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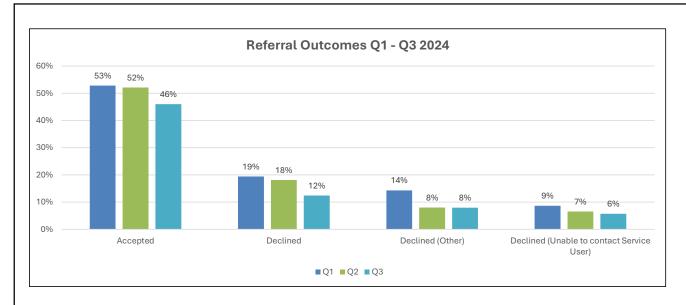


Referral Data – Q1, Q2 & Q3

Referral Data Q1- Q3 2024	Q1	Q2	Q3
No of Issued referred	530	474	627
Referrals Closed	505	402	445
Organisation Accepting referral over the Q1 2024	23	26	24
Registered organisation using referral	34	45	45

- •This data shows fluctuating trends across quarters, with the number of issues referred increasing by Q3, and the number of organizations using referrals stabilizing from Q2 onwards. This may indicate an increase in demand and participation in the referral system over time.
- •The overall trend suggests that the system is growing, both in terms of issues being referred and organizational involvement.
- •The **Q2 dip** in closed referrals could highlight potential bottlenecks in the system, which might need further investigation to ensure efficient case handling.
- •The **increase in Q3 referrals** and closed cases could be a positive sign of **improved process efficiency**, reflecting a well-functioning system that can handle more cases as participation increases.

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•Accepted Referrals:

Acceptance rates dropped from 53% in Q1 to 46% in Q3, indicating possible capacity or complexity issues over time.

•Declined Referrals:

User-declined referrals decreased from 19% in Q1 to 12% in Q3, which may suggest better communication with service users.

•Declined (Other):

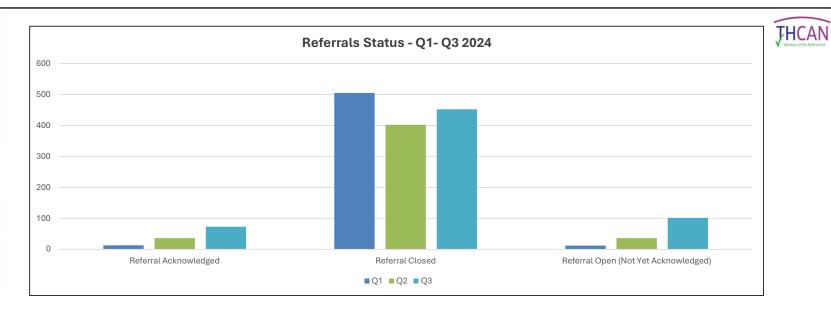
These stayed lower, dropping from 14% in Q1 to 8% in Q2 and Q3, possibly due to improved referral processes.

•Unable to Contact:

This category saw a steady decline, from 9% in Q1 to 6% in Q3, suggesting improved outreach efforts.

Overall, the data reflects both positive trends in communication and challenges in meeting referral acceptance criteria.

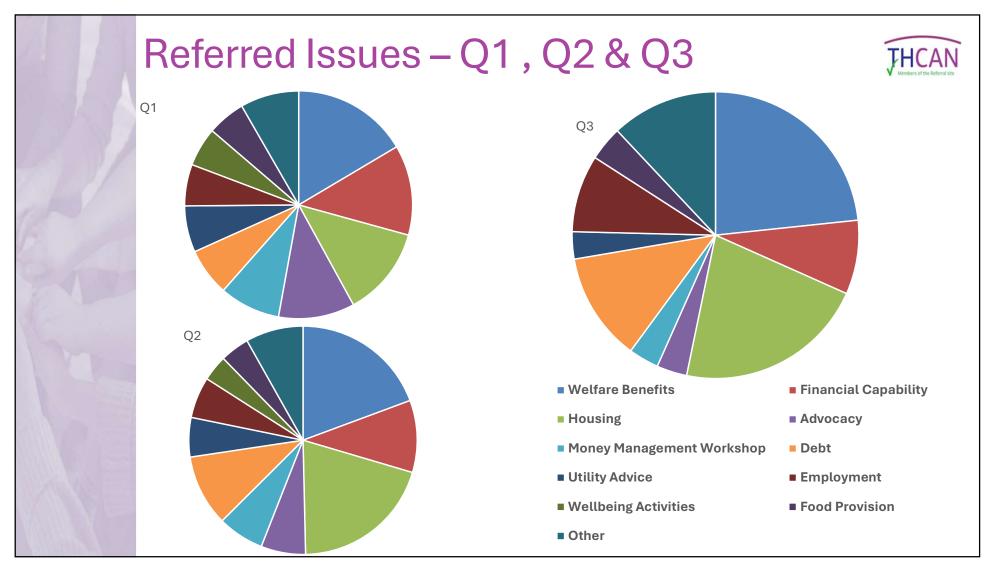
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The **Referrals Status Q1 - Q3 2024** chart shows:

- **1.Referral Acknowledged**: Low across all quarters, with a slight increase in Q3, indicating some improvement in response acknowledgment.
- **2.Referral Closed**: Highest in **Q1 (over 500)** but decreases through **Q2 and Q3**, reflecting either a slowdown in processing or fewer referrals handled efficiently.
- **3.Referral Open (Not Yet Acknowledged):** Gradually increasing by Q3, suggesting a growing backlog or delays in referral acknowledgment as the year progresses.

This suggests operational delays with fewer referrals being closed and more **open** cases awaiting acknowledgment in later quarters.



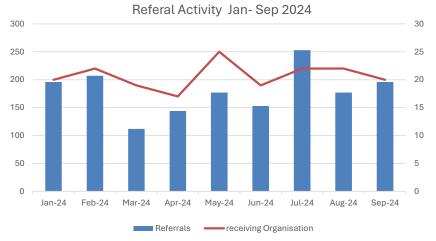
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		JHCAN Members of the Referral size
Some Reasons fo	r declined referrals	*
Organisation doesn't deal with issue referred	Please remember to refer 1 issue at 1 time to 1 organisation	
Client already receiving help elsewhere	Please remember to refer 1 issue at 1 time to 1 organisation	
Organisation doesn't have capacity	Please remember to turn off referral acceptance or remove issue (under managing organisation) if no or limited capacity in the organisation	
Inappropriate referrals send to a specialist agency	Please check whether the referral is appropriate for the organisation by checking agency details available via THCAN directory	
Inappropriate referral in light of client issues	Please try to provide as much details as to why a referral is required to ensure receiving organisation can fully assess client's need and avoid client having to repeat story again	
Unable to Contact Service provider	Please try to update your contact information as and when there is a change, or please contact the Admin regarding the same, so that timely amendments can be made	





Referral Activity Jan-Sep 2024



- In the year 2024:
- An average of **179 referrals** were made each month.
- An average of 653 referrals were made per Quarter
- An average of **21 organisations** were open for referrals each month.
- The month of July recorded the highest number of referrals, with 22 organisations participating
- In summary, the chart illustrates a general rise in referral activity after a dip in March,
 while the number of receiving organizations remains relatively stable with slight variations.

1. Referrals (blue bars):

- 1. The number of referrals fluctuates across the months.
- 2. January and February show high referral activity, around 200.
- March experiences a noticeable drop, with referrals around
 100.
- 4. After March, referral activity gradually rises, peaking in July, reaching about **250**.
- 5. There is a slight decline in **August** and **September**, settling between **150** and **200** referrals.

2. Receiving Organizations (red line):

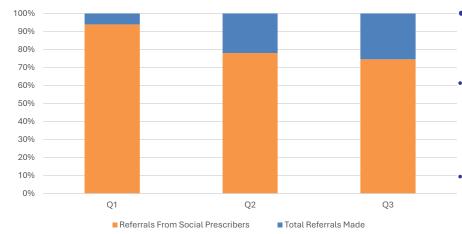
- The number of receiving organizations remains relatively stable between 15 and 25 across the months.
- The highest number of organizations is in February and May, peaking around 25.
- The lowest is in March, corresponding with the drop in referrals.

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Social Prescribers Data:



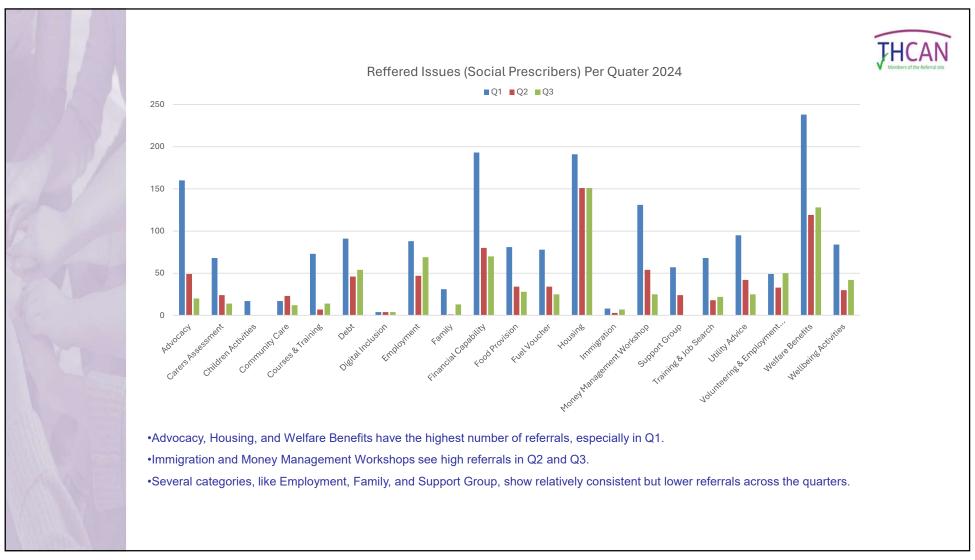


In the year 2024 (for Q1, Q2 and Q3):

An average of **444 referrals** were made by Social Prescribers for each quarter.

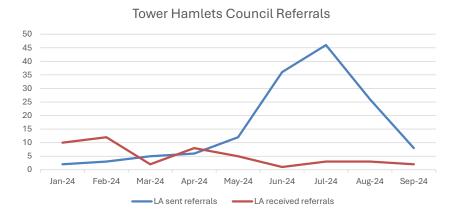
In **Quarter 1** alone, Social Prescribers made about **94%** of the total referrals.

An average of **82% of** referrals in the 3 Quarters were made by Social Prescribers.



Local Authority Data:

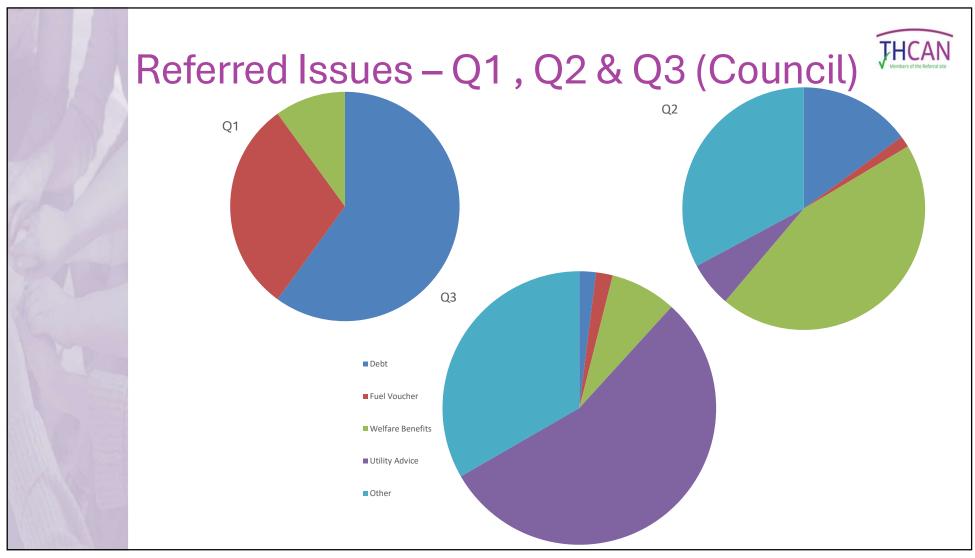




Notes:

- Tower Hamlets Resident's Hub was activated in May2024
- There is a surge of referrals sent by Tower Hamlets Council in the month of July2024
- There is a sharp decline in the number of referrals received by Tower Hamlets Council between April2024 and June2024.





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Organisation Part of the THCAN Network

WorkPath

Working Well Trust Upskill Project

Family Action

APASEN

Clean Slate

First Love Foundation

Bromley by Bow Centre

Rooted Finance (formerly Fair Money Advice)

Ocean Regeneration

East End CAB

DeafPlus Health & Wellbeing

Aishah Help

Stifford Centre

REFEO

Tower Hamlets Resident's Hub

Bow Food Bank

Gateway Housing Association

Praxis

Look Ahead ILCS

Island House SKILLS

Carers Centre Tower Hamlets

REAL Advocacy

TH Connect - REAL

East End Energy Fit





If you need a refresher demo, want to know more about registering or wish to discuss the THCAN referral system and its network, please email:



Supporting uptake of benefits and support such as Local Welfare Assistance (in England) and Discretionary Assistance Fund (in Wales).

Improving data about community needs to support evidence-based planning.

Improving transparency and accountability between organisations.

Supporting advice professionals to work efficiently, saving time.

Increasing awareness of the breadth of services available amongst referring organisations.

Empowers smaller organisations to manage their capacity by controlling the flow of referrals.

Improving the process of tracking progress of clients / customers over time and between organisations.

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