

Council Priority: PEOPLE

Supporting residents to realise their potential

Quarter 4 2022/23

Performance and risks by outcome

Key

Red	Significantly below target (>5%)	Amber	Slightly below target (<5%)	Green	Met or exceeded target	Goldilocks	Optimum performance is in a target range
DET	Deteriorating	STATIC	Static	IMP	Improving	NA	Not applicable/available

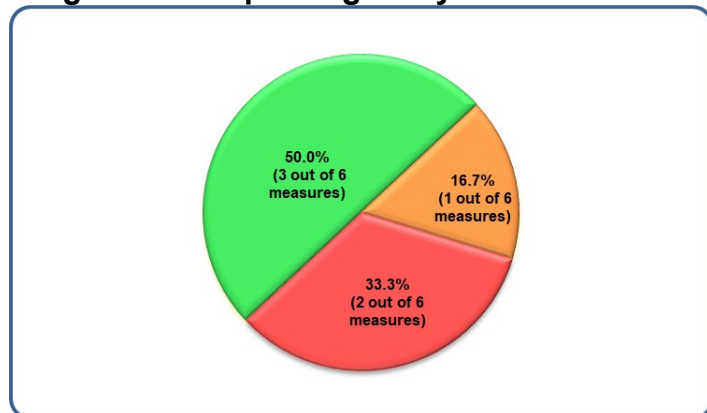
Outcome: Healthy and active communities

Strategic Risk Summary

There are no strategic risks for this outcome.

Performance Summary

Programme: Improving everyone's health and reducing inequalities



The total number of measures is 6
 3 measures met their target [PH14, PH23, PH8]
 1 measure was slightly below target [PH15]
 2 measures were significantly below target [PH13; PH17]
 The 1 amber measure is deteriorating long term [PH15]
 2 of the 2 red measures are deteriorating long term [PH13; PH17]

PI code	PI name	Aim to	Value	Target	Status	Short Trend	Long Trend
PH13	Rate per 100,000 of self-reported 4 week smoking quitters aged 16 or over (cumulative) (Q3 22/23)	Maximise	203	255	Red	DET	DET
PH14	Excess weight in 4-5 year olds (21/22 annual)	Minimise	23.7%	27.7%	Green	IMP	IMP
PH15	Excess weight in 10-11 year olds (21/22 annual)	Minimise	41.3%	40.9%	Amber	IMP	DET
PH17	Breastfeeding initiation	Maximise	63.8%	70%	Red	DET	DET
PH23	Dementia friendly settings (cumulative)	Maximise	6	6	Green	IMP	IMP
PH8	Percentage of children and young people achieving a lifestyle improvement as a result of completing a young people weight management service	Maximise	88.9%	75.0%	Green	IMP	IMP

Comments:**PH13:**

- Please note, data runs a quarter in arrears.
- *Note: The 2021 Office for National Statistics (ONS) mid-year population estimate could not be used as a denominator as planned due to delays in its release. This performance measure is currently using the 2020 ONS mid-year estimate.*
- To the end of Q3 2022/23 there have been 772 quit attempts providing a 58% success rate.
- Face-to-face delivery has resumed in accordance with the National Centre for Smoking Cessation and Training (NCSCT) guidance, however, the same guidance states that remote support remains a safe and effective alternative. Face-to-face service delivery is still increasingly popular and a total of 28% of all quits have been carbon monoxide (CO) verified.
- GP and pharmacy settings continue to see lower activity for smoking cessation. Engagement exercises with these locations were conducted to understand their capacity and to help identify barriers to delivering the service. Following this, a new service level agreement (SLA) was drafted for 2023-23 onwards. For some settings, there will be a greater focus on referring into the Medway Council Stop Smoking Service.

- The service is working with local acute and maternity settings as well as the local NHS to implement the NHS Long Term Plan (LTP). The NHS LTP is fundamental in making England a smoke-free society by supporting people in contact with NHS services to quit based on a proven model implemented in Canada and Manchester. By 2023/24, all people admitted to hospital who smoke will be offered NHS funded tobacco treatment services.

PH14 and PH15:

- The National Child Measurement Programme (NCMP) data was published in November 2022. This annual data collection has happened since 2007 and allows a detailed analysis of the trends in weight status for children locally and nationally. It also allows comparison of trends between areas and between population groups, for example looking at the differences between boys and girls, or difference in deprivation levels. The most recent data shows an overall reduction of overweight levels for both year groups that are measured, both locally and nationally in the last 12 months. The year R (4–5 year olds) Medway data saw a reduction from 31.5% in 2020/21 to 23.7% in 2021/22 in the overweight and obesity level compared to the 2021/22 England average of 22.3%.
- There was a smaller reduction for overweight and obesity prevalence in year 6 (10-11 year olds) compared to year R (4-5 year olds), with Medway at 41.3% for year 6 compared to the 2021/22 England average of 37.8%.
- Medway has developed a whole system approach to reducing obesity which is delivered by a wide range of partners within the Medway Healthy Weight Network. The network has three subgroups: Medway Infant Feeding Strategy Group, Medway Food Partnership and the Medway Physical Activity Alliance. The network has representation from a number of public, private, voluntary, and academic sector partners. These subgroups meet regularly to work collaboratively on food, activity, and infant feeding projects. The network produces a list of annual priorities at the start of each financial year that is reviewed by the Medway Health and Wellbeing Board.
- Specific priority actions this year include a whole school food programme, a large-scale healthy weight campaign, UNICEF Baby Friendly Accreditation for acute and community setting and many more. For a full list of healthy weight intervention, the <http://www.wholesystemobesity.uk/medway/> website provides a list of interventions and partners engaged in activity.

PH17:

- Breastfeeding initiation is recorded by midwifery services and typically represents an infant's first feed, recorded as either breastmilk or bottle milk (artificial). Breastfeeding rates are affected by a large number of societal factors. Support to increase breastfeeding is provided through a range of interventions due to the positive impact it has on a mother and infants health.
- The Medway Infant Feeding Strategy group is currently refreshing the strategy and identifying key actions to include in the subsequent action plan.

PH23:

- Chatham Dockyard is preparing to host a Dementia Friendly Community (DFC) event in June, and as part of their efforts to ensure accessibility for all, they will be undergoing a DFC assessment soon.
- Members of the Dementia Action Alliance (DAA) who have first-hand experience with dementia have also been working to improve accessibility ahead of planned renovations to the Wilkinson shop at the Pentagon shopping centre. Such improvements will focus on increased signage and increased training arrangements for staff.

PH8:

- This indicator shows the headline overview of the number of children and young people that have achieved a successful outcome from our range of services for Children with overweight and obesity. These services include FitFix, TriClub and TriMini with the different programmes targeting different age groups and these vary in length and numbers of contact.
- Numbers of children completing these programmes have improved and this is reflected in the improved percentage of those achieving a weight reduction or improving their physical activity and nutritional intake.
- New members of staff are now in place and a full-service review has been completed in Q4. Awaiting approval to put further actions into place to improve performance.

Project for this outcome:**Supporting Healthy Weight:**

- The annual Medway Healthy Weight summit took place in February 2023. Chaired by Cllr David Brake, the meeting provided an opportunity to reflect on the achievements of the 'whole system obesity plan' over the last 12 months and offered a space to set priorities for the forthcoming year. Medway's whole system approach builds on the last eight years of activity, which has largely been delivered through the Medway Healthy Weight Network. This is co-ordinated by Medway Council's Public Health team. The cyclical approach follows the steps suggested by Public Health England (PHE) in their 2019 'Whole systems approach to obesity' publication. The summit offered presentations from the Food for Life Project Manager highlighting some of the successes in the first term of the whole school food programme. The programme has seen 19 schools registered since the beginning of the school year, each one receiving support developing growing, cooking, and eating projects in their setting. Additionally, Inspire Academy achieved a bronze award, with Cllr Josie Iles presenting the certificate to the school in March.
- School engagement has also been high during the recent 'Medway Can' phase where local schools were challenged to log the most miles. Medway Can is a year-long healthy weight campaign that aims to motivate and inspire residents and organisations to move more and eat healthily, through a range of activities and interventions. More than 50 schools took part in a Medway Can physical activity challenge across February and March. The additional school miles that were logged have

helped Medway circumnavigate the globe three times. Medway Can moved to the healthy eating phase of the campaign in January. This coincided with a live cookery demonstration event at the Pentagon shopping centre. Other campaign elements included workplace health targeting, healthy eating messages via social media, and the final phase of the voluntary sector funding.

- The priorities for 2023/24 that were agreed at the Healthy Weight summit included a full refresh of the Medway Infant Feeding Strategy, achieving bronze status for Medway for the Sustainable Food Places award and increasing the reach and engagement level of the Physical Activity Alliance.

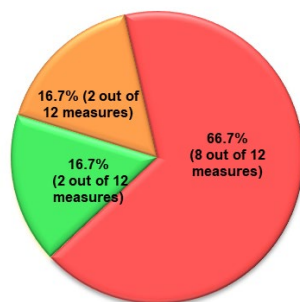
Outcome: Resilient families

Strategic Risk Summary

SR09B: Failure to meet the needs of children and young people

Inherent score	Current score	Movement	Likelihood	Impact
BII	BII	→	High	Major

Performance Summary Programme: Together We Can – Children’s Services Improvement Plan



The total number of measures is 12

2 measures met their target [A10; ILAC2]

2 measures were slightly below target [CSC0004; CSC0006]

8 measures were significantly below target [ILAC1; ILAC3; ILAC4; ILAC5; ILAC6; ILAC7; ILAC7(N); N23]

1 of the 2 green measures is deteriorating long term [ILAC2]

8 of the 8 red measures are deteriorating long term [ILAC1; ILAC3; ILAC4; ILAC5; ILAC6; ILAC7; ILAC7(N); N23]

PI code	PI name	Aim to	Value	Target	Status	Short Trend	Long Trend
A10	The average number of days (over the last 36 months) between a child entering care and moving in with adoptive family (fostering adjusted)	Minimise	401	450	Green	DET	IMP
CSC0004	Number of CIC per 10,000 children	Goldilocks	71.1	67.0	Amber	DET	DET
CSC0006	Number of CP per 10,000 children	Goldilocks	45.0	37.0	Amber	DET	IMP
ILAC1	Average Caseloads in Assessment teams	Minimise	28.9	22	Red	DET	DET
ILAC2	Average Caseloads in Post Assessment teams	Minimise	16.2	18	Green	DET	DET
ILAC3	Completed initial child and family assessments which started as S47, where the child was visited within 1 working day.	Maximise	66%	90%	Red	IMP	DET
ILAC4	Completed initial child and family assessments which started as S17, where the child was visited within 5 working days.	Maximise	43%	85%	Red	IMP	DET
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.	Maximise	56%	60%	Red	DET	DET
ILAC6	Rate of open CIN cases per 10,000	Goldilocks	440	321	Red	DET	DET
ILAC7	The percentage of CSC Audits graded good or outstanding	Maximise	9%	80%	Red	DET	DET
ILAC7(N)	The percentage of CSC Audits graded RI or higher (good or outstanding)	Maximise	71%	80%	Red	IMP	DET

N23	The percentage of children social care substantive posts not filled by permanent social workers	Minimise	30.8%	20%	Red	IMP	DET
-----	---	----------	-------	-----	-----	-----	-----

Comments:**A10:**

- The 3 year average rose by 3 days compared to the Q3 outturn. The Q3 outturn has been revised following updated information.
- Compared to target this measure is positive but has deteriorated slightly, despite being higher than national.
- The latest national benchmark is 367 days and the South East is 398
- Medway's adoption arrangements are delivered through its Regional Adoption Agency (RAA), in collaboration with Bexley and Kent. Panels are held weekly which ensures that children are matched without delay where suitable adopters can be found within the resources of Adoption Partnership. As this is the 3-year figure this involves children adopted both before and after RAA went live. 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 5 sibling groups all of whom were older and with some complex needs and traumatic histories and they all took over a year to place. In addition, of course Covid19 has affected the length of proceedings for many recent children placed and adopted.

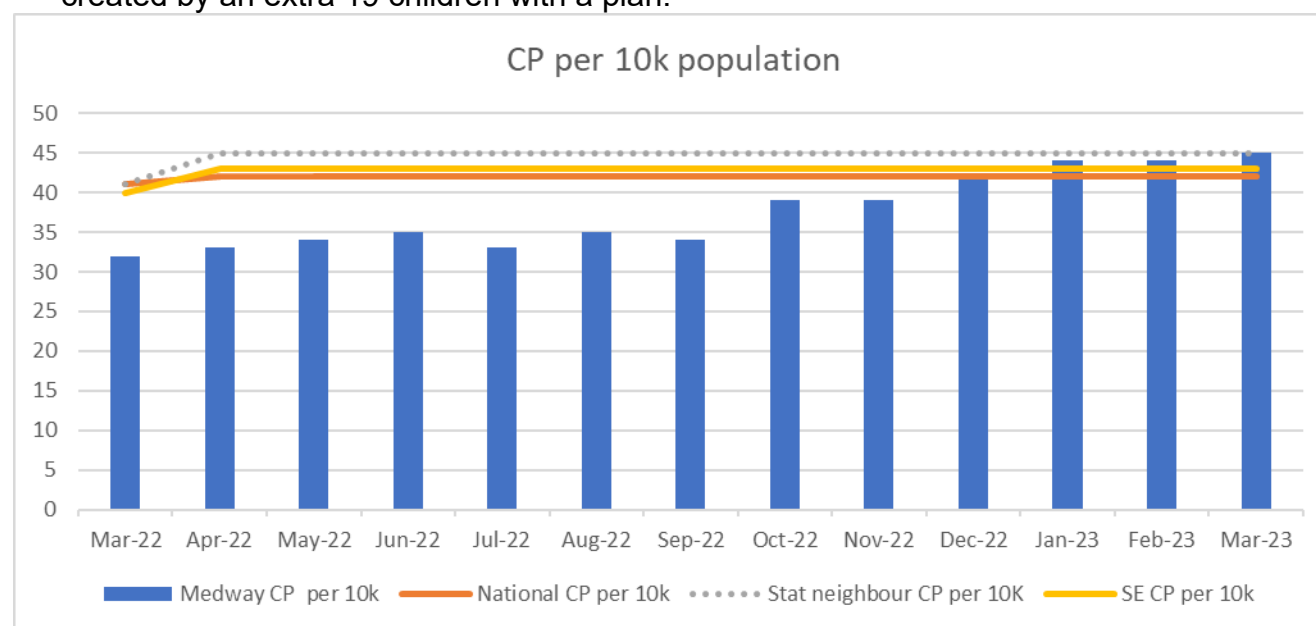
CSC0004:

- The rate of Children in Care (CiC) is now being measured by a "Goldilocks" metric. This is because a rate that is too low is as potentially problematic as a rate that is too high. We have set the upper limit at 71 and the lower at 63.
- Currently there are 465 children in care (CiC), which is a rate of 71.1 per 10,000. There has been a rise since December of 3% (13 children).
- Medway now has a rate slightly above to the most recent National rate.
- Nationally there are 70 CiC per 10,000 population. Our statistical neighbours have 74 CiC per 10,000 and the South East has 56.
- During this quarter, the rate of our CiC per 10,000 has increased to just above the national average, and at the top end of our target range. The % is impacted by several large families coming into care during the quarter, alongside the continuation of delays in permanence decisions in the judiciary.
- We are now beginning to see permanency decisions being made by the court process resulting in children no longer being in our care, either returning home or moving to family placements under an SGO. We also have several children whose

adoption plans will be progressed within the next few months. The service will closely monitor this target on a monthly basis; should this continue to increase we will undertake a broader review of our processes and practice.

CSC0006:

- The rate of Child Protection is now being measured by a “Goldilocks” metric. This is because a rate that is too low is as potentially problematic as a rate that is too high. We have set the upper limit at 42 and the lower at 32.
- The target zone has been revised and set in consultation with the service, as indicated at the target setting stage, in order to provide a meaningful performance measure that aligns Medway with national rates and our statistical neighbours.
- Currently there are 297 children on a Child protection plan. This equates to a rate of 45 per 10,000, a 7% rise on the Q2 rate, created by an extra 19 children with a plan.

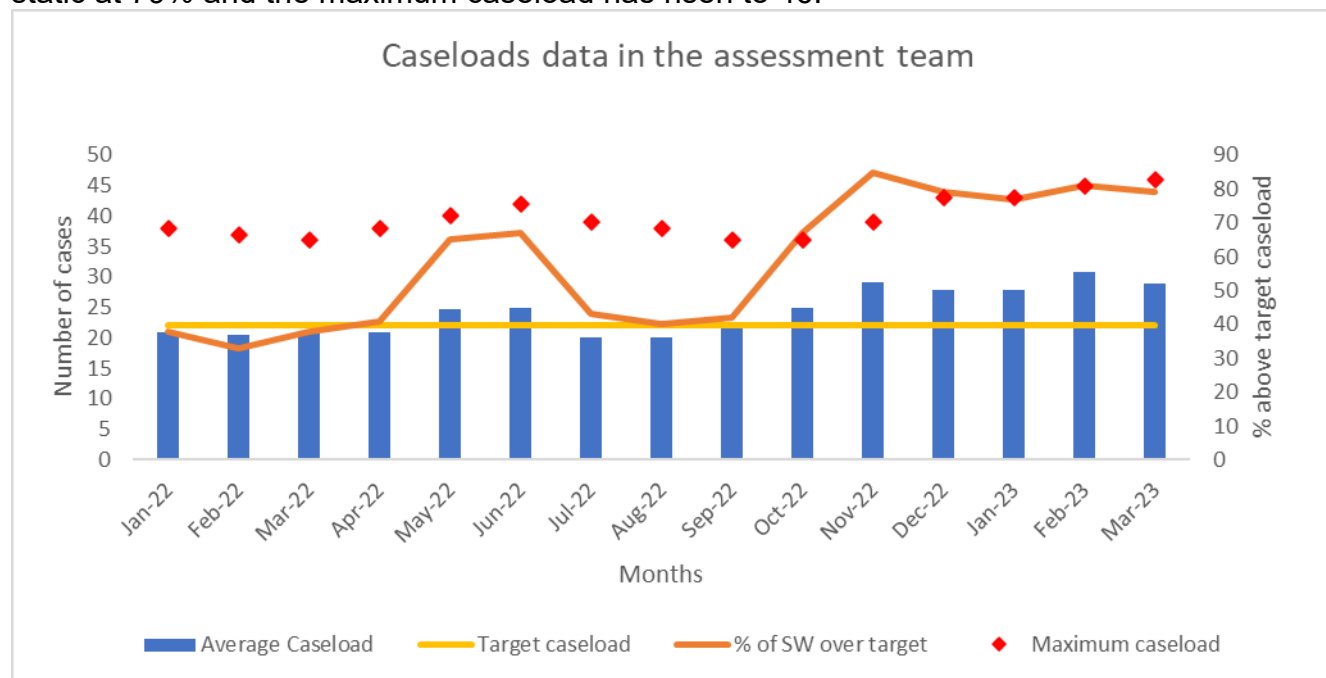


- Medway is in line with the latest National rate (42) and below the Statistical neighbour rate of 45 per 10,000. The South East rate has risen to 43, which means all our comparators, like Medway, have seen a rise in the numbers of CP.
- The number of children subject to a child protection plan has increased and is now in line with our statistical neighbours and national data.
- Senior managers and child protection chairs have oversight of requests for child protection conferences and of the decisions for children to be placed on a plan, which are made as part of a multi-agency discussion. Dip sampling and review work

continues consistently to ensure that the right children are on a plan. Senior managers are ensuring oversight of child in need work to ensure plans progress appropriately for children, rather than escalating to child protection conferences.

ILAC1:

- The average caseload in the assessment teams is 28.9 a 4% rise compared to the December snapshot. This increase has slowed compared to the jump between Q2 and Q3. The percentage of social workers over target caseload has remained static at 79% and the maximum caseload has risen to 46.

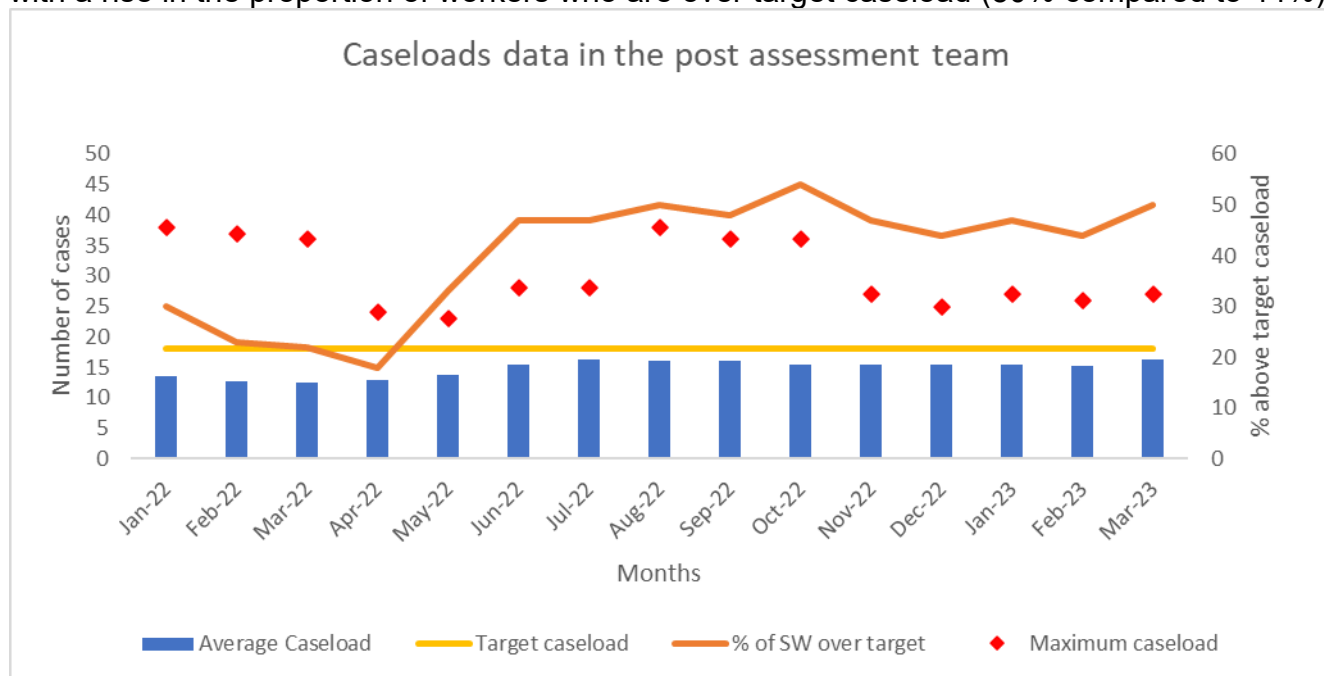


- The average caseload across the assessment teams has increased slightly in Q4, similarly to Q3. Staffing turnover and vacancies within the assessment service continue to impact on throughput of the work. Whilst families are now transferring across the service, the higher caseloads and a consistently high number of referrals progressing to assessment, means social workers are needing to prioritise tasks daily to manage their work loads.
- To assist in progressing work through the service, assistant team managers are being recruited to work alongside team managers to support social workers, provide management oversight and drive work through the service.

- A positive impact is already being seen in teams that have the higher caseloads. Some social workers support student placements and therefore have extra cases allocated in their name (normal policy for student allocation).

ILAC2:

- The snapshot shows post assessment social work teams (Area CSW Teams 1-8) have an average caseload of 16.2, a rise of 5% on the Q3 position. This remains below target. The highest caseload is 27, an increase of 8% on Q3, this is combined with a rise in the proportion of workers who are over target caseload (50% compared to 44%).



- Caseloads have increased in the post assessment team as work has been taken earlier from the assessment teams. This included undertaking assessments to mitigate the increasing caseloads in the assessment service. In addition, despite the peripatetic staff and the project teams across the service areas, CSWT, 0-25 and adolescent teams are still carrying vacancies, managing both sickness and performance which impact upon capacity. Actions to manage this increase include a focus on throughput of work, and ensuring families can step down in a timely way to a lower level of intervention form Family Solutions or other EH support. The additional capacity provided by the project teams will continue into Q1 2023-24.

ILAC3:

- The end of quarter snapshot shows that 66% assessments were visited in 1 day. This is a 6% improvement on the Q3 position. The outturn has fluctuated over the quarter, with 81% of visits in 1 day in September but around half of this (44%) in February. 27 out of 41 visits were in time.
- There continues to be recruitment and retention staff challenges which has meant caseloads remain high impacting upon the timeliness in the recording of visits undertaken within 1 working day. Managers continue to ensure there is oversight of this and that children are seen. There is a focus on throughput and timely transfer of work through to CSWTs from the Assessment service. However social worker recruitment both of permanent and agency staff remains a challenge across all service areas.

ILAC4:

- The end of quarter snapshot shows 43% S17 assessments were visited in 5 days. This is a 10% increase (improvement) on the Q3 snapshot. Throughout the quarter there has been steady improvement in this measure, with 40% and 41% being achieved in January and February. 186 out of 435 visits were in timescale. The long term trend over the last 12 months has been downward, with the rate dropping from 66% in March 2022.
- Staffing challenges have continued to impact negatively on completing visits within 5 working days of the referral, as well as a delay in the recording of these visits. Managers continue to provide increased oversight. The additional staffing resource committed by the council, including peripatetic workers and project teams, as well as more timely transfer of work from assessment to CSWT will support more timely visiting and recording. Heads of Service continue to closely monitor this area of practice.

ILAC5:

- The percentage of children for whom permanency has been agreed has reduced slightly from 61% and is now below target. The trajectory of this measure has been downward over the last 5 months.
- Agreed permanency for our children in care where long term fostering is the plan has been decreasing during the last 5 months. Whilst the service has taken action to ensure its permanency planning policy and process is robust, we are not seeing this figure increase or stabilise.
- This contrasts with the slight increase we have seen in March in our children in long term placements over 2.5 years. There are several factors that can impact this performance target, including the numbers of children coming into care and particularly the sufficiency of the placement markets. To ensure we have a thorough analysis and are taking the appropriate actions, heads of service will be reviewing our performance across these stability indicators during this next quarter.

ILAC6:

- The rate of Children In Need (CIN) is now being measured by a “Goldilocks” metric. This is because a rate that is too low is as potentially problematic as a rate that is too high. We have set the upper limit at 337 and the lower at 305.
- Currently the rate is 440 which is outside of the green zone, there are 2882 children counted as Child in need. This has risen by over the last quarter, by 21%. This increase has been largely driven by increases in the number of children being assessed. The increased pressure on the assessment teams is seen in the caseload numbers of those teams. Medway’s rate of CIN is now higher than National and the South East.
- 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 plan as well as other children supported by social services who are not, looked after on a CP plan or are having an assessment.
- Nationally there are 334 CIN cases per 10,000 population. This is slightly higher than 347 for our statistical neighbour group and at 329 in the South East. All of these rates have risen over the last year, but not as sharply as Medway’s current rise.
- The increase of staff through the recruitment in the bank and project teams has filled critical gaps and has enabled more manageable caseloads for social workers, supporting the throughput of CIN work. However, the impact of work transferring earlier from the assessment service has meant an increase in the volume of work. The focus from Service Managers and Head of Service is and continues to be reviewing CIN work, ensuring progression and oversight, and supporting step down for those families who no longer meet the statutory threshold for intervention.

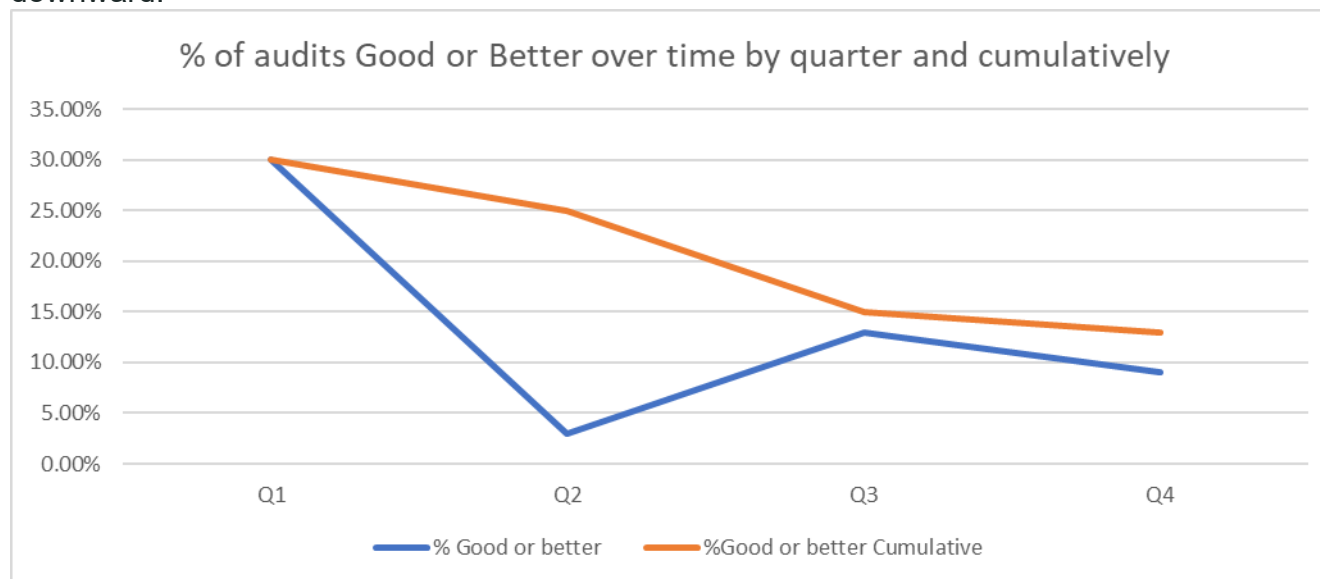
ILAC7:

- In Quarter 4, 4 out of 45 (9%) of Audits were moderated as good, 91% required improvement or were inadequate. This is a moderate drop after a stronger outturn in Q3.
- The table below shows the audit results for this year to date:

	Outstanding	Good	Requires improvement	Inadequate
Q1	0 (0%)	12 (30%)	18 (45%)	10 (25%)
Q2	1 (2%)	0 (0%)	31 (76%)	9 (22%)
Q3	0 (0%)	4 (13%)	17 (57%)	9 (30%)
Q4	0 (0%)	4 (9%)	28 (62%)	13 (29%)
YEAR Total	1 (1%)	20 (13%)	94 (60%)	41 (26%)

N.B. The percentages may not sum to 100% due to rounding

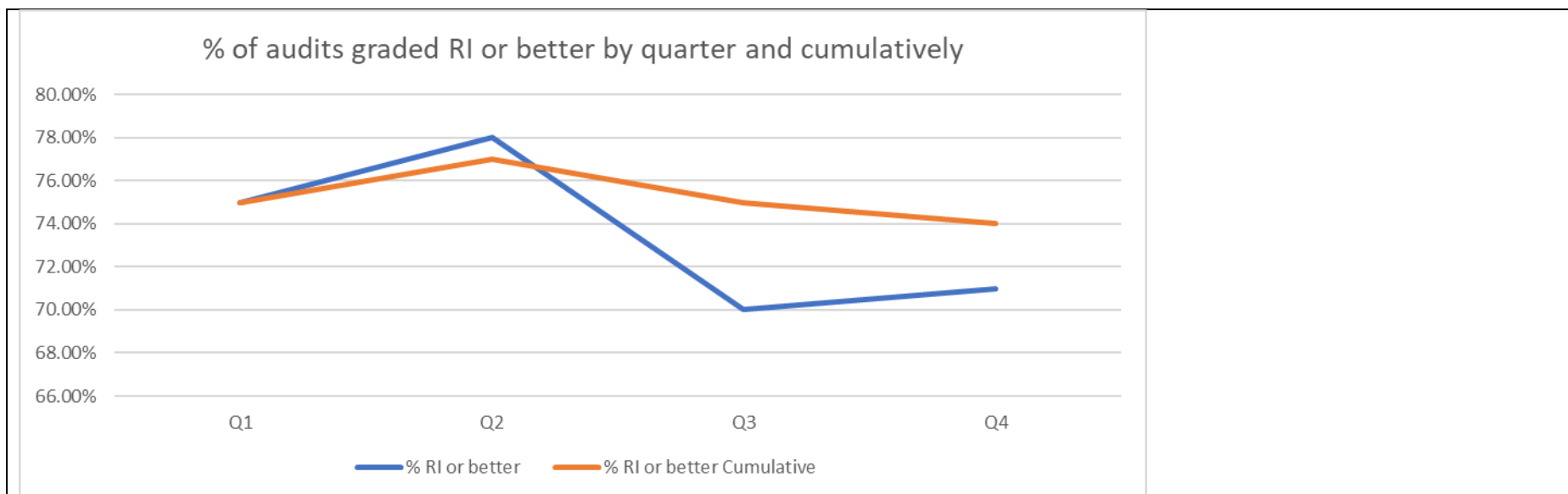
The chart below shows the movement of good or better audit outcome by quarter and cumulatively. The cumulative trend is downward.



- Our aim is to achieve a service where good practice is embedded. The aim of achieving 80% of audits graded good or outstanding is the long-term service ambition as it will take a significant change in practice to get to this position, which will take time. Continued focus on practice improvement, is beginning to deliver results in some areas, which is evidenced in the improvements seen in Q1. Work continues to drive the quality of practice across the service through regular coaching, training and support and this is measured through the regular audit programme.
- The decline in performance seen in Q2 and Q3, is a direct result of the pressures across the service, particularly where there are significant gaps in capacity as there has been over recent months. Unfilled vacancies, staff turnover, sickness and performance issues all impact on the quality, timeliness and throughout of work, and consequently, audit grades. In response, the Practice Development Service is targeting support where practice has slipped and is following up progress on audit recommendations to support practice improvements.

ILAC7(N):

- The proportion of Audits graded Requires improvement (RI) or better has risen between Q3 and Q4.
- The chart below shows the movement of RI or better results by quarter and cumulatively. Over 12 months the cumulative position is static, with three quarters of audits being RI or better.



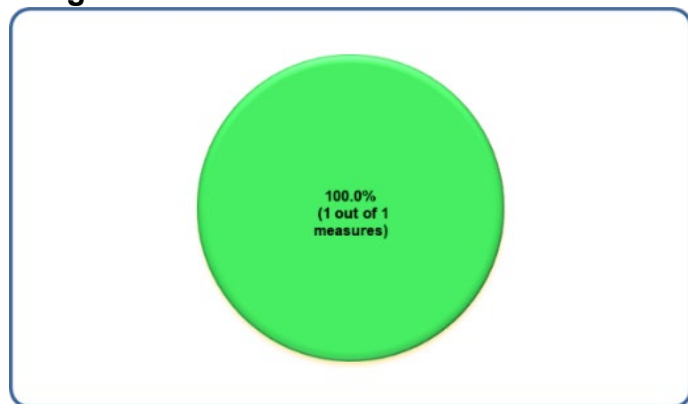
- For the year to date 74% of audit are graded as RI or better.
- The service is currently in intervention, and it would be expected that at this point in the journey that a high proportion of work would not meet expected standards until practice consistently improves.
- Dependent on the area of practice that is subject to review and its current pressures, we would expect that performance against the target will fluctuate. Performance will be impacted by pressures across the service, particularly where there are significant gaps in capacity, as there has been across the service over recent months. Unfilled vacancies, turnover, sickness and performance issues all impact on the quality, timeliness, and throughput of work, and consequently, audit grades.
- The extensive work underway to increase capacity through commissioning a team of bank locum staff and project teams, has provided additional capacity, and will help to bring work back on track. The service will continue to support practice through a child focused and targeted approach to poor practice, with additional support available to practitioners from the Practice Development Service. Other quality assurance measures, including dip sampling and themed reviews, all of which support strengthening of practice.

N23:

- Data is as of March 2023. There has been a small drop in the vacancy rate in CSC since December 2022.

- The benchmarking data is derived from the Social Care workforce survey for data as at 30th September 2022. Medway has a higher vacancy rate than our statistical neighbours (17%) and the National rate (23%). Vacancy rates for both comparators have risen between 2021 and 2022.
- Recruitment and retention remain a significant challenge for Medway and many other local authorities. Extensive work is underway across the service to recruit permanent staff, including growing our own workforce, through recruitment of newly qualified social workers, and student placements. Vacancies are backfilled through locum staff although this continues to be challenging with some roles remaining unfilled due to lack of suitable candidates from agencies. This is creating pressures across the workforce.
- The social work 'offer' was increased in October 2022 to reflect the current market, with the aim of increasing the supply of potential applicants. Alongside this, additional recruitments campaigns have been used to attract candidates, as well as maintaining focus on retention of existing, capable staff. Pressures remain across the whole system nationally.

Programme: The best start in life



The total number of measures is 2
 1 measure met its target [PH16]
 The 1 green measure is improving long term [PH16]
 1 measure is not available this quarter

PI code	PI name	Aim to	Value	Target	Status	Short Trend	Long Trend
CASEIEYFS Gap	Percentage achievement gap at Early Years Foundation Stage Profile between the lowest attaining 20 % of children and the mean (21/22 academic year)	Minimise	NA	30%	NA	NA	NA

PH16	Smoking at time of delivery (SATOD) (Q3 22/23)	Minimise	10.4%	16%	Green	DET	IMP
------	--	----------	-------	-----	-------	-----	-----

Comments:**CASEIEYFS Gap:**

- This measure has now been discontinued by the DfE

PH16:

- The data reported represents smoking at time of delivery (SATOD) prevalence for the whole of Kent & Medway in line with the Integrated Care Board (ICB) footprint.

Achievements

- The Medway Stop Smoking Service in collaboration with key partners, continues to predominantly deliver remote/telephone support to maternal smokers, partners, and significant others undertaking a quit attempt with the service. Face-to-face, text, and digital support is also available, enhancing accessibility and aiming to reduce health disparities.
- Despite ongoing pressures in the acute setting, particularly for maternity colleagues, we have received a total of 107 referrals in Q3 2022/23. This is a 46% decrease on Q3 2021/22 (198 referrals), which is likely to be reflective of several factors including: a reduction in SATOD prevalence locally, high maternity staff turnover and limited pharmacotherapy options. Experts have also highlighted that nicotine replacement therapy (NRT) has limited efficacy in the pregnant population.
- Medway Council Public Health team are also working closely and supporting clinical colleagues in implementing the ambitions of the NHS Long Term Plan in treating tobacco dependence. In maternity, we expect to see and support an operational in-house model for some of the Medway pregnant population by April 2023/24.

Actions

- As part of the NHS's 'Saving Babies' Lives Version Two: A care bundle for reducing perinatal mortality' guidance, reducing smoking in pregnancy is the first element. To embed best practice, the team and service continue to prioritise working closely with influential stakeholders (notably midwives and health visitors) to maintain and improve referral pathways, as well as ensuring evidence-based training is delivered at regular intervals.
- New evidence from a randomised controlled trial suggests that e-cigarettes might help people who are pregnant to stop smoking, and their safety for use in pregnancy is similar to that of nicotine patches (Hajek et al., 2022). An e-cigarette universal offer is currently being considered for implementation into the Medway Stop Smoking Service.
- Furthermore, emerging evidence published in the British Medical Journal (BMJ) has found that the provision of financial incentives alongside regular UK Stop Smoking Services was shown to more than double the number of people who stopped smoking during pregnancy (Tappin et al., 2022). This bolt-on intervention supports new guidance from the National Institute

for Health and Care Excellence (NICE). A proposal for the new financial year will be put forwards to ensure our services continue to reflect the gold-standard and are continually improving perinatal outcomes in Medway.

Project for this outcome:

Healthy Child Programme:

- The Health Visiting Service delivered by Medway Community Healthcare (MCH) delivers a series of checks on young children in accordance with the National Healthy Child Programme. These checks are to support parents and ensure the child's development is on track.
 - The Q3 2022/23 performance statistics for these checks are:
 - New Birth Review: 90% (Target – 91%)
 - 6-8 Week: 94% (Target – 91%)
 - 10-12 Months: 95% (Target – 91%)
 - 2-2.5 Years: 87% (Target – 78%)
 - Antenatal: 89% (Target – 91%)
- MCH exceeded its directorate targets for the 6–8 week, 10-12 month and 2-2.5 year mandated checks during this quarter. There was a slight dip in performance in relation to the New Birth Review (-1% point), 2-2.5 Years (-1% point) and Antenatal (-2% point) checks in comparison with Q2 2022/23. MCH reports that families sometimes re-schedule appointments arranged around the Christmas period to avoid clashes with family arrangements. Some of these appointments were re-scheduled for the new year – meaning that some visits take place outside of the target time frame.
- The MCH School Nursing Service achieved a high level of participation in The National Child Measurement Programme (NCMP) for the 2021/22 academic year - 91% of Medway's Year R and Year 6 children took part in the programme. For the current academic year 2022/23, MCH achieved 66% coverage for year R pupils and 63% for year 6 pupils by the end of Term 2 (December 2022) with 4 terms to go (January – July 2023).
- The ChatHealth digital messaging service for children aged 11 to 19 was fully launched in September 2022. Children accessing the service can send a message (anonymously if they wish) to a school nurse to get confidential help and advice about a range of health concerns, including emotional health, sexual health, relationships, alcohol, drugs, and bullying. In the period from the service launch until Christmas 2022, the service received 309 contacts from children & young people.
- The Children and Young People (CYP) workforce training programme provided seven courses which were delivered to a total of 73 professionals in Q4 2022/23. These training courses have been developed to deliver support to Medway's Children and

Young Peoples workforce (teachers, youth workers, youth group leaders, charity workers) in the work that they do to improve the health and wellbeing of children and young people. Training includes full and half day in-person sessions, online sessions, and webinars and covers a range of topics such as mental health, self-harm, trauma informed practice, and 'Personal, Social, Health and Economic' (PSHE) education. The breakdowns of training and attendance are:

- Adverse Childhood Experiences (ACEs) course (for social care staff teams): 20 delegates attended sessions on January 23rd, 24th, and 27th.
- ACEs update course (delivered by KCA): 6 delegates attended on February 2nd.
- ACEs course: 12 delegates attended on February 8th.
- Resilience: 4 delegates attended on March 8th.
- Sleep training: 4 delegates attended on March 29th.
- We have also delivered two courses of 2-day Youth Mental Health First Aid (YMHFA), which has resulted in 27 attendees becoming qualified Mental Health first aiders. The attendees were made up of Medway colleagues from schools, early help, and youth service.
- There was increased membership to the PSHE Network with an improved attendance from members in Q4. Currently at 74 members from a cross section of schools, primary, secondary, SEND and alternative provision and new members from MidKent college.
- The Child Health (CH) team provided Mental Health Leads Network members with access to North East London Foundation Trust eating disorders specialists to provide insights and best practice advice for supporting CYP with disordered eating or an eating disorder. There are currently 92 group members in the Mental Health Leads Network from across the children's workforce. This includes head teachers, PSHE leads, Family Liaison Officers (Flo's), Special Education Needs Coordinators (SENCo's), youth workers, and clinical colleagues from across local health services.
- The CH team delivered workshops to 51 parents and carers on topics including Relationships and Sex Education, and self-care.

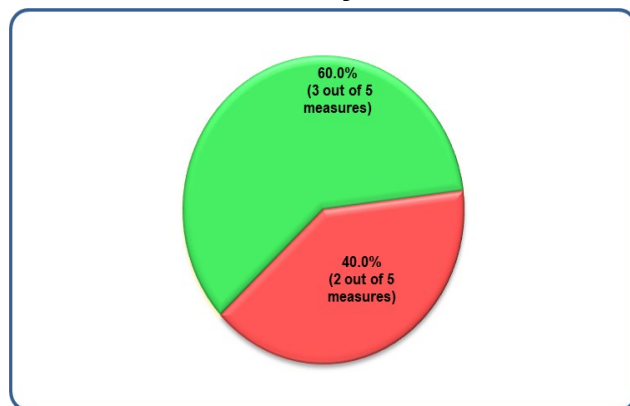
Outcome: Older and disabled people living independently in their homes

Strategic Risk Summary

SR09A: Meeting the needs of Older People and Working Age Adults

Inherent score	Current score	Movement	Likelihood	Impact
AI	BII	→	High	Major

Performance Summary



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

The total number of measures is 5

3 measures met their target [ASCGBT001; ASCOF 2A(1); ASCOF 2A(2)]

2 measures were significantly below their target [ASCOF 1C(2i); ASCOF 1G (n)]

3 of the 3 green measures are improving long term [ASCGBT001; ASCOF 2A(1); ASCOF 2A(2)]

1 of the 2 red measures is deteriorating long term [ASCOF 1C(2i)]

PI code	PI name	Aim to	Value	Target	Status	Short Trend	Long Trend
ASCGBT001	% of Long term packages that are placements	Minimise	30%	30%	Green	IMP	IMP
ASCOF 1C(2i)	Percentage of clients receiving a direct payment for their social care service	Maximise	26%	30%	Red	DET	DET
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	Maximise	56%	77%	Red	IMP	IMP

ASCOF 2A(1)	Permanent admissions to care homes per 100,000 pop – 18-64	Minimise	Redacted	4	Green	IMP	IMP
ASCOF 2A(2)	Permanent admissions to care homes, per 100,000 pop – 65+	Minimise	77.7	145	Green	IMP	IMP

Comments:**ASCGBT001:**

- The proportion of clients receiving a long term service that is a placement has remained static. There are currently 858 clients in residential or nursing placements, 30% of the 2863 long term clients. the numbers of long term clients has risen by 2%, whereas the numbers in placements by 1.3%
- National data for 2020/21 for long term clients in placements is 29% - this is a slight decrease from 2020/21.
- The service continues to monitor the number of placements made, particularly from hospital and to undertake the first reviews in a timely manner as this critical to ensure placements remain appropriate.

ASCOF 1C(2i):

- There has been a drop in the percentage of clients receiving a direct payment. At the end of March 521 clients out of 2005 are receiving an ongoing DP. There has been a 6% drop in the number of clients receiving a DP whilst the denominator (community long term services) has risen by 1%.
- Nationally 26.7% of clients with an ongoing long term service receive a direct payment. Our statistical neighbours' performance is 29.3 %. Both comparators have seen a decline in performance compared to their 2020/21 results.
- As predicted, we have seen a decrease in the numbers of people in receipt of a direct payment, this is due to the transfer of people attending a day service via a direct payment to a commissioned service in order to recoup the 20% VAT cost. The conversion of DP day service clients to a commissioned service is impacting the team's ability to process any new referrals. We have successfully recruited 2 x FTE SDS coordinators, start dates are pending, once they start work this will help address the backlog of DP referrals and increase the number of people in receipt of a DP.
- The Self Directed Support (SDS) team continue to work with Social Work Locality teams to ensure that they are aware of the benefits of a Direct Payment and promote referrals to the SDS team.

ASCOF 1G (n):

- There has been a 4 percentage point rise in the proportion of LD clients who live in their own home or with family.
- Of the current 630 LD clients 350 (56%) are in their own home or living with family and have had a review in the last 12 months. 122 (19%) are living in their own homes or with family but haven't had a review in the last 12 months. This cohort is reducing, which is positive. This means that 75% are in the desired type of accommodation. There are 158 clients not living

with their families or in their own homes, over three quarters of these are in residential or nursing homes. Accommodation in a care setting is, in many cases, the most appropriate place to provide the care and support needed and should not be viewed negatively.

- The position has improved from Q3 and it should be noted that the numbers of clients discounted from the numerator due to not being reviewed has fallen in both number and proportion.
- The current national outturn is 79 % and our statistical neighbours' is 81%. (2021/22 data)
- The service are focusing on completing reviews over the next 3 months; this is being managed in a way that does not affect completion of assessments. The service are working with colleagues in both Systems, and Performance and Intelligence to improve the way in which professionals record accommodation status. In addition, communication has gone out to all Locality Social Work Team Managers to ensure teams are recording accommodation status in the correct way to ensure data can be captured.

ASCOF 2A(1):

- Please note the target for this measure is apportioned over the quarter
- The Q3 outturn has been updated to account for retrospective input.
- There has been 6 admissions of working age adults to residential or nursing care this quarter. So far this year there have been 27 admissions in the year, which equates to a rate of 11.2 per 100,000, below the target of 16 for the year (4 per quarter).
- Nationally the benchmark (2021/22 data) is 13.9 per 100,000 for the full year, just under 3.5 per 100,000 for each quarter and for our statistical neighbours the figure is 15.2 (3.8per 100,000)
- 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. The new Dynamic Purchasing System for supported living comes on stream shortly which will increase available alternatives.

ASCOF 2A(2):

- There have been 36 admissions this quarter. Whilst this figure and the rate per 100,000 population is below target retrospective inputting may raise this figure.
- Our target rate allows for 262 admissions in total, currently 292 older people have been admitted. This is a rate of 630.2. This means that although the indicator is below target for Q4 at this point we are exceeding the target rate of 580 (4x145) and have not met the target As such, to prevent a misleading picture being presented I have removed the status and trend indicators from the measure header.
- Please note the target for this performance measure is apportioned.

- The National rate of admissions (2021/22 data) is 538.5 This equates to 134.6 per quarter. Our statistical neighbours outturn of 585.6 (146.4 per quarter). In 2021/22 Medway admitted 669.3 people per 100,000. This is 167.3 per quarter and means we are, in 2022/23, in excess of last year. at the end of Q3 2021/22 we had admitted 501.9 people per 100,000 and for this year we have admitted 535.3

Project for this outcome:

Social Isolation:

- In Q4 2022/23, a total of five 'Loneliness and Social Isolation' training modules were delivered, which brings the total number of modules delivered in the 2022/23 financial year to 19 (with 92 attendees, overall).
- The Medway Social Isolation Action Alliance was held in March with 33 attending, compared with 23 at the first meeting. The spring Medway Social Isolation Action Alliance newsletter was published in March.
- A Task and Finish group meeting has met monthly since January on the item of the 'Chatty Café' scheme. The Chatty Café Scheme is the UK's leading non-profit organisation tackling loneliness. It was started in 2017 as initiative to encourage conversation among strangers. The initiative promotes the marking of certain tables in cafes and other venues as tables at which talking to strangers is explicitly welcome. There are four licensed 'chatty cafes' in Medway.
- The focus of the meeting was to expand the Chatty Café service across Medway (to have up to 15 licensed 'cafes') and to encourage more volunteers and ambassadors to host conversations with individuals who just want to chat to somebody.
- A first draft of the new webpage for information on social isolation and loneliness has been submitted to Comms and Digital Teams. A new Pledge Campaign for actions around social isolation and loneliness is planned to be launched in June 2023, and work has begun on designing it.
- Medway Council Employee survey results identified high levels of loneliness and isolation experienced by staff. By working collaboratively with HR in the coming months, we aim to look at what can be done to address this issue.
- Additionally, an updated version of the Medway Joint Strategic Needs Assessment (JSNA) for 'Social Isolation and Loneliness' is currently being developed.

Outcome: All children achieving their potential in education

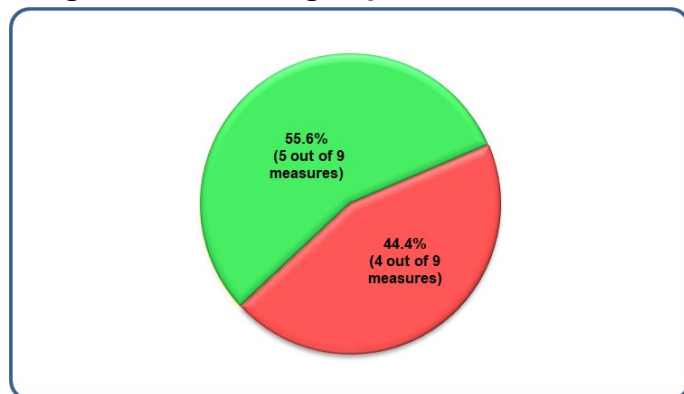
Strategic Risk Summary

SR39: Financial pressures on SEN Budgets

Inherent score	Current score	Movement	Likelihood	Impact
BII	BII	→	High	Major

Performance Summary

Programme: Raising aspiration and ambition



The total number of measures is 9

5 measures met their target [CASEIKS4 Ofsted; CASEISPEC Ofsted; OfstedPrimMnt; SE2 OEPr; SEKS4A8]

4 measures were significantly below target [CA13; EDU3(b); SE KS2; SE KS2Mnt]

2 of the 4 red measures are deteriorating long term [CA13;EDU3(b)]

PI code	PI name	Aim to	Value	Target	Status	Short Trend	Long Trend
CA13	The percentage of children permanently excluded from school (upheld only)	Minimise	0.02%	0.01%	Red	DET	DET
CASEIKS4 Ofsted	Partnership measure: Percentage of all Secondary Schools judged good or better,	Maximise	94%	85%	Green	IMP	IMP
CASEISPEC Ofsted	The percentage of special schools in Medway judged to be good or better	Maximise	100%	90%	Green	STATIC	STATIC
EDU3(b)	The percentage of children who were persistently absent from school (21/22 academic year)	Minimise	24.2%	13%	Red	IMP	DET

OfstedPrimMnt	The percentage of Maintained primary schools in Medway judged to be good or better	Maximise	100%	93%	Green	STATIC	IMP
SE KS2	The percentage of children who the required standard or above in Reading, Writing and Mathematics at KS2 (2021/22 academic year)	Maximise	57%	65%	Red	NA	NA
SE KS2Mnt	The percentage of children who achieve the required standard or above in Reading, Writing and Mathematics at KS2 in Maintained Schools Only (2021/22 academic year)	Maximise	65%	70%	Red	NA	NA
SE2 OEPr	Partnership measure: Percentage of all Primary Schools judged good or better,	Maximise	92.0%	87.5%	Green	STATIC	IMP
SEKS4A8	Average attainment 8 score (21/22 academic year)	Maximise	47.9	47	Green	NA	NA

Comments:**CA13:**

- Please note, the annual target of 0.04% is apportioned across each quarter
- For this academic year (starting September 2022) there have been 52 permanent exclusion processes started, 28 of these in the last quarter.
- So far, this academic year 27 permanent exclusions have been upheld, with 8 being upheld in the last 3 months. This represents 0.2% for the quarter and 0.06% for the academic year to date, meaning the measure will not hit the target.
- Almost all of the 27 exclusions have been from secondary schools; over half (52%) are children in receipt of free school meals; almost one in five (18%) were receiving SEN support: none had an EHCP in place. Over half (56%) were female. One school accounted for a third of all exclusions and over two fifths (44%) were for physical assault on a pupil.
- There are currently 13 processes awaiting an outcome and 11 have been resolved by not excluding the pupil.

- This activity is not counted in the benchmarking data below, which is for the Autumn term of 2021/22, it will form part of the dataset for the Autumn term 2022/23.
- Exclusion Data is now published three times a year. The most recent published data is for the Autumn term 2021/22
- The table below shows National, regional, and local data:

	Primary exclusion rate	Secondary exclusion rate	Total exclusion rate
National	0.005%	0.05%	0.025%
South East	0.003%	0.02%	0.01%
Medway (Autumn term 2021-22)	0.00%	0.02%	0.008%

- Bench marking data will next be updated with spring term 2021/22 data in April 2023, followed by a full year release covering the whole of the 2021/22 academic year in July 2023.
- Education system leaders are working proactively with local authority officers to establish appropriate provision that supports more pre-emptive intervention and reduces the need for exclusion. This includes reviewing how alternative provision operates with a view to increase the range of outreach support for vulnerable learners. The consultation for Alternative Provision is currently underway with all schools and closes at the end of April 2023.

CASEIKS4 Ofsted:

- Of the 20 Secondary schools in Medway two are classed as outstanding, 15 are good, one requires improvement and none are inadequate. This means that 17 of 18 are good or better. The inadequate judgment applies to the Waterfront UTC from its time as Medway UTC.
- Since last quarter Brompton Academy has been inspected and moved from good to requires improvement.
- Neither The Leigh Academy or the Maritime Academy has had an Ofsted inspection so are not counted in this measure, in either the denominator or numerator.
- Nationally this figure is 81% and the South East currently has 88% of schools graded good or better. Medway has moved from 11th to 4th the South East.
- Where there are concerns about schools, including those schools judged less than good, these are discussed during the termly conversation with the Regional Director, (formally Regional Schools Commissioner, RSC).

CASEISPEC Ofsted:

- There have been no changes to Ofsted ratings this quarter, noting that Bradfield's Academy maintained its outstanding grade, published January 2023.

EDU3(b):

- National Published data shows that Medway's overall rate of persistent absence for terms 1-6 (2021-22) is 24.2% this is 10,092 children. Of these, the primary rate is 20.6% and the Secondary rate 28.1%

- The absence data is published for statutory school-age pupils only. These are pupils on roll who are aged 5 to 15 on the first day of the academic year, Years 1 to 11.
- The most recent published National attendance data is for all of the 2021-22 academic year.
- National published benchmarking for terms 1-4

T1- 6 2021-22	Total PA	Primary PA	Secondary PA
National	22.5%	17.7%	27.7%
South East	21.9%	22.0%	27.5%
Medway	24.2%	20.6%	28.1%

- For terms 1-6 the rate of persistent absence in Medway is higher than both National and the South-East.
- The council has been assigned a DfE advisor to work with them on addressing the attendance and persistent absence issues. Council officers have met with the advisor and a deep dive has taken place. The key headlines from this are:
- There is a strong focus strategically on the Attendance agenda across the Council
- Where there is a strength of partnership internally, there is a commitment to extend working on this agenda with external partners, including those schools and trusts whose data indicates the need for targeted support
- It is recognised that the priority for Early Help / Social Care will remain on the forthcoming ILACS; whilst involvement and engagement regarding this agenda is on-going, the priority will and must remain on preparation for inspection
- A focus within the action plan will reflect the four core statutory duties for the local authority:
 - Communication and advice
 - Targeting support meetings
 - Multi-disciplinary support for families
 - Legal intervention

The ongoing areas of focus are:

- Decide how best to use of DfE attendance advisor time
- Complete action plan based on self-assessment priorities
- Formation of the Kent & Medway Attendance Alliance
- Create a cross directorate attendance strategy – coproduced with schools / trusts.
- Expand the data held on attendance to capture intersectionality across & between pupil groups, including SEND & EHCP / CiC / PP / section 19 – use to inform action & to target resources across the Council and to share with a range of audiences.
- Engage governors to secure a focus on improving attendance and ensuring a focus accountability for pupil attendance.
- Review the core function of the Attendance service in response to capacity to meet statutory functions moving forwards.

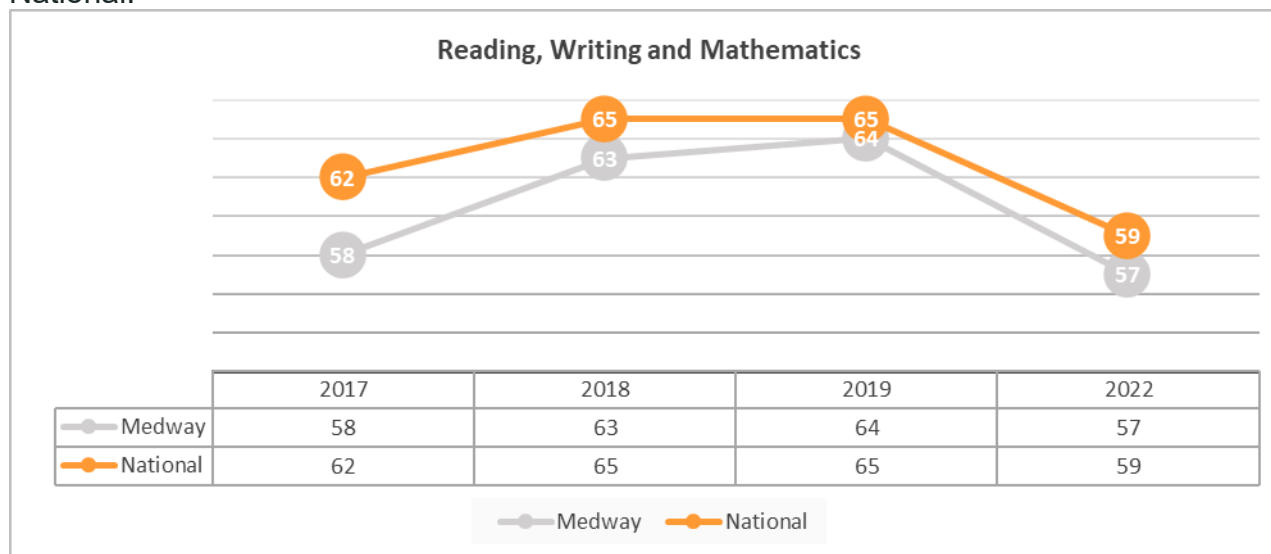
- Promote the range of resources available to schools and trusts.
Officers are working with the DfE to form a Kent and Medway multiagency attendance alliance as an action orientated partnership working across both local areas but with the single focus on removing barriers to school attendance.

OfstedPrimMnt:

- All local authority maintained primary schools are rated 'Good' or better; four are graded 'Outstanding' and 21 are 'Good'. There has been no change since last quarter.

SE KS2:

- The revised (final) Statistical First Release (SFR) has been published by the DfE. Data shows that 57% of Medway children achieved at least the expected standard in the combined Reading, Writing and Mathematics measure. The target in this report of 65% was set in 2019 pre-pandemic. The gap between Medway's and National performance has increased.
- National data indicates that 59% of children achieved at least the expected standard, as such Medway is 2pp lower than National.



- Compared to our statistical neighbours* Medway has had the third best percentage change against 2018-19, being comparable to the National rate of decline. All LAs have seen their performance drop.

	2018-19	2021-22	pp change	% change
Swindon	62	58	-4	-6
Rotherham	59	54	-5	-8
National	65	59	-6	-9
Dudley	59	53	-6	-10
Medway	64	57	-7	-11
South East	66	59	-7	-11
Telford and Wrekin	64	57	-7	-11
Thurrock	70	62	-8	-11
Kent	68	59	-9	-13
Havering	71	61	-10	-14
Southend-on-Sea	68	56	-12	-18

*our comparator group changed between 2019 and 2022, only continuous LAs are shown

- The Service support headteacher associations and the CEO network, in addressing their identified priorities for school improvement, encouraging school-to-school support that utilises best practice identified through performance and standards data.
- The Medway Education Partnership Group (MEPG) has identified and agreed a number of key priority areas, including Quality of Education, which is informed by educational attainment outcomes for children and young people. These measures will be closely monitored, and action plans developed through the MEPG to understand inconsistencies and to support school leadership to address areas of low performance

SE KS2Mnt:

- Maintained schools performed better than national and better than All Schools cohort. This was also the case pre pandemic, however it should be noted that as schools have continued to academise the cohorts are not the same. Medway's maintained schools continue to out perform academies and the gap between the two groups has widened by 11.6%. The gap between maintained schools and national has narrowed.

	Medway (Maintained only)	National (all schools)	% Difference to national	Medway (Academy only)	% Difference Maintained vs Academy
2021-22.	64.5%	59.5%	+8.4%	53.2%	+21.2%
2018-19 final	71.6%	65%	+10.2%	60.1%	+19.1%
% Change	-9.9%	-8.5%	-17.6%	-11.5%	+11.6%

SE2 OEPr:

- There are now 75 primary schools, as Stoke Primary School and Allhallows Primary School have become the Peninsula East Primary Academy.
- From a cohort of 75, currently 69 schools are graded 'Good' or better; seven are outstanding and 62 are good. Four schools require improvement and two are inadequate.
- There have been no new inspections published this quarter.
- There are 50 academies. Of these 88% are 'Good' or better (three are 'Outstanding' and 41 are 'Good'), four require improvement and two are inadequate.
- Nationally, this figure is 90% and the South East currently is 91%. Medway is ranked 8th out of 19 LAs regionally.

SEKS4A8:

- The KS4 published data show's Medway's Attainment 8 score is 47.9. This is an increase of 2.8% upon previously published data, comparing performance with pre-pandemic outcomes. Since 2016, the trend of KS4 performance has been broadly below the national profile (with the exception of 2018/19 when it was slightly better).
- Attainment 8 is a whole school performance measure and is calculated based on the grades achieved by students across 8 key subjects. Subjects include maths, English and EBacc subjects and certain technical awards. Maths and English may be 'double weighted', meaning that they count as 2 of the attainment 8 subjects). Attainment 8 in Medway is lower than the national (47.9 Medway average: 48.9 national average). Grammar schools continue to have an Attainment 8 score above Medway and national averages. All non-selective schools have an attainment 8 score below both Medway and national averages.
- Progress 8 captures the progress that pupils in a school make from the end of primary school to the end of KS4. The Progress 8 score is calculated by comparing each student's Attainment 8 score to those nationally of other students who had

the same KS2 SATs results. The Progress 8 average in Medway is -0.11, compared with the national average of -0.03. This means that on average students in Medway make 1 grade less progress compared to their peers nationally.

Whilst Medway has improved compared to 2018/19 this must be viewed in the context of National and comparator performance.

	2018/19	2021/22	% Change	2018/19 Gap to National (pp)	2021/22 Gap to National (pp)
National	46.8	48.9	4.5%		
South East	48.0	50.1	4.4%	1.2	1.2
Statistical Neighbour	51.0	53.0	3.9%	4.2	4.1
Medway	46.6	47.9	2.8%	-0.2	-1.0

- Medway has not made as strong progress as the comparators in terms of actual performance and has moved further behind the national outturn, whereas the South East and Statistical neighbours have remained static.
- School Effectiveness officers continue to work in collaboration with education leaders in the Medway Education Partnership Group (MEPG) to understand key priorities in all phases of education. National and LA data is to be collated and shared with schools in order to support individual schools with benchmarking, particularly in relation to more vulnerable groups (e.g., SEND, LAC).

Projects for this outcome:

There are no projects for this outcome