



Making life better for children, parents
and communities by bringing together:

- ▶ early education
- ▶ childcare
- ▶ health and family support

A SURE START CHILDREN'S CENTRE FOR EVERY COMMUNITY

PHASE 2 PLANNING GUIDANCE (2006-08)

[July 2005]

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Chapter 1 - Introduction and background

This planning guidance is designed to help local authorities develop the next phase of the Government's strategy to develop 2,500 Sure Start Children's Centres by 2008, with the longer term aim of 3,500 children's centres by 2010, one for every community.

We will be providing further guidance on how to deliver services and practice issues later in the year, based on what we are learning from Sure Start local programme evaluation and other research.

Vision for children 0-5 years old

Sure Start Children's Centres will be one of the key delivery mechanisms to achieve the objectives set out in the Government's Every Child Matters programme. Our aim is to improve outcomes for all young children, and in particular to close the gap between the outcome for the most disadvantaged children and others. Outcomes and options for children, families and their communities will be enhanced by increasing the availability of high quality integrated childcare and early learning, health and family support services. We want to see services brought together at neighbourhood level supporting parents/carers, both in their parenting and in their aspirations towards employment.

Consistent with the principles of the Every Child Matters, Change for Children Programme, we believe that universal services must include supporting those in most need, and should be tailored to meet particular needs of individual children, their families, and the communities in which they are based.

Sure Start Children's Centres

Sure Start Children's Centres form a key part of the delivery of early years services by local authorities, increasingly as a major element in the planning and delivery of children's trusts arrangements. They are crucial to the implementation of the Government's ten year childcare strategy, *Choices for Parents, the Best Start for Children*, and contribute to improving the child outcomes set out in Every Child Matters: being safe; healthy; enjoying and achieving; economic wellbeing; and making a contribution. The Government is advocating a shift to more co-located, multi disciplinary services that provide personalised support to children and their families. Children's centres will be a key building block towards this goal.

Sure Start Children's Centres will provide a range of services depending on local need and parental choice. The aim is for a network of centres across the country, offering information, advice and support to parents/carers, as well as early years provision (i.e. integrated childcare and early learning), health services, family support, parental outreach and employment advice for disadvantaged families. Services offered will not be the same everywhere, because needs and communities vary greatly, but the greatest resource for

children's centres will go to those children most in need. The intention is that children's centres services become permanent mainstream community services, which are developed and delivered with the active involvement of parents/carers and the local community.

In phase 1 (2004-06) children's centres were developed to serve families living in the 20% most disadvantaged wards (based on the Index of Multiple Deprivation (IMD) 2000). In phase 2 (2006-08) local authorities are planning to ensure all of the most disadvantaged families will have access to children centre services i.e. families in the 30% most disadvantaged areas (as defined by ODPM Super Output Areas – see glossary at page 22 for explanation). Centres will also be developed to serve families outside the most disadvantaged areas bringing the total number of centres to 2,500 by March 2008. In the longer term, there will be a Sure Start Children's Centre for every community – with 3,500 centres planned by 2010. It is expected that on average a children's centre will serve a community with about 800 children under five years old, although in rural areas with a more dispersed population numbers may be smaller. Centres will be developed from a variety of provision including Sure Start local programmes, neighbourhood nurseries, early excellence centres, maintained nursery schools, schools, family centres, community centres, health centres, voluntary and private provision (see pages 7-10 for more details).

Sure Start Children's Centres also provide a crucial opportunity to drive forward a preventative approach to health problems and ensure that the foundations of good health are laid down early. The importance of good physical and mental health as the foundation for children's learning and development cannot be overestimated. In particular Sure Start Children's Centres can help facilitate partnership working with health services to meet the delivery of commitments set out in the Public Health White Paper *Choosing Health*, the *Choosing Health* Delivery Plan and the *National Service Framework for Children, Young People and Maternity Services*. For example, when health visitors and midwives are located in children's centres, they can be more visible and accessible to the community. It is therefore essential that local authorities work with health colleagues to plan and commission services in line with the planning of wider children's trust arrangements.

Past research has generally shown that a small group of children and their families are often excluded from mainstream services and that these families are often the ones who are at most risk of achieving poor outcomes. It is particularly important that family support and outreach services reach all children and their families, including those who have not normally accessed services. Although many children's centres will be based in disadvantaged areas, it is important that local authorities when planning centres consider access to services by the most disadvantaged families. It is also important that engagement with Social Services Departments and other children's services within children's trust arrangements takes place to ensure effective linkages are made with support for children in need and strategies for prevention and early intervention. Further advice on engaging with disadvantaged families will be given in the autumn practice guidance.

Chapter 2 - The planning and approvals process

Strategic planning.

As an important instrument in achieving the five outcomes for children and young people as set out in Every Child Matters, Sure Start Children's Centres should feature in the local authority Children and Young People's Plan (CYPP). Through children's trust arrangements, local authorities should discuss and agree their strategic plans for children's centres with local partners in the health, private and voluntary sectors.

The targets we have set for each local authority on the number of children's centres and number of children to be reached will be monitored as part of the wider Every Child Matters Improvement Cycle for children's services. Chief Executives and Directors of Children's Services will need to ensure that there are robust and achievable local plans for the delivery of the targets set for the 2006-08 period.

In March 2006 we will be reviewing the number of centres local authorities have delivered in phase 1. If a local authority has delivered additional centres to that planned in phase 1 and exceeded its target reach for 2006, then the extra centres will count towards the 2006-08 centre target. However if an authority's target reach is not exceeded, but simply served by more centres than originally planned, then the extra centres will not count towards the new target as services are not reaching any additional families.

In the strategic planning of services and children's trust development, local authorities should join up their planning for extended schools and children's centres.

When local authorities are planning children's centres and before decisions are taken they must:

- ensure the views of children, parent/carers and families are valued and taken into account in the planning, delivery and evaluation of services. Particular action will need to be paid to their views on how to ensure these services will be accessible, and culturally appropriate, for the communities they serve
- ensure the engagement of key partners such as schools, other early years providers including private and voluntary organisations, and health services. This should include where necessary reaching agreement on reshaping services to deliver integrated services through children's centres in line with the delivery of children's trusts.

Project planning

The precise format of project plans is a matter for local decision and they will **not** need to be approved by DfES. However, Government Offices (Sure Start

regional teams) will be in regular contact with local authorities to discuss programme delivery including:

- progress on engaging key partners and reshaping services, including links with extended schools and health services
- the use of existing provision, including Sure Start settings that did not become children's centres in phase 1
- the effectiveness of mechanisms for consulting parents/carers, community groups and other interested local partners
- developing more flexible models of service delivery in the less disadvantaged areas.

It is essential that local authorities record the detail of individual centres on the established web-based system – Sure Start On - which can be accessed on <http://surestarton.portal.echarris.com/security/login.asp>. This system is a critical management tool for local authorities and DfES to monitor progress towards targets. Details of planned centres for 2006-08 must be recorded on this system by November 2005. The minimum level of information entered by this date should be the centre name, proposed number of children under five living in the centre's area (ie the "reach" figure), designation date and centre description. Full centre implementation plans should be on the system by February 2006. Further guidance will be issued in late summer 2005.

Local authorities will inform Sure Start regional teams, via the web-based system, when centres are ready for designation. Checks will then be carried out on a sample of these plans to ensure centres match the Government's vision for the programme (see page 16 for more details about designations).

Reach

The targets set for the number of children to be reached relate to the number of children under five years old living within the children's centre area, i.e. those who potentially can access the health, family support and outreach services provided. Local authorities should ensure that all families are aware of the services that the children's centre can provide for them.

Where possible a children's centre's service area should be established so that families within it can access services within pram-pushing distance of their homes. Using additional settings linked to main children's centre sites may be necessary to facilitate outreach and easy access to services, particularly in larger geographical areas.

When planning centres consideration should be given to ensuring access by those communities whose take up of services in the past has been low. Young parents, lone parents, parents of disabled children, parents from minority ethnic families, parents with a learning disability or mental health problem, those experiencing domestic violence or misusing drugs, families of offenders, and families in temporary accommodation can be among those

most in need who are often excluded from mainstream services.

Local authorities should plan with other agencies through children's trust arrangements which services would best be provided from centres as part of effective multi-agency partnership working. For example, disabled children will often need support from a range of statutory agencies, including health, social care, childcare and education. Some voluntary sector organisations, such as Contact a Family (www.cafamily.org.uk) which represent families with disabled children, will often be interested in providing services from Sure Start Children's Centres or can offer specialist information and guidance for planning strategies.

Local authorities will need to ensure children's centres liaise with the local Teenage Pregnancy Co-ordinator, who strategically leads the implementation of the local teenage pregnancy strategy. Children's centre plans should be consistent with the local strategy and centres should provide appropriate support for local teenage parents. (Details of local Teenage Pregnancy Co-ordinators can be found on the Teenage Pregnancy Unit's website: www.teenagepregnancyunit.gov.uk)

Existing provision which can develop into Sure Start Children's Centres

It is both more cost effective and better for managing the children's services market for children's centres to be designed around existing provision. In phase 1 of the children's centres programme (2004 – 2006) the majority of Sure Start Children's Centres are being developed from Sure Start local programmes, neighbourhood nurseries, early excellence centres and maintained nursery schools. In phase 2 local authorities should ensure that Sure Start local programmes, Sure Start mini programmes and early excellence centres that are not already designated are supported to become children's centres. We also strongly encourage the continuing use of maintained nursery schools as bases for the development of Sure Start Children's Centres.

Local authorities should also consider building on neighbourhood nurseries which are often located in disadvantaged areas and are therefore ideal settings from which to develop children's centres. However we recognise that some neighbourhood nurseries will be in areas that already have Sure Start local programmes or early excellence centres with high quality integrated provision. In such cases there should be evidence of effective partnership working. The aim is to ensure a service package for areas and avoid duplication of services.

Health services and promoting opportunities for healthy lifestyles

Sure Start Children's centres offer significant opportunities for improving children's health. They can provide:

- a means of delivering integrated, multi-agency services
- a means of improving choice

- a means of accessing hard-to-reach populations and therefore of reducing health inequalities
- a means of delivering key components of the Children's National Service Framework such as the Child Health Promotion Programme
- a means of achieving *Choosing Health* objectives (eg reducing smoking in pregnancy; increasing breast feeding rates; improving diet and nutrition; reducing levels of childhood obesity; promoting positive mental health and emotional wellbeing)

Locating health services such as health visiting and antenatal advice in Sure Start Children's Centres can improve take-up of services and help make them more visible and accessible to local communities. It is important, therefore, that local authorities involve Primary Care Trusts, midwifery and health visiting services and other local health practitioners as early as possible in the planning and commissioning of services for children's centres. This will help to ensure that opportunities for developing integrated and holistic services for children and their families are fully exploited.

Health centres can also be suitable sites for children's centres as they already provide a network of services and advice that is accessed by a broad section of the local community. Local authorities should also explore with local PCTs, through children's trust arrangements, options for developing children's centres on other health facilities such as GP surgeries and family health centres. In many areas the health service is upgrading or building health facilities and opportunities will exist to join up funding to provide centres which would provide high quality integrated services for families. Planning should include how multi-agency services can be delivered from children's centres, including processes for agreeing shared values and objectives, joint training and the sharing of information.

Some children's centres are being developed from Sure Start local programmes currently led by PCTs. When new children's centres are developed on health sites, it will often make sense for PCTs to lead the children's centre. Local authorities should consider and agree such arrangements through children's trust arrangements.

Choosing Health recognises that children's centres provide an ideal opportunity to deliver public health outcomes and support the preventative approach to health, on both the physical and mental health front. When planning centres, local authorities should discuss with their health partners how best to ensure that the development of children's centres can help implement local *Choosing Health* strategies and promote opportunities for practising healthy lifestyles. Examples of activities that should be discussed in the planning process include: providing parents with tips on cooking and eating healthy food on a budget, promoting breastfeeding, providing opportunities for physical activity, supporting pregnant women and their partners to give up smoking, and parenting workshops to enable parents to better understand their children's behaviour.

Further advice about providing health services from children's centres will be

given in the autumn practice guidance.

Private and voluntary providers

Private and voluntary childcare providers are another important resource to be considered when developing plans for children's centres. Many day nurseries are in disadvantaged areas and over 60% of all neighbourhood nurseries are successfully run by the private and voluntary sectors. Local authorities should invite views from private and voluntary providers and offer opportunities for them to participate in the process of identifying needs and developing plans. Existing providers are a good source of information on the state of the local childcare market. Building children's centres on good quality provision being provided by the private and voluntary sector can ensure this is maintained and the skills and expertise of the statutory, private and voluntary sectors embraced.

Maintained nursery schools

Nursery schools, of which there are well over 400, many of them in the most disadvantaged areas, have a strong tradition of high quality nursery education provision and can often easily be developed into children's centres. Becoming a children's centre does not affect the status of a maintained nursery school or the position of the school's head teacher and governing body. Where, for example, responsibility for the school's budget is delegated to the governing body, it is for the governing body to make decisions about the running and staffing of the nursery school, including the position of head teacher.

The overall responsibility for the children's centre and the delivery of integrated services (the children's centre offer), however, rests with the local authority. In consultation with the school's governing body and the other service providers, the local authority will need to agree a management structure to oversee the delivery of children's centre services. This could involve expanding the membership of the existing governing body to include other service providers or a separate management committee could be established where the governing body and key partners are represented. The local authority may appoint the head teacher of the nursery school to oversee the running of the centre providing the head teacher is willing and has the appropriate skills. Where the head teacher does not take on the additional role of centre manager he or she will need to work closely with the appointed manager.

Links to extended schools and healthy schools

The Government wants to see strong links between extended schools and Sure Start Children's Centres. Extended schools will provide a range of services and activities, often beyond the school day, to help meet the needs of children, their families and the wider community, such as primary schools providing childcare between the hours of 8am – 6pm all year round. The extended services offer may also include: study support; parenting support;

family learning; parenting support services; referral to social care and health care services (such as speech therapy, child and adolescent mental health services; family support services; intensive behaviour support; and sexual health services for young people).

When planning children's centres local authorities should consider the opportunities for schools, particularly primary schools, to co-locate with children's centres and offer integrated services for children and parents/carers from one place. In many primary schools childcare and other provision is already developing on site. Primary schools also provide a natural focus for local communities and parents are already familiar with them. Co-location could result in improved transition arrangements for children starting formal education, both for the children and their families.

Some primary schools also face consistently falling numbers of pupils. Linking local strategies on improving the long term future of a school with children's centre plans may prove to be fruitful eg using primary schools can help make savings and overcome practical issues such as sharing equipment and office support, or having the same outreach support team who would often be delivering services to the same families. In some areas of the country local authorities have found it difficult to recruit teachers for children's centres. Co-location with primary schools could lead to better ways of using existing teachers, which would solve this problem. Primary schools will often provide the most suitable sites for the development of children's centres in a local community and to help facilitate these partnership arrangements, funding for children's centres, including capital funds, can be linked with that available for extended school services.

Local authorities should also consider how children's centres will work with local Healthy Schools, including maintained nurseries. The Government's vision is that half of all schools will be Healthy Schools by 2006, with all schools working towards Healthy School status by 2009. Children's centres have a key role in supporting this through using their contact with children and parents to improve health as a basis for improving other outcomes so that they too are a focus for improving health and promoting healthy choices

Other provision

There is a whole range of other provision that could be developed into Sure Start Children's Centres, eg family support centres, day nurseries, pre-schools and playgroups. Other local provision eg libraries and colleges should also be considered. The strong community base and local support for many of these groups would provide an excellent basis for development into children's centres or to be part of an outreach service.

Chapter 3 – Sure Start Children’s Centre models

Sure Start Children’s Centres will offer a range of multi-agency services and local authorities will wish to involve local partners in the strategic planning of these services. See below for more detail on models for children’s centres to enable local authorities to plan to achieve their targets in phase 2 (2006-08). We will be issuing detailed practice guidance on how best to deliver services in the autumn. In particular we will issue advice on:

- providing outreach services and support
- working with parents/carers
- working in collaboration with local health services and promoting opportunities for healthy lifestyles

In phase 1, the Government gave local authorities a target number of children to reach, plus a target of new childcare places to create. In phase 2 we have set targets for local authorities to develop a minimum number of centres to reach a minimum number of children by 2008, as a step towards universal coverage of 3,500 centres by 2010.

However, in line with the Government’s wider public sector reform to devolve power and responsibility to local authorities, there is more flexibility in the model outside the most disadvantaged areas. Details are available on page 13.

What must children’s centres offer in the 30% most disadvantaged areas?

These following services **must** be offered in the 30% most disadvantaged areas (super output areas):

Early years provision

- Integrated early learning and childcare for babies and children until they are five years old.
- Childcare suitable for working parents/carers for a minimum of 5 days a week, 48 weeks a year, 10 hours a day.
- Childcare places will be open to all, with a priority around disadvantaged families, but not just families in the immediate area (admission and fee policies will be determined locally).
- Support for childminders.
- Early identification of children with special needs and disabilities with inclusive services and support for their families.
- Links to local schools (extended schools and Healthy Schools) and out-of-school activities (holiday play schemes, before/after-school play and learning).

Family support and parental outreach

- Visits to all families in the catchment area within two months of the child's birth (through the Child Health Promotion Programme or agreed local arrangements).
- Information for parents/carers about the range of family support services and activities available in the area.
- Support and advice on parenting including support at significant transition points for the family (e.g. pre birth, early days, settling into childcare).
- Access to specialist, targeted services for those families which need them eg support for parents/carers of disabled children.
- Activities which increase parents/carers' understanding of their child's development.
- Specific strategies and activities which increase the involvement of fathers.

Child and family health services

- Antenatal advice and support for parents/carers.
- Child Health Promotion Programme.
- Information and guidance on breast feeding, hygiene, nutrition and safety.
- Promoting positive mental health and emotional wellbeing, including identification, support and care for those suffering from maternal depression, antenatally and postnatally.
- Speech and language and other specialist support.
- Support for healthy lifestyles.
- Help in stopping smoking.

Parental involvement

- Consultation and information sharing with parents/carers, including fathers, on what services are needed, and systems to get user feedback on services.
- Ongoing arrangements in place to ensure parents/carers have a voice e.g. parents' forums.

Links with Jobcentre Plus

- Centres will link with Jobcentre Plus to encourage and support parents/carers who wish to consider training and employment

Other services which may be provided

Sure Start Children's Centres may also offer parents/carers help with accessing training, work, advice and information and may well offer a range of other services, although funding for these services may need to be accessed from other sources. Services could include:

- effective links with further and higher education institutions, and local training providers
- training for parents/carers, including English as an Additional Language where relevant, Basic Skills, or parenting classes
- specialist services for disabled children
- benefits advice, including maternity benefits
- childcare and other services for older children eg siblings of families receiving services.
- adult relationship support
- contact centres
- toy libraries
- support for delivery of Bookstart baby bags, toddler bags and 'My Treasure Boxes'

Campus models

In some cases it may not be possible to site all services in one building. It is acceptable for a centre to comprise of two or three buildings on the same site or next door to each other. Outreach services (e.g. health and family support etc) can also be provided in linked settings in locations that are convenient for children and families.

Linked settings

As part of the target for the first phase of children's centres ie up to March 2006, local authorities have to create a large number of early years provision (integrated care and early learning) places with children's centre funding. Many of these places will not be created in the centre itself but in linked settings in the local area. Linked settings can come from the voluntary, private and maintained sectors. In some cases additional services will also be available at the linked settings. It is important to note, however, that children should receive their integrated care and learning in one place and should not be moved between different – although linked - settings during the day.

What must children's centres in the 70% more advantaged areas offer?

In the main, these children's centres should be developed from existing maintained, private, voluntary or community provision with additional services being added to meet identified local needs.

Centres will provide a range of other services to meet local need and parental choice. Priority must be given to identifying and reaching out to disadvantaged or vulnerable families. All children and families who are disadvantaged, vulnerable or who have special needs should have access to the full range of integrated services they need. This will often be on site, but may also include signposting to appropriate or specialist support. In some areas this might require the provision of local outreach services near to small pockets of disadvantaged areas. The intensity of services offered by children's centres in the 70% more advantaged areas should vary according to the level of disadvantage in that area. For example, children's centres in areas close in

terms of deprivation to the 30% most deprived areas would be expected to deliver children's centres with a similar, intensive level of services.

Although local authorities will have flexibility in which services they need to provide to meet local need, all centres will have to provide a minimum range of services including:

- the offer of appropriate support and outreach services to parents/carers and children who have been identified as in need of them
- information and advice to parents/carers on a range of subjects including: local childcare, looking after babies and young children and local early years provision (childcare and early learning) education services for three- and four-year olds
- support to childminders **via a coordinated network, but also to other childminders in the area**, for example by providing training, loan of toys and equipment and drop-in sessions
- drop-in sessions and other activities for children and parent/carers at the centre, including: parent groups, play groups, adult education
- links to Jobcentre Plus services, to support and encourage labour market participation, in order to help combat poverty. The nature of these will, however, be negotiated locally in light of circumstances and community requirements

In all areas parents/carers will have access to antenatal care and support, and on the birth of their child receive home visits from their midwife and health visitor. It is important, therefore, that all centres link with local midwives and health visitors who, depending on local needs, will be based in the centre or operate some sessions from it, and will:

- visit families with new born babies in the area within the first two months of their baby's life with information about services and support
- provide access to the Child Health Promotion Programme
- provide information and guidance on breastfeeding, nutrition, hygiene and safety, thus reducing the number of children aged 0-3 admitted to hospital
- provide antenatal advice and support to all pregnant women and their families in the area
- encourage parents who smoke to attend smoking cessation clinics
- promote opportunities for physical activity from an early age
- identify children with special needs and disabilities and address their needs

- identify particularly disadvantaged families so that the centre can offer appropriate support

It is important that through children's trust arrangements local agreement is reached on the provision of health services to meet local needs which avoids duplication of services.

Sure Start Children's Centres in all rural areas

The Government recognises that children's centres operating in rural areas are likely to need greater flexibility than those that operate in urban areas. Given the nature of rural areas – dispersed communities often with small numbers of children under five years old – the same services may need to be replicated for small groups of families in convenient local venues. Full use should be made of community facilities such as school premises, parish churches and community centres.

Local authorities will be expected to develop more flexible models of childcare for centres in rural areas which meet the needs of local communities. A supported network of childminders may offer a suitable alternative to centre based care, but the centre should provide access to training, a base where they can share experience and a supply of age-appropriate learning materials and opportunities for children to interact in groups, especially in the Foundation Stage.

Other issues local authorities may take into account include:

- using mobile facilities to take both services and equipment to more remote communities e.g. health visitors and family support workers could travel with a play bus to offer drop-in advice to parents/carers
- using technology such as internet or videophone communication to provide advice and consultancy support by various specialists
- focusing on delivering a few services well rather than attempting to deliver a wide range of services and spread resources thinly eg prioritising:
 - antenatal and postnatal care for mothers and babies
 - special needs support
 - parenting advice
- linking services for under-fives and their families with services provided for older children; this may involve the dual use of both premises and of staff

General issues for all Sure Start Children's Centres

- Staff training and development

Local authorities, when planning centres which will provide early years provision (integrated childcare and early learning), will need to take into account that the minimum requirement is the employment of an early years teacher on a half-time basis. However, we would also expect that this would

be a minimum which most centres would exceed and that centres offering this minimum will build up to a full-time teacher within 12-18 months of designation.

When planning centres, local authorities should also look to strategies to encourage training and staff development across professional boundaries. Consulting with local partners about using the centre to train staff from other local providers and services are avenues which should be explored.

-Governance

Governance arrangements for children's centres will vary from centre to centre. There is no single model that will suit all circumstances. It is likely, in most centres, that a number of pre-existing structures will come together to deliver the full offer for parents/carers and children, for example, Sure Start local programmes, schools, private day nurseries and health centres. No matter what the combination, arrangements for decision-making must be democratic and transparent, allowing for fair and equal treatment of all groups and sectors, and regularity and propriety in financial matters.

Local authorities must ensure that there are effective mechanisms for the involvement of parents/carers in the planning and delivery of services. Structures should include parental representation (for example, by building on a school's parent governors). In Sure Start local programmes, parent/carer forums have also been very successful in providing parents/carers with a voice, enabling less confident parents/carers to contribute without having to stand as Board members or chairs of partnerships. Many local authorities have said that they would like more guidance on this issue. In phase 1, different governance models are being tested for children's centres and DfES will issue key principles and examples from the current local arrangements in late 2005.

- Designation of Sure Start Children's Centres

It is recognised that children's centres will take some time to develop a range of services. However children's centres can be designated as soon as the following are in place:

In the 30% most disadvantaged areas

- The centre is open a minimum of 5 days a week, 10 hours a day, 48 weeks a year.
- Plans are in place to provide health and outreach services to families in need within an agreed geographical area.
- Integrated care and learning for children from birth to five is being provided with 0.5 teacher appointed.
- Links with Jobcentre Plus have been agreed.

In the remaining 70% areas

- The centre is open a minimum of 5 days a week, 10 hours a day, 48 weeks a year.
- Plans are in place to provide health and outreach services to families in need within an agreed geographical area.
- Integrated care and learning for children from birth to five is being provided with 0.5 teacher appointed (where applicable)

or

- drop-in activity sessions for children such as stay and play sessions take place.
- Links with JobCentre Plus agreed.

Designation is not an end in itself but just the first step in providing the full range of services to children and families. All other required services must be in place within two years of designation and local authorities should update the web-based system as other services such as health provision, family support etc. come online. Government offices will monitor local authority progress in providing the full range of services in their area.

Chapter 4 – Inspection, monitoring and performance

The role of Ofsted – registration

Ofsted is required by law to register day care for children aged under eight in all settings, including schools. However, the requirement that children's centres provide an integrated service for children and families necessitates a blurring of the distinction between early education and daycare. This can cause some anomalies and inconsistencies.

The Government is intending to resolve these anomalies and inconsistencies through the establishment, by 2008, of a new legal framework and a new quality framework for integrated education and childcare for the 0-5 age group. The Government has announced its intention to bring forward a Bill during the current Parliamentary session.

In the meantime, we expect local authorities setting up children's centre provision to work within the current legal framework, and to work with Ofsted and the other interested parties to find appropriate solutions. The ratios of staff to children, the staff qualifications, and other such matters which are specified in national standards for day care, and in guidance for schools, should be regarded as the minimum required to produce acceptable quality. When planning children's centres, local authorities should be seeking to provide a high quality environment and outcomes for children. Systems and processes to monitor quality should be agreed with local partners. Consideration should be given to how many staff should be employed, and what level and type of staff qualifications would be appropriate to secure better outcomes.

The role of Ofsted - inspection

Regular inspections are carried out by Ofsted. They will normally inspect registered childcare and funded nursery education at the same time, and report on these in a single inspection report.

Where a children's centre is based in a maintained school, the inspection of care and any funded nursery education will take place at the same time as the whole school inspection. For these inspections there will be two separate reports on the education and the daycare, but they will be issued together. There may be occasions when it is necessary to inspect elements of provision separately – for example, if an inspector is investigating a particular complaint or the school is subject to special measures – but for routine inspections Ofsted will aim to inspect integrated nursery education and childcare together.

Ofsted will report on the quality of nursery education and childcare, but not on the quality of other specific services such as children's health services or parent support services provided by a children's centre. However, inspectors may comment on how these other services fit with the centre's services of integrated education and childcare and contribute to the children's wellbeing. They may also comment on other aspects such as leadership and

management which affect all of a centre's activities.

Financial accountability

Local authorities have been given strategic responsibility for the planning and delivery of children's centre services in their communities. Local authorities will need to ensure funding is available to provider organisations, monitor expenditure and provide DfES (Sure Start, Extended Schools and Families Group) with financial information as outlined in the conditions of funding documentation issued annually.

Capital

The existing process for approving capital funding is under review and updated guidance will be issued shortly. This will include guidance on the use of capital funding and the assessment process for capital projects.

VAT

Local authorities should seek the advice of their local Customs and Excise office as necessary regarding VAT.

VAT will be recoverable on purchases made with the Sure Start grant – children's centre capital funding - in accordance with the purchasing body's normal ability to recover VAT. VAT will be irrecoverable where the purchasing body cannot normally recover VAT. Sure Start expects local authorities, as the lead body for children's centres, to commission capital projects and recover VAT under Section 33 of the VAT Act 1994 or under the measures announced by the Chancellor of the Exchequer in the 2005 budget. Where children's centres new build are developed by Voluntary or Charitable bodies, Sure Start expects the buildings to be zero rated for VAT purposes (HM Revenue and Customs Business Brief 02/05 which can be found at <http://www.hmrc.gov.uk>).

If ownership of a zero rated children's centre building constructed using Sure Start grant was passed to a local authority, but the charity remains in occupation providing the children's centre services as before; and the charity or voluntary body is subsequently required to repay the VAT to HM Revenue and Customs, Sure Start would be prepared to reimburse the VAT paid by the body. However, this is on the condition that there is no change whatsoever to the use of the building and the building continues to be used to provide children's centre services as before.

The Section 33 VAT Act 1994 is a special refund scheme introduced in 1973, to fulfil a pledge that VAT would not, as far as possible, fall as a burden on the council tax and revenue support grant. The scheme is regarded by central government as an important means of financing the non-business activities of local government. Membership to the scheme is strictly limited to those local government bodies which are entitled to raise money directly via the council tax and carry out local government activities.

Sure Start accepts that there may be occasions when it may not be possible for a local authority to commission specific capital projects (for example, where there is joint funding involved; and the condition of funding requires another body to commission the capital work). In these instances, Sure Start would consider an application to fund irrecoverable VAT on the merit of the case presented.

The total amount of irrecoverable VAT being claimed from Sure Start must not exceed 17.5% of the total Sure Start funding contribution. Any irrecoverable VAT payment approved by Sure Start is only payable on Sure Start funded elements, and cannot be claimed for any other funding source elements.

Where any irrecoverable VAT claim is approved by Sure Start and subsequently the full amount approved on this project is not incurred, then you must notify Sure Start immediately so that the amount of approved funding for irrecoverable VAT can be adjusted. Furthermore, copies of invoices relating to irrecoverable VAT that are reimbursed by Sure Start must be retained. As part of quality assurance, Sure Start may from time to time ask to see these invoices. The invoices must be made available to Sure Start officials when requested.

Monitoring

DfES uses a range of Performance Indicators to monitor progress towards its Public Sector Agreement targets. The indicators are not targets but give a more rounded view of the impact of policies. As the Sure Start Delivery Guidance 2004-06 made clear, we want to collect monitoring information on children's centres from local authorities and not, as in the past, from settings themselves. This includes regular information on progress in designating and setting up children's centres as well as some information to monitor activity. Local authorities should consider their own needs for monitoring the performance of children's centres alongside the DfES requirements for data.

Activity in children's centres

In 2004-05 we captured information from 44 local authorities with the 67 early designated children's centres via the quarterly return on Childcare User Information. Data were collected on the basis that this form is returned from the April after the children's centre delivers the full core offer. However **we no longer require local authorities to submit this data from April 2005**. We have decided to use annual or ad hoc surveys to collect this type of information in the future and more information on these new arrangements will be made available to local authorities shortly. Our expectation is that local authorities will develop their own performance indicators to make sure children's centres are effective and offer good quality services that represent value for money and that the services offered reach all those who need them. For further details please see the Sure Start website www.surestart.gov.uk/ensuringquality/targets/psatargets200508/

Evaluation

Local level evaluation is crucial for service development and remains an essential element of programme improvement structures. Local authorities will need to ensure that sufficient evaluation evidence is generated on integrated children's services across their area and develop a co-ordinated approach to doing this. This evaluative activity should examine the extent to which services meet parents' and carers' needs by keeping track of what parents/carers want, whether their needs are being met and how.

Until Sure Start local programme funding formally transfers to local authorities, individual Sure Start local programmes' local evaluations will continue, with programmes working with local authorities on more authority-wide strategic evaluations. These evaluations should focus more on short-term outcomes and ensure their evaluations help to generate information that assists with the transition to, and implementation of, children's centres. This should also link with any needs assessment and evaluation of existing service provision undertaken by the children's trust.

A feasibility study to help identify the nature and scope of a national evaluation of children's centres started in summer 2005. This will inform decisions about the most appropriate scale, focus and timing of a comprehensive national evaluation of the children's centre programme, building on what we know from the National Evaluation of Sure Start (NESS) and the Effective Provision of Pre-School Education Project (EPPE).

Annex A - Further information

The Sure Start website

The Sure Start website lists details of all Sure Start Children's Centres:
<http://www.surestart.gov.uk/surestartservices>

If any of your centre's details are listed incorrectly, or if your centre's details change, please email info@dfes.gsi.gov.uk

As well as a wealth of information about Sure Start, the website also includes a listing of sector events and conferences (www.surestart.gov.uk/events/) and the Marketplace (www.surestart.gov.uk/communications/general/marketplace/) where you'll find details of organisations who offer a range of services to Sure Start settings.

Annex B - Glossary

Childcare – provision that is available for a minimum of ten hours a day, five days a week and 48 weeks a year.

Designation – local authorities will inform Sure Start regional teams when settings meet the minimum requirements for designation as children's centres. Designation is not an end in itself but the first step in providing the full range of services to children and families. It is not a statutory process.

Early years provision – integrated care and learning for children from birth to the end of Foundation Stage.

The Foundation Stage – the first part of the National Curriculum focusing on the distinct needs of children aged three to the end of the reception year in primary school. The Foundation Stage has six areas of learning, each containing a number of Early Learning Goals setting out what most children are expected to achieve by the end.

NSF – National Service Frameworks are long term strategies for improving specific areas of care. They set measurable goals within set time frames. The National Service Framework for Children, Young People and Maternity (published Sept 2004) sets standards for children's health and social services, and the interface of these services with education.

Reach – refers to the number of children under five years old living within the children's centre area, i.e., those who potentially can access the health, family support and outreach services provided.

Contact – Sure Start expects that over a 12-month period all children in a children's centre's reach area will have been contacted (i.e. local authorities must ensure that all families are aware of the services on offer to them).

Super Output Area - Super Output Areas (SOAs) are geographical units developed by the Office of National Statistics (ONS). Each SOA has approximately the same number of households and population. The Office of the Deputy Prime Minister has looked at the characteristics of the households

living in each SOA and these characteristics make up the Index of Multiple Deprivation (IMD). Each SOA is then ranked on how deprived it is. The IMD for 2004 is presented at a SOA level, rather than ward level as with previous Indices. There are 32,482 SOAs compared with 8,414 wards. This means that wards have been broken down into much smaller components, and the pockets of deprivation contained within wards have been captured in the latest index.

An electronic version of this guidance it is available to download via the Sure Start website: www.surestart.gov.uk

Annex C – Contact points

Region	Tel Enquiry Point for Sure Start Regional Teams	Email
East of England	01223 372657	surestart@goeast.gsi.gov.uk
East Midlands	0115 971 2652	richard.davies@goem.gsi.gov.uk
London	020 7217 3249	gol-surestart@gol.gsi.gov.uk
North East	0191 202 3736	jean.robinson@go-regions.gsi.gov.uk
North West	Split site: 0161 952 4479 (Manchester) or 0151 224 6418 (Liverpool)	gonwsurestartenquiries@gonw.gsi.gov.uk
South East	01483 882348	surestart@gose.gsi.gov.uk
South West	0117 900 1714	sscf@gosw.gsi.gov.uk
West Midlands	0121 352 5396	surestartandchildrensfund.gowm@gowm.gsi.gov.uk
Yorks & Humber	0113 283 5237	surestart@goyh.gsi.gov.uk

Sure Start Children's Centre Policy Team	Tel.	Email
Catherine MacGruer	020 7273 5149	catherine.macgruer@dfes.gsi.gov.uk
Valerie White	020 7273 5886	valerie.white@dfes.gsi.gov.uk