

# **CHILDREN AND LIFELONG LEARNING SCRUTINY PANEL**

<b>DATE</b>	27/02/2023
<b>REPORT OF</b>	Janice Spencer, Director of Children's Services
<b>SUBJECT</b>	Children's Services Improvement
<b>STATUS</b>	Open

## **CONTRIBUTION TO OUR AIMS**

Improving services for children is a core strategic aim within the Council Plan.

## **EXECUTIVE SUMMARY**

An overview report of the performance measures which evidence the impact of the delivery of the children's services continuous improvement plan.

## **MATTERS FOR CONSIDERATION**

To ensure that scrutiny panel members have an understanding of the performance in children's services, particularly relating to the priorities within the continuous improvement plan. To allow members to scrutinise the performance, which is also interrogated by the Continuous Improvement Board (chaired by the DfE Commissioner) and the Children's Services Oversight Group (Chaired by the Leader of the Council).

### **1. BACKGROUND AND ISSUES**

- 1.1. North East Lincolnshire Council children's social care (CSC) services were judged to be Inadequate by Ofsted in October 2022.
- 1.2. Since that time, delivery of a continuous improvement plan has been underway. The plan sets out the priorities and underpinning actions required to improve CSC services so we are ensured that our children are safe, cared for and achieve positive outcomes.
- 1.3. In order to measure the impact of the activities taking place as part of the improvement plan, a series of qualitative and quantitative performance metrics have been chosen. These measures provide an indication of whether the delivery of the plan is resulting in improvements in the quality of services for children.
- 1.4. The attached reports appraise the internally validated performance as at the end of January 2023, as well as some current data as of mid-February 2023.

### **2. RISKS AND OPPORTUNITIES**

- 2.1 If children's social care services do not improve at pace, the children we are supporting will remain unsafe, and this could result in the death or serious injury of a child open to our services. Furthermore, there are significant financial and reputational risks to NELC.

### **3. REPUTATION AND COMMUNICATIONS CONSIDERATIONS**

3.1 An ongoing programme of internal and external communication is in place, with a dedicated communications officer aligned to CSC.

### **4. FINANCIAL CONSIDERATIONS**

4.1 There are significant financial implications if services do not improve. The cost of external agency foster homes and residential provision for our children in care is excessive. Agency social workers place huge cost pressures on staffing budgets. Key elements of the plan are to reduce the number of children in our care, and to increase the number of permanent social workers.

### **5. CHILDREN AND YOUNG PEOPLE IMPLICATIONS**

5.1 Every element of the work within the improvement plan and across all children's services has implications for children. Improving services for our most vulnerable children is vital.

### **6. CLIMATE CHANGE AND ENVIRONMENTAL IMPLICATIONS**

6.1 No impact

### **7. MONITORING COMMENTS**

7.1 In the opinion of the author, this report does not contain recommended changes to policy or resources (people, finance or physical assets). As a result no monitoring comments have been sought from the Council's Monitoring Officer (Chief Legal Officer), Section 151 Officer (Director of Finance) or Strategic Workforce Lead.

### **8. WARD IMPLICATIONS**

8.1 All wards are implicated, however, the wards of East Marsh, West Marsh and South have the highest concentration of our most vulnerable children.

### **9. BACKGROUND PAPERS**

9.1 None

### **10. CONTACT OFFICER(S)**

Sonia Rides, Children's Social Care lead analyst

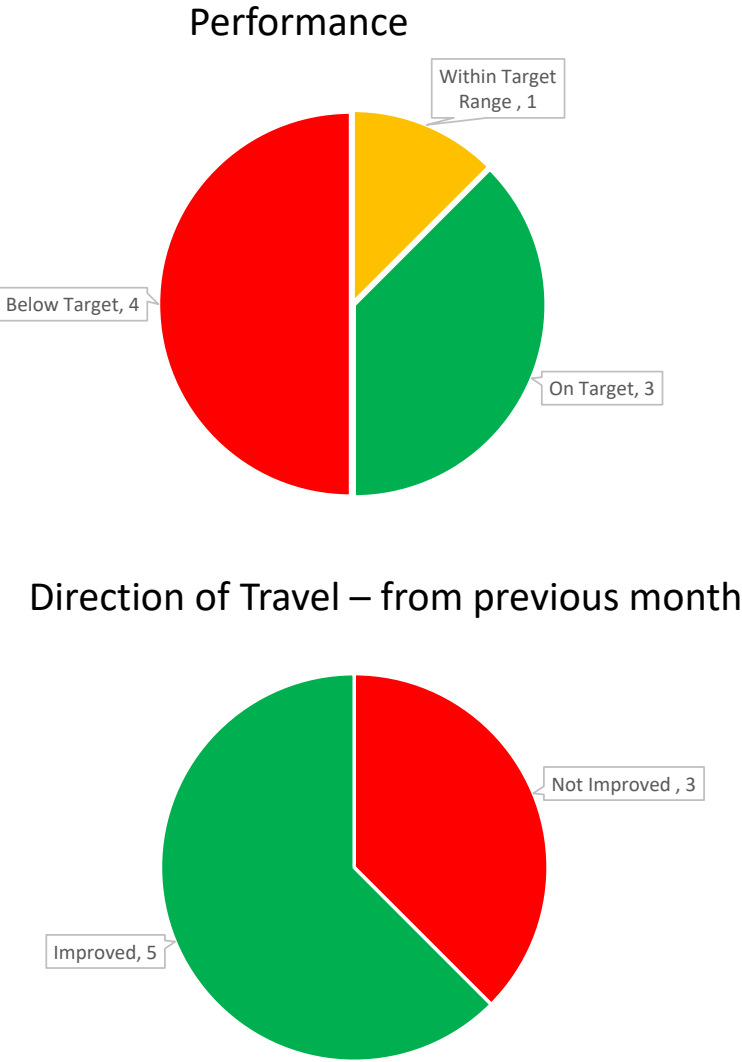
**JANICE SPENCER**  
**DIRECTOR OF CHILDREN'S SERVICES**

# Improvement Plan Report

February 2023

# Priority A – Planning and Safety (CiN and CP)

Measure	Actual	Performance	DoT
Number of CiN	673	Green	↓
Rate of CiN	195	Green	↓
CiN Visits within timescales	84	Amber	↑
Number of CP	315	Red	↓
Rate of CP	91	Red	↓
ICPC held within timescales	72	Red	↓
CP Visits within timescales	53	Red	↓
CP Reviews in timescale	97	Green	↓



## Number of CiN Rate of CiN

Target 1000  
Target 290  
Monthly

Tolerance 800-1200  
Tolerance 232 – 348  
Good = within Target range

	Nov-22	Dec-22	Jan-23	Latest	Targets	Mar-23	Sept-23	Mar-24
Number of CiN	959	778	673	716	Number	1000	875	787
Rate of CiN	278	226	195	208	Rate	290	254	228

### What's working well?

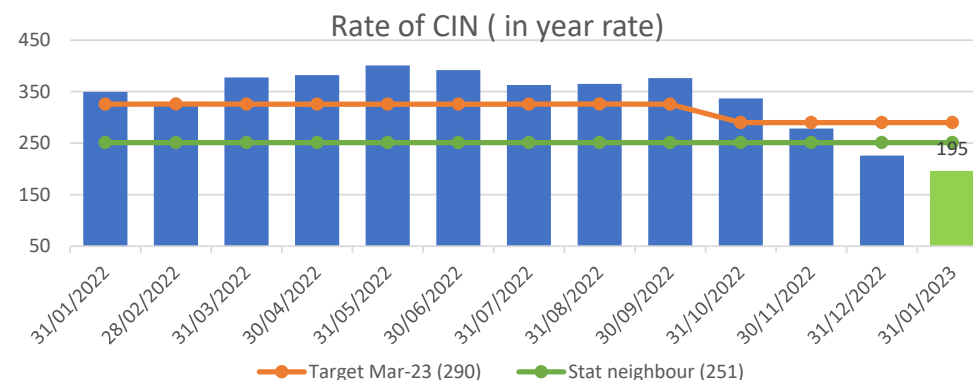
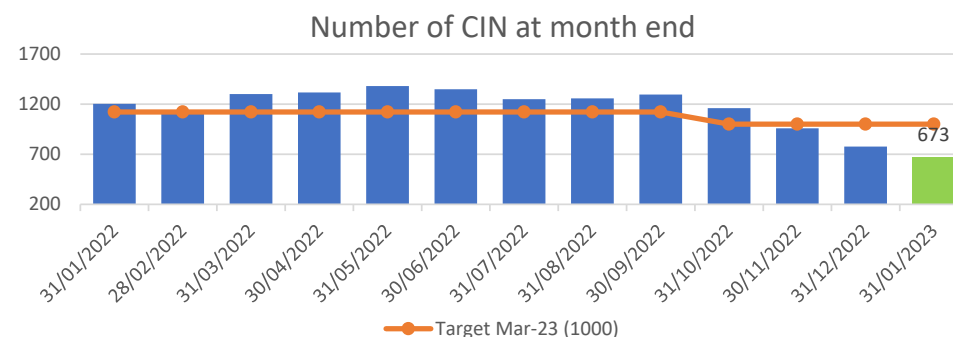
The work in the front door has continued to result in less referrals and allocations to the newly formed CASS team. This reduction in case numbers has moved NEL to well below the stat neighbour rate of 250 per 10,000 CIN.

### What are we worried about ?

Need to ensure thresholds remain consistent and the right support, is being provided to the right children, at the right time.

### What are we doing about it?

We have been reviewing all cases open to the teams and identified cases for closure and step down to early help. There is a new process in place for step-down and step-up between CASS and Early Help which is working better, resulting in children being supported in the right service area.



## CiN Visits in Timescale

Target 85%  
Monthly

Tolerance  
Good = Bigger is better

	Nov-22	Dec-22	Jan-23	Latest
% CiN Visits in Timescale	68	71	84	87

Target	Mar-23	Sept-23	Mar-24
%	85	90	95

### What's working well?

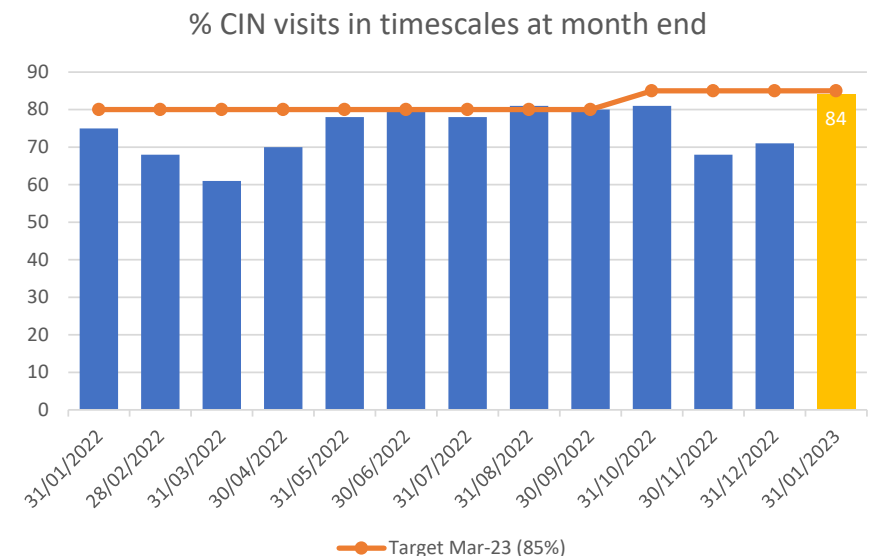
CiN visit timeliness has been improving week on week through January and beginning of February. They are now just under the target set for March 2023.

### What are we worried about ?

Churn in social workers will impact on the timeliness and quality of our child in need work.

### What are we doing about it?

This is being tracked with managers and through weekly performance meetings to improve this. Better oversight through the strengthened CASS teams should ensure improved visit timeliness is maintained.



Number of CP Rate of CP		Target 215 Target 62 Monthly			Tolerance Tolerance Good = within Target range			
	Nov-22	Dec-22	Jan-23	Latest	Targets	Mar-23	Sept-23	Mar-24
Number of CP	353	331	315	303	Number	215	208	203
Rate of CP	102	96	91	88	Rate	62	60	59

### What's working well?

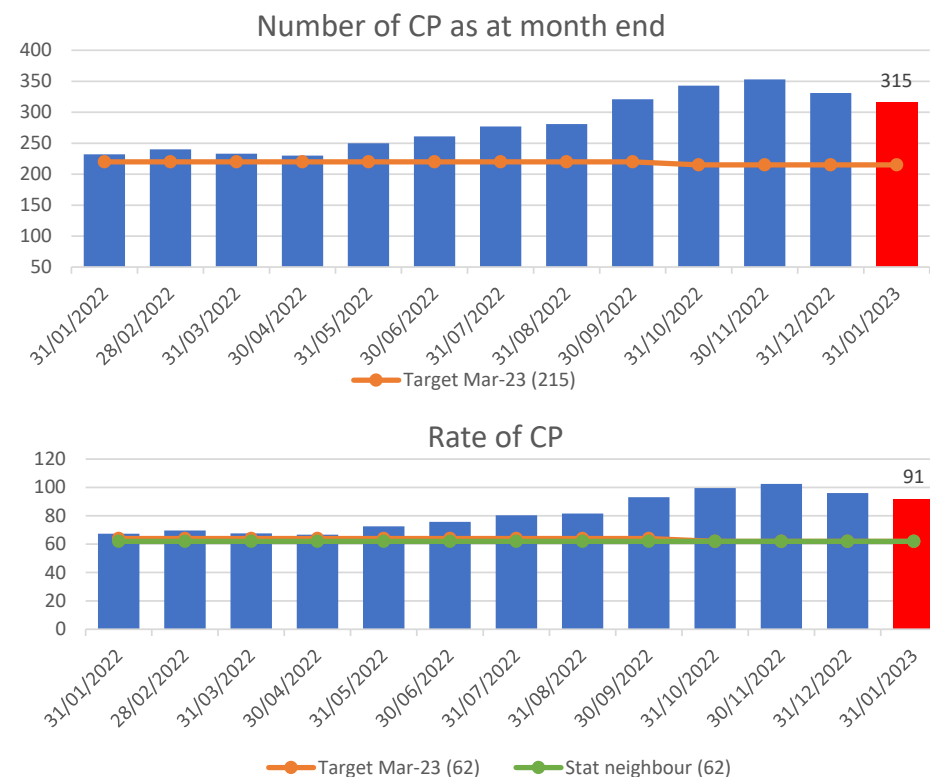
Requests for ICPCs have reduced for a second month which has led to a reduction in the number of children becoming subject to a CP plan and also ensured that the right children are becoming subject of a plan, at the right time. Numbers of CP have been steadily decreasing since November 2022

### What are we worried about ?

CP numbers although reducing are still higher than stat neighbours rate of 62 per 10,000. Churn of social workers impacts on the work relating to CP plans being completed and this can then have an impact on the confidence of professionals to agree to CP plans being ceased when threshold is no longer met.

### What are we doing about it?

Reflective discussions are taking place before children are progressing to ICPC to ensure that this is the appropriate action. Regular reviews of children on a CP plan for 9+ months are taking place to consider trajectory at an early stage and to address any drift and delay.



## ICPC held in Timescale

Target 94%  
Monthly

Tolerance  
Good = Bigger is better

	Nov-22	Dec-22	Jan-23
ICPC held in Timescale	73	72	72

Target	Mar-23	Sept-23	Mar-24
%	94	95	95

### What's working well?

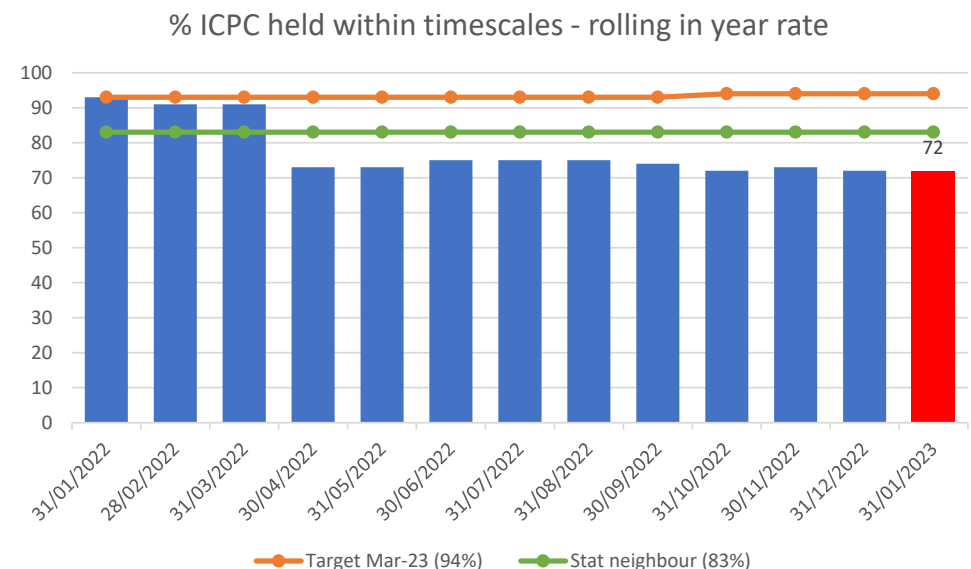
The CSRS team are working with the CASS teams to help ensure children's initial reviews are held in timescales and that all requests for conference have had management oversight to ensure the right children are going to conference.

### What are we worried about ?

The in-year annualised rate of 72% is lower than 91% outturn for 2021-22 and well below target. Embedding pre-conference preparation and timely invites and reports remains a priority. This can be a challenge with changes in social worker and case supervisors.

### What are we doing about it?

The service continues to monitor data in relation to S47's on a weekly basis to deter late notifications and also hold monthly meetings with Service Managers to highlight any issues and discuss plan to address.





## CP Visit within Timescale

Target 90%  
Monthly

Tolerance

Good = Bigger is better

	Nov-22	Dec-22	Jan-23	Latest
% CP Visits within Timescale	67	68	53	73

Target	Mar-23	Sept-23	Mar-24
%	90	93	95

### What's working well?

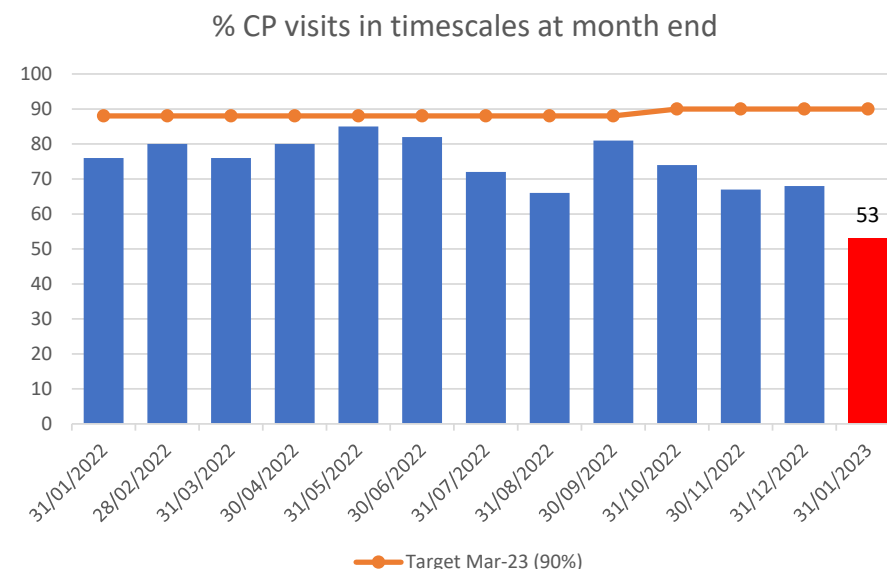
We have implemented weekly performance meetings for the whole service. We also have 3 times weekly meetings to support performance with out SLIP partners. We also receive daily performance data for the CASS service of all visits (Children in Care, Children in Need and Child Protection visits) broken down by teams and worker and we have introduced daily meetings to ensure improved performance and compliance.

### What are we worried about ?

CP visit timeliness dropping significantly over January. We are worried that we are not visiting children in a timely manner and we are not confident that the plans to manage risk are effective.

### What are we doing about it?

CP visit timeliness is being monitored daily and addressed through new strengthened daily and weekly performance meetings. Work is on-going to stabilise our work force and increase the number of permanent social workers. We have also commissioned 4 teams of experienced social workers to support and improve our court and child protection work and ensure all in CASS cases have an allocated social worker.



## CP Review within Timescale

Target 96%  
Monthly

Tolerance

Good = Bigger is better

	Nov-22	Dec-22	Jan-23
% CP Review within Timescale	97	98	97

Target	Mar-23	Sept-23	Mar-24
%	96	96	97

### What's working well?

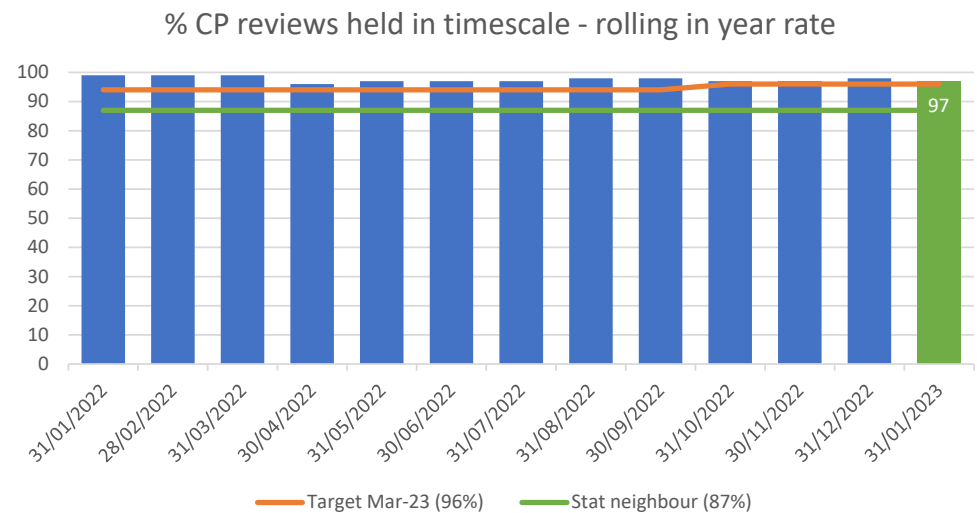
CP reviews continue to be timely

### What are we worried about ?

The churn of social workers is impacting on the progression of child protection plans meaning some children remain on plans for too long.

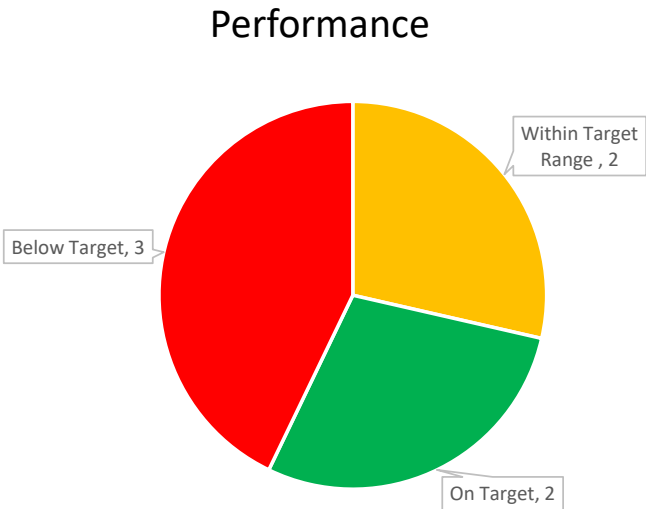
### What are we doing about it?

CP reviews are planned ahead to ensure timeliness is maintained and further exploration around effectiveness of core groups with partners is required to address the length of time children remain on plans.

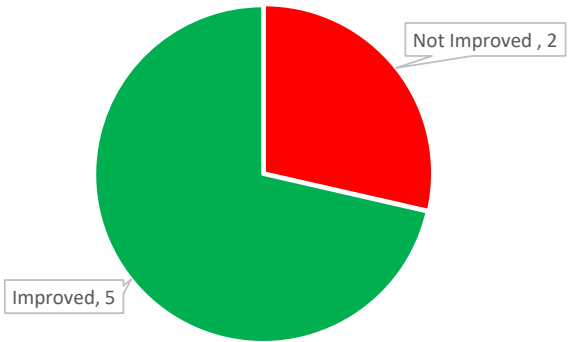


## Priority B – Child’s journey through the system (Workflow)

Measure	Actual	Performance	DoT
Cases open to Early Help	712		↑
All open cases	1861	Green	↓
Number of Contacts to IFD	1090	Red	↑
Number of Referrals	158	Green	↓
Rate of Referrals	961	Red	↓
% Contacts to Early Help	11	Red	↑
In year Re-referral rate	29	Amber	↓
Timeliness of assessments	68%	Amber	↓



Direction of Travel – from previous month



## Cases open to Early Help

Target - not set  
Monthly

	Nov-22	Dec-22	Jan-23	Latest
Cases open to Early Help	722	680	712	723

Target	Mar-23	Sept-23	Mar-24
Number			

### What's working well?

There is a new process in place for step-down and step-up between CASS and Early Help which is working better, resulting in children being supported in the right service are and at the right level.

### What are we worried about?

Currently there is not an up to date strategy and process for Team around the Family to support partners in delivering early help intervention. An over complicated early help assessment.

### What are we doing about it?

Team around Family steering group created, task and finish groups to create Team around the Child process, strategy and review the EHA.

Cases open to Early Help at month end



## All open cases

Target 1948  
Monthly

Tolerance

Good = within Target range

	Nov-22	Dec-22	Jan-23	Latest
All open cases	2180	1956	1861	1845

Targets	Mar-23	Sept-23	Mar-24
Number	1948	1811	1705

### What's working well?

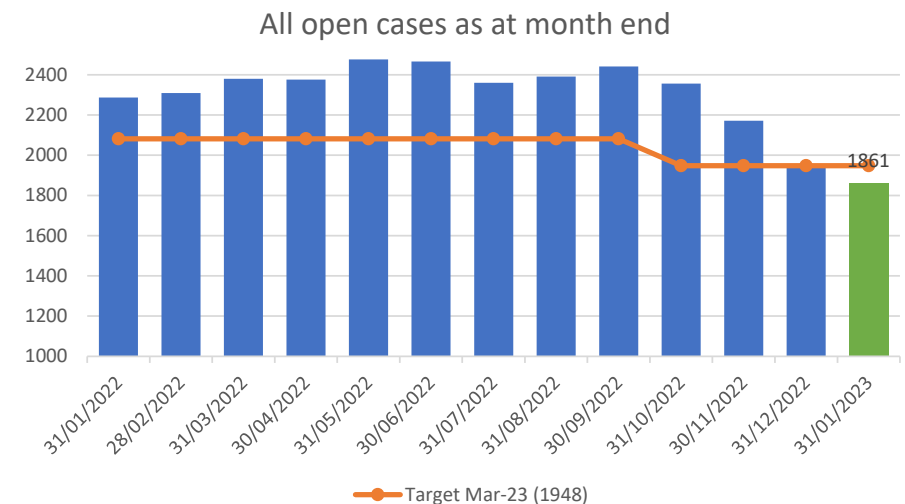
The number of open cases has been dropping since October 22 largely due to reduction in CIN numbers and has now fallen below the target set for March 23.

### What are we worried about ?

Rate of open cases (540 per 10,000) continues to be significantly higher than stat neighbours (411) and England average (334).

### What are we doing about it?

Work in the front door to reduce referrals, combined with a review of open cases has resulted in a substantial drop in case numbers.



## Number of contacts to the IFD

Target 760  
Monthly

Tolerance

Good = within Target range

	Nov-22	Dec-22	Jan-23
Number of contacts to IFD	1127	747	1090

Targets	Mar-23	Sept-23	Mar-24
Number	760	680	600

### What's working well?

Practice has changed in the Integrated Front Door we are now recording all contacts that come in meaning that we are able to identify themes and trends and track case more effectively. It is easier to identify any potential issues around repeated concerns for a child. This has however, resulted in more contacts being recorded so figures are higher.

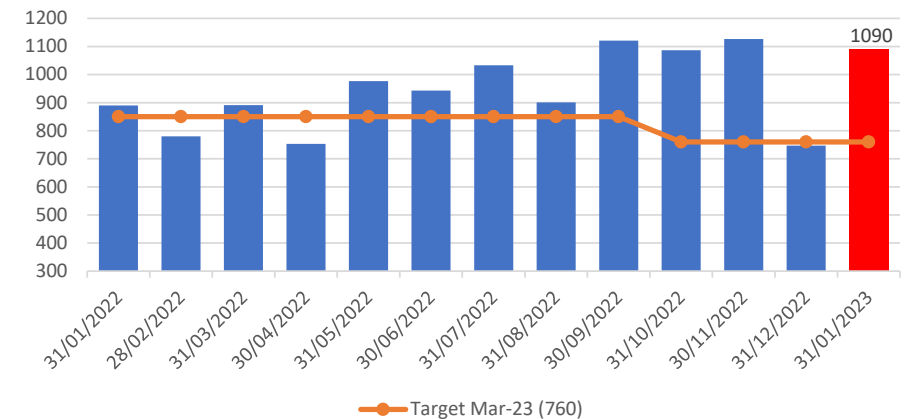
### What are we worried about ?

Demand for recording of contacts outstripping capacity.

### What are we doing about it?

Work with partners to develop a better and more meaningful understanding of threshold, so that the right children are being discussed, at the right time. Additional capacity has been created in Early Help which will work with school clusters to embed a Team around the Family approach, supporting children at the earliest opportunity

Number of Contacts to IFD per month



## Number of Referrals Rate of Referrals

Target 210  
Target 731  
Monthly

Tolerance  
Good = within Target range

	Nov-22	Dec-22	Jan-23
Number of Referrals	191	119	158
Rate of Referrals (projected in year)	1080	1006	961

Targets	Mar-23	Sept-23	Mar-24
Number	210	185	167
Rate	731	644	582

### What's working well?

The work in the front door has resulted in a significant drop in contacts converting to referrals over the last 3 months to well below our March 2023 target of 210. If this drop continues our yearly outturn for 2023-24 will be in line with stat neighbour average of 582 per 10,000.

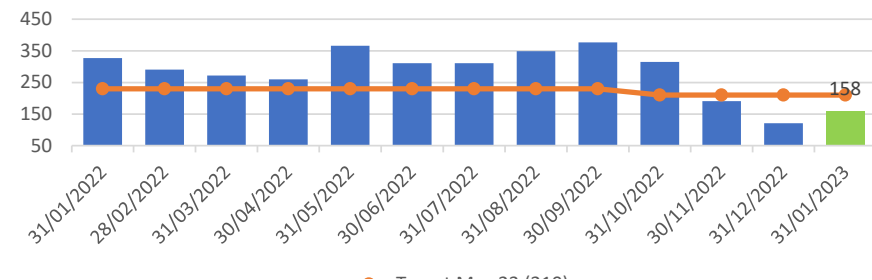
### What are we worried about ?

Annualised rate of referrals received in year to date is still well above target and SN (582 per 10,000) due to the higher number of referrals received before November but this is gradually reducing and our annual rate although still high should drop further by year end.

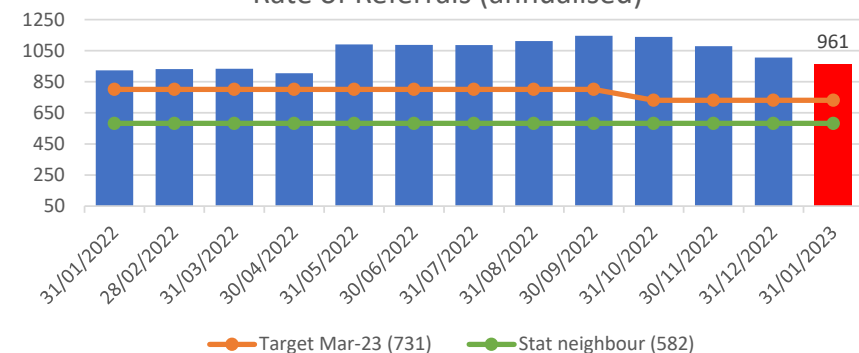
### What are we doing about it?

SLIP partners are providing continuing support around threshold application and partners are working to support this change in practice.

Number of Referrals per month



Rate of Referrals (annualised)



## % of contacts to early help

Target 26%  
Monthly

Tolerance

Good = within Target range

	Nov-22	Dec-22	Jan-23
% of contacts to EH	12	9	11

Targets	Mar-23	Sept-23	Mar-24
%	26	28	30

### What's working well?

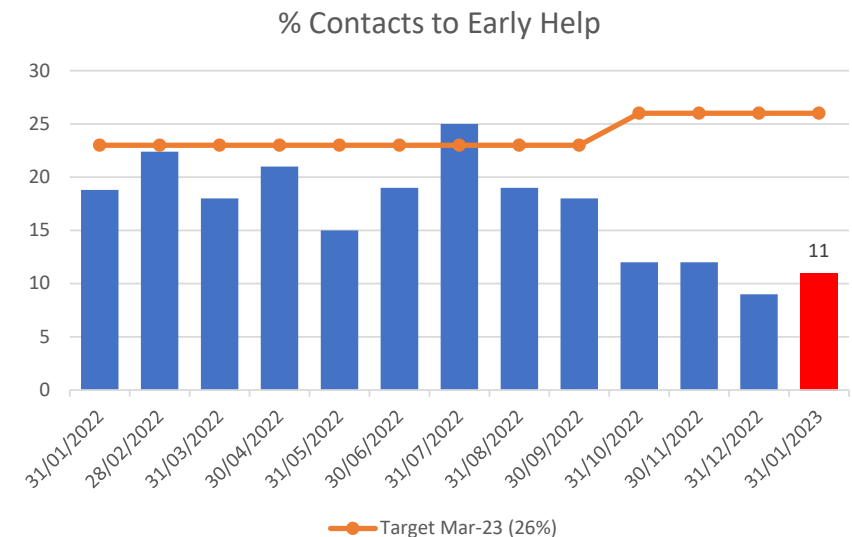
The % of contacts progressing to EH has remained low due to an increased understanding of thresholds from partners .

### What are we worried about ?

Quality of some referrals remains poor and not always referred in a timely manner

### What are we doing about it?

The additional capacity within the Team around the Family will support partners with better quality contacts and how they identify children who need support and who is best placed to offer this considering the wealth of universal/community services in NEL.





**% re-referrals within 12 months  
of previous referral**

**Target 24%  
Monthly**

**Tolerance  
Good = within Target range**

	Nov-22	Dec-22	Jan-23
% of re-referrals	29	29	29

Targets	Mar-23	Sept-23	Mar-24
%	24	23	22

### What's working well?

The in year re-referral rate has remained at 29% and the in-month re-referral rate has dropped back down to 27%.

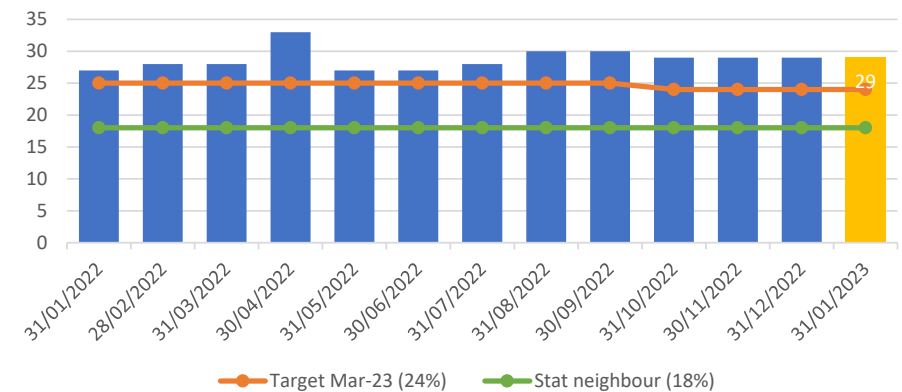
### What are we worried about ?

The in-year re-referral rate is higher than comparators. (SN 18%, England 22%).

### What are we doing about it?

Audit activity with respect of referrals to no further action (NFA) is gathering pace with weekly meetings taking place with dip sampling of referrals and assessments to NFA. We are also dip sampling cases that close or step down to early help.

Re-referrals within 12mths as % of referrals - rolling in year rate



## % Timeliness of assessments

Target 85%  
Monthly

Tolerance

Good = within Target range

	Nov- 22	Dec - 22	Jan-23
% assessment timeliness	68	68	68

Targets	Mar-23	Sept-23	Mar-24
%	85	87	90

### What's working well?

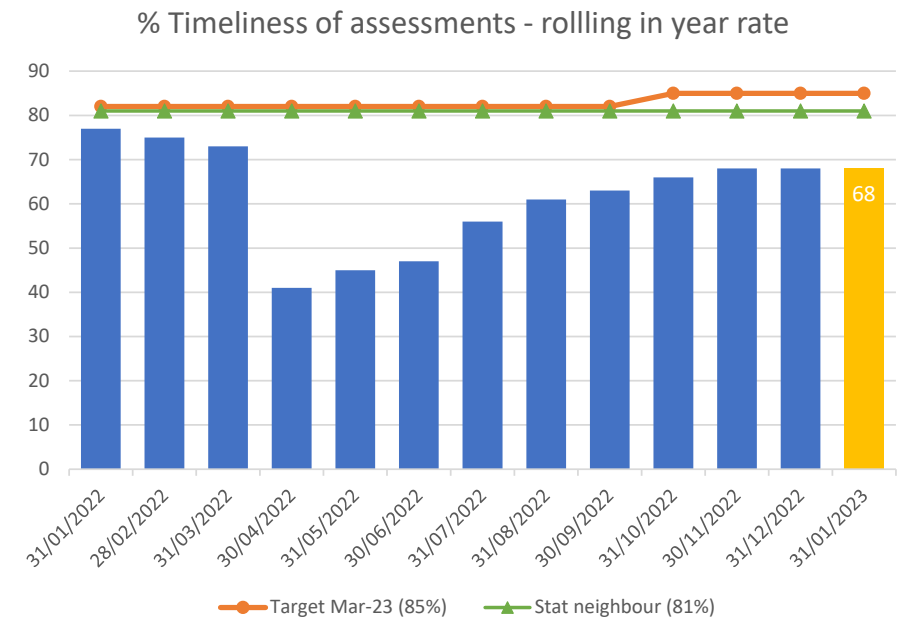
Rolling in year assessment timeliness had been steadily increasing throughout the year with 68% of assessments completed in 2022-23 to date being completed in timescales. Monthly assessment timeliness has been around 80% since July 22 until recently.

### What are we worried about ?

The in-month assessment timeliness has been reducing over the last 2 months despite decreasing assessments initiated. This has stagnated the in year timeliness rate with a risk of the current rate reducing over the next 2 months.

### What are we doing about it?

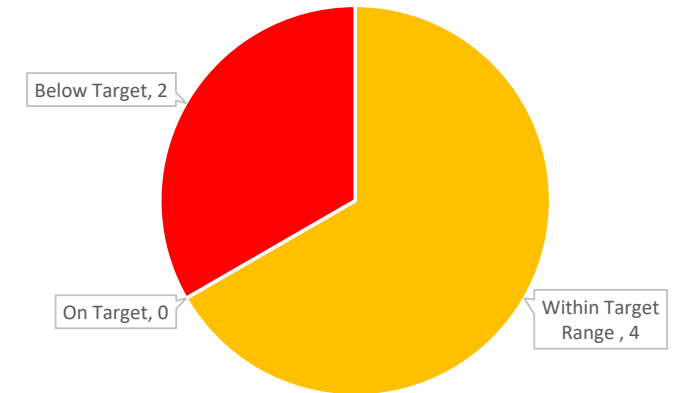
We are with support of our SLIP partners reviewing the duty system in CASS. Assessment timeliness is being monitored daily and addressed through new strengthened daily and weekly performance meetings.



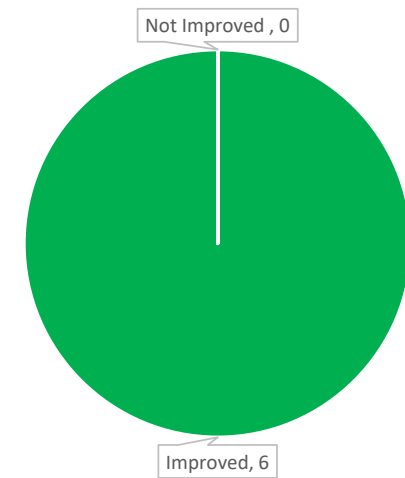
## Priority C – Homes and Families for Children who are looked after

Measure	Actual	Performance	DoT
Number of CLA	606	Red	↓
Rate of CLA	176	Red	↓
Number of children entering care (cumulative in year)	139	Amber	↑
Projected annual rate of children entering care per 10,000	48	Amber	↓
Number of children ceasing to be looked after (cumulative in year)	148	Amber	↑
Rate of Children ceasing to be looked after per 10,000	52	Amber	↑

Performance



Direction of Travel – from previous month



## Number of CiC Rate of CiC

Target 515  
Target 149  
Monthly

Tolerance  
Tolerance  
Good = within Target range

	Nov-22	Dec-22	Jan-23	Latest
Number of CiC	629	620	606	595
Rate of CiC	183	180	176	172

Targets	Mar-23	Sept-23	Mar-24
Number	515	485	450
Rate	149	141	131

### What's working well?

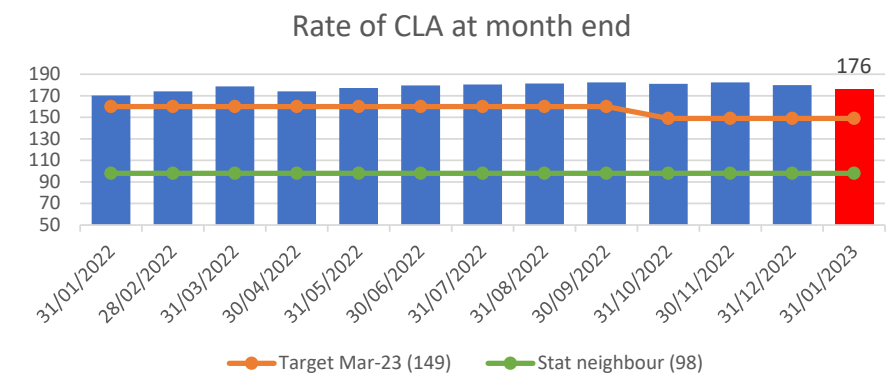
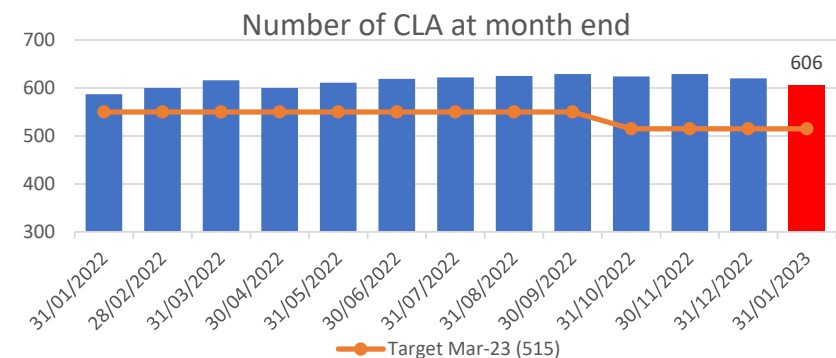
Children in Care numbers have steadily reduced over the last 2months.

### What are we worried about ?

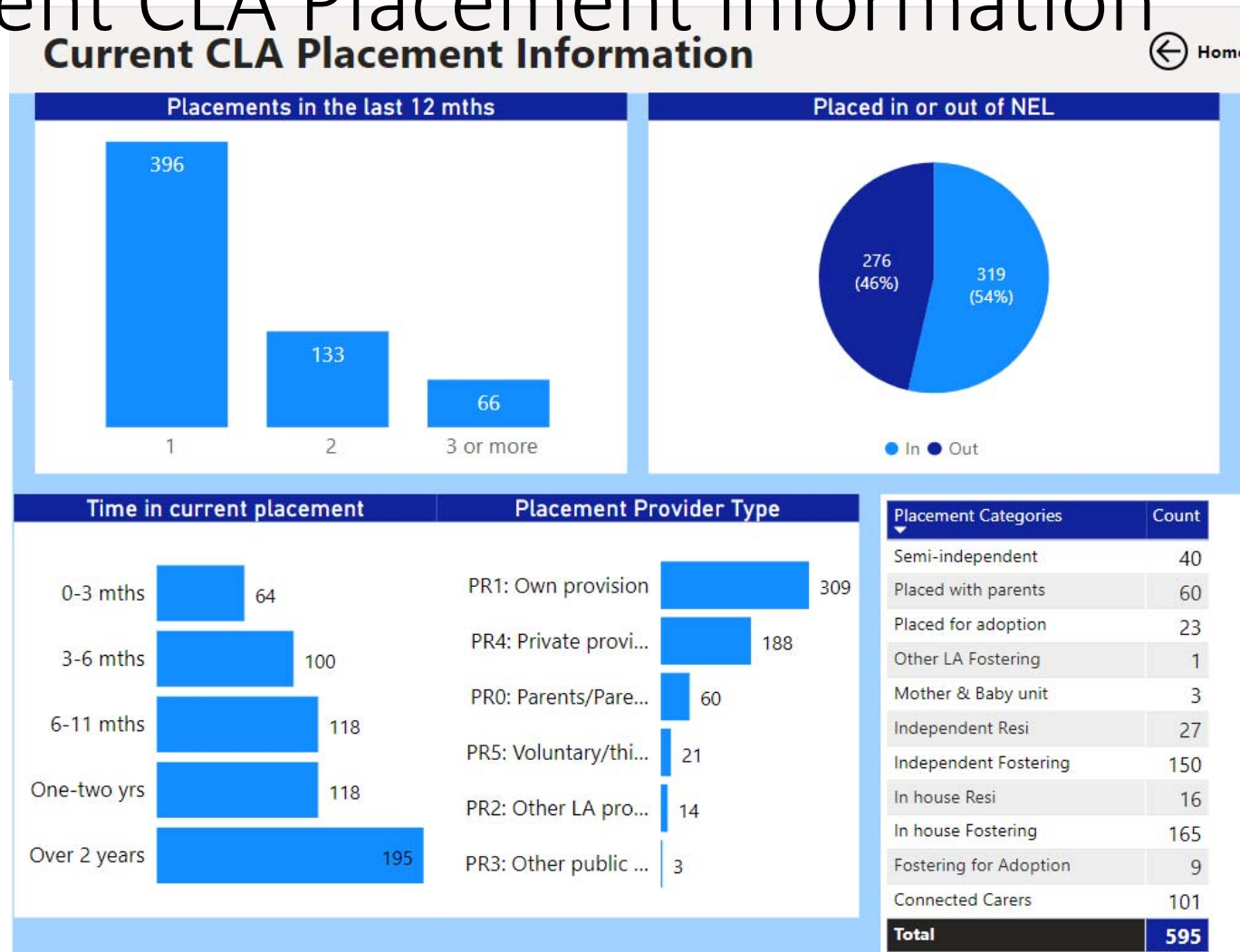
Children in Care numbers are still far higher than comparators (England ave. rate of 70 and stat neighbours rate of 98 per 10,000)

### What are we doing about it?

Funding has been secured for a short-term reunification project to focus on exiting children from care through legal permanence such as special guardianship orders and discharge of care orders. Children placed with parents and in connected carer placements are being reviewed to establish next steps required to support their safe discharge from care.



# Current CLA Placement Information



## Number of children entering care cumulative in year Rate of children entering care project in year

Target 169  
Target 49

Tolerance  
Good = within Target range

	Nov-22	Dec-22	Jan-23	Latest
Number of CiC starts (cumulative in year)	125	133	139	141
Projected Annual Rate of CiC starts	54	51	48	

Targets	Mar-23	Sept-23	Mar-24
Number	169	162	155
Rate	49	47	45

### What's working well?

Children in Care numbers have stopped increasing at such a pace. 6 children came into care in January; 1 of which were UASC and 3 were newborns.

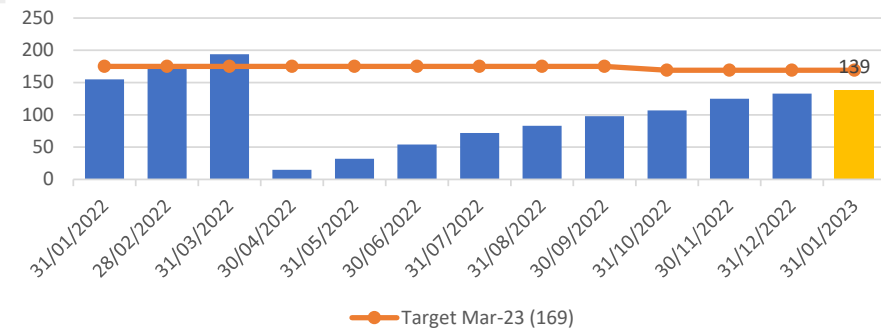
### What are we worried about ?

The rate of entrants to CiC are still higher than comparators (SN 34 per 10,000).

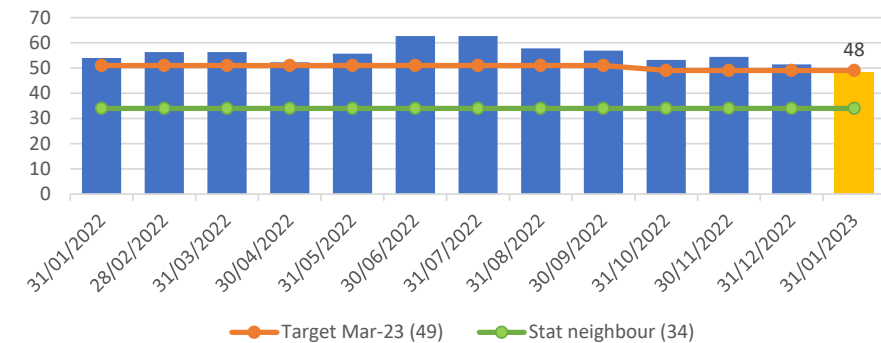
### What are we doing about it?

Current processes are being reviewed to ensure a more measured approach is given to children entering care to ensure that this is the right thing for the child.

Number of children entering care cumulative in year



Rate of children entering care per 10,000 projected in year



## Number of children leaving care cumulative in year Rate of children leaving care project in year

Target 206  
Target 60

Tolerance  
Good = within Target range

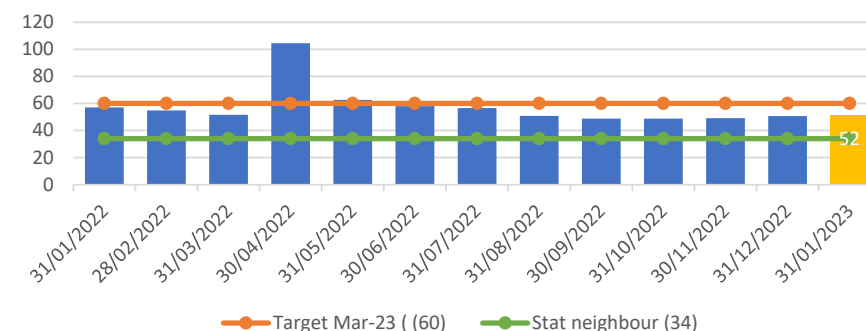
	Nov-22	Dec-22	Jan-23	Latest
Number of CLA leavers (cumulative in year)	113	131	148	161
Rate of CLA leavers	49	51	52	

Targets	Mar-23	Sept-23	Mar-24
Number	206	190	190
Rate	60	55	55

Number of children ceasing to be looked after - cumulative in year



Rate of children ceasing to be looked after per 10,000 - projected in year



### What's working well?

17 children ceased to be looked after in January. 1 child was adopted, 6 had a CAO or SGO granted, 4 children returned home, 5 children turned 18 and remained in the care of their foster carers and 1 child had an interim supervision order granted. 50 SGOs have been granted in year to date accounting for 31% of children ceasing. This is in line with the previous year and well above SN 18% and England average of 13%.

### What are we worried about ?

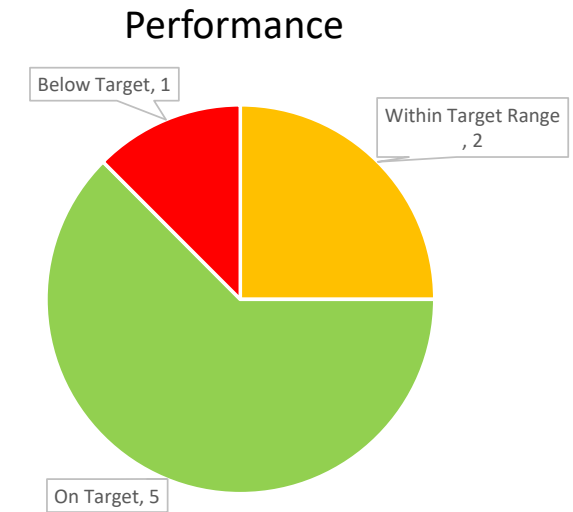
Children in Care ceasing rates are well above that of comparators (SN 34 per 10,000) which reflect the high numbers of children looked after in NEL.

### What are we doing about it?

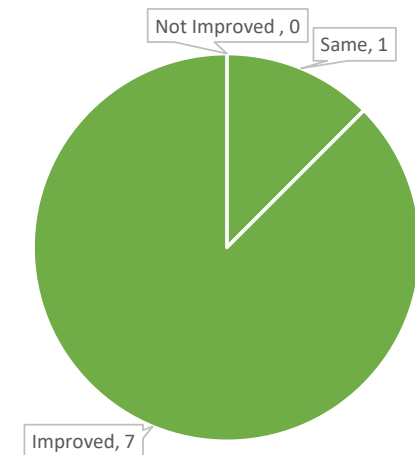
Funding has been secured for a short-term reunification project to focus on exiting children from care through legal permanence such as special guardianship orders and discharge of care orders. Children placed with parents and in connected carer placements are being reviewed to establish next steps required to support their safe discharge from care.

## Priority D – People and Workforce

Measure	Actual	Performance	DoT
Average SW Caseload	22	Green	→
Average AYSE Caseload	13	Green	↑
% of workforce which are permanent	66	Green	↑
Supervisions in timescales	67	Amber	↑
Supervisions in timescales - CASS	59	Red	↑
Supervisions in timescales – CiC Team	69	Amber	↑
Supervisions in timescales – CDS Team	95	Green	↑
Supervisions in timescales - New Futures	88	Green	↑



## Direction of Travel – from previous month





## SW average caseloads ASYE average caseloads

Target 22  
Target 18

Tolerance  
Good = within Target range

	Nov- 22	Dec-22	Jan-23	Current
SW ave caseload	24	22	22	23
ASYE ave caseload	10	10	13	13

Targets	Mar-23	Sept-23	Mar-24
Number	22	20	18
Number	18	17	16

### What's working well?

The new cohort of ASYEs and two cohorts of overseas workers are all progressing well with caseloads gradually increasing as their induction progresses.

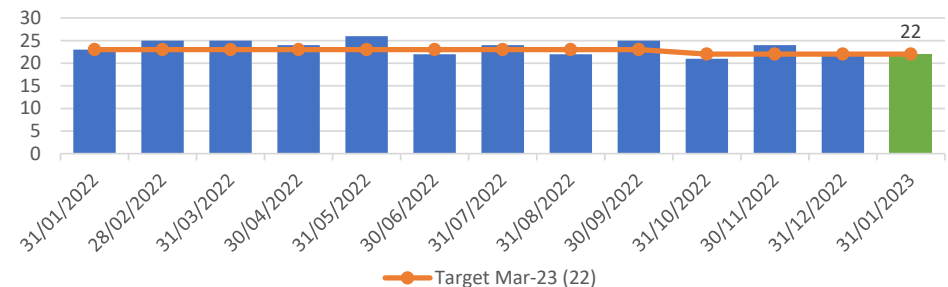
### What are we worried about ?

We are still seeing turnover of staff which leads to periods of higher caseloads than we would like.

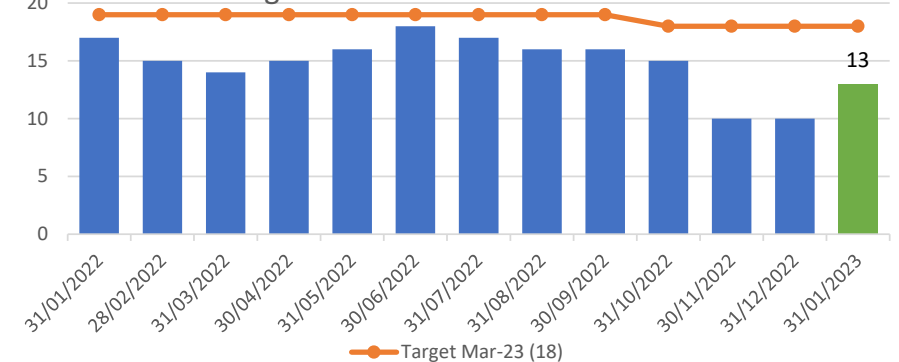
### What are we doing about it?

Caseloads should decrease as less referrals are coming through the front door and our overseas workers will gradually pick up more cases as the continue through their induction period.

Average SW caseload as at month end



Average AYSE caseload as at month end



## % case holding staff which are permanent

Target 65%  
Monthly

Tolerance

Good = within Target range

	Nov-22	Dec -22	Jan-23
% of workforce which are permanent	45	53	66

Targets	Mar-23	Sept-23	Mar-24
%	65	75	90

### What's working well?

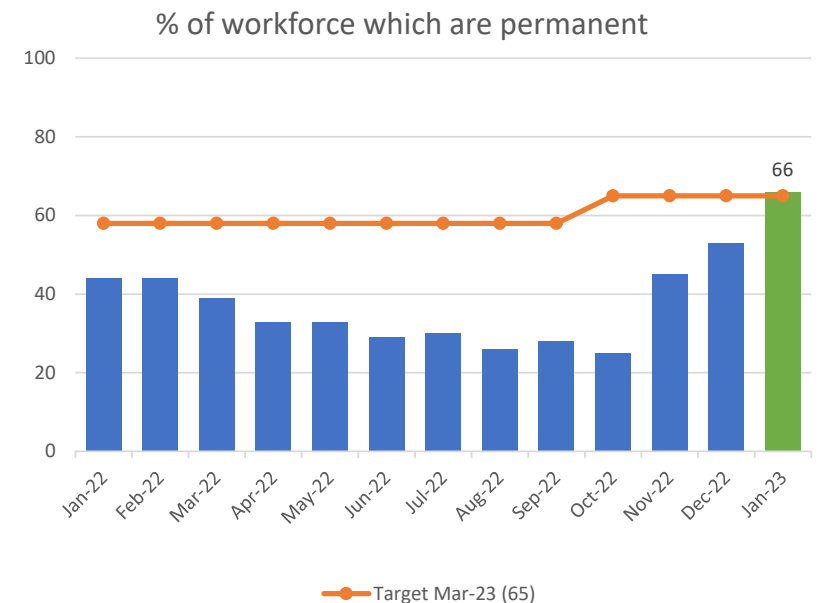
New cohorts of ASYEs and overseas workers and the reduction of agency teams have resulted in the target set for Mar 23 of 65% being met.

### What are we worried about ?

There continues to be some instability in the workforce with workers moving teams or leaving the authority.

### What are we doing about it?

The new CASS structure and management levels will provide future stability. The social worker academy and new ASYE cohorts will hopefully help to 'grow our own' social workers.



## % Timeliness of supervisions

Target 80%  
Monthly

Tolerance  
Good = within Target range

% supervision in timescales	Nov-22	Dec-22	Jan-23	Latest
% All services	65	58	67	70
% CASS	49	46	59	67
% Children in Care	95	66	69	69
% Childrens Disability	72	90	95	97
% New Futures	81	80	88	82

Targets	Mar-23	Sept-23	Mar-24
%	80	90	95

### What's working well?

Children's Disability and New Futures teams continue to be above target for supervisions. The all services and all other individual team performance has also improved since last month.

### What are we worried about ?

Supervisions for CASS and Children in Care teams are still below target.

### What are we doing about it?

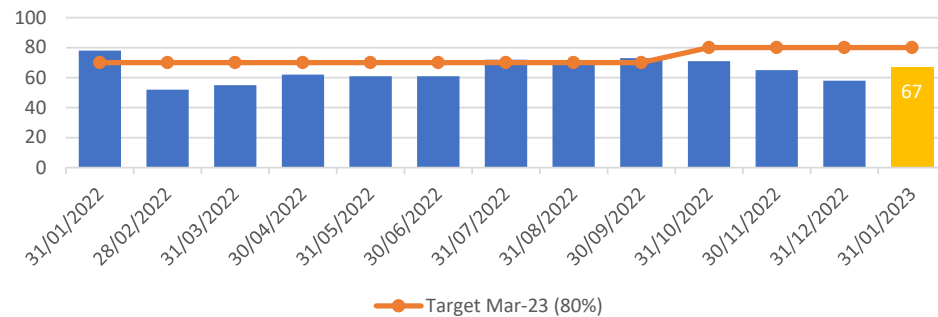
All social workers now in the CASS teams have all got line managers and supervision booked in. Managers are supporting other managers within the teams to ensure that everyone has regular case supervision. Supervisions will also be monitored in CASS weekly performance meetings. Work is on-going to stabilise our work force and increase the number of permanent social workers. We have also commissioned 4 teams of experienced social workers to support and improve our court and child protection work and ensure all in CASS cases have an allocated social worker.

# % Timeliness of supervisions Supervisions

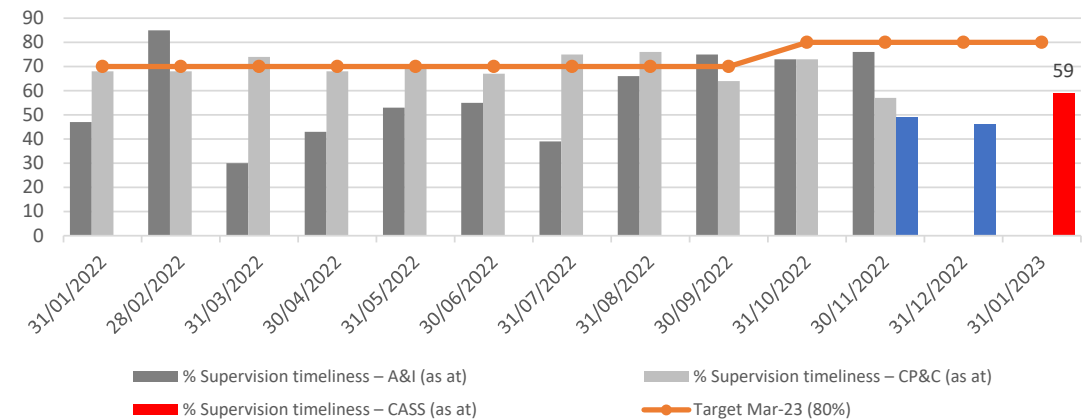
Target 80%  
Monthly

Tolerance  
Good = within Target range

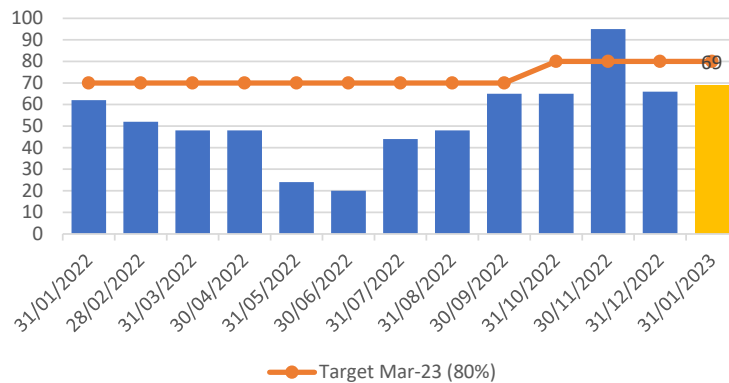
% Supervisions in timescales at month end (All services)



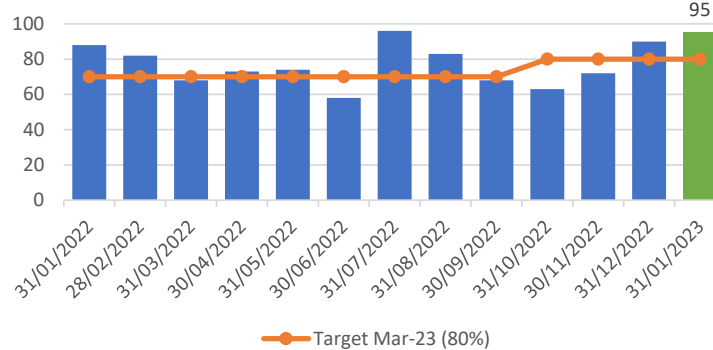
% Supervisions in timescales at month end - CASS



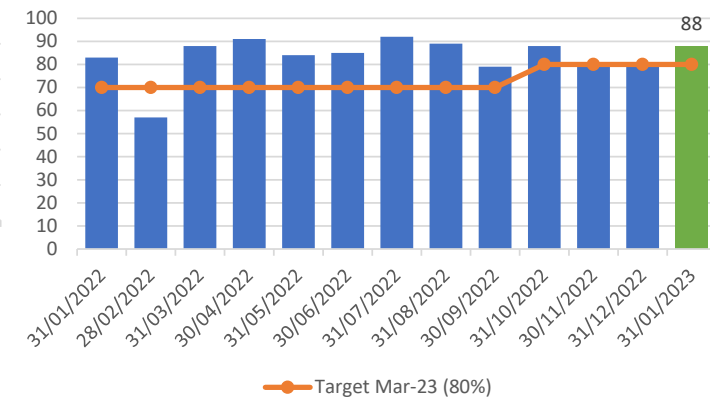
% Children in Care team supervisions in timescales at month end



% CDS team supervisions in timescales at month end



% New Futures supervisions in timescales at month end



## Residential Homes

Children's Home	Manager	Placement Code	Date of Full Inspection	Most recent full inspection Judgement	No of beds	Current placements
25 Scartho Road	Grace Rouse	SC394101	17/08/2022	Requires Improvement	4	1
Cambridge Bungalow	Samantha Carlisle	SC477428	05/01/2022	Good	3	2
Saltergate	Tina Wilkinson	SC069618	05/09/2022	Requires Improvement	1	1
29 Heneage Road	Kerry Graham	SC441553	14/09/2022	Requires Improvement	5	5
495 Cromwell Road	Karen Stones	SC033127	11/10/2022	Good	10	4
Defender Drive	Tracy Jefferson	2563216	25/10/2022	Requires Improvement	3	1
35 Peaks Ave	Kelly Wade	2594189	21/11/2022	Requires Improvement	4	3

### What's working well?

The homes have each developed an action plan and have undertaken a review of skill set of the staff and actions against requirements. The registered Managers are working well together to support the journey of improvement across the system and are supporting a strengthening model of working to ensure compliance across the system

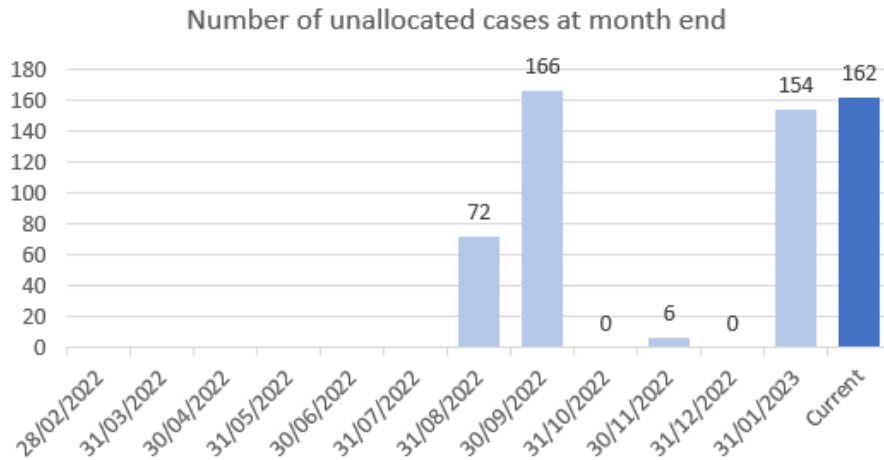
### What are we worried about?

We are worried that the staff team do not carry the sufficient skill set and knowledge across the system to meet the needs of the children in their care. We are worried that some staff are care worn and as such have been offering blocked care. We are worried that one of homes is unable to deliver services that meet the basic needs of our children.

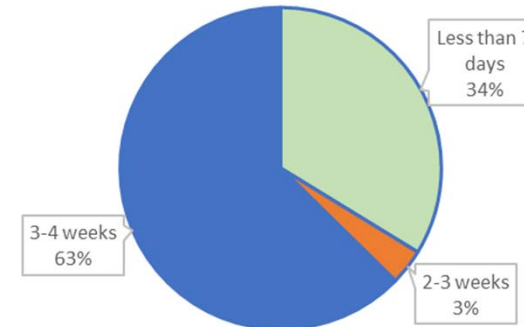
### What are we doing about it?

All staff are undertaking a skills matrix and appropriate training plans, we will be closing Heneage road to enable us to focus on developing homes that can deliver good standards of care. Ensure all actions of recent notifications are being acted upon and followed up.

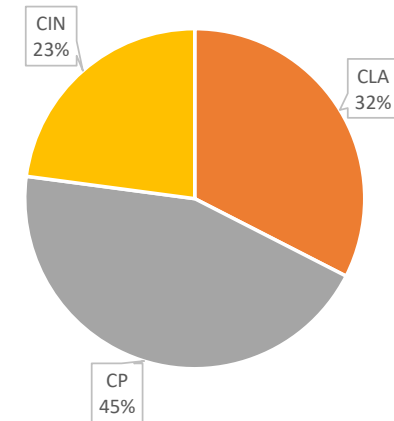
## Unallocated cases



Period unallocated of current unallocated



Case status of current unallocated



### What's working well?

We have developed with the support of our SLIP partners a plan to manage the unallocated work.

### What are we worried about?

Children do not have an allocated social worker and we are therefore have concerns that children are not receiving the support they need to keep them safe meaning cases may escalate and children are placed at risk. There is drift and delay on cases that are before the court and this means children are experiencing delay in achieving permanence, there is also a reputational and a financial risk if wasted costs orders are made against the Council due to non-adherence to the agreed court timetables leading to delays in the filing of evidence.

### What are we doing about it?

Cases are reviewed regularly and a duty system is in place to ensure visits, core groups, ICPC's, RCPC and children in care reviews. Daily meetings are now held with HOS and SM from CASS to review, prioritise and allocate actions on the unallocated cases, our SLIP partners are also supporting this work. We have also commissioned 4 teams of experienced social workers to support and improve our court and child protection work who will start over the next 4 weeks to ensure all children will have an allocated social worker.

## Health visitor and School nurse visits

Health Visiting Service	2021-22	2022-23		
Healthy Child Programme	Q4	Q1	Q2	Q3
Number of mothers who received a first face to face antenatal contact with a Health Visitor	138	26	134	139
Percentage of births that receive a face to face NBV within 14 days by a Health Visitor	87%	89%	86%	82%
Total coverage of NBVs in Quarter	98%	100%	95%	97%
Percentage of children who received a 6-8 week review by the time they were 8 weeks.	87%	89%	90%	87%
% 12 Month Reviews (Before 12 Months)	94%	96%	96%	97%
% children due a review by the end of the quarter, who received a 2-2½ year review, by the age of 2½ year	92%	93%	95%	87%

Unlike health visiting, school nurses have no set contacts. The embedded report reflects the whole scale of service activity.



Microsoft Word  
Document

### What's working well?

- Service is consistently achieving 80 – 85% of face to face contacts
- Maintaining named HV caseholder for antenatal/ new birth and 6-8 week contact to provide continuity and building trusting relationships
- 12 month and 2 year review are offered to 100% of families within timescales
- ChatHealth text service and text reminder service now in place which will send appointment reminders to parents/carers. Children under 1 years have a named Health Visitor, children over 1 years who are deemed universal are now managed corporately by a team of Health Visitors
- Duty team & ChatHealth provide a responsive service to parents

### What are we worried about?

- Ongoing workforce capacity and recruitment issues impacts on ability to undertake all contacts within timescales.
- Impact of above on staff wellbeing
- 6 week waiting time for packages of care (undertaken by Community Health Practitioners)

### What are we doing about it?

- Exception reporting takes place quarterly to understand reasons for non attendance (ie. baby in hospital/movement into area/contact rearranged by parent) and identify themes
- Performance monitoring will be in place from Q1 2023
- Text reminder service also allows parents to cancel appointments and rearrange, which will be more time effective
- Service prioritisation model in place when staffing capacity falls below 80%
- Workforce development plan in place – this includes 'growing or own' Health Visitors, this has proved successful so far
- We obtain Professional and service user feedback to support improvements to the service