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# CHILDREN AND YOUNG PEOPLE OVERVIEW AND SCRUTINY PANEL TO FOLLOW PAPERS

DATE: THURSDAY 8 APRIL 2010

TIME: 10.00 AM

PLACE: COUNCIL HOUSE (NEXT TO CIVIC CENTRE)

#### Members -

Councillor Purnell, Chair Councillor Mrs Stephens, Vice Chair Councillors Mrs Beer, Bowie, Mrs Bragg, Delbridge, Reynolds, Roberts and Vincent

### **Statutory Co-opted Members -**

Mr T Lyddon – Church of England Diocesan Representative Mr K Willis – Parent Governor Representative

### **Co-opted Representatives -**

Ms A Kearnes - NSPCC Mr J Paget – Youth Parliament Representative Miss K Taylor – Youth Parliament Representative

#### Substitutes-:

Any Member other than a Member of the Cabinet may act as a substitute member provided that they do not have a personal and prejudicial interest in the matter under review.

Members are invited to attend the above meeting to consider the items of business overleaf.

Members and Officers are requested to sign the attendance list at the meeting.

BARRY KEEL CHIEF EXECUTIVE

### CHILDREN AND YOUNG PEOPLE OVERVIEW AND SCRUTINY PANEL

### 7. JOINT TASK AND FINISH GROUP

(Pages 1 - 18)

To receive the draft report 'A Focus on Reducing Teenage Conception Rates in the City'.

### 8. JOINT FINANCE AND PERFORMANCE MONITORING

(Pages 19 - 36)

To receive a report from the Head of Performance and Quality and Assistant Head of Finance.



Children and Young People Overview and Scrutiny Panel Joint Task and Finish Group Scrutiny Review – Report February 2010

### **DRAFT – Working Progress Version 4.0**

A Focus on Reducing Teenage Conception Rates in the City

**Plymouth City Council** 



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#### 1 Introduction

1.1 The Overview and Scrutiny Management Board approved in principle, on 2 September 2009 the establishment of a joint task and finish group that will set out recommendations to maximise the City's drive to reduce teenage conception rates in the City.

The Joint Task and Finish Group would achieve this through reviewing the effectiveness of the new Improving Young People's Sexual Health and Wellbeing: Strategy 2009-2012' and accompanying Implementation Plan. Through a series of briefings and interviews the Panel will seek to identify gaps and areas for development with the proposed strategy and plan. Particular emphasis will be placed on the role of the media and the messages that need to be conveyed. A report will be produced including a number of recommendations for improvement to support the implementation plan.

Membership was drawn from both Children and Young People and Health and Adult Social Care Overview and Scrutiny Panels. The Task and Finish Group will submit its findings for approval to the Overview and Scrutiny Management Board, prior to consideration at Cabinet and Council.

#### 2 The Panel

- 2.1 The Joint Task and Finish group had a cross-party membership comprising the following Councillors
  - Councillor Purnell (Chair)
  - Councillor Mrs Aspinall (Vice Chair)
  - Councillor Delbridge
  - Councillor Mrs Stephens
  - Councillor Mrs Watkins

For the purpose of the review, the joint task and finish group was supported by -

- Dave Schwartz, Strategic Commissioning Officer Lead Reducing Risk Taking Behaviour
- Patrick Hartop, Policy and Performance Officer
- Amelia Boulter, Democratic Support Officer

### 3 Scrutiny Approach

- 3.1 The task and finish group convened on five occasions to consider evidence and hear from witnesses -
  - 21 October 2009
  - 11 November 2009
  - 24 November 2009
  - 22 January 2010
  - 22 February 2010

3.2 At its meetings on 21 October, 24 November and 22 January, the task and finish group considered evidence from witnesses, raised questions and considered answers and recommendations relating to a focus on reducing teenage conception rates in the city.

#### 4 Witnesses

- 4.1 The task and finish group heard representations from
  - Teenage Parents
  - Plymouth Centre for Young Parents
  - Young People's Sexual Health Team
  - Personal, Social, Health and Economic (PSHE) Education
  - Plymouth District Scouts
  - Plymouth City Council Youth Service
  - Connexions
  - Education Welfare Services
  - Harbour Young People's Specialist Substance Misuse Team
  - Team Manager, Children's Services
  - Foster Carers
  - Children's Social Care
  - Community Contraception and Sexual Health Service
  - Midwifery
  - Family Nurse Partnership

### 5 Acknowledgements

5.1 The Joint Task and Finish Group wish to thank and acknowledge the contribution from the witnesses and council officers. The Panel would like to state a special thank you to the teenage Mums who attended to give evidence. The evidence provided by the teenage Mums was powerful and the Panel hope that the recommendations that have followed reflect some of the important issues they raised.

### **6** Executive Summary

- 6.1 The Overview and Scrutiny Management Board established a Joint Task and Finish Group to undertake a review that would focus on how the city can maximise its impact on reducing teenage conception rates in the city.
- 6.2 The Group was asked to make recommendations on
  - the effectiveness of the 'Improving Young People's Sexual Health and Wellbeing: Strategy 2009 2012' and accompanying Implementation Plan;
  - areas of development with the proposed strategy and plan; and
  - the role of the media.
- 6.3 The Group heard representations from a variety of witnesses and received questionnaire responses.

### 6.4 Key findings included;

- the City's new strategy shows a greater coherence then previous and reflects a wide Partnership response. The City must ensure that the approach is joined-up and avoids letting young people slip through the net;
- reducing harmful risk taking behaviour (including reducing unprotected sex) is an important priority and this agenda should be championed at the highest level in the City;
- there are clear links between income inequality and teenage pregnancy levels;
- 9 neighbourhoods (out of a total of 43) account for 45% of all conceptions in the city. These neighbourhoods are also some of our most deprived neighbourhoods;
- teenage pregnancies can sometimes be seen as route to a positive experience in loving relationships for the young Mums and Dads – this is particularly true where low self esteem or low aspiration were factors;
- poor attendance at school has a significant affect on young people's vulnerability to becoming pregnant;
- respectful and healthy relationships need to be a more prominent part of the message to help delay sex and promote sexual health and wellbeing;
- uptake of Local Authority training for secondary school staff on Relationships and Sex Education is improving but inconsistent – with most schools now engaging;
- teachers do not appear to have sufficient time to undertake training on sexual health matters:
- the quality of RSE across all schools is improving but inconsistent. As part of the new Sexual Health Strategy a Task and Finish group focused on schools will seek to address this inconsistency;
- it is clear that young people vulnerable to harmful risk taking, including having unprotected sex, should be identified as early as possible and schools have a key role in achieving this;
- parents and carers need to feel able to talk about these issues with their children;
- issues around boys and young men have not been adequately addressed;
- media messages and the range of media available mean that young people are exposed to many sexualised images and sex-related articles. This can give an impression that the majority of young people are sexually active and increase pressure on young people to have sex when they are not ready;

- use of different media mediums such as social networking sites should be explored to get messages out to young people about relationships, sex and where to get support with the aim of reducing any pressure to have sex when young people are not ready;
- there is a need to improve co-ordination of grant funding that aims to impact on reducing risk- taking behaviour (including reducing unprotected sex);
- there is evidence of pockets of best practice across the city with a wide variety
  of providers involved in delivery. Scrutiny took evidence from many people,
  representing a wide range of services doing really good work;

### 7 Recommendations

- 7.1 The Joint Task and Finish Group have agreed the following recommendations. The first recommendation should be driven by the Local Strategic Partnership and the remaining recommendations should be given enhanced focus within the City's implementation plan to support delivery of the City's Young Peoples Sexual Health Strategy
  - (1) The City must strive to raise aspirations of all people particularly young people and this will support a reduction in teenage conceptions;
  - (2) Governance and accountability for the delivery of this agenda must be clear with a named senior champion at the highest level promoting the City's drive to reduce harmful risk taking behaviour including unprotected sex. An effective Partnership, working to a clear and transparent understanding of the financial costs to support the delivery of this agenda is required across Plymouth City Council, Plymouth NHS and the Voluntary and Community sector;
  - (3) Key services must have the capacity and be competent to identify, at the earliest point, vulnerability to teenage pregnancy (and other harmful risk taking behaviour). Primary and Secondary Schools are pivotal in this identification. The City must then be able to provide personalised holistic support to the young person that can contribute to outcomes linked to an increase in self esteem, aspiration and attainment. The work of Education Welfare Officers should be further explored to determine their potential to maximise their role in early identification and support;
  - (4) The City must aim to provide a consistently delivered, high quality, age appropriate Relationship and Sex Education (RSE) programme in all schools (primary, secondary and alternative provision) with Governors and members of Senior Management Teams committing to training to support the delivery of Relationship and Sex Education in their schools;
  - (5) Within the Relationship and Sex Education programme the relationship of substance (including alcohol) misuse to high risk sexual activity, and media messages on sex, should be addressed;
  - (6) Issues for boys and young men need to be equally addressed through our planning and delivery of services;

- (7) Families should be able to talk about relationships and sex, with parents /carers having access to clear advice for help and identifiable sources of support;
- (8) The City needs to ensure that data reflecting use of the emergency contraceptive pill by under-18s from Pharmacy's is collected to further improve understanding of need and support meeting need
- (8) Services for Children and Young People need to clearly promote messages that support equipping young people with the skills to resist harmful risk taking behaviour including unprotected sex. Alongside acknowledging the legal age of consent to be 16 the City needs to promote the notion of a young person making healthy choices about their sex life including understanding the implications of becoming a parent. To support this, the City should explore how to best utilise young people's use of information, advice and support through a range of media systems e.g. internet; mobile phones; magazines posters etc;
- (9) Services for Children and Young People need to ensure routine engagement with young people to help shape strategy, service planning and design in line with best practice and innovative developments.



## **Request for Scrutiny Work Programme Item**

1	Title of Work Programme Item	A Focus on Reducing Teenage Conception Rates in the City.
2	Responsible Director (s)	Bronwen Lacey, Director of Services for Children and Young People
3	Responsible Officer tel No.	Dave Schwartz, Strategic Commissioning Officer - Lead Reducing Risk-Taking Behaviour ext: 7561
4	Aim	To review the Strategy and develop the accompanying Implementation Plan with a specific focus on those areas having a clear impact on reducing the teenage conception rate of the city
5	Scope	The Panel to review the effectiveness of the Improving Young People's Sexual Health and Wellbeing: Strategy 2009-2012' and accompanying Implementation Plan. Through a series of briefings and interviews the Panel will seek to identify gaps and areas for development with the proposed strategy and plan. Particular emphasis will be placed on the role of the media and the messages that need to be conveyed. A report will be produced including a number of recommendations for improvement to support the implementation plan.

5	Objectives	To:
	•	<ul> <li>provide an overview of deep dive findings from national teenage pregnancy unit – this sets out best practice and is the basis for determining areas of improvement in the city. Specific challenges to reducing the teenage conception rate in Plymouth will also be identified</li> </ul>
		Brief Scrutiny Panel on areas of activity requiring most improvement and establishing a clear understanding of who currently delivers this activity or whether there are gaps in service provision
		Gather evidence from a series of panel interviews with key local stakeholders
		<ul> <li>Produce a report summarising findings including a communications plan and key recommendations.</li> <li>Report to be received by the Responsible Officer by October 26<sup>th</sup> 2009 to support completion of the Implementation Plan.</li> </ul>
	Benefits	Greater understanding of what works and why in Plymouth
		<ul> <li>Smarter delivery plan focused on areas for greatest improvement</li> </ul>
		Greater clarity on how to create media images
	Beneficiaries	All children and young people in the city
6	Criteria for Choosing Topics	<ul> <li>Focus on reducing teenage conception rate of the city</li> <li>Focus on delivery that requires most attention in regard to improving performance and meeting best practice criteria</li> <li>Focus on improving coherent communication of</li> </ul>
	Exclusions	strategy through media
		All areas of the strategy that do not require significant improvement in support of reducing the teenage conception rate

8	Programme Dates	<ul> <li>PID to be completed by 21.08.09</li> <li>PID submitted to Overview and Scrutiny Management Board 02.09.09</li> <li>PID submitted to Health and Adult Social Care OSP 23.09.09</li> <li>PID submitted to Children and Young People OSP 24.09.09</li> <li>Task and Finish Group meeting to take place by 26.10.09</li> <li>Sexual Health Strategy and Implementation Plan to be finalised by 31.10.09</li> </ul>		
	Timescales and Interdependices	Milestones	Target Date for Achievement	Responsible Officer
			Report from Scrutiny to be with Responsible Officer by October 26th	Dave Schwartz
9	Links to other projects or initiatives / plans	Corporate Improvement Priorities CIP 7 Keeping Children Safe?? CIP 8 Improving skills and educational achievement?? Children and Young Peoples Plan 2008 – 2011 Priority 8  Stretch targets Reduce the under 18 Teenage pregnancy rate - conception rate (conceptions to women aged less than 18 years per 1,000 women aged 15-17 years inclusive)		
10	Relevant Overview and Scrutiny Panel		g People Overview a ocial Care Overview	
11	Lead Officer for Panel	Richenda Broad, Ad Policy and Performa	cting Asst Director, C ance	commissioning,
12	Reporting arrangements	02.09.09 HWB OSP (to set m	Board (to approve th nembership) – 23.09 embership) – 24.09.0	.09
13	Resources	<u>-</u>	fficer will support the yas will a Policy Offic	•
14	Budget implications	Mainly within existing	ng resources??	

15	Risk analysis	The work of Scrutiny will help maximise a determined drive to reduce teenage conceptions set within a broad strategic approach to improving young people's sexual health. The work will therefore support the city in impacting on one of its priority areas. For Scrutiny to not be involved will reduce the potential impact on this priority.
16	Project Plan / Actions	



### National Strategy, Plymouth's Response, Performance and Need

### 1. National Strategy

- 1.1 The reasons for tackling teenage pregnancy are well documented and include health and wider inequalities issues. For example:
  - teenage mothers are 22% more likely to be living in poverty at 30, and much less likely to be employed or living with a partner;
  - teenage mothers are 20% more likely to have no qualifications at age 30;
  - teenage mothers experience 3 times the rate of post-natal depression and have a higher risk of poor mental health for 3 years after the birth;
  - teenage mothers are 3 times more likely to smoke throughout their pregnancy, and 50% less likely to breastfeed, with negative health consequences for the child;
  - children of teenage mothers have a 63% increased risk of being born into poverty and are more likely to have accidents and behavioural problems;
  - the infant mortality rate for babies born to teenage mothers is 60% higher;
  - the majority of teenage pregnancies are unplanned and nearly half end in abortion;
  - many of the above issues are equally relevant to teenage fathers;
  - England's teenage pregnancy rate is much higher than comparable Western European countries;
- 1.2 The Teenage Pregnancy Strategy (1999) set out a national target to halve the under 18 conception rate by 2010

### 2. Plymouth Response

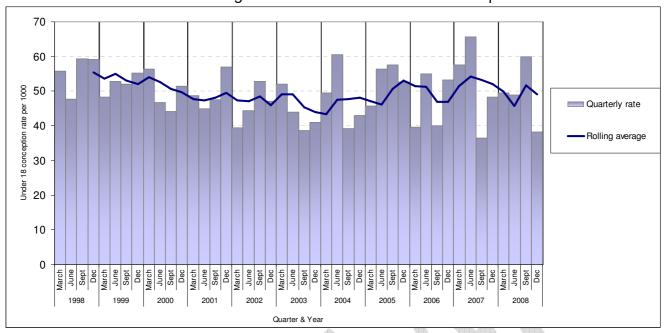
- 2.1 As well as working toward the national target Plymouth agreed a local stretch target requiring a drop from the base-line of 57% by 2010.
- 2.2 During the Summer of 2008 as a recognition of slow progress against the City's targets Plymouth's Director of Public Health and the Director of Children's Services requested a 'summit' of key stakeholders take place to address performance.
- 2.3 The 'Summit' led to a short term action plan. Key outcomes from this plan were an improved strategic coherence and drive across the partnership and an enhancement in activity in the City commencing quarter 4 in 2008.

- 2.4 The basis for developing a longer term strategy was set in motion and in the following year a needs assessment was undertaken, strategy produced and a comprehensive implementation plan is now being completed. Activity is increasing and the use of data and intelligence has clearly improved.
- 2.5 The new strategy is called, Improving Young People's Sexual Health and Wellbeing. The strategy has 4 key strategic outcomes. These are (1) Increased resilience and raised aspirations of children, young people and their families to improve sexual health and wellbeing (2) Young people are enabled to engage with safe and responsible behaviours that promote sexual health and wellbeing needs and choices (3) Young people have access to and utilise high quality, locally delivered and timely support and services that respond to their sexual health needs and choices (4) Systems will be in place that facilitate effective delivery of integrated sexual health advice, services and support to young people and their families
- 2.6 A new Young Peoples Sexual Health and Teenage Pregnancy Partnership is the group that is accountable for the delivery of the Sexual Health Stratgey. This Partnership reports to the Children and Young Peoples Trust Executive Group.

#### 3. Performance and Need

- 3.1 The Scrutiny Panel Joint Task and Finish Group held its final meeting on February 22<sup>nd</sup> 2010. On February 24<sup>th</sup> the latest official data was released covering the year 2008. This data and some brief analysis are included to ensure this report reflects the most up to date information available.
- Progress to date shows that the latest official (provisional) data for 2008 under-18 conception rate for **England** was **40.4** per 1000 girls aged 15-17 – a decrease of 3.2% from the 2007 rate and the lowest rate for over 20 years. Since the 1998 baseline, the under-18 conception rate has fallen by **13.3%**.
- The latest official (provisional) data for 2008 under 18 conception rate for **Plymouth** was **48.6** per 1000 girls aged 15 -17 a decrease of 2.5% from the 2007 rate. Since the baseline, the under-18 conception rate has fallen by **11.2%**.

3.4 Quarterly rates in Plymouth Unitary Authority (Source: ONS) from the 1998 baseline. The change in baseline reflects an 11.2% drop.



- 3.5 For Plymouth in 2008 the percentage of conceptions leading to termination was 47% which reflects a 9% increase on the 2007 figure of 38%. The average % for conceptions leading to termination over the 11 years since baseline is 39.6%.
- 3.6 Data for 2008 (covering 2005-2008) shows that the number of repeat abortions for under 18s in Plymouth was 3.5% (n=10) of all abortions for under 18s. For England this figure is 7.7%. Plymouth's performance is good as this is significantly lower than the England average.
- 3.7 For 2008/09 the % of under 18s using the Community Contraception and Sexual Health Service that then use long acting reversible contraception (LARC) is 22%. Plymouth's performance is good as this is significantly higher than the England average of 11.5%.
- 3.8 2008 shows a drop in the actual number of conceptions by 17 from 234 to 217.
- 3.9 For quarter 4 of 2008 (Oct Dec) Plymouth had the 2nd lowest number of conceptions in any one quarter since the baseline in 1998. The number of conceptions for quarter 4 was 42 (lowest ever was 41 during quarter 3 2007). This is the lowest ever number of conceptions for quarter 4. The average number of conceptions during quarter 4 for all years since the baseline in 1998 is 55. The quarter 4 2008 number therefore represents 13 less than the average which also reflects a 24% drop on the average for quarter 4. During quarter 4 2008 the partnership stepped up activity significantly in line with the short term action plan in place at the time.
- 3.10 The evidence leads to the conclusion that the City should be cautiously optimistic that efforts as a partnership, that were stepped up in quarter 4 2008, have begun to improve impact.

- 3.11 Though the City is a long way off reaching the national target (50% drop from baseline) and local stretch target (57% drop from baseline) performance with respect to the % change from the base-line when compared to the whole of England is 2.1 % off the average. The whole country has therefore found the national target a very challenging task.
- 3.12 Plymouth also uses local data (known as proxy data) to help with planning. This data does not count conceptions in the same way as the official data and should not therefore be compared with the official data. However this data does provide some important evidence. This includes:
  - 9 neighbourhoods (out of a total of 43) account for 45% of all conceptions in the city. They are also some of our most deprived neighbourhoods;
  - there is a 4 fold difference in conceptions when comparing least deprived to most deprived neighbourhoods;
  - in 8 out of the top 9 neighbourhoods we identify occasions where clusters of 3, 4 or 5 conceptions occur in a single month. These stand out when compared to the average monthly conception numbers and we have been able to determine through partnership analysis that in many cases these clusters are linked by friendship or through events e.g. a party.
- 3.13 Levels of deprivation are higher in Plymouth than England as a whole. 53.9% of Plymouth people are in the bottom two quintiles for deprivation. Given the relationship of teenage pregnancies and conceptions to deprivation this infers that we also need to address deprivation to impact on teenage conception rates.
- 3.14 Plymouth and Children Young Peoples Trust assessment of sexual health need identified 3 main areas we need to focus on. Further work on the strategy and implementation plan recognises some key issues we need to address to meet these needs.
  - first, in any population where there are sexually active young people we will see a number of conceptions take place. In order to minimise the number of conceptions there needs to be support for parents and carers to be able to speak to their children about relationships and sex, high quality relationship and sex education delivered through schools, a range of accessible high quality universal provision providing access to information, advice and support including access to contraception;
  - second, young people who drink alcohol and whose judgement then becomes impaired may become sexually vulnerable leading to sex that is regretted. In order to minimise conceptions we need to ensure that young people understand the consequences of alcohol on decision making and that targeted provision is in place providing access to information, advice and support including access to contraception. The capability to identify early emerging risk taking behaviour and provide support to address this is significant;

- third issues around low aspiration and low self esteem have strong links to teenage conceptions. In order to minimise conceptions we need to better understand what may delay decisions to become pregnant or engage in harmful risk taking behaviour. There are also strong links here with agendas aiming to address the inequality gap; trans-generational expectations, improving attainment and raising aspiration. The capability to identify early emerging need and provide support to address this is significant.
- 3.15 The current strategy is new and the implementation plan being finalised. Impact of the strategy with respect to achieving its strategic outcomes is too early to determine though activity from quarter 4 2008 and subsequent continual increases in activity supports a view of being cautiously optimistic.



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# Page 19 Agenda Item 8

**Report to:** The Children and Young People Overview and Scrutiny Panel

Held on: 8 April 2010

**Subject:** Joint Finance and Performance Report

Extracts from the 2009/10 Joint Finance and Performance Report considered by Cabinet on 16 March 2010 relating to Children's Services.

Budget Monitoring to the end of January 2010

Area of Report attached	Document Page number(s)
Executive Summary	2-3
General Fund Summary Table	4
Main Departmental issues	5
Children's Services Departmental Business Report	6-10
Appendix A (Graph) Monitoring comparisons 2008/09 and 2009/10	11
Appendix C LAA Report	12-18

#### **CITY OF PLYMOUTH**

**Subject:** Joint Finance and Performance Report

Committee: Cabinet

**Date:** 16 March 2010

Cabinet Member: Councillor Bowyer and Councillor Ricketts

CMT Member: CMT

**Author:** Sandra Wilson (Corporate Accountancy and Finance

Manager), Patrick Hartop (Policy and Performance Officer)

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Ref: SW

Part:

### **Executive Summary:**

This report outlines the performance monitoring and finance position of the Council as at the end of January 2010.

The primary purpose of this report is to report on how the Council is delivering against its corporate improvement priorities and key performance measures using its capital and revenue resources. It is deliberately strategic in focussing on key areas of performance, spend and risk, and includes under each Departmental Business section a one page scorecard, incorporating a summary of progress against the relevant Corporate Improvement Priorities and financial performance.

At this stage, the Council is forecasting a revenue overspend at year end of £3.146m against a net revenue budget of £196.525m (a variation of +1.6%). However this will reduce to £0.399m after applying a number of corporate health adjustments as approved by Council at its meeting of 1 March 2010. The main variations continue to relate to the increased pressure in children social care as well as cost pressures in adult social care and loss of income due to the economic climate.

The report also outlines the latest position on the capital programme. Our overall assessment of year end spend is £95.8m which remains affordable. Actual spend on the capital programme as at end of January 2009 is £62.364m.

Into the medium and longer term the Council is facing significant pressures due to the national economic situation, the Local Government funding settlement and local demand led pressures.

### Corporate Plan 2009-2012:

This bi-monthly report is fundamentally linked to delivering the corporate improvement priorities within the Council's Corporate Plan.

# Implications for Medium Term Financial Plan and Resource Implications: Including finance, human, IT and land

Resource implications are referred to throughout the report and an update on the implications for the medium term for both revenue and capital is included within the report. It is intended that the Medium Term Financial Forecast will be updated regularly throughout the year to take account of the variances and pressures identified through this reporting.

Other Implications: e.g. Section 17 Community Safety, Health and Safety, Risk Management, Equalities Impact Assessment, etc.

#### **Recommendations & Reasons for recommended action:**

A number of recommendations have been made throughout the report in response to specific monitoring information. The recommendations are:

- 1. The forecast revenue overspend is noted, and the actions of Directors to reduce this overspend.
- 2. The movement on the capital programme during the period be noted and the inclusion of new schemes totalling £8.148m, outlined paragraph 6.6 and scheme variations/reprofiling totalling (£5.697m), outlined in paragraphs 6.7 and 6.8, be added to the programme for 2009/10

### Alternative options considered and reasons for recommended action:

Actions are recommended in response to specific variances in either performance and / or finances as identified throughout the report.

### **General Fund**

3.3 Table 2 summarises the monitoring position for each Directorate for the period up to 31 January 2010. Appendix A tracks the movement during the year in graphical form.

Table 2

Department	Latest Approved Budget £'000	Monitoring Variation as at 31 January 10 £'000	Percentage variation %	Change in Period £'000
Children's Services	52,217	1,559	3.0	380
Community Services	102,804	1,345	1.3	(138)
Development & Regeneration Services	16,318	384	2.4	(239)
Corporate Support	35,536	(139)	(0.4)	(112)
Chief Executive	2,750	(64)	(2.3)	(40)
Corporate Items	(13,100)	61	(0.5)	219
Sub Total	196,525	3,146	1.6	70
Less Corporate Health Adjustments				
LABGI	0	(229)		(229)
Fleming VAT refunds	0	(2,144)		(2,144)
Planning and Housing Delivery grant		(374)		(374)
Adjusted Total for year	196,525	399	0	(2,677)

- 3.4 The budget variation targets of no more than 1% overspend or 2% underspend remain in place for 2009/10. The summary table shows that the monitoring position across service budgets has deteriorated further during the period and that an overspend of £3.146m, or 1.6% when compared to net revenue budget, is now forecast for the year. Directors have enacted a number of delivery plans within the current financial year to drive through budget savings, and will continue to prioritise spending reviews in the remaining weeks of the financial year. However a number of exceptional costs incurred, such as enabling the housing stock transfer, and increased service pressures in such areas as safeguarding children and adult social care, has made it difficult to achieve a balanced budget.
- 3.5 We have maintained a focus over recent years to build, and retain, adequate working balances and improve our overall Use of Resources assessment. With this in mind, we propose that the final end of year overspend be funded through:

  (a) The Council has been working in partnership with PriceWaterhouse Coopers to reclaim VAT brought about through changes in legislation, which has successfully resulted in a 'one-off' repayment of £2.144m from HM Customs of Excise. This has been detailed in previous monitoring reports throughout the year and Cabinet have

previously approved that this amount be transferred to reserves, subject to the final position for the year;

- (b) We have received notification of a further Local Authority Business Growth Incentive (LABGI) grant of £0.229m for 2009/10. As in previous years, we have continued to use existing revenue budgets in 2009/10 to support the local economy and we again intend to use this new grant allocation as part of the year end adjustment;
- (c) Within the budget monitoring forecasts for the Development and Regeneration department we have accounted for a Housing and Planning Delivery Grant of £0.375m. The council has recently received notification of an additional £0.374m Housing Planning Delivery Grant allocation for 2009/10 which, to date, has not been accounted for in current budget monitoring;
- (d) Continued departmental management action to reduce spend up to 31 March 2010 (and beyond).
- 3.6 The individual Directors reports in section B outline in detail the reasons for the variations on their budgets with the main issues summarised below:
- 3.6.1 Children's Services: forecast overspend of £1.559m

There has been an increase in the forecast outturn of £0.380m since the last report.

The main variations include:

- Pressures of £0.093m relating to the Children's Services element of the Carefirst project over and above the budgeted sum (total contributions in 2009/10 required of £0.264m partly met by utilising the carry forward of £0.129m from 2008/09 and £0.043m for ME learning from within the social care Training Budget)
- Additional costs of extended parent and child placements totalling £0.144m
- Care leavers £0.129m due to a combination of additional cost of accommodation and placements for 16/17 year olds arising from the Southwark judgement
- Other cost pressures have been mostly offset by increased vacancy savings

Management action continues to be taken to minimise the overspend at outturn including a reduction in the number of agency staff across the department

### 3.6.2 Community Services: forecast overspend £1.345m

The latest forecast is £104.151m against a revised budget of £102.804m, representing a forecast year end adverse variance of £1.345m (1.31%).

The forecast position represents a net performance compared to budget of:

- Adult Social Care of £2.000m adverse
- Culture Sport and Leisure of £0.099m costs adverse
- Environmental Services (£0.149m) favourable

ring-fenced receipt as per 9 February 2010 cabinet budget report - recommendation 3)
Capital receipts received in 2009/10 as at 31 Jan 2010

1,872

Capital receipts available as at 31 Jan 2010

<u>6,661</u>

### **SECTION B- DEPARTMENTAL BUSINESS REPORTS:**

Key budget and CIP variations for each department are shown in scorecard format. Where there is a risk in relation to achieving either performance indicators, key CIP milestones and/or budget out-turn within agreed tolerance levels, 'Amber' or 'Red' tags have been displayed. Mitigation action to address such risks is detailed by each department.

### 8. Children's Services

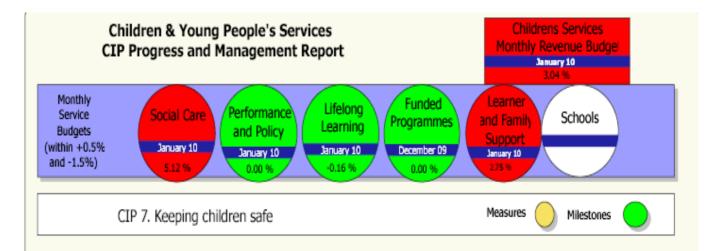
### 8.1 Corporate Improvement Priorities:

The Children's Services department is leading on the following Corporate Improvement Priorities:

- Keeping Children Safe (CIP 7)
- Improving skills and educational attainment (CIP 8)
- Developing high quality places to learn in (CIP 9).

### 8.2 Progress against priorities

The following strategy map outlines the progress against each CIP.



Initial (IAs) and Core Assessment (CAs) are continuing to be monitored on a weekly basis. The placement stability indicator remains challenging with increasing demand for placements. Placement stability meetings were introduced into practice last year and are being fully embedded. Our recruitment strategy with a large recruitment campaign for Foster Carers have seen a large number of enquiries/responses and we anticipate over this year will impact positively on placement stability. There is a substantially higher number of children with a child protection plan but plans have not drifted. After achieving our target in 2008/9 and bettering the Nat. Avg. by 2.3% the first 6 months of 2009/10 has seen this trend continue. We expect to confidently meet targets at year end. Budget pressures are being experienced particularly with regard to staff resources. As work demands increase there is a need for more qualified social workers and experienced managers.



Performance improvements have been made in key areas identified within this CIP, especially Foundation Stage and KS4. There have been particular improvements to narrow gaps in attainment between those pupils entitled to free school meals and those who are not.

The latest validated data for education attainment for children in care shows 41% children in care attaining Key Stage 2 English and 32% attaining Key Stage 2 Maths. This performance is based on results from summer 2008. Validated results from 2009, due early in January, show significant improvements, borne out from individualised support to children with more than 50% achieving the target level. It is important to note that the very small size of cohort means that year on year comparisons should be treated with caution. The number of young people aged 16-18 who are not in education, employment or training is 6.9% This has been achieved against a difficult regional and national position. Early indications are that there has been a significant rise in the post 16 staying on rate. Plymouth continues to experience a declining labour market with the lowest current stock of vacancies for any local authority area in the region. A number of meetings have been held around managing responses to the recession between Connexions and specific employer groups and agencies



Plymouth's Initial project is in the BSF Programme. This will allow significant investment to be made into secondary provision including a new school for the SW of the city. There is a buoyant atmosphere despite the long term pessimistic views about the effects that a reduction in public spending will bring.

### 8.3 Revenue Budget Monitoring - £1.559m overspend, 3.04% of Net Budget

The key reasons for the overspend are:

### a) Policy and Performance – break-even

A contribution to the Carefirst project of £0.264m has been included within policy and performance section which will be partially met by the departmental carry forward from 2008/09 of £0.129m and £0.043m for ME Learning in the social care training budget. The budget for Carefirst will need to be vired to the Corporate project by the end of the year.

Efficiency savings and the maximisation of grant income have been identified to meet remaining pressures and deliver action plans.

### b) Learner and Family Support - £0.257m overspend 2.75% of net budget

This area is experiencing pressures on school transport, particularly relating to escort costs for Early Years placements and the integrated disability service. These are being partially offset by vacancies and general reigning in of expenditure.

### c) Lifelong Learning - (£0.021m) underspend (0.16%) of net budget

This area is forecast to return a modest underspend of (£0.020m) at the year end due to employee related savings being significantly in excess of the target offsetting a variety of cost pressures as previously reported.

#### d) Social Care - £1.322m overspend 5.12% of net budget

There has been an adverse variation of £0.320m across the whole range of Children's Social Care budgets since the last report mainly due to:-

- Additional costs of extended parent and child placements totalling £0.144m
- Rise in the Independent sector placements. There are now 406 placements within Children in Care which is an increase of 29 since the published number of 377 in April 2009
- Care leavers £0.129m due to a combination of additional cost of accommodation and placements for 16/17 year olds arising from the Southwark judgement. The impact of this on the homelessness budget (which formerly met the cost of accommodation for this client group) will need to be assessed with a reallocation of budget resources made as appropriate.

As set out above, there are a number of known variations that have been reflected in the monitoring forecast. Action Plans are currently being progressed in the following areas to mitigate against the potential overspend:

- The home to school transport policy is undergoing a review;
- The Integrated Disability Service direct payments has been reviewed in conjunction with wraparound packages of care and independent sector placements for children;
- General efficiencies including ongoing review of agency staff and temporary staffing arrangements, stationery and conferences.

Indications are that whilst management action will continue to be taken to minimise the forecast overspend during the year, national and local high profile media cases are increasing the pressures on the service.

### 8.4 Progress against 2009/10 Action Plans

£3.540m of action plans were set within the 09/10 revenue budget for Children's Services. At present, Action Plans totalling £2.254m have been, or are on course to be, achieved and ranked green, with £0.124m assessed as Amber presenting some risk and £1.162m assessed as Red presenting a high risk of not being achieved. Management action will continue to be taken to minimise this variation in the context of the issues raised above where the safety of children is not compromised. Examples of actions being implemented are shown above.

### 8.5 Dedicated Schools Grant (DSG)

The Council receives funding for Schools through the Dedicated Schools Grant. The grant funds expenditure either directly through the Individual Schools Budget (ISB) or incurred by the Council on behalf of schools. Any over or underspends on the DSG are carried forward.

December 2009 monitoring of the DSG reported to Schools Forum on 25 January 2010 indicated a forecast pressure of £0.984m (an adverse variation of £0.045m since the previous report). The pressures are mainly due to the increased costs of special educational needs statements and the cost of school redundancies being significantly in excess of the budgeted figure. As over and underspends on the DSG are carried forward this will be a pressure in 2010/11 in addition to the £0.321m brought forward to 2009/10 which will have to be 'repaid' and is a commitment for next year. Although the Council's general fund is not directly affected by the adverse position on the DSG, budgetary pressures on Schools could impact on various performance indicators for the Council.

### 8.6 Key High Level Risks

- Achieving the challenging Children Social care budget reduction whilst ensuring that safeguarding issues are not compromised
- Recognising that many of the performance indicators are the responsibility of Partners (as Leads) requiring the development of aligned or pooled budgets

### 8.7 Departmental Medium Term Forecasts

The 2010/11 budget will be finalised on 1 March 2010 at full Council. Each Department has been issued with a budget target for 2010/11. Indicative targets for 2011/12 and 2012/13 will be issued as part of the update to the Medium Term Financial Strategy. Targets will change during the year as budget virements are actioned as part of the management process.

However, the key issues facing this department over the medium term are delivering a Value for Money (VFM) service throughout the department, especially within the Social Care division and progressing the challenging Building Schools for the Future (BSF) transformational change programme

### 8.8 Capital Spend / Programme

Table 5

	Original	Latest	Latest	Bi	Expenditure
	Approved	Approve	Forecast	Monthly	as % of
	Budget	d Budget	Jan	Variance	Latest
			2010		Forecast
	£000	£000	£000	£000	%
Children's Services Department	52,057	55,904	52,839	(3,065)	77%

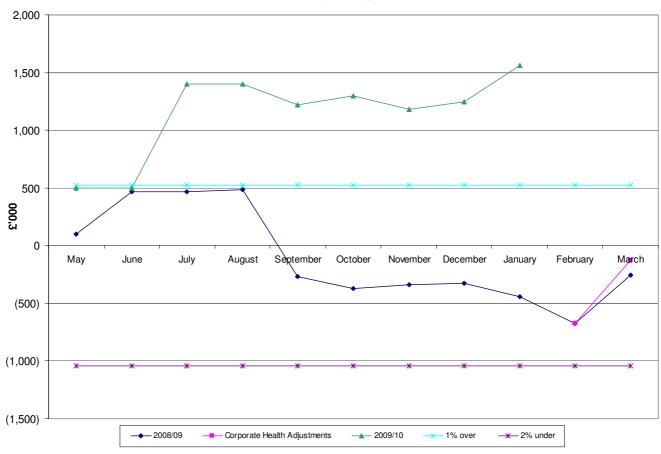
Actual expenditure as at the end of January 2010 was £40.752m.

The major variations on the programme in the period (over £100,000) are as follows:

£000	Profile Changes
(325)	Estover Campus New Build - Due to ICT delay and spread of contingency in cash flow.
(580)	High View (Efford) - Profile adjustment following receipt of detailed cash flow statement against previous estimated amendment in November 09. Project is in advance of original plan by about £0.9M net.
(260)	Compton New Classrooms - Design delay over options analysis and affordability. Scheme has now been increased to provide an integrated nursery unit (using ring fenced Early Years Grant).
(900)	Early Years Grants to Private, Voluntary and Independent (PVI) Nurseries. Delay in gathering condition and other information required to allow allocations to be made. Now anticipated that majority of works will take place in 2010/11. Ring fenced funding can be carried forward.
(250)	Delay in start of works to School Kitchens. Due to extended feasibility period.
(200)	Children's Centres - Delayed project starts due to affordability, lease and stake holder issues within proposed projects. Grant can be carried forward and projects should still be completed within funders required timescales.
(550)	other
(3,065)	Total Children's Services Profile Changes

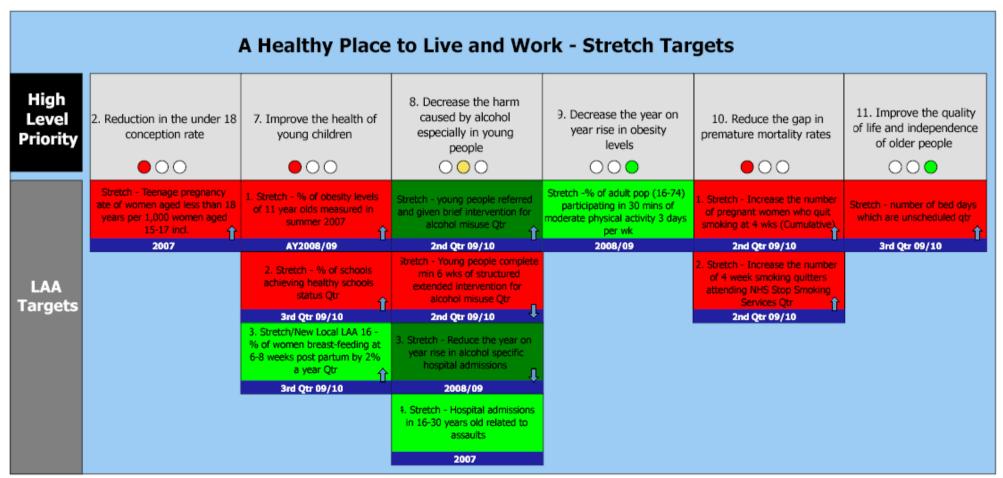
### Appendix A

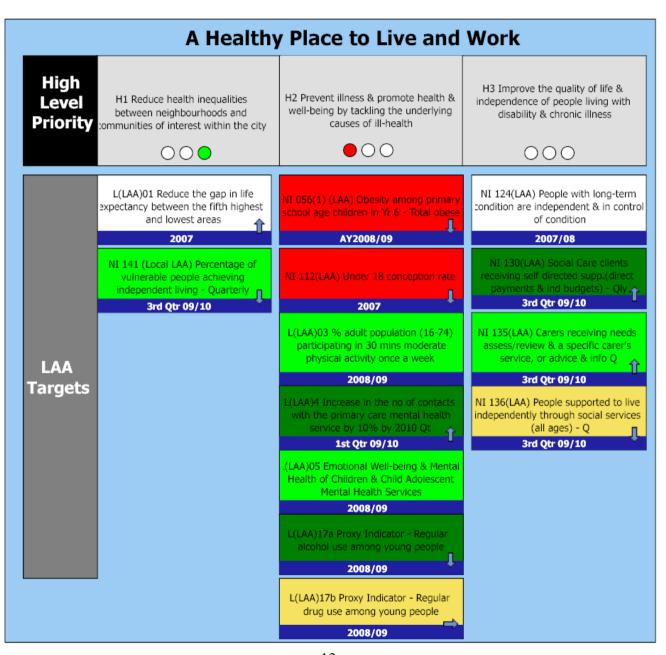




# Healthy Theme Group Report 3<sup>rd</sup> Qtr 2009/10

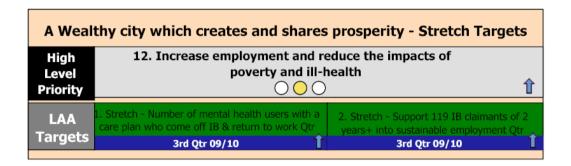
### 2007-10 Stretch Targets



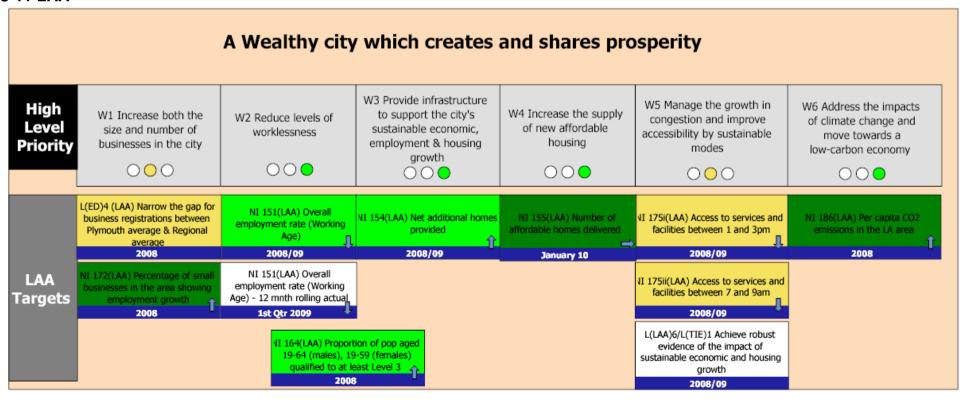


# Wealthy Theme Group Report 3<sup>rd</sup> Quarter 2009/10

### 2007-10 Stretch Targets



#### 2008-11 LAA

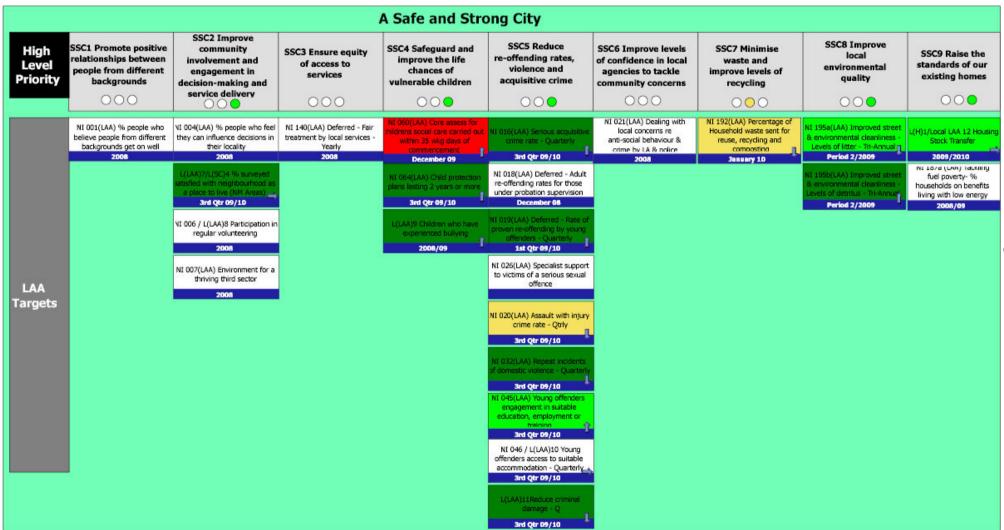


# Safe & Strong Theme Group Report 3<sup>rd</sup> Quarter 2009/10

### 2007-10 Stretch Targets



#### 2008-11 LAA



# Wise Theme Group Report 3rd Quarter 2009-10

### LAA 2007-10 Stretch Targets

