



Partnership Integrated Triage (PiTstop) Trial Evaluation Report – The Children’s Hub

Background/Context

The Children’s Hub (CHUB) is the front door for children’s Social Care services in Hartlepool and Stockton on Tees. The CHUB is responsible for responding to all referrals in relation to children living in the Hartlepool and Stockton on Tees area, who are not already active to Social Care, and ensuring that children receive the right support at the right time. The CHUB is a multi-agency partnership; multi-agency professionals are physically co-located and they work together to achieve the best possible outcomes for children.

The demand on the front door and the volume of work responded to by the CHUB has increased by 73% since 2018.

In March 2024, PiTstop (a Police led initiative) was introduced in relation to children/young people living in the Stockton on Tees area. One of the aims of PiTstop was to reduce the demand on the CHUB by diverting Police referrals (PPN’s), which are screened/assessed by Police as not meeting a safeguarding/Social Care (Level 4) threshold, from the CHUB to PiTstop.

Although PiTstop is led and coordinated by Cleveland Police, Social Care staff in the CHUB have been an integral part of this process. CHUB Officer’s respond to initial requests from Police in relation to whether children subject to PPN’s are active to Social Care or not. CHUB Social Worker’s interrogate Social Care systems in preparation for the PiTstop meetings which they then subsequently attend. During PiTstop meetings, CHUB Social Worker’s provide advice in relation to threshold i.e whether a PPN needs to be escalated to the CHUB for screening and decision making.

Data

I was asked to collate and analyse data, in relation to PPN’s relating to Stockton children, during the periods of March – August 2024 (the PiTstop pilot) and March – August 2023 (the

comparative time period prior to the PiTstop pilot) to establish whether or not PiTstop had been effective in terms of reducing the number of PPN's sent to the CHUB.

I have collated and analysed the same data for the same time period in relation to PPN's relating to Hartlepool children in order to provide further comparisons.

i. Overall Contacts Received by the CHUB

	MARCH 23 – AUGUST 23	MARCH 24 – AUGUST 24	COMMENTS
Number of SBC Contacts Received by the CHUB (from all agencies)	6981	6585	Number of contacts decreased by 5.67%
Number of HBC Contacts Received by the CHUB (from all agencies)	3811	4321	Number of contacts increased by 13.38%
Number of SBC PPN's Received by the CHUB	2478	1836	Number of PPN's decreased by 25.90%
Number of HBC PPN's Received by the CHUB	1378	1681	Number of PPN's increased by 21.98%
% of SBC PPN's Received	35.5%	27.9%	% of PPN's decreased by 7.6%
% of HBC PPN's Received	36.16%	38.90%	% of PPN's increased by 2.74%

When comparing the data for March – August 2024 to the data for March – August 2023;

- The overall number of contacts received by the CHUB increased by nearly 14% for Hartlepool children but decreased by 5.67% for Stockton children.

- The number of PPN's received by the CHUB for Stockton children decreased by 25.90% and the number of PPN's received by the CHUB for Hartlepool children increased by 21.98%.
- The percentage of PPN's received (calculated against the number of CHUB contacts received by the CHUB overall) decreased for Stockton by 7.6% but increased for Hartlepool by 2.74%.

ii. **The number of PPN's received by the CHUB**

	Number of PPN's received by the CHUB (SBC)		Number of PPN's received by the CHUB (HBC)
March 2023	453		183
March 2024	327		257
% increase/decrease	- 27.81%		+ 40.43%
April 2023	391		166
April 2024	367		346
% increase/decrease	- 6.13%		+ 108%
May 2023	437		254
May 2024	296		291
% increase/decrease	- 32.26%		+ 14.5%
June 2023	356		241
June 2024	206		235
% increase/decrease	- 42.13%		- 2.48%
July 2023	410		301
July 2024	338		275
% increase/decrease	- 17.56%		- 8.63%
August 2023	431		233
August 2024	302		277
% increase/decrease	- 29.93%		+18.88%

When comparing the data from March – August 2024 to the data from March – August 2023;

- For Stockton children, there has been a consistent decrease in the number and the percentage of PPN's received by the CHUB during March – August 2024. Not only has

it been consistent; it has also been significant. For example; in March, May, June and August 2024, there was around a 30-40% reduction in the number of PPN's being received by the CHUB compared with the same months in 2023.

- For Hartlepool, four out of the six months saw an increase in the number and the percentage of PPN's received by the CHUB during March – August 2024; two months in particular (March and April 2024) saw a significant increase when compared with the same months in 2023.
- In June 2024, the CHUB received more PPN's for Hartlepool children than for Stockton children **which has never been the case before.**

iii. CHUB Outcomes in relation to PPN's

	MARCH – AUGUST 23	MARCH – AUGUST 24
HBC PPN's resulting in SC referral	300 (21.7%)	267 (15.8%)
SBC PPN's resulting in SC referral	578 (23.3%)	417 (22.7%)
HBC PPN's resulting in EH referral	84 (6.09%)	72 (4.28%)
SBC PPN's resulting in EH referral	368 (14.8%)	155 (8.5%)
HBC PPN's resulting in NFA, A&G or RTOA	993 (72%)	1341 (79.7%)
SBC PPN's resulting in NFA, A&G or RTOA	1532 (61.8%)	1264 (68.8%)

- The vast majority of PPN's received by the CHUB (60-80%), across both LA's, still result in NFA (No Further Action), A&G (Advice & Guidance given by the CHUB) or a

RTOA (Referral to Other Agency); this has remained the same for Stockton despite the introduction of PiTstop.

- Across both LA's, only 15-25% of PPN's result in a referral to Social Care.
- Across both LA's, only 5-15% of PPN's result in a referral to Early Help.
- In response to PPN's, the CHUB refers around twice as many cases to Stockton Early Help than it does to Hartlepool Early Help. However, this has been the case for several years and therefore, is irrespective of PiTstop and is more likely due to the difference in Early Help offers, criteria and resources in each LA area.

Feedback from CHUB Staff

On the ground, and at a practice level, it is recognised that, over the last six months, there have been increasingly less low-level/'inappropriate' PPN's referred to the CHUB for Stockton compared with Hartlepool.

However, there continues to be PPN's received by the CHUB for Stockton which do not meet the criteria/threshold for Level 4 and would be more appropriate for PiTstop. Similarly, there have been occasions when PPN's presented at/discussed in PiTstop have been considered as clearly meeting threshold for Level 4 and should have been referred to the CHUB. These have been challenged on a case-by-case basis which the Police have actively welcomed and responded to.

Initially, when PiTstop meetings were being held daily, this had a significant impact on the CHUB; both in relation to CHUB Officer and CHUB Social Worker time/resource and in relation to the day-to-day standard operating procedure. There were many occasions when a CHUB SW was unable to attend the PiTstop meeting due to the volume of work in the CHUB and the need for safeguarding/potential safeguarding contacts/referrals to take precedence over PiTstop. However, on such occasions, the CHUB still provided information to the PiTstop Chair in relation to previous SC involvement, previous CHUB contacts etc.

Conclusion

The overall demand on the CHUB, in terms of the volume of contacts/referrals received, across both LA's and from all sources, remains high and on an upward trajectory; despite the implementation of PiTstop. This is evidenced by the CHUB PMF which is collated and presented to the CHUB Board on a quarterly basis.

However, during Q1 2024-2025 (the 2nd, 3rd and 4th month of PiTstop), the number of HBC contacts received by the CHUB was the highest it has ever been since the CHUB was incepted in 2016 whilst the number of SBC contacts reduced. Also, the data for March – August 2023 and March – August 2024 tells us that the number and percentage of PPN's (when compared to the number of overall contacts received by the CHUB) decreased consistently and significantly for Stockton whilst the number and percentage of PPN's (when

compared to the number of overall contacts received by the CHUB) increased fairly consistently and, in some months significantly, for Hartlepool.

Therefore, it could be argued that this was/is as a direct result of PiTstop; especially given that Police are the single highest referrer to the CHUB and given that PiTstop was trialed in Stockton and not Hartlepool.

On a day-to-day practice level, the CHUB Managers have seen, and what has felt like, a reduction in the number of PPN's for Stockton which are/what would have previously been considered to not meet threshold for Level 4 and/or considered to be 'inappropriate'.

Understandably, there has been, and there continues to be, occasions when threshold applied by the Police is disputed i.e when a PPN is referred to the CHUB as opposed to PiTstop and vice versa. However, on such occasions, the Police have been open to and accepting of professional challenge from the CHUB Managers which they have been receptive to and have swiftly acted upon.

As the PiTstop trial has evolved, there has been a reduction in the frequency of PiTstop meetings; from daily to 2 or 3 times per week. The reduction in the frequency of meetings has made the CHUB's servicing of PiTstop much more manageable; it has been much less time/resource-intensive and has allowed for minimal disruption to the CHUB standard operating procedures.

On a different, but similar, note, it is clear that, despite PiTstop, the CHUB continue to receive a high number of PPN's which are not resulting in a SC or EH referral. As much as 60-80% of PPN's, across both LA's, are resulting in NFA, A&G or RTOA.

Recommendations

1. PiTstop to continue in relation to Stockton PPN's and, if possible, to be rolled out in relation to Hartlepool PPN's.
2. PiTstop Meetings to be held twice per week; preferably on Tuesday and Friday.
3. Professional challenge, in relation to threshold applied by Police, to continue.
4. Police thresholds, as a whole, to be reviewed given the high number of PPN's which are not resulting in a SC or EH referral.
5. Further review/evaluation to be completed in 12 months time which needs to include the effectiveness of early intervention as a result of PiTstop. We need to be assured that PiTstop is having a lasting and longer-term impact in terms of reducing the demand at the front door and achieving the best outcomes for children and their families.

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