

Secretary of state's priority area: Children and young people

The assessment had a focus on the Secretary of State's priority area for children and young people.

Shared direction and culture

At system level, services for children and young people reflected broader complexities and challenges to integrate services, align strategies and build trust across stakeholders in the Dorset system. Local alliances are aligned with strategic plans. However, the ICS is slow in integrating services and lacks a unified approach to address the needs of children and young people effectively. There is limited co-ordination and use of existing resources, such as local authority properties, to address local challenges promptly.

Capable and compassionate leaders

There were some concerns about a lack of cohesive leadership in children and young people's services at system level. Service representatives felt local authority and commissioning leaders were doing their jobs well, but there was a lack of cohesive leadership at a system level, with uncertainty about which senior ICB leaders were responsible for aspects of services, a lack of cohesion at the highest level of system decision making and limited co-ordination and use of existing resources. There was desire for more integrated leadership of services.

Governance, management and sustainability

Services reflected the complexities and challenges faced in efforts to integrate governance and assurance processes across the system. There were some successes, for example the establishment of a pan-Dorset strategic safeguarding partnership and associated sub-groups. However, there were risks that lack of defined system leadership could lead to gaps in oversight and accountability.

Partnerships and communities

We found varied levels of maturity regarding integration of children and young people's services in Dorset. There is a focus on building partnerships and efforts have been made towards a Dorset-wide approach, although actions and integration are at early stage and challenges persist. There is strong focus on ensuring young people's voices are heard, with specific surveys and initiatives designed to gather their input and improve services.

However, commissioning of services across the ICS is not fully integrated, leading to slow progress and inconsistent improvements in service provision for children, young people, and their families. Variations in approach and services exist between both places, leading to inconsistencies in service delivery and challenges in achieving uniform service provision between the 2 geographic areas.

Learning, improvement and innovation

There were some examples of pan-Dorset and cross-sector learning in children and young people's services, including a system-wide approach to autism awareness training, and improvements to learning and understanding about transition to adult services, resulting in some instances of improved outcomes for children, young people and their families. However, representatives from services told us learning and good practice is not routinely shared between organisations, and data was not used effectively or collated into a single database.

Safe systems, pathways and transitions

There was some evidence of effective pathway integration for children, young people and families. This included a focus on transition from children's to adult health services, which was identified as a systemic risk. Practitioners identified that their biggest gaps and failures were in transition into adulthood. Reports on transition experiences across Dorset were variable, with a lack of clarity for young people and their families, which had led to frustrations and confusion.

Some CYP services had reviewed pathways to identify touchpoints where more could be done earlier in a child's development to improve earlier prevention. Services recognised that young people who were hard to engage and disengaged were at risk while waiting for assessment. A policy has been developed to address this, but staff continue to consider how to identify these young people.

Care provision, integration and continuity

Practitioners told us CAMHS transformation is being progressed within the ICS, but with recognition that current provision is not developing at a pace that meets increasing need. There is a multi-agency co-production approach to obtaining the views of children and families to ensure CAMHS services can better meet their needs. However, limited use of data to inform how services are designed is a contributing factor in delayed implementation of planned changes.

How staff, teams and services work together

There was some evidence of effective integration and team working to support children, young people and families, and ensuring they only need to tell their story once when they move between different services.

There were improving links between education and health and care providers. However, people using services reported some disconnection, particularly during transition from child to adult services.

Supporting people to live healthier lives

The ICS has strategies and models to make sure children, young people and their families get help for their mental health as soon as possible and have the best chance to be happy and well. However, we received feedback from some voluntary organisations that support for children and young people is variable across Dorset and that CAMHS are "stretched to the limit".

Dorset's mumps, measles and rubella vaccination rate was better than the national average of 85% although it was below the national target of 95%. In quarter 4 of 2022/23, 90.6% of 5-year-olds living in Dorset had been vaccinated.

Learning culture

Staff from children and young people's services perceived a focus on individual local authority learning and development, and did not describe examples of shared learning or development beyond their organisational boundaries.

Safe and effective staffing

Services reported a lack of system resilience around staffing, which restricted their ability to deliver services safely and effectively. There were not enough children's social workers to meet increasing local demand so there was heavy reliance on existing staff and risk of many single points of failure in the system. Limited capacity also affected the development of strategic commissioning for children's services.

Equity in access

ICB and ICP leaders understood system demography and where there were potential health inequalities. Priorities for health inequalities work focused on early health interventions for children to improve their health prospects into adulthood. Data on emergency admissions for children with lower respiratory tract infections (LRTIs) show the ICS ranked 32 of 42 areas in 2021 and puts Dorset ICS in the lowest quartile nationally. More children were admitted to hospital as an emergency rather than managed in primary and community care settings.

Equity in experience and outcomes

We heard examples from different system partners of engaging with children and young people. For example, one local authority has a youth voice team, and a peer group for the CAMHS adolescent unit to hear the voices of children and young people about their experiences of using services, and one partner employed a special educational needs and disability youth voice staff member to support improving provision of services.

Safeguarding

There are robust arrangements for cross-Dorset children's safeguarding.

There is an early focus on transitional safeguarding for young adults. Safeguarding practitioners told us there was system-wide recognition that exploitation does not end when people turn 18. At the time of our assessment there was a shared position statement for transitional safeguarding. Staff told us there is a good multi-agency approach to missing, exploited or trafficked (MET) young people, including a MET panel in Bournemouth, Christchurch and Poole. Here, there is also a multi-agency preparing for adulthood board, which reports transition safeguarding issues.

However, there was limited inclusion of the voice of children and young people within Dorset safeguarding processes and strategies. System leaders acknowledged there is a need to improve how feedback from children and young people is captured and report back on actions taken in response to feedback.

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