

Council Priority: PEOPLE

Supporting residents to realise their potential

Quarter 4 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

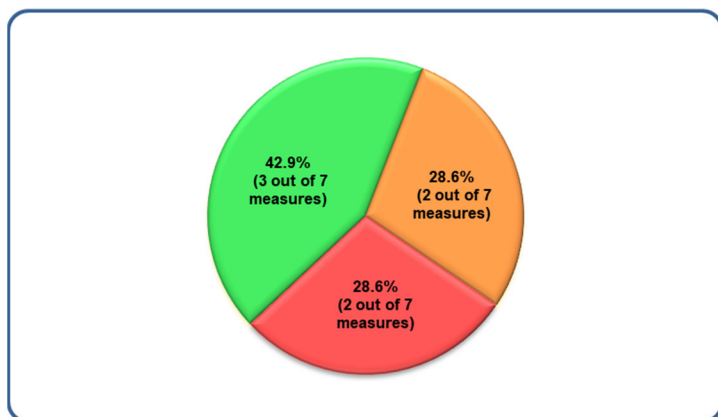
Outcome: Healthy and active communities

Strategic Risk Summary

There are no strategic risks for this outcome.

Programme: Improving everyone's health and reducing inequalities

Performance Summary



The total number of measures is 7.

3 measures met their target [PH13; PH15; PH8]

2 measures were slightly below target [PH14; PH17]

2 measures were significantly below target [PH23; PH34]

1 of the 3 green measures is deteriorating long term [PH13]

1 of the 2 amber measures is deteriorating long term [PH17]

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) (Q3 23/24)	Maximise	207	177	Green	IMP	DET

Comments:

- This performance measure is measured a quarter in arrears.
- To the end of Q3 23/24, the service set 803 quit dates, achieving a 58% quit rate. From all the quits achieved, 75% came from the core team.
- The vape service has been offered throughout Q3, with higher success rates than average, at 65%. 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- to medium- term as a quit smoking aid. During Q3, the team was successful in their bid for the national Swap to Stop service, which means all vape starter kits provided have been provided by the Office for Health Improvement and Disparities (OHID), free of charge.
- The outreach project continues to target areas of higher-than-average smoking prevalence, and routine and manual workplaces. During Q3, the team attended The Rivermede Trust, Job Centre and Sleepeeze.
- 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, we expect all people admitted to hospital who smoke to 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 (22/23 annual)	Minimise	22.4%	22.3%	Amber	IMP	IMP
PH15	Excess weight in 10–11 year olds (22/23 annual)	Minimise	37.3%	37.8%	Green	IMP	IMP

Comments:

- 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	67.33%	70%	Amber	DET	DET

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 breast milk or formula milk. Breastfeeding has a large health benefit for the baby and mother, making this an important health and wellbeing metric. Infant feeding advice is given during the maternity period, and support is offered in the postnatal period by midwives, health visitors and other early years professionals.
- There has been a decrease in breastfeeding initiation rate in Q4 23/24, with a value of 67.33%. This is below the target of 70%. The Infant Feeding Strategy group will be meeting in May and reasons for the reduction since the last quarter will be discussed along with possible interventions to increase the performance.

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	6	Red	STATIC	DET

Comments:

- No new settings have been assessed in Q4 23/24.
- At the end of 2023, the national Alzheimer's Society charity withdrew support and resource for local Dementia Action Alliances. This has impacted our local website which provides the framework for member sign up, administration of the Dementia Friendly award and the coordination of dementia friendly training is likely to be impacted.
- However, a representative of the Kent Dementia Action Alliance (DAA) attended the Medway DAA this quarter to discuss closer working. This included discussions on how the two alliances can work to join up initiatives which promote dementia friendly action, including award schemes.
- A group separate to the alliance comprising the DAA Chair, the Medway Public Health team and Dementia Friendly Community Rochester Chair will be forming a working group to review how processes can be aligned.
- In addition, the Workforce Development team is leading the production of an alternative training provision for the creation of dementia champions. This in future will be available through the DAA partnership and the A better Medway Champion programme.
- Moving forward into 2024/25, the priority of the DAA will be to establish new resources and processes. These will enable organisations and settings to sign up and manage their commitment to support individuals living with or affected by dementia. Key actions will include the development of a new website and updated terms of reference and governance for the group, which will assist with the management of sign ups and promotion of the network. In the first half of the year, these activities will take priority, allowing existing partners and members to refresh and update their existing commitments after this year's DAA week. Subsequently, in the latter part of 2024, we anticipate an increased emphasis on promotion and the establishment of new dementia-friendly settings.

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	78.9%	75.0%	Green	IMP	IMP

Comments:

- This performance measure shows significant strides that have been made in enhancing child obesity management services. In Q4 23/24, the team implemented the new menu of intervention (6 week shortened programme) with positive outcomes in participation and completion rates among children and their families. Continuous monitoring and a feedback mechanism have been established to ensure ongoing improvement and sustainability of these positive outcomes across all the programmes. These services include Tri Mini, Tri Club, Tri Taster and Fit Fix with the different programmes targeting different age groups and varying in length and numbers of contact. In the quarter, there was a service review with Public Health senior management to ensure our efforts in improving child obesity services continue to yield positive results.
- In the next financial year (2024/25), we remain committed to improving service delivery outcomes and achieving lifestyle improvements in children, addressing emerging challenges by advancing our initiatives including digitally offered services to support and educate families, and ultimately improving the health and wellbeing of children affected by obesity.

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

Comments:

- 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:**

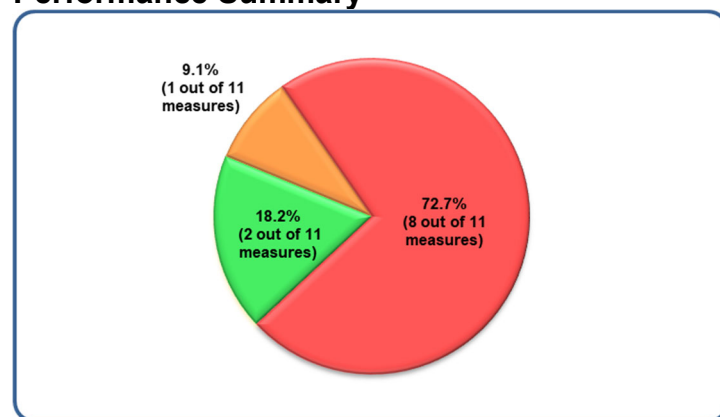
- The Medway Healthy Weight Network held its annual summit event in February. Councillor (Cllr) Theresa Murray chaired the session, which was attended by 90 people from over 40 different organisations or council departments. The meeting focused on progress against the network's annual priorities, an update on critical healthy weight subjects, a summary of the year's activity from the three network subgroups (Medway Food Partnership, Physical Activity Alliance, and Infant Feeding Strategy group) and a discussion of priorities for the forthcoming year. An expert speaker from Leeds Beckett University, Professor Paul Gately, gave an insightful overview of the Medway whole system working to tackle obesity, stating national and international practice that we can learn from and giving the Medway group advice for next steps. Professor Gately praised the Medway whole system approach, complimenting the partnership we have established, the level of engagement from stakeholders, the tools that we have developed (such as the whole system obesity asset dashboard) and suggested we need to share our own experience with other local authorities who can learn from us.
- This year's network priorities include working with planning policy colleagues to ensure that through the local plan, new developments prioritise a healthy environment. This includes active travel, exercise, healthy eating, and food growing opportunities. A proposal has also been created and scheduled to be reviewed by Overview and Scrutiny and Cabinet to strengthen the council's existing advertising and sponsorship policy. Following the lead from other councils, this would include prioritising advertisements and sponsorship for healthy food, and restricting those from high fat, high sugar, and high salt products.
- Due to the success of Medway Can, our year-long healthy weight campaign that concluded in 2023, we ran a physical activity competition in schools to see which school could travel the most miles in a four-week period. The most active schools were notified and rewarded with a voucher to purchase additional sports equipment for their pupils. Schools also continue to sign up for the Food for Life programme, with 20 schools registering this academic year (adding to the 20 schools from 2022/23). These will now be supported by the Food for Life team in working towards their Whole School Food Programme Award.

Outcome: Resilient families

Strategic Risk Summary

Live or Managed risk	Risk Ref	Risk	Inherent 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	Q4 23/24 Current Risk Score	Movement	Definition (Current score) (L-likelihood) (I-impact)	Owner	Portfolio	Link to Council Plan
L	SR09B	Failure to meet the needs of children and young people	BII	BII	BII	BII	BIII	BIII	→	L – likely I – moderate	Director of People and Deputy Chief Executive	Children’s Services	People

Programme: Children’s Services Improvement Plan Performance Summary



The total number of measures is 11.

2 measures met their target [ILAC1 ILAC2]

1 measure was slightly below target [CSC0004]

8 measures were significantly below target [A10; CSC0006; ILAC3; ILAC4; ILAC5; ILAC6; ILAC7; N23]

1 of the 2 green measures are deteriorating long term [ILAC 2]

2 of the 8 red measures are deteriorating long term [A10; ILAC3]

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	516	450	Red	DET	DET

Comments:

- The cumulative outturn at the end of Q4 has risen by 93 days (or 22%), and is now above target.

Benchmarking:

- The latest national benchmark is 367 days and the South East is 338. As such, Medway is adverse to both comparators.

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.
- 4 Medway children were matched with 4 adopters in the last 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	74.4	Between 65 and 73 Mid-point 69.0	Amber	IMP	IMP

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. The upper limit has been set at 73 and the lower at 65.
- Currently there are 475 CiC, which is a rate of 74.4 per 10,000. There has been a small drop since December (17 children).

Benchmarking:

- Nationally there are 71 Looked After Children per 10,000 population. Our Statistical neighbours have 69 CiC per 10,000 and the South East has 58.
- 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 unaccompanied asylum-seeking children (UASC).

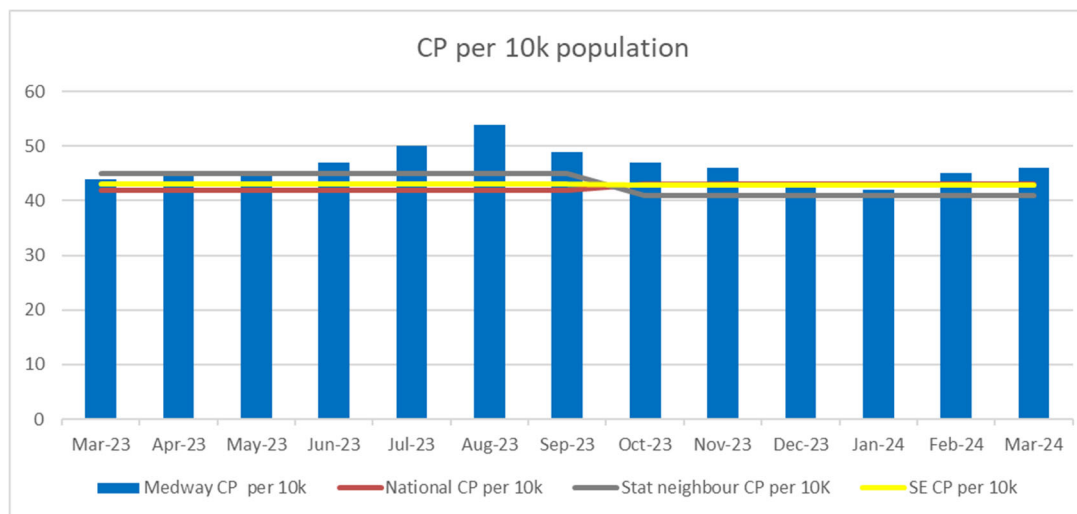
Actions:

- The rate of CiC per 10,000 has continued to reduce during Q4 to 74.4. There were 30 new entrants to care, and 48 children exited care. The majority of children came into care by way of legal order including interim care orders (12), police protection (6), remanded due to criminal activity and as an S20 voluntary agreement including migrant children. It is anticipated that the numbers of migrant children may begin to increase as we see weather conditions improve. Robust arrangements are in place including staffing and placement options to respond to this. There continues to be robust oversight of these referrals within the service and amongst commissioning colleagues, including effective relationships with the national transfer scheme to ensure this is managed at an appropriate pace.
- There has been some traction in progressing permanency plans for children and young people this quarter, with 14 children leaving care as a result of permanency decisions being made for them in court proceedings, including returning to parents/family members, and adoption.

PI code	PI name	Aim to	Value	Target	Status	Short Trend	Long Trend
CSC0006	Number of CP per 10,000 children	Goldilocks	46.0	Between 32 and 42 Mid-point 37.0	Red	DET	IMP

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. The upper limit has been set at 42 and the lower at 32.
- Currently there are 293 children on a CP plan. This equates to a rate of 46 per 10,000, a rise of 7% compared to the Q3 rate – this equates to 21 children. Over the quarter the number of children on a CP plan has been slowly rising. This is mainly due to peaks in the numbers of children becoming subject to a CP plan in February.



Benchmarking:

- Medway now has comparable, but marginally higher rates than national and the South East (both at 43 per 10,000) and our Statistical neighbour rate of 41 per 10,000.

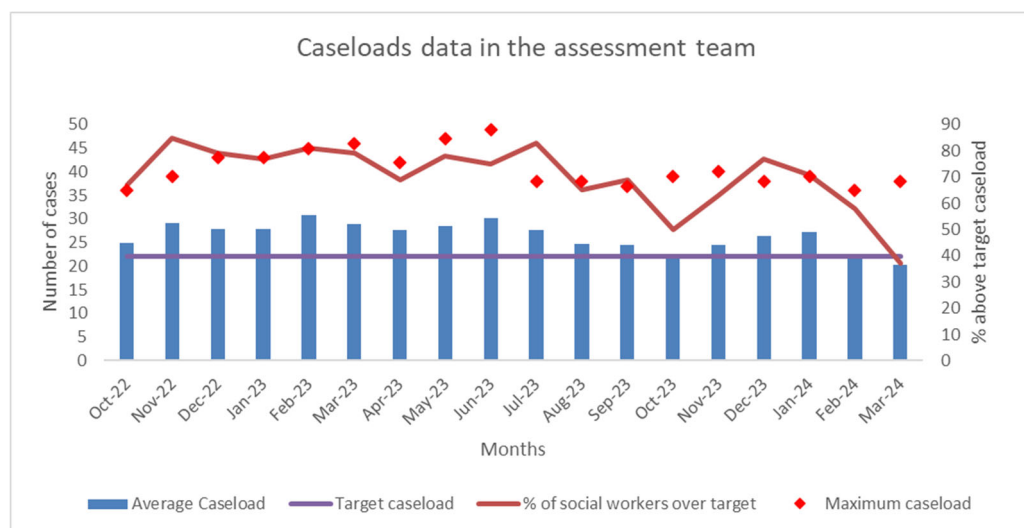
Actions:

- The number of children subject to a CP plan had a peak in February, which elevated the average and comparator outcomes. This has now reduced and is now more in line with National and South East comparators, and slightly above our statistical neighbours. Our most recent data evidences further reductions in numbers of children currently subject to a CP plan.
- Concerted targeted work continues, 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 CP plan, which are made as part of a multi-agency discussion, and review work including midpoint reviews, to ensure that the right children are on a CP plan and to assist in minimising drift and/or delay.
- Senior managers will continue to ensure oversight of child in need work collaboratively 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	20.2	22	Green	IMP	IMP

Comments:

- The average caseload in the assessment teams is 20.2, a 23% reduction compared to the December snapshot. The trend over the quarter has been falling. The percentage of social workers over target caseload has fallen to 37%. The maximum caseload has remained relatively static and now stands at 38.
- There has been an improvement compared to Q3, and there has also been an improvement compared to March 2023, in all elements.
- There has been a 5% increase in the numbers of contacts between Q3 and Q4 and a 34% decrease in the number of open assessment cases at the end of Q4 compared to the end of Q3. In Q3 the teams completed 1,107 assessments. This has risen by 15% in Q4 to 1,270.

**Actions:**

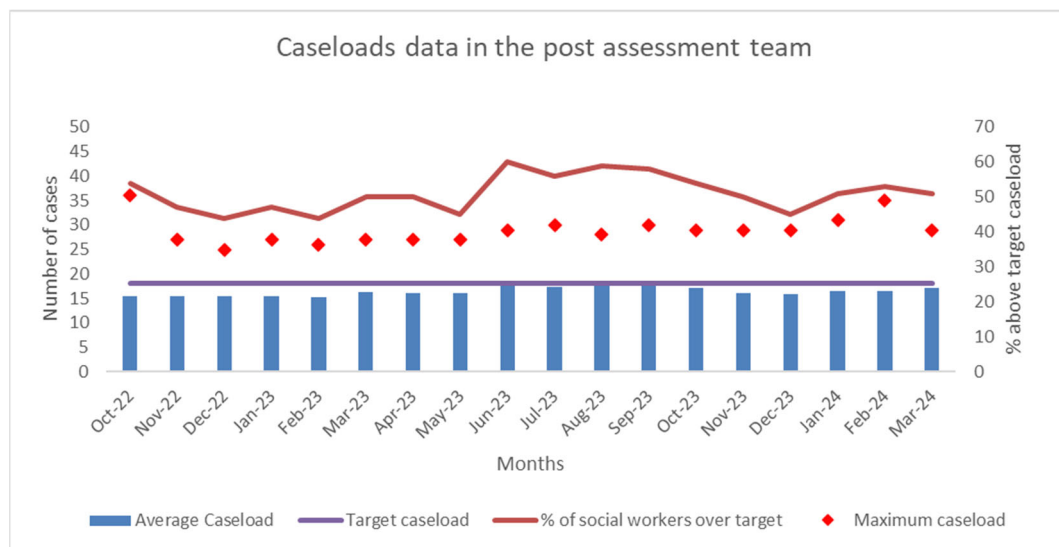
- Q4 saw the average caseload in the service lower to 20.2, which is below the target average caseload of 22, and a significant decrease in the percentage of social workers over the target caseload. Practitioners and managers across the assessment teams have continued to focus on timeliness and throughput and this is being evidenced by the lowering of caseloads.
- The maximum caseload has remained high due to an assessment team carrying a social worker vacancy which impacted on caseloads within that team. A permanent social worker has now started in that team, therefore, it is likely that the maximum caseload will decrease in Q1.

- 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	17.1	18	Green	DET	DET

Comments:

- The snapshot shows post assessment social work teams (Area CSW Teams 1-8) have an average caseload of 17.1, a rise of 8% compared to the Q3 position. The performance measure remains below target.
- Over the quarter there has been a slow increase in average caseloads. The highest caseload is 29, the same as at the end of Q3. There has been rise of 13% in the proportion of workers who are over target caseload (51% compared to 45%). The rise in the numbers of children on a Child In Need (CIN) plan and Child Protection (CP) plan will have impacted negatively on average caseloads.



Actions:

- Caseloads have increased at the beginning of Q4 in the post assessment teams. Staffing challenges and one of the project teams leaving have led to an increase in the number of workers above the target caseload. However, we are now seeing new

staff starting and it is envisaged that this will support a reduction; coupled with the oversight of managers who continue to target throughput of work.

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	62%	90%	Red	DET	DET

Comments:

- The end of quarter snapshot shows that 62% of assessments were visited within one working day. This is a 8 percentage point drop compared to Q3. The outturn has fluctuated over the quarter, with 58% of visits within one working day in January and 70% in February. There has been a 34% decrease in the number of open assessments at the end of Q4 compared to the end of Q3.
- The March 2024 position is adverse to the 71% recorded for March 2023.

Actions:

- Q4 saw a decrease in the timeliness of visits completed within one working day compared to both last quarter and last year. Dip sampling and management oversight continues to evidence that this is due to delays in recording. Timely recording remains a priority for 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	72%	85%	Red	IMP	IMP

Comments:

- Please note, the Q3 snapshot has been updated to 59% to account for retrospective writing up.
- The end of quarter snapshot shows 72% of S17 assessments were visited within five working days. This is 13 percentage point improvement compared to the Q3 snapshot. This figure was 59% in January and 57% in February. The long-term trend over the last 12 months is now upward and March 2024 is stronger than the 50% recorded in March 2023.

Actions:

- Q4 saw an increase in the timeliness of visits completed within five working days. Dip sampling and management oversight continues to evidence that this is due to delays in recording. Timely recording remains a priority for 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	54%	65%	Red	IMP	IMP

Comments:

- Please note, the Q3 outturn has been revised, from 48% to 50% following retrospective updates to the database.
- The percentage of children for whom permanency has been agreed has increased by 4 percentage points since last quarter, to 54%, although it remains below target. The trajectory of this performance measure has now improved and is showing positive movement. The outturn is now similar to the March 2023 outturn (56%).

Actions:

- There has been a slight increase in the percentage of children for whom long term fostering has been the agreed plan. Work continues to develop practice and consistency in this area, including planned training for foster carers and an update to procedures, alongside timely recording when children and young people have been matched. A permanence performance dashboard has been developed which is providing a more detailed overview of patterns and trends.

PI code	PI name	Aim to	Value	Target	Status	Short Trend	Long Trend
ILAC6	Rate of open CIN cases per 10,000	Goldilocks	368	Between 305 and 337 Mid-point 321	Red	IMP	IMP

Comments:

- Please note, Q3 data has been reduced from 403 per 10,000 to 394 per 10,000 following retrospective closures.

- Currently the rate is 368 Child In Need (CIN) cases per 10,000 population, which is outside of the green zone of 305 to 337. There are 2,350 children counted as CIN as per the Department for Education (DfE) definition. This has reduced compared to the last quarter by 167 children (7%).
- A child in need is defined, under the Children Act 1989, as “a child who is unlikely to reach or maintain a satisfactory level of health or development, or their health or development will be significantly impaired, without the provision of services, or the child is disabled.” This includes all looked after children and all children on a Child Protection (CP) plan as well as other children supported by social services who are not looked after on a CP plan or are having an assessment.
- Please note the number of children in this performance measure is different from the number of Children on a CIN Plan (mentioned in the ILAC2 performance measure). Children on a CIN plan are a subset of the CIN cases relevant to this performance measure.

Benchmarking:

- The number of CIN cases has continued to drop over the last quarter but remain higher than the National and South East rates.
- Nationally there are 342 CIN cases per 10,000 population. It is slightly higher at 344 for our statistical neighbour group and at 336 in the South East. All of these rates have risen over the last year.

Actions:

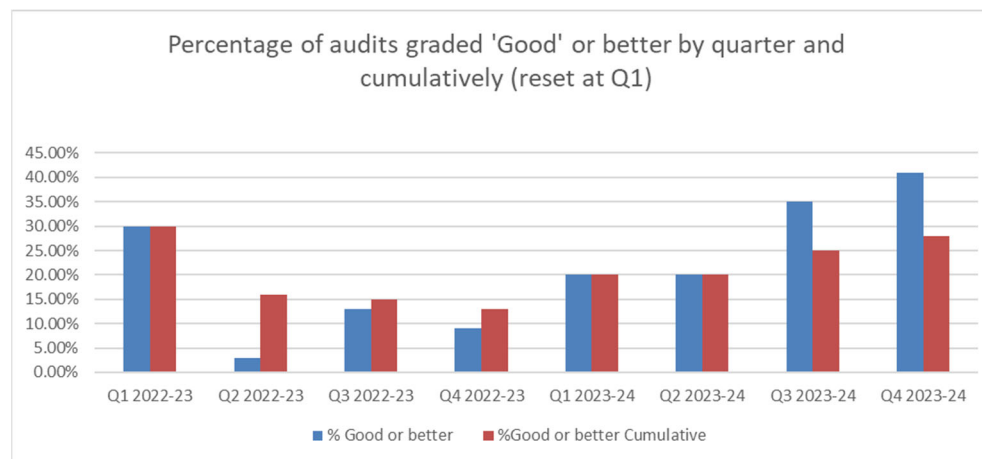
- Managers continue to focus on throughput of work which is evidenced in the continued reduction of open CIN cases in the service. There has been an appointment of a CIN Reviewing Officer who will work alongside and support managers in ensuring that the right child has the right plan and service going into Q1 24/25.

PI code	PI name	Aim to	Value	Target	Status	Short Trend	Long Trend
ILAC7	The percentage of CSC Audits graded good or outstanding	Maximise	41%	80%	Red	IMP	IMP

Comments:

- Improvement in Children Social Care (CSC) audit performance continues.
- Q4 data includes audits conducted in January and February 2024. 41% of audits were rated good or higher for the period. This is 11 out of 27 audits. 14 audits indicated that work requires improvement and 2 were inadequate.
- Cumulatively, this year, 28% of audits have been good or better. This percentage is over double that seen during the same point last year, where 13% were good or better. In 2023/24 there have been 116 audits; 33 have been good or better, 66 required improvement and 17 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 this stretching target.



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 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 permanent social workers	Minimise	27%	20%	Red	IMP	IMP

Comments:

- Please note, the Q3 figure has been revised following the receipt of the December data.
- Q4 data is as of 31/3/24.
- There has been a 2pp improvement in the vacancy rate since last quarter.

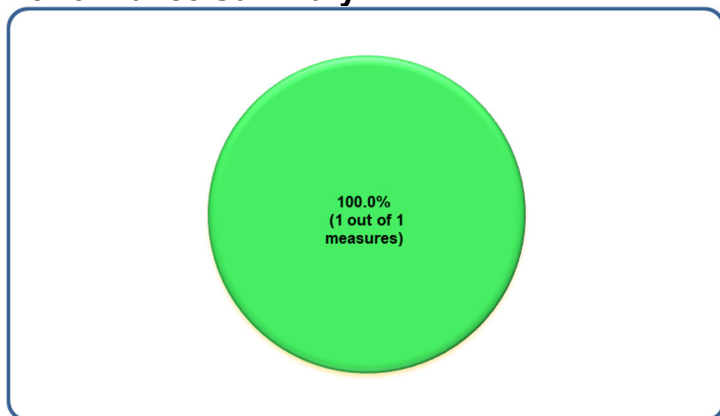
Benchmarking:

- The benchmarking data is derived from the Social Care workforce survey for data as of 30 September 2023. Medway has a higher vacancy rate than the South East (18%) and National (19%).

Actions:

- Recruitment and retention continue to be a significant challenge for Medway and is a national issue in children's social work.
- A Workforce Meeting is held monthly, chaired by the Assistant Director, including Human Resources (HR) and Practice Development colleagues. This meeting oversees and challenges progress on the Workforce Action Plan, as recruitment and retention are a significant risk area for the service, both in relation to practice and budgets. Extensive work is continuing to support recruitment of permanent staff, including growing our own workforce, and a new cohort of Newly Qualified Social Workers are currently being recruited.
- Additional staffing resources have been agreed to support HR capacity, and a new Workforce Lead is being recruited to sit within children's services and support efficient recruitment processes.
- Vacancies continue to be backfilled through locum staff. The project team which was supporting the Children's Social Work Teams (CSWT), has now been disbanded and caseloads have reduced as a result of targeted focus on throughput of work. The service will continue to run recruitment events and to target existing agency staff working in Medway, encouraging them to convert to a permanent contract.

**Programme: The best start in life
Performance Summary**



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). (Q3 23/24)	Minimise	7.9%	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 and Medway in line with the Integrated Care Board (ICB) footprint.

Achievements:

- The 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 have now fully transitioned over to a Medway Foundation Trust (MFT) inhouse delivery model for smoking cessation for pregnant smokers. Therefore, the Medway Stop Smoking Service (MSSS) will no longer provide support for pregnant smokers but will support partners/significant others of pregnant smokers until MFT has secured funding to provide support for this.
- The MSSS, in collaboration with key partners, will now deliver a new specialist postnatal smoking cessation service. Postnatal relapse to smoking rates is 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 MSSS can now offer vapes to pregnant and postnatal clients which has been funded through the national Swap to Stop scheme. The 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 Q3 23/24 performance to stretch targets for these checks are as follows:
 - ❖ New Birth Review: 81% (Target – 91%)
 - ❖ 6-8 Weeks: 90% (Target – 91%)
 - ❖ 10-12 Months: 71% (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 by relatively more percentage points 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. MCH has also reported that the bank holidays over Christmas make it more challenging to meet the deadlines for some checks – particularly the new birth review and 6-8 week check.

- Overall coverage for children seen including those seen outside of target timeframes are as follows:
 - ❖ New Birth Review: 98%
 - ❖ 6-8 Week: 96%
 - ❖ 10-12 Months: 92%
 - ❖ 2-2.5 Years: 86%
 - ❖ Antenatal: 93%
- The MCH School Nursing service delivers the National Child Measurement Programme (NCMP) for Medway. As of the end of term 2 (December 2023), 58% of Reception Year and Year 6 pupils had participated in the programme with four terms to go for MCH to complete the work.
- 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 December 2023 to February 2024, the service received 590 text enquiries from children and young people, compared with 322 during the December 2022 to February 2023 period. The most common enquiries related to emotional wellbeing, anxiety, self-harm, and depression.
- In this quarter, the Child Health team has made significant strides in promoting health and wellbeing among children. Our annual impact report published this quarter highlights the team's remarkable achievements and the extensive reach of our programmes and resources.
- Key Highlights:
 - ❖ **High quality Relationships and Sex Education (RSE) lessons for over 7 million children**
 - Leveraging national downloads of the Medway RSE Scheme of work and considering the average number of pupils per primary and secondary school in the UK (according to .GOV), our team has successfully facilitated access to high quality RSE lessons for 7,548,120 children across the UK.
 - ❖ **Professional Training and Consultation**
 - We directly trained 637 professionals across various health and wellbeing topics.
 - Through participation and engagement activities, we consulted with 887 parents and engaged with 48 children.
 - ❖ **Schools Award Programme**
 - Our team actively engaged with 3,331 children through our Schools Award programme.
 - Additionally, we conducted workshops for 201 parents and carers to enhance their understanding of health-related matters.
 - ❖ **Collaboration for Post-16 Transition Resource**

- The development of the post-16 transition resource is a focal point for our team. We are collaborating with the new post-16 strategic leads working group.
- This initiative aims to involve professionals across the organisation and Medway schools, ensuring their input and increasing consultation with the young people (YP) they serve.
- Sixth form pupils from The Hundred of Hoo Academy are actively contributing by creating resources for YP by YP.
- ❖ **Talk & Type Sessions for A Better Medway (ABM) Schools**
 - Our award progress support sessions, known as “Talk & Type,” have been well-received by ABM engaged schools.
 - Within the first month of launching this new offering, four schools have already accepted the opportunity.
- ❖ **First Aid Certification**
 - All members of the Child Health team are now qualified first aiders.
- ❖ **Community Engagement and Workshops**
 - The Child Health team actively participated in the Welcome to Medway event at All Saints, Chatham. We shared resources on resilience and transition with members of the public.
 - At the Wellbeing for Schools event at The Corn Exchange, Rochester, we delivered a workshop for primary school children to develop positive self-esteem.
 - We have also launched a survey for care leavers to understand their needs and preferences regarding access to Public Health services.
- ❖ **Upcoming event**
 - The Kent and Medway Self-Harm Summit is booked for October 2024.
- The team have delivered 15 training courses or sessions to 243 professionals across Kent and Medway during Q4 23/24. A detailed breakdown of the completed training by the team is presented below for Q4:
- ❖ **Adverse Childhood Experiences (ACES) and Trauma Informed Practice (TIP)**
 - 9-11 January (social care single agency) – 6 delegates
 - 18-19 January – 10 delegates (Kent)
 - 23 January (reflections on ACES for social care) – 8 delegates
 - 5-6 February – 5 delegates (Kent)
 - 5-6 March – 4 delegates (Kent)
- ❖ **Alumina (Self Harm)**
 - **Medway delivery**
 - 🇬🇧 January 2024 (Medway) – 9 delegates
 - 🇬🇧 March 2024 (Medway) – 14 delegates
 - **Kent delivery**

- ✚ January 2024 (Kent – Dover) – 8 delegates
- ✚ February 2024 (Kent – Sevenoaks) – 6 delegates
- ✚ March 2024 (Kent – Folkestone) – 7 delegates

❖ **Resilience**

- 30 January – 4 delegates

❖ **Basic Self-Harm training face-to-face (Medway)**

- February 2024 (school session) – 28 delegates

❖ **Basic Self-Harm training online (Medway)**

- February 2024 (parent session) – 7 delegates

❖ **Basic Self-Harm training online (Kent)**

- January 2024 - March 2024 (online professional sessions) – 24 delegates

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

- February 2024 – 13 delegates

• Parent Workshops:

❖ **Parent Emotional Mental Health (MH)**

- January 2024 – Supporting your child's MH (online) – 3 delegates
- January 2024 – Managing your own MH (face to face) – 5 delegates
- February 2024 – Supporting your child's MH (face to face) – 23 delegates

❖ **Self-Harm**

- January 2024 – 5 delegates

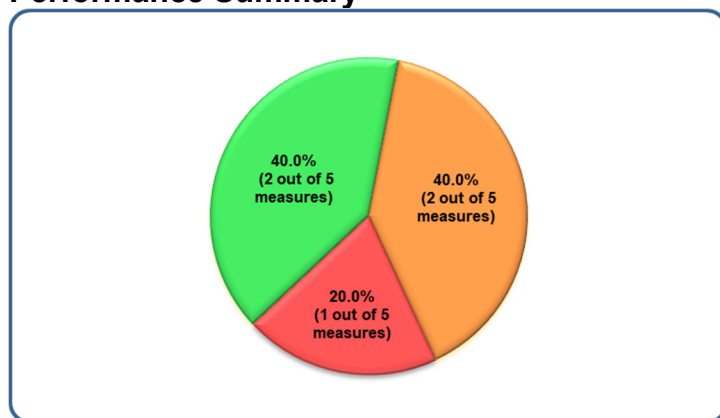
Outcome: Older and disabled people living independently in their homes

Strategic Risk Summary

Live or Managed risk	Risk Ref	Risk	Inherent 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	Q4 23/24 Current Risk Score	Move ment	Definition (Current score) (L-likelihood) (I-impact)	Owner	Portfolio	Link to Council Plan
L	SR09A	Meeting the needs of Older People and Working Age Adults	AI	BII	BII	BII	BII	BII	→	L – likely I – major	Director of People and Deputy Chief Executive	Deputy Leader	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)]

2 measures were slightly below target [ASCGBT001; ASCOF 1G (n)]

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

1 of the 2 amber measures is deteriorating long term [ASCGBT001]

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	30.7%	30%	Amber	DET	DET

Comments:

- The proportion of clients receiving a long-term service that is a placement has increased, marginally, since last quarter. There are 892 clients in residential or nursing placements. This is 0.9% more than in December and 4% more than at the same point last year. There are 2,908 long term clients which is just under 2% fewer than at the end of Q3 and just under 1.6% more than at the end of March 2023.
- 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%; this is an improvement on 2021/22.

Actions:

- Residential care should be the last option for someone that requires care and support from Adult Social Care (ASC). All other forms of 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.
- 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. Funding to make these beds permanent has been made available.

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	23.4%	33%	Red	DET	DET

Comments:

- Please note, the Q3 figure has been revised following updated recording.

- There has been a further drop in the percentage of clients receiving a direct payment (DP) for their social care service. At the end of March there were 479 clients out of 2,047 receiving a DP.
- At the end of December there were 503 clients out of 2,066 are receiving an ongoing DP. Compared to last quarter the number of clients with a DP has dropped by 5% and the denominator has reduced by 1%. In March 2023 26% of clients (521) 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 33% target is 94 (this figure is variable depending on the total number of individuals assessed as requiring a community care package). The average number of cared for DP referrals received each month is 7. Targets are being arranged for Locality Teams. The Learning and Development team are arranging Care Act assessment training for the Self Directed Support (SDS) team to enable them to complete Care Act compliant reviews, which will not only support Adult Social Care (ASC) to increase the number of reviews undertaken, but enable the SDS team to discuss the options of a DP with people that draw on care and support.
- Locality Team Operations Managers are identifying DP Champions to promote DPs. The SDS team attends team meetings to discuss potential DP referrals when invited by the teams.
- The SDS team is developing client and practitioner leaflets to explain the benefits of a DP and the process of referring to and setting up a DP.
- 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 regulations unlike some of the micro enterprise models currently being used in other local authority areas.
- 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 is likely to 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	64%	65%	Amber	IMP	IMP

Comments:

- There has been a two percentage point rise in the proportion of learning disability (LD) clients who live in their own home or with family.
- Of the current 640 LD clients, 408 (64%) are in their own home or living with family and have had a review in the last 12 months. 95 (15%) are living in their own homes or with family but haven't had a review in the last 12 months. This represents an improvement in both cohorts. There are 79% in the desired type of accommodation. There are 137 clients not living with their families or in their own homes, and just over 80% 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% (22/23 data). Medway's performance is adverse to both these comparators.

Actions:

- Work continues to ensure the person's file is updated as this should improve the performance.
- In addition, staff are reminded to record the information when carrying out assessments and reviews.

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 Q3 outturn has been revised following updated recording. It represents six 18-64 admissions.
- Please note, the target 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 Q3 and is below target. We may see the Q4 figure rise as placements are recorded in the coming weeks.

- The current data shows that the outturn is green for the quarter as is the cumulative performance.

Benchmarking:

- Nationally the benchmark (2022/23 data) is 14.6 per 100k for the full year – just under 3.7 per 100k for each quarter – and for our statistical neighbours the figure is 13.9 per 100k (3.5 per 100k 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 100k, or over 3.8 per 100k 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 to 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 this is suggested as an option when discussing the right type of care and support needed for people.

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	99.3	162.5	Green	IMP	IMP

Comments:

- Please note, the Q3 outturn has been revised following updated recording and represents 75 65+ admissions.
- Please note, the target for this measure is apportioned across each quarter (162.5 per quarter).
- There have been 46 admissions this quarter. Whilst this figure and the rate per 100k population is below target, retrospective inputting may raise this figure.
- Cumulatively the rate of admission for this age group is 619.5 per 100k following adjustments to Q1 and Q2 for retrospective inputting. This is slightly under the 650 per 100k full year target. The quarterly and cumulative performance is green.

Benchmarking:

- Nationally the benchmark (2022/23 data) is 560.8 per 100k for the full year – just over 140 per 100k for each quarter and for our statistical neighbours the figure is 540.7 per 100k (just over 135 per 100k per quarter). Medway is adverse to both the 2022/23 National and peer group performance (2022/23 performance for Medway is 682 per 100k or 170.5 per 100k 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 of 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.
- Kyndi have gained additional funding via the Better Care Fund to purchase additional technology in order to increase the use of assistive technology.
- We have also established that in some cases an increase the use of Home Care to provide more frequent care calls, in order to prevent, reduce and delay the need for residential care, can be provided.

Project for this outcome:**Loneliness and Social Isolation (L&SI):**

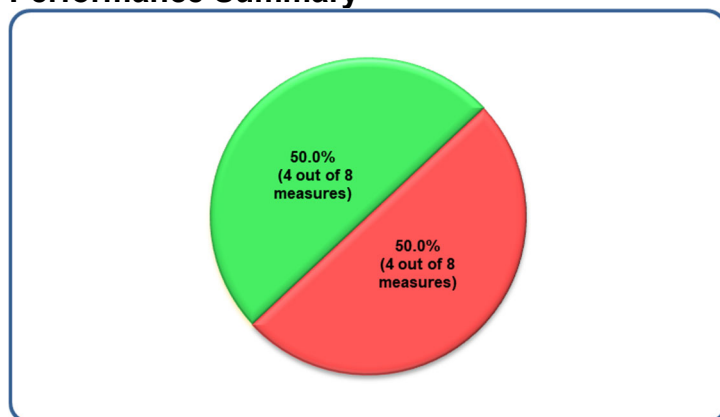
- The Medway Together Pledge was featured in Cllr Maple's 'one-minute Medway' and discussed at Cabinet with nine Cabinet members making a pledge. A total of 53 pledges have been made so far.
- Four L&SI training modules were delivered with 31 delegates attending. We presented a L&SI session to the Medway Care Forum and delivered a workshop at the Introduction to Public Health Day, with 26 attending. A promotional stand was then held at the marketplace.
- The Talking Tables project fully launched in January. Across Medway, 43 tables are active with at least one table available each day of the week. The [Talking Tables schedule](#) is live on the loneliness hub.
 - ❖ 478 people attended in February.
 - ❖ 521 people attended in March.
- A 'Craft and Chat' session was delivered in March with eight members of staff attending. This is organised and facilitated by Public Health with the aim to bring together staff from across the council and reduce social isolation at work.
- The annual Medway and Swale Social Prescribing five-year plan evaluation is underway, and data is being collated from all social prescribing providers for the period October 2022 to September 2023. We are still expecting some data returns but as of Q4:
 - ❖ 4,793 people accessed a social prescribing service.
 - ❖ 81.26% saw an increase in their health and wellbeing.
 - ❖ 6,198 prescriptions were made into the voluntary sector.
- The Medway and Swale directory of services, [Joy Marketplace](#), now has 530 groups and activities uploaded for Social Prescribers to directly refer into. The platform is also public facing, meaning other allied health professionals and residents can find available local activities.

Outcome: All children achieving their potential in education

Strategic Risk Summary

Live or Managed risk	Risk Ref	Risk	Inherent 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	Q4 23/24 Current Risk Score	Move ment	Definition (Current score) (L-likelihood) (I-impact)	Owner	Portfolio	Link to Council Plan
L	SR39	Failure to Deliver the High Needs Budget Recovery Plan	BII	BII	CII	CII	CII	CII	→	L – unlikely I – major	Assistant Director Education and SEND	Children's 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	0.0000%	0.0125%	Green	IMP	IMP

Comments:

- Please note, the annual target of 0.05% is apportioned across each quarter (0.0125% per quarter).
- No processes were concluded in the quarter, so no children were excluded.
- This academic year there has been 6 upheld exclusions. This is 13% of the 47 processes started. 4 have been retracted and 37 of those processes remain to be concluded.
- Of these 47 processes in this academic year, three schools – The Victory Academy (7), St John Fisher School (7) and Brompton Academy (7) – account for 45%. Persistent disruptive behaviour (14), Physical assault against a pupil (13) and Physical assault against an adult (9) account for 77% of all issues. 34% 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), 62% receive a free school meal, and 26% are both eligible for Free School Meals (FSM) and are SEND.

Benchmarking:

- The most recent benchmarking data is for the Autumn Term (2022-23).
- The table below shows National and local data:

	Primary exclusion rate	Secondary exclusion rate	Total exclusion rate
National	0.008%	0.07%	0.03%
Medway (2022-23 Autumn term only)	0.004%	0.05%	0.02%

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 have been in place for all schools since September. These services are there to support with strategies to promote inclusion.

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:

- 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.
- Neither The Leigh Academy nor Maritime Academy have had an Ofsted inspection and so 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 12th 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 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 this quarter.

PI code	PI name	Aim to	Value	Target	Status	Short Trend	Long Trend
EDU3(b)	The percentage of children who were persistently absent from school (23/24 academic year)	Minimise	19.9%	23.5%	Green	IMP	IMP

Comments:

- Based on the most recent school census data (Autumn term 2023/24), persistent absence (PA) has decreased to 19.9%. This a drop of 2.5 percentage points (pp) since last quarter and remains below target. This equates to 8,498 children in Years 1 to 11 missing more than 10% of sessions. In Q3 this was 9,593 children.
- The rate of primary phase PA is 18.5%, down from 20% in Q2 (October school census). 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.
- Primary PA is 17.1% (3,849 children) which is 1.6pp above National (15.5%) and Secondary is 22.7% (4,381 children) which is 0.9pp better than National (23.6%).
- For the period there were 672 children in Medway who are classed as Severe PA (missing 50% or more sessions). This is 1.6%, better than the 2% national figure.
- 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 19.5%, having dropped by 1.7pp from 21.2%. Medway is now 0.4pp worse than national.

Actions:

- The council attendance action plan includes the following:
 - ❖ There is a strong focus strategically on the Attendance agenda across the council; attendance is everyone’s business.
 - ❖ The four core statutory duties for the local authority:
 - Communication and advice
 - Targeted support meetings
 - Multi-disciplinary support for families
 - Legal intervention
 - ❖ Actions taken to increase attendance include:
 - 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

- Creation of a cross-directorate attendance strategy – co-produced with schools/trusts
- Outreach team supporting reintegration

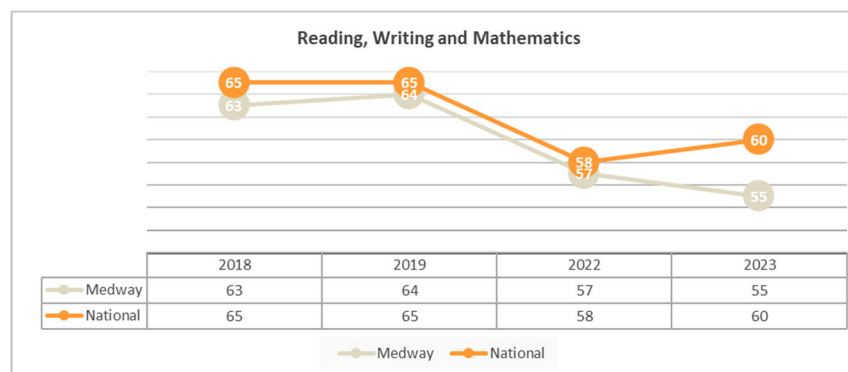
PI code	PI name	Aim to	Value	Target	Status	Short Trend	Long Trend
SE KS2	The percentage of children who achieve the required standard or above in Reading, Writing and Mathematics at KS2 (22/23 academic year)	Maximise	55.0%	65.0%	Red	DET	DET

Comments:

- The revised data for 2023 has been released. 55% of Medway Key Stage 2 (KS2) – that is, Year 6 – children achieved or exceeded the required standard in the combined reading, writing and mathematics performance measure.
- This is 2 percentage points (pp) lower than last year and 5 percentage points 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 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.
- The service has been working with partners to develop a literacy strategy, focused on raising outcomes in literacy across Medway.

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 difference between Medway Maintained and National	Medway (Academy)	Percentage difference between Medway Maintained and 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 several key priority areas including quality of education which is informed by educational attainment outcomes for children and young people.

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	93.3%	93.0%	Green	STATIC	IMP

Comments:

- There are 75 primary schools. Currently 70 schools are good and better; 6 are outstanding and 64 are good. 3 schools require improvement and 2 are inadequate.
- There are 52 academies. Of these 92% are good or better (4 are outstanding and 44 are good). 2 require improvement and 2 are inadequate.

Benchmarking:

- Nationally, this figure is 91.2%. The South East currently is 91.8%.
- Medway remains ranked 4th 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.
- The service has been working with partners to develop a literacy strategy, focused on raising outcomes in literacy across Medway.

PI code	PI name	Aim to	Value	Target	Status	Short Trend	Long Trend
SEKS4A8	Average attainment 8 score (22/23 academic year)	Maximise	45.4	49	Red	DET	DET

Comments:

- Final, revised data has now been published.

- Attainment 8 is a whole school performance measure and is calculated based on the grades achieved by pupils across eight key subjects. Subjects include Mathematics, English and 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). Attainment 8 in Medway is lower than the national (45.4 Medway average versus 46.4 national average).
- In 2023 there was a return to pre-pandemic standards for GCSEs, with protection built into the grading process to recognise the disruption that pupils had 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 45.4. This is a drop of 5.2% compared to 2021/22. Since 2016, the trend of Key Stage 4 (KS4) performance has been broadly below the national profile (except for 2018/19 when it was slightly better).

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 South East gap to national has reduced whilst the statistical neighbour group have widened their gap above national. Medway has remained consistently 1 percentage point (pp) behind National.

	2021/22	2022/23	Percentage change	2021/22 Gap to National (pp)	2022/23 Gap to National (pp)
National	48.9	46.4	-5.1%		
South East	50.1	47.4	-5.4%	1.2	1.0
Statistical Neighbour	53.0	50.8	-4.2%	4.1	4.4
Medway	47.9	45.4	-5.2%	-1.0	-1.0

- These measures will be closely monitored, and action plans developed through the Medway Education Partnership Group (MEPG) to understand inconsistencies and to support school leadership to address areas of low performance.

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 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.