

Council Priority: PEOPLE

Supporting Medway's people to realise their potential

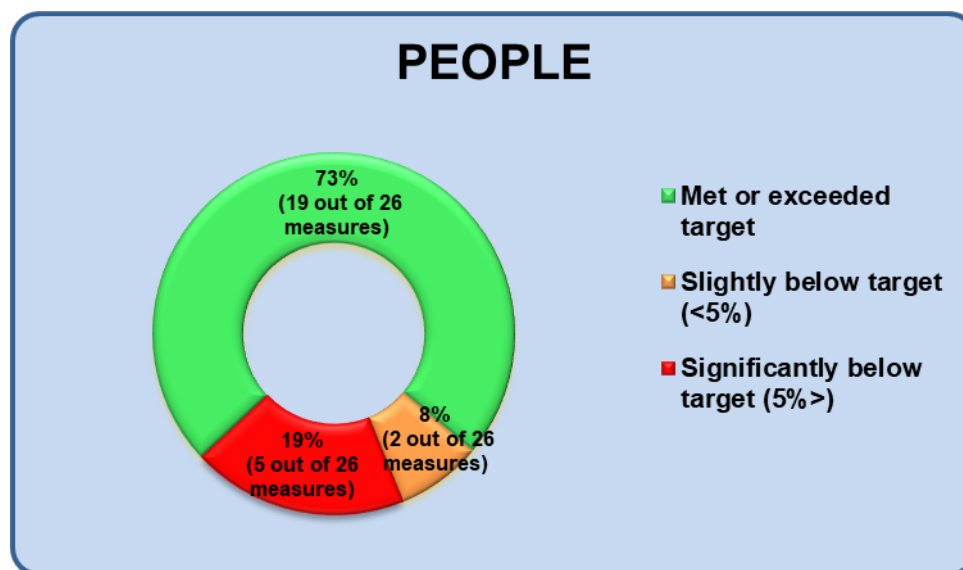
Performance: Quarter 3 2021/22

Key

Red	significantly below target (>5%)	Amber	slightly below target (<5%)	Green	met or exceeded target
IMP	Improved	DET	Worsened	STATIC	Static
Data	No target	NA	Not available	Not available	Not available
Short Trend	Since last qtr	Long Trend	Avg over last 4 qtrs	Avg over last 4 qtrs	Avg over last 4 qtrs

Council Plan measures: summary performance

There are 34 Council Plan measures for this priority. We are reporting on 26 as data for 8 measures are not available this quarter.



Improved performance

- 38% (10 out of 26*) improved over the short term (since last quarter)
 - 42% (11 out of 26*) improved long term (average of previous 4 quarters)
- * where data available

Measures in target (green)

Code	Status	Measure	Short Trend	Long Trend
PH13	Green	Rate per 100,000 of self-reported 4 week smoking quitters aged 16 or over (Q2 2021/22)	IMP	IMP
PH23	Green	Dementia friendly settings	IMP	IMP
CSC0004	Green	Number of LAC per 10,000 children	IMP	IMP
CSC0006	Green	Number of CP per 10,000 children	DET	DET
ILAC1	Green	Average Caseloads in Assessment teams	DET	DET
ILAC2	Green	Average Caseloads in Post Assessment teams	DET	DET
ILAC5	Green	% of children with long-term fostering as a plan, where the child, carer and service have agreed for the placement to last until the child is ready to leave care.	IMP	IMP
ILAC6	Green	Rate of open CIN cases per 10,000	DET	IMP
N23	Green	% children social work substantive posts not filled by permanent social workers	IMP	DET
PH16	Green	Smoking at time of delivery (Q2 2021/22)	IMP	IMP
ASCOF 1C(2i)	Green	Percentage of clients receiving a direct payment for their social care service	IMP	IMP
ASCOF 1G (n)	Green	Proportion of adults with a primary support reason of learning disability support who live in their own home or with their family	IMP	IMP
ASCOF 2A(1)	Green	Permanent admissions to care homes per 100,000 pop – 18-64	IMP	IMP
ASCOF 2A(2)	Green	Permanent admissions to care homes, per 100,000 pop – 65+	IMP	IMP
CA13	Green	The percentage of children permanently excluded from school (upheld only)	STATIC	DET
CASEIKS4 Ofsted	Green	The percentage of secondary sector schools in Medway judged to be good or better	STATIC	STATIC
CASEISPEC Ofsted	Green	The percentage of special schools in Medway judged to be good or better	STATIC	STATIC
OfstedPrim Mnt	Green	The percentage of Maintained primary schools in Medway judged to be good or better	STATIC	STATIC

Code	Status	Measure	Short Trend	Long Trend
SE2 OEPr	Green	The percentage of primary sector schools in Medway judged to be good or better	STATIC	DET

Measures slightly below target (amber)

Code	Status	Measure	Short Trend	Long Trend
A1	Amber	The average number of days (over the last 36 months) between a child entering care and moving in with adoptive family	STATIC	IMP
ASCGBT001	Amber	% of Long-term packages that are placements	DET	DET

Measures significantly below target (red)

Code	Status	Measure	Short Trend	Long Trend
PH17	Red	Breastfeeding initiation	DET	DET
ILAC3	Red	Completed initial child and family assessments which started as S47, where the child was visited within 1 working day.	DET	DET
ILAC4	Red	Completed initial child and family assessments which started as S17, where the child was visited within 5 working days.	DET	DET
ILAC7	Red	The percentage of CSC Audits graded good or outstanding	DET	STATIC
EDU3(b)	Red	The percentage of children who were persistently absent from school	STATIC	DET

Measures not available this quarter

Code	Status	Measure	Short Trend	Long Trend
PH14	NA	Excess weight in 4–5-year-olds (2020/21 annual)	NA	NA
PH15	NA	Excess weight in 10–11-year-olds (2020/21 annual)	NA	NA
PH8	NA	Percentage of children and young people achieving a lifestyle improvement as a result of completing a young people weight management service	NA	NA
CASEIEYFS Gap	NA	Percentage achievement gap at Early Years Foundation Stage Profile between the lowest attaining 20 % of children and the mean	NA	NA

		(2019/20 academic year)		
ASCOF 2Cii	NA	Delayed transfers of care from hospital and those which are attributable to adult social care, per 100,000 population	NA	NA
SE KS2	NA	The percentage of children who achieve the required standard or above in Reading, Writing and Mathematics at KS2 (2020/21 annual)	NA	NA
SE KS2Mnt	NA	The percentage of children who achieve the required standard or above in Reading, Writing and Mathematics at KS2 in Maintained Schools Only (2020/21 annual)	NA	NA
SEKS4A8	NA	Average attainment 8 score (2020/21 annual)	NA	NA

Strategic Risks

The quarter 3 21/22 strategic risk register is attached at Appendix 5. The register shows all strategic risks together with mitigation in place to minimise impact and likelihood. The risks pertaining solely to this council priority are shown below (full details in Appendix 5).

Reference	Risk Register Page (app 5)	Risk	Owner	Current residual risk score	L-likelihood I-impact
SR09A	15	Meeting the needs of Older People and Working Age Adults	Director of People – Children and Adults Services	BII	L – high I – major
SR09B	22	Failure to meet the needs of children and young people	Director of People – Children and Adults Services	BII	L – high I – major
SR26	32	Non-delivery of Children's Services Improvement	Director of People – Children and Adults Services	CII	L – significant I – major

Reference	Risk Register Page (app 5)	Risk	Owner	Current residual risk score	L-likelihood I-impact
SR39	56	Financial Pressures on SEN Budgets	Assistant Director Education and SEND	BII	L – high I – major
SR52	87	A new severe pandemic, e.g. flu, Covid-xx, MERS or other, more serious than Covid-19	Director of Public Health	BI	L – high I – catastrophic

The following risks pertain to all priorities:

Reference	Risk Register Page (app 5)	Risk	Owner	Current residual risk score	L-likelihood I-impact
SR03B	4	Finances	Chief Finance Officer	AI	L – very high I – catastrophic
SR46	9	Medway's Economic Recovery from Covid19	Assistant Director Regeneration	BII	L – high I – major
SR32	36	Data and information	Chief Finance Officer, Director of People, Assistant Director Legal & Governance	CII	L – significant I – major
SR36	40	Alternative service delivery models	Assistant Director Regeneration, Chief	BIII	L – high I – moderate

Reference	Risk Register Page (app 5)	Risk	Owner	Current residual risk score	L-likelihood I-impact
			Finance Officer		
SR37	46	Cyber Security	Chief Finance Officer	GA	L – significant I – very high I – catastrophic
SR02	58	Business continuity and emergency planning	Director of Place and Deputy Chief Executive, Chief Finance Officer	DII	L – low I – major
SR49	77	Income Reduction due to Covid19	Chief Finance Officer	BH CII	L – high I – significant I – major

Council Plan Outcome: Healthy and active communities

Programme: Improving everyone's health and reducing inequalities

Council Plan measures

PH13 Rate per 100,000 of self-reported 4 week smoking quitters aged 16 or over

Quarter	Target	Value	Status	Aim to	Short Trend	Long Trend
Q2 2021/22	136	182	Green	Maximise	IMP	IMP
Q1 2021/22	68	91	Green	Maximise	IMP	IMP

Comments

Data runs a quarter arrears. To the end of Q2 so far there have been 738 quit attempts and 401 quits, providing a 54% success rate. The formal Q2 data return was due to be completed in January. The core service has been offering a face-to-face service throughout the year. So far, telephone support is still the predominant offer, however face-to-face service is increasing. Quit attempts being supported

face-to-face are being carbon monoxide (CO) monitored as per the National Centre for Smoking Cessation and Training (NCSCT) guidance and currently 9% of all quits are CO verified. In addition to these options, residents are offered a 'Text to Quit' app. The pregnancy team have been offering remote options including digital online video conferencing and resumed face-to-face service during Q2.

General Practitioners (GPs) are still facing considerable pressure because of the pandemic and therefore service has not resumed across all sites. The project officer is supporting them to resume service where possible or refer into the core stop smoking service as an alternative. This has included supporting some surgeries to send text messages to patients who are identified as smokers on the Quality and Outcomes Framework (QOF) register.

Varenicline, which is a key pharmaceutical offer for stop smoking support, has been out of circulation for the majority of Q2. NCSCT guidance has been followed to ensure patients taking Varenicline were safely switched over to using Nicotine Replacement Therapy (NRT) to complete their quit. Many clients have had success with Varenicline in the past, and this situation has had an impact on some clients' confidence and readiness to quit. There is no information about when Varenicline will return and therefore all clients are being supported to choose an alternative option which will work for them. In addition to this, there have been other short term supply issues with NRT and Bupropion.

PH14 Excess weight in 4-5 year olds

Annual	Target	Value	Status	Aim to	Short Trend	Long Trend
2020/21	22.4%	NA 20/21 data available in Q4	NA	Minimise	NA	NA
2019/20	22.4%	25.5%	Red	Minimise	DET	DET

PH15 Excess weight in 10-11 year olds

Annual	Target	Value	Status	Aim to	Short Trend	Long Trend
2020/21	34%	NA 20/21 data available in Q4	NA	Minimise	NA	NA
2019/20	34%	36.9%	Red	Minimise	DET	DET

Comments

Rates of children classified as "overweight" and "obese" are monitored through the National Child Measurement Programme (NCMP) which is delivered through schools. Children's weight and height are measured in reception class (ages 4-5)

and again in year 6 (ages 10-11). For children in reception year, the rates of those with excess weight is 25.5% in Medway for 2019/20 (increasing from 23.9% from the previous year), which is above the England average of 23%.

Obesity is a complex problem with multiple causes and significant implications for health and beyond. To tackle the increasing issue of obesity in children and adults, national and local action is needed now. With no one single solution available, tackling such an ingrained problem requires a long-term, system-wide approach that makes obesity everybody's business. Medway Council's Public Health Team have developed a whole system approach to tackling obesity, based on Public Health England's recently published whole system obesity guidance. Medway Council provide a wide range of services to prevent and treat childhood obesity including:

- Comprehensive range of family and adult support services for tier 2 and tier 3 weight management, offering free support services for people at varying levels of excess weight.
- Healthy eating and cookery programmes for families and children.
- Regular promotion of national and local campaigns such as Sugar Smart, Change4Life and Beside You breastfeeding campaign.
- A planning guidance note that restricts hot food takeaways within 400m radius of schools.
- Providing a wide range of training to professionals and volunteers on subjects like healthy eating and obesity.
- Commissioning 0-19 provider to include healthy weight as a priority in health visiting and school nursing contracts.
- Coordination of an annual healthy weight summit that encourages as many public, private, voluntary, and academic sector partners to promote this agenda and take their own actions forwards.
- A Better Medway workplace programme, that supports workplaces to create healthy workforces.
- Free swimming for under 16's.
- Multiple sport and physical activity opportunities within schools and in community settings.

Wider system action is integral if we are to realise the national aspiration of halving childhood obesity by 2030. The Medway Healthy Weight Network and its sub-groups are one vehicle where this action can be taken forward. The network has stated the following priorities for 2021/22:

- Increasing the volume of peer supporters to improve breastfeeding rates.
- Enhanced activity for the infant feeding communication campaigns.
- Achieving a higher level of Baby Friendly Accreditation in acute and community settings.
- Cooking on a budget classes.
- Developing and marketing culturally sensitive eatwell guidance.
- Improving the whole school food approach.
- Enhancing the newly established Physical Activity Alliance and the partnership working between the group.
- Understanding and addressing the barriers of why specific groups have the lowest physical activity levels.

PH17 Breastfeeding initiation

Quarter	Target	Value	Status	Aim to	Short Trend	Long Trend
Q3 2021/22	70%	64.42%	Red	Maximise	DET	DET
Q2 2021/22	70%	72.26%	Green	Maximise	IMP	IMP

Comments

Breastfeeding initiation data is routinely collected by midwives at Medway Foundation Trust Hospital on the first day of an infant's life. The last quarter's data is below target, in part due to the staffing issues faced by all National Health Service (NHS) organisations during the Omicron wave of the pandemic and other measures put in place to protect patients, staff and visitors.

PH23 Dementia friendly settings

Quarter	Target	Value	Status	Aim to	Short Trend	Long Trend
Q3 2021/22	4	5	Green	Maximise	IMP	IMP
Q2 2021/22	2	3	Green	Maximise	NA	IMP

Comments

Over this period, a further two locations have completed the Non-Visible Disabilities (NVDi) checklist which incorporates standards which satisfy "working towards dementia friendly" status. A new qualification focused on promoting inclusivity for people who live with dementia or other non-visible disabilities was also launched by Mid Kent College in support of this action's initiatives.

PH8 Percentage of children and young people achieving a lifestyle improvement as a result of completing a young people weight management service

Quarter	Target	Value	Status	Aim to	Short Trend	Long Trend
Q3 2021/22	75.0%	NA	NA	Maximise	NA	NA
Q2 2021/22	75.0%	NA	NA	Maximise	NA	NA

Comments

Please note, performance has been directly impacted by national regulations that required us not to undertake any work in these areas. The status for this indicator has been temporarily removed due to the impact of Covid19.

Plans for our programmes are already in place to recommence in the coming weeks. There is evidence of recovery as referrals into our Children's Services are now increasing following recent National Child Measurement Programme (NCMP) measurements being undertaken by the School Health team. Current courses planned have good numbers of children booked on. The Tri courses are 12 weeks long, and further courses are being planned to accommodate the increase in referrals following a review of processes for referral.

Supporting Healthy Weight

The National Child Measurement Programme (NCMP) is a key element of the government's approach to tackling child obesity. The programme annually measures the height and weight of children in Reception (aged 4–5 years) and Year 6 (aged 10–11 years) in mainstream state-maintained schools in England. Following the disruption to the 2019/20 collection due to the Covid19 pandemic, NCMP did not officially open as usual at the start of the 2020/21 school year in September 2020. Therefore, local authorities were not required to start collecting child measurement data at this stage. In Medway, however, the Public Health team and Medway Community Healthcare (MCH) 0-19 service worked collaboratively to weigh and measure over 75% of the eligible age groups. This was only achieved by 18 other local authorities in the country.

The national data that has been published shows a large rise in obesity rates for children in the last year. In reception, obesity prevalence has increased from 9.9% in 2019/20 to 14.4% in 2020/21. In Year 6, obesity prevalence has increased from 21.0% in 2019/20 to 25.5% in 2020/21. Boys have a higher obesity prevalence than girls for both age groups. In Reception, 14.8% of boys were obese compared to 14.1% of girls. In Year 6, 29.2% of boys were obese compared to 21.7% of girls. In line with recent years, children living in the most deprived areas were more than twice as likely to be obese than those living in the least deprived areas. The local level data is expected to be published on 20 January 2022, so we can see how Medway compares to this national trend.

The NCMP also tracks the levels of underweight children in Reception and Year 6. No local data is available for the last 12 months, however national data shows a similar trend to previous years, including:

- Underweight prevalence in Reception children is twice as high for boys (1.2%) compared to girls (0.6%).
- For Year 6 children, this pattern reverses with more girls being underweight (1.4%) compared to boys (1.1%).
- The South East underweight figure is below the England average. London has the highest underweight prevalence rates for both age groups.
- The ethnic groups with above average underweight percentages in Reception are Mixed (White and Black Caribbean, White and Black African, White and Asian, Any other mixed background) and Asian (Indian, Pakistani, Bangladeshi, Any other Asian background).

Council Plan Outcome: Resilient families

Programme: Together We Can - Children's Services

Council Plan measures

A1 The average number of days (over the last 36 months) between a child entering care and moving in with adoptive family

Quarter	Target	Value	Status	Aim to	Short Trend	Long Trend
Q3 2021/22	450	461	Amber	Minimise	STATIC	IMP
Q2 2021/22	450	461	Amber	Minimise	IMP	IMP

Comments

Data is to November 2021. The 3-year average has remained static at 461 days.

Benchmarking

The latest national benchmark is 486 days and the statistical neighbour outturn is 440. The South East benchmark is 529.

Actions

Medway has now joined with Kent and Bexley into a Regional Adoption Agency (RAA) so the service will work through the RAA to identify adoptive families in a timely way. Panels are held weekly which ensures that children are matched without delay where suitable adopters can be found within the resources of the Adoption Partnership (AP). As this is the 3-year figure this involves children adopted both before and after AP went live although obviously not so many since.

Medway's numbers of children being adopted are small so any lengthy period of family finding will adversely affect the average even if for only one child.

In this cohort there were five sibling groups of two, all of whom were older and with some complex needs and traumatic histories and they all took over a year to place. In addition, Covid19 has affected length of proceedings for many recent children placed and adopted.

The current rolling 12-month figure is 409 days (the A1 figure is 36 months) is longer than previously due to delays in court but also includes three of the sibling groups identified above plus the single child.

CSC0004 Number of LAC per 10,000 children

Quarter	Target	Value	Status	Aim to	Short Trend	Long Trend
Q3 2021/22	70.0	67.1	Green	Minimise	IMP	IMP

Quarter	Target	Value	Status	Aim to	Short Trend	Long Trend
Q2 2021/22	70.0	70.5	Amber	Minimise	DET	DET

Comments

Currently there are 440 children in care (CiC), which is a rate of 67.1 per 10,000. There has been a drop of 9 children on the Q2 outturn, and compared to December 2020 there are currently 7 fewer CiC.

During the month of November 2021, we had five admissions to care; all were subject to an Interim Care Order (ICO). Two of the children entering care were siblings. Of those leaving the care system, two were adopted and one was subject to a Special Guardianship Order (SGO).

Benchmarking

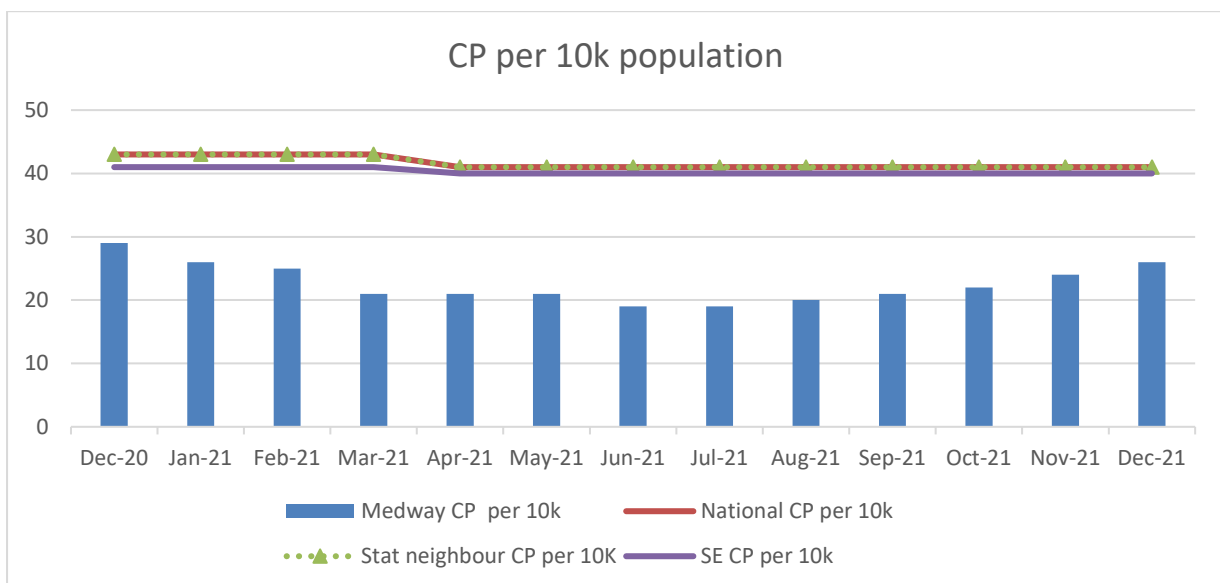
Nationally there are 67 Looked After Children (LAC) per 10,000 population, a rise on the previous national benchmark of 65. Our statistical neighbours have 72 CiC per 10,000 and the South East has 53.

CSC0006 Number of CP per 10,000 children

Quarter	Target	Value	Status	Aim to	Short Trend	Long Trend
Q3 2021/22	65.3	26.0	Green	Minimise	DET	DET
Q2 2021/22	65.3	21.0	Green	Minimise	DET	IMP

Comments

Currently there are 170 children on a child protection plan. This equates to a rate of 26 per 10,000, a small increase, relating to 39 children, on the Q2 return.



Benchmarking

Medway is below the latest National and Statistical neighbour rate, of 41 per 10,000 and South East rate of 40. Comparator rates have decreased over the last year.

Actions

The focus in the Improvement Plan on improving quality of practice, introducing additional scrutiny of child in need plans and working proactively with adolescents, has led to this reduction, and brought Medway below national and statistical neighbours.

We are consistently testing thresholds to ensure risk is appropriately identified and responded to. We want to feel confident that the right children are subject to the right plan and we will continue to monitor our rates per 10,000 children subject to a child protection plan.

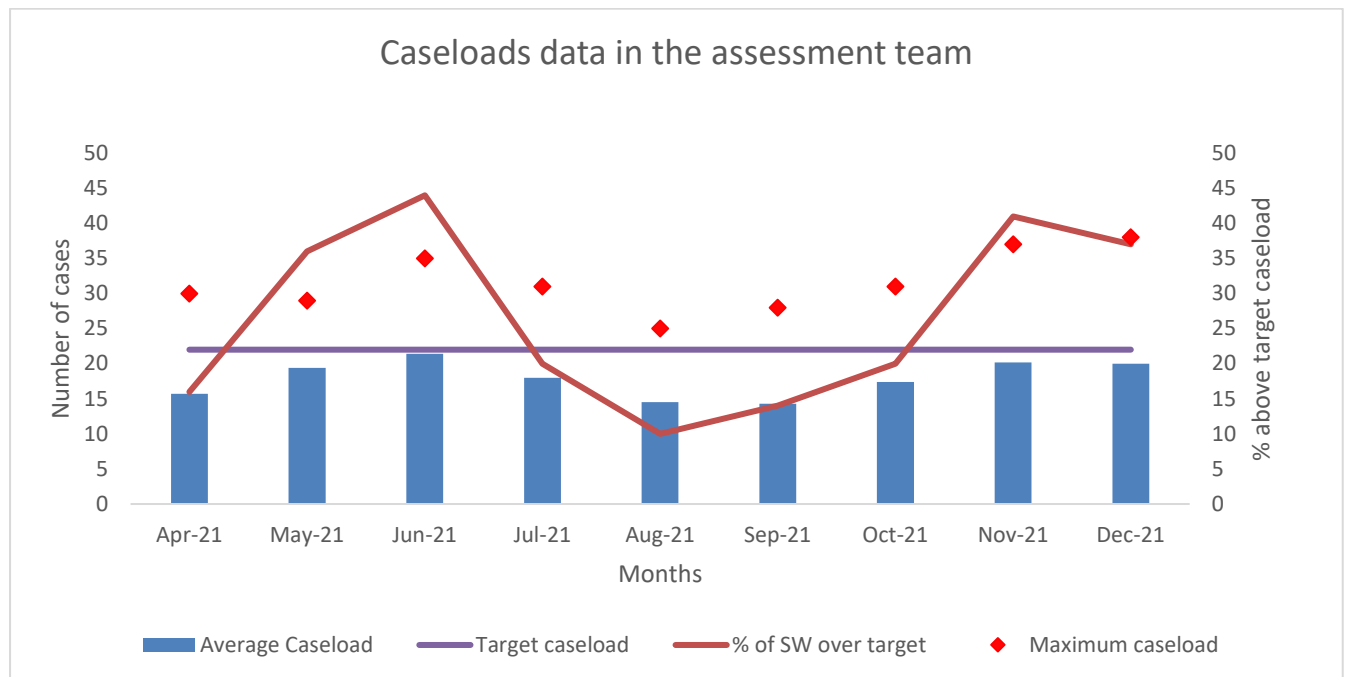
ILAC1 Average Caseloads in Assessment teams

Quarter	Target	Value	Status	Aim to	Short Trend	Long Trend
Q3 2021/22	22	20	Green	Minimise	DET	DET
Q2 2021/22	22	14.3	Green	Minimise	IMP	IMP

Comments

The snapshot shows the average caseload in the assessment teams is 20; this is an increase from 14.3 in September (Q2 21/22). Currently 37% of social workers are over the target caseload of 22, with the highest caseload at 38. This is a marked deterioration on the Q2 position.

Benchmarking



Actions

Caseloads in Assessment have increased considerably compared with previous quarter. The increase is attributable to an increase in referrals, a reduction in the throughput of work owing to the fact that we have not been able to recruit a Team Manager for one of the assessment teams since September 2021 and staff absences (some short term due to Covid19 and others longer due to chronic conditions). We have recruited a permanent team manager to cover the vacancy however they won't be starting until the end of February 2022. The recruitment of a locum manager is ongoing until the permanent candidate can commence.

The team managers, Group Manager and Head of Service have taken on the supervision of the social workers in the team where we have been unable to recruit to the team manager post.

To respond to the increased pressure and the high caseloads we have received permission to recruit an additional team of five social workers and a team manager for a period of three months. This will ensure that the caseloads stabilise and we can continue to focus on practice improvements alongside managing recruitment and the throughput of work.

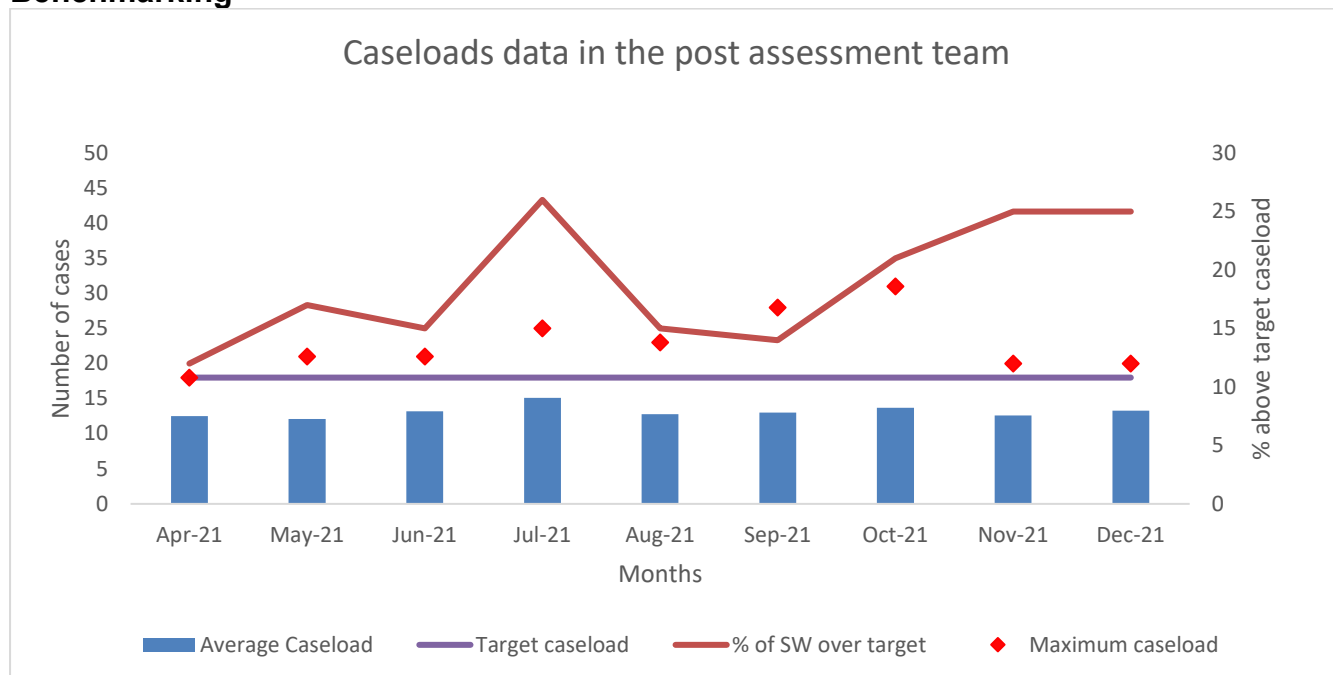
ILAC2 Average Caseloads in Post Assessment teams

Quarter	Target	Value	Status	Aim to	Short Trend	Long Trend
Q3 2021/22	18	13.3	Green	Minimise	DET	DET
Q2 2021/22	18	13	Green	Minimise	IMP	DET

Comments

The snapshot shows post assessment social work teams (Areas CS Teams 1-8) have an average caseload of 13.3; this is a small rise on the Q2 outturn. This remains below target. The highest caseload is 20 (better than Q2) and 25% of social workers, in these teams, have caseloads over the target (worse than Q2).

Benchmarking



Actions

The caseloads in Children Social Work teams are on average below target. There are currently six unfilled posts in the Children Social Work teams, meaning that in effect, we are operating with only seven Children Social Work teams out of eight. The vacancies are due to permanent workers leaving to become locum or pursuing career progression opportunities. We have been unable to recruit to the vacancies due to quality and the reduced number of locum and permanent candidates that have shown an interest in these positions. We are continuing to work with agencies to attract suitably experienced practitioners to these posts. Caseloads in the post-assessment teams have reduced as an average during November to 12.6 from the previous month's 13.7 per Social Worker. This is a result of the Children in Care Service being fully staffed, the conclusion of cases in proceedings and a slight reduction in cases coming into the service.

ILAC3 Completed initial child and family assessments which started as S47, where the child was visited within 1 working day.

Quarter	Target	Value	Status	Aim to	Short Trend	Long Trend
Q3 2021/22	90%	72%	Red	Maximise	DET	DET

Quarter	Target	Value	Status	Aim to	Short Trend	Long Trend
Q2 2021/22	90%	85%	Red	Maximise	STATIC	DET

Comments

The end of quarter snapshot shows that 72% of assessments were visited in one day. This is a drop on previous performance. The trend over the quarter was downward (77% in October and 74% in November.)

Actions

The exceptions to completing S47 visits in timescales refer to a small number of families and the visits were late by one or two days. The delays were due to difficulties locating families and workload challenges related to seasonal variations and Covid19.

We continue to review this indicator regularly at Performance Clinics. Where a delay is identified, each case is scrutinised and managers record oversight on the child files to account for the delays and to ensure appropriate safety measures are in place.

ILAC4 Completed initial child and family assessments which started as S17, where the child was visited within 5 working days.

Quarter	Target	Value	Status	Aim to	Short Trend	Long Trend
Q3 2021/22	85%	66%	Red	Maximise	DET	DET
Q2 2021/22	85%	86%	Green	Maximise	IMP	IMP

Comments

The end of quarter snapshot shows 66% of S17 assessments were visited in five days. This is a 20 percentage point (pp) drop on the Q2 outturn. Over the quarter performance fluctuated, having been at 79% in October and 58% in November.

Actions

The exceptions for S17 visits are due to difficulties locating some families or engaging them in the assessment process. We continue to review this indicator regularly at Performance Clinics. Managers will maintain overview and scrutiny of all delays and impact on children.

ILAC5 % of children with long-term fostering as a plan, where the child, carer and service have agreed for the placement to last until the child is ready to leave care.

Quarter	Target	Value	Status	Aim to	Short Trend	Long Trend
Q3 2021/22	60%	65%	Green	Maximise	IMP	IMP
Q2 2021/22	60%	63%	Green	Maximise	IMP	IMP

Target has since been increased to 70% to enable ongoing improvement

Comments

There has been a small rise in the proportion of children for whom permanency has been agreed to 65%. Year-on-year the proportion of children with a permanency plan has risen by 4 percentage points. Achieving permanency for children is a key issue in the Improvement Plan and mechanisms have been put in place to review permanency plans and to strengthen the work of the fostering panel to continue to improve on this indicator.

Actions

Actions include to:

- Fully implement the Permanency Policy and convene regular permanency panels.
- Implement the Fostering Strategy to increase supply, choice, and support for carers.
- Work with Independent Reviewing Officers (IROs) to ensure all children and young people have a permanence plan, including looking to those children/young people who can safely return home, with effective support in place.
- Group Managers for Adoption/Fostering and Children in Care jointly responsible for the tracking of permanency.

ILAC6 Rate of open CIN cases per 10,000

Quarter	Target	Value	Status	Aim to	Short Trend	Long Trend
Q3 2021/22	382	278	Green	Minimise	DET	IMP
Q2 2021/22	382	273	Green	Minimise	IMP	IMP

Comments

The rate of Children In Need (CIN) per 10,000 has risen over the quarter, with 79 more children counted as CIN than at the end of September (Q2 21/22). There are 3% fewer children counted as CIN than in December 2020. Medway remains below all of our comparator groups.

A Child In Need is defined, under the Children Act 1989 “as a child who is unlikely to reach or maintain a satisfactory level of health or development, or their health or development will be significantly impaired, without the provision of services, or the child is disabled”. This includes all Looked After Children and all children on a Child Protection (CP) plan as well as other children supported by Social Services who are not looked after on a CP plan.

Benchmarking

Nationally there are 321 CIN cases per 10,000 population. This is slightly higher at 331 for our statistical neighbour group and 302 in the South East.

Actions

Ensuring children can access the right service at the right time is part of the vision for the service and we have recently reviewed, in consultation with partners, the threshold for statutory service provision.

We are continuing to review through audit and dip sampling the decisions made by team managers upon completion of Child and Family Assessments to make sure that children and families are offered support when this is needed. The latest dip sampling activity completed in December 2021 suggests that some children’s cases were closed when they should have been offered additional support. The findings from the dip sample will be discussed with team managers in the Assessment team and with group managers to support better application of threshold.

ILAC7 The percentage of CSC Audits graded good or outstanding

Quarter	Target	Value	Status	Aim to	Short Trend	Long Trend
Q3 2021/22	80%	7%	Red	Maximise	DET	STATIC
Q2 2021/22	80%	14%	Red	Maximise	IMP	IMP

Comments

There were 30 moderated audits for September, October, and November. 7% (2) were graded ‘Good’, 60% (18) were ‘Inadequate’ and 33% (10) were ‘Requires Improvement’. There has been some movement in the rate of inadequate and requires improvement grades compared to Q2, when 38% were inadequate and 48% required improvement. September and October’s Reflection and Learning tools did not see any good audits with still a significant number of inadequate audits. However, November’s audits demonstrate more of an even mix with good audits. This month has shown some improvement in our practice, suggesting that the child focused practice has started to have some impact.

Actions

Our aim is to achieve a service where good practice is embedded, therefore the aim of achieving 80% of audits graded good or outstanding is the long-term service ambition. The service is currently in intervention, and it would be expected that at this point in the journey that a high proportion of work would not meet expected

standards until practice improves. Dependent on the area of practice that is subject to review, we would expect that performance against the target will fluctuate. The service will continue to strengthen practice through the child focused practice programme and measure impact on a regular basis through quality assurance and audit oversight.

N23 The percentage of children social care substantive posts not filled by permanent social workers

Quarter	Target	Value	Status	Aim to	Short Trend	Long Trend
Q3 2021/22	25%	20%	Green	Minimise	IMP	DET
Q2 2021/22	25%	22%	Green	Minimise	DET	DET

Comments

Currently there are 50 social care posts not filled by permanent social workers. Of these 5.5 are managerial posts and 44.5 are social work posts.

Benchmarking

Medway has a higher vacancy rate than our statistical neighbours (17%) and the National rate (16%).

Programme: The best start in life

Council Plan measures

CASEIEYFS Gap Percentage achievement gap at Early Years Foundation Stage Profile between the lowest attaining 20 % of children and the mean

Annual	Target	Value	Status	Aim to	Short Trend	Long Trend
2019/20 Academic year	30%	NA 19/20 academic year data not available due to pandemic.	NA	Minimise	NA	NA
2018/19 Academic year	30%	28.7%	Green	Minimise	IMP	IMP

Comments

Due to the pandemic, there is no data for this measure for the academic year 19/20.

PH16 Smoking at time of delivery (SATOD)

Quarter	Target	Value	Status	Aim to	Short Trend	Long Trend
Q2 2021/22	16%	11.16%	Green	Minimise	IMP	IMP
Q1 2021/22	16%	14.36%	Green	Minimise	DET	IMP

Comments

Data runs a quarter in arrears. As with previous submissions, data reported represents Smoking at time of delivery (SATOD) prevalence for the whole of Kent & Medway in line with the Clinical Commissioning Group (CCG) footprint. Work continues in identifying a process to collect quarterly data for the Medway footprint only.

The Medway Stop Smoking Service has maintained effective service delivery throughout the Covid19 pandemic. In line with key partners, face-to-face support and associated carbon monoxide screening has returned as a first line offer for all birthing people, partners and significant others undertaking a quit attempt with the service. Telephone, text and digital support is also available, enhancing accessibility and aiming to reduce health inequalities. Despite extreme pressures in the acute setting, particularly for maternity colleagues, we have received a total of 177 referrals this quarter - a 32.1% increase on the same period last year (2020/21).

Healthy Child Programme

The full dataset for Q3 is not available at the time of writing, however the data for October 2021 suggests that the performance of the Health Visiting team remains in line with Council Plan targets.

Health Visiting teams nationally are experiencing challenges with staffing vacancies and recruitment. To date, this has not been an issue for the Medway team, but we are working with Medway Community Healthcare (MCH) to monitor the situation.

The School Nursing service has commenced delivery of the National Child Measurement Programme (NCMP) for the 2021/22 academic year following major disruption in 2020/21 due to the Covid19 pandemic and subsequent school closures. In total, 157 families have been referred to our healthy weight programmes during Q3.

The Medway Children and Young People's Consultation and Engagement Framework and Toolkit has been adopted for use by Medway's Social Care team. This will be disseminated to partners via the Medway Safeguarding Children Partnership (MSCP) to support their completion of the Section 11 audits which are due to restart in February 2022. This will support partners to achieve the best practice recommendation of consulting children and young people in the services they use and the services that make decisions about their lives.

Council Plan Outcome: Older and disabled people living independently in their homes

Programme: Improve support for vulnerable adults by working with partners and communities

Council Plan measures

ASCGBT001 % of Long term packages that are placements

Quarter	Target	Value	Status	Aim to	Short Trend	Long Trend
Q3 2021/22	30%	30.1%	Amber	Minimise	DET	DET
Q2 2021/22	30%	29.7%	Green	Minimise	DET	DET

Comments

The number of clients receiving a long-term service has dropped by 2.1% over the quarter. The number in residential or nursing accommodation has dropped more slowly, by 0.7%. This has caused the ratio to rise, above target. Currently there are 816 clients in residential and nursing homes and a total of 2,708 clients receiving long term care.

The current situation is likely to be impacted by the fact that many individuals and/or carers made decisions during Covid19 to remain at home rather than move into residential care. Furthermore, for some time there has been, and there continues to be, very limited placement availability in residential and nursing homes.

Benchmarking

National data for 2019/20 for long term clients in placements is 30.1%; no change from the 2018-19 figure.

Whilst the long-term expectation is that ongoing demographic changes, in particular those relating to an ageing population, will impact on the number of placements needed, numbers of clients in placements are currently lower than pre-Covid19 levels.

ASCOF 1C(2i) Percentage of clients receiving a direct payment for their social care service

Quarter	Target	Value	Status	Aim to	Short Trend	Long Trend
Q3 2021/22	30%	30.3%	Green	Maximise	IMP	IMP
Q2 2021/22	30%	28.5%	Red	Maximise	DET	DET

Comments

There has been a rise in the proportion of clients receiving long term services (denominator) as an ongoing direct payment (numerator). 30.3% represents 574 individuals, which has pushed the measure over target. Currently 99.7% of clients receive self-directed support.

Benchmarking

Nationally 26.6%, and for the South East 27.3%, of clients with an ongoing long term service receive a direct payment. Our statistical neighbours' performance is 29.7%. All three comparators have seen a decline in performance compared to their 19/20 results.

Actions

The Self-Directed Support (SDS) team work with Locality teams to ensure that they are aware of the benefits of a Direct Payment and promote referrals to the SDS team.

The team have streamlined the children's short breaks process to ensure quick turnaround of all short breaks' referrals. The team can now focus resources on setting up Adult Direct Payment (DP) referrals.

SDS are working with performance colleagues to ensure that DP data is accurate and recording is up-to-date.

The team are focusing on securing additional carer capacity by nurturing the peer-to-peer network. We are seeing a return on this investment of SDS time and resources via the securing of approximately two carers per week to the pool of Personal Assistants (PAs). The team have provided intensive support to the securing of alternative packages of care during a market shortage and have worked with PAs to develop microenterprises that can provide flexible and bespoke support.

ASCOF 1G (n) Proportion of adults with a primary support reason of learning disability support who live in their own home or with their family

Quarter	Target	Value	Status	Aim to	Short Trend	Long Trend
Q3 2021/22	70%	72%	Green	Maximise	IMP	IMP
Q2 2021/22	70%	70%	Green	Maximise	DET	STATIC

Comments

In December 72% of adults with a learning disability lived in their own home or with their family. This has increased from 70% in Q2. In September 2020 this measure was at 66%. As such in the last year there has been a 9% improvement. There will always be a requirement for some clients to be accommodated outside of the home environment.

Benchmarking

The current national outturn is 78% and our statistical neighbours' is 82% (2020/21 data).

ASCOF 2A(1) Permanent admissions to care homes per 100,000 pop – 18-64

Quarter	Target	Value	Status	Aim to	Short Trend	Long Trend
Q3 2021/22	3.5	0	Green	Minimise	IMP	IMP
Q2 2021/22	3.5	8.3	Red	Minimise	NA	DET

Comments

Please note the target is apportioned per quarter.

There have been no admissions recorded for this age group this quarter, however this may change as packages of care are updated.

For the full year there have been 19 admissions, a rate of 11.3. This is higher than the cumulative three-month target of 10.5 (3.5 x 3).

Benchmarking

Nationally the benchmark is 13.3 per 100,000 for the full year, just under 3.4 per 100,000 for each quarter and for our statistical neighbours the figure is 15.6 (3.9 per 100,000).

Actions

While numbers of admissions to permanent care are low, the service has seen an increase in the number of individuals with higher levels of need. We continue to work with our commissioning colleagues to identify and commission further appropriate alternative forms of accommodation with a view to ensuring that the numbers requiring care home admissions is as low as possible.

ASCOF 2A(2) Permanent admissions to care homes, per 100,000 pop – 65+

Quarter	Target	Value	Status	Aim to	Short Trend	Long Trend
Q3 2021/22	154.5	103.8	Green	Minimise	IMP	IMP
Q2 2021/22	154.5	172.3	Red	Minimise	DET	DET

Comments

Please note the target is apportioned per quarter.

47 admissions have been recorded in Q3, so far. This equates to 103.8 admissions per 100,000 population, which is under target. However, we can expect this to rise as packages are added retrospectively.

Currently, this year, there have been 198 65+ admissions which equates to 437.3 per 100k population. This is below target. The target rate allows for 280 admissions per year so currently the number of admissions is positive.

Benchmarking

The National rate of admissions is 498.2. This equates to 124.5 per quarter. Our statistical neighbours' 2019/20 outturn of 620.8 (155.2 per quarter).

Actions

Whilst a low number of admissions to care homes is a positive, this may in part be due to the impact of Covid19 as many families chose to continue to care for their loved ones at home to avoid admission to care. In addition, challenges in the care sector have led to a longer period of time waiting for care in a residential setting.

There is currently a backlog in the recording of permanent placements which is impacting figures. The service is currently recruiting an administrator to support the Brokerage team to process all recording of placements in a timely way.

ASCOF 2Cii Delayed transfers of care from hospital and those which are attributable to adult social care, per 100,000 population

Quarter	Target	Value	Status	Aim to	Short Trend	Long Trend
Q3 2021/22	4.1	NA due to pandemic	NA	Minimise	NA	NA
Q2 2021/22	4.1	NA	NA	Minimise	NA	NA

Comments

Data collection has been suspended by central government.

Social Isolation

In Q3, four social isolation training modules were delivered with 31 delegates attending in total.

Three Connect 5 Sessions were delivered with 27 delegates attending in total. A mapping of activities for young people was undertaken and seven organisations were identified. The organisations were contacted by the Social Isolation Project Officer with the aim to sign them up to the Simply Connect directory of services and increase the number of activities available to young people across Medway.

Overall, there were 81 referrals to the Social Prescribing service. The percentage of clients who reported an increase in wellbeing was 68%. The social prescribing

training module was delivered in Q3 with 103 delegates attending. The second round of the 'Better Connected' Community Chest funding was launched in October 2021 and six organisations were awarded a share of £16,395, resulting in 1,010 social prescribing referral places across Medway.

Council Plan Outcome: All children achieving their potential in schools

Programme: Raising aspiration and ambition

Council Plan measures

CA13 The percentage of children permanently excluded from school (upheld only)

Quarter	Target	Value	Status	Aim to	Short Trend	Long Trend
Q3 2021/22	0.02%	0.01%	Green	Minimise	STATIC	DET
Q2 2021/22	0.01%	0.01%	Green	Minimise	STATIC	DET

Comments

Please note, the annual target of 0.06% is apportioned across each quarter. There have been three upheld exclusions this quarter; all of these were from secondary schools.

Of the 20 processes started, nine have been retracted and eight are awaiting an outcome.

Benchmarking

Nationally the rate of permanent exclusions is 0.06% (2019-20).

Actions

The Inclusion team engaged with all pupils who were excluded and those known to the service for being at risk of exclusion.

Virtual meetings were offered to all schools, including face-to-face meetings, telephone and email to support. These meetings offered inclusion advice and guidance regarding learners whose behaviour could lead to an exclusion.

The School Support Group (SSG) continued to run virtually offering swift contact with a range of service leads from multi-agencies. The support group was accessed by both primary and secondary schools.

CASEIKS4 Ofsted Partnership measure: Percentage of all Secondary Schools judged good or better

Quarter	Target	Value	Status	Aim to	Short Trend	Long Trend
Q3 2021/22	85%	94.4%	Green	Maximise	STATIC	STATIC
Q2 2021/22	85%	94.4%	Green	Maximise	STATIC	STATIC

Comments

Of the 18 Secondary schools in Medway, four are classed as 'Outstanding', 13 are 'Good' and 1 is 'Inadequate'. This means that 17 of 18 are good or better. The inadequate judgment applies to the Waterfront University Technical College (UTC) from its time as Medway UTC. There have been no new inspections this quarter.

Benchmarking

Nationally this figure is 78% and the South East currently has 88% of schools graded 'Good' or better.

CASEISPEC Ofsted The percentage of special schools in Medway judged to be good or better

Quarter	Target	Value	Status	Aim to	Short Trend	Long Trend
Q3 2021/22	90%	100%	Green	Maximise	STATIC	STATIC
Q2 2021/22	90%	100%	Green	Maximise	STATIC	STATIC

Comments

There have been no changes to Ofsted ratings this quarter.

EDU3(b) The percentage of children who were persistently absent from school

Quarter	Target	Value	Status	Aim to	Short Trend	Long Trend
Q3 2021/22	11.4%	20.2%	Red	Minimise	STATIC	DET
Q2 2021/22	11.4%	20.2%	Red	Minimise	DET	DET

Comments

This data is for terms 1 to 4 of the 20-21 academic year. The primary rate is 16.7% and the secondary rate is 23.7%. The statistical release for the 19-20 academic year was cancelled due to Covid19.

Benchmarking

The latest National Persistent absence rates are 13%, with primary at 10% and secondary at 16%.

Actions

All schools whose persistent absence is above the national percentage have been contacted and offered support and guidance from the local authority in addressing their persistent absence (PA) – this is not dependent upon whether, or not, the school/academy purchase the Attendance and Advisory service. This information is shared with the Regional Schools Commissioner's team.

OfstedPrimMnt The percentage of Maintained primary schools in Medway judged to be good or better

Quarter	Target	Value	Status	Aim to	Short Trend	Long Trend
Q3 2021/22	93%	96%	Green	Maximise	STATIC	STATIC
Q2 2021/22	93%	96%	Green	Maximise	STATIC	STATIC

Comments

24 out of 25 Local Authority (LA) maintained primary schools are rated good or better, with four graded 'Outstanding' and one 'Requires Improvement'.

There have been no changes to Ofsted ratings this quarter.

SE KS2 The percentage of children who the required standard or above in Reading, Writing and Mathematics at KS2

Annual	Target	Value	Status	Aim to	Short Trend	Long Trend
2020/21	65.0%	NA 19/20 academic year data not available due to pandemic.	NA	Maximise	NA	NA
2019/20	64.0%	64.0%	Green	Maximise	IMP	IMP

Comments

Due to Covid19 there will be no Key Stage 2 (KS2) data for the 19-20 academic year.

Actions

In order to ensure that as many learners as possible secure their potential in reading, writing and mathematics, in the absence of national testing, School Effectiveness officers have:

- Continued to work with the Medway Education Leaders Association (MELA) to ensure that strategic priorities are shared and are used to drive targets for improvement in all schools.
- Launched a collaborative reading project with all schools focusing upon maximising the attainment of reading for all learners through a shared, system leadership approach.
- Provided training on key areas of assessment.

SE KS2Mnt The percentage of children who achieve the required standard or above in Reading, Writing and Mathematics at KS2 in Maintained Schools Only

Annual	Target	Value	Status	Aim to	Short Trend	Long Trend
2020/21	65%	NA 19/20 academic year data not available due to pandemic.	NA	Maximise	NA	NA

Comments

Due to Covid19 there will be no data for the 19-20 academic year.

Actions

School Effectiveness officers have:

- Continued to work with the Medway Education Leaders Association (MELA) to ensure that strategic priorities are shared and are used to drive targets for improvement in all schools.
- Launched a collaborative reading project with all schools focusing upon maximising the attainment of reading for all learners through a shared, system leadership approach.
- Provided training on key areas of assessment.
- Visited all maintained schools, and in partnership with headteachers, reviewed the risk rating of the schools.
- Met with senior leaders and probed the effectiveness of teaching and learning provision, particularly reading.

SE2 OEPr Partnership measure: Percentage of all Primary Schools judged good or better

Quarter	Target	Value	Status	Aim to	Short Trend	Long Trend
Q3 2021/22	87.5%	88.2%	Green	Maximise	STATIC	DET
Q2 2021/22	87.5%	88.2%	Green	Maximise	DET	DET

Comments

Currently 67 schools are 'Good' or better; eight are 'Outstanding' and 59 are 'Good' from a cohort of 76.

There are 51 academies. Of these 86.3% are 'Good' or better (four are 'Outstanding' and 40 are 'Good'), three require improvement and four are 'Inadequate'.

Benchmarking

Nationally, this figure is 88% and for the South East it is currently 91%.

SEKS4A8 Average attainment 8 score

Annual	Target	Value	Status	Aim to	Short Trend	Long Trend
2020/21	46.6	NA 19/20 academic year data not available due to pandemic.	NA	Maximise	NA	NA
2019/20	46.6	46.6	Green	Maximise	IMP	IMP

Comments

Due to Covid19 there will be no Key Stage 4 (KS4) data for the 19-20 academic year.