

Council Priority: PEOPLE

Supporting residents to realise their potential.

Quarter 2 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

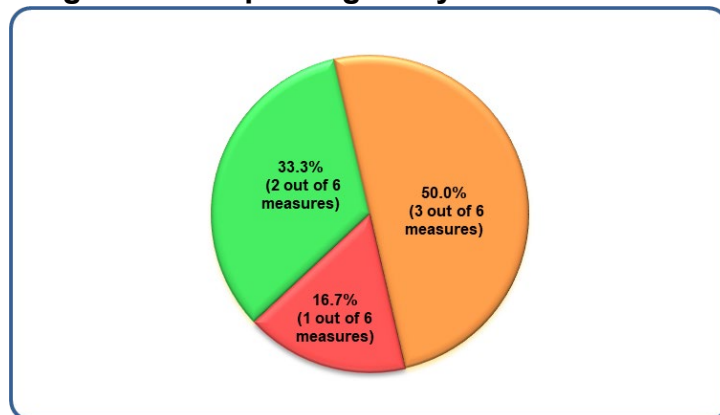
Outcome: Healthy and active communities

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 [PH13; PH14]

3 measures were slightly below target [PH15; PH17; PH8]

1 measure was significantly below target [PH23]

2 of the 3 amber measures are deteriorating long term [PH15; PH8]

The red measure is deteriorating long term [PH23]

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) (Q1 23/24)	Maximise	63	59	Green	DET	DET

Comments:

- This performance measure is measured a quarter in arrears.
- To the end of Q1 23/24, across the whole service, there have been 246 quit attempts providing a 57% success rate.
- In total, 73% of all quits in Q1 have come from the core stop smoking team. The core team's success rate is 59% and the lost to service rate is low at 16%. The service is looking into improving ways of obtaining qualitative feedback from service users.
- General Practitioner (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 the 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 the end of 23/24, 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 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 Reception Year (4–5-year-olds) Medway data saw a reduction from 31.5% in 20/21 to 23.7% in 21/22 in the overweight and obesity level, compared to the 21/22 England average of 22.3%. There was a smaller reduction for overweight and obesity prevalence in Year 6 (10-11-year-olds) compared

to Reception Year (4-5-year-olds), with Medway at 41.3% for Year 6 compared to the 21/22 England average of 37.8% (20/21 figure for Medway was 44.2%).

- 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 financial year include a whole school food programme, a large-scale healthy weight campaign, UNICEF Baby Friendly Accreditation for acute and community settings and many more. For a full list of healthy weight intervention, the [Whole System Obesity 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	67.11%	70%	Amber	DET	IMP

Comments:

- Breastfeeding initiation is recorded shortly after birth by the midwifery service. This performance measure represents babies' first feed and this can either be breastmilk or formula milk.
- The current breastfeeding initiation rate target is 70%. The most recent quarter's data is just below the target at 67.11%, and prevalence has been below the target for most of the last two years. There is no single reason for the reduction in prevalence and therefore no single solution to increasing the rate. The Infant Feeding Strategy group continues to work collaboratively to identify new opportunities and the strategy refresh gives the group the opportunity to think about long term actions.
- The infant feeding strategy was refreshed and endorsed by Cabinet at the end of September 2023. The refreshed strategy states six goals and includes several interventions aimed at increasing breastfeeding initiation and continuation rates. The six strategic goals are to:
 - ❖ Provide parents with the best possible care to build close and loving relationships with their baby and to feed their baby in ways which will support optimum health and development.
 - ❖ Fully understand the target audience and how we can best support infants, mothers, and families, in order to encourage breastfeeding and responsive feeding in Medway.
 - ❖ Widely promote the benefits of breastfeeding, responsive feeding, introducing solid foods at six months and the Healthy Start scheme.

- ❖ Ensure all residents and professionals know what in person and online infant feeding support services are available in Medway.
- ❖ Normalise and promote the benefits of breastfeeding to dads, partners, children, young people, grandparents and the wider support group around the infant and mother.
- ❖ Recruit more multi-sector partners to support the infant feeding agenda.
- Medway NHS Foundation Trust (MFT) is currently working hard to recruit a small team of specialist infant feeding roles to give expert and immediate feeding advice to new parents and support their newborns.
- At the end of September 2023, the refreshed 'Beside You' normalising breastfeeding website went live. Awareness and communication about this site will likely grow over the next few months.

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	2	Red	STATIC	DET

Comments:

- No new dementia friendly settings have been added in Q2 23/24. This is while the Dementia Action Alliance assess options for the ongoing support on settings to become dementia friendly following the stepping back of the Alzheimer Society.
- The group will be meeting in early November 2023 to validate the training approach outlined in the Q1 23/24 update whereby dementia friendly training will be delivered with the support of Public Health Workforce Development.
- At this meeting, we will also explore the possibility of transferring the dementia friendly accreditation process to a joint operation with the Kent Dementia Action Alliance, as this aligns with the invitation to co-host an awards event in summer 2024. This event will recognise the strides made by communities across Kent to improve their accessibility to those living with dementia.

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	73.2%	75.0%	Amber	IMP	DET

Comments:

- Q2 23/24 has shown a continuous progress of children and young people (CYP) achieving a lifestyle improvement. There were fewer programmes due to the summer holidays, however, the team worked closely with the Holiday, Activities and Food (HAF) programme to ensure that there was an increase in CYP becoming physically active during school breaks and holidays.
- We plan to deliver more programmes in Q3 with an anticipation of more referrals through the annual National Child Measurement Programme (NCMP). A further review of the CYP programmes has been carried out with four recommendations:
 - ❖ Six week shortened programme to assess completion rate and commitment to the programme.
 - ❖ Engaging more schools to deliver our programmes.
 - ❖ Referral pathway from Tier 3 services.
 - ❖ CYP digital offer.
- The first two recommendations will be explored and piloted in Q3 and Q4, 23/24.

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 be 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). The specific release date of this data is to be confirmed.

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

- In September 2023 the Medway Health and Wellbeing Board reviewed the proposed annual priorities for the Medway Healthy Network. These include Medway being awarded Sustainable Food Place status. This award is designed to recognise and celebrate the success of those places taking a joined up, holistic approach to food. Medway has submitted its application for the bronze status. A second priority of the network is to refresh the Infant Feeding Strategy. This document has been co-developed with residents and key stakeholders, using key insights and detailed data analysis. The strategy was formally adopted by Medway Council at the cabinet meeting on 26 September 2023. The final priority of the network is to enhance the reach of the Physical Activity Alliance. The next alliance meeting will be taking place in November 2023 with over 50 people booked to

attend from a wide range of partner organisations. These partners share the same passion for supporting adults and children to take part in regular physical activity.

- Food for Life Medway is a three-year programme commissioned by Medway Council's Public Health team, working with schools to champion healthy and sustainable food through the whole school approach. Food for Life is a part of Medway's whole-systems approach to tackle and prevent childhood obesity. To achieve a Food for Life Award, schools submit evidence across four pillars: Food Quality; Food Leadership & Culture; Food Education; and Community & Partnerships. Each completed criteria demonstrates a significant practical change that can be sustained over time. In its first year Food for Life Medway is proud to share that:
 - ❖ 20 schools have enrolled with Food for Life. This includes 16 primary schools, one special educational needs (SEN) school, two secondary schools and one alternative provision.
 - ❖ One Special Educational Needs school achieved a Food for Life Bronze Award.
 - ❖ Nine schools are actively working towards a Food for Life Award.
 - ❖ 104 award criteria have been achieved.
 - ❖ Eight criteria submissions have been ranked as evidence of national best practice.
 - ❖ 36 school and Medway Council staff have participated in cooking and growing training.
 - ❖ 97% of staff felt confident to deliver food and growing activities after training.

Outcome: Resilient families

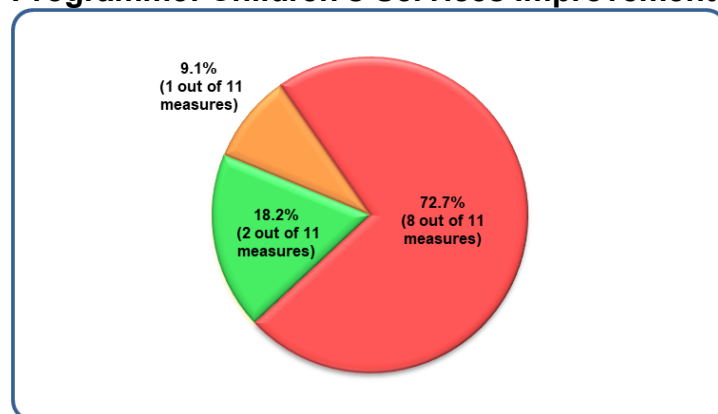
Strategic Risk Summary

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; ILAC3; ILAC4; ILAC5; ILAC6; 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	407	450	Green	DET	IMP

Comments:

- The Q2 23/24 outturn has risen by 8 days (2%) since last quarter (399), but remains below target.
- Medway's 3-year average is 40 days, which is 11% longer than the national figure and 9 days (2%) longer than the South East figure.
- The Q4 22/23 result has been updated to account for the latest information.

- At the time of writing the recorded Q1 23/24 outturn (399) is considerably reduced against the Q4 22/23 result (526); the difference is 127 days.

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	76.3	Between 65 and 73 Mid-point 69.0	Amber	DET	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 499 CiC, which is a rate of 76.3 per 10,000. There has been a rise since June of 4% (21 children). Although part of this rise is driven by the increase in the numbers of unaccompanied asylum-seeking children taken into the Council's care, it should be noted that there are 57 (13%) more children in care than in September 2022.

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 CiC per 10,000 has increased and is above the national rate. It is now over the top end of the target range.
- There are 23 more children in care at the end of Q2 than at the end of Q1, with 60 coming into care over the quarter. August alone saw 33 children come into the care of the local authority, a significant peak for one month.
- The number of Unaccompanied Asylum-Seeking Children (UASC) increased during this quarter and equated to 16 of the 60 children and young people.

- 22 of the new entrants coming into care were under 5 and came into care by way of an interim care order, evidencing that decision making is appropriate given these decisions were heavily scrutinised and endorsed by the court.
- Many care proceedings continue to take much longer than they should, with Court and judicial capacity continuing to be a factor impacting on timely final hearings. This adversely affects the timescale and contributes to the increase in the rate of CiC.

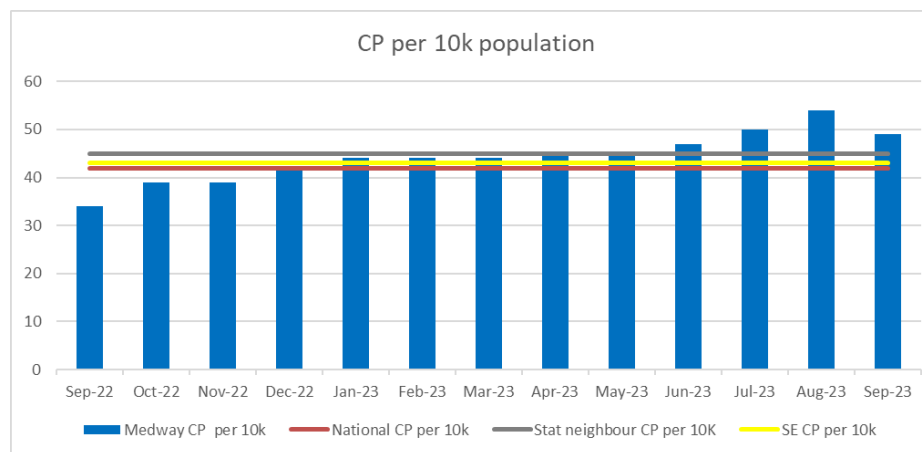
PI code	PI name	Aim to	Value	Target	Status	Short Trend	Long Trend
CSC0006	Number of CP per 10,000 children	Goldilocks	49.0	Between 32 and 42 Mid-point 37.0	Red	DET	DET

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 320 children on a CP plan. This equates to a rate of 49 per 10,000, a rise of 4% on the Q1 rate, created by an increase of 13 children with a plan. Over the quarter, the numbers of children on a CP plan rose to 355, the highest it has been since August 2020.

Benchmarking:

- Medway now has a higher rate of CP than the latest National rate (42) and Statistical neighbour rate of 45 per 10,000.
- The South East rate is 43.



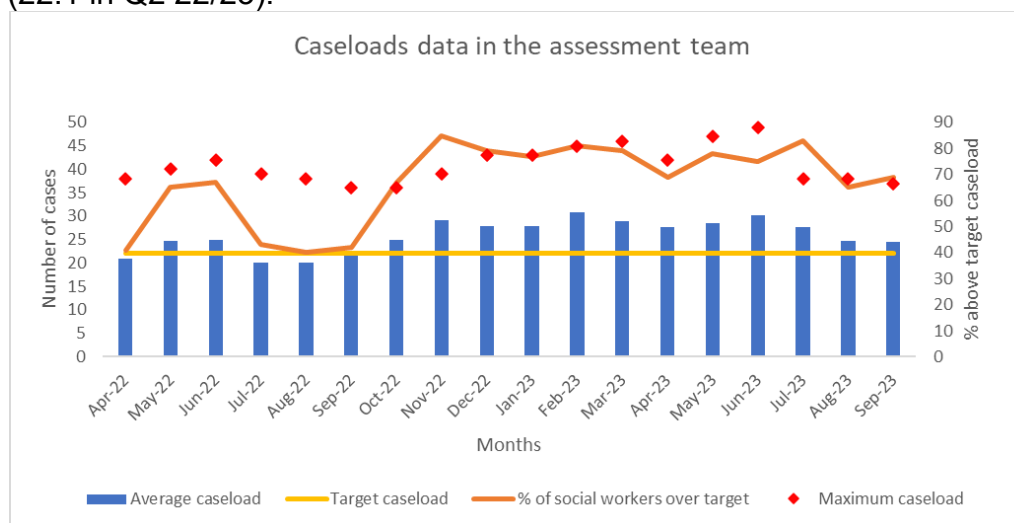
Actions:

- The number of children subject to a CP plan has increased and remains above statistical neighbours and national comparators.
- Senior managers and child protection 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	24.6	22	Red	IMP	IMP

Comments:

- The average caseload in the assessment teams is 24.6, an 18% drop compared to the June snapshot (30.1).
- The percentage of social workers over target caseload has dropped from 75% to 69% and the maximum caseload has also seen a positive downward movement over the quarter to 37.
- Whilst the Q2 23/24 data is showing an improvement on Q1 23/24 it should be noted that they are similar but slightly adverse to the same period last year (22.1 in Q2 22/23).



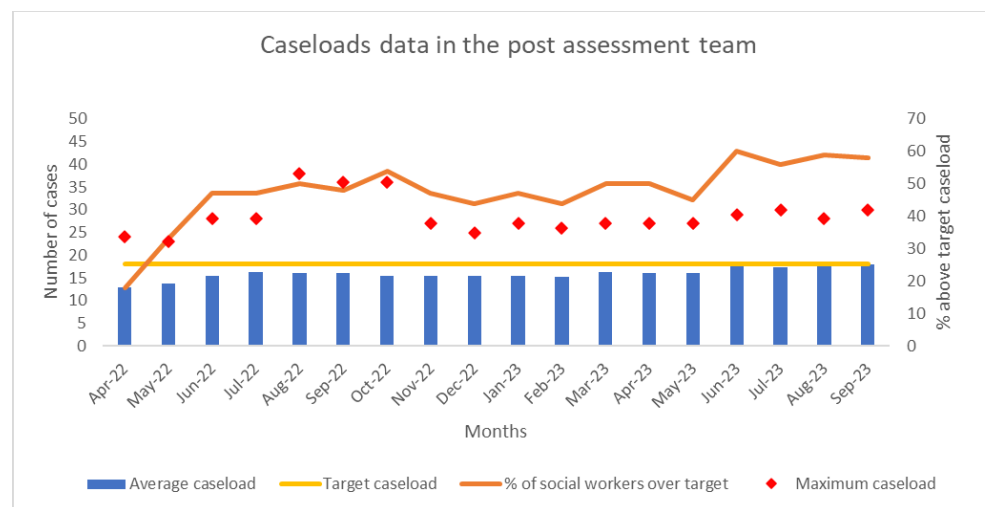
Actions:

- As expected in Q2, the average caseload across the assessment teams lowered.
- Similarly, there was a decrease in the percentage of social workers over target caseload and in the maximum caseload held.
- The lowering of referrals throughout August, the addition of assistant team managers (increased management oversight) and the decrease in social work vacancies have directly impacted upon performance.
- Managers across the assessment service continue to focus on timely recording, progressing assessments without drift or delay and to improve quality of practice.

PI code	PI name	Aim to	Value	Target	Status	Short Trend	Long Trend
ILAC2	Average Caseloads in Post Assessment teams	Minimise	17.9	18	Green	DET	DET

Comments:

- The snapshot shows post assessment social work teams (Area Children’s Social Work (CSW) Teams 1-8) have an average caseload of 17.9. This is a rise of 2% on the Q1 23/24 position (17.6). This remains just below target (18).
- The highest caseload is 30. This is an increase of 3% on Q1.
- There has been a small fall in the proportion of workers who are over target caseload (58% in September 2023 compared to 60% in June 2023).



Actions:

- Caseloads have still increased in the post assessment teams.
- Despite investment in the peripatetic and project teams across the service areas, CSW teams, 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 at performance clinics, reviewing Children In Need (CIN) work, and ensuring families step down in a timely way to a lower level of intervention from Family Solutions or other Early Help (EH) support. The additional capacity provided by the project teams will continue into Q3 23/24.

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	48%	90%	Red	DET	DET

Comments:

- The Q1 23/24 outturn has been revised upwards to 71% to account for retrospective writing up.
- The end of Q2 23/24 snapshot shows that 48% of assessments were visited in one working day.
- This is a 23 percentage point (pp) decline from Q1 23/24.
- The outturn has fluctuated over the quarter, with 59% of assessments visited in one working day in July and 66% in August.

Actions:

- The service saw a high number of referrals received in July and September, which has impacted on the timeliness in the recording of both one and five working day visits.
- As seen in Q1, once recorded, performance does increase, however, there remains an initial delay.
- As well as the high number of referrals, recruitment challenges across the service remain, with the knock-on impact of some practitioners holding caseloads above target.
- Managers continue to dip sample and discuss visits with practitioners to ensure that children are seen.
- Timely recording remains a priority across the service.

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	43%	85%	Red	DET	DET

Comments:

- The Q1 23/24 snapshot has been updated to 55% to account for retrospective writing up.
- The end of quarter snapshot for Q2 23/24 shows that 43% of S17 assessments were visited within five working days.
- This is a decline compared to the Q1 snapshot of 12 percentage points.
- Throughout the quarter, the results have been in decline, from 58% in July to 51% in August.
- The long-term trend over the last 12 months has been downward, however September 2023 is stronger than the 39% recorded in September 2022.

Actions:

- The service saw a high number of referrals received in July and September, which has impacted on the timeliness in the recording of both one and five working day visits.
- As seen in Q1, once recorded, performance does increase, however, there remains an initial delay.
- As well as the high number of referrals, recruitment challenges across the service remain, with the knock-on impact of some practitioners holding caseloads above target.
- Managers continue to dip sample and discuss visits with practitioners to ensure that children are seen.
- Timely recording remains a priority across the service.

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	49%	65%	Red	DET	DET

Comments:

- The percentage of children for whom permanency has been agreed has reduced to 49% from 54% in Q1 23/24. and remains below target (65%).
- The trajectory of this performance measure has been downward over the last year, having dropped by 17 percentage points or 26% since Q2 22/23 (66%).

Actions:

- Agreed permanence for children in care where long term fostering is the plan has been decreasing during the last six 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 seven months, as well as the sufficiency of the placement market, which is currently particularly challenging.
- Managers continue to ensure strong oversight of children's plans through permanence tracking meetings and panels.
- A focused piece of work will also now take place to identify what, if any, themes of patterns may have led to the placement changes for our children and young people.

PI code	PI name	Aim to	Value	Target	Status	Short Trend	Long Trend
ILAC6	Rate of open CIN cases per 10,000	Goldilocks	413	Between 305 and 337 Mid-point 321	Red	IMP	DET

Comments:

- Currently the rate is 413 which is outside of the target range which is between 305 and 337.
- There are 2,705 children counted as Child In Need (CIN), as per the Department for Education (DfE) definition. This has reduced compared to last quarter by 317 children (10%).
- The number of CIN cases has dropped steadily over the last three months but remains higher than the National and South East rates.
- A CIN 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 child protection plan or are having an assessment.

Benchmarking:

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

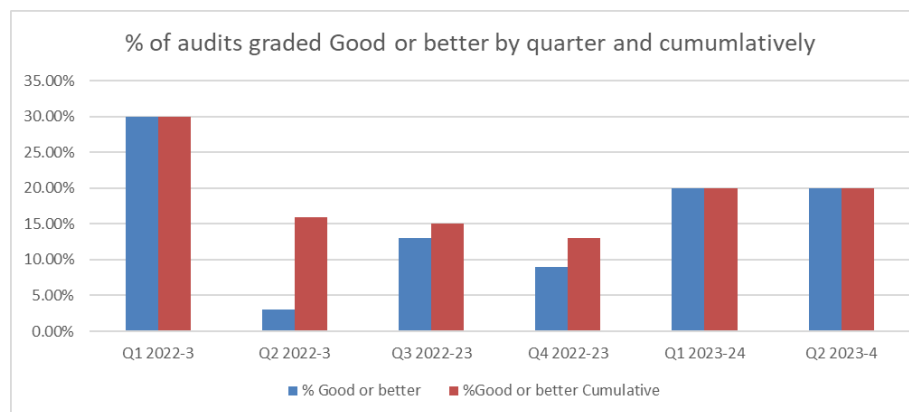
Actions:

- The service has made a concerted effort over the last quarter to analyse the reason behind the growing trend in the uplift in CIN 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	20%	80%	Red	STATIC	IMP

Comments:

- Q1 figures have been revised following the completion and moderation of all audits conducted in April, May and June. This has added 14 audits to the Q1 total.
- There were 15 audits in Q2. Of these three (20%) were rated as good, and of the remaining 12, eight required improvement and four were inadequate.
- The chart below shows the movement of good or better audit outcomes by quarter and cumulatively. Please note, the cumulative total resets at Q1 each year.



Actions:

- As part of Medway's improvement journey, quality assurance activity encompasses a combination of monthly reflection and learning audits and child focused dip samples, as well as additional sources of assurance such as thematic audits and case reviews. This consistent spine of monthly core auditing has been built upon within an expanded Learning & Accountability framework that regularly includes a variety of quality assurance activity. There is an increasing focus on a move towards evaluating the quality of practice rather than simply testing compliance.
- There is an expected benchmark target of 45 audits per quarter (15 per month) using our Reflection & Learning tool and these audits have enabled senior leaders to have sufficient understanding of the strengths and areas for improvement for the service.
- The challenge to deliver a high volume of good audit outcomes 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 and above. The body of data and insight drawn from audits continues to be developed and the Practice Development Service is operating with more detailed and targeted knowledge and understanding of where the strengths and weaknesses exist within the system and have been able to deliver specific and targeted interventions more successfully via the Practice Development Leads who are linked with service areas.
- The focus of quality assurance activity is to learn from audit findings and improve the quality of practice. The coaching-oriented approach of the Practice Development Leads (PDLs) is supporting not only practice improvements but also includes support and development to team managers and practitioners.

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	30%	20%	Red	DET	DET

Comments:

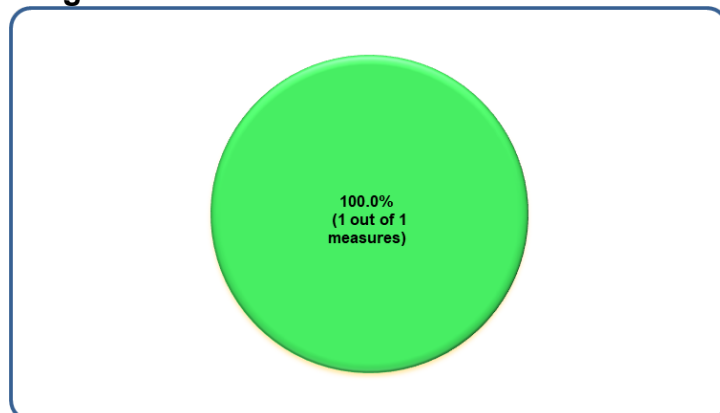
- Data is as of August 2023.
- There has been a rise in the vacancy rate in children social care (CSC) substantive posts not filled by permanent social workers since June 2023.

Benchmarking:

- The benchmarking data is derived from the Social Care workforce survey for data, as of 30 September 2022. Medway has a higher vacancy rate than both 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 programmes and student placements.
- A cohort of newly qualified social workers started in September 2023. The service will also be undertaking an overseas social work campaign during Q3 to recruit experienced social workers. It is expected that these staff will be onboarded towards the beginning of April 2024.
- 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. Work is now being undertaken to replace the project teams with agency staff on memorandum of cooperation (MOC) rates by January 2024.

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). (Q1 23/24)	Minimise	9.4%	16%	Green	IMP	IMP

Comments:

- Data runs a quarter arrears.
- 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 108 referrals in Q1 23/24. This is a 34% decrease on Q1 22/23 (163 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.

- The 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 March 2024.

Actions:

- As part of the NHS's 'Saving Babies' Lives Version Three: 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). In April 2023, the government announced the rollout of a financial incentives scheme for all pregnant smokers by the end of 2024. This programme will offer all pregnant smokers the best chance of becoming, and staying, smokefree. We shall be working on rolling this out to our Medway residents in the coming months.

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 Q1 2023/2024 performance statistics for these checks are:
 - ❖ New birth review: 82% (target – 91%)
 - ❖ 6-8 week: 91% (target – 91%)
 - ❖ 10-12 months: 94% (target – 91%)
 - ❖ 2-2.5 years: 84% (target – 78%)
 - ❖ Antenatal: 93% (target – 91%)
- MCH met or exceeded its targets for the 6-to-8 week, 2-to-2.5 year, and antenatal checks during Q1 2023/24. Performance was below target for the new birth review. MCH report that staff vacancies in the child development team has impacted capacity to meet the 10-to-12-month check. They also report that the bank holidays in April and May made it more difficult to deliver the new birth review to target timescales. However, overall coverage (including those seen outside of target timeframe) remains high with 98% coverage for new births and 94% for 10 to 12 months.

- The MCH School Nursing Service achieved a high level of participation in The National Child Measurement Programme (NCMP) for the 2021-2022 academic year. In total, 91% of Medway's Reception Year and Year 6 children took part in the programme.
- 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 2022/2023, the service received 529 contacts from children and young people (CYP).
- The CYP workforce training programme provided 11 courses which were delivered to a total of 139 professionals and 5 parents in Q2 23/24. These training courses have been developed to deliver support to Medway's CYP workforce (teachers, youth workers, youth group leaders, and charity workers) in the work that they do to improve the health and wellbeing of CYP. Training includes full and half day in-person sessions, online sessions, 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

- ❖ 11/12th July 2023: Multi agency - 15 delegates.
- ❖ 26/27th July 2023: Woodlands Hub - 11 delegates.
- ❖ 5/6/7th September 2023: Social care - 9 delegates.
- ❖ 28th September 2023: Social care - 16 delegates.

Alumina

- ❖ 20th & 21st November 2023: 13 delegates.

Connect 5 (C5)

- ❖ (Session 1) 26th September 2023: 15 delegates.

Resilience

- ❖ 21st September 2023: Multi agency - 14 delegates.

Staff Wellbeing

- ❖ 21st September 2023: Cliffe Woods Primary School - 29 delegates.

Statutory RSE Consultation

- ❖ The team are also consulting with parents on their views of statutory relationship and sexuality education (RSE) and have so far engaged with 1,052 parents and carers. This research will provide an evidence base for the support package for PSHE that we offer parents and carers.
- ❖ In addition to the training listed above the team has also published a local report following the statutory RSE consultation conducted in Q1. Gaining the local views of parents and carers, this document has been well received by partners and has gathered a great deal of positive local and national interest including charities such as 'Brook'. The team has now also developed a schedule of parent workshops informed by the report. These sessions will be delivered in a block of 34 workshops to parents and carers on the following topics:
 - Basic self-harm awareness
 - Supporting your child's mental health
 - Managing your own mental health
 - Puberty and growing up
 - Sexual health
- ❖ The course will be delivered throughout the community with support of schools and partner agencies.

Outcome: Older and disabled people living independently in their homes

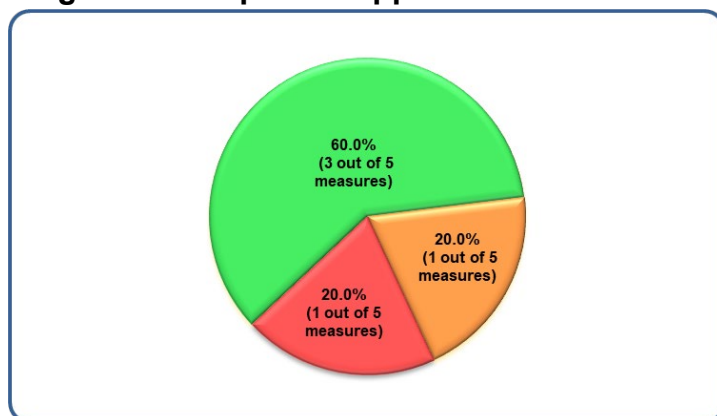
Strategic Risk Summary

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)]

1 measure was slightly below target [ASCOF 1G (n)]

1 measure was significantly below target [ASCOF 1C(2i)]

The red measure 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	29%	30%	Green	IMP	IMP

Comments:

- The proportion of clients receiving a long term service that is a placement has reduced.
- There are 880 clients in placements.
- However, whilst this is an improvement it is a product of there being a smaller rise in the number of placements in relation to the rise in the number of clients.
- There are currently 880 clients in residential or nursing placements, which is 1.6% more than last month.
- There are 3,039 long term clients, a rise of 4.6% compared to the 2,904 long term clients at the end of Q1 23/24.

Benchmarking:

- National data for 21/22, is 29%, a slight decrease from 20/21.

Actions:

- 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 continues to monitor the number of placements made, particularly from hospital and to undertake the first reviews in a timely manner as this is 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	24%	33%	Red	DET	DET

Comments:

- There has been a further drop in the percentage of clients receiving a direct payment (DP).
- At the end of July there were 511 clients out of 2,317 receiving an ongoing DP. The Q1 23/24 figure for the performance measure was 25%.
- Compared to last quarter, the number of clients with a DP (numerator) has dropped by 1.1% and the denominator has risen by 4.8%.

Benchmarking:

- 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 20/21 results.

Actions:

- We continue to receive a disproportionate number of referrals for cases that contribute to the numerator. To date only 9% of the referrals received by the DP team relate to this measure. The remainder is made up of payment to carers and children, neither of which are included in the numerator.
- We have agreed that referral targets will be set for locality teams.
- The actions below continue:
 - ❖ Self-directed support (SDS) Team Manager to attend locality team meetings to improve confidence in making referrals.
 - ❖ SDS Representative to be present at Adult Social Care (ASC) best practice panel.

- ❖ Reviewing packages with brokerage that could be better managed by the service user and or their representative. These are usually packages 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	62%	65%	Amber	IMP	IMP

Comments:

- There has been a 7 percentage point (pp) rise in the proportion of learning disability (LD) clients who live in their own home or with family.
- Of the current 619 LD clients 383 (62%) are in their own home or living with family and have had a review in the last 12 months.
- 98 (16%) are living in their own homes or with family but haven't had a review in the last 12 months. This is an improvement (the figure has reduced) of 5pp on last quarter.
- 78% are in the desired type of accommodation.
- There are 138 clients not living with their families or in their own homes. Just over 81% 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.
- These figures represent a positive outcome in terms of where people are living, and the work done by the teams to complete reviews.

Benchmarking:

- The current national outturn is 79% and our statistical neighbours' is 81% (21/22 data).

Actions:

- The service is focusing on completing reviews over the next three 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 annual target (16) for this performance measure is apportioned across each quarter (4 per 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 Q1 and is below target. Although we may see the Q2 figure rise as placements are recorded in the coming weeks.

Benchmarking:

- Nationally the benchmark (21/22 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 per 100,000 for the full year (and 3.8 per 100,000 for each quarter).

Actions:

- The new Dynamic Purchasing System for supported living is now in operation, which has increased the types of available alternatives and should support limiting the numbers of individuals of working age admitted to permanent care homes.

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	114.4	162.5	Green	IMP	IMP

Comments:

- Please note the annual target (650) for this performance measure is apportioned across each quarter (162.5 per quarter).
- The Q1 outturn has been increased to reflect recording updates; a further 34 clients have been recorded.
- There have been 53 admissions in Q2 23/24. Whilst this figure and the rate per 100,000 population is lower than the target, retrospective inputting may raise this figure.
- Our target rate allows for 301 admissions in total. Currently 130 older people have been admitted. This means up to 20 clients could be retrospectively recorded and the performance measure would stay below target.

Benchmarking:

- The National rate of admissions (21/22 data) is 538.5 for the full year. This equates to 134.6 per quarter.
- Our statistical neighbour's outturn is 585.6 for the full year (or 146.4 per quarter).

Actions:

- 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:**Loneliness and Social Isolation:**

- Phase one of the Medway Together Pledge campaign soft launched in September 2023. The campaign aims to raise awareness of, and reduce, loneliness and social isolation, by empowering individuals, groups, organisations, and businesses across Medway to make a pledge to increase connection and reduce loneliness. This could be initiating a conversation with a neighbour, hosting a coffee morning or volunteering in their community. Phase two of the campaign will invite those who have made a pledge to provide some additional characteristics information so we can determine if the campaign is reaching the right demographics. Taking part in this will be optional. Phase two of the campaign will begin once data protection impact assessment (DPIA) sign off is received. The campaign will take place from September 2023 to June 2024, and will culminate in an exhibition of pledges, case studies, and outcomes, which will be showcased as part of Loneliness Awareness Week 2024.
- Four Loneliness and Social Isolation training modules were delivered in Q2 23/24 with 44 delegates attending. The team also represented Public Health at Chatham Carnival, the Lordswood Library re-launch, and Copperfield Fun Day.
- The implementation of a Medway and Swale directory of services has started with the aim to go live in the new year. Medway Voluntary Action has been commissioned to manage the project and we are working in partnership with their new Project Manager to implement the platform. This has been funded by the Health and Care Partnership (HCP) as part of a wider Social Prescribing project to invest in voluntary and community run activities. Two models of investment will be implemented:
 - ❖ 1. Payment for referral – a one-off direct payment will be made to an organisation when a social prescriber refers someone to them, and they accept the referral.
 - ❖ 2. Seed funding – a portion of the overall funding will be allocated to pump priming new initiatives based on specific, identified needs. We will be working closely with social prescribers and voluntary and community sector (VCS) partners to provide access to small-scale funding to fill gaps in service provision.
- Finally, an evaluation partner will be engaged to demonstrate the project's impact with the aim of ensuring continued funding beyond the initial year.
- The South East [Social Prescribing host map](#) went live in September 2023. This project, coordinated by the National Association for Social Prescribing, has developed an interactive map that not only marks the South East's Social Prescribing service locations but also provides details on each service, including eligibility criteria and how to access support. The map allows

residents and professionals to search for their local service. We have been working with the leader's consortium to ensure that all Medway providers are included on the map.

Outcome: All children achieving their potential in education

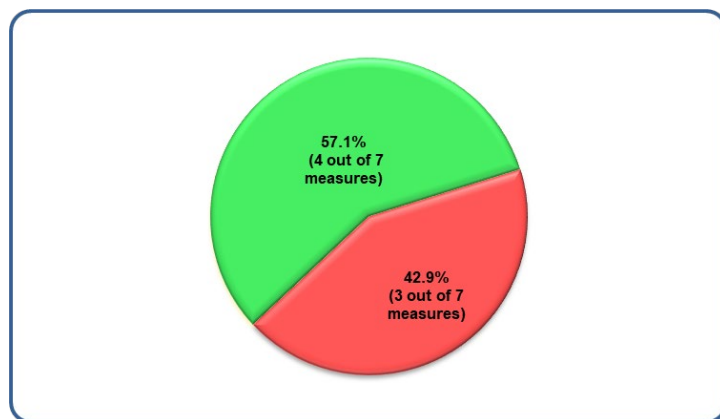
Strategic Risk Summary

SR39: Failure to deliver the High Needs Budget Recovery Plan

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

Performance Summary

Programme: High quality education provision for all



The total number of measures is 8.

1 measure is not available this quarter [CA13]

4 measures met their target [CASEISPEC Ofsted; EDU3(b); SE2 OEP; SEKS4A8]

3 measures were significantly below target [CASEIKS4 Ofsted; SE KS2; SE KS2Mnt]

3 of the 3 red measures are deteriorating long term [CASEIKS4 Ofsted; SE KS2; SE KS2Mnt]

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	NA	0.0125%	NA	NA	NA

Comments:

- Please note the annual target (0.05%) for this performance measure is apportioned across each quarter (0.0125% per quarter).
- NB reporting by financial quarter, for this performance measure, gives an unrepresentative picture; data straddles two academic years and includes July and August when schools are shut for six weeks.
- Whilst there were no upheld exclusions in Q2 23/24, 17 exclusion processes were started. Of these 16 are still awaiting outcomes, and 7 apply to the 23/24 academic year.

- For the academic year (starting September 2022) 91 permanent exclusion processes were started.
- So far, in the 22/23 (last) academic year, 54 permanent exclusions were upheld. This represents 0.11%.
- The 22/23 published data is expected to show a deterioration compared to 21/22.
- Almost all the 54 exclusions in the 22/23 academic year have been from secondary schools; of the children permanently excluded from school, 39% were in receipt of free school meals, 60% were receiving special educational needs (SEN) support, none had an Education, Health and Care plan (EHCP) in place, and over half (55%) were male. One school accounted for 19% of all exclusions, and 37% of all exclusions were for physical assault on a pupil.
- There are currently 26 processes awaiting an outcome. 18 exclusions in the 22/23 academic year have been resolved by not excluding the pupil.

Benchmarking:

- The most recent benchmarking data is for the 21/22 academic year.
- The table below shows National and local data:

	Primary exclusion rate	Secondary exclusion rate	Total exclusion rate
National	0.02%	0.16%	0.08%
Medway (2021/22)	0.00%	0.18%	0.08%

Actions:

- 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 alternative provision (AP) structure has concluded, and new services have been transitioned in since September 2023.
- Medway Quality and Inclusion services and headteachers have reviewed the Fair Access and Managed Moves protocols which are operational from September 2023. These services support early intervention and tracking of learners most vulnerable to suspension and exclusion. Training and outreach schedules in the new AP systems support inclusive practice in schools.

PI code	PI name	Aim to	Value	Target	Status	Short Trend	Long Trend
CASEIKS4 Ofsted	Partnership measure :Percentage of all Secondary Schools judged good or better,	Maximise	83%	90%	Red	STATIC	DET

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. The inadequate judgment applies to the Waterfront University Technical College (UTC) from its time as Medway UTC.
- There have been no inspections published during Q2 23/24.
- Neither The Leigh Academy nor Maritime Academy have had an Ofsted inspection, and so they are not counted in this performance measure, in either the numerator or denominator.

Benchmarking:

- Nationally this figure is 82% and the South East currently has 87% of schools graded good or better.
- Medway is 12th in the South East.

Actions:

- 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 continues 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 during Q2 23/24.

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	22.9%	23.5%	Green	IMP	IMP

Comments:

- Based on the most recent school census data (Autumn and Spring terms 2022/23) persistent absence (PA) has decreased to 22.9%. This a drop of 15% when comparing Q2 23/24 against Q1 23/24 and is now below target. This equates to 9,725 children

in Years 1 to 11, missing more than 10% of sessions. In Q1 23/24 this was 11,275 children. 1,550 have been removed between Q1 and Q2 from the PA cohort and are now attending 90% of sessions or more.

- The rate of primary phase PA is 20% and the rate of secondary phase PA is 25%.
- Please note, this information is different from that published “in real time” by the Department for Education (DfE) on View Your Education Data (VYED). VYED does not have 100% take up and as such provides a guide only.

Benchmarking:

- National PA rates for the same period are 21.5% having dropped by 11% from 24.2%.
- As such Medway is improving at a faster rate than National.

Actions:

- The council has been assigned a DfE advisor to work with them on addressing the attendance and PA 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 Inspecting local authority children’s services (ILACS); whilst involvement and engagement regarding this agenda is ongoing, 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
- 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 terms of reference (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.
- Future actions are to:
 - ❖ Develop the cross-directorate attendance strategy – co-produced with schools/trusts.

- ❖ Create a user-friendly dataset which cross references key contextual cohorts, enabling us to track and monitor the most vulnerable students (including children with a social worker (CWSW), children missing education (CME) and electively home educated (EHE)).
- ❖ Develop 3-year trend data for key measures required – this data is currently not available and cannot therefore be used to inform robust and realistic key performance indicators (KPIs) for the attendance strategy.

Please note, data gaps continue to impact across strategic planning in Education and special educational needs and disabilities (SEND).

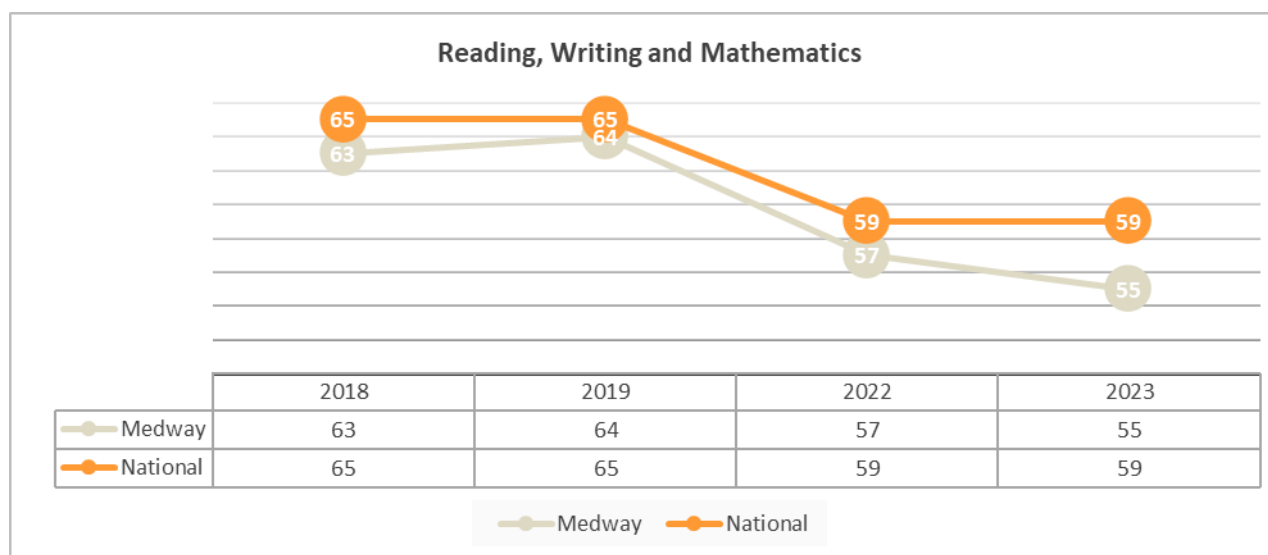
PI code	PI name	Aim to	Value	Target	Status	Short Trend	Long Trend
SE KS2	The percentage of children who achieve the required standard or above in Reading, Writing and Mathematics at KS2 (22/23 academic year)	Maximise	55.0%	65.0%	Red	DET	DET

Comments:

- The **provisional** data for 2023 has been released. 55% of Medway Key Stage 2 (KS2) (Year 6) children achieved or exceeded the required standard in the combined reading, writing and mathematics measure.
- This is 2 percentage points lower than last year and 4 percentage points (pp) adrift of the national outturn.
- The drop in performance has seen Medway fall from 95th place in the local authority (LA) ranking in 2022 to 124th this year.
- The gap between national performance and Medway has doubled, despite national performance remaining static.
- The revised, final, data will be published later in the year.

Benchmarking:

- National data indicates that 59% of children achieved at least the expected standard. As such Medway is 4pp lower than National.

**Actions:**

- The service supports headteacher associations and the chief executive officer (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 several 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 (22/23 academic year)	Maximise	62%	70%	Red	DET	DET

Comments:

- Provisional data shows maintained schools performed better than national and better than the 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 but the gap between the two groups has narrowed slightly. The gap between maintained schools and national has also narrowed.

	Medway (Maintained)	National (All schools)	Percentage difference between Medway Maintained and National	Medway (Academy)	Percentage difference between Medway Maintained and Medway Academy
22/23	62%	59%	+5.1%	52%	+19.2%
21/22	64.5%	59.5%	+8.4%	53.2%	+21.2%
Percentage change	-3.9%	-0.8%	-39.3%	-2.3%	-9.4%

Benchmarking:

- Provisional data shows that nationally 60% of pupils in maintained schools met or exceeded the expected standard.

Actions:

- The service supports headteacher associations and the chief executive officer (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 several 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
SE2 OEPr	Partnership measure: Percentage of all Primary Schools judged good or better,	Maximise	94.7%	93.0%	Green	IMP	IMP

Comments:

- There are 75 primary schools.

- Currently 71 schools are good and better; 7 are outstanding, 64 are good, 2 schools require improvement and 2 are inadequate.
- 8 inspections have been published in Q2 23/24. 1 school (High Halstow Primary Academy) moved from 'Good' to 'Outstanding', 4 schools maintained their 'Good' rating, 1 school dropped from 'Outstanding' to 'Good', and 2 schools moved from 'Requires Improvement' to 'Good' (Phoenix Junior Academy and Twydall Primary School).
- There are 51 academies. Of these 88 % are good or better (2 Outstanding and 43 Good) 2 require improvement and 2 are inadequate.

Benchmarking:

- Nationally, this figure is 90% and the South East currently is 91%.
- Medway remains ranked 5th out of 19 local authorities (LAs) regionally.

Actions:

- 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 continues to offer support to maintained schools via their termly visits.

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:

- Attainment 8 is a whole school performance measure and is calculated based on the grades achieved by students across eight key subjects. Subjects include Mathematics, English and English Baccalaureate (EBacc) subjects and certain technical awards. Mathematics and English may be 'double weighted', meaning that they count as two of the attainment 8 subjects).
- The key Stage 4 (KS4) published data shows 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 in Medway is lower than nationally (47.9 Medway average versus 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 Key Stage 2 (KS2) Standard Assessment Tests (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.

- Data for the 2022/23 academic year (examinations sat in May/June 2023) will be published later this year.

Benchmarking:

- Whilst Medway has improved compared to 18/19 this must be viewed in the context of National and comparator performance.

	18/19	21/22	Percentage change	18/19 Gap to National (pp)	21/22 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.

Actions:

- 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.