

This report provides governance boards and interested parties responsible for Children's Services with an overview of the achievements and outcomes of the Children's and Young People Partnership (CYPP) for the year 2014/5 supporting better outcomes for Thurrock's children and young people.

Thurrock's Community Strategy lays out the long-term vision and priorities for Thurrock. There are five priorities which are reflected in the council's Corporate Plan and Medium Term Financial Strategy and mainstreamed into all Service Strategies and Plans:

- Create a great place for learning and opportunity;
- Encourage and promote job creation and economic prosperity;
- Build pride, responsibility and respect to create safer communities;
- Improve health and well-being; and
- Protect and promote our clean and green environments.

Thurrock's Health and Well-Being Strategy 2013-16 (HWB Strategy) incorporates the Children and Young People's Plan (CYP Plan) to ensure that the principles of giving every child the best start in life are embedded within the HWB Strategy.

Our Children and Young People's Plan 2013-2016 is built upon 4 priorities, each of which has objectives to support its delivery as illustrated below:-

Outstanding universal services and outcomes

- Raise attainment at the end of Early Years Foundation Stage, Key Stage 1, and Key Stage 2;
- Promote and improve the health and well-being of children and young people; and
- Ensure progression routes to higher level qualifications and employment

Parental and family resilience

- Offer help early;
- Reduce and mitigate the impact of child poverty; and
Strengthen communities.

Everyone succeeding

- Promote the attainment and achievement of underachieving children;
- Promote and support inclusion; and

- Narrow health inequalities for children and young people

Protection when needed

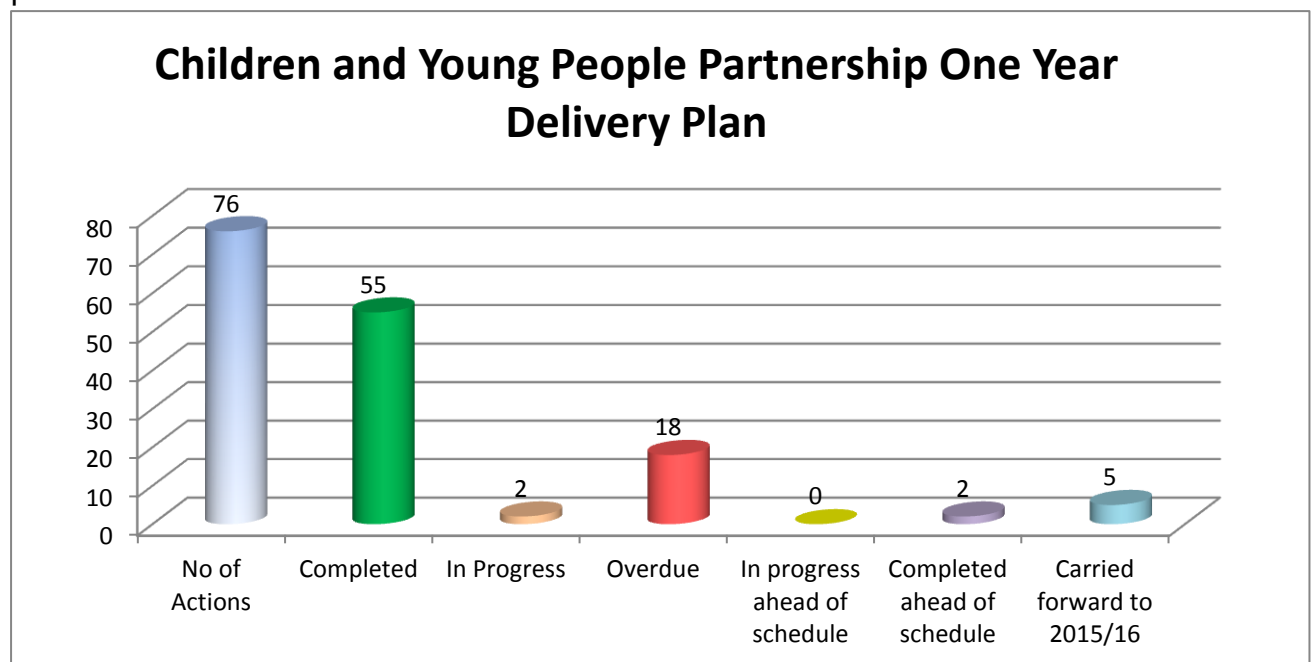
- Provide outstanding services for children who have been or may be abused;
- Provide outstanding services to children in trouble; and
- Provide outstanding services for children in care

Each priority is supported by a one-year delivery plan. The Delivery Plan is monitored by the Executive Committee on behalf of the Health and Well-Being Board (HWBB). Part Two (CYPP Plan) is monitored by the CYPP with exception reporting to the HWBB.

The partnership plan supports Thurrock Health & Wellbeing Board in delivering services to children across the Borough.

This report provides details of each of the actions set within the third year delivery plan and how those actions have impacted on service delivery and support across the children's workforce.

A total of 76 actions formed the delivery programme for 2014/5. Of these actions 55 were completed. 5 required further work and have been included in the 2015/6 plan.



Background to Children's Services

Thurrock has a young population by national standards. Out of its population of 157,700, there are 42,800 children under the age of 19 (26.8% of population) and 12,100 children are under the age of five. The number of 0 -19 year olds in Thurrock is set to increase to 50,500 by 2037. The distribution of children under 15 years of age is centred in the south of the borough in Tilbury, Chafford, North Stifford, West Thurrock and Ockendon. The population is increasingly diverse. According to the 2011 Census BME population was 15.7% – a significant increase from the 2001 Census of 4.7%. Among school-age children, over one in four (26.5%) are from a black and minority ethnic group. The latest available data indicates that Thurrock may have a slightly higher population of Gypsy, Roma and Traveller children than the national average (0.3% compared to 0.2%).

Life expectancy at birth for boys in Thurrock is 79.2 and for girls 82.4. This compares to 79.2 and 83 nationally. There remain significant gaps in life expectancy in respect of deprivation. Life expectancy is lower (8.3 years for men and 4.3 years for women) for people living in the 10% most deprived areas compared to those living in the 10% least deprived areas of Thurrock. Infant and child mortality rates in Thurrock are consistent with national averages.

The outcomes achieved over the reporting period are recorded under the 4 key aims of the plan, which is shown below:-

Strategic Aim 1		Outstanding universal services and outcomes – Priorities for 2014/2015			
Objective 1		Action		Measure	Comments
1.1	Raise attainment at the end of all key stages with a particular focus on Early Years Foundation Stage, Key Stage One and Key Stage Two	1.11	Prepare a report on progress made on the action plan of the Education Commission	Progress report	A report and action plan was taken to in July 2014 to O & S committee
		1.12	Prepare report on activities of Children Centres and links with early years curriculum	Progress report	An update and overview by 4Children has been presented to LSCB Management Exec



		1.13	Report on the progress and activity to raise registration levels in Children Centres to 85%	Progress report and recommendations	CCs currently report to the Accountability Board. Reports are provided for this group with quarterly reports for Advisory Boards to ensure the progress towards this target.
		1.14	Report on progress to increase take up of early education of 3 and 4 year old children to 95%	Progress report and recommendations	Reports on the take up of 3/4 year old education are provided
		1.15	Embed strategies to narrow the gap between boys and girls at all key stages and target resources to ensure all children make expected progress during their primary school years	KS2 above national average gap narrowed between all vulnerable and underperforming groups	A report was prepared and submitted to O&S in November 2014
		1.16	Increase our capacity to provide early-education to two year olds in line with national targets	800 places	There is a 2 Year Old Strategy Board which meets half termly. The latest report for this will chart the progress which is currently good when compared with the Eastern Region.
		1.17	Ongoing analysis of take up of early-education to two year olds undertaken to identify any inequalities and address these	Analysis report	The latest report for this shows good progress when compared with the Eastern Region.
		1.18	Project Plan (1.17) for Phase Two in place and being delivered	Plan	There is a 2 Year Old Strategy Board which meets half termly. The latest report for this will chart the progress which is currently good when compared with the Eastern Region.



		1.19	Commission a high quality programme for Heads and Deputies based on raising standards linked to effective school improvement and the Ofsted framework	Programme	Continued support and guidance is given to Governing Bodies to attract the appropriate, experienced leaders to our schools, including academies. This has been highlighted as a strength by HMI who recognise the strategic lead the LA has had in conjunction with governing bodies to ensure a highly effective workforce. During the period April 14 to April 15 a further 5 appointments have been made to Head Teacher positions who have all taken advantage of the programme. Feedback has been very positive and when complete the programme will ensure sustainable mentoring within the LA. We have also had some success in appointing DHs to HT positions within the borough. During the period April 14 to April 15, 6 DHs have gone on to be either HTs or Heads of Schools in Thurrock. This 'growing our own' approach is very popular in Thurrock which is securing sustainable leadership pathways.
Objective 2		Action		Measure	Comments
2.1	Promote and improve the health & well-being of Children and Young people	2.11	Update report on healthy weight strategy (2014-2017) and strategic delivery plan. (HWBB Report)	Progress Report	Report presented to CYPP Full Board on 2nd October 2014
		2.12	Prepare report on progress of the revised CAHMS service provision	Report	Report presented to H&WBB on 13.11.14
		2.13	Children's 5-19 service (school nursing) New service model scoping paper incorporating service review exercise with CIPFA comparators and commissioning update.	Progress report	New redesigned service agreed with provider to include school nurses delivering weight management programmes and preventative mental health programmes



		2.14	Receive report on Risky behaviours to incorporate updates on DAAT, Tobacco control, sexual health services. Report to include latest data and details of commissioned services, service reviews and strategic actions.	Progress report	Report presented to H&WBB in July 2014
		2.15	Children's 0-5 services (including health visiting) update paper to be provided detailing allocation and transition arrangements.	Progress report	Allocation of PHG for 0-5 received, task and finish group established to ensure that the council are prepared for the transfer of responsibility. Low risk for the council further guidance still awaiting
		2.16	Preventative MH services scoping paper provided.	Progress report	Scoping paper approved - new service for adults and children will be delivered in 2015/16
		2.17	Receive Communications Plan from Public Health and identify Partnership outcomes to support improving the health of children and young people	Communication plan	Comms plan agreed for campaigns and consultation of all children services 14/15
		2.18	Receive Annual Public Health report	Report	General APHR completed June 14 - new Aging Well APHR in draft for 2015
		2.19	Partnership Locality planning and delivery is in place with integrated	Progress report	Integrated Locality management arrangements in place. Links with Local CCGs being progressed



			management arrangements and strong links with local CCGs.		
Objective 3		Action		Measure	Comments
3.1	Ensure progression routes to higher level qualifications and employment	3.11	Receive report on progress to increase level 2 & 3 qualifications	Data	Progress report provided though HOS.
		3.12	Prepare report on the delivery of year 2 of the Raising Participation Age Plan	Data	Progress report provided though HOS.
	3.13	Reduce the number of young people aged 16-18 who are NEET	0.5% reduction until performance is above national levels - Data/progress report	Performance below target due to lack of local FL flexible provision in the borough. All young people becoming NEET have to wait till September '15 for a start in education or training. 22% of the NEET cohort are NEET Unavailable, 13% of them are Teenage parents. Unknown figure still remains the lowest in the country at 0.1%. Thurrock is above England's NEET percentage but is on average for Statistical neighbours. Participation, on the other hand, in Thurrock is considerably higher than national and statistical neighbour's average.	
	3.14	Ensure high quality opportunities for learning, skills development and training linked to the regeneration opportunities in the Borough	Implement plan to increase volume of apprenticeships in the priority sectors Q1: Public Sector/Logistics Q2: H&S care/retail Q3: Engineering/const ruction Q4: Evaluation report	Partnership Action plans developed and implemented, for education programmes linked to current and future employment opportunities, has resulted in increased volumes of apprenticeships in priority sectors	



		3.15	Increase volume of L2 and L3 apprenticeships by targeting individuals and employers	Progress report	Support provided to local employers/young people enabled the employment of 135 apprentices
		3.16	Increase of level 2 and 3 apprenticeships by at least 20% year on year	Progress report	Validated data, published by National Statistical Data, is not available for 18 months after each quarter has closed. Using unvalidated data available for 14/15 and 13/14, the number of apprenticeships is forecast as a 24% decrease at Level 2 and a 2% decrease at Level 3
Strategic Aim 2		Parental, Family and Community resilience - Priorities for 2014/2015			
Objective 1		Action		Measure	Comments
4.1	Early Offer of Help	4.11	Receive report on progress of Early Help services improved outcomes	Progress report	Report submitted to CYPP Board 12.11.14
		4.12	Receive a report on progress and outcome benefits of the Troubled Families Programme	Annual report Additional 60 families	This has been received and the programme has now progressed to Phase 2
		4.13	Develop a revised EOH Strategy	Strategy	Report submitted to CYPP Board in October 2014
		4.14	Develop a MASH Strategy	Strategy	Report submitted to CYPP Board in October 2014
		4.15	Conduct a post implementation review of MASH and revised EOH provision	Review document	The draft report has been completed - awaiting final report to be submitted to CSC
		4.16	Work with the Police Commissioner's Office to review existing service provider to victims and multi-agency	Report	This is an ongoing piece of work which will be carry forward to the 15/16 plan



Objective 2		Action		Measure	Comments
5.1	Mitigate the impact of child poverty	5.11	Working with partners develop an advice strategy that lessens the impact of welfare reform for those families and young people who are at a higher risk from the effects of poverty	Multi agency strategy	Children's JSNA produced and approved by the CPB. Within this document are recommendations for 2015/16 - all the public health programmes will be delivered to ensure that all children in Thurrock receive preventative support and advice around their wellbeing. Parenting review completed workshop in January to agree next steps. From October 2015 Public Health will be responsible for Health Visitors and the commissioning of 0-5 services. Therefore delivery of the whole healthy child programme
		5.12	Receive reports on activities to support families accessing and understanding child care provision, promoting moving into work and sustainable employment	Multi agency reports	Carry forward to the 15/16 plan
		5.13	Increase parental employment and skills by providing access to adult training and skills development	Report on increasing adults with level 2 & 3 qualifications Target L2 74.1% L3 42.2% by October 2014	The partnership work undertaken with the Children Centres has enabled us to train 26 new volunteers, we have a strong programme and volunteers are encouraged to access other Thurrock training opportunities eg Safeguarding, the volunteers are currently undertaking a range of roles within the Children Centres and we are looking to expand the programme to enable more opportunities for skill development in September, recognising that for some volunteers this will provide a stepping stone into work



		5.14	Increase the take up of Working Tax Credits to 15.5% particularly targeting areas of the highest child poverty.	Progress report	This report is still pending
		5.15	ESF Families programme commenced and meeting targets	Report on achieving 200 families by September 2014	This report is still pending
5.2	Strengthen communities	5.21	Improve housing for families and for vulnerable young people and prevent homelessness - 200 new home by 2014/15	Progress report	This report is still pending
		5.22	Introduce social lettings agency by 2014/15	Progress report	This report is still pending
		5.23	Develop links with housing teams and ensure that information is included on Ask Thurrock and in locality information outreach offer.	Progress report	Strong partnership have been built with housing which has supported the recruitment of a number of apprentices across the council, we have also been working with external housing providers to support people back into work, one programme is around developing a programme to recruit childminders in areas where we have issues around numbers of places available - thus supporting working partners with childcare options and local residents to gain employment as childminders
		5.24	Implement a programme to increase the number of accredited landlords	Progress report	26 Thurrock Landlords have been accredited over the last year, enabling safer places for families and their children to live. To date there are a total of 166 Thurrock landlords accredited who manage a total of 429 rented properties
		5.25	Community hubs designed to build community	Evaluation /progress report	This has been completed and as a result a further Hub has been opened in Chadwell St Mary



			resilience - Evaluation of the Ockendon pathfinder and future roll out of additional community hubs		
		5.26	Implement a strategy to support challenge and change parenting in Thurrock	Strategy	EOH Strategy refreshed 2014-17. Commissioned/Targeted services in place. Monitoring and evaluation undertaken by the Commissioning Team
		5.27	Service delivery objectives agreed by partners and delivery commenced (5.26)	EOH Strategy	EOH Strategy refreshed 2014-17. Commissioned/Targeted services in place. Monitoring and evaluation undertaken by the Commissioning Team
		5.28	Locality integrated management arrangements in place and opportunities for joint planning and delivery identified and committed	EOH Strategy	EOH Strategy refreshed 2014-17. Commissioned/Targeted services in place. Monitoring and evaluation undertaken by the Commissioning Team
Strategic Aim 3		Everyone Succeeding - Priorities for 2014/2015			
Objective 1		Action		Measure	Comments
6.1	Promote the attainment and achievement of underachieving children	6.11	Report on the development and access of services for pupils with SEN / LDD to support the best possible academic achievement	Report & outcomes	This report is still pending
		6.12	Develop and improve Personal Education plan forms & systems during 2014	Report and outcomes	This report is still pending
Objective 2		Action		Measure	Comments



7.1	Promote and support inclusion	7.11	Provide update on embedding of the disability charter	Progress report	This report is still pending
		7.12	Children's Centres to ensure that the number of registrations by families with children with SEN and learning difficulties increases and is in line with local population data.	Progress report	CCS have targets to improve the number of registrations which have consistently improved across all centres in particular those with SEN and learning difficulties
		7.13	Develop the offer to all pupils accessing pupil support services to significantly improve the outcomes and life chances of pupils in short-stay provision	New models of alternative provisions and Pupil Referral Units	This report is still pending
		7.14	Implement improved processes for children with complex needs, disability and continuing health care needs	New system of Education Health and Care Assessment and Plans to be in place to support children and young people aged 0-25 incorporating changes to post 16 assessments	This report is still pending
7.2	Narrow health inequalities for children and young people	7.21	Vulnerable pregnant women are targeted to ensure they are supported and access rolling programme of ante-natal and post natal care	Progress report on the capacity planning programme	Review of all parenting services for families undertaken across partners in Thurrock, stakeholder workshop to feedback findings and a new preventative service from July 2015. Mothers consulted and surveys completed to support next steps
		7.22	Children in care access immunisation	Report on improved screening services	New preventative models from 1 April 2015, school nursing to promote the benefits of imms and screening.



			routinely and uptake is increased		Marketing campaign planned throughout the year. Need to ensure that children in care are monitored around preventative support in the future
Strategic Aim 4		Protection when needed - Priorities for 2014/2015			
Objective 1		Action		Measure	Comments
8.1	Provide outstanding services for children who have been or may be abused	8.11	Implementation of Multi Agency Safeguarding Hub (MASH)	Process in place	MASH implemented. Officially launched Sep 14
		8.12	Revised Threshold document produced by the LSCB	Revised document	This has now been completed and is on the Thurrock LSCB Website. This has also been circulated to all agencies. - 06.10.14
		8.13	Report from the Munro Principal Social Worker on progress of improving services for children	Annual Report	This report is still pending
		8.14	Undertake a gap analysis against Munro review recommendations & develop any relevant action plan	Annual Report	This report is still pending
		8.15	Quality Assurance of delivery through audit and performance monitoring	Annual Report	A QA process and Peer Review process is now in place
		8.16	Receive report on progress of action plan for continuous improvement of services to children with focus on Ofsted inspection process (CSC)	Report	Weekly meetings held and progress updated at each meeting



		8.17	Receive report on quality assurance audits of safeguarding to improve service provision to children including peer audits	Report and recommendations	A QA process and Peer Review process is now in place
		8.18	Receive report and recommendation from Essex Police CAIT on police response to safeguarding	Report	Due to changes within Police structure/personnel, this report is being deferred until the next financial year
		8.19	Receive report and outcomes' change process following quality assurance of childrens services	Report	Awaiting completion of objectives 8.15 and 8.17 - c/f to next financial year
		8.20	Parent Outreach Worker role to be evaluated to ensure that it supports families most in need of support	Report	POW Role evaluated, JD rewritten, caseloads assigned and impact measured through visit notes, Ofsted inspections and feedback from families and workers
		8.21	Residential visits process is reviewed to ensure it is best practice	Progress report	This report is still pending
		8.22	The EOH commissioned offer is integrated with other service delivery to provide an offer of support locally and this is monitored and evaluated	Progress report	Quarterly outputs and KPI outcomes are reported to the Commissioning Team. Formal review of service took place November 13 and February 14 and annually thereafter
Objective	Action			Measure	Comments



9.1	Provide outstanding services to the most vulnerable children and young people	9.11	Receive progress report on activity to reduce Violence against women and girls	Annual report	Refreshed Action Plan being undertaken and by the VAWG Governance Board and review will be undertaken as part of the 15/16 plan
		9.12	Receive a report from Disabled Children Team on activity and services provided to prevent children from being in care	Annual report	The short break statement was updated on the Thurrock website in Jan 15 and this provides information on all the short breaks available to disabled children and their families with either low needs to those with more complex disabilities and circumstances. The choice of short breaks supports families to continue their caring role and therefore reducing the number coming into care.
		9.13	Receive a report from BTUH on the progress made on paediatric services following 2013 review	Progress report	LSCB will be writing to BTUH requesting an update on the recent review that is being done and will include this as part of the request. This will be carried forward to 2015/16
		9.14	Receive a report on the development on integrating parent groups in decision making and outcomes for disabled children	Progress report	This report is still pending
		9.15	Report from Youth Offending Services showing progress since last year's inspection and outcome of the action plan	Report	This report has been completed and finalised



		9.16	Review and implement relevant recommendations from the children's commissioner report on CSE	Progress report	The Children's Commissioners Report recommendations are being looked at together with the recommendations from the Rotherham Report - this is being actively worked upon with some short, medium and long term actions
		9.17	Deliver the Walk on line roadshows (E-safety) to year 5	Programme	The Walk On Line Roadshows took place on 11 and 12 March 2015
		9.18	Expand the capacity of ISS (Intensive Supervision and Surveillance)	Progress report	This objective is no longer alive and valid
		9.19	Implement monitoring and review of SEN and Disability Strategy by the LSCB and Stay Safe Group	Report	This report is still pending
		9.20	Launch the integrated parents group (PEG)	Report	This report is still pending
		9.21	Children and families have access to a wide range of services through the locality teams as a part of their package of support	Report	Commissioned/Targeted Support Services in place and monitored by Commissioning Team
		9.22	Re-commission short break services	Update report	This report is still pending
Objective 3		Action		Measure	Comment



10.1	Provide outstanding services for children in care and leaving care	10.11	Receive a performance report on indicators of outcomes progress to ensure care numbers are consistent with national comparators	Performance report	This is received by R Rowlands and is brought to the CYPP Full Board
		10.12	Report from LAC Manager setting out progress of service provision to aspire to grading of outstanding	Report	Fostering Report has been presented to the LSCB Management Exec
		10.13	Receive report and recommendations on quality assurance audits on service provision to children in care or leaving care	Report and recommendation	There is a programme of auditing in place which incorporates this with an established review process and is outcome based
		10.14	Produce a revised Adoption Development Plan	Progress report	This report is still pending
		10.15	Receive a report on the voice of child in improving and development care services	Report	This report is still pending



		10.16	Receive report on activity to ensure that LAC are achieving their academic potential to the level of their peers	Report	The full time Head of the Virtual School for Looked After Children and has made an excellent start to the role. Working closely with Social Care and Schools, systems are now in place to ensure that all LAC are tracked closely to chart their progress in schools. Currently the position is that KS2 pupils achieve at least in line with National whilst KS4 achieve below that of their peers Nationally. Education Plans are highlighting the need to ensure that any support programmes build in academic achievement as well as health, well-being and care. Meetings with schools take place at least twice a year to monitor progress against PEPs and to ensure that any slippage in pupil attainment is supported by an appropriate intervention programme and use of the Pupil Premium Funding if applicable.
		10.17	Report on the review and recommendations of the current placement strategy to ensure best value and good outcomes for children.	Report	A new placement panel process is in place and overseen by Head of CATO

Progress and what has been achieved so far

Education and Attainment

Identification of under-performance in Thurrock is complex, largely because of the accelerated improvement in schools locally. The areas in Thurrock with the highest levels of child poverty also experience the lowest educational attainment and have more people in poor health or with disabilities which prevent them from working; higher proportions of workless families and higher numbers of adults with poor basic skills or who lack qualifications.

The proportion of young people aged 16-19 who are NEET has decreased in recent years to 5.4% and is now similar to the regional and national average. Thurrock is the only local authority in the country to have no 'unknown' young people in this category.

Officers working to reduce NEET regularly consult with young people to identify the opportunities they would like to access and plan these against sector skills shortages to support improved engagement

Services to reduce the % of 16-19 year olds not in education, employment or training (NEET) have provided opportunities linked to sector based training and apprenticeships in line with the job opportunities created through local regeneration. Our NEET rates have continue to fall and are now below our previous rate of 5.7%.

The strategy for Thurrock is to ensure that the position of every young person is known (where Thurrock has the strongest performance nationally) and to ensure that the most vulnerable young people have effective pathways from 14 to 19+ against a national backdrop of increasing unemployment levels for young people.

NEET Care leavers - For 2013/14 35% of care leavers were EET. The EET rate has increased for 2014/15 but the council has set the stretch target of 70% EET for 2015-16 to drive continuous improvement.

KS2 performance

Pupils achieving level 4 or above in reading, writing and maths

- This is the national benchmarked standard at the end of primary education and Thurrock achieved 77% compared to 79% nationally. This is an increase of 5% from 72% the previous year and continues to narrow the gap on the national average.

Pupils achieving level 4 or above in reading

- 87% of Thurrock pupils achieved a level 4+ in reading in 2014 compared to 89% nationally. Overall performance in Thurrock rose by 3% on 2013 with boys improving by 2% and girls by 3%. This continues to be a priority area for school improvement. Pupils making the target of 2 levels of progress between KS1 and

KS2 in reading rose to 91% putting Thurrock in line with the national average of 91%.

Pupils achieving level 4 or above in writing

- Thurrock improved its performance in this indicator by 3% to 85% - 1% behind the national performance. Pupils making the target of 2 levels progress between KS1 and KS2 in writing rose by 3% to 95% which puts Thurrock 2% above the national average.

Pupils achieving level 4 or above in maths

- Thurrock's performance rose to 85% which is 1% behind the national average. Pupils making the target of 2 levels of progress between KS1 and KS2 in maths rose by 3% to 90%, which is now in line with the national average, with an increase of 10% since 2011.

% of schools below KS2 floor standard

- 6% of schools were below the standard in 2014 (2 schools)

Narrowing the gap

Pupils eligible for FSM in Thurrock have seen a rise in performance of 3% to 62%. Non FSM pupils saw a higher 5% rise to 80%, 2% below the national average of 82%. The FSM/non-FSM gap increased to 18% which is in line with the equivalent gap nationally.

SEN statemented pupils have seen a drop in performance of 5% to 13% which is 2% below than the national average of 15%. Non SEN pupils saw performance increase to 89%, 1% below the national average. The estimated SEN/non-SEN gap of 54% is slightly higher than the national average of 52%.

KS 4 performance

5+ GCSEs A*-C including English and Maths

- Performance on the key measure of 5+ GCSEs A*-C including English and Maths dropped to 57.4%. This was mainly due to changes in calculations for this indicator introduced by the government. National performance dropped more than Thurrock to 56.1% ranking Thurrock 59th out of 151 authorities. Thurrock has risen above national (56.1%) and SNN (54.6%) averages in 2013/14.

- Boys have increased the gap with national in 2014 and are now 0.7% ahead of national performance – 51.7% compared to 51%
- Performance for girls improved to 63.1% where nationally performance dropped significantly. This is now 1.8% above the national average (61.3%)

5+ GCSEs A*-G including English and Maths

- 91.5% of pupils achieved 5+ A*-G including English and maths which is 0.5% above the national average. This places Thurrock in the 2nd quartile nationally (ranked 66/151 authorities).

KS2 to KS4 progress in English

- 72.2% of pupils made the target of 2 levels of progress between KS2 and KS4 in English, an decrease of 1.3% since 2013 and 0.1% below the national performance of 72.3%

KS2 to KS4 progress in Maths

- 73.9% of pupils made the target of 2 levels of progress between KS2 and KS4 in maths, an fall of 1.1% since 2013, though significantly above the national performance of 66.5% and above all statistical neighbours

% of schools below GCSE floor standard

- 1 school fell below the floor standard in 2014

Narrowing the gap

Pupils eligible for FSM in Thurrock have maintained performance in 2014 at 31% compared to national levels which dropped by 4.4%. Performance for FSM pupils in Thurrock was high in 2012 so this decrease has resulted in a gap with national of 2.7%. Pupils not eligible for FSM dropped in 2014 which was less than the national drop with Thurrock now 1.6% above national

SEN pupils have seen a drop in performance of 3.5% to 17.5%. This increases the gap to national to 3%. Non SEN pupils saw a 0.7% drop in performance to 68.5%, which is now 2.8% above the national average of 65.7%

Level 2 and 3 at 19

The recently released data from the Department for Education indicates that for 2013/14, Thurrock has exceeded the national average for the rate of young people achieving at least a level 2 qualification by age 19 – 88% compared to 85.6% a rise of 0.7% coming on top of a 5% rise the previous year. This is an excellent outcome.

Building on the improvement for Level 2 at 19, the percentage achieving the measure of Level 3 at 19 has increased from 52.8% in 2012/13 to 53.2% in 2013/14. The gap between the national figure and Thurrock's has increased slightly from 3.5% to 3.7%.

Overall levels of deprivation in Thurrock are consistent with the national average however, Thurrock experiences significant pockets of deprivation and inequality, with several areas falling within the 20% most deprived areas in England. Just over one in five children in Thurrock is growing up in poverty (22%) – which is more acute than the national rate (21.1%). However, this masks the concentration of child poverty in the most deprived areas of Thurrock. Over half of children living in poverty are in the six most deprived wards. The gap between the highest and lowest areas of deprivation in respect of child poverty is wide. For example, in Tilbury 55% of children are living in poverty, 25 times the level of child poverty in the least deprived ward of Corringham and Fobbing.

Young people with special educational needs are well represented as part of our transition working group and have made a major contribution to this work, including the development of Person Centred Planning. Thurrock's work in this area has been acknowledged nationally as an example of good practice.

Partner agencies are focused on preventing Serious Youth Violence and associated sexual violence and abuse; drawing on national models such as the work undertaken by MsUnderstood. A new Serious Youth Violence strategy and is being implemented in partnership between Essex and Kent police.

Children's Services and its partners continue to respond positively to new challenges around radicalisation and the promotion of social cohesion. Partners agencies, schools and departments across the council are working together to promote social cohesion, tackle anti-social behaviour and promote a positive living environment for all our residents. Prevent champions have been identified and training provided to raise awareness amongst frontline staff.

Outstanding Universal Services

MASH

Establishment of MASH in July 2014.

Independent evaluation undertaken during March 2015 of progress and benefits of the MASH and the report is due to be published soon .

The MASH is expanding its role to include the piloting of a First Response Team drawing on Cambridgeshire's model and to increase capacity to focus cases appropriately towards early intervention where this is appropriate to the levels of need and risk.

Troubled Families

The Payment By Results (PBR) data shows that Thurrock have successfully 'turned around' over 100% of families within Phase 1 of the Troubled Families Programme.

We believe the 'Triad' provides us with a solid base for entering Phase 2 of the Troubled Families Programme.

We are very proud of our Troubled Families Programme and unique Thurrock strengths, which include:

- Dedication to working with and helping improve the lives of the people living within Thurrock. A team that are prepared to work and deliver support services in flexible ways to ensure the best outcomes for the Troubled Families e.g. one Parental Outreach Worker is currently taking a number of previously withdrawn young people out doing "Positive Activities" (Football/Basketball/Tennis, etc.) in local parks. Some of these young people were so withdrawn they had seldom ventured out of the family home or to school in over a year. This has also allowed other services to engage them such as Thurrock Therapeutic Treatment Services.
- A strong belief in the ideals of the Troubled Families programme - use of the Team Around the Family model which emphasises and encourages participation; is action orientated and supported by a SMART outcomes framework.
- A full engagement plan for schools, with frequent visits to ensure the Troubled Families agenda is fully embedded within participating local schools.
- Development of co-located Thurrock Housing Department, TF Champions
- A strong Multi-Agency Partnership Board

Support Processes

Thurrock Children's Service has been undertaking an ongoing process of self-assessment and evaluation. This has included direct consultation with service users; staff and key partners. Task and Finish groups have been established to look at specific areas, develop and implement improvements. A series of thematic audits, single agency & multi-agency case audits and surveys have been undertaken. The Lead Member & members have been actively involved in reviewing the service and driving improvements. The Lead Member has met directly with staff and observed practice. Self-assessment findings have been disseminated for comment and challenge across Children's Services.

The VAWG strategy continues to be refreshed and learning incorporated from a local and national perspective. Close working relationships are being forged with the South Essex Rape and Incest Crisis Centre to support victims of sexual abuse and sexual exploitation.

The key public health priorities for children are captured in our Health and Well Being Plan and include (delivery of the Health Child Programme, reducing exposure to second-hand smoke and uptake of smoking by young people and reduction in childhood obesity, ante-natal and newborn screening, initiation and duration of breastfeeding, and childhood immunisation).

Thurrock's has a comprehensive and continually updated JSNA. The JSNA is driving sufficiency and commissioning strategies across Children's Services and key partners.

We have strived to continue to build on and improve the leadership, management and capacity for continuous improvement of the service.

Children's Services is led by a group of highly experienced and able managers / leaders.

A new permanent Head of Children's Social Care started in October 2014.

Children's Services across the Partnership benefits from strong performance information, which it uses to drive strategic plans. The council continues to benefit from a range of Quality Assurance mechanisms, such as:

1. Daily Performance data and monthly reports available via the 'Tree' (online performance dashboard / reporting system).
2. Corporate Scorecard and performance reporting to Directors Board.
3. Case file audit & planned program of 'Peer Reviews'.

4. LSCB Performance Review Panel
5. Threshold to Care Plan
6. Children Looked After, CIN and Child Protection Surgeries
7. IRO escalation system
8. Notification to Head of Service and DCS re: missing children.

The LSCB and Sub Groups (Management Executive, the Performance sub-group and the Audit sub-group & Serious Case Review) continue to challenge themselves regarding effectiveness and how their boards activities have made genuine differences to the lives of children and young people.

A new challenge panel has been introduced to further scrutinise the performance of individual agencies.

SEND services have been increasingly co-produced, empowering parents and service users.

Parents are included in Children's Centre Advisory Boards across Thurrock supporting planning and evaluation of services. In addition, parental evaluation of services and the impact of these is used to plan additional support and ensure value for money is achieved.

Within the Children's Centres, parents are included on the Advisory Boards adding significant value to the planning process.

During 2014/15 consultation has led to:

- Parent led fund raising re: summer activity schemes.
- Child led tracking and prioritisation of Council Pledges for looked after children.
- Co-production of Education, Health, Care Plans.
- Revision of complaints guidance.
- Sending YOS appointments & reminders by text as requested by service users.
- Regular written feedback to parents at Sunshine Centre in formats requested by parents.
- Development of new Pathway Plan with CiCC.

- Information sharing with parents and carers via Facebook and Twitter.
- Development of Life Story & Direct Work policy with CICC.

Highly effective YOS and partnership intervention ensures a low rate of re-offending at 27%; a 157 per 100,000 rate of new entrance and a very low rate of CLA offending at 1.5%.

Specialist Service for substance misuse are provided by Wize-up and the main presenting substance amongst young people remains cannabis.

A smoking cessation programme is being offered by public health given the rising trend in young people smoking.

Child Sexual Exploitation (CSE)

Children's Social Care have identified 30 cases of suspected CSE and 10 cases where on 'the balance of probability' we consider to be cases of actual CSE. 4 of the 10 are boys and 6 are girls. No prosecutions have taken place in relation to these 10 cases as the judgement is based on the balance of probability.

However between 2012 and 2014 we have had the following police & multi-agency operations:

Operation Bracken: led to a criminal prosecution of 1 man. There were 11 identified female victims the youngest being 11 years old.

Operation Steelband: in related to 3 girls (1 care leaver, 1 looked after & 1 on a CP plan) - centred around a pizza parlour. The operation did not lead to any prosecution but disrupted the activity and risk at this location.

Operation Praline: was a large scale joint police and social care investigation which involved a number of other authorities and police forces. There were no prosecutions but safeguarding measures were put in place for all children at risk of CSE.

Responses to the Jay Report and CSE Action plan were presented to the Children's Overview and Scrutiny committee in November 2014. An update on the plan was presented to the Overview and Scrutiny committee in March 2015.

A new Thurrock CSE Strategy has been developed and was introduced in January 2015 and a copy is available on the LSCB website.

The strategy aims to build on current learning and best practice including the Ofsted Thematic Review Findings: [The sexual exploitation of children: it couldn't happen here, could it?](#)

A CSE risk assessment is in use across the Partnership and all cases where a medium to high risk of CSE is identified are referred to the LSCB Risk Assessment Group (RAG) and Police Child Sexual Exploitation Triage Team (CSETT).

All Partners are required to undertake on-line CSE Awareness training and this training is on offer to schools and partner agencies.

A CSE Consultant and CSE Social Worker have been recruited to assist in co-ordinating and developing our approaches to CSE across Children's Social Care, Children's Services and the Council.

CSE Champions have been introduced and trained across Children's Services and some partner agencies (in particular schools).

The Partnership has supported the LSCB who have continued to provide a series of "Roadshows" in partnership with Essex Police, reaching an audience of almost 6,000 students aged 7-11 across the Borough giving clear messages about the dangers of the on-line world. The roadshows have been well received and have generated further debate within the community, following some of the findings generated by a questionnaire completed by the students about their on-line habits.

Thurrock has introduced the LSCB Risk Assessment Group to holistically consider and review a range of risks, including missing and CSE.

The Risk Assessment Group feeds up into the LSCB Multi-Agency Sexual Exploitation panel (MASE), which provides strategic leadership and challenge re: CSE.

In partnership with Southend, Essex and Essex Police we are undertaking a review of all current cases and cases going back 5 years where a potential risk of CSE has been identified, to ensure that children and young people are safe; that processes were appropriately followed and that learning is captured to improve practice.

Youth Cabinet & Young People

The Youth Cabinet play an important role in debating current issues and plans and are routinely invited to take part in consultations. The Youth Cabinet provides views and comments on a variety of consultations and they have led a consultation with young people on the activities they would like to see in their local areas. This information is used to plan and shape service delivery.

Members of the Youth cabinet have been identified as Safeguarding champions and are appropriately leading on promoting the protection of young people, increasing awareness of risk and services.

Locally, youth workers work closely with young people to encourage volunteering and participation in activities and through the Princes Trust Programme and Duke of Edinburgh schemes, young people are able to support local community initiatives and understand the impact of their volunteering.

The Children in Care Council (CICC) is externally facilitated by a local voluntary organisation, which ensures independence and meets on a monthly basis. Both the Chair person and the facilitator attend the Corporate Parent committee. The CICC have been involved in developing the department's online safety programme; reviewing the Pledge; Developing a new Pathway plan; reviewing the complaints procedure and developing a new entering care pack to be launched in 2015/16/.

Early Years

Thurrock's overall position in relation to the two-year-old entitlement for free early year's education and childcare has increased from 64% of our eligible families taking up the entitlement to 80%.

By definition of the entitlement all children are disadvantaged (i.e. children living in workless and low-income households), with the additional local criteria, i.e. of providing early year's education and childcare to children on a child protection plan, Common Assessment Framework plan and to those children looked after, we can be sure that we are reaching some of our most vulnerable families within Thurrock and therefore contributing to the reduction of inequalities between these children and the rest through participation of quality assured childcare provision (i.e. Ofsted 'Outstanding or 'Good').

Access to a range of services is provided through Children's Centres with a clear focus on core purpose outcomes – Child Development & School Readiness, Child and Family Health and Life chances, Parenting Aspirations and Parenting Skills. Activities within centres are Age Appropriate and significant progress has been made to ensure that groups are meeting the identified needs and outcomes

related to children's developmental stages through newly established session planning and evaluation processes.

Other early years' provision is available in centres in all localities, with close working relationships including development of challenging Advisory Boards that hold centres to account to ensure that services are meeting local need and are evidencing impact and outcome. In addition, partnership delivery and working includes midwifery teams and health visiting teams, all of whom work together to ensure that families have access to a wide range of child and family health support.

The majority (around 90%) of new parents attend Baby Weighing facilities in centre, as well as a consistent access to support on attachment and Post Natal Depression through smaller Health delivered group work. This is a 'wrap around approach' from the ante-natal stage through to the first years of the child's life including the one and two year old assessments and close working to support individual families who are in 'crisis' and are supported through the Common Assessment Framework process.

Children in Thurrock have average levels of obesity. The most recent National Childhood Measurement Programme data 2012/13 shows Thurrock to have an obesity prevalence in Reception-aged children of 9.6%, which is significantly higher than the East of England average (8.1%), and is above the England average of 9.3%. In Year 6 children the prevalence is 19.8%, which is more than double the prevalence in Reception.

Targeted public health programmes across Thurrock (in health, early years, schools, children's centres, leisure centres and community settings) continued to provide integrated support and packages to promote healthy lifestyles and tackle childhood obesity (and across the life-cycle).

Attainment at the end of reception in 2014:

- 66% of children gained a Good Level of Development which was above the National average of 60%
- 65% of children gained at least the expected level in all Early Learning Goals which was above the National average of 58%
- The average points score for all children was 33.7 with the National score being 33.8

The % inequality gap in achieving all the Early Learning Goals was 28.8% which is better than the National score of 33.9

Early Offer of Help

Our Early Offer of Help puts the ethos of Early Intervention at the heart of delivery across children's services and a range of agencies. Through this we are transforming our systems, including children's centre delivery to support those most in need at an earlier stage.

Our approach is one of a multi-agency partnership, working to collectively provide a team around the family approach utilising evidence based primary prevention programmes such as Family Nurse Partnerships (FNP) and the Maternal and Early Childhood Sustained Home Visiting Programme (MESCH). Aligning these programmes with wider services, such as the Healthy Child Programme and access to early education for two, three and four year olds mean that we can offer a structured programme of support.

This 'wrap around approach' embeds the team around the family approach in universal services but with structured links to targeted early support when it is needed. Community based services such as Community mums and dads add to our support pathways that are made up of both statutory and community based services.

The structure that underpins the Early Offer of Help is in place across the 9 children centres. The service to support the EOH is equitable but differentiated to serve the local communities and ensure the desired outcomes.

Our current Early Offer of Help Strategy brings together a needs led evidence based approach at an appropriate level, to prevent needs escalating but also to offer a step down approach that prevents re-referral. We have secured multi agency commitment and funding to build on current good practice and maximise investment in a local offer that includes targeted programmes such as FNP and MESCH. Community engagement is at the heart of our developments in Thurrock.

Our current strategy is built on a detailed needs assessment and has developed an ethos of Early Intervention at its heart. By using a needs led approach we have been able identify where there is a correlation of risk factors and plan services to reduce overlaps and gaps between services and agencies to:

- Identify needs earlier, especially for those at the edge of statutory intervention
 - Support a coordinated package of support for children and their families
 - Reduce the number of cases that escalate to require statutory intervention
 - Provide a fully supported de-escalation process supported by universal services
- By developing the ethos of Early Intervention we have integrated the work across a range of initiatives including Child Poverty reduction, Troubled Families, Children's Centres and Health Visiting reforms.

Safeguarding the children and young people of Thurrock

Thurrock continues to apply its thresholds rigorously but the focus has been shifted to ensure that thresholds are not a barrier to needs but a phased continuum to address needs. On-going training is being developed and provided across the partnership to ensure that thresholds are clearly understood and consistently applied to promote positive outcomes.

100% of new referrals in Thurrock have a management decision within 24 hours as to whether further intervention is required.

Compliance with timescales is historically strong and continues to be so despite a slight dip as reflected in the Eastern region bench marking data.

The rate of children subject to child protection plans is high; Thurrock, 75 per 10,000, the same as in 2013/14. During the course of the year the number of children subject to CP Plans did decrease to 167 but has steadily increased.

This increase needs to be considered however against the duration of children subject to a plan. This has significantly decreased to a point where only 2 children on 31.3.15 were subject to a plan for more than 3 years. These 2 children are in proceedings and due to come of plans shortly. Also on 31.3.15, no children were subject to a plan for between 2-3 years. The majority of plans are new or between 1-2 years. The department continue to review all plans between 1-2 years to ensure that the plan is addressing the risk and meeting the needs of the child or step the plan up or down as appropriate.

The majority of children subject to plans remain in relation to neglect with very low rates of physical and sexually abuse. The department continue to review categories of abuse to ensure that these are being effectively applied and that staff are able to identify, assess and name sexual abuse.

Children in Care

There were 277 looked after children in Thurrock as of 31.3.15 (291 in the last self-assessment) 70 per 10,000. If unaccompanied asylum seeking children excluded from the Children looked after count the number of CLA drops to 248 and approximately 63 per 10,000. Thurrock has historically had higher per 10,000 rates of children looked after than the national and regional average.

The threshold to care panel is being used to ensure that only those children who need to be looked after are and increase the number of children (and in particular teenagers) who can successfully be supported within their families.

Thurrock continues to purchase placements outside the area for unaccompanied Asylum Seeking Children in order to ensure good matching with their carers, and easier access to communities of origin, which helps to build bonding capital for children who have often been deeply traumatised.

We always attempt to arrange for children to be cared for by their own relatives. We have strong systems to assess the suitability of family members and our SGO figures show that we have successfully accomplished exits from care by supporting relative carers' applications.

The majority of LAC children are fostered, only 10% of children are in residential placements. The capacity of the in-house fostering service continues to be stretched particularly in relation to placements for adolescents, large sibling groups and children with complex needs. Thurrock has a Specialist Therapeutic Fostering Team accommodating young people who would otherwise require residential or even hospital settings. These carers receive multi-disciplinary support and their training is accredited by the University of Essex. All carer training is led by a specialist post holder who works exclusively on this.

Over 70% of Thurrock's looked after children are placed within 20 miles of Thurrock.

Only minimal numbers of children are placed at home and we work to ensure that this is only very temporary and a route to leaving the care system.

The placement stability for 3+ moves is good and below known national averages – Thurrock %3 + moves percentage rate for 2014/15 is 9 for 31.3.15. The 3+ percentage rate for 2012 was 9, 2013 was 14 and 2014 was 8.

Educational outcomes for children in care are a priority and concern remains that at GCSE only 9% of children received 5 GCSE – A*-C including maths and English. This compares favourably to the England average of 12%.

Detailed tracking and intervention is in place within the virtual school to track the educational outcomes of children looked after at every stage and increase attainment across the key stages.

86% of CLA (903 cohort) are recorded as having an up to date review health assessment, this is the same as 2013/14. Dental Assessments and Developmental check completed have both increased to above 90%.

Adoption and permanency

The average duration for care proceedings during Q3 reached 21 weeks and overall for 2014/15 we have achieved an average of 28 weeks. This is a significant reduction from previous years where the average has been up to 40 weeks and over.

We proactively advertise children for adoption; have sought to make links through the consortium and made use of 'Exchange Days'. Given the disbandment of the consortium we are seeking to strengthen our links with the voluntary sector.

We have not had cause to use 'Activity Days' as of yet but will do so in keeping with the needs of the child / children.

A group for adopted teenagers (children who were adopted and are now teenagers) is being run by the Adoption Team and is aiding to support young people at a point that many families can experience increased stress and strains (particular to having formed a family through adoption).

Care leavers

Care Leavers are consulted during the pathway planning process. Discussion is encouraged with the young person about how to keep themselves safe and what support is available if they have any concerns about their own safety or their peers. It is recognised that young people are not moving to a stage of independence but a new stage of inter-dependence. Young people are made aware of the risks associated with such factors such as drugs, alcohol and sexual health during the on-going discussion about their health and safety. If there are issues with any aspect of their accommodation or health or safety, plans are put in place to manage the risks.

For young people preparing to leave care and care leavers (eligible, relevant and former relevant) **some of our areas of strength are:**

- Where appropriate young people are encouraged and supported in delaying their move to independent accommodation under 'Staying Put' in order to better manage their preparation, address risk factors and maintain positive attachments.
- Advocacy and support is available to young people via Open Door to raise any complaints and ensure that their voice is heard within the planning and management of any risk.
- Effective working relationships are in place between the YOS, CRC & Probation Service to ensure effective transitions for young people and care leavers known to the service.

- Comprehensive sexual health advice is able through universal services and targeted advice is available through the Children Looked Nurse and Sexual Health Advisor.
- Partnership working with Thurrock Housing and avoidance of tenancy disruption.
- Life-long Planning (transitions) for children with disabilities.
- Achievement Awards for CLA & Care Leavers