

Council Priority: PEOPLE
Supporting residents to realise their potential.
Quarter 1 2023/24

Performance and risks by outcome

Key

Red	Significantly below target (>5%)	Amber	Slightly below target (<5%)	Green	Met or exceeded target
DET	Deteriorating	STATIC	Static	IMP	Improving
Short term	since last quarter	Long term	average last 4 quarters	Goldilocks	Optimum performance is in a target range

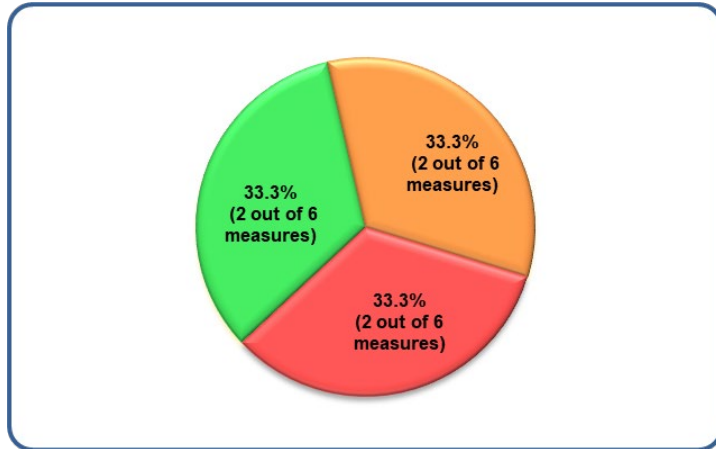
Outcome: Healthy and active communities

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 7.

1 measure is not available this quarter [PH34]

2 measures met their target [PH14, PH23]

2 measures were slightly below target [PH15; PH17]

2 measures were significantly below target [PH13; PH8]

1 of the 2 amber measures is deteriorating long term [PH15]

2 of the 2 red measures are deteriorating long term [PH13; PH8]

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) (Q4 22/23)	Maximise	295	425	Red	DET	DET

Comments:

- 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 Q4 2022-2023 there have been 1095 quit attempts providing a 59% 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 33% of all quits have been carbon monoxide (CO) verified.
- GP and pharmacy settings continue to see lower activity for smoking cessation. Some engagement work has taken place with key barriers being described as capacity, and loss of stop smoking medication Champix. The service continues to work and engage with these settings to explore new ways of working which could increase activity.

- 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 2023/2024, all people admitted to hospital who smoke will be offered NHS funded tobacco treatment services.

PI code	PI name	Aim to	Value	Target	Status	Short Trend	Long Trend
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

Comments:

- The 2023/24 Medway target will be based on the England value for 2022/23, which will be published around November 2023.
- 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 several 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.

PI code	PI name	Aim to	Value	Target	Status	Short Trend	Long Trend
PH17	Percentage of women initiating breastfeeding within 48 hours of birth	Maximise	67.27%	70%	Amber	IMP	IMP

Comments:

- Breastfeeding initiation is recorded shortly after birth and reflects if a newborn's first feed is with breastmilk or formula milk. The last quarters data shows a small increase compared to the last two quarters.
- The multi-partner working group that makes up the Infant Feeding Strategy group are currently refreshing the infant feeding strategy, which will detail the ambitions for infant feeding over the next 5 years.
- The strategy was scrutinised at Childrens O&S in June and will be taken to cabinet in September 2023 for formal adoption.

PI code	PI name	Aim to	Value	Target	Status	Short Trend	Long Trend
PH23	Number of new settings which are dementia friendly (cumulative)	Maximise	0	0	Green	DET	DET

Comments:

- The Dementia Friendly (DF) event at Chatham Dockyard did not go forward this quarter due to a lack of capacity within the Dementia Action Alliance (DAA). The work to prepare the venue at the Dockyard has taken place to meet the DF standards but a final visit from a member of the alliance with lived experience of dementia which is required for sign off has proven difficult to arrange due to existing commitments from the DAA members. This quarter did see Dementia Action Awareness Week, for which Medway had a strong social media presence encouraging attendance at Dementia Cafes and promotion of Dementia Friendly Activities operated by Medway Adult Education such as Gardening and Tai Chi as well as a stand at a broader Dementia Event with the Kent Dementia Action Alliance.
- Risk - New information was communicated from the Alzheimer's Society within this quarter which will have impact on the Alliance as nationally the charity can be seen to be withdrawing support and resource for local DAAs. Discussions with the local Alzheimer's Society representative (also DAA Chair) are due to take place ahead of the next Alliance meeting. Initially it appears support for the local website which provides the framework for member sign up, administration of the DF award and coordination of DF training will be impacted. This change will have a significant bearing on the ability of the DAA to produce recognised dementia friendly settings and train new Dementia friendly ambassadors. On this communication the ABM

Workforce Development Team and Healthy Settings team have begun scoping the development of a local training process linked to the ABM champions programme and recognition status linked to the workplace health programme.

PI code	PI name	Aim to	Value	Target	Status	Short Trend	Long Trend
PH8	Percentage of children and young people achieving a lifestyle improvement as a result of completing a young people weight management service	Maximise	69.6%	75.0%	Red	DET	DET

Comments:

- There has been continuous progress of children and young people achieving a lifestyle improvement through the Children and Young People (CYP) weight management programmes in Q1 2023/24. We expect to see more referrals come in through the National Child Measurement Programme (NCMP) alongside other referral pathways in 2023/2024.
- A further review of the Tier 2 CYP programmes is also underway to ensure that families have an ability to commit to the programmes which should result in higher rates of engagement, completion, and lifestyle changes. In Q2, Q3 and Q4, we plan to explore various service improvement options such as engaging more schools to deliver the programmes; implement a whole family approach to our services; work closely with the Holiday, Activities and Food (HAF) programme to ensure that there is an increase in children and young people becoming physically active during school breaks and holidays.

PI code	PI name	Aim to	Value	Target	Status	Short Trend	Long Trend
PH34	Proportion of people who self-report high levels of life satisfaction (22/23 annual)	Maximise	NA	80.00%	NA	NA	NA

Comments:

- The 2022/23 target is based on the England value for 2021/22.
- The Medway value for 2022/23 is not available yet. This will likely be available around October 2023 (based on previous release dates), but the specific release date is TBC.

Project for this outcome:

Supporting Healthy Weight:

- The proportion of adults in England living with obesity has seen large increases in the last four decades. Estimates of the prevalence of overweight and obesity for local authorities comes from 'Sport England's Active Lives Adult Survey'. The most recent annual data was published in May 2023, and it suggests that there has been a reduction in adults who are overweight or obese from 69.4% to 67.2% in Medway. That said, Medway still ranks higher than the England average, which experienced a slight increase in the past year from 63.3% to 63.8%.
- Weight management services are an important element of Medway's whole system approach to obesity. Throughout the 2023-2024 financial year, we aim to support more people than we have had at any other stage, through one of the adult weight management programmes. Delivered or commissioned by the Medway Public Health team, the team have a target to have over 1,200 adults attending one of our tier 2 weight management programmes. Tier 2 weight management programmes are services that aim to support adults living with excess weight and obesity in their weight loss journey and maintain healthier lives. In Medway, these services include Healthy Way, Oviva or Man Vs Fat. A full listing of all the known overweight and obesity interventions has been made available by the Public Health team on <http://wholesystemobesity.uk/medway/>.
- Another core element of tackling obesity is increasing the prevalence of breastfeeding and supporting infants to develop healthy food habits at the introducing solid food stage of their life. The Medway Infant Feeding Strategy is currently being refreshed and will soon begin the formal scrutiny and sign off process with Directors and members. The Public Health team conducted a detailed analysis of last year's breastfeeding data, a full literature review of the evidence of what works and a thorough listening exercise with professionals and residents, to aid in informing the strategy. The listening exercises included speaking to potential and new parents about breastfeeding through focus groups and one-on-one interviews.

Outcome: Resilient families

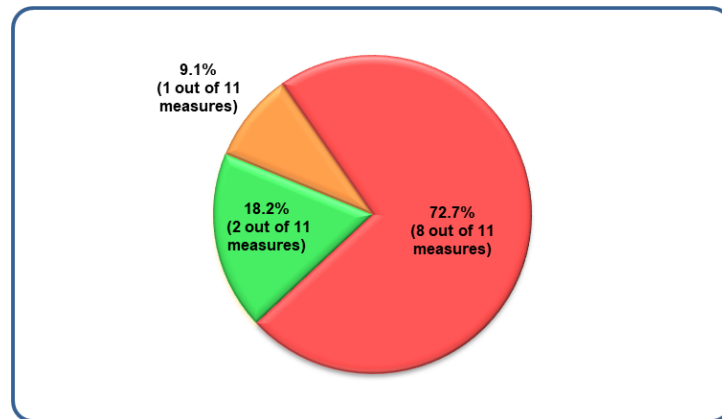
Strategic Risk Summary

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

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

Performance Summary

Programme: Children's Services Improvement Plan



The total number of measures is 11
 2 measures met their target [A10; ILAC2]
 1 measure was slightly below target [CSC0004]
 8 measures were significantly below target [CSC0006; ILAC1; ILAC3; ILAC4; ILAC5; ILAC6; ILAC7; N23]

1 of the 2 green measures is deteriorating long term [ILAC2]
 The amber measure is deteriorating long term [CSC0004]
 6 of the 8 red measures are deteriorating long term [CSC0006; ILAC1; ILAC3; ILAC4; ILAC5; ILAC6]

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	399	450	Green	IMP	IMP

Comments:

- The Q4 result has been updated to account for the latest information. At the time of writing the recorded Q1 outturn is considerably reduced against the Q4 result (127 days).

- Compared to target this measure is positive.
- Benchmarking
- The latest national benchmark is 367 days and the South East is 398

Actions:

- Medway's adoption arrangements continue to be delivered through its Regional Adoption Agency (RAA), in collaboration with Bexley and Kent. The Service continues to track and review children's plans through its weekly panels, with the support of the RAA, to ensure timely permanence through adoption.

PI code	PI name	Aim to	Value	Target	Status	Short Trend	Long Trend
CSC0004	Number of CiC per 10,000 children	Goldilocks	73.2	Between 65 and 73 Mid-point 69.0	Amber	IMP	DET

Comments:

- 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 73 and the lower at 65.
- Currently there are 479 children in care (CiC), which is a rate of 73.2 per 10,000. There has been a rise since March of 3% (12 children).
- There has been a slow rise in the numbers of CiC over the last 12 months, with there being now 44 more children in care than a year ago. This is a 10% increase.
- We will expect to see the number of Children in care rise as we accommodate more Unaccompanied Asylum-Seeking Children (UASC) under the national scheme.

Benchmarking:

- Nationally there are 70 Looked After Children per 10,000 population. Our Statistical neighbours have 74 CiC per 10,000 and the South East has 56.

Actions:

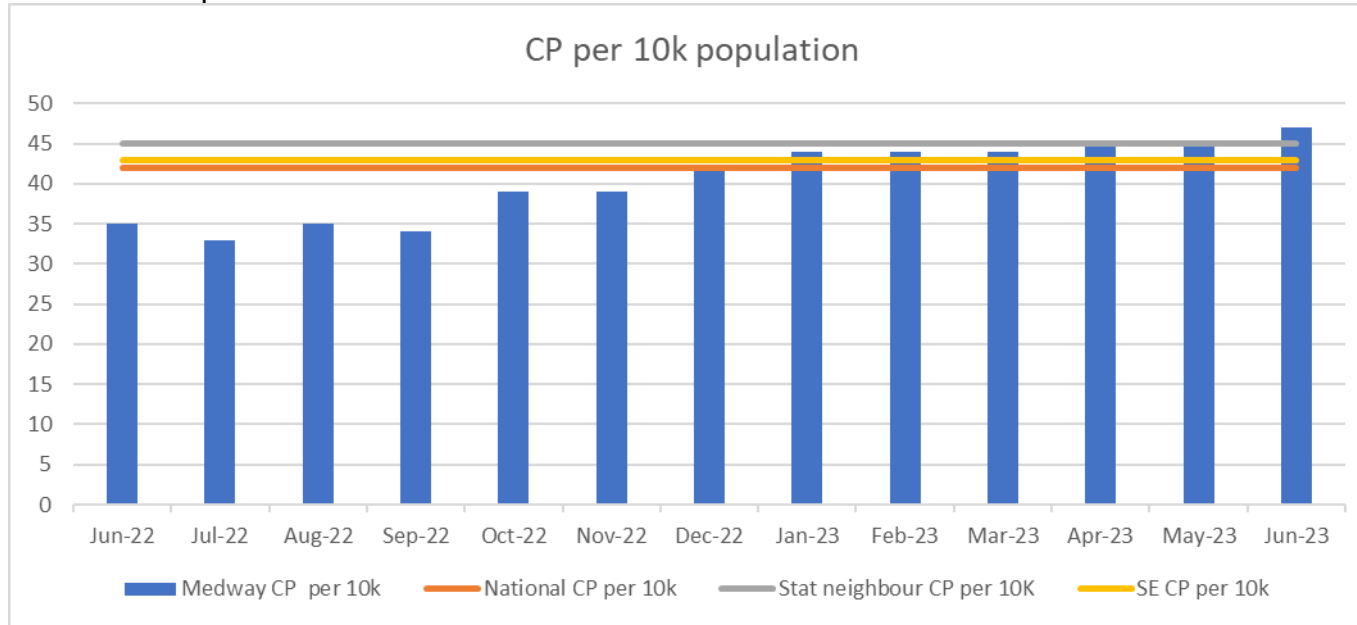
- During this quarter, the rate of our CiC per 10,000 has increased to just above the national average, and at the top end of our target range. The percentage was impacted by several large families coming into care during the quarter, alongside the continuation of delays in permanence decisions in the judiciary. There has been some throughput of permanence decisions because of some court processes coming to an end, but many care proceedings continue to take much longer than they should,

with Medway’s average at 53 weeks, against a national target of 26 weeks. Court and judicial capacity is a factor impacting on timely final hearings. The service will closely monitor this target on a monthly basis ensuring that children’s plans are progressed with pace, wherever possible to ensure permanence and exits from care where appropriate.

PI code	PI name	Aim to	Value	Target	Status	Short Trend	Long Trend
CSC0006	Number of CP per 10,000 children	Goldilocks	47.0	Between 32 and 42 Mid-point 37.0	Red	DET	DET

Comments:

- The rate of Child Protection (CP) 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.
- Currently there are 306 children on a CP plan. This equates to a rate of 47 per 10,000, a 6% rise on the Q4 rate, created by an extra 18 children with a CP plan.



Benchmarking:

- Medway's CP rate of 47 is higher than the latest National rate of 42 and Statistical neighbour rate of 45 per 10,000. The South East rate is 43.

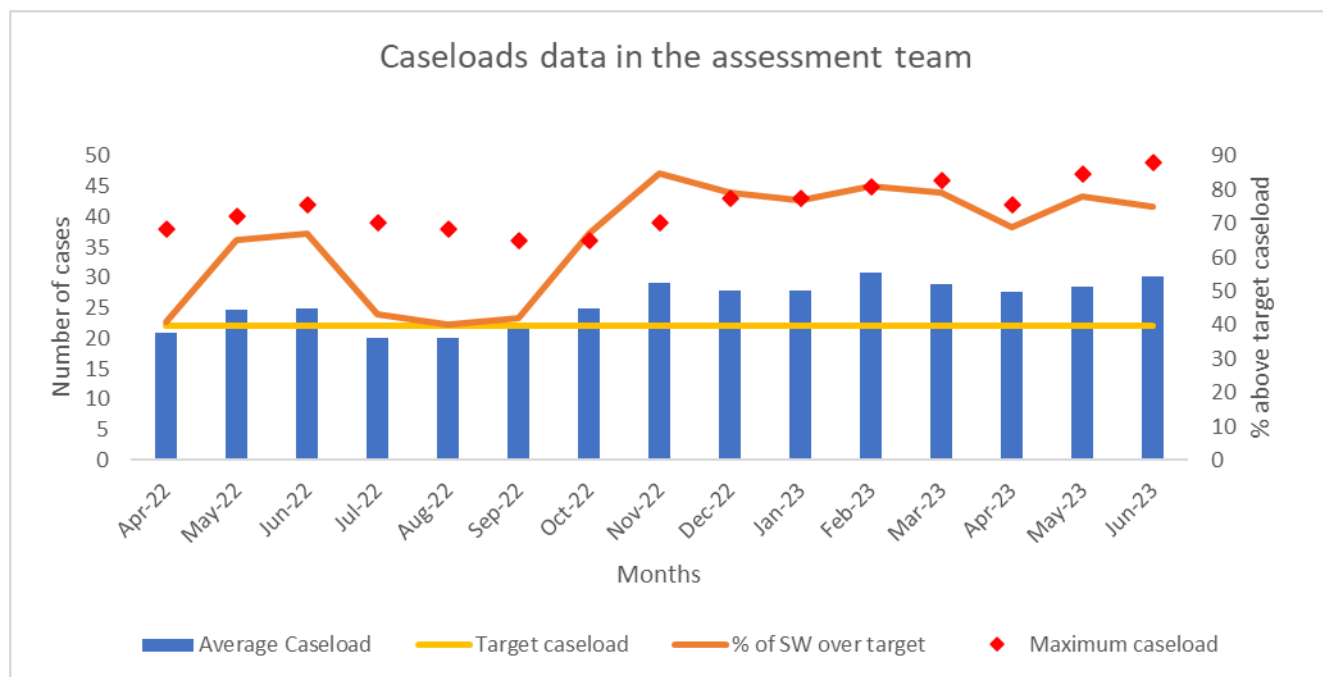
Actions:

- The number of children subject to a CP plan has increased and is now above statistical neighbours and national comparators. Senior managers and CP chairs have oversight of requests for CP 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 will continue to ensure oversight of child in need work to ensure plans progress appropriately for children, rather than escalating to CP conferences where possible.

PI code	PI name	Aim to	Value	Target	Status	Short Trend	Long Trend
ILAC1	Average Caseloads in Assessment teams	Minimise	30.1	22	Red	DET	DET

Comments:

- The average caseload in the assessment teams is 30.1, a 4% rise compared to the March snapshot. This increase has slowed compared to the jump between Q3 and Q4. The percentage of social workers over target caseload has dropped to 75% and the maximum caseload has risen to 49.



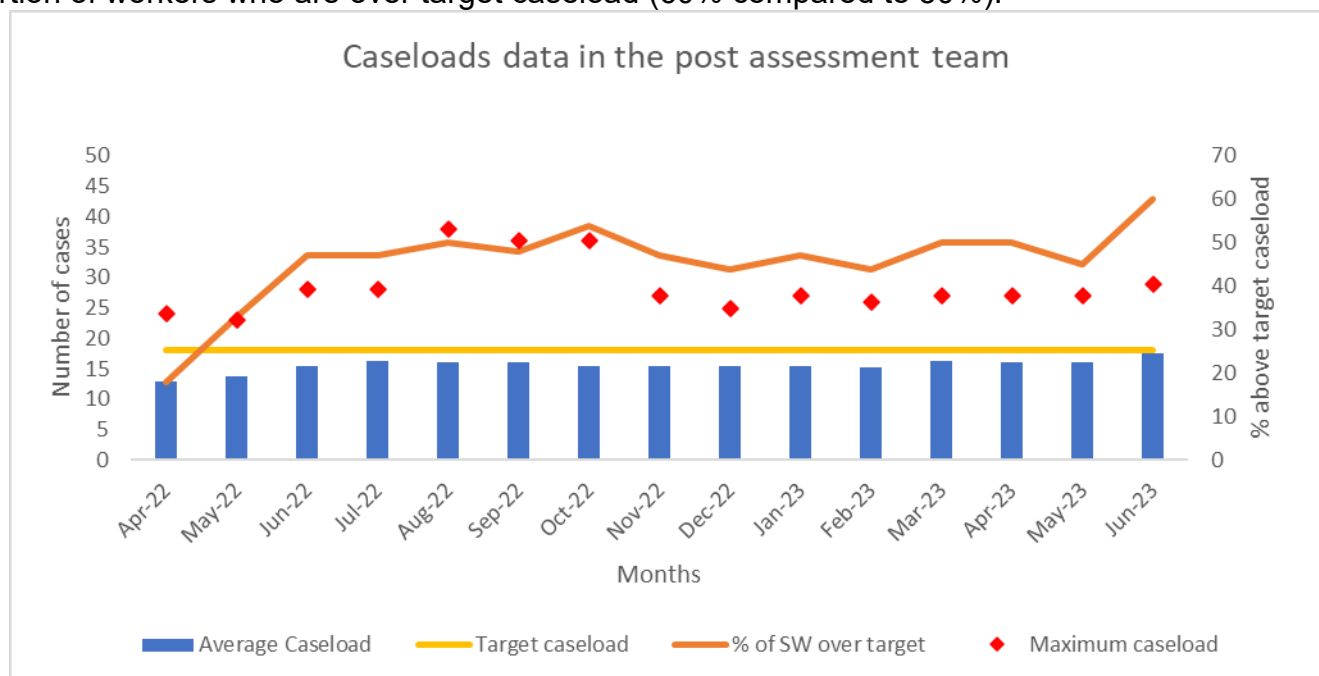
Actions:

- The average caseload across the assessment teams has increased slightly in Q1, following a similar trajectory to the previous two quarters. The percentage of social workers above the caseload target has seen a slight reduction this quarter, evidencing that the management action put into place at the start of quarter 1 is beginning to help stabilise the service. Senior managers have acted to secure agreement for the use of interim Assistant Team Manager (ATM) capacity, to help respond to the increasing volume of referrals, strategy discussions and S47 Enquiries. Although there has been challenges in recruiting to these posts, where they are in place, they are beginning to evidence increasing control of the workloads in the Teams, supporting improved throughout and consequently helping to reduce the percentage of social workers above caseloads. Work continues to recruit interim team managers to each of the teams, so the action plan can continue to be progressed, and reduced caseloads supported. Staffing turnover has also started to stabilise, which is anticipated will support continued workload stability across the Service.

PI code	PI name	Aim to	Value	Target	Status	Short Trend	Long Trend
ILAC2	Average Caseloads in Post Assessment teams	Minimise	17.6	18	Green	DET	DET

Comments:

- The snapshot shows post assessment social work teams (Area CSW Teams 1-8) have an average caseload of 17.6 a rise of 9% on the Q4 position. This remains below target. The highest caseload is 29, an increase of 7% on Q4, this is combined with a rise in the proportion of workers who are over target caseload (60% compared to 50%).



Actions:

- Caseloads have increased in the post Assessment Teams as the front door continues to receive high volumes of referrals, with a continuing increase in need evident. Emphasis continues of seeking to ensure that work moves through from the Assessment Teams. Despite investment in the peripatetic and project teams across the service areas, CSWT, 0-25 and adolescent teams are still carrying several vacancies, managing both sickness and performance which impact upon capacity. Actions to manage

this increase include a continuing focus on throughput of work, and ensuring families step down in a timely way to a lower level of intervention from Family Solutions or other EH support. The additional capacity provided by the project teams will continue into Q2 2023/24.

PI code	PI name	Aim to	Value	Target	Status	Short Trend	Long Trend
ILAC3	Completed initial child and family assessments which started as S47, where the child was visited within 1 working day.	Maximise	63%	90%	Red	DET	DET

Comments:

- The end of quarter snapshot shows that 63% assessments were visited in 1 day. This is an 8-percentage point decline from Q4. The outturn has fluctuated over the quarter, with 74% of visits in 1 day in May and 67% in April.

Actions:

- The continuing recruitment challenges across the whole Service, combined with the continuing upward trend in need and increased referrals, has meant that the Teams have struggled to meet one day visiting targets. Dip sampling and oversight by managers continues consistently and evidence that visits are mostly timely, but that the pressures across the Service impact on the timeliness in the recording visit write ups. Managers continue to ensure there is oversight of this and that children are seen.

PI code	PI name	Aim to	Value	Target	Status	Short Trend	Long Trend
ILAC4	Completed initial child and family assessments which started as S17, where the child was visited within 5 working days.	Maximise	44%	85%	Red	DET	DET

Comments:

- The end of quarter snapshot shows 44% S17 assessments were visited in 5 days. This is a decline compared to Q4 snapshot of 6 percentage points. Throughout the quarter there has fluctuating results for this measure, with a peak at 49% in May and 46% in April. The long-term trend over the last 12 months has been downward, with the rate dropping from 79% at the end of June 2022.

Actions:

- 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 to promote a timely response. Managers continue to ensure there is oversight of this and that children are seen in a timely way, and it is anticipated that the creation of Assistant Team Manager roles will support improvements in this area.

PI code	PI name	Aim to	Value	Target	Status	Short Trend	Long Trend
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	54%	65%	Red	DET	DET

Comments:

- The percentage of children for whom permanency has been agreed has reduced slightly to 54% and is now below target. The trajectory of this measure has been downward over the last 7 months.

Actions:

- Agreed permanence for children in care where long term fostering is the plan has been decreasing during the last 6 months. Whilst the service has taken action to ensure its permanency planning policy and process is robust, this has not yet resulted in a stabilisation of this permanence target. There are several factors that can impact this performance target, including the numbers of children coming into care, which has risen over the last 7 months, as well as the sufficiency of the placement market, which is particularly challenging currently. Managers will continue to review performance across these stability indicators and ensure strong oversight of children's plans through permanence tracking meetings and panels.

PI code	PI name	Aim to	Value	Target	Status	Short Trend	Long Trend
ILAC6	Rate of open CIN cases per 10,000	Goldilocks	462	Between 337 and 305 Mid-point 321	Red	DET	DET

Comments:

- 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 462 which is outside of the green zone of 305 to 337. There are 3022 children counted as Child in need, as per the Department for Education (DfE) definition. This has risen by 5% over the last quarter. 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. The rate of increase has slowed over the last 3 months, compared to the rate between December 2022 and March 2023, which saw a 21% rise. 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.

Benchmarking:

- Nationally there are 334 CIN cases per 10,000 population. This is slightly higher 347 for our statistical neighbour group and at 329 in the South East. All these rates have risen over the last year, but not as sharply as Medway’s current rise.

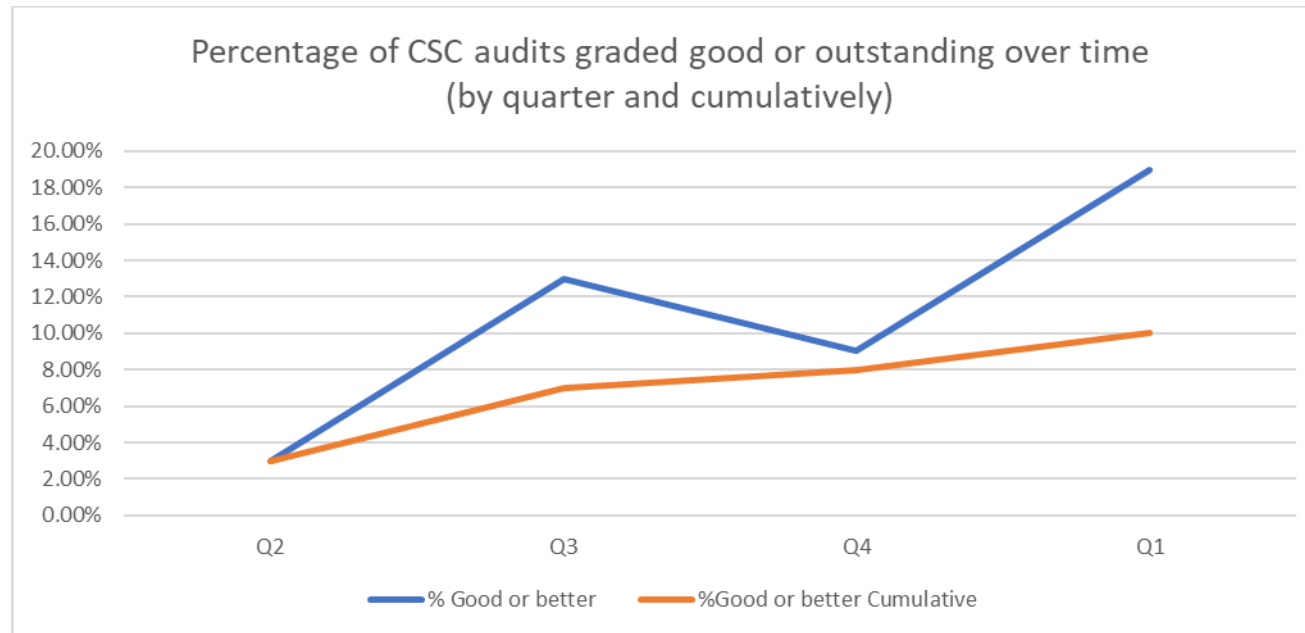
Actions:

- The Service has made a concerted effort over the last quarter to analyse the reason behind the growing trend in the uplift in child in need in the Service. There has been a significant increase in the volume of contacts which progress to referral, and subsequently to a plan, in comparison to the same period in the previous year, demonstrating a general uplift in need. Initial analysis indicates that there has been an increase in large family groups, which is impacting on the overall volume of open children in need across the service (CIN, Child Protection and Children in Care). Managers continue to focus on reviewing CIN work, ensuring progression and oversight, and supporting step down for those families who no longer meet the statutory threshold for intervention.

PI code	PI name	Aim to	Value	Target	Status	Short Trend	Long Trend
ILAC7	The percentage of CSC Audits graded good or outstanding	Maximise	19%	80%	Red	IMP	IMP

Comments:

- In Q1, 6 out of 31 (19%) of Audits were moderated as good or better (1 Outstanding, 5 Good), 21 (68%) required improvement and 4 (13%) were inadequate.
- The chart below shows the movement of good or better audit outcome by quarter and cumulatively. The cumulative trend is upward.



Actions:

- 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, which will only be achieved over a 3-5 year trajectory. Notwithstanding the challenge to deliver a high volume of good audit outcomes, audit and quality assurance is beginning to evidence significant

improvement in the quality of work across the Service, with a continuing reduction in inadequate audit gradings, and a continuing increase in audits graded as requires improvement.

- 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 22/23 and Q3 22/23, is a direct result of the pressures across the service created by sickness, vacancies and challenges recruiting. The onboarding of the Peripatetic and Project Teams in Q4 22/23, has helped to stabilise the Service, and consequently audit outcomes improved in this quarter. Work continues to drive practice quality, and ensure oversight of the work, with continuing auditing across the Service. In addition, the Practice Development Service continues to target support where needed and follows up progress on audit recommendations to support practice improvement.

PI code	PI name	Aim to	Value	Target	Status	Short Trend	Long Trend
N23	The percentage of children social care substantive posts not filled by permanent social workers	Minimise	27%	20%	Red	IMP	IMP

Comments:

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

Benchmarking:

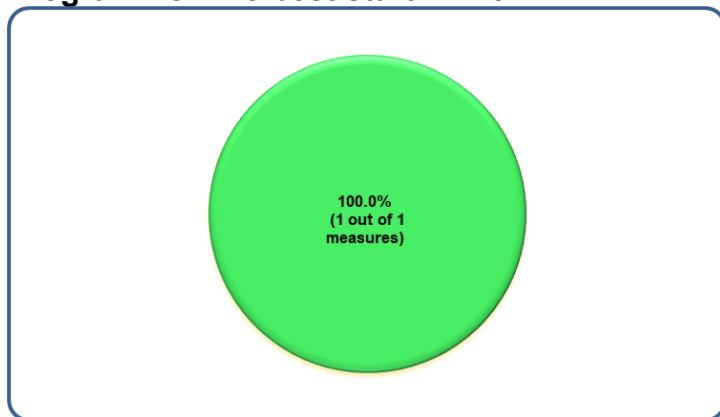
- The benchmarking data is derived from the Social Care workforce survey for data as at 30 September 2022. Medway has a higher vacancy rate than our statistical neighbours (19%) and the National rate (20%).

Actions:

- Recruitment and retention remain a significant challenge for Medway and many other local authorities.
- Extensive work is being undertaken to recruit permanent staff, including growing our own workforce through the offer of social work apprenticeships, an increase in newly qualified social worker appointments, step up to social worker programme and student placements. The service will also be undertaking a European social work campaign during Q2/Q3 to recruit experienced social workers.
- Vacancies continue to be backfilled through locum staff although this continues to be challenging. The Council has recruited locum project teams across parts of the service in order to ensure there is adequate staffing to support children, young people and families, although a small proportion of roles remain unfilled due to lack of suitable candidates from agencies, which is creating pressures across the workforce.

- The social work 'offer' was increased in October 2022 to remain competitive with the current market rates. 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 1
The measure met its target [PH16]

PI code	PI name	Aim to	Value	Target	Status	Short Trend	Long Trend
PH16	Percentage of pregnant women smoking at time of delivery (SATOD) (Q4 22/23)	Minimise	10%	16%	Green	IMP	IMP

Comments:

- 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 110 referrals in Q4 2022/23. This is a 26% decrease on Q4 2021/22 (148 referrals), which is likely to be reflective of several factors including: a reduction in SATOD prevalence locally, a reduction in maternities, 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.
- 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 Q4 2022/ 2023 performance statistics for these checks are:

- New Birth Review: 89% (Target – 91%)
- 6-8 Week: 93% (Target – 91%)
- 10-12 Months: 94% (Target – 91%)
- 2-2.5 Years: 87% (Target – 78%)
- Antenatal: 90% (Target – 91%)
- MCH exceeded its directorate targets for the 6–8-week, 10-12 month and 2-2.5 year mandated checks by the end of the quarter. MCH (the provider) reported an issue with their Rio case recording system which has had an adverse effect on data for the antenatal visits. Performance for New Birth reviews and Antenatal visits finished just under their targets of 91% but were still within an acceptable range at 89% and 90% respectively.
- The MCH School Nursing Service achieved a high level of participation in The National Child Measurement Programme (NCMP) for the 2021-2022 academic year - 91% of Medway's Year R and Year 6 children took part in the programme. For the

current academic year 2022-2023, MCH had achieved 92% coverage for year R pupils and 93% for year 6 pupils by the end of Term 4 (March 2023) with two terms to go (April – 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 Q4 of 2022/2023, the service received 529 contacts from children & young people.
- The Children and Young People (CYP) workforce training programme provided 19 courses which were delivered to a total of 141 professionals, 53 parents and 120 children in Q1 2023/2024.
- 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) and Trauma Informed Practice

- 12 April - families training at Bligh school: Three delegates.
- 16 and 17 May: 18 delegates
- 19/20/21 June - social care: 13 delegates per session
- 16 May - ACEs impacts at Inspire school: 35 delegates.
- 20 June - ACEs language at Inspire school: 35 delegates.

Connect 5 (C5)

- 26 April CYP C5 Session 1: Four delegates
- 12 May CYP C5 Session 2: Three delegates
- 6 June CYP C5 Session 3: Three delegates
- 16 June C5 workforce development session 2: Six delegates

Relationships and Sex Education (RSE) Refresher

- 8 June – Byron Primary: Nine teachers
 - 15 June -Phoenix Primary: 12 teachers
- Parent Statutory RSE Consultation Workshop

- 5 April – Woodlands Primary – 34 parents

Parent Online Safety

- 25 April – Parkwood primary: 19 parents

The team have also delivered internet safety workshops to St Thomas More primary school to their year 5 and 6 classes:

- Delivered to 120 children.

Statutory RSE Consultation

The team are consulting with parents on their views of statutory RSE and have so far engaged with 1052 parents and carers. This research will provide an evidence base for the support package for PSHE that we offer parents and carers.

Outcome: Older and disabled people living independently in their homes

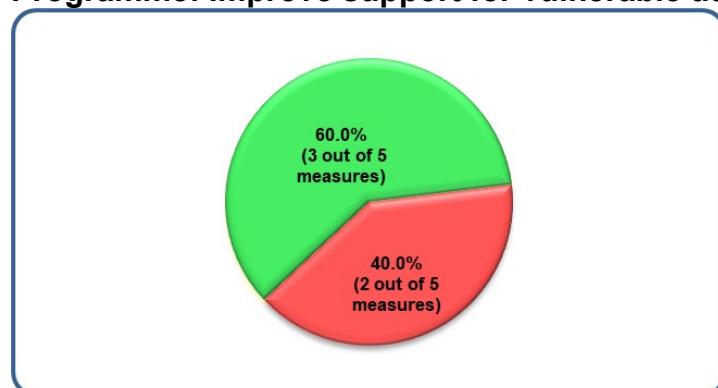
Strategic Risk Summary

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

Inherent score	Current score	Movement	Likelihood	Impact
AI	BII	→	Likely	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)]

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	STATIC	IMP

Comments:

- The proportion of clients receiving a long-term service that is a placement has remained static. There are currently 866 clients in residential or nursing placements, 30% of the 2904 long term clients. The numbers of long-term clients has risen by 1.4%, whereas the numbers in placements by 1%
- National data for 2021/22, is 29%, 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.

PI code	PI name	Aim to	Value	Target	Status	Short Trend	Long Trend
ASCOF 1C(2i)	Percentage of clients receiving a direct payment for their social care service	Maximise	25%	33%	Red	DET	DET

Comments:

- There has been a drop in the percentage of clients receiving a direct payment. At the end of June 517 clients out of 2039 are receiving an ongoing DP. Compared to last quarter the number of clients with a DP has dropped (0.5%) and the denominator has risen (1.5%).
- 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.
- Actions to improve performance.
 - Self-directed support (SDS) Team Manager to attend locality team meetings to improve confidence in making referrals.
 - SDS Rep to be present at ASC best practice panel.
 - Reviewing packages with brokerage that could be better managed by the service user and or their representative. These are usually package where frequent variations are made.
 - Resource is now focused on referrals that contribute towards the numerator.

PI code	PI name	Aim to	Value	Target	Status	Short Trend	Long Trend
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	55%	65%	Red	DET	IMP

Comments:

- There has been a 1 percentage point drop in the proportion of LD clients who live in their own home or with family.
- Of the current 623 LD clients 341 (55%) are in their own home or living with family and have had a review in the last 12 months. 124 (20%) are living in their own homes or with family but have not had a review in the last 12 months. This cohort is growing. 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, almost 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 current national outturn is 79 % and our statistical neighbours' is 81%. (21/22 data)
- The service is 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 is 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.

PI code	PI name	Aim to	Value	Target	Status	Short Trend	Long Trend
ASCOF 2A(1)	Permanent admissions to care homes per 100,000 pop – 18-64	Minimise	Redacted	4	Green	IMP	IMP

Comments:

- Please note the target for this measure is apportioned over the quarter.
- There has been between 1 and 5 admissions for this age group in the quarter. As such the figures are redacted in accordance with standard practice. However, this level of admissions is an improvement on Q4 and is below target.
- 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)
- The new Dynamic Purchasing System for supported living has come on stream which increases the types of available alternatives and should support limiting the numbers of individuals of working age admitted to permanent placements.

PI code	PI name	Aim to	Value	Target	Status	Short Trend	Long Trend
ASCOF 2A(2)	Permanent admissions to care homes, per 100,000 pop – 65+	Minimise	92.8	162.5	Green	IMP	IMP

Comments:

- Please note the target for this measure is apportioned over the quarter.
- The Q4 outturn has been increased to reflect recording updates, a further 21 clients have been recorded.
- There have been 43 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 301 admissions in total, currently 43 older people have been admitted. This means up to 32 clients could be retrospectively recorded and the measure stay below target.

- 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
- A significant number of admissions to care for older people occur on hospital discharge. There has been a marked increase in acuity of need. The service carries out first reviews in a timely manner to ensure that the placement is the right setting to meet care and support needs.

Project for this outcome:

Social Isolation:

- Q1 has seen the refresh of the council webpage on loneliness and isolation (see: https://www.medway.gov.uk/info/200667/loneliness_and_isolation_hub).
- The 'Loneliness and Social Isolation Hub' was launched in May and provides information, guidance, signposting, and advice for anyone experiencing or supporting someone experiencing loneliness and isolation. Since the launch of the hub, 102 individuals have signed up.
- The 12-18 June was National Loneliness Awareness Week. In partnership with Medway Social Isolation Action Alliance members, a weeklong campaign was held to raise awareness and promote some of the brilliant groups and activities available across Medway for people to access if they are feeling lonely.
- As part of the campaign, we funded two special events delivered by members of the alliance. The Summer Tea Dance at Jaspers Community Café and Music4Wellbeing run by the Neurological Network. Jaspers Summer Tea Dance had 28 attendees and The Music4wellbeing had 18 participants.
- We also hosted two internal events aiming to bring Medway Council Staff together. These included a successful 'craft and chat' session with seven attendees and a lunchtime 'walk and talk' with ten attendees – these were facilitated by the physical activity team.
- We attended the Tracy Crouch Over 55's Information and Advice event at the Victory Academy in June. This popular multi-agency event was well attended and provided an excellent opportunity to present information including the new loneliness hub launch.
- Additionally, two Loneliness and Social Isolation Training modules were delivered this quarter with thirty-five delegates attending.
- In response to the feedback from the employee survey, we now sit on the Council's Healthy Mind and Wellbeing working group and are planning to host hobby sessions run by staff, for staff. We recently put out a request to Council staff who may

have a hobby they would like to share, to come forward and offer to run a session. So far, we have offers for a book club, craft club, language club and a virtual lunchtime cook-a-long. These will be promoted internally and piloted to support staff to connect with people with likeminded interests.

- The Medway Social Prescribing Link Worker forum took place in June where we presented on the effects of Loneliness and Social Isolation, and the important role that Link Works have at tackling the issue within Medway.

Outcome: All children achieving their potential in education

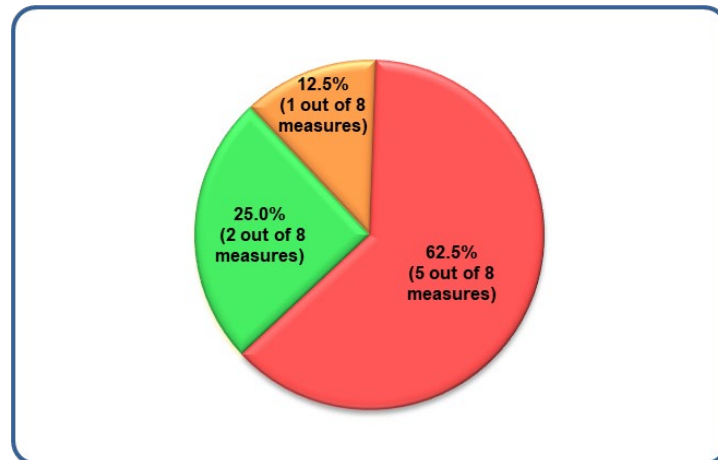
Strategic Risk Summary

SR39: Financial pressures on SEN Budgets Failure to deliver the High Needs Budget Recovery Plan

Inherent score	Current score	Movement	Likelihood	Impact
BII	BII CII	↓	Unlikely	Major

Performance Summary

Programme: High quality education provision for all



The total number of measures is 8

2 measures met their target [CASEISPEC Ofsted; SEKS4A8]

1 measure was slightly below target [SE2 OEPr]

5 measures were significantly below target [CA13; CASEIKS4 Ofsted; EDU3(b); SE KS2; SE KS2Mnt]

4 of the 5 red measures are deteriorating long term [CA13; CASEIKS4 Ofsted; EDU3(b); SE KS2]

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	0.018%	0.0125%	Red	IMP	DET

Comments:

- Please note, the annual target of 0.05% is apportioned across each quarter.
- For this academic year (starting September 2022) there have been 78 permanent exclusion processes started, 26 of these in the last quarter.

- So far, this academic year 46 permanent exclusions have been upheld, with 9 being upheld in the last 3 months. This represents 0.018% for the quarter and 0.09% for the academic year to date.
- Almost all the 46 exclusions have been from secondary schools; almost half (48%) are children in receipt of free school meals; almost one a quarter (24%) were receiving SEN support: none had an EHCP in place. Over half (52%) were male. One school accounted for over a fifth (21%) of all exclusions and over two fifths (41%) were for physical assault on a pupil.
- There are currently 15 processes awaiting an outcome and 17 have been resolved by not excluding the pupil.
- Exclusion Data is now published three times a year. The most recent published data is for the Spring 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%	0.026%
South East	0.004%	0.03%	0.014%
Medway (Spring term 2021-22)	0.00%	0.08%	0.04%

- Bench marking data will next be updated with a full year release covering the whole of the 2021/22 academic year in late 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 included a review of how alternative provision operates with a view to increase the range of outreach support for vulnerable learners. Commission for the new AP structure has concluded and is due to be implemented from Sept 2023.
- The new changes will align with the SEND AP paper. Medway Quality and Inclusion services and Headteachers are reviewing the Fair Access and Managed Moves protocols, with a view of for the new process to be operational from Sept 2023. These measures should allow early intervention and tracking of learners most vulnerable to suspension and exclusion. Training and outreach schedules in the new AP systems should encourage inclusive practice b schools at both operational and strategic levels.

PI code	PI name	Aim to	Value	Target	Status	Short Trend	Long Trend
CASEIKS4 Ofsted	Partnership measure: Percentage of all Secondary	Maximise	83%	90%	Red	DET	DET

	Schools judged good or better,						
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Comments:

- Of the 20 Secondary schools in Medway 2 are classed as outstanding, 13 are good, 1 requires improvement and 2 are inadequate. This means that 15 of 18 are good or better (83%) (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.)
- The following 4 schools have had inspections published in this quarter:

School	Previous grading	Current grading
Greenacre Academy	Good	Inadequate
Sir Joseph Williamson's Maths School	Outstanding	Outstanding
The Victory Academy	Good	Good
Walderslade Girls' School	Good	Inadequate

- Nationally this figure is 82% and the South East currently has 88% of schools graded good or better. Medway has moved from 4th to 12th 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). The School Effectiveness Team will continue to offer support to maintained schools via their termly visits.

PI code	PI name	Aim to	Value	Target	Status	Short Trend	Long Trend
CASEISPEC Ofsted	The percentage of special schools in Medway judged to be good or better	Maximise	100%	90%	Green	STATIC	STATIC

Comments:

- There have been no changes to Ofsted ratings this quarter.

PI code	PI name	Aim to	Value	Target	Status	Short Trend	Long Trend
EDU3(b)	The percentage of children who were persistently absent from school (22/23 academic year)	Minimise	27.1%	23.5%	Red	DET	DET

Comments:

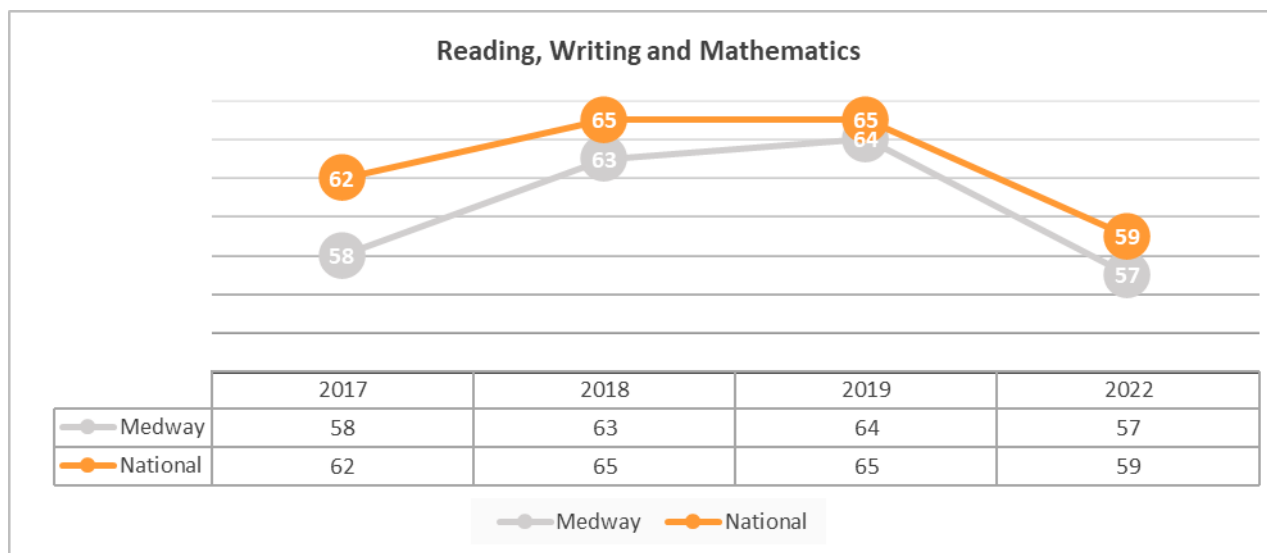
- Based on the most recent school census data (Autumn term 2022/23) Persistent absence has increased to 27.1% This equates to 11,275 children, in years 1 to 11, missing more than 10% of sessions.
- Primary school persistent absence is at 24.6% and Secondary at 29.4%.
- Please note, this information is different from that published “in real time” by the DfE on View Your Education Data (VYED). VYED does not have 100% take up and as such provides a guide only.
- National PA rates for the 2022/23 academic year (autumn term) are 24.2% and 24.5% for 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 were:
 - 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 4 core statutory duties for the local authority:
 - Communication and advice
 - Targeting support meetings
 - Multi-disciplinary support for families
 - Legal intervention
- Actions taken following the deep dive:
 - Attendance strategy has been redrafted.
 - Attendance action plan has been redrafted.
 - The first meeting of the Kent & Medway Attendance Alliance has taken place with ToR being agreed.
 - Advice shared and training delivered to Governor forums, schools and the Medway Parent Carers Forum.
 - Revised core offer and traded services completed and promoted to schools.

- To develop:
 - Cross directorate attendance strategy – coproduced with schools / trusts.
 - Create a user-friendly data set which cross references key contextual cohorts, enabling us to track and monitor the most vulnerable students (inc. CWSW, CME and EHE)
 - 3-year trend data for key measures required - this data is currently not available and cannot therefore be used to inform robust and realistic KPIs for the attendance strategy.
 - Data gaps continue to impact across strategic planning in Education and SEND.

PI code	PI name	Aim to	Value	Target	Status	Short Trend	Long Trend
SE KS2	The percentage of children who achieve the required standard or above in Reading, Writing and Mathematics at KS2 (21/22 academic year)	Maximise	57.0%	65.0%	Red	NA	DET

Comments:

- 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 1pp 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.

PI code	PI name	Aim to	Value	Target	Status	Short Trend	Long Trend
SE KS2Mnt	The percentage of children who achieve the required standard or above in Reading, Writing and Mathematics at KS2 in Maintained Schools Only (21/22 academic year)	Maximise	65%	70%	Red	NA	NA

Comments:

- 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 outperform 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%

PI code	PI name	Aim to	Value	Target	Status	Short Trend	Long Trend
SE2 OEPr	Partnership measure: Percentage of all Primary Schools judged good or better,	Maximise	92.0%	93.0%	Amber	STATIC	IMP

Comments:

- There are now 75 primary schools.
- Currently 69 schools are graded 'Good' or better; 7 are outstanding and 62 are good. 4 schools require improvement and 2 are inadequate.
- There has been 1 full inspection published this quarter. St Mary's Catholic Primary School maintained it's Good grading.
- There are 50 academies. Of these 88% are 'Good' or better (3 are 'Outstanding' and 41 are 'Good'), 4 require improvement and 2 are inadequate.
- Nationally, this figure is 90% and the South East currently is 91%. Medway is ranked 8th out of 19 LAs regionally.

PI code	PI name	Aim to	Value	Target	Status	Short Trend	Long Trend
SEKS4A8	Average attainment 8 score (21/22 academic year)	Maximise	47.9	47	Green	NA	IMP

Comments:

- 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 have undertaken focused visits to evaluate, with leaders, the effectiveness of their school curriculum to deliver required pupil outcomes. These evaluations have been used to inform the Education Service risk tracker that is reviewed three times each year with the school.

Projects for this outcome: There are no projects for this outcome.