



## Achieving the Foundation Stage Target for the Local Area Agreement

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Client: KEYS / Children's Services

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Date: 1<sup>st</sup> February 2007 v2

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## **1. Introduction**

As part of its local area agreement with government, Kirklees has set itself a target of reducing the educational attainment gap between the most deprived areas of the district as measured by the IMD at super output geographical level and the rest of the district.

The purpose of this paper is to outline some of the activity that has purported to support the achievement of this target through working with families with preschool children, namely Sure Start Local Programmes and nursery education.

We have focussed on pre school children, as what happens in the five years before the child enters school is likely to have a greater bearing on their performance than what happens in their first year of school. We begin the paper however with a discussion of why the target is important and make reference to some of the evidence that has been used at a national level to develop early year's policies.

We then go on to discuss what we are doing in general terms to address the gap in Kirklees through reach analysis of Sure Start local programmes and take up of nursery places for 3 and 4 year olds. We then make reference to parent's views of the advice and information available to them.

Finally there is an analysis of the Foundation Stage Profile (FSP) scores for one cohort of children who have been connected to Sure Start local programme activity. Finally conclusions are drawn.

## **2. The FSP target**

The target has been specified as:

To narrow the differential in achievements at the end of reception in the 30% most disadvantaged Super Output Areas and the rest of Kirklees, measured by percentage of pupils achieving a score of 6 in both Communication Language and Literacy (CLL) and Personal Social and Emotional Development (PSED).

### **2.1 Indicator by which performance will be measured**

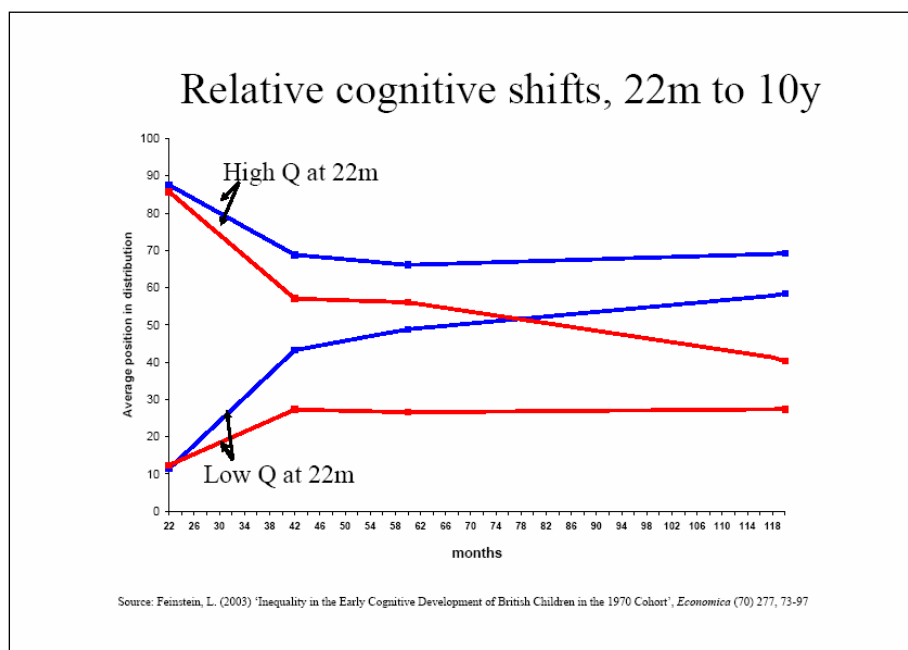
1. Percentage of children living in the 30% most deprived SOAs in Kirklees achieving point 6 (good) levels of development in both PSED and CLL at the end of the Foundation Stage in Summer 2007.
2. Percentage of children living in the 30% most deprived SOAs in Kirklees achieving point 6 (good) levels of development in both PSED and CLL at the end of the Foundation Stage in Summer 2008.

### **2.2 Why is the target so important?**

This target is important as we know from analysis of attainment data at a national level that those children who attain at the lower levels in their early years of schooling, continue to achieve less than their peers throughout their academic career. We also know that attainment is associated with a child's social background, those coming from higher socio economic groups achieving higher over their school lives than their peers who may have started off at the same level in the early years.

A synopsis of the findings of analysis of the 1970 British Cohort Survey (BCS70) provides the evidence base for this. This study sought to find out if family background may influence children's development from before they start school. The study used data from the 1970 British Cohort Survey to investigate the difference in educational achievement between children from different social backgrounds and how it was related to their early development. Children were assessed at 22 months, 42 months, 5 years and 10 years.

The study found that pre-school development tests provided a strong indication of a child's later educational success, the score at 22 months predicts educational attainment at age 26 and that attainment was related to family background. Children with educated and wealthy parents who scored poorly in the early tests tended to catch up, whereas children with worse-off parents who scored poorly, were extremely unlikely to catch up, and were an at-risk group. The study found no evidence that entry into schooling reversed this pattern. The graph below shows the extent to which children's development varies by social background before they even get to school based on the BCS70 data.



The red line indicates lower socio economic groups and the blue line higher groups. For this sample, the study found the education of mothers was the best indicator of expected development and so this may be the most useful variable in determining at-risk groups of children. The study also found that the early differences in attainment between children of low and high-SES were not appreciably reduced by entry into the schooling system – children’s attainment was already structured by social class at 22 months and this pattern became more extreme by age ten.

The study concluded that schools face an enormous challenge if they are to reduce the effects of economic inequality, but suggested, on the basis of other cited research, that government intervention programmes which target resources directly on children may well be the most successful strategies<sup>1</sup>

With reference to the Local Area Agreement target then, the study provides a means of understanding the extent to which we are aiming to maintain the position of children from poorer backgrounds who have high Q scores, whilst also ensuring children with low Q scores are given the same opportunity to catch up as their peers from well off backgrounds.<sup>2</sup>

<sup>1</sup> Inequality in the Early Cognitive Development of British Children in the 1970 Cohort , Feinstein L. [Economica](#), Volume 70, Number 1, February 2003, pp. 73-97(25)

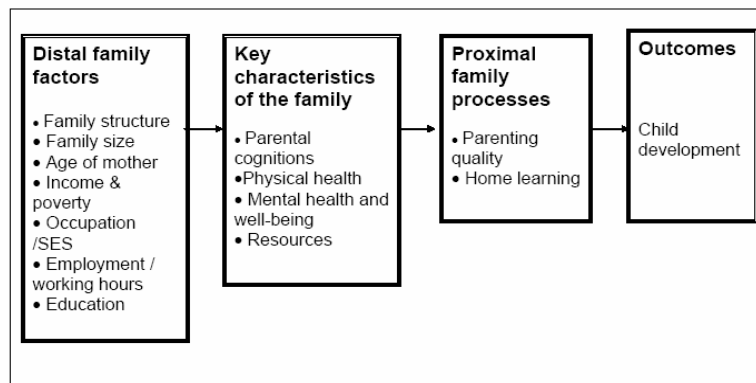
<sup>2</sup> Q scores are based on an index of measures that are suitable to children’s development at different ages.

### 2.3 What are the factors that may contribute to attainment for pre school children?

Feinstein has put forward the following model based on analysis of the national birth cohort studies and also the ALSPAC study, to identify the children who underachieve at Key Stage 2 relative to their Key stage 1 performance.<sup>3 4 5</sup>

According to Feinstein work around 25% of scores for English, Maths and Science can be predicted on the basis of distal factors alone, that is factors relating to the family's situation, such as poverty, education, employment and the age of mothers (particularly teenage mothers) whilst proximal factors predict around 20%. Feinstein suggests this supports the need for targeting those most at risk. That is those families who score poorly on distal family factors and proximal family processes. This is illustrated in the diagram below.

Factors impacting on child development outcomes<sup>6</sup>



<sup>3</sup> Making Children and Young People a number one priority, Evidence of Child Development in the UK, Feinstein, L. Centre for the Wider Benefits of Learning, Institute of Education

<sup>4</sup> Up to 7 Family Background and Child Development up to age 7 in the Avon Longitudinal Survey of Parents and Children, University of Bristol, CMPO, DFES Research Report 808b, 2006

<sup>5</sup> Feinstein, L 19<sup>th</sup> July 2006 Developmental continuity and discontinuity in the 3Rs: evidence from ALSPAC Centre for Wider Benefits for Learning, Institute of Education

<sup>6</sup> Feinstein, L. Evidence on Child Development in the UK Centre for Research on the Wider Benefits of Learning, Institute of Education.

### **3. What are we doing in Kirklees to address the target?**

#### **3.1 Children's Centres**

Sure Start Local Programmes have now evolved into Children's Centres and have a less stringent geographic focus. They have a remit to improve outcomes for preschool children. If they are to be effective in doing this around educational attainment their resources need to be allocated so that they:

1. Reach the required target groups as suggested by the evidence
2. Implement practices that are underpinned by evidence that demonstrates effectiveness.

In order to assess the extent to which we are doing this, we have looked at a number of the programmes that have been put in place to address this. One is the original Sure Start Local Programmes, who we may expect to have started having an impact and the second is the take up of nursery places for 3 and 4 year olds. We have looked at the latter because of the strength of evidence supporting early education and later development. In addition the ALSPAC study shows that the reliance on friends and relatives for early child care up to 24 months has persistently adverse effects on attainment that are still seen at age 7.<sup>7</sup> This has implications for the development of policies around the early childcare offering

#### **3.2 Identifying and reaching target groups – Sure Start Local Programmes**

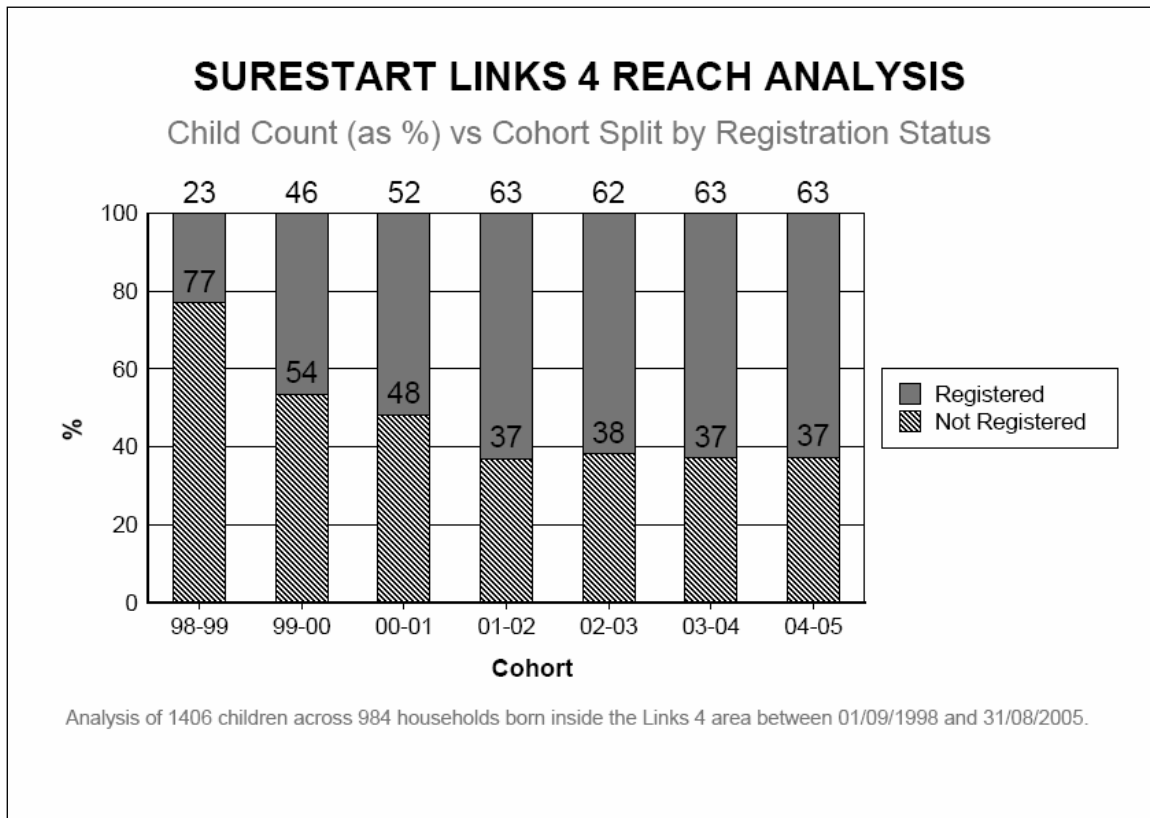
The national evaluation of Sure Start has found that it is often the more advantaged of the disadvantaged who participate in Sure Start programmes and that there have been particular difficulties for non health led programmes reaching families, as they simply don't have access to the data that tells them where children are.<sup>8</sup> Sure Start programmes also had a remit to reach children in a locality rather than children and families who displayed particular characteristics that predict a likelihood of poor outcomes.

We know from the analysis that we have done of people registered with Sure Start programmes in Kirklees that significant numbers of children did not register with programmes and even less had sustained levels of participation in activity that could lead to beneficial effects. We have presented a detailed analysis here for the Links 4 Sure Start as this is the programme for which we have most recent data. The graph below shows the reach analysis we have undertaken for the original Links 4 of Sure Start area.

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<sup>7 7</sup> Up to 7 Family Background and Child Development up to age 7 in the Avon Longitudinal Survey of Parents and Children, University of Bristol, CMPO, DFES Research Report 808b, 2006

<sup>8</sup> Sure Start, National Evaluation Report, Early Impacts of Sure Start Local Programmes on Children and Families, Report of the Cross Sectional Study of 9 and 36 month old Children and their Families, Nov 2005



The Links 4 Sure Start local programme was initiated in 2002/3. The analysis has matched those children registered with the Sure Start programme with the Child Health records, child for child. The analysis has been done on a cohort by cohort basis, with children grouped according to academic groupings (1<sup>st</sup> September to 31<sup>st</sup> August). Caution is needed in interpreting the analysis as issues related to data quality mean that children may not have been matched because their details have been recorded differently in child health to the Sure Start registration database.

However the analysis gives us some indication of how reach has progressed. As we can see in the initial days of the Sure Start programme less than a quarter of children in a cohort were registered with the programme, this has risen to almost two thirds with the more recently born cohorts. However there is still at least a persistent third of children who are not engaged with Sure Start activity. We also need to bear in mind that not all children who are registered engage with Sure Start activities in a sustained way. Registration alone is not sufficient.

We have looked more closely at who these children are through the use of two techniques. One is mapping software so we can see where the participants and non participants live. The second uses geodemographic profiling based on children's postcodes to give an indication of the type of people who may live within a postcode. The profiling data we have used is MOSAIC.

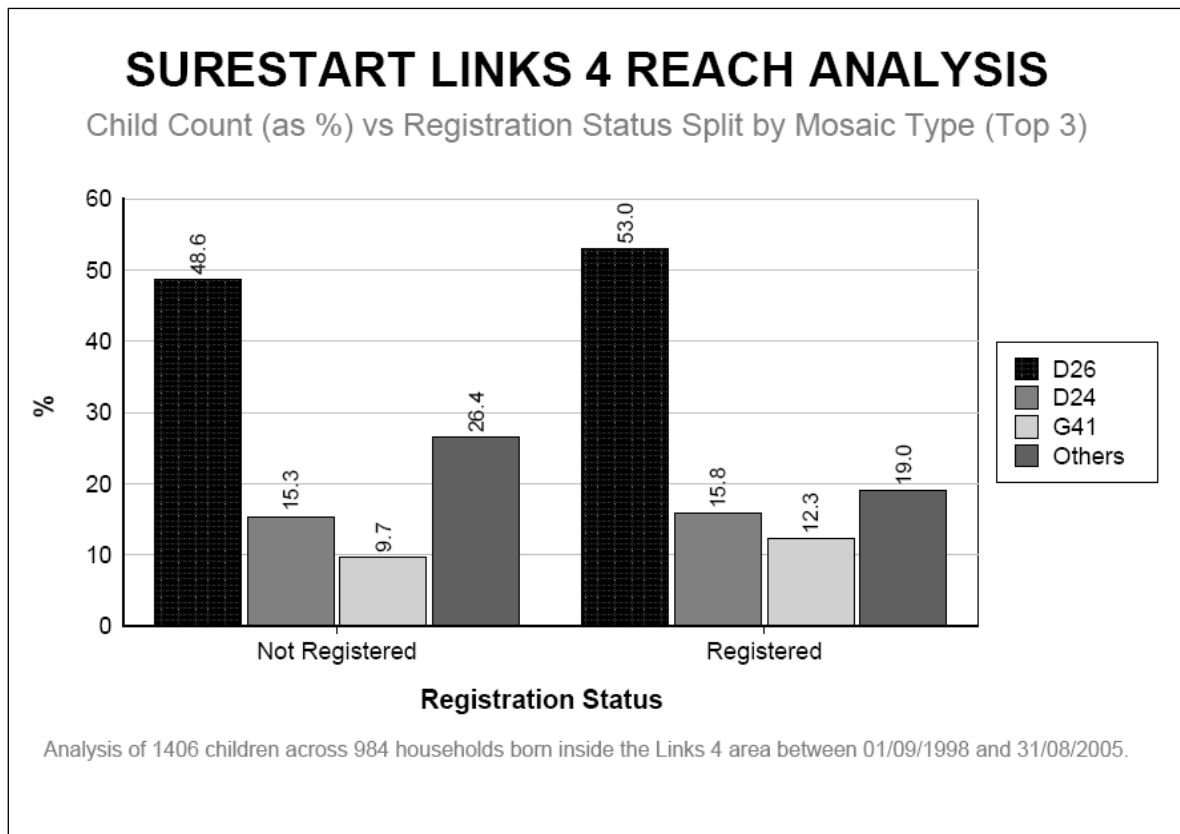
MOSAIC allocates each post code in the country to a one of 11 groups. Each of these groups can be further broken down into subgroups of types. There are 61 types that a postcode can be allocated to. The allocations are based on modeled data that is households are predicted to have certain characteristics and display certain behaviours based on information that is already known about them from sources such as the Census, large government surveys, court judgment records and

commercially available data. This combining of a range of data sets provides an insight into the possible values, attitudes and lifestyles of people living within a collection of postcodes that fall within a particular type.<sup>9</sup>

The map below shows the original Links 4 area. Each of the postcode areas (polygons) is coloured according to the category the postcode falls into. This allows us to see the backgrounds were potentially children not taking up the service may live. The profiling data has potential use in improving how services provided through Children’s Centres may be marketed to improve their appeal to the different target groups living within the area.

Please contact SER for access to the map 01484 416704.

Looking at this graphically, below, we can see that most of the children in the area live in Mosaic Types D26, D24 and G41. This reflects the make-up of this area.



<sup>9</sup> (i.e. we cannot assume that because an individual lives within a particular postcode they will necessarily display these characteristics, only that there is a propensity that a number of people from the postcode may be more likely to fit this particular profile than any other.

There is a degree of variation between these Mosaic types which needs to be taken into account in how services are marketed to each. We have tried to pick out some of the key characteristics of these areas and have provided brief descriptions that are relevant to public service development, based on those provided by Experian in the appendix. The Experian data itself provides an extensive amount of detail on key aspects of the lives of people in these areas including:

Demographics, health and lifestyles, hospital episodes, education, working lives, financial situation, property characteristics, car ownership, recreation, grocery spending habits, how they learn about new products, views on their neighbourhood and the 'world' and how they use their time, on weekdays and weekends.

A brief summary of these types is given over leaf and we would refer the reader to the appendix for fuller descriptions.

#### **D26 Larger families, many of South Asian origin, in high density terraces.**

These areas are characterized by larger families, some overcrowding, modest incomes, low levels of qualifications, there is a strong sense of community, fear of racism is higher than in other areas and religion is important. Teenage pregnancies are above average in these areas.

#### **D24 Young families with limited incomes living in cheap terraced housing**

These areas are characterized by young families, with higher than average proportions cohabiting. Homes can be in poor condition and are often rented older terraces. Unemployment is high and there are higher levels of people living on income support. These areas are characterized by health and social problems. Teenage pregnancies are above average in these areas.

#### **G41 Disadvantaged families with children on very low incomes, typically living in low rise council houses.**

These areas are characterized by young families, with a higher than average proportion of lone parents. Homes are in low rise public sector housing. Education levels are low and there are high levels of extreme deprivation. There are high levels of unemployment and people in receipt of income support. These are also areas where teenage pregnancy is a particular issue.

The variation between these areas would mean that if we wished to improve take up of Children's Centre services then marketing strategies would need to vary to engage each of these communities.

### **3.3 Identifying and Reaching Target Groups - Nursery Reach Analysis**

Three and four year old children are entitled to free early education for at least 12.5 hours per week (currently), through the nursery voucher scheme. We have undertaken a reach analysis to assess the extent to which children are taking up this entitlement. However our analysis has been limited to South Kirklees as we have been unable to access the child health data for North Kirklees. We have matched

the children in the nursery voucher database against the child population for the Huddersfield area only, held by Kirklees PCT.

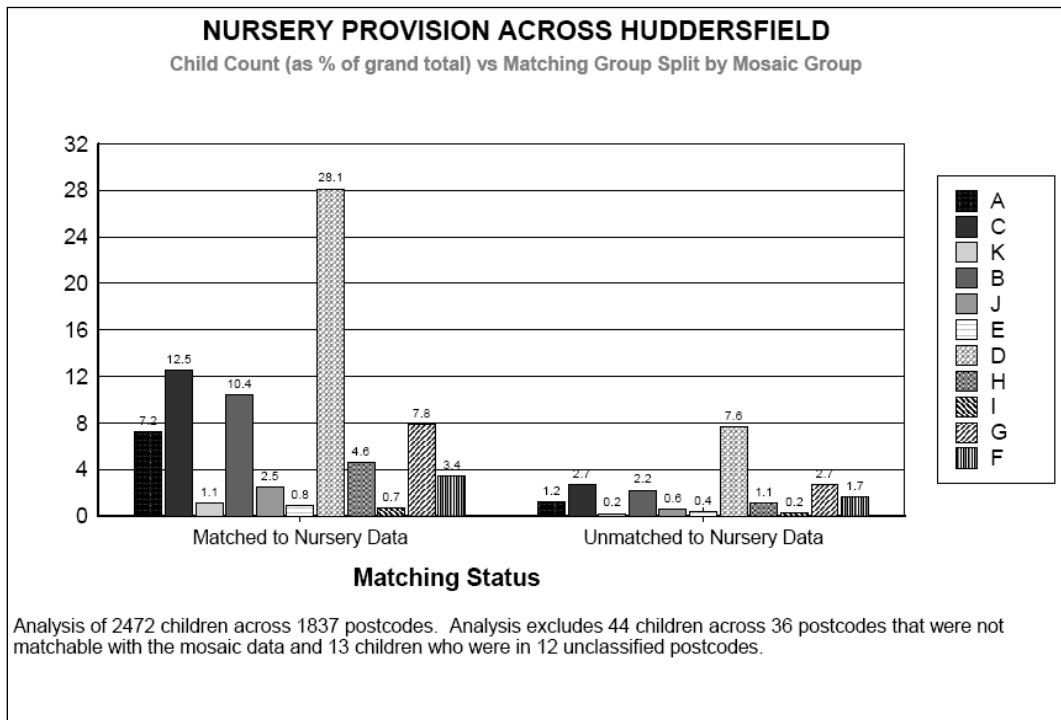
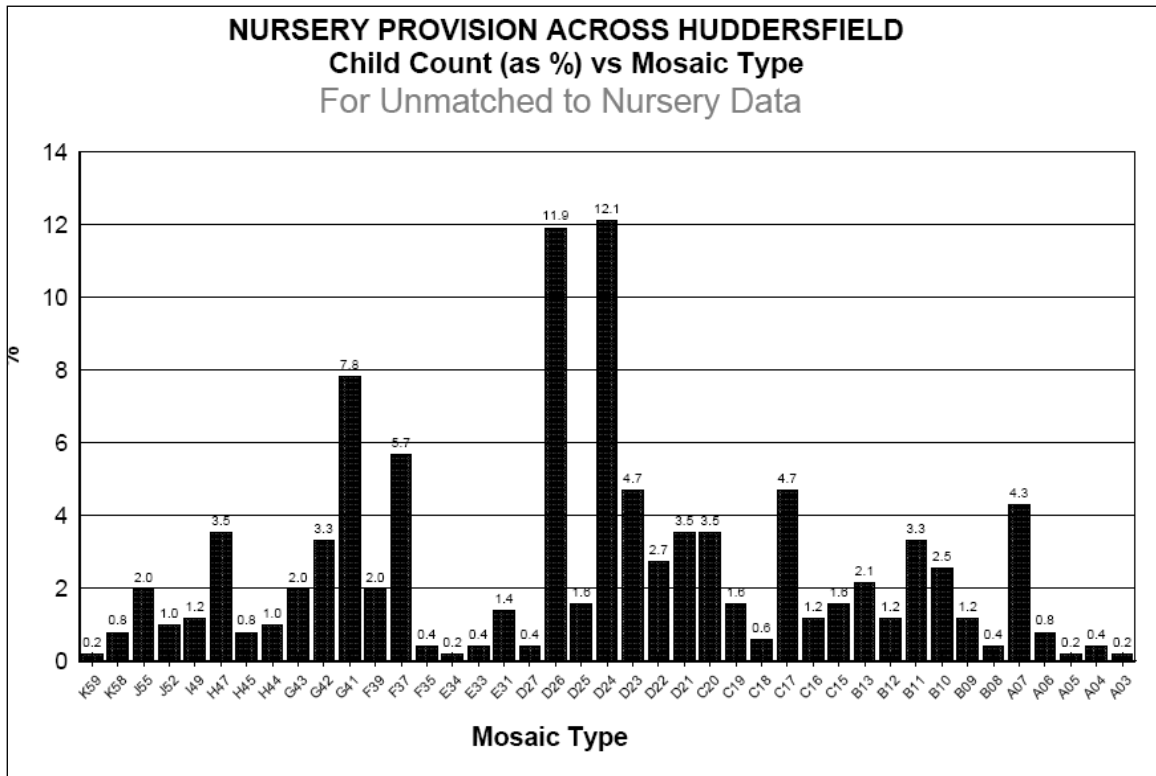
The analysis shows that of 2,532 children in the Child Health database who would have been entitled to a nursery place in the academic year 2005 -6, 532 could not be found on the nursery database through automated matching. This gives us an estimate of around 79% of children taking up their nursery entitlement. However this is only a best estimate and the limitations of this analysis are presented in the appendix. The actual figure may be slightly higher.

If we look at the distribution of matching by electoral ward, we can see that there is some variation across South Kirklees, with the Crosland Moor and Netherton and Newsome wards having less children matched. If data quality problems are consistent across the geographies, (we are unsure if this is the case), this could represent variations in take up, with between a quarter and a third of children not taking up their entitlement in some wards.<sup>10</sup>

<b>Percentage Match by Electoral Ward</b>					
(Figures are based on plotted properties and do not add up to the South Kirklees total)					
Ward	Match		Unmatch		Total No
	No	%	No	%	
Almondbury	126	82.9	26	17.1	152
Ashbrow	186	76.2	58	23.8	244
Colne Valley	128	81.5	29	18.5	157
Crosland Moor and Netherton	173	69.5	76	30.5	249
Dalton	185	77.1	55	22.9	240
Golcar	101	84.2	19	15.8	120
Greenhead	174	79.8	44	20.2	218
Holme Valley North	192	77.4	56	22.6	248
Holme Valley South	156	86.2	25	13.8	181
Kirkburton	181	91.9	16	8.1	197
Lindley	123	84.8	22	15.2	145
Newsome	136	76.8	41	23.2	177
South Kirklees	120	72.7	45	27.3	165
	<b>2000</b>	<b>79</b>	<b>532</b>	<b>21</b>	<b>2532</b>

We have again applied the MOSAIC data to the children who have and who may not have taken up their vouchers to see if there are any patterns of dominant types. This is presented in the graph below.

<sup>10</sup> Data quality issues may not be uniform across wards, and may be greater in areas where a high proportion of residents are from South Asian backgrounds increasing the possibility of name misspellings between agencies.



The Mosaic types were families who do not take up their entitlement are predominant the D24 and 26 groups. Understanding the backgrounds of these groups, may help in developing more effective marketing strategies.

Looking in more detail at those who we have not been able to match, we can see that the top 3 types are D26, D24 and G41. These account for almost a third of non matched respondents. They also represent some of the most deprived Mosaic types and have already been described in the reach analysis for the old Links 4 Sure Start

area above, these types will be found in other areas of Kirklees besides just the old Links 4 Sure Start area. It is possible that they will be in the more disadvantaged Super Output Areas, where we wish to improve achievement at Foundation Stage as well as in more advantaged areas. It would make sense then for there to be tailored approaches to encouraging take up of nursery places in these areas. We also need to bear in mind that we have not been able to do this analysis for North Kirklees, which may show a different picture, or where these 3 Mosaic types may be prevalent.

So far we have discussed the success with which we have been able to reach some of the target groups who may be at risk of underachievement because of the area where they live being associated with poverty. We shall now look at the perspective of those who we are expecting to take up services.

## 4. Parent Perspective

### **Are parents making use of the information services that are available about early education?**

During the summer of 2006 a survey was undertaken of 2017 parents with children under 6 years old into satisfaction with services for preschool children. This survey showed that parents who used nursery care were generally very satisfied with the provision they received, but there is some variation between localities.

The aspect that parents were least satisfied with was the information available on nursery provision. However when asked about awareness and usage of the Children's Information Service (CIS) only 33% of the 2017 parents surveyed were aware of it and of those only 25% had actually used it. Yet the CIS has been set up with a remit to enable parents to access information. This suggests that there is a communication gap between parents wanting information, yet not being aware of the service that can provide it.<sup>11</sup> We have not considered if there is any variation in response according to the Mosaic profile of respondents.

The survey report provides a more detailed discussion of these results.

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<sup>11</sup> Baseline Customer Satisfaction Survey for Children's Centres, 2006, Shared Evaluation Resource

## 5. What do we reach our target groups with to help achieve the target?

Children's Centres have a core offer set out by government as to what they must provide: This includes:

- Integrated childcare and early learning
- Health
- Family support and outreach
- Links to job centre plus

The initial factors in the Feinstein model which have the most significant effect on predicting outcomes, include poverty, education levels of parents, particularly mothers, occupation and employment. In addition we know the quality of childcare and early learning experience is also important in terms of the environment being appropriate and staff being suitably skilled, not only to develop the child, but also to support parents in their role as educators.

This would suggest the importance of focusing resources around developing the education of parents especially mothers, but also having a clear focus around helping people into employment and allowing those in employment to move to higher skilled jobs. This has been a focus of government policy, evident in the recent requirement of local authorities to undertake a robust analysis and develop a thorough understanding of childcare markets to support parents to work. Through more effective provision of early education that fits in with work patterns and budgets it would be expected that Children's Centres may go some way to contributing to supporting parents into employment and to move upwards in the labour market. Providing access to information, advice and guidance around employment and training as well as assisting less confident parents into preparation for employment courses would also contribute to this. However we need to be clear as to whether the processes in place do actually lead to this for a sufficient numbers of parents who most need help.

It is helpful to return to Feinstein's model and consider the proximal factors that impact on outcomes for children, these are parenting processes and the home learning environment which include factors such as mother and child interactions, partner and child interactions and the extent to which the parents try to teach the child. Sure Start originally worked on the principles of direct influence on the child, for example through nursery provision. It also worked on the principle of influencing parents to influence the child, in other words the proximal factors in Feinstein's model.

Returning to our need to focus on improving FSP scores a key factor in this is communication, language and literacy. We know that language development has been a priority for Sure Start local programmes and that a range of approaches have been tried to improve language skills. These have included working with parents to influence their role. However returning to the evidence base about how we may best use our specialist resources to affect this, a Health Technology Assessment of Screening for Speech and Language delay, has suggested that the best use of specialist resources such as speech and language therapists is in supporting those

staff who have regular contact with parents and children<sup>12</sup>. That is to develop the skills of these staff so they are better able to promote children's language ability.

In returning to our proximal factors this would suggest there is a strong need to focus resources around encouraging those parents whose children are most at risk of delayed language development because of their home environments to take up appropriate services that bring them into contact with language aware staff. Again referring back to the evidence from the BCS70 and ALSPAC studies discussed above, schools have a limited effect in narrowing the gap in outcomes overtime. This is not to say that schools would not have a role to play in again influencing the proximal factors through family learning type activities, but the influences on the proximal factors need to start earlier in the child's life. The use for example of speech and language therapists to develop the abilities for front line staff to support those parents who score poorly on proximal factors would seem an appropriate means of focusing resources on those most on need and would contribute to narrowing the target.

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<sup>12</sup> Screening for Speech and Language Delay a Systematic Review of the Literature, Law,J., Boyle, J., Harris, Harkness, Nye, C.,

## 6. What effect are these activities having?

### 6.1 Have there been any improvements in FSP scores in Sure Start Local Programme Areas?

We know from the very early findings of the national evaluation of Sure Start that the impact on children's attainment is difficult to judge. However we need to question at a local level the extent that the services provided through Sure Start Children's Centres are impacting on the proximal and distal factors discussed above and hence ultimately on FSP scores.

We have looked at the most recent data that we have for the FSP results of children who have lived in Sure Start areas as well as the results of those children who have both registered and participated in educational activities (toddler groups, early education etc). The tables below show the aggregate performance of four Sure Start areas compared with all children in Kirklees for the academic year 2005/6. These children would have been born in the academic year 2000/2001. The first table compares all children living in the Sure Start Area with Kirklees, the second with the performance of children who registered with the programme and the last one the performance of children who participated in the programme. We have only used data from 4 of the original Kirklees Sure Start programmes.

**Table 1**

#### All pupils living in the original Sure Start Local Programme Areas in Kirklees

Area of Learning	<i>All Sure Start Areas</i>			<i>Kirklees</i>
	Total Pupils	Working securely within Early Learning Goals	Working securely within Early Learning Goals	Working securely within Early Learning Goals
		No 6+ Scale Points	% 6+ Scale Points	% 6+ Scale Points
Disposition and Attitudes	780	677	86.8	89.8
Social Development	780	544	69.7	77.8
Emotional Development	780	470	60.3	74.0
<b>Personal, Social and Emotional Development</b>	780	430	<b>55.1</b>	<b>68.5</b>
Language for Communication and Thinking	780	508	65.1	77.3
Linking Sounds and Letters	780	356	45.6	55.9
Reading	780	397	50.9	64.1
Writing	780	315	40.4	53.6
<b>Communication, Language and Literacy</b>	780	245	<b>31.4</b>	<b>43.5</b>
<b>Communication, Language and Literacy &amp; Personal, Social and Emotional Development</b>	780	223	28.6	40.5

As we can see children living in Sure Start areas score lower on PSE and CLL than the rest of Kirklees, by 13.4 percentage points and 12.1 percentage points respectively.

**Table 2**

**All pupils registered with a Sure Start Local Programme compared to Kirklees**

Area of Learning	<i>All Sure Start Areas</i>			<i>Kirklees</i>
	Total Pupils	Working securely within Early Learning Goals	Working securely within Early Learning Goals	Working securely within Early Learning Goals
		No 6+ Scale Points	% 6+ Scale Points	% 6+ Scale Points
Disposition and Attitudes	324	292	90.1	89.8
Social Development	324	240	74.1	77.8
Emotional Development	324	206	63.6	74.0
<b>Personal, Social and Emotional Development</b>	324	190	<b>58.6</b>	<b>68.5</b>
Language for Communication and Thinking	324	235	72.5	77.3
Linking Sounds and Letters	324	159	49.1	55.9
Reading	324	179	55.2	64.1
Writing	324	135	41.7	53.6
<b>Communication, Language and Literacy</b>	324	104	<b>32.1</b>	<b>43.5</b>
<b>Communication, Language and Literacy &amp; Personal, Social and Emotional Development</b>	324	92	28.4	40.5

Children registered with the Sure Start programme still score 9.9 percentage points less on PSE and 11.4 percentage points less on CLL than the Kirklees average. However registration with a programme, did not necessarily mean children have participated in beneficial activity. The scores of those who participated in educational activity through these programmes is shown in the next table.

**Table 3**

**All pupils participating in a Sure Start Local Programme educational activity<sup>13</sup>**

Area of Learning	All Sure Start Areas			Kirklees
	Total Pupils	Working securely within Early Learning Goals	Working securely within Early Learning Goals	Working securely within Early Learning Goals
		No 6+ Scale Points	% 6+ Scale Points	% 6+ Scale Points
Disposition and Attitudes	95	86	90.5	89.8
Social Development	95	63	66.3	77.8
Emotional Development	95	55	57.9	74.0
<b>Personal, Social and Emotional Development</b>	95	48	<b>50.5</b>	<b>68.5</b>
Language for Communication and Thinking	95	64	67.4	77.3
Linking Sounds and Letters	95	50	52.6	55.9
Reading	95	58	61.1	64.1
Writing	95	42	44.2	53.6
<b>Communication, Language and Literacy</b>	95	34	<b>35.8</b>	<b>43.5</b>
<b>Communication, Language and Literacy &amp; Personal, Social and Emotional Development</b>	95	29	30.5	40.5

This table compares the results of those children who have participated in Sure Start educational activity on more than one occasion. Educational activity includes parent and toddler groups and stay and play type activities. There is still a difference of 18 percentage points between those participating and the rest of Kirklees in PSE and 7.7 percentage points on CLL.

On the surface it looks as though there is a narrowing of the gap between those participating in educational activities related to Sure Start compared to those who are not on CLL. The difference in CLL scores for participants living in Sure Start areas being only 7.7 percentage points compared to 12.1 for those living in the area. For PSE scores the differential widens for participants to 18 percentage points from 13.4 for those living in the area. However because of the small numbers it is difficult to draw any firm conclusions from these statistics for the following reasons:

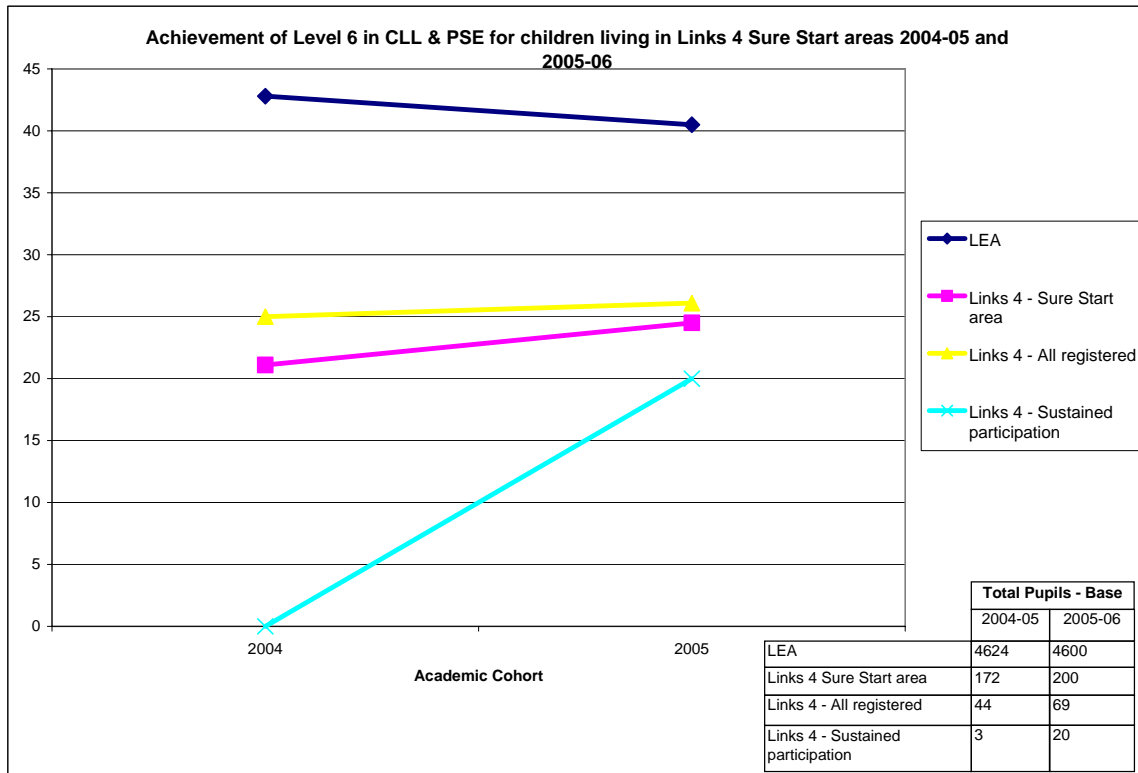
1. It is only one cohort of children
2. The numbers included in the analysis are very small and lots of factors can effect performance
3. The participant group is a sub group of the registered group which is a subgroup of those living in the area, so we are not making pure comparisons between the three groups.

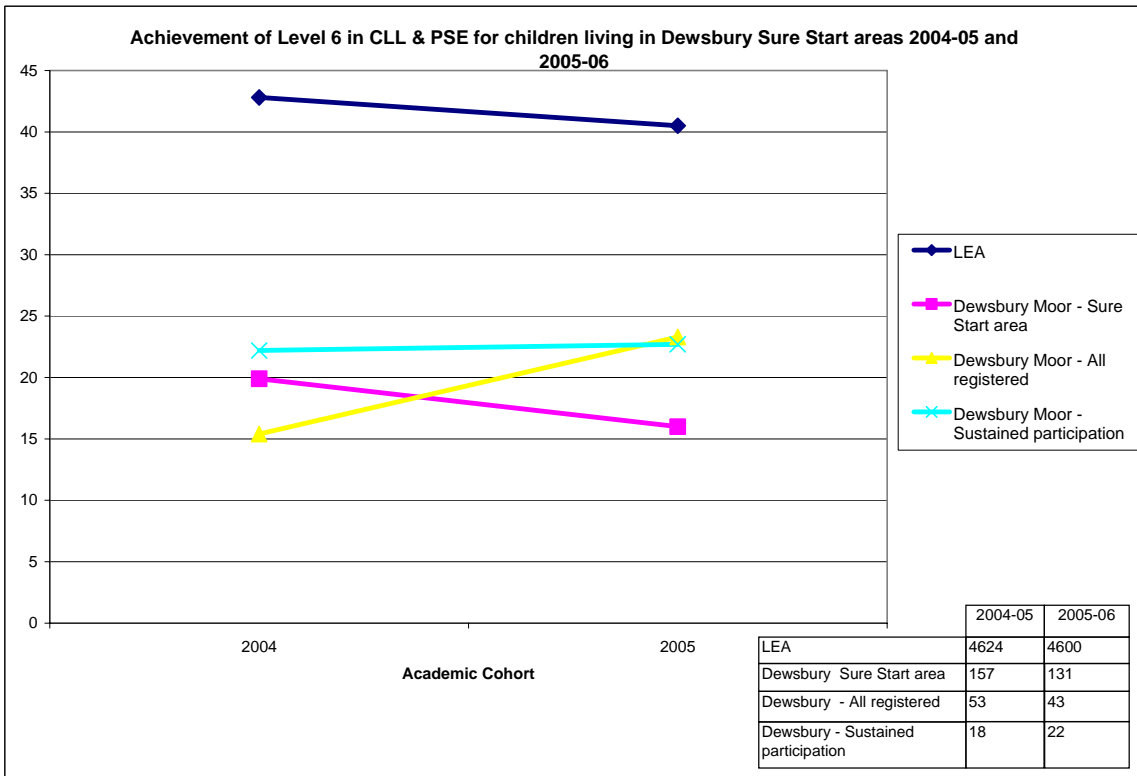
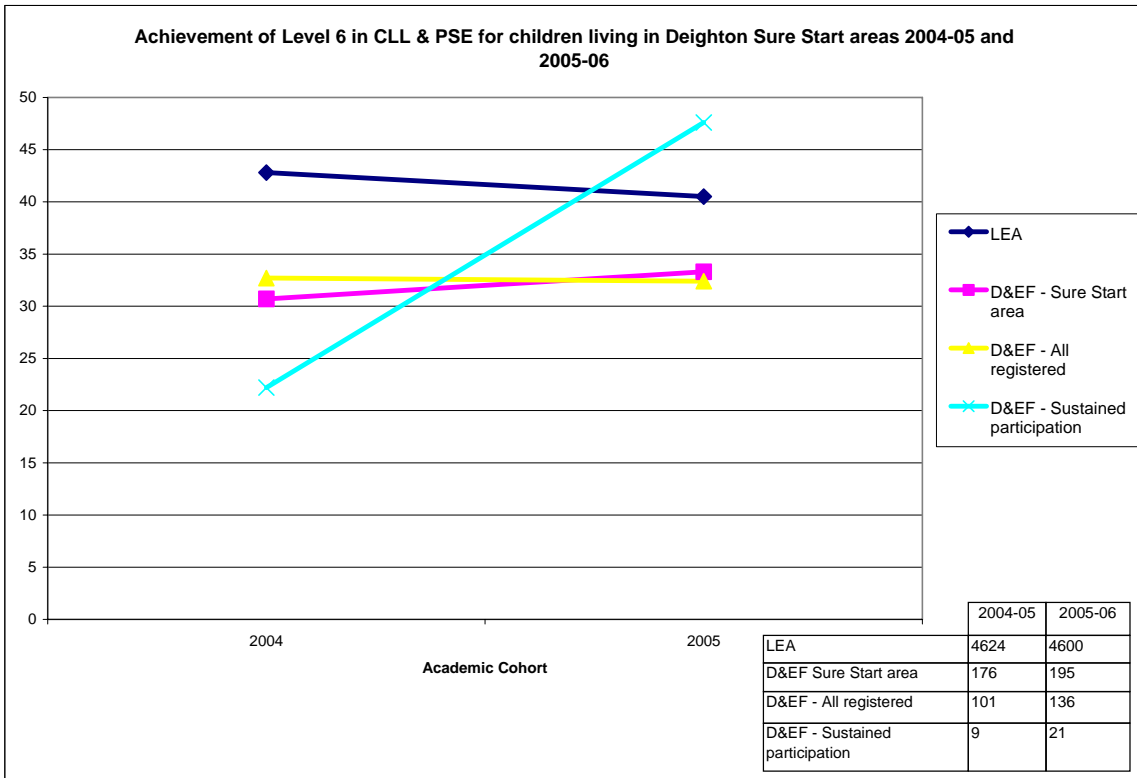
That is not to say that over time, this analysis will not become more robust as larger numbers of children will have participated in Sure Start activity prior to attending school.

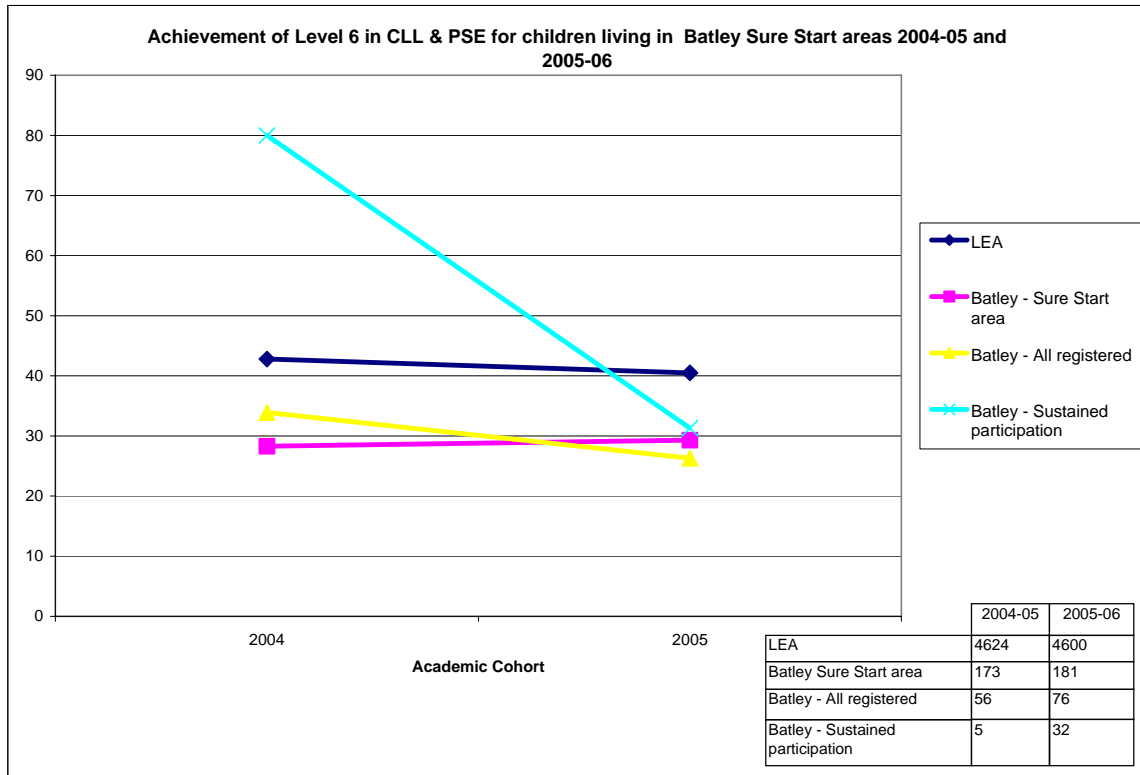
<sup>13</sup> Educational activity includes parent and toddler groups, playgroups, language groups

## 6.2 Is there any difference in scores between Sure Start local programmes?

The graphs below show the attainment of children in 4 of the original Kirklees Sure Start areas, broken down according to involvement with Sure Start local programmes. These graphs need to be treated with caution, due to the small numbers who have participated in Sure Start educational activity and that we only have two years worth of data.







The graphs do not show any clear patterns as to whether children participating in Sure Start programmes have seen any improvement in their performance at Foundation Stage. However this may be due to very few children having been reached by Sure Start in these cohorts, as they would have been born during its initial start up years. We do know from later cohort analysis that the original Sure Start Centres are reaching around two thirds of their area populations. Further analysis of these cohorts may show a different picture.

## **7. Conclusions and Recommendations**

The above analysis has explored a number of activities that are aiming to reduce the gap in FSP scores between the most disadvantaged areas and the rest of Kirklees. We have shown that although there is much activity through Sure Start programmes and nursery vouchers, the gap still remains. We have drawn on the national evidence based on large scale, longitudinal studies around why it is important to narrow the gap around education because of its effect on life chances. We have also explored the factors that contribute to the gap around distal and proximal factors and that these need to be taken into consideration in targeting resources.

There are lessons here for the roll out of Children's Centres in terms of ensuring they reach those children most at risk of communication, language and literacy (CLL) delays as well as delays in personal, social and emotional development (PSED). It is also imperative in narrowing the gap that these children and their families are supported to access services which have an evidence base that demonstrates the activity on offer leads to an improvement in these areas.

The original Sure Start programmes worked on the basis of either direct influence on the child or through influence of parents. The National Evaluation of Sure Start suggests that it is those families in deprived areas who have higher levels of human capital who have been able to take advantage of the services that were offered through Sure Start and will also do so through Children's Centres. In terms of the narrowing the gap target there needs to be continued evaluation as to whether services are reaching those children most in need and also that the services they are reached with are likely to yield results in improving CLL and PSED.

For example for CLL we need to ensure all children take up their nursery places and that staff in them are supported to develop their understanding of how to develop children's communication. Prior to age 3 the parents of children who do not have access to language rich environments are encouraged to access such services and supported to develop their own skills in communicating with their children. This has implications for developing the childcare market, in that the focus of this cannot just be about the number of places, but the quality and the possibility of using these places to support child development is important. There is also a role to play in ensuring that parents are encouraged to take up these places, particularly those who score poorly on the proximal factors discussed above.

For PSED there is a need to consider the evidence that is available around what works in promoting this area of development, although there is likely to be some overlap here in that the activities that help promote communication, will also promote social and emotional development too. It has not been within the scope of this report to explore the evidence base around this.

Children Centres are to be rolled out across the whole of Kirklees, using the Sure Start approach of multi agency working. In addition commissioning of services will be separated out from service providers. In order to support this process continued evaluation of some the issues discussed in the above analysis will be important if we are to see a real difference in outcomes for the most disadvantaged children not just

in terms of the FSP score but also for other outcomes in the Every Child Matters Agenda.

On the basis of this we would make the following recommendations.

1. Continued reach analysis of services including nursery take- up

This requires some investment in data quality in Children Centres and the nursery database to ensure it is possible to use automated data matching against Child Health systems. Child health systems are the best record available of the full population in an area. We recommend individual matching because it allows further detailed profiling of users and non users to be conducted, to inform how services are marketed and resources deployed.

2. Continued analysis of the FSP scores of participants and non participants in a range of Children Centre activities.

Again this requires some investment in data quality in Children Centres in order to use automated matching processes. We would recommend this as we would expect that the resources expended through Children's Centres would contribute to improvements in FSP scores over time. Seeing which activities appear to contribute or not to this will be essential for commissioning only those services which make a difference.

3. Evidence based commissioning

Services which are commissioned need to have an evidence base to underpin them. That is we need to be aware already of the research studies that support a particular expenditure. For example commissioning of speech and language therapy to deliver training to front line staff based on the systematic review of evidence cited here would be such an example.

4. Delivering future evaluation activity

The Shared Evaluation Resource has initiated the analysis undertaken here around reach and also Foundation Stage outcomes. It is not the role of the SER to continue doing this in the longer term, but rather this type of analysis needs to be undertaken within mainstream information management services who have the necessary skills to develop systems for ensuring data quality. On the commissioning side there is a need for there to be some support around identifying and appraising the evidence base of what is already known to be effective. Where no evidence is available pilot projects need to be set up appropriately in order to develop this evidence base. At the current time we are unaware as to the extent to which this capacity exists within Children's Services.

## **Appendix – Brief Descriptions of the Mosaic Profiles of the postcodes where children in the Links 4 area live.**

The descriptions below are for postcodes that the Experian data suggest fall into particular categories. The Experian analysis is based on modeled data from both a wide range of public data sources and commercial sources. The data therefore is not suitable to make decisions about individuals who live within a postcode area. The descriptions merely give an indication of how things may be for people living in this area – it is a best fit description, rather than a truly accurate representation and may be supplemented with local knowledge.

### **D26 Larger families, many of South Asian origin, in high density terraces.**

These areas are characterized by larger families, some overcrowding, modest incomes, low levels of qualifications, there is a strong sense of community, fear of racism is higher than in other areas and religion is important.

#### Education

Educational attainment is low, with close to 50% having no formal qualifications. There is some evidence, however, that those that have had both the opportunity and ability have at least progressed to 'A' level standard, although few have gone beyond that. Carefully thought through, further education opportunities may be a way of helping many more of this generally poor community. It is not surprising that the educational standards of the children are equally poor. A proportion will leave school without the solid qualifications needed for well paid employment. However, the proportion going to university is close to the national average, again indicating that where opportunity and ability combine this community will strive to better itself. A very high proportion of children live in homes where English is not spoken, and many qualify for free school meals.

#### Health

Poor diet is a hallmark of these people and it is suited to a more traditional lifestyle of the South Asian continent rather than the more sedentary ways of the UK. They also tend to be heavy smokers, but alcohol plays less of a role, often for religious reasons. Health is generally poor across the board, with respiratory illnesses and heart disease a particular concern. Teenage pregnancy rates are also surprisingly high, given the cultural background of many in these communities. Few of these people will have medical insurance, the burden on the NHS is high.

#### Crime

The residents of these areas do not find their neighbourhood a pleasant one in which to live, although their cultural background gives some degree of neighbourly support. They experience anti-social behaviour, and racism is higher than in other areas. Unsurprisingly, the fear of crime is well above the national average, although it is slightly less than in better-off South Asian areas. All types of crime are common, and it is more likely to occur in or near the home than elsewhere. These people perceive the police as disinterested and ineffective.

## Finances

Almost two thirds of these very poor people pay no income tax, and virtually none pay tax at the higher rate. The shortage of money, combined with cultural constraints, means that little is put into formal savings and investments. Consequently take-up of Income Support and Jobseeker's Allowance is running at twice the norm in these areas. Few qualify for the state pension, through both age and a lack of contributions, but those that do are likely to be also claiming Pension Credits. Non-payment of council tax is an issue for those Local Authorities with high numbers of this Mosaic Type, although it is normally an issue of "Can't Pay" rather than "Won't Pay".

## Environmental Issues

In terms of attitude this is one of the most environmentally unfriendly Mosaic Types. Recycling is not a priority, and environmental products do not sell well in these areas. Their home lives are also damaging, with extended families and low levels of employment ensuring that energy usage is high throughout the day. The only positive contribution is low car ownership coupled with low annual mileage, although car ownership is increasing rapidly.

### **D24 Young families with limited incomes living in cheap terraced housing**

These areas are characterized by families, with a higher than average proportion cohabiting. Homes can be in poor condition and are often rented older terraces. Unemployment is high and there are higher levels of people living on income support. These areas are characterized by health and social problems. Teenage pregnancies are above average in these areas.

## Education

Adults in this Mosaic type are more likely than not to have left school with few, if any, formal qualifications. Only about one third have, what are generally considered to be, adequate basic qualifications, and the number with a degree is half the national average. The children display almost identical characteristics. Below average performances begin at Key Stage 1, and continue until they leave school, typically with few if any GCSEs. An above average proportion of the pupils come from families with refugee status, as a reflection of low income levels many qualify for free school meals.

## Health

People in these areas are much more likely to have unhealthy lifestyles. Diet is poor. Many are heavy smokers and heavy drinkers, and primary leisure activities are music, cinema and going to the pub. Regular exercise is not a common feature. The general health of people in this Mosaic type is poor, particularly relating to diseases of the heart, liver and respiratory tracts. Hospital admissions due to alcohol and drug abuse run at over twice the national average, and teenage pregnancies are also a serious issue.

## Crime

Most residents do not consider the neighbourhood as being pleasant to live in, and households tend to keep themselves to themselves. Most aspects of anti-social behaviour are very common, often occurring at twice the national rate. There is an above average fear of crime which is borne out in reality. Offences tend to occur at or near home, or at nearby places of entertainment such as the local pub. The local population are generally unhappy with the service provided by the police.

## Finances

Almost half of this population do not pay income tax, and of the rest it is almost exclusively at the basic rate. These people earn low incomes, and tend to spend what they have on the basics and on entertainment. Little therefore goes into savings. Dependence on the state for financial assistance is relatively high. Significant numbers are claiming Jobseeker's Allowance and Income Support, and although the age profile means that not so many are on the state pension, those that are will be probably also be claiming Pension Credits.

## Environmental Issues

Other issues are of greater concern than the environment, namely personal living and enjoyment. Few will contribute financially to environmental concerns. However, the financial constraints mean that in this Mosaic Type car ownership is usually restricted to one small car per household doing below average mileage.

### **G41 Disadvantaged families with children on very low incomes, typically living in low rise council houses.**

These areas are characterized by young families, with a higher than average proportion of lone parents. Homes are in low rise public sector housing. Education levels are low and there are high levels of extreme deprivation. There are high levels of unemployment and people in receipt of income support.

## Education

Educational achievement amongst adults is low, with two thirds not having achieved 5 or more grades A to C at 'O' level or GCSE. This is reflected by their children, who perform very poorly throughout their schooling. Most are highly unlikely to leave school with even basic qualifications, and very few will go on to either college or university. Unlike the inner city areas, these children are not particularly likely to suffer the difficulties associated with language differences between school and home; however, poverty ensures that many qualify for free school meals, and a significant proportion have Special Educational Needs.

## Health

People in these areas are much more likely to eat poorly, smoke heavily, and many are prone to binge drinking. In addition, few take regular exercise. Health is poor, with particular problems associated with drug or alcohol abuse. These are also areas where teenage pregnancy is a particular issue.

## Crime

These are neighbourhoods where social capital is low, housing is poor, and anti-social behaviour is a serious problem. The fear of crime is justifiably above average, as actual crime levels are high. Most of the offences are experienced on the estates, which many of the residents seldom leave. Many of the victims feel that they are repeatedly victimised, although this may be due to the high levels of crime rather than specific targeting. It is not surprising that in areas such as these there is no respect for the police from either victim or offender.

## Finances

These are areas of high unemployment, so income levels are low. A significant number are therefore claiming Jobseeker's Allowance or Income Support, plus council tax benefit. Although most people in these neighbourhoods are of working age, those who are retired are also poor, with high levels of claims for Pension Credits and Disability Living Allowance. With many people often not seeing, payment of the council tax bill as a high priority.

## Environmental Issues

People in these areas do not prioritise environmental concerns. Their immediate environment is not pleasant, and thoughts and money are not spent on wider issues. Car ownership is low for financial reasons, so their usage of public transport is their main contribution to the environmental effort.

### Nursery Take up Rate

Extracts were taken from the Child Health data base and the Nursery voucher database in Autumn 2006. Automated matching of the two databases gave the following results:

Matches of nursery children against child health 2000, out of 2532, this gives us a match figure of approximately 79%. The matches were undertaken for children born between 11.04.2002 to 31.3.2003 and so would have become entitled to a voucher as a three year old between 1<sup>st</sup> Sept 05 and 31<sup>st</sup> August 06.

However it is likely that more matches could have been made using manual methods. There were significant data matching problems between the two data sets because of data quality issues.

In addition 231 children were found on the nursery database who did not appear on the child health system. It maybe that these children may have been found if we had used manual matching. If these children were included in the child population, this would change the take up rate as follows:

$$(2,000+231/ 2,532 +231) = 80.7\%$$

However, this calculation is likely to include double counting as the 231 children may already be included in the 2,532 children on child health, we just haven't been able to find them. We can therefore only estimate that take up is approximately 80%, and may be slightly higher.