

## AGENDA FOR

## CHILDREN AND YOUNG PEOPLE SCRUTINY COMMITTEE

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**To: All Members of Children and Young People Scrutiny Committee**

**Councillors :** A Arif, D Berry, C Boles (Chair), U Farooq, E FitzGerald, J Grimshaw, S Haroon, K Hussain, J Lancaster, G Marsden and L Ryder

Dear Member/Colleague

### **Children and Young People Scrutiny Committee**

You are invited to attend a meeting of the Children and Young People Scrutiny Committee which will be held as follows:-

<b>Date:</b>	Thursday, 13 November 2025
<b>Place:</b>	Council Chamber, Town Hall, Bury, BL9 0SW
<b>Time:</b>	7.00 pm
<b>Briefing Facilities:</b>	If Opposition Members and Co-opted Members require briefing on any particular item on the Agenda, the appropriate Director/Senior Officer originating the related report should be contacted.
<b>Notes:</b>	

## **AGENDA**

### **1 APOLOGIES FOR ABSENCE**

### **2 DECLARATIONS OF INTEREST**

Members of Cabinet are asked to consider whether they have an interest in any of the matters of the Agenda and, if so, to formally declare that interest.

### **3 MINUTES** *(Pages 3 - 8)*

Minutes from the meeting held on 16<sup>th</sup> September 2025 are attached for approval.

### **4 PUBLIC QUESTIONS**

A period of 30 minutes has been set aside for members of the public to ask questions on the agenda for tonight's meeting.

### **5 MEMBER QUESTIONS**

A period of up to 15 minutes will be allocated for questions and supplementary questions from members of the Council who are not members of the committee. This period may be varied at the discretion of the chair.

### **6 YOUTH JUSTICE REPORT** *(Pages 9 - 48)*

### **7 SEND - RELATING TO OFSTED SELF EVALUATION** *(Pages 49 - 84)*

### **8 SOCIAL CARE REFORM UPDATE** *(Pages 85 - 90)*

### **9 CHILDRENS SERVICES COMPLAINTS REPORT** *(Pages 91 - 134)*

For Information Only

### **10 URGENT BUSINESS**

Any other business which by reason of special circumstances the Chair agrees may be considered as a matter of urgency.

**Minutes of:** CHILDREN AND YOUNG PEOPLE SCRUTINY COMMITTEE

**Date of Meeting:** 16 September 2025

**Present:** Councillor C Boles (in the Chair)  
Councillors D Berry, U Farooq, E FitzGerald, S Haroon,  
J Lancaster, G Marsden and L Ryder

**Also in attendance:** Councillor L Smith, Cabinet member for Children and Young People  
Jeanette Richards Executive Director Children and Young People  
Wendy Young Head of Service • Department for Children & Young People  
Robert Arrowsmith Head of Strategy, Assurance and Reform

**Public Attendance:** No members of the public were present at the meeting.

**Apologies for Absence:** Councillor A Arif, Councillor S Arif and Councillor J Grimshaw

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**68 APOLOGIES FOR ABSENCE**

Apologies are noted above.

**69 DECLARATIONS OF INTEREST**

There were no declarations of interest.

**70 MINUTES**

It was agreed:

That the minutes of the meeting held on the 10<sup>th</sup> July 2025 be approved as a correct and accurate record.

**71 PUBLIC QUESTIONS**

No questions were received in advance of the meeting.

**72 MEMBER QUESTIONS**

There were no member questions.

**73 CHILDRENS SERVICES COMPLAINTS REPORT**

This item was deferred to a future meeting

**74 OFSTED STANDARD INSPECTION OF CHILDREN'S SERVICES IN BURY**

Councillor L Smith Cabinet member for Children and Young people provided an overview of the recent Ofsted inspection, with thanks formally recorded to the committee and staff for their dedication and hard work. A special note of appreciation was extended to Jeanette Richards for her leadership throughout the journey.

The discussion opened with questions around consistency across teams. Concerns were raised about the variability in practice and the challenges posed by workforce stability, recruitment, and agency costs. Despite training efforts, the impact has been inconsistent, and there was recognition of the need for stronger support for team managers. It was noted that a training support framework has been developed for social workers, and while quality assurance has highlighted good practice, consistency remains a priority.

Jeanette Richards Executive Director for Children and Young People acknowledged the progress made but emphasised that more work is needed to ensure consistency between team managers and practitioners. She described efforts to establish a structured approach, including reflective supervision, which has been well received by the workforce. Supervision reporting is at good levels, and dip sampling has led to additional learning and development opportunities for team managers.

There was a collective expression of gratitude to the leadership team, with congratulations offered to all involved. The conversation then turned to future priorities. While many children are now receiving the services they need, there are still limitations. The question was raised about whether the focus should now be on managing the current system or identifying areas for further progress.

It was suggested that the submission of a new plan presents an opportunity to refocus efforts, particularly on early help and ensuring stability amidst broader social care changes. The importance of doing the basics well and aligning children's services with the education strategy was highlighted as key to improving outcomes.

Joanne Burns reflected positively on the improvements seen in early help and frontline collaboration but noted ongoing difficulties in recruiting staff with the right skills. She asked whether a model based on clusters or communities of care could be planned for the future. It was shared that early help pilots had received mixed feedback, and reforms are underway to strengthen partnerships, including bringing health partners into schools.

Jeanette added that nationally, there are concerns about developmental outcomes for children post-lockdown. Locally, a Best Start and Early Help Board has been established, and additional health visitors have been recruited. While family hubs are being publicised, more work is needed to develop the offer and ensure awareness.

Wendy Young Head of Service for SEND spoke about the development of communities of practice, linking with the educational psychology service and increasing school engagement. The aim is to improve integration and align with the ICB, offering a wraparound approach for schools. Statutory assessment and review teams have been extended to include attendance and virtual schools, with many schools also managing SEND needs. There was discussion about how to better engage with schools and primary care settings, and how to ensure schools know where to go for support in times of crisis.

Joanne Burns sought clarification on the communities of practice model, asking whether it would involve groups of schools or individual ones. Wendy explained that each cluster area has a designated team representing schools, with universal, targeted, and specialist support available. The approach will be tailored to local needs, ensuring no child is left behind.



Jeanette emphasised the importance of everyone being part of the ecosystem, noting the upcoming launch on 29th September. The system will be monitored and adapted as needed.

The conversation moved to the post-inspection action plan. It was confirmed that work has begun and is progressing well. Meetings are taking place to shape the plan and drive continued improvement in children's services. Jeanette suggested that the full improvement plan could be brought back to a future committee for scrutiny. It was agreed that the Ofsted improvement plan would be reviewed in January following its submission in November.

Reflecting on lessons learned since 2021, it was acknowledged that when the original plan didn't work, it was recalibrated and relaunched. Cross-party collaboration was recognised as a key strength, and the importance of listening to children and young people was highlighted. Jeanette shared that the journey has been a privilege and that the broader reflection is one of collective endeavour and commitment to improvement.

The item concluded with a summary of key themes: appreciation for the team's efforts, recognition of supervision challenges, interest in innovation including AI, and a renewed focus on early help. The committee agreed to revisit the improvement plan in a future meeting.

#### **It Was agreed**

- The update be noted
- Thanks to be extended to the Children and Young peoples department for their hard work and dedication
- To bring back the improvement plan to a future meeting

## **75 THE LOCAL AREA RESPONSE TO THE PUBLISHED SEND INSPECTION AND MONTHLY UPDATE**

Wendy Young, Head of Service for SEND, provided an update on the SEND landscape in Bury. She reported that two stocktakes have taken place since the introduction of the Priority Impact Plan, both of which have provided assurance to the Department for Education (DfE). The July stocktake highlighted the positive involvement of children and young people in the improvement journey, noting that their voices are embedded within the Strategic Improvement and Assurance Board, even when they are not physically present. The focus is now shifting towards deepening the understanding of priorities and strengthening the development plan over the next six months in preparation for the next stocktake.

Questions were raised regarding the expansion of local SEND provision. Brookhaven School has previously opened, and the DfE has agreed to support the development of a new special school. The aim is to adopt a graduated approach and retain children within the borough. However, concerns were expressed about delays to the new school's opening, which was originally scheduled for 2026 but is now expected to be behind schedule.

Officers informed members it has identified a site and is supporting the planning process, although delays have stemmed from the DfE's consideration of alternative options, including whether existing schools could accommodate the provision.

Attention turned to the neurodiversity hubs, Members expressed interest in understanding how these hubs will support children and young people, particularly in preventing mental health issues linked to unmet neurodiverse needs. It was agreed that colleagues from Health will be

invited to a future meeting to present the neurodiversity plan, with emphasis on the need for joint working between health and children's services.

Concerns were raised about children whose needs are not being met due to schools being unable to identify or accommodate them. The expansion of Milwood School was discussed as part of the inclusion strategy. Although the expansion is underway, it has faced delays. The process involves panel commissioning and determining whether provision is available.

Wendy Young clarified that unsuitability alone does not constitute legal grounds for appeal unless incompatibility is proven. The local authority must ensure that consultations are thorough and that provision is secured appropriately. The importance of mainstream settings making a difference was reiterated, with a focus on ensuring children access the right provision at the right time.

Joanne Burns raised the issue of children recognised as needing specialist provision but being placed out of borough due to a lack of local options. Wendy responded that meeting the needs outlined in EHCPs is a priority, and tribunals only arise when those needs cannot be met. She acknowledged that Bury has faced challenges in this area and that efforts are being made to improve resource provision and reduce delays.

Councillor Smith reflected on the SEND improvement journey, noting that tribunal delays are often linked to case law and the need for robust planning. The committee discussed the importance of securing a completion date for the Milwood expansion and whether funding had been allocated.

Looking ahead, members considered the challenges in achieving the desired impact. Resource constraints, particularly around high needs funding, and siloed decision-making were identified as barriers. However, there was optimism that the changing landscape and stronger partnership working, including through the SENCO network, could support progress.

Wendy Young emphasised the need to rebuild trust with parents and carers, acknowledging that systemic failures cannot be resolved overnight. Robert Arrowsmith added that parental confidence in accessing support without an EHCP remains low, and Bury has a higher proportion of EHCPs in mainstream schools compared to national averages. This reflects a broader national challenge.

It was agreed that

- The update be noted
- An update around the neurodiversity hubs be requested from Health colleagues at a future meeting

**76**

### **URGENT BUSINESS**

There was no urgent business.

**COUNCILLOR C BOLES**  
**Chair**

**(Note: The meeting started at 7.00 pm and ended at 8.30 pm)**

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## Introduction, vision and strategy

### Foreword from the Director of Bury Children's Services, Chair of the Youth Justice Partnership Management Board Jeanette Richards

*On behalf of Bury and Rochdale Youth Justice Service, and as the Chair of the Youth Justice Management Partnership Board we are pleased to share our Youth Justice Business Plan 2025- 2026. We remain committed in our goal, to achieve excellence for all children and young people, and we continue to work with families, carers and partners to achieve our shared vision.*

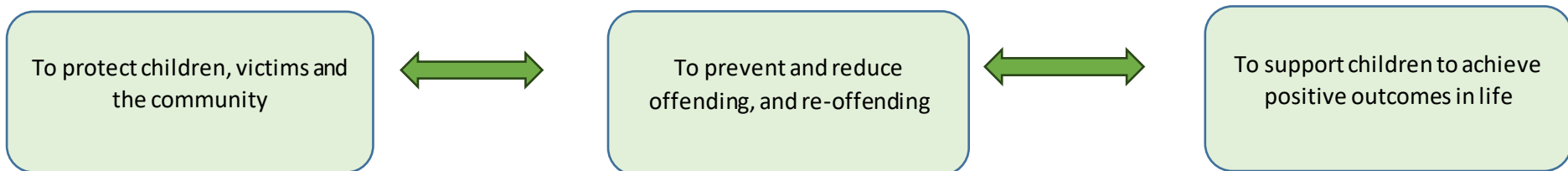
### Our Shared Vision

*"We want Bury and Rochdale children and young people to grow up happy, healthy, with confidence, ambition and surrounded by love, care, and kindness. We want children and young people to have the very best start in life and to thrive throughout their childhood and adolescence, and for families and carers to be supported to enable this.*

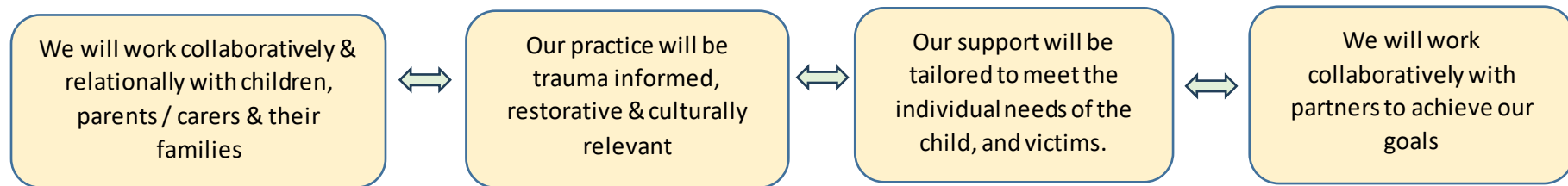
*Our vision is to see the 'child and young person first' and to provide 'the right service, at the right time, in the right way'. We want to prevent our children and young people from entering the Criminal Justice System, to reduce offending and re-offending, to reduce custody, and to improve the safety and wellbeing of all those who come to us through supporting them to achieve their ambitions' and create a safer community, with fewer victims.*

*Bury and Rochdale Youth Justice, is committed to working holistically and collaboratively with children and young people, parents, carers, families, partners, and communities to achieve this vision".*

### Our Goals



### Our approach



### Local context

Bury and Rochdale Youth Justice Service amalgamated in 2014, and our partnership board is chaired by the Director of Bury Children's Services, with the Assistant Director of Rochdale Children's Services as co-chair. Strategically and operationally partners are drawn from both boroughs.

#### Rochdale [Census 2021]

Rochdale is known for its cultural diversity, and it offers a mix of traditional and contemporary shops, cafes and local business. Rochdale is well connected for commuters, offering direct tram services to Manchester city centre, whilst nestling in beautiful countryside. Average property prices in Rochdale are affordable, and this makes it an attractive option for first time buyers, and young families, which might be in part why the population is increasing. Rochdale continues to invest in its residents' offering projects, and a wide range of education, training and employment related activities. However, as in many local authorities we have areas of deprivation, and our unemployment rate and economically inactive population is above the national average.

#### Bury [Census 2021]

Bury is known as a vibrant market town, with green spaces, affordable living and excellent public transport including the metro link tram service into Manchester. Bury has a strong community feel, with a rich heritage and cultural scene, benefitting from well-rated schools and healthcare facilities it is an attractive place for young families to live. Bury's population has continued to increase. As with most areas Bury has areas of deprivation, and the percentage of children living in Bury in recent years has fallen.



Bury and Rochdale demographics [online census 2021]

*44,740 children are between 10 & 17 years old*

*78 % of the Bury and Rochdale population are White British: 22% from Black and other minority ethnic groups;  
33% of the population between 10 & 17 years old are from Black and other minority ethnic groups*

*49% of the population are males, and 51% female*

*Bury and Rochdale are ranked in the top 10% most deprived areas Nationally, with 26 % of children living in low – income families.*



## Local delivery

Bury and Rochdale Youth Justice Service is based in Rochdale, conveniently located near the town centre and bus station, ensuring easy access for children and young people from the Rochdale area. Prior to the amalgamation of the Youth Justice service, local young people were actively involved in designing their space at 'Fashion Corner' in Rochdale. The facility now includes several dedicated rooms, and hosts a fully equipped kitchen, a games room featuring a snooker table and gaming equipment, and a dedicated health space, providing a safe and supportive environment for children engaging with the Youth Justice Service.

In contrast, Bury currently does not have a comparable facility, with no suitable space for Youth Justice children to visit, and most interactions take place in the home or other community settings. One of the key challenges is the absence of a child-focused, 'drop-in' facility for children experiencing crisis, limiting opportunities for immediate support in a safe and welcoming environment. This matter has been raised at the Youth Justice Partnership Board and is under review. Bury children open to Youth Justice have access to the central Youth Centre, which is situated at the Town Hall, however, it is acknowledged that this is not an ideal setting, and therefore other options are currently being considered as a priority.

An understanding of our data and the profiles of children within our service enables us to identify both strengths and areas for improvement. This insight informs strategic planning and operational delivery, ensuring that we understand where we need to target resources to be most effective, and to achieve the best possible outcomes for young people. There are notable disparities in the availability of resources, Bury has reviewed their Prevention Offer and revised this, to ensure that this is comparable with Rochdale – an additional member of staff has been recruited to specifically work with our children in Year 5 and 6 at Primary School, Bury NHS ICB colleagues are currently reviewing the health offer. Some of the local challenges in delivering a 'shared' Youth Justice Service across two local authorities is addressing these inequalities which is essential to ensure that all children, regardless of their locality, receive equitable support and the chance to thrive.

The number of Bury children/interventions open to Youth Justice is lower than Rochdale, and therefore we would expect to see the comparable differential across data sets and Bury manage their prevention offer outside of Bury and Rochdale Youth Justice. However, despite the comparable differential the data indicates that we have more Bury cared for children open than Rochdale; a higher number of children with Special Educational Needs (SEN) and/or Education, Health and Care Plans (EHCPs). Going forward in 2025- 2026 resource need to be targeted to address these areas of concern. Notably Bury children are disproportionately represented in court proceedings, remand, and licence cases. We continue to work closely with the courts to ensure fair and equitable treatment for all children. *[caveat- small numbers often yield higher percentages which can be misleading]*

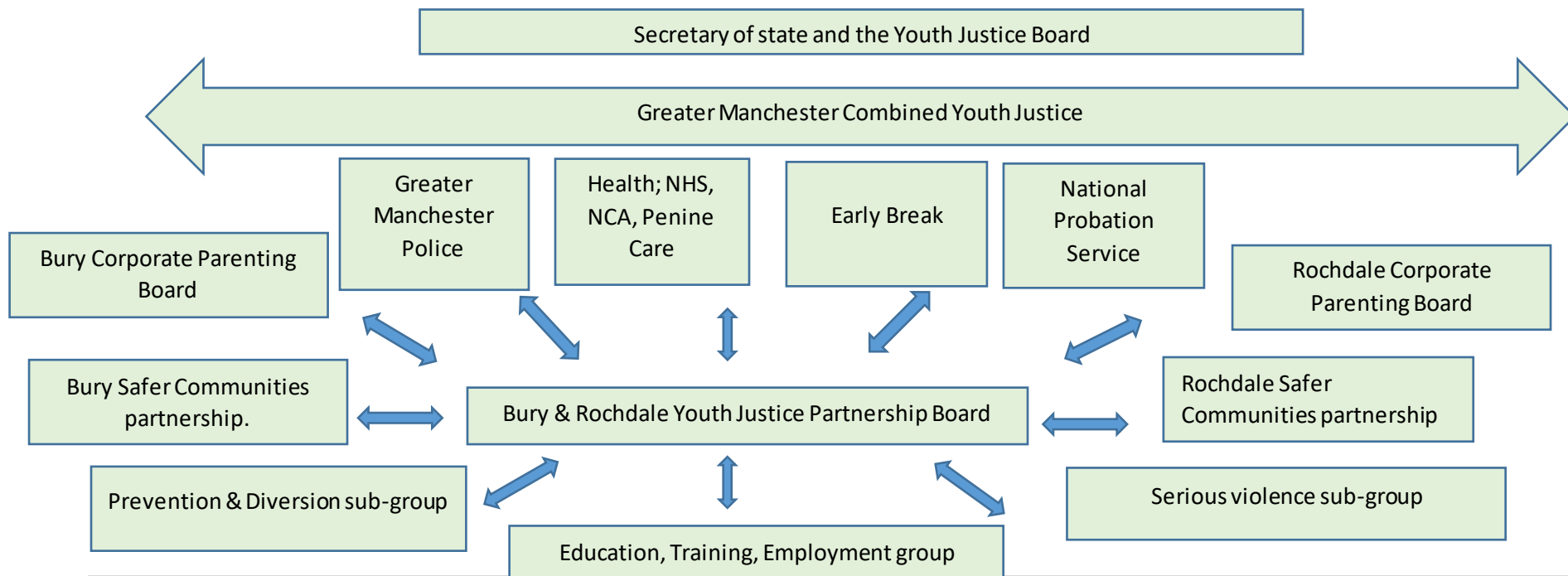
The number of Rochdale children open to Youth Justice is higher than Bury, and Rochdale specific data indicates that any disparities are comparable to the differential. In terms of ethnicity (Q4 2024/25 data), Rochdale has 15.2% more White children open to Youth Justice than Bury; Bury has 1.1% more Asian children than Rochdale; Rochdale has 2.5% more Black children than Bury; Bury has 3.6% more children identified as Chinese/Other. Notably, Bury has 9%

more Dual Heritage children open to Youth Justice than Rochdale, which indicates a higher level of disproportionality despite the difference in the number of cases.

## 2 Governance, leadership and partnership arrangements

Youth Justice is inspected by His Majesty Inspectorate of Prisons [HMIP], and our last inspection report rated us overall as Good [June 2020]. [An inspection of youth offending services in Bury and Rochdale](#). Youth Justice is legislated through the Secretary of State, and our performance is monitored through the Youth Justice Board quarterly performance oversight framework. Bury and Rochdale currently sit in quadrant 3: *“Service Improvement required: Investigation and analysis of the cause or nature of concerns impacting on performance outcomes for children; identify where the service may need assistance; offering advice and guidance and broker support and/or direct delivery of intervention support”*.

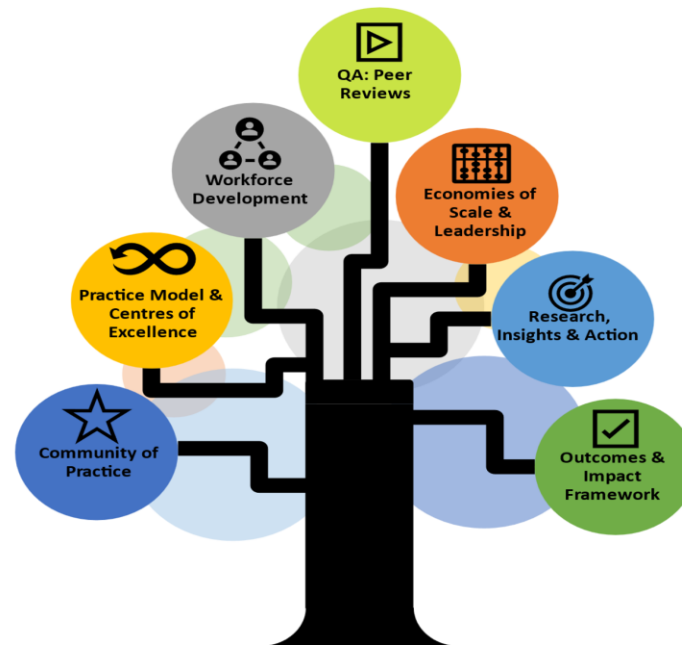
**Strategic governance and partnership arrangements** are overseen by the Youth Justice Partnership Board, which is chaired by the Director of Bury Children’s Services, and co-chaired by the Assistance Director of Rochdale Children’ Services. The Board currently meets’ bi-monthly and our wider strategic governance arrangements are reflected in the diagram below.



Our 10 Greater Manchester Youth Justice areas sit within devolved governance arrangements and each local authority lead works together through our community of practice led by Dr Alex Chard. Together we have developed the Greater Manchester Youth Justice Transformation Framework and plan, 2025- 2029. This reflects a shared and core set of Youth Justice Principles, Pillars and enablers, outcomes and priorities, and has been informed by children and young people, some of whom open to Bury and Rochdale Youth Justice. Through our Greater Manchester coordination hub, we will ensure that we learn from one another, share innovative practice, and more importantly improve outcomes for children and keep victims and communities safe. Our plan going forward is to develop a peer review model across Youth Justice Services.

## A Youth Justice Coordination Hub

Growing the capability and capacity to work smarter across services and systems in Greater Manchester.



**Our Greater Manchester principles** are to 1] advocate for children, 2] hear their voice 3] be trauma responsive 4] strengthen communities and support victims 5] have an innovative mindset 6] collaborate and co-design 7] support children through early intervention and preventions 8] be evidence led 9] be professionally curious 10] leave nobody behind.

**Our Greater Manchester pillars** of delivery will focus on 1] harm and risk reduction 2] resilience and engagement 3] safety and protection 4] stability and wellbeing.

**Our Local operational governance and partnership arrangements** are overseen by Rochdale Children's Services. Our Head of Service, recruited in April 2025 leads and manages Rochdale Complex Safeguarding Service, missing from home/care service, and Bury and Rochdale Youth Justice Service. Bury and Rochdale Youth Justice have 2 full time Team Managers, and 2 full time Advanced Practitioners that lead and manage the team [ *please see appendix 1 for full staffing structure and financial contributions*]

**Seconded partnership arrangements** are not equitable across Bury and Rochdale Youth Justice as per the table to the left below. This has been escalated and is under review at the Youth Justice Partnership Board.

#### Integrated partners



Agency / Partner	Bury	Rochdale
Police	Police officer	Police officer
Health	Nurse	Nurse
	-	CAMHS
	-	SALT
Education		
Pre 16	-	EWO
Post 16	Connexions	Positive Steps
Probation Officer	Yes [vacant]	
Serious Violence	Yes	
REMEDI/Victim	Yes	

**Local Partnership Arrangements:** *Bury and Rochdale have their own Early Help/ Family Help offer; and Voluntary, Community and Faith sectors that children, young people and families can access.*

Rochdale Connexions Trust: *provides mentoring to YJ children across Bury & Rochdale.*

REMEDI: *delivers Bury & Rochdale YJ victim service / reparation.*

Early Break: *working with children and families affected by substance misuse across Bury & Rochdale.*

Positive Steps: *Working with Rochdale school leavers to support in ETE.*

Connexions: *Working with Bury school leavers to support in ETE.*

PPIED: *is an approach used across Bury and Rochdale*

Turnaround: *is an approach used across Bury and Rochdale. Bury manage their own Turnaround.*

Serious Violence: *our children have access to the virtual reality decision making programme [virtual headsets] to address knife related behaviours. We also support children in school through our preventing exclusion programme for knife / weapon related behaviours.*

Complex Safeguarding: *Both Bury and Rochdale have a complex safeguarding and missing service*

**Local quality assurance arrangements:** We align with Rochdale Children's Services quality assurance framework.

*Team Managers submit a case file audit each month, consisting of a reflective conversation with the practitioner, child, and their parent / carer to ascertain their view of the service.*

*Advanced Practitioners jointly complete a themed 'dip sample', and/or a quarterly themed in-depth audit.*

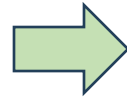
*Team Managers each submit a monthly performance report, detailing analysis of data; learning from audits, supervisions completed, and staffing matters; areas to celebrate and areas to reflect on and develop.*

*The Head of Service holds a Quality and Performance Clinic each month with the Team Managers and Advanced Practitioners*

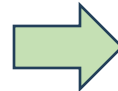
*The Head of Service attends a Quality and Performance Clinic each month with the Assistant Director of Rochdale Children's Services.*

*'Close the loop' learning from the Audits is presented at the team bi-monthly alternate 'team meetings' and 'team development afternoons'*

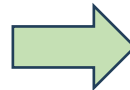
*The Head of Service chairs 1 x service development afternoon each month with the Team Managers and Advanced Practitioners to review the service 'improvement' plan and prepare for forthcoming inspections.*



*This approach has supported us to hear the child's voice, work collaboratively with parents, and understand our practice across themed areas.*



*This ensures a clear line of governance, and promote a stable workforce, understanding of data, highlighting areas of strength, and areas to improve on, which supports us to provide a consistent service for our children.*



*This approach has supported us to start to develop a learning culture, and our children will have the benefit of a knowledgeable and skilled workforce going forward.*

## Update on the previous year

### Progress on priorities in previous plan

In our 2024–2025 Youth Justice Business Plan, we submitted a ‘Plan on a Page’, which served as a positive foundation for the development of a Youth Justice Improvement Plan. However, this initial work also led to the creation of additional plans, including a Youth Justice Service Plan and a Youth Justice Performance Oversight Plan. While each plan has value, the proliferation of separate documents has diluted our strategic focus and may have hindered the pace of progress we initially aimed for. Please see a review of the 2024- 2025 priorities below:

**Priority 1: Governance and Leadership;** We have encountered challenges in our leadership and governance arrangements. Attendance at the Youth Justice Partnership Board has been inconsistent, with some partners not routinely engaging. Additionally, there has been limited understanding, commitment, and constructive challenge regarding the information presented at Board meetings. In response, the Board has recently established three thematic sub-groups to strengthen strategic oversight and drive improvement in key areas: Prevention and Diversion – focused on reducing First Time Entrants into the Youth Justice system: Education, Training and Employment (ETE) – aimed at promoting positive engagement and reducing reoffending; and Serious Violence – established in response to data indicating a continued rise in serious youth violence. These sub-groups are still in the early stages of development, and it is too soon to assess their impact. However, we are committed to refining and strengthening their role as part of our ongoing improvement journey.

**Priority 2: Prevention and Diversion:** We have continued to deliver prevention initiatives through the Turnaround Programme, the Knife Crime Exclusion Programme in schools, and PPIED. Diversionary pathways remain in place and include Outcome 22, Community Resolutions, Youth Conditional Cautions, and Deferred Cautions/Prosecutions. However, a key challenge persists; there is a noticeable disparity between the number of police disposals issued and the number of referrals received by the Youth Justice Service. This highlights an ongoing need to raise awareness and understanding of the Out of Court Disposal framework among police colleagues. To address these issues, we aim to utilise the newly established Prevention and Diversion / First Time Entrants Sub-Group to strengthen collaboration, improve referral pathways, and ensure consistent application of the OOCDF framework. Additionally, we recognise the need to better understand police data — particularly the volume and characteristics of children who are: Stopped and searched, released under investigation, placed on bail, and those arrested or detained overnight. This analysis will be crucial in identifying patterns, addressing disproportionality, and ensuring that outcomes for children are fair and appropriate, and support us to reduce first time entrants.

**Priority 3: Remand, Custody and Resettlement:** During 2024–2025, we observed a reduction in the number of children entering custody. By Quarter 4, our custody rate was lower than the same period in the previous year and below the averages for the Northwest region, Greater Manchester, and our Youth Justice statistical family. In response to this positive trend, we have undertaken a review of our custody and resettlement processes. All children who are remanded or serving custodial sentences will be reviewed through our risk management meetings, ensuring alignment with the principles of the constructive resettlement pathway. This approach supports a more structured and rehabilitative transition for children returning to the community.

**Priority 4: Victims and Restorative Justice;** We are mindful of the new HMIP inspection framework, which, for the first time, introduces dedicated Victim standards. Following a review of the new expectations, we identified inconsistencies in our previous approach to victim engagement. In response, we commissioned Remedi, a specialist and experienced provider of victim services, to deliver a consistent and high-quality victim and reparation offer. This provision is still in its early stages, and we have developed a set of evaluation and outcome measures to monitor its effectiveness. Remedi will report regularly to the Youth Justice Partnership Board on the delivery and impact of the victim and reparation service. A formal review of the service will take place at six, nine, and twelve month interval to ensure continuous improvement and alignment with inspection standards.

**Priority 5: Serious Violence and Harmful Sexual Behaviour;** Serious violence continues to rise and remains a challenge for our service. In response, we plan to re-focus the role of our dedicated Serious Violence Project Lead, shifting from broader community safety responsibilities to a more targeted Youth Justice perspective. This includes a detailed analysis of serious violence data, examining key themes such as: locality, child characteristics, school engagement, offence type, and number and type of previous interventions. This approach aims to strengthen our understanding of patterns and 'risk' factors, enabling us to effectively target resources and interventions. We continue to deliver the virtual reality knife crime decision-making programme, which supports children in making safer choices. Additionally, the knife crime exclusion programme has been implemented in schools to raise awareness and prevent escalation. However, we recognise the need to improve our ability to track, monitor, and evaluate these initiatives. Developing a robust evaluation framework will help us understand what is working well, what is not, and inform a clear, evidence-based action plan moving forward.

**Harmful Sexual Behaviour (HSB);** Our Harmful Sexual Behaviour Policy has been recognised as an example of good practice by the Youth Justice Board and is featured on their national resource hub. The policy is also embedded within Tri.x CSC Greater Manchester, and local procedures. Children benefit from a well-structured, consistently delivered and regularly reviewed HSB intervention offer, ensuring a high standard of support and safeguarding.

**Priority 6: Quality Assurance and Workforce Development;** We have commissioned 'SHOUT' to support our engagement and participation work, completing two out of three surveys to date. Additionally, we have agreed an honorarium for a dedicated staff member to lead on developing this area further. Our next steps involve analysing the survey findings to identify emerging patterns and themes and use this insight to shape service delivery. We are committed to adopting a 'You Said, We Did' approach to demonstrate how children's voices influence our practice and decision-making. We currently capture the voice of the child through a range of mechanisms, including case file and conversational audits, feedback self-assessments, referral order panels, and review processes. However, we recognise the need to strengthen our analysis and develop clear actions that ensure children's feedback meaningfully informs service development. We submit monthly case file audits and conduct themed audits to support continuous improvement. In the coming year, we will focus on embedding learning from our quality assurance processes and evaluating the impact of these improvements on children, victims, and the wider community.

## Performance over the previous year

### National Key Performance Indicators

Across 2023–2024, we achieved a slight reduction in the number of First Time Entrants (FTEs), reducing from 113 to 102, which reflects our continued efforts in promoting alternatives. Our reoffending binary rate at Quarter 4 of 2023–2024 was also positive, outperforming regional and national comparators: Our rate: 17.0% (9 of 53 children reoffended, committing 38 offences), Northwest average: 28.2%, Greater Manchester average: 21.6%, and our Youth Justice Statistical Family average: 31.1%. While the number of children in custody or held on remand has increased during 2024, our rate remains below all comparator groups: Our rate: 0.09, Northwest: 0.12, Greater Manchester: 0.12, Youth Justice Statistical Family: 0.11. These figures reflect improved performance in these areas, though the rise in custodial cases highlights the need for continued focus on early intervention and robust community alternatives.

Reporting period	First Time Entrants	Reoffending rates	Custody & Remand
January – December <b>2023</b>	113	Binary 17%  Frequency 4.2%	4
January – December <b>2024</b>	102	Data not available	6

### Local Key Performance Indicators

KPI 1 Accommodation	<i>The number of children in suitable accommodation at the end of their intervention has been high, and relatively consistent across each quarter in 2024- 2025, Q1 95.8%: Q2 100%: Q3 100% and Q4 97%. Our target will always be 100%.</i>
KPI 2 ETE	<i>On average 50 % of children were in suitable education, training or employment at the end of their intervention, which is lower than we would like. We now have a dedicated ETE sub-group that reports to the Board.</i>



KPI 3 SEND/ EHCP	<i>77 children open to YJ in 2024- 2025 had EHCP or SEND needs. We plan to liaise more closely with our SEND/EHCP leads.</i>
KPI 4 Mental / Emotional Wellbeing	<i>During 2024–2025, data indicates that 15 children were already receiving mental health or emotional wellbeing support prior to undergoing our screening process. An additional 9 children were identified through screening as requiring support, bringing the total to 24. However, actual engagement with support services was significantly lower, with attendance figures ranging between 3 and 9 children. This highlights a critical gap between identified need and service uptake. Moving forward, we need to strengthen pathways to ensure children have timely and equitable access to appropriate mental health and emotional wellbeing services.</i>
KPI 5 Substance Use	<i>65% of children successfully engaged in tier 2 and 3 treatments in 2024- 2025. We continue to encourage children to access our substance use services.</i>
KPI 6 OOCDS	<i>125 children have been supported through Out of Court Disposals in 2024- 2025 [referred to YJ] [data to be treated with caution]</i>
KPI 7 Management Board Attendance	<i>Throughout 2024–2025, we have prioritised the development of our Board, with a continued focus on strengthening attendance, active participation, and shared accountability. Our efforts aim to build the Board’s capacity to interpret data effectively, make informed decisions that promote equitable resource allocation, and provide a safe and supportive environment for children. Key areas of focus include serious violence, education, training and employment (ETE), prevention and diversion, first-time entrants, and reducing reoffending rates. The Chair of the Board has appropriately escalated concerns to partners, reinforcing our collective commitment to continuous improvement and our ambition to achieve excellence.</i>
KPI 8 Wider Services	<i>A significant number of our Youth Justice cohort are also engaged with wider support services. In 2024–2025, 27 children were open to Child in Need plans, 22 were cared for children, and 7 were supported through Child Protection plans — representing approximately 30% to 35% of our overall cohort. We continue to work closely with Social Care and Early Help services to ensure that children receive timely and coordinated support at the earliest opportunity</i>
KPI 9 Serious Violence	<i>We have continued to observe an upward trend in the number of children involved in serious violence offences. Between October 2023 and September 2024, 23 children were responsible for 39 such offences. A consistent pattern has emerged, with Robbery, Attempted Robbery, Knife Crime, and Violence Against the Person being the most prevalent offence types. Our serious violence rate currently stands at 8.3, which is above the average for our Youth Justice family [6.4] but remains below</i>

	<i>the Greater Manchester average. We are actively analysing these trends to inform targeted interventions and multi-agency responses through our serious violence sub-group.</i>
KPI 10 Victims	<i>148 Victims out of 161 consented to be contacted by us in 2024-2025. We have commissioned REMEDI, victim services to provide this service through 2025-2026.</i>

### Risks and issues

We continue to face challenges which are discussed at our Youth Justice Board performance oversight meetings. We will remain focused on the following areas:

#### Youth Justice Management Partnership Board

**Risk:** *Attendance is inconsistent, and this has led to a lack of focus on Leadership and governance, and key areas around serious violence, prevention & diversion, first-time entrants, and re-offending.*

**Reflections:** *Attendance has been escalated by the chair of the Board, and a key stakeholder meeting held to improve that. The membership has been revisited; sub-groups have been implemented and the Youth Justice Board has supported in the delivery of development sessions. The Head of Service will complete a scoping exercise focusing on the Board understanding of HMIP leadership/ governance/ and partnership services standards for further development.*

#### Partnership Services: Inconsistent resource for children between Bury and Rochdale

**Risk:** *Bury and Rochdale Youth Justice children do not have the same access to resource. Bury Youth Justice children do not have a dedicated Children Adolescent Mental Health practitioner; Educational Welfare Officer; or a Speech and Language Therapist. Bury children do not have a child appropriate place and space in Bury.*

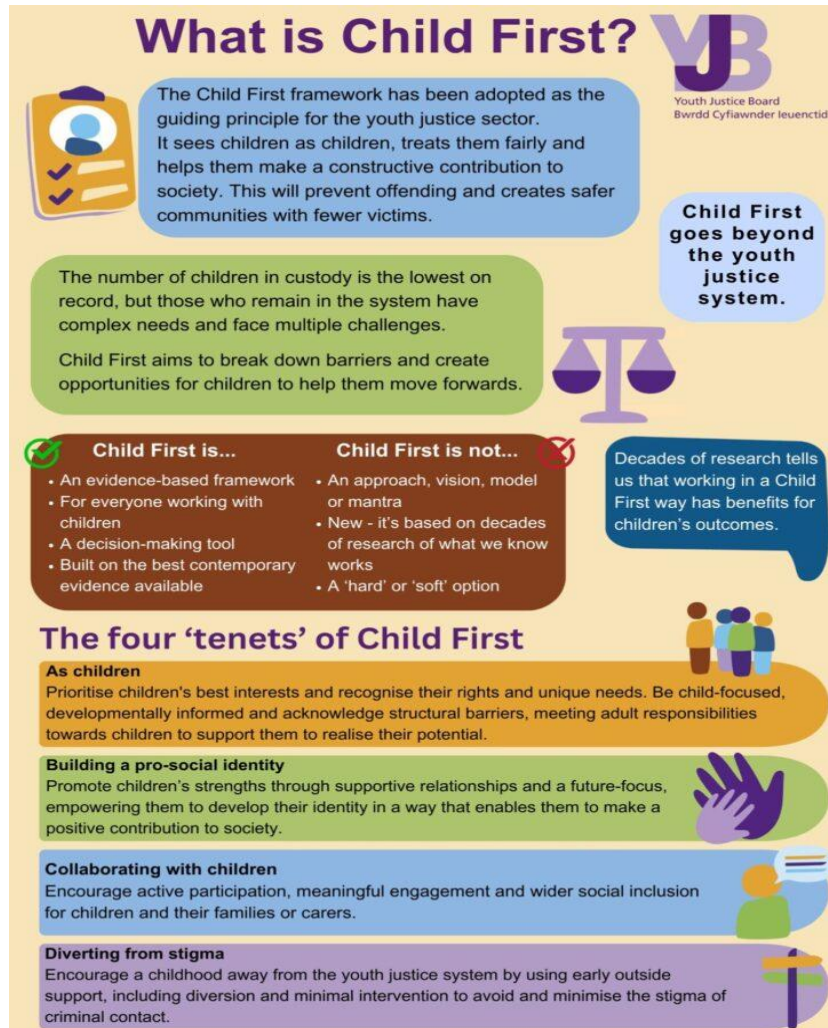
**Reflections:** *This disparity has been raised at the Youth Justice Management Partnership Board, but not yet resolved. We need to reflect further on the impact that this has on our Bury children and provide evidence of this to the Board.*

**Risk:** *we do not currently have a seconded probation officer for our children who are transitioning to adult services*

**Reflections:** *we have worked closely with the probation service who will financially remunerate for the post. This is a temporary measure, and the probation service are actively sourcing a probation officer, and probation service officer to fill the vacant post.*

## PLAN FOR THE COMING YEAR

## CHILD FIRST



### Bury and Rochdale Youth Justice: our Child First approach alongside the Greater Manchester principles [referred to on page 8]

**As Children:** We continue to create a culture that focuses on the child, their lived experience and social graces, and promote organisational and practice responses to the child first, and behaviour second. We will promote training. Our aspiration is for all of our practitioners to understand the impact of adverse childhood experiences, and be Trauma informed, understanding and advocating for their rights with our partners, including the Court.

**Building a pro-social identity:** We remain committed to our practice values, principles, and core behaviour and are ambitious for our children. We will support them to be aspirational, focus on their individual social graces, strengths, and build their confidence through creative approaches. Our ambition is to develop our 'resource directory', through our VCFS so that we create systemic 'expertise' and support for children.

**Collaborating with children:** Many of our children have learnt to mistrust professionals, and services and we struggle to engage them. We will persist to implement an engagement group. We are committed to creating different approaches to hear our children, and use their voice to shape our service, adopting a 'you said' 'we did' approach.

**Diverting from stigma** We use 'PPIED' and Turnaround approaches to identify, and support children at the earliest time. Our multi-agency processes enable us to work with partners to identify children who might benefit from mentoring, and out of court disposals, and are able to offer targeted support through SALT, Education, Health, Substance Misuse, CAMHS, and Social Care to reduce the likelihood of criminalisation and promote social inclusion. We are further supported by the GM Transformation programme, to divert children from custody, and prevent criminalisation. Our ambition is to promote our service to wider services and develop practice in line with a family's first model.

## Resources and Services



AND ...



We will use our Youth Justice Board grant to support the funding of core staff, ensuring the consistent delivery of service for children across Bury and Rochdale. Continued investment in staff training will further strengthen the knowledge and skills of our workforce, enabling us to better meet the diverse needs of the children we support and improve outcomes across the partnership

We will continue to fund a dedicated lead professional to oversee our Serious Violence Project. This role is pivotal in driving efforts to reduce serious violence, safeguard victims and the wider community, and promote positive outcomes for children. Over the next 12 months, the project lead will be responsible for the implementation and evaluation of the *Round Midnight* virtual reality knife crime decision-making programme. This innovative initiative combines creative arts with educational technology to engage young people in immersive, meaningful learning experiences that challenge perceptions and influence safer choice. [Round Midnight - Creative arts and EdTech](#); and our school prevention / exclusion programme.

Our grant will also support the appointment of dedicated staff and approaches to strengthen the voices of children and parents/carers. This will underpin the development of our engagement and participation strategy, which includes commissioning surveys, exploring innovative approaches to reach children, and ensuring access to safe and inclusive spaces—aligned with the principles of the Lundy model of participation. By embedding their voices into our service design and delivery, we aim to ensure that our interventions are responsive, inclusive, and targeted where they are most needed.

We remain firmly committed to investing in early intervention and prevention initiatives. Our focus will be on strengthening partnerships with Family Hubs and wider agencies, while developing a clear and recognisable *Children and Families First* brand. This will be supported by developing a communication strategy, and co-designing informative leaflets, targeted promotional materials streamlined referral pathways, These efforts are designed to ensure that children and families receive timely, accessible support at the earliest opportunity

Finally, the grant will support services for victims and facilitate reparation opportunities for children through our commissioned partner, REMEDI, which provides restorative justice and victim support services. [What We Do: Victim Services | Remedi](#)



## BOARD DEVELOPMENT



Domain one- organisational delivery  
[Youth Justice Services – HM](#)  
[Inspectorate of Probation](#)

### ***Bury and Rochdale Youth Justice Partnership Board: Governance and Strategic Updates***

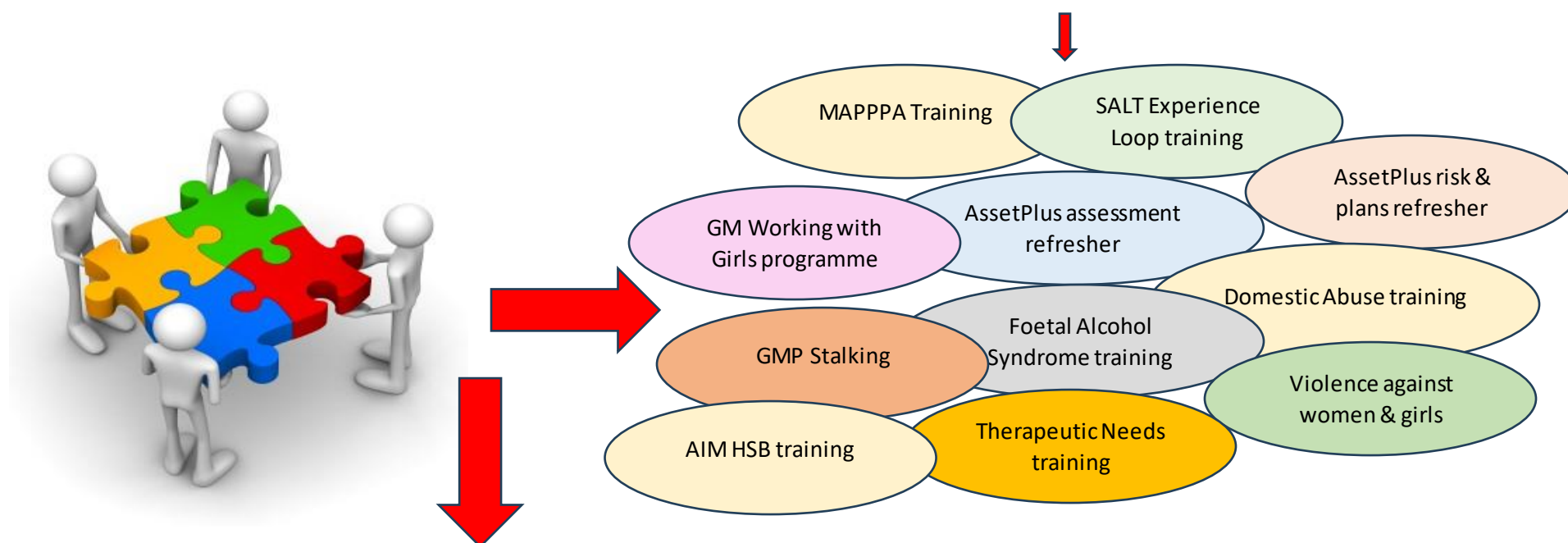
*The Bury and Rochdale Youth Justice Partnership Board has encountered several challenges, including inconsistent attendance from key stakeholders, limited scrutiny of priority areas, and concerns regarding the seniority of Board representation. These issues have been formally escalated by the Chair and addressed with the support of our Youth Justice Board (YJB) regional lead, who facilitated a development session aimed at strengthening governance and strategic alignment.*

*To enhance operational effectiveness, we have established thematic sub-groups focusing on key priority areas: prevention and diversion/first-time entrants, serious violence, and education, training, and employment (ETE). Although these groups are in the early stages of development, our immediate focus is on improving data interpretation and providing clear strategic direction to drive meaningful outcomes for children engaged with Youth Justice services.*

*Operating a dual-authority Youth Justice service presents inherent complexities, particularly in achieving equitable resource allocation across both local authorities. This issue has been escalated, and the Chair has engaged with senior stakeholders, the YJB regional lead, and the Head of Service to raise concerns. We remain committed to addressing this challenge through ongoing dialogue and collaboration at Board level*

**2025- 2026** *In the coming year, we will undertake a self-assessment with Board members, aligned with HM Inspectorate of Probation (HMIP) expectations for leadership, governance, and partnership working as outlined in the Inspection Framework. This reflective exercise will support the identification of development areas and ensure the Board is well-positioned to provide effective oversight and strategic support for Youth Justice services.*

## WORKFORCE DEVELOPMENT



*We will remain committed to ongoing investment in our workforce to ensure resilience, reflective practice, and continuous professional development. Personal supervision will continue to support staff wellbeing and resilience, while reflective case supervision will be used to promote best practice and learning. Practitioners are encouraged to engage in continuous development through their annual DELVE conversations, which provide a structured opportunity to reflect on progress and identify growth areas.*

**In 2025–2026,** we will undertake a comprehensive training needs analysis to assess levels of confidence and competence across the workforce. This will enable us to tailor our training offer to meet identified needs of staff.

*In addition, we will consider findings from national, regional, and local audits to identify learning gaps and implement training in response to recommendations. A particular focus will be placed on strengthening the ‘golden thread’ across assessment, planning, intervention delivery, review, and case closure. This includes embedding an understanding of social graces, enhancing the quality of written work, and promoting the use of child-centred, strengths-based language.*

**EVIDENCE BASED PRACTICE AND INNOVATION**

We are actively engaged in the Greater Manchester Remand Pilot, which commenced in 2023. The initiative seeks to consolidate remand funding across the ten Greater Manchester Youth Justice Services to explore whether a pooled approach can facilitate investment in innovative community-based alternatives to secure remand for children. A range of creative proposals are currently being considered for the 2025–2026 remand underspend, and we remain committed to supporting this progressive and collaborative approach.

We are actively involved in the Greater Manchester Youth Justice Community of Practice, which has played a key role in shaping the Greater Manchester Youth Justice Transformation Framework 2025–2029. This framework represents a distinctive regional approach that enables collaborative service co-design and the sharing of best practice across the sector.

We are working towards developing our engagement and participation strategy, which reflects the evidence-based Lundy Model of Participation. This will provide a rights-based framework for engaging children in decision-making processes. It emphasises four key elements: Space, ensuring safe and inclusive opportunities for children to express their views; Voice, supporting them to articulate their perspectives freely; Audience, ensuring their views are actively listened to; and Influence, demonstrating how their input has informed outcomes. Our plan is to develop an engagement group, and different approaches to capture the child's voice so that we can use this to have a tangible impact on the services and decisions that affect their lives.

Serious violence remains a concern for us, and in response, we have commissioned the Virtual Reality Knife Crime Decision-Making Programme. This innovative initiative has garnered substantial interest from researchers and evaluators and is supported by the Department for Education. We also recognise that sustained engagement in suitable Education, Training, or Employment (ETE) is a key protective factor against offending. In partnership with community safety, we have implemented the Knife Crime Exclusion Programme, which aims to support young people at risk of exclusion due to knife-related incidents. Together, these initiatives are designed to foster positive behavioural change, reduce the risk of reoffending, and enhance safety for victims and communities alike.

We continue to apply the PPIED and Turnaround approaches to provide early intervention support for children, working closely with Rochdale's 17 Family Hubs. These hubs play a vital role in facilitating early referrals, often before a child comes to the attention of the police. We recognise, however, that there is more we can do to improve accessibility and engagement. As part of this, we are reflecting on our service 'branding', acknowledging that the term 'Youth Justice' can sometimes act as a barrier for families seeking support at the earliest opportunity.

Our Harmful sexual behaviour policy and practice standards has been recognised by the Youth Justice Board as good practice and can be found on the Youth Justice Board resource hub.

## EVALUATION

**Audits:** *In line with our internal Quality Assurance Framework, we have continued to submit monthly case file audits, incorporating feedback from children, parents, and carers. Additionally, we have undertaken targeted 'dip sampling' across key areas including Home Visits, Planning, Desistance Factors, Language, Intervention Work, our Trauma-Informed Approach, and understanding of Adverse Childhood Experiences (ACEs). The findings indicate a mix of outcomes, with some areas considered good and others requiring improvement. However, the audits also highlight inconsistencies in practice, which we are committed to addressing through ongoing reflection, training, and quality improvement measures.*



*Our Out of Court Disposals (OOCd) are subject to quarterly scrutiny through the OOCd Scrutiny Panel, which includes representatives from Greater Manchester Police, the Crown Prosecution Service, Magistrates, and Youth Justice. The panel's purpose is to ensure that decision-making is appropriate, defensible, and aligned with national guidance. Feedback on our practice has generally been positive; however, areas for improvement have been identified—particularly in collaboration with police colleagues in both Bury and Rochdale—to promote a more consistent and child-centred approach across the region. We are actively involved in the development of child centred policing in relation to out of court disposals through the Greater Manchester Youth Justice lead community of practice and transforming Youth Justice plan.*



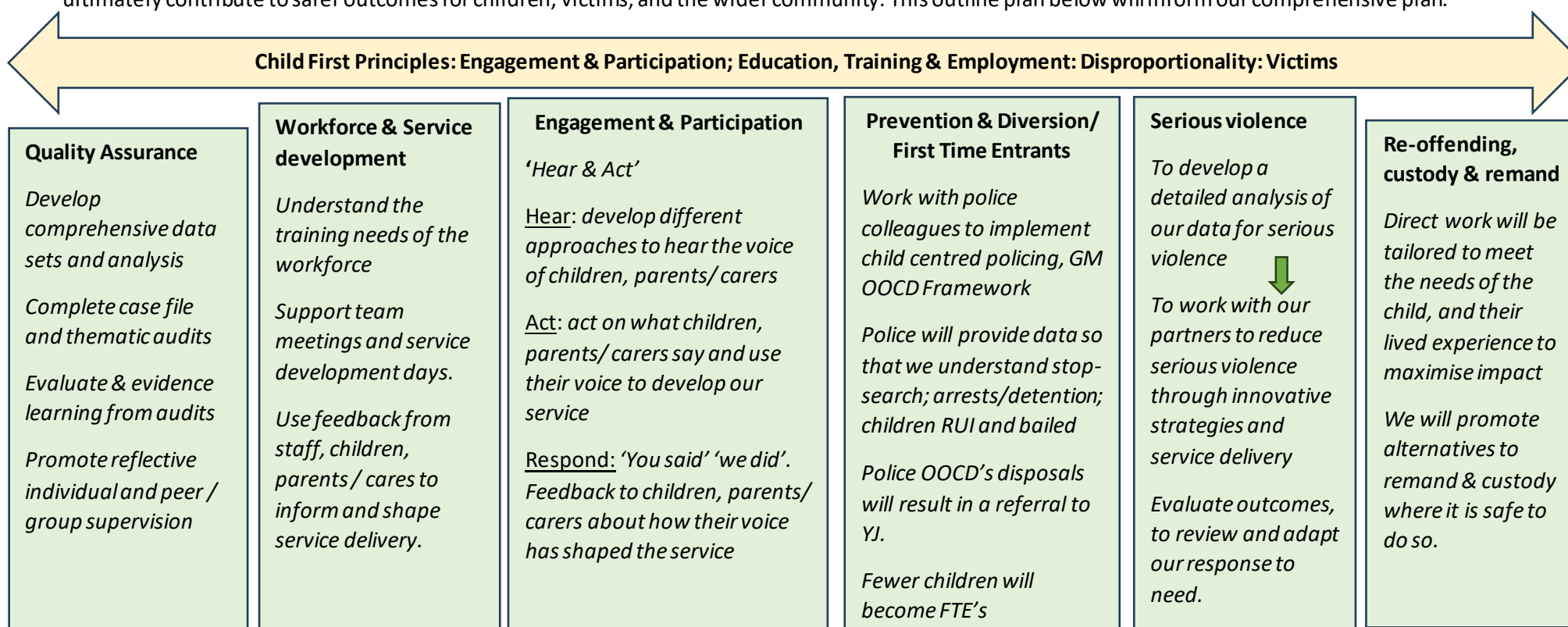
## PRIORITIES FOR THE COMING YEAR: Standards for children

<p><b>STANDARD 1 OODC</b></p> <p><i>Our data indicates that not all children issued with a Community Resolution or Outcome 22 are referred to us by our police partners. This gap limits opportunities for timely intervention and tailored support.</i></p> <p><b>Our 2025–2026</b> commitment is to address this issue by strengthening referral pathways &amp; enhancing collaboration with police colleagues to ensure that more children receive support at the earliest stage of the justice system. By doing so, we aim to reduce the number of First Time Entrants and promote more effective, preventative approaches to youth offending.</p>	<p><b>STANDARD 2 At Court</b></p> <p><i>We are committed to strengthening our quality assurance processes for children who attend Court, with a particular focus on ensuring issues of disproportionality are clearly reflected &amp; addressed within reports.</i></p> <p><i>Wherever possible, children will be supported with a communication passport—a tool designed to help the Court understand the communication style of the child appearing before it.</i></p> <p><i>All children &amp; families will receive an information leaflet explaining Court procedures and Youth Justice processes to help demystify the system, reduce anxiety, &amp; support engagement.</i></p>	<p><b>STANDARD 3 In the community</b></p> <p><i>Our approach to supporting children will be grounded in Child First, strengths-based, &amp; trauma-informed principles, engaging with children in safe places.</i></p> <p><i>We will adapt our practice to meet the unique needs of each child, delivering services in a way that respects &amp; reflects their individual identity, background, &amp; social graces.</i></p> <p><i>Our records will be written to the child—using accurate, non-blaming, &amp; appropriate language, ensuring our communication is respectful &amp; reflects the child’s voice and journey</i></p>	<p><b>STANDARD 4 In secure settings</b></p> <p><i>We remain committed to providing timely &amp; accurate information to the secure estate to support the safety &amp; wellbeing of children.</i></p> <p><i>Children will be seen regularly to maintain trusted relationships with their practitioners, offering continuity of care &amp; emotional support.</i></p> <p><i>We will advocate for family, supporting families to maintain contact with their child wherever possible.</i></p> <p><i>We will advocate access to ETE opportunities to support continuous learning. Accommodation will remain a key focus</i></p>	<p><b>STANDARD 5 On transition &amp; resettlement</b></p> <p><i>We will embed the principles constructive resettlement in our risk management processes; [pre-sentence stage to post-custody]. This will enable us to address areas of concern and actively promote protective factors to support long-term desistance and positive outcomes.</i></p> <p><i>We will work in partnership with colleagues from the NPS to strengthen transitions for children aged 17 + to ensure our young people receive the right support as they transition into becoming a young adult</i></p>
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## SERVICE DEVELOPMENT

As a Youth Justice service, we operate within a framework shaped by legislation, governing bodies, and external inspection standards. In addition, we are accountable to our wider Children's Services directorate through internal assurance processes, all of which are designed to drive continuous improvement and deliver excellence for the children we support. Looking ahead to 2025–2026, we are committed to evolving and modernising our Youth Justice offer to ensure it remains responsive, relevant, and aligned with the current and emerging needs of our children and young people.

Throughout 2024–2025, we have remained in Quadrant 3, and our focus moving forward is to return to core principles —understanding our data in depth, gaining deeper insight into the lived experiences of our children, and fostering a culture of continuous learning. By doing so, we aim to address key areas for development and strengthen our practice. This approach will help us promote safety and stability, support children in achieving positive change, and ultimately contribute to safer outcomes for children, victims, and the wider community. This outline plan below will inform our comprehensive plan.



## NATIONAL PRIORITY AREAS

Certain groups of children continue to be over-represented within Youth Justice and across wider services. While we do not control the referrals made to us, we recognise that children from specific backgrounds — such as those from minoritised ethnic groups, those with SEND or EHCPs, children in care, or those already known to other services — may be disproportionately referred in, and, as a result, over-represented. It is essential that we understand which groups are affected and why, so that we can engage with these children in ways that are meaningful, respectful, and responsive to their lived experiences. This understanding is key to delivering equitable and inclusive support. Bury and Rochdale have observed an over-representation in the groups below.

### Ethnicity

Ethnicity	Total Caseload		Total Caseload%	
	Bury	Rochdale	Bury	Rochdale
White	34	77	54.8%	70.0%
Asian	8	13	12.9%	11.8%
Black	3	8	4.8%	7.3%
Chinese/Other	5	5	8.1%	4.5%
Mixed	9	6	14.5%	5.5%
Unknown	3	1	4.8%	0.9%
Total	62	110	100%	100%

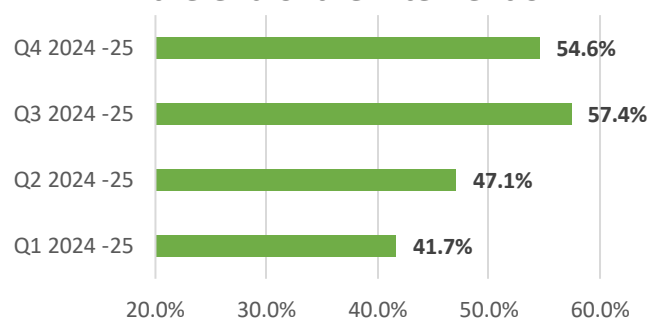
#### *[Data is showing open interventions between Q4 2024-2025]*

*There remains a disproportionate overall picture across some ethnic groups with 35.5% of our Youth Justice Service children from Asian, Black or Mixed heritage, although this is based on small overall numbers, it is prone to fluctuation and can be misleading unless viewed over much longer time periods based on higher overall numbers.*

**2025-2026 plan:** *To design and implement our disproportionality policy and quality assurance process so that we ensure that we consider diversity and equality in our Standards [OOC, Court, Community, Secure, and Transitions], through our Assessment, Plan, Delivery, Review, Closure; Supervision; Reports, and Audits. To ensure our workforce are culturally competent.*

### Education, Training and Employment

% YP within YJS in Suitable ETE at the end of the intervention



#### Data Quarter 4 2024- 2025

*Children who are open to Youth Justice often struggle with Education, Training and Employment. At the end of their intervention 54.6% of children were in suitable education. 13.95 % of children had a Statement of Educational Needs; and 10.47% had an Education Health Care Plan.*

**2025-2026-** *We will support children to feel a sense of achievement through delivering AQA's; and advocate for children to have access to the right education, training and employment. This will include working with school to reduce exclusions, promote attendance and participation and engagement.*

### Gender

#### Data Quarter 4 2024- 2025

*The number of girls open to our Youth Justice Service has remained relatively consistent during Q1,2,3 and 4 in 2024- 2025. We have worked with the Greater Manchester working with girls' group & have identified specific areas of support that is needed, resulting in a Greater Manchester programme for girls.*

**2025- 2026:** *We need to evaluate this programme through feedback from our girls, and reflect on what is working well, an what we need to strengthen.*

33 Girls

19.19 %

138 Boys

80.23%



## Cared for children



### Data Quarter 4 2024- 2025

*We recognise that these children are among the most vulnerable, often having experienced significant adversity and trauma. At Quarter 4, two of the twenty cared for children had committed offences within their care setting. In alignment with child-centred policing principles, we continue to advocate for Out of Court Disposals (OOCs) wherever it is safe and appropriate to do so. All children are screened prior to court appearances to assess whether an OOC can be pursued as an alternative to formal proceedings.*

**2025–2026,** we are committed to strengthening our advocacy for cared for children. This includes developing joint supervision and audit arrangements for those assessed as posing a high risk of reoffending and/or serious harm to others, ensuring a more coordinated and trauma-informed response.

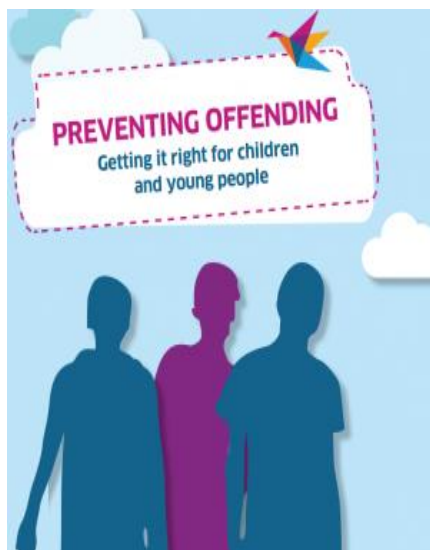
**Policing:** We have two full time seconded police officers representing Bury and Rochdale in our service

*We continue to face challenges in fully implementing child-centred policing & the OOC framework across Bury and Rochdale. One of the key barriers is limited police data, & the data that we do receive highlights significant gaps between the number of recorded disposals & the number of children referred for Youth Justice support. For example, in Quarter 4, 172 crimes were recorded (with some children linked to multiple offences), yet only 32 referrals were made to Youth Justice during the same period.*

**2025–2026,** we are taking a proactive approach to address these issues. We are escalating concerns through our partnership board and directly with police colleagues. We have formally requested a monthly data set from the police, advocated for additional training for frontline officers, and committed to refreshing our local joint working arrangements in line with NPCC guidance. Additionally, we will be developing a clear escalation pathway to strengthen governance and accountability. These actions aim to reduce the number of First Time Entrants (FTEs) and ensure children receive timely and appropriate support.



## Prevention



Bury Local Authority complete their own Prevention & Turnaround support.

*At Quarter 4 of 2024–2025, 40 children (27.21%) were open to our Rochdale Prevention Service. Of these, 25% were supported through school-based prevention [Knife Crime Exclusion Programme], 55% through the Turnaround programme, 7.5% through other mentoring-based prevention support, and 12.5% for Harmful Sexual Behaviour (HSB) prevention. We continue to deliver both PPIED and Turnaround interventions and work closely with partners to prevent children from entering the criminal justice system. We have begun to strengthen our collaboration with Family Hubs, with referral pathways becoming more embedded and our attendance at Family Help Panels increasing. Additionally, we have aligned Youth Justice single points of contact with neighbourhood teams, although further work is needed to consolidate this approach. We continue to work closely with Bury prevention service.*

**2025–2026**, our priorities include: Reviewing policies and collaborative working arrangements with partners: Strengthening feedback mechanisms from children, parents, and carers: Developing an evaluation process to assess the impact and effectiveness of our prevention offer: Enhancing collaboration with the Youth Service to support targeted outreach work: and continue to work across Greater Manchester to understand and improve our connectivity with Young Future Hubs.

## Diversion



Data 2024- 2025

*During 2024–2025, we supported 123 children through OOCDS (YCC) – 21, (YC) – 39, (CR) – 42, and Outcome 22 – 2. We continue to observe a higher number of Rochdale children receiving OOCDS compared to Bury, even when accounting for differences in overall caseloads. Our OOCDS are scrutinised at an external panel [CPS, Police & YJ] & are observed to be appropriate.*

**2025–2026** our priorities are outlined in the policing section above, and outline plan but also include: Reducing the number of children receiving multiple Community Resolutions or Outcome 22s before being referred to Youth Justice: Ensuring that children issued with a police disposal are referred to Youth Justice for appropriate support: Promoting the full use of available disposals, including deferred cautions and deferred prosecutions: Further developing the multi-agency Joint Decision-Making Panel to streamline processes, ensure child-focused decision-making, and support positive outcomes: and establishing a robust evaluation framework to better understand our strengths and areas for development. These actions are aimed at reducing First Time Entrants, supporting early intervention, and enhancing safety for children, victims, and communities.



## EDUCATION



% in Suitable ETE at the end of the intervention	Outcome
Q4 2024 -25	54.6%
Q3 2024 -25	57.4%
Q2 2024 -25	47.1%
Q1 2024 -25	41.7%

Child	Q1	Q2	Q3	Q4
SEND	17	19	17	24
EHCP	13	14	11	18

*Our data tells us that on average 51.55% of our children were in suitable education, training, or employment related activity during 2024- 2025. 'Suitable' is defined as a minimum of 25 hours per week of school or with a training provider for school age or 16 hours minimum of paid employment, training, college or volunteering.*

*Overall, we have seen an increase in the number of children who have complex support needs and have a statement of education needs and disabilities, and / or an Education Health Care Plan.*

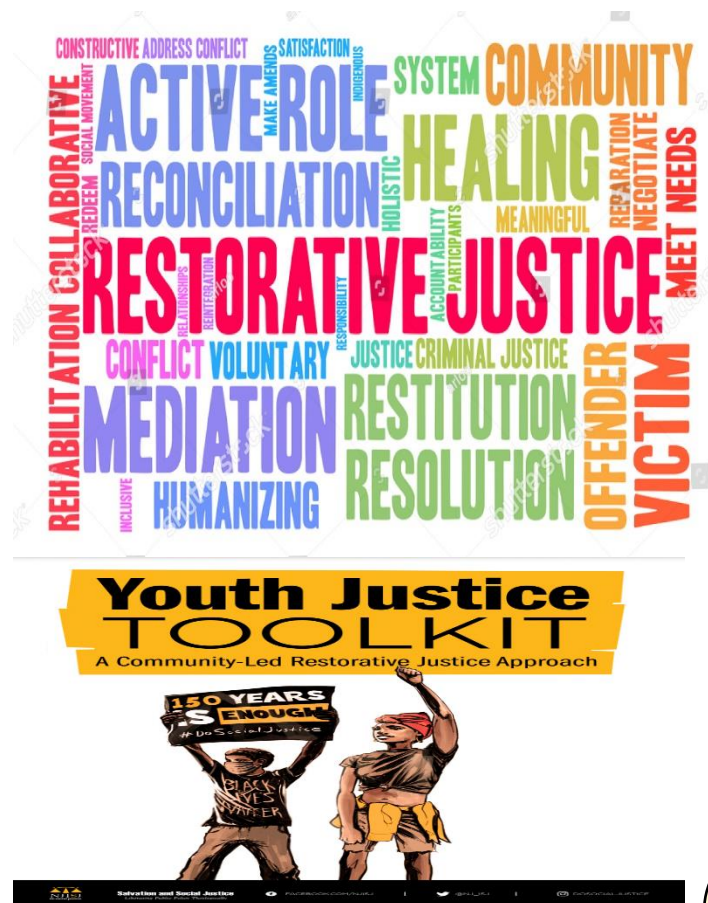
*Our Rochdale children have access to our education welfare officer who liaises closely with education providers to promote the right opportunities to learn. Bury children do not.*

*We continue to work closely with Bury Connexion and Rochdale Positive Steps to support our young people into education and training opportunities.*

We have liaised with our Speech and Language Therapist and developed a 'communication passport' for our children who are diagnosed neurodiverse. This can be used in Court, so that Judges/Magistrates are aware of communication needs.

**2025 – 2026** – Our Youth Justice Partnership Board recognises that access to education, training, and employment (ETE) is a critical protective factor that supports children in achieving positive outcomes & reduces the risk of reoffending. We have established a dedicated ETE sub-group to drive strategic direction and operational improvements. This group is focused on increasing the number of children in suitable provision, reducing school absence, and preventing exclusions. Our aspirations include securing access to a dedicated Education Welfare Officer for Bury children, deliver AQA-accredited programmes to foster a sense of achievement, and developing creative and innovative learning opportunities for children who face challenges in traditional academic settings. These efforts are designed to ensure that all children have the opportunity to thrive and succeed in education and beyond.

## Restorative approaches and victims



## REPARATION

Data 1.4.2024 – 31.3.2025

*We are committed to ensuring that victims are heard & that their experiences inform our work. A total of 161 victims provided consent for their information to be shared with the police. Of these, 91% agreed to be contacted by our team, & 63% engaged in discussions around restorative justice opportunities. Among those who consented to contact, 70% were consulted for their views prior to OOC & court disposals. Notably, 61% expressed a desire to be kept informed about the child's progress. All victims were kept updated throughout the process. [The Code of Practice for Victims of Crime in England and Wales and supporting public information materials - GOV.UK](#)*

*In alignment with the newly developed Victim Standards under the updated HMIP Inspection Framework, we commissioned REMEDI to deliver specialist victim-related services. This initiative ensures our practices are consistent with both the Victims' Code and HMIP standards. While this service is still in its early stages, it has involved several planning meetings to establish clear expectations and parameters.*

Looking ahead to **2025–2026**, we have appointed a dedicated Team Manager to lead this area of work. The service will remain under continuous review to ensure its effectiveness and alignment with best practice.

*Remedi have started to foster relationships with several organisations in the community to broaden our reparation offer and have developed relationships with Trinity Community foodbank, youth club and veteran's breakfast; Radcliffe litter pickers; growing together Radcliffe; Nature Wild: Little Britain Anglers; the Rock shopping centre; Rochdale AFC; and the Canal and River trust. Going forward we need to develop an evaluation framework to understand the impact of these projects.*



## Serious violence, exploitation and contextual safeguarding

### Data year ending December 2024

*There were 48 recorded serious violence offences involving children, representing an increase of 26 compared to the same period the previous year. The rate of serious violence per 10,000 of the general 10–17 population rose to 10.3%, an increase of 5.6%. Robbery, knife-related behaviour, and violence against the person continue to be recurring themes. In response, we have appointed a Serious Violence Project Lead who works across Youth Justice and Community Safety, leading on the delivery of the Virtual Reality Knife Crime Programme and the School Exclusion Prevention initiative. The Youth Justice Partnership Board has acknowledged the rise in serious violence and established a dedicated Serious Violence Sub-Group to provide strategic oversight and drive operational change.*

**2025–2026,** *our priorities include: monthly analysis of serious violence cases to better understand the characteristics, demographics & localities, evaluating the effectiveness of our interventions, incorporating feedback from children & their parents/carers to inform continuous improvement, undertaking rapid reviews where appropriate and embedding learning into practice, ensuring our multi-agency decision making & risk management panels consider context, challenge & support partners to ensure resources are targeted effectively and safely, with the overarching aim of reducing serious violence and improving outcomes for children and communities.*



### Complex Safeguarding

Rochdale Complex Safeguarding Service and Bury and Rochdale Youth Justice share the same Head of Service, while Bury Complex Safeguarding operates under its own leadership. Both services continue to work in close partnership with the Greater Manchester Combined Authority, which brings together statutory safeguarding partners—Social Care, Police, and Health—under a unified regional approach.

Bury and Rochdale Youth Justice are aligned in principle with the Tackling Child Exploitation (TCE) eight principles, as illustrated in the diagram below. These principles underpin our approach to complex safeguarding and reflect our commitment to child-centred, trauma-informed practice. The Greater

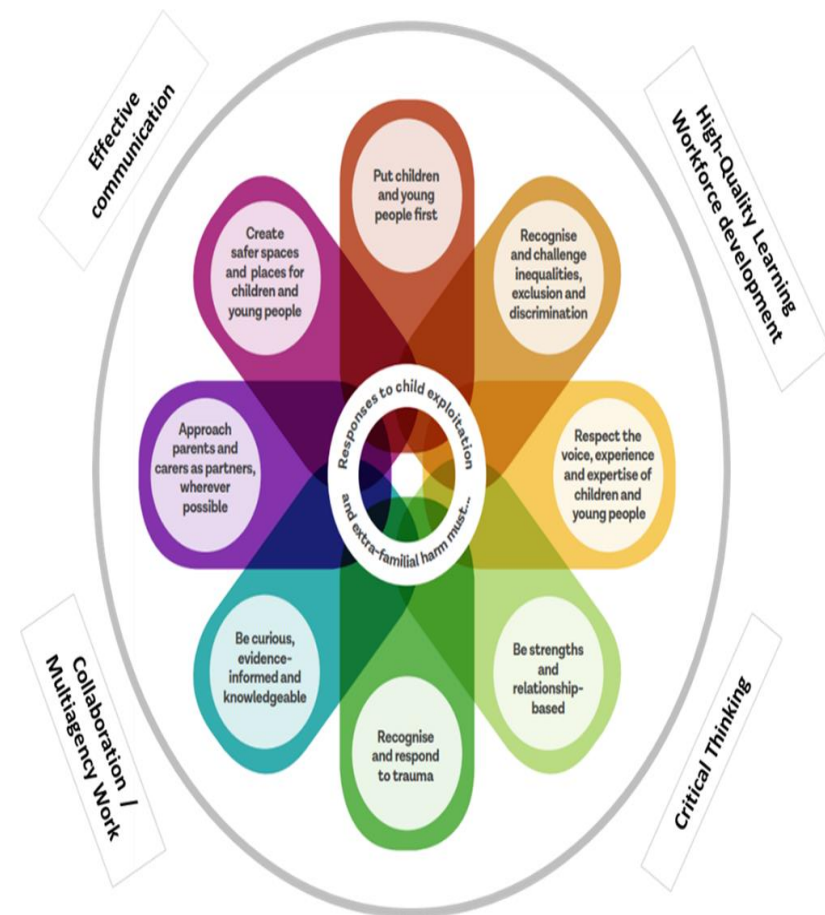
Manchester Complex Safeguarding Strategy 2024–2027 <https://www.greatermanchester-ca.gov.uk/media/2z5p0kqu/greater-manchester-complex-safeguarding-strategy-final-accessible.pdf> is delivered across four strategic pillars: Prevention and Early Intervention, Intervention and Protection, Disruption, and Recovery. These pillars closely align with the core aims of Greater Manchester Youth Justice, demonstrating a shared set of values, priorities, and delivery objectives across both services.

*Bury and Rochdale have established information and intelligence-sharing arrangements; however, current data reporting routes through the Complex Safeguarding process—rather than the Youth Justice system—have led to gaps in our understanding of children who are open to both Bury and Rochdale Youth Justice and Bury Complex Safeguarding.*

*At the end of Quarter 4 (2024–2025), Rochdale’s Complex Safeguarding Team had 72 children open to them. Of these, 19 (26.38%) were also open to Youth Justice, with 14 (19.44%) linked to child criminal exploitation and 5 (6.9%) to child sexual exploitation. Among these children, 11 [57%] had active National Referral Mechanism (NRM) submissions: 4 [21%] with conclusive grounds, 7 [36%] with reasonable grounds, and 8 [42%] assessed as not requiring an NRM. In Quarter 1 of 2025, Greater Manchester Police made 82 child-related referrals under the Modern Slavery framework—2 from Bury and 6 from Rochdale.*

*Youth Justice are aware of the PREVENT and CHANNEL agenda and the head of service is the Channel Panel co-chair. Staff are expected to complete training as part of their induction.*

**2025–2026, we will:** *Reflect on and strengthen how we report, track, and collaborate with partners on NRM submissions: Establish a clear and consistent mechanism for information exchange between Bury Complex Safeguarding and Youth Justice: and explore and implement effective joint approaches to ensure our most vulnerable children receive coordinated, timely, and trauma-informed support.*



## Detention in Police custody



*We receive information daily with regards to stop and search and arrests for children across Bury and Rochdale. However, there is no specific data reporting framework in place that collates and reports on this monthly, so understanding and responding to this data in real time, for **2024 – 2025** is a challenge. [Caution; the data must only be used as a guide]*

*Arrests B524 & R 358: of which 52% resulted with no further action; of the remaining children 53% were RUI and 18% bailed, 8% received an OODC, and the rest are referred to under 'other'.*

**2025-2026-** *we continue to collaborate closely with our police colleagues to develop a monthly data set to capture characteristics and interactions with our children including: the number issued an OODC by the police, compared with those referred into Youth Justice; the number stopped & searched, arrested & detained, outcomes & the rationale behind decision making. Going forward this enhanced data collection will enable us to identify & respond swiftly to any emerging disparities & provide a foundation for constructive challenge to ensure our interventions occur at the earliest opportunity, informed by an understanding of need & demand.*

## Remand

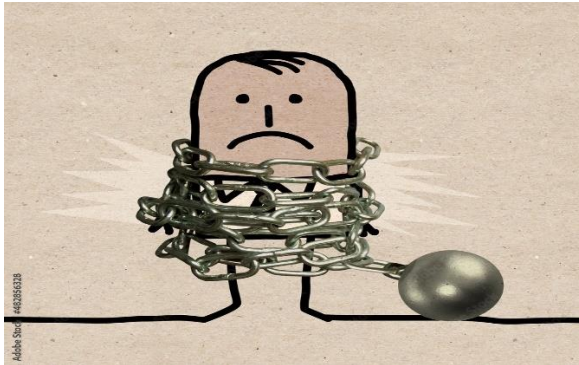


**Q4 2024- 2025:** *Our data shows that we have low remand rates: Notably both children are 'non-white' and have become 'cared for' as a result of their remand.*

Young People Custody Caseload Jan - Mar 2025							
Gender	Ethnicity	Area	YOI	C4C Status	Intervention Type	Offence	Outcome
M	Mixed	Bury	Barton Moss	In Care Status Unknown	Remand	False Imprisonment	Ongoing
M	Black	Bury	Wetherby	Remand LAC status	Remand	Robbery	Sentenced to DTO

*As part of the Greater Manchester Remand pilot our children have an opportunity to be remanded to accommodation in the community, but we are mindful that this 'placement' meets the needs of a selected few, rather than the majority. Whilst our remand rates are low, we continue to reflect on the opportunities to support our children through alternatives to remand, or remand to the care of the local authority where it is safe to do so.*

**2025- 2026:** *and strengthen our collaboration with colleagues in social care to develop joint assessment pathways. The children on remand will follow the same pathway referred to below.*

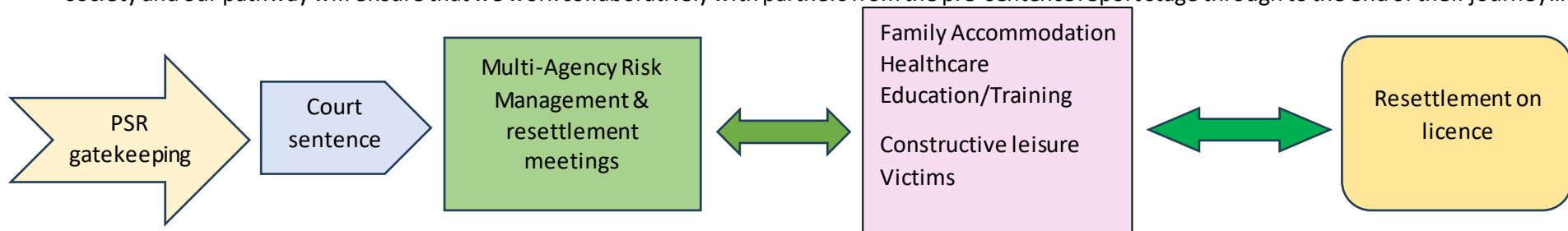
**CUSTODY**

*Our current rate of 0.09 is lower than the same time last year at 0.13, and is lower than the Northwest, Greater Manchester, and our Youth Justice family.*

Custody rate per 1,000 per 10-17 population. Good performance is low percentage	Bury & Rochdale	Northwest	Greater Manchester	YJ Family	England
Jan - Dec 2024	0.09	0.12	0.12	0.11	0.10
Oct - Sep 2024	0.06	0.11	0.10	0.13	0.10
Jul - Jun 24	0.06	0.11	0.10	0.12	0.10
Apr - Mar 24	0.09	0.12	0.11	0.14	0.11

*Between January- March 2025 we had 6 children in custody 4 of whom have been sentenced. It is clear that children are receiving custody for serious offences, however in terms of disproportionality 3 out of the 4 are 'non-white', and 1 became care experienced during their custodial term.*

**AND.... CONSTRUCTIVE RESETTLEMENT:** We know that Children in custody are likely to be amongst the most complex and vulnerable children in society and our pathway will ensure that we work collaboratively with partners from the pre-sentence report stage through to the end of their journey...



*2025-2026: we will review our pathway and develop our Multi- agency Risk & Resettlement Management meeting to include a focus on constructive resettlement so that all our children have an opportunity for individually tailored support at the outset.*

Reviews are in collaboration with children and families.

## WORKING WITH FAMILIES

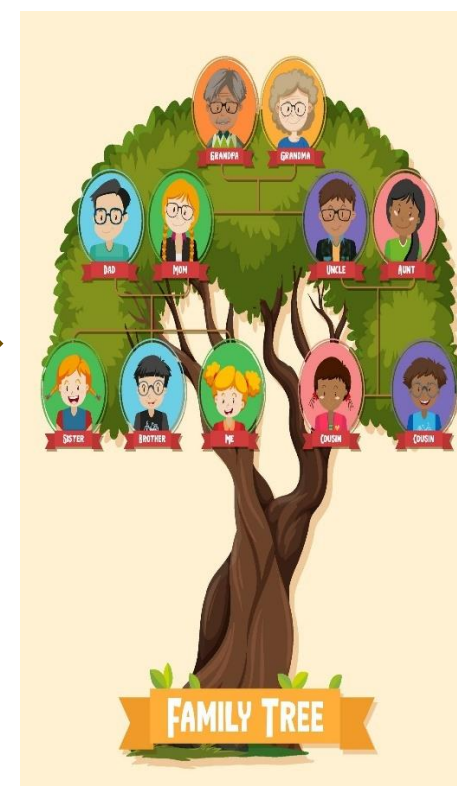
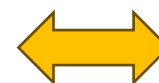
We work collaboratively with children, parents / carers and other family members to support our children to achieve positive change, and importantly to sustain that change. Bury and Rochdale work separately to deliver prevention and Turnaround, using whole family approaches. [Turnaround Programme - GOV.UK](#)

We are active members of the Early Help Panel, which provides us with valuable insight into the challenges and barriers faced by families. This engagement enables us to better target support to those most in need.

We aspire for all of our assessments and intervention plans to be developed in collaboration with parents and carers, whose feedback is actively sought during reviews and panel discussions.

Additionally, we have commissioned SHOUT to conduct three surveys to gather meaningful feedback from children, young people, and their families. We are in the analysing the information from two of the surveys, and plan to deliver the third survey imminently. This will inform continuous improvement and ensure that our services remain responsive to their needs and experiences.

**2025 – 2026** - To further strengthen communication and transparency, we will develop accessible leaflets for children, young people, and their families that clearly outline our services and support offer. The feedback provided through the 'SHOUT' surveys will inform our activity in the coming year.




**Sign off, submission and approval**

Youth justice plans, in England only, must be signed off by the full council in accordance with ‘Regulation 4 of the Local Authorities (Functions and Responsibilities) (England) Regulations 2000’.

Jeanette Richards

Director Children Services Bury

Chair Youth Justice Management Board



Signature

Abu Siddique

Assistant Director Children Services Rochdale

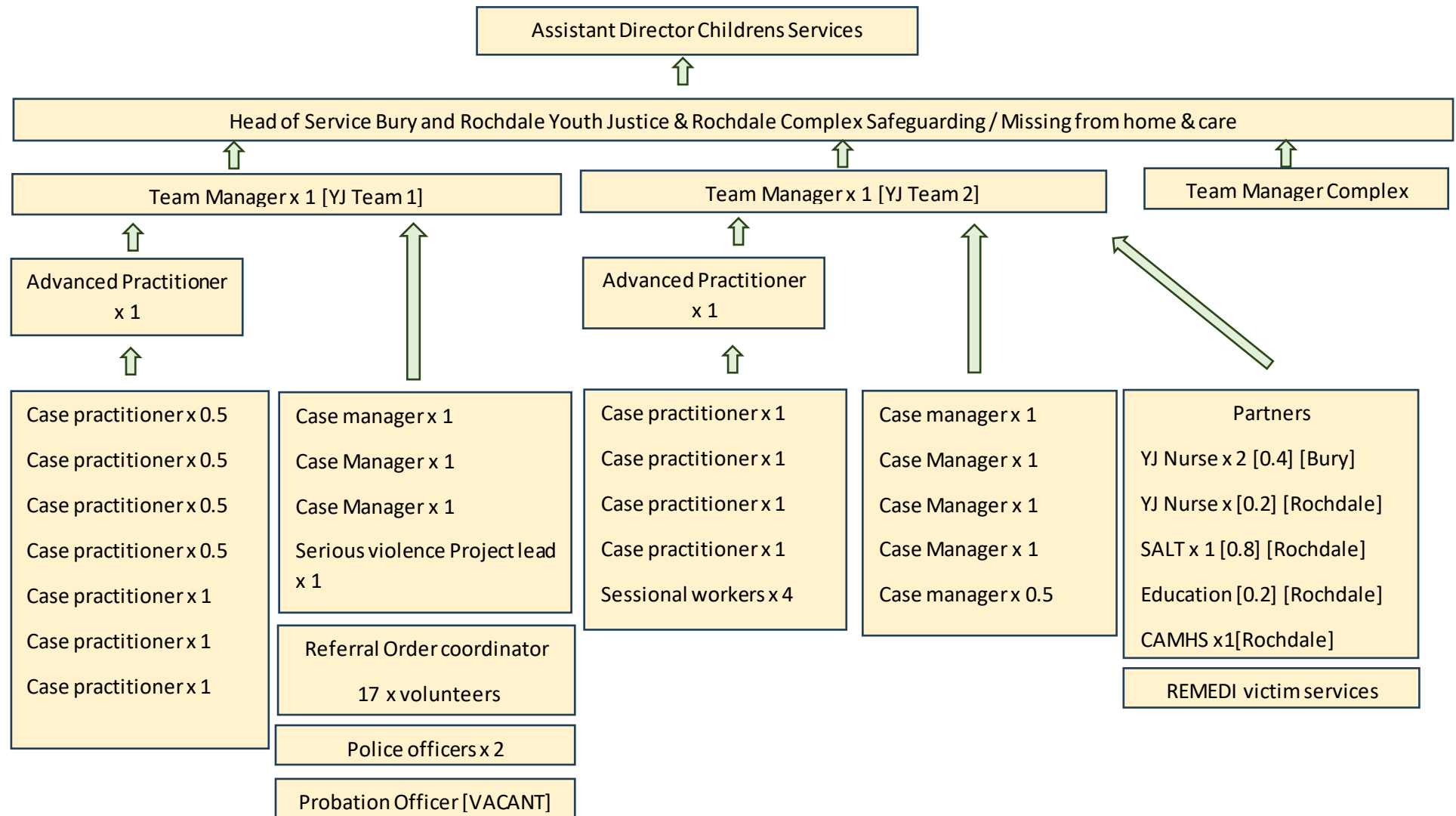
Co- Chair Youth Justice Management Board

Signature

Date



## Appendix 1: Staffing Structure



**Appendix 1: Staff & social graces**

Gender	Number	Ethnicity	Number	Disability	Number
Male	10	White	21	Yes	-
Female	16	Asian	3	No	19
Other	-	Black	-	No answered	7
Not answered	-	Dual Heritage	2		
		Other	-		

**Appendix 2: Funding**

Expenditure	Salaries	Activity cost	Overheads	Total Expenditure
YJB Grant Rochdale	£629,295.00			<b>£629,295.00</b>
Bury Contribution	£833,788.47			
LA Rochdale	£717,042.90	£90,224.00	£416,216.44	<b>£1,233,483.34</b>
Police	£35,000.00			<b>£35,000.00</b>
Probation	£3,500.00			<b>£3,500.00</b>
Health	£15,000.00			<b>£15,000.00</b>
Total	£2,233,626.37	£90,224.00	£416,216.44	<b>£1,916,278.34</b>





<b>Classification:</b> Open	<b>Decision Type:</b> Non-Key
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<b>Report to:</b>	Children & Young People Scrutiny	<b>Date:</b> 13 November 2025
<b>Subject:</b>	Youth Justice Business Plan 2025 – 2026	
<b>Report of</b>	Deputy Leader and Cabinet Member for Children and Young People	

## Summary

The legislative requirement for a Youth Justice Business Plan in England and Wales is set out in Section 40 of the Crime and Disorder Act 1998. This law mandates that: each local authority, in consultation with its statutory partners (police, health, probation, and others), must formulate and implement an annual Youth Justice Plan. The plan must detail: How youth justice services (YJSs) will be provided and funded: How they will operate, including staffing and partner services: What functions they will carry out, including prevention of offending and reduction of reoffending.

Our Youth Justice Business Plan 2025- 2026 has been approved by the Youth Justice Partnership Management Board, and the Youth Justice Board. As a legislative requirement the Ministry of Justice grant is given to us on condition that this plan is completed and implemented.

The plan must be approved by the full council (in England) under Regulation 4 of the Local Authorities (Functions and Responsibilities) (England) Regulations 2000.

## Recommendation(s)

The plan has been submitted for approval, as expected statutorily and to make Cabinet aware of the priorities, performance, issues and risks for the Youth Justice Services over the coming year (outlined on pages 21 – 23 of the Youth Justice Business Plan 2025-2026 (see appendix 1)

## Reasons for recommendation(s)

The legislative requirement set out in Section 40 of the Crime and Disorder Act 1998, as detailed in the summary section above.

## Alternative options considered and rejected

Not applicable.

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## Report Author and Contact Details:

*Name: Jen Rust*

*Position: Head of Service Early Help (interim MASSH, Duty & Assessment, EDT and CST)*

*Department: Bury Children's Services*

*E-mail: [j.rust@bury.gov.uk](mailto:j.rust@bury.gov.uk)*

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## Background

1. Bury and Rochdale Youth Justice Service amalgamated in 2014, and our partnership board is chaired by the Director of Bury Children's Services, with the Assistant Director of Rochdale Children's Services as co-chair. Strategically and operationally partners are drawn from both boroughs.
2. Bury retained responsibility for the Youth Justice Prevention element following the merge. There are close links and working relationships between the two services to ensure that we are identifying need at the earliest opportunity. One of our key priority areas is early identification of young people who may be at risk of offending, to intervene early and reduce the number of first-time entrants into the criminal justice service.
3. The Youth Justice Plan 2025/2026 was agreed by the Youth Justice Board in July 2025, and sets out the priorities for this financial year, in addition to the proposed outcomes for children and young people open to the service.
4. Issues covered in the business plan that are important for Cabinet to be aware of include:
  - a. the need for a Bury town centre base for the service,
  - b. higher numbers of children in Bury's care open to the service
  - c. higher numbers of Bury children with EHCPs and identified SEND being worked with by the Youth Justice Service
  - d. the disproportionality of some ethnic groups within the cohort of young people supported by the service
5. The Business plan notes performance against national key performance measures, with the number of first time entrants falling and the reoffending rate and custody rate being lower than the regional or GM average in Bury and Rochdale.
6. The plan also notes key risks, which include:
  - a. Inconsistent attendance at the Partnership Board, with a change in governance structure being implemented to address this issue
  - b. Differential access to expert additional resource as part of the Youth Justice offer, with Bury children not having access to a dedicated CAMHs practitioner, or a Educational Attendance specialist, or a Speech and Language Therapist
  - c. The absence of a seconded probation officer for children moving between children and adult youth justice services.
7. Six priority areas for 2025/26 are identified within the plan:
  - a. Governance & Leadership
  - b. Prevention and Diversion
  - c. Remand, Custody and Resettlement
  - d. Victims and Restorative Justice
  - e. Serious Violence and Harmful Sexual Behaviour
  - f. Quality Assurance and Workforce Developmentand these broadly map to the inspection framework for Youth Justice Services.

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## Links with the Corporate Priorities:

*Please summarise how this links to the Let's Do It Strategy.*

1. The Youth Justice Business plan links to the strategic vision from Let's Do It Strategy – making Bury a place of opportunity, reducing deprivation, improving life chances, and operationalises it is the contact of children and young people involved (or at risk of involvement) in the youth justice system.
2. It supports the Council's corporate priorities by contributing directly to improved educational outcomes, increased employability, prevention of offending, building safer and more resilient communities.
3. The plan embeds the LET's principles into its approach: working at a neighbourhood level; promoting skills / education; partnership across agencies and communities; focusing on strengths and early intervention.
4. It also provides a delivery route for the Council's ambition that no young person is left behind, that services are joined up, early intervention is key, and children / young people are supported to reach their full potential.

---

### **Equality Impact and Considerations:**

*Please provide an explanation of the outcome(s) of an initial or full EIA and make **specific reference regarding the protected characteristic of Looked After Children**. There must be a signed off EIA template appended with a full analysis or explanation as to why an analysis is not needed for the report to be put forward to cabinet.*

*Intranet link to EIA documents is [here](#).*

*Sign off to be completed by the Council's Equality, Diversity and Inclusion (EDI) Manager (contact [l.cawley@bury.gov.uk](mailto:l.cawley@bury.gov.uk) for advice).*

1. The Youth Justice Plan demonstrates a clear commitment to equality, diversity, and inclusion. In particular, it recognises the heightened vulnerability and overrepresentation of looked after children within the youth justice system. Through trauma-informed, partnership-based and strengths led approaches, the plan aims to reduce disproportionality, promote fairness and ensure that all children - regardless of background or care status – are supported to achieve their full potential.

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### **Environmental Impact and Considerations:**

*Please provide an explanation of the Environmental impact of this decision. Please include the impact on both **Carbon emissions** (contact [climate@bury.gov.uk](mailto:climate@bury.gov.uk) for advice) and **Biodiversity** (contact [c.m.wilkinson@bury.gov.uk](mailto:c.m.wilkinson@bury.gov.uk) for advice)*

1. The Youth Justice Plan has a low direct environmental impact but aligns with Bury Council's commitment to sustainability and climate responsibility. Through local delivery models, digital working, and environmentally focused community reparation projects, the service contributes to reducing emissions and improving local environments.

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**Assessment and Mitigation of Risk:**

<b>Risk / opportunity</b>	<b>Mitigation</b>
<b>Demand and complexity of cases.</b> Increasing complexity of young people's needs (e.g. trauma, exploitation, mental health, substance misuse) places strain on capacity and resources	Multi-agency planning trauma informed practice; early help pathways; workforce development in complex needs and safeguarding.
<b>Disproportionality and Equality</b> Continued overrepresentation of looked after children and minority ethnic groups in YJS cohort.	Regular disproportionality adults; targeted diversion for children looked after and minority groups; joint working with schools and social care; board monitoring equality data.
<b>Partnership Coordination</b> Changes in partner priorities (e.g. Police, Health, Education) reduce alignment or resource contribution to youth justice outcomes.	Maintain robust Youth Justice Partnership Board governance; shared priorities in strategic plans; joint training and communications.
<b>Re-offending rates</b> Increase in youth reoffending or serious violence due to social / economic pressures or reduced Early Help capacity	Focused early intervention and diversion; targeted work with known cohorts (e.g. serious youth violence); robust monitoring and case review

**Appendices:**

*Bury and Rochdale Youth Justice Business Plan 2025-26.*

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**Background papers:**

*Please list any background documents to this report and include a hyperlink where possible.*

**Please include a glossary of terms, abbreviations and acronyms used in this report.**

<b>Term</b>	<b>Meaning</b>

Bury Local Area SEND Partnership

# Self Evaluation

*Annual Engagement Meeting October 2025*

October 2025



Local Context	3-4
Our Strategy	5-8
Progress Summary for DfE & NHSE Stocktake Meeting July 2025	9-27
Cross-referencing the Ofsted framework to the Priority Action Plan & Wider Activity	28-29

# Local Context – Population and Place

## The population

- Last three Indices of Multiple Deprivation for England (2010, 2015 and 2019), Bury ranked 82nd, 86th and 75th for deprivation out of 151 upper tier authorities (1st = most deprived, 151st = least deprived), between the 50th and 57th percentile.
- Bury child ethnic make-up is average, with 65% White/UK compared to national average of 60% (both decreasing by 1% over the last year) and a larger Asian Pakistani population than is typical (13% compared to 5% nationally)
- Bury's proportion of EAL children is slightly lower than national average (19%, compared to 21% nationally (both rising by 0.5% across the past year)
- Bury child gender make-up is weighted more towards boys than girls (52.5:47.5, compared with 51:49 nationally – the proportion of girls has decreased very slightly in Bury in the past year.
- Bury known Free School Meal eligibility (25.2%) is less than national average (26.6%) – both rising by 1% in the past year.

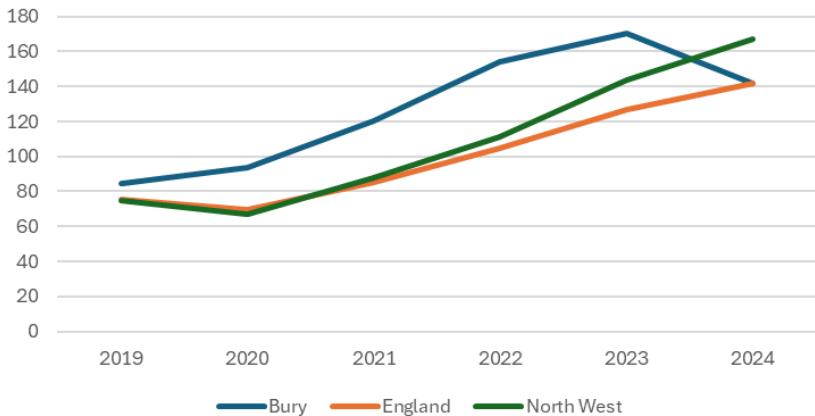
## The place

- Bury Council covers sub-areas with diverse characteristics – from the sub-rural, small towns in the north to larger population centres in Bury and Radcliffe, fringing into north Manchester suburbia.
- The overall average of its demographic characteristics masks inequality and disadvantage experienced by our communities, with most of the work of the council's Children's Services focused on the areas of greater deprivation, with between two-thirds and three-quarters of the children in receipt of family help or social care support living in 7 of the borough's 17 wards, depending on the measure used. These 7 wards are predominantly in the east of Bury town or in Radcliffe, with some other specific hotspots dotted elsewhere in ex-council estate areas of housing. The pattern for demand in SEND is similar, albeit with a higher prevalence in parts of Prestwich.

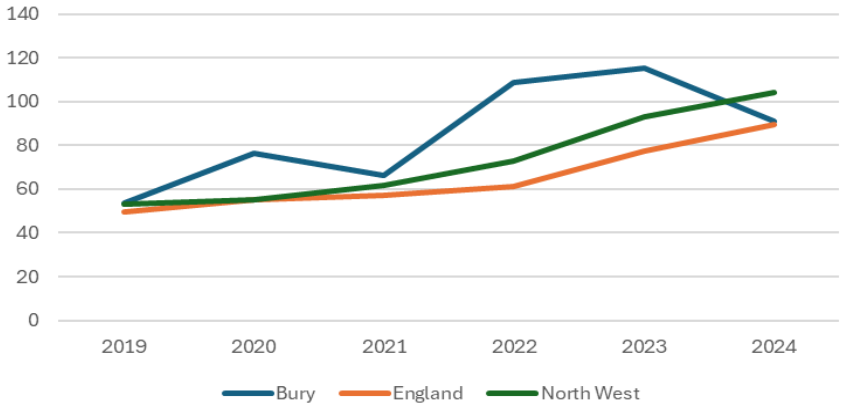
# Local Context – SEND Key Facts, Recent Patterns and Emerging Trends

Total number of EHCPs per head of population remains higher than the national average (27%, down from 34% the previous year), but the last 18 months have seen signs of increasing confidence in the local system – fewer requests for assessment, bucking a strong regional and national upward trend and fewer new EHCPs issued.

Requests for assessment



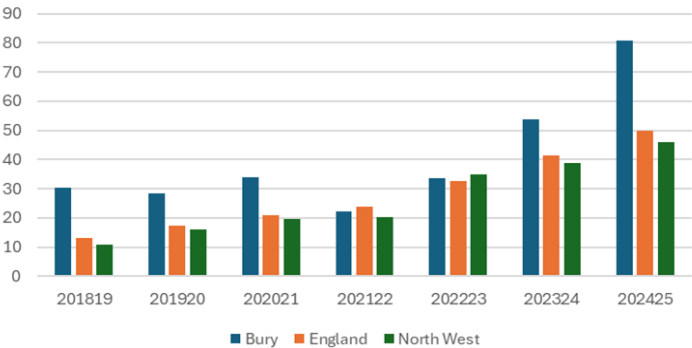
New Plans issued per year



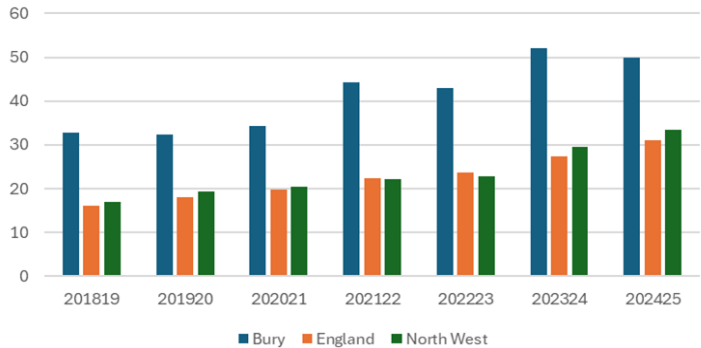
Finally, there are signs that the national policy uncertainty is beginning to affect the local system with rising numbers of requests for assessment during spring/summer 2025.

The ability of Local maintained school provision to meet need remains a crucial issue, with high rates of children with EHCPs in INMSS and in AP and other provision, per head of population.

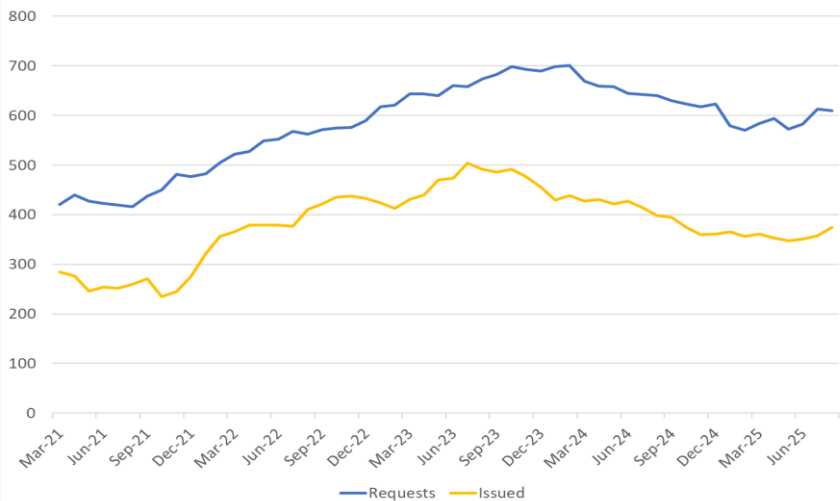
EHCP rate - AP and Elsewhere



INMSS and Specialist post-16



EHCP Activity - number of requests to assess and number of EHCPs issued in the previous 12 mths





# Bury SEND Strategic Vision 2025-2028

Approved by Bury Send Improvement & Assurance Board - September 2025  
For Review – September 2026



# Creating a positive and sustainable future for our Children and Young people

*“We are a group of young people who come from Bury. We work with decision makers to ensure strategies like this deliver outcomes that matter to us. These are things like feeling healthy and well, freedom to choose our next steps, and feeling safe.*

*We, as young people, understand how everyone is impacted differently by their additional needs and disabilities. We want everyone to have aspirations and goals, and to be supported with those, with their individual needs taken into consideration.*

*This SEND strategy which has been co-produced by Bury Changemakers, Bury Youth Service and the SEND Improvement and Assurance Board is the result of conversations with young people about social reform and improvement to SEND for children and young people in Bury.*

*We hope this strategy will improve the lives of children and young people in Bury. The strategy is for them, and for parents/carers. This document is also for anyone who interacts with children and young people with SEND in the public and voluntary sectors. We hope they will better understand, accommodate, support and respect children and young people with SEND, their families, and those who support them.”*

*The Changemakers & Bury Youth Service*



*This document has been co-produced by:*

- Children and young people with Special Education Needs
- Bury2Gether
- NHS Greater Manchester
- Bury Council

# Strategy on a page



**Our goal is to deliver on the things that matter to children and young people. Our goal is to work as a partnership so that children and families can take control of their lives, access the support that they need, and reach their potential.**

Page 55



The outcomes we are trying to deliver are the ones that our Children and Young People want:

- I am **safe**
- The people that care for me are **respected** and supported
- I feel **healthy** and well
- I have **fun**
- I have the **freedom** to choose my next steps and I am as independent as possible
- I have my say and feel **heard**
- I feel **included** at home, school and in the community

We promise that we will ensure children and young people are **informed** and understand the service that they are being offered and how it will help them.

We recognise that **good relationships** with children and young people are key to all who work with them and we promise that professionals will endeavour to build a strong, transparent and honest relationship with the young person they are working with.

We promise that staff who engage with children and young people will have the appropriate engagement **skills and training**



Our priority focus is delivering improvements to our SEND services and support through our work:

- Co-production of improvements to service and support, and better communication with children and parents
- Ensuring the right support for children is available at the right time
- Ensuring effective transport to ensure children can access education
- Supporting our parents and carers
- Supporting children and young people to have fun

**Our most important partners are our children and young people, and parents and carers.** We are working with them through Youth Cabinet, Changemakers, Bury2Gether, Co-production events, and school visits.

**The organisations working together to deliver these improvements are** Bury Council, NHS, Primary and Secondary schools, Early Years settings and Post-16 settings

# Purpose of the strategy

Positive outcomes means adults valuing what we have to say, being supportive and encouraging.

This strategy is a key tool for us as a partnership to deliver the best outcomes we can for our Children and Young People with Special Educational Needs.

It will ensure that our local SEND system is focused on identifying the needs of children and young people as early as possible, meets their needs as soon as we can, and ensures there is a range of support available that can best meet their needs (known as a 'Graduated Approach').

Supporting children at all levels of our Graduated Approach requires partners from across our schools, the council and the NHS and others to work with children and young people, their parents, and/or carers to ensure that they have everything they need to live good lives and to thrive both in and out of school.

We know that we have changes that we need to make, and that these changes will not be simple to do. It is important that all the work we do as a partnership fits together.

This strategy will help us do that, ensuring that we are all working towards a shared goal, and providing the link between the different parts of the system.

By ensuring that all of our teams are working to this strategy we are confident that we can make a positive impact working alongside our children, young people, parents, carers and families.

Local Area SEND Partnership Priority Impact Plan

# July 2025 Stocktake with DfE & NHSE

July 2025 with updates October 2025





# 1. Executive summary





# Executive summary

In Bury we have progressed the strategic alignment of the 6 priority areas and 3 areas for improvement, supporting us to understand how different elements of the system are interconnected and foster a more collaborative approach across the partnership. These insights have shaped our focus during the last 6 months of our improvement plan, aimed at delivering better outcomes for children and young people with SEND, and their families. We have taken purposeful and effective action yet recognise there is still more to do to ensure every child, young person and their families receives the support they need, when they need it.

The December & July, Stocktake and supporting 'deep dive' activities have been instrumental in evaluating the current state and defining key next steps.

## Strengths

We are very proud of the contributions made by groups of children and young people. Their voices, experiences, and aspirations have been at the heart of our work, shaping our priorities and driving our commitment to meaningful change. Our approach is grounded in the reality of our system—its strengths, its challenges, and its potential.

- Progress on the journey of developing our strategic partnerships, providing support and challenge and shifting the culture from silos to enhanced inter and intra-organisational collaborative working
- Strategic developments have reached fruition, with an agreed SEND strategy, Workforce Strategy an AP strategy and a graduated approach, with a well-attended launch event in late September 2025, laying the groundwork for long-term improvements across the SEND system.
- Strengthening early identification and enhanced support whilst waiting for Health services
- Improving EHCP quality & compliance, through increases in capacity and capability
- Strengthened transitional arrangements to promote joined up planning across services, including those preparing for adulthood

## Priorities and development areas

- Availability of data, reporting, defining clear, measurable outcomes
- Ability to meet increasing demand and complexity of need across the system
- Strategic alignment, shared accountability
- Ongoing challenge of developing workforce capacity, consistency, and skills alongside delivering transformation and change
- Historical legacy & shifting national policy and reform (current landscape)
- Ability to reach and co-produce change with a wider group of children, young people and parents/carers



Over the course of our improvement, our partnership has made significant efforts in our commitment to deepen collaboration, building trust, and aligning efforts across the SEND system. This progress reflects a shared commitment to improving outcomes for children and young people with SEND in Bury.

## **Successes:**

- We have actively worked closely with early years providers, schools, and post-16 settings to foster a more inclusive and responsive educational environment.
- Bury2Gether established as a key partner, and a commitment and start of the journey to establishing a more authentic and valued relationship with parents.
- Cross-sector collaboration has progressed, with clearer roles, shared priorities, and more integrated planning, through re-establishments of our joint commissioning group and multi-agency panels have enhanced coordination, though there is still work to do
- Deliberate efforts to improve how we communicate with stakeholders and act on feedback. Mechanisms such as a survey, listening events, and feedback loops are helping us to start to become more responsive and transparent.

## **Priorities and development areas:**

- Deepen co-production and engagement in some parts of our overall system including in relation to some aspects of NHS commissioning, enhancing integration and joint working, particularly around transitions and PfA
- Creating a culture of collaboration: building and sustaining trust with families through visible action and accountability and timely responses to concerns, feedback
- Continue investing in workforce development across the system to build confidence and capability in inclusive practice, through targeted training and resources to meet increasing levels of demand
- Embed consistent early identification / support pathways across settings

# Engagement & coproduction with children and young people

Across the partnership, we have created spaces for children and young people to contribute to our improvement journey, placing their voices at the heart of everything we do. Children and young people with SEND in these groups are becoming **active partners** in shaping the services that affect their lives. As a partnership we will expand on this work to create a cultural shift in moving from consultation to coproduction, doing so wherever we can, and with an increasingly broad number of children and young people. This change not only affirms their autonomy but also builds trust and confidence in the services designed to support them and there is a sense of optimism about their future among the children and young people who have contributed

## Key achievements

- Young people feel listened to and are making their own decisions and are optimistic about careers, relationships and independence.
- Coproduction of the Local Area SEND Strategy
- Improved engagement and visible senior leaders and an appreciation that the partnership are working hard to support them
- Strengthened communication and engagement, described as very good and clear
- Feeding SEND voices into the wider participation work
- Changemaker group, driven by passionate children & young people, which they love!
- Some young people feel listened to and are making their own decisions and are optimistic about careers, relationships and independence.
- Good examples of professionals speaking directly to them, not just their parents

## Areas for development

- Easing financial worries about the future and improved communication of the work being done behind the scenes
- Current Changemakers group reflects only a small number of children and young people

## Changemaker priorities

- Develop training for professionals on engaging students with SEND and promoting early identification safety and effective support
- Create a “School Survival Guide” tailored for children and young people with SEND
- Broaden engagement and improve transparency to ensure all voices are heard



## 2. Progress summary – impact measures and milestones for each Priority Theme





# Theme 1 – PIP1 – Strategy

## Impact of PIP to date

The process of developing and co-producing the SEND strategy for the borough was helpful in confirming the outcomes for children's and young people we are seeking, our priorities, our programme of work, and the importance of co-production, and has thus informed our delivery against priorities across the breadth of the programme. Having recently been finalised, we have begun to circulate the strategy to all partners and stakeholders in the borough. This will be part of and complement the strengthened and improved communication and engagement mechanism, including specifically the relaunch and strengthened compliance of the local offer.

The work of the SIAB is increasingly informed by a variety of feedback mechanisms capturing the voice of children and families, and via direct engagement with children and young people .

Governance routes are clear for the work of SIAB across the partnership including the ICB and there is evidence of utilisation of governance to effect prioritised action and change – for example in some NHS waiting times.

## Changes we need to make in the next phase of the programme

Further work is required to demonstrate more clearly to children and families the impact of the strategic framework, and we also need to more clearly articulate the sense of the strategic framework with its focus on outcomes for children and young people operating as a golden thread through all other associated strategy and policy documentation – the graduated approach, the relaunched SENCo network and the workforce strategy.

Areas of strength	Areas for development	Selected data points to illustrate impact to date
<ol style="list-style-type: none"><li>1. Strategic vision for Bury SEND improvement collaboratively developed and formally approved</li><li>2. SEN Strategy fully co-produced with Bury2Gether and agreed at Improvement Board</li><li>3. Other strategies agreed by Board and Council – such as the Workforce Strategy, the AP strategy – with the wider Education and Inclusion strategy to be launched in Nov.</li><li>4. Improvements in communications through increased comms on Local Offer and through feedback loops such as 'You said , We are Doing'</li><li>5. Programme governance approaching maturity; now able to propose changes to drive long-term sustainability</li></ol>	<ol style="list-style-type: none"><li>1. Much progress developing data/intelligence on the progress/impact of the improvement plan, but further work and coproduction required to reach maturity over next 6 months</li><li>2. Use the information provided by assurance activity to develop greater oversight of the SEND system and better understand experiences of children, young people and their families and act upon whilst highlighting pressure, risk and progress to services.</li></ol>	<ul style="list-style-type: none"><li>• In the last year, received 14.4 request for an assessment per 1,000 4–19-year-olds. This is the same as the North West rate, showing that we are performing in line with many of our comparators.</li><li>• Growth in the number and proportion of children supported at SEN Support in Mainstream schools in the past 18 months – a key change and previously a telling difference between Bury and the England as a whole</li><li>• Data on impact is currently unavailable, with a survey to collect views of children and families set to be carried out in the near-term.</li></ul>

Impact of AFI to date

Foundations are now in place to enable the communication improvements identified, with the designation of a SEND Comms and Engagement Officer, temporary CYP Comms Manager & interim Head of Comms since the last stock take. An interim comms strategy and comms working group have been established to enable insights and the voice of service users, parents and carers to co-produce the comms strategy and drive delivery. SEND newsletters have been produced and published with improved curation and production. A programme of regular updates to the Local Offer is in implementation and publicised via social media pages to provide opportunities for corporate/mass comms activity and dialogue.

While there has been an uplift in comms and engagement activity via mass communication methods, a challenge remains around direct relationships and networks. This is being approached in multiple ways:

- A set of standards has been written into the interim comms strategy with the SEND delivery group, with SIAB asked on an ongoing basis to provide insight for embedding those;
- A standing item has been added to the SIAB agenda to ensure all board members take away a shared understanding of the key messages arising and specific calls-to-action;
- A stakeholder mapping exercise is proposed as part of the ongoing board development to understand connections, networks and what support might be needed for board member dialogues with those groups (as well as spotting and addressing gaps).

Changes we need to make in the next phase of the programme

The proposal for the Changemakers having a social media presence has been agreed in principle and is in research to understand what is possible while ensuring safeguarding and proper use. The work to mainstream communication and develop the culture of proactive updates and dialogue, and prioritising that as part of the work (and not an add-on) must be prioritised so that all areas of the system are clear with all about what they do, providing updates and information, and sharing their successes as well as being transparent about the challenges.

Areas of strength	Areas for development	Selected data points to illustrate impact to date
<div>1. Initial comms approach &amp; framework (i.e. strategy) now in place, driving better use of the Local Offer, council website, and other channels – newsletter and Facebook page.</div> <div>2. A set of standards have been integrated into the interim comms. Strategy and is a standing item added to the SIAB agenda to promote shared understanding and messages</div> <div>3. The voices of children in the Changemakers group and parents in the Bury2Gether steering group included in the co-design of the strategy</div>	<div>1. Completion of a full SEND Comms strategy</div> <div>2. Continued development of the Changemakers group, expanding reach and engagement of a wider cohort of pupil voices</div> <div>3. A more coordinated, systematic, and two-way approach is required for continually gathering the feedback and experience of parents/families</div>	<div>• They are making young people’s voices heard and are validating their thoughts and feelings”</div> <div>• “[I like] being a mouthpiece for young people with additional needs and disabilities”</div> <div>• “I appreciate all the effort you have put into the group and help and support you have offered.” <i>Young person</i></div> <div>• Substantial reduction in the number of complaints received from parents, compared to late 2023/early 2024.</div>

# Theme 1 – AFI3 – Workforce

## Impact of AFI to date

A high-level workforce strategy, informed by best practice, has been developed to define the required training levels for specific staff cohorts. An implementation plan is in development. The programme sets a clear framework, though it's too early to assess impact. Work is underway to complete a stocktake of current training provision, with assessment of demand by competency level and comparison of training uptake against cohort size and identify gaps in provision.

Whilst our implementation plan is under development, training remains at the heart of our efforts to support inclusive practice and continuous learning. As part of this commitment, Changemakers will be designing training for school staff on how to effectively engage with and support young people with additional needs and disabilities in education. This important work is set to begin in the summer term.

Areas of strength	Areas for development	Selected data points to illustrate impact to date
<ol style="list-style-type: none"><li>1. A comprehensive partnership Workforce Strategy developed to outline the required training levels for specific staff groups</li><li>2. Completed stocktake of existing training provision, across sector to identify training gaps and inform the implementation plan</li><li>3. Changemakers design and planned delivery of the targeted training for school staff and leaders</li><li>4. Re-launch of the SENCo network, engaging 91% of schools across the borough</li><li>5. Development of our Communities of Practice model to provide a team around the school approach to create capacity and develop shared learning through structured support, across school clusters.</li></ol>	<ol style="list-style-type: none"><li>1. Workforce Learning and Development plan, informed by the workforce strategy</li><li>2. Develop robust metrics to assess the effectiveness of the Workforce Strategy and training programs.</li><li>3. Ensure long-term engagement and support for the SENCo network beyond initial re-launch.</li><li>4. Introduce mentoring or coaching within the network to support new or less experienced SENCos.</li></ol>	<p>It is currently not feasible to collect data points to demonstrate impact, as the strategy is in early stages of implementation.</p> <p>We have developed a framework for training of staff across the council and NHS, which is delivering positive impact.</p> <p>A programme of induction sessions has been run with SENCos, and further 'Strategic Priorities for SENCos' sessions have been run. A session was also run by the EHC team on Annual Reviews.</p> <p>This is accompanied by a growing set of supporting information to give SENCos information and advice.</p>

# Theme 2 – PIP2 – Early identification and support

## Impact of PIP to date

There has been a notable increase in statutory compliance across the Local Offer, with the rollout of an enhanced Graduated Approach Toolkit and targeted CPD leading to growing uptake in schools. The development of Section 23 notifications and follow-up support has strengthened early identification pathways. Inclusion Services have been redesigned to include a community of practice model and expanded capacity. Establishment of specific SEND Health Visiting Service, is receiving very positive feedback from families.

Areas of strength	Areas for development	Selected data points to illustrate impact to date
<div>1. Increased statutory compliance across the local offer</div> <div>2. Enhanced Graduated Approach Toolkit, supported by targeted school CPD and growing uptake across settings</div> <div>3. Development of Section 23 notifications and follow up support</div> <div>4. Development of Bury's Ordinarily Available Inclusive Provision (OAIP) based upon the GM approach</div> <div>5. Redesigned and launched graduated approach, supported by tiered support services, available to all schools</div> <div>6. Redesign a of Inclusion Services, incl. a community of practice (CoP) model to build collaboration, capacity and structured support across school clusters</div> <div>7. Establishment of dedicated SEND HV team using increased Health Visitor capacity and mental health in school's team</div>	<div>1. Capacity to keep the Local Offer consistently updated, mitigating actions are now in place. These include the introduction of dedicated communications support and a compliance audit to drive improvements in content quality, accessibility, and user experience</div> <div>2. Develop a monitoring and evaluation framework to capture impact, share learning, and inform iterative improvements across the CoP model</div> <div>3. Ensure long-term engagement and support for the SENCo network beyond initial re-launch.</div> <div>4. Arrange parent/carers engagement events to ensure they are fully aware of the SEND Service re-launch and the support available to schools, as part of a graduated approach</div>	<div>• Increase from 33% to 42% of SENCOs reporting that over 50% of staff are using the Toolkit, with an overall increase in confidence in using it. Reports of Toolkit being embedded increased from 38% to 42%.</div> <div>• Attendance rates for children with SEND were 91.6% for the academic year 2024-2025</div> <div>• 60% of parents are satisfied/very satisfied with the early identification of their child's SEND needs. 57% of parents surveyed found the local offer somewhat or very useful</div> <div>• 30% of new EHCPs are for children aged 11+ years, down from 54% in 2023 &amp; growth in the proportion of secondary school age children supported at SEN Support</div> <div>• 63% of attendees reported increased confidence in Bury’s SEND Partnership, and 100% believed the new Community of Practice will positively impact inclusion and outcomes. Encouragingly, 66% of attendees now feel clearer about where to access SEND and Inclusion support, a vital step in strengthening our collective response.</div>



Impact of PIP to date

Waiting times for NHS services have consistently been flagged by young people and families, in Bury and nationally. SIAB has been routinely updated on steps taken to improve the position. Broadly access to Community Physio, Community OT, and Core CAMHS services are consistent across GM. Speech and Language therapy services have been challenged but improvement is evident and supported by the implementation of Can-do app well regarded by parents. Community Paediatric waiting times remain challenging, but this has been highlighted with NCA and local transformation work and waiting time initiative work is having an impact.

Progress is being made but we recognise this is a key factor for parents and providers and commissioners strive to improve at every opportunity. We understand progress is hard to recognise when the waiting times remain too long.

Data on the uptake of the use of padlets across a range of subjects have been routinely reported to SIAB and all NHS organisations are challenged on impact.

Changes we need to make in the next phase of the programme

The most significant challenge is the waiting time for Autism and ADHD assessment via CAMHS for young people. SIAB have been updated on the ICB wide proposals for the ND pathway, including access to an ND Hub. This is due for implementation in October – work is progressing to ensure the ND hub proposition is properly co-produced.

Areas of strength	Areas for development	Selected data points to illustrate impact to date
<div>1. Average waiting time reduction in some areas</div> <div>2. Several evidence-based services now available to families while waiting for support</div> <div>3. Launch of NHS GM Adult ADHD consultation</div>	<div>1. Some of the challenges for waiting times remain, with demand pressures and financial position of providers and commissioners, as well as availability of work, impacting these</div> <div>2. Implementation of the GM ND Hub implementation program in coproduction with stakeholders</div> <div>3. Review how the ICB health data dashboard will inform the local area partnerships SEND data dashboard</div> <div>4. Ensure that children, young people and their families are aware of how to access support whilst waiting opportunities.</div> <div>5. Further work on waiting times past first appointment – GM Health data focuses on time to first appointment, rather than more detailed pathway analysis.</div>	<div>In terms of % children’s waiting less than 18 weeks for an appointment, as of June/July 2025:</div> <div><div>CAMHS – 69% (8/10 in GM), June</div><div>Children’s Occupational Therapy – 72% (4/10 in GM), July</div><div>Community Paediatrics – 79% (4/10 in GM), July</div><div>Physiotherapy – 71% (7/10 in GM), July</div><div>SALT – 34% (9/10 in GM), July - up from 9% in August 2024</div></div>

Impact of PIP to date

Bury has maintained strong statutory compliance with EHCP timelines while progressing quality improvements, particularly in respect of new assessment. To tackle common QA issues—such as unclear aspirations and limited social care input a new EHCP template has been introduced to improve clarity and completeness, CPD has been delivered on writing legally compliant EHCPs to all SEND Officers, and an EHC Link Officer and Designated Social Care Officer has been appointed to strengthen contributions and compliance.

Changes we need to make in the next phase of the programme

- There is a need to strengthen our partnership working in this area to ensure shared ownership of outcomes.
- Improve messaging and engagement with partners, families, and communities.
- Expand Training and Quality Assurance: Build staff confidence and consistency through ongoing professional development and robust QA processes.
- Improve Data Use and Impact Tracking: Develop clearer milestone indicators and use data to drive continuous improvement.
- Balance Timeliness with Quality: Prioritise meaningful support and outcomes over meeting statutory deadlines alone.

Areas of strength	Areas for development	Selected data points to illustrate impact to date
<div>1. Successful recruitment into EHC Team, incl. Team Manager and recruitment to senior case officer structure and increased case officer capacity</div> <div>2. Improved data quality, to include compliance from services in respect of the EHCNA/annual reviews</div> <div>3. High levels of statutory compliance with the 20-week timeframe have been sustained, whilst quality improvements have been underway</div> <div>4. Develop streamlined induction pathways, processes and procedures in accordance with the statutory framework and supported by a core programme of training and development</div>	<div>1. Invest in sustainable staffing models and targeted professional development to address ongoing capacity challenges and build specialist expertise across services.</div> <div>2. Increase audit volume and improve partner commitment through clearer expectations, shared accountability, and more collaborative audit planning.</div> <div>3. Implement transparent service improvements and user engagement strategies to rebuild trust and mitigate the pressures stemming from historical perceptions.</div> <div>4. Accelerate the implementation of communication systems that support timely updates, cross-service coordination, and responsive engagement with stakeholders.</div>	<div>• Average 20-week compliance this year – remains above 90%: in the top quartile of local authorities nationally and markedly better than at the point of inspection (2023 full calendar year: 74%)</div> <div>• Invision 360 report highlights evidence of early improvements in quality, including a substantial reduction in plans audited as “inadequate” and an increasing proportion of plans rated as “good”.</div> <div>• Positive qualitative feedback is indicative of early signs of improvements, from some services users and settings</div>

Impact of PIP to date

Improvements to the information and guidance available has been improved, with the creation of factsheets and development of the local offer site that aligns with information from comparable authorities. Significant progress has also been made for individuals transitioning to adult social care, highlighted by the establishment of a PFA transition team, which facilitates a smoother shift into adult care services.

Although progress has been made in improving information about Preparing for Adulthood (PfA) and in developing guides for annual reviews, we are still working to ensure that this information is effectively integrated into annual reviews at the correct times. This effort is in parallel with other initiatives aimed at updating the EHCP and review documentation, as well as establishing quality assurance processes for these reviews.

Changes we need to make in the next phase of the programme

Effective communication and collaborative partnerships will be vital for the next stage of this initiative, ensuring that PfA is meaningfully addressed within reviews, with educational institutions playing a crucial role in enhancing pathway planning. This is closely linked to the EHC team’s ability to quality assure reviews; the feedback mechanisms established will be instrumental in driving necessary changes.

Areas of strength	Areas for development	Selected data points to illustrate impact to date
<div>1. Preparing for Adulthood pathway and factsheets developed, tested, and launched with settings.</div> <div>2. Dedicated ASC team becoming well embedded</div> <div>3. Preparing for adulthood local offer redesigned and updated with pathway information</div> <div>4. Mapping and audit of existing provision to inform future commissioning discussions.</div> <div>5. Communication with SENCOs has been successfully enhanced to improve access to key information , support and expectations</div>	<div>1. Strengthen workforce planning and resource allocation within the EHC team to ensure timely preparation meetings for all children with an EHC plan by age 14, supporting smoother transitions into adulthood.</div> <div>2. Develop targeted strategies to increase parent participation in co-production meetings, such as flexible scheduling, accessible formats, and proactive outreach ensuring that adult social care transition policies reflect lived experience and family insight.</div>	<div>• “[PfA staff member] has been brilliant – very understanding and helpful to me and my daughter, giving support whenever he can.” <i>Parent</i></div> <div>• PFA team working with all 17yrs old on PfA tracker. Current caseload 72 with 30 LD cases.</div> <div>• 72% of 19-year-olds previously supported at SEN Support in Bury qualified to level 2 (England average 65%); 34% of those with an EHCP (England 30%).</div> <div>• 40% of 19-year-olds previously supported at SEN Support in Bury qualified to level 3 (England average 35%); 21% of those with an EHCP (England 14%).</div> <div>• Amongst top 50 LAs nationally for all the measures above.</div>

Impact of PIP to date

All primary schools are now consistently inputting data into the 6 into 7 software, and secondary schools are accessing this, enabling a more standardised approach to transition and the exchange of quality information . The current service level is due to end in September 2026, with no identified funding to sustain it beyond that point. Despite the potential for this platform to support transitions from PVI nurseries to primary, and from secondary to further education, financial constraints cast doubt on continued and expanded use. Further support has been provided by education services in our continued endeavor to improve the effectiveness of transition (e.g. sharing of best practice events, portage support group, planned MA transition for parents, summer support sessions delivered from the Family Hub, targeted support from the Virtual School and Youth Service).

Additionally, all relevant health agencies have implemented Standard Operating Procedures for transition, and a system for ongoing quality assurance is planned to ensure these remain effective, including SEND Health visiting & School Nursing. MDT led meetings are in operation for children and young people with complex health needs and epilepsy however, health partners have indicated that current capacity limits their ability to deliver this. All health services a**Changes we need to make in the next phase of the programme**

Areas of strength	Areas for development	Selected data points to illustrate impact to date
<div><div>1. All primary schools are inputting transition data into 6into7, and all Secondary Schools have access.</div><div>2. Identification of further transitional support for schools, families and young people, however impact needs to be established</div><div>3. Standard Operating Procedures established across all health services</div><div>4. 2024-2025 phase transfers were largely completed within statutory timescales</div><div>5. 66% of c/yp subject to a statutory plan had a completed annual review involvement in 2024-25</div></div>	<div><div>• Evolve Bury's transition best practice guide to incorporate health and social care for use by education partners</div><div>• Understanding the cohorts of CYP in receipt of a statutory plan and those at SEN support, as well as the interdependencies across service areas</div><div>• QA to measure effectiveness of Transition Standard Operation procedures in practice</div><div>• Identify mitigating actions to address further decline of NEET figures</div><div>• Measuring wider outcomes, such as independent living, community participation and health and wellbeing.</div></div>	<div><div>• 100% of school settings using the 6into7 platform.</div><div>• Attendance rate for children with SEND in year 7 is now 92%, from a baseline of 89%</div><div>• Recent feedback from ILACS inspection, identified transitions for children in care are planned sensitively and timely, in ensuring best outcomes for children</div><div>• Achievement for children with identified SEND in RWM measures at the end of Primary school and Secondary school (A8) above national average.</div><div>• Slight decline in the percentage of children and young people in education &amp; training aged 16-17, from 85% in March 2025, from 88% in 2024. A recent parent survey is indicative that 18% were satisfied with the support they received through transitions, it is unclear if these pupils were subject to a statutory plan or receive SEN Support</div></div>

Impact of PIP to date

Key stage transfer amendments were largely completed within statutory timelines, supporting smoother transitions. Over 70% of EHCPs had a completed annual review in 2024–25, reflecting strong engagement. Improved data systems now enable comprehensive tracking of review activity, while newly developed procedures—aligned with statutory requirements and supported by staff training and CPD—are strengthening consistency and accountability across the service. Notifications for key stage transfers for the forthcoming academic year have been issued in advance to enable timely planning and preparation, with a new template introduced to ensure that Annual Reviews address all aspect of the EHCP and are supported by evidence.

Changes we need to make in the next phase of the programme

Whilst the number of EHC Plans which have had a review completed is now understood, within a 12-month period, this is a single performance indicator. The focus next will require the maintenance and strengthening of data, to understand statutory compliance with annual review timescales and a focus on quality of outcome and experience. Ensuring timely communication is an urgent issue for addressing, as well as ensuring sufficient capacity required for sustained improvement.

Area of strengths	Areas for development	Selected data points to illustrate impact to date
<div><div>1. Most key stage transfer amendments, involving a placement change, were completed in accordance with the statutory transfer timelines.</div><div>2. Annual review data is indicative that in the academic year 24-25, 66% of EHCPs had a completed review involvement, albeit timeliness or quality is not established</div><div>3. Development and improved use of data systems for tracking and reporting systems, and which now include all annual review involvements</div><div>4. Written processes and procedures have been developed in accordance with the statutory framework and supported by training to all staff</div></div>	<div><div>1. Workforce capacity and capabilities remain a challenge, against meeting the current levels of demand, though refinement of processes, training, recruitment are mitigating this, further resource is required.</div><div>2. Annual reviews are reliant on sufficiency across the system.</div><div>3. Data quality on annual review timeliness has been a longstanding challenge and resource intensive. A revised annual review plan to achieve statutory compliance is in development to determine priority areas and greater statutory compliance, including notifications</div><div>4. Historical legacy continues to impact user trust and has placed additional pressure on service capacity</div><div>5. Timely communication remains an area of concerns, systems are currently being explored to address this</div></div>	<div><div>Key Data Summary of completed reviews within a 12-month period:</div><div><div>• Total number of EHCPs due : 2,549</div><div>• Annual reviews currently overdue: 862 (34%) - either not started or in process</div><div>• Reviews either completed or not yet due: 1,687 (66%)</div></div></div>

Impact of AFI to date

The co-production and formal approval of the EOTAS policy by the Council marks a significant step in ensuring inclusive and consistent educational provision. Comprehensive training for case officers has enhanced understanding and implementation of the policy, while the establishment of a multi-agency panel ensures that all EOTAS requests are considered through a collaborative and holistic lens.

The formation of the AP Strategy Group and the drafting of a strategic framework demonstrate a proactive approach to improving outcomes for learners requiring alternative education pathways. Robust systems for the oversight of placements have been implemented, supported by targeted training, ensuring quality assurance and safeguarding standards are consistently upheld across all provisions.

Changes we need to make in the next phase of the programme

- Further work is required to effectively plan new EOTAS packages and systematically review existing ones to ensure they deliver strong educational outcomes and support clear progression routes for learners.
- Complete and publish the draft AP Strategy. A new ILP format has been launched for AP placements but now requires consistent implementation to ensure focus on outcomes.
- Explore opportunities to broaden the range of Alternative Providers available locally and in surrounding areas to better meet diverse learner needs and improve access to quality provision

Areas of strength	Areas for development	Selected data points to illustrate impact to date
<div>1. EOTAS policy has been co-produced and approved by the Council, training has been delivered for case officers regarding policy and practice, and all EOTAS requests are considered by a multi-agency panel and more robust practices are in place to review children and young people subject to longstanding EOTAS arrangements and to support effective planning through key stage transfer year groups</div> <div>2. AP strategy group has been established and a strategy co-produced and approved by council and SIAB.</div> <div>3. Systems for oversight of placements are in place and embedded and training has been provided.</div>	<div>1. AP strategy is in draft and further consideration required by strategy group to approve.</div> <div>2. Short term intervention AP has been requested from providers but further procurement may be required on an ongoing basis.</div> <div>3. Ongoing work is now being supported with regard to development and implementation of EOTAS packages</div>	<div>• There are currently 69 children in registered or unregistered AP. We were at 65 in July 2024 and 32 in February 2024.</div> <div>• Case officers report better understanding of EOTAS, S19 and EHE</div> <div>• Improved processes will result in better quality packages and outcomes for young people</div> <div>• Issues raised by parents regarding FSM, transport, school nursing and Connexions advice have been addressed.</div> <div>• Wider range of providers available with work ongoing to develop this further.</div>





### 3. Next phase of the programme



# Principal current risks within the programme

PIP/AFI	Risk	Raised	Potential impact	Mitigation
PIP2	Qualified main grade EPS availability/capacity risks provision of the EPS service	Nov 2024	Families' expertise and experience is not as embedded in the improvement process for the EPS and families do not feel that their experience is taken on board on how SEND services can be improved.	Further consultation has been conducted in respect of the EPS offer with families with a good response (54 families). Development of service plan running to 2028 to set the EP offer to parents and carers.
PIP2/PIP4	Lack of capacity in key service professionals responsible for providing updated on the Local Offer creates a risk that updates will not be made in a timely way.	Oct 2024	The local offer is a key tool to enable families to drive forward the support of their children and to ensure it is as easy as possible to navigate the system. The quality of the local offer impacts both of these.	Comms and engagement officer has introduced new processes to support timely updates in content and routes for escalation when needed.
PIP3	Health services for children and young adults have long waiting times, reduced follow-up capacity, & staffing shortages (esp community paediatrics, CAMHS, SALT). This is undermining service stability and limiting the positive impact of recent improvements, especially with no long-term plan for 18–25 Autism and ADHD pathway.	Oct 2024	Wait times means SEND CYP do not receive the services at the time they need them, which has a particularly significant impact on those who will be transitioning in the next 12 months	Where appropriate local staffing has been agreed in the short term to ensure the stability of services. The issues have been raised to Greater Manchester level and are being discussed and form part of ongoing reviews. Local programmes of work focusing on waiting times have
PIP5	12-into-13 solution: Communication challenges with 6-into-7 provider impacting on the ability to progress with wider age solutions.	May 2025	A key enabler for this area is at risk of delivery, impacting on the quality of service being provided to families.	Delivery Group to chase provider for response and escalate as required. If no response alternative solutions are to be pursued.
PIP6	Limitations and issues with the EHCP data system, risking the ability for teams and management to plan effectively and prioritise how to best meet demand.	May 2025	Inability for services to best utilise the limited resource available to be directed to those cases and families that are most in need.	Additional staff currently working through data issues, with expected completion date in June.
PIP6	Lack of capacity in the LA SEND team to tackle demand and deliver improvements; including working with parents and schools on improvements and provision.	Nov 2024	Potential negative impact on either operational delivery or delivering improvements to timescales.	Resourcing and team development.

Note: full risks register in Appendix.



# The next 6 months will see a shift in the programme to focus on sustaining change

Following our review of progress to date and a thorough assessment of current risks, our focus over the next six months will be on consolidating gains, addressing identified gaps, and embedding sustainable improvements.

Key priorities include:

**Implement mitigation plans for high-priority risks**

**Re- assess and revise** some PIPs/AFIs based on our honest self-assessment of impact to date and forward challenges and future priorities

**Condense and /rationalise** current impact/milestone measures into a more concise, manageable set of regular programme data to provide regular and more effective intelligence about programme impact, including development of a dashboard to support intelligence-led assessment of the progress being.

**Develop a sustainable governance model** that ensures the improvement journey continues beyond the Monitoring Inspection- continuing to build confidence across the local partnership and ensuring continued strategic alignment.

**Embed strategic developments and maintain momentum in key areas**, including;

Strengthening support for families during waiting periods.

Advancing the Local Offer and ensuring it is accessible, helpful and supported by a local offer live event in the autumn term

Embedding the Communities of Practice model to support shared learning and ensure more effective partnership working - developing the workforce

Enhancing transitions to ensure they are timely, well-planned, and coordinated across services

Improving communication to keep stakeholders informed of progress and impact

Widening the group of children and young people and families engaged in co-production and the shaping and focus of local strategy

# Cross-referencing the Inspection Framework to Priority Action Plan and wider activity

**Leaders are ambitious for children and young people with SEND** – see the strategy on a page 7, the work being undertaken within the Priority Action Plan and the plans for future provision in the Safety Valve Agreement with the DfE.

**Leaders actively engage and work with children, young people and families** – see information on page 6 about the co-production of the strategy, page 13 about partnership development and page 14 about the work of the changemakers, in addition to the work being undertaken across the breadth of the plan. Senior leaders meet regularly with Bury2Gether and with the Changemaker group. The SEND Improvement and Assurance Board (SIAB) has the work and views of the Changemaker group as a standing agenda item at every meeting.

**Leaders have an accurate, shared understanding of the needs of children and young people in their local area** – see the JSNA, which underpins development of the strategy and informs commissioning and plans for future provision (see the Safety Valve Agreement). The views of young people and their families are actively sought by services and by the SIAB.

**Leaders commission services and provision to meet the needs and aspirations of children and young people** – see the commissioning of more local specialist provision and additional funding for redesigned Education Psychology and Inclusion Services and the establishing of the SEND Health Visitor team. We will review the Short Breaks Service (& commission in the next 12 months)

**Leaders evaluate services and make improvements** – the SEND Improvement and Assurance Board provides a focus for ongoing evaluation of service effectiveness and emerging issues; the Board sits above a Delivery Board that focuses on granular delivery of the plan. Bury2Gether (the local parent-carer forum) sit on both boards and sense check

**Leaders create an environment for effective practice and multi-agency working to flourish** – see the new Workforce Strategy, the additional services funded as part of the plan and the recent relaunch of the SENCO Network (now supported in-house) and Communities of Practice Approach (Sept 29<sup>th</sup>)

# Cross-referencing the Inspection Framework to Priority Action Plan and wider activity

**Children and young people's needs are identified accurately and assessed in a timely and effective way** – see PIP Theme 2 – Early Identification and Support (p. 19), EHC Plans (p.21). EHCP assessments remain timely and their quality is improving. There is some evidence of improving early support in schools, with growth in the number of children supported at SEN Support, esp. in Secondary Schools. The partnership has reviewed services supporting children in schools and the support available to the network of SENCOs.

**Children, young people and their families participate in decision-making about their individual plans and support** – involvement of children and families in their planning and reviews is strong, with considerable challenge still present. The council's oversight and amendment of reviews is improving but remains an area for further improvement (see p.24)

**Children and young people receive the right help and support at the right time** – see PIP Theme 2 Early Identification and Support (p. 19), Access to Support (p.20), EHC Plans (p.21). Improvement has been made for waiting times for some therapies, but the NDP remains the key challenge – with the ICB implementing changes currently to positively change the current situation

**Children and young people are well prepared for their next steps and achieve strong outcomes** – see Preparing for Adulthood (p.22) and Transitions (p.23). Bury is among the top 50 Local Authorities for qualifications achieved by age 19. For young people previously on SEN Support, 72% achieve a level 2 qualification (compared to a 65% England average), while for those with an EHCP the figure is 34% (against a 30% national average). At level 3, 40% of those on SEN Support achieve the qualification (versus a 35% England average), alongside 21% of those with an EHCP (against a 14% national average). This relatively strong achievement for children with identified SEND is also reflected in RWM measures at the end of Primary school and in GCSEs at the end of Secondary school.

**Children and young people with SEND are valued, visible and included in their communities** – see information on page 6 about the co-production of the strategy, page 13 about partnership development and page 14 about the work of the changemakers, in addition to the work being undertaken across the breadth of the plan. Also see the development of new resourced provision in mainstream primary schools as part of the Safety Valve Agreement, and new local special schools for ASD (open) and SEMH (planned)

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# SCRUTINY REPORT

**MEETING:** Children's and Young People's Scrutiny Committee

**DATE:** November 2025

**SUBJECT:** SEND Annual Engagement Meeting with Ofsted

**REPORT FROM:** Ben Dunne, Director of Education and Skills

**CONTACT OFFICER:** Robert Arrowsmith, Head of Strategy, Assurance & Reform, Children's Services

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## 1.0 BACKGROUND

1.1 As part of Ofsted and Care Quality Commission (CQC) Area Special Educational Needs and Disability (SEND) framework there is an Annual Engagement Meeting with each Local Authority. The purpose of these meetings is for Ofsted, the CQC and the local area partnership to discuss the partnership's self-evaluation, SEND action plan, any challenges, and how leaders are addressing them. These meetings do not result in an evaluative outcome, but shape Ofsted (& CQC's) approach to the local area and can inform the timing of future inspections.

## 2.0 ISSUES

2.1 Normally for a local area judged in an Area SEND inspection to have widespread and system failings, such as Bury, the Annual Engagement Meeting (AEM) would take place following a monitoring inspection that evaluated the progress being made against the action plan that has to be submitted following the inspection. However, there is a backlog in monitoring inspections nationally and within the region, caused by the number of local areas judged adversely within the framework.

2.2 Monitoring inspections are supposed to take place within 18 months of the full Area SEND inspection, which would be before the end of 2025 in Bury's case (Area inspection February 2024). There are other local areas in the North West and nationally who had seriously adverse judgements in the Area SEND inspections before February 2024 who have yet to receive monitoring inspections.

2.3 In this context, where Ofsted and the CQC are prioritising local areas within the monitoring inspection schedule, the Annual Engagement Meeting has the potential to shape their thinking.

2.4 Formal Annual Engagement Meetings (AEM) also take place for Children's Services overall under the Integrated Local Authority Children's Services (ILACS) framework with other aspects of children's services, such as Early Years and Schools and Post-16 education, also having meetings between regional and Ofsted leads during the year. The AEM for SEND differs in two important respects – firstly, the regional SEND lead for Ofsted is joined by his peer from the CQC; and

secondly, Integrated Care Board (ICB) representatives and parent carer forum representatives (in Bury's case Bury2Gether) are also invited and attend the meeting.

2.5 As noted earlier, the local area is expected to share its self-evaluation and action plan as part of the preparation for the meeting. For this meeting, Bury shared an updated version of the recent DfE Stocktake self-evaluation from July 2025 (see listed background paper and attached paper), in addition to the DfE letter assessing the progress made by Bury and the next steps that had recently been published on the DfE website.

2.6 The meeting with Ofsted took place virtually on October 20<sup>th</sup>, with senior representatives from across the partnership in attendance, including the Executive Director for Children & Young People Services, Executive Director, Health and Adult Care (Bury Council) and Deputy Place Lead (NHS GM (Bury)), the new Director for Early Years, Education and Skills and a representative from the Parent Carer Forum.

Key areas discussed included:

1. **Self-Evaluation and SEND Action Plan** The local area presented its updated SEND self-evaluation and action plan, which reflect current priorities, progress against previous inspection findings, and areas identified through internal review. These documents are being used to drive strategic improvement and align multi-agency efforts.
2. **Addressing Areas for Improvement** Specific actions taken to address previously identified weaknesses were outlined, including improvements in EHCP timeliness, strengthened co-production with families, and enhanced oversight of therapy provision and waiting times.
3. **Maintaining and Improving Good Practice** The meeting highlighted examples of sustained good practice, such as inclusive education initiatives, early years support, and collaborative working between education, health, and social care, including plans in place to further develop these strengths through targeted investment and workforce development.
4. **Monitoring Impact** Local area leaders described the governance mechanisms in place to monitor the impact of improvement activity, including regular performance reporting, feedback loops with families, and quality assurance reviews. These are helping to ensure accountability and responsiveness.
5. **Emerging Issues** The partnership also discussed emerging challenges, including increased demand for specialist provision, national workforce pressures, and the implications of upcoming SEND reforms.

While there is no formal evaluation or published outcome provided by Ofsted and the CQC afterward, it was a positive meeting. The self-evaluation (SEF) was well received described as clear, concise, reflective of a growing understanding of our strengths and challenges as a strengthening partnership and spoken of as "answering many questions" in advance of the meeting. A letter outlining the discussion and any follow-up points is anticipated later this term.

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**List of Background Papers:-** 251002\_Bury SEF\_AEM Final Version

**Contact Details:-** Robert Arrowsmith, Head of Strategy, Assurance and Reform

# SCRUTINY REPORT

<b>MEETING:</b>	<b>Children's and Young People's Scrutiny Committee</b>
<b>DATE:</b>	<b>November 2025</b>
<b>SUBJECT:</b>	The Local Area Response to the Published SEND inspection and monthly update
<b>REPORT FROM:</b>	<b>Jeanette Richards, Executive Director, Children's Services</b>
<b>CONTACT OFFICER:</b>	<b>Wendy Young, Head of Service – Inclusion &amp; SEND</b>

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## 1.0 BACKGROUND

1.1 Following Bury's local area SEND services Inspection by the Care Quality Commission and Ofsted. The inspection team identified widespread, systemic failings in services and highlighted the challenge that we need to do more to improve the outcomes of children and young people with special educational needs.

1.2 The inspection identifies 6 priority actions which Bury Council and NHS Greater Manchester ICB are jointly responsible for, along with 3 areas for improvement. As a result of the inspection outcome, the local authority has been issued with an Improvement Notice and will be subject to monitoring visits followed by a re-inspection in approximately 18 months.

## 2.0 ISSUES

2.1 As a result of the inspection outcome, the Bury local area has produced a Priority Action Plan, which we are locally referring to as our Priority Impact Plan (PIP).

2.2 The PIP has been co-produced with stakeholders, including parents and carers and is the strategic plan for SEND, setting out what needs to be delivered in the next 18-24 months with key milestones and key performance indicators. The plan is published on our local offer.

2.3 Support for the delivery of the Priority Impact Plan has been supported through additional investment by the council and the ICB – this will support the programme management and governance (see below) but also address some of the critical deficits identified in the report. The level of investment secured is approximately £450,000 a year.

2.4 Bury Council has also applied for Intervention Support Fund (ISF), which is a targeted grant provided by the Department for Education (DfE) to support local authorities in England that are under formal intervention to bolster resources and further support the implementation of the Priority Impact Plan (PIP). A response to the grant application is currently awaited and further information, should this be granted at the next Scrutiny Committee.

## **Governance arrangements**

2.5 The SEND Improvement & Assurance Board (SIAB) is accountable to the Cabinet within the Council, and to the GM Integrated Care Board via the Locality Board, which operates as a sub-committee of the ICB Board and replaces the previous SEND local area partnership Boards.

2.6 The SIAB meet monthly (first meeting took place on 17<sup>th</sup> June 2024), and benefits from an independent chair, Deborah Glassbrook who has experience of working with other local areas who are subject to intervention in relation to SEND. The Board include strategic leaders from across the partnership and a Delivery Group has been mobilised with Terms of Reference agreed, with active participation in both groups from across the partnership.

Project Management support is embedded to support the programme.

Minutes and papers from each SIAB are provided through the Local Offer Website to ensure visibility.

2.7 Each Priority Action has a nominated lead officer, who will be a senior officer within their organisation. The Workstream Leads provide monthly highlight reports to the SIAB and ensure monthly reviews of the risk register. Reports will be expected to provide updates on activity, performance data and quality assurance findings.

The Local Area Priority Impact Plan (PIP) outlines the high-level strategic plan for SEND improvement, with the performance monitoring, future activity and risk/risk register. In accordance with the reporting requirements of this board and as part of this standing agenda item, Children and Young Peoples Scrutiny Committee will be reported to in the same format.

## **2.8 Monitoring arrangements**

Following an Ofsted and Care Quality Commission (CQC) SEND inspection, local areas are required to implement monitoring, support, and challenge arrangements to improve their SEND service delivery. This process involves several key steps:

**Monitoring:** Continuous oversight of the local area's SEND arrangements to ensure they meet the required standards.

**Support:** Providing guidance and resources to help local areas address any identified weaknesses.

**Challenge:** Holding local areas accountable for making necessary improvements.

Bury Local Area Partnership remains to be subject to such scrutiny. These arrangements, to date, have taken place in the form of 'deep dive' activities and 'stocktake' visits facilitated by the Department for Education and NHS England Colleagues.

The comprehensive reviews conducted by the Department for Education (DfE) and NHS England, as previously reported, was undertaken in December 2024 and more recently in July 2025. The purpose of these visits was to assess progress made by the local area in addressing the issues identified in the improvement notice, progress on the delivery of the Priority Impact Plan (PIP) and the impact to date.



## 2.9 SEND Service Launch, embedding 'Deep Dive@ Activities

In March 2025, the Local Area Partnership undertook a focused deep dive into Priority Area 2: Early Identification, with particular emphasis on the Graduated Approach, as previously reported. This initiative aimed to evaluate progress, interrogate current practices, identify root causes of persistent challenges, and explore opportunities for sustainable improvement. A robust evidence base was developed through comprehensive data collection and trend analysis, which continues to inform targeted actions across the system.

Building on this foundation, the Partnership has advanced the development of a locally tailored Ordinarily Available Provision, aligned with the Greater Manchester agreed framework. This integrated model embeds the Graduated Approach and is underpinned by a Communities of Practice structure to strengthen school-level support and peer learning. The model was formally launched alongside our updated SEND Strategy on 29 September 2025 at the Red Hall Hotel. The launch event was a significant success, with **95%** of local schools in attendance, reflecting strong sector engagement and commitment. Since the launch, further engagement activity has taken place to ensure broad understanding and uptake, including presentations at headteacher engagement meetings and dedicated sessions with Parent Carer Forum groups.

Implementation and embedding of these new models are now underway, with a clear focus on evaluating impact over time. This includes monitoring how the Ordinarily Available Provision is being applied in practice, how schools are engaging with the Communities of Practice, and how these developments are improving early identification and support for children and young people with SEND.

This work is particularly timely as the local area prepares for monitoring inspections under the SEND Inspection Framework, anticipated from Spring Term 2026 onwards. The evidence generated through these activities will be instrumental in demonstrating progress, evidencing impact, and ensuring inspection readiness across the partnership.

## 3.0 CONCLUSION

The Local Area SEND Partnership is continuing in its committed to improving services for children and young people with SEND and their families.

The SIAB has received assurance that we are progressing, in accordance with the commitments set out in the Local Area SEND Priority Impact Plan. There is still a considerable amount of work to be done, and it is essential that we maintain a consistent pace and ensure that we capture the impact for our children, young people and their families and that this is sustained throughout.

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### List of Background Papers:-

### Contact Details:-

*Wendy Young, Head of Service, SEND & Inclusion*

Executive Director sign off Date:\_\_\_\_\_

JET Meeting Date:\_\_\_\_\_

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**SCRUTINY REPORT**

**MEETING:** Children's and Young People's Scrutiny Committee

**DATE:** 13<sup>th</sup> November 2025

**SUBJECT:** Children's Social Care Reforms

**REPORT FROM:** Jeanette Richards, Executive Director Children & Young People

**CONTACT OFFICER:** Beth Speak, Children's Transformation & Improvement Manager

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**1.0 BACKGROUND****1.1**

1.2 Following publication of the Independent review of children social care in May 2022, the government outlined a commitment to deliver transformational whole-system reform as set out in their 'Stable Homes, built on love' Strategy.

1.3 The social care reforms have four overarching outcomes:

- Children, young people and families stay together and get the help they need.
- Children and young people are supported by their family network.
- Children and young people are safe in and outside of their homes.
- Children in care and care leavers have stable, loving homes.

1.4 This report gives an overview of the reforms and the approaching to implementation in Bury.

**2.0 POLICY FRAMEWORK**

- May 2022 – publication of Josh Macalister's Independent Review of Children's Social Care
- February 2023 – publication of the Stable Homes, Built on Love Strategy, the Government's implementation strategy for improving social care.
- December 2023 – publication of four key publications, outlining the changes, actions and plans to support delivery of the strategy:
  - National kinship strategy 'Championing Kinship Care'
  - Children's Social Care National Framework
  - Refreshed multi-agency statutory guidance 'Working Together to Safeguard Children'
  - Digital and data strategy
- November 2024 - Keeping Children Safe, Helping Families Thrive policy paper published, which the Children's Wellbeing & Schools Bill will put aspects of the reforms into law.
- December 2024 – Children's Wellbeing & Schools Bill introduced into Parliament.
- March 2025 – Families First Partnership Programme Guide published setting out delivery expectations for safeguarding partners in England to support national rollout from April 2025.

**3.0 FAMILIES FIRST PARTNERSHIP PROGRAMME (FFPP)**

3.1 The Families First Partnership Programme (FFPP) seeks to transform the whole system of help, support, and protection, requiring safeguarding partners to bring together targeted early help, child in need and multi-agency child protection into a seamless system, including

services and workforces such as family support workers, social workers, and other highly-skilled, experienced, alternatively qualified practitioners. The intention is that children, young people and their families can receive the right level of support at the right time to meet their needs.

**3.2 The three key delivery strands to the FFPP are:**

- Family Help
- Multi-Agency Child Protection Teams (MACPTs)
- Family Group Decision Making (FGDM)

**3.3 Family Help**

Family Help will take place at the heart of communities, bringing together services under a combined, multi-disciplinary Family Help team. It will wrap support around the whole family at the earliest opportunity, using the expertise of the multi-disciplinary practitioners and led by Family Help Lead Practitioner (FHLP) who will be drawn from a range of disciplines with the right knowledge, skills and experience to support families who need help and support. Practitioners will use single family help assessments and plans which all involved practitioners can access, supported by a shared practice framework.

The FHLP will have a focus on the whole family, recognising this is the best way of improving outcomes for children and young people and they will remain the main point of contact for the family as long as they require support. They will have the knowledge and skills to draw on relevant evidence-based interventions and be alert to all forms of significant harm. Where concerns do escalate and require support within child protection processes, they will remain involved although the work will then be led by the Lead Child Protection Practitioner (LCPP).

**3.4 Multi-Agency Child Protection Teams (MACPTs)**

Multi-agency child protection teams will bring together experts from across agencies, ensuring the right decisions are made at the right time for children and seeking to protect all children from actual or likely significant harm, both inside and outside the home.

MACPTs will have a core membership of skilled and suitably qualified social workers, police officers, registered health practitioners and education professionals. Consideration should also be given to inclusion of probation, domestic abuse services and youth workers.

Embedded in the MACPTs will be Lead Child Protection Practitioners (LCPPs) who will be qualified social workers with substantial frontline child protection experience, skilled at identifying and responding to all types of significant harm, know how to work skilfully and confidently with families and parents in child protection, support partners to consider the influence of different extra-familial contexts and ensure MACPT members maintain a consistent focus on best interests of the child.

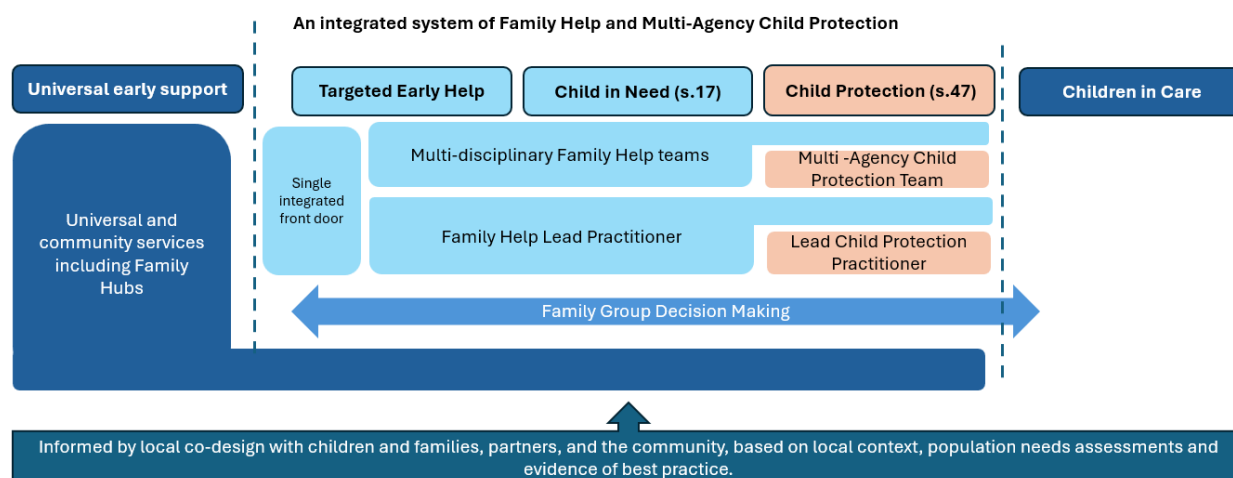
MACPTs will be responsible for key child protection processes which currently sit across service areas within children's social care: chairing strategy meetings and Child Protection Conferences, leading section 47 enquiries where significant harm is suspected, overseeing the development, review and closure of plans and onward planning, deciding whether to move into pre-proceedings and the Public Law Outline (PLO) process, providing relevant evidence to subsequent court proceedings and initiating emergency action (Emergency Protection Orders, Police Protection Orders).

**3.5 Family Group Decision Making (FGDM)**

FGDM is a voluntary process that enables a family network to come together and make a family-led plan. The plan will include offering practice support to parents and carers whilst prioritising the safety and wellbeing of the child. FGDM helps to ensure a family network is engaged and empowers to participate in decision-making while a child and their family is receiving help, support or protection. FGDM outlines a whole-family approach to support children and young people to remain with, or return to, the care of their parents or wider

families. Effective support for this children and their families increases the likelihood of stable, long-lasting relationships through which children can safely live within their family networks.

**Figure 1: Vision for a reformed system**



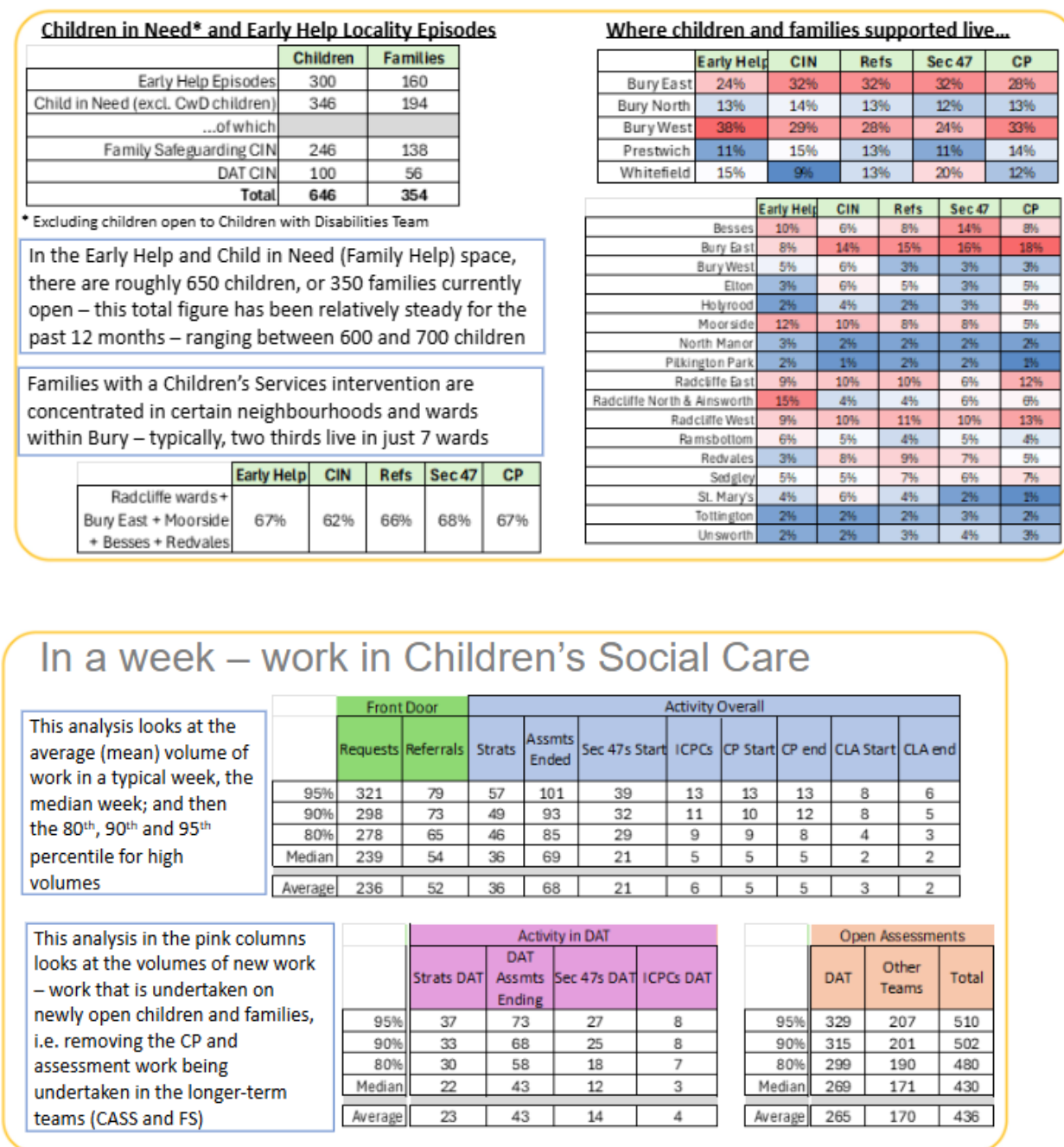
### 3.7 Funding

Nationally, £523 million has been provided for the FFP Programme in 2025-26 and this will continue in each year of the Spending Review period (£523m each year from 2026-27 – 2028-29). This money will fund additional children's social care prevention services, and commitments in the Children's Wellbeing and Schools Bill to improve help and protection for children. Bury has been allocated £900,000 for each of the next 3 years with an additional transformation grant of £127,000 to support transformation activity across the partnership. Spending of the grant is monitored through quarterly returns to DfE/MHCLG.

### 4.0 BURY IMPLEMENTATION

- 4.1 The DfE have outlined their expectation that 2025-26 is the year of transformation as local areas invest time and resource into local design in the first stage of the programme. In June, Bury submitted phase 1 delivery plans to the DfE setting out leads from the safeguarding partners and first stage plans for co-design and readiness planning. Phase 2 of the delivery plan must be submitted by 19<sup>th</sup> December 2025.
- 4.2 There have been two immersive partnership workshops, supported by our DfE Delivery Partner Mutual Ventures, to socialise the reforms and established a shared vision for local implementation. A planning workshop with the delegated safeguarding partners – Social Care, Health, Police & Education – has taken place to agree our approach to implementation. This has considered Bury's profile of need, geographical areas and strengths in the current system which are enablers to support pilot and implementation of the reforms.
- 4.3 We have already made significant progress in relation to Family Group Decision Making which will be the first implementation strand in Bury. This will include the scaling up of the current team to provide Family Group Decision Making and Family Network Meetings earlier on in a family's journey through the system (Spring 2026).

Figure 4: Bury's current data



- 4.4 We will then plan to pilot a MACPT followed by a Family Help team, allowing us the opportunity to learn from each pilot before moving to full implementation. We will aim to pilot these from Spring 2026 as we work over coming weeks and months with partners to understand the pathways for children and families and consider how the pilots will be resourced and delivered. There are significant changes in this space, which will require a reconfiguration and restructure of services across the partnership (including children's social care) due to changes in how certain functions must be delivered and the changes in roles.
- 4.5 Once the learning from both pilots is fully understood we can develop more detailed plans for full implementation throughout 2026 and 2027. We will need to ensure our implementation ensures continued fidelity to our Family Safeguarding model of practice.
- 4.6 Significant IT system changes are required to support the reforms, with DfE guidance to the system providers expected in November 2025. It is currently unclear what elements of the system will be required to be configured by the provider, versus what we will have to design



and configure locally. System access will also need to be extended to partners to enable access to assessments and plans which will require development with dedicated resource.

- 4.7 Any redesign of service or delivery must involve staff, children and families (this is a national requirement) and other stakeholders to ensure the revised system reflects the views and needs of our borough. We have already begun to discuss the reforms with staff via engagement sessions and Extended Manager Meetings, and this will continue.

## 5.0 GM-wide partners

- 5.1 As one of the key principles of the reforms is multi-agency partnership working, it is important to consider the complexities for our safeguarding partners in Health and the Police, due to their own structures and footprints. Shared by the GM Safeguarding Alliance, GMP and NHS GM have published the approaches outlined in Figure 5a and 5b overleaf

Figure 5a:

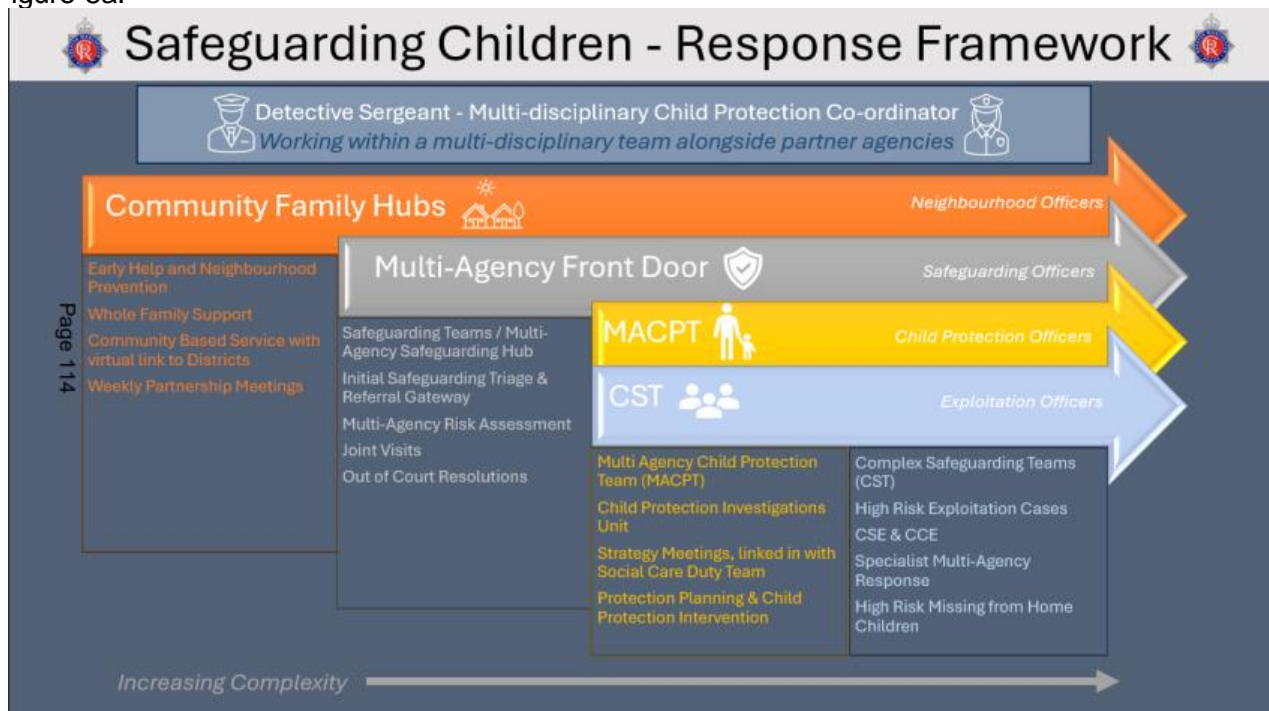
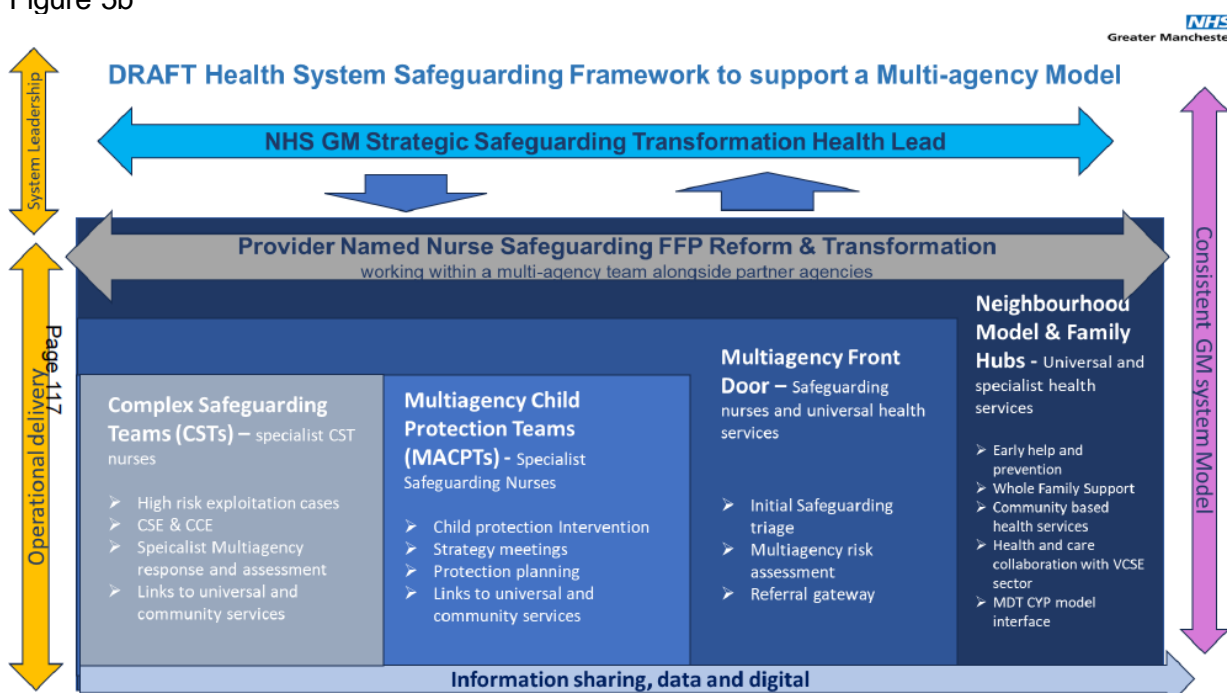
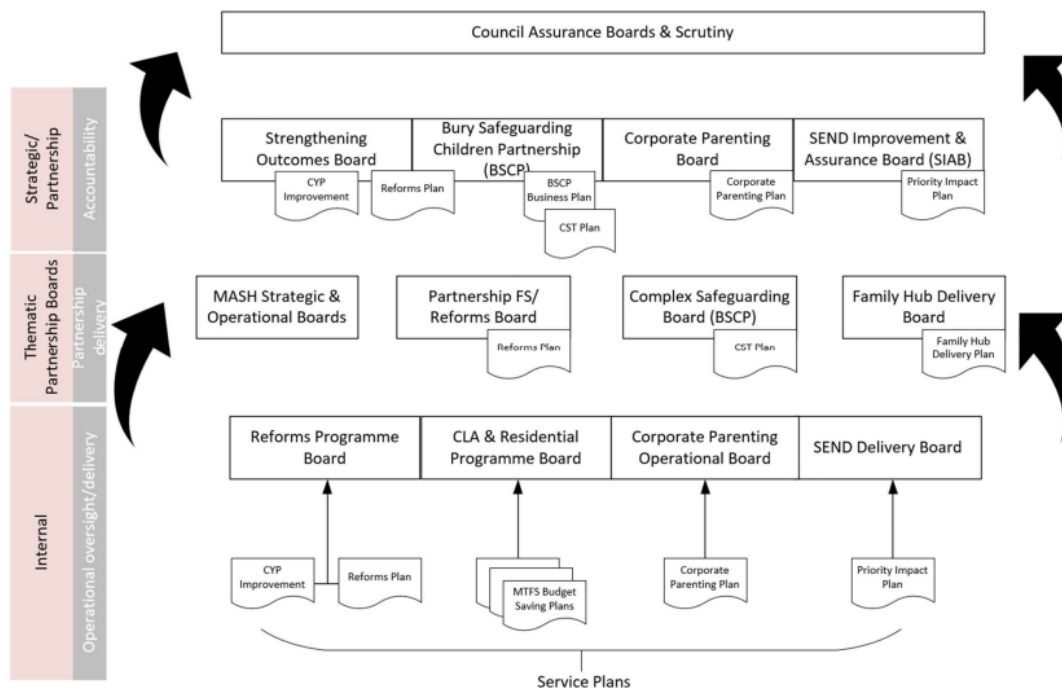


Figure 5b



## 6.0 Governance

- 6.1 Senior leaders (Chief Executives, Lead Members for Children, ICB leads, Chief Constables) must oversee reforms and ensure safe transition. The existing governance and assurance mechanisms in place will ensure shared accountability for the progress of the reforms. This includes Children's Overview & Scrutiny, Bury Safeguarding Children Partnership and Locality Board and our newly formed Strengthening Outcomes Board which has been established to provide partnership support and oversight to the CYP Improvement Plan – see diagram below.
- 6.2 Focused partnership oversight of the reforms in Bury will take place in the Family Safeguarding Strategic Partnership Board in recognition of the connection between the model and the reforms. Terms of Reference and membership are being updated.



- 6.3 In addition, quarterly meetings will take place with the DfE regional team and the delegated safeguarding partners to discuss progress with the reforms.

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### List of Background Papers:-

[Independent Review of Children's Social Care](#)  
[Stable Homes Built on Love Strategy](#)  
[Keeping Children Safe, Helping Families Thrive](#)  
[FFPP Guide](#)

### Contact Details:-

*Beth Speak, CYP Improvement & Transformation Manager*

Executive Director sign off Date: \_\_\_\_\_

JET Meeting Date: \_\_\_\_\_

**SCRUTINY REPORT**

**MEETING:** Children's and Young People's Scrutiny Committee

**DATE:** November 2025

**SUBJECT:** Children's Social Care Complaints for years 22/23, 23/24 & 24/25

**REPORT FROM:** Rachel Everitt, Elections Manager

**CONTACT OFFICER:** Claire Holt, Information Governance Manager

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**1.0 BACKGROUND**

- 1.1 The Annual Complaints Reports for have been produced in accordance with 24(D) & 26 of the Children Act 1989 Representation Procedure (England) Regulations 2006 and statutory guidance for the Department for Education, Getting the best from complaints to update Members in respect of complaints to Childrens Social Care Services.
- 1.2 The reports look at the period March 2022 – March 2023 and March 2023 – March 2024 and will allow Members to see the extent and complexity of Children's Social Care Service's span of activity and to receive information relating to the quality of the services delivered

**2.0 MARCH 2022 – MARCH 2023**

- 2.1 Children's Social Care Teams received a total of **118** total complaints during the 2022/23 financial year. Of these complaints, **42** (35.5%) were resolved at the informal stage. **66** (56%) were investigated as Stage 1 formal complaints.
- 2.2 Within these complaints, **10** (8.4%) were received via MPs/Councillors which is a significant reduction on the previous year (20 in 2021/22). There were **2** complaints which were escalated to the LGO this year (not included in total).
- 2.3 Performance Indicators show that there was a small downward turn in the compliance of timescales for responding to complaints within ten working days. This is further reflected by the decrease in responses within 20 working days and increase in late responses.

**3.0 MARCH 2023 – MARCH 2024**

- 3.1 Social Care Teams received a total of **117** total complaints during the 2023/24 financial year. Of these complaints, **11** were resolved at the informal stage. **106** were investigated as Stage 1 formal complaints.
- 3.2 Within these complaints, **9** (7.7%) were received via MPs/Councillors which is a slight reduction on the previous year (10 in 2022/23).

- 3.3 Performance indicators show that compliance for responding to complaints within ten working days is met less than 50% of the time with around a quarter of responses provided after the deadline.

#### 4.0 MARCH 2024 – MARCH 2025

- 4.1 Children's Social Care Teams received a total of **135** total complaints during the 2024/25 financial year, **7** were still open at the end of the year. Of these complaints, **111** were investigated as Stage 1 formal complaints. **19** complaints were dealt with at Stage 2.
- 4.2 **5** complaints were escalated to Stage 3 with **2** being upheld and **3** partially upheld.
- 4.3 Performance Indicators show that there was a small downward turn in the compliance of timescales for responding to complaints within ten working days. This is further reflected by the decrease in responses within 20 working days and increase in late responses.

#### 5.0 CONCLUSION

- 5.1 Members are asked to note the reports in respect of complaints to Childrens Social Care Services.

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#### List of Background Papers:-

#### Contact Details:-

*Rachel Everitt, Elections Manager*

Executive Director sign off Date:

Meeting Date:

**Children & Young People**



**ANNUAL COMPLAINTS REPORT  
APRIL 2022 – MARCH 2023**

**Donna McDermott  
Complaints Co-Ordinator – Children's Services  
May 2023**

## **PURPOSE/SUMMARY:**

This report has been produced in line with the statutory requirement to update Members and provide current information in respect of complaints related to Children's Social Care Services. This report looks at the period 1 April 2022 to 31 March 2023 and will allow Members to see the extent and complexity of Children's Social Care Service's span of activity and to receive information relating to the quality of the services delivered.

Members are asked to note the content of the report and advise Officers of future requirements in respect of the reporting of complaints relating to Children's Social Care Services.

## **1.0 INTRODUCTION**

- 1.1 In line with guidance from the Department for Education, Local Authorities are required to publish an Annual Complaints Report covering the council year. This report is to provide current information in respect of complaints related to Children's Social Care Services for the year 2022/2023.
- 1.2 As part of our continued approach to monitoring performance, the status of all complaints is also shared weekly to the Children's Senior Management Team. Analysis of lessons learnt from complaints are also reported to Senior Managers and, where there is wider learning, discussions take place accordingly.

## **2.0 WHAT IS A COMPLAINT**

- 2.1 A complaint may be generally defined as 'an expression of dissatisfaction or disquiet' in relation to an individual child or young person, which requires a response. A complaint may be made by a written or verbal expression.
- 2.2 Complaints principally concern service delivery issues, including the perceived standard of these services and their delivery by service providers. These recorded figures only represent a percentage of complaints received as many of the issues are resolved on an informal basis operationally and do not need recording by the complaints section.
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- 2.4 It is a legal requirement that Children's Social Care Services has a distinct complaints procedure. This statutory procedure provides the means for a child or young person to make a complaint about the actions, decisions or apparent failings of a local authority's children's social care provision. It also allows an appropriate person to act on behalf of the child or young person concerned or to make a complaint in their own right.
- 2.5 For some service users, and for children and young people particularly, it is not easy to make a complaint. This can be the case when the person using the service may be apprehensive about what may happen if they do complain. It is important, therefore, that all complaints are treated seriously, in confidence, investigated and are given due attention. It is therefore the role of the Complaints Manager – Children's Services to provide a degree of independence and support to the complainant whilst ensuring the complaint follows the statutory procedure. If a



complaint is received directly from a child or young person, an automatic referral is made for advocate support to Bury Children's Rights Service, which is an independent advocacy service commissioned by Children's Social Care. Feedback to complainants about their complaint is essential.

- 2.6 A prime objective of the Children's Social Care Complaints Procedure is to ensure the Local Authority develops a listening and learning culture where learning is fed back to children and young people who use services. Complaints present an opportunity for the Local Authority to learn why people who are using our services find them unsatisfactory, and how we can improve the services we provide.

### **3.0 THE SOCIAL CARE COMPLAINTS PROCEDURE**

- 3.1 When a complaint is initially received, it is logged and acknowledged. It is then allocated to the relevant Team Manager with a request to contact the complainant within 48 hours to attempt to resolve the matter informally. If there is no resolution or the complainant cannot be contacted, the complaint is moved to formal Stage 1 at that point.
- 3.2 The formal handling and consideration of complaints consists of three stages:
- Stage 1: Local Resolution, informal or with written response
  - Stage 2: Independent Investigation
  - Stage 3: Review Panel
- 3.3 Local Resolution requires the Local Authority to resolve a complaint as close to the point of contact with the service user as possible (i.e. through front line management of the service). Emphasis is placed on resolving complaints under Stage 1, local resolution, because this should provide a timelier response and is user friendly. The Department strives to investigate and resolve complaints within 10 working days although the procedure does allow a 20-working day timescale for more complex complaints. In most circumstances attempts are made to resolve complaints informally within 48 hours of receipt. If this proves unsuccessful, the complaint automatically moves to formal Stage 1 within 48 hours of receipt of the complaint.
- 3.4 Where the complaint is not resolved locally, e.g. Stage 1, or the complainant remains dissatisfied with aspects of the Local Authority's response, the complaint can be considered at Stage 2. Stage 2 involves an independent investigation which is completed by an external Investigating Officer. This has the oversight of an Independent Person, also from outside the Local Authority, to ensure a full and fair investigation is carried out. We aim to send a Stage 2 response with a full report within 25 working days, although this can be extended up to 65 working days in complex cases.
- 3.5 When Stage 2 of the Children's Social Care Complaints Procedure has been concluded and the complainant remains dissatisfied, they are eligible to request further consideration of the complaint by a Stage 3 Review Panel. The Chair of the Panel decides membership of the Panel on a case-by-case basis. Membership of the Panel would depend upon the issue being complained about as specialist advice may be required, for example an adoption complaint would require an adoption specialist, etc.

- 3.6 The Review Panel does not reinvestigate the complaint or consider any substantively new issues of complaint that were not first considered at Stage 2. The purpose of the Panel is to consider the initial complaint and wherever possible, work towards a resolution. The Panel should be convened within 30 working days of a request and its report (including any recommendations) will be sent within 5 working days following the meeting. The Department then issues its response to the complainant within a further 15 working days.
- 3.7 Where a complainant remains dissatisfied with the Local Authority's response to the Review Panel's recommendations, the complainant has the right to refer their complaint to the Local Government Ombudsman. The Complaints Manager will assist with this process by providing contact details for the LGO. The LGO will not consider complaints which have not completed the Complaints procedure through all three stages.

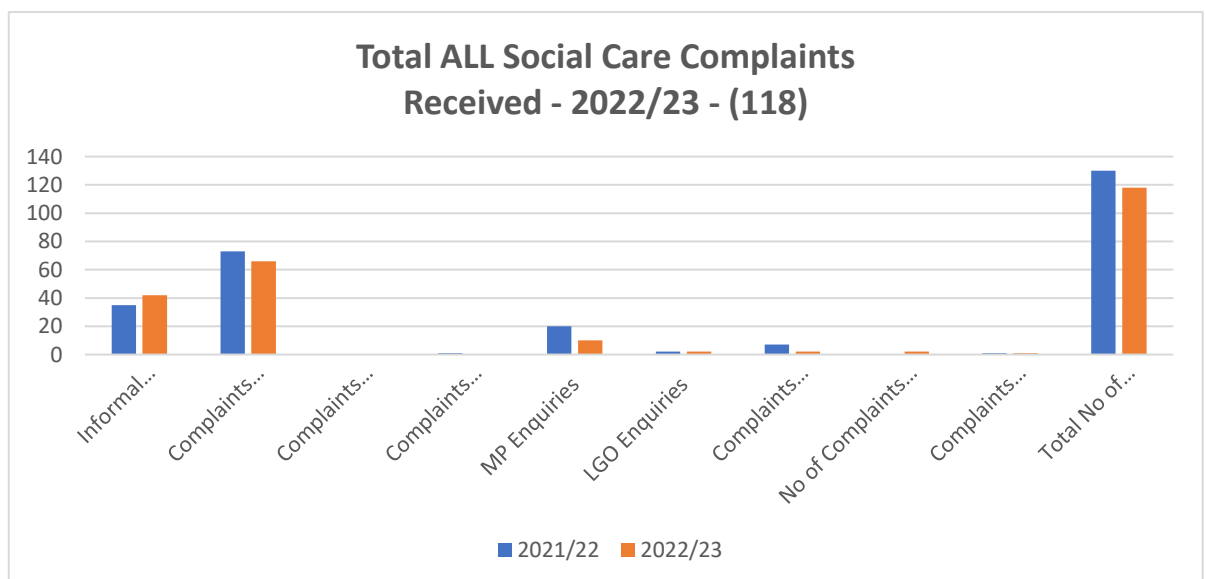
### **ANALYSIS OF PROGRESS OF COMPLAINTS RECEIVED**

**All figures below relate to the period from 1 April 2022 to 31 March 2023. Reference is also made to outstanding complaints or complaints which were reported as not being agreed or completed as of 31 March 2022.**

#### **4.0 SOCIAL CARE COMPLAINTS RECEIVED**

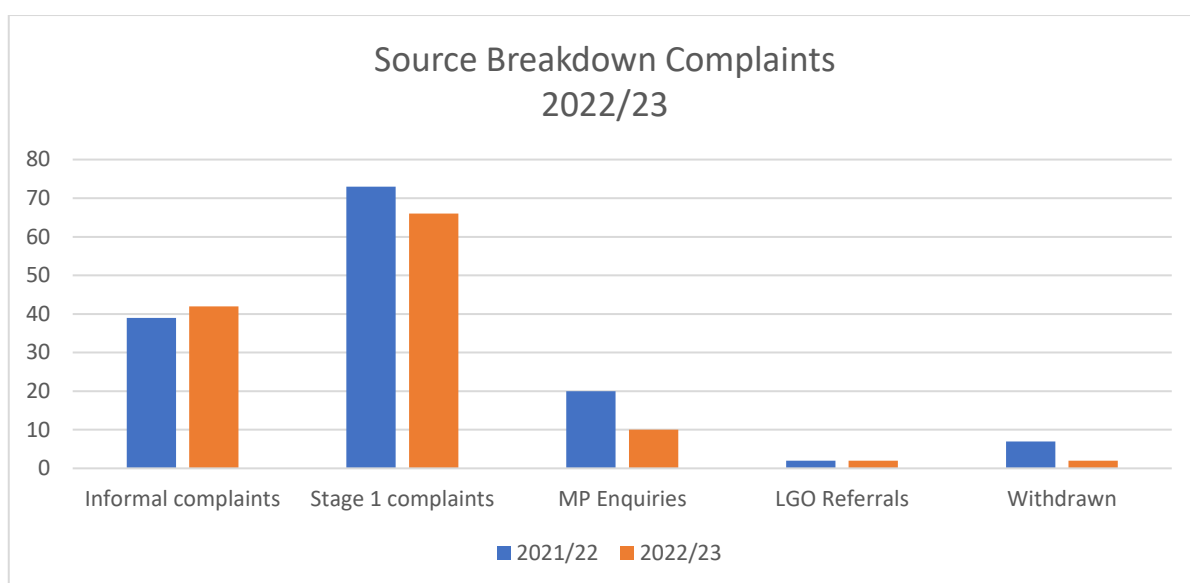
- 4.1 Social Care Teams received a total of **118** total complaints during the 2022/23 financial year. Of these complaints, **42** (35.5%) were resolved at the informal stage. **66** (56%) were investigated as Stage 1 formal complaints and these are the focus of this report.
- 4.2 This year, within these complaints, **10** (8.4%) were received via MPs/Councillors which is a significant reduction on the previous year (20 in 2021/22). There were **2** complaints which escalated to the LGO this year (not included in total). Overall, **118** complaints were considered. (See table at 4.3).

4.3



- 4.4 The focus of this report is the **66** Stage 1 complaints received in 2022/23. Overall, this represents a decrease overall in the total number of complaints received compared to 73 received last year (April 2021 – March 2022) which is positive.
- 4.5 Complaints resolved at informal have increased compared to last year (**35.5%** this year, 26% last year). This means complainants are receiving a response within 48 hours of their complaint.
- 4.6 Complaints are received from a variety of sources. The breakdown of the originator of the complaints is as follows (4.7):

4.7



- 4.8 It should be noted that, in previous years, LGO complaints have not been included in this report. However, this is complaints activity, it seems appropriate to include them to ensure a true reflection of the overall complaints received is presented to members, the LGO contacts are not added to the total as they have already been responded to internally. MP complaints will be included in future reports.
- 4.8 We have also continued to record the number of informal concerns/complaints received into the Complaints Department. This does not include any informal concerns or complaints which have been raised directly with individual teams. **35** informal concerns/complaints were resolved immediately by telephone and did not result in a formal complaint being made. This is an increase of **7** concerns/complaints resolved informally compared to 2021/2022. Any complaints which are not resolved within 48 hours of receipt are moved to Stage 1 and included in that total.
- 4.9 All Stage 1 complainants receive a written letter of response outlining details of the investigation and any findings. At the end of the letter, complainants are requested to contact the Complaints Team if they wish to discuss any outstanding issues or if they remain unhappy with the response. Apologies are offered as appropriate.
- 4.10 There were **9** complaints in 2022/23 where the service user was dissatisfied with the response they received and requested consideration at Stage 2. However,

following further discussions or a meeting with the relevant Service/Senior Manager or Strategic Lead, matters were resolved. There has been one recommendation from the LGO that a formal Stage 2 investigation should be completed and this is ongoing.

4.11 There have been **2** enquiries from the Local Government Ombudsman (LGO) in 2022/23 regarding Social Care related matters. In the previous year, 2 enquiries were received for Social Care from the LGO.

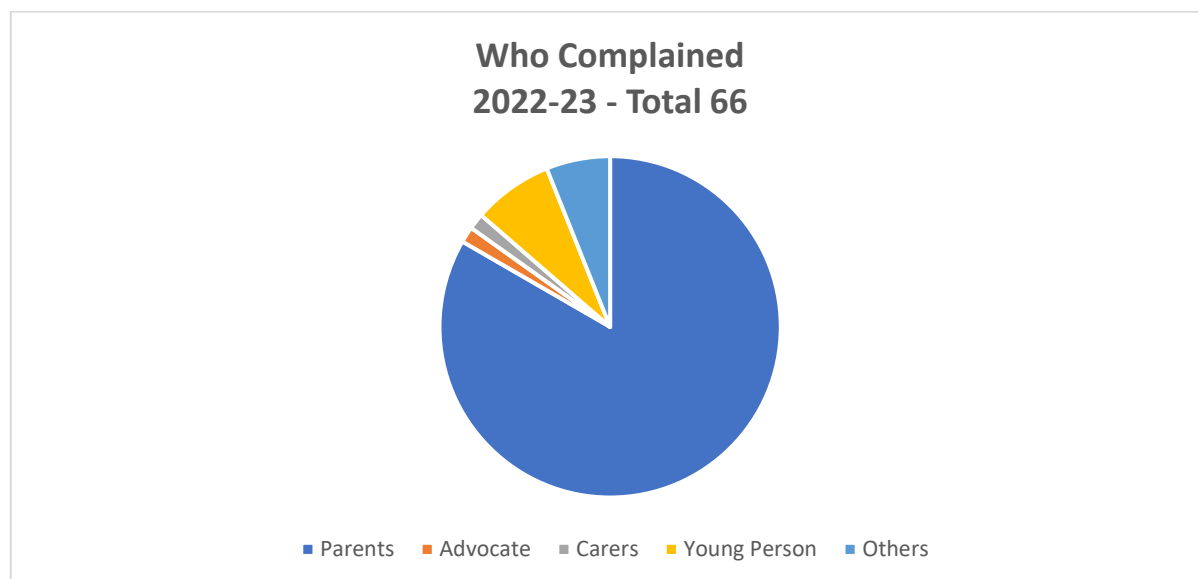
4.12 This report therefore focusses on the **66** complaints which were investigated and resolved at Stage 1 of the Social Care Complaints procedure.

## 5.0 WHO COMPLAINED?

5.1 The breakdown of sources of complaints is reported at 5.3. Of the **66** complaints resolved at Stage 1, most of the complaints received (83.3%) were from parents/carers of children. Young people are encouraged and supported to raise their own concerns with the assistance of advocacy from Bury Children's Rights Service. Bury Children's Social Care Services and Bury Children's Rights Service continue to work with their joint working protocol to ensure that a consistent and timely service is offered to children and young people in the care of Bury Local Authority when they raise a concern via their advocate.

5.2 The other categories are self-explanatory (please refer to graph below) except "others". This year, complaints have been received from extended family members, a teacher and an unrelated 3<sup>rd</sup> party. However, due to confidentiality issues, we are unable to respond to these complaints. A letter was sent in each case explaining the reasons behind the refusal to investigate.

5.3



## 6.0 ADVOCACY

6.1 Concerns and complaints received from Children and Young People in Care are very important. Young people are often supported to make a complaint by Bury Children's Rights.

- 6.2 An advocate from Bury Children's Rights Service will initially raise the concern with the Young Person's Social Worker, and if no timely response is received, this will be referred to the Social Worker's Team Manager for a response.
- 6.3 If the Young Person is unhappy with the response, their advocate will assist the child or young person to make a formal complaint at Stage 1 of the Statutory Children's Social Care Complaints Procedure.
- 6.4 There have been no complaints received this year via Advocates for Young People. There were two such complaints in each of the last two years. Complaints made by Young People this year were via their own resources. It is important to note that numerous informal meetings have taken place between advocates and social workers and concerns were resolved prior to formal complaint procedures.

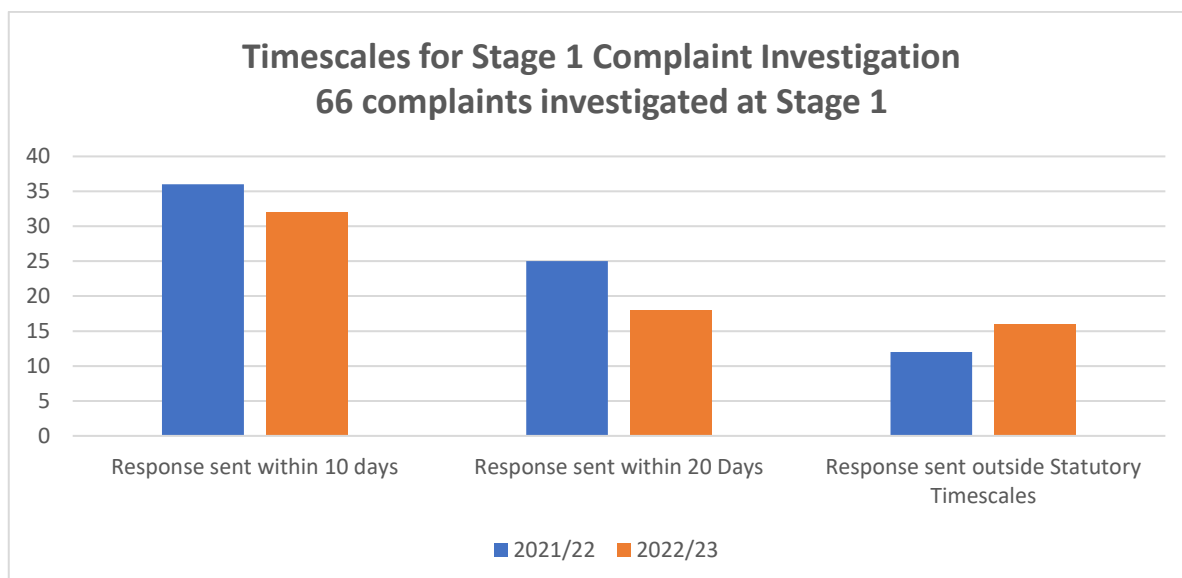
## 7.0 TIMESCALES OF STAGE 1 SOCIAL CARE COMPLAINTS

- 7.1 Performance Indicators show that there has been a small downward turn in the compliance of timescales for responding to complaints within ten working days. This is further reflected by the decrease in responses within 20 working days and increase in late responses (see tables at 7.2 and 7.5).

Year	10 Working Days	20 Working Days	Late Responses
2018 / 2019	42.8%	42.8%	14.3%
2019 / 2020	29.3%	37.3%	33.3%
2020 / 2021	37.2%	37.2%	25.5%
2021 / 2022	49.3%	34.2%	16.4%
<b>2022/2023</b>	<b>48.4%</b>	<b>27.2%</b>	<b>24.2%</b>

- 7.3 It is disappointing to note the increase in late responses. There were **16** (24.2%) complaints which received out of timescale responses at Stage 1.
- 7.4 Factors affecting the meeting of timescales are usually due to the complexity of issues raised within the complaints, complainants adding further complaints to the original complaint and complaints where a request for Stage 2 is received but, with further discussions and meetings, the matter was resolved at Stage 1.

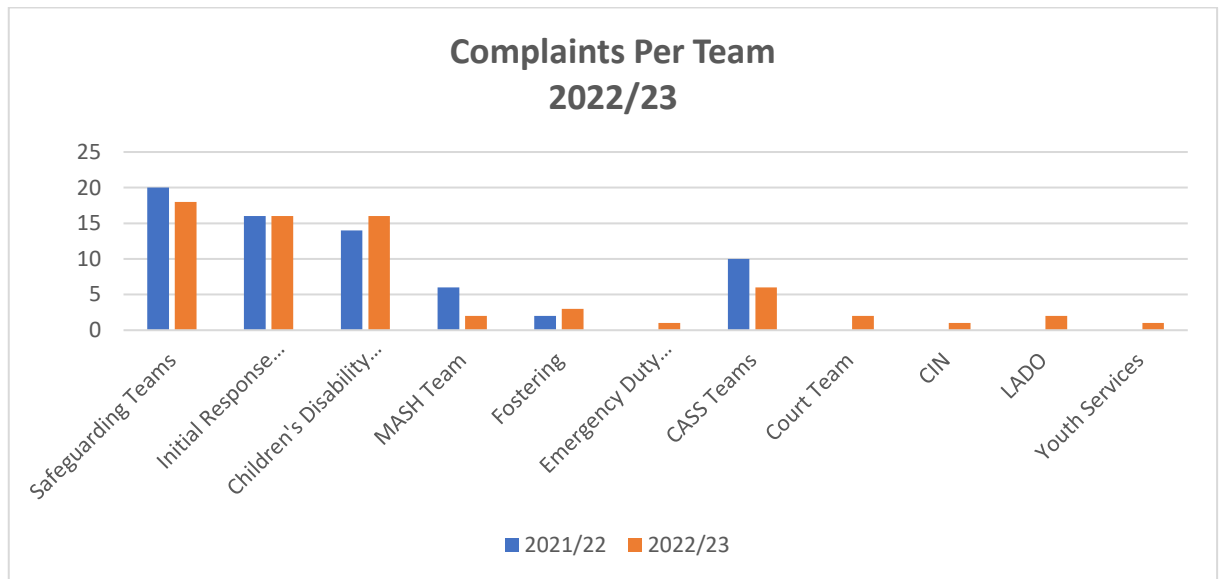
7.5



## 8.0 COMPLAINTS BY TEAM

8.1 Some Teams have experienced a small increase in the total number of complaints receive – Children with Disabilities and Fostering (see 8.2 below) However, Safeguarding, Care and Support service and MASH have experienced a decrease in complaints received. There are also a number of areas where we have not recorded complaints previously due to the emerging concerns of a failed inspection and implementation of new teams. Some complaints raise issues relating to more than one Team.

8.2

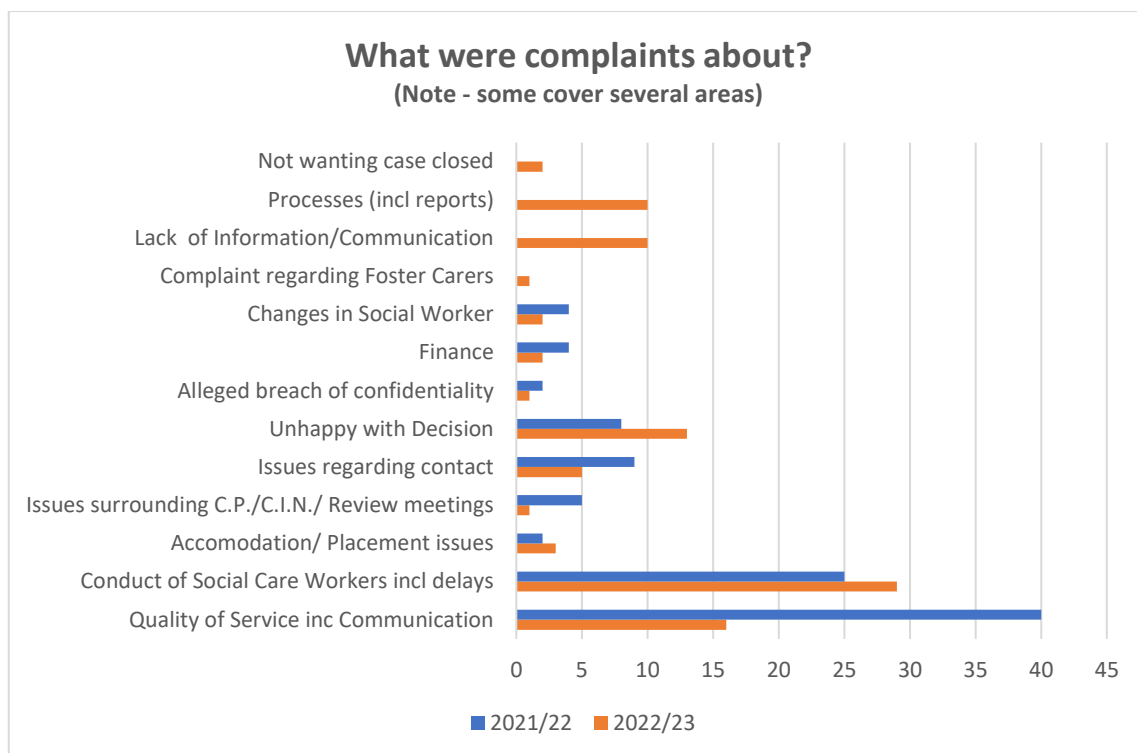


## 9.0 WHAT PEOPLE COMPLAINED ABOUT

9.1 All complaints are categorised by the issues being raised as shown within the graph below. Many complaints cover more than area category and are included in all relevant categories to capture the themes of Stage 1 complaints overall.



9.2



9.3 The categorisation of reasons for complaints is complex and these are therefore broad headings. Each individual complaint has been scrutinised and there are no patterns of specific issues or specific workers being complained about except communication which continues to be a topic that is raised regularly.

9.4 **Quality of Services;** this includes issues relating to communication and Social Workers and are subjective areas. It also relates to unhappy customers who do not agree with the involvement of Social Care.

9.5 Complaints regarding the number of **changes of Social Workers** has decreased by half compared to last year which is positive.

9.7 **Unhappy with decisions;** It needs to be highlighted that there are complaints received whereby service users report issues attributed to Children's Social Care when the issue relates to decisions made by the Courts.

The correct challenge to any decisions of the Court is during the proceedings, via the parent/carer's legal representative, as the complaints process cannot overturn a decision of the Court.

If a complaint is received which is currently in proceedings, a letter is issued to the service user advising them that we cannot investigate their complaint whilst the proceedings are ongoing. Once the proceedings are finalised, the complaint can then be investigated. They are also advised to discuss any issues of complaint with their legal representative who can raise the matter within the proceedings.

9.8 **Alleged Data Breaches;** there has been **1** formal complaint alleging that data or information has been shared incorrectly. Whilst it is acknowledged there are some genuine data breaches, there are times when information must be shared with

others, e.g. during Court proceedings or to ensure a child is safeguarded. Improved communication with families would be beneficial in explaining this. Most data breaches are relatively minor and do not require reporting to the ICO. Training to prevent data breaches has reached 95% of the workforce in the last year which has significantly raised awareness and this would appear to be reflected in the very low number of reported breaches.

## 10.0 HOW WE DEALT WITH COMPLAINTS

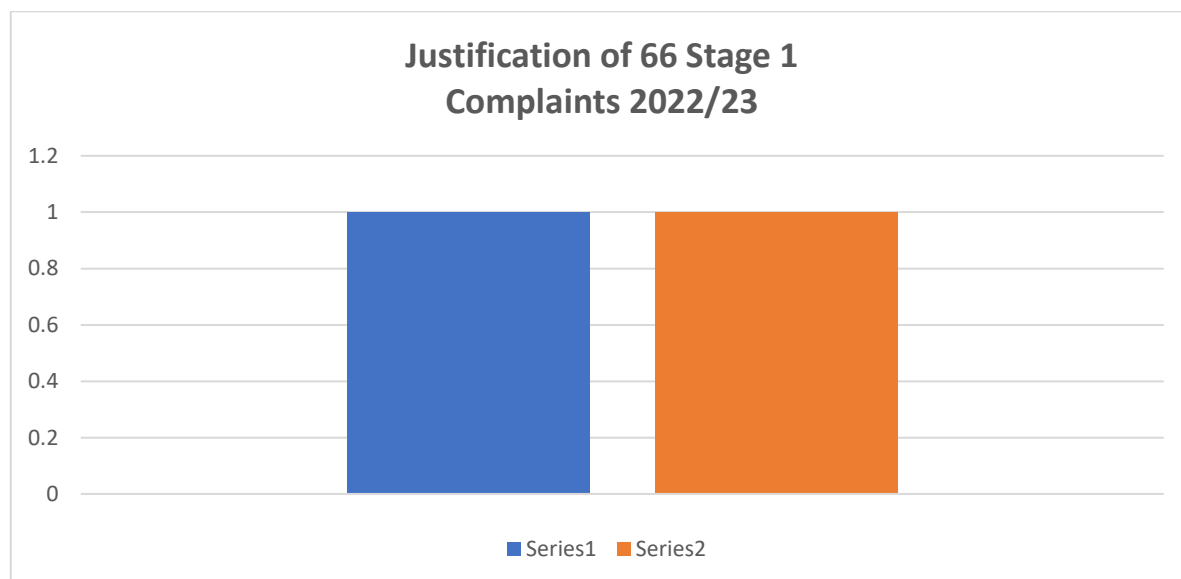
10.1 Initially, **42** complaints were allocated to Team Managers as informal complaints with a request to ring the complainant within 48 hours to try to resolve the issue. Of these complaints, **35** (83.5%) were resolved by a call. There were **7** complaints which were not resolved informally and these were moved to formal Stage 1 for resolution. All complaints are also copied to the relevant Service Manager and/or Strategic Lead for their information.

10.2 However, there will always be some complaints which require further investigation and Stage 1 is therefore triggered once the 48 hours have passed without resolution.

10.3 Complaints which move to formal Stage 1 are investigated by the relevant Team Manager, with oversight by the Head of Service. A written response is provided to the complainant which highlights the findings of the investigation. It also includes, if appropriate, information regarding any action that is being taken because of the complaint. In most cases, a letter of explanation, with an appropriate apology if required, are sufficient to resolve the matter.

10.4 In 2022/23, **11** complainants were initially dissatisfied with the Stage 1 outcome and requested to move to Stage 2. However, through further discussion and/or meetings with the Heads of Service and/or Director of Practice, **10** of these complaints were resolved without the need to progress to formal Stage 2. One complaint is currently being investigated at Stage 2 as recommended by the LGO.

10.5



## 11.0 QUALITY ASSURANCE / BUDGET POSITION

11.1 The Complaints Manager attends quarterly Team Teach meetings with Children's Services Social Care staff. Additionally, Team Managers are now familiar with carrying out complaint investigations and providing a written response. A training pack has been created for use by managers and they can seek support if required. Heads of Service have continued to have quality assurance oversight of responses and, where required, additional mediation and meetings have taken place. This means that most complaints were resolved at Stage 1 of the Complaints process.

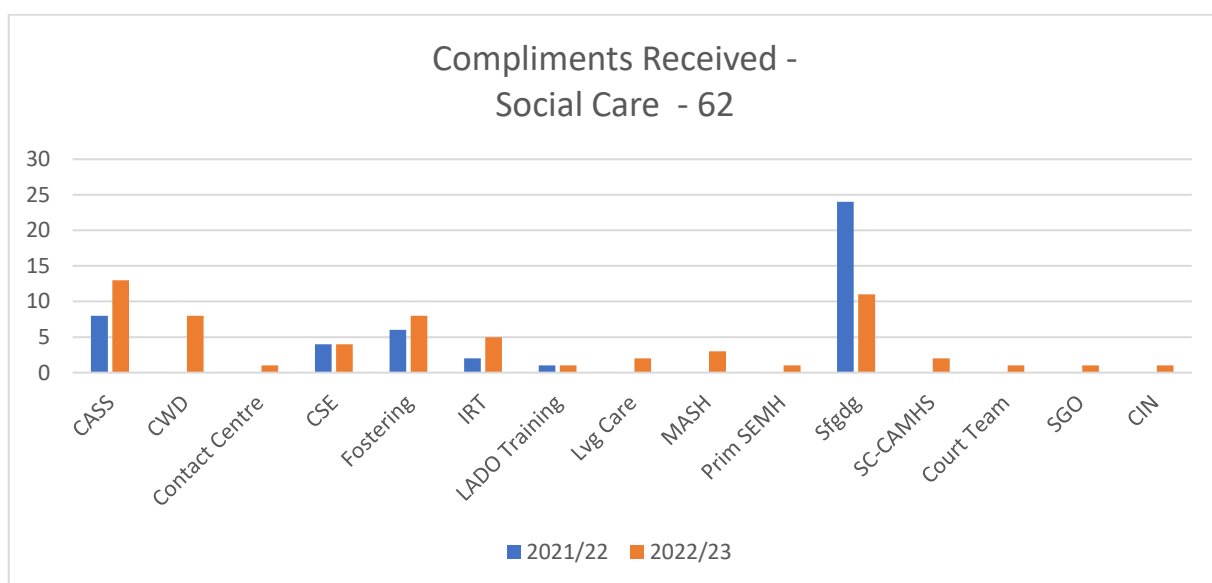
11.2 As outlined above there is currently one ongoing Stage 2 investigation. This is due to conclude. These investigations incur costs for independent investigators and, potentially, for meeting recommendations.

## 12.0 COMPLIMENTS RECEIVED

12.1 It is positive that the Teams also receive compliments for work which is well done. The graphs below show compliments received by Team and, separately, where these compliments have originated from.

12.2 We have received **62** compliments regarding the Children's Services Teams in the last year, compared to 60 last year. However, it is possible that this figure could be higher as some managers do not always forward these to be logged centrally. Team Managers are encouraged to encourage their staff to record and share compliments received, as it is important that good practice is acknowledged and shared across all services as wider learning. These are shared at Teaching Tuesday sessions.

12.3



## 13.0 EQUAL OPPORTUNITIES MONITORING

13.1 Whilst efforts have been made to monitor the personal data of the Authority's complainants; many have not returned the diversity questionnaire

13.2 Due to the limited number of questionnaires being returned, a true and accurate reflection of the diversity of the Authority's Complainants cannot be reported.

## 14.0 REPEAT AND VEXATIOUS COMPLAINTS

14.1 We do receive some complaints which may be construed as either vexatious or persistent. This type of complaint impacts greatly on the time of both the Complaints Manager and Departmental Staff and hinders the completion of other complaints.

14.2 The Local Government Ombudsman remains a source for advice in these situations, especially when it is felt that a Stage 2 Investigation would not provide a different outcome/resolution. A small number of complainants are advised to contact the LGO if they remain dissatisfied with the Local Authority's response.

#### **15.0 DEVELOPMENT OF COMPLAINT MANAGEMENT & EXPERTISE**

15.1 The North-West Complaints Managers Group meets bi-monthly. The network aims to raise standards for Complaint Management across Authorities. The group continues to be a valuable source of advice and support.

15.2 The Complaints Manager has completed the Queen Margaret's University "Complaints Management Award" course. This allowed the sharing of knowledge and learning from others in similar roles. It was a very positive experience.

15.3 As a result of the above events, a "complaint definition" system has been introduced. This breaks down all complaints identifying the specific themes being raised. This is shared with both the Team Managers and the complainant and precisely highlights the issues to be investigated.

15.4 Use of the Complaint Definition system means complainants have a clear list of the issues which will be address. It allows Team Managers to focus on the issues which need addressing and gives them a template to respond to the complaint thereby saving time and resources. This is also a useful resource when Stage 2 investigations are requested allowing for clarity of the initial issues agreed and maintaining focus. It is especially useful when the LGO requests information.

15.5 It is anticipated that the use of this system will help with more consistent identification of themes and issues and improve the quality of reporting.

#### **16.0 LEARNING FROM COMPLAINTS**

16.1 To demonstrate learning from complaints, and the Department's commitment to use complaints to improve standards of services, all Team Managers are required to complete a "Lessons Learnt" form following each complaint investigation. Quarterly analysis of feedback and learning is shared with Managers and is shared during Team Meetings.

16.2 Some complaints identify lessons learnt in dealing with a particular individual or family which may benefit others; others offer a wider learning experience. It is important that we all learn from the messages within complaints and act upon these to bring further improvements to Social Care work within Bury. The return rate, 45 forms returned from 66 complaints has been less than last year and this means we are missing some opportunities to learn and improve.

16.3 The recommendations which have arisen from complaints during 2022/2023 have been themed below:

- Accurate reporting – of both complaints and compliments
- Communication of social workers – including during transitions
- Quality of service – both when carers feel they should be getting a better service and when they do not feel they need to the support of statutory social work teams
- Information Governance – including secure emails
- Feedback/sharing of information – building a better service

16.4 The two key themes; quality of service and changes in social workers are central to our Improvement Plan. The purpose of the Improvement Plan is to improve the quality of service for children and families. As part of our improvement work, we have implemented a new model of practice which is founded on strengths and relationship-based practice. We have developed the Bury Commitments which describes the cornerstones of good practice and the first of which is relationships. Changes in social workers is related to the high use of agency, and recruitment and retention is another key workstream within the Improvement Plan. Securing a permanent workforce to ensure that relationship- based practice can flourish is a priority.

We are also reviewing our approach to learning from complaints and ensuring that there is a more robust approach to implementing the learning from complaints, including those that go to the LGO.

The complaints officers will attend SLT regularly to share updates on complaints and learning themes so it can inform service planning and improvement real time.

**17.0 CONCLUSIONS**

- 17.1 The Complaints process has been monitored and evaluated throughout the year to ensure that we not only meet the requirements of the statutory regulations and guidance, but those of the families we work with. Quarterly reports are provided to senior managers.
- 17.2 Whilst it is positive that response timescales have slightly improved this year, and there has been a reduction in complaints, there is still room for improvement. All managers to comply with responding within timescales. Formal Stage 1 complaints must be responded to within ten working days. Twenty working days should be the exception to be used only when complaints are complex and complainants must be kept informed of progress and any delays.
- 17.3 To ensure that we work to resolve complaints quickly. The Complaints Manager can provide support if required in the investigation and response to complaints. All written responses must go through a final stage of quality assurance ensuring all issues identified in the newly instigated Complaint Definition system are appropriately addressed. The system has been well received by managers who report they have found it helpful.
- 17.4 It is essential to the smooth running of investigating and responding to complaints that delays are kept to a minimum, and that any delays in the investigation process do not add to the initial complaint. Communication is key.
- 17.5 Strict monitoring and following up on complaint investigation to continue to ensure responses are ready within the ten working days timescales accompanied by a completed Lessons Learned proforma.



**Children & Young People**



**ANNUAL COMPLAINTS REPORT  
APRIL 2023 – MARCH 2024**

**Donna McDermott  
Complaints Co-Ordinator – Children's Services  
May 2023**

## **PURPOSE/SUMMARY:**

This report has been produced in line with the statutory requirement to update Members and provide current information in respect of complaints related to Children's Social Care Services. This report looks at the period 1 April 2023 to 31 March 2024 and will allow Members to see the extent and complexity of Children's Social Care Service's span of activity and to receive information relating to the quality of the services delivered.

Members are asked to note the content of the report and advise Officers of future requirements in respect of the reporting of complaints relating to Children's Social Care Services.

## **1.0 INTRODUCTION**

- 1.1 In line with guidance from the Department for Education, Local Authorities are required to publish an Annual Complaints Report covering the council year. This report is to provide current information in respect of complaints related to Children's Social Care Services for the year 2023/2024.
- 1.2 As part of our continued approach to monitoring performance, the status of all complaints is also shared weekly to the Children's Senior Management Team. Analysis of lessons learnt from complaints are also reported to Senior Managers and, where there is wider learning, discussions take place accordingly.

## **2.0 WHAT IS A COMPLAINT**

- 2.1 A complaint may be generally defined as 'an expression of dissatisfaction or disquiet' in relation to an individual child or young person, which requires a response. A complaint may be made by a written or verbal expression.
- 2.2 Complaints principally concern service delivery issues, including the perceived standard of these services and their delivery by service providers. These recorded figures only represent a percentage of complaints received as many of the issues are resolved on an informal basis operationally and do not need recording by the complaints section.
- 2.3 The Complaints Procedure is not designed to deal with allegations of serious misconduct by staff. These situations are covered under the separate disciplinary procedures of the Council.
- 2.4 It is a legal requirement that Children's Social Care Services has a distinct complaints procedure. This statutory procedure provides the means for a child or young person to make a complaint about the actions, decisions or apparent failings of a local authority's children's social care provision. It also allows an appropriate person to act on behalf of the child or young person concerned or to make a complaint in their own right.
- 2.5 For some service users, and for children and young people particularly, it is not easy to make a complaint. This can be the case when the person using the service may be apprehensive about what may happen if they do complain. It is important, therefore, that all complaints are treated seriously, in confidence, investigated and are given due attention. It is therefore the role of the Complaints Manager – Children's Services to provide a degree of independence and support to the complainant whilst ensuring the complaint follows the statutory procedure. If a complaint is received directly from a

child or young person, an automatic referral is made for advocate support to Bury Children's Rights Service, which is an independent advocacy service commissioned by Children's Social Care. Feedback to complainants about their complaint is essential.

- 2.6 A prime objective of the Children's Social Care Complaints Procedure is to ensure the Local Authority develops a listening and learning culture where learning is fed back to children and young people who use services. Complaints present an opportunity for the Local Authority to learn why people who are using our services find them unsatisfactory, and how we can improve the services we provide.

### **3.0 THE SOCIAL CARE COMPLAINTS PROCEDURE**

- 3.1 When a complaint is initially received, it is logged and acknowledged. It is then allocated to the relevant Team Manager with a request to contact the complainant within 48 hours to attempt to resolve the matter informally. If there is no resolution or the complainant cannot be contacted, the complaint is moved to formal Stage 1 at that point.
- 3.2 The formal handling and consideration of complaints consists of three stages:
- Stage 1: Local Resolution, informal or with written response
  - Stage 2: Independent Investigation
  - Stage 3: Review Panel
- 3.3 Local Resolution requires the Local Authority to resolve a complaint as close to the point of contact with the service user as possible (i.e. through front line management of the service). Emphasis is placed on resolving complaints under Stage 1, local resolution, because this should provide a timelier response and is user friendly. The Department strives to investigate and resolve complaints within 10 working days although the procedure does allow a 20-working day timescale for more complex complaints. In most circumstances attempts are made to resolve complaints informally within 48 hours of receipt. If this proves unsuccessful, the complaint automatically moves to formal Stage 1 within 48 hours of receipt of the complaint.
- 3.4 Where the complaint is not resolved locally, e.g. Stage 1, or the complainant remains dissatisfied with aspects of the Local Authority's response, the complaint can be considered at Stage 2. Stage 2 involves an independent investigation which is completed by an external Investigating Officer. This has the oversight of an Independent Person, also from outside the Local Authority, to ensure a full and fair investigation is carried out. We aim to send a Stage 2 response with a full report within 25 working days, although this can be extended up to 65 working days in complex cases.
- 3.5 When Stage 2 of the Children's Social Care Complaints Procedure has been concluded and the complainant remains dissatisfied, they are eligible to request further consideration of the complaint by a Stage 3 Review Panel. The Chair of the Panel decides membership of the Panel on a case-by-case basis. Membership of the Panel would depend upon the issue being complained about as specialist advice may be required, for example an adoption complaint would require an adoption specialist, etc.

- 3.6 The Review Panel does not reinvestigate the complaint or consider any substantively new issues of complaint that were not first considered at Stage 2. The purpose of the Panel is to consider the initial complaint and wherever possible, work towards a resolution. The Panel should be convened within 30 working days of a request and its report (including any recommendations) will be sent within 5 working days following the meeting. The Department then issues its response to the complainant within a further 15 working days.
- 3.7 Where a complainant remains dissatisfied with the Local Authority's response to the Review Panel's recommendations, the complainant has the right to refer their complaint to the Local Government Ombudsman. The Complaints Manager will assist with this process by providing contact details for the LGO. The LGO will not consider complaints which have not completed the Complaints procedure through all three stages.

### **ANALYSIS OF PROGRESS OF COMPLAINTS RECEIVED**

**All figures below relate to the period from 1 April 2023 to 31 March 2024. Reference is also made to outstanding complaints or complaints which were reported as not being agreed or completed as of 31 March 2024.**

#### **4.0 SOCIAL CARE COMPLAINTS RECEIVED**

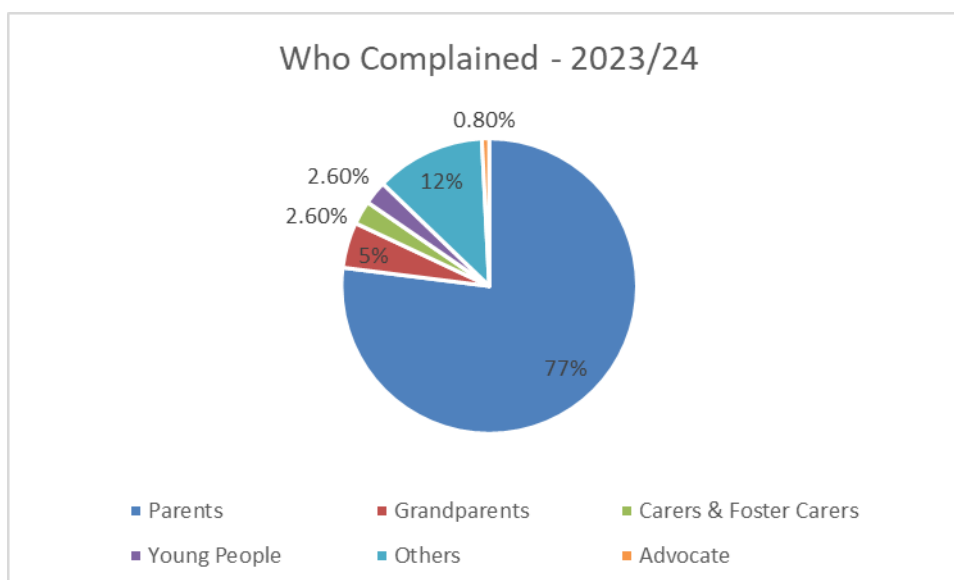
- 4.1 Social Care Teams received a total of **117** total complaints during the 2023/24 financial year. Of these complaints, **11** were resolved at the informal stage. **106** were investigated as Stage 1 formal complaints and these are the focus of this report.
- 4.2 This year, within these complaints, **9** (7.7%) were received via MPs/Councillors which is a slight reduction on the previous year (10 in 2022/23).
- 4.3 The focus of this report is the **106** Stage 1 complaints received in 2023/24. Overall, this represents an increase overall in the total number of complaints received compared to 66 received last year.
- 4.4 Complaints resolved at the informal stage have decreased compared to last year.
- 4.5 All Stage 1 complainants receive a written letter of response outlining details of the investigation and any findings. At the end of the letter, complainants are requested to contact the Complaints Team if they wish to discuss any outstanding issues or if they remain unhappy with the response. Apologies are offered as appropriate.
- 4.6 There were **16** complaints in 2023/24 where the service user was dissatisfied with the response they received and requested consideration at Stage 2. Five of these, following further discussions or a meeting with the relevant Service/Senior Manager or Strategic Lead, matters were resolved.
- 4.7 There have been **8** enquiries from the Local Government Ombudsman (LGO) in 2023/24 regarding Social Care related matters.

## 5.0 WHO COMPLAINED?

5.1 The breakdown of sources of complaints is reported at 5.3. Of the **106** complaints resolved at Stage 1, most of the complaints received (79.6%) were from parents/carers of children inc foster carers. Young people are encouraged and supported to raise their own concerns with the assistance of advocacy from Bury Children's Rights Service. Bury Children's Social Care Services and Bury Children's Rights Service continue to work with their joint working protocol to ensure that a consistent and timely service is offered to children and young people in the care of Bury Local Authority when they raise a concern via their advocate.

5.2 This year, complaints have been received from extended family members, a teacher and 2 unrelated 3<sup>rd</sup> parties, these are in the 'other' category. However, due to confidentiality issues, we are unable to respond to these complaints. A letter was sent in each case explaining the reasons behind the refusal to investigate.

5.3



## 6.0 ADVOCACY

6.1 Concerns and complaints received from Children and Young People in Care are very important. Young people are often supported to make a complaint by Bury Children's Rights.

6.2 An advocate from Bury Children's Rights Service will initially raise the concern with the Young Person's Social Worker, and if no timely response is received, this will be referred to the Social Worker's Team Manager for a response.

6.3 If the Young Person is unhappy with the response, their advocate will assist the child or young person to make a formal complaint at Stage 1 of the Statutory Children's Social Care Complaints Procedure.

6.4 There was 1 such complaint received this year via an Advocate for a Young Person. We also received 2 complaints made by Young People this year. It is important to note that numerous informal meetings have taken place between advocates and social workers and concerns were resolved prior to formal complaint procedures.

## 7.0 TIMESCALES OF STAGE 1 SOCIAL CARE COMPLAINTS

7.1 The table below shows the percentage of complaints responded to within reporting timescales.

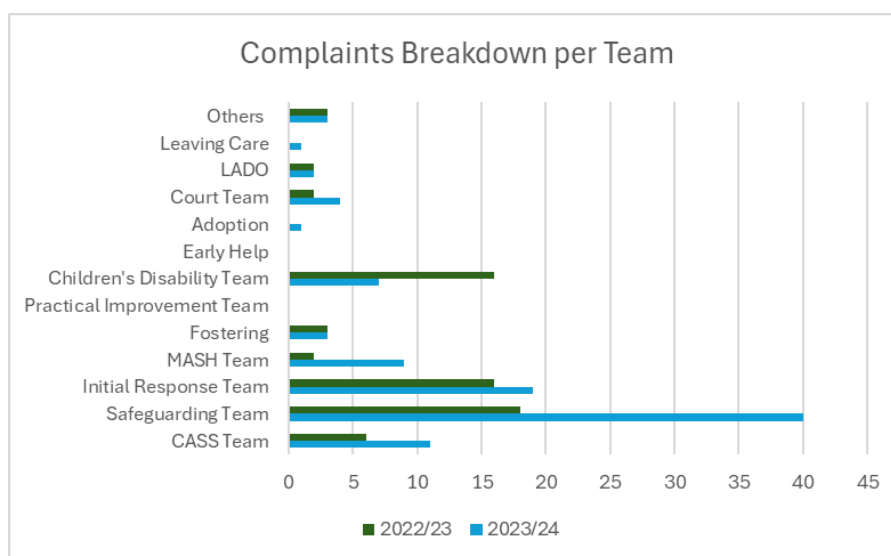
Year	10 Working Days	20 Working Days	Late Responses
2023 /2024	14.3%	49.1%	36.6%

7.3 These delays were as a result of the following: complexity of issues raised within the complaints; complainants adding additional issues to the original complaint; and complaints where a request to move to Stage 2 is received but, with further discussions and meetings, the matter was resolved at Stage 1.

## 8.0 COMPLAINTS BY TEAM

8.1 Some teams have experienced a small increase in the total number of complaints received – the Court Team, Initial Response Team, the Care and Support Service (CASS). The Multi Agency Safeguarding Hub (MASH) and the Safeguarding Teams have experienced a significant increase, (see 8.2 below) However, the Children with Disabilities Team have experienced a significant decrease in complaints received. Some complaints relate to more than one team.

8.2

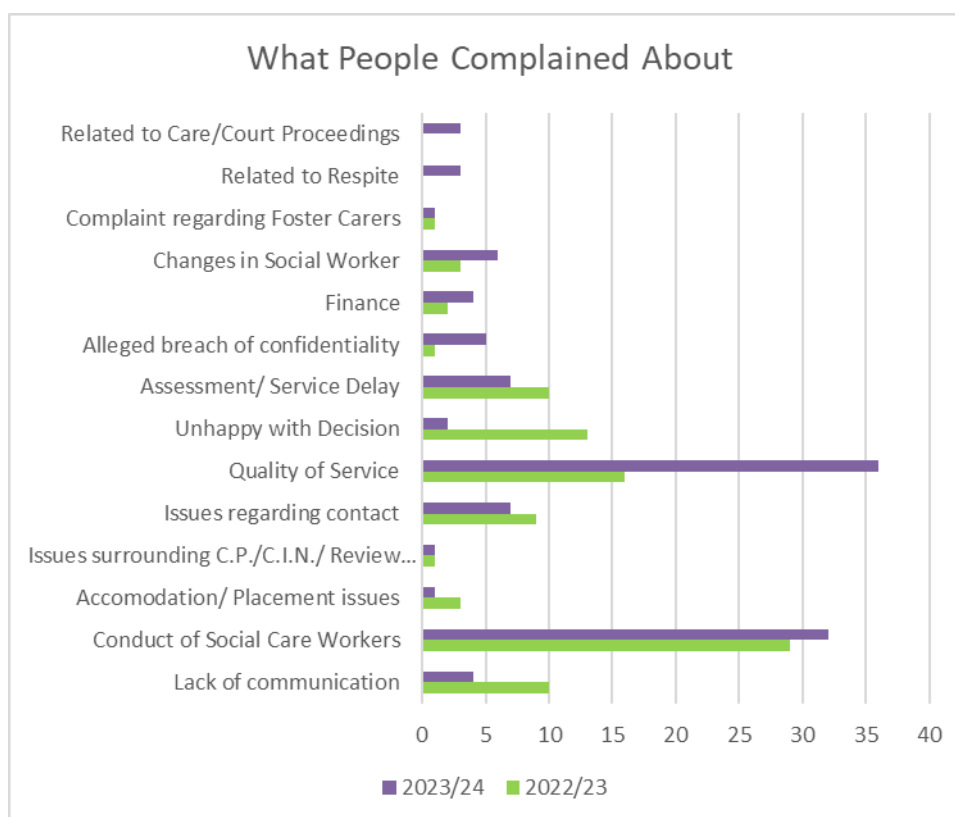


## 9.0 WHAT PEOPLE COMPLAINED ABOUT

9.1 All complaints are categorised by the issues being raised as shown within the graph below, some complaints cover more than one category and are shown in both categories for reporting.



9.2



## 10.0 HOW WE DEALT WITH COMPLAINTS

10.1 Initially, **11** complaints were allocated to Team Managers as informal complaints with a request to ring the complainant within 48 hours to try to resolve the issue. Of these complaints, all were resolved by a telephone call and did not progress to the formal stage. All complaints are also copied to the relevant Service Manager and/or Strategic Lead for their information.

10.2 Stage 1 are investigated by the relevant Team Manager, with oversight by the Head of Service. A written response is provided to the complainant which highlights the findings of the investigation. It also includes, if appropriate, information regarding any action that is being taken because of the complaint. In most cases, a letter of explanation, with an appropriate apology if required, are sufficient to resolve the matter.

10.3 In 2023/24, **11** complainants were initially dissatisfied with the Stage 1 outcome and requested to move to Stage 2. Of these 8 were investigated by an Investigating Officer and an Independent Person as per the Children's Social Care Policy. The reports from these were sent to the Adjudicating Officer. Three complaints are currently being investigated at Stage 2.

## 11.0 QUALITY ASSURANCE / BUDGET POSITION

11.1 The Complaints Manager attends quarterly meetings with Children's Services Social Care staff. Additionally, Team Managers are now familiar with carrying out complaint investigations and providing written responses. Heads of Service continue to have quality assurance oversight of responses and, where required, additional mediation

and meetings have taken place. This means that the majority of complaints were resolved at Stage 1.

## **12.0 COMPLIMENTS RECEIVED**

- 12.1 It is positive that the Teams also receive compliments for work which is well done.
- 12.2 We have received **20** compliments regarding the Children's Services Teams in the last year. Team Managers are encouraged to record and share compliments received, as it is important that good practice is acknowledged and shared across all services as wider learning.

## **13.0 EQUAL OPPORTUNITIES MONITORING**

- 13.1 Whilst efforts have been made to monitor the personal data of the Authority's complainants; many have not returned the diversity questionnaire

## **14.0 REPEAT AND VEXATIOUS COMPLAINTS**

- 14.1 We do receive some complaints which may be construed as either vexatious or persistent. This type of complaint impacts greatly on the time of both the Complaints Manager and Departmental Staff and hinders the completion of other complaints.
- 14.2 The Local Government Ombudsman remains a source for advice in these situations, especially when it is felt that a Stage 2 Investigation would not provide a different outcome/resolution. A small number of complainants are advised to contact the LGO if they remain dissatisfied with the Local Authority's response.

## **15.0 LEARNING FROM COMPLAINTS**

- 15.1 To demonstrate learning from complaints, and the Department's commitment to use complaints to improve standards of services, all Team Managers are required to complete a "Lessons Learnt" form following each complaint investigation. Quarterly analysis of feedback and learning is shared with Managers and is shared during Team Meetings.
- 15.2 Some complaints identify lessons learnt in dealing with a particular individual or family which may benefit others; others offer a wider learning experience. It is important that we all learn from the messages within complaints and act upon these to bring further improvements to Social Care work within Bury. Disappointingly, the return rate has only been 36 forms and this means we are missing some opportunities to learn and improve.

15.3 The recommendations from complaints received during 2023/2024 are:

- Accurate reporting – of both complaints and compliments
- Communication of social workers – including during transitions
- Quality of service – both when carers feel they should be getting a better service and when they do not feel they need to the support of statutory social work teams
- Information Governance – including secure emails
- Feedback/sharing of information – building a better service

15.4 The themes highlighted are central to our Improvement Plan. The purpose of the Improvement Plan is to improve the quality of service for children and families. As part of our improvement work, we have implemented a new model of practice which is founded on strengths and relationship-based practice. We have developed the Bury Commitments which describes the cornerstones of good practice and the first of which is relationships. Changes in social workers is related to the high use of agency, and recruitment and retention is another key workstream within the Improvement Plan. Securing a permanent workforce to ensure that relationship-based practice can flourish is a priority.

We are also reviewing our approach to learning from complaints and ensuring that there is a more robust approach to implementing the learning from complaints, including those escalated to the LGO.

The complaints officers will attend SLT regularly to share updates on complaints and learning themes so it can inform service planning and improvement real time.

## 16.0 CONCLUSIONS

16.1 The Complaints process has been monitored and evaluated throughout the year to ensure that the Council not only meet the requirements of the statutory regulations and guidance, but those of the families we work with. Quarterly reports are provided to senior managers.

16.2 Whilst it is positive that the number of complaints resolved at stage 1 is high, there is still room for improvement.

16.3 The complaints report relates in the main, to the period of time prior to the establishment of the Policy and Compliance team. The Policy Compliance Team was established on the 1<sup>st</sup> March 2024. The new Policy Compliance team will focus on compliance to support the corporate co-ordination, quality assurance and reporting of member enquiries and casework, MP enquiries, formal complaints, FOIs, SARs (with the exception of those in Childrens and Adults) and LGO liaison; some of these functions are currently dispersed across services, leading to lack of compliance with deadlines, and importantly, minimal insight on what Members and residents are telling us about our services.

Background information:



6. ANNUAL  
COMPLAINTS REPOR





Welcome to the refreshed Annual Complaints Report for Children's Social Care. This report has been produced in line with statutory requirements and provides information in respect of complaints related to Children's Social Care Services. This report looks at the period 1 April 2024 to 31 March 2025.

The purpose of this report is to provide information in relation to:

- Complaints received.
- A breakdown of the number of complaints received at each stage of the complaints process.
- Statistical information regarding the nature of the complaints, and those making complaints.
- Outcome.
- Timescales.
- Complaints considered by the Local Government and Social Care Ombudsman (LGSCO).
- A review of the effectiveness of the complaint's procedure.
- Learning and service improvement, including changes to services that have been implemented and details of any that have not been implemented.

This is the first report Annual Report to be produced by the newly established Policy and Compliance Team. A team established to provide a single point of access for complaints, compliments, Freedom of Information requests, Subject Access Requests, Elected Member and MP casework, across the Council. In establishing the team not only will residents receive an improved customer experience, but it will also enable the Council to better understand residents' concerns and contribute to the Bury Vision and lets do it call for action!

This report will be presented for overview and scrutiny to the Children and Young People's Scrutiny Committee.



## **WHAT IS A COMPLAINT**

A complaint may be generally defined as ‘an expression of dissatisfaction or disquiet’ in relation to an individual child or young person, which requires a response. A complaint may be made by a written or verbal expression.

Complaints principally concern service delivery issues, including the perceived standard of these services and their delivery by service providers. These recorded figures only represent a percentage of complaints received as many of the issues are resolved on an informal basis operationally and do not need recording by the complaints section.

The Complaints Procedure is not designed to deal with allegations of serious misconduct by staff. These situations are covered under the separate disciplinary procedures of the Council.

For some service users, and for children and young people particularly, it is not easy to make a complaint. This can be the case when the person using the service may be apprehensive about what may happen if they do complain. It is important, therefore, that all complaints are treated seriously, in confidence, investigated and are given due attention. It is therefore the role of the policy and compliance team to provide a degree of independence and support to the complainant whilst ensuring the complaint follows the statutory procedure. If a complaint is received directly from a child or young person, an automatic referral is made for advocate support to Bury Children’s Rights Service, which is an independent advocacy service commissioned by Children’s Social Care.

## **LEGISLATION**

The Children’s Act 1989 Representations Procedure (England) Regulations 2006 is for all representations received by Children and Young People, their parents, foster carers or other qualifying adults about social care provided or commissioned by Children’s Social Care. The act and regulations established procedures that Council with Social Care responsibility have to follow when a complaint is made. This is a three stage process:

Stage 1 – Local Resolution    Stage 2 - Independent investigation    Stage 3 - Review panel

The section 5 of the Regulations (2009) set a benchmark for all complaints to be investigated within set timescales. If a complaint is going to exceed this timescale the council should write to the complainant to advise them of this and explain the reasons why.

The corporate complaints process is used for anyone else who makes a complaint.

**A prime objective of the Children’s Social Care Complaints Procedure is to ensure the Local Authority develops a listening and learning culture where learning is fed back to children and young people who use services. Complaints present an opportunity for the Local Authority to learn why people who are using our services find them unsatisfactory, and how we can improve the services we provide.**

## The Complaints Process in Bury

We will always try to resolve problems or concerns before they escalate into complaints. When a complaint is initially received, it is logged and acknowledged. It is then allocated to the relevant Team Manager with a request to contact the complainant within 48 hours to attempt to resolve the matter informally. If there is no resolution or the complainant cannot be contacted, the complaint is moved to a formal Stage 1 complaint, local resolution.

Local Resolution requires the Local Authority to resolve a complaint as close to the point of contact with the service user as possible. The Department strives to investigate and resolve complaints within 10 working days although the procedure does allow a 20-working day timescale for more complex complaints. When the investigation of a complaint is completed a letter will be sent explaining the Council's findings, and how the Council will address the concerns raised. Sometimes our findings do not fully support the complainants view of their complaints. However the Council would always give clear reasons for the decisions and explain any misunderstandings.

When the complaint is not resolved at Stage 1, or the complainant remains dissatisfied with aspects of the Local Authority's response, the complaint can be considered at Stage 2. Stage 2 involves an independent investigation which is completed by an external Investigating Officer. This has the oversight of an Independent Person, also from outside the Local Authority, to ensure a full and fair investigation is carried out. We aim to send a Stage 2 response with a full report within 25 working days, although this can be extended up to 65 working days in complex cases.

When Stage 2 of the Children's Social Care Complaints Procedure has been concluded and the complainant remains dissatisfied, they are eligible to request further consideration of the complaint by a Stage 3 Review Panel. The Chair of the Panel decides membership of the Panel on a case-by-case basis. Membership of the Panel would depend upon the issue being complained about as specialist advice may be required, for example an adoption complaint would require an adoption specialist.

The Review Panel does not reinvestigate the complaint or consider any substantively new issues of complaint not first considered at Stage 2. The purpose of the Panel is to consider the initial complaint and wherever possible, work towards a resolution. The Panel should be convened within 30 working days of a request and its report (including any recommendations) will be sent within 5 working days following the meeting. The Department then issues its response to the complainant within a further 15 working days.

If a complainant remains dissatisfied with the Local Authority's response to the Review Panel's recommendations, the complainant has the right to refer their complaint to the Local Government Ombudsman. The Complaints Manager will assist with this process by providing contact details for the LGO. The LGO will not consider complaints which have not completed the Complaints procedure through all three stages.

## Advocacy Arrangements in Bury

**Children and young people have a legal entitlement to advocacy services to support them in making a complaint or expressing their views.**

The Council understands that concerns and complaints received from Children and Young People in Care are very important.

Young people are often supported to make a complaint by Bury Children's Rights.

An advocate from Bury Children's Rights Service will initially raise the concern with the Young Person's Social Worker, and if no timely response is received, this will be referred to the Social Worker's Team Manager for a response.

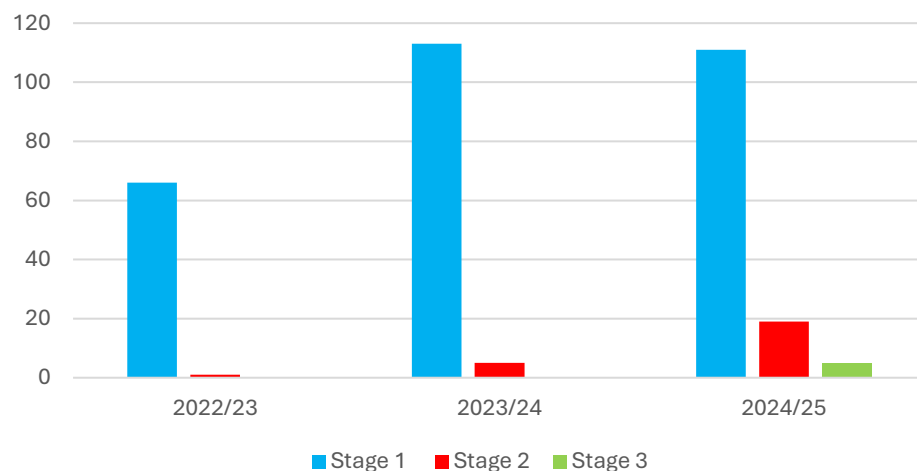
If the Young Person is unhappy with the response, their advocate will assist the child or young person to make a formal complaint at Stage 1 of the Statutory Children's Social Care Complaints Procedure.

The advocacy service aims to ensure that children and young people have access to an independent advocacy service, which ensures:

- They have a say in decisions made about their lives.
- They are able to share their concerns about their circumstances.
- They are listened to and heard.
- They are treated fairly in the course of their contact with Children's Social Care.
- They are supported when pursuing a complaint through every stage of the complaints process.

## Complaint activity

Number of Complaints Received by Stage



### Total Complaints by Stage

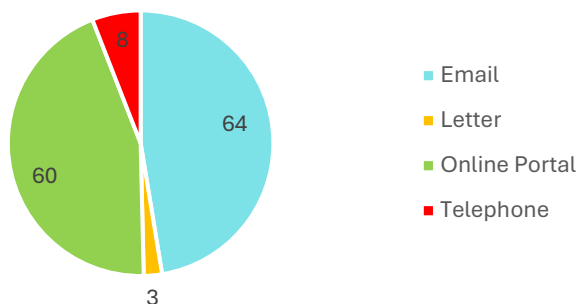
A total of 135 complaints received across all stages, 7 were still open at the end of the year.

Of the 111 at Stage 1, 108 were closed during this year. The remaining 3 cases were withdrawn.

Of the 19 complaints received at Stage 2, 8 of these were closed during that year.

### How complaints were received

Method of Complaint



### How Complaints are Received:

We offer a range of methods for complainants to contact us.

Overall Complaints from Stage 1 to 3:

Email: 64  
 Online Form: 60  
 Telephone: 8  
 Letter: 3

## Customer Types

Complainant	Stage 1	Stage 2	Stage 3
Parent	73	14	2
Other Family/ Friend	18	2	1
Foster Carer/ Carer	9	2	2
Child / Young Person	1	0	0
Care Leaver	2	0	0
Advocate	2	1	0
Other	5	0	0
<b>Total</b>	<b>111</b>	<b>19</b>	<b>5</b>

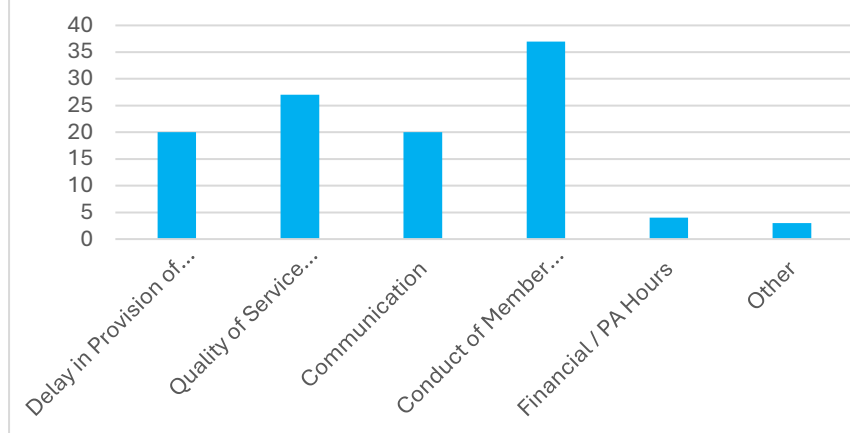
### Customer Types

As with previous years, the biggest proportion of complaints received have come in from parents of the children.

With the second highest portion being from other relatives or friends of the family.

One of the stage 1 complaints has been received directly from a child/young person with a further two of the complaints submitted by an advocate.

### Themes of Complaints - Stage 1



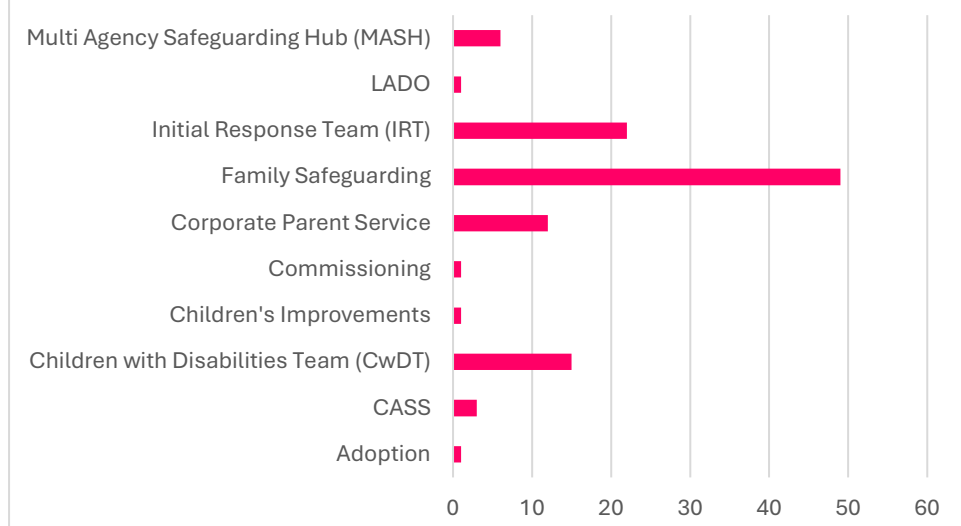
### Themes of Stage 1 complaints

A complaint may include a number of areas of concern. Therefore, some complaints cover more than one theme. Where there was more than one theme, these were categorised under the Quality of Service theme only.

The four most common themes Conduct of a member of staff, Quality of Service Provided, Delay in the Provision of Service and Communication.

These account for 81% of all areas that complaints related to.

### Complaints broken down by Team - Stage 1

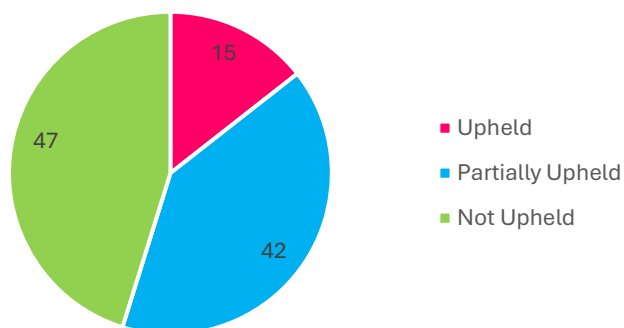


### Complaints broken down by Team

Complaints received at stage 1 related to the following areas of Children's Social Care:

Multi Agency Safeguarding Hub (6), LADO (1), Initial Response Team (22), Family Safeguarding (49), Corporate Parenting Service (12), Commissioning (1), Children's Improvements (1), Children with Disabilities (15), Children's Advice and Support Service (CASS) (3) and Adoption (1).

### Stage 1 Outcomes



### Outcomes

From the total 111 stage 1 complaints that were received during the period, 15 complaints had a finding of upheld, 42 were partially upheld and 47 were not upheld. Partially upheld is where part of a complaint has been upheld but other areas have not.

Of the remaining 3 complaints, 1 was withdrawn due to being a duplicate complaint and 2 were withdrawn due to a lack of contact from the complainant.



## Timescales and Performance

### Timescales

Complaints should be responded to within 10 working days extended to a maximum of 20 working days.

There were 55 complaints received and responded at Stage 1 complaints with an outcome in this reporting

period. 47% were completed within the 20 working day timescale.

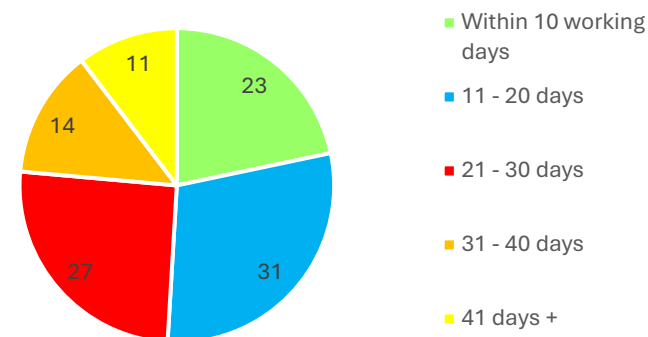
The average timescale was 31 working days.

From the remaining 27 of the 82 complaints received during this period, 3 remain open and 24 were closed as

either refused, closed due to a lack of contact from the complainant, moved on to stage 2 or were withdrawn.

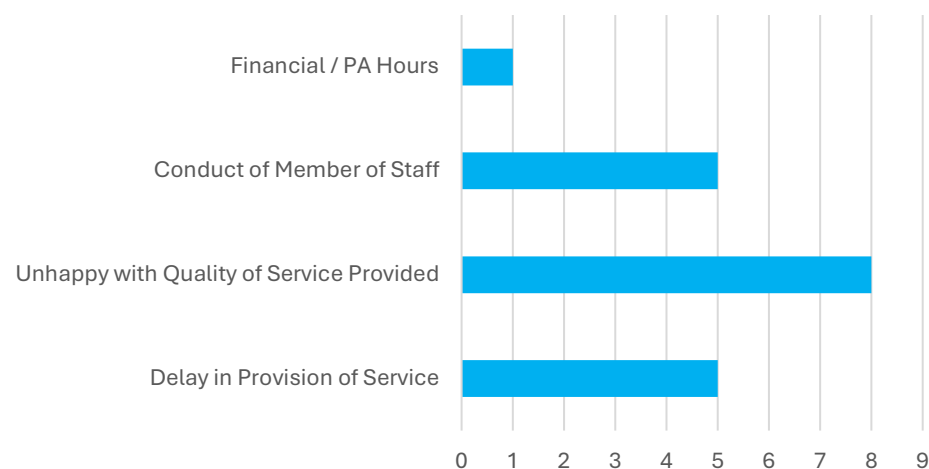
Timescales - Stage 1	Within 10 working days	11 - 20 days	21 - 30 days	31 - 40 days	41 days +
2024/25	23	31	27	14	10

Timescales - Stage 1



**Stage 2****Stage 2 Types of Complaints**

Themes of Complaints - Stage 2

**Complaint Themes**

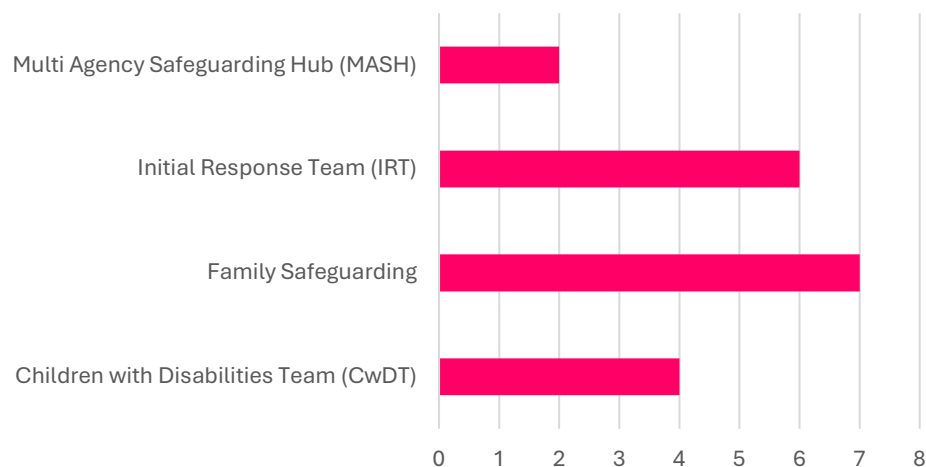
Stage 2 will not normally reinvestigate points that have previously been upheld at Stage 1.

Stage 2 can consider any new points raised or linked to the original complaint.

From the total of 19 Stage 2 complaints received, 4 complaints were withdrawn due to lack of communication from the complainants following request for consent to share their information and files with the Investigating Officer and Independent Person for the investigations.

From the 15 complaint that were investigated, the main three main issues identified were quality of service, delay in provision of service and conduct of a member of staff.

## Complaints broken down by Team - Stage 2

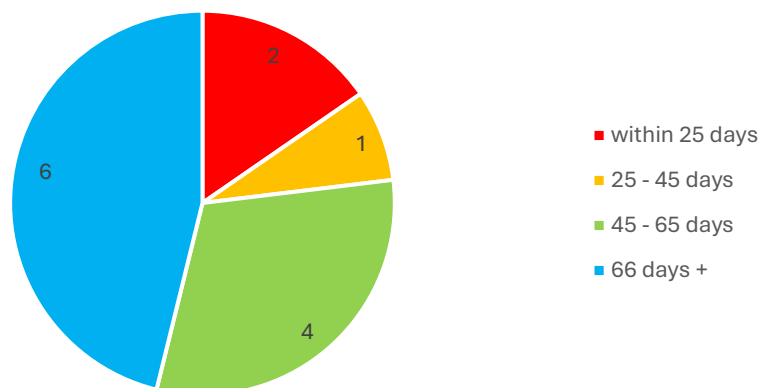


### Complaints broken down by Team

Complaints investigated at stage 2 related to the following areas of Children's Social Care:

Multi Agency Safeguarding Hub (2), Children with Disabilities (4), Initial Response Team (6), and Family Safeguarding (7).

## Stage 2 - Timescales



### Timescales and Outcomes

At this reporting stage of the 15 Stage 2 complaints that were investigated; 2 were completed within 25 days, 1 was within 25 – 45 days, 4 were within 45 – 65 days and 6 were over 65 days.

2 complaints were not upheld, 9 were partially upheld and 2 were upheld.

Partially upheld is where there was more than one area of complaint and part of a complaint has been upheld or partially upheld, but other areas have not.

2 of the completed stage 2 complaints resulted in an offer of a financial remedy.

At the stage of reporting, 2 complaints are still ongoing.

## Stage 3 Complaints

### Stage 3 – Types of Complaint

Where a complainant does not agree with the findings and recommendations of the stage 2 investigation into their complaint, they can ask for the review panel to consider the complaint at Stage 3 of the Statutory Process, within 20 days.

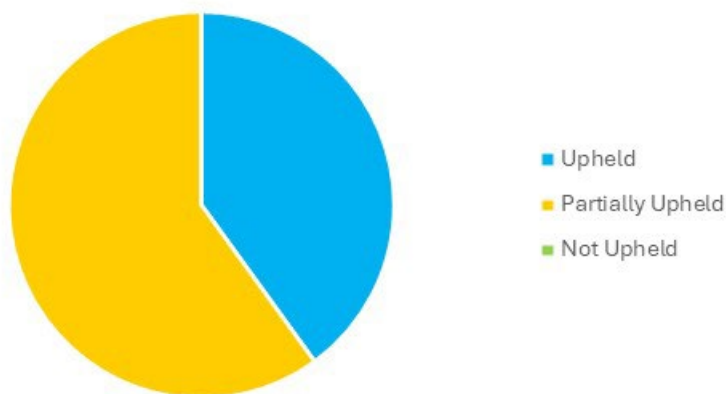
This must include:

- Which parts of the report they do not agree with
- Whether they think there are any factual errors
- Why they think the response by the Head of Service is unsatisfactory.

Main reason for requesting a Stage 3: Dissatisfied with the standard of the stage 2 investigation.

The panel cannot reinvestigate the complaints or consider new complaints. The panel will scrutinise the earlier findings and make recommendations based on the evidence provided.

Outcomes - Stage 3



### Outcomes

A total of 5 complaints were escalated to stage 3 and all of these went to panel.

Of the 5 Stage 3 hearings, 2 complaints were upheld and 3 were partially upheld.

As part of the outcomes, the panels made a total of 22 recommendations which ranged from suggesting remedy payments, offering apologies, updating to policies and procedures and training, reminders for staff, and develop information leaflets that would benefit children and their families.

## Child in Care (CIC) and Care Lever Complaints

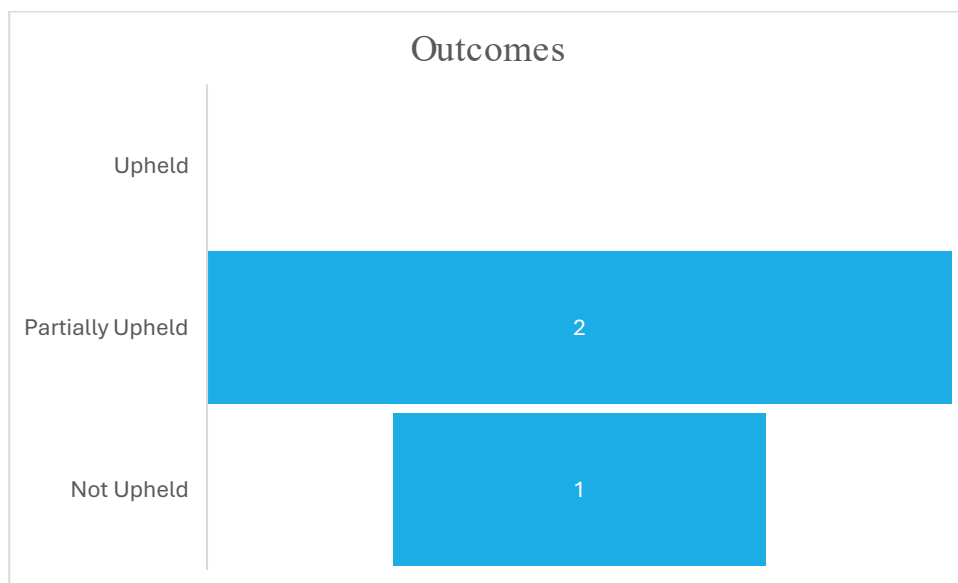
### Total Received

Three complaints were made by or on behalf of looked after children in care and/or care leavers.

Of those 3 complaints, all were resolved at stage 1.

The themes of these complaints included lack of support, not being listened to, not being informed of correct legal status, delays being allocated a PA, difficulties accessing personal files and records and records being missing.

Of these three complaints, 2 were partially upheld and 1 was not upheld.



### Outcomes

Of these the above three complaints, 2 were partially upheld and 1 was not upheld.

## Ombudsman Complaints

The LGSCO can review and / or investigate complaints from members of the public who consider they have experienced injustice because of maladministration by the Authority, typically once the complaint has exhausted the Authority's complaint procedure.

### Ombudsman 2024/2025

The LGSCO received a total of 88 complaints in relation to Bury Council. They went on to investigate 18 complaints listed under Education & Children's Services during this reporting period.

Only two of these complaints were upheld, with the Council at fault with an injustice. In both of these cases the appropriate remedy was completed in the set timescales and confirmation received from the LGSCO that they were satisfied and closed the cases.

The decision of "Upheld" is applied when the Ombudsman finds there is some fault in the way the Council acted – even if it has agreed to put things right during the course of the Ombudsman investigation; or had already accepted it needed to remedy the situation before the complaint was apparent to the Ombudsman.

The number of complaints received by the Ombudsman about the Council's Education & Children's Services in 2023/24 were totalled at 35 which was an increase on the 27 cases recorded in 2022/23. This year's figures (\*Subject to confirmation from the LGSCO) provide assurance that the service is improving with a lower number of cases than the previous 2 reporting years for this service of the Council.

The highest area of complaint across the Ombudsman's casework remains complaints about poor services for children and young people with Special Educational Needs and Disabilities. This area now dominates their casework, making up 26% of all complaints the service received in in 2023/24.

To help Officers maintain an accurate record and meet the required deadlines, a weekly Childrens Services matrix was produced by the Council's LGO link Officer. This was sent to relevant Officers and Directors to make them aware of live cases with deadlines for actions required and evidence to be produced for the LGSCO.

Regular meetings with the LGSCO have occurred throughout 2024/25 and they have welcomed significant strides the Council has now made to improve its complaint functions. The data and report for 2024-2025 once available will demonstrate the improvements made by the Council and this service area.

## Compliments 2024.25

Compliments received by children's social care are an important part of our service feedback. While complaints help us identify areas of improvement, compliments provide valuable insight into what we are doing well. They often highlight effective practice, strong relationships with children and families and positive outcomes that result from the dedication and professionalism of our staff. During the report period 1.4.2024 to 31.3.2025 a total of 46 compliments were formally recorded.

Compliments received have included:

*"Big thank you for all your help, you came into lives and actually listened to what I had to say before making any decisions"*

*"(Social worker) has been brilliant in the short time I have known her, proved to be very reliable, consistent and dependable and very friendly and approachable I'm sure she will be a great asset to your team."*

*"(Social worker) truly outstanding social worker, consistently goes above and beyond, unwavering dedication in supporting a family"*



## Key Learning 2024 - 25

Complaints provide invaluable information which may be used to identify issues in services, help staff learning and also identify any risks and so improve services for the future.

Improvement actions/recommendations arising from complaints fall into three main categories:

- Remedial action for individual complaints
- Improving social work practice and delivering training
- Establishing or changing existing processes, policies or procedures

To demonstrate learning from complaints, and the Department's commitment to use complaints to improve standards of services, all Team Managers are required to complete a "Lessons Learnt" form following each complaint investigation. Quarterly analysis of feedback and learning is shared with Managers and is shared during Team Meetings.

The recommendations from complaints received during 2024/2025 are:

The themes highlighted are central to our Improvement Plan. The purpose of the Improvement Plan is to improve the quality of service for children and families. As part of our improvement work, we have implemented a new model of practice which is founded on strengths and relationship-based practice. We have developed the Bury Commitments which describes the cornerstones of good practice and the first of which is relationships.

Changes in social workers is related to the high use of agency, and recruitment and retention is another key workstream within the Improvement Plan. Securing a permanent workforce to ensure that relationship-based practice can flourish is a priority. We are also reviewing our approach to learning from complaints and ensuring that there is a more robust approach to implementing the learning from complaints, including those escalated to the LGO.

The complaints officers will attend SLT regularly to share updates on complaints and learning themes so it can inform service planning and improvement real time.

## Reflections and Key Priorities

Complaints and feedback are used to better understand the needs of our customers and offer an opportunity to learn and improve. As a direct result of our complaints in 2024 - 25 the Council we have improved communication with families, made changes to policy and processes and staff and managers have attended specific training sessions.

Since the last annual report, the Council has established a central complaints team, the policy and compliance team under the leadership of the Head of Governance; this team has helped to facilitate regular meetings with senior officers in the department to expediate and support complaint resolution. In addition, the Service has undergone a revisited Ofsted inspection which noted steady progress and stabilisation of the senior management team.

Key priorities for the Policy and Compliance team working with Children's services next year will be continuation of effective communication channels, ensuring quality and timely responses and in particular:

- A culture of accountability, where mistakes are acknowledged and learned from, helps improve services. Addressing issues raised in complaints quickly demonstrates a commitment to improvement.
- Clearly explaining decisions to families and documenting the rationale behind them can build trust and reduce complaints.
- Regular Monitoring and Evaluation: Independent reviews of complaints and continuous feedback loops help identify systemic issues and drive service improvements.
- Effective Complaint Handling: A fair, transparent, and accessible complaint-handling process will encourage families to raise concerns without fear of reprisal and ensures issues are resolved constructively.

These key lessons contribute to building a more responsive, compassionate, and effective children's social care system.

As part of our ongoing commitment to learning and improving our services, the Policy Compliance Team has implemented a change to the complaints submission process. Equality Monitoring questions on the complaint form are now mandatory, with complainants required to either provide responses or select "Prefer not to say" in order to proceed. This adjustment aims to ensure more consistent and comprehensive data collection, enabling us to gain clearer insights into the demographics of those engaging with our complaints process. It is hoped that this will significantly enhance the quality of our reporting and support more decision making in future complaints analysis.

**Report Author – Julie Gallagher, Head of Governance**

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