

Appendix C - ECFWS – Performance data and KPI data

1. How has the service performed throughout the pandemic?

- 1.1 ECFWS is contracted to deliver against more than 40 locally agreed KPIs, 45 public health metric KPIs - sometimes referred to as 'surveillance measures' - and 27 outcome measures (22 ECC outcome measures - 9 incentivised and 13 non-incentivised and 5 West Essex CCG outcome measures). Monthly reports are provided to commissioners to scrutinise and manage performance.
- 1.2 Essex has an overall estimated population of 1.5 million people. There were 14,706 babies born in 2019-2020 in Mid Essex 3,614 (25%) (approximately 301 per month), North East 3,123 (21%) (approximately 260 per month), South 4,498 (31%) (approximately 374 per month) and West 3,471 (23%) (approximately 289 per month).
- 1.3 Between 1st April 2020 and 31st January 2021 there were 11,568 babies born, Mid Essex 2,786 (9% decrease on same period in 2019-2020), North 2,537 (3% decrease), South 3,560 (7% decrease) and West 2,686 (9% decrease).
- 1.4 Of the large array of KPI surveillance measures being collected those presented in this report provide a summary temperature check on how ECFWS is performing as they are deemed to be the most meaningful.
- 1.5 98% (target 80%) of Universal antenatal checks were conducted on women who were more than 28-weeks pregnant. (KPI 2.01).
- 1.6 99% (target of 96%) of Universal new birth checks conducted, including a review of mothers' emotional wellbeing, were undertaken whilst the baby is between 10-14 days old. (KPI 2.02).
- 1.7 96% (target of 95%) of Universal 6-8 weeks old baby checks conducted. (KPI 2.33).
- 1.8 99% (target of 95%) of Universal review of 1-year olds conducted, using an Ages and Stages (ASQ) questionnaire. (KPI 2.34).
- 1.9 98% (target is 95%) of Universal 2.5 - 3 year olds reviews conducted using ASQ-3.
- 1.10 In West Essex, waiting time targets relating to children's community health provision were above 98% for allergy, occupational therapy, physiotherapy, paediatrics and speech and language therapy. Continence and dietetic waiting time targets were 87%, which is 8% below target. The impact of COVID-19 on this low-staffed, specialist 3-day a week service provision has provided challenges with wait time compliance. The service has developed an integrated pathway with the pre-birth – 19 service to support waiting times for these conditions.

2. How the true impact of service delivery is measured

- 2.1 The impact or difference ECFWS has made is carefully measured using a range of methods. The child or family's needs are usually identified at one of the scheduled Universal contacts or drop-in clinics where meaningful conversations and benchmarking tools are used e.g. the Ages and Stages Questionnaire (ASQ) or the Edinburgh Postnatal Depression Scale (EPDS).

- 2.2 Practitioners work in partnership children, young people and families to set goals and plan how they can be achieved and an outcome care plan is created. The outcome measure process includes:
1. Identifying and assessing the problem or need,
 2. Setting the goal or outcome to achieve,
 3. Implementing an action or support plan,
 4. Reviewing stages and progress, and
 5. Assessing the impact and concluding whether the goal or outcome has been achieved.
- 2.3 Impact is measured again using outcome-specific assessment tools, together with a holistic and meaningful conversation and reviewing achievement of personal goals and aspirations.
- 2.4 Year-to-date, the following outcome measures have been completed, these demonstrate the Essex overall impact following support.
- 2.5 Outcome 1: 94.9% of children reported they felt safer after support, this is 15% above target and a 9% increase when compared to the same period last year. (KPI target 85%).
- 2.6 Outcome 2: 94% of parents reported they felt their children were safer after support, this is 1% below target and 4% lower than the same period last year. Parent's report that COVID-19 has increased levels of anxiety and this has impacted how parents feel after support. (KPI target 95%).
- 2.7 Outcome 3: 96% of children and young people had an action plan in place to remove or mitigate risks to safety. This is 24% above target and a 23% increase when compared to the same period last year. (KPI target 72%).
- 2.8 Outcome 4: 96% of families showed improvements in parenting/behaviours following support, this is 6% above target and a 3% increase when compared to the same time last year. (KPI target 90%).
- 2.9 Outcome 5: 93% of children reached an age appropriate level of development in advance of starting school, this is 28% above target and a 22% increase when compared to the same period last year. (KPI target 65%).
- 2.10 Outcome 6: 94% of FEEE2 (Free Early Education Entitlement) children reached an age appropriate level of development in advance of starting school, this is 28% above target and a 29% increase when compared to the same period last year. (KPI target 65%).
- 2.11 Outcome 7: 96% of mothers whose emotional wellbeing improved following support in the perinatal period, this is 11% above target and a 2% increase when compared to the same period last year. (KPI target 85%).
- 2.12 Outcome 8: 93% of primary carers with a child on a Child Protection Plan whose emotional wellbeing improved following support, this is 8% above target but 7% lower than the same period last year. (KPI target 85%).

- 2.13 Outcome 9: 84% of young people made more positive lifestyle choices after support, this is 10% above target and a 7% increase compared to the same period last year. (KPI target 75%).
- 2.14 Outcome 10: National Child Measurement Programme (NCMP) – monitoring outcome, where the number of overweight reception age children are remeasured at year 6 (2024) to see if they have returned to a healthy weight.
- 2.15 Outcome 11: 98% of teenage parents made improved lifestyle choices after support, this is 36% increase compared to the same period last year. (KPI target 85%).
- 2.16 Outcome 12: Healthy Schools Status – Healthy Schools planning support has continued during the pandemic.
- 2.17 Outcome 13: 93% of young people reported being more ready for the next stage of life after support, this is a 16% increase compared to the same period last year. (KPI target 90%).
- 2.18 Outcome 14: 100% of young people with an EHCP reported being more ready for the next stage of life after support, this is a 5% increase compared to the same period last year. (KPI target 90%).
- 2.19 Outcome 15: 92% of young people who are LAC reported being more ready for the next stage of life after support, this is a 5% increase compared to the same period last year. (KPI target 90%).
- 2.20 Outcome 16: 90% of children and young people had improved emotional wellbeing after support, this is a 1% increase compared to the same period last year. (KPI target 85%).
- 2.21 Outcome 17: 89% of young carers had improved emotional wellbeing after support, this is a 6% increase compared to the same period last year. (KPI target 86%).
- 2.22 Outcome 18/20: 97% of primary carers felt less lonely and isolated after support, this is a 2% increase compared to the same period last year. (KPI Target 96%).
- 2.23 Outcome 19: 93% of school age children felt less lonely after support, this is a 7% increase compared to the same period last year. (KPI Target 90%).
- 2.24 Outcome 21: 98% of primary carers showed an improved relationship to their baby post intervention, this is a 6% increase compared to the same period last year. (KPI Target 90%).
- 2.25 Outcome 22: 95% of under 2-year olds had an improved attachment to their primary carer after support, this is a 3% increase compared to the same period last year. (KPI Target 85%).
- 2.26 Outcome 23: 92% of young people reported having an improved relationship with their primary carer after support, this is a 9% increase compared to the same period last year. (KPI Target 80%).
- 2.27 NHS West Essex CCG-specific commissioned outcome measures:

- 2.28 Outcome 24: 97% of children and young people and their families with urgent care conditions, managed care at home and avoided hospital admission/extended attendance. (KPI target 85%).
- 2.29 Outcome 25: 98% of children and young people reported they were supported in reaching their personal goals after support. (KPI target 95%).
- 2.30 Outcome 26: 97% of parents reported they felt supported in being able to meet the personal goals for their child's health needs after support. (KPI target 95%).
- 2.31 Outcome 27: 100% of child centred care plans that were produced by the multidisciplinary team, jointly with the family, where the family reported a positive experience. (KPI target 98%).
- 2.32 Outcome 28: 95% of transition care plans were completed with the young person (age appropriate) where the family reported a smooth and well-planned transition at the end of discharge. (KPI target 98%). Challenging with COVID-19 and limited face to face contacts has impacted on the ability to achieve the % target.

3. Monitoring the number of clinical contracts during the pandemic

- 3.1 In March 2020, at the beginning of the pandemic, the service began collating and tracking monthly numbers of clinical contacts within each quadrant, which included numbers of face-to-face, telephone and video conference interactions with families. This data was reported using three sub-categories: Universal (all) families, Universal Plus families (those families who required additional support) and Universal Partnership Plus families (those families who are receiving additional support and where other partner agencies are involved such as Social Care).
- 3.2 Data has been used to inform service provision, including the phased service response to COVID-19, and has indicated the growing need for service provision above the Universal offer.
- 3.3 Year-to-date, across Essex there were 264,777 Universal families contacted: 53,862 in Mid Essex, 94,533 in North-East Essex, 63,474 in South Essex and 52,908 in West Essex.
- 3.4 Year-to-date, across Essex there were 26,509 Universal Plus families contacted: 6,296 in Mid Essex, 12,885 in North-East Essex, 3,591 in South Essex and 3,737 in West Essex.
- 3.5 Year-to-date, across Essex there were 24,246 Universal Partnership Plus families contacted: 6,039 in Mid Essex, 7,827 in North-East Essex, 7,005 in South Essex and 3,375 in West Essex.
- 3.6 A review of the trends within in contact data revealed that there was an increase in Universal Plus and Universal Partnership Plus contacts between May 2020 and August 2020. This reflects the concerns ECFWS had for vulnerable families in the first pandemic lockdown and need for increased welfare checks. There is a similar trend observe in the second major lockdown – from December 2020 to present.
- 3.7 The overall level of contacts has increased by 15% across Essex for Universal Plus and Universal Partnership Plus families.

4. Family support interventions (Registration and Reach) during the pandemic

- 4.1 Essex County Council has placed a high expectation on ECFWS to help communities to take ownership and become more active in addressing health and social care issues. This is loosely referred to as community 'asset building' or 'resilience building'. Whilst all staff working in ECFWS are actively promoting community resilience during individual and group contacts it is Community Engagement Workers who are strategically developing a range of community-owned and community-led activities at a district level. It needs to be recognised that the increasing success of such schemes should, over time, conversely result in a reduction in reach activity figures.
- 4.2 ECFWS introduced a web-based programme called Tableau that draws data from the electronic records held on children and families to help identify the numbers of families with a Priority Group/s across Essex. The number of families with specific Priority Groups are illustrated on a map, where at a glance, areas of most need can be identified so that support and interventions can be targeted appropriately.
- 4.3 100% of children under 5 of the under 5 population living in the reach area are all registered due to a single record being used. The target is 80%. (KPI 2.45)
- 4.4 69% (553,326) of children under 5 were reached as a % of the under 5 population living in the reach area. 67% in Mid Essex were reached, 71% in North East Essex were reached, 67% in South Essex were reached and 72% in West Essex were reached. This is an 8% increase compared to the same period in the previous year where 61% of under 5's were reached. (KPI 2.46).
- 4.5 There were a total of 213,216 families across Essex on the caseload with children under 5 registered who belonged to a Priority Group (of vulnerability). This is an increase of 43,274 families (20%) compared to the same period the previous year. (KPI 2.47).
- 4.6 Of the 213,216 families on the caseload with children under 5 registered who belonged to a Priority Group, there are 50,194 families in Mid Essex, 49,978 in North East Essex, 63,247 in South Essex and 49,797 in West Essex. (KPI 2.47).
- 4.7 A total of 155,391 (73%) families across Essex with children under 5 and who belonged to a Priority Group were reached. This is an increase of 40,227 families (4%) compared to the same period the previous year. (KPI 2.48).
- 4.8 Of the 155,391 families on the caseload with children under 5 registered who belonged to a Priority Group and who were reached; 35,851 families were in Mid Essex, 37,483 in North East Essex, 44,231 in South Essex and 37,826 in West Essex. (KPI 2.48).
- 4.9 There were 3,402 children eligible for Free Early Education Entitlement for 2-year olds (FEEE2), 2,265 (67%) had been 'reached', and had a confirmed FEEE2 placement.
- 4.10 Of the 2,265 children who had a confirmed FEEE2 placement, 782 (35%) received a 2.5 - 3 year integrated developmental review. (KPI 2.03b). There were understandable challenges in bringing, parents, staff from early years settings and ECFWS staff together to undertake this integrated review during the pandemic.

- 4.11 Of the 2,265 children who had a confirmed FEEE2 placement, 523 (23%) had not reached an age appropriate level of development at the 2.5 - 3 year developmental review. These children were placed on Outcome 6 school readiness pathway where 94% reached an age appropriate level of development after support. (KPI 2.03c).

5. Infant feeding

- 5.1 Breastfeeding is not only a source of nutrition it has lifelong health benefits for mothers and babies and is rightly a Public Health priority (Early Years High Impact Area 3). Evidence suggests breastfeeding can protect long term health, reduce the risk of diabetes and obesity in children and for mothers reduce the risk of breast and ovarian cancer and reduce the risk of osteoporosis.
- 5.2 ECFWS is committed providing high quality infant feeding support, aligned to the Baby Friendly Initiative across Essex, by protecting, promoting and supporting breastfeeding and close, loving parent-infant relationships.
- 5.3 64% new mothers were breastfeeding at 2 weeks post birth (new birth visit): 68% in Mid Essex, 67% in North-East Essex, 55% in South Essex and 69% in West Essex. (KPI 2.23).
- 5.4 48% of mothers were breastfeeding at 6-8 weeks with 34% exclusively breastfeeding and 14% partially breastfeeding, this is a 4% increase on January 2020 where 44% of mothers were breastfeeding at 6-8 weeks with 30% exclusively breastfeeding and 14% partially breastfeeding. (KPI 2.24 & KPI 2.25).
- 5.5 49% of new mothers were breastfeeding at 6 – 8 weeks with 35% exclusively breastfeeding and 14% partially breastfeeding. 37% were exclusively breastfeeding and 14% partially breastfeeding in Mid Essex (51% total), 37% were exclusively breastfeeding and 15% partially breastfeeding in North-East Essex (52% total), 30% were exclusively breastfeeding and 13% partially breastfeeding in South Essex (43% total) and 36% exclusively breastfeeding and 16% partially breastfeeding in West Essex (52%). (KPI 2.24 & KPI 2.25).
- 5.6 Breastfeeding rates across most of Essex remain consistent and slightly higher than national averages, however South Essex is below the national average and is an area specifically targeted for improvement.
- 5.7 A number of initiatives are in place to maintain and improve breastfeeding rates, including: training Breastfeeding Champions in each quadrant, development and roll out of face to face and virtual 'Preparing for Baby' antenatal workshops and 'Baby Beginnings' postnatal groups, social media campaigns on Facebook and Twitter.

6. Safeguarding and Looked After Children

- 6.1 ECFWS has heavily invested in Safeguarding and Looked After Children (LAC) provision across Essex with dedicated teams of each specialty in each quadrant that is resourced in accordance with The Royal College of Paediatrics and Child Health's Safeguarding and Looked After Children Intercollegiate Documents.

- 6.2 In December 2020, 100% of staff had completed Level 1 Safeguarding Children Awareness training, 98% had completed Level 2 training and 83% had completed Level 3 (This would be 99% by removing those who are exempted such as on maternity leave). Prevent training to Raise Awareness of Prevent (WRAP), which aims to address all forms of terrorism and non-violent extremism in young people is at 100% for Level 1 and 98% for Level 2.
- 6.3 100% of Section 17 and 49 requests were responded to within the targeted time (2 working days and 1 working day respectively), 100% was reported for the same time the previous year. (KPI 2.12).
- 6.4 100% of case conferences requested by Essex County Council's Social Care Team was attended by a staff member from ECFWS, this is a 1% increase compared to the same time the previous year. (KPI 2.13).
- 6.5 98% (162/166) of Looked After Children aged 0-5 years have had a 6-month Review Health Assessment. This is a 1% increase compared to the same time the previous year. (KPI 2.19).
- 6.6 99% (150/152) of Looked After Children have immunisation. (KPI 2.20)