

NEIGHBOURHOOD STATISTICS AND CHILDREN IN NEED/LOOKED AFTER DATA

1. Item 7 of the agenda.

2. **Action required**

TWG members are asked to nominate Local authorities who may be able to assist in the feasibility study, and to consider whether Local authorities may be approached to answer some questions regarding postcode information.

3. Any comments on the attached paper should be sent to:

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NEIGHBOURHOOD STATISTICS AND CHILDREN IN NEED/LOOKED AFTER DATA**Background**

1. The Neighbourhood Renewal Unit (within the Office for the Deputy Prime Minister) is managing the National Strategy on Neighbourhood Renewal developing policies to narrow the gap between the most deprived neighbourhoods and the rest of the country in the next 10-20 years. As part of the strategy, a report of the Policy Action Team (PAT) 18 on Better Information concluded - “The absence of information about neighbourhoods has produced a series of failings at national, local and community level”.
2. The Office for National Statistics (ONS) is leading the development of the Neighbourhood Statistics Service (NeSS) offering users a vast range of social and economic aggregate data to a consistent small area geography (ideally at the smallest geographical level possible). Information is available on a web site at www.neighbourhood.statistics.gov.uk.
3. At present, there is very little health related information available on the web site at a small area level. The PAT 18 report recommended a list of data sets that should be included on NeSS in order to describe social exclusion in a neighbourhood. The Health topic areas are given in Annex A.

Children in Need/ Children Looked After

4. DH and ONS are examining the type of statistics on Children in Need/Children Looked after that might be available for the NeSS web site. It is recognised that responsibility for Children’s Social Services is transferring to DfES, but initial work is being carried out by DH. A feasibility study is being specified which outlines the key stages and issues to be addressed before the information is available at a ward (or ideally Census Output Area) level.

User requirements

5. There are likely to be a number of users requesting information on children’s social services at a small area level. An examination of Departmental policy needs gives some indication of user requirements (Annex B), but the study would like to identify the variables that would be available on the NeSS website. Any views from TWG members would be welcome.

Information required at the Postcode level

6. TWG members are aware that Children in Need data are currently published at the Local Authority geographical level. If statistics are to be available at a small area level, the source data files would need to be coded to full postcodes (currently the information received by DH contains individual records that have just the first 4 digits of the postcode). The full postcode would allow the information to be aggregated to Census Output area and ward level. There

would need to be changes to the IT software given to Local authorities to allow them to provide full postcodes. Could TWG advise whether there are any legal restrictions to providing DH with full postcode information for each child.

Disclosure Measures

7. In publishing detailed information on children, it is recognised that appropriate disclosure control measures, such as: suppression; rounding; small cell adjustment; publication at higher level geographies, would need to be applied to ensure that individuals could not be identified. ONS will be examining individual records from HES data in order to make recommendations on disclosure controls. These recommendations together with practical experience from other data sets (e.g. DWP benefits records) will be used when publishing small area information on children.

Approach

8. To start the feasibility study, DH would like to approach 12 Local Authorities (with a range of sizes and computer systems) to ask them a small number of questions about their Children in Need records such as:
 - Do you record the full postcode of the address of the individuals on the file?
 - Are the postcodes held in manual or electronic format?
 - Approximately what % of records is post coded?
 - Approximately what % of these postcodes is thought to be valid? >90%; 75-90%; <75%?
 - If your records are post coded, has the Council already used them for analyses such as dot mapping, or producing statistics for small areas?
 - Are there currently any known Data Protection barriers which might prevent your Council providing post coded records to DH?
 - Are there currently any technical or other difficulties which might prevent your Council providing post coded records to DH?
 - Would you be able to supply a file of Children in Need addresses and postcodes to DOH for test purposes?
9. Precise interview questions will be sent out to Local Authorities in advance. It is expected that a telephone interview would be less than 30 minutes in length or alternatively, a face to face meeting lasting up to an hour.

TWG members are asked to:

- **Nominate Local authorities who may be interested in participating in the feasibility study.**
- **Consider whether Local Authorities can be approached to ask questions outlined in paragraph 8.**
- **Advise on whether the supply of full postcodes would have legal restrictions and if so, how these could be overcome.**
- **Identify information that would be of use at a small area level**

ANNEX A: Neighbourhood Statistics topics - Health & Care Domain

Subject / Data set (in workpackage WP order)	Project Work Area - (for which DH has funding)
Hospital Episode Statistics	A major project to produce data sets for 1998 ward boundaries initially and 2003 boundaries thereafter. To identify which variables (and combinations thereof) can be shown e.g. age, gender, ethnicity and primary diagnosis such as CHD, strokes, cancer, accidents, hip replacements, CABGS+PTCA (coronary artery bypass graft or a percutaneous transluminal coronary angioplasty), cataracts. Involves addressing disclosure and confidentiality issues. Links to other workpackages eg. Mental Health, A&E, Older People, Disease registers, Children.
Children looked after	Aims to investigate what additional geographic detail can be provided on this topic. Numbers & referral locations are sensitive & not held centrally below Local Authority level. Project may link with Children in Need & other studies being done by ONS and ODPM. (NB Children's SS Statistics being transferred to DfES.)
Smoking Cessation	Aim is to assess the feasibility of providing NeSS with figures from Smoking Cessation Services (SC) for 4 week quit rates at a local level. The 2001- 2 data set was based on Health Authority boundaries. In 2002-3 some data is being collected by Primary Care Trust SC Services.
GPs and service provision	Strictly an 'Access to Services domain' project, the aims is to investigate what appropriate small area data can be made available, including information on vaccinations & immunisations.
Dental caries in children	A feasibility study needs to be planned to investigate what data can be made available, its' relevance and possible extension to 12 to 14 year olds. Currently information is available every second year by Health Authority for 5 year olds.
Mental Health data	The aim will be to carry out a feasibility study covering disclosure and confidentiality issues associated with data from Hospital Episode Statistics and patient level data on Mental Health secondary care, which is expected to be available from the 'MH Minimum Data Set' in 2003.
Accident and Emergency statistics	The project will need to link to work done by the Accident Injury task force and support Our Healthier Nation initiatives. One aim is to assess ways to obtain a standard data set from A&E hospitals. Links to DTI Consumer Safety Unit work.
Children in need	The aim will be to assess the feasibility of providing non-disclosive small area data from the biennial Census of children known to Social Services in England and other sources. Latest data were expected to become available from mid 2003. (NB Children's SS Statistics being transferred to DfES.) Links to Children Looked After.
Disability	The aim is to address general & specific issues connected with the absence of any comprehensive data being available, including the need to look at Local Authority registers and feasibility studies for getting small area data. May link to work being done by DWP.
Healthy Lifestyles	The aim is to get more comprehensive data on aspects of healthy lifestyles such as the consumption of alcohol, and fruit/vegetables; then to make it available at the small area level. May involve synthetic estimation.
National Drug Treatment Monitoring System	Project will aim to see what appropriate small area information on tackling drugs and reducing drug use can be made available.
Patient Experience	The Aim is to carry out a feasibility study which would consider the scope to develop measures of patient experience at the local area level including seeing how aggregated information from the range of patient surveys could be used.
Access to Primary Care	Access to primary care services other than doctors. A feasibility study to spell out details of datasets to be taken forward. Topic areas include the following :- Information sources on local service provision and location & Information on sources of health advice. (links with the Access to Services domain and GP Services and Mental Health Services workpackages in the Health & Care domain)
Disease Registers	A feasibility study to investigate the possibility of getting small area statistics on cancer and information from disease registers held by GPs. (Links to GP services).
Older People	Feasibility study to determine which datasets to be taken forward from the services provide to older people.

ANNEX B: Likely user requirements on Children’s Personal Social Services statistics

HEALTH (AND CARE) RELATED NEIGHBOURHOOD STATISTICS

Links Between the Currently Funded Neighbourhood Statistics Work and DH Policy requiring Small Area Datasets

WORK-PACKAGE SUBJECT / DATA SET	DH NESS CURRENTLY FUNDED PROJECT AREA	LINKS TO DH POLICY DRIVERS AND OTHER INITIATIVES	DESCRIPTION OF INDICATORS THAT ARE SOUGHT THROUGH WORK PACKAGES. WORKING LIST – WILL NEED TO BE REFINED.	KEY WORKERS
<p>Children looked after</p> <p>NB Jun 03 Machinery of Gov’t. change - Children’s Statistics being transferred to DfES</p> <p>(Priority 7)</p> <p>(WP) F05</p>	<p>Project may link with other studies being done by ONS and ODPM. Aims to investigate what additional geographic detail can be provided on this topic. Numbers & referral locations are sensitive & not held centrally below Local Authority level.</p>	<ul style="list-style-type: none"> • Link to inequalities in health agenda. • Link to wider policy interest in improving the health and well-being of children, especially vulnerable groups of children. • Link to agenda to reduce postcode differences in levels of care for specific groups. • Quality Protects programme to improve the management and delivery of children’s social services. • PSS PAF indicator A1& (BVPI 49): Stability of placements of children looked after – the percentage of children looked after at 31 March with three or more placements during the year. There is a National Priorities Guidance target for each council. • PSS PAF indicator A2 & (BVPI 50): Educational qualifications of children looked after (joint working) – the percentage of young people leaving care aged 16 or over with at least 1 GCSE at grade A*-G or a GNVQ. There is a National Priorities Guidance target for each council. • PSS PAF indicator B7: Children looked after in foster placements or placed for adoption – of children looked after at 31 March (excluding those placed with parents) the percentage who were in foster placements or placed for adoption. • PSS PAF indicator C18 – Final warnings/reprimands and convictions of children looked after. • PSA target to improve the life chances of children in care. • PSS PAF indicator C19 – Health of children looked after. • PSS PAF indicator C22 – Young Children looked after in foster placements or placed for adoption and C23 – adoptions of children looked after. 	<p>Need to work with DfES to ensure indicators are being taken forward under existing DfES work. Need to firm up the range of indicators sought from Social Services data – especially indicator relating to life chances of children in care.</p> <ul style="list-style-type: none"> • Local Authority level indicators relating to support PSS PAF indicators. Need full specification. 	<ul style="list-style-type: none"> • Anne Sorbie (DH - SD) • Rosemary Aldridge (DH - NeSS)

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		<ul style="list-style-type: none">PSS PAF indicator C24 Children looked after absent from school (joint working) and D35 – long term stability of children looked after.		

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<p>Children in Need</p> <p>NB Jun 03 Machinery of Gov't. change - Children's Statistics being transferred to DfES</p> <p>(Priority 7)</p> <p>(WP) F11</p>	<p>The aim will be to develop methodology to provide non-disclosive small area data from the biennial Census of children known to Social Services in England and other sources. Data were expected to become available from mid 2002.</p>	<ul style="list-style-type: none"> • Overarching link to life-expectancy/ infant mortality target and to wider Inequalities in Health Agenda • Link to wider policy interest in improving the health and well-being of children, • Quality Protects programme to improve the management and delivery of children's social servicesDisability • PSS PAF indicator E45: Ethnicity of children in need – the ratio of the percentage of children in need that were from minority ethnic groups to the percentage of children in the local population that were from minority ethnic groups. 	<ul style="list-style-type: none"> • Need to firm up the range of indicators sought from Social Services data • Ratio of children in need that from minority ethnic groups to the percentage of children in the local population that from minority ethnic groups. 	<ul style="list-style-type: none"> • Ruth Edwards (DH - SD) • (Rosemary Aldridge) (DH - NeSS) • Keith Dugmore (Consultant)