# Council Priority: PEOPLE Supporting residents to realise their potential Quarter 3 2023/24

# Performance and risks by outcome

Key
-----

			<i>3</i>		
Red	Significantly below	Amber	Slightly below targe	et <b>Green</b>	Met or exceeded
	target (>5%)		(<5%)		target
DET	Deteriorating	STATIC	Static	IMP	Improving
Short term	since last quarter	Long term	average last 4	Goldilocks	Optimum
			quarters		performance is in a
					target range

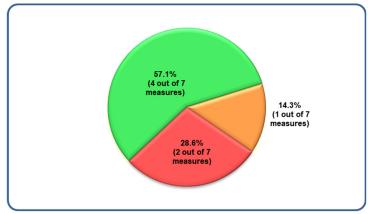
**Outcome: Healthy and active communities** 

# **Strategic Risk Summary**

There are no strategic risks for this outcome.

# Programme: Improving everyone's health and reducing inequalities

**Performance Summary** 



The total number of measures is 7.

- 4 measures met their target [PH13; PH15; PH17; PH8]
- 1 measure was slightly below target [PH14]
- 2 measures were significantly below target [PH23; PH34]

1 of the 4 green measures is deteriorating long term [PH13]

1 of the 2 red measures 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) (Q2 23/24)	Maximise	142	118	Green	IMP	DET

- This performance measure is measured a quarter in arrears.
- In Medway, smoking prevalence in adults aged 18+ has reduced to 8.9% (previously 12.6% in 2021/22). This is compared to the England average of 12.7%. To the end of Q2, the whole service has set 566 quit dates, achieving a 56% quit rate. 79% of all quits achieved have come from the core team.
- Towards the end of Q2, the core team rolled out vaping as a quit smoking aid. This has seen a significant increase in activity, with quit dates set up 67% compared to Q2 in the previous year. Success rates for those choosing to quit with a vape are higher than average, at 64%. In the majority of cases, vapes are being offered as a secondary nicotine product, with a licensed nicotine replacement therapy product as a primary treatment, usually a patch. Vapes are only encouraged for use in the short-medium term as a quit smoking aid.
- The outreach project continues to target areas of higher-than-average smoking prevalence, and routine and manual work
  places. During Q2, the team attended AC Goatham, Sunlight Centre, all the healthy living centres, Mid Kent College, and Bread
  of Life Strood.
- The service is furthermore 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 2023/24, all people admitted to hospital who smoke will be offered NHS funded tobacco treatment services.
- The National Swap to Stop Scheme was launched in Q3 2023/24, where local authorities and partners can bid to have vape starter kits provided by the Office for Health Improvement and Disparities (OHID), free of charge. The service will prepare a bid as soon as the scheme becomes available so that residents can benefit. The maternity team are also preparing a paper to be able to expand the offer to pregnant and post-partum mothers and their families.

PI	PI name	Aim to	Value	Target	Status	Short	Long
code						Trend	Trend
PH14	Excess weight in 4–5 year olds (22/23	Minimise	22.4%	22.3%	Amber	IMP	IMP
	annual)						

PH15	Excess weight in 10–11 year olds	Minimise	37.3%	37.8%	Green	IMP	IMP
	(22/23 annual)						

- The National Child Measurement Programme (NCMP) data is reported annually, giving local areas the opportunity to compare the prevalence of childhood obesity locally and nationally. Over 95% of 4-5, and 10-11, year olds are weighed and measured each year with the data fed back to individual parents.
- For Reception Year:
  - ❖ Medway has seen a reduction in obesity and combined overweight/obesity for a second year in a row.
  - ❖ Medway's combined overweight and obesity data has reduced by 1.3 percentage points in the last year and is now down to 22.4%. The obesity only indicator is down by 1.1 percentage points to 10%.
  - ❖ Although Medway is not below the England average yet (21.3%), the Reception Year R is well below pre-pandemic levels and is at its lowest rate since 2016.
- For Year 6:
  - ❖ Medway has seen an impressive 4 percentage point reduction in our overweight and obesity combined data in 2022/23.
  - ❖ Medway is now down to 37.3% (from 41.3% for 2021/22). The obesity only figure is also down by 3.1 percentage points.
  - ❖ We are still above the England average (which is 36.6%) for the combined figure, however two years ago, Medway was more than 3 percentage points higher than the England average so improvements have been seen.
- Medway has developed a Whole System Obesity Network, which is coordinated by the Public Health team. This partnership of
  public, private, voluntary and academic sectors works collaboratively through the Medway Food Partnership, Physical Activity
  Alliance and Infant Feeding Strategy group. The work of these partners and their success in getting children and adults to move
  regularly and eat healthily compliments the core work of the Supporting Healthy Weight team within Public Health. Successes in
  2022/23 include the Medway Can campaign, weight management services uptake, Food for Life schools award, Healthy Early
  Years Award and many other health and wellbeing programmes.

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	71.37%	70%	Green	IMP	IMP

# **Comments:**

Breastfeeding initiation is recorded by the Midwifery team at Medway Maritime Hospital shortly after birth. It represents a baby's
first feed and is recorded as either breastmilk or formula milk. Breastfeeding has a large health benefit for the baby and mother,
making this performance measure an important health and wellbeing metric.

- There has been a significant increase in the breastfeeding initiation rate in Q3 23/24 with a value of 71.37%, overtaking the target value of 70%.
- This improvement is due to a major focus on the agenda. As part of this, the Infant Feeding Strategy was refreshed and endorsed by the Health and Wellbeing Board in September. The delivery actions that compliment this strategy include a specialist team of feeding specialists being employed to support midwives in the first hours/days of a baby's life. We also refreshed the Beside You website in October to normalise breastfeeding across Medway.

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	4	Red	STATIC	DET

- The decision to assess new dementia friendly settings under a new scheme following the end of the previously recognised "working towards dementia friends" scheme of the Alzheimer's society has been deferred to the new year (Q4 23/24). As such, no new settings have been assessed this quarter.
- This decision was taken as it remains unclear if the Medway Dementia Action Alliance (DAA) will issue awards equivalent to the Kent Dementia Friendly Places scheme or its own awards as an action alliance. Either way, the need for a training scheme to be established to replace the dementia champions prevision previously fulfilled by the Alzheimer's Society has taken precedence for the group. This training provision will also be a core component in helping places to become dementia friendly and will be piloted late Q4 with the membership and stakeholders of the Medway DAA.

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	78.1%	75.0%	Green	IMP	IMP

# **Comments:**

 Q3 23/24 has shown an increase in the number of participants as well as positive outcomes of our weight management programmes due to the continuous effort of the team and influx of referrals from the National Child Measurement Programme (NCMP).

- There has also been continuous progress of children and young people achieving a lifestyle improvement in Q3; this could
  include significant improvements in diet, activity level, weight status, fitness level, sedentary time or body shape.
- In Q4, we plan to run a 12-week Tri Club and Tri Mini, and run a pilot for the 6-week Tri Club and Tri Mini shortened programme. We also expect to start receiving referrals from the newly commissioned Tier 3 programme (More Life).

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	75.20%	80.00%	Red	NA	NA

- This indicator is one of four measures used by the Office for National Statistics (ONS) to track Self-Reported Personal
  Wellbeing. Average ratings of personal well-being in the UK have declined further across all measures in the year ending (YE)
  March 2023. The proportion of people reporting poor wellbeing across the four measures remains higher than pre-pandemic
  levels (YE March 2019). Self-reported health, marital status and economic activity have the strongest associations with how
  positively we rate our life satisfaction.
- The figure for England of people who self-report high life satisfaction for 21/22 was 79.97% which was used to set the target for this new council measure.
- Because of small sample sizes and large confidence interval estimates, local authorities should not be ranked against each
  other. Estimates are intended for local authorities to compare over time and with other local authorities of a similar population
  and size structure.
- All Medway Public Health interventions and actions are intended to support people to have better health outcomes and address
  health inequalities, although these can often take years to demonstrate improvements on a population level and are influenced
  by macroeconomic level policies.
- Our 5 Ways to Wellbeing campaign, launched in 2023, aims to raise awareness of the factors which can help to improve
  individual wellbeing even in times of stress and poor health. Commissioned projects such as Men in Sheds and Social
  Prescribing/Voluntary and Community Sector projects aim to improve levels of self-reported wellbeing for specific high risk
  population groups. In 2023, Medway Council signed the Prevention Concordat for Better Mental Health (at integrated care
  system (ICS) level) and pledged commitment to continue to improve mental wellbeing, prevent poor mental health and tackle
  the root causes of poor life satisfaction.

# Project for this outcome: Supporting Healthy Weight:

• Please see the updates for performance indicators PH14 and PH15 for further information.

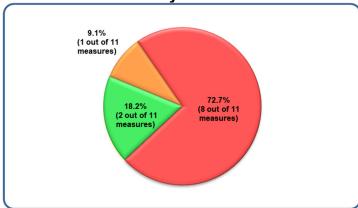
**Outcome: Resilient families** 

**Strategic Risk Summary** 

Live or lanaged risk	Risk Ref	Risk	Inherent Risk Score	Q3 22/23 Current Risk Score	Q4 22/23 Current Risk Score	Q1 23/24 Current Risk Score	Q2 23/24 Current Risk Score	Q3 23/24 Current Risk Score	Move ment	Definition (Current score) (L- likelihood) (I-impact)	Owner	Portfolio	Link to Council Plan
L		Failure to meet the	BII	BII	BII	BII	BII	BIII	+	,	Director of People	Children's	People
		needs of								moderate	and	Oel vices	
		children and									Deputy		
		young people									Chief Executive		

**Programme: Children's Services Improvement Plan** 

**Performance Summary** 



The total number of measures is 11.

2 measures met their target [A10; ILAC2]

1 measure was slightly below target [CSC0006]

8 measures were significantly below target [CSC0004; ILAC1; ILAC3;

ILAC4; ILAC5; ILAC6; ILAC7; N23]

2 of the 8 red measures are deteriorating long term [CSC0004; ILAC5]

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	423	450	Green	DET	IMP

#### **Comments:**

- The cumulative outturn at the end of Q3 has risen by 16 days (4%) since last quarter (407), but remains below target.
- Medway's 3-year average is 423 days, which is 50 days (11%) better than the national figure and 10 days (2%) longer than the South East.

# Benchmarking:

• The latest national benchmark is 473 days and the South East is 413. As such Medway is better than national but slightly adverse to the regional average.

# **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. 11 Medway children were matched with 11 adopters during the quarter. Children with specific health needs, can take longer to
match and adversely affect this average measure. The successful adoption of these children is more important than an increase
in the average time.

PI code	PI name	Aim to	Value	Target	Status	Short Trend	Long Trend
CSC0004	Number of CiC per 10,000 children	Goldilocks	77.7	Between 65 and 73 Mid-point 69.0	Red	IMP	DET

#### **Comments:**

- Please note, the September figure has been revised following publication updated population figures.
- 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 496 CiC, which is a rate of 77.7 per 10,000. There has been a small drop since September. Although part of this rise is driven by the increase in the numbers unaccompanied asylum-seeking children (UASC) taken into the council's care it should be noted that there are 17 (4%) more CiC than in December 2022 (factoring out UASC).

# Benchmarking:

- Nationally there are 71 Looked After Children (LAC) per 10,000 population.
- Our statistical neighbours have 69 CiC per 10,000 and the South East has 58.
- Like Medway, the national and regional trends have increased from 2021/22 to 2022/23. Our statistical neighbours have seen a
  drop. These fluctuations may be due to UASC.

# **Actions:**

- During this quarter, the rate of CiC per 10,000 has reduced slightly to 77.7 (from 77.9 for Q2 23/24). During Q3, 48 children were new into care eight of these new entrants entered via the national transfer scheme for children seeking asylum. This is a 50% reduction in this cohort in comparison to Q2 where 16 children seeking system entered care in Medway. The overall CiC figure now stands at 496 (end December 2023).
- New entrants into care include large siblings' groups, 10 newborns and 12 young people aged 16-17 years. Senior managers within the service are responsible for agreeing entry into care and are assured that all have been appropriate this quarter.
- The service will continue to monitor the 16-17 cohort of new entrants into care, to ensure that recent changes in the adolescent service offer does not have an adverse impact.

• The new entrants between 16-17, this quarter, are likely to have been impacted by the recent changes to the adolescent service.

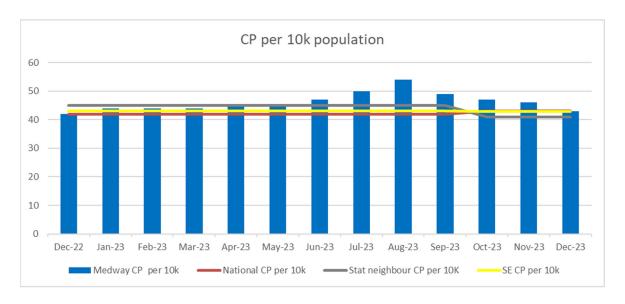
PI code	PI name	Aim to	Value	Target	Status	Short Trend	Long Trend
CSC0006	Number of CP per 10,000 children	Goldilocks	43.0	Between 32 and 42 Mid-point 37.0	Amber	IMP	IMP

### **Comments:**

- Please note, the September figure has been revised following publication updated population figures.
- 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 273 children on a CP plan. This equates to a rate of 43.0 per 10,000, a drop of 16% on the Q2 rate (51.0) this equates to 51 children. Over the quarter the numbers of children on a plan has been steadily dropping.

# Benchmarking:

• Medway now has comparable rates to National and the South East (both at 43) and a slightly higher rate than our Statistical neighbour rate of 41 per 10,000.



#### **Actions:**

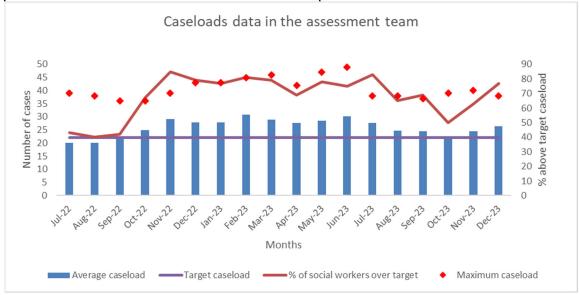
- Over time, the number of children subject to a CP plan has reduced and is now more in line with National and South East comparators, and slightly above statistical neighbours. Concerted work has taken place to ensure that children are subject to the right plans, and that decision-making is robust.
- 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	PI name	Aim to	Value	Target	Status	Short	Long
code						Trend	Trend
ILAC1	Average Caseloads in Assessment	Minimise	26.3	22	Red	DET	IMP
	teams						

# **Comments:**

• The average caseload in the assessment teams is 26.3, a 7% increase compared to the September snapshot (24.6).

- The percentage of social workers over target caseload has risen from 69% to 77%. The maximum caseload has remained relatively static and now stands at 38, having peaked at 40 in November.
- Whilst the Q3 data is showing a deterioration compared to Q2 they are all better than the December 2022 snapshot when average caseloads were 5% higher than they currently stand at. There has been a 12% increase in the numbers of contacts between Q2 and Q3 and an 8% increase in the number of open assessment cases at the end of Q3 compared to the end of Q2. However, the throughput of the assessment teams has been lower in Q3 (average of 366 per month) compared to Q2, where the average was 482 per month. This has increased the caseload pressure.

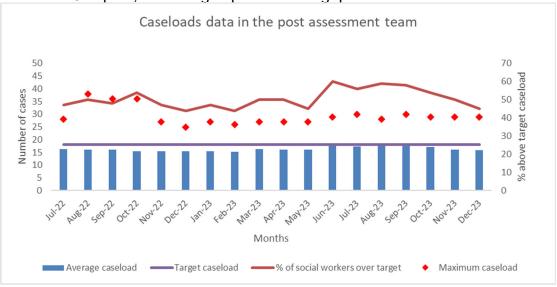


# **Actions:**

- Q3 saw an increase in both the average caseload and the percentage of social workers above target caseload. The increase in
  contacts following the summer break, two vacancies across the service whilst waiting for new workers to start, and annual leave
  taken during the Christmas period would have impacted on this. Throughput would also have been impacted upon during this
  period due to the same reasons.
- Managers across the assessment service continue to focus on timely recording, progressing assessments without drift or delay which will drive caseloads down and work through the service.

PI code	PI name	Aim to	Value	Target	Status	Short Trend	Long Trend
ILAC2	Average Caseloads in Post Assessment teams	Minimise	15.8	18	Green	IMP	IMP

- The snapshot shows post assessment social work teams (Area Children's Social Work (CSW) Teams 1-8) have an average caseload of 15.8. This is a drop of 12% on the Q2 position (17.9). This remains below target.
- The highest caseload is 29, a decrease of 3% on Q2.
- There has been a fall of 22% in the proportion of workers who are over target caseload (45% compared to 58%). Success in reducing the numbers of children on Child In Need (CIN) and Child Protection (CP) plans has contributed to the easing of caseload pressures in the CSW teams. There are 16% fewer children on a CP plan, comparing the end of quarter snapshot data and 8% fewer children on a CIN plan, indicating improved throughput.



# **Actions:**

• Caseloads have continued to decrease in the post assessment teams. Concerted action, including focusing on throughput of work at performance clinics, reviewing Children In Need work, and ensuring families step down in a timely way to a lower level

of intervention to Family Solutions or other Early Help (EH) support has all contributed to the reductions in caseloads. This has enabled step down of one of the Project teams in accordance with the throughput plan.

Additional capacity provided by one of the project teams will continue into Q4 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	70%	90%	Red	IMP	IMP

#### Comments:

- Please note, the Q2 23/24 outturn has been revised upwards to 66% to account for retrospective writing up.
- The end of Q3 23/24 snapshot shows that 70% assessments were visited in one working day. This is a 4 percentage point (pp) increase compared to Q2 23/24.
- The outturn has fluctuated over the quarter, with 52% of visits in one working day in October and 48% in November. There has been a percentage uplift in the number of open assessment cases when the end of Q3 is compared to the end of Q2.
- It is worth noting that the December 2023 position is better than the 62% recorded for December 2022.

#### Actions:

- Positively Q3 saw an increase in the percentage of one working day visits being completed in time.
- As with previous quarters, dip sampling assures that most visits are timely undertaken, however there is a delay in information being recorded onto Mosaic. 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	56%	85%	Red	IMP	IMP

# **Comments:**

• Please note, the Q2 23/24 snapshot has been updated to 49% to account for retrospective writing up.

- The end of quarter snapshot for Q3 23/24 shows that 56% of S17 assessments were visited within five working days. This is a 7 percentage point (pp) improvement on the Q2 snapshot.
- Throughout the quarter the results have fluctuated, from 53% in October to 45% in November.
- The long-term trend over the last 12 months is now upward, and December 2023 is stronger than the 39% recorded in December 2022.

#### **Actions:**

- Positively Q3 saw an increase in the percentage of visits undertaken within five working day visits being completed in time.
- As with previous quarters, dip sampling assures that most visits are timely undertaken however there is a delay in information being recorded onto Mosaic.
- 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	48%	65%	Red	DET	DET

### **Comments:**

- The percentage of children for whom permanency has been agreed has reduced to 48% (from 49% in Q2 23/24) and remains below target.
- The trajectory of this measure has been downward over the last year and is 13 percentage points (pp) lower than in December 2022. However, it is worth noting that December 2023 saw a small improvement on the November 2023 outturn.

### **Actions:**

- Q3 has resulted in a 1 pp decrease in the percentage of children for whom long term fostering has been the agreed plan compared to last quarter.
- A recent review of practice in respect of placement disruptions has identified several areas that require a more robust and
  consistent response by the service. This will include updated procedures regarding placement stability (disruption) meetings, a
  review of matching processes, alongside ensuring timely presentation and attendance at fostering panel.

PI code	PI name	Aim to	Value	Target	Status	Short Trend	Long Trend
ILAC6	Rate of open CIN cases per 10,000	Goldilocks	403	Between 305 and 337 Mid-point 321	Red	IMP	IMP

- Currently the rate is 403 which is outside of the target range which is between 305 and 337.
- There are 2,572 children counted as Child In Need (CIN), as per the Department for Education (DfE) definition. This has reduced compared to the last quarter by 133 children (5%).
- The number of CIN cases has continued to drop over the last three months but remains higher than the National and South East rates. Whilst the numbers of children on a CIN plan or Child Protection (CP) plan have decreased, the numbers open as assessment cases have increased.
- 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 CP 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:

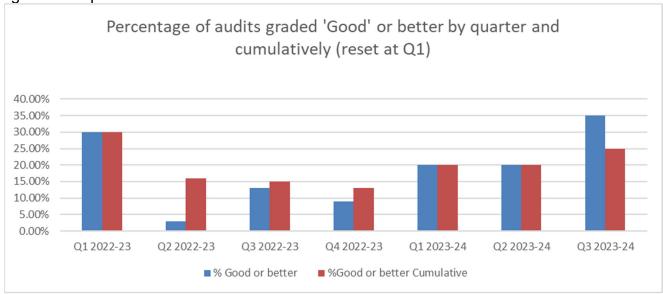
• Nationally there are 334 CIN cases per 10,000 population. It is slightly higher at 347 for our statistical neighbour group and it is 329 in the South East. All these rates have risen over the last year, but not a sharply as Medway's current rise.

# **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 impacts on the overall volume of open children in need across the service (CIN, CP 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	35%	80%	Red	IMP	IMP

- Q3 data includes audits conducted in October and November 2023. 35% of Audits were rated good or higher for the period. This is 10 out of 29 audits. 14 audits indicated that work requires improvement and 5 were inadequate.
- Cumulatively, this year, 25% of audits have been good or better. This is a 66% improvement compared to the same point last year, when 15% of audits were good or better. In 2023/24 there have been 89 audits 22 have been good or better, 52 required improvement and 15 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. In contrast to 2022/23 this year has seen the cumulative outturn rise, indicating progress against the stretching target for this performance measure.



#### **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. The 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 audit 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 (PDLs) 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 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	Minimise	29%	20%	Red	STATIC	IMP
	permanent social workers						

### Comments:

- Please note, the Q2 23/24 figure has been revised following the receipt of September data.
- There has been no change from Q2 to Q3 in the value for this performance measure.

# 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 our statistical neighbours (19%) and the National rate (20%).

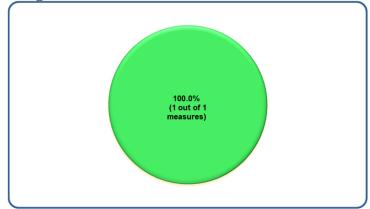
### **Actions:**

- 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, the newly qualified social worker offer, the step up to social worker programme and student placements.
- A cohort of newly qualified social workers started in September 2023. The initial scoping of cost and viability of a European recruitment campaign was undertaken. Enquiries with agencies evidenced that no agencies are currently recruiting in Europe,

and costs were likely to outweigh benefits. It has therefore been decided that recruitment efforts for this financial year are focused on our grow your own scheme and also trying to convert staff from project posts to agency or permanent roles. Overseas recruitment will be re-considered next year. other priority work has been progressed to respond to the volume of casework within the system and the plan for the safe removal of social work agency project teams in the coming months to bring Children's Social Care spend down.

Vacancies continue to be backfilled through locum staff although this continues to be challenging. Several targeted recruitment
campaigns for permanent social workers will be delivered in 2024, the first of which was launched on the 8 January along with a
feature article in the Community Care publication. The service will continue to run events to target existing agency staff working
in Medway, encouraging them to convert to a permanent contract. The November event successfully encouraged two agency
staff to do so.

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). (Q2 23/24)	Minimise	9.9%	16%	Green	DET	IMP

- 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 Council Public Health team is working closely and supporting clinical colleagues in implementing the ambitions of the NHS Long Term Plan (LTP) in treating tobacco dependence. In maternity, we expect to see and support an operational inhouse model for the whole of Medway's pregnant population by March 2024. So far, referrals for maternal smokers who live in postcodes for ME1, ME2, ME3, ME7 and ME8 are now receiving specialist stop smoking support via the Smokefree Maternity team at Medway Foundation Trust (MFT). Referrals for maternal smokers who live in ME4 and ME5 are still receiving support from the Medway Stop Smoking Service.
- The Medway Stop Smoking Service, in collaboration with key partners, will now deliver a new specialist postnatal smoking cessation service. Postnatal relapse to smoking rates are high, therefore the new service will aim to address this. The service will predominantly deliver remote/telephone support to 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.

### **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.
- Experts have highlighted that nicotine replacement therapy (NRT) has limited efficacy in the pregnant population. Therefore, the
  Medway Stop Smoking Service can now offer vapes to pregnant and postnatal clients which has been funded through the
  national Swap to Stop scheme. The Medway Council Public Health team is also working on an application with partners from
  MFT to gain funding for vape starter packs for the new in-house model.

• 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 Q2 23/24 performance to stretch targets for these checks are:
  - ❖ New Birth Review: 82% (Target 91%)
  - ❖ 6-8 Weeks: 90% (Target 91%)
  - ❖ 10-12 Months: 67% (Target 91%)
  - ❖ 2-2.5 Years: 81% (Target 78%)
  - ❖ Antenatal: 93% (Target 91%)
- MCH met or exceeded the stretch targets for the 2-2.5 year and antenatal checks during this quarter and were only 1 percentage point below the target for the 6-8 week check. Performance was below target in relation to the New Birth review and 10-12 month review. MCH report that staff vacancies and maternity leave continue to impact upon capacity to meet targets. They have also reported some issues with late notification of births from Medway's maternity service resulting in delays and negatively impacting the new birth review data. The commissioner is working with MCH and Medway's Maternity Service to address the late reporting issue. MCH have a rolling recruitment process and encourage staff to develop and train in order to become health visitors.
- The MCH School Nursing Service achieved a high level of participation in The National Child Measurement Programme (NCMP) for the 22/23 academic year. The service achieved 95% coverage for Reception Year pupils and 93% for Year 6 pupils by the end of the 22/23 academic year.
- The ChatHealth digital messaging service for children aged 11 to 19 was launched by the School Nursing Service 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. During the period September to November 2023, the service received 382 text enquiries from children and young

- people, compared with 259 during the same period in 2022. The most common enquiries related to emotional wellbeing, anxiety and depression.
- This quarter, the Child Health (CH) team held an annual child health conference. Attended by 113 professionals from across Medway it proved to be a tremendous success, receiving positive feedback from stakeholders and partners. The CH team delivery model was showcased at the integrated care system (ICS) symposium, attracting interest from other local authorities and health services for its collaborative triad approach. Notably, the team also established connections with The Institute of Cyber Security for Society (iCSS), the University of Kent, Canterbury Christ Church University (CCCU), and the Kent & Medway Cyber Cluster (KMCC) to jointly establish the Kent & Medway Cyber Schools Network (KMCSN). This network, focused on preuniversity cyber security and online safety education, will be supported by the CH Manager, who will contribute to resource creation and training. Additionally, the team has developed Pregnant Pupil Guidance for schools, scheduled for review and approval in January 2024. Other initiatives this quarter include commissioning of Specialist special educational needs and disabilities (SEND) Relationships and Sexuality Education (RSE) Training for Medway teachers, co-delivery of a sexual health module, a webinar on Being an Active Bystander for the White Ribbon 16 days of action, and ongoing efforts to enhance Personal, Social, Health Education (PSHE).
- The CH team has also actively engaged in co-creating a Physical Activity Policy Framework, consulting with Kent colleagues and seeking input from the Southeast Health Alliance / Whole Systems Obesity (WSO) meetings. Other noteworthy progress includes the successful development of a post-16 transition resource through collaboration with Mid Kent College students. Initiatives are underway to connect the Mental Health Leads Network with the Emotional Wellbeing Partnership workforce and the Kent equivalent, with a focus on supporting the use of the IThrive tool/approach. Future endeavours include working with the Leaving Care team to plan consultations with their cohort of young people.
- The breakdowns of training and attendance are as follows:

# **❖** Adverse Childhood Experiences (ACEs) and Trauma Informed Practice (TIP)

- o 20/11/23 ACEs for Kent: 7 delegates
- o 12/10/23 ACEs for social care impacts and reflections: 4 delegates
- 5 6/12/23 ACEs multiagency: 32 delegates
- o 12/12/23 Warren Wood School Families training: 3 delegates

#### Alumina

- November 2023 (Medway): 13 delegates completed training
- November 2023 (Kent): 17 delegates completed training

# ❖ Basic Self harm

- o Q3 (Medway): 45 delegates completed training

- → 06/11/23 (AM & PM Sessions) New Road & King Fisher: 19 delegates completed training
- o 02/11/23 Parent session (Medway): 3 delegates completed training
- o 30/11/23 & 11/12/23 Online professional sessions: 32 delegates completed training

# ❖ Connect 5

- Session 1 29/11/23: 5 delegates
- Session 2 11/10/23: 12 delegates
- Session 3 31/10/23: 8 delegates

### ❖ Parent RSE

o 18/10/23 - 3 workshops; St Peters Infants: 19 delegates

# ❖ Parent Health and Wellbeing Workshops

o 89 sessions delivered across 3 schools and 1 online session

# **❖** RSE Teacher Training

o 19 delegates

# **❖** Youth Mental Health First Aid (YMHFA)

o 14 delegates

# Medway Children Safeguarding Partnership (MSCP)

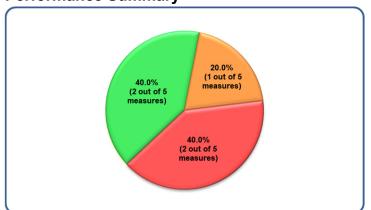
o Intermediate Child Protection: 24 delegates

# Outcome: Older and disabled people living independently in their homes

**Strategic Risk Summary** 

Live or Managed risk	Risk Ref	Risk	Inherent Risk Score	Q3 22/23 Current Risk Score	Q4 22/23 Current Risk Score	Q1 23/24 Current Risk Score	Q2 23/24 Current Risk Score	Q3 23/24 Current Risk Score	Move ment	Definition (Current score) (L- likelihood) (I-impact)	Owner	Portfolio	Link to Council Plan
L		Meeting the needs of Older People and Working Age Adults	Al	BII	BII	BII	BII	BII	<b>→</b>	l – major	Director of People and Deputy Chief Executive		People

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



The total number of measures is 5.

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

1 measure was slightly below target [ASCGBT001]

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

The amber measure is deteriorating long term [ASCGBT001]

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	30.3%	30%	Amber	DET	DET

- Please note, the Q2 23/24 figure has been revised upward to 30.1% following updated recording.
- The proportion of clients receiving a long-term service that is a placement has increased, marginally. There are 899 clients in residential or nursing placements. This is 2% more than in September and 6% more than at the same point last year. There are 2,965 long term clients which is just over 1% more than at the end of Q3 22/23 and just under 6% more than at the end of December 2022. The closeness in the percentage of clients in placements shows consistent control of the numbers being admitted.

# Benchmarking:

National data for 2022/23, is 28.7%, an improvement on 2021/22.

#### **Actions:**

- Residential care should be the last option for someone that requires care and support from adult social care. All other forms or
  care and use of assistive technology can support people to remain at home. This has been evidenced recently in Medway's
  Adult Social Care (ASC) division; it has enabled people to remain at home where families thought that 24-hour care was the
  only option.
- We are working closely with Kyndi to gain additional funding to increase the use of assistive technology and with Commissioners to increase the use of Home Care to provide more care calls, in order to prevent, reduce and delay the need for residential care.
- Using the Local Authority Urgent Emergency Care Grant, we have introduced short term assessment beds. This allows a person to be cared for in a care home for up to six weeks, while undergoing an assessment to identify what their long-term care needs are, rather than be discharged directly from hospital to a care home. If the use of the beds is successful, we will apply for funding to make these beds permanent.

PI	PI name	Aim to	Value	Target	Status	Short	Long
code						Trend	Trend
ASCOF	Percentage of clients receiving a direct	Maximise	24.3%	33%	Red	DET	DET
1C(2i)	payment for their social care service						

- Please note, the Q2 23/24 figure has been revised following updated recording.
- There has been a further drop in the percentage of clients receiving a direct payment (DP). At the end of December there were 503 clients out of 2,066 receiving an ongoing DP.
- Compared to last quarter the number of clients with a DP (numerator) has dropped by 1.6% and the denominator has risen by 0.4%. In December 2022 28% of clients (552) were receiving a DP.

# Benchmarking:

- Nationally 26.2% of clients with an ongoing long-term service receive a DP.
- Our statistical neighbours' performance is 28.1%.
- Both comparators have seen a decline in performance compared to their 2021/22 results.

#### **Actions:**

• The average number of DPs required to be set up each month to achieve the 30% target is 94, the average number of cared for DP referrals received each is 9. Targets will be set for Locality teams and we are discussing how the Self Directed Support team can be involved in reviews to discuss DPs with people who are already in receipt of care.

# Micro Enterprise Development

- To support any referrals for complex and high risk customers we have engaged support from the Department for Business, Energy and Industrial Strategy to support one of our personal assistant (PA) micro enterprises and managed account/payroll providers to registering as an employment agency.
- This model will conform to all industry regulators unlike some of the micro enterprise models currently being used in other local authority areas i.e. Community Catalysts and Tribe.
- For our less complex customers the development of locally based micro enterprises on the model described is key to providing quality cost effective services in the community and needs resource to implement. An additional local PA recruitment agency will increase local availability of employed and self-employed PAs.

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	61%	65%	Red	DET	IMP

- There has been a 1 percentage point (pp) drop in the proportion of learning disability (LD) clients who live in their own home or with family since last quarter.
- Of the current 634 LD clients, 388 (61%) are in their own home or living with family and have had a review in the last 12 months. 111 (18%) are living in their own homes or with family but haven't had a review in the last 12 months. This represents a deterioration for both cohorts. There are 79% in the desired type of accommodation.
- There are 135 clients not living with their families or in their own homes. Just over 82% 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.

# Benchmarking:

- The current national outturn is 80.5% and our statistical neighbours' is 82.5% (2022/23 data). Medway's performance is adverse to both these comparators.
- It should be noted that this measure will be discontinued in 2024; this is a national decision by the Department for Education (DfE). It will be replaced with a measure focusing on the accommodation status of all long-term clients.

#### Actions:

- A specific piece of work has been undertaken to ensure there is no missing data in the system and this should improve the performance.
- The care reviews taking place will also enable us to ensure that the information recorded is up-to-date and accurate.

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

# Comments:

- Please note, the annual target (16) for this performance measure is apportioned across each quarter (4 per quarter).
- Also, please note, the Q2 23/24 outturn has been revised following updated recording and represents 7 x 18-64 admissions.
- 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 Q2 and is below target. We may see the Q3 figure rise as placements are recorded in the coming weeks.

- So far this year the rate of admissions is 12.4 per 100,000. This is slightly over the 12 per 100,000 target over three quarters, but under the 16 per 100,000 full year target.
- The current data shows that the outturn is green for the quarter but cumulative performance against the cumulative total is amber at present.

# Benchmarking:

• Nationally the benchmark (2022/23 data) is 14.6 per 100,000 for the full year – just under 3.7 per 100,000 for each quarter – and for our statistical neighbours the figure is 13.9 per 100,000 (3.5 per 100,000 for each quarter). Medway is adverse to both the 2022/23 National and peer group performance (2022/23 performance for Medway is 15.25 per 100,000 or over 3.8 per 100,000 per quarter).

# **Actions:**

- Residential care should be the last option for someone that requires care and support from adult social care. All other types of care and use of assistive technology can support people to remain at home.
- Supported living is offered to support people aged between 18-64, rather than residential care.
- We have had some successful outcomes for younger adults using a team of Personal Care Assistants via a direct payment and
  we will be reviewing this approach to determine whether it can be used more frequently as an alternative to residential care and
  supported living.

PI	PI name	Aim to	Value	Target	Status	Short	Long
code						Trend	Trend
ASCOF	Permanent admissions to care homes,	Minimise	123	162.5	Green	IMP	IMP
2A(2)	per 100,000 pop – 65+						

# **Comments:**

- Please note, the target (650) for this performance measure is apportioned across each quarter (162.5 per quarter).
- Also, please note, the Q2 23/24 outturn has been revised following updated recording and represents 84 x 65+ admissions.
- There have been 57 admissions this quarter. Whilst this figure and the rate per 100,000 population is below target, retrospective inputting may raise this figure.
- Cumulatively there has been 222 admissions for this age group. This equates to a rate of 479.2 per 100k. This is slightly under the 487.5 per 100,000 target across three quarters and under the full year target of 650.
- The quarterly and cumulative performance is green.

# Benchmarking:

• Nationally the benchmark (2022/23 data) is 560.8 per 100,000 for the full year – just over 140 per 100,000 for each quarter – and for our statistical neighbours the figure is 540.7 per 100,000 (just over 135 per 100,000 per quarter). Medway is adverse to both the 2022/23 National and peer group performance (2022/23 performance for Medway is 682 per 100,000 or 170.5 per 100,000 per quarter).

### **Actions:**

- Residential care should be the last option for someone that requires care and support from adult social care (ASC). All other
  forms or care and use of assistive technology can support people to remain at home. This has been evidenced recently in
  Medway's ASC division and has enabled people to remain at home, where families thought that 24-hour care was the only
  option.
- We are working closely with Kyndi to gain additional funding to increase the use of assistive technology and with Commissioners to increase the use of Home Care to provide more care calls, in order to prevent, reduce and delay the need for residential care.

# **Project for this outcome:**

#### **Loneliness and Social Isolation:**

- The Medway Together Pledge campaign fully launched in November 2023 with a two-page article in the Medway Matters magazine and social media campaign. So far, 33 pledges have been made. Promotion of the campaign will be a priority over the next five months.
- Two Loneliness and Social Isolation training modules were delivered in Q3 23/24 with 16 delegates attending. The team
  represented Wider Determinants at Medway Matters Live, MEGAN CIC mental health event, A Better Medway Awards, Mental
  Health Day event at the Sunlight Centre and the Medway Food Partnership event. Presentations were delivered at the
  Neurological Café launch and the Physical Activity Alliance event.
- The social prescribing funding project is on track to go live in 2024. The Medway and Swale directory of services, Joy, has soft launched (<a href="https://services.thejoyapp.com/">https://services.thejoyapp.com/</a>). The payment-for-prescription model has been agreed and the seed funding process has been drafted. The Programme Manager for Wider Determinants will sit on the panel reviewing applications alongside representatives from Medway Voluntary Action and the Health and Care Partnership. The evaluation steering group met to agree the methodology, and the evaluation plan is expected to be approved in January.
- The annual Medway Social Prescribing Networking event took place in October 2023, bringing together voluntary, community, faith and statutory organisations with link workers, health and wellbeing coaches, and care coordinators across Medway. This event provides the opportunity for networking, offering participants the chance to discover the array of services and activities available to support their patients and service users. In total, 59 people attended and feedback was positive.

- Implementation has started on the Talking Tables project. This is based on the national Chatty Café scheme model, where a table in a café is reserved for those who are open to meeting and talking with someone new. The Medway Talking Tables initiative expands on this concept through partnerships with various venues like churches, libraries, colleges, assisted housing associations, and community spaces. This establishes dedicated spaces where individuals can engage in conversation, accompanied by volunteer "meeters and greeters" who ensure a warm welcome and someone to talk to. A total of 12 venues have been identified to accommodate a Talking Table. Each venue will be provided with: a national Chatty Café license; an activity pack as an interactive ice breaker for the table including playing cards and dominos; and support for volunteers including training and signposting packs. Seven Talking Tables are currently 'live' with five more to launch in January. We aim to have 15 venues across Medway in total, one available each day of the week. The full schedule of Medway Talking Tables will be listed on the loneliness hub.
- Following a positive response from staff we delivered a second 'Craft and Chat' session in December 2023. This was organised
  and facilitated by Public Health with the aim to bring together staff from across the council and reduce social isolation at work.
  This was listed on i-Share and advertised through internal comms. Ten staff attended; all were from the PH directorate and
  feedback was very positive.

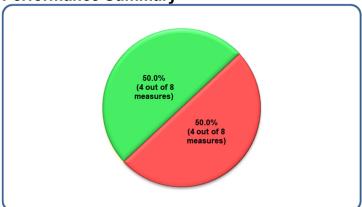
Outcome: All children achieving their potential in education

Strategic Risk Summary

Live or Managed risk	Risk Ref	Risk	Inherent Risk Score	Q3 22/23 Current Risk Score	Q4 22/23 Current Risk Score	Q1 23/24 Current Risk Score	Risk	Q3 23/24 Current Risk Score	Move ment	Definition (Current score) (L- likelihood) (I-impact)	Owner	Portfolio	Link to Council Plan
L		Failure to Deliver the High Needs Budget Recovery Plan	BII	BII	BII	CII	CII	CII	<b>→</b>	l – major <sup>*</sup>		Services	People

Programme: High quality education provision for all

**Performance Summary** 



The total number of measures is 8.

4 measures met their target [CA13; CASEISPEC Ofsted; EDU3(b); SE2 OEPr] 4 measures were significantly below target [CASEIKS4 Ofsted; SE KS2; SE KS2Mnt; SEKS4A8]

All of the 4 red measures are deteriorating long term [CASEIKS4 Ofsted; SE KS2; SE KS2Mnt; SEKS4A8]

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	0.0060%	0.0125%	Green	IMP	IMP

# **Comments:**

- Please note, the annual target (0.05%) for this performance measure is apportioned across each quarter (0.0125% per quarter).
- Also, please note, the Q2 23/24 figure has been updated.
- In Q3, 21 exclusion processes were started; 3 children have been excluded, 15 are awaiting a decision, and 3 have been retracted. The 3 exclusions were spread across primary and secondary phases.
- This academic year there have been 6 upheld exclusions. This accounts for 21% of the 28 processes started. 19 of those processes remain to be concluded.
- Of these 28 processes, three schools account for 46%: The Victory Academy (5), St John Fisher Catholic School (4) and Brompton Academy (4). Persistent disruptive behaviour (8), Physical assault against a pupil (8), and Physical assault against an adult (7) account for 82% of all issues. 39% of pupils for whom the permanent exclusion process has been started receive special educational needs and disabilities (SEND) support or have an Education, Health and Care plan (EHCP).

# Benchmarking:

- The most recent benchmarking data is for the (full) 2021/22 academic year.
- The table below shows National and local data:

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

#### Actions:

- Since September 2023, alternative provision (AP) in Medway now operate 8-12 week reintegration placements for children at risk of exclusion to intervene before a permanent appointment is required. Fair Access Protocols (FAP) have been revised by headteachers and the FAP panel now discusses all admissions to AP.
- Commissioned services for schools has been in place since September to support with understanding and catering for children's additional needs

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	Maximise	83%	90%	Red	STATIC	DET
	better,						

#### **Comments:**

- There have been no changes to the inspection ratings of Medway's secondary schools this quarter. 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.
- There has been one inspection published in this quarter; Chatham Grammar School remained graded 'Good'.
- Neither The Leigh Academy nor Maritime Academy have had an Ofsted inspection, and so they are not counted in this measure, in either the denominator or numerator.

# Benchmarking:

- Nationally this figure is also 83% and the South East currently has 87% of schools graded good or better.
- Medway is 12<sup>th</sup> in the South East.

#### Actions:

The School Effectiveness team continues to work with the Regional Director's Office to identify areas of underperformance.
 Comprehensive disaggregated data is shared with schools and the Medway Education Partnership Group (MEPG) to support sharing of good practice and understanding the underlying issues.

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	PI name	Aim to	Value	Target	Status	Short	Long
code						Trend	Trend
EDU3(b)	The percentage of children who were persistently absent from school (22/23 academic year)	Minimise	22.4%	23.5%	Green	IMP	IMP

# **Comments:**

- Based on the most recent school census data (full year 2022/23), persistent absence (PA) has decreased to 22.4%. This a drop of 2.2% since last quarter and remains below target. This equates to 9,593 in Years 1 to 11 missing more than 10% of sessions. In Q1 this was 9,725 children. 132 children have been removed from the PA cohort and are now attending 90% of sessions or more.
- The rate of primary phase PA is 18.5%, down from 20% in Q2.
- The secondary phase PA is 26.4%, an increase on the Q2 figure of 25%. This increase in secondary PA is also seen in the national secondary school rate.
- 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 21.2% having dropped by 1.4% from 21.5%. As such Medway is improving at a faster rate than National and the gap is closing, from 1.4pp to 1.2pp now (Q2).

### **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:
    - o Communication and advice
    - Targeting support meetings
    - Multi-disciplinary support for families
    - o 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.
- Further 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 a 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.

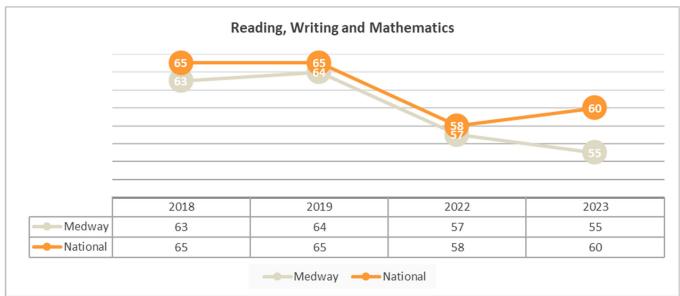
Please note, data gaps continue to impact across strategic planning in Education and special educational needs and disabilities (SEND).

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

- The **revised** data for 2023 has been released. 55.0% 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 (pp) lower than last year and 5pp 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 133rd this year.
- The gap between national performance and Medway has widened.

# Benchmarking:

• National data indicates that 60% of children achieved at least the expected standard. As such Medway is 5pp lower than National.



# **Actions:**

- The service supports headteacher associations and the chief executive office (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:**

- Revised 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 Medway difference (Academy) between		Percentage difference between	
			Medway		Medway	
			Maintained		Maintained	
			and		and	
			National		Medway	
					Academy	
2022/23	62%	60%	+3.3%	52%	+19.2%	
2021/22	64.5%	59.5%	+8.4%	53.2%	+21.2%	
Percentage change	-3.9%	-0.8%	-39.3%	-2.3%	-9.4%	

# Benchmarking:

• Revised 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 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
SE2 OEPr	Partnership measure: Percentage of all	Maximise	94.7%	93.0%	Green	STATIC	IMP
	Primary Schools judged good or better,						

# **Comments:**

- There are 75 primary schools. Currently 71 schools are good and better; 6 are outstanding, 65 are good, 2 schools require improvement, and 2 are inadequate.
- There are 52 academies. Of these 92% are good or better (4 are Outstanding and 44 Good), 2 require improvement and 2 are inadequate.

# Benchmarking:

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

#### Actions:

• The School Effectiveness team continues to work with the Regional Director's Office to identify areas of underperformance. Comprehensive disaggregated data is shared with schools and the Medway Education Partnership Group (MEPG) to support sharing of good practice and understanding the underlying issues.

PI	PI name	Aim to	Value	Target	Status	Short	Long
code						Trend	Trend
SEKS4A8	Average attainment 8 score (22/23	Maximise	45.3	49	Red	DET	DET
	academic year)						

### **Comments:**

- Provisional data has now been published for the 2022/23 academic year.
- In 2023 there was a return to pre-pandemic standards for GCSEs, with protection built into the grading process to recognise the disruption that students have faced. This has resulted in a drop in outcomes across all measures at both national level and in Medway in 2023.
- Medway's Attainment 8 score is 45.3. This is a drop of 5.4% upon previously published data (2021/22). Since 2016, the trend of Key Stage 4 (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 the national (45.3 Medway average and 46.3 national average 2022/23).
- 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).

# Benchmarking:

- The marking realignment has meant decreases, compared to 2021/22, across all the comparator groups.
- The statistical neighbour average has had the smallest decline whilst National, regional and local results all show similar deterioration.
- The statistical neighbour group has widened their gap above national, whilst Medway has remained consistently 1pp behind England.

	2021/22	2022/23	Percentage change	2021/22 Gap to National (pp)	2022/23 Gap to National (pp)
National	48.9	46.3	-5.3%		
South East	50.1	47.4	-5.4%	1.2	1.1
Statistical	53.0	51.3	-3.2	4.1	5.0
Neighbour					
Medway	47.9	45.3	-5.4%	-1.0	-1.0

<sup>\*</sup>Finalised data is expected to be published in February.

### **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.

# **Projects for this outcome:**

There are no projects for this outcome.