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Education Committee

Foundation Years: Sure Start children’s centres

Fifth Report of Session 2013–14

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Volume II: Oral and written evidence

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The Education Committee

The Education Committee is appointed by the House of Commons to examine the expenditure, administration and policy of the Department for Education and its associated public bodies.

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- Neil Carmichael MP (Conservative, Stroud)
- Alex Cunningham MP (Labour, Stockton North)
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Charlotte Leslie MP (Conservative, Bristol North West) was also a member of the Committee during the inquiry.

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Summary

Sure Start children’s centres are popular and well-used by parents but we found a lack of clarity about their purpose and what centres should offer. We identified three types of centre, offering different levels of services: full centres based around nursery schools, centres as part of schools and centres that operate as family centres. The use of this tripartite model would make it possible to clarify policy-making around centres and to introduce greater accountability for their effectiveness.

Accountability is needed both at the centre level and also that of the local authority. We recommend that a national outcomes framework be developed to ensure that the right things are being measured and that the impact of individual centres can be evaluated. The governance of centres must become stronger and more formal like that of schools.

We believe that it is up to local authorities to decide how to organise and commission services from children’s centres in their areas but there must be stronger accountability for how well local authorities perform through their children’s centres in improving outcomes for children. Questions raised by Ofsted about children’s centres need to be treated with the same seriousness by authorities as are those for schools or other services for children. Ofsted needs to demonstrate that its framework is adaptable enough to offer a meaningful assessment of all three types of centre.

The Government has introduced a core purpose for children’s centres. We consider that it is too vague and broadly worded and should be reviewed to focus on achievable outcomes for children and families and to recognise the difference between centres. This should include reaching clarity on who centres are for—children or parents—and what their priority should be. We recognise the important part played by universal services in making targeted services effective. We also conclude that while it is not necessary or practical for all centres to run their own early education or childcare, they should all have links with a qualified teacher. Co-location with other services is less important than integration of services and shared objectives.

Local authorities and health professionals should do more to seek out the most vulnerable children and raise awareness of children’s centres. The Department for Education should restore the national collection of data on the reach of individual centres in order that good and poor practice alike can be identified. Barriers to involving disadvantaged groups and others who are reluctant to engage with centres must be addressed in practical ways. Parents and local communities must be involved in centres, through parents’ groups and volunteering, for example.

Data-sharing is vital and must be improved. Information on children and families known to health and social services should be passed on to children’s centres where possible. We are not convinced that local authorities should be obliged to offer registration of births at children’s centres. Instead, there should be an approach of presumed consent where the authority passes on information unless specifically told not to. Children’s centre staff need training in handling data, which should be conducted jointly with other agencies.

Investment in early intervention is the most effective way of closing the attainment gap between the most disadvantaged children and their peers. Under the current accountability
framework, it is not the right time to remove the ring-fence around early intervention spending and there should be greater transparency on how local authorities spend the money. Closing children’s centres is not popular and should go ahead only where there has been proper consultation and where alternatives to closure have been considered. However, changes in the network may make centres as a whole more effective.

The use of evidence-based programmes in centres is developing but it needs to be embedded in the culture and more training is needed for staff. The Early Intervention Foundation should issue guidance on how programmes can be implemented in centres. The Government should commission research into what makes a children’s centre effective and particularly into the kind of parental engagement in the home environment which makes most difference to narrowing the gap. We also recognise the potential of Early Years Teaching Centres and Teaching Schools in assisting self-improvement and spreading best practice within the children’s centre sector.

The Government is right to encourage a better qualified early years workforce but needs to set out a strategy if its aspiration for an integrated 0–18 workforce is to be realised, including equal pay for the early years.

All centres should have a training plan, checked by Ofsted during inspections, to ensure that CPD is being offered and taken up by staff. The NCTL should set out a career structure for children’s centre staff. It should also overhaul the qualification (NPQICL) available to centre leaders to reflect current practice, involving practitioners in the review.

The two year old offer of early education for the most disadvantaged children is welcome but we have concerns about the funding, the quality of providers, the availability of places in effective settings and the impact on places for other age groups. We also have concluded that there has been, and continues to be, too much short-term and disparate government policy in the area of early years. We recommend that the Government sets out coherent, long-term thinking on early years and the place of children’s centres within that, including funding, responsibility across Whitehall and accountability.

The Department for Education needs to ensure the survival of maintained nursery schools and encourage the development of the network of nursery schools with children’s centres throughout the country.
1 Introduction

Context

1. Sure Start children’s centres are intended to provide integrated services for young children and their families. They were launched in 2004, with the aim that a centre should be established in every community in England. Since the General Election of 2010, they have seen significant change with a new “core purpose”, a focus on outcomes and impacts (rather than outputs) and the removal of the requirements on centres to provide access to childcare in the most disadvantaged areas and to have access to a qualified teacher. These changes have been introduced alongside the removal of the ring-fence for Sure Start funding, which has made the funding of many centres less certain. In many areas there has also been a reorganisation of the network of centres by local authorities who are now responsible for the provision of centres.

2. Our predecessor Committee held an inquiry into Sure Start children’s centres against the background of an expansion of the programme and the placing of children’s centres on a statutory footing for the first time.1 Their report described the Sure Start programme as “one of the most innovative and ambitious Government initiatives of the past two decades”. It concluded that “Children’s Centres are a substantial investment with a sound rationale, and it is vital that this investment is allowed to bear fruit over the long term”.2 In the light of the changing circumstances and context as set out above, we decided that it would be timely to re-examine Sure Start children’s centres and to take stock of where the programme is now.

Our inquiry

3. The inquiry was launched on 7 September 2012, inviting written evidence on the following points:

- the new Core Purpose of Sure Start children’s centres, how this has evolved and is different from the original design and purpose of Sure Start;
- the effectiveness and impact of Sure Start children’s centres to date, including the role of Ofsted inspections;
- the range of services and activities provided at Sure Start children’s centres, and their desired outcomes, and whether/how these differ from family centres, early Sure Start local programmes and early years settings;
- how Sure Start children’s centres compare with similar initiatives in other countries;

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1 Sure Start children’s centres, Fifth Report from the Children, Schools and Families Committee, Session 2009-10, HC 130-I
2 Ibid., paragraph 16
how to define and measure good practice in family and parenting support and outreach, including the effectiveness of the Government’s payment by results trials, and what measures of child development and school readiness might be used;

how to increase the use of evidence-based early intervention in children’s centres;

how to strengthen integrated working between health, social care and education as part of a multi-agency early help offer, including how to improve information-sharing and the proposal for children’s centres to have access to a “named social worker”;

how to increase the involvement of families (especially fathers, disadvantaged families, minority ethnic groups and families of children with SEN and disabled children) in the running of children’s centres and in their regular activities;

how the overall level and quality of provision is being affected by moves to local funding.3

4. We received written submissions from a wide range of witnesses. We also took oral evidence on eight occasions, hearing from 12 panels of witnesses as listed at the end of this report. This included a session held in Corby, during an interesting and informative visit to the Pen Green Centre for Children and Families. We also visited the Netherlands and Denmark in February 2013 to compare provision for the early years in those countries with that in England.4 Finally, we held an informal seminar at the start of our inquiry on the subject of school readiness, to which invited guests brought different perspectives on early years provision. We are grateful to all those who contributed to our inquiry through these various routes, and especially to those who organised or participated in our activities away from Westminster.

5. During this inquiry we have benefitted from the expertise and assistance of our two standing special advisers on children’s services, Marion Davis CBE and Professor David Berridge OBE, and from two advisers selected for their experience and knowledge of this specific area, Professor Iram Siraj and Dr Margy Whalley.5

**Background and numbers**

6. Sure Start children’s centres were established in three distinct phases. Phase 1 centres were set up from 2004 onwards and built on previous initiatives such as Early Excellence Centres and Sure Start Local Programmes. Together with phase 2 centres, they were

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3 PN19, Session 2012-13.

4 See annex for an outline of the visit programme

5 Marion Davis CBE declared interests as a former President and continuing Associate Member of the Association of Directors of Children’s Services (ADCS); as a former member of the Munro review reference group, continuing to work with Professor Munro; as a Trustee of a charity, Children and Families Across Borders (CFAB); and as part-time Independent Chair of their Local Safeguarding Children Board. Professor David Berridge OBE, Professor of Child and Family Welfare, Centre for Family Policy and Child Welfare, University of Bristol, declared interests in the form of research with the Department for Education and as a member of the Corporate Parenting Panel of Bristol City Council Children and Young People’s Services. Professor Iram Siraj, Professor of Early Childhood Education, Institute of Education, University of London, and Dr Margy Whalley, Director of Research, Pen Green Research Base, did not declare any interests.
located in the 30% most disadvantaged areas of the country. Phase 3 centres, from 2008 to 2010, extended coverage to all areas. Sure Start children’s centres services are commissioned by local authorities but the centres can be run by a variety of organisations. Figures suggest that of phase 1 and 2 centres 69% are run by local authorities, 18% by maintained nurseries or schools, including academies, 18% by the voluntary sector, 4% by health sector providers and 3% by private sector organisations.6

7. In April 2010 there were 3,631 children’s centres in England. Three years later, in April 2013, this had decreased to 3,116 centres.7 It is surprisingly difficult to find a clear explanation of how this has come about and there is some dispute about the number of closures. The Minister, Elizabeth Truss MP, stated in answer to a parliamentary question in May 2013 that “local authorities tell us that there have been only 35 outright closures since 2010” and that “The rest of the change is a result of reorganisations and mergers of existing centres.”8 Within the total there is considerable variation by local authority in the number of closures: in 20 local authorities, the number of designated children’s centres decreased by 50 per cent or more from 2010 to 2013, with a reduction from 23 to 7 centres in Luton and from 40 to 18 in Cornwall.9 The Family and Childcare Trust is currently conducting a study that is mapping changes to Sure Start children’s centres throughout the country between April 2010 and April 2013.10 For the moment, however, there is no accurate picture of closures across England, although it can be expected that ongoing budget reductions are likely to have a further impact on the number of centres.

**Impact and effectiveness**

8. Sure Start has received substantial expenditure over the years since its inception and it has recently come under some political criticism for not delivering against this investment.11 The Minister rejected outright any suggestion that Sure Start might be a waste of money,12 and there is strong anecdotal evidence that children’s centres are valued and appreciated by parents. Ofsted reported that “Centres invariably provide case studies and anecdotal evidence that demonstrate ways in which individuals’ lives have been transformed” and that “Direct quotations from parents found in many reports provide compelling evidence of the positive impact of the centre on the lives of individual children and families”.13 They are also well used: the latest 4Children census found that 73% of centres reported an increase in the number of families using centres over the last year, with more than one million families now accessing services.14

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6 Evaluation of Children’s Centres in England (ECCE): Strand 1 – First survey of children’s centre leaders in the most deprived areas, DfE (July 2012), p.22. Percentages do not add up to 100 because more than one answer could apply.
7 Written answers Col584W, 20 May 2013
8 Ibid.
9 Written answers Col584W, 20 May 2013
10 Ev188
11 See, for example, speech by Nick Boles MP to the Resolution Foundation, 10 July 2012, and speech by Andrea Leadsom to the Conservative Party Conference, October 2013
12 Q783
13 Ev 181, para 21
14 Children’s Centre Census 2013, 4Children (October 2013)
9. Asked about objective assessment of impact and effectiveness, the Minister argued that “The problem with past policy was that, when these programmes were started, we did not start the evidence collection.” She referred to the EPPE study as “the only piece of longitudinal research we have”. EPPE is a study into the Effective Provision of Pre-school Education and so concentrates on that aspect of the work of children’s centres. In fact, the overall effectiveness and impact of Sure Start children’s centres and their precursors have been measured since 2001 in two other research programmes. The first, the National Evaluation of Sure Start (NESS) ran from 2001 until 2012. The results of the impact evaluations (published in 2005, 2008, 2010 and 2012) were mixed, with consistently improved benefits found across all studies only for family functioning. The NESS economic study (2011) was more positive, concluding that “by the time children reached the age of five, SSLPs had already delivered economic benefits of between £279 and £557 per eligible child” on a spend of between £450 and £2,500 per child.

10. Secondly, ongoing research into the impact and effectiveness of Sure Start is provided by the Evaluation of Children’s Centres in England (ECCE) project. This is a six year study commissioned by the DfE in 2011 and undertaken by NatCen Social Research, the University of Oxford and Frontier Economics. The aim of ECCE is to provide an in-depth understanding of children’s centre services, including their effectiveness in relation to different management and delivery approaches and the cost of delivering different types of services. The evaluation comprises five key elements or strands. To date, the DfE has published reports linked to Strand 1: Survey of children’s centre leaders (July 2012), Strand 5: Cost benefit analysis (November 2012), Strand 2: Survey of children’s centre leaders (April 2013) and Strand 3: Children’s centres’ service delivery, multi-agency working and reach (July 2013). The main ECCE report examining the impact of different models of children’s centres on the outcomes of children and families in deprived areas (Strand 4) is due in June 2015. The evaluation will finish in December 2017 with a report examining the cohort’s Early Years Foundation Stage results to assess any longer term educational benefits of children’s centre attendance. It is these later reports which will give most information on impact.

15 Q801
16 Q802
17 National Evaluation report, Early impacts of Sure Start Local Programmes in Children and Families, November 2005; National Evaluation Summary The Impact of Sure Start Local Programmes on Three Year Olds and Their Families, March 2008; The Impact of Sure Start Local Programmes on five year olds and their families, DfE RB067, November 2010; impact of Sure Start Local Programmes on seven year olds and their families, DfE RB220, June 2012
18 National Evaluation of Sure Start local programmes: an economic perspective, Dfe RB073, July 2011
19 Ev 214, para 2
2 Definition and purpose of Sure Start children’s centres

What is a Sure Start centre?

11. Sure Start children’s centres are defined in the Childcare Act 2006 as:

   as a place or a group of places:

   • which is managed by or on behalf of, or under arrangements with, the local authority with a view to securing that early childhood services in the local authority’s area are made available in an integrated way;

   • through which early childhood services are made available (either by providing the services on site, or by providing advice and assistance on gaining access to services elsewhere); and

   • at which activities for young children are provided.

Early childhood services are also defined in the same Act as:

   early years provision (early education and childcare);

   social services functions of the local authority relating to young children, parents and prospective parents;

   health services relating to young children, parents and prospective parents;

   training and employment services to assist parents or prospective parents; and

   information and advice services for parents and prospective parents.20

12. Much is therefore expected of Sure Start centres. The Minister described them as “a gateway for families [...] a one-stop-shop that gives them access to a wide range of services available locally”.21 Yet, in reality, there is a great variety in the services provided by centres and in the way that the centres themselves are configured, with a general move away from single, stand-alone centres. The most recent evaluation by the Evaluation of Children’s Centres in England (ECCE) research project found that the one-stop-shop is being replaced by complex clusters of centres and satellite sites, with particular services being delivered by particular sites.22

13. Crucially, the majority of centres do not offer early education and/or childcare and some offer few, if any, direct services to children despite the statutory requirements. The

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20 Sure Start children’s centres statutory guidance for local authorities, commissioners of local health services and Jobcentre Plus (April 2013), Department for Education

21 Q782

2012 4Children census of Sure Start children’s centres indicated that almost 2,000 centres did not offer any childcare\textsuperscript{23} but we came across repeated confusion in our inquiry over early education and children’s centres, especially when discussing the impact and staffing of the centres, and further confusion between childcare and early education. Childcare and early education are not the same. The former is currently for children aged under three, generally provided by the private sector and delivered by a workforce with low-level qualifications; the latter, as defined by the Rumbold report, implies teachers working directly with children and better qualified staff.\textsuperscript{24} Research shows that high quality early education is critical for children from birth to age 5.

14. Some witnesses argued for full services to be offered at all centres, even though this would mean fewer centres overall, with many citing early education and childcare, in particular, as an essential service (see further below).\textsuperscript{25} This would imply a more standard offer and pattern of centres across the country and was not welcomed by local authorities who argued against “a consistent one-size-fits-all approach, because the needs of different communities will be very different.”\textsuperscript{26} The Minister agreed that all authorities “start from different points” and that the pattern of centres “depends on the landscape and the local area”.\textsuperscript{27} She argued, however, that “It is important that parents are able to access a service[,] that the footprint is a broad service” and that there should continue to be centres in all communities.\textsuperscript{28}

15. We believe that it is necessary for reasons of policy-making and accountability that there is clarity about what is meant by a children’s centre. This is not the case at the moment when the only distinction is between phase 1, 2 and 3 centres. There is confusion, in particular, between centres offering childcare and/or early education and those which do not. It is important also to recognise that some centres work across localities and may be inspected as groups by Ofsted. For the purposes of this report, we have identified three distinct types with different roles and functions:

- Children’s centres based around nursery schools, offering a full service, with some acting as teaching centres and network hubs, with fully integrated services
- Children’s centres as part of or managed by a school, usually a primary school, on the extended school model
- Children’s centres that operate as family centres, offering family support and opportunities for community participation. These offer no childcare or early education but are used by local authorities for targeted prevention services.

\textsuperscript{23} Sure Start children’s centres census 2012, 4Children, p25
\textsuperscript{24} The Rumbold Report (1990), Starting with Quality
\textsuperscript{25} See for example Q233-4, Q268, Q20
\textsuperscript{26} Q716 [David Simmonds]
\textsuperscript{27} Q794
\textsuperscript{28} Q813
16. In the current economic circumstances it is unrealistic to demand fully-integrated centres in all communities and this may not be the most suitable model in all cases. It is the responsibility of local authorities to determine what is required on the basis of need and to adopt the model of delivery, including the number and pattern of centres, which provides the best outcomes for children and families. Local authorities can then more easily be held accountable for how they perform against those key outcomes.

17. To assist its policy-making, the Government needs to have a clearer picture of the pattern adopted by local authorities in fulfilling their statutory obligations with regard to Sure Start children’s centres. We recommend that the DfE collect data from local authorities on the pattern of centres commissioned based on the model we set out above.

The core purpose

18. The Coalition Government’s new “core purpose” for children’s centres, developed in collaboration with local authorities and early years staff, is “to improve outcomes for young children and their families and reduce inequalities between families in the greatest need and their peers in: child development and school readiness; parenting aspirations and parenting skills; and child and family health and life chances”.\(^{29}\) This is intended to “provide a greater scope for local authorities and children’s centres to better respond to local need, helping to take Sure Start back to its original purpose of early intervention”.\(^{30}\) In fact, the Government appears to have two versions of the core purpose: the first set out in the statutory guidance as shown above and the second in a DfE “Core Purpose” document which is: “improving outcomes for young children and their families, with a particular focus on the most disadvantaged families, in order to reduce inequalities [reference to “between families in the greatest need and their peers” deleted] in: child development and school readiness; supported by improved: parenting aspirations, self esteem and parenting skills; child and family health and life chances” (differences highlighted).\(^{31}\)

19. The core purpose and its focus on improving outcomes for disadvantaged children has generally been welcomed by the sector as shown in the responses to the Government consultation on the core purpose and in evidence to our inquiry. We were concerned, however, that the wording was too broad to be meaningful. We were also concerned about apparent tensions within the core purpose, as identified by the latest research report into children’s centres (ECCE Strand 3), such as whether centres should prioritise children or parents, employment or family support, or targeted or universal provision in disadvantaged neighbourhoods.\(^{32}\) The Minister did not recognise this tension and argued that the wording was “deliberately broad”.\(^{33}\) She translated the core purpose as “being there to offer services to parents, to improve outcomes for children and to provide a gateway into other services that are provided locally”.\(^{34}\) She added that “the whole point of our core

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29 Statutory guidance (April 2013)
30 Ev 214, para 8
31 http://media.education.gov.uk/assets/files/pdf/s/sure%20start%20childrens%20centres%20core%20purpose.pdf
32 ECCE Strand 3 report, p. xviii
33 Qq 787,789
34 Q786
purpose is that it gives councils the freedom to organise their services with the aim of achieving the best outcomes for children.” 35

20. *We are not convinced by the Minister’s defence of the wording of the core purpose which we judge to be too vague and too broad, whichever version is used. It is not possible for a small children’s centre which acts principally as a signpost to other services to fulfil such a wide-ranging and all-encompassing purpose. For other centres, the core purpose is too all-encompassing to be of any use as a guiding principle of their aims and priorities. In neither case is it possible for a children’s centre to achieve such expectations alone. It is right that councils should have the freedom to organise their services to achieve the best outcomes for children but we are not convinced that setting a universal core purpose for all children’s centres assists them to do this. We recommend that the core purpose be reviewed and reshaped to focus on achievable outcomes for children’s centres to deliver for children and families, and to recognise the differences between the three types of centre.* We return later in this report to how these outcomes should be devised and measured and how accountability can be improved.

**Universal or targeted services**

21. The core purpose refers to “families in the greatest need” but the DfE’s statutory guidance also makes clear that “A children’s centre should make available universal and targeted early childhood services”. 36 One of the main challenges for centres is how they balance universal and targeted services, particularly in the context of reduced resources. Evidence to our inquiry suggests that an increasing number of centres are coming down on the side of targeted services, partly because of reductions in funding and partly because of the core purpose. Local authorities are also moving towards targeting in response to the increase in recent years in child protection work. Professor Kathy Sylva told us that “social workers are increasingly using [children’s] centres as their treatment”. 37

22. The Local Government Association believed that the new emphasis on targeting would “enable councils to target local resources in the most cost-effective way when responding to local needs”. 38 Other evidence, particularly from children’s charities, was strongly in favour of the retention of universal services. Barnardo’s was “clear that making provision available to all families is the best way to build social capital in communities and enable engagement with the full range of families without stigma”. 39 The Children’s Society saw universal services as a key part of early intervention and prevention, reporting that such services “get people through the door, enable staff to build relationships with families and identify any issues/problems families may be facing before they reach crisis point”. 40 A recent NFER report noted that “whilst the concept of ‘target groups’ can be helpful for

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35 Q788
36 Statutory Guidance (April 2013), p6
37 Q239
38 Ev 223, para 10
39 Ev 196, para 18
40 Ev w20, para 3
monitoring and prioritising services, any family or child could potentially be in need of some additional support at any given point in time.”

Witnesses called variously for “a mix of open access and targeted” services, proportional access, and targeted interventions within a universal service.

23. The Minister saw “no contradiction” between the aims of involving “as wide a group as possible of the community in the centre” and of making “sure that those children from disadvantaged backgrounds get the early education and the services they need”. She added that “the way of achieving an effective targeted service is to have a universal offer”.

24. Funding pressures inevitably mean that greater targeting of services must occur but it is important that all families are able to access services through children’s centres and universal services play a significant role in removing the stigma from attending centres and in encouraging families to engage with centres in the first place. The Government must make clear in its statutory guidance that local authorities should have regard to the relationship between universal services and the effectiveness of targeted prevention services when planning local provision.

Priority services: children or parents?

25. Early childhood services are defined in legislation as services not just for children but also for parents and prospective parents, including social services, health, training and employment, and support with parenting. According to the DfE, the services most commonly provided by children’s centres include “stay and play”, home-based family services, parenting classes and breast-feeding support. Recent research indicates that centres are continuing to offer a surprising variety of services, despite recent cuts and changes in focus, but the 2013 4Children census shows clearly that the services being expanded by centres are parenting, rather than child-related. Professor Sylva warned that increased targeting of services on vulnerable families was leading to children’s centres without children: “almost half of our children’s centres do not have children in them, with the exception of Stay and Play; with the targeting, what has gone is having children in the centre.”

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42 Q60 [Naomi Eisenstadt]
44 See for example Q121 [Angela Prodger]
45 Q787
46 See para 11
47 Ev 216, para 13
48 ECCE Strand 3, p. xxii
49 Children’s Centres Census 2013
50 Q239
26. Naomi Eisenstadt’s history of the development of Sure Start demonstrates that the purpose of Sure Start centres has always been a subject of some debate, with ministers from different departments and at different times seeing them primarily as a resource for mothers and babies, as a part of anti-poverty initiatives to enable parents to return to employment, and as providers of early education for the benefit of children.51 We heard that this is an on-going dilemma. Professor Melhuish told us centres tended to concentrate on the parents52 and that children’s centres “are still not focused enough on improving the children to be prepared for school” or adequately supporting “the language development of children”.53 This is backed by impact studies which have found that Sure Start had been more effective at improving outcomes for parents (family functioning and maternal well-being) than child development outcomes; 54 and by Ofsted who noted that “the weakest aspects of children’s centres’ work relate to children’s preparedness for school.”55

27. The NSPCC, supported by a recent report from the All Party Parliamentary Group on Sure Start,56 argued that children’s centres should focus their work more on very young children, aged 0 to two.57 In contrast, 4Children believed that “there is enormous potential to extend the children’s centre model beyond the early years”. They have adopted a 0-19 approach in some of their children’s centres, which “allows children, young people and the wider family to access consistent support over years” and means that families continue to be offered the “trusted support they wish for beyond the earliest years of their child’s life.”58 Professor Melhuish suggested that focusing on parents is a more indirect way of improving child outcomes and tends to take longer, stating that “the financial benefits of improving parenting accrue many years later when those children are less likely to be involved in crime, less likely to be anti-social, and more likely to do better at school. To get those outcomes, you need to look quite a few years ahead.”59

28. Clarity is needed on who children’s centres are for and the balance between the needs of parents and those of the children themselves. The core purpose gives scope for a focus on parenting skills but is vague about parental “aspirations” and what this means for child development. It is also not clear how far centres are meant to offer training for parents in employment skills. We recommend that the Government address these issues in its review of the core purpose.

29. The 0 to two year olds are a key group but not the only one. Equal attention should be given to the crucial pre-school period from two to five, when children may be in early education but will not necessarily have access to other services except through

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52 Q237
53 Q237
55 Ev 180, para 18
56 Best practice for a Sure Start: The way forward for Children’s Centres, July 2013
57 Ev 189, summary and paras 2 and 3
58 204, para 24
59 Q223
children’s centres. Priority should be given on the basis on individual need and there should be no fixed restriction due to the age of the child. Local authorities are best placed to decide the age range to be served by the services they commission through children’s centres.

30. *Centres are required in legislation to provide activities for young children and it is not acceptable for any centre to operate without direct contact or engagement with children; local authorities should ensure that the statutory requirement is met and Ofsted should draw attention to any centres in breach of the requirement in its inspection reports.*

**Childcare and early education**

31. In 2011 the Government removed the requirement for children’s centres in the most disadvantaged areas to provide access to childcare, if there was not identifiable need, and also removed the requirement for a qualified teacher to be linked to each centre. The participation of children’s centres in childcare and early education, even in disadvantaged areas, is therefore variable and changing. Currently, just over a third of centres offer childcare and the 2013 census run by 4Children found that

> a degree of polarisation has taken place [in the centres surveyed] with respect to childcare provision. Centres that have the capacity to offer larger numbers of places have slightly expanded their provision, while those with more limited capacity have reduced their childcare places.60

Just over 23 per cent of centres in the survey expected to cut back on the number of all-day childcare placements in the next year.61

32. Witnesses argued that childcare should be part of the integrated provision offered by children’s centres and that the removal of the requirement had been a mistake. For example, Naomi Eisenstadt argued that it had diluted the focus on employability skills62 and Unison wrote that it had “damaged centres and reduced participation across a range of services […] we believe that the childcare offer is key to the success of the Sure Start centres and contributes to successful outcomes.”63 There is some empirical evidence to support the assertion that childcare attracts parents to children’s centres. Surveys published by the previous Government in 2007 and 2009 found that parents’ awareness and use of children’s centres (in phase 1 areas) was very closely linked to the early education and childcare offered by centres and that education and childcare were the most commonly used services.64

33. There is also some evidence that the combination of childcare and early education in one location produced better outcomes for children. The EPPE study found that integrated

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60 Children’s Centres Census 2013, p25
61 Ibid., p18
62 Q5
63 Ev 211, paras 3 and 7
64 Sure Start Children’s Centre Parents Surveys 2007 and 2009, DCSF
centres (which fully combined education and care) tended to promote better social development and intellectual outcomes for children. Ofsted has found that the quality of early years provision that is directly linked to a children’s centre is better overall than the quality of early years provision without such an association. Many of the phase 1 centres were based on nursery schools which were already highly-performing but as the Minister was keen to point out, children’s centres provide only 4% of early education places.

34. Unison also argued that “it has been a retrograde step to remove the requirement to have a qualified teacher in every centre.” Dame Claire Tickell strongly agreed that there should be qualified teachers linked to centres. Witnesses stressed that this brought benefits even where centres did not provide childcare directly: Vicky Lant of Barnardo’s, for example, explained the input that a qualified teacher could have through interventions during stay and play-type activities. The Minister did not consider that it had been a mistake to remove the requirement because “the centres have different purposes”.

35. We consider that it is not necessary or practical for all centres to run their own education with care but it is essential that all centres build close links with high quality early education/childcare providers. For the majority of centres that do not have childcare or education on site, there are questions about how well they can fulfil the expectations in the core purpose that they deliver improved outcomes for young children and reduce inequalities in child development. The Government must set out clearly how these expectations apply in such cases.

36. Research shows that contact with qualified teachers enhances outcomes for children. All centres require input from a qualified teacher to help shape their offer to, and their work in direct contact with, children. The Government was wrong to remove the requirement for a link with a qualified teacher and we recommend that the decision be reversed.

Working with partners

37. Local authorities have a duty to ensure that early childhood services are provided in an integrated manner which is defined in the DfE statutory guidance as “where everyone supporting children works together effectively to put the child at the centre”. The Childcare Act 2006 also places a duty on commissioners of local health services and JobCentre Plus (as ‘relevant partners’) to work together with local authorities in their arrangements for improving the well-being of young children and securing integrated early

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65 Effective Provision of Pre-School Education: findings from the pre-school period, October 2003
66 HMCI Annual Report 2012, Early Years, para 25
67 Q281 [Susan Gregory]
68 Q784
69 Ev 211, paras 3 and 7
70 Ev 166
71 Q534 [Vicky Lant]
72 Q817
73 Statutory Guidance (April 2013), p4 n3
childhood services.74 The DfE memorandum described children’s centres as “hubs of early childhood services”,75 and outlined the ways in which children’s centres work with midwives, health visitors, family nurse partnerships, social care, housing and Job Centre plus.76 This is corroborated by the recent ECCE Strand 3 report which found that “An enormously long list of organisations and agencies as partners was compiled by the centre managers—both statutory and voluntary, and in the community”.77

38. Evidence to our inquiry was strongly supportive of children’s centres as models of integrated services and there was widespread agreement that integrated working with health professionals, in particular, is vital. For example, Corby health-visiting lead Diane Dinch told us that “integrated working is pivotal to the local community, certainly from a health point of view.”78 Witnesses suggested that such partnership-working between children’s centres and health professionals works very well in some areas, and the DfE supplied seven case studies of this in action.79 Where this is not the case, the issue most commonly cited as an obstacle to effective partnerships was access by children’s centres to health data (see paras 91 to 97 below).80

39. With effect from April 2013, local authorities have taken on new responsibilities for public health through Health and Wellbeing Boards which are required to bring together strategic partners to agree joint priorities and outcomes for their local areas. 4Children suggested that Health and Wellbeing Boards offered “a chance for greater integration of health services into children’s centres, and an opportunity to overcome some challenges which still remain”.81 Others have looked beyond partnership-working to full integration: for example, in a recent report, the Children’s Society recommended that the Health and Wellbeing Boards should ensure arrangements are in place for integrated commissioning of universal and targeted services for children in the early years, including services offered by children’s centres, general practice, maternity, health visiting and early years providers.82 Family Nurse Partnerships provide a model of how this already works in practice.

40. Many witnesses argued for co-location of health and children’s centre services, especially ante- and post-natal services. For example, the NSPCC suggested that “having midwife and health visitor clinics run out of children’s centres is [...] effective in making other services more accessible to many parents and enabling parents to access a range of other relevant information, advice and support.”83 This is in keeping with the general direction of current government policy. The DfE’s statutory guidance for children’s centres

74 Ibid., p4
75 Ev 216, para 17
76 Ev 218, para 34
77 ECCE 3, p27
78 Q182
79 Ev 220
80 Eg Ev 186, para 4.2, Ev 197, para 24-25, Ev w16, para 28
81 Ev 202
82 The Children’s Society, Breaking Barriers: How to help children’s centres reach disadvantaged families (2013)
83 Ev 191, para 13
states that “as a minimum it is expected that every children’s centre should have access to a named health visitor”.84 The Minister reminded us that from 2015 health visitors will be transferred to local authorities,85 which could see further integration. The NHS Healthy Child Programme (HCP) also holds out the possibility that “children’s centres may be an ideal place from which to provide the HCP, making full use of their workforce and services and of their role in promoting children’s health and wellbeing”,86 including the forthcoming integrated review for 2–2½ year olds.

41. The Government has also encouraged the co-location of employment support with children’s services as part of its child poverty strategy.87 The DfE’s statutory guidance for children’s centres encourages centres to provide services which will improve parents’ skills, employment prospects and financial situation, as well as providing links with JobCentre Plus. The guidance states that “as a minimum there should be arrangements made at the centre to assist families on gaining access to employment support and advice.”88 The evidence is mixed on how well this has worked so far. The National Evaluation of Sure Start 2010 impact study found a larger fall in workless household status for families in Sure Start areas.89 Similarly, Naomi Eisenstadt told us that “one of the positive outcomes of from Sure Start was that more parents got jobs, and that is measurable.”90 In contrast, Ofsted reported that one of the weakest aspects of children’s centres’ work is the degree of support staff are able to give in helping parents towards economic stability and independence.91 The Family and Childcare Trust told us that “the range of support for parents who may wish to return to work also varies from centre to centre” and was critical that “there seems little evidence of strategic thinking from the Department for Work and Pensions, the Department for Education, the Work Programme and Job Centre Plus as to how welfare-to-work provision might be targeted at certain Sure Start centres.”92

42. The DWP has run a pilot of work-focused services in children’s centres which was evaluated in 2011. The results were broadly positive but showed that co-location of services in itself was not sufficient, and that a critical factor was children’s centre’s staff understanding of the role of employment as a route out of poverty.93 Furthermore, as an early Sure Start evaluation found, many parents face a complex set of difficulties and require support to overcome these and to improve their aspirations and confidence before

84 Statutory guidance, p11
85 Q786
86 Healthy Child Programme, p60
88 Statutory guidance, p12
89 The Impact of Sure Start Local Programmes on five year olds and their families, DfE-RB067, 2010
90 Q105 [Naomi Eisenstadt]
91 Ev 180, para 18
92 Ev 186, para 4.3
93 Ibid., p7
they are ready for training courses and employment. The availability of affordable and trusted childcare is also an on-going issue.94

43. We were struck by the focus on the co-location of services in the discussions surrounding partnership working or integration. Susan Gregory of Ofsted reported that “our inspection evidence shows [...] that centres are more successful in terms of early intervention [...] when they bring vulnerable families and children into the centre, or the environment where the services are delivered, where they can access a number of things”.95 Yet, ECCE strand 3 found less emphasis on co-location than they had expected: “Centres did not think that a single site was the key factor in centre ethos [...] other factors such as having workers willing to make contact with other services on behalf of families were more important”.96 Looking at multi-agency working, ECCE researchers also found that “There were mixed and often unrealistic expectations by staff as to what centres could provide. Different professional cultures created tensions, especially about the balance between open access and targeted services, and between adult-focused support and child development activities”.97 This suggests that there is work to be done on breaking down differences in culture and understanding between the various partners. It may be more important to share objectives than premises.

44. The difference in the size and structure of children’s centres makes it impractical to stipulate that all relevant health services should be delivered through children’s centres. Physical co-location may be desirable in some cases but it is not essential: it is more important that there is close working between the different services and that parents are helped to find their way between them. The priority should be integration of services, and the quality of that integration, rather than co-location. Parents should not be expected to tell their story three times to three different professionals; professionals must share information and develop a seamless integration of services, wherever those services are delivered.

45. We welcome the new integrated 2½ year old health check as a demonstration of closer partnership-working with shared objectives. Joint training for the integrated check might overcome some of the barriers between the professions. We recommend that the Government incorporate joint training between the different agencies involved into the implementation of this policy.

Working with childminders and other education providers

46. The Government’s core purpose document makes brief reference to support for childminder networks, as part of children’s centres’ work on early education and childcare. Sue Owen of the National Children’s Bureau recommended to us that children’s centres are expected to develop the capacity of childminding within their areas. She noted that “providing support for childminders is part of the core purpose but has been delivered very
patchily”98 and suggested that children’s centres should “support accredited childminding networks which are open to new as well as experienced childminders. They should also plan the support that childminders can offer to them in terms of providing places for specific groups of children, and supporting young or inexperienced staff and parents.”99 Dame Clare Tickell also talked of the importance of linking nurseries and childminders who are delivering the EYFS into children’s centres so that they can draw upon the centres’ resources. She pointed out that the centres “facilitate ways for childminders to access what is being delivered in children’s centres in a way that ‘allows them to talk to each other’ and to “connect in with other professionals” to talk about their concerns.”100

47. The Government has proposed that children’s centres might lead childminder agencies as provided for by the Children and Families Bill which is currently making its way through Parliament. This was being trialled when we met the Minister who told us that it “makes a lot of sense” for a children’s centre to run a childminder agency and “would be very useful”.101 Other witnesses questioned the proposals. For example, Liz Bayram, Joint Chief Executive of PACEY, was concerned that “the childminding agency model is a different model from the sort of delivery of services that childminders are currently collaborating with children’s centres on” and that this new “business model” would be “a very different type of intervention from what children’s centres are currently doing” which might distract centres “from the core business of what they are there to do”.102

48. Children’s centres need to see childminders as both important customers and partners. Centres should take on a role in assisting childminders. We understand the concerns expressed about centres running childminder agencies. This certainly would not be appropriate for all centres but it should be a matter for individual decision whether taking on the role of a childminder agency would help to achieve a centre’s core purpose.

49. We also heard concerns about the transfer of information from children’s centres to schools. Participants at our informal seminar on school readiness commented that many primary schools could make better use of the information that is passed to them by children’s centres. We came across some examples of good practice which could be emulated elsewhere. There is currently no nationally agreed format for how and what information should be transferred, although the vast majority of settings work to the Early Years Foundation Stage and its learning and development goals. The East Riding of Yorkshire reported that several children’s centres in the area have worked in partnership with local primary schools and childcare providers to deliver transition projects with identified children and their parents to help them settle into school.103 We also heard in Corby about Pen Green’s Making Children’s Learning Visible assessment, designed to

98 Ev 234
99 Ibid.
100 Q69
101 Q880
102 Q485
103 Ev 230, para 11
facilitate dialogue and the flow of information on children’s learning and development between early years settings, parents and primary schools. Children’s centre leaders and primary school head teachers in Corby commented positively on the system and suggested that it could be rolled out more widely.104

50. There is significant potential to improve outcomes and provide integrated services where heads are leading and managing children’s centres as part of nursery schools or schools. Where the children’s centre leader is part of the senior management team of the school as a whole and seen as an equal partner, there is likely to be more focus on realising these benefits.

51. The Government’s proposals for a new baseline assessment of children upon entering reception may lead to improvements in primary school accountability, but a better procedure is needed for passing on richer information on individual children from children’s centres to schools and nurseries. Clearer guidance is also needed on how schools should use this information. This applies equally to assessments of individual children passed on from childminders to children’s centres and schools. We recommend that the Government examine how this can be done.

104 Qq129-131
3 Outcomes and accountability

Measuring outcomes

52. The Government expects children’s centres to focus more closely than they have in the past on measuring outcomes in order to demonstrate their impact and value for money. In order to do this, the right set of measures needs to be found. As the NSPCC has pointed out, change in children’s centres “will be driven by what services they are accountable for.”\textsuperscript{105} Existing outcome measures include school readiness and child development, tracked through Early Years Foundation Stage profile results. Lancashire County Council, for example, told us that the council “can clearly demonstrate the impact of effective targeting of children’s centres services by the outcomes from Ofsted inspections of children’s centres and the increase in FSP [Foundation Stage Profile] scores across the county.”\textsuperscript{106} Ofsted acknowledged that that “these nationally validated measures can provide compelling evidence of the impact of centres, where centres have tracked children’s achievements through to school,” but cautioned that “it is difficult to track the impact of a children’s centre on the Early Years Profile results for children, unless the centre has directly provided early education or childcare.”\textsuperscript{107} Other tools available to help children’s centres monitor outcomes and demonstrate their impact include a framework developed by C4EO focussing on how the services offered by centres are improving the lives of children and families, and whether they offer value for money, and outcomes frameworks established by providers such as Action for Children.

53. Anne Longfield of 4Children argued strongly that a key priority for the Government should be the development of a national outcomes framework for children’s centres.\textsuperscript{108} This could be based on the work conducted by the UCL Institute for Health Equity which has put forward a framework for measuring outcomes across the three key strands of children’s centre work: child development, parenting skills and a family context which enables good parenting.\textsuperscript{109} Witnesses generally agreed with this proposal, although Elizabeth Young of Home Start stressed that the outcome measure had to be “appropriate to this very mixed offer” available from the different types of children’s centres.\textsuperscript{110}

54. The Minister considered that “essentially, we are creating [a national outcomes framework] with a combination of the two and a half year check and whatever we end up with at age five [the proposed primary accountability measure]”.\textsuperscript{111} She argued that “the EYFSP covers a broader remit, but a baseline check would be more measurable”.\textsuperscript{112} She also

\textsuperscript{105} NSPCC Lisa Harker presentation to APPG on Sure Start, 30 January 2013
\textsuperscript{106} Ev w24, para 6
\textsuperscript{107} Ev 181, para 27
\textsuperscript{108} Q521 (Anne Longfield)
\textsuperscript{109} An Equal Start: Improving outcomes in children’s centres, UCL Institute of Health Equity, July 2012
\textsuperscript{110} Q638
\textsuperscript{111} Q832
\textsuperscript{112} Q833
pointed out that “Where it is hard to see whether or not children’s centres are value for money is that it is hard to isolate the effect the children’s centre has specifically, because it is part of a range of services provided by local councils to families”. Instead, she put the emphasis on holding local authorities to account for the outcomes for children (see paragraphs 123-126).

55. We agree that local authorities should be held to account for outcomes for their children across the piece but there is still a strong case for being able to measure the performance of and contribution made by individual centres. We recommend that the Government develop a new national outcomes framework, in consultation with the sector. This would increase the accountability of centres to parents, local authorities and the Government. Any framework must be usable by staff and include meaningful, achievable outcomes and be capable of adaptation to the different kinds of centre.

Inspection

56. Ofsted has inspected children’s centres since 2010 under three separate frameworks. In 2011-12, under the second of these frameworks, 12 per cent of children’s centres inspected were judged outstanding, 53 per cent good, 32 per cent satisfactory and 3 per cent inadequate. Under the latest framework, introduced in April 2013, more centres are failing inspections. Of the 39 centres inspected between April and June, 19 (49%) were judged good or outstanding overall, a decrease of 15 percentage points compared with the previous quarter (the last under the old framework). Stand-alone centres performed better than group providers, with 62% of the former judged good or better and just one out of ten of the latter judged good. Overall, four centres (10%) were judged inadequate and 16 (41%) required improvement.

57. Evidence to our inquiry generally agreed that Ofsted has had a beneficial impact on children’s centres but some witnesses criticised Ofsted for lacking expertise in early years and children’s centres, with too few inspectors from an early years background. Claiming that “Ofsted do not know how to look at under three provision,” Naomi Eisenstadt referred to research by Sandra Mathers which suggested that the settings graded as “outstanding” by Ofsted often received the lowest scores on the respected Infant Toddler Environmental Scale (ITERS-R). The same research led the IPPR to conclude that Ofsted is not effective at predicting child development outcomes for lower-performing centres or for the under threes.

113 Q783
114 Q832
115 Official Statistics Release, Children’s centre inspections and outcomes 1 April 2010 to 30 June 2013, Ofsted, 5 September 2013
116 See for example Q161
117 See Ev w24, para 11, Ev w20, para 2, Ev 229, para 5
118 Q72
119 Ibid.
120 IPPR, Early Developments: Bridging the gap between evidence and policy in early years education (August 2013), p
58. IPPR also raised questions about how successful Ofsted is as a driver of quality in early years settings, with settings regarding “good” or “outstanding” scores as an indication that they need make no further improvements. Several local authorities reported to the IPPR researchers that they had experienced difficulty in encouraging settings to develop their practice if they had been “sanctioned” by Ofsted as good enough.121 There was general consensus among witnesses to our inquiry that the gaps between inspections meant that Ofsted alone was not enough to ensure sustained improvement. This suggests that there is still a role for local authorities in challenging and supporting children’s centres.122

59. The Minister told us that the Government had given Ofsted “additional budget to recruit new HMIs into early years”.123 The new framework allowed Ofsted to look at qualifications of staff and was “much more focused on outcomes; much more focused on high quality engagement with children; less focused on ticking boxes”.124 She also suggested that, following moves to allow Ofsted to inspect groups of centres, “There is possibly more scope for them to inspect children’s centres at the same time as they inspect children’s services, to see how it is all linked up and how it works together”.125

60. It is important to distinguish between early education and children’s centres in terms of inspections. Ofsted needs to act on the research which questions its expertise in inspecting provision for the under-threes and address other concerns about its inspections. It also needs to demonstrate that its framework is adaptable enough to allow a meaningful assessment of a centre offering a few, targeted services as well as of a centre offering a wider range as identified in our three-part structure at the beginning of this report. Ofsted must also make clear to centres that a good or outstanding rating does not mean that they have no need for further improvement.

61. Ofsted does not have the resources to assist improvement in all 3,000 individual centres. We recommend that the Government clarify who is to fill this gap if local authorities are no longer able or empowered to help with improvement. The Government should recognise the role in sector improvement of Early Years Teaching Centres where nursery schools that are also children’s centres assist leaders and staff in other centres, and the Early Years Teaching Schools, where nursery schools help other schools.

Evidence-based interventions

62. In a statement of intent co-produced with sector leaders, the Government sets out that children’s centres can achieve their core purpose through “providing targeted evidence-based early interventions for families in greatest need”.126 It defines “targeted evidence-based early intervention programmes” as those “where published evaluation demonstrates...”
that particular interventions can help families make accelerated progress in improving outcomes where they are at greatest risk of falling furthest behind”. 127

63. Save the Children told us that while “evidence-based early intervention ensures that high quality programmes benefit children and families and represent good value for money”, “evidence-based early intervention currently is not the norm, and therefore changes need to occur.” 128 This is backed by ECCE Strand 3 which found that “Evidence-based practice is a highly contentious topic, with disagreements as to whether practitioners’ experiences and perceptions should be considered evidence for effectiveness, as opposed to scientific evidence from statistical evaluations”. 129 The ECCE Strand 3 researchers observed that “All centres agreed that evidence-based practice should be followed, but many were confused as to the standards of evidence required for effective practice, and few implemented programmes with full fidelity”. 130 Graham Allen stressed the importance of workforce training in his review, 131 which would help to address this issue. Other difficulties highlighted to us included ensuring engagement, particularly from disadvantaged families 132 and the shortage of programmes using multi-agency working or integrated approaches 133 or focusing on children and their education. 134 Dame Clare Tickell warned that “people are asking the evidence-based programmes on parenting to answer a question that they are not designed to answer, because they are about parents rather than children.” 135

64. There was some scepticism over the performance of local authorities in selecting evidence-based interventions, both because of the level of in-depth knowledge of specific programmes within authorities 136 and because of what was described by children’s centres as “micromanagement at local authority level”. 137 Vicky Lant of Barnardo’s suggested that local authorities “need to know but they do not need to specify” which programmes are being followed. 138 The LGA disagreed, claiming that “We are not aware of any evidence that would support children’s centres deciding for themselves which programmes are most appropriate, or are more knowledgeable about individual evidence-based programmes than local authorities”. 139 The LGA’s original submission was clearly sceptical about such

127 Ibid.
128 Ev w6, para 3
129 ECCE Strand 3, p76
130 Ibid., p. xxvii
131 Implementing evidence-based programmes in children’s services: key issues for success, DfE-RR245, September 2012, p26
132 Ev w10 and Ev w14, para 23
133 Ev w10, para 4.1.1
134 Ev w6, para 6
135 Q68 (and see also Q63), [Dame Clare Tickell]
136 QS41
137 Ibid.
138 Ibid.
139 Ev 226
programmes, reporting that “some councils have told us that the over-emphasis on approved evidence-based programmes with limited scope is unhelpful”.140

65. The new Early Intervention Foundation has an important role to play in improving the evidence base and sharing learning. Formally launched in April 2013, the EIF is intended to “provide a single source of independent, comprehensive and authoritative assessment, advice and advocacy on early intervention measures—to government, local service commissioners and investors—helping grow and improve the UK evidence base to transform the lives of babies, children and young people.”141 One way in which it could achieve this would be to take up the recommendation from the ECCE Strand 3 report that “It would be beneficial if Allen’s 2011 ‘permeable list’ of well-evidenced programmes could be reviewed and updated on a regular basis, to ensure that centres and commissioners have access to the most current lists of recommended programmes”.142 The EIF could also take on the role of the former C4EO which acted, prior to April 2013, as a “collaborative centre that gathers and shares the best available knowledge and evidence of ‘what works’ to contribute to improving outcomes for children, young people and their families.”143

66. The Minister agreed that EIF was “absolutely the body that is looking at best practice evidence, disseminating that evidence, and working with practitioners in local authority areas and in children’s centres on what the evidence looks like”.144 She was clear that more evidence was needed “around things like the Family Nurse Partnership to see if that programme is better than another programme and what children’s centres should be offering”.145 The Minister also wanted “to see expert practitioners who understand a research base, and who can lead research. Like the concept of research schools, I want to see research nurseries and research children’s centres, where we are at the leading edge of what are the latest effective programmes”.146

67. We note Dame Clare Tickell’s caution about the expectations of evidence-based programmes, saying that “I do not think that the use of an evidence-based programme should be seen as a proxy that guarantees that everything is absolutely fine.”147 Evidence-based programmes are not a panacea but they have a part to play in the services offered by centres. Research shows that what is important is how programmes are delivered, by whom and to whom. We agree with the Minister that it is important to look at the broader culture of evidence-based practice, rather than individual programmes. Establishing a culture in which centres expect to use evidence-based programmes is key. This needs to be done alongside consideration of other factors which are known to

140 Ev 223
141 Early Intervention Foundation website
142 ECCE Strand 3 report, p 75
143 DfE General Article, updated 26 April 2012, accessed 3 April 2013
144 Q846
145 Q823
146 Q845
147 Q96
influence outcomes such as graduate and teacher trained staff and access to high quality early education experiences.

68. The use of evidence-based programmes in children’s centres is developing but more training needs to be given to help staff understand and implement the programmes correctly. Centre leaders need to ensure that they are aware of best practice both in choosing programmes and putting them into effect. The EIF should issue guidance on how programmes can be used and implemented in the context of children’s centres. Such programmes should include examples of local practice as previously validated and shared by the C4EO. Centres which have developed their own evidence-based programmes should also be encouraged to have them validated through the EIF.

69. Local authorities need to be clearer about the outcomes they expect from programmes and how these can be monitored. Authorities also need to be clear about their role in commissioning programmes and their accountability for commissioning services. We recommend that this is set out by the Government in its statutory guidance.

Payment by Results

70. The Government has experimented with Payment By Results (PbR) in children’s centres, with 26 trials across 27 local authorities, running from September 2011 to March 2013. Submissions to our inquiry generally gave a cautious welcome to PbR but there were serious concerns about the design of performance indicators that trigger payments and the suitability of the system given that children’s centres were working for long-term outcomes. As touched on earlier in this report, there is also the difficulty in disaggregating the impact of centres from other factors: Dame Clare Tickell pointed to the risk of over-stating the influence children’s centres could have, given that “we have children in children’s centres [...], who [...] may be with us for one twenty-fourth of their day”.

71. In the light of these concerns we support the Minister’s conclusion from the trials that PbR does not work for children’s centres and her decision that it would not be pursued “for the time being”. We agree with the Minister that Payment by Results is not appropriate for the type of services offered by children’s centres and we are pleased that the Government does not intend to pursue this approach.

Decision-making and governance

72. Local authorities are obliged to ensure that all children’s centres have an advisory board comprising representatives of each children’s centre within the remit of the board, the local authority and parents and prospective parents in the local authority’s areas. Representatives from other interested groups and bodies (for example, health services, JobCentre Plus, centre staff, local community and faith groups and childcare providers) are

148 See for example Ev 197, para 28
149 Q114
150 Qq837-8
also to be included. The DfE’s statutory guidance states that where certain communities are unwilling or unable to represent their own views at the advisory board, the children’s centre should ensure these families have other opportunities to make their views heard. Local authorities should offer appropriate support and training to help parents or community members carry out their role effectively.151

73. Julie Longworth of Action for Children identified as an area of key concern the quality and format in terms of management information and data provided by local authorities to advisory boards. She told us: “it is unacceptable to have statutory agencies, as well as other partners, coming to advisory boards without the relevant detailed data that people need in order to have effective planning and target those groups.”152 We heard similar concerns in relation to a particular centre during the evidence session in Corby.153 Julie Longworth called for members of advisory boards to be better trained and for there to be clear expectations around their role.154 Other witnesses suggested that advisory boards should be given more powers and their governance role enhanced.155 The IPPR report on early years identified that requiring all group settings to have governance arrangements which include owners, staff and parents was an important step in driving quality.156 When we put this argument to the Minister, she agreed to give consideration to requiring children’s centres to have a legally constituted governing body.157 She also agreed to look into monitoring the adherence of local authorities to the statutory guidance on setting up and maintaining advisory boards and to look further into the governance of children’s centres.158

74. Adrienne Burgess from the Fatherhood Institute told us of a pilot project commissioned by the DfE to encourage parents to run children’s centres.159 This followed on from a DfE paper published in May 2012 on increasing parental and community involvement in children’s centres.160 The Minister sent us further details of the project161 but would neither “confirm or deny” that the Department had plans to establish free children’s centres along the same lines as free schools, telling us that “we are looking at different models of organising various parts of the early years sector”.162

75. As we have argued elsewhere in relation to schools, good governance is vital both in terms of the right structures and the effective performance of those involved. The governance of children’s centres must become stronger and more formal like an effective school governing body and linked to their statutory duty. Parents need to be more

151 Statutory guidance (April 2013), p17
152 Q519
153 Q203
154 Q528 [Julie Longworth]
155 See for example Q527
156 IPPR (2013)
157 Q881
158 Qq883-885
159 Q47
160 Ev 219, para 44
161 Ev 232
162 Q882
involved in children’s centres but within a clear framework to ensure that one group does not dominate. We recommend that the DfE take the necessary statutory steps to bring this about.

76. Local authorities should improve the quality of data given to advisory boards and put more effort into encouraging all sections of the community to contribute to boards. We look forward to learning the outcome of the DfE’s further consideration of the need for closer monitoring of the adherence of local authorities to the statutory guidance on these issues.

Research into effectiveness

77. The ECCE project will continue its work on the evaluation of children’s centres until December 2017, with the main report scheduled for June 2015. Professor Melhuish, who led the earlier NESS project, identified an unmet need for research into “establishing what makes the most effective children’s centres.”\(^{163}\) This view was supported by the recent conclusion by the Social Mobility and Child Poverty Commission that there was a gap in evidence about what works in early years interventions.\(^ {164}\) The Commission recommended that the Government should “prioritise the development and testing of a reformed model for children’s centres. This could involve separate testing of different elements within children’s centres and the impact of delivering services in different ways or with better qualified staff, so Local Authorities could in future commission their service from a menu of evidence based options, which could be offered by different providers”\(^ {165}\). One area raised during the inquiry was home learning where the home learning environment is widely accepted to be a highly influential factor in child development and future achievement,\(^ {166}\) but there has been comparatively little research into what interventions are effective.\(^ {167}\)

78. We recommend that the Government continue to fund the ongoing research into children’s centres and commission more work into what makes children’s centres of the three distinct types effective in improving outcomes for children. In particular, research is needed into what kind of engagement with parents in their children’s learning in the family home makes the difference in narrowing the gap between the most disadvantaged children and their better-off peers.

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\(^{163}\) Q234

\(^{164}\) Social Mobility and Child Poverty Commission, Social mobility: the next steps (July 2013), p.17

\(^{165}\) Report July 2013, p17

\(^{166}\) See for example The Effective Provision of Pre-School Education Project (EPPE), Final Report, November 2004

\(^{167}\) See for example Do parental involvement interventions increase attainment? A review of the evidence, Stephen Gorard and Beng Huat See, Nuffield Foundation 2013
4 Reaching children and families in need

Disadvantaged groups

79. Studies of Sure Start children’s centres by the National Audit Office (in 2006) and Ofsted (in 2008) questioned how well children’s centres were reaching the most vulnerable families. 168 While many children’s centres have made progress since then, 169 practice varies both between and within local authorities. The NSPCC found that, in one local area, children’s centres’ engagement with teenage parents varied from 6% to 68%, while engagement with non-working families varied from 28% to 100%. 170 Evidence to our inquiry suggested that barriers faced by disadvantaged families in engaging with children’s centres included a lack of awareness of services on offer, negative prior experiences or distrust of helping agencies, social isolation, perceptions that services were unwelcoming or not relevant and poor transport links. 171 Some groups, such as fathers, disabled parents or those with disabled children, face particular problems in attending centres. Ofsted also reported that “Many children’s centres report that they are less successful in reaching families suffering from ‘hidden needs’ like domestic violence, lone parents and teenage parents”. 172

80. The Children’s Society argued that centres need to adapt to the needs of fathers, by offering services outside the normal working week. 173 This was supported by some witnesses but the Fatherhood Institute questioned whether fathers-only groups were effective, arguing that “it is likely that the single most important recruitment strategy is, right from the start, to present the father’s engagement as expected and important—and to mean it.” 174 An NFER study found that children’s centre staff emphasised the importance of targeting needs (those of children, parents and families) rather than targeting specific groups (such as teenage parents, lone parents, minority ethnic groups), in order to avoid stigmatising or stereotyping, and to increase the focus on outcomes. 175

81. A recent report by the Children’s Society into the barriers faced by disadvantaged families in engaging with children’s centres found that in some areas there was still a lack of awareness and understanding of what children’s centres were and that they were not widely promoted by the local authority and partner organisations. 176 This was endorsed by witnesses: for example, Jill Rutter of the Family and Childcare Trust argued that “Not all

168 NAO, Sure Start children’s centres, December 2006, HC 104, Session 2006-07; Ofsted, How well are they doing: the impact of children’s centres and extended schools, January 2008
170 NSPCC presentation for APPG on Sure Start, 30 January 2013
171 Eg Ev w20, para 7 and Ev 186, para 5.2
172 Ev 180, para 20
173 Ev w20
176 Ev w20
local authorities have easily accessible information about children’s centres on their websites”.177 This underlines the importance of targeted outreach, conducted both by centres themselves and through organisations such as Homestart, and of practical assistance such as help with transport.

82. Naomi Eisenstadt warned that it was easy for centres to focus on parents and children currently using services and to risk missing some families in need of support. She told us that “it is the finding out who is not coming that is the key to the targeted work.”178 Dame Clare Tickell agreed that “even if you are full, that might not mean that you are reaching the right people.”179 The Family and Childcare Trust noted that, until 2011, local authorities were obliged to report data about the reach of Sure Start children’s centres to the DfE. This provided information about the use of children’s centres by groups such as lone parents, workless households and teenage parents and “highlighted the varied level of success of Sure Start in reaching disadvantaged groups or those less likely to use services”.180

83. Local authorities are obliged under the Children Act 1989 to identify the number of children in need in their area and also to support their families. This provides a framework for identifying those in need but we recommend that there be a new duty on local authorities to put these children and families in contact with services, including children’s centres. Local authorities and health professionals should seek out the most vulnerable children and also do more through their websites and other services to raise awareness of children’s centres.

84. We recommend that the DfE restore the national collection of data on the reach of individual centres in order that both good and poor practice can be identified and monitored, including the effectiveness of centre services and the impact on children in the community. Ofsted could use this data to assist them in their role of requiring local authorities and centres to account for those who do not attend.

85. Barriers to involving disadvantaged groups and others, such as fathers, who are reluctant to engage with centres must be addressed in practical ways. Children’s centres need to learn from the best practice of those who have been successful in doing this, including offering services outside school hours and terms to enable more people to take advantage of their services. Again, networks of centres, such as Early Years Teaching Centres, have an important part to play in this.

Involving parents in children’s centres

86. According to the Government’s core purpose document, respecting and engaging parents is one of the principles underpinning the work of children’s centres. The document explains that this “will involve local families having a greater say in how services are

177 Ev 186
178 Q91
179 Q83
180 Ev 186, para 5.1
delivered (with transparency about what money is being spent on and what difference it is making), actively engaging them in delivery through volunteering opportunities, as well as working with health visitors to build the capacity of local parents to help each other and form informal networks of support.\footnote{Sure Start children’s centre core purpose, DfE, April 2012}

87. Many parents already contribute to the running of their centres through volunteering. A survey by the charity 4Children in 2011 found that 87% of children’s centres were using volunteers.\footnote{Volunteering in Children’s Centres: Results from a volunteer questionnaire survey carried out by 4Children for Family Lives, 2011} Their 2013 census highlighted an increase in their numbers and stressed their role as “a strong link to and with the local communities”.\footnote{2013 census, p7} The DfE provided funding to the Daycare Trust (now the Family and Childcare Trust) to increase volunteering in children’s centres and childcare settings, including looking at ways of increasing the participation of fathers and grandfathers.\footnote{Ev 214, para 8} The Children’s Society’s recent report expressed support for volunteering as a way of engaging disadvantaged groups,\footnote{The Children’s Society, Breaking Barriers: How to help children’s centres reach disadvantaged families (2013)} and we also heard that the Parent Champions project was successful “in getting volunteers in”.\footnote{Q479 [Jill Rutter]}

88. Possible barriers to involvement by parents include lack of time and a need for help with childcare or travel costs.\footnote{Ev w20, para 7} Witnesses also raised the challenge of ensuring that certain groups of parents did not take over and put off harder-to-reach families. The Sure Start children’s centre survey of parents, published by the previous Government in 2009, found that “there is no evidence that particular groups of parents or carers are monopolising the centres. Equally, the results suggest that no sub-groups are being excluded from or failing to access the centres.”\footnote{Sure Start children’s centres parent survey 2009 DCSF} However, Barnardo’s noted that “in a minority of cases, parent groups have sometimes given way to ‘cliques’ creating an exclusive culture. There is a risk that this could make it more difficult to engage with harder-to-reach families”.\footnote{Ev 198, para 37} Naomi Eisenstadt agreed that this was a potential issue but stressed that managing it was a key part of the children’s centre leader role: “it is making sure that the current crop of users are not off-putting to the most disadvantaged, because that is what happens. They do not want the drug-abusing woman there; they do not want their children mixing with that family. So it is a very skilled task to get that mix right.”\footnote{Q11}

89. Some witnesses also drew attention to the limits of parental involvement with regard to taking decisions about what was offered in centres. Professor Melhuish told us that “there is certainly a case for consulting the community, but if you leave this decision entirely to the community, then you are reliant on the expertise being present in the community to
make the relevant decisions.”191 Similarly, Naomi Eisenstadt described the tension over “to what extent you are responding to what mothers and fathers want and to what extent you are delivering things that you know will help their children or, indeed, help them.”192 Professor Sylva suggested that balancing the two elements was another key element in the role of the children’s centre leader.193

90. It is important that centres involve parents through parents groups and in other ways. Local people need to be encouraged to take a stronger role in influencing the management of children’s centres. Volunteering is particularly important and should be encouraged both in itself and as part of a career route into employment for many parents. Practical support, such as training, childcare vouchers or transport, could make a significant difference in encouraging this kind of involvement.

Data-sharing

91. Good information-sharing is vital if children’s centres are to identify the children and families in need of their services. The DfE statutory guidance is that health services and local authorities should share data, including live birth data and data on families under five who have moved into the area, with children’s centres; and that local authorities and health service commissioners should consider developing local partnership agreements for this.194 This is clearly working in some areas but not others. The DfE acknowledged “lingering barriers to effective sharing of data and information”195 and the LGA expressed concern about “the persistent barriers to effective information sharing between services and children’s centres, specifically in the new health landscape”.196

92. Access to live birth data is a particular difficulty. Barnardo’s reported that “we are aware of poor practice [...] where health professionals consider this task [data sharing of live births] beyond their remit, making it very hard to obtain sufficient data.”197 A survey by Action for Children found nearly 70 per cent of their centres were experiencing problems accessing live birth data.198 This is supported by the ECCE Strand 3 finding that “many centres also spoke of the long-standing difficulties in getting access to birth data from health authorities; this seemed to be a local policy decision that could be addressed, since the problems in gaining access to health data were not encountered in all centres”.199 The recent serious case review into the death of Hamzah Khan in Bradford referred to the

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191 Q245
192 Q2
193 Q245
194 Statutory guidance (2013)
195 Ev 219
196 Ev 223
197 Ev 197, paras 24 and 25
198 Ev 206
199 ECCE Strand 3, pp. xx-xxi
failure to share birth data with the result that no early years or school services knew of the child’s existence.200

93. These difficulties were variously attributed by witnesses to factors such as stretched resources and clashing geographical and organisational boundaries,201 but overwhelmingly the blame was attributed to the current guidelines on data-sharing and what the Children and Young People’s health outcomes forum described as “a wide lack of understanding of the rules about information sharing”.202 Nicki Price, Chief Executive of Corby Clinical Commissioning Group, told us that “even within health, we struggle to pass information across health organisations due to information governance. To pass information from health out into some organisations then becomes very difficult.”203 Health-visiting lead, Diane Dinch explained that “if your guidelines are vague, it leaves you feeling quite insecure and therefore you err on the side of caution.”204

94. Some areas have found ways to overcome these barriers, usually involving the development of information-sharing protocols and consent procedures. The LGA assured us that “there is a lot of work underway to improve data sharing between public bodies”.205 A recent NFER study featured “blue slip registration”, which involves parents giving explicit consent for their details to be shared with children’s centres.206 Some areas apply the notion of “presumed consent” which means that there is an assumption that new birth information can be passed to children’s centres, unless a parent indicates that they do not wish the children’s centre to be informed. In these areas, most parents allow new birth information to be shared.207

95. The lack or insufficiency of shared data has a detrimental impact on the work of centres. Ofsted reported that difficulty in obtaining information from key partners affects the ability of centres “to monitor their work effectively and to track the difference they are making to their target families”.208 ECCE Strand 3 reported that centres “found it difficult without adequate statistics to plan how best to target resources where they were most needed, and difficult to intervene early before major problems developed”.209

96. In 2011 the DfE set up a task and finish group with Department of Health, chaired by Jean Gross CBE, to look at the issue of information-sharing in the Foundation Years.210 After much delay the report was finally published on 21 November 2013, after we had

200 Bradford Safeguarding Children Board, A Serious Case Review: Hamzah Khan (November 2013)
201 Ev 120
202 Report of the Children and Young People’s Health Outcomes Forum, p45
203 Q191
204 Q191
205 Ev 227
207 Ev 227
208 Ev 180, para 19
209 ECCE Strand 3, p 27
210 Ev 214
finished taking evidence for our inquiry.\textsuperscript{211} The report echoed many of the issues around information-sharing. In particular, it confirmed that these issues were “more about institutional and professional practice and culture than national regulation” and that the barriers were “less about actuality and more about the clarity of existing guidance, whether different groups of professionals have actually seen it, and about professionals’ attitudes and beliefs”.\textsuperscript{212} The Ministerial response agreed, amongst other measures, to consider how to further strengthen guidance on information sharing and to explore how to achieve an e-learning module on information sharing in the foundation years.\textsuperscript{213}

\textbf{97. We welcome the Gross report on information-sharing in the foundation years. Data-sharing is vital: the DfE must strengthen its guidance on health services and local authorities sharing data with children’s centres. We recommend that the DfE and the Department of Health audit where this is not happening and ensure that the appropriate protocols are put in place. The Government should report back on its findings.}

\textbf{Child protection and children in need}

98. Ofsted’s inspection findings indicate that “many children’s centres are becoming increasingly proactive in promoting the use of the Common Assessment Framework as a tool for referral.”\textsuperscript{214} It appears that this is not balanced by a similarly proactive approach on the part of children’s services. The NSPCC reported that children’s centres do not always receive information about Children in Need, citing one manager as saying “we know which children are on Child Protection plans, but we don’t know the Children in Need who live in the area. If we did, we could offer support.”\textsuperscript{215} The NSPCC argued that centres needed better information on domestic violence, drug misuse and mental health cases.\textsuperscript{216}

99. The DfE provides one way of improving co-ordination with children’s services in its statutory guidance, saying that “Each children’s centre should have a link to a named Social Worker”.\textsuperscript{217} This provision was welcomed by several witnesses, particularly those from children’s charities.\textsuperscript{218} The LGA was wary of this “top down stipulation”, on the ground that local authorities needed the flexibility to make local determinations as to how multiple agencies can best work together;\textsuperscript{219} but individual authorities such as Lancashire County Council suggested that the model “has strengthened joint working and improved information sharing”,\textsuperscript{220} while the East Riding of Yorkshire was confident that the named social worker requirement “has not been an issue as all Children’s Centre practitioners

\begin{itemize}
\item \textsuperscript{211} Information Sharing in the Foundation Years: A report from the task and finish group, November 2013
\item \textsuperscript{212} Ibid
\item \textsuperscript{213} Undated letter to Jean Gross CBE from Elizabeth Truss MP and Dr Dan Poulter MP
\item \textsuperscript{214} Ev 181, para 29
\item \textsuperscript{215} Ev 191, para 12
\item \textsuperscript{216} Ev 189
\item \textsuperscript{217} Statutory guidance (2013)
\item \textsuperscript{218} Ev 162, para 28-29, Ev 191, para 12
\item \textsuperscript{219} Ev 225
\item \textsuperscript{220} Ev w25
\end{itemize}
know the social worker involved with the family they are working with”.221 This underlines the importance of the observation from Annie Hudson, Chief Executive, of the College of Social Work, that it was the quality of the relationship, rather than the model, which was important.222 Action for Children recommended the Children’s Centre Social Worker pilot as best practice, whereby a social worker coordinates services with children’s centres to prevent the escalation of need.223

100. Local authorities need to ensure better co-ordination between children’s services and children’s centres. Information on children and families known to social services should be passed on where possible. In particular, children’s centres should be directly linked to Multi Agency Risk Assessment Conferences (MARAC) to ensure that they are kept informed about domestic violence. The principle behind the named social worker requirement is that there should be clear responsibility for building relations with children’s centres so that action can be taken quickly where necessary. Local authorities should ensure that this is done even where the named social worker model is not adopted. The DfE should revise its statutory guidance to reflect this.

Registration of births

101. There have been trials involving siting the local birth registration service in children’s centres, including an experiment in Knowsley under the Transforming Early Years programme, run by the Innovation Unit for public services.224 The Minister reported that “The evidence from where [such trials have] taken place is very positive about the level of engagement of children and families.”225 She cited an example where a children’s centre had achieved a re-engagement figure of 87.5%.226 These results led to a recommendation from the APPG on Sure Start that registration of births at children’s centres should be made as a matter of course. Vicki Lant of Barnardo’s described this approach as “an incredibly practical, pretty obvious way of engaging families at a point when they may be pleased, open to suggestion and feeling that they want to do as well by their children as they possibly can.”227 Adrienne Burgess of the Fatherhood Institute was similarly positive.228

102. Local authority witnesses were against the proposal on the grounds of cost and staffing.229 There are also questions about whether a children’s centre is always going to be more convenient for parents than the traditional birth register office model, particularly given the move to different ways of organising early years services. The Minister noted the

221 Ev 231
222 Q635
223 Ev 162, para 28-29
224 Radical Efficiency in Action: Transforming Early Years, better outcomes for families at lower cost, Innovation Unit, p39
225 Q879
226 Ibid.
227 Q524
228 Q492
229 Qq 767-8
concerns of local authorities and acknowledged that while “conceptually it is a very attractive idea”, she did “not want to impose extra burdens on local government if they say it does not work for them”. An alternative, recommended by Policy Exchange in a recent report on Sure Start, would be for all local authorities to adopt the “Tell Us Once” option and use it to inform children’s centres of new births.

103. **Registration of births at children’s centres is a powerful engagement tool but we are unconvinced that it is necessarily a practical solution for all local authorities to implement. It is also not cost-free. We recommend that local authorities should be permitted to adopt the practice but not obliged to do so. An approach of presumed consent, where the local authority will pass on information to children’s centres unless specifically told not to, could achieve similar results at lower cost.**

**Use of data by centres**

104. Even if data were made available to centres from their partners, children’s centre workers would need to hone their capacity to read, analyse and use this data. Ofsted told us that “A common factor in weaker centres is that they are not good at obtaining and using data, evaluating their services, and monitoring the take-up of particular groups and families. This diminishes their ability to target their services at those who are most in need within the community”. Recent research by Caroline Sharp of NFER for the Local Government Association also suggests that staff skills in data handling may be an issue, as it is an area “where significant challenges are reported.”

105. Graham Allen’s report on early intervention notes that “development and training for children’s centre staff around data handling is an important consideration for workforce development.” There may also be greater scope for joint training of those from different disciplines in this area to address the problem identified by Family Action that “siloused training of the different disciplines (ie education, health, social work early years) and the differing outcomes looked for in early child development and learning by these professionals are presently obstacles to integration”.

106. **Children’s centre staff need appropriate training in collecting and interpreting data and centre leaders need to be taught how to use the data to drive interventions. It should be the responsibility of local authorities to ensure that the required standards are met by centres. Joint training in data-handling with staff from other agencies would break down barriers and ensure greater understanding of what data is available and how it can be used to target those in need of services. We recommend that the DfE include this in its statutory guidance on children’s centres.**

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230 Q879
231 Policy Exchange, Centres of Excellence? The role of children’s centres in early intervention (2013), p9
232 Ev 180, para 20
234 Early Intervention: the next steps, Graham Allen MP, January 2011, chapter 5 paragraph 51
235 Ev w14
5 Local and central Government: funding, commissioning and strategic planning

Funding

107. Funding streams for early childhood and family services are varied and confusing. In April 2011 the Government removed the ring-fence from Sure Start funding and introduced the Early Intervention Grant (EIG), with the result that it is not possible to put a figure on central government funding for Sure Start from 2011/12 onwards. From April 2013 EIG was transferred to the Department for Communities and Local Government to include in its Business Rates Retention scheme. Funding for the two year old offer was initially included in the EIG but has been transferred to the Dedicated Schools Grant. The EIG, excluding the two year old offer, is decreasing, meaning that there is less money available to spend on children’s centres. Information provided by the LGA, based on DfE returns, shows a total planned expenditure by local authorities on Sure Start and children’s centres of £1.0 bn in 2011/12, falling to £0.95bn in 2012/13: a decrease of 4.6%. Policy Exchange estimates that in 2013/14, spending on children’s centres will fall to around £0.854bn, a total reduction of 28% from 2010. Prospects for local government funding to 2015 suggest that further significant reductions should be expected.

108. Unsurprisingly, these reductions in funding have resulted in reductions in the services provided by children’s centres. The ECCE Strand 3 report found that 72% of centres had experienced changes in services due to cuts and 80% expected changes in 2012/13. Several submissions expressed concern about the impact of uncertainty around funding and further reductions. 4Children reported that “our census shows that centres are being asked to deliver more for less, and are, in many cases, succeeding.” It noted that the “local picture of budget decisions remains highly mixed with some local authorities taking greater steps to protect budgets” but warned that “there will be limits as to what can be done without significant ongoing investment”.

109. 4Children and Action for Children both called for a clearly identifiable funding stream for early intervention. 4Children warned that without this, “local authorities will not prioritise or maintain funding for vital children’s services, and [...] the money which has previously allowed Sure Start centres to deliver for their communities will be spread across the local authority.” Action for Children also called for a re-enforced duty on local authorities to ensure the continued delivery of early intervention services. Other
demands for the re-introduction of ring-fencing for funding for children’s centres were opposed by local authority witnesses who argued that in the past children’s centres “were awash with money” and that under the current arrangements more can be spent on early intervention. The Minister supported the local authority view, saying that “We need to see children’s centres as part of an overall offering in the local area”.

110. Professor Eileen Munro’s review of the child protection system emphasised the importance of early help. An NAO landscape report in January 2013 found that “the Government has signalled its commitment to the principle of early action, but there is little evidence of a concerted shift in resources to early action projects, or cross-government co-ordination, either in consistent definition and measurement or in establishing adequate support structures.” The study also found that “some local authorities seem more determined to use a longer-term approach, but central and local government need to do more to incentivise practitioners to exploit early action potential.” The APPG on Sure Start recommended in July 2013 that the Government commit to shifting 2–3% of spending from late intervention to early intervention each year in the 2016–18 Comprehensive Spending Review.

111. We believe that it was right to remove the ring-fencing from funding for children’s centres because of the different ways in which the centres are used by local authorities and the different services provided by them. In principle, we would welcome the end of ring-fencing for early intervention as a whole to give freedom to local authorities to respond flexibly to needs in their area— if the accountability framework were effective enough to ensure that funding decisions led to improved outcomes for children. Given the current accountability framework, we do not believe that the ring-fence around early intervention spending should now be removed. There should, however, be more transparency on Early Intervention Grant spending by local authorities so that it is clear how much has been spent on different services. We recommend that the Government ensure that this is done.

112. Research evidence shows clearly that investment in early intervention reaps rewards. It is the most effective way in which the gap between the most disadvantaged children and their peers can be addressed. Reductions in spending on early interventions therefore risks being counter-productive, requiring more money to be spent later on.

242 Q737
243 Q794
244 The Munro Review of Child Protection: Final Report A child-centred system, Professor Eileen Munro, DfE (May 2011)
245 Early action: landscape review, National Audit Office, 31 January 2013
246 Ibid., p7
247 APPG on Sure Start, Best Practice for a Sure Start: The way forward for Children’s Centres (July 2013)
Commissioning

113. Local authorities commission children’s centres to deliver specific outcomes based on need, jointly assessed with health and other partners. The Health and Social Care Act 2012 shifted responsibility for public health to local authorities, potentially providing for a closer link with social care and children’s services. From April 2013, Health and Wellbeing Boards under local authorities have a duty to set the strategic direction for health and social care commissioning for a local community through Joint Strategic Needs Assessments (JSNAs) and Joint Health and Wellbeing Strategies (JHWSs). They have been encouraged to ensure that the JSNA and JHWS take account of early years, working in partnership with early years’ services, children’s social services and clinical commissioning groups. The DfE sees children’s centres having a part in “influencing local strategic assessments, and commissioning decisions taken forward by the local authority, in partnership with the Health and Wellbeing Board”, through “assessing strengths and need across the area”.249 From 2015, responsibility for commissioning services for 0 to 5 year olds and health visitors will also move from NHS England to local authorities. These new arrangements should offer greater scope for multi-agency commissioning, which evidence to our inquiry suggested was currently weak, with separate budgets for health and employment services and separate budget-holders.

114. Centre leaders and providers criticised the current approach to commissioning by local authorities, particularly its short-term nature. Barnardo’s stated that: “the tendency of commissioners to offer contracts of three years or shorter, makes it difficult for voluntary sector providers of Sure Start children’s centres to demonstrate either short- or long-term outcomes [...] let alone recoup tender and set-up costs. It is an improbable business model that delivers profit and reliably measurable results within one year and no private sector start-up would plan to do so.”250 Dame Clare Tickell of Action for Children stressed that “the commissioning of children’s centres must provide more emphasis on stability for children and families” through a Government commitment “to developing an approach to funding that is underpinned by long-term planning and consistent support”.251 This would allow a move away from three year contracts, with a primary focus on price. Local authority witnesses pointed out that short-term commissioning was the result of uncertainty over their own budgets.252

115. We believe that multi-agency commissioning makes for the best use of resources and the most informed service delivery. We recognise the difficulties caused by short-term funding decisions and recommend that the Government examine how a longer term view of children’s centre funding can be taken within current spending decision cycles.

249 Sure Start children’s centres core purpose, DfE, April 2012
250 Ev 198, para 34
251 Ev 163
252 Qq725-6
Reconfiguration and closure of centres

116. Ofsted reported that many local authorities are redesigning their centres so that they operate in clusters, leading to a reduction in administration and back office costs and increased opportunities to share specialisms. In addition, an increasing number of centres are being brought together to operate under shared leadership, management and governance arrangements.\textsuperscript{253} In response, Ofsted has revised “its framework so that it is flexible enough to take account of the wide range of organisational structures that are emerging across and within local authorities.”\textsuperscript{254} This means inspecting groups of centres across localities.

117. Research by the NFER found that “leaders and local authority staff were more positive about cluster models (where several Children’s Centres work together on strategic goals) than ‘hub and spoke’ models (whereby a leader of a hub Centre is responsible for the work of satellite centres)”\textsuperscript{255} The leaders felt that they were unable to get to know the families using satellite centres and reported inefficiencies in managing split sites (such as travelling time). A few leaders also complained of increased accountability without the autonomy to remodel their Centres to meet local needs.\textsuperscript{256} The ECCE Strand 3 report, however, found that centres did not think that a single site was the key factor in centre ethos.\textsuperscript{257}

118. In some cases, centres have reduced their services rather than closed. Naomi Eisenstadt expressed concern that this had led to centres which were “half a person and a bunch of leaflets”, thus rendering them ineffective.\textsuperscript{258} She suggested that it would be better to have fewer, better resourced children’s centres in the poorest communities. Others disagreed. Arguments against fewer centres include access difficulties and a need to recognise the natural boundaries of different communities within an area. Closing centres inevitably means that some disadvantaged groups would lose the service and it is highly controversial because they are very popular with parents.\textsuperscript{259} Recent coverage of the planned closures in Oxfordshire illustrates how strongly communities feel about access to local centres.

119. The DfE’s statutory guidance contains a presumption against the closure of individual children’s centres. The LGA argued that this “undermines the flexibility of local authorities to design services in a way that best meets local need and deploys resources to maximum benefit”.\textsuperscript{260} Barnardo’s suggested that rather than closing under-utilised centres, more should be done by local authorities to co-locate services and also to allow the centres to be used in the evenings and at weekends as community facilities.\textsuperscript{261} Children also suggested

\textsuperscript{253} Ev 182  
\textsuperscript{254} Ibid.  
\textsuperscript{255} Ev 176  
\textsuperscript{256} Ibid.  
\textsuperscript{257} ECCE Strand 3, p. xxvii  
\textsuperscript{258} Q24  
\textsuperscript{259} Q19  
\textsuperscript{260} Ev 224  
\textsuperscript{261} Ev 198
that “the priority for policymakers ought not to be the closure of Children’s Centres or withdrawal of services, but rather sustaining the existing network and ensuring that value is maximised”.262 For example, East Riding of Yorkshire Council told us that their centres were used as training venues in evenings and at weekends for practitioners, foster carers and support groups for parent/carers.263

120. Local authorities are also required to involve communities in the development of children’s centres where significant changes to the range and nature of services are planned but one witness, Sue Owen of NCB, told us that “one of the things we lost fairly early on in the Sure Start programme was community involvement—a much greater role for local communities in commissioning services, designing services, and thinking about what services their local area needed.”264 She suggested that this type of “bottom-up push” might be needed now. ATL considered that the statutory guidance needed to be more explicit on what constitutes a significant change and that the duty must be strengthened to ensure that parents could make their views heard and influence any final decision by the local authority.265

121. Closing centres is not popular but we accept that the current pattern of provision may not be the best model to meet the needs of different areas. Change in the network may make centres as a whole more effective. We therefore welcome the innovative approach being taken to adopting different models of provision. New patterns of provision will require fresh responses from centre workers and their partners. Local authorities should be prepared to help with this, whether with training or other practical assistance.

122. An existing centre should be closed only where there has been proper consultation with the public and where the local authority has made a strong case for a better way of achieving outcomes. Alternatives to closure, including expansion and co-location of services, should be considered as options in the consultation. Outstanding children’s centres should be encouraged by their local authorities to become public service mutuals or to devise other methods to continue their work.

Local authority accountability

123. Local authorities are held accountable for the effectiveness of children’s centres through Ofsted inspections of centres and of the authority’s children’s services as a whole, but there is little to suggest that a general failure of children’s centres would lead to serious repercussions for the local authority. The new outcomes framework we recommend earlier in this report would help to focus minds and attention but would not be sufficient unless greater accountability for local authorities were attached to that framework.

262 Ev 206
263 Ev 234
264 Q351
265 Ev w29
124. In its July 2013 report, the Social Mobility and Child Poverty Commission highlighted this difficulty and expressed concern that “the Government’s objectives for the early years, including high quality early years education and children’s centres (especially for low income parents), are threatened by lack of adequate mechanisms for Government to hold Local Authorities to account”. It recommended that the Government should prioritise the development of new local accountability mechanisms, including on local delivery of children’s centres and availability and quality of free early learning places for 2, 3 and 4 year olds. [... This should include] central collation and public reporting of information, perhaps by Ofsted, on the state of provision of early education and children’s centres in each Local Authority area, to include: the number of providers, qualifications of staff, hours of opening, quality and population served. The goal should be to strengthen local accountability and parental choice, whilst enabling a central social mobility objective (closing developmental gaps) to be achieved.

125. The Minister told us that she was “keen to see local authorities held to account for their overall performance in the provision of services and early intervention for young children, rather than just the children’s centres, because it is hard to isolate the specific impact of the children’s centre as opposed to the overall range of services the child and parent have.” She agreed that “we need to make sure local authorities are clear about what the outcomes are of the programmes they run and what they achieve” and that “Local authorities should ultimately be accountable for the outcomes of those young children”.

126. The accountability framework must ensure that the lead member and Director of Children’s Services remain focussed on early years. Questions raised by Ofsted about children’s centres in an authority should trigger the same reaction as questions about schools or other children’s services. We recommend that the Government consult on a new accountability framework for local authorities’ children’s services that puts as much weight on early years and children’s centres as on schools and children’s social care.

**Government policy**

**Two year old offer**

127. The Government extended free pre-school education and care to 20% of all two year olds in September 2013 and will extend it further to 40% from September 2014 at a cost of £534m in 2013–14 and £760m in 2014–15. The offer comprises 15 hours of free nursery care per eligible child. According to the DfE, “success will be measured through an increase in...
in the proportion of disadvantaged two year olds accessing an early learning place.” 271

Results of research into a pilot run between 2006 and 2008 were not promising, but the new scheme differs from that piloted by offering double the hours per week in good or outstanding provision. 272

128. Several concerns were raised with us about the two year old offer in the context of children’s centres. Dame Claire Tickell cited the offer as an example of how children’s centres were not integrated properly within the wider system. 273 Other witnesses were concerned about the impact on the childcare provision for other age groups; on the finances of children’s centres since the funding for two years olds was below cost; and on other services because centres were expected to provide family support to the two year old in addition to early education without additional funding for this. 274 Finally, Naomi Eisenstadt described the offer as “nuts” because it should be “a conditional offer on a kind of support within a children’s centre”. 275 Other witnesses considered that the link between the two year old offer for children and training or employment support for parents should be encouraged but not made mandatory. 276

129. We also heard evidence of differences in the funding provided to local authorities to deliver the provision. The National Day Nurseries Association told us that, although the Minister had asked local authorities to spend at least £5.09 per hour, “some local authorities are still only spending £4.85 for the two year olds”. 277 The Minister agreed that “it is unfair at the moment and it is vastly disparate from local authority to local authority”. 278 Responding to concerns about the availability of places in appropriate settings, she told us that she had “not received any evidence that there is a shortage of places for two year olds”. 279 Local authority witnesses agreed that this would not be a problem. 280 By 11 November 2013, 70% of the necessary places had been found for two year olds. 281 This leaves some way to go in the current year, and even further for next September.

130. We welcome the two year old offer but have concerns about the funding, the quality of providers, the availability of places in effective settings and about the impact on places for other age groups. We recommend that local authorities monitor and report back to Government on the number of places available in good or outstanding settings in 2013/14 in order that action can be taken before September 2014 if necessary.

271 Response to Education Select Committee questions on the DfE Main Estimate 2013-14, DfE, 12 June 2013, published on Committee website

272 The Early Education Pilot for Two Year Old Children: Age Five Follow-Up, DfE Research report, March 2013

273 Q34

274 See for example Q53 [Angela Prodger], Q397 [Purnima Tanuku], Qq398-400 [Liz Klavins]

275 Q36

276 See for example Ev 206

277 Q351

278 Q814

279 Q870

280 Qq 776-81

281 HC Debates, 11 November 2013, c627
131. There is a clear disparity in how funding is being used by local authorities. The Government should monitor funding and the impact on positive outcomes for children. We recommend that there should be flexibility in the use of the funding by local authorities to offer direct support or parent intervention where families are not just poor but also vulnerable.

**Central Government policy on early years**

132. There are no quick fixes in early years provision, nor can the results of interventions be demonstrated quickly. We heard some criticism of the lack of integration between various elements of Government policy. For example, Professor Nutbrown expressed concern that the Government was rushing into implementation of new policies on qualifications without proper consideration. Among other witnesses, Action for Children argued that there was a “disconnect” between the Government’s offer of free early education and early intervention services offered by children’s centres, explaining that “parents have the biggest impact on their children’s educational attainment, so that efforts to improve school readiness will be undermined if early intervention and parenting support is detached from the early education offer.” It called for Government policy “to promote a joined up early years offer for children and families.” This is not just a recent problem. Anne Longfield of 4Children pointed out that “over the years significant amounts have rightly been spent on early years and childcare provision, but effective co-ordination between programmes is what, at times, has been missing.”

133. The July 2013 report from the Social Mobility and Child Poverty Commission found gaps in the Government’s long-term ambition for early years provision and identified “a need for far greater clarity about the Government’s long-term objectives”. The Commission claimed that “it is unclear what final destination Government is aiming for, when it hopes to get there and how it will know if it has been successful”. It recommended that the Government should “set out a long-term plan for narrowing the gaps in development in the early years, including how it will prioritise the quality of early education, children’s centres and the role of parenting, to improve children’s development.”

134. In the course of this inquiry, we have noted several contradictions in policy. For example, the Minister evinced no enthusiasm for maintained nursery schools; yet these are widely recognised to provide the highest quality early education and—when combined with children’s centres—offer the most effective model for achieving the child outcomes that children’s centres were set up to achieve. In the absence of a clear strategy to secure their future, many maintained nursery schools have closed in the last decade, with the result that the opportunity to build on them to create a seamless integrated approach for parents and children has been lost. There is also a clear tension within the Government’s

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282 Q707
283 Ev 165
284 Ev 209
285 Social Mobility and Child Poverty Commission, Social mobility: the next steps, July 2013, p14
policy on implementing changes to early years qualifications, as we explore in the next chapter of this report.

135. In general, there is a lack of clarity about how all the different services involved work to achieve the greatest impact in the early years stage. The Gross report on information-sharing called for “a single birth to five ‘programme’, setting out a single set of outcomes for children and families, the roles and responsibilities of different agencies and professionals in delivering those outcomes, and a single ‘reward’ system for achieving them”.286 The Ministerial response did not address this directly but Elizabeth Truss MP acknowledged to us that cross-Government working may not be at its most effective in the early years: “One of the issues we have is that it is very difficult for local authorities to merge services or create one-stop shops, because of the different instructions they get from different Government Departments”. She also pointed to the “history of lots of different programmes being administered at a local level with different funding streams [...] with their own targets”.287 The Minister assured us that DfE was working with the Department of Health to ensure that “there is a clearer message”288 and that “the silos between Government are also reducing [...] which is very important”.289

136. There has been, and continues to be, too much short-term and disparate government policy in the area of early years. Too much reorganisation of services impedes professional relationships and communication. The change in funding for early intervention from DfE to DCLG emphasises the role of local authorities in tailoring services to meet local needs but breaks the direct link between the Department for Education and children’s centres. Changes in funding streams also lead to short-term contracts and distract centres from their crucial work with disadvantaged children and families. We recommend that the Government set out coherent, long-term thinking on early years and the place of children’s centres within that, including funding, responsibility across Whitehall and accountability.

137. We are particularly concerned about Government policy towards maintained nursery schools. They offer capacity and a recognised level of expertise which needs to sit at the centre of the Government’s proposals on Early Years Teaching Schools. We recommend that the Department for Education set out a strategy for ensuring the survival of those that remain and for encouraging the further development of the network of nursery schools with children’s centres throughout the country.

286 Gross report, p6
287 Q792
288 Q789
289 Q875
6 Workforce and leadership

The workforce

138. Children’s centres employ a range of staff, including early years specialists, family support workers and health and social care professionals. Although many issues were raised with us about the workforce, we recognise that some of these were specific to early years workers and not necessarily applicable to all staff in children’s centres. The Minister was right to point out that early years qualifications in particular are “mainly an issue for the 96% of childcare that is not provided in children’s centres”. 290 Nevertheless, there are some wider lessons which can be drawn and which are directly applicable to children’s centres.

139. Historically, the entry requirements to the early years sector have been very low, with many qualified only to NVQ level 2. As Susan Gregory of Ofsted told us, “you need a higher qualification at entry level to work with animals than you do to work with young children.”291 Linked to this, perhaps as both cause and effect, the status and pay of early years workers have also been low, a point acknowledged by the Government in its proposals on More Great Childcare. 292 To us, the Minister stressed that “we have the biggest gap in salaries between those who work in nurseries and those who work in schools of any country in Western Europe”. She argued strongly that: “That is wrong, because we know that early education is at least as important as later-on education”.293 The impact of low status is felt beyond attracting high quality recruits into the profession: Naomi Eisenstadt described how the perceived low status of children’s centre staff can create a barrier to successful multi-agency working, adding that “if you do not have status within the community and you ring the health agency, they are not going to ring you back.”294

140. During the course of our inquiry, the Government set out its proposals to reduce the number of different early years qualifications, to improve the quality of training and to raise the status and quality of the workforce by replacing the current Early Years Professional Status qualification with a new grade of Early Years Teacher and Early Years Educator. Starting in 2013, Early Years Educators will train at level 3 (A level equivalent) and need to have good GCSEs in English and maths. Early Years Educators will act as assistants to Early Years Teachers and, over time, the Government expects that group childcare will “increasingly be delivered by Early Years Teachers and Early Years Educators”. Early Years Teachers will be graduates and will need to meet the same entry requirements and pass the same skills tests as trainee school teachers, but will specialise in

290 Q812
291 Q299
292 More Great Childcare: Raising quality and giving parents more choice, DfE (January 2013), p17
293 Q797
294 Q6
early childhood development. They will not, however, be accorded Qualified Teacher Status (QTS), in the same way as primary and secondary teachers.295

141. A further development is Teach First for the Early Years which extends the model which has been successful in attracting high-achieving graduates into schools to the early years sector. There is currently a pilot in London involving 16 teachers but the Minister was keen to see it expand.296 She saw the achievement of “a much greater status for early years teachers” as “the whole point of the Teach First for the early years programme”.297

142. The Minister told us that Charlie Taylor, Chief Executive of the National College for Teaching and Leadership (NCTL), was working “to create a 0 to 18 teaching workforce”.298 She stressed that she wanted to see “a much greater consistency across the teaching workforce and much less of a silo between the early years and primary school”.299 On the other hand, she also stressed that the reason why early years teachers were not being offered QTS was because “to move that early years professional to being of teacher status would create a cadre of people whose terms and conditions and salary expectations would not fit with what we have got at the moment”.300 Instead, the policy was to move “towards teachers and early years teachers having the same status over a period of years”.301 Raising the level of qualification of early years teachers to the same level as primary school teachers was one of the “stepping stones” to this end:302 “If we suddenly created QTS teachers who had the same terms and conditions as teachers, they simply would not be able to be employed in the PVI sector, so we defeat the object”.303

143. Evidence from Ofsted inspections and from the EPPE longitudinal study shows a positive link between the qualification levels of staff and the quality of early education provided.304 Under its new inspection framework, Ofsted will report on the qualifications of staff. The Minister regarded this as “very important” because it “will signal to parents that the quality of staff is a critical factor”.305

144. The Government is right to want to increase qualifications of the workforce but difficulties remain with status and pay. The message that Early Years Teachers are not equal to teachers in schools is strong and unjust. It is not enough for the Minister to articulate a vision of equality with other teachers–she has to set out a course of action with milestones on the way to a position where equal pay attracts equal quality. We recommend that the Department for Education set out such a strategy. We also

295 More Great Childcare, pp22,29
296 Q798
297 Q798
298 Q797
299 Q798
300 Q887
301 Q819
302 Q886
303 Q887
304 See for example Q293 [Susan Gregory] and findings from EPPE
305 Q817
recommend that an evaluation of the impact of the introduction of Teach First to the early years sector be carried out before the programme is expanded beyond the current pilot.

Training and development

145. Professor Melhuish told us that “there is certainly strong evidence that better trained staff do provide better quality services, which have an impact on child outcomes”. 306 “Taken as a whole, staff in Sure Start centres are better qualified than in the PVI sector, with one in five in children’s centre nurseries having a degree.” 307 The value of this was underlined by the head of a children’s centre in Corby where a number of staff had taken BA and MA courses. She described the “enormous” impact on the centre “in terms of research on us as a setting [...] because there is a reflective conversation and dialogue that takes place”. 308

146. The NCB recommended that children’s centre staff should “undertake initial training and regular CPD [Continuing Professional Development] in parental and family engagement, particularly around disadvantaged and/or vulnerable families so that they have the skills and confidence to engage with parents and families”. 309 Sue Owen explained that this should be backed by “training plans within every setting, in order to identify the skills that staff have and the career trajectories they want to engage in, and what the needs of that setting are in terms of the qualifications of their staff”. 310 There are often training plans held by local authorities but, given that many centres are in the PVI sector, a new requirement on each centre to adopt a plan would have to be built into funding agreements. 311 Ben Thomas of Unison pointed to issues around limited access to CPD, including time-off from work, and the introduction of fees for first level qualifications in NVQ Level 2 and 3. 312

147. There is an under-utilised source of expertise and training within the sector in the form of outstanding and experienced practitioners in the centres. To explore how to make best use of this resource, Early Years Teaching Centres have been set up as a two year project, funded by the DfE, to use skilled practitioners in outstanding children’s centres/nursery schools as trainers for staff in their own and other centres. The aim is to establish a network of “Early Years Teaching Schools” along the lines of the Teaching Schools developed by the school sector. The Minister told us that Charlie Taylor was looking at “the teaching-school model in early years”. 313

148. Others identified the need for a career structure within children’s centres, not least to assist retention. Sue Egersdorff explained that “in terms of early years, it is very difficult to

306 Q257
307 Q468
308 Q146 [Ellen Wallace]
309 Ev 185
310 Q435
311 Q696
312 Q692
313 Q902
talk to a high calibre graduate about where they may be and how we can stop them being snaffled off into primary leadership [...] we need to retain some of them to be strong advocates and ambassadors for early years.³¹⁴ The Children’s Society recommended creating a professional pathway specifically for children’s centre staff who work with disadvantaged families, for example, an NVQ in family support and outreach, to raise the status of these workers with other professionals.³¹⁵ To attain the same end, the IPPR recommended a Royal College for early years practitioners which would be responsible for designing qualifications, commissioning training and accrediting workers.³¹⁶ Witnesses to our inquiry were generally supportive of the idea but differed on whether the proposed college should be part of a College of Teaching or a College of Early Years bringing in health professionals as well.³¹⁷ Ben Thomas of Unison considered that the discrepancy in pay between early years teachers and teachers in primary and secondary schools made a professional college of early years unlikely.³¹⁸ We agree. There needs to be significant development within the workforce of children’s centres before it can be determined whether early years professionals should be admitted to a separate college or a college of teaching.

149. **CPD is vital and should be encouraged by all centres.** We recommend that the Ofsted inspection framework include checking that each centre has a training plan and that the plan is being implemented. We support the development of Early Years Teaching Centres as an effective way of passing on best practice and promoting workforce development. Nursery schools with children’s centres should be at the centre of these hubs. The NCTL should take on a role in developing this and should also set out a career structure for children centre staff, including how the new qualifications and other CPD match to this pathway. The NCTL should also continue their work on systems leadership in early childhood education and their work on leadership standards in the early years.

**Leadership**

150. Dame Clare Tickell told us that “it is really important that we recognise the importance of leadership and a high quality of professional person who is running children’s centres in order to have the kinds of conversations that we need to have”.³¹⁹ In this she was supported by several other witnesses, including Naomi Eisenstadt who cautioned: “never underestimate the skills you need to run a Sure Start centre [...] we really underestimated the skills required and how complex it is”,³²⁰ and Caroline Sharp of NFER who described the role of children’s centre leader as “a really difficult and demanding job to do well.”³²¹

³¹⁴ Q678
³¹⁵ The Children’s Society, Breaking Barriers: How to help children’s centres reach disadvantaged families (2013)
³¹⁶ IPPR, August 2012
³¹⁷ Qq 657-60
³¹⁸ Q658
³¹⁹ Q6
³²⁰ Q64
³²¹ Q59. See also Q137 [Christine Whelan] and Q139 [Angela Prodger]
151. There are no formal entry requirements for running a children’s centre. The ECCE Strand 3 report found that “There was great variety in the leadership and management of centres” but that “academic qualifications appear not to be [the] key ingredient” of leadership. Caroline Sharp told us that centre leaders are “drawn from a diverse range of backgrounds which means that they will not necessarily have experience or formal training in child development and/or family support.” She concluded that “leadership training is therefore of considerable importance”. Anne Longfield of 4Children also suggested that “There is development needed in terms of enabling people to be more entrepreneurial and enabling them to make partnerships with high status”, while Julie Longworth from Action for Children argued for “managers with skills in performance management and skills and experience in safeguarding”.

152. The DfE via the National College runs a National Professional Qualification in Integrated Centre Leadership (NPQICL), designed for leaders of children’s centres delivering integrated services. The qualification is currently under review and, in early September 2013, Brian Tytherleigh of the NCTL told us that the college was “waiting for a steer from policy colleagues to develop that review and the terms of that review and see where we go next”. We heard much concern about the review. Although it was generally accepted that the qualification needed updating, particularly given the change in structures of centres, it was clearly much valued. Some witnesses considered that it should be made mandatory. There was also general agreement that it should include face to face meetings and exchanges, and not be delivered solely online. Caroline Sharp’s research found that “centre leaders wanted to retain opportunities for reflection and professional exchange.” She concluded that “there is a need to secure the future pipeline of highly skilled and well-prepared centre leaders.”

153. Barnardo’s suggested that the National College was also well-placed to promote system leadership and that it “could promote and enable networks of national, regional and local leaders of integrated centre provision to reflect the parallel school leadership model endorsed by the College”. Vicky Lant explained that this would include enabling children’s centre leaders going to see “terrific exemplars of good practice and [developing] that in their own provision”. Similarly, a recent report by Policy Exchange recommended that the NCTL “should develop leadership programmes for future

322 ECCE Strand 3, p. xxvii
323 Ibid, p55
324 Ev 176
325 Q543 [Anne Longfield]
326 Q543 [Julie Longworth]
327 Q662
328 QQ 663-4
330 Ev 200
331 Q518
Children’s Centre managers, based on successful models employed in the school sector such as Teaching Leaders”.332

154. The Minister told us that “the right person to manage a children’s centre [...] will depend on the exact nature of the children’s centre and how it is focused”.333 This points to the importance of recognising the changes that have occurred in the sector and the fact that different skills will be required in different types of centre. The NPQICL needs to be overhauled to reflect current practice in children’s centres and then offered widely to new leaders. The course should retain the much valued elements of professional exchanges and time for reflection. It is vital that practitioners are involved in reviewing and designing the qualification.

155. The NCTL should take on the role of promoting locality leadership to spread best practice and encourage innovation, as it does in schools.

332 Policy Exchange (2013), p 9
333 Q812
7 Conclusion

156. Children’s centres are held in great affection. Although there is a strong popular image of what a good centre is or should be, we found a structure in need of clarity. It is no longer possible, if it ever was, to think of a children’s centre as a single model replicated in all areas. Our proposed three part structure of fully integrated centres, centres as part of a school and family centres is intended to make planning and policy delivery clearer. It would also allow more appropriate accountability measures to be put in place. It is inevitable that the pattern of provision will continue to change. There will be closures and further mergers of centres, with more centres working across localities. What is important is that this process is handled strategically by local authorities, with community involvement, to ensure that those in need have ready access to the right services and universal services are offered to good effect.

157. The Minister told us: “Early years is getting increased attention and people are excited about it. We want to keep them excited about it, so we are going to be raising the profile of early years even more.”334 The critical importance of early years for future life chances makes this a fundamental test of the Government’s seriousness in closing the attainment gap between the most disadvantaged children and their peers. Their policy and strategy for the early years therefore need to be made clear. To ensure that the early years are also treated as a priority for local authorities, the accountability framework must ensure that the lead member and DCS remain focussed on early years. Questions raised by Ofsted about children’s centres should trigger the same level of response as questions about schools or other children’s services. The focus of centres, local authorities and central Government must be on improving outcomes for the most vulnerable and disadvantaged children and their families.
Conclusions and recommendations

Definition and purpose of Sure Start children’s centres

What is a Sure Start Centre?

1. We believe that it is necessary for reasons of policy-making and accountability that there is clarity about what is meant by a children’s centre. This is not the case at the moment when the only distinction is between phase 1, 2 and 3 centres. There is confusion, in particular, between centres offering childcare and/or early education and those which do not. It is important also to recognise that some centres work across localities and may be inspected as groups by Ofsted. For the purposes of this report, we have identified three distinct types with different roles and functions:

   • Children’s centres based around nursery schools, offering a full service, with some acting as teaching centres and network hubs, with fully integrated services

   • Children’s centres as part of or managed by a school, usually a primary school, on the extended school model

   • Children’s centres that operate as family centres, offering family support and opportunities for community participation. These offer no childcare or early education but are used by local authorities for targeted prevention services. (Paragraph 15)

2. In the current economic circumstances it is unrealistic to demand fully-integrated centres in all communities and this may not be the most suitable model in all cases. It is the responsibility of local authorities to determine what is required on the basis of need and to adopt the model of delivery, including the number and pattern of centres, which provides the best outcomes for children and families. Local authorities can then more easily be held accountable for how they perform against those key outcomes. (Paragraph 16)

3. To assist its policy-making, the Government needs to have a clearer picture of the pattern adopted by local authorities in fulfilling their statutory obligations with regard to Sure Start children’s centres. We recommend that the DfE collect data from local authorities on the pattern of centres commissioned based on the model we set out above. (Paragraph 17)

The core purpose

4. We are not convinced by the Minister’s defence of the wording of the core purpose which we judge to be too vague and too broad, whichever version is used. It is not possible for a small children’s centre which acts principally as a signpost to other services to fulfil such a wide-ranging and all-encompassing purpose. For other centres, the core purpose is too all-encompassing to be of any use as a guiding principle of their aims and priorities. In neither case is it possible for a children’s centre to achieve such expectations alone. It is right that councils should have the freedom to organise their services to achieve the best outcomes for children but we are not convinced that setting
a universal core purpose for all children’s centres assists them to do this. We recommend that the core purpose be reviewed and reshaped to focus on achievable outcomes for children’s centres to deliver for children and families, and to recognise the differences between the three types of centre. (Paragraph 20)

**Universal or targeted services**

5. Funding pressures inevitably mean that greater targeting of services must occur but it is important that all families are able to access services through children’s centres and universal services play a significant role in removing the stigma from attending centres and in encouraging families to engage with centres in the first place. The Government must make clear in its statutory guidance that local authorities should have regard to the relationship between universal services and the effectiveness of targeted prevention services when planning local provision. (Paragraph 24)

**Priority services: children or parents**

6. Clarity is needed on who children’s centres are for and the balance between the needs of parents and those of the children themselves. The core purpose gives scope for a focus on parenting skills but is vague about parental “aspirations” and what this means for child development. It is also not clear how far centres are meant to offer training for parents in employment skills. We recommend that the Government address these issues in its review of the core purpose. (Paragraph 28)

7. The 0 to two year olds are a key group but not the only one. Equal attention should be given to the crucial pre-school period from two to five, when children may be in early education but will not necessarily have access to other services except through children’s centres. Priority should be given on the basis on individual need and there should be no fixed restriction due to the age of the child. Local authorities are best placed to decide the age range to be served by the services they commission through children’s centres. (Paragraph 29)

8. Centres are required in legislation to provide activities for young children and it is not acceptable for any centre to operate without direct contact or engagement with children: local authorities should ensure that the statutory requirement is met and Ofsted should draw attention to any centres in breach of the requirement in its inspection reports. (Paragraph 30)

**Childcare and early education**

9. We consider that it is not necessary or practical for all centres to run their own education with care but it is essential that all centres build close links with high quality early education/childcare providers. For the majority of centres that do not have childcare or education on site, there are questions about how well they can fulfil the expectations in the core purpose that they deliver improved outcomes for young children and reduce inequalities in child development. The Government must set out clearly how these expectations apply in such cases. (Paragraph 35)

10. Research shows that contact with qualified teachers enhances outcomes for children. All centres require input from a qualified teacher to help shape their offer to, and their
work in direct contact with children. The Government was wrong to remove the requirement for a link with a qualified teacher and we recommend that the decision be reversed. (Paragraph 36)

Working with partners

11. The difference in the size and structure of children’s centres makes it impractical to stipulate that all relevant health services should be delivered through children’s centres. Physical co-location may be desirable in some cases but it is not essential: it is more important that there is close working between the different services and that parents are helped to find their way between them. The priority should be integration of services, and the quality of that integration, rather than co-location. Parents should not be expected to tell their story three times to three different professionals; professionals must share information and develop a seamless integration of services, wherever those services are delivered. (Paragraph 44)

12. We welcome the new integrated 2½ year old health check as a demonstration of closer partnership-working with shared objectives. Joint training for the integrated check might overcome some of the barriers between the professions. We recommend that the Government incorporate joint training between the different agencies involved into the implementation of this policy. (Paragraph 45)

Working with childminders and other education providers

13. Children’s centres need to see childminders as both important customers and partners. Centres should take on a role in assisting childminders. We understand the concerns expressed about centres running childminder agencies. This certainly would not be appropriate for all centres but it should be a matter for individual decision whether taking on the role of a childminder agency would help to achieve a centre’s core purpose. (Paragraph 48)

14. There is significant potential to improve outcomes and provide integrated services where heads are leading and managing children’s centres as part of nursery schools or schools. Where the children’s centre leader is part of the senior management team of the school as a whole and seen as an equal partner, there is likely to be more focus on realising these benefits. (Paragraph 50)

15. The Government’s proposals for a new baseline assessment of children upon entering reception may lead to improvements in primary school accountability, but a better procedure is needed for passing on richer information on individual children from children’s centres to schools and nurseries. Clearer guidance is also needed on how schools should use this information. This applies equally to assessments of individual children passed on from childminders to children’s centres and schools. We recommend that the Government examine how this can be done. (Paragraph 51)
Outcomes and accountability

Measuring outcomes

16. We agree that local authorities should be held to account for outcomes for their children across the piece but there is still a strong case for being able to measure the performance of and contribution made by individual centres. We recommend that the Government develop a new national outcomes framework, in consultation with the sector. This would increase the accountability of centres to parents, local authorities and the Government. Any framework must be usable by staff and include meaningful, achievable outcomes and be capable of adaptation to the different kinds of centre. (Paragraph 55)

Inspection

17. It is important to distinguish between early education and children’s centres in terms of inspections. Ofsted needs to act on the research which questions its expertise in inspecting provision for the under-threes and address other concerns about its inspections. It also needs to demonstrate that its framework is adaptable enough to allow a meaningful assessment of a centre offering a few, targeted services as well as of a centre offering a wider range as identified in our three-part structure at the beginning of this report. Ofsted must also make clear to centres that a good or outstanding rating does not mean that they have no need for further improvement. (Paragraph 60)

18. Ofsted does not have the resources to assist improvement in all 3,000 individual centres. We recommend that the Government clarify who is to fill this gap if local authorities are no longer able or empowered to help with improvement. The Government should recognise the role in sector improvement of Early Years Teaching Centres where nursery schools that are also children’s centres assist leaders and staff in other centres, and the Early Years Teaching Schools, where nursery schools help other schools. (Paragraph 61)

Evidence-based interventions

19. Evidence-based programmes are not a panacea but they have a part to play in the services offered by centres. Research shows that what is important is how programmes are delivered, by whom and to whom. We agree with the Minister that it is important to look at the broader culture of evidence-based practice, rather than individual programmes. Establishing a culture in which centres expect to use evidence-based programmes is key. This needs to be done alongside consideration of other factors which are known to influence outcomes such as graduate and teacher trained staff and access to high quality early education experiences. (Paragraph 67)

20. The use of evidence-based programmes in children’s centres is developing but more training needs to be given to help staff understand and implement the programmes correctly. Centre leaders need to ensure that they are aware of best practice both in choosing programmes and putting them into effect. The EIF should issue guidance on how programmes can be used and implemented in the context of children’s centres. Such programmes should include examples of local practice as previously validated and shared by the C4EO. Centres which have developed their own evidence-based
programmes should also be encouraged to have them validated through the EIF. (Paragraph 68)

21. Local authorities need to be clearer about the outcomes they expect from programmes and how these can be monitored. Authorities also need to be clear about their role in commissioning programmes and their accountability for commissioning services. We recommend that this is set out by the Government in its statutory guidance. (Paragraph 69)

**Payment by Results**

22. We agree with the Minister that Payment by Results is not appropriate for the type of services offered by children’s centres and we are pleased that the Government does not intend to pursue this approach. (Paragraph 71)

**Decision-making and governance**

23. As we have argued elsewhere in relation to schools, good governance is vital both in terms of the right structures and the effective performance of those involved. The governance of children’s centres must become stronger and more formal like an effective school governing body and linked to their statutory duty. Parents need to be more involved in children’s centres but within a clear framework to ensure that one group does not dominate. We recommend that the DfE take the necessary statutory steps to bring this about. (Paragraph 75)

24. Local authorities should improve the quality of data given to advisory boards and put more effort into encouraging all sections of the community to contribute to boards. We look forward to learning the outcome of the DfE’s further consideration of the need for closer monitoring of the adherence of local authorities to the statutory guidance on these issues. (Paragraph 76)

**Research into effectiveness**

25. We recommend that the Government continue to fund the ongoing research into children’s centres and commission more work into what makes children’s centres of the three distinct types effective in improving outcomes for children. In particular, research is needed into what kind of engagement with parents in their children’s learning in the family home makes the difference in narrowing the gap between the most disadvantaged children and their better-off peers. (Paragraph 78)

**Reaching children and families in need**

**Disadvantaged groups**

26. Local authorities are obliged under the Children Act 1989 to identify the number of children in need in their area and also to support their families. This provides a framework for identifying those in need but we recommend that there be a new duty on local authorities to put these children and families in contact with services, including children’s centres. Local authorities and health professionals should seek out the most vulnerable children and also do more through their websites and other services to raise awareness of children’s centres. (Paragraph 83)
27. We recommend that the DfE restore the national collection of data on the reach of individual centres in order that both good and poor practice can be identified and monitored, including the effectiveness of centre services and the impact on children in the community. Ofsted could use this data to assist them in their role of requiring local authorities and centres to account for those who do not attend. (Paragraph 84)

28. Barriers to involving disadvantaged groups and others, such as fathers, who are reluctant to engage with centres must be addressed in practical ways. Children’s centres need to learn from the best practice of those who have been successful in doing this, including offering services outside school hours and terms to enable more people to take advantage of their services. Again, networks of centres, such as Early Years Teaching Centres, have an important part to play in this. (Paragraph 85)

Involving parents in children’s centres

29. It is important that centres involve parents through parents groups and in other ways. Local people need to be encouraged to take a stronger role in influencing the management of children’s centres. Volunteering is particularly important and should be encouraged both in itself and as part of a career route into employment for many parents. Practical support, such as training, childcare vouchers or transport, could make a significant difference in encouraging this kind of involvement. (Paragraph 90)

Data-sharing

30. We welcome the Gross report on information-sharing in the foundation years. Data-sharing is vital: the DfE must strengthen its guidance on health services and local authorities sharing data with children’s centres. We recommend that the DfE and the Department of Health audit where this is not happening and ensure that the appropriate protocols are put in place. The Government should report back on its findings. (Paragraph 97)

Child protection and children in need

31. Local authorities need to ensure better co-ordination between children’s services and children’s centres. Information on children and families known to social services should be passed on where possible. In particular, children’s centres should be directly linked to Multi Agency Risk Assessment Conferences (MARAC) to ensure that they are kept informed about domestic violence. The principle behind the named social worker requirement is that there should be clear responsibility for building relations with children’s centres so that action can be taken quickly where necessary. Local authorities should ensure that this is done even where the named social worker model is not adopted. The DfE should revise its statutory guidance to reflect this. (Paragraph 100)

Registration of births

32. Registration of births at children’s centres is a powerful engagement tool but we are unconvinced that it is necessarily a practical solution for all local authorities to implement. It is also not cost-free. We recommend that local authorities should be
permitted to adopt the practice but not obliged to do so. An approach of presumed consent, where the local authority will pass on information to children’s centres unless specifically told not to, could achieve similar results at lower cost. (Paragraph 103)

**Use of data by centres**

33. Children’s centre staff need appropriate training in collecting and interpreting data and centre leaders need to be taught how to use the data to drive interventions. It should be the responsibility of local authorities to ensure that the required standards are met by centres. Joint training in data-handling with staff from other agencies would break down barriers and ensure greater understanding of what data is available and how it can be used to target those in need of services. We recommend that the DfE include this in its statutory guidance on children’s centres. (Paragraph 106)

**Local and central Government: funding, commissioning and strategic planning**

**Funding**

34. We believe that it was right to remove the ring-fencing from funding for children’s centres because of the different ways in which the centres are used by local authorities and the different services provided by them. In principle, we would welcome the end of ring-fencing for early intervention as a whole to give freedom to local authorities to respond flexibly to needs in their area—if the accountability framework were effective enough to ensure that funding decisions led to improved outcomes for children. Given the current accountability framework, we do not believe that the ring-fence around early intervention spending should now be removed. There should, however, be more transparency on Early Intervention Grant spending by local authorities so that it is clear how much has been spent on different services. We recommend that the Government ensure that this is done. (Paragraph 111)

35. Research evidence shows clearly that investment in early intervention reaps rewards. It is the most effective way in which the gap between the most disadvantaged children and their peers can be addressed. Reductions in spending on early interventions therefore risks being counter-productive, requiring more money to be spent later on. (Paragraph 112)

**Commissioning**

36. We believe that multi-agency commissioning makes for the best use of resources and the most informed service delivery. We recognise the difficulties caused by short-term funding decisions and recommend that the Government examine how a longer term view of children’s centre funding can be taken within current spending decision cycles. (Paragraph 115)

**Reconfiguration and closure of centres**

37. Closing centres is not popular but we accept that the current pattern of provision may not be the best model to meet the needs of different areas. Change in the
network may make centres as a whole more effective. We therefore welcome the innovative approach being taken to adopting different models of provision. New patterns of provision will require fresh responses from centre workers and their partners. Local authorities should be prepared to help with this, whether with training or other practical assistance. (Paragraph 121)

38. An existing centre should be closed only where there has been proper consultation with the public and where the local authority has made a strong case for a better way of achieving outcomes. Alternatives to closure, including expansion and co-location of services, should be considered as options in the consultation. Outstanding children’s centres should be encouraged by their local authorities to become public service mutuals or to devise other methods to continue their work. (Paragraph 122)

**Local authority accountability**

39. The accountability framework must ensure that the lead member and Director of Children’s Services remain focussed on early years. Questions raised by Ofsted about children’s centres in an authority should trigger the same reaction as questions about schools or other children’s services. We recommend that the Government consult on a new accountability framework for local authorities’ children’s services that puts as much weight on early years and children’s centres as on schools and children’s social care. (Paragraph 126)

**Government policy**

**Two year old offer**

40. We welcome the two year old offer but have concerns about the funding, the quality of providers, the availability of places in effective settings and about the impact on places for other age groups. We recommend that local authorities monitor and report back to Government on the number of places available in good or outstanding settings in 2013/14 in order that action can be taken before September 2014 if necessary. (Paragraph 130)

41. There is a clear disparity in how funding is being used by local authorities. The Government should monitor funding and the impact on positive outcomes for children. We recommend that there should be flexibility in the use of the funding by local authorities to offer direct support or parent intervention where families are not just poor but also vulnerable. (Paragraph 131)

**Central Government policy on early years**

42. There has been, and continues to be, too much short-term and disparate government policy in the area of early years. Too much reorganisation of services impedes professional relationships and communication. The change in funding for early intervention from DfE to DCLG emphasises the role of local authorities in tailoring services to meet local needs but breaks the direct link between the Department for Education and children’s centres. Changes in funding streams also lead to short-term contracts and distract centres from their crucial work with disadvantaged children and families. We recommend that the Government set out coherent, long-term thinking on
early years and the place of children’s centres within that, including funding, responsibility across Whitehall and accountability. (Paragraph 136)

43. We are particularly concerned about Government policy towards maintained nursery schools. They offer capacity and a recognised level of expertise which needs to sit at the centre of the Government’s proposals on Early Years Teaching Schools. We recommend that the Department for Education set out a strategy for ensuring the survival of those that remain and for encouraging the further development of the network of nursery schools with children’s centres throughout the country. (Paragraph 137)

**Workforce and leadership**

**The workforce**

44. The Government is right to want to increase qualifications of the workforce but difficulties remain with status and pay. The message that Early Years Teachers are not equal to teachers in schools is strong and unjust. It is not enough for the Minister to articulate a vision of equality with other teachers–she has to set out a course of action with milestones on the way to a position where equal pay attracts equal quality. We recommend that the Department for Education set out such a strategy. We also recommend that an evaluation of the impact of the introduction of Teach First to the early years sector be carried out before the programme is expanded beyond the current pilot. (Paragraph 144)

**Training and development**

45. CPD is vital and should be encouraged by all centres. We recommend that the Ofsted inspection framework include checking that each centre has a training plan and that the plan is being implemented. We support the development of Early Years Teaching Centres as an effective way of passing on best practice and promoting workforce development. Nursery schools with children’s centres should be at the centre of these hubs. The NCTL should take on a role in developing this and should also set out a career structure for children centre staff, including how the new qualifications and other CPD match to this pathway. The NCTL should also continue their work on systems leadership in early childhood education and their work on leadership standards in the early years. (Paragraph 149)

**Leadership**

46. The NPQICL needs to be overhauled to reflect current practice in children’s centres and then offered widely to new leaders. The course should retain the much valued elements of professional exchanges and time for reflection. It is vital that practitioners are involved in reviewing and designing the qualification. (Paragraph 154)

47. The NCTL should take on the role of promoting locality leadership to spread best practice and encourage innovation, as it does in schools. (Paragraph 155)
Annex: Programme for the Committee’s visit to the Netherlands and Denmark, 3–7 February 2013

Members participating in the visit: Graham Stuart MP (Chair), Alex Cunningham MP, Bill Esterson MP, Pat Glass MP, Ian Mearns MP, David Ward MP

The Netherlands

Sunday 3 February 2013

• Briefing from British Embassy staff

Monday 4 February 2013

• Meeting with the Education Inspectorate
• Meeting with the Primary Education Council and Primary Education Platform
• Lunch with Dutch Parliamentary Education and Health Select Committee
• Visit to the Centre for Youth and Family, The Hague
• Roundtable discussion with representatives of education interest groups

Tuesday 5 February 2013

• Meeting with the Ministry of Education
• Meeting with the Ministry of Health, Wellbeing and Sports
• Roundtable with the Netherlands Youth Institute
• Visit to de Springbok primary school

Denmark

Wednesday 6 February 2013

• Briefing from British Embassy staff
• Meeting with the Ministry for Education
• Visit to Norrebro Park Skole, Copenhagen
• Lunch with Danish Parliament’s Education Committee
• Meeting with Jill Mehlbye, KORA – Danish Institute of Governmental Research
• Meeting with Danish Parents’ Organisation
• Dinner with education and early years experts
Thursday 6 February 2013

- Visit to Martha Hjemmet childcare centre
- Meeting with Associate Professor Bente Jensen, VIDA project
- Meeting with Copenhagen local authority
- Visit to Børnehuse Hurlumhej nursery school
Formal Minutes

Wednesday 11 December 2013

Members present:

Mr Graham Stuart, in the Chair
Bill Esterson
Neil Carmichael
Alex Cunningham
Pat Glass
Siobhain McDonagh
Ian Mearns
Mr Dominic Raab
David Ward
Craig Whittaker

Draft Report (Foundation Years: Sure Start children’s centres), proposed by the Chair, brought up and read.

Ordered, That the draft Report be read a second time, paragraph by paragraph.

Paragraphs 1 to 157 read and agreed to.

Annex and Summary agreed to.

Resolved, That the Report be the Fifth Report of the Committee to the House.

Ordered, That the Chair make the Report to the House.

Ordered, That embargoed copies of the Report be made available, in accordance with the provisions of Standing Order No. 134.

Written evidence was ordered to be reported to the House for printing with the Report (in addition to that ordered to be reported for publishing on 12 December 2012 in the last session of Parliament).

[Adjourned till Wednesday 18 December at 9.15am]
Witnesses

Tuesday 22 January 2013

Naomi Eisenstadt CB, Senior Research Fellow, Department of Education, Oxford University, and Dame Clare Tickell, Chief Executive, Action for Children

Wednesday 6 March 2013

Angela Prodger, Deputy Head of Centre, Pen Green Centre for Children and Families, Councillor Bob Scott, Chair of Governors, Pen Green Centre for Children and Families, Christine Whelan, Head of Centre, Croyland Children’s Centre & Nursery School, and Ellen Wallace, Principal of the Woodnewton Academy Trust.

Alex Hopkins, Director of Children, Customers, and Education, Northamptonshire County Council, Diane Dinch, Local Clinical Team Facilitator, Corby and Kettering Health Visiting Teams, Maggie McKay, Senior Co-ordinator, Home Start Corby, and Nicki Price, Chief Officer, Corby Commissioning Group, Willowbrook Health Centre

Wednesday 5 June 2013

Professor Edward Melhuish, Institute for the Study of Children, Families and Social Issues, Birkbeck, University of London, Professor Kathy Sylva, Professor of Educational Psychology, University of Oxford, Professor Peter Moss, Emeritus Professor, Thomas Coram Research Unit, Institute of Education, and Caroline Sharp, Research Director, National Foundation for Educational Research (NFER)

Susan Gregory, Director, Early Childhood, Ofsted, Heather Rushton, independent consultant and former Director, Centre for Excellence and Outcomes (C4EO), and Professor Leon Feinstein, Head of Evidence, Early Intervention Foundation

Wednesday 12 June 2013

Liz Klavins, Head of Centre, Fairfield Children’s Centre, Purnima Tanuku OBE, Chief Executive National Day Nurseries Association, Neil Leitch, Chief Executive, Pre-School Learning Alliance, and Sue Owen, Director of Programmes, National Children’s Bureau

Wednesday 26 June 2013

Liz Bayram, Joint Chief Executive, Professional Association for Childcare and Early Years, Adrienne Burgess, Joint Chief Executive and Head of Research, The Fatherhood Institute, Sally Russell, co-founder, Netmums, and Jill Rutter, Research Manager, Family and Childcare Trust
Lisa Harker, Head of Strategy, National Society for the Prevention of Cruelty to Children, Vicki Lant, Head of Children’s Centre Development, Barnardo’s, Anne Longfield, Chief Executive, 4Children, and Julie Longworth, Operational Director Children’s Services, Action for Children

Wednesday 10 July 2013

Louise Silverton, Director for Midwifery, Royal College of Midwives, Councillor Richard Roberts, Lead Member for Children’s Services and Member of Health and Wellbeing Board, Hertfordshire County Council, Jane Williams, Head of Children, Young People and Family Services, Integrated and Community Care Division, South Warwickshire NHS Foundation Trust, and Carole Bell, Head of Children’s Commissioning, North West London Commissioning Support Unit

Neil Couling, Work Services Director, Department for Work and Pensions, Annie Hudson, Chief Executive Designate, The College of Social Work, Tim Sherriff, Head Teacher, Westfield Community School and Children’s Centre, Wigan, and Elizabeth Young, Director, Research and Policy, Home-Start UK

Wednesday 4 September 2013

Professor Cathy Nutbrown, Professor of Education, University of Sheffield, Ben Thomas, National Officer, UNISON Education and Children’s Services, Sue Egersdorff, Independent Leadership Consultant and Brian Tytherleigh, Director of Operations, National College of Teaching and Leadership, Department for Education

Cllr Peter John, London Councils Executive Member for Children and Young People, Cllr David Simmonds, Chairman of the Children and Young People Board, Local Government Association, Jon Stonehouse, Deputy Director of Children's Services, Salford City Council, and Annette Wray, Area Manager, Early Years and Family Support Team, East Riding of Yorkshire Council

Tuesday 15 October 2013

Elizabeth Truss MP, Parliamentary Under-Secretary of State for Education and Childcare, Department for Education
**List of printed written evidence**

1. Action for Children  
2. Dame Clare Tickell (for Action for Children)  
3. Home Start UK  
4. Emeritus Professor Peter Moss  
5. National Foundation for Educational Research  
6. Heather Rushton, C4EO  
7. Ofsted  
8. National Day Nurseries Association (Purnima Tanuku OBE)  
9. Pre-School Learning Alliance  
10. National Children’s Bureau (NCB)  
11. Jill Rutter, Family and Childcare Trust  
12. NSPCC  
13. Barnardo’s  
14. 4Children  
15. Cllr Richard Roberts, Hertfordshire County Council  
17. UNISON  
18. Department for Education  
19. Local Government Association (LGA)  
20. Annette Wray, East Riding of Yorkshire Council

**List of additional written evidence**

(publishe in Volume III on the Committee’s website www.parliament.uk/educom)

1. Play Therapy UK (PTUK)  
2. National Union of Teachers  
3. Sheffield Children’s NHS Foundation Trust  
4. Tavistock Centre for Couple Relationships  
5. Andrea Leadsom MP and Sharon Hodgson MP (Parliamentary Group for Sure Start)  
6. Save the Children  
7. Children and Young People’s Mental Health Coalition  
8. Family Action  
9. Association of Senior Children’s and Education Librarians  
10. The Early Childhood Forum  
11. Ofqual  
12. The Children’s Society  
13. Lancashire County Council  
14. The Communication Trust
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The reference number of the Government’s response to each Report is printed in brackets after the HC printing number.

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