

Royal Borough of Kingston upon Thames

Review of the Children and Young People's Plan 2006-2007



June 2007

REVIEW OF THE CHILDREN AND YOUNG PEOPLE'S PLAN 2006-2007

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ROYAL BOROUGH OF KINGSTON UPON THAMES

APA 2007

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Introduction

Following the 2006 JAR outcome of outstanding overall for Children's Services in Kingston, the Council and its partners in the Children and Young People's Trust have continued to improve outcomes and service provision.

The priorities in the Children and Young People's Plan remain key priorities in the Council's Policy programme to enhance the life of the community and promote community cohesion. They are central to our efforts to improve outcomes for all children and young people, to tackle inequalities and achievement gaps and to support vulnerable young people, children and their families.

The 2006 JAR grades reflect high performance, with very good corporate, health, social care and educational provision and strong partnership to improve community cohesion and reduce youth offending. Outcomes for children and young people overall range from good to outstanding and there is no complacency about improving the life chances of all children and young people especially those that are vulnerable and who under-achieve. Kingston is a place of starkly contrasting advantage and disadvantage, and some groups are more vulnerable and marginalised as a result. The Council actively works towards ensuring all services are delivered in a fair and equitable way to the whole community, irrespective of ethnicity, disability, age, gender, sexual orientation, religion and beliefs.

Corporate strategic direction and partnerships are strengths, and there is good engagement by all agencies including the voluntary sector. The Children and Young People's Trust Board provides strong governance and strategic direction. There continues to be much good will and commitment among all the partners, especially from schools. We continue to make good progress towards more targeted effort, more effective early intervention and prevention and closer integration of services. There is good progress in achieving the goals and targets in the Children and Young People's Plan. The Plan has been revised in 2007 with the full participation and engagement of partners and stakeholders, including young people.

The Children's Trust has many excellent services and is highly ambitious for the local community. It is responsive and listens well to the views and needs of parents, carers, children and young people. There is a very good young people's participation strategy and in the past year there has been good progress in improving children and young people's ability to make a positive contribution.

Health outcomes are good to very good. General health statistics are above the national average and infant mortality rates, unemployment, the percentage of children living in temporary accommodation and child casualties in road accidents continue to be among the lowest in London. There are significant improvements in a number of outcomes, notably breast-feeding initiation rates and immunisation rates. Teenage conceptions are significantly lower than the national average and continue to reduce in line with agreed targets.

The Authority continues to perform very well in supporting children at risk and outcomes are outstanding for 'Staying Safe'. Currently there are 749 children in need who receive social care services, 105 children in public care (84 in full time care, 12 UASC, 21 receiving respite) and 40 children on the child protection register. These are well below the national average. Local Safeguarding arrangements are very good and almost all children live and learn in safe

environments. Kingston has a very effective Local Safeguarding Children's Board. Most children feel safe in the community and there is a low rate of road traffic accidents. Those most at risk of significant harm are well protected by good inter-agency collaboration. The proportion of children and young people on the child protection register is well below the national average and the number of re-registrations has been significantly reduced. Kingston is one of London's safest boroughs and the crime rate has decreased by 13.4% between 2005-6 and 2006-7 compared to an average London decrease of 6.4%.

Outcomes for 'Enjoy and Achieve' continue to be outstanding with good improvement rates in 2006. Educational standards are very high and continue to improve, being well above national averages and those of similar authorities in all key stages. In 2006 the progress made by young people between the ages of 11 and 16 was amongst the best in the country. The attainment of pupils from BME communities is good overall and above average nationally. Attendance in schools is excellent. There are mostly good or outstanding schools and the numbers judged to be in these two categories by Ofsted has increased during the past year.

The outcomes for Making a Positive Contribution are outstanding. There is very good participation by children and young people who make a very positive contribution to the local community. Levels of anti-social behaviour are reducing as a result of effective multi-agency projects. Re-offending rates are below average and high numbers of young people who offend participate in education, employment or training.

Outcomes for Achieving Economic Well Being continue to be outstanding. Kingston has one of the highest staying on rates in the country and conversely a very low proportion of 16-19 year olds not in education, employment or training. A high proportion of young people, including those from vulnerable groups, remain in full-time education at age 16. By the age of 19 the proportion of young people achieving a level 2 or a level 3 qualification is high and significantly above the local LSC and national averages. Children looked after are well supported to move into adult life with clear pathways to continuing education and training. Disabled young people and those with learning difficulties are also well supported with transition plans, work experience programmes and appropriate education and training placements, to move towards more independent adult life.

There is rigorous performance management and systematic monitoring of the progress of key targets and action plans in the Children and Young People's Plan. Analysis of all the key indicators and benchmarks shows sustained improvement over the past year for most areas of performance. Good progress is being achieved in implementing the objectives in the Plan. The Local Authority is rigorous in analysing and monitoring available data, and in using good local intelligence, in order to target effort to the right issues in the most effective way. Our priorities are well judged and this review of the Children's Plan has led to a re-focusing of the plan on our most challenging issues for improvement. These are:

To halt the rise in child obesity and improve nutrition and breast feeding; ensure all children and young people have at least 2 hours physical activity a week; continue the reduction in teenage conceptions; improve services for children with disabilities and long term health conditions including provision for therapies.

To ensure more effective earlier intervention strategies to reduce re-referrals to the children's Safeguarding Service; improve early intervention, prevention and family support available through children's centres, extended schools and school clusters; and continue to improve provision and outcomes for unaccompanied asylum seekers and LAC.

To close attainment gaps and ensure improvement for under-achieving groups of pupils, boys, BME groups and lower attaining 14-16 year olds and the identified schools performing below floor targets; continue to develop alternative education programmes and intervention strategies for vulnerable pupils; continue to improve the achievement, progress and attendance of looked after children; continue to improve the provision for 14-16 vocational education and the

achievement of level 2 qualifications; improve transition, improve the quality of teaching and learning through more effective ICT provision; and increase provision of safe play areas for children and a wider range of recreation activities in schools and other community settings.

To ensure the Participation Strategy improves engagement by vulnerable groups of children and young people, improves access for disabled children and LAC to out of school activities and to reduce re-offending and the number of first time offenders in the youth justice system.

To continue to expand 14-19 education and training; increasing vocational provision, and the achievement of level 2 qualifications post 16; and continue to reduce the number of 16-19 year olds not in education, employment or training; improve the availability of affordable childcare.

Recommendations in the JAR Inspection Report

The JAR report in 2006 acknowledged that Kingston upon Thames has sustained a trend of improvement and high standards and that the good and outstanding outcomes achieved reflect the high quality of the services provided by the Council and its partners. The judgement was that the overall effectiveness of the Council's children's services is outstanding.

The Report summary concluded:

All services for children and young people in the partnership are good or excellent and have had a very substantial impact on improving outcomes for almost all children and young people. Education services are outstanding. Very good progress has been made in strengthening the quality of universal services and developing and implementing preventative services to reduce levels of vulnerability. The council has a strong track record of focus on, and resolution of, underperformance. Consequently, performance is well above the national average for most aspects of education and children's social care and continues to improve. The management of services for children and young people is good. Current management of resources and value for money at the council are good. The overall capacity of the council and its partners to build on these achievements further is good.

The partnership has good ambitions for children and young people, comprehensively set out in its Children and Young People's Plan (CYPP) and based on a sound needs assessment. Priorities set by the partnership to improve outcomes are well defined, and resources to deliver these during the current year have been identified by all key partners with the exception of Health. Strong leadership of the change agenda is provided by high calibre staff and elected members. The council has very strong relationships with all key partners, who are well involved both in the Children and Young People's Trust Board and the Children and Young People's Partnership and its sub-groups. Children and young people are increasingly engaged in strategic planning. The children and young people's participation strategy is ambitious in terms of its scope and aims and good progress is being made to embed it in practice. Performance management across the partnership is good.

These judgements remain true of the effectiveness and the quality of outcomes achieved by the Children's Services in Kingston.

The Children's Trust and its partnership work in Kingston continues to be well focused on maintaining or improving current high standards of performance throughout the change agenda. New, innovative, preventative services are developing very well. In a climate of financial constraint and with a requirement to make greater efficiencies and service reductions, the Children's Trust has continued on track to make improvements, increase performance and re-design services. Partnership remains a key strength in implementing our vision and achieving our shared goals. The overall capacity of the council and its partners to make further improvements is very good.

The JAR identified the following recommendations for action:

- in relation to domestic violence, secure improvements in social care practice and the consistent implementation of the *Working Together to Safeguard Children 2006* national guidelines by some community health staff to ensure that children who are affected by domestic violence are referred in line with these guidelines
- implement a coordinated joint commissioning function as soon as Health budgets for children's services have been identified
- ensure that all services and partners who work with children and young people implement the participation strategy
- establish clear structures to enable feedback from the Independent Reviewing Officer service to systematically improve practice
- review and improve access to all services for children and young people who are unaccompanied asylum seekers; and ensure all looked after children are aware of opportunities to make a positive contribution and understand the advocacy and complaints service.
- review the commissioning arrangements to improve access for children and young people with social and communication learning difficulties and/or disabilities to therapy and equipment services.

Progress on the JAR Recommendations

Overall there has been good progress in addressing the key recommendations in the JAR Report.

Procedures for Domestic Violence

Good improvements have been made in ensuring greater consistency of practice across social care and health in referring cases where children are affected by domestic violence. The LSCB sub group on domestic violence has undertaken file audits on domestic violence cases to ensure safe and consistent practice. This is now routine procedure by senior social care staff. New local procedures on domestic violence have been established and disseminated effectively to partner agencies. An audit of all social care and health staff has been undertaken in relation to domestic violence training and a training plan has now covered all these staff. The revised training strategy provides three levels of training relating to awareness of domestic violence, prevention and safeguarding. This is overseen by the Domestic Violence Forum. All social care and health visiting, midwifery and school nursing staff have received DV training and we have set a target to train 90% of the entire children's workforce by March 2008. The uptake of training will be reviewed on a quarterly basis by the LSCB Training Sub Group and Domestic Violence Forum.

Joint Commissioning

During the past year the PCT has confirmed its budget for children's services as part of the resource allocation for the Children and Young People's Plan. There is a commitment to establish new joint commissioning arrangements for children's community health services and have new integrated management arrangements in place for the provider services by April 2008. There is also partnership agreement about the pooled funding basis for the new service for disabled children. To further improve the joint planning of services the Authority is taking part in the DfES pilot Children's Services mapping exercise, and is linking this with the Children's

Health Services mapping undertaken by the PCT last year. This represents considerable progress for joint working and strategic commissioning during the past year. The Trust is currently considering an appropriate model for establishing a Joint Commissioning function to replace the virtual team that has existed to date. We recognise that a mature trust would have agreed pooled budgets across a range of activity and this remains our intention.

Participation Strategy

Very good progress has been made in embedding the Participation Strategy across all aspects of the work of partners in the Children's Trust. An increasing number of issues raised by children and young people have influenced service delivery. Good progress has been made over the year with young people's representation on, and active participation in, strategic groups such as the Children and Young People's Partnership, the Police Consultative Group and the Connexions Shadow Board.

Young people manage and allocate the Local Authority's Youth Opportunity and Youth Capital funds and have directly facilitated improvements in positive activities for young people, mobile youth provision, new sports facilities, and additional clubs and sports activities for disabled young people. As a result during the past year an increased number of young people have had the opportunity to become more involved in decision making. Improved links between school councils and the Kingston Youth Council have ensured wider involvement by young people across the borough.

Children and young people who are looked after by the Local Authority are also well supported to make a positive contribution and there has been very good progress in increasing the number of disabled children and young people who feel that their views are taken into account when developing services. This is an area of strength.

Independent Review and Complaints

Significant steps have been taken to improve the work of the Independent Reviewing Officer. Further to a contract tendering process, there are now new arrangements for the provision of IRO services. These include more effective working links with the social care teams that enable practice development. All the issues raised through the independent review process are currently monitored through a quarterly IRO and Looked After Service Liaison Meeting. The Directorate Head of Service attends this meeting to ensure the required developments are implemented. In addition, an agreed fast track to alert managers regarding practice concerns or issues means that IROs can contact the Strategic Manager for Looked After Services directly. Quarterly meetings and the new procedures are now well established and this has led to significant improvement in this aspect of our work. All matters of concern raised with the Strategic Manager have been acted upon and a Listening to Children Joint IRO/Social Care workshop is planned for the early autumn to embed the arrangements further.

Services for Unaccompanied Asylum Seekers

The Local Authority has reviewed and improved access to all services for children and young people who are unaccompanied asylum seekers. New service management arrangements and their integration into the Looked After Service have meant greater consistency in practice and support for this group of young people, in line with the existing good provision for other looked after children. Representations made by unaccompanied asylum seekers living in unsuitable accommodation have been acted upon. Since October 2006, 12 young people have moved from hostel style living arrangements into independent living or to small community housing with floating support. The young people have been fully consulted during this process. The quality of this new service provision is much improved. All unaccompanied asylum seekers who have bank accounts now receive weekly maintenance payments via BACS and, where entitled, all unaccompanied asylum seekers are supported to move to benefit payments within two weeks of entitlement. In the last 6 month period four complaints from unaccompanied asylum seekers

have been received and resolved within agreed timescales. Access to suitable accommodation and financial support for unaccompanied asylum seekers is now much improved.

Good progress has also been made in ensuring all looked after children are aware of opportunities to make a positive contribution and understand the advocacy and complaints service. The complaints and representation material has been revised by the complaints Manager, LAC Participation Officer and representative young people. The new complaints material includes the facility to make a complaint or representation by mobile phone text message, and receive an initial response by text. An email drop box is being implemented to enable young people to make representations online via the 'Young Livin' Website. The appointment of a LAC Participation Officer has ensured improved access to the complaints process, consultation and participation events for looked after children and unaccompanied asylum seekers.

Access for Disabled Children

Steady progress is being made to improve access for children and young people with social and communication learning difficulties and/or disabilities to therapy and equipment services. While there is improved provision and access to speech and language support in schools, waiting times for access to speech and language therapy clinics still require improvement, although an increase in clinic staff and improved throughput of initial referrals has improved the situation. The agreed strategy to stop the waiting list approach for assessment of communication difficulties will be in place by September 2007. This has involved the development of a new multi-agency assessment process and greater prioritisation of children's needs, in order to facilitate better access to support services. The overall position has improved and waiting times are down to 30 months for a diagnosis of ASD. New procedures will ensure a significant reduction in waiting times for new referrals.

A new post of Autism Service Co-ordinator is leading on implementing a co-ordinated early support ASD pathway. Mapping of health equipment pathways and a review of the equipment contract are underway. The integration of resources for clinical, therapeutic and nursing care for disabled children, currently provided at the Maple Centre at Kingston Hospital, into the new Disabled Children's Service is on track for completion by autumn 2007. The commissioning of this new service, with single assessment and referral pathways, will do much to further improve access to services for disabled children and their families. Parents have been closely involved in this development and are pleased with much of the progress that has been achieved so far.

Improvements in the Management of Services for Children and Young People

The Local Authority and its partners in the Children and Young People's Trust continue to be highly ambitious for continuous improvement and better outcomes. The Trust Board and the Children and Young People's Partnership have improved their joint working and there is more effective monitoring of improvement and shared decision making to further service developments. During the past year there has been greater transparency and alignment of resources and agreement about developing a joint asset strategy.

There continues to be very strong corporate and community leadership and we maintain our track record in consulting well, responding to needs and using resources effectively to provide high quality services and sustain improvements. In spite of a climate of budget reductions across the Council and its partners in the NHS, we have sustained high levels of performance and achieved improvements through maintaining focus on key priorities and efficient integration and re-design of services.

There are good procedures in place to monitor and evaluate the targets and actions in the Children and Young People's Plan, supported by robust systems of performance management and regular analysis of key indicators. These arrangements have improved significantly during the past year. The Council has very robust performance monitoring of all top level indicators and sets out clear actions for improvement in its Performance Plan. The rate of annual performance improvement has increased.

We continue to consult well and have improved the participation of children, young people, parents and carers in the development of our services. A significant amount of effort has been devoted to developing our early intervention and preventative services, in order to narrow achievement gaps and tackle inequalities. Good progress has been made in re-organising services for delivery at the front line through school clusters, children's centres and extended services to safeguard and support vulnerable children and families more effectively; and to improve health outcomes for disabled children and other vulnerable groups. Priority is being given to prevention and early intervention, and to strengthening universal services so that risk is minimised and more can be achieved for children and young people in their own homes, local schools and other community settings. Our plans to devolve more resources, decision making and service delivery to clusters of schools providing extended services are highly ambitious. Early signs are that these developments are becoming highly effective.

Strategies to reduce the numbers of children with special educational needs, looked after children, young offenders, teenage parents, and young people not in education, employment or training are working as a result of effective partnerships, multi-agency working and robust performance management.

During the past year there has been good development and innovation in new services. These include CAMHS tier 2, the ASKK preventative service, School Cluster Services, the Family Liaison Service, the YISP and Integrated Youth Support Services. The LCSB (Local Children's Safeguarding Board) has become very well established. All the reports from GOL, the National Strategies and other national field forces report very good progress in taking forward service changes and developments, and in achieving improved outcomes and provision. Our workforce development strategy and plans have been used as a model for other local authorities by the TDA. Kingston continues to take the leading role in the South West London Healthy Schools programme and the South West London School Effectiveness Partnership. Kingston is recognised as a trusted partner by the DfES to deliver well on new initiatives and to support work in other LAs. The Local Authority has good experience of multi-agency working and evidence of its effectiveness. Overall management of the change process is going well and there is excellent capacity to sustain high performance and continuous improvement.

All the services that support children and young people are good and many are outstanding. There is a highly effective workforce and expert staff who contribute significantly to the quality of our services and the improvements we achieve.

There are improved strategies in place to recruit and train "hard to recruit staff", for example, social workers, family support workers, headteachers and teachers. These include the involvement of young people (known as the 'Recruits Crew') in the selection of staff and training of foster carers. The staff survey identifies high levels of morale and job satisfaction. There is good professional development and investment in improving skills and training. Improved qualification and skill levels have been achieved through increased access to NVQ's for example residential care staff, family support workers, youth workers and foster carers. All social care staff working with children in need are suitably qualified, and all social care managers have management qualifications. There is a successful enhanced training and post qualification programme for social workers to address projected recruitment issues for the future. The staff survey identifies high levels of morale and job satisfaction.

The Trust has undertaken a mapping exercise of the whole of the local Children's Services workforce, including the private and voluntary sector, to help inform priorities and future targeting

to support staff in accessing appropriate qualifications. The past year has seen a focus on supporting the voluntary, community and private sector workforce to develop staff induction arrangements and build skill capacity on procurement and commissioning.

Progress has been made in supporting new workforce roles emerging as part of the Borough's service developments, for example Children's Centre Managers and Extended Services Staff. A training plan has been developed for CAF/Information Sharing and Lead Professional, which will be delivered across all statutory and voluntary agencies, to facilitate effective multi-agency working in Early Intervention and the Preventative Strategy. There has been a successful partnership with local schools in enabling school support staff to access qualifications to support improved teaching, learning and extended services, including specialist services for children with complex needs. Projects are also in place to address senior management succession planning in schools. The successful multi-agency workforce development group has facilitated much of the above progress – and has ambitious targets to continue this work over the coming years. This work will remain a priority to ensure that there is increasing equality of access to training and development across the children's workforce.

We have made good progress in the use of ICT to support service delivery and ensure that there are well-defined performance management, information sharing and reporting systems in place. A number of new systems that contribute to the Information Sharing Agenda are either currently being or have recently been implemented. These are being well used to further improve practice and performance management. As a result there is integrated data collection and management across all the key indicators in the Children and Young People's Plan. A recent initiative now enables staff to remotely access all relevant information from either health or local authority systems efficiently, and the use of mobile technology by social workers to further improve efficient practice is being piloted. All key service developments are also being supported by the introduction of appropriate integrated ICT systems e.g. integrated service for disabled children, Children's Centres, Youth Support Services. The Authority has procured a Managed Learning Environment on behalf of all schools and this is being implemented in summer 2007 and will immediately be accessible by 14,000 pupils and all schools staff to contribute towards greater flexibility and personalisation of learning opportunities.

In the context of a relatively low spending Council, priority is given to revenue and capital funding for education and children's social care. In the past year we have managed resources effectively to support service developments, invest in early intervention and 'invest to save' to reduce future growth requirements in external placements. Inspection judgements regularly describe Kingston as providing good value for money. The LA has continued to deliver service developments by continually identifying efficient and innovative ways of working, often in partnership arrangements. We have a mixed economy of service delivery based on achieving value for money; many services are commissioned from the very active local community and voluntary sector.

During the past year the PCT has confirmed its budget for children's services as part of the resource allocation for the Children and Young People's Plan. There is a commitment to establish new joint commissioning arrangements for children's health services and have new integrated management arrangements in place for the provider services by April 2008. There is also partnership agreement about the funding basis for the new service for disabled children. This represents considerable progress for joint working and commissioning during the past year. We recognise that a mature trust would have agreed pooled budgets across a range of activity and this remains our intention.

Review of Priorities in the Children and Young People's Plan

Overall the progress in achieving the targets and objectives in the Plan during 2006-2007 has been very good. Approximately 80% of the targets have been met or exceeded and in very few areas is there unsatisfactory progress or poor performance.

The priorities in the Children and Young People's Plan are as follows:

Being Healthy

- To ensure children and young people are healthy and have healthy lifestyles
- To ensure children and young people with specific needs receive targeted support to be healthy
- To ensure there is well coordinated support to improve the healthy development and well being of children aged 0 – 6

Staying Safe

- To ensure children and young people are safe, have stability and are cared for
- To ensure looked after children stay safe and have security and stability

Enjoying and Achieving

- To ensure children make good progress between the ages of 0-5 and are well prepared for school
- To ensure children and young people attend and enjoy school
- To continue to improve educational standards in the foundation stage and at all key stages in line with agreed targets
- To improve the achievements of looked after children and other groups of children with specific needs
- To improve access for all children and young people to a range of play and recreational activities

Making a Positive Contribution

- To ensure children and young people engage in decision making, support the community and contribute to the development of services
- To ensure children and young people develop positive behaviour and are law abiding
- To support children and young people to manage change and challenges successfully

Achieving Economic Well Being

- To continue to increase the number of young people in further education, employment and training
- To ensure looked after children and other specific groups achieve economic well being

To ensure children live in decent homes free from low income

Being Healthy

Outcomes for children and young people's health are good or very good. The Local Authority's partnership with the PCT and other partners ensures a good impact on the health of children and young people. There is effective and well coordinated multi-agency work to promote healthy lifestyles. Infant mortality is below average and there are fewer than average numbers of expectant mothers who smoke. The percentage of mothers initiating breast feeding is high. Immunisation rates are mostly above average and have improved. There is good dental health among children and young people in Kingston. Outcomes for teenage pregnancy are improving. The majority of children and young people are healthy and have access to a wide range of recreational and other activities, and specialist services, to improve their physical and mental health. The Healthy Schools initiative is well established and 72% of schools have achieved accreditation, while 88% are working towards the new standard. There is a well conceived childhood obesity strategy, and a secure baseline established for the level of childhood obesity. This is very well integrated into the Healthy Schools and School Sports Programmes in all schools. Ofsted inspection judgements are very positive for schools enabling pupils to be healthy, with a strong focus on nutrition, healthy eating and physical activity. There is joint commissioning and good coordination of services for speech and language, CAMHS, disabled children, LAC, Children's Centres, teenage pregnancy, with health visitor, midwifery and nursing inputs into schools, early years settings, specialist services and multi-agency teams. However the Local Authority, the Hospital Trust and the PCT recognise the need to continue to improve health assessments, waiting times, referral pathways and specialist treatment for disabled children.

Key improvements where we have achieved significant progress in the Children and Young People's Plan in 2006-2007 include the following: healthy schools accreditation, access to children's health services, participation in 2 hours physical activity, reduced teenage conceptions, access to substance misuse services, improved mental health provision, and reductions in the percentage of women smoking during pregnancy and time spent by families with children in temporary accommodation.

To ensure children and young people are healthy and have healthy lifestyles

BH 1.1 There has been excellent progress with the **Healthy Schools programme**. The targets in the plan have been met or exceeded, and the percentage (88%) of schools engaged or accredited to the new standard is the second highest in London. The training programme to support all schools in reaching the new standard has exceeded expectations and we are beyond the target set for the end of the year. School inspections over this period indicate that outcomes for pupils in the Healthy Schools aspect of Personal Development and Well-Being range from good to outstanding. In this given period there were 15 inspections, 8 of which were evaluated as outstanding. School self-evaluation across all our schools and verified through the Local Authority Joint Annual Review process reflect the inspection outcomes.

BH 1.2 Progress in **the strategy to reduce child obesity** has been satisfactory. In 2006 the percentage (90%) of children with height and weight recorded who were obese overall was 11.03%. Due to the fact that less than half of PCTs nationally covered the required 80% of children in their baseline data, there is no reliable comparison. PCTs have been asked to re-establish baselines in summer 2007. However there is good progress in improving children's participation in physical activity; the provision of Community nutrition projects to improve healthy eating; and in implementing a family based programme, MEND (Mind, Exercise, Nutrition, Do It), targeting overweight children and their families in the more deprived parts of the borough. The first cohort completed the MEND programme in April 2007, (with 80% of participants completing the whole programme) and preliminary results of the post programme measurement are encouraging.

BH 1.3 **Access to children's health services** has improved and is good. Targets for those seen at A&E (98% of children seen within 4 hours) and GP access targets have been met and

effective measures have been put in place to reduce children's admissions to hospital by triaging A&E attendances.

BH 1.4 There is good progress in improving the participation of children and young people in at least **2 hours physical education and school sport** a week. Performance overall is predicted to meet or exceed the national target (80%) in this years' outturn. This represents a fourth consecutive year of good progress in actual numbers of children and young people within the School Sport Partnership meeting the target. Provision has been in line with the national average at key stages 2 and 3 but below average in key stage 1 and at key stage 4. Significant improvements are expected in these areas. All schools participate well in the School Sports Partnership and there is good and appropriate access to sport and physical activities for children and young people within schools and the wider community. Long term strategies have begun to bear fruit including significant increases in children and young people participating in inter-school sport and leadership and sports volunteering opportunities. More teachers are also accessing quality professional development in this area.

BH 1.5 The teenage conception rate continues to reduce in line with agreed targets. The latest figures show continuous improvement with the lowest ever rolling quarterly figure for teenage conceptions at 21.1. Kingston's conception rate remains below the England rate of 41.1 in 2005 and shows a greater reduction than the national reduction of 11.8%. In 2005 the conception rate shows a reduction of 13.2% from the 1998 baseline. The 2005 outturn figure was 26.8, representing 3 additional conceptions over the planned target. Small numbers of young people continue to impact significantly on percentage changes. There is a range of good quality, easily known and accessible contraception and sexual health services which are contributing to this reduction in conception rates.

GOL has assessed Kingston to be on target to achieve the local 10 year target to reduce the under 18 conception rate. Therefore no amendments to milestones are required and we remain on track. The Teenage Pregnancy self assessment was completed in March 2007 indicating that there was scope for improvement in targeting of information, advice and guidance in specific neighbourhoods with higher rates. This is being addressed through good use of the new Youth Service mobile facility, locating stopping points according to intelligence derived from ward level data. The assessment also indicated the need to promote personal ambition and aspiration as an effective method of reducing conceptions. The provision of high quality SRE will remain a top priority.

Hits on the 'Young Livin' website in respect of teenage pregnancy have risen by an average of 32.7% in the first quarter of 2007, whilst during the same period enquiries in respect of sexual health in general have risen by 15.7%.

The Youth Service 'Sharxx' project benefited in January 2007 from the delivery of the new mobile facility (described above) funded by the Youth Capital Fund. This enables improved levels of access to information, advice and condom distribution for young people across the borough. In Kingston town neighbourhood, the first month of mobile operation has seen a 100% increase in requests for advice and information as compared with the previous static facility.

The multi-agency approach to improving the sexual health of young people in Kingston is co-ordinated by the Specialist Nurse for Young People's Sexual Health, who works in partnership with agencies such as the youth service, social services, the voluntary sector, teachers and foster carers. Vulnerable young people are targeted, such as those who are looked after, young offenders and young people out of school.

Nine young people were referred by social workers for one to one consultations. Social workers report that following these interventions, young people report less unprotected sex and more contraceptive use. 125 young people have been seen in small groups, including young offenders, looked after young people and those attending Pupil Referral Units. Sessions are well

evaluated. A new referral process for young people experiencing miscarriage or termination, to the Specialist Nurse for Young People, ensures contraceptive advice post-pregnancy.

BH 1.6 There is a good **sexual health strategy** and sexual health services and the provision of sex and relationship education are very good. Schools that achieve the new Healthy Schools standards have good SRE provision as part of the PSHE criteria which are assessed. However, the number of secondary schools (50%) with compliant SRE policies that have been reviewed in the last three years requires attention. Overall this work is above target, and 83% of all schools (93% for primary schools) have a compliant SRE policy.

BH 1.7 Performance in implementing the **strategy on substance misuse** has been very good. The specialist young people's substance misuse virtual team is now well established, and referrals over the first year of the service are being reviewed. The team comprises seven Tier 2 and 3 workers brought together from both voluntary and statutory sector providers. The numbers of young people receiving specialist treatment services are well above the target and the increase is above the national average. Improved access to specialist treatment for those with the highest need is expected to reduce long term harm and the level of demand on adult resources. A new DAAT (Drugs and Alcohol Action Team) co-ordinator and DAAT Joint Commissioner are in post to ensure the service links well to adult services. The team is also links to the tier 2 and tier 3 CAMH services.

The 2006/7 target was a baseline figure based on an analysis of the work of the ID Team, a multi disciplinary Substance Misuse Team. Its capacity to provide specialist services has been enhanced resulting in the significant growth in numbers. This is good performance which demonstrates improved screening arrangements and good assessment facilities. The ID Team currently delivers 100% return rates in respect of screenings and assessments completed on time for YOT cases. This is above the London average. No young people under 18 have been referred for Tier 4 inpatient services. There are clear targets and plans for preventive activity at Tier 2, and assessment and treatment activity at Tier 3.

All YOT referrals are screened for substance misuse, exceeding the local authority 'family' and London average scores. There are excellent arrangements in place to achieve this target, with the YOT benefiting from the team based Substance Misuse worker, who is part of the 'ID team'. Where relevant, smoking cessation is offered, and 2 young people have successfully stopped smoking over the past year.

For young offenders, where a mental health concern is linked to a substance misuse issue, the CAMHS Tier 3 nurse in the Substance Misuse Team is able to undertake a joint assessment to determine the extent of any dual diagnosis.

Smoking cessation services include provision for people under 18. In 2004/5 there were 7 quitters out of 18 who took up the service, and in 2005/6 12 quitters out of 32 who took up the service. So far in 2006/7 four young people have quit out of 9 who took up the service but data collection is not yet complete. All school nurses and nursery nurses have recently been trained in smoking cessation and are already beginning to get young people asking for help to stop. All youth workers and the young people's drugs and alcohol team will be trained to be advisors in summer 2007.

BH 1.8 The **health visiting service** and other early intervention services are making a very good contribution to provision in children's centres. Allocations of health visitor time and midwifery input have been agreed as part of the programme. Maternity services are good and there is good impact on improving breast-feeding and childhood immunisation rates, which are above average. The school nursing service has not been increased but continues to provide a very good service in meeting the needs of children and young people. Their work is increasingly focused on priorities in the Children and Young People's Plan to improve healthy eating and lifestyles, sexual health and school-based health services. The children's specialist nursing service continues to provide very good support and continuity of care to disabled children and

children with long-term health problems and life-limiting conditions. As a result of the integration of the disabled children's services, specialist nursing is contributing more effectively to supporting children at home and their carers.

BH 1.9 The National Service Framework for Children, Young People and Maternity Services continues to inform developments in improving health outcomes. Progress is satisfactory overall in ensuring local service redesign is informed by the NSF. Maternity services are good and there is good impact on improving breast-feeding and childhood immunisation rates, which are above average. Planning and commissioning arrangements compare well with the national picture and the recent child health mapping shows that the numbers of staff working in universal services, such as health visitor and school health services, are higher than the national average and vacancy rates are considerably lower.

To ensure children and young people with specific needs receive targeted support to be healthy

BH 2.1 Children and young people's mental health is well promoted. Good progress has been made towards achieving a comprehensive **CAMHS service**. Overall, the CAMHS Service has delivered a 10% increase in services and has developed a strategy to deliver the anticipated 10% per annum increase over the next two years. An additional consultant post has been appointed.

There is appropriate access to CAMHS for particular groups of vulnerable young people, such as young offenders, children in public care and disabled children. CAMHS support to disabled children and young people has improved over the last year with 98 children and young people supported either directly or through consultation provided to front line staff. There have been no re-referrals and the outcomes for children and young people and families, based on targets agreed with them, have been positive with overall improvements in behaviour management. Of the initial interventions 50% have resulted in ongoing work with a young person and 50% resolved the presenting issues. Ten young people have been referred on for more intense support through Tier 3. Five young people have been specifically identified for therapeutic interventions provided in placement. All children and young people have been seen by Tier 3 Services within 11 weeks.

FASS, (Family Advice and Support Service) the new tier 2 service, is expanding local provision and there is evidence of effective support to front line staff to improve provision to children and young people and more appropriate referrals to specialist CAMHS support. The FASS service has provided 233 consultation or interventions to professionals, families and professionals. In support of these consultations, 77 direct packages of support have been provided to children, young people and their families. Evaluation of this service is all positive.

Improved access to CAMHS for Looked After Children and UASC has been established through three routes. The CAMHS Therapist based in the multidisciplinary Looked After and Leaving Care Team, The Family and Adolescent Support Service (FASS) and by direct referral to specialist Tier 3 services. Of the current LAC cohort 20 young people have received support from the LAC CAMHS Therapist and we are beginning to see improvements in placement stability.

Kingston YOT provides a good service to young people who meet the criteria for a mental health assessment and intervention. There are good levels of funding in place, enabling the YOT to have access to the full range of mental health services. CAMHS provided to the YOT is well integrated with other local mental health services. Services provided include detailed, structured assessments, effective short term interventions and timely referrals to specialist forensic assessment services. The YOT achieved 100% of access targets, and 73% of the target in 2006/7. Of the 4 cases not meeting the timeframes, one required a specialist assessment only

available outside Kingston and two had already been referred to CAMHS via their own GP so were already on the CAMHS waiting list.

BH 2.2 Health indicators for looked after children are good, with 92.2% receiving an annual health assessment in the last 12 months which is an improvement on last year (88%). Looked after children and their carers have good access to CAMHS, including timely access to specialist services.

Where appropriate, UASC (unaccompanied asylum seeking children) are referred to more specialist CAMHS. Improved liaison with the local Adult Mental Health services has ensured a closer working relationship with CMHT professionals. Case discussion has resulted in three young people who are UASC and care leavers receiving an appropriate mental health intervention. Working in conjunction with the Looked After and Leaving Care Service, the LAC nurse undertakes an initial health screening of all UASC or those for whom there are emerging concerns. The team has access to FASS and the LAC Therapist and where indicated referrals to more specialist Tier 3 services can be made.

Health Assessments for looked after children are all up to date (as of May 2007). Good links have been established with Kingston Hospital and there are regular meetings to distribute health assessments to the most appropriate health professional, either a Doctor or Nurse.

Access to sexual health advice has much improved. Currently all young people in care can access free, confidential advice and contraception from the LAC nurse. This has enabled a number of young people to receive a service that have previously failed to engage with sexual health services already provided such as young people's clinics. This has been successful. Young people are accepting a sexual health service in a location that is acceptable to them, in health centres, community homes, placements, or youth centres.

The result of developing a shared data base with the PCT has enabled identification of gaps in any LAC's immunisations. Plans are well advanced to ensure all immunisations are up to date. Having a LAC Nurse who is able to immunise children in the community and liaise regarding the data base has been instrumental in moving this forward. Local links have been growing to allow professional support and guidance for the LAC nurse.

BH 2.3 There has been satisfactory progress in addressing **the health needs of disabled children and young people** and those with learning difficulties. Parents receive good advice and information. In the past year the specialist Information and Advice Service, provided by a local voluntary organisation, EnhanceAble, has been expanded to include the Parent Partnership Service. There is now a 52 week service which ensures a prompt and co-ordinated service, and all families referred receive a response within 24 hours. The integrated Service for Disabled Children is now operating within a jointly funded management structure with a pooled budget. The new manager has been in post since February 2007 and good progress is being made in meeting the targets in the Strategic Plan. This is good progress and will ensure clear accountability for delivering performance. A new post of Autism Service Co-ordinator is leading on implementing a co-ordinated early support ASD pathway. The integrated specialist home and community based nursing service will be in operation from autumn 2007 to meet the health needs of children and young people up to 19 years and will ensure better co-ordinated family support. Accommodation options for the short and long term accommodation of the co-located service have identified potential sites and these are being pursued.

The integration of Warren Park, the local NCH Respite and Day Care Centre, into the service has been agreed with a new contract timescale and criteria to be formally agreed by NCH and RBK. This is good progress and will ensure clear accountability for delivering performance. Waiting times currently remain unsatisfactory, although some progress has been made to improve the situation. The current waiting list has increased to 51 children, compared to 48 at this time last year, of which 36 are RBK residents. Some additional paediatric locum support was made available to assess and prioritise needs, to triage the process and to consult with

parents on individual cases. As a result 30 children still need the full team assessments and it will take 30 months to clear the backlog. This is a reduction from 4 years at the time of the JAR. However progress has been slow but procedures put in place to manage new referrals will ensure a more satisfactory response. With this new approach the waiting list will significantly reduce over the next 12 months. The integrated specialist home and community based nursing service will be in operation from autumn 2007 to meet the health needs of children and young people up to 19 years and will ensure better co-ordinated family support.

The Specialist Health Visitor has promoted the health of disabled children and young people through her direct work on issues of continence, obesity and behaviour management. Her advice has supported 60 children, young people and their families who previously would be referred to the specialist PACE clinic.

The Specialist Health Visitor also has co-led two parent support/advice groups during the year building on the single group provided the previous year. A total of 10 parent/carers attended the groups and they have reported improved relationships at home along with other positive outcomes such as a greater understanding and management of challenging behaviour. 50% of the parents/carers are fathers.

Disabled children and young people are well supported in their transition to adulthood. All of them have completed transition plans and the number not in Education, Employment or Training is low (3 of 135 equivalent to 2.2%)

BH 2.4 Access to therapies continues to be a priority. Provision for speech and language therapy, physiotherapy and occupational therapy all require further improvement, although there has been some improvement. The introduction of the Foundation stage screening tool 'Speech Link' across all schools with Reception classes has reduced inappropriate referrals for children aged 0 -5 attending school. Recruitment of Speech and Language Therapists and Assistants has increased capacity. Increases in direct therapy input to special schools has enabled 30 children to have communication profiles developed and provides increased therapist input to annual reviews and advice and support for parents. 35 School Action+ packages have been provided in 2006-7 and training has been provided to support these. Programmes such as SPLAT (Stay, Play, Learn all together) and EarlyBird have provided new and improved support for parents in the early years. ASD Nursery provision has been increased and greater clarity about roles and responsibilities for pupils with hearing impairment, including those with cochlear implants, has resulted in more efficient and cost-effective speech and language support. No new pupils were placed in out-borough Speech and Language provision by the Local Authority in 2006-07. During this period fewer children with speech and language difficulties have required a statutory assessment. However, while this represents good progress, overall clinic waiting times still require improvement at 3-5 months for 0-5 year olds, in spite of an increase in clinic staff and improved throughput of initial referrals.

Access times to occupational therapy has remained at 18 weeks, however, the waiting times have increased for physiotherapy from 12 weeks to 20 weeks, due to the consultant paediatrician no longer holding cases before they are allocated.

BH 2.5 Good progress has been made in increasing **access to childcare for disabled children**. An additional 13 disabled children have accessed childcare in the past year. Disabled children and young people benefit from a range of respite services, including befrienders, who support them in their local community (23), family support in the home (120) and respite care at Warren Park (30). An After School Group has been established at Dysart Special School which offers 8 places after school 5 days a week. The mapping and identification of gaps in childcare and leisure activities for disabled children, completed by June 2007, has enabled the Inclusion Development Coordinator to work with and consult professional partners such as Youth, Sports and Recreation and the Team for Disabled Children as well as childcare providers, parents and families. The Inclusion Audit shows that currently 84 disabled children are being cared for in PVI childcare settings, and another 71 have previously accessed childcare.

The Children's Information Service provides information on childcare settings, (including childminders), that are trained and competent in meeting the needs of disabled children. Support to all childcare settings in carrying out their responsibilities under the DDA and offering places to disabled children has significantly increased. The Inclusion Development Coordinator is visiting all group care settings offering tailored support and in-house training on the inclusion of disabled children into universal services. The Childcare Development Team provides an Inclusion Support Pack for each Group care setting, with a simplified version for Childminders, which includes information on Good Practice Models, risk-assessment and deciding when a child needs additional support worker, Policy and Procedure review, sources of further support and information, and a checklist for assessing their compliance with the DDA and readiness to care for disabled children.

BH 2.6 There has been good progress in meeting the target to **enter teams for young people with disabilities into the London Youth Games**. In 2005 we entered no teams. In 2006 we entered 3 teams with 23 participants (Football, Swimming and Athletics) and in 2007 it is planned to enter 4 teams (Football, Swimming, Athletics and Boccia). This increase is associated with a programme of new sports activities specifically targeted at young people with disabilities including taster sessions and a new Saturday morning club. Progress on setting benchmarks has been slower due to the delayed implementation across the 6 South London Boroughs of the national Benchmarking Survey for leisure centres, which is now scheduled for summer 2007. However the recent appointment of a sports coach in this area has led to immediate improvements and the inclusion of a LAA stretch target for participation in physical activity by children with special needs or disabilities.

There has been considerable progress in developing disabled children and young people's participation in physical activity. The sports and recreation service has developed 5 additional activity clubs (Including tennis, football and athletics) that provide a total of 75 extra places for disabled children to engage positively in sports. Disabled children and young people are linked to the clubs through the Specialist Sports Coach who attends the local Special Schools to advise on their sports curriculum and to promote the clubs available in the community. A pilot scheme to support more profoundly disabled children to access sport and leisure activities is planned for July 2007.

The campaign 'Every Disabled Child Matters' has launched an Inclusion Charter to ensure that disabled children are able to access and take part in the opportunities available to everyone. All settings offering public access will be encouraged to prominently display and put into practice the Inclusion Charter.

Through joint funding and agreement to develop a specialist Participation Officer service a full time post has been developed with The Children's Society and NCH Action For Children. This post will focus on the delivery of the specialist outcomes for disabled children in the Participation Strategy including the development of a Disabled Children's Forum.

Following the development of an initial pilot scheme to promote leisure opportunities for Looked After Children a new and improved leisure discount scheme is to be launched this summer. Building on a 400% increase in the take up of the original LAC discount card and in response to what young people have asked us for, the scheme has been expanded to include a much wider variety of leisure and sport opportunities and covers a wider age range. The scheme has evolved through a partnership between Children's Services, Leisure providers and young people. The scheme will develop in a way that ensures inclusion for LAC of all abilities and needs, including those who are disabled.

To ensure there is well coordinated support to improve the healthy development and well being of children aged 0 – 6

BH 3.1 There has been very good progress in developing the **Children's Centre programme**. The latest report from the regional coordinator for 'Together for Children' refers to very good strategic planning across the borough. There is also agreed strategic involvement of the PCT health services across the borough, with similar health visitor and midwifery services for both the 30% & 70% children's centre models. The programme is well coordinated on school sites and integrated into the network of extended services. There has been very good consultation, which is on-going, with the local community to ensure a good match of provision to needs. Local Forums are being developed to ensure good community representation.

Four new Children's Centres opened in June 2007, providing a comprehensive programme of integrated services and activities. Health services from the 2 NHS Trusts provide services for midwifery and health visiting in all Children's Centres. They have made a commitment to provide services in the additional 3 Centres when they open in 2008. A comprehensive set of equipment has been purchased for each Children's Centre to facilitate Health Services delivering services in line with the NSF Health Promotion Programme, and to facilitate the delivery of healthy lifestyles initiatives alongside obesity monitoring and prevention.

There is good access to family support services and all the centres have commissioned parenting support from a range of providers including Supporting Families Service or Welcare. Additional specialist parenting support is being delivered by health visitors and educational psychologists in some schools and Children's Centres. Good outcomes are being demonstrated. The Core Offer (Childcare, Parenting Support, Swift and Easy Referral, Varied Menu of Activities and Community Access) is being delivered in a variety of ways in all centres and across the local clusters of schools.

Family Support is well placed in the development of school clusters and extended services. The Supporting Families Service, has developed the role of Family Liaison Workers across the clusters and provides tailored packages of support which are flexible and responsive to the needs of vulnerable children and their families. Initiatives include direct work to 154 vulnerable families, a range of group work initiatives and 380 families have been supported through a parent/child holiday support programme which has minimised the need for child protection intervention. The service has established a new post to support local fathers and has supported 129 fathers through a number of targeted initiatives.

Kingston is developing a strategic and joined up approach to support the design and delivery of parenting support services through a new parenting strategy. The strategy is at a consultation stage, and has had a high level of involvement from both parents and professionals. All children's centres have commissioned parenting support from a range of providers including Supporting Families Service, Welcare and Homestart. Additional specialist parenting support is being delivered by health visitors and educational psychologists in some schools and Children's Centres.

BH 3.2 Overall performance has been good in implementing the targets in the **10 year Childcare Strategy**. Good progress has been made in delivering funding and opportunities to access training in Early Years and Childcare for staff in all settings. The Workforce Development and Transformation Funding has been used to fund 113 students on courses at Level 3 and above in childcare. The percentage of Kingston childcare providers with actions at initial registration is in line with the national average. Funding to increase the number of providers offering at least 15 hours will be available from April 2010 at which point further expansion will take place. Good progress has been made in expanding accessible, affordable provision across the four school clusters. There is a childcare strategy in place for each cluster with 126 additional out of school childcare places developed during the year. Good progress has been made in achieving the target for out of school childcare places for children aged 3-14 yrs

between 8am and 6pm, one year ahead of the national requirement and we are well on target to achieve access for all by 2010.

BH 3.3 The Local Authority is doing well in reducing the **length of stay in temporary accommodation for families with children and pregnant women**. Performance is above the national average. We make strenuous efforts to offer self contained emergency accommodation to all households with children or pregnant women. This indicator, together with others relating to the use of temporary accommodation, will be critical in meeting the government 2010 target of halving the number of households in temporary accommodation. A number of new initiatives are underway to assist in our meeting this.

BH 3.4 Good progress has been made in **increasing the availability of health visitor services** to children. Health Visitor services are being provided in Children Centres as they are opening. This is helping to increase the awareness with parents of ante and post natal services available and more targeted support from midwives for expectant mothers is being developed. There has been at least a 5% increase in attendance at all children health clinics across the borough. In particular in the last year the number of young mothers under 22 attending the Surbiton Children's Centre has tripled and numbers seeking advice on behaviour and sleep issues have increased by 50%. Each school cluster has a named health visitor attached and this will enable more targeted support for families. A project group has been established to look at the redesign of health visiting services and proposals will be available in September 2007.

BH 3.5 Progress in providing a **child health promotion programme** has been steady. Services are being well accessed in a variety of settings including 2 newly opened Children's Centres. Since April 2006 a cystic fibrosis screening programme has been established and all babies born to hepatitis B+ mothers and in high risk families for TB have been immunised. Recently family needs assessments have been established which will ensure vulnerable children are identified and targeted for enhanced services. Take up of MMR immunisations is good at 91% which is above national rates.

BH 3.6 There is good progress in ensuring **maternity services** conform to NSF requirements, which has resulted in a reduction in the number of women who continue to smoke through pregnancy. The service is continuing to perform well, offering women and their partners good support. All midwives are trained in offering advice on smoking cessation, a smoking cessation clinic is run every Monday, women can self refer or are referred by the midwife or GP. Breast feeding rates also continue to be above average, although there has been a slight reduction in the past year. A breast feeding counsellor is available; all staff receive training in breast feeding, there is skin to skin contact at delivery and babies are fed within an hour of delivery.

Specialist antenatal classes for young parents at 20 weeks to plan their pregnancy effectively are well attended and additional support is available through a specialist health visitor and Connexions Personal Adviser. A clear referral process is in place to ensure young people receive a coordinated package of support throughout their pregnancy.

Staying Safe

Outcomes for staying safe are very good and mostly above average. Excellent local partnership work makes a significant contribution to children and young people staying safe. Local safeguarding arrangements are very good and children live and learn in safe environments. Arrangements for looked after children and those leaving care are very good and a high proportion of care leavers progress to appropriate training, employment or continuing education. Children and young people in Kingston are effectively kept safe with excellent systems and inter-agency working to ensure needs are identified and met at an early stage. There are innovative and high quality preventative services which are addressing the needs of vulnerable children and families. Integrated family support packages are proving to be highly effective in meeting needs, linked to well coordinated extended services and children's centre programmes delivered through clusters of schools. The Local Authority is making very good progress in developing the role of Lead Professional and in making effective multi-agency use of the Common Assessment Framework. The LA and partners have established protocols and procedures for information sharing, which are well understood across all partners in the Children's Trust.

Outcomes for vulnerable children and those at serious risk are monitored regularly and there is a steadily improving position regarding child protection, placement stability and safety. There is excellent support to foster carers to enable placement stability and good rates of adoption of children in care. The numbers of looked after children are reducing as a result of effective early intervention and sustained programmes of support. There are very well established safeguarding protocols and referral arrangements across all agencies, some of which have been reviewed and improved over the past year. Progress against priorities for staying safe in the Children and Young People's Plan has been good and continues to be on track. Improvements to practice and procedures for responding to cases where children are affected by domestic violence, as well as improved procedures for independent review and complaints by looked after children and improved support for unaccompanied asylum seekers, means that there has been significant progress on key issues. Overall arrangements for safeguarding, combined with very good outcomes, means staying safe is outstanding.

Staying Safe has seen a sustained improvement in outcomes since 2006. The key performance areas within child protection such as 100% child protection cases allocated and reviews held on time have been sustained. The percentage of re-registrations has dropped to 5% from 13% and our de-registrations for children on the registration for two years plus has dropped to 10.19% from 13.4%.

The numbers of Looked After Children (LAC) have reduced to 25.8% per 10,000 population compared to a national average (for 2005/06) of 60.1%. This has been a result of further work to support children and young people within their own homes wherever possible. There has been a reduction in the number of LAC with three plus moves from 15% to 12% and the number of LAC having annual health checks has increased to 92.2%.

The timescales for assessments remain impressive (81%) and our Prevention approach has meant that 410 children and young people have been flagged on our ASKK information sharing system. More than 70 members of staff from 20 agencies have been trained as Lead Professionals with 30 CAFs already undertaken. The number of referrals to the Safeguarding Team has significantly increased partly due to us recording police notifications and we are currently investigating how the impact of our Prevention agenda may have identified unmet need therefore in the first instance increasing referrals.

The Children Centres agenda is well on track with four designated centres in place and a further three will be in place by March 2008. There is an impressive level of engagement from all agencies to this agenda. Our work with disabled children has seen a further increase in support with a recent Ofsted inspection assessing our Family Support Services as outstanding. Given these developments we believe our Safeguarding Services are outstanding.

Key improvements where we have achieved progress in the Children and Young People's Plan in 2006-2007 include the following: child protection; increased support and intervention for vulnerable children; the development of children's centres; increased family support for disabled children and families; reduction in childcare settings with actions at registration inspection for child protection and health and safety; reduced re-registrations and de-registrations; improved stability for LAC; and improved LAC health assessments.

To ensure children and young people are safe, have stability and are cared for

SS 1.1 We continue to ensure there are robust **child protection services**. Performance remains strong in this area with 100% child protection cases allocated to qualified social workers. Our strategy to recruit and retain our social care workforce remains highly successful. We have fully implemented the Integrated Children's System and all new activity is recorded in the system. We have no children on the Child Protection system for more than 2 years. Our ability to sustain and further develop this work is excellent.

SS 1.2 Children and families who are referred to the Safeguarding Team receive an appropriate response. Performance in this area remains good and it is anticipated will improve further as a result of a specific focus around timely assessments. 81% of initial assessments are completed within 7 working days of referral, which is an improvement. The % core assessments completed within 35 working days of their commencement is 81%. The number of core assessments per 10,000 population continues to increase and is now 53, compared to 33 last year. This is below the 65 average figure for comparator groups. Our percentage of initial and core assessments completed within the timescales remains high and we are confident will further improve following our ICS system being fully imbedded. We are undertaking a specific piece of project work to help us understand any themes or practice issues relating to re-referrals. The number of re-referrals has increased to 18% re-referrals within 12 months, compared to 15% in the previous year. This compares with a national figure of 21.4% (2005/06). Thresholds have remained the same, however the pro-active launch of vulnerability levels in schools and the disabled children's information service has resulted in an increase in the number of referrals and re-referrals from key agencies. Our referral rate per 10,000 population is 729 compared to a national average of 565. Just 50% of these referrals relate to police notifications which we have not previously counted automatically as referrals and accounts for a proportion of this increase.

SS 1.3 There has been very good progress in developing the ASKK (Advancing Services for Kingston Kids) services as an effective **multi-agency information sharing** and monitoring system for vulnerable children and those at risk. The target of 400 has been exceeded in relation to the numbers of children flagged. There is increased awareness of vulnerable children and their needs, enabling more effective early intervention for children and young people we would not otherwise have identified. The work with school clusters has significantly developed and we are currently up-dating a Borough wide data base of children's vulnerability levels and needs to inform service planning. Our information sharing software will be 'live' by September 2007. This area of work is highly rated and recognised as outstanding. We have evidence of the positive impact on early intervention, such as preventing children being taken into care. With plans for further investment and development this provision, we believe, is 'trail blazing'.

SS 1.4 Our strong focus on **earlier intervention strategies**, coordinated by the ASKK system, has not yet resulted in fewer referrals to the children's Safeguarding Service. The increase in referral rates may continue to be above previous years as initiatives such as the CAF is further rolled out. However, there are fewer LAC than last year at 25.8 per 10,000 population compared to 28.2 in 2005/06. The national average is 60.1. Our activity through the Safeguarding Service has increased slightly, however, as the Preventative Strategy further impacts we anticipate seeing year on year reduction in this.

At the same time all children identified via the ASKK 'Central Hub', as requiring a Lead Professional have one in place. More than 100 children have a monitored family support

package and this is expected to increase to over 200 in the coming year. Outcomes for these children are being carefully monitored. By June 2007, 100 key staff received 'Lead Professional' training. Awareness training for over 1000 staff is being rolled out to further develop understanding of the Lead Professional role.

A comprehensive LSCB Training Plan has been developed and is being delivered to ensure we remain effective in our safeguarding duties. Performance in this area is good with particular areas of concern, such as Domestic Violence, addressed. We have undertaken DV Training with all key community health staff and social care staff and have a training plan in place for over 1,000 staff to be trained by 2010.

SS 1.5 Significant progress has been achieved in improving **early intervention, prevention and family support available through children's centres, extended schools and school clusters**. We have achieved our target in relation to the four new children's centres which have been "designated" and progress for all centres is assessed as good. At the April 2007 review meeting 'Together For Children' stated in the note of visit that one of Kingston's strengths was 'very good strategic planning across the borough' and 'agreed involvement of health services'.

There has been very good consultation with local communities for both the provision of the core offer of extended services November 2005 and services in children's centres January 2006. The children's Centres are currently establishing local forums to engage local stake holders and parents, these forums will also have a role in assessing the impact of outcomes over the coming year. This is being followed up with road shows and activity sessions between 24 to 27 July 2007, to gather parents views and highlight the services being offered through extended services and children's centres. The core offer is available across the borough and Family Support provision is available in all the clusters of extended schools. All the centres have health input. Our development in this area has been excellent, with ongoing community involvement and more locality based services which are meeting local needs.

SS 1.6 We continue to improve our **family support services to disabled children**. This service was assessed annually in December 2007 and received a rating of outstanding from CSCI. The Easter 2007 Holiday Scheme provided by this service has been assessed by Ofsted as outstanding. We have exceeded over 2010 target of 25% of disabled children receiving family support. As a result of more effective family support there are no children requiring overnight respite care beyond those that have already been identified (3 of 23) to receive this service. Parental feedback is very positive and parents feel well supported. Improvements continue to be made with more than 50% of support staff qualified to NVQ Level 3 as part of an ongoing programme of training.

Overnight support in children's homes continues to increase, with a reduced dependency on residential respite. The current review of the Health Services support to disabled children will result in dedicated nursing provision to train and support care workers in supporting disabled children with specific health needs. This service performs outstandingly and is successful in effectively and efficiently meeting the needs of disabled children and their parents.

SS 1.7 There has been very good progress in **reducing the number of initial registration inspections of childcare with actions** for CP, health and safety. The targets to reduce the number of actions at registration have been exceeded and the percentages for RBK are now in line with the national percentages for England. All PVI settings have an allocated Childcare Development Adviser and they are well linked to the extended services school clusters. 100% of all prospective childcare providers are now offered a pre-registration visit, with 100% take-up. The Support Childminder Scheme monitors new childminders and offers support from experienced, practicing childminders. Start-up packs are in place for all childcare providers and these have been used as examples of good practice by Ofsted Inspectors with other Local Authorities. 100% of all childcare providers receive pre-registration information and guidance from the Childcare Development Advisers. The take up of training on Policies and Procedures has been good with positive feedback from participants.

SS 1.8 There is a well established **Local Safeguarding Children's Board**, which operates very effectively. All actions from the Serious Case Review have been completed and a one year business plan developed and agreed by the Board. The broadening of the Board's remit to look at the wider safeguarding agenda is well under way and attendance and commitment at the Board remains good. A three year business plan is currently being developed. All child protection cases have an allocated social worker and all active protection plans are reviewed on time. Re-registrations and de-registration rates have significantly reduced this year. The percentage of re-registrations is now 5% compared to 13.3% in the previous year (13.5% national average), and de-registrations have reduced to 3.1% (national average 6.5%).

SS 1.9 The **safety of children's environments for learning and recreation** has been improved by the roll out of the Police safer schools and safer neighbourhoods programme. All the neighbourhoods have a Safer Neighbourhood Team in place, which has improved multi-agency approaches to crime and anti-social behaviour. The Safer Neighbourhood Teams place a particular focus on children being victims of crime as well as the need to address offending behaviour by young people. Police are actively involved in consulting with schools and young people and incidents of crime have decreased at the fastest rate within London.

SS 1.10 A local **protocol on children missing from home and from education** has been developed to cover all young people. The implementation of this protocol has helped reduce the total number of missing children from education to 29 this year compared to 41 for last year. Through this process 16 of these children were found in other local authority areas and 13 in private education or abroad. The protocol was judged as very good by the JAR team. The systems for responding to missing children enquires and monitoring children missing from education are working very effectively.

The number of children looked after who are absent from school for 25 days or more remains low but has increased slightly compared to the previous year. Last year's performance was unusually low at 0% and the 7.3% for this year relates to 3 children (national average 12.2% for 2005/06). One is now on a work experience programme, another has returned to education to a residential school and the third, an unaccompanied young asylum seeker, is missing from his placement.

During 2006, there were 3 incidents of children and young people missing from foster homes and 8 incidents of children missing from care homes. The local missing children procedures were followed immediately after each incident and 10 of 11 children have been successfully found to be safe and with their families or friends. There was only one incident in which an unaccompanied young asylum seeker's whereabouts could not be traced. The police were involved in finding the missing young person.

SS 1.11 Our work to implement key **targets in the crime reduction strategy** to ensure fewer young people are the victims of crime and there are fewer young offenders remains a challenge. The estimated outturn is disappointing in spite of clear expectations that the target would be achieved through the impact of the YISP and changes to police procedure to maximise the potential use of penalty notices. In 2006-2007 there were 170 first time entrants to the youth justice system, compared to 161 the previous year. The target was a reduction to 135. London averages for the nine months to December 2006 indicate a 34% increase in first time entrants against a national target of 5% reduction over two years to March 2007. Kingston's increase against a baseline of 141 at 31.3.05 is below average at 10.3%.

The reasons for the sudden increase in the final quarter have been examined and relate in part to the conviction of a group of six young people in connection with a single incident and not known to the police before, and some local police procedural changes. The current diversionary arrangements have now been reviewed with the police and the situation brought to the attention of senior officers who will brief safer neighbourhood teams accordingly. The YISP, however, is proving to be an effective preventive and diversionary service. By January 2007 the YISP has

worked with 38 young people aged 8-13, of whom only two then entered the YJ system. This underlines the positive impact of our focus on early identification and intervention.

SS 1.12 There is very good **transition from Children's Services to Adult Services** for young people with a disability. All the targets have been met with 100% of young people identified and written transition plans in place where appropriate. We have an integrated service with 2 adult workers based in the Young People's Team to facilitate smooth transitions. This is a high performing service ensuring effective outcomes for young people preparing for adulthood.

To ensure looked after children stay safe and have security and stability

SS 2.1 There is also effective **monitoring and support of looked after children** and unaccompanied asylum seeking children. The outcomes for UASC remain good and are comparable to our wider LAC population. We have addressed inconsistencies in the support UASC receive in relation to LAC by a full review of the service and now all UASC receive full Looked After or Care Leaving provision and support as appropriate. This represents good progress since the JAR in 2006. Performance continues to improve and has exceeded this year's target. The number of LAC continues to decrease with more children and young people being supported to live at home. 92% of looked after children have an annual health check and routine dental checks. Performance on this measure has improved since last year but is slightly short of this year's target (98%). The cohort includes 3 teenagers 16+ who are at an age where they are making their own choices about their health care. The number of looked after children with 3 or more placements has reduced, although the number placed with carers more than 20 miles away has increased slightly. The five young people concerned include three who are in planned specialist placements, one is placed with extended family and one is placed with a Kingston carer who lives 22.5 miles away.

SS 2.2 Good progress has been made in **expanding fostering placements** to cater for the needs of young people with challenging behaviour, disabled children and teenage mothers and babies needing placing together. The successful recruitment of in-house foster placements together with a reduction in our LAC numbers has meant that we have been able to increase the percentage of LAC in in-house foster placements. Performance continues to improve in terms of placing LAC in foster care with friends or relatives and has exceeded the target of 8%. The percentage of LAC placed in residential accommodation remains high, but has reduced. This continues to be a challenge due to the number of looked after disabled children who require specialist placements.

SS 2.3 /2.4 The Authority provides increasingly effective **adoption support services** to reduce the risk of placement breakdown. RBK is meeting the requirements of the new legislation. This year's performance met our target of 10% of looked after children placed for adoption. The overall percentage of LAC in foster placements continues to improve and we would anticipate further improvement following our planned recruitment of specialist foster carers in 2007/8.

Enjoy and Achieve

Outcomes for enjoy and achieve continue to be outstanding. Educational standards are well above average and continue to improve year on year. The majority of children and young people in Kingston achieve very well and progress in raising standards is better than nationally and in similar areas. There is very good support for school improvement and for raising the educational attainment and wider achievements of looked after children and other children in need. There is very good early years education and childcare; pupils with special educational needs and disabled children are well supported and make good progress. The Local Area Agreement includes stretching targets for our healthy schools programme, for progress of more able pupils at Key stage 2 and for the delivery of larger numbers achieving both English and maths at the end of Key stage 4. The range of school provision is mostly good or outstanding with no schools in an Ofsted category to improve. School improvement services are flexible in meeting a range of needs; they are good value for money and are low cost with high effectiveness. The LA has an established SIP programme which is working well and plans are well developed for the primary SIP programme. There is very good collaboration with other LAs to increase capacity and effectiveness. Kingston leads the South West London School Effectiveness Partnership with five other neighbouring boroughs. The Authority is a hub of excellence for special educational needs. Early years education and childcare is very well integrated; standards in the foundation stage are good and childcare targets have been met. There is wide ranging and good quality recreational and leisure activities for children and young people. There are very good levels of school attendance and low exclusions. This is an area of strength and good progress has been made in improving the targets and objectives in the Children and Young People's Plan.

Key improvements where we have achieved progress in 2006-2007 include the following: improved number of childcare providers meeting national standards; improved school attendance; attainment at key stages 2 and 3; attainment at 5 or more GCSE grades A*-C; improved use of performance data by schools; achievement and progress of disabled children and pupils with SEN; and the number of young offenders participating in education, employment or training.

To ensure children make good progress between the ages of 0-5 and are well prepared for school

EA 1.1 We continue to improve the quality, provision and **integration of early years education and childcare**. This is an area of strength and in the past year there has been good progress in improving the quality and provision of childcare. Early years education continues to perform well. There has been good progress in reducing the number of initial registrations with actions. All private, voluntary and independent settings have an allocated Childcare Development Adviser who is aligned with the Early Years Advisory Teacher allocations and extended services clusters. This has had a positive impact on settings' abilities to meet the national standards with a reduction in the number of settings with actions at registration from 50% (Source LA Profile 31 March 2005) to 28.5% (source LA Profile 31 December 2006)

There is good progress in implementing the recommendations in the Childcare Act 2006. 37 settings (73%) are now offering 38 weeks, which is an increase of 6% on last year. The Transformation Fund has been well used to fund courses at Level 3 and above in childcare and these qualifications will improve the quality of the workforce in settings. The number of unqualified workers in full day care and sessional settings (excluding childminders) has decreased from 118 to 89. Childminders are all qualified at Level 1 and 40% (116) are qualified at Level 3 or working towards a Level 3 qualification. In line with national requirements all supervisors in private and voluntary early years and childcare settings for under 5's are qualified at level 3 and a minimum of 50% workers in each setting have achieved Level 2.

EA 1.2 There is effective **support for parents and carers, in Children's Centres and Extended Schools**, especially for vulnerable children 0-5. Schools and children centres are organised in four clusters and there is an effective network of provision in each local area. The core offer of extended services is available, including sufficient childcare to meet local needs. In April 2007 two Children's Centres were designated by Surestart and 2 further Children's Centres have been designated in June 2007. In these centres many of the services for parents and carers have already being established. By April 2008 a further 3 Children's Centres will be designated. Home Start has been commissioned to provide home visiting and support for vulnerable families and children. There are also health visiting and midwifery services in each centre. Currently, all agencies are working together and there is now a more cohesive approach to identifying vulnerable children and families. Overall there is a much improved network of provision.

EA 1.3 The Local Authority provides very good **support to early education and childcare providers**. There has been 100% voluntary take up in prospective childcare providers receiving pre-registration information and guidance from the Childcare Development Advisors. Start-up packs are in place for all childcare providers and these have been used as examples of good practice by OFSTED Inspectors with other Local Authorities. 100% of all prospective childcare providers are offered a pre-registration visit and again there has been 100% voluntary take-up. The Support Childminder Scheme is fully functional, offering support from experienced, practicing childminders to prospective and newly registered childminders which has reduced the number of actions issued at registration. For example, 56 of the 80 childminders (registered between 1 April 2005 and 31December 2006) received no actions (69.9%). This is an improvement of 36% against the figure for the previous profile.

To ensure children and young people attend and enjoy school

EA 2.1 School attendance is very good and continues to improve. Attendance in Kingston was judged as "excellent" in the JAR. We have made good progress in our target to ensure all schools achieve at least the median attendance benchmark for similar schools. The target of 60% in 2006-2007 has been achieved and this is an improvement of 5% on the previous year. During the year we have adopted a more preventative and multi-disciplinary approach focussing on authorised absences, particularly illness. This has had a positive impact. Working with the PCT we published a leaflet for parents on minor illness and school attendance. This leaflet has been widely used in RBK schools and adopted by many other LAs. 26 truancy sweeps were jointly conducted by the Police, YOT and the EWS to send out a strong message to the community. 10 multi-disciplinary attendance panel meetings were convened to address the most severe non-attendance problems. 87 parenting contracts were issued to empower parents who might need a package of support to help their children's attendance. Training sessions have been held for school based attendance officers to disseminate good practice including the new regulations on attendance. The Local Authority has also ensured the small number of schools with below average attendance achieve their targets. The target of 60% schools meeting the attendance target set according to contextual data was exceeded at 64%.

EA 2.2/2.3 In 2006, our overall attendance rate dropped although the decrease of 0.27% was less than the fall nationally (0.43%). The drop in attendance occurred across 13 schools. Eleven of these have an attendance rate above the national average. The Education Welfare Service are currently working with these schools to improve their school attendance. Overall the Local Authority continues to perform very well in achieving very high levels of school attendance. Kingston has maintained its performance and is ranked among the 5 best performing Local Authorities nationally. The truancy rate was the second lowest in the country and overall attendance rate of 93.95% is the 4th highest in the country.

To continue to improve educational standards in the foundation stage and at all key stages in line with agreed targets

EA 3.1 Standards in the **Foundation Stage** continue to improve and performance is good and generally above the national average. Foundation Stage targets have been exceeded in ensuring all schools inspected are at least satisfactory and 82% are judged to be good. Of the schools inspected in the past year, two were judged to have outstanding early years provision. Provision was satisfactory in two schools and these are the focus of intervention and support by the Local Authority. The Foundation Stage Profile scores are at or above the national average in all aspects except writing. Early writing has been the focus of significant training and moderation activity. In 2006 attainment improved or was maintained in: emotional development, knowledge and understanding of the world and physical development. In other areas and mirroring the national picture, attainment was lower than the previous year.

The recent report from the Regional Director for the National Strategies rated the early years provision as outstanding. Improved links with the Primary Strategy consultants have strengthened provision for literacy and numeracy and is having a positive impact on improving writing. Overall the Local Authority has very robust moderation procedures in place and continues to set very ambitious targets for improvements in the early years.

The attainment gap in the Foundation Stage between boys and girls has narrowed for 7 of the 10 main indicators (% of pupils achieving 6 points or more). The gap has remained constant for 1 indicator and increased for two. Importantly all the indicators for Communication, Language and Literacy show a decreased gap in the attainment of boys and girls.

Children eligible for FSM demonstrate lower levels of attainment in all six areas of learning. However, over the past four years, attainment has been increasing at a slightly better rate than for those pupils that are not eligible and the attainment gap has narrowed.

The number of children who speak EAL is high and increasing across the Authority and within individual classes. The attainment of the EAL cohort fell slightly between 2005 and 2006. With the improvement for those who speak English as their first language this has resulted in a widening of the attainment gap for EAL. This issue has been an important driver for the LA in allocating resources to support schools. The gap is expected to reduce in the current round of assessment.

Group sizes for BME groups identified by the government as underachieving are small in the Foundation stage and make judgements difficult. On a three year trend attainment has improved in line with the full cohort but there still remains variation between groups. This is a priority for Local Authority intervention and support.

EA 3.2 The Local Authority continues to make good progress in improving **standards in the primary phase** in line with agreed targets. This is more marked at Key stage 2, while at Key stage 1 in 2006 there was a slight decline. In 2006, at the end of Key stage 1, pupils' performance was well above the national average in all core subjects. Over recent years the overall trend of improvement is better than the national trend. Compared to 2005, standards were maintained in science but fell slightly in reading, writing and mathematics. The trend of results in Kingston mirrored the national picture with the exception of science which was better than national. Writing at Key stage 1 remains an issue and the Local Authority is working hard with its schools to address this issue as a priority in the school improvement strategy.

The Local Authority's contribution to closing attainment gaps at Key stage 1 is extensive and well focussed. The LA has shared detailed Fisher Family Trust and pupil level data with head teachers, trained headteachers and other school staff in assessment and supported specific project work and targeted intervention in named schools. As a result there is anticipated improvement in the attainment of boys, FSM, EAL and BME groups.

In 2006, the gap between boys and girls widened in reading and maths by 2% and science by 1% and remained static in writing. Gaps in attainment are greater than the national average for all subjects except writing. To resolve gaps in literacy the LA has provided financial and advisory support for the implementation of school based writing projects in a quarter of schools and dissemination to all headteachers.

The attainment of pupils learning English as an Additional Language is in-line with national averages for reading, slightly below average for writing, in line for level 2 mathematics and much higher than average at the level 3 benchmark. However in 2006 the gap between the EAL group and others has widened at levels 2 and 3 in reading, writing and mathematics.

At Key stage 1 the proportion of pupils eligible for Free School Meals is low at 6.7%. Black and Mixed Black groups are over represented in the FSM category. While the attainment is similar to the FSM group nationally, the gap between those eligible for FSM and those who are ineligible has widened over time. Improvement is needed in reading and writing and LA initiatives to improve boys' literacy, identify and address vulnerability via extended services and training in assessment for learning are intended to improve attainment gaps.

Attainment at Key stage 2 is outstanding and has improved overall on the previous year. Very high standards were maintained in English and mathematics and improved in science. Standards are exceptionally high compared to the national average and Kingston's trend of improvement is better than the national trend. The statutory measures at Key stage 2 for English and mathematics rank Kingston as the 4th and 5th LA nationally. Despite this our challenging level 4 and above targets for English and mathematics were not met. Good improvements were made at level 5 and progress towards our LAA stretch targets is good.

Progress in addressing the needs of particular groups is good. A range of projects targeted at underperforming pupils have been funded. These include recovering reading, the use of structured number equipment to improve learning and various intervention programmes. Eight schools have also received additional funding for teaching assistants to work with pupils on the level 3/4 cusp.

In 2006 the gap between boys' and girls' attainment in English narrowed by 1%. This mirrored the national improvement and Kingston's gap is already much less than the national average. Additionally, at level 4 Kingston boys' attainment exceeds the national figure by a greater margin than Kingston girls exceed the girls' national average. Boys' attainment is ranked 2nd nationally compared to girls at 18th. In mathematics boys' attainment exceeded girls' attainment by 2%, which was an increase of 1% on 2005. In science where boys and girls were equal in 2005 girls now exceed boys by 1%.

The numbers of EAL pupils increased from 17.2% of the cohort in 2003 to 24.0% in 2006 and the group's attainment improved over the same period. Standards are better than the national average and particularly strong at the level 5 benchmark in English and mathematics. Over time the attainment gap between EAL pupils and other pupils is narrowing but in 2006 it widened in all subjects (except level 5 English, where it narrowed by 2.2%). Over time the trend is a narrowing of the gap for these pupils.

The proportion of pupils eligible for FSM is low at 8.4%, and has reduced in the past three years. In 2006, the FSM group's attainment declined in English and mathematics, and the attainment gap widened compared to those not eligible for FSM. Nevertheless, improvement over time since 2003 is good and better than that of non FSM pupils. The attainment gap for FSM has narrowed overtime in all three subjects at Key stage 2.

EA 3.3 At **key stage 3** the targets were achieved and standards continued to improve and remain well above the national average. Overall standards at level 5 and above continue to improve and have done so steadily since 2002. In 2006, attainment at level 5 and above

improved by 3% in English, in mathematics by 1% and in science by 1%. There was a similar improvement of between 3% and 4% at level 6 and above in all core subjects. The Local Authority was ranked 5th nationally in English; 8th in maths and 12th in science for attainment at level 5 and above. At level 6 and above the rankings were higher, at 1st in English; 2nd in maths and 4th in science.

In order to close attainment gaps at Key stages 3 and 4 the Local Authority has focussed on building school and departmental capacity. As a result improvement in this Key stage is good. The LA delivers intensive work agreements in 4 schools, conducted teaching and learning reviews in departments considered vulnerable and supported schools to appoint high quality staff. These actions are having a positive impact on reducing attainment gaps.

At key stage 3 attainment is outstanding and there is only a narrow gap between boys' and girls' attainment in mathematics and science, but the gap in English widened further. Boys' attainment is 20% lower at level 6 and it fell slightly at level 5.

The attainment of pupils who have EAL at Key stage 3 is good and significantly higher than the national average. The number of EAL pupils has increased (19.8%) and the attainment gap in English narrowed significantly by 2.1% at level 5. Mathematics attainment for EAL pupils is well above the RBK and national average, and is improving. Although the attainment gap in science widened at level 5 in 2006 the difference in the APS score narrowed to the best ever.

The attainment of pupils who are entitled to FSM is lower than the national average but improving. Although they remain too wide, gaps in English and maths are narrowing. The gap in science has widened slightly and the LA is working to build capacity in some weaker departments.

EA 3.4 Standards at key stage 4 continue to improve, although the Local Authority fell just short of its 2006 target for 70% of pupils to attain 25 or more A*-C grades at GCSE. The percentage of pupils attaining 5 A*-C grades at GCSE is 68.1 % although this drops to 59% when mathematics and English are included. This is well above the national average and there has been a steady improvement over the past 5 years. The percentage of pupils leaving school without any GCSE qualifications continues to be relatively high at 3.7%. This is 1% below the national average figure. No schools are below floor targets.

The gap between boys and girls' attainment at key stage 4 is wider than the national average with girls outperforming boys by 12% for overall 5 A*-C grades and 13% including English and maths. Boys are below the Local Authority average in relation to attainment of 1 or more A*-G grades. We recognise that improvements are needed for boys' overall performance at Key stage 4. Valued added rates are at or above expectation in 6 out of 10 schools.

There is particularly good progress in narrowing attainment gaps at key stage 4 due to the intervention of the local Authority in its secondary schools. There has been a significant improvement in the attainment of boys, leading to a narrowing of the attainment gap. The gap at 5 A* - C GCSE grades decreased from 16 % to 11%. The gap at 5 A* - G grades was maintained at 5%. Importantly the gap between the average points attained by boys and girls dropped from 39.9 points to 32.4 points. The attainment gap between boys and girls is also narrowing at subject level. At A*- G grades in mathematics the gap decreased from 4% to 3% and is lower than the national gender difference of 5%. In science Kingston's gender difference at A*- C narrowed by 2% between 2005 and 2006 dropping to 7%.

The attainment gaps between EAL pupils and other pupils have also narrowed significantly. The gap at the 5 A* - C indicator decreased from 6.8% to 0.2%. The gap at 5 A* - G grades was reduced from 4.7% to 2.4% and at 1 A* - G from 3% to 1%. On the 5 A* - G indicator and the 1A* - G the direction of the gap was reversed.

On the free school meals indicators there was also good progress. There was a slight increase in 2006 in the gap between FSM and non-FSM groups on the 5 A* - C indicator (31.9% in 2005 rising to 34.5% in 2006). However between 2005 and 2006, on the indicator at 5 A* - G there was a narrowing from 13.4% to 12.1% and at 1 A* - G the gap reduced from 5.6% to 0.3%.

EA 3.5 Schools' ability to identify and **support under-achieving black and minority ethnic groups** has improved over the year and all schools now have provision management that includes the needs of BME groups. A pilot group of schools has implemented a new system for identification and monitoring of racist incidents. Implementation of the system for assessing children's acquisition of English based on QCA Steps has been effective. Good practice in raising standards for BME groups continues to be disseminated through network meetings for primary and secondary schools. This is monitored through the LA's Joint Annual Reviews with schools.

Overall the attainment of BME groups in Kingston is good. At secondary level this is partly dependent on the attainment of high attaining groups in the two selective schools. At Key stage 3 there has been a narrowing of the gap for underperforming BME groups in English at level 5+, with a drop from 7.3% to 6.5%. In mathematics the gap has remained relatively static at 12.4%. The gap in science, however, has widened from 6.3% to 12.5%.

At Key stage 4, BME attainment for underperforming groups is improving. At 5 A* - C grades the improvement between 2005 –2006 was 4.9% rising from 52% to 56.9%. For 5 A* - C grades including English and mathematics the improvement was 1.1% rising from 50.3% to 51.4%. The attainment gaps for these measures dropped from 14.4% to 11% and from 9.3% to 7.2% respectively.

EA 3.6 Good progress has been made in extending **schools' use of performance data** as a tool for self evaluation and improvement in standards. Headteachers and their senior staff are familiar with Fisher Family Trust and RaiseOnline reports, using these to confirm judgements related to pupils' progress and curriculum strengths or areas for development. The Authority continues to work very effectively with schools through its SIP and link inspector arrangements to ensure that all schools use high quality data to improve both target setting, assessment and tracking of pupils' progress. The Local Authority's Joint Annual Review with every school is used to test out the quality of the data analysis and tracking that is carried out. Both the JAR meetings and Ofsted inspections confirm that data is being well used in the majority of schools and is having a positive impact on standards. The target of 80% of schools using data effectively was met in the last academic year. Data is being used effectively to plan and target the work of LA consultants within schools. High quality training has been provided by the authority as schools move from use of FFT data to the new Raise on line system. At post 16 the Local Authority and schools have renewed their support for the ALPs value added project being conducted with the local LSC.

EA 3.7 Good progress has been made in continuing to develop **alternative education programmes and intervention strategies** for raising the achievement of vulnerable pupils. The percentage of pupils attending alternative provision at Key stage 4 who achieve an accredited outcomes has improved from 70% in 2005 to 84% in 2006. This exceeds the target in the Children and Young People's Plan. The target of 90% for 2008 remains an ambitious target since many young people are in alternative provision because they have become disengaged from the mainstream offer. Although the key milestone specifies accreditation for those who complete the programmes, attendance and retention rates have been good for alternative 14-19 programmes so the percentage reflects a high number of those who start. This also confirms the relevance of the provision.

All pupils with learning difficulties and disabilities at Dysart, St.Philips and most at Bedelsford achieved accredited outcomes in 2006. 84% of young people in other provision, for example Gaining Assets Programme (GAP) and the PRUs gained accredited outcomes in 2006. A Local Authority Quality Assurance Framework for alternative education provision was drafted in 2006

by a CYPP sub-group involving key partners and trialled with a local training provider (BTE) in autumn 2006. It is based on national guidance, involves self assessment validated by LA officers and will be fully in place from September 2007. Accredited outcomes are already built into almost all alternative education provision in Kingston and we are on track to confirm full access to accreditation for those who would not normally access the national qualifications, by July 2009.

EA 3.8 The Local Authority continues to have a low exclusion rate. Kingston is well below both the London and National averages in terms of permanent exclusions and the numbers of pupils who have one or more fixed periods of exclusion. Our target to reduce the number of days lost to education by 10% year on year was not met in 2006 and the figure achieved was 7%. However, the Authority is well on course to meeting this target in the current year and on the first two terms the reduction is 15%. We continue to give priority to this work with schools. We anticipate a reduction of at least 20% in the number of days lost to education in 2007-2008, from a baseline of 2733 in 2005-2006.

To improve the achievements of looked after children and other groups of children with specific needs

EA 4.1 Our targets to improve the **achievement, progress and attendance of looked after children** remain challenging. In 2006, 14% of these young people achieved 5 or more A*-C grades at GCSE compared to 15% in 2005. 57% achieved at least one GCSE pass compared to 62% in 2005. In this small cohort of five young people, 28% were unable to access the curriculum which represents a good level of achievement for those who participated in public examinations.

All students received individually tailored support packages to help them succeed in their various GCSE courses. Regular feedback from class teachers and home tutors helped establish appropriate interventions around coursework and revision which led to the reported examination success of each student. All students met or improved upon their predicted grades as a direct result of the measures put in place.

During the year, we continued to work closely with foster carers encouraging them to take an active role in supporting each student's daily academic needs. This has been achieved through closer monitoring of the homework diary. This has had a positive impact especially on coursework/ homework completion and has strengthened home/school communication. Subject specialists have been utilised to individually tutor students where a need has arisen. This specific intervention has seen the examination outcomes improve for each student by at least one grade across a number of subjects, not just the one being targeted.

Although progress continues to be good for those students who are able to access the curriculum, for other students who are unable to sit GCSE's due to the nature of their specific disabilities, commenting on their academic attainment, achievements and subsequent progress is difficult. 28.5% of the cohort were not entered for GCSE examinations because of the nature of their individual disabilities. As the number of students in each cohort is relatively small this has a continuing impact on the GCSE examination results for the borough. This does mean that we are always striving to ensure that each individual student fulfils their true academic potential regardless of ability.

The attendance of Looked After Children is within target despite an increase from 0% last year which was outstanding to 7.3% this year which equates to 3 children. One is now on a work experience programme, one has returned to education in a residential school and one UASC who is missing from placement.

EA 4.2 Good progress is being made in targets to improve **the achievement and attainment of disabled children and pupils with special educational needs**. Achievement in the three Special schools continues to improve. A particular strength is the care and support offered to the

children and young people resulting in their excellent personal development and sense of well being. Leavers are effectively prepared for their lives beyond school. This was confirmed by Ofsted as all three were inspected during the past year

Provision for pupils with special educational needs (SEN) is at least good and often very good in Kingston schools. Progress made during Key stage 1, Key stage 2 and Key stage 3 continues to be good. Total average point scores have increased steadily since 2003 in core subjects for this group of pupils. Progress is considerably greater than for non SEN pupils in all key stages in core subjects with the exception of English and mathematics at KS2 for those with a statement. Average points scores increased in Key stage 3 again well above that compared to non SEN pupils in English. There has been a significant increase in progress for pupils with a statement since 2003.

The key area for further improvement continues to be at Key stage 4 where some pupils at school action plus and/or with a statement make less than expected progress in relation to attainment at 5 A*-C GCSE grades, particularly for those with a statement. However this has improved significantly compared to 2005. There is also a need for improvement for SEN pupils in relation to 1 A*-G measures, although this has also improved compared to 2005 and the improvement rate is above the increase for non SEN pupils. RBK is just below the overall national average on this measure.

All mainstream schools inspected during the past year were judged good and in many cases outstanding in relation to progress and provision for SEN. The majority of schools (82%) in 2006 considered the progress of pupils with SEN and/or disabilities as good or outstanding. Feedback from pupils' Annual Reviews tells us that 32% of primary pupils considered 'things were good or very good' and 66% said things were fine. 80% of secondary age said 'fine' and 15% said 'good or very good/great'. Provision for pupils with learning difficulties and/or with a disability was judged as good in the 2006 Joint Area Review.

The Local Authority continues to improve the range and quality of SEN provision. There is new post 16 provision, and increasing provision for pupils with autistic spectrum disorder (ASD) and severe learning difficulties (SLD) at St Philips. There has also been further development of provision for pupils with PMLD at Bedelsford School and a continued focus on SLD/ASD at Dysart School. At Dysart this includes new provision for ASD pupils aged 14-16, and there are agreed plans to extend this to 16-19. The strategy is enabling more children with significant or complex needs to remain in local schools.

There is a similar expansion of SEN 'resourced' provision in mainstream schools, for example with new ASD/SLD provision at Knollmead Primary school and plans for new provision for ASD at Latchmere School and for BESN pupils at Malden Manor Primary School. The overall effect of the Authority's strategy has been a reduction in the proportion of children going to independent external placements from 17.1% in 2004 to 12.6% in 2006. This has ensured that our expenditure remains at budgeted levels. Pupils and their parents and carers were consulted as part of this process and both schools and other stakeholders fully support the strategy.

Young people with learning difficulties and/or disabilities are very well supported to move towards a more independent adult life through good multi-agency transition planning, work experience programmes and appropriate education and training placements. Partnership working to provide advice and support is very good, including integration of a Connexions adviser into the disabilities team. Advice for parents to understand transition now starts at age 11. Transition support includes pre-course visits to the college with a support worker. A good range of courses meet learners' needs at age 16 to 19 and they have clear progression routes. Appropriate learning support is provided in schools and the college. A high proportion of young people with learning difficulties and/or disabilities aged 16 to 19 are in education, employment or training, although the proportion in education has decreased. 97% of disabled young people supported by the Disabled Children's Transition Service are in education, employment or training.

EA 4.4 Disappointingly, we have made unsatisfactory progress in improving **the percentage of SEN statements completed within 18 weeks** when medical advice is required. Against a target of 75% only 49% met this requirement. This represents a decrease on the 68% performance last year. The Local Authority continues to make representation to health professionals to improve this situation, and indeed completion rates in excess of 26 weeks have been reduced to 8% (3 cases) compared to 53% in 2003.

EA 4.3 Very good progress is also being made in improving the **number supervised juveniles in education, employment or training**. This has improved to 90%, compared to 85% in 2005-2006, and exceeds the 88% target in the Plan. This is a very good result for RBK and means that for the first time we have achieved the YJB national target, one of very few YOTs to achieve this result. The London figure is 66.1%. A high level of involvement in education, employment or training is a key protective factor in preventing re-offending by this group of very vulnerable young people.

However there is still scope for improvement as the remaining 10% feature a small group of young people aged 16 plus who are not engaging in EET and who remain a challenge. Plans have been developed to pilot the use of the FRISKIE e-learning work book (designed to support the development of life and employment skills) with this hard to engage group but they are still proving difficult to motivate. It is now planned to incorporate, where appropriate, the inclusion of attending this course as a sentence requirement.

To improve access for all children and young people to a range of play and recreational activities

EA 5.1 The strategy to improve **play provision** has made satisfactory progress so far. A successful lottery bid will ensure the development of an additional adventure playground in a deprived part of the borough. This will complement the very good provision at Dickerage Adventure Playground. Performance in meeting the targets of the Play Strategy Action Plan for adventure play provision are good. The timescale for approval and schedule for improvement of the playground at Dickerage will meet the 2007 milestone. Construction of the new facility at King George's Field will begin in the academic year 2007-2008. At the same time the target to increase the number of hours per week of supervised play in parks and other play areas has been well exceeded. However, but there is a recognised need to improve the quality of supervision and the marketing of this initiative to ensure that families and young people are aware of the scheme and that quality is assured.

EA 5.2 Good progress has been made in expanding the **provision of 2 hours physical activity a week** for all children and young people. The School Sports Partnership programme has been successfully extended to all schools and is working very well to improve the range and quality of sports and physical education both during and after school. The Authority is confident of meeting the 2007 target of 76% of schools ensuring pupils have access to 2 hours physical activity a week.

EA 5.3 The target to increase the **number of children and young people who voluntarily participate in arts activities** has also resulted in good progress. The Local Public Sector Agreement (LPSA) target of 1846 young people participating in arts activities out of school was achieved. The involvement of nearly 2,000 local young people of secondary school age in out of school arts activity contributed to the development of an arts curriculum in the youth service provision and to links with the voluntary sector. There was a physical manifestation of performance in that the young people produced a large mural at Tolworth Roundabout subway – a known problem spot for graffiti. There has been good expansion of opportunities for children and young people to participate in arts activities as a result of new music facilities at the Hook Learning Centre, the Summer University programme for young people, the education programme at the Rose Theatre and increasing activity provided by the Music and Arts Service.

Making a Positive Contribution

Very good procedures are in place to support children and young people to make a positive contribution. The Children and Young People's Participation Strategy is now well embedded and young people are increasingly involved in making decisions about, and in monitoring developments of, the key services that affect their lives. Kingston Youth Council is very active, with good links to schools' councils; there is wide consultation with children and young people and active responses to their needs and views by the Local Authority and its partners. Children in care, and disabled children and young people, are very actively engaged in reviews and service developments. There are low levels of anti-social behaviour and youth offending; 90% of young offenders are in education, employment or training. School inspection judgements for behaviour, attitudes, involvement in extra curricular activities and making a positive contribution are mostly good or very good. Children and young people have a range of opportunities to be fully involved in, and influence, issues and services that affect them. A wide range of advice, support and guidance is available for children and young people from a range of providers.

Children are well supported in the early years; LAC are supported very well to both communicate their views and actively contribute to issues that affect them; children and young people are well supported at key transition points in their lives; children and young people with SEN or disabilities are able to positively contribute to plans and the development of services which impact on them. Children and young people have been directly involved in the development of our expanding programme of out-of-school and holiday activities, co-ordinated across all agencies. The LA uses local capacity, partnership working and limited resources very effectively to provide a wide range of services that support children and young people to be engaged and to make a positive contribution. There are increased opportunities for leisure and play in response to children's views. Young people are positively diverted from anti-social behaviour by good schools, a high performing YOT and a newly integrated Youth Support Services. There has been very good progress in implementing the priorities and targets in the Children and Young People's Plan and outcomes for making a positive contribution are now outstanding.

Key improvements where we have achieved progress in 2006-2007 include the following: effective embedding of the participation strategy and the number of issues where young people have influenced decision making and service development; consultation with disabled children on summer holiday programmes; reduction in the number of LAC given final warnings or convictions; increased number of young people accessing positive activities and being supported successfully through transition from primary to secondary school; and improved engagement by young people in targeted support for their continued participation in education, employment and training.

To ensure children and young people engage in decision making, support the community and contribute to the development of services

MPC 1.1 There is a very good **Participation Strategy**, which is well embedded in the work of the Children's Trust. This supports children and young people to have a strong say and an active part in the issues and service developments that affect their lives. Very good progress has been made in the past year to embed the strategy further and all the targets in the Participation Action Plan for 2006-2007 have been achieved. A good number of issues raised by children and young people have influenced service delivery. These include input into interviews for new staff appointments, the establishment of information Youth Cafes and new sports facilities at Dickerage Adventure Playground.

Good progress has been made over the year with young people's representation on, and active participation in, strategic groups. Young people's involvement in, for example, the Children and Young People's Partnership, the Police Consultative Group and the Connexions Shadow Board, has improved. This has resulted in young people feeding in their views and contributing to the decision making processes of these groups.

Young people have also contributed to a range of environmental improvements around the borough and were actively consulted and involved in the process of developing the Environmental Services work plan for 2007/08. This is an example of the Participation Strategy being implemented across the Council's services and partner agencies.

A young people's grant panel was established during the year to manage and allocate the Local Authority's Youth Opportunity and Youth Capital funds. Twenty six applications from young people were approved by young people on the grants panel, totalling £120,497. This has resulted in more positive activities for young people, including mobile provision, new sports facilities, and additional clubs and sports activities for disabled young people. As a result more young people have gained new skills and achieved accredited awards eg: through music projects, water sports, the Duke of Edinburgh Award Scheme and Millennium Volunteers. Overall during the past year an increased number of young people have had the opportunity to become more involved in decision making. The links between school councils and the Kingston Youth Forum have ensured wide involvement by young people across the borough.

MPC 1.2 Children and young people who are looked after by the Local Authority are also well supported to make a positive contribution. 90% contributed their views as part of the statutory annual review process, which is well above the national average of 79% and is consistent with the figure for the previous year in Kingston. The Independent Reviewing Officers report improved contributions and attendance with some young people taking a much more active role within the process. Further improvement is expected with new IRO contract arrangements. It is expected that improvements will be sustained and increased by activity of the LAC Participation and Development Officer whose role has been consolidated within the Looked After Service this year. Feedback from young people about their reviews and placement stability has been sought via the LAC Forums convened by the LAC Participation and Development Officer.

MPC 1.3 There has been very good progress in increasing the number of **disabled children and young people** who feel that their views are taken into account when developing services. This is an area of strength. All disabled looked after children are consulted and represented at their reviews with access to a suitable format for them to make a contribution. There has been good progress in maintaining the voice of disabled children and young people in their reviews. It is planned to strengthen this with the appointment of a Participation Officer. Individual disabled children and young people have requested changes through their reviews – including issues of diet, heating, and comfort. These have been monitored for appropriate action and followed up by the Independent Review officer.

The Family Support Service has developed a consultation method based on the Picture Exchange System that allows individual children and young people to indicate verbally or through signing or body language their preferences for the activities available in the holiday schemes. The performance is very good and noted to be outstanding by the CSCI inspection in December 2006. The impact of this work is very positive with many children with ASD and challenging behaviour being supported and choosing to access mainstream leisure pursuits, increasing their tolerance of change and transition and improving their socialisation. There is a high take up of the sessions and developments in planning the activities have resulted from working with the children and young people and their parent and carers. 66% of disabled children who attended holiday activities in 2006 were consulted about the programme.

To ensure children and young people develop positive behaviour and are law abiding

MPC 2.1 Very good progress has been made in reducing **the number of initial registration inspections of childcare with actions** for partnership with parents, behaviour or equal opportunities. Performance is very good. 98% of childcare providers registered between 1 April 2005 and 31 December 2006 had no actions for these national standards.

The Support Childminder Scheme is working effectively and offers support from experienced providers to prospective and newly registered childminders, which has reduced the number of actions issued at registration.

MPC 2.2 Our work to reduce **the number of first time offenders** in the youth justice system and reduce re-offending has resulted in a very disappointing increase in first time offending. In spite of good work by the YISP and changes to police procedure to maximise the potential use of penalty notices, the number of first time young offenders has increased to 170, compared to 161 in 2005. This increase against a baseline of 141 at 31.3.05 is currently 10.3%, compared to a London average for the nine months to December 2006 of 34%. The national target was 5% reduction over two years to March 2007.

The reasons for the sudden increase in the final quarter have been examined and relate in part to the conviction of a large group of young people (6) not known to the police before in connection with a single incident and some local police procedural changes. The current diversionary arrangements have now been reviewed with the police and the situation brought to the attention of senior officers who are briefing safer neighbourhood teams accordingly. The YISP continues to be an effective preventive and diversionary service. By January 2007 the YISP had worked with 38 young people aged 8-13, of whom only two then entered the youth justice system. This underlines the positive impact of early identification and intervention, which is a key priority. It is anticipated that increasing the age range of young people referred to the YISP to age 17, from April 2007, will reduce the number of first time young offenders.

MPC 2.3 No young people looked after by the Local Authority have received **final warnings** or convictions. There is very good knowledge of the young people who are currently looked after and up to date care planning. This helps to identify the risk of offending as a result of episodes of instability that can affect their lives. There is effective partnership between the YOT and Looked After services and looked after young people who are eligible may also be referred to the YISP.

MPC 2.4 Very good progress has been made in improving **the range of positive activities for young people**, and their participation, through integrated Youth Support Services. Performance in this area is very good and the target to increase the numbers of young people accessing positive activities has been well exceeded. The Positive Activities programme has developed well across the Service, with the development of term time activities for targeted young people. In addition to the 45 referred young people receiving key worker support an additional 99 young people have been involved in activities and term time projects. Activities have included music and art work, water sports and out door education. The Ofsted Inspection report published in December 2006 stated 'The Positive Activities programme contributes successfully to reducing anti-social behaviour through diversionary activities and one to one support for those who are disengaged or at risk of disengagement.'

To support children and young people to manage change and challenges successfully

MPC 3.1 A priority in the Children and Young People's Plan has been to increase the number of vulnerable children who make a successful **transition from primary to secondary school**. Performance in supporting young people to make a successful transition has been good. The percentage of pupils supported through transitions projects with no fixed term exclusions in Year 7 has improved to 97%, compared to 86% in 2005. During the year we have collected further data with regard to attendance and attainment of the young people who have previously engaged with the scheme, to assist with future service developments. We have continued to enhance and develop the programme of support to be able to meet the needs of the children identified and to continue good practice. In 2007/8 a pilot programme is being developed offering support to all primary schools in the borough. The programme will offer support to individual children highlighted by the school due to concerns about transition to secondary school. Consultations with Year 6 pupils across the borough were carried out on the 'Younglavin' website as part of Junior Citizens week to identify children's concerns about moving from primary to

secondary schools. 17% of all Year 6 pupils responded and the findings are currently being used to inform the on-going development of transition support projects. Secondary schools report improved induction for these pupils and improved progress in Year 7.

MPC 3.2 Plans to improve access for and the **participation of disabled children in out of school and leisure activities** show encouraging signs of progress. Parents and carers are very pleased with plans to increase specialist child care to half terms and Easter holidays. They are also pleased with the new weekend sports club, which is enabling more disabled children (currently 400 to access sports and leisure activities. There are now 169 children accessing specialist and inclusive holiday activities through the Family Support Service, which is an improvement. 18 disabled children are accessing swimming facilities on a regular basis. Other improvements include 84 disabled children who are able to access childcare provision and 25 young people who participated in the London Youth Games. A total of 349 disabled children and young people have participated in out of school activities in the past year. The Local Authority recognises that data collection and monitoring of activities for the participation of disabled children and families who want access to out of school activities needs further development. However there is evidence of good progress on this issue and baseline data has been established for a range of new activities. The newly appointed Inclusion Development Co-ordinator will monitor improvements closely for reporting in 2008.

MPC 3.3 The Local Authority continues to provide **effective advice and guidance**, through generalist and specialist services, so that more young people aged 14-19 make a successful transition to employment, training or continuing education. Performance in this area is very good. Kingston's NEET figures are very low and we continue to meet our targets to reduce them further. Young people are tracked and followed up closely to identify their needs and provide appropriate support. This good performance is achieved through very good multi-agency information sharing, summer events for NEET young people, tracking and follow up, co-operation from Kingston College over student information, and increased emphasis on employer contacts and vacancy seeking. The September guarantee works very well and is highly effective. There has been close working with schools to ensure that every young person has access to advice and guidance and that all young people age 16 have the opportunity to progress to full time education, work based learning, e2e or employment. The summer Connexions programme supports young people very well and all young people who are at risk of not continuing in education or training are targeted to ensure that they have every chance to apply and are supported appropriately.

Achieving Economic Well Being

Outcomes for economic well being continue to be outstanding. Good provision helps to ensure the majority of young people achieve economic well being; there is sustained improvement in attainment and progression, participation and staying on rates at KS4 and post 16. These are well above average for similar areas. Attainment at Level 2 for 19 year olds has improved and is above the national average. NEET figures are 3.3%, the lowest in south London and well in excess of agreed targets. Strong collaboration within the 14-19 Partnership, between the Local Authority, the FE College, schools, the LSC, training providers and Connexions, has led to improvements in the range and choice available to young people. The offer is becoming more inclusive and flexible to meet the needs of vulnerable groups. There is a wide choice of pathways. There has been good expansion of vocational courses and improved provision in school sixth forms. Schools work in close partnership with Connexions to ensure high quality careers education and guidance for the widest range of young people, including those not attending full-time education and those with LDD. In the latest DfES 14-19 progress checks, Kingston was RAG rated green on most indicators. High quality provision of childcare and early education helps families to access work and meets the needs of diverse groups of parents and carers. Childcare targets have been met and care is available through a wide range of providers. Children looked after are well supported to move into adult life with clear pathways to continuing education and training. Disabled young people and those with learning difficulties are also well supported to move towards more independent adult life with very effective transition plans, work experience programmes and appropriate education and training placements. There has been good progress in improving the key targets in the Children and Young People's Plan.

Key improvements where we have achieved progress in 2006-2007 include the following: increased provision of level 1 and 2 courses; improved vocational provision and increased involvement by employers in training and education; increased number of 19 year olds with 5 A*-C grades including English and maths; improved achievement of accredited awards by young participating in the Youth Service; increased number of young people involved in summer positive activities as part of the September Guarantee; improved provision in school sixth forms; improved direct payments; increased take up of affordable childcare; increased number of disabled young people engaging in work experience; and reduction in homes which fail to meet decency standards.

To continue to increase the number of young people in further education, employment and training

AEW 1.1 To increase **the number of young people in further education, employment and training** a key priority has been to expand the range of appropriate provision and pathways. The Local Authority and its partners continue to make good progress in expanding the range and flexibility of vocational courses at both Key stage 4 and 16-19, for Level 2 and Level 3 in schools and the College. We have exceeded the targets for increasing the number of Level 1 and 2 courses and met the target for Level 3 for 2007. Level 1 courses have increased from 10 in 2005 to 14 in 2006-2007, and Level 2 course have increased from 50 to 74.

Progress with the introduction of Level 1 courses has been slower in schools. The initial offer in our September Prospectus for 14-16 has still to be fully realised at this level. The destinations of the pupils involved in the Increased Flexibility Programmes show good outcomes for this provision. For example all the students following sports programmes returned to College to continue their course into the second year. This provision has helped to secure good outcomes for students who have benefited from applied learning programmes, some of whom were otherwise at risk of being NEET by the end of Key stage 4. A cohort of (24) students in Key stage 4 at risk of disengagement achieved accreditation at Level 1 through the Gaining Assets (GAP) pre E2E provision, funded through ESF with a local work-based training provider.

The improvement in the flexibility and range of 14-19 provision was confirmed as a strength in the 2006 Joint Area Review. Current data confirms that we have built further on these developments. Further work is being developed to ensure the 14-19 Diploma Gateways are available in good time.

AEW 1.2 Increased **vocational provision** has been supported by the greater involvement of local employers in training opportunities and curriculum delivery. The success of the Schools Vocational Development Service (SVDS) in delivering a high quality service has enabled the recruitment of 120 employers for 2006-7, significantly above target for this year. This is good progress. The development of our 14-19 diploma bid has strengthened collaboration for vocational delivery, as reflected in the final submission in December 2006 based on partnership working between schools in pre-arranged 'hubs', as well as good links with training providers. Employer representation from Kingston Chamber of Commerce and through Kingston and Merton Education Business Partnership has strengthened our bid. We still need to develop more specific skills sector links related to the three areas which have formed our initial bid: Creative and Media, Society, Health and Development and ICT.

The Schools Vocational Development Service continues to build very good employer links. It is now in its second year of membership of the Chamber of Commerce. This provides access to an on-line directory of members and to events to promote interest and further engagement. A key area of success has been in the further development of Post 16 work experience placement. The number has more than doubled to 64 placements for 2006-7 compared to the previous year. This reflects a high level of confidence in the programme and its outcomes on the part of schools.

AEW 1.3 A key priority is to continue to improve **the achievement of level 2 qualifications** post 16 so that more 19 year olds are qualified to this level. As well as the high performance at 5 A*-C GCSE grades at age 16, we have set a target to improve on this by 5% for each cohort by age 19. The 2005-2006 data provides a useful baseline for future analysis of overall completion rates. Further data and analysis is needed to establish the pattern of value added performance for non GCSE Level 2 courses. The completion of full Level 2 courses at Kingston College for 16-18 cohort is 500, with a further 193 achieving at level 2 post 19. This represents 68% (741) of learners who started courses, is 3% above the national average of 65% and an increase of 5% from 2004/5.

AEW 1.4 Very good progress has been made in **improving the proportion of 19 year olds with 5 GCSE A*-C passes including English and Mathematics**. 68% of 19 year olds attained this level in 2006 compared to 60% in 2005. This exceeds the target in the Children and Young People's Plan and it means the 2009 projection has already been reached as a result of improvements to provision and expectations for Level 2 attainment.

AEW 1.5 We continue to do very well in further **reducing the number of 16-18 year olds not in education, employment or training**. Performance in this area has been very good. This year's NEET target has been exceeded for both the Local Authority and the national Connexions target of 3.5%. The current NEET figure for Kingston is 3.4%.

Improved tracking and targeted support has had the greatest impact. Connexions PAs have found more inventive ways to track young people and referral from schools, of young people likely to be at risk of NEET in Year 11, have more than doubled ensuring much earlier intervention takes place. PAs are currently developing ways of working more specifically with employers to gain vacancies for young people. Participation rates are improving. We are confident that there will be further improvement in participation in post 16 education and training to approximately 89% by Year 11 students in 2007.

AEW 1.6 Very good progress has been made in the further **development of accredited programmes** achieved by young people who participate in Youth Service programmes. Performance in this area is very good. In 2006-2007 33% of young people received an

accredited award, which exceeds the target set and the national benchmark of 30%. The 2006 Ofsted inspection of the Youth Service rated this performance as 'Good', and in relation to accredited outcomes, stated that 'young people achieve well and many achieve very well'. Accredited learning is now embedded across all areas of Youth Service provision, providing opportunities for young people to learn new skills and gain new knowledge. The aim is now to offer a wider range of accredited learning to young people.

AEW 1.7 The **September Guarantee**, so that all 16 year olds have a definite offer of further education, employment or training, is implemented very effectively in Kingston. All Year 11 leavers in schools have received an offer of education, employment or training from 2006. This objective is closely monitored by the September Guarantee sub-group of the 14 -19 Strategic Partnership. Kingston has achieved the target of 100% set across Pan London by the LSC, Local Authorities and Connexions. 100% success was achieved through holding interviews school by school and persistent chasing by the Connexions Personal Advisers. Future summer activities programmes will be incorporated within the September Guarantee initiative to prevent young people becoming NEET. The JAR reported the careers advice and guidance provided by schools and Connexions as good. There is integrated working between the Education Welfare and Youth Support services to extend the offer of the September Guarantee to young people not in school. The expected impact is a further reduction in the NEET figures.

AEW 1.8 We have increased **the numbers of vulnerable young people aged 16 involved in targeted summer and other intervention programmes**, provided by the Youth Service and Connexions. This has further helped to ensure vulnerable 16 year olds have an appropriate destination. Performance in this area has been very good. The Positive Activities programme has developed well across the Service, and the target of 60 young people engaged in these programmes was exceeded in 2006. The Ofsted Inspection report in 2006 stated 'The Positive Activities programme contributes successfully to reducing anti-social behaviour through diversionary activities and one to one support for those who are disengaged or at risk of disengagement.' Future summer activity programmes aimed at year 11 pupils will be incorporated within the September Guarantee programme and action plan.

AEW 1.9 The Local Authority in partnership with schools is making good progress in improving **the quality and consistency of school sixth forms**. There is good capacity for further progress. We have increased the size of school sixth forms and reduced the number of sixth forms from 4 to 3 that fall below 170 students. The smallest single sixth form is Chessington Community College with 111 students. Three schools have sixth forms below 170 students: Chessington Community College, Southborough High School and Hollyfield School. Coombe Boys' School has 94 students on roll but these should be seen in the context of the Federation with Coombe Girls School. The capacity to meet future targets is good with plans for further collaboration between Southborough, Chessington and Tolworth Girls' School. Hollyfield has seen its sixth form numbers double in one year with potential for further growth identified.

To ensure looked after children and other specific groups achieve economic well being

AEW 2.1 The Local Authority continues to perform well in ensuring **looked after children and care leavers participate in further education, employment and training**. However there has been a dip in performance this year and the lower figure reflects a number of unaccompanied asylum seeking young people who have unfortunately not co-operated with the arrangements to make contact. Of the total number of Care Leavers this year (41) three gained University Places, ten are undertaking further education courses and five remain in school undertaking A level study. All Care leavers have Pathway Plans which include routes into continuing education, employment or training.

AEW 2.2 There is good **participation of black, minority and ethnic groups** aged 16-19 in education, employment or training. The participation of 16 – 18 year old black, minority and ethnic groups is very good at 93.5% for 2006/07 (an increase of 2.9% from 2005/6). The tracking

of BME groups in RBK is a strength and is reported quarterly at September Guarantee Sub Group meetings. This enables us to divert resources when needed to prevent young people becoming NEET. Recent concerns have been identified about a number of BME students becoming NEET at age 19, which would affect this overall picture. Further work is being carried out to investigate this and provide appropriate support to the young people.

AEW 2.3 Similarly the Local Authority continues to perform well in ensuring a high proportion of **16-19 year olds with learning difficulties and/or disabilities participate in education, employment or training**. Currently 75% are in education, employment or training, which is slight dip on the previous year due to the nature of the disabilities of a small number of young people in this cohort.

AEW 2.4 In the past year there has been an increase in the uptake of **direct payments** by families with disabled children, although it is still relatively low. Direct payments offer flexibility to some families, however, in Kingston most families utilise the Family Support Service in preference. Currently 3.5% of families with disabled children take up direct payments, compared to 2.35% in 2005-2006. Direct payments are an effective way for BME families to choose to recruit support that is more sensitive to their cultural needs and expectations. 20% of families receiving a direct payment are from BME communities. Direct payments uptake by young disabled people has been limited. It is planned to encourage greater uptake through direct consultation with young people in the 13+ Aspergers Group. The use of vouchers to purchase the Sitting Service or Family Support is more extensive and positively benefits parents/carers.

AEW 2.5 There has been good improvement in the availability of **affordable childcare** for families with young children. The number of settings on the Childcare Affordability Programme has increased to 7, compared to 5 in 2005. This has provided 63 Day Care places at a subsidised rate and 37 full day care places. Progress in take up has been satisfactory and work to increase uptake is showing signs of further improvement. The levels of uptake for the Childcare Affordability Programme are in line with other London Boroughs.

There has been good progress in improving the availability of childcare for disabled children and their families. However, we recognise that while small steps have been made this remains a key priority. An After School Group has been established at Dysart Special School providing 8 places, 5 nights of the week. Overall there has been an increase of 13 children accessing childcare, in addition to 84 disabled children already being cared for in childcare settings. The mapping and identification of gaps in childcare and leisure activities for disabled children will be completed by June 2007. The Inclusion Development Coordinator is working with and consulting a range of partners and providers to extend opportunities for disabled children to access mainstream recreational and leisure activities. There has been extensive consultation with parents of disabled children on the development of Extended Services and Children's Centres to ensure their needs are being met.

AEW 2.6 The Children's Information Service has improved **information on childcare settings**, (including childminders), who are trained and competent in meeting the needs of disabled children. The Local Authority's support to all childcare settings in carrying out their responsibilities under the DDA and offering places to disabled children has significantly increased. The Inclusion Development Coordinator is working with all group care settings offering tailored support and in-house training on the inclusion of disabled children into universal services.

AEW 2.7 Good progress has been made in supporting more **disabled children and those with learning difficulties to engage in work experience**. The number of disabled young people taking up a work experience opportunity has increased from 17 in 2005 to 22 in 2006. The performance in this area is good and improving. Disabled young people have benefited from a range of opportunities and this has recently been expanded to include 7 disabled young people taking part in the Local Authority's "Recruits Crew", which provides the opportunity to be involved in the appointment of staff. Partners in NCH have also begun to develop a 'Recruits

Crew' to provide the same opportunity at the Disabled Children's Centre at Warren Park. To date the disabled children in the Recruits Crew have taken part in 4 appointments and one of the young people on the Recruits Crew has also become an active member of Kingston Youth Council. We recognise that this work needs further development.

To ensure children live in decent homes free from low income

AEW 3.1 Good support is provided to parents and carers to claim **child tax credit**. Currently 15% of the eligible population in Kingston have taken up Working Tax Credit, which is slightly higher than the National average (14%). During the year a number of groups were visited and 712 families were seen and provided with up to date details of the Working Tax Credit and Children's Tax Credit. The Children's Information Service ran a publicity campaign throughout March 2006 which resulted in a 5% increase in general calls. All enquirers were informed about claiming their entitlement to Tax Credits following this campaign.

AEW 3.2 The Local Authority is doing well in **reducing the number of children that live in homes which do not meet decency standards**. Our performance is good and Kingston is placed in the top quartile nationally for the percentage (10%) of homes not meeting decency standards. This represents an improvement on the 15% of the previous year. We continue to prioritise investment in homes in order to meet the decency standard and have made good progress to date.

Kingston also continues to perform well, and above the national average, in reducing the length of stay in temporary accommodation for families with children and pregnant women. We make strenuous efforts to offer self contained emergency accommodation to all households with children or pregnant women. This indicator, together with others relating to the use of temporary accommodation, will be critical in meeting the government 2010 target of halving the number of households in temporary accommodation. A number of new initiatives are underway to assist in our meeting this.

Key Issues for Improvement

The following are the key issues for improvement or further development. They include targets in the Children and Young People's Plan where progress is slow or has been less than satisfactory or where performance has dipped in 2006-2007.

Being Healthy

- Make further progress on the strategy to halt the rise in child obesity
- Increase the percentage of secondary schools with a compliant sex and relationships education programme
- Reduce waiting times for ASD and access to therapy and equipment services
- Improve provision for speech and language therapy
- Increase childcare for disabled children and access to leisure and recreational activities out of school

Staying Safe

- Reduce Re-referrals to the Safeguarding Service
- Reduce the number of first time entrants to the youth justice system
- Reduce the number of LAC placed in residential accommodation or with carers more than 20 miles away
- Ensure the prevention strategy reduces levels of vulnerability and improves gaps in outcomes for vulnerable groups

Enjoy and Achieve

- Continue to improve standards in the foundation stage for communication, language and learning and standards in writing at Key stage 1
- Improve attainment at 1 or more A*-G grades at GCSE and reduce the number of pupils who finish key stage 4 without any GCSE qualification
- Close attainment gaps for gender, fsm and non-fsm pupils and some BME groups
- Reduce the number of days lost to secondary education through exclusions
- Continue to improve the attainment of looked after children
- Improve the percentage of SEN statements completed within 18 weeks where medical advice is required

Making a Positive Contribution

- Improve behaviour and participation in positive activities by reducing the number of first time entrants to the youth justice system and increasing the number of young people effectively supported through the YISP
- Increase participation by disabled children and young people in mainstream activities in and out of school, including youth services and positive activities

Achieving Economic Well Being

- Improve the number of care leavers in education, employment and training
- Improve the number of care leavers in suitable accommodation
- Continue to reduce the number of school sixth forms with fewer than 170 students
- Improve the number of BME students who are in education, employment and training at age 19
- Increase the number of young people aged 16-9 with learning difficulties or disabilities who are in education, employment and training

Service Management

The key issues in the Children and Young People's Plan for improvement in service management are:

- Implement a coordinated joint commissioning function to ensure effective use of resources
- Maximise the investment opportunities from the ECM: Primary Capital and Building Schools for the Future programmes by developing an integrated Vision and Strategy
- Ensure that inequalities in access to training and development amongst the children's workforce are reduced.

New Objectives in the Children and Young People's Plan

- Develop a multi-agency parenting strategy as part of the prevention agenda
- Reduce bullying and fear of bullying
- Improve the quality of teaching and learning through better ICT provision
- Improve transitions, including primary to secondary school and transition between services
- Further develop school cluster services to ensure the extended core offer is available and accessible to all children, young people and families who need them, across all parts of the borough