


# Early Help Quality and Performance Framework

Early Help performance based on the position as at end of quarter 2 (30<sup>th</sup> Sep 17).

Key Terms	Meaning
NA	National Average
SNA	Statistical Neighbour Average
YTD	Year to date
SWA	South West Average
PYO	Previous year outturn

# Key Statistics Early Help

Measure	Sep 16	Sep 17	DOT
Number of open Universal Heath Visiting involvements	13228	12744	
Number of children with an open Universal HV involvement	11423	10514	
Number of open involvements across Early Help services* (excluding universal) <i>(Rate per 10,000 population)</i> <i>NB: a child may have more than one open involvement</i>	*	12144 (2477.1)	N/A
Number of children with one or more open involvement across Early Help services* (excluding universal) <i>(Rate per 10,000 population)</i>	*	9019 (1839.6)	N/A
Referrals to social care in the year-to-date that are a step up from an early help service* (number and percentage).	*	899 55.1%	N/A
CIN closing in the year-to-date that were stepped down to an early help service* (number and percentage).	*	1 month time lag	N/A

**Commentary:** \*Data for targeted Early Help Services includes Baby Steps, Early Help Record & Plan, Education Psychology, Education Welfare, Family Nurse Partnership, Family Service, Health Visiting UP & UPP, School Nursing, TaMHS and Youth Engagement. There is no 2016 comparator data as the following services were also included in 2016 - Aiming High, Complex Health & Continuing Care, Paediatric Therapy and SaLT.

# Early Help Records, Plans and Reviews

Measure	Sep 2016	Sep 2017	DOT
Number of Records Early Help year-to-date (Rate per 10,000 population)	317 (64.7)	247 (50.4)	↓
Number of Early Help Plans year-to-date (Rate per 10,000 population)	275 (56.1)	204 (41.6)	↓
Number of Early Help Reviews year-to-date (Rate per 10,000 population)	637 (129.9)	564 (115.0)	↓

## Commentary:





The data for Early Help Records, Plans and Reviews is now reliably accurate following a prolonged period last year where this was not the case. We now have a robust process supported by the Business Support Team in the Family Service to ensure this data inputting stays on track. We are developing our plans to ensure that we work with all partners to re-invigorate our joined up work to intervene early using the Early Help Record and Plan process for effective integrated working and reduce the demand for more specialist services.

# 1. People are helped to develop their own solutions to problems early, promoting independence and to choose healthy lifestyles.

## 1a. Health Visiting, Healthy Child Programme

Measure	Q2 16/17	Q2 17/18	NA (Q4 16/17)	SNA (Q4 16/17)	DOT
Number of mothers receiving ante-natal visits (rate per 10,000 15-45 year old females )	463 (108.3)	303 (70.8)	68814 (64.9)	6767 (70.3)	↓
% of births that receive a new birth visit within 14 days.	80.9%	67.0%	88.3%	91.3%	↓
% of births that receive a new birth visit after 14 days.	17.3%	16.8%	9.9%	7.2%	↓
% of children who received a 6-8 week review by the time they turned 8 weeks.	84.4%	83.9%	83.6%	92.7%	↓
% of infants being breastfed at 6-8 weeks.	47.1%	41.6%	44.3%	40.6%	↓
% of children who received a 12 month review by the time they turned 15 months.	77.9%	42.3%	82.7%	90.2%	↓

## 1a. Health Visiting, Healthy Child Programme (continued)

Measure	Q2 16/17	Q2 17/18	NA (Q4 16/17)	SNA (Q4 16/17)	DOT
% of children who received a 2-2.5 year review using the Ages and Stages Questionnaire (ASQ-3) by the time they turned 2.5 years.	79.9%	79.6%	91.3%	96.3%	
Number of open Universal involvements.	13228	12744	N/A	N/A	
Number of open Universal Plus involvements.	1476	1384	N/A	N/A	
Number of open Universal Partnership Plus involvements.	940	828	N/A	N/A	

### Commentary:

In some indicators there is a large difference between Q2 16/17 and Q2 17/18. This is in the main due to a different method of data collection and calculation in Swindon from Q1 2017/18 but does also reflect the recent HV capacity issues we have experienced linked to sickness and maternity leave and the resultant delivery protocol for HCP that we are delivering locally. NA and SNA data for Q1 and Q2 will be published 31/01/2018.

## 1b. Baby Steps

Measure	Sep 16/17	Sep 17/18	DOT
Number of trained facilitators. (June 2017: Dedicated Baby Steps Team: 6 facilitators and Operational Lead)	6	6	↔
Number of referrals received	459	768	↑
Number of families who have completed the programme since it's beginning.	51	154	↑
Number of open involvements as at quarter end.	136	119	↓

### Commentary:

Our BS programme continues to work effectively and evaluation is demonstrating good outcomes in a variety of measures. The programme is linked to the New Beginnings project and the current groups have a significant number of parents attending whose unborn babies are on CP plans. The BS team are linked to other BS programmes nationally and are helping to develop better evaluation evidence




## 2b. School Nursing.

Measure	Oct 16	Jan 17	May 17	DOT
School population from pupil census.	31,155	31,310	31,072	N/A
Measure		Sep 16	Sep 17	DOT
New involvements in the year-to-date.		598	649	N/A
Face-to-face contacts in the year-to-date.		3288	3111	↓
Number of outcomes recorded		231	259	↑
% of outcomes indicating a positive improvement in attendance, family/ peer relationships, emotional/ physical/ sexual health and parenting capacity and reduction in risk of pregnancy and risk-taking behaviour.		214 (92.6%)	235 (90.7%)	↑ ↓
% of children with a School Nurse involvement that also:				
Have an EHRP		N/A	787 (22.9%)	N/A
Are a child in need		N/A	409 (11.9%)	N/A
Have a child protection plan		N/A	205 (6.0%)	N/A
Are a looked after child		N/A	145 (4.2%)	N/A
Measure	Jun 15	Jun 16	NA	DOT
Rolling annual quarterly under 18 conception rate per 1,000 girls (time lag due to the nature of the indicator).	21.6	20.1	19.8	↑

### Commentary:

The improvement in the recording of outcome is noted and this will provide a good basis going forward . The changes in last 12 months to local procedure for health representation in strategy discussions has impacted on SN and this is believed to be the most influential factor affecting number of children seen directly by SN.

## 3b. TaMHS

Measure	Sep 16/17	Sep 17/18	DOT
Number of referrals in the quarter.	933	963	N/A
Number that were via the single point of access.	*	528	
Number that were traded services.	*	217	
Direct patient contacts in the year-to-date.	3910	3783	
Indirect patient contacts in the year-to-date.	334	561	
Percentage of assessments offered in the year-to-date that were within 18 weeks of referral (includes scheduled assessments that were not attended).	*	44.4%	*
Percentage of assessments completed in the year-to-date that were within 18 weeks of referral (excludes scheduled assessments that were not attended).	*	48.0%	*
Percentage of patients starting treatment whose treatment started within 18 weeks of their referral in the year-to-date.	90.7%	84.0%	
Children whose pre & post involvement SDQ scores...			
...have improved by 1+ band	33.3%	26.8%	
...have remained in the same band	53.8%	68.3%	

**Commentary:** \*Following a review of data recording, new procedures have been put in place and changes to Capita One have been made to ensure referral to assessment times are accurate. There will therefore be no previous year comparator data for this until Q1 18/19. **Also** Capability on Capita One to record whether referral was traded or single point of access was implemented in July 2016, therefore no data for this exists before this date.


**Positives:** Although there has been a reduction in the number of 1-1 treatment work to children and young people, group work has recently been introduced and is enhancing direct contact with children. Although the performance figures cannot be reported we believe that the service doesn't let children's referrals "slip through" the system. This is demonstrated by our process for screening, assessment and treatment.

**Concerns:** . We have implemented all of the CCG funded transformation plans agreed but capacity is still not matching demand and our performance has not improved in line with targets expected. We have initiated discussions with CCG about this and have completed a risk assessment.



### 3c. Youth Engagement

Measure	Sep 16	Sep 17	NA	SNA	DOT
NEET age 16 and 17 Unknowns.	*	*	N/A	N/A	N/A

Measure	Sep 16/17	Sep 17/18	DOT
16 and 17 year olds who are NEET being supported by YEWS.	*	*	N/A
Youth Engagement Service: Number of involvements with one or more of the outcomes 1. engaged in learning; 2. gained employment; 3. successful transition (year-to-date).	118	120	
Number of open involvements at the end of the quarter.	330	262	N/A
% of children with a Youth Engagement involvement that also:			
Have an EHRP	N/A	787 (22.9%)	N/A
Are a child in need	N/A	409 (11.9%)	N/A
Have a child protection plan	N/A	205 (6.0%)	N/A
Are a looked after child	N/A	145 (4.2%)	N/A


**Commentary: Positives:** Number of activities with relevant raising participation (RPA) themes equalled or exceeded both 2015/16 performance and 2016/17 targets. New tracking processes have reduced numbers of unknowns, which is below last year and the set target. The NEET + unknown total (cohort not known to be in a positive destination) has remained below last year throughout the year for both 16 and 17 year olds. For the key figure, combining 16 and 17 year olds, the Swindon figure has remained very close to both the South West and National averages through most of the year.

**Concerns:** Number of positive outcomes reported lagged behind the figures reported for 2015/16 and 2016/17 targets. As the NEET population has decreased then the cases are now more complex, longer-term and have more entrenched barriers to progression. It is more difficult to achieve recordable outcomes for the resulting cases. There is no longer a requirement to complete ES9s for JSA & Income Support for all 16/17 year olds, which usually resulted in quick outcomes.

\*NEET Data is not reported in Jul, Aug and Sep due to Summer holidays.

## 4. Children and young people at the edge of care are helped to reduce the risks that would lead them into care (intensive support).

### 4a. Family Nurse Partnership.

Measure	Sep 16	Sep 17	DOT
Open involvements as at the end of the quarter.	151	129	N/A
% of all activity that is either a healthy child programme contact or specific FNP contact.	82.7%	72.9%	
% of children with an FNP involvement that also:	N/A		N/A
Have an EHRP		11.4% (27)	
Are a child in need		11.4% (27)	
Have a child protection plan		3.0% (7)	
Are a looked after child		3.8% (9)	

#### Commentary:

Positives: Excellent recruitment and retention of clients. Good outcomes.

Concerns: Recruitment before 16 weeks is still a challenge and late graduation of clients is not yet compliant with programme.

## 4b. Family Service

Measure	Target	Jun 17	Sep 17	DOT
Number of children with an open involvement.	N/A	467	536	↑
Number of families with an open involvement.	N/A	204	239	↑
% of children with a Family Service involvement that also:	N/A			N/A
Have an EHRP		37.8%	30.3%	
Are a child in need		20.9%	17.5%	
Have a child protection plan		8.0%	8.0%	
Are a looked after child		0.6%	1.8%	
% of outcomes in the quarter that are positive	80.0%	93.2%	81.8%	↓
% of open involvements that have been open for <6 mths	85.0%	88.7%	76.2%	↓
% of closing invs that closed within 6 mths of open date	85.0%	80.6%	81.0%	↑

### Commentary:

Following the development of indicators to show the impact of the Family Service, some are now included above. The others still require development in terms of extracting the data from Capita One in an efficient and accurate manner to be reported monthly.