Data to Insight: Early Help Data Partnership Quarterly Review – Q4 23/24



About Data to Insight

- Data to Insight (D2I) is the sector-led service for local authority children's data professionals
- D2I is hosted by East Sussex County Council, led by local authorities, and supported by the ADCS, DfE,
 DLUHC and Ofsted, helping local authorities make better use of data
- D2I supports a **national community** of data professionals in designing, developing and maintaining useful data tools, connecting like-minded people, and helping good practice spread across regional boundaries
- D2I enhances a proven partnership of LAs working together for the sector our depth and breadth of
 expertise and community reach gives data projects the best chance possible of succeeding in producing
 meaningful insight
- Tools and datasets we've helped to develop include:
 - ChAT Children's Analysis Tool
 - BmT Children's Services Benchmarking Tool
 - Demand Modelling Tool for CLA Placements
 - Statutory Returns Validation Tools
 - National RIIA Quarterly Data Collection
 - National Early Help Quarterly Data Collection



How to submit data (if your LA hasn't already)

- Check with your regional performance group whether a regional return is being completed.
- If not, you can submit as an individual LA by:
- Go to our website (https://www.datatoinsight.org/) and sign up as a member
- Download the collection sheet (<u>Early Help Quarterly Collection Sheet | Data to Insight</u>) and follow the submission instructions
- The deadline is usually 6 weeks after quarter close (but get in touch if you have a problem)
- Around two weeks after that we publish the benchmarking tool: <u>Early Help benchmarking tool</u> | <u>Data to</u> Insight
- Only LAs who submit data can get access, and access is stopped if you don't submit for 2 quarters



Early Help Data Partnership Quarterly Review – Q4 23/24:

- Quick overview of collection to date
- Quarterly analysis and discussion (workshop date: 12th June 2024)
- Open discussions or questions (feel free to add to chat as we go along) does not have to be related to this collections, if there is something related to EH data that you are struggling with, this is a great place to ask.
- Upcoming schedule



Collection to date:

Collection progress:

- C.70 LAs submitted in Q4, an increase from 46 for our initial Q1 collection
- Additional LAs generally also submitted backdated data (so c. 70 for each Q included in this release)
- 2 regional group submitting collectively already, and 1 more confirmed from next Q
- We're happy to take either regional returns or individual LAs
- Aiming for 80+ in Q1 over half of all LAs

Obstacles identified last Q:

- Agreement on definitions (mostly getting there now contacts still the more difficult measure) but return is designed to allow flexibility.
- Sign off process takes time –wariness about sharing EH data.
- Reach (regional groups are biggest help with this).
- Lots of data collections already, but limited resources (small number of measures defined products being returned) .
- Future D2I currently have c. 18-month runway of confirmed funding and have committed to this
 return while we exist.

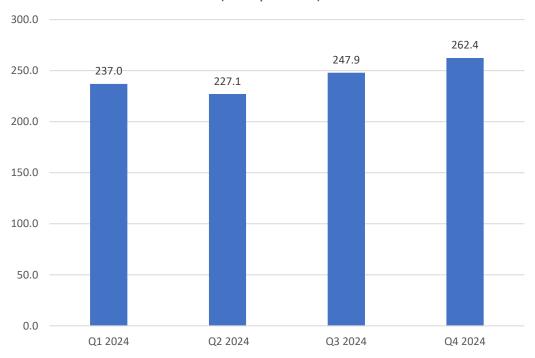
Analysis in this document:

- Note that the subsequent analysis in this document is presented to spark discussions in our quarterly EH workshops which are open to all LAs (whether they have submitted data or not).
- We've either used averages of all submitted LAs, or anonymised data where it refers to individual LAs
 data

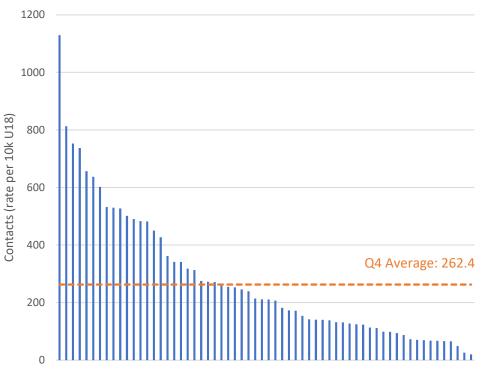


EH 101 - Initial contacts received in period - children:

National - Initial contacts received in period - children (rate per 10k)







Max	1129
Average	262.4
Min	19.8



EH 101 - Initial contacts received in period – children:

- At the last workshop we noted a drop in the rate of contacts received in Q2, which covers the
 period from July-September 2023. We discussed whether we were seeing the impact of school
 holidays, with participants reflecting that:
 - Schools play an active role in EH, so a drop in contacts is not unexpected during this time.
 - o It was also noted that this is a common time for people from all partner agencies to take annual leave, so there are potentially fewer people around to make contacts.
- Looking at this year's RIIA data, it suggests a similar theme in social care (though the difference is less pronounced so possibly similar themes are evident across whole system)

Questions for this quarter:

- Q3 saw an increase, which we thought was related to lower Q2, then Q4 (January to March) increases again what might be driving this? Is it usual seasonal variance, or something else?
- From your local perspective, are EH services under more pressure? If we had last year's data would it be significantly lower?
- What do we think next year's will look like?



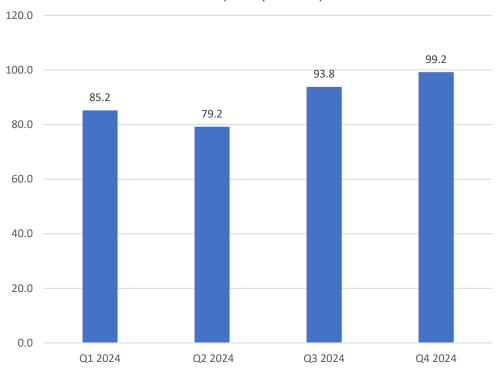
EH 101 - Initial contacts received in period — children (notes on data):

- This measure has the largest spread of data, suggesting quite different ways of recording and reporting between LAs.
- We've spoken about some of the approaches in the workshops and would welcome further thoughts on this.
- When we held the first reflection session, this measure was the most difficult for LAs and we discussed dropping it for year 2. However, there are strong feeling for keeping this measure too LAs have been in touch to say it's useful and to share their workflows.
- Interestingly, when we aggregate the data, we see similar patterns in contacts that are present in other data.
- Plan is to keep for next year though obviously individual LAs are free to not include if they
 don't feel it's useful for them.

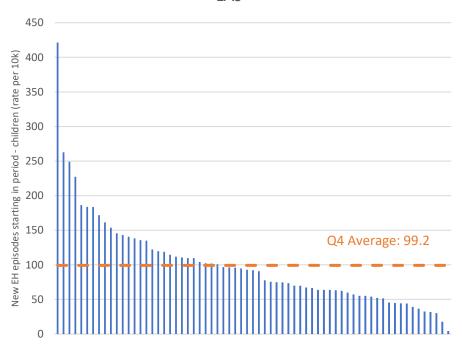


EH 102 – New EH episodes starting in period - children:

National - new EH episodes starting in period - children (rate per 10k)







Max	421.4
Average	99.2
Min	4.3

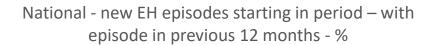


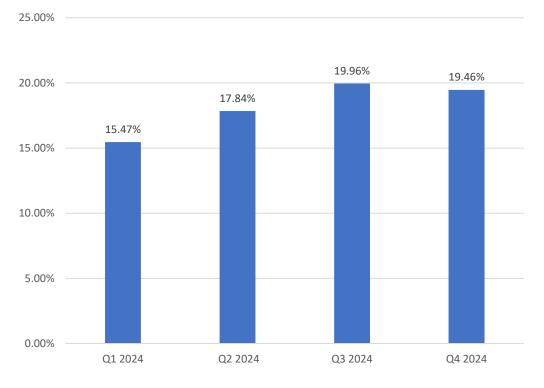
EH 102 – New EH episodes starting in period - children:

- In the last session we noted that, as with contacts, we see a dip in Q2, this time followed by a more pronounced increase in Q3 (contacts increase c.9%, with new EHA increasing c.18%).
- Suggests that children may be more likely to start an episode after summer holiday?
- Possible reasons why this might be:
 - Increased levels of need after summer holidays?
 - Workers catching up on backlog after summer.
 - Quality of contacts?
 - Something else?

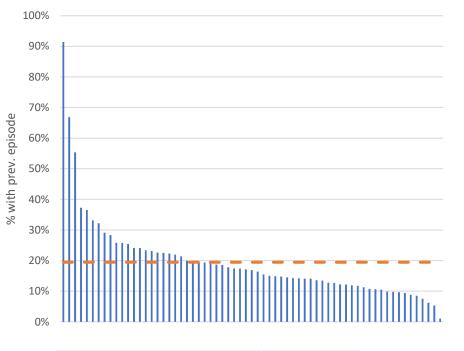


EH 103 – New EH episodes starting within 12 months of a previous episode ceasing % of new episode:





New EH episodes starting in period – with episode in previous 12 months - % (Spread of values submitted by LAs)



Max	91.4%
Average	19.5%
Min	1%



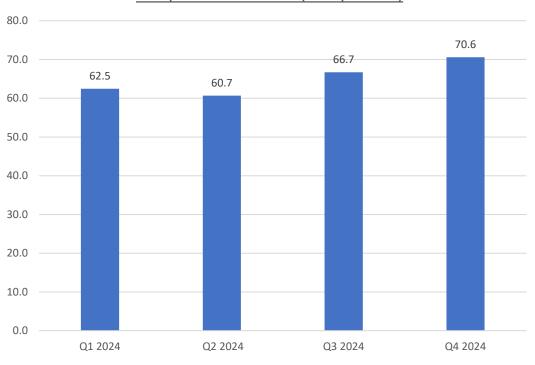
EH 103 – New EH episodes starting within 12 months of a previous episode ceasing % of new episode:

- Increases over three reporting periods, before dropping slightly in Q4
- No dip in Q2, as we saw with other demand measures.
- Possibly children we already know are more likely to have need identified during these times.
- Some LAs noted that care should be taken with this measure as repeat episodes in EH are not necessarily seen as something to be avoided; in statutory social care data they are seen as a 'lower is better' measure. This is not the case for many LA's EH services where families are encouraged to dip in and out of services more frequently as their needs change.
- However, the spread of data indicates that levels of repeat episodes are, on average, approximate to social care re-referrals – at around 20%.

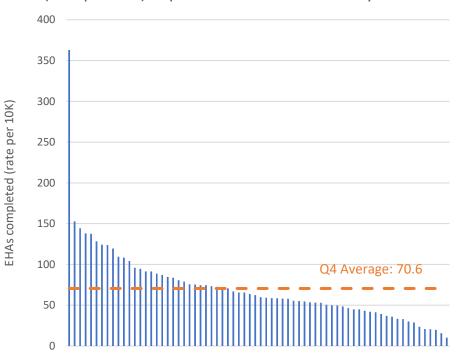


EH 104 – Number of Early Help Assessments completed – children (rate per 10k):

National - <u>Number of Early Help Assessments</u> completed – children (rate per 10k)



New EH episodes starting in period - children (rate per 10k) - Spread of data submitted by LAs



Max	363
Average	70.6
Min	10.2



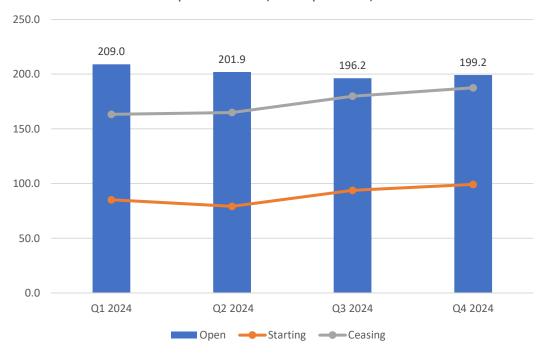
EH 104 – Number of Early Help Assessments completed – children (rate per 10k):

- As expected, follows same pattern as new episodes.
- EHAs completed falls in Q2, before a sharper rise during Q3 which continues into Q4.
- Spread of data seems reasonably closely clustered around the average.
- Perhaps unexpected to see data so close, given there is the option of including just LA-held targeted cases or also including partner held cases
- We've not done a deep dive on x-codes, as there's not lots of data there however, a quick look suggests an even spread between LA only and LA/Partnership.

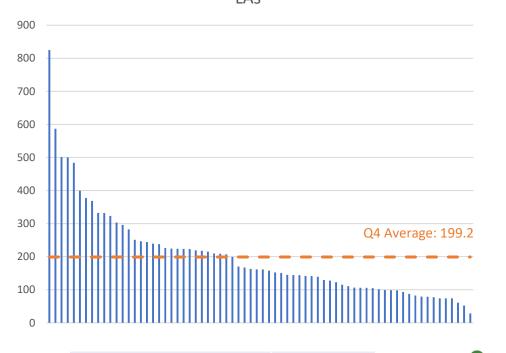


EH 105 – Number of children open to Early Help at period end (rate per 10k) (inc. EH102 – new episodes & EH108 – children ceasing)

National - Children starting, ceasing and open to EH at period end (rates per 10k)



Number of children open to Early Help at period end (rate per 10k) - range of values submitted by LAs



Max	824.9
Average	199.2
Min	28.3



EH 105 – Number of children open to Early Help at period end (rate per 10k)

- Large spread of data here suggesting LAs are including different cohorts.
- The pattern of 'dropping in Q2 before increasing in Q3/4' is not replicated here while we know that demand increased from Q3/4, this seems to be balanced by a corresponding increase in children ceasing EH during those quarters.
- This suggests an overall increase in activity generally, rather than just demand we see lots of new plans, but also lots of plans ceasing – does this tie in with the previous comments on workers returning from summer holidays and addressing outstanding work?

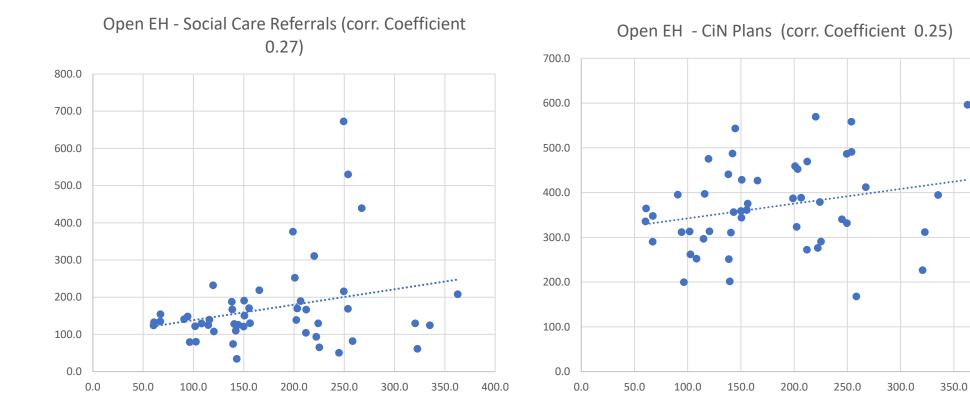


EH 105 – Number of children open to Early Help at period end (rate per 10k) – matching social care data notes.

- Very quick analysis on a single point in time, using new data.
- Intention was to demonstrate what we could look at with this dataset, rather than to draw conclusions.
- Slight relationship (if any) may exist between EH and some Social Care measures (though not Child Protection Plan rates).
- Relationship appears positive i.e. the more EH you have the more referrals/CiN/CLA you might expect.



EH 105 – Number of children open to Early Help at period end (rate per 10k) - matching social care data 1.



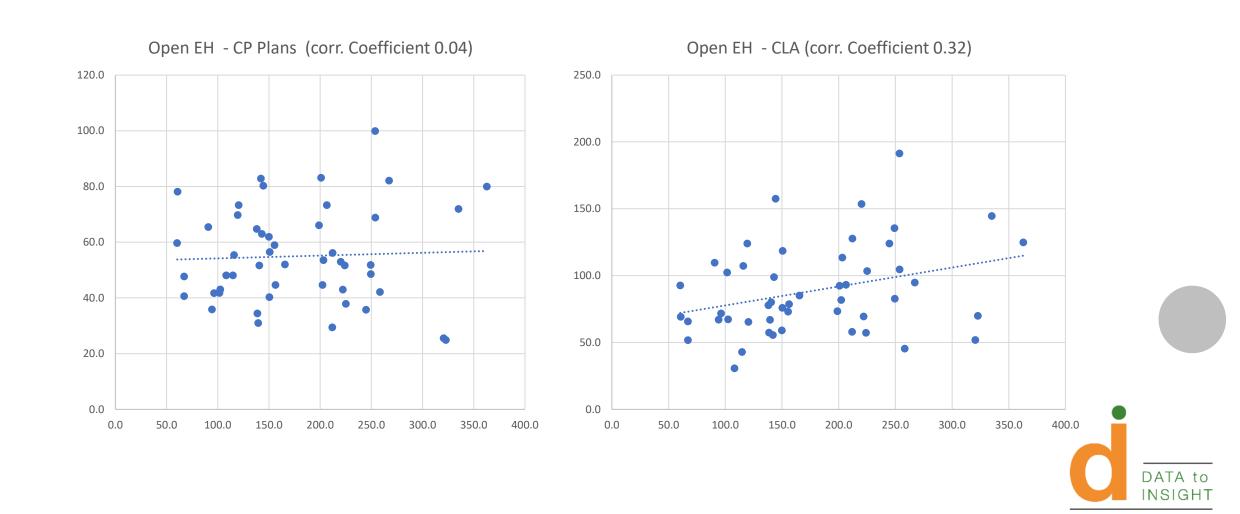


400.0

300.0

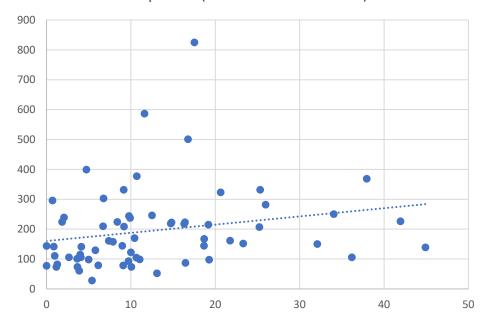
350.0

EH 105 – Number of children open to Early Help at period end (rate per 10k) – matching social care data 2.



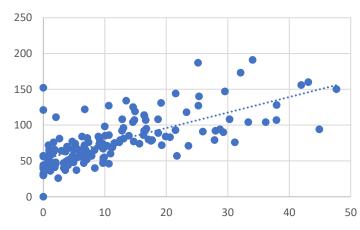
Impact of deprivation

Open EH - IDACI 2019 % of LSOA in 10% most deprived (corr. Coefficient 0.21)



- At Q3 meeting we discussed whether deprivation may impact levels of EH
- Here, we see there's no real relationship between open EH and the % of LSOAs in 10% most deprived
- Possibly these aren't the right measures to use, or there is not enough data – again, these charts are to facilitate discussion.
- Using the same IDACI measure and CLA rate illustrates stronger relationship

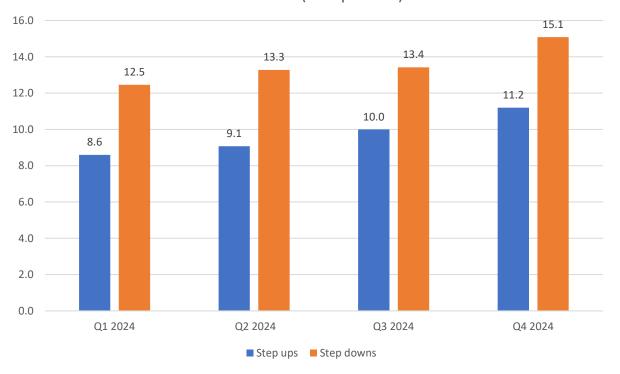
CLA rate – IDACI (corr. Coefficient 0.7)





EH 106/7 – Step ups/downs

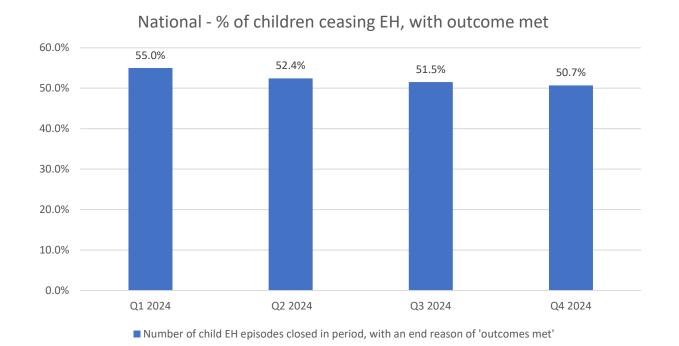
National - Children stepped up to and down from children's social care (rate per 10k)



- More children are stepping down from CSC to EH than the other way around
- Step downs increased over the reporting period
- When we last reported stepups Q2 was higher than Q3, but we've had additional backdated submissions, and they now follow the same pattern as step downs.
- Both measures saw a further increase in Q4.



EH 109 – children ceasing with outcomes met



- Decreases over reporting period
- There has been discussion in workshops about what this measure means – outcomes fully met or also including partially met.
- Suggest for Q1 24/25 we possibly add an X-code about what is being included.



Upcoming:

- Next collection deadline (Q1 24/25) <u>16th August 2024</u>
- Next session <u>11th September 12:30 14:00</u>
- Email: john.foster@eastsussex.gov.uk for an invitation

