

**Update on the
Essex Child and Family Wellbeing
Service contract for
PAF Scrutiny Committee
11 January 2023**

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Session structure

- Contract background
- What is unique about the Essex contract
- Performance to date
- Support offered by ECFWS to Essex families during the pandemic
- The challenges
- The future
- Questions

Contract background

- 7 year contract with the option to extend for a further 3 years
 - contract started 1 April 2017 and is currently in year 6
- Pre-birth to 19 offer, combining 0-19 health services (health visiting and school nurse offer) and the 0-5 Children Centre offer (a range of family support services) into one integrated contract for each of Essex's 4 quadrants
- Main Family Hub building each with linked Family Hub Delivery sites in each district
- A service without walls approach, allowing flexibility to deliver services to families in locations that are more accessible to them through a mixture of family Hubs, local communities venues and family homes
- Clear focus on: -
 - Supporting those families that most need support
 - developing strong community groups and effective parent peer support networks
- Key in the work underway in strengthening the children and family system

What is unique about the Essex contract



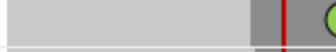


- Operationalising and delivering a new integrated model
 - Fully integrated, co-located multi disciplinary teams created around each Family Hub / district
 - Fully utilising and blending the whole workforce's full skills mix and experience
 - Effectiveness nationally and independently validated
- Outcomes based service specification and contract that is unique to Essex
 - 22 Outcome Measures focused on improving life experiences for children and families
 - the only area in England which is commissioning and reporting on outcomes over and above nationally mandated activity
 - Essex is seen as a national exemplar in both integration of previously separate services and outcomes focused approach and has received contact from around 25 other Local Authorities keen to learn from Essex's experience
- Delivery of a joined-up care pathway with West Essex NHS
 - Inclusion of West Essex's NHS specialist children's community services creating a wider skill set providing an improved service to families
 - Aligned communication and consistent messages for families in the West Essex area accessing a wider range of services

Performance to date

- Strong consistent performance in the mandated health visitor checks compared with other Local Authorities
 - In all of the 5 mandated measures, Essex consistently performs well compared with other England Local Authorities
- Successfully delivering on the 22 contract Outcome Measures
- Priority Families targeted offer has been successful at reaching families that traditionally don't access services and the implementation of a single shared child and family record has really supported the success of this
- Essex Child and family Wellbeing Service rated "Good" by the Care Quality Commission (CQC) in July 2019
- Flexible and dedicated response to COVID response. HCRG Care Group exceeded their KPI targets throughout the pandemic
- Responded quickly and efficiently to the urgent challenges and additional complex caseload requirements of families who are asylum seekers, refugees and complex families placed in Essex

Mandated Health Visitor Checks Performance

Table 1. Summary of Public Health England Metrics, Comparison to Region (East) and England.

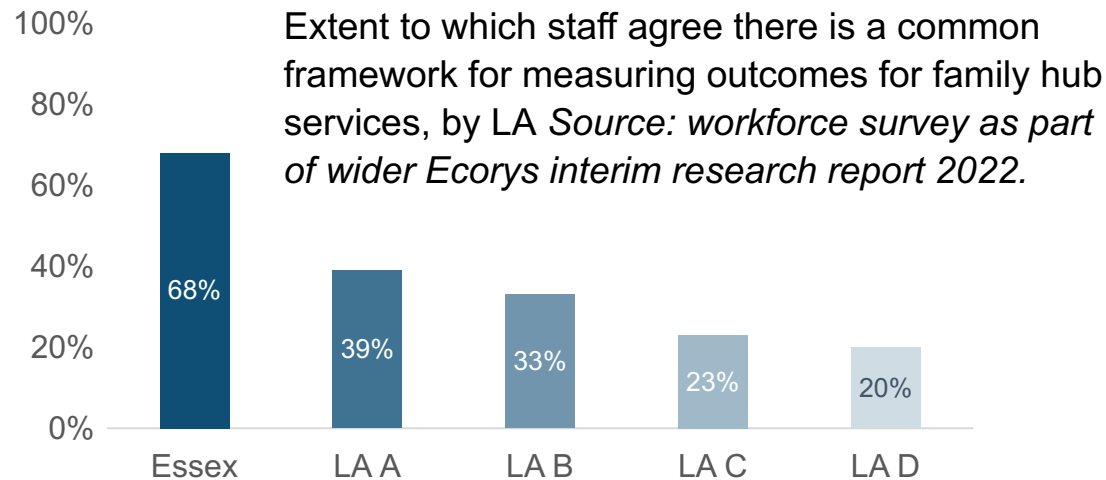
Indicator	Period	Essex			Region	England		England	
		Recent Trend	Count	Value	Value	Value	Worst	Range	
Proportion of New Birth Visits (NBVs) completed within 14 days	2020/21	—	13,555	93.8%	83.8%	88.0%*	27.9%		
Proportion of infants receiving a 6 to 8 week review	2020/21	—	13,518	92.3%	74.2%	80.2%*	6.1%		
Proportion of children receiving a 12-month review	2020/21	—	14,755	92.6%	80.2%	76.1%*	0.1%		
Proportion of children who received a 2-2½ year review	2020/21	—	14,610	97.1%	59.4%	71.5%*	5.0%		
Proportion of children aged 2-2½yrs receiving ASQ-3 as part of the Healthy Child Programme or integrated review	2020/21	➡	13,118	94.5%	83.7%	85.2%*	17.7%		

Source: Local Govt Inform and Public Health Fingertips datasets

NB. we can only benchmark our mandated ACTIVITY with other LAs and not Outcome Measures as Essex is the only area currently focusing on Outcomes

Further independent assessment of Essex performance

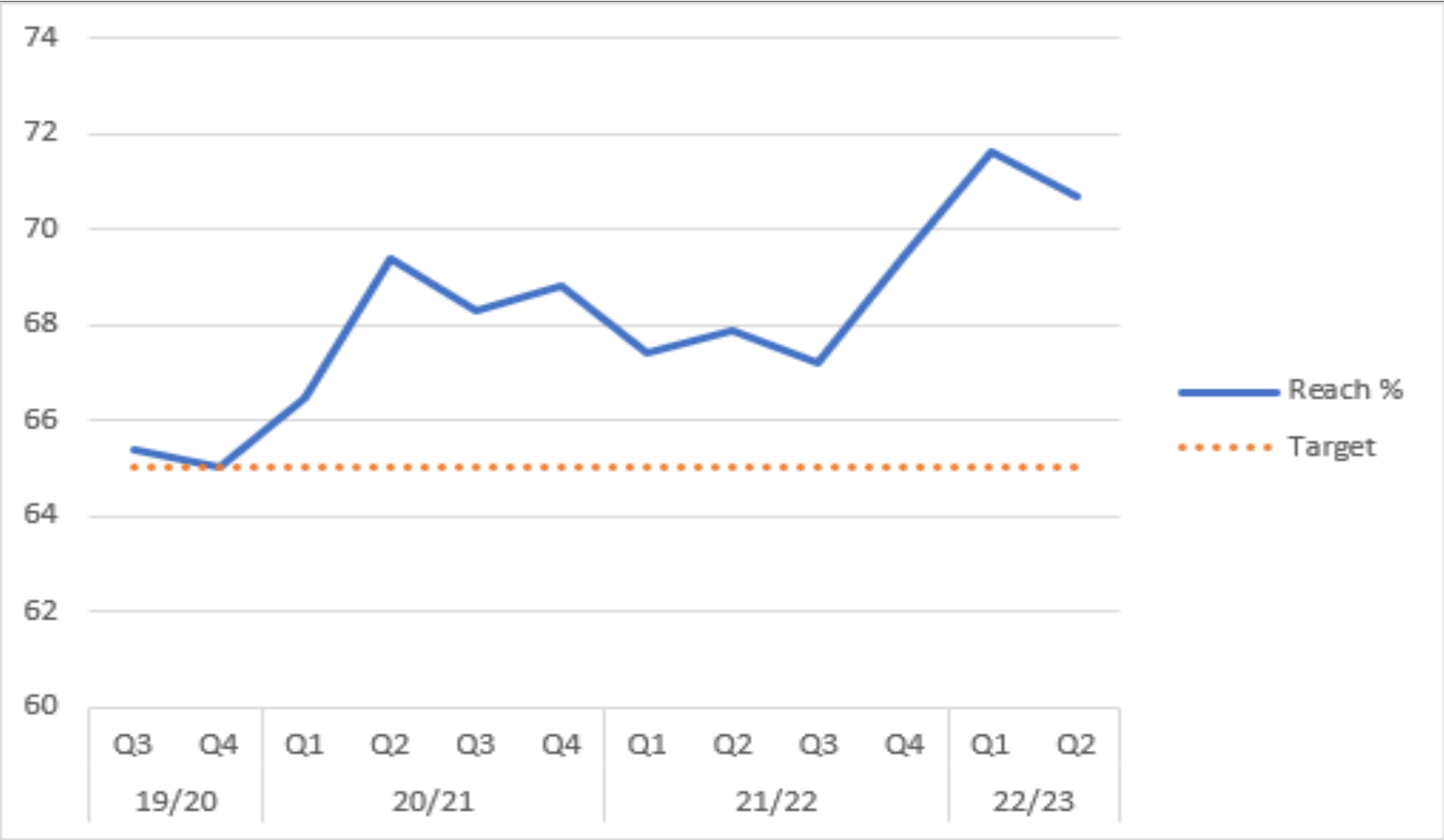
Source: Ecorys Dept for Education Family Hubs Innovation Fund Evaluation– interim research report July 2022. The study was based on 5 Local Authority (LA) commissioned services that used a hub approach in various stages of maturity to assess the relative merits of each system and approach.



“One LA (Essex Child & Family Wellbeing Service had) a mature hub model, an embedded measurement outcomes framework, shared case management data system, and importantly a dedicated data team to process, analyse and report on data. This LA takes a data-driven approach to identifying needs and measuring outcomes at the individual, area and systems levels”.

“Essex is furthest along in their ability to track county-wide and geographic area level changes”

Reach of Essex children against a minimum target of 65%



Source: HCRG Data reporting against Surestart Children’s Centres Performance target

Support offered by Essex Child & Family Wellbeing Service to Essex Families during the pandemic

- Proactively and rapidly implemented a 4-stage phased plan of escalation, in line with national and local public health recommendations in place during this period
- Effectively maintained support for families during a time when face to face contact was either prohibited or where families were worried about and disengaging with the face-to-face offer by creating virtual and telephone support offers
- The outcomes-based nature of the contract enabled HCRG Care Group to make rapid changes to their delivery model to respond quickly to the impact of the pandemic
- Support and how services are being delivered have been adjusted to reflect the impact of Covid on children and their families with a particular focus on emotional wellbeing, early language delay, lack of social interactions and poor independence

The Challenges

The areas of challenge described below are issues everywhere in England, but Essex is working proactively with HCRG Care Group to address these: -

- Recruitment and retention of workforce
- Accountability of shared outcomes across the children and families system
 - Working with multiple partners across the system including the new Integrated Care Systems and Boards
- Caseload complexities post pandemic

The future

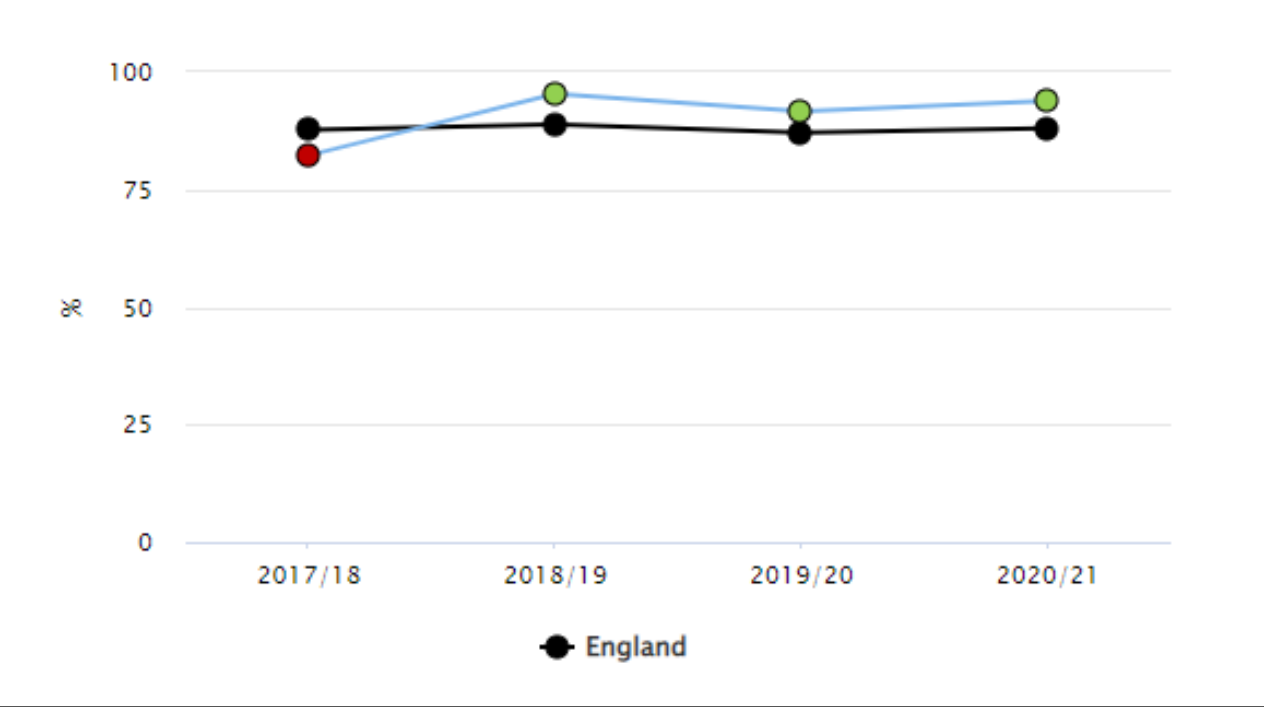
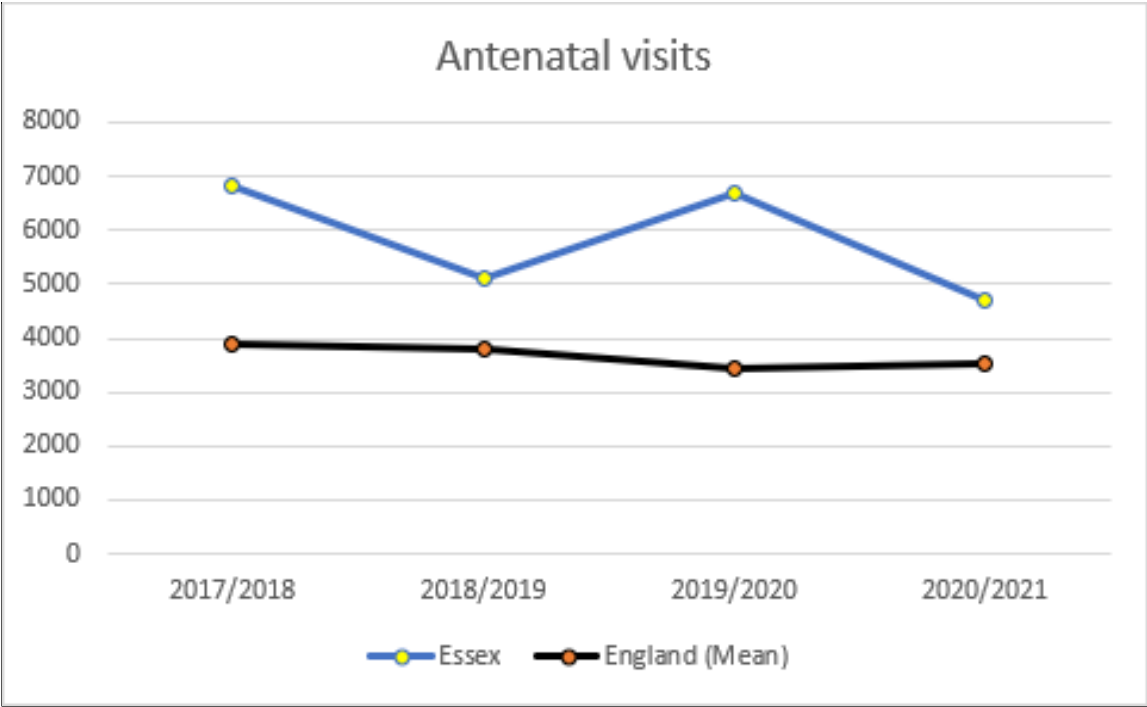
Developmental areas to further focus on:-

- Continuing with innovative solutions to support the ongoing workforce recruitment and retention issues
- growing more examples of community engagement and community asset approach
- Continuing the system join up journey delivering: LA commissioned services and NHS West Essex commissioned services in a single contract with shared accountability
- Seeing the:-
 - SET CAMHS tier 2 services contract as step up option from universal emotional wellbeing services rather than referral to different agency
 - Child and family weight management services as a partner in Essex Wellbeing Service to ensure stronger links between identification of overweight children and the support they then receive, but with weight support set within wider context
- Continuing to drive the overall Children and Families system, with a focus to enable shared system outcomes

Thank you

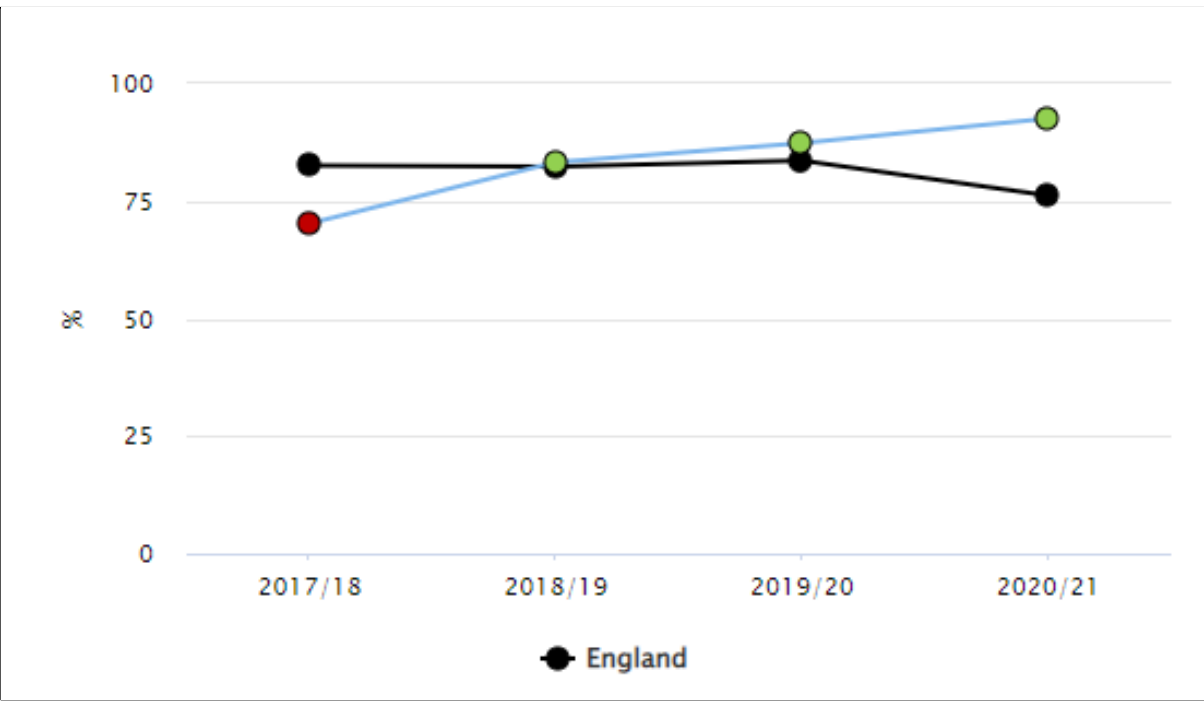
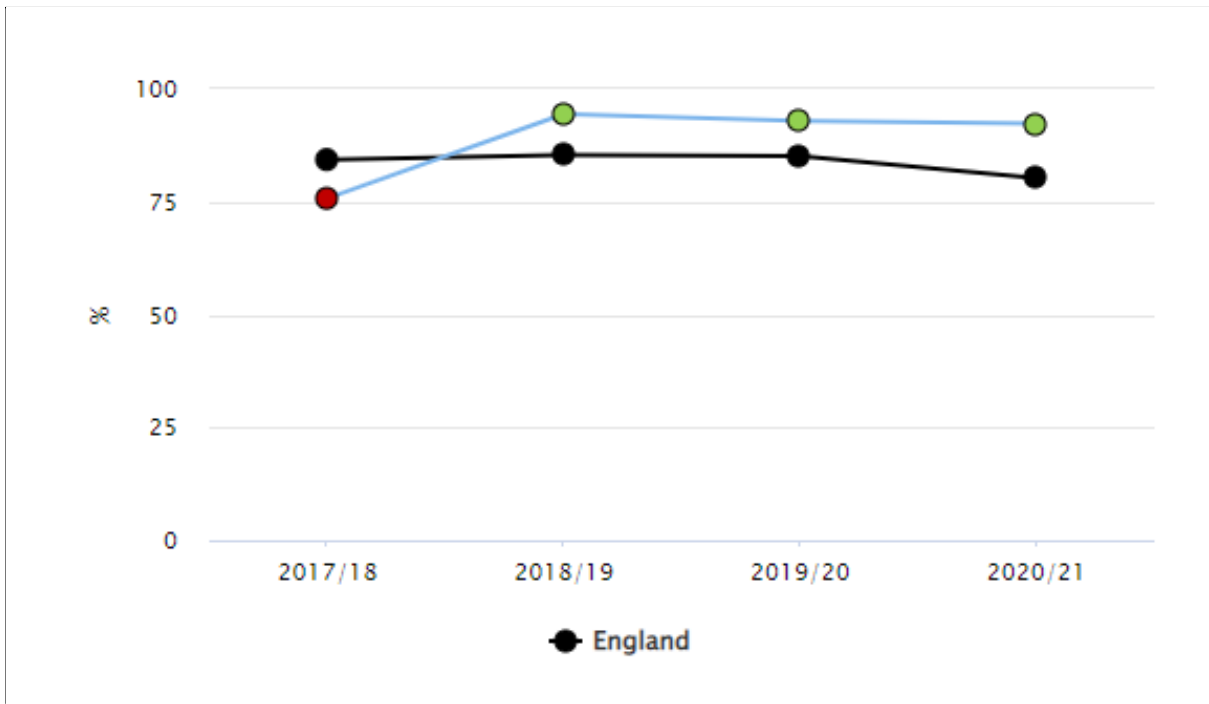
Questions

Ante natal visits (from 28 weeks) and new birth visit up to Day 14: Essex compared to England



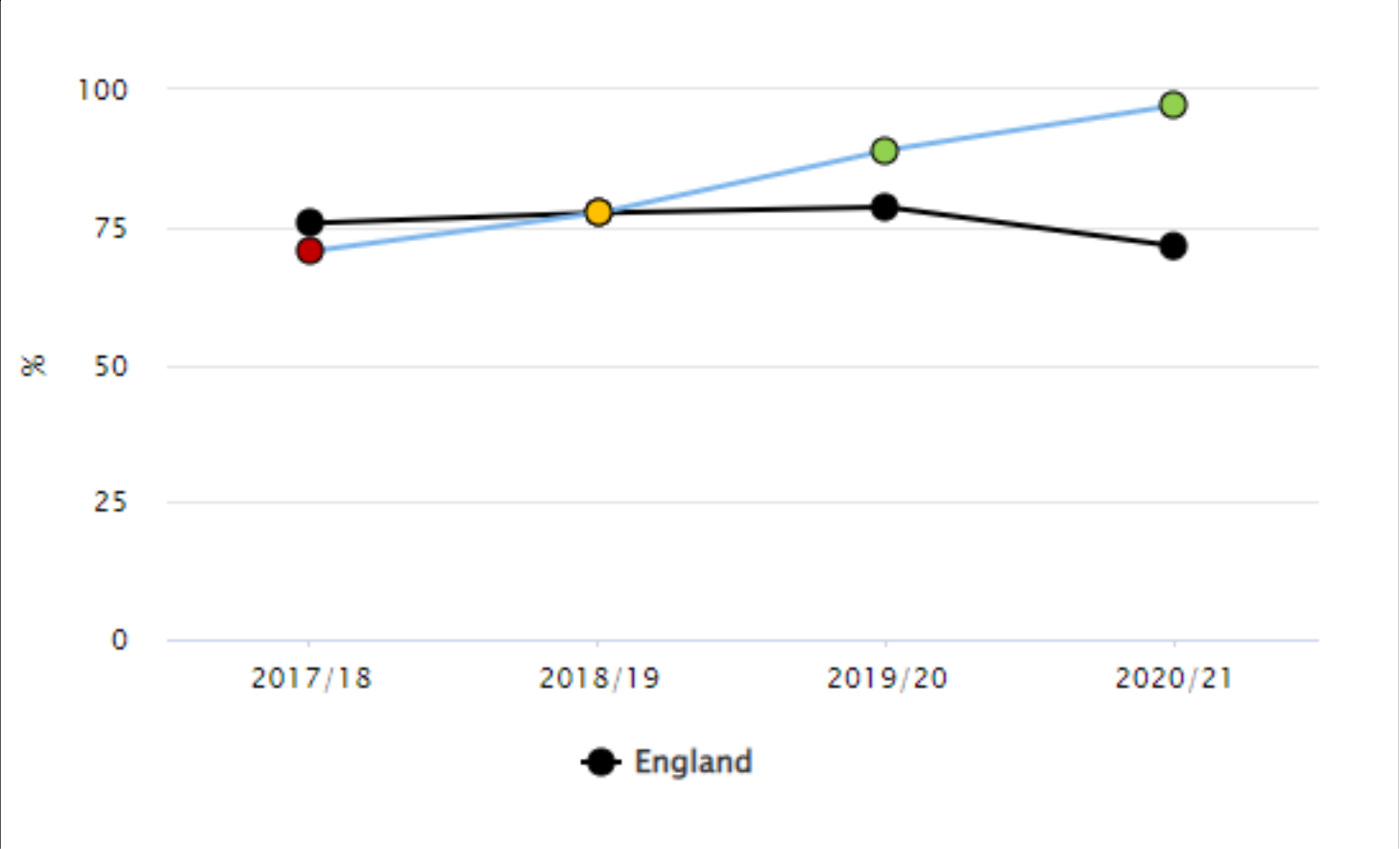
Source: Fingertips Public Health Profiles, Office of Health Improvement and Disparities

Proportion of Infants receiving a 6-8 Week review and proportion of children receiving a 12 month review: Essex compared to England



Source: Fingertips Public Health Profiles, Office of Health Improvement and Disparities

Proportion of children who received a 2.5 year review: Essex compared to England

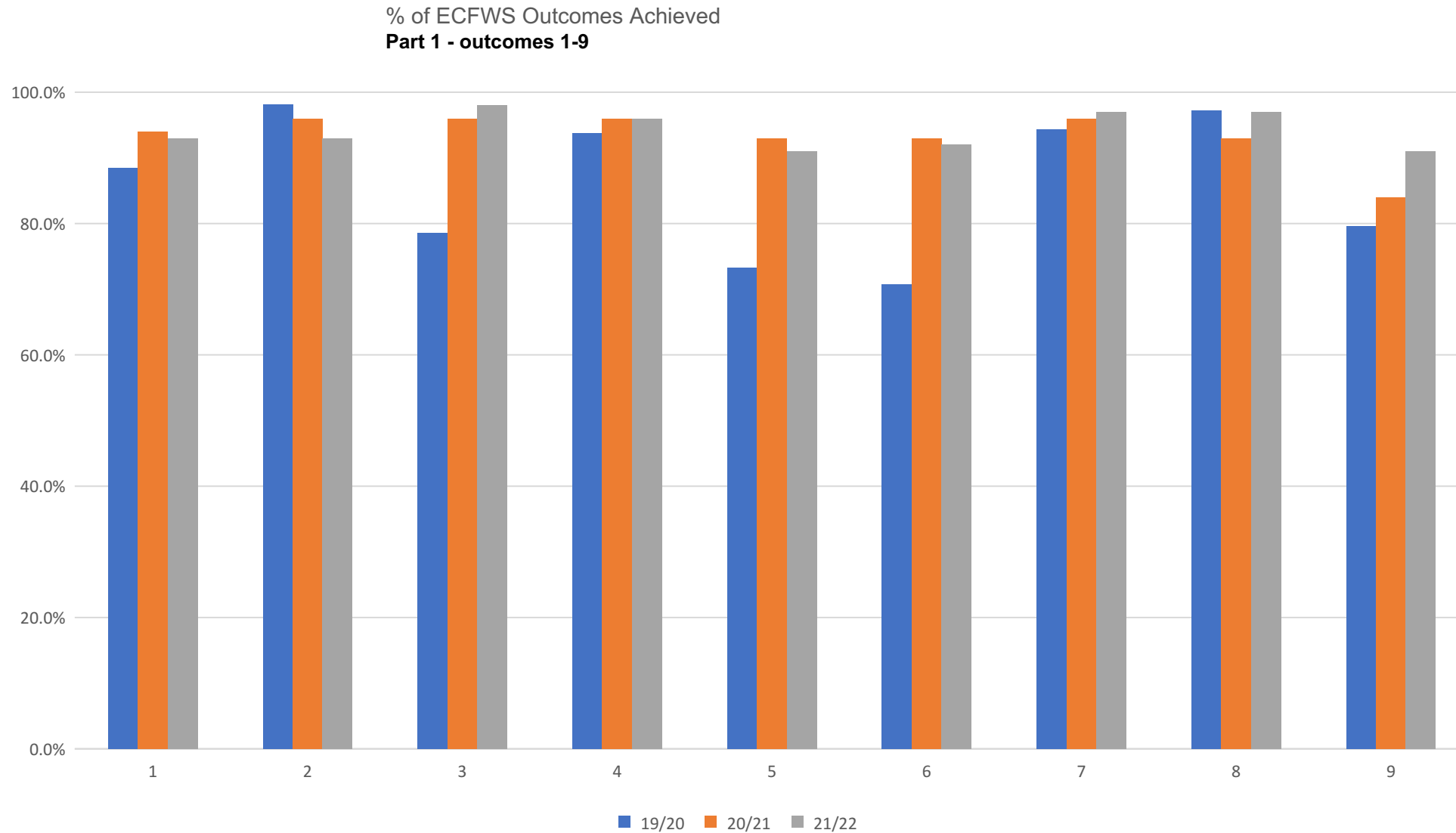


Source: Fingertips Public Health Profiles, Office of Health Improvement and Disparities

Some of our 22 outcomes and indicators

Outcome	Indicator
All children and young people have strong attachment to at least one adult or other person in their life	No. and % of women with low emotional attachment to their baby at 14 days who show improved attachment by 6-8 weeks No. and % of under-2 year olds identified as at risk of poor attachment with a primary care giver whose attachment improves with support
Identified risks to children's safety are removed /mitigated	No. and % of children with risks to safety who are identified where the risks are then removed / mitigated
All parents have good emotional well-being in the perinatal period	No & % of mothers identified as at risk of or experiencing poor emotional wellbeing during the perinatal period whose emotional wellbeing has improved following support
All children and young people have good emotional wellbeing	No. and % of children and young people at risk of / with poor emotional wellbeing supported by the service whose emotional wellbeing has improved No. and % of children and YP, living in homes with parents with history of mental health needs, who show improvement from poor emotional wellbeing after 6 months
All children are ready for school	No. and % of children identified as not school ready who are school ready in advance of starting school after support /response from the provider Numbers of families offered evidence based parenting support who show improvements in parenting/behaviour
Children and young people make positive lifestyle choices	No & % of children and young people not making positive choices who are making more positive choices after support No. and % of children in families in most deprived quintile overweight at Year R who return to healthy weight at Year 6 measurement
Children, young people and parents feel connected and included in a community	No. and % of children and young people who feel less lonely after support No. and % of parents who feel less lonely after support

% of outcomes 1 – 9 achieved 19/20 – 21/22



% of outcomes 11 – 23 achieved 19/20 – 21/22

% of ECFWS Outcomes Achieved
Part 2 - Outcomes 11-23

