providers to register with Ofsted, with whom they maintain routine dialogue on the progress of registrations. While concurrent searches take place, senior leaders and commissioning services seek to assure themselves that children's needs are met, through a high level of oversight of these placements.
37. Unaccompanied asylum-seeking children (UASC) are provided with suitable accommodation in a timely way. Social workers ensure that their immediate care and cultural needs are met. Children's health needs are quickly addressed through the New to the Country Clinic and children are offered support with their emotional well-being. Access to education is a priority, with many children attending English language courses. Children have access to an interpreter and are supported to get legal advice to help them understand their rights as a child in care and asylum seeker.
38. Managers have a good overview of the recruitment of mainstream foster carers and continue to recruit to offset the number of resignations. The trust is on target to recruit 30 mainstream foster carers this year. However, there has still been a decrease in mainstream foster placements available to children overall in this timescale.
39. Adopters are well prepared by the agency for the challenges that adoptive parenting can bring. Well-considered matching of children to their future families takes place in conjunction with the children's social workers. Adopters meet their children in a way that is focused on the needs of the child. Careful planning enables them to build meaningful connections with their children. This has resulted in few adoption breakdowns for children.

The experiences and progress of care leavers: good

40. Care-experienced young people benefit from personal advisers (PAs) who make time to develop strong and supportive relationships with their young people, understanding their lived experiences and their needs.

41. However, for most young people, PAs are not allocated soon enough, until close to their 18th birthday. Young people do not have access to the specialist expertise of the PA early enough to support early independence preparation. Once allocated to PAs, young people receive support to develop their independence skills.
42. Most young people have good access to their health records, are registered with a GP and can access health services as required. Those who need it are supported by TESS with emotional well-being and mental health needs until age 25. Young people's emotional well-being is routinely held in mind by PAs, who undertake skilled direct work where the young person is not ready to engage with other services. Specialist support is available for those with additional needs, such as the 'breaking the cycle' service for pregnant care leavers.
43. The local offer for care-experienced young people is comprehensive and is readily available in a range of formats. Care-experienced young people are familiar with the offer and appreciate the range of support it provides. PAs routinely share the offer and discuss it with young people but are always conscious of the need to ensure that young people fully understand their options and make well-informed choices.
44. Care-experienced young people are actively involved in a range of events, conferences and forums. These are a regular forum for providing information and exploring opportunities, but also for care experienced young people to showcase their achievements, meet up with others and feel valued.
45. Care-experienced young people who are parents feel particularly involved in contributing their voice. They feel that what they say is listened to and makes a difference, such as the development of a pregnancy pathway. They value participation opportunities as social events and feel less isolated as a result. They feel connected to senior leaders and feel part of a large family.
46. Accommodation options for young people are carefully considered with the young person's input and in their best interests. The majority are in suitable accommodation. However, for some young people as they turn 18, planning has not been effective in securing the right accommodation and a small number have had to move to placements less suitable in meeting their needs.
47. Care-experienced young people have up-to-date pathway assessments and plans that identify their needs and risks, which have actions that focus on improving the young person's outcomes. PAs are aspirational for their young people, encouraging them to set their goals high and helping them to try and achieve them.
48. Care-experienced young people benefit from PAs who have a good understanding of the risks they face and work with a range of agencies to

increase safety and reduce risk. Cultural dimensions to risk are understood, for example risk of trafficking and of forced marriage.

49. Most young people are in appropriate education, employment or training and they have longer-term aims and job ambitions they are working towards. Many benefit from the increasing range of apprenticeship opportunities open to them in the council, the trust and the local business sector, developing skills and helping them into permanent employment. PAs maintain dialogue with young people who are not in education, employment or training and proactively explore options with them, engaging other services as appropriate.
50. When unaccompanied asylum-seeker children leave care, they are well supported to access appropriate accommodation and employment, and to pursue their religious and cultural needs and legal rights.

The impact of leaders on social work practice with children and families: good

51. There are clear and effective governance arrangements between the council and the trust. The appointment of an experienced and permanent director of children's services (DCS) to the council in November 2021 has brought focus to improving those children's services delivered by the council. The chief executive and director of practice in the trust have a clear understanding of the main challenges they face and are working well with the DCS in meeting these. The trust has made strong progress in most areas which required improvement at the last inspection, and pace has been sustained through the pandemic and beyond. Political leaders give great priority to children in Birmingham. Despite the financial pressures the council faces, investment in strengthening services in response to increased demand is a continuing commitment.
52. There has been a positive shift in the quality and impact of partnership working between the council and the trust, along with other key strategic allies. This is particularly evident in the implementation of the early help strategy, with many more families receiving effective help at the right time. The response to exploitation through the EmpowerU service is a real strength.
53. Senior management oversight and arrangements to track progress of children's early permanence are not sufficiently effective. Legal oversight of some children escalated into the pre-proceedings stage of the PLO is not sought early enough to prevent drift and delay. Equally, too many children experience delay in the discharge of orders when successfully placed with their parents. During this inspection, leaders have acknowledged these issues and are making organisational and strategic changes aimed at ensuring greater focus and improved outcomes for these children.
54. The local authority and the trust have sought to develop the partnership response to the impact of domestic abuse on children and families. However,

this remains under-resourced to respond effectively to the increasing level of demand. Despite investment in several additional services and dedicated management oversight, the absence of important partner agencies in the initial triaging process and the absence of perpetrator programmes for high-risk offenders are known concerns for the trust. They are continuing to escalate their concerns about the impact of this gap in provision on the safeguarding of children.

55. The commitment to corporate parenting is a strength in Birmingham. A comprehensive work plan is overseen by an effective corporate parenting board. There are a wide range of forums and panels for young people to participate in, informing the ambitious and aspirational corporate parenting strategy.
56. Advocacy and mentoring arrangements for children and care-experienced young people are thorough and well promoted. This has helped to improve the quality and impact of the child's voice, for example in children in care reviews and family group conferences.
57. Leaders have an informed analysis of the placement needs of children in care and are responding effectively to the challenges in providing sufficient placements. Leaders adapt to new emerging issues promptly. For example, the unexpected significant increase in UASC numbers has been responded to effectively through the timely commissioning of relevant services.
58. The trust is developing a strong learning culture. The social work academy supports and trains a large cohort of newly qualified staff effectively. Staff have readily available access to appropriate training relevant to their areas of practice.
59. A well-embedded performance framework helps leaders to identify and respond to granular issues and trends in practice. Team managers are provided with detailed performance reports to help them ensure compliance with statutory work. Leaders are aware that the case recording system used in the trust needs further improvement to help improve data quality and enhance reporting.
60. Quality assurance arrangements are effective. Quarterly evaluations of practice inform training and service development. This is resulting in continually improving practice and services to children and families. Extensive auditing activity takes place, although more could be done to track the completion of recommended actions, demonstrating the impact on outcomes for individual children.
61. Most social workers have manageable caseloads, and all are very positive about working for the trust, feeling respected and valued by leaders. The positive organisational culture established in the trust is enabling the incremental development of a relationship-based, trauma-informed practice model to

permeate through the workforce. Supervision is held regularly, although it is not consistently effective in progressing children's plans and addressing drift.

62. Strengthening and stabilising the workforce is a priority for leaders in Birmingham. There is a comprehensive workforce development strategy in place. Internal structural changes have been made in the trust to maximize the impact of non-social work qualified staff in supporting families at an earlier stage of need, however, recruitment to such posts as PAs for care-experienced young people remains a challenge. There are strong and well-received internal processes for staff recognition, pay and rewards, helping to sustain staff retention.

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 children looked after, 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 report is available at <https://reports.ofsted.gov.uk/>.

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.gov.uk/ofsted

© Crown copyright 2023



Education and Children's Social Care O&S Committee: Work Programme 2022/23

Chair:	Cllr Kerry Jenkins
Deputy Chair:	Cllr Des Hughes
Committee Members:	Cllrs: Shabina Bano, Jilly Bermingham, Debbie Clancy, Morriam Jan, Shehla Moledina, and Simon Morrall
	Education Representatives: Justine Lomas, Roman Catholic Diocese, Osamugi Ogbe, Parent Governor, Rabia Shami, Parent Governor, and Sarah Smith, Church of England Diocese
Officer Support:	Senior Overview and Scrutiny Manager: Fiona Bottrill (303 1731) Scrutiny Officer: Amanda Simcox: (675 8444) Committee Manager: Sofia Mirza (675 0216)

1 Introduction

- 1.1 The remit of the Education and Children's Social Care O&S Committee is 'to fulfil the functions of an Overview and Scrutiny Committee as they relate to any policies, services and activities concerning schools and education, the Children's Trust, vulnerable children, corporate parenting, children and young people's health and wellbeing and other child social care and safeguarding functions of the council'.
- 1.2 The Overview and Scrutiny Committee dealing with education matters shall include in its membership the following voting representatives: a) Church of England diocese representative (one); b) Roman Catholic diocese representative (one); and c) Parent Governor representatives (two, who are on the Committee until 30th April 2026).
- 1.3 This report provides details of the scrutiny work programme for 2022/23.

2 Recommendation

- 2.1 The Committee reviews the work programme completed during 2022/23 and recommends any issues that should be carried over or new issues to be included in the Scrutiny Work programme for 2023/24.

3 Background

- 3.1 *"Scrutiny is based on the principle that someone who makes a decision...should not be the only one to review or challenge it. Overview is founded on the belief that an open, inclusive,*



member-led approach to policy review...results in better policies in the long run.” (Jessica Crowe, former Executive Director, Centre for Governance and Scrutiny).

- 3.2 Developing an effective work programme is the bedrock of an effective scrutiny function. Done well, it can help lay the foundations for targeted, inclusive and timely work on issues of local importance, where scrutiny can add value. Done poorly, scrutiny can end up wasting time and resources on issues where the impact of any scrutiny work done is likely to be minimal.
- 3.3 As a result, the careful selection and prioritisation of work is essential if the scrutiny function is to be successful, add value and retain credibility.

4 Work Programme

- 4.1 Appendix 1 sets out the work programme for this Committee. This provides information on the aims and objectives, together with lead officers and witnesses, for each item. The attached work programme also includes items to be programmed where dates are still to be confirmed, and any outstanding items including the tracking of previous recommendations.
- 4.2 As the work programmes for the Committees have developed a number of cross cutting issues have been identified. To avoid duplication Members will be invited to attend different Overview and Scrutiny Committee meetings for relevant reports as set out below:

Lead Committee	Meeting and Agenda Item	Members to be invited and reason
Education and Children’s Social Care O&SC	Meeting: TBC Report from Birmingham Safeguarding Children’s Partnership (BSCP)	Members of the CYP Mental Health Inquiry from the Health and Social Care O&SC (Cllrs: Mick Brown (Chair), Kath Hartley, Gareth Moore, Julian Pritchard, and Paul Tilsley (Deputy Chair).
Commonwealth Games, Culture and Physical Activity O&SC	Meeting: TBC Report on employment and skills Legacy of the Commonwealth Games	Members of the Economy and Skills O&SC At the meeting on the 8 July Co-ordinating O&SC decided that this issue falls within the remit of the CWG, Culture and Physical Activity O&SC, and as it has been identified during the work planning for the Economy and Skills O&SC as an issue of interest. Members of this Committee would be invited to the relevant meeting.

5 Other Meetings

- 5.1 There are no other meetings scheduled at this time.



Call in Meetings:

None scheduled

Petitions

None scheduled

Councillor Call for Action requests

None scheduled

Committee approved Wednesday at 10.00am as a suitable day and time each week for any additional meetings required to consider 'requests for call in' which may be lodged in respect of Executive decisions.

6 Forward Plan for Cabinet Decisions

- 6.1 Since the implementation of the Local Government Act and the introduction of the Forward Plan, scrutiny members have found the Plan to be a useful tool in identifying potential agenda items.
- 6.2 The following decisions, extracted from the CMIS Forward Plan of Decisions, are likely to be relevant to the Education and Children's Social Care O&S Committee's remit. The Committee may wish to consider whether any of these issues require further investigation or monitoring via scrutiny. The Forward Plan can be viewed in full via Forward Plans (cmis.uk.com).

ID Number	Title	Proposed Date of Decision
010978/2023	Response to Independent Review of Birmingham Special Educational Needs and Disability Information, Advice and Support Service (SENDIASS)	16 May 2023
011355/2023	Schools Capital Programme - School Condition Allocation, Basic Need Allocation 2023-24 + Future Years	16 May 2023

7 Legal Implications

- 7.1 There are no immediate legal implications arising from this report.

8 Financial Implications

- 8.1 There are no financial implications arising from the recommendations set out in this report.

9 Public Sector Equality Duty

- 9.1 The Council has a Public Sector Equality Duty under the Equality Act (2010) to have due regard to the need to:



- eliminate discrimination, harassment, victimisation and any other conduct that is prohibited by or under the Act;
- advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it;
- foster good relations between persons who share a relevant protected characteristic and persons who do not share it.

9.2 The Committee should ensure that it addresses these duties by considering them during work programme development, the scoping of work, evidence gathering and making recommendations. This should include considering: How policy issues impact on different groups within the community, particularly those that share a relevant protected characteristic; Whether the impact on particular groups is fair and proportionate; Whether there is equality of access to services and fair representation of all groups within Birmingham; Whether any positive opportunities to advance equality of opportunity and/or good relations between people are being realised.

9.3 The Committee should ensure that equalities comments, and any recommendations, are based on evidence. This should include demographic and service level data and evidence of residents/service-users views gathered through consultation.

10 Use of Appendices

10.1 Appendix 1 – Work Programme for 2022/2023

APPENDIX 1 - 2022-23 WORK PROGRAMME

Date of Meeting: Wednesday 20th July 2022 at 10am in the BMI, Margaret Street

Item/ Topic	Type of Scrutiny	Aims and Objectives	Lead Officer	Witnesses	Visits	Additional Information (Including joint working / links with other O&S Committees)
SEND Improvement and the Accelerated Progress Plan	Update Report	Advise current position on SEND Improvement, and the Accelerated Progress Plan (APP).	Sue Harrison, Director, Children and Families	Sue Harrison, Director, Children and Families Victor Roman, SEND Improvement Programme Manager	None Required	
Home to School Transport (HTST)	Update Report	Assurances on improvements to the HTST service including arrangements for Sep 2022.	Sue Harrison, Director, Children and Families	Mike Fagan, AD, Home to School Transport John Elsegood, Head of Communications Satinder Sahota, Interim City Solicitor & Monitoring Officer	None Required	
Youth Justice Plan	Consultation	To discuss the priorities prior to the plan going to Cabinet and City Council for adoption.	Seamus Gaynor, Head of Executive, Children's Trust	Dionne McAndrew, AD, Vulnerable Young People, Children's Trust Janine Saleh, Head of Service, Youth Offending Service	None Required	
Work Programme Development	Decision	Approve work programme for 2022-23	Fiona Bottrill, Senior Overview and Scrutiny Manager	None	None Required	

Final Deadline: Monday 11th July 2022, and Publication: Tuesday 12th July 2022

Education and Children's Social Care O&S Committee, May 2023 - Appendix 1

Date of Meeting: Wednesday 7th September 2022 at 10am in Committee Rooms 3 & 4, Council House

Item/ Topic	Type	Aims and Objectives	Lead Officer	Witnesses	Visits	Additional Information
SEND Improvement	Update Report	Improvement Journey	Sue Harrison, Director, Children and Families	Sue Harrison, Director, Children and Families	None Required	
Cabinet Member Portfolio Overview	Update Report	Report providing a summary of Cabinet Member priorities for 2022-23, and identify opportunities for O&S to add value	Suman McCarthy, Cabinet Support Officer	Cllr Karen McCarthy, Cabinet Member for Children, Young People and Families	None Required	Cabinet Member Portfolio Overview
Work Programme Development / Inquiry Proposal	Decision	Approve work programme for 2022-23	Fiona Bottrill, Senior Overview and Scrutiny Manager	None	None Required	

Final Deadline: Friday 26th August 2022

Publication: Tuesday 30th August 2022

Date of Meeting: Wednesday 19th October 2022 at 10am in Committee Rooms 3 & 4, Council House

Item/ Topic	Type	Aims and Objectives	Lead Officer	Witnesses	Visits	Additional Information
SEND Commissioner	Update Report	To provide information on the work of the SEND Improvement Board and how O&S can add value to the SEND improvement journey.	Sue Harrison, Director, Children and Families	John Coughlan, DfE Commissioner	None Required	
HTST / Children and Young People Travel Service Update	Update Report	Update on the service delivered in Sep 2022.	Sue Harrison, Director, Children and Families	Sue Harrison, Director, Children and Families John Elsegood, Interim Lead Birmingham Children's Travel Service	None Required	

Final Deadline: Monday 10th October 2022

Publication: Tuesday 11th October 2022

Date of Meeting: Wednesday 30th November 2022 at 10am in Committee Rooms 3 & 4, Council House

Item/ Topic	Type	Aims and Objectives	Lead Officer	Witnesses	Visits	Additional Information
Children's Trust	Update Report	To receive the Business Plan and Priorities (including an update on the paper that is going to Cabinet on the 8 Nov regarding the contract)	Seamus Gaynor, Head of Executive, Children's Trust	Andy Couldrick, Chief Executive, Children's Trust Dionne McAndrew, AD, Vulnerable Young People, Children's Trust	None	Last attended a formal committee meeting on 1st September 2021 Members of the Children and Young People Mental Health Inquiry from the Health and Social Care OSC have been invited (Cllrs: Mick Brown (Chair), Kath Hartley, Gareth Moore, Julian Pritchard, and Paul Tilsley (Deputy Chair))

Final Deadline: Monday 21st November 2022

Publication: Tuesday 22nd November 2022

Date of Meeting: Wednesday 4th January 2023 at 10am in Committee Rooms 3 & 4, Council House

Item/ Topic	Type	Aims and Objectives	Lead Officer	Witnesses	Visits	Additional Information
Children and Families Directorate Improvement Plan – Progress Update	Update	Update on the improvement journey so far in Children and Families Directorate, including headline improvements and a summary of the Improvement Plan	Sue Harrison, Director, Children and Families	Cllr. Karen McCarthy, Cabinet Member for Children, Young People and Families Sue Harrison, Strategic Director, Children and Families Kerry Madden, Strategic Improvement Programme Director	None	
Children's Partnership Change for Children 2023-28 Plan	Consultation	To update on progress, and to note the timeline for the development and launch of the Children and Young People's plan, including commitment to the UNICEF Child Friendly Cities & Communities Initiative	Sue Harrison, Director, Children and Families	Cllr. Karen McCarthy, Cabinet Member for Children, Young People and Families Sue Harrison, Strategic Director, Children and Families Colin Michel, Strategy & Partnership Lead (on-line)	None	

Final Deadline: Thursday 22nd December 2022 and publication: Thursday 22nd December 2022

Date of Meeting: Wednesday 25th January at 1pm in Committee Rooms 3 & 4, Council House (Reconvened Meeting)

Item/ Topic	Type	Aims and Objectives	Lead Officer	Witnesses	Visits	Additional Information
SENDIASS	Update Report	To consider the report which was initially published with the agenda papers (as an exempt item) for the meeting on the 30 November 2022 which was adjourned.	Sue Harrison, Strategic Director, Children and Families	John Coughlan, DfE Commissioner Cllr Karen McCarthy, Cabinet Member for Children, Young People and Families Sue Harrison, Strategic Director, Children and Families Janie Berry, City Solicitor Rebecca Hellard, Director of Council Management	None	

Date of Meeting: Wednesday 22nd February 2023 at 10am in Committee Rooms 3 & 4, Council House

Item/ Topic	Type	Aims and Objectives	Lead Officer	Witnesses	Visits	Additional Information
School Attainment & School Improvement	Update Report	To receive a report on school attainment and discuss school improvement with BEP	Sue Harrison, Strategic Director, Children and Families	Sue Harrison, Strategic Director, Children and Families Kate Reynolds, AD, Lifelong Learning & Employability Tim Boyes, Chief Executive, BEP	None	To include attainment by ethnicity
School Exclusions, Part Time Timetables, and Unsuitable School Places	Update Report	Information on school exclusions, part-time timetables, children who haven't got a suitable school place, and support that is being provided, and how many excluded primary school children have unmet SEND needs / EHCPs	Sue Harrison, Strategic Director, Children and Families	Sue Harrison, Strategic Director, Children and Families Razia Butt, Independent Education Adviser	None	This will also be part of the evidence gathering for the Child Criminal Exploitation Inquiry

Final Deadline: Monday 13th February 2023 and publication: Tuesday 14th February 2023

Date of Meeting: Wednesday 5th April 2023 at 10am in Committee Rooms 3 & 4, Council House

Item/ Topic	Type	Aims and Objectives	Lead Officer	Witnesses	Visits	Additional Information
Children's Trust Update	Update Report	To provide an update on progress with the priorities	Seamus Gaynor, Head of Executive, Children's Trust Suman McCartney, Cabinet Support Officer	Andrew Christie, Chair, Children's Trust Andy Couldrick, Chief Executive, Children's Trust Cllr Karen McCarthy, Cabinet Member for Children, Young People and Families Sue Harrison, Strategic Director, Children and Families	None	
Improving Services for Children and Families Improvement Programme Progress Update	Quarterly Update Report	To provide a quarterly update on progress	Sue Harrison, Strategic Director, Children and Families	Sue Harrison, Strategic Director, Children and Families Kerry Madden, Strategic Improvement Programme Director	None	

Final Deadline: Monday 27th March 2023 and publication: Tuesday 28th March 2023

Date of Meeting: Wednesday 17th May 2023 at 10am in Committee Rooms 3 & 4, Council House

Item/ Topic	Type	Aims and Objectives	Lead Officer	Witnesses	Visits	Additional Information
<p>Young People's Substance Use Service</p> <p>(10.05 – 10.45)</p>	Evidence Gathering	<p>To update Members on the Service and provide evidence to help support the two Inquiries:</p> <p>Child Criminal Exploitation and Children and Young people's Mental Health</p>	Karl Beese, Commissioning Manager - Adult Public Health	<p>Karl Beese, Commissioning Manager - Adult Public Health</p> <p>John Freeman, Commissioning Manager – Complex Care & Prevention, Adults Social Care</p> <p>Chris Baggott, Public Health Service Lead</p> <p>Emma Haley, Area Manager, Aquarius,</p> <p>Colette Lloyd, Service Manager, Aquarius</p>	None	<p>This item was last discussed on 24 November 2021 and may provide useful background information to this item</p> <p>Members of the Health and Social Care O&S Committee have been invited to attend for this item.</p>
<p>Youth Service</p> <p>(10.45 – 11.25)</p>	Evidence Gathering	To provide evidence to the Child Criminal Exploitation Inquiry	Soulla Yiasouma, Head of Youth Service	<p>Soulla Yiasouma, Head of Youth Service</p> <p>Jadieal Millwood (Youth Officer with Strategic Lead for Youth Violence)</p>	None	This item was last discussed on 30 March 2022 and may provide useful background information to this item.

Item/ Topic	Type	Aims and Objectives	Lead Officer	Witnesses	Visits	Additional Information
				Adill Hadi, Senior Youth Worker		
SEND Accelerated Progress Plan (APP) (11.25 – 12.05)	Update Report	To provide an update on progress	Sue Harrison, Strategic Director, Children and Families	Sue Harrison, Strategic Director, Children and Families Helen Ellis, Director, SEND and Inclusion	None	Brief monthly updates to be circulated to Members by e-mail.
Ofsted Inspection of Birmingham Children's Services (ILACS)	Update	To provide an update on the outcome of the Ofsted inspection of children's services.	Seamus Gaynor, Head of Executive, Children's Trust	Andy Couldrick, Chief Executive, Children's Trust	None	

Final Deadline: Friday 5th May 2023 (Monday 8th May 2023 is a bank holiday) and publication: Tuesday 9th May 2023

TO BE SCHEDULED:

1. Grand Challenges, City Observatory data indicators by committee remit.
2. Scrutiny Inquiry: Child Criminal Exploitation.
3. Joint Scrutiny Inquiry with Health and Social Care O&S Committee: Children and Young People's Mental Health.
4. Visits.
5. Student attendance at school during their period (Period Poverty Inquiry). The focus of the report would be on the learning / good practice that has been identified and how this being shared with schools across the city, and members of the Health and Social Care O&S Committee to be invited to attend for this item.
6. Janie Berry, City Solicitor to be added to update Members on tribunals and delays etc., and feedback on how the role of Legal Services contributes and makes risk informed decisions.

7. School Exclusions, Part-Time Timetables, & Unsuitable School Places: Officers to come back in six months with an update on the progress of the work undertaken (September 2023).
8. Birmingham Safeguarding Children's Partnership (BSCP) - BSCP last attended on 16th February 2022
9. The Children's Trust to attend a future committee meeting to discuss the review of short breaks.
10. Improving Services for Children and Families Improvement Programme Quarterly Progress Update (July/September 2023).
11. City of Birmingham School (COBS).
12. Children and Families Directorate's KPIs.
13. Education and Health Care Plans (EHCPs).

