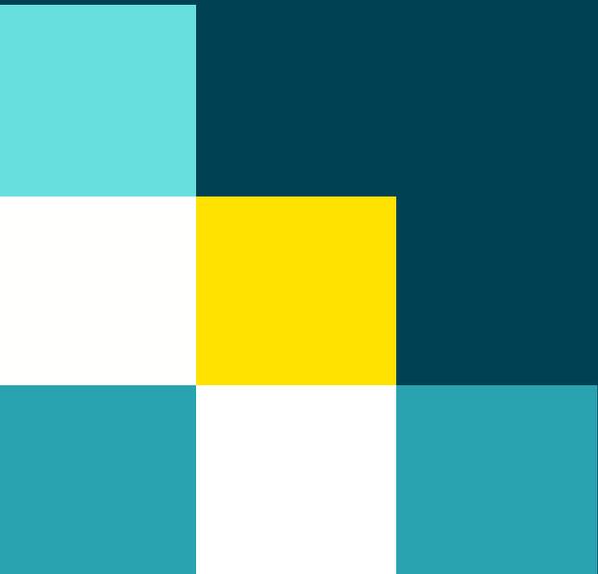




**Wales Centre for Public Policy**  
**Canolfan Polisi Cyhoeddus Cymru**

# **Data Analysis to Support Multi-Agency Working: Data Discovery**

**Sophie Wood, Louisa Roberts and Caitlin Trotman**  
Cardiff University  
January 2024



# Our Mission

The Wales Centre for Public Policy helps to improve policy making and public services by supporting ministers and public service leaders to access and apply rigorous independent evidence about what works. It works in partnership with leading researchers and policy experts to synthesise and mobilise existing evidence and identify gaps where there is a need to generate new knowledge.

The Centre is independent of government but works closely with policy makers and practitioners to develop fresh thinking about how to address strategic challenges in health and social care, education, housing, the economy and other devolved responsibilities. It:

- Supports Welsh Government Ministers to identify, access and use authoritative evidence and independent expertise that can help inform and improve policy;
- Works with public services to access, generate, evaluate and apply evidence about what works in addressing key economic and societal challenges; and
- Draws on its work with Ministers and public services, to advance understanding of how evidence can inform and improve policy making and public services and contribute to theories of policy making and implementation.

Through secondments, PhD placements and its Research Apprenticeship programme, the Centre also helps to build capacity among researchers to engage in policy relevant research which has impact.

For further information please visit our website at [www.wcpp.org.uk](http://www.wcpp.org.uk)

## Core Funders of WCPP



**Cardiff University** was founded in 1883. Located in a thriving capital city, Cardiff is an ambitious and innovative university, which is intent on building strong international relationships while demonstrating its commitment to Wales.



**Economic and Social Research Council (ESRC)** is part of UK Research and Innovation, a new organisation that brings together the UK's seven research councils, Innovate UK and Research England to maximise the contribution of each council and create the best environment for research and innovation to flourish.



**Welsh Government** is the devolved government of Wales, responsible for key areas of public life, including health, education, local government, and the environment.

# Contents

|   |           |
|---|-----------|
| <b>Contents</b>                           | <b>2</b>  |
| <b>Summary</b>                            | <b>7</b>  |
| <b>Glossary</b>                           | <b>8</b>  |
| <b>Introduction</b>                       | <b>9</b>  |
| Challenges of Using Multi-Agency Data     | 9         |
| Review questions                          | 9         |
| Purpose of this report                    | 10        |
| <b>Overview of the study (Method)</b>     | <b>10</b> |
| Review of the published data              | 11        |
| Generating the Data Discovery spreadsheet | 11        |
| Consultation with stakeholders            | 12        |
| Structure of the findings                 | 12        |
| <b>Multi-Agency data themes</b>           | <b>13</b> |
| 1. Children's social care                 | 13        |
| 2. Care leavers                           | 16        |
| 3. Vulnerable groups                      | 17        |
| 4. Education                              | 19        |
| 5. Health                                 | 21        |
| 6. Mental health                          | 23        |
| 7. Domestic abuse                         | 26        |
| 8. Substance misuse                       | 27        |
| 9. Deprivation                            | 29        |

|  |           |
|--|-----------|
| 10. Housing and homelessness                     | 30        |
| 11. Employment and the labour market             | 32        |
| 12. Crime  | 33        |
| 13. Disability                                   | 36        |
| 14. Demographics and household composition       | 37        |
| 15. Community resilience, cohesion and inclusion | 38        |
| 16. Other themes                                 | 40        |
| <b>Data sources and outputs</b>                  | <b>41</b> |
| StatsWales                                       | 41        |
| National Survey for Wales                        | 42        |
| National Social Care Data Portal for Wales       | 44        |
| DataCymru  | 45        |
| InfoBase Cymru                                   | 46        |
| Health Maps Wales                                | 47        |
| DataMapWales                                     | 48        |
| Public Health Wales                              | 48        |
| <b>Discussion</b>                                | <b>48</b> |
| Key findings                                     | 48        |
| Potential data uses                              | 50        |
| Data quality                                     | 52        |
| Challenges                                       | 55        |
| Strengths and limitations                        | 56        |
| <b>Recommendations</b>                           | <b>56</b> |
| <b>References</b>                                | <b>58</b> |

**Annex**

**67**

Author Details

75

# List of Figures

**Figure 1. Model of supply and demand factors.**

**Figure 2. Snapshot of a Stats Wales data table covering CLA at 31 March by local authority, gender and age.**

**Figure 3. Snapshot of the National Survey for Wales results viewer.**

**Figure 4. Snapshot of the number of CRCS at a given time, as displayed by the National Social Care Data Portal for Wales.**

**Figure 5. Snapshot of material deprivation data by local authority, as displayed by Data Cymru.**

**Figure 6. Snapshot of a summary view of poverty as displayed by Data Cymru.**

**Figure 7. Snapshot of data relating to the number of CLA by local authorities at 31 March 2022 as presented by InfoBase Cymru.**

**Figure 8. Snapshot of data relating to illicit drug use and hospital admission rates, as displayed by Health Maps Wales.**

# Summary

- This report identifies and assesses the availability of multi-agency data on population characteristics, needs, services, and outcomes of children at risk or in care and their families who need support.
- The aim is to describe what publicly accessible multi-agency data are available and could inform local, regional and country level discussions and decisions around funding and commissioning of services to support children and families.
- The project is informed by a previous model of work by the WCPP around supply and demand factors, with the following questions reviewed:
  - 1 What relevant data are available?
  - 2 What is the quality and timeliness of the data and can it be compared across data sets?
  - 3 By whom/how is data collected and published?
  - 4 Based on the answers to questions 1-3, how could these data be used more effectively and what are the data gaps?
- A systematic internet search of available data was conducted, yielding 16 key themes covered in this report and the accompanying spreadsheet.
- General issues of quality, coverage, completeness, consistency, accuracy and relevance are noted, and unavailable data is acknowledged.
- It was concluded that the publicly available multi-agency data landscape in Wales relevant to children's social care is vast and complicated. Investment into improving current data dashboards, updating source links and adding quality reports is essential in improving the use and accessibility of multi-agency data in Wales.
- The report made six recommendations for action in three areas:
  - 1 Enhancing existing outputs of publicly available Welsh data, by improving information about the data available, and focusing resource into maintaining and improving existing data dashboards;
  - 2 Addressing key data gaps to include data on early intervention and prevention, referrals and outcomes; and
  - 3 Possible future directions of data use in Wales, including improving stakeholder engagement in data collection and use.

# Glossary

|         |   |
|---------|---|
| CAFCASS | Child and Family Court Advisory and Support Service |
| CAMHS   | Child and Adolescent Mental Health Services         |
| CIN     | Child in Need                                       |
| CIW     | Care Inspectorate Wales                             |
| CLA     | Children Looked After                               |
| CPR     | Child Protection Register                           |
| CRCS    | Children Receiving Care and Support                 |
| FSM     | Free school meals                                   |
| LSOA    | Local layer Super Output Area                       |
| MoJ     | Ministry of Justice                                 |
| OfS     | Office for Students                                 |
| ONS     | Office for National Statistics                      |
| PLATO   | Public Law Applications to Orders                   |
| PLO     | Public Law Outline                                  |
| SHRN    | School Health Research Network                      |
| WCCIS   | Welsh Community Care Information System             |
| WIMD    | Welsh Index of Multiple Deprivation                 |
| YCB     | Youth Custody Service                               |
| YJB     | Youth Justice Board                                 |

# Introduction

The Welsh Government has identified safely reducing care rates in Wales as a priority (Welsh Parliament, 2022). Publicly available multi-agency data could be used to inform decisions within and between organisations working to support children and families. However, there are lots of data in different sectors only seeing part of the whole picture of needs.

Multi-agency data is data collected by multiple sources, such as Local Authorities, Health Boards, Police and other public sector partners. This data can be used to identify trends, risks and opportunities, and to inform the development of effective policies and services for vulnerable children and families (NHS Digital, 2022). For example, identifying and supporting current and future potential families at risk, understanding needs to inform preventative and responsive action, investigating outcomes for certain groups, informing current and future funding allocations, and shaping service and commissioning decisions.

From the Wales Centre for Public Policy's (WCPP) previous work, and through conversations with stakeholders, it is clear that whilst local and regional bodies are collecting data they are not routinely utilising it to inform policy and practice in the way stated above. At least in part, this reflects a lack of capacity for data analysis, and it suggests that some organisations are not making effective use of the available data.

## Challenges of Using Multi-Agency Data

A key challenge to using multi-agency data to inform decision making in children's social care is understanding what data is available on needs and underlying determinants, and how this might be brought together to provide clearer pictures to inform about needs at local and national level.

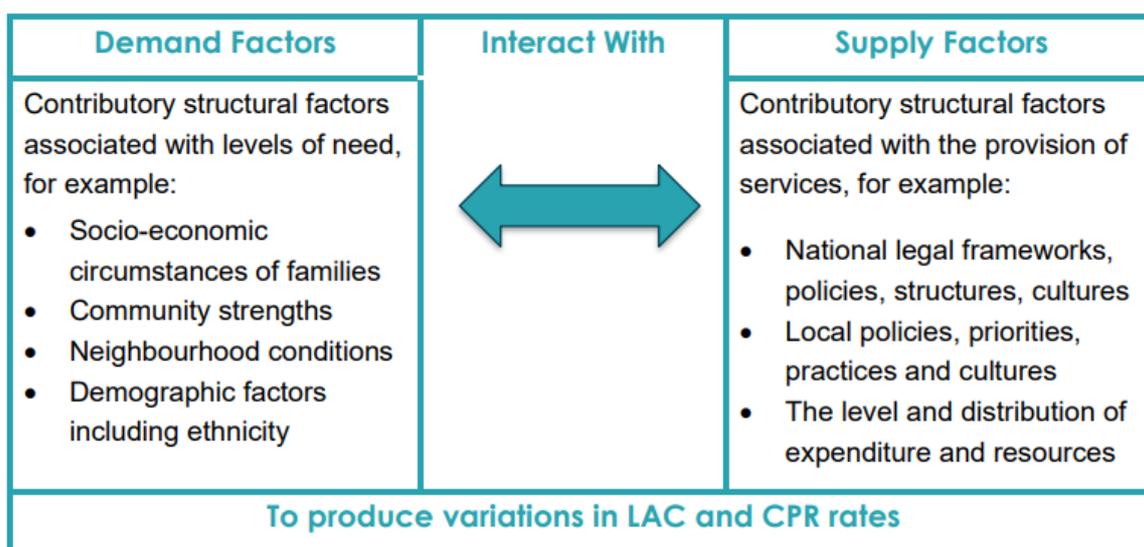
Other analytical challenges are that data from different sources may not always be comparable, data collected routinely for services may not capture exactly what is needed, and the geography or time period may not be suitable for the research or policy question.

## Review questions

Informed by the Wales Centre for Public Policy's (WCPP) model of supply and demand factors (Figure 1; Hodges, 2020a) this project aims to explore multi-agency data for children at risk or in care and their families who need support, with a focus on:

1. What relevant data is available?
2. What is the quality and timeliness of the data and can it be compared across data sets?
3. By whom/how is data collected and published?
4. Based on the answers to questions 1-3, how could this data be used more effectively and what are the data gaps?

**Figure 1: Model of supply and demand factors**



Adapted from Child Welfare Inequalities Project (2017)

Source: Hodges (2020a)

## Purpose of this report

This project, funded by WCPP and Public Health Wales Research and Evaluation Division, describes publicly available data in Wales on underlying population characteristics, needs, services, and outcomes that are relevant to children at risk or in care and their families who need support. The focus is wider than children's social care data. It captures data about the whole population which could be used to help inform local, regional and country level discussions and decisions around funding and commissioning of services.

## Overview of the study (Method)

A review of published data was completed in March 2023. Data experts and senior leaders in multi-agency organisations were consulted to sense check the findings of the review.

## Review of the published data

An initial meeting was held with experts in the Children's Social Care Research and Development Centre (CASCADE) and WCPP to identify supply and demand factors impacting the rate of children in care. This provided a starting point for the review of published data.

A systematic internet search of available data sets was conducted. Starting with StatsWales, as this is where most administrative data is held in Wales, data sets were summarised and key information extracted into a spreadsheet. Other national databases, such as Social Care Wales, the Office for National Statistics (ONS), and Digital Health and Care Wales, were systematically searched to address gaps and find any other areas not considered.

Where gaps in the supply and demand factors identified earlier were still missing, further internet searches were conducted.

Data sets were prioritised based on their relevance to children's social care.

## Generating the Data Discovery spreadsheet

The data map was developed in Microsoft Excel with columns including category of data, title, source and source link, description, output links, quality summary, frequency, reporting requirements and a brief description of why the data set may be useful to children's social care.

Inserting each data set into a Microsoft Excel spreadsheet allowed for the categorisation and filtering of components of each set for ease of use. Most data sets fit into a discrete category for elements such as owner, timeframe, or frequency.

Some data sets did not fit into a discrete category in some areas, as explained below.

### **Type**

Based on the method of data collection, the types of data each set gathers varies. For example, the data that organisations collect about their operations is administrative data. Sometimes there is a combination of methods used and this is displayed in the spreadsheet using a forward slash. For data sets that show modelled projections, sometimes the method used to predict these projections was not clear.

## Level

Due to data protection legislation surrounding person identifiable data, none of the data sets in the spreadsheet are available on an individual level. However, it was noted, where possible, if the data could be accessed upon request via the SAIL databank, ONS or another avenue. This was noted in the category labelled 'further information'.

## Frequency

It was not always possible to provide a simple answer for how frequently a data set was updated. Some data collections were disrupted by the COVID-19 pandemic, meaning the next publication update was delayed or unknown. Discontinued data sets are highlighted in the spreadsheet in red.

## Consultation with stakeholders

Interviews with experts broadly fitting into two groups: 1) senior leaders in multi-agency organisations working to support children and families; 2) data experts with experience of a range of roles within data analysis departments (please see Appendix 1. for list of roles and organisations).

Interview topics covered current use of data, what data are missing or possible improvements, data quality, accessibility, presentation and comparability, current use of multi-agency data, use of data to inform decision making and strategic planning, and potential risks of using individual agency or multi-agency data. Please see Appendix 2. for interview schedules.

Interviews were summarised drawing out key themes or ideas and to sense check findings from the internet searches.

## Structure of the findings

The findings of the data discovery are presented in themes as listed below. Summaries are provided for each theme explaining the type of data available, data outputs, and possible data issues. Why the data theme is important to children's social care is addressed, and information about these issues from key stakeholder interviews is also included in the summaries. The theme summaries are followed by an overview of data sources and outputs. More details of the data sets held under each theme can be found in the Data Discovery spreadsheet [here](#).

1. Children's social care
2. Care leavers

3. Vulnerable groups
4. Education
5. Health
6. Mental health
7. Domestic abuse
8. Substance misuse
9. Deprivation
10. Housing and homelessness
11. Employment and the labour market
12. Crime
13. Disability
14. Demographics and household composition
15. Community resilience, cohesion and inclusion
16. Other themes

## Multi-Agency data themes

### 1. Children's social care

The Welsh Government publishes a range of data on children's social care services in Wales. This includes information on the numbers and types of placements for Children Looked After (CLA), Children Receiving Care and Support (CRCS), and children subject to child protection registration (CPR) plans. In addition to CLA, data are available on numbers, age and duration of process for children adopted from local authority care and the numbers of applications made to local authorities for adoption intermediary services. The CRCS Census gathers data on the category of need, and some characteristics of children including age, gender, ethnicity, health and mental health, substance misuse, parental factors, youth offending, free school meal eligibility, CPR, educational attainment, asylum seeking status, and disability status. The Welsh Government also provide data on the number of places and child admissions to secure children's homes.

Some of the data gathered through the CLA and the CRCS are included as measures within the Social Services Performance Indicators for Wales (Welsh Government, 2023). Some additional measures not found in the CLA or CRCS are available through the Social Services Performance Indicators for Wales such as detailed data on CPRs by age, numbers of contacts and assessments, statutory

timescale adherence, assessments for children in the secure estate, and assessments where physical punishment was a factor.

There are data available in relation to family law in Wales through the Ministry of Justice (MoJ) such as Public Law Applications to Orders (PLATO) available at Welsh Designated Family Judge Area. The UK Government family law data is available for England and Wales combined. Cafcass Cymru make available all-Wales data for the number of Section 31 applications.

Data are also available on local authority social care staffing levels and characteristics, and the number of services and placements regulated by the Care Inspectorate Wales (CIW). Furthermore, a wealth of service expenditure data are available, covering services for CLA, safeguarding, family support, youth justice, young people, and asylum seekers, as well as flying start and early years services, other children and family services, and children's centres.

### *Outputs*

Regular annual statistical release reports of children's social care data are published by Welsh Government and the CIW, in addition to ad-hoc statistical releases. Aggregated data are available via StatsWales, and data can be viewed through the National Social Care Data Portal for Wales, Infobase Cymru and the CIW data tool.

### *Data quality*

Publicly available children's social care data in Wales have been found to contain a number of data quality issues. These include incomplete records, missing data, and a lack of standardisation in data collection between local authorities (Allnatt et al., 2022). It is important that data are collected and reported in a consistent and accurate manner to ensure data can be used effectively to inform policy and practice decisions.

The Welsh Child in Need (CIN) Census was discontinued in 2016 and it was replaced by the CRCS Census after the introduction of the Social Services and Wellbeing Act (2014). These data sets cannot be considered equivalent due to the differences in the legal frameworks underpinning them (Lee et al., 2022). This affects the timeliness of the data and the ability to look at trends over time. There are also limitations when comparing the Welsh CIN and CRCS data sets to the English CIN data set. The Welsh data sets do not contain as much information as the English data set (e.g. referral data) and only capture a subset of children due to eligibility criteria where children need to have been on a care and support plan for at least three months on the 31st of March each year. Additionally, because of these eligibility criteria, the Welsh CIN and CRCS Censuses are likely to miss cases that

only require short-term intervention from social services, making the sample biased towards cases with longer-term involvement (Lee et al., 2022). However, interview data suggested that amendments are being made to the CRCS and in future years the returns will be based on episodes rather than annual point in time inclusion, thus alleviating this problem.

There is less detailed Family Law data available for Wales than for England where Cafcass data cover numbers and rates (by local authority) of care order applications, length of proceedings, and Public Law Outline (PLO) performance of each Designated Family Judge area. Whereas in Wales, Cafcass data are limited to the number of s31 applications (care orders).

### *How can children's social care data be used to inform decision making for children's social services?*

Children's social care data can be used to understand both the characteristics and the scale of the **population in need** and the **provision of care**. Trends in the number of CRCS, for example, show the supply of children's social care services, but also reflect demand. By understanding the demands for children's social care services in specific areas, local authorities can allocate resources more effectively and efficiently. Trends in local authority data can inform decisions and policies related to resource allocation and service delivery and provide evidence for the effectiveness of existing interventions. 'Cost per head' data (Webb and Bywaters, 2018) enables local authorities to directly compare expenditure across different authorities on a per head basis (Social Care Wales, 2020).

However, there are no publicly available data on referrals to children's social care, a key indicator of need, and data on **the provision of preventative services** are limited. The gap in data on preventative and early intervention services was highlighted in the interview data gathered.

Unaccompanied asylum-seeking children are a particularly vulnerable group of children in care and are likely to have experienced trauma and have mental health support needs (Blackmore et al., 2020). They are at risk of experiencing social exclusion (Strokosch and Osborne, 2016) as well as being at greater risk of child exploitation (Horgan and Raghallaigh, 2017). From interview data, further data availability on unaccompanied asylum-seeking children was seen as a priority to acknowledge the differing experiences and support needs of this vulnerable group when compared with other CLA.

Limitations to the CRCS data affect the ability to understand demographics and **inequalities of need**. Whilst some demographic data within the CRCS are

considered to be more accurate (gender and age), some categories such as mental health status (diagnosed or undiagnosed mental health issue) and substance misuse are completed by social workers on case file records and therefore have an element of subjectivity. Category of need is a hierarchical variable where the first in the list that is relevant should be selected meaning additional categories of need for the same child will not be reflected, and some categories of need may be under-represented in aggregate statistics. Interview data suggested that improved accuracy of the demographics within the CRCS would enhance the range of analyses that could be undertaken. Ethnicity, and protected characteristics more generally were highlighted as lacking in the necessary quality to enable meaningful analyses.

In addition, interviewees suggested that aggregated local authority data could be used to **evaluate new initiatives**, such as Virtual Schools, by offering useful comparisons for the impact of such initiatives in different regions. Interview data also suggested data on Virtual Schools would be informative for other vulnerable groups such as young carers, Gypsy, Roma and Traveller communities, pupils on Pastoral Support Programmes, children in Armed Forces families, and children who are Electively Home Educated.

Improvements in the availability of data on **outcomes** for children in care or receiving support from social services were suggested as important from interviews. Particularly, more accurate health, educational attendance, exclusion and attainment data were highlighted as necessary to inform services aimed at improving outcomes for children involved with social services.

## 2. Care leavers

Data on care leavers in Wales is limited by comparison to data on children and young people in care. In addition, as care-experience is currently not a protected characteristic, the majority of data collected on adults in Wales is not collected with care-experience as an identifying factor. Some data on care leavers is available from the CLA Census data such as episodes of care finishing and accommodation for CLA age 16 and over by local authority, gender, and reason for leaving care. In addition, under the Social Services Performance and Improvement Framework (Welsh Government, 2019) the numbers of care leavers by local authority and by category are gathered and are available 2020-2022. However, previously, under the Welsh Government Performance Measures (Welsh Government, 2019), much more data on care leavers were gathered including assessment timeframes, support to remain in the family home, re-registrations on the CPR, core subject indicators within education, GP registration, numbers of placements, education, training or

employment, and homelessness (data are available 2016-2019). In addition, data sets covering the numbers of care leavers at age 19 with whom a local authority is still in touch, who were engaged in full time education, training or employment, and the GCSE educational attainment of care leavers have been discontinued (available until 2016).

*Outputs*

The data described above is available on StatsWales. The National Social Care Data Portal for Wales presents this data on care leavers from StatsWales, excluding the performance measures data. Infobase Wales also presents the same data on their dashboard.

*Data quality*

See Section 1 on Children’s social care for Care leaver data quality.

***How can care leaver data be used to inform decision making for children’s social services?***

Data about care leavers can inform decisions about the **provision of care** that ensure care leavers have the practical and emotional support they need to make a successful transition to adulthood.

Care leavers can experience discrimination and stigma and often have poorer outcomes in adult life in relation to education, employment, health and criminal justice (MacAlister, 2022). The reduced range of data collection on care leavers in Wales since 2020 means that the ability to **measure outcomes** for care leavers in adult life in areas such as education, health and criminal justice is limited. There are no publicly available data on the number of care leavers entering higher education.

Within family law individuals’ own care-experience may negatively impact judgements and decisions about their ability to parent (Roberts et al., 2019). Interview data highlighted the need for additional data around care-experienced parents, where the focus is currently on the individuals’ status as parents as opposed to prioritising their own history of care and possible resultant additional support needs.

### 3. Vulnerable groups

Data were found on additional vulnerable groups of young people not reflected in children’s services data. These were Gypsy, Roma and Traveller children and young

carers. (For data on unaccompanied asylum-seeking children and children accommodated in secure children's homes see Section 1 on Children's Social Care data. For children in the youth justice system and children at risk of sexual and criminal exploitation see Section 12 on Crime data). Data were not found for some vulnerable groups such as children on Pastoral Support Programmes, children in Armed Forces families, and children who are Electively Home Educated. Interview data suggested that there is also a lack of education data for these vulnerable groups (See Section 4 on Education).

StatsWales makes available a Gypsy and Traveller caravan count. The number of young carers support plans, total needs assessments undertaken and contacts received by young carers by statutory services are also available on StatsWales.

### *Outputs*

Welsh Government produce a biannual report on the Gypsy and Traveller caravan count. Young carers statistics are covered in the annual Social Service activity releases. Young carer data is displayed within the National Social Care Data Portal for Wales but few other outputs of these data on vulnerable groups of children were found.

### *Data quality*

Interview data suggested that there is a lack of education data for some vulnerable groups of children including young carers, Gypsy, Roma and Traveller children, pupils on Pastoral Support Programmes, children in Armed Forces families, and children who are Electively Home Educated.

### *How can data about vulnerable groups be used to inform decision making for children's social services?*

Data about vulnerable groups are important for measuring and anticipating the **population in need** of children's social care services.

Gypsy, Roma and Traveller children are at risk of social exclusion (Clark, 2005) and face barriers to mainstream educational attendance and attainment (Bhopal, 2004). The Gypsy Traveller caravan count is carried out biannually to reflect winter residence as well as summer travelling trends. However, there are no data on the numbers of children within these counts.

Young carers are often not identified within public services, and therefore often not supported (Janes, 2022). Being a young carer can have adverse effects on young peoples' mental health and well-being, as well as schooling, future employment

opportunities and social and leisure activities (Cree, 2003). Young carer status is often not known to social, education or health services. In particular, those without high levels of caring responsibilities but who nonetheless have caring responsibilities that would not commonly be experienced by their peers may not be involved with any support services (Janes, 2022).

Factors that can lead to children and young people taking on caring responsibilities include parents or family members experiencing disability, mental health issues or substance misuse issues. These factors are also associated with an increased risk of children and young people entering the care system (Wood et al., 2022).

## 4. Education

The Welsh Government publishes a variety of education data in Wales including information on pupil attendance, exclusions, attainment, the qualifications and destinations of school leavers, and the number of children educated other than at school. My Local School is a Welsh Government hosted webpage presenting contextual information, pupil numbers and characteristics, school performance and attendance as well as staffing and financial information about every state-maintained school in Wales. In addition, the Welsh Index of Multiple Deprivation (WIMD) Education domain comprises six indicators intended to reflect area disadvantage in relation to education, training and skills. (See Section 9 on Deprivation for further details on the WIMD). Separately, the National Survey for Wales includes the views of parents and non-parents on the education system in Wales. However, details of parental literacy and numeracy and time spent supporting their child/children's education are no longer included and therefore are only available to 2015. The School Health Research Network (SHRN) survey data are hosted on the Public health Wales (PHW) Data Dashboard and cover subjective views of secondary school pupils on aspects of school experience.

### *Outputs*

The education data discussed above is available to view in aggregated tables through StatsWales, and the Welsh Government produce a range of summary reports of education data, primarily annually. My Local School enables users to find a specific school in Wales and view a summary dashboard of statistics for that school including percentage of free school meals (FSM), attendance, school budget per pupil, and points scores for literacy, numeracy and science. Graphs showing trends over time for individual schools can be found for a range of more detailed measures such as percentage of pupils with additional learning needs, with special educational

needs, and with English as an additional language. Points scores are available by gender and by uptake of FSM.

The WIMD Education rankings are available through StatsWales, as well as DataMapsWales and InfoBase Cymru by a range of geographical comparisons including by local authority. The results of the National Survey for Wales are available through StatsWales and the UK Data service, and the Welsh Government produce an annual overview of headline findings from the survey. SHRN data can be viewed through the PHW Data Dashboard.

### *Data quality*

The Welsh Government works closely with schools and local authorities and all data are subject to various validation stages as well as sense-checking within Welsh Government and by the data providers. Therefore, data shown through My Local School is highly reliable. Views on the education system in Wales are gathered through the National Survey for Wales and are therefore subject to the usual potential survey errors (see 'Data Sources and Outputs' p.40) for details of the National Survey for Wales)).

During the interviews, a national management information system for education data, similar to the Welsh Community Care Information System (WCCIS), was recommended in order to reduce inconsistencies between individual schools' methods for gathering data.

Data on exclusions which may be of particular interest to children's social care services should be treated with caution as individual pupils may be excluded multiple times and managed moves to alternate schools are not accounted for. Pupil destinations and work-based learning data before and after GDPR changes in 2018 are not comparable and in addition, narrative commentaries on data trends are no longer available.

More granular data from smaller geographical areas was cited by interviewees as needed within education data to better map data on to school catchment areas.

Due to devolved education policy in Wales, UK four nations comparisons can no longer be accurately undertaken.

### *How can education data be used to inform decision making for children's social services?*

Publicly available educational **outcome** data is lacking for children in care or those receiving care and support. Although some educational measures such as

exclusions or free school meals could be used to assess the **population in need** of support.

Data on lower attendance, special or additional education needs, exclusions and education outside of mainstream settings are all relevant to the care-experienced children population (Sebba et al. 2015, Viner and Taylor 2005, Timpson 2019, Munn 2005). Numbers of pupils eligible for FSM has been a widely used indicator of school and area level deprivation. The Welsh Government roll-out of FSM for all primary age pupils is a positive development but will mean other measures of deprivation will have to be utilised

Children and young people looked after have been found to have poorer educational attainment outcomes (Sebba et al. 2015, Berger et al. 2015) and often have lower educational aspirations (Mannay et al. 2015). Frequent school moves are more common for children in the care system (Sebba et al. 2015) and therefore data on managed moves that are not currently available could be of use to local authorities. Additional data on **care leavers** in further and higher education would enable local authorities to better track **outcomes** for their care-experienced population who are under-represented in post-compulsory education (Department for Education, 2020).

Furthermore, interview data suggested that there is a lack of education **outcome** data for some vulnerable groups of children including young carers, Gypsy, Roma and Traveller children, pupils on Pastoral Support Programmes, children in Armed Forces families, and children who are Electively Home Educated.

Social care services have corporate parental responsibility for ensuring that every child or young person with additional social care needs is enabled to reach their full educational potential (Welsh Government, 2021) and as such, the demographics and performance of schools can provide important contextual information for developing and improving social care services for children and families.

## 5. Health

Extensive administrative health data are gathered through all NHS services but much of that data is not publicly available. However, a range of health data is made available through StatsWales such as NHS outpatient, primary and community activity, waiting times and performance measures. These data are not specifically about children in care or receiving support from social services. More detailed data is available about mental health (see Section 6 on Mental Health). Maternity and birth data that may be of relevance to children's social care services covers rates of conceptions and births by age of mothers, as well as rates of low birth weights.

Paediatric services data are available as well as community child health data and child accident and emergency data. General dental and medical population and workforce numbers as well as details of NHS programme budgets are also available. Quarterly data from the Healthy Child Wales programme that started in 2016 covers contacts with children aged 0 to 7 years by a range of geopolitical areas and by whether the child resides in a Flying Start area or not. 'Engagement in healthy lifestyles' questions are asked through the National Survey for Wales which is available through StatsWales and the UK Data Service.

The SHRN survey data are hosted on the PHW Data Dashboard and cover subjective views of secondary school pupils on aspects of physical health including physical activity, food and fitness.

Within the CRCS the number of care and support plans where parental physical ill health is a factor is recorded.

### *Outputs*

The Welsh Government publish a range of health data reports on referrals, wait times, and performance either monthly, quarterly or annually. The National Social Care Data Portal for Wales provide overviews of Welsh Government health data covering conceptions and births, primary and secondary care, lifestyle, disabilities, conditions in the population, and life expectancy and mortality. Health Maps Wales presents a wide range of health indicators by area and over time as well as enabling comparisons at local and national levels. Accident and emergency attendance data is available but only as age-standardised so it is not possible to view child attendance rates. Low birth weight data is presented through a Data Cymru map under the 'Healthier Wales' dashboard enabling local and regional comparisons as well as a view of trends over time. InfoBase Cymru present data through comparative maps and graphs in the areas of early years (including conceptions and births), general health (including lifestyle and medical conditions from the National Survey for Wales, death rates and WIMD health indicators) and health related help-seeking behaviours. SHRN data can be viewed through the PHW Data Dashboard.

### *Data quality*

The data quality of publicly available health data is mixed. Whilst some data has high levels of completeness and a range of validation measures such as data around non-attendance of hospital appointments, other data has specific issues relating to particular health board returns making comparisons between these health boards difficult. Recent changes to the maternity indicators data set have resulted in reduced data quality which is being addressed to improve completeness and data quality over

time. In addition, maternity indicators data only includes data where initial assessment and birth occur in the same health board. The National Community Child Health Database is broader covering children born to Welsh residents and children born in Welsh hospitals.

Data on conception in England and Wales does not include miscarriages and illegal abortions. Health data gathered through the National Survey for Wales is subject to usual survey quality issues (see 'Data Sources and Outputs' for details of the National Survey for Wales).

### *How can health data be used to inform decision making for children's social services?*

Health data can be used to measure the **population in need** of support from social services and the **provision of some preventative support services**.

Trends and patterns in data on conceptions by age, maternal health, births and low birth weight births that are available by local authority or health board could be informative about the need for early intervention support services for young parents and for families with babies with additional needs. General health data may be of relevance to children and family services in relation to health conditions associated with a higher risk of additional social care need (Simkiss et al., 2012) such as parental or child disability (see Section 13), mental health (see Section 6), and substance misuse (see Section 8). Accident and emergency data are available by age but not publicly available by presenting issue. Highlighting particular presenting issues in relation to accident and emergency attendance such as mental health, self-harm or suicide issues, domestic violence or possible non-accidental injury in children and young people could provide valuable evidence for social care services around **need** in their area and the potential for targeted support services.

Data about the Healthy Child Wales programme may be informative in relation to **early intervention and preventative family support services**.

## **6. Mental health**

The Welsh Government Mental Health Measure 2010 (Welsh Government, 2022) ensures that performance indicator data are gathered and published on StatsWales. Data cover admissions to mental health facilities, outpatient attendances, and detentions under Section 135 and 136 of the Mental Health Act. (The Home Office also publish data on the number of detentions under the Mental Health Act for both England and Wales.) Specialist Child and Adolescent Mental Health Service (CAMHS) waiting times are published along with the main presenting issues for

children and young people receiving counselling. Data on the provision of independent counselling services for children and young people aged between 11 and 18 (and pupils in year 6) are also gathered and published by Welsh Government by area, year, episode, ethnicity, gender, and predominant and presenting issues. Welsh Government also make available the NHS expenditure for the budget category 'Mental health problems' (per head and by percentage of total expenditure).

In addition, Welsh Government use the Psychiatric Census to aggregate numbers of patients who are resident in NHS mental health hospitals or units for patients with mental illnesses and/or learning disabilities.

Within the CRCS Census the numbers of care and support plans where parental mental ill health and parental learning disabilities are a factor are recorded. In addition, whether a child has an undiagnosed or diagnosed mental health problem is recorded by the local authority (see Section 1 on Children's Social Care Data for further information and data quality issues).

The ONS also gather data on suicide death rates, mental health death rates, and self-harm emergency admission rates.

Linked to mental health, well-being data for Wales are collected through the Understanding Society survey as part of the SHRN survey. Aggregated data are available through StatsWales. The SHRN survey data are also hosted on the Public health Wales (PHW) Data Dashboard and cover subjective views of secondary school pupils on their mental wellbeing as well as friendships and bullying.

Welsh Government are developing a Mental Health Core Data Set spanning health and social care services.

### *Outputs*

In addition to the publicly available data detailed above, overviews of mental health data for Wales are presented on both Health Maps Wales and the National Social Care Data Portal for Wales. Primarily only Wales-wide aggregated data are presented. Some of the data are available for 2019 and thereafter, and some are only available pre-2018. In this area Social Care Wales have developed projections for numbers of mental disorders by Local Authority, by type of disorder and by gender. However, projecting numbers rather than rates limits comparability across Local Authority. The methodology for developing the projections is briefly described alongside the graphs provided.

The Data Cymru wellbeing dashboard presents mean mental wellbeing scores for those over age 16 years Wales-wide, by region, and by local authority. However,

post 2018 data is not currently available. Data Cymru also present the percentage of people who experience loneliness.

The InfoBase Cymru dashboard covers a range of wellbeing of Wales indicators including mean mental well-being score for people aged 16 or over. Interactive map and graph views are not available but data by local authority can be downloaded into Microsoft Excel.

SHRN data can be viewed through the PHW Data Dashboard.

### *Data quality*

The Mental Health (Wales) Measure data are aligned with the Code of Practice for Official Statistics (UK Government, 2023) with regard to relevance, accuracy, timeliness and punctuality, accessibility and clarity, comparability and coherence. Therefore, StatsWales data on mental health supplied by local health boards are considered to be of a high quality. The data and headline results are published quarterly albeit with limited commentary. The headline data are easily accessible via the Welsh Government website. Outputs have a clear focus on Wales and comparisons can be made between local health board areas. However, the information is intended for a more informed audience and StatsWales lacks explanation for other users. There is no mapped data and because of devolved health care policy in Wales the scope for direct UK comparisons is limited. In addition, English figures on outpatient activity include tele consultations and a wide range of allied health professional activity, which are not covered in Wales to the same extent.

Home Office data on mental health detentions are considered experimental, being provisional and incomplete.

For CAMHS waiting times agreed standards and definitions within Wales provide assurance that the data is consistent across all LHBs. Waiting times information is available from England, Scotland and Northern Ireland but the data are not directly comparable due to local definitions, different measurement points and standards in each area.

Interview data highlighted the importance of definitions within mental health data gathering where understandings, classifications and willingness to use mental health 'labels' may differ between services and have changed over time presenting challenges in obtaining consistent data. Age was another important consideration highlighted within the interview data as much mental health data is published as under age 18 years or over age 18 years. This means data for young people transitioning from child to adult support services who are at risk of discontinuity in

their care are not publicly available. Interview data suggested that services who refer on to NHS mental health services are in need of more mental health data to inform their own service development.

### *How can mental health data be used to inform decision making for children's social services?*

Mental health data can be used for information about the **population in need** of support from social services, such as the proportion of the population admitted to mental health facilities. It can also be used to measure some **provision of care**, such as the provision of independent counselling services for children and young people.

The mental health of adults and children is worsening in the UK (McManus et al. 2016, Pitchforth et al. 2019) and globally (Rehm and Shield, 2019). Parental mental ill-health is associated with the likelihood of family involvement with social care services (Wood et al., 2022). Mental ill-health in childhood is a predictor of mental ill-health in adulthood and can influence educational, employment, physical health and quality of life outcomes (Copeland et. al. 2015). Children and young people with additional social care needs have lower wellbeing (Long et al., 2017) and are more likely to have a diagnosed mental health disorders (Evans et al., 2022).

## 7. Domestic abuse

The ONS gather data on domestic abuse from the Crime Survey for England and Wales and police recorded crime. A selection of data for England and Wales are made available publicly by the ONS including domestic abuse prevalence and trends and domestic abuse victim characteristics by police force area. Information on the use of domestic abuse support services is gathered. In addition, the number and percent of CRCS plans where domestic abuse is an issue is recorded in StatsWales.

### *Outputs*

Reports from the ONS data on domestic abuse are published by the ONS.

### *Data issues*

These data all cover both England and Wales but are not directly comparable between police force areas due to possible differences in data collection, definition and categorisation differences in possible domestic abuse cases, cohort variation and the time taken for cases to progress through the criminal justice system. Whilst the use of domestic abuse support services adds vital context to police recorded data

and crime survey data, many instances of domestic abuse go unreported meaning that the level of support and protection needed for victims of domestic abuse and their children is likely to not be fully reflected in ONS statistics. The authors were not able to find any publicly available data on numbers of perpetrators of domestic abuse or access to support services for perpetrators.

### *How can domestic abuse data be used to inform decision making for children's social services?*

Domestic abuse data can be used for information about the **population in need** of support from social services, such as the prevalence of domestic abuse by police force area, and the **provision of care**, such as the use of domestic abuse support services.

Domestic abuse, alongside mental ill health and substance misuse is a factor of the known trilogy of risk of out-of-home care for children (Hodges, 2020a). Revised Crown Prosecution Service guidance classes children who witness domestic abuse as victims of domestic abuse (CPS, 2022) and as such domestic abuse, independently or concurrently with other risk factors, can lead to children entering the care system (Kohl et al., 2005). Understanding levels of domestic abuse prevalence may indicate **level of need**, and rates of access to domestic abuse **support services** can provide further context. Assessing levels of domestic abuse alongside other trilogy of risk factors can provide further context for the possible numbers of families at risk with complex needs. (See Section 6 on Mental Health data and Section 8 on Substance Misuse data).

## 8. Substance misuse

There are limited data available on StatsWales relating to substance misuse. Data are available on referrals to drug and alcohol services in Wales as well as treatments within those services. In addition, the CRCS Census includes data on the number and percent of CRCS plans where substance misuse is recorded as a problem and a yes/no variable for whether individual children included in the Census are known to have a substance misuse issue. The ONS makes available data on alcohol-specific and illicit drug use hospital admission rates as well as deaths related to drug poisoning. The MoJ present combined figures for England and Wales on the seizures of drugs by local police forces and UK Border Forces.

The SHRN survey data are hosted on the Public health Wales (PHW) Data Dashboard and cover subjective views of secondary school pupils on smoking habits including e-cigarettes, alcohol consumption and access to and use of cannabis and psychoactive substances.

## *Outputs*

Health Maps Wales and Digital Health and Care Wales dashboards present the substance misuse data that is publicly available on StatsWales and from the ONS. The National Social Care Data Portal for Wales presents figures for projected problematic drug use from the National Crime Survey for England and Wales and from hospital admissions data.

SHRN data can be viewed through the PHW Data Dashboard.

## *Data quality*

Data on substance misuse is difficult to gather and report on. There is a cross-over of substance misuse data from criminal justice sources and from health services. In both arenas definitional and classification issues as well as under-reporting will likely impact how accurately official data sources can reflect prevalence of substance misuse in both child and adult populations. Referrals and treatments in drug and alcohol services will only reflect those engaged with services. The CRCS Census measure of parents and children with substance misuse issues are from case file data completed by social workers so may not accurately reflect actual levels of substance misuse in CRCS.

There are some specific data quality issues with the hospital admissions data relating to individual health boards (further details and links to quality reports are available in the Data Discovery spreadsheet [here](#)). Lower data quality makes comparisons with other UK nations problematic generally. However, mortality rates from drug poisoning are considered comparable.

### *How can substance misuse data be used to inform decision making for children's social services?*

Substance misuse data can be used for information about the **population in need** of support from social services, such as alcohol-specific and illicit drug use hospital admission rates, although as explained above, these data likely under-estimate the prevalence of substance misuse. The data can also be used to inform some **provision of care**, such as the number of referrals to drug and alcohol services. Data on **preventive services** is lacking.

Substance misuse is a known factor within the trilogy of risk of out-of-home care for children (Hodges 2020a; along with mental health (see Section 6) and domestic abuse (see Section 7). Substance misuse amongst parents and children and young people is known to be associated with children entering the care system due to abuse and neglect (Cleaver et al., 2011; Roy, 2020, Simkiss et al., 2013). Whilst an

accurate reflection of problematic drug use through either administrative or survey data would be difficult to achieve, data showing trends and patterns of drug and alcohol service use may enable area comparisons and could facilitate discussion between local authorities about the success or otherwise of different services and responses to substance misuse.

## 9. Deprivation

The WIMD is a widely used measure of deprivation. It is based on various indicators such as income, employment, health, education, housing, access to services, community safety, and physical environment. The WIMD ranks small areas called Lower Layer Super Output Areas (LSOAs) in Wales on a scale of 1 to 10, with 1 being the most deprived and 10 being the least deprived. There are 1,909 LSOAs in Wales with an average population of 1,600 in each. WIMD data has been gathered and made available at five timepoints: 2005, 2008, 2011, 2014 and 2019.

In addition to the WIMD, there are other data sets that provide information on deprivation in Wales such as data on income deprivation, material deprivation, and housing deprivation. Other data is available on food bank usage, fuel poverty and the number of people receiving income support.

### *Outputs*

Data on deprivation and poverty are published primarily by the Welsh Government and the Department for Work and Pensions.

StatsWales enables access to WIMD data by individual indicator and by age. The 2019 WIMD data is also available by protected characteristics and by 'deep-rooted' deprivation, meaning areas that have remained in the top 50 most deprived small areas in Wales for the last five publications. Reports of detailed results of WIMD data are published by the Welsh Government for each timepoint.

Data Cymru, InfoBase Cymru and the National Social Care Data Portal for Wales all cover Welsh Government data on deprivation with a range of views of within-Wales geographical comparisons available. The Poverty dashboard of Data Cymru enables users to select a measure and geographical area for map and graph views of material deprivation including percentage of pupils eligible for FSM, and income-related deprivation such as percentages of people claiming job seekers allowance or universal credit, and percentages of the population living in income deprivation. InfoBase Wales includes a view of child poverty in Wales with graphs of the percentage of children living in poverty and the percentage point changes shown by local authority from 2015. A Wales-wide four nations comparison of child poverty is

also available from 2000. The National Social Care Data Portal for Wales includes comparison graphs by local authority for a range of income and material deprivation measures.

### *Data quality*

Data quality information and technical details for the WIMD data are published by the Welsh Government. The WIMD measure is designated as a National Statistic meaning these official statistics meet the highest standards of trustworthiness, quality and public value. However, there are numerous ways to assess deprivation in populations and the WIMD is designed to measure concentrations of several types of deprivation at small area level. WIMD does not therefore measure amount of deprivation in an area, and change in area rankings overtime may not reflect changes in absolute levels of deprivation. In addition, the WIMD rankings are not comparable with indices of deprivation used in other UK countries.

Interview data suggested that WIMD data are more accurate for densely populated areas than for rural areas in Wales where LSOA areas are much larger. Interview data also highlighted the importance of more nuanced understandings of the meanings of different measures of poverty and deprivation which present different benefits and challenges. Examples were given of lack of understanding of the nature of housing or fuel related poverty measures within local authorities at practice and management levels.

### *How can deprivation data be used to inform decision making for children's social services?*

Deprivation data can be used for information about the **population in need**. Deprivation is highly associated with the rate of children in care (Bywaters et al., 2020; Bennett et al., 2021). Hodges (2020a) found that almost half (47%) of the variation in local authority care rates in Wales can be explained by deprivation.

The eight WIMD domains can have significant impacts on families where ill-health, low educational attainment and lack of employment opportunities can increase the risk of poverty and inadequate housing (Bennett et al., 2020). Deprivation data for Wales may enable better understandings of these broader conceptualisations and measures of deprivation, and may enable innovation in support services where poverty is persistent and exacerbated by others forms of deprivation.

## **10. Housing and homelessness**

Housing is a domain of the WIMD measure identifying inadequate physical and living conditions specifically in relation to overcrowding and likelihood of housing being in disrepair or containing a serious hazard. Data on housing need, stock and conditions, and social housing lettings, quality, rent arrears, sales and vacancies are also gathered by Welsh Government. The aggregated data are available on StatsWales and covered in a range of summary reports available on the Welsh Government website.

In relation to homelessness, Welsh Government present data on numbers of rough sleepers annually by local authority (available 2015 to 2020), and households temporarily accommodated quarterly, again by local authority and also by length of time accommodated, by type of accommodation, and for those households that are families with children (available 2015 to 2022). A range of data covering successful preventions of homelessness are presented annually (2015-2022) by local authority and also by gender, age, ethnicity and household type.

### *Outputs*

Some housing related measures are available through the Data Cymru wellbeing dashboard under 'A Resilient Wales' including households in material deprivation, flood risks, and other environmental factors such as average nitrogen dioxide measures and surface/ground water quality measures. DataMapWales also provide map and graph views of some Welsh housing data. InfoBase Cymru uses the range of available homelessness data gathered by Welsh Government to populate interactive maps and graphs. Interview data highlighted that a fuel poverty dashboard is currently being developed by Welsh Government with stakeholder input to the format and content.

### *Data quality*

Welsh Government housing data gathered from local authorities, registered social landlords and national parks aims for a 100% response rate which is often achieved, and where not the response rate is provided in statistical summary releases. Census data gathered by the ONS can be subject to errors at all stages of data collection and processing which must be accounted for when using census and survey data (See 'Data Sources and Outputs' for information on the National Survey for Wales).

The measure of rough sleepers in Wales is based on a two-week information gathering period followed by a one-night count. This measure has significant limitations in relation to the day and time of count as well as the time of year and weather conditions. Due to the transient nature of homelessness, counts will most likely underestimate the numbers of individuals who are experiencing or are at

imminent risk of homelessness at any one time. These issues were corroborated through interview data.

### *How can housing and homelessness data be used to inform decision making for children's social services?*

Housing and homelessness data can be used for information about the **population in need**. Families living in inadequate housing or homelessness may be in greater need of additional support from social care services and may be at greater risk of children in the family entering the care system (Wood et al., 2022).

Young people leaving care are also at greater risk of homelessness than their non-looked after peers (Whalen, 2015) and are at greater risk of 'hidden homelessness' being more likely to rely on informal living arrangements than seeking formal help (Celsis, 2019). As corporate parents, local authorities are responsible for ensuring that the housing needs of care-experienced young people are met to the highest standards (Welsh Government, 2014). However, to explore trends in homelessness of **care leavers**, homelessness and care leaver data would need to be linked.

## 11. Employment and the labour market

The ONS provides the majority of Wales-wide and local authority level data on employment and the labour market from the Census. The Census data covers economic activity status, socio-economic classifications, and occupations by industry. The numbers of residents in employment working from home, and methods of travelling and distance travelled to work are also covered. Census data is available at local authority level. The ONS also provide data from the Labour Force Survey which details the percentage of economically active unemployed individuals by local authority, and a UK-wide labour market overview. The Department for Work and Pensions make available local authority level administrative data for Wales regarding the number of working-age people who are claiming Job Seeker's Allowance.

### *Outputs*

The ONS provide reports on the Census data as well as interactive data maps where users can select and filter map and graph views of relevant data. The National Social Care Data Portal for Wales provide views of aggregated data in relation to the percentage of economically active unemployed split by gender and by those wanting a job or not.

### *Data quality*

Recent labour market Census data will necessarily have been impacted by the COVID-19 pandemic with people on furlough encouraged to identify themselves as “temporarily away from work”. The influence of other characteristics on likelihood of being furloughed may affect the labour force statistics. Changes to labour market definitions will impact comparisons with previous Census data collections and respondent information on their industry appears to differ from the Business Register and Employment Survey.

The data that a census collects will inevitably contain errors, however well the census is designed. Errors can arise at all stages of the data collection and production processes.

The Scotland and Northern Ireland Censuses ask the same core questions as the England and Wales Census making it possible to compare different parts of the UK. Small differences exist, in particular the Scotland Census was carried out in March 2022 whereas the Northern Ireland, and England and Wales Censuses were carried out in March 2021. Questions and classifications are also aligned to international standards where possible to enable wider country comparisons.

### *How can data about employment and the labour market be used to inform decision making for children’s social services?*

Data about employment and the labour market can be used for information about the **population in need**, due to its strong association with poverty (see Section 9 on Deprivation) and mental health (see Section 6).

Unemployment can have wide-ranging impacts on individuals and families. Individuals may experience social and material deprivation and poorer mental health than those in employment (Dieckhoff & Gash, 2015; Cygan-Rehm & Kuehnle, 2017). Yet employment that is low wage, unstable, and/or requires evening or early morning work may have a negative impact on the ability to care for children, particularly for single parents (Wood et al., 2022).

Understanding patterns of employment and unemployment across different regions and analysing trends over time could provide useful insights into the effects of employment on different groups of individuals and where support services could be best targeted.

## 12. Crime

The ONS gathers data through the Crime Survey for England and Wales including rates of particular offences against households and adults such as drug offences,

homicide, sexual offences, computer misuse, violence and anti-social behaviour. Separately data are gathered around street-level crime and stop and search incidents. Information about offenders and about victims' perceptions of crimes are also collated and available through the ONS. The ONS publish a 'Child Abuse Compendium' bringing together published data to produce a data landscape for child abuse. A similar data landscape is provided for violence against women and girls. Specific data are available through the ONS relating to experiences and perspectives of crime for different ethnic groups.

The Home Office covers police data on case outcomes and the numbers and characteristics (gender, age, local authority) of first-time entrants into the criminal justice system. In addition, the National Survey for Wales and the Crime Survey for England and Wales gather data on police recorded hate crimes (offences perceived, by the victim or any other person, to be motivated by hostility or prejudice towards someone based on personal characteristics of race or ethnicity, religion or beliefs, sexual orientation, disability or transgender identity). Police workforce data by sex, ethnicity, age and officers' role are also available.

One domain of the WIMD relates to community safety which includes rates of police recorded criminal damage, violent crime, anti-social behaviour, burglary, theft, and fire incidences. (See Section 9 on Deprivation for details on the WIMD).

Data on children who have experienced or are at risk of sexual exploitation and criminal exploitation are available on StatsWales.

The Youth Justice Board (YJB) are responsible for publishing youth justice annual statistics for England and Wales covering first-time entrants into the youth justice system, demographic characteristics of children cautioned or sentenced, proven offences by children, the sentencing, remand and custody of children, and criminal history and reoffending data for children. The YJB also produce experimental statistics for example around assessing the needs of sentenced children.

The Youth Custody Service (YCS) publishes monthly reports of youth custody data and data relating to the safety of children and young people in the secure estate.

The MoJ compile statistics on Women and the Criminal Justice System for England and Wales. A range of data sources across the Criminal Justice System are used. Age, ethnicity, changes over time and comparison with the experiences of males in the criminal justice system are included.

## *Outputs*

Crime data sets from the ONS are available to download in Microsoft Excel. The Home Office publish reports of crime data and also have a Criminal justice system delivery data dashboard with a 'How to use' guide as well as chart builder and map view features.

The YJB produce annual reports of youth justice data for England and Wales and the MoJ produce an annual report on the Women in the Criminal Justice System. These data sets are all made available in accessible and in infographic versions. In addition, the data are publicly available to download in Microsoft Excel pivot tables that can be filtered by area (country, region and police force), age, ethnicity and sex. Map views are also provided.

### *Data quality*

The ONS, Home Office, YJB and YCB all provide detailed information on the methodologies used to gather, analyse and publish these national crime statistics for England and Wales. Definitions and categorisations which may impact understandings of the data are covered, as well as administrative data and methodological issues. Youth Justice and Women in the Criminal Justice System statistics are classified as National Statistics in accordance with the Code of Practice for Official Statistics. Data sources, methodologies, data quality and terminology are covered in published guides.

However, rapidly changing understandings and definitions of crimes, as well as changing responses to reported crimes, particularly sexual offences, harassment, and crimes against women and children, make comparisons of crime data over time and between police force areas problematic and in some cases not recommended. These issues were highlighted in stakeholder interviews.

The Children's Crime Survey (part of the Crime Survey for England and Wales) provides interesting perspectives on children's experiences of crime as well as online activity and bullying. Sample size means only national estimates are possible.

Separating crime data for England and Wales was considered by interview participants to be an important step but methodological issues would mean data over more than one year would need to be amalgamated.

*How can data about crime be used to inform decision making for children's social services?*

Data about crime is varied, but can be used for information about the **population in need** of children's social care services and **provision of care**, due to its association with child safety.

Many referrals to social services in relation to child protection, domestic abuse and substance misuse are made directly from the police (Ford et al., 2020), and therefore understanding crime data could be informative about **need** as well as, **provision of care** in response to referrals.

Furthermore, over 53% of women in the criminal justice system experienced abuse as children, compared to 22% of men (Advance, 2021). Far more women than men are primary carers for children, with significant consequences for the children of mothers who go to prison (Miller, 2006).

Children and young people in care and **care leavers** are also over-represented in the criminal justice system (Staines, 2017) and are more vulnerable to child criminal exploitation and child sexual exploitation (Maxwell & Wallace, 2021; Social Care Wales, 2019).

### 13. Disability

Data on the number of people with physical or sensory disabilities in Wales is gathered through registrations under Section 29 of the National Assistance Act (1948). Data are available through StatsWales by age range (0 to 5, 5-17, 18-64 and 65+ years) and by sex, economic activity and region. Further data around disability is gathered through the Annual Population Survey carried out by the ONS. These are self-report measures and are based on medical rather than social models of disability. Data are available by age ranges (16-24, 25-44 and 45-64 years) and by sex, economic activity and region. In addition to these disability data sets, local authorities submit to Welsh Government administrative data on the numbers of persons known and identified as having a learning disability.

Within the CRCS Census there is a yes/no variable for whether a child, young person or parent has a disability or not completed by social workers on case file records.

Local health boards submit data to the CIW on the number of applications for Deprivation of Liberty Safeguards.

#### *Outputs*

Child and adult disability data from StatsWales are presented through Infobase Cymru as well as the National Social Care Data Portal for Wales.

Registration under the National Assistance Act (1948) is voluntary so numbers may be under-represented, although numbers may be most accurate in relation to severe sight impairment due to registration being a precondition of certain financial benefits. With regard to learning disabilities, again the data are likely to underrepresent true numbers as not all individuals with either diagnosed or undiagnosed learning disabilities will be known to their local authority. Deprivation of Liberty Safeguards data is submitted by local health boards but is not verified by the CIW.

### *How can data about disability be used to inform decision making for children's social services?*

Data about disability can be used for information about the **population in need** of children's social care services, but little data is available about the **provision of care**.

Children and young people who are registered as disabled or as having learning disabilities are often in receipt of care and support from their local authority (Welsh Government, 2015; NHS, 2022). Parental disability may also mean that families require additional support from social services (Cleaver et al., 2011; Simkiss et al., 2012; UK Government, n.d.). In some circumstances children and young people may become young carers (Royal College of Paediatrics and Child Health, 2020) for family members with disabilities. Children and young people with a disability are at greater risk of becoming looked after (Baker, 2011).

Trends and patterns in both child and adult disabled populations may indicate **levels of need** for social care support. Levels of self-reported disability through survey and census data may contextualise administrative returns from local authorities and local health boards and could be revealing about **unmet need** around disability. However, statistical comparisons should be made with caution.

## **14. Demographics and household composition**

Data on demographics and household composition in Wales is publicly available, primarily from the ONS. This includes data on population size and demographics, as well as household composition and internal and international migration. Some data are updated annually, whereas others are collected every ten years (for example through the Census). Interview data suggested that ongoing dialogue around the variables sex and gender identity is of increasing importance for all administrative and survey data in Wales.

## *Outputs*

Both Welsh Government and the ONS produce a range of reports on population estimates and population projections. In addition, overviews of demographic and population data are available on the National Social Care Data Portal for Wales, Data Cymru, Infobase Cymru and Health Maps Wales.

## *Data quality*

Official population estimates immediately following Census collection are considered to be highly reliable as are administrative registers of births and deaths. As such these data are comparable with other UK Nations and by within-Wales smaller geographies. However, other categories of Census data will necessarily contain errors at all stages of data collection and production for example due to sampling, definitional issues, self-reporting biases and treatment of missing data. These data quality issues must be accounted for when interpreting the data.

In particular, some sub-groups may be under-represented in Census data such as homeless people, non-English speaking residents, and refugees and asylum seekers (Local Government Association, 2023). In some areas data may be missing, under-represented or the numbers may be too small to represent, such as with religious identity. Projections are not counts but estimates, and are often created from combined data sources and are therefore subject to coverage and errors from the original data sources. International migration may be particularly subject to uncertainty which is of importance to social care services supporting child and family migrants and asylum seekers.

### *How can data about demographics and household composition be used to inform decision making for children's social services??*

Data about demographics and household composition can be used for information about the **population in need** of children's social care services and can help to identify **vulnerable groups**. Tracking trends and changes in population and household demographics by different sub-groups such as gender, ethnicity, religion, age and migration can enable social care services to understand possible broad changes in the **level of need** of the children and families they support (Webb et al., 2020).

In particular, single parenthood, ethnicity and parent age have been shown to be associated with social care involvement (Simkiss et al., 2013; Webb et al., 2020).

## **15. Community resilience, cohesion and inclusion**

The National Survey for Wales is used to gather data for Welsh Government on a range of aspects of community well-being, covering cohesion, resilience and inclusion. For example, participants are asked if they feel they belong in their area and that people from different backgrounds get along and respect each other. Participants are also asked if they feel they can influence decisions that affect their local area, whether they feel safe, and whether they are satisfied with the local area as a place to live. A further range of data around Environment and Countryside are gathered by Welsh Government that may be of relevance to social care services such as air quality and properties at risk of flooding, data for which are available by local authority.

### *Outputs*

The community wellbeing data above is available to view in the Data Cymru Well-being of Wales dashboard under the sections 'A Wales of Cohesive Communities' and 'A Resilient Wales'. The same data are displayed through InfoBase Cymru dashboards in their data sections on community, community safety and environment. The National Social Care Data Portal for Wales also presents the air quality data from Stats Wales. The Welsh Government reports key findings from the National Survey for Wales in monthly and quarterly updates.

### *Data quality*

Community resilience data in Wales is obtained from the National Survey for Wales. (See 'Data Source and Outputs' for information on the National Survey for Wales.) Interview participants highlighted that practice in Community Safety is reliant on police data and that access to up-to-date community-wide data in areas such as health and deprivation could inform strategic development.

### *Why are data on community resilience, cohesion and inclusion important for social care?*

Data about community resilience, cohesion and inclusion can be used for information about the **population in need** of children's social care services and can help to identify **vulnerable groups**.

'Where we live' including crime and feeling safe, belonging to a neighbourhood, access to the natural environment, access to services, and satisfaction with accommodation can be considered as an aspect of wellbeing (What Works Wellbeing, 2017). In addition, community cohesion, shared values, belonging, ownership of community processes and collective mood can be conceptualised as community wellbeing or 'being well together' (Atkinson et al. 2020). In addition, individual wellbeing has been found to be positively correlated with levels of

community attachment (Theodori 2001) and increasing social cohesion can prevent mental health problems, such as depression and anxiety (Breedvelt et al., 2022).

Improving the wellbeing of individuals and communities, and tackling the rise of mental health problems for adults and children and young people are key priorities for the Welsh Government (Welsh Government, 2022). Poor mental health in adults (as parents) and children is associated with likelihood of additional need from children's social care services and increased risk of children becoming looked after (Wood et al., 2022).

In relation to local environmental factors such as air quality and flood risk, there are known inequalities where people living in more deprived areas face disproportionately higher environmental risks than those in less deprived areas (Hastings et al., 2005). Children living in areas of deprivation are at higher risk of care entry and therefore the intersection between environmental risks and deprivation deserves further exploration in relation to social care **need** and the **provision of services**. These community-based statistics could provide supporting narrative to national indicators and be used by public services boards in relation to their local well-being assessments and local well-being plans.

## 16. Other themes

In addition to the core themes discussed in this report there are other publicly available data that may be of relevance to children's social care services. We have included in the Data Discovery spreadsheet three additional themes deemed to be of relevance.

- Adult social care: various measures related to adult safeguarding and service provision, including types of abuse, number of reports received, and number of adults suspected of being at risk.
- Discrimination: Wales-wide numbers of people who have experienced discrimination, harassment or abuse, by type of discrimination.
- Welsh language: Welsh language skills split into speaking, reading, writing and understanding.

Further details on the kinds of data available under these themes, where to access the data, useful outputs and data quality information are available in the Data Discovery spreadsheet.

## Data sources and outputs

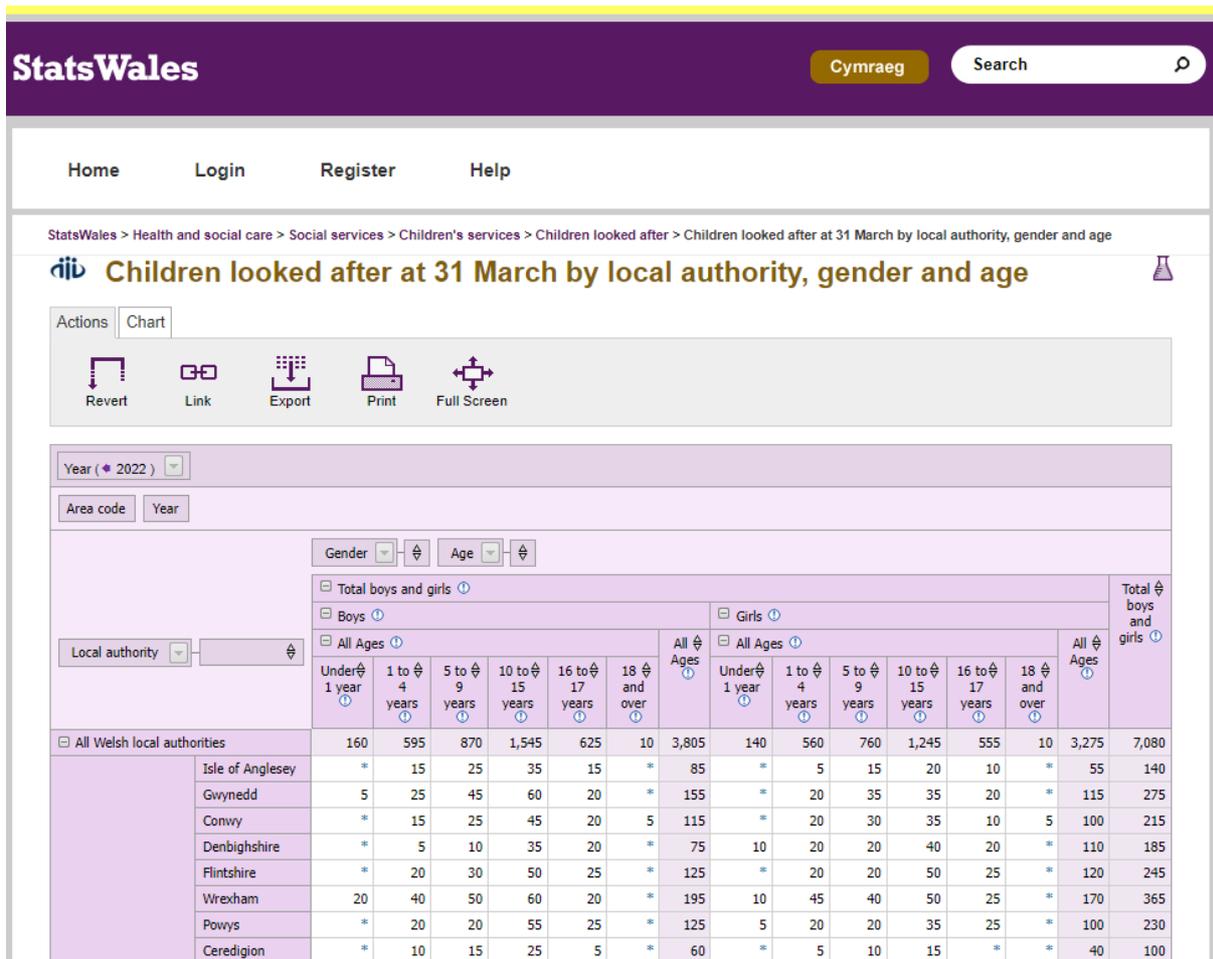
The data mentioned in the above themes are available in several formats. StatsWales produces tables which can be downloaded and are helpful for looking at one topic (e.g. rate of children in care) by area or demographics. For multi-agency data analysis at area level (e.g. local authority), data sets would need to be downloaded, matched and analysed. For a more user-friendly alternative, there are a number of data dashboards available, which allow users to plot multi-agency data in a variety of formats (e.g. bar charts, heat maps etc.). Available data sources and outputs are summarised below.

### StatsWales

StatsWales is a free-to-use online repository that allows users to view and manipulate aggregate Welsh data at different geographical levels (e.g. local authority) and create and download tables from a wide range of sources. The system covers nearly 1,000 data sets. The catalogue is arranged by theme, including a Health and Social Care theme, or data sets can be searched for using key words. General population statistics are available and other thematic areas include education, housing and well-being. StatsWales uses administrative data returns from services across Wales as well as data from surveys. Metadata is provided for all data sets, all statistics follow the standards defined by the UK Statistics Authority, and they are produced according to the principles of the Code of Practice for Official Statistics.

Raw data is not available, but data can be manipulated for example by year, sex, age, and area as shown in Figure 2.

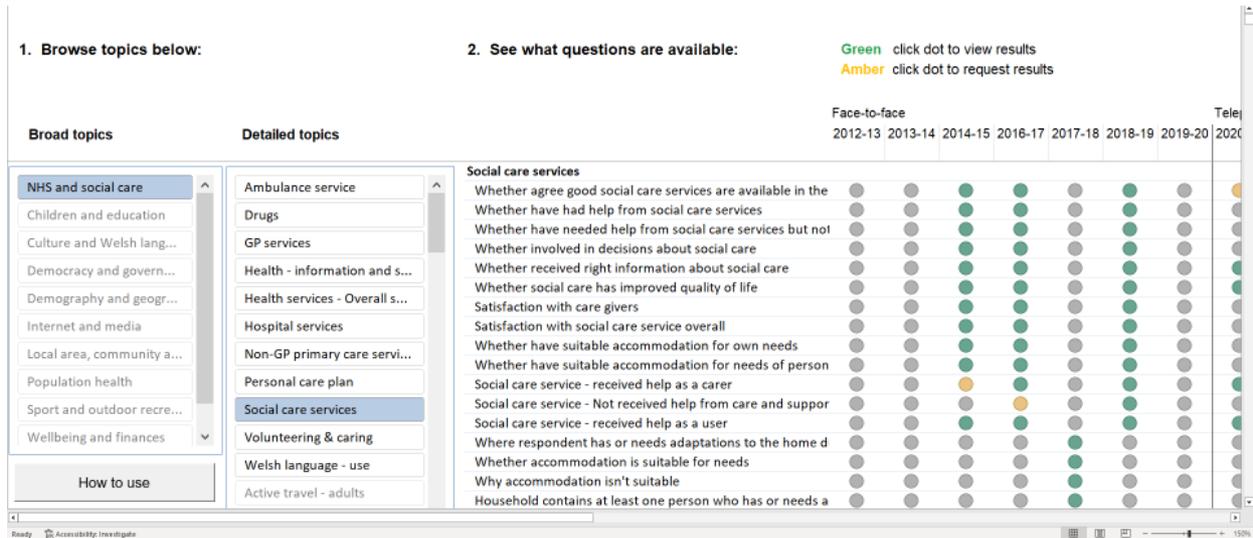
Figure 2: Snapshot of a Stats Wales data table covering CLA at 31 March by local authority, gender and age.



## National Survey for Wales

The National Survey for Wales collects data from around 12,000 adults in Wales each year through telephone interviews and online questionnaires. A range of themes are covered such as wellbeing and people's views on public services. The Welsh Government publish a report of the survey results annually, aggregated results are available through StatsWales, and anonymised raw data is deposited with the UK Data Service. (Users must register with the UK Data Service to access the survey results.). A National Survey for Wales results viewer is also available ([here](#)), see Figure 3 for snapshot.

**Figure 3: Snapshot of the National Survey for Wales results viewer.**



Data quality information and technical details for the National Survey for Wales are published by Welsh Government (Welsh Government, 2023). The United Kingdom Statistics Authority has designated these statistics as National Statistics, in accordance with the Statistics and Registration Service Act 2007 and signifying compliance with the Code of Practice for Statistics. National Statistics status means that official statistics meet the highest standards of trustworthiness, quality and public value (UK Statistics Authority, 2023).

The response rate is high for a telephone survey but a substantial proportion of those sampled do not take part which is likely to affect the accuracy of the estimates produced. Confidence intervals which indicate the size of sampling error are included in the survey results published by StatsWales. Many of the survey questions are used in other national surveys allowing for comparisons with other UK countries. Survey questions are developed to be as accessible as possible, but participants may not be able or may not wish to respond accurately, and questions can be misunderstood. Inaccurate responses can further affect the validity of the estimates produced. The survey does not cover people living in communal establishments (e.g. care homes, residential youth offender homes, hostels, and student halls) meaning that carers for children and young people in residential placements will not be included in the survey sample. The sample size means that robust analyses for smaller geographical areas and other small subgroups are not always possible.

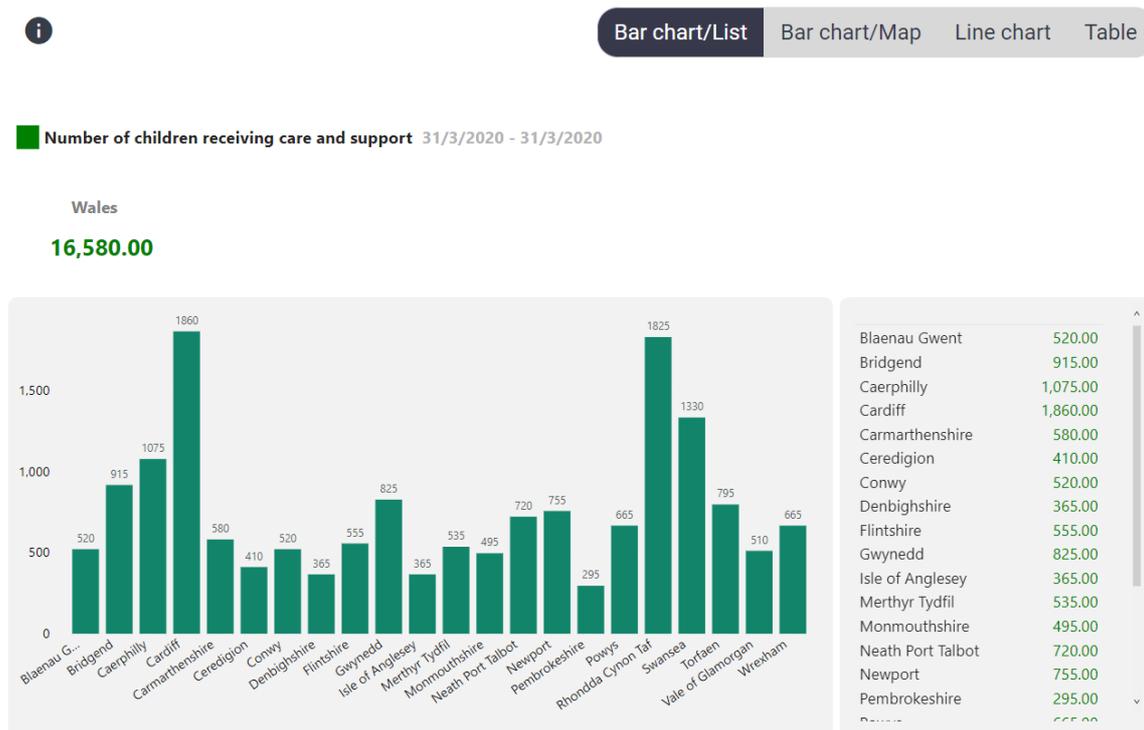
Welsh Government publish a wide range of easily accessible reports and summaries of data quarterly and annually. It is made clear for each report whether it is the latest

release being viewed, and if not a link is provided to the latest release for that data set.

## National Social Care Data Portal for Wales

The National social care data portal for Wales is hosted by Social Care Wales. Social Care Wales works with a broad range of organisations, as well as people who use care and support services, to set standards and accountability for the care and support workforce in Wales, to improve social care services, share good practice, set priorities for research and to provide information to the public and other organisations. The National Social Care Data Portal for Wales presents a range of aggregated Welsh Government statistics covering adult social care, carers, children and young people, health and wellbeing, how money is spent, people and place, and the social care workforce. The portal is intended to provide quick access to comparative social care statistics for Wales for people working in the social care sector and the general public. Many statistics are available at Wales-wide level. Local authority level data are also available through ‘quick view’ graphs (see Figure 4). However, when making comparisons caution should be taken when numbers are presented rather than rates or percentages.

**Figure 4: Snapshot of the number of CRCS at a given time, as displayed by the National Social Care Data Portal for Wales.**

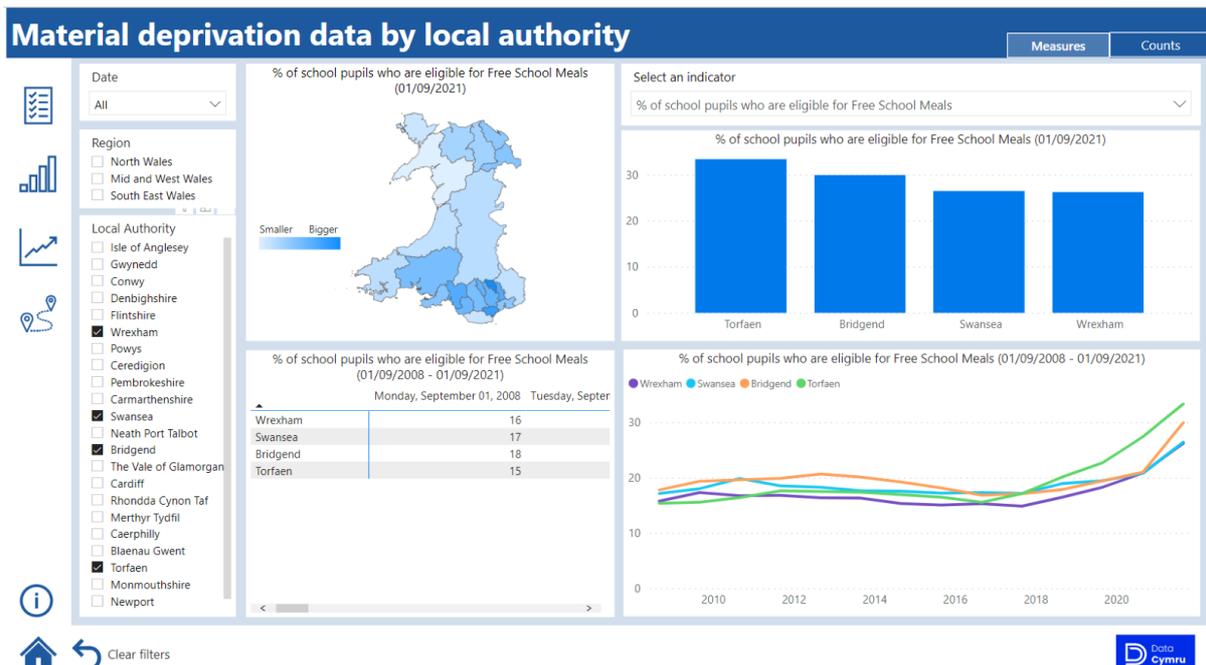


## DataCymru

Data Cymru is a Welsh local government company that helps to source, collect and collate Welsh data, carries out analysis and data presentation, advises on research, and helps to find out what citizens and service-users think. The Data Cymru dashboards include FSM, wellbeing of Wales, poverty, children in poverty and the Wales Census. The FSM dashboard presents only a broad overview of aggregated statistics for 2020. The Wellbeing of Wales dashboard covers a range of themes aligned with the Well-being of Future Generations Act (2015) which are prosperity, resilience, equality, health, community cohesion, culture and language, and global responsibility.

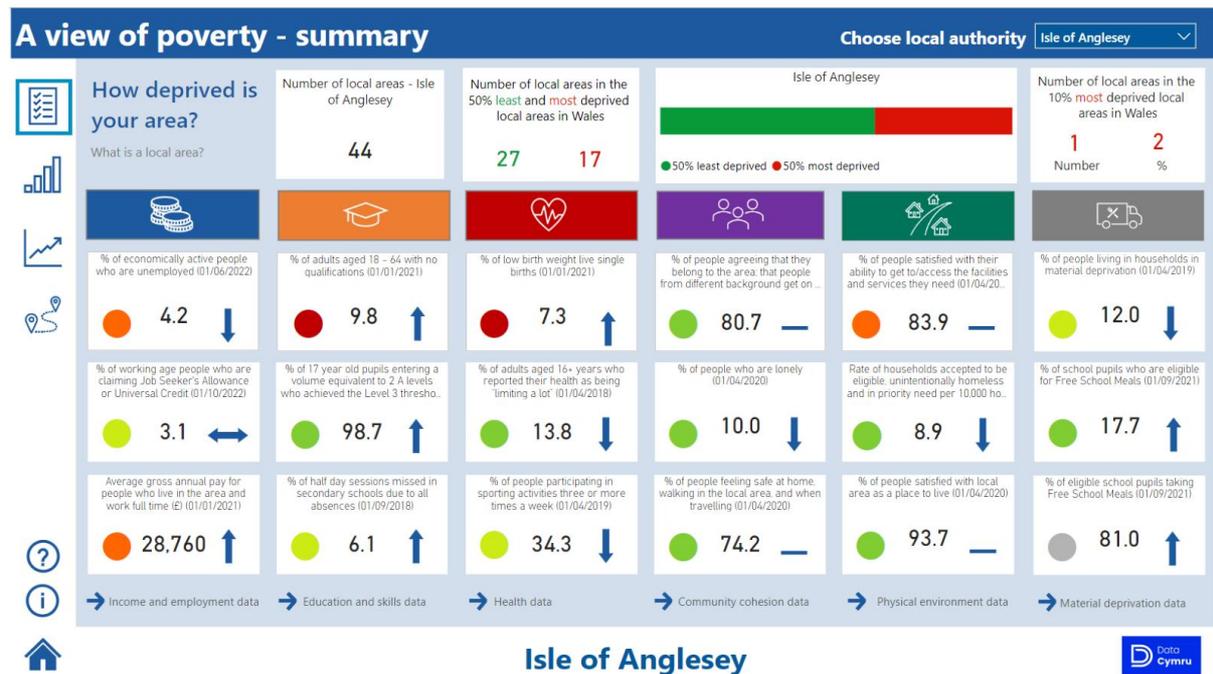
Users can select a measure (e.g. mean mental well-being score for people aged 16 or over, or percentage of people living in households in material deprivation, shown in Figure 5), select a year out of the available range, and select geographies by region, international territorial level, or local authority. Selected data are then displayed by map view, bar graph and line graph.

**Figure 5: Snapshot of material deprivation data by local authority, as displayed by Data Cymru.**



There is an additional view showing a 'data summary' per local authority with key statistics, trends and WIMD rankings (see Figure 6).

Figure 6: Snapshot of a summary view of poverty as displayed by Data Cymru.

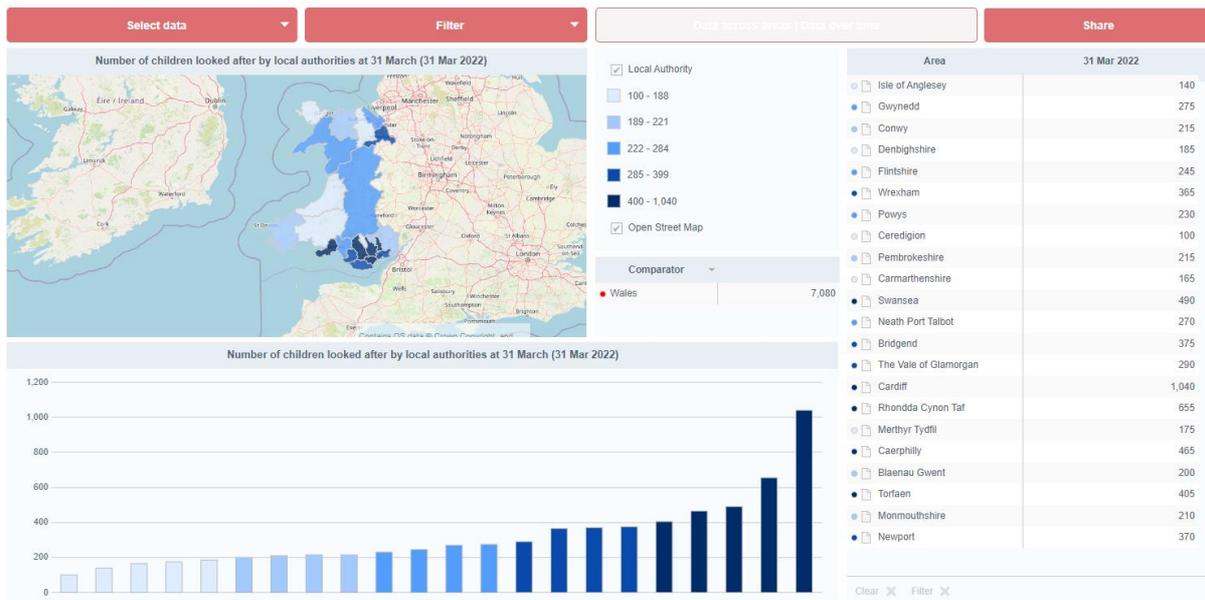


The Census data presented in Data Cymru shows the Wales population through an interactive tool. The tool enables users to make selections by local authority area, sex and age, and to view data as population numbers, population per sq km or number of households. Changes over time are shown from 2001 and a bar graph compares numbers or rates by local authority.

## InfoBase Cymru

InfoBase Cymru is developed, supported and hosted by the Local Government Data Unit Wales. Welsh Government data are presented by topic through interactive maps with filters for the year of the data available as well as geographical filters by Regional Partnership Board region, Regional Skills Partnership region, or local authority. Children's social care data are included, as well as education, early years, health, deprivation and well-being. Comparative graphs are presented between local authority areas as well as by local authority over time (see Figure 7). The aggregated data and metadata are also available to download.

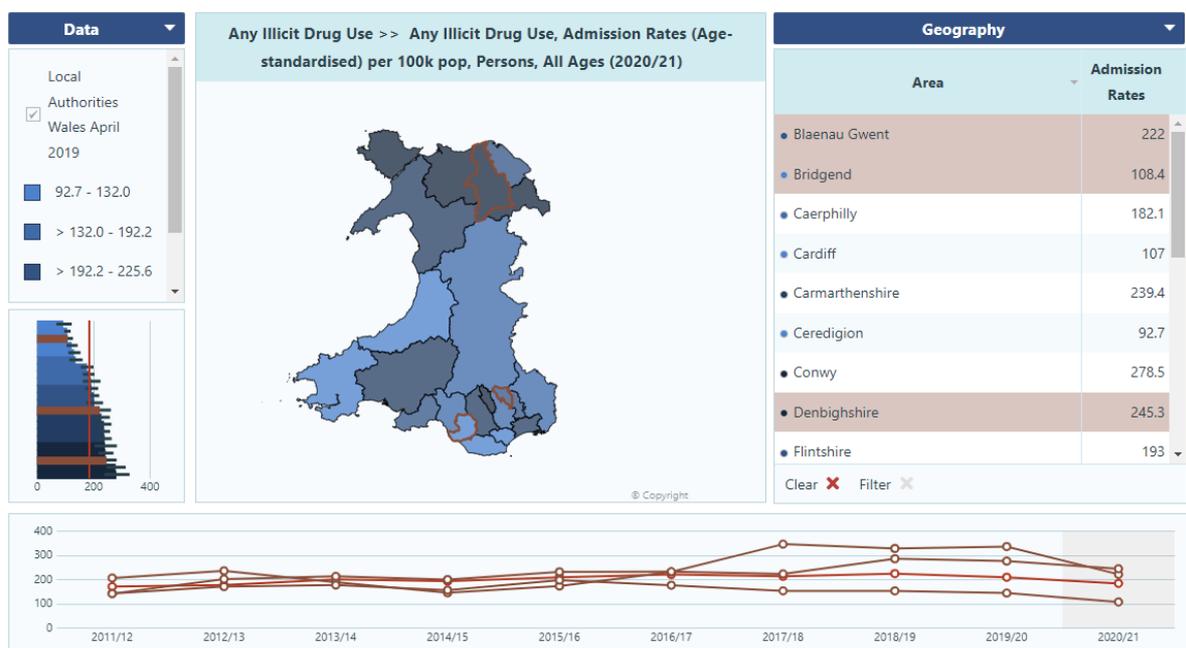
**Figure 7: Snapshot of data relating to the number of CLA by local authorities at 31 March 2022 as presented by InfoBase Cymru**



## Health Maps Wales

Health Maps Wales is a publicly available, interactive mapping tool for exploring Welsh health data. It maps a variety of health indicators under broad health categories, and allows users to explore and compare local and national data by area and over time (see Figure 8). Data are included that may be of particular relevance within children’s social care such as maternity and child health, mental and behavioural disorders, and substance misuse.

**Figure 8: Snapshot of data relating to illicit drug use and hospital admission rates, as displayed by Health Maps Wales.**



## DataMapWales

DataMapWales serves as a source of public sector data in Wales, providing a shared data platform to members of the public and public authorities (Welsh Government, 2023). A data catalogue allows users to browse spatial data, view maps and download data for analysis. The map viewer enables users to view and combine spatial data layers from the catalogue. Whilst much of the data relates to physical and geopolitical landscapes and infrastructure, of relevance to children's social care are the WIMD data sets for 2014 and 2019 which are available through this data tool.

## Public Health Wales

Public Health Wales publishes data dashboards on a range of public health topics such as screening, immunisations uptake and diseases and infections. For example, interactive dashboards show weekly rates and numbers of notifications of diseases and infections, and data are available annually by Local Health Board, age and sex. Public Health Wales also host the SHRN Data Dashboard. SHRN carry out student and school level surveys capturing key health and wellbeing metrics from over 90 percent of mainstream secondary schools in Wales. More information about SHRN can be found at <https://www.shrn.org.uk/>.

## Discussion

This report set out to describe the multi-agency data landscape in Wales for children at risk or in care and their families who need support. Data were categorised into themes and key stakeholders were identified from each theme to sense check the findings from our data searches, find out how multi-agency data is currently used, and its potential future uses.

The report is timely given the First Minister Mark Drakeford has identified reducing care rates in Wales as a priority of the Welsh Government (Wales Centre for Public Policy, 2022) and the recommendation in the Independent Review of Children's Social Care in England to make better use of data for decision making and building evidence in children's social care (MacAlister, 2022).

## Key findings

### Data availability

The data review highlighted the large amounts of publicly available multi-agency data relevant to children's social care. The data available can be categorised into the following:

- 1. Children’s social care (including expenditure)**
- 2. Care leavers**
- 3. Vulnerable groups**
- 4. Education**
- 5. Health**
- 6. Mental health**
- 7. Domestic abuse**
- 8. Substance misuse**
- 9. Deprivation**
- 10. Housing and homelessness**
- 11. Employment and the labour market**
- 12. Crime**
- 13. Disability**
- 14. Demographics and household composition**
- 15. Community resilience, cohesion and inclusion**
- 16. Other themes**

The majority of data is owned by the Welsh Government and is available on StatsWales. However, there are several other data dashboards (outlined in “Data sources and outputs”), which often present the same data, albeit in slightly different ways. This could make it confusing for data users to know which dashboard to use and therefore a potential barrier to multi-agency data use. A single comprehensive data dashboard may be more useful.

Data is available at all-Wales, local authority, local health board, police force and LSOA levels. However, some data sets are not comparable between areas (please see “can it be compared?” section of the Data Discovery spreadsheet). Furthermore, some data was only available in combination with England (for example most Cafcass data and some crime data), but the data trends are still useful to consider when thinking about need and service provision.

Data of the same geographic level can be linked by area name or code. It is possible to link different geographies using look-up tables found on the ONS Open Geography Portal (<https://geoportal.statistics.gov.uk/>), which match, for example, LSOAs to local authorities. Smaller geographies can be used to explore within area variations.

## Potential data uses

A key finding of this data discovery is the large and varied amount of publicly available data collected in Wales that are of relevance to children's social care. The data that are currently publicly available have potential for assessing need in the general population, which could indicate demand for support for vulnerable children and families, and some potential in measuring the supply and use of services. However, the data have more limited potential about outcomes for children and families in receipt of support or services from children's social care. Further data linkage would enhance our understanding in all these areas.

### **Assessing need, demand and service use**

The data currently available have potential to inform analyses and assessments of the needs of vulnerable children such as those living in families with substance misuse, domestic abuse and mental health issues, as well as those living with the increased risks associated with deprivation, crime and poor housing. Consistent and high-quality health and education data enable population-wide and smaller geopolitical area analyses.

Hodges (2020a; 2020b; 2020c) has shown in three reports how publicly available social care and deprivation data can be analysed to show trends, flows in and out of the system, and local authority variation.

Factors associated with higher rates of children's social care intervention are well established (Hodges 2020; Fitzsimons et al., 2022). A simple way for local authorities to assess levels of need in their area is to look at trends in these factors each year, or more frequently where data is available. For example, it would be possible to plot rates of domestic abuse-related incidents or substance misuse by area. Changes in rates could suggest changes in the need which may have implications for the level of demand for children's social services intervention. It is worth noting that most administrative data may not reflect actual need, but rather the use of services. Unmet need is harder to measure, but survey data could supplement administrative data to give a fuller picture. Comparisons could be made on a range of geopolitical areas.

When making comparisons between variables over time and between areas it is important to think about what other factors may be influencing the relationship. For instance, levels of deprivation could influence one or both of the variables being compared. It is possible to control for deprivation or other factors that may be influencing levels of need.

Projecting levels of need and demand (e.g. rates of CLA rates) in the future were mentioned in the interviews as being a helpful tool and a possible next step for data

analyses in children's social care. However, there are acknowledged difficulties with producing meaningful projections (both methodologically and in terms of resource). In addition, caution is required to ensure projections do not progress to labelling of individuals/groups with outcomes.

### **Measuring the supply of services**

The data around the supply of services to vulnerable children and families are somewhat limited. There are publicly available data on funding, expenditure and workforce statistics, such as expenditure on family support services, numbers of social workers, staff vacancies, agency workers, and worker characteristics. These could be used in conjunction with data about need. Relevant examples would be to investigate if spending on preventative services is associated with changes in levels of children on child protection plans, or if the number of agency staff is associated with poorer outcomes for children such as placement instability, due to discontinuity of social workers (Dartington Services Design Lab, 2018).

Whilst the new Social Services Performance Indicators for Wales provide quantitative snapshots of some elements of service provision. More publicly available data are needed around referrals, early intervention and prevention services, new initiatives in service provision, and family law services. In addition, this data discovery study revealed an absence of qualitative data, and stakeholder consultation confirmed that the nature and complexity of social care support means routine qualitative data collection could provide valuable context to existing administrative data. Interview data suggested there could be potential to use natural language processing and analysis techniques on case file and qualitative social care data to contextualise quantitative data.

### **Measuring outcomes**

The publicly available data are most limited in relation to outcomes for children and families involved with social care services.

There is potential for existing publicly available data to be of some use for whole authority system change measures, for example reducing the rate of children in care or increasing the proportion of children placed in kinship care. Ongoing work on individual-level data linkage across health, education, criminal justice, and social care in Wales continues to enhance the possibilities for outcomes-related analyses. However, these kinds of linked data are not publicly available and data linkage research outputs are not always broken down by local authorities. Outputs tailored to service providers, or making non-identifiable forms of linked data publicly available

could enable better use of outcome data within local authority decision making. For instance, publishing higher educational attainment data for care leavers.

There are also opportunities for local authorities to use their own internal data to supplement publicly available data. For instance, monitoring rates of social care intervention before and after the implementation of a new policy or service (such as family group conferences).

## Data quality

There are data quality issues common to all secondary data sets. It is useful to think of data quality in terms of coverage, completeness, consistency, accuracy, and relevance (adapted from the six dimensions, as defined by the Data Management Association UK (DAMA(UK) and endorsed by UK Government (<https://www.gov.uk/government/news/meet-the-data-quality-dimensions>)). It was outside the scope of this report to assess each data set using this framework, but the Data Discovery spreadsheet provides summaries and website links to data quality documentation. We have summarised below key data issues to be aware of when using secondary data sets.

### Coverage

All databases, even those that are supposed to cover whole populations, such as administrative databases, very likely have subpopulations that are under-represented or absent, for example children or residents without a fixed address. There are also individuals who refuse to participate in government services for personal reasons, which can be influenced by their ethnicity, religion, or political beliefs. (Christen and Schnell, 2023).

### Completeness

Missing data is common in many data sets. In some cases, a missing value does not contain any valuable information, or it can have multiple interpretations, such as an individual does not want to disclose certain information (Hand, 2021; Little and Ruben, 2020). Bias introduced by how missing data is handled in data quality reports should therefore be considered when making assumptions about publicly available data.

### Consistency

Codes for classifying circumstances or conditions (e.g. the International Classification of Diseases) change over time, for instance John et al. (2016) found that GPs started to change their recording behaviour for depression in about 2006, recording

depression symptoms instead of diagnoses. This meant it appeared that depression diagnoses were decreasing when in fact, the recording of depression symptoms were increasing. The same applies to data definitions or thresholds for services, for instance some local authorities may have different thresholds for taking a child into care versus keeping a child at home with extra support (Child Protection Resource, 2014). Caution should therefore be applied when making assumptions about changes in levels of need or differences between areas.

## **Accuracy**

Administrative data are collected by humans. Data accuracy can be affected by the mistakes and choices people make, changing requirements, novel computing and data entry systems, limited resources and time, as well as decision making influenced by political or economic reasons (Christen and Schnell, 2023). Similarly, participants may provide inaccurate information. This can also be true of survey responses. There are social, cultural, and personal reasons why individuals might decide to provide incorrect personal details (Christen and Schnell, 2023). These data quality issues are rarely reported in data quality reports. It should therefore be assumed there will be a degree of inaccuracy when using administrative and survey data.

Another important consideration is the accuracy and availability of metadata (also known as data dictionaries). Metadata include aspects such as the source, ownership, variable descriptions, domains and coding systems used, descriptions of data quality dimensions, as well as information about data cleaning and processing. Metadata are crucial to understand the structure, content, and quality of a database (Christen and Schnell, 2021). However, as found in this study, metadata are often not available, are incomplete, out of date, or can only be obtained through time-consuming approval processes (Jorm, 2015).

## **Relevance**

Administrative data are not collected with specific research, policy or practice questions in mind. Therefore, the information collected, data quality and the time period of data collection may not always be suitable.

Furthermore, it is important to consider the ecological fallacy (Firebaugh, 2001) when using aggregate level data. This is where relationships found at an aggregate level are assumed to be present at the individual level. For instance, if aggregate data shows a relationship between level of crime in an area and levels of children in care, the same relationship between crime and children entering care cannot be assumed

to exist at the level of the individual. The relationship may indeed exist at individual level but it cannot be assumed.

A final consideration for data relevance are data that have been discontinued. These are highlighted in red in the accompanying spreadsheet. Data that are discontinued may be useful for historical analyses, but care must be taken when making comparisons to seemingly similar current data sets, as concepts may be measured differently. For example, the discontinued CIN data set is not considered comparable to the CRCS Data Set, as mentioned in Section 1 on Children's Social Care.

### **Unavailable data**

There is an abundance of multi-agency data available publicly, and while it is not possible to conceive all unavailable data, here we discuss those data sets most relevant to children's social care.

Referrals to children's social care. Data on the number of referrals to children's social care, those with no further action, and referral source are not available publicly. These data are available in England. This data would help local authorities to understand and compare the demand for services, and where systems could be improved to increase efficiency. For example, if many referrals in a local authority resulted in no further action, effective triaging of referrals could save social workers time to more effectively work with the children and families who most need help (Dartington Service Design Lab, 2019).

Pre-birth child protection registrations. Unlike its predecessor, the CIN Census, the CRCS does not include the number of pre-birth CPRs. A child must have been born to be eligible for inclusion in the CRCS Census. These children make up roughly 4% of child protection cases (StatsWales, 2023). A report by the Nuffield Family Justice Observatory found that the rate of children under two weeks old entering care in Wales more than doubled between 2015 and 2018 with significant variation in rates of removal between some local authorities (Alrouh et al., 2019). This raises issues of equity, and it is therefore important for local authorities to be able to monitor and compare rates of pre-birth CPRs.

Welsh family court data. Publicly available family court data collected by Cafcass Cymru is limited to the number of s31 applications (care orders). Publicly available Cafcass data for England is much richer and shows the demand for Cafcass services, which for both private and public law proceedings have increased over the past five years (Cafcass, 2023). Increases in the demand for Cafcass services have direct implications for the demand on children's social care services and therefore the

lack of publicly available data in Wales creates a blind spot for local authorities wanting to measure possible demand for services using publicly available data.

Data about care leavers. The range of data gathered on care leavers in Wales has been significantly reduced. For example, there are currently no publicly available data about the number of care leavers in higher education in Wales. These data are important to measure the social mobility of care leavers (Welsh Government, 2013). UCAS data is available for the whole of the UK, but it is not broken down by nation. It shows that the number of UK applicants with a care experienced background has doubled since 2008 (UCAS, 2022). It is important for local authorities to understand if the same trends are true in Wales when considering investment in appropriate widening participation services to reduce inequalities. Furthermore, data about the educational qualifications of care leavers ceased to be collected in 2016 after the introduction of the Social Services and Well-being (Wales) Act 2014 (Allnatt et al., 2022). The Act 2014 also meant that information collected about care leavers on their 19th birthday, for example, if they are in suitable accommodation, is now collected for care leavers on their 16th birthday only. While these changes to regulation and data collection aimed to strengthen the support given to young people leaving care (Allnatt et al., 2022) information for older children leaving care at a potential crossroad where they meet independence is now missing. Longer term follow up collection is limited to the percentage of all care leavers who are in education, training or employment at 12 months and 24 months after leaving care. There is a considerable data gap in longer term outcomes for care leavers, which could help to inform local authority decision making about support needed for young people leaving care.

## Challenges

Due to the old or outdated nature of some data sets, it was at times challenging to find direct links to sources of data, or to the technical and quality documents that accompanied these. Often, the hyperlink for quality documents displayed on output sites would be broken, and further searching was required to obtain the information that was needed.

In order to make the Data Discovery spreadsheet filterable for ease of use, it was necessary to ensure that the information input in certain categories was cohesive and concise. This presented challenges when describing some data sets, as a 'one-size fits all' category description was not always straightforward. For example, when outlining how frequently the data was updated, it may have typically been annual, but disruptions to data collection post COVID-19 pandemic meant the next update was paused or unknown. This difficulty was also present when considering that data collected from different sources can vary in format.

Additionally, there was a time gap between the point of searching for data and publication, and new data becomes available constantly. It is therefore not always possible for the reader to have the most up to date record.

The different dashboards created using publicly available data are easy to access and provide a range of user-friendly views of complex data. However, data sources are not always clear, and different dashboards arrange themes and data sets differently making it difficult to ensure that the Data Discovery spreadsheet references all available dashboards. Some data presentations will likely not be included but the Data Discovery spreadsheet could be added to over time.

## Strengths and limitations

This data discovery provides a resource for local authorities, policy makers, and researchers to quickly access and find out about a range of multi-agency data sources relevant to children and families. The table can be filtered by category, source, date, geographical level, and more. Although there are several published data dashboards, none of these have such an extensive list of data resources and often the information accompanying them was unavailable or inexistent. The user is also reliant on the dashboards being updated regularly, which often they are not.

However, data collection evolves quickly. Data becomes discontinued and new data sets emerge. This project is therefore a starting point and will need to be updated regularly. Furthermore, although we have attempted to gather all data sources, there is the possibility that some have been missed. The data discovery uncovered more data sets than expected, and data was often duplicated across several platforms, making it complicated to develop a fully accurate and complete picture with the resources available for the project. Although an inclusive approach was taken, the focus of the data discovery was data sets relevant to children and families. Some data sets were beyond the scope of the project, for example expenditure on all public services. The team made the decisions about which data sets to include and so could have introduced bias.

## Recommendations

The publicly available multi-agency data landscape in Wales is substantial and complicated. This project attempted to document this landscape to make it more accessible for decision makers in social care services.

When using data to inform decision making it is also important to consider data quality, data relevance and what data is missing.

This data discovery report makes six recommendations across three areas:

### **1. Enhancing existing outputs of publicly available Welsh data**

- a. Data providers should include clear data quality documentation with their data sets and regularly check links to these documents are working See “Challenges” (p.52) for more information.
- b. Data dashboards should include clear details and links to data sets used for their visualisations, particularly in cases where multiple data sets are being used together. See “Challenges” (p.52) for more information.
- c. Investment should be focussed on regularly updating and improving existing data dashboards, rather than creating new dashboards. See “Data availability” (p.45) for more detail.

### **2. Addressing key data gaps**

- a. The Welsh Government could consider collecting and making data available about referrals to children’s social care and the number of referrals resulting in “no further action”, in line with England. See “Unavailable data” (p.51).
- b. The Welsh Government could consider collecting a wider range of data on outcomes for children and families with social services involvement. This could include data on the care leaver population in relation to health, accessing further education and employment. See “Measuring outcomes” (p.48).

### **3. Future directions of data use in Wales**

- a. Multi-agency stakeholder discussion groups should be supported to regularly assess data needs, how existing data is being used, and how data collection and delivery can be continually improved. Interview data highlighted that these types of meetings were particularly informative, but that system level change to support these meetings was needed, rather than relying on interested individuals.

# References

- Advance (2021). London Women's Diversion Service: The impact of community support on diverting women from the criminal justice system. Available at: [London-Womens-Diversion-report-2021-final-.pdf \(advancecharity.org.uk\)](https://www.advancecharity.org.uk/London-Womens-Diversion-report-2021-final-.pdf)
- Alrouh, B., Broadhurst, K., Cusworth, L., Griffiths, L., Johnson, R. D., Akbari, A., & Ford, D. (2019). *Born into care: newborns and infants in care proceedings in Wales*. Nuffield Family Justice Observatory.
- Baker, C. (2011). *Permanence and stability for disabled looked after children*. Iriss. Retrieved from <https://www.iriss.org.uk/resources/insights/permanence-stability-disabled-looked-after-children#:~:text=Disabled%20children%20constitute%20a%20significant%20group%20in%20the,being%20placed%20inappropriately%20in%20comparison%20to%20non-disabled%20children.>
- Baxter, C. & Tobin, K. (2019). *Investment in Children's Services: The Renfrewshire Fund Map*. Dartington Service Design Lab. Retrieved 16 February, 2023 from <https://static1.squarespace.com/static/5c86931b4d87114c07db1adb/t/5d39b1a8582e1500011e6b40/1564062130452/EA+fund+map+report+SHORT.pdf>
- Bennett, D. L., Mason, K. E., Schlüter, D. K., Wickham, S., Lai, E. T., Alexiou, A., ... & Taylor-Robinson, D. (2020). Trends in inequalities in Children Looked After in England between 2004 and 2019: a local area ecological analysis. *BMJ open*, 10(11), e041774.
- Bennett, D. L., Schlüter, D. K., Melis, G., Bywaters, P., Barr, B., Wickham, S., & Taylor-Robinson, D. C. (2021). *Child poverty and children entering care: A natural experiment using longitudinal area-level data in England, 2015-2020*. Available at SSRN 3972210.
- Bhopal, K. (2004). Gypsy travellers and education: Changing needs and changing perceptions. *British Journal of Educational Studies*, 52(1), 47-64.
- Blackmore, R., Gray, K. M., Boyle, J. A., Fazel, M., Ranasinha, S., Fitzgerald, G., ... & Gibson-Helm, M. (2020). Systematic review and meta-analysis: the prevalence of mental illness in child and adolescent refugees and asylum seekers. *Journal of the American Academy of Child & Adolescent Psychiatry*, 59(6), 705-714.
- Breedvelt, J. J., Tiemeier, H., Sharples, E., Galea, S., Niedzwiedz, C., Elliott, I., & Bockting, C. L. (2022). The effects of neighbourhood social cohesion on preventing

depression and anxiety among adolescents and young adults: rapid review. *BJPsych open*, 8(4), e97.

Bywaters, P., Scourfield, J., Jones, C., Sparks, T., Elliott, M., Hooper, J., McCartan, C., Shapira, M., Bunting, L. and Daniel, B., 2020. Child welfare inequalities in the four nations of the UK. *Journal of Social Work*, 20(2), pp.193-215.

Cafcass (2023). *Our data - trends over time*. Retrieved 16 February, 2023, from <https://www.cafcass.gov.uk/about-cafcass/our-data/>

Cleaver, H., Unell, I. and Aldgate, J. (2011) Children's needs - parenting capacity: child abuse: parental mental illness, learning disability, substance misuse and domestic violence. 2. ed. London: TSO, The Stationery Office.

Celsis (2019). *Homelessness and care experience: Beyond the headlines May 2019*. Retrieved 16 February, 2023 from [https://www.celcis.org/application/files/7215/5835/3996/Beyond\\_The\\_Headlines\\_\\_Homelessness\\_May\\_2019.pdf](https://www.celcis.org/application/files/7215/5835/3996/Beyond_The_Headlines__Homelessness_May_2019.pdf)

Child Protection Resource (2014). *Threshold criteria*. Retrieved from <https://childprotectionresource.online/category/the-law/key-legal-principles/threshold-criteria/>

Christen, P., & Schnell, R. (2023). Thirty-three myths and misconceptions about population data: from data capture and processing to linkage. *International Journal of Population Data Science*, 8(1).

Clark, C., & Cemlyn, S. (2005). The social exclusion of Gypsy and Traveller children.

Copeland, W. E., Wolke, D., Shanahan, L., & Costello, E. J. (2015). Adult functional outcomes of common childhood psychiatric problems: a prospective, longitudinal study. *JAMA psychiatry*, 72(9), 892-899.

Cree, V. E. (2003). Worries and problems of young carers: issues for mental health. *Child & Family Social Work*, 8(4), 301-309.

CPS (2022). *Children classed as domestic abuse victims under new guidance | The Crown Prosecution Service*. Retrieved from: [https://www.cps.gov.uk/cps/news/children-classed-domestic-abuse-victims-under-new-guidance'](https://www.cps.gov.uk/cps/news/children-classed-domestic-abuse-victims-under-new-guidance)

Cygan - Rehm, K., Kuehnle, D., & Oberfichtner, M. (2017). Bounding the causal effect of unemployment on mental health: Nonparametric evidence from four countries. *Health Economics*, 26(12), 1844-1861.

Dartington Service Design Lab (2018). *Applying System Dynamics in Children's Social Care in England*. Retrieved 16 February, 2023 from <https://systemdynamics.org.uk/wp-content/uploads/2018-Day1-Dartington-Presentation.pdf>

Dartington Service Design Lab (2019). *Using System Dynamics in Children's Social Care: A different approach for a pressing problem*. Retrieved 16 February, 2023, from <https://static1.squarespace.com/static/5c86931b4d87114c07db1adb/t/5d1608b9ed836000010137a2/1561725115806/Lab-Insight-Using-System-Dynamics-in-Children%E2%80%99s-Social-Care.pdf>

Department for Education (2020). *Widening participation in higher education: Academic Year 2020/21*. Retrieved 16 February, 2023 from <https://explore-education-statistics.service.gov.uk/find-statistics/widening-participation-in-higher-education>

Dieckhoff, M., & Gash, V. (2015). Unemployed and alone? Unemployment and social participation in Europe. *International Journal of Sociology and Social Policy*, 35(1/2), 67-90.

Evans, R., Katz, C. C., Fulginiti, A., & Taussig, H. (2022). Sources and types of social supports and their association with mental health symptoms and life satisfaction among young adults with a history of out-of-home care. *Children*, 9(4), 520.

Fitzsimons, P., James, D., Shaw, S., & Newcombe, B. (2022). *Drivers of activity in children's social care: Research report: May 2022*.

Ford, K., Newbury, A., Meredith, Z., Evans, J., Hughes, K., Roderick, J., ... & Bellis, M. A. (2020). Understanding the outcome of police safeguarding notifications to social services in South Wales. *The Police Journal*, 93(2), 87-108.

Forrester, D., Wood, S., Waits, C., Jones, R., Bristow, D., & Taylor- Collins, E. (2021). *Children's social services and care rates in Wales: A survey of the sector*. Wales Centre for Public Policy.

Hand, D. J. (2020). *Dark data: Why what you don't know matters*. Princeton University Press. doi: 10.2307/j.ctvmd85db

Hastings, A., Flint, J., McKenzie, C., & Mills, C. (2005). *Environmental problems and service provision in deprived and more affluent neighbourhoods*. York: Joseph Rowntree Foundation. Retrieved from

<https://www.jrf.org.uk/report/environmental-problems-and-service-provision-deprived-and-more-affluent-neighbourhoods>

Hodges, H. R. (2020a). *Children looked after in Wales: factors contributing to variation in local authority rates*. Wales Centre for Public Policy.

Hodges, H. R. (2020b). *Children looked after in Wales: trends*. Wales Centre for Public Policy.

Hodges, H. R. (2020c). *Children looked after in Wales: flows into and out of care*. Wales Centre for Public Policy.

Horgan, D., & Ní Raghallaigh, M. (2019). The social care needs of unaccompanied minors: The Irish experience. *European Journal of Social Work*, 22(1), 95-106.

Janes, E., 2022. *Caring Lives: What do young people who care for family members need to thrive? An empirical investigation* (Doctoral dissertation, Cardiff University).

John, A., McGregor, J., Fone, D., Dunstan, F., Cornish, R., Lyons, R. A., & Lloyd, K. R. (2016). Case-finding for common mental disorders of anxiety and depression in primary care: an external validation of routinely collected data. *BMC medical informatics and decision making*, 16, 35. doi: 10.1186/s12911-016-0274-7

Jorm, L. (2015). Routinely collected data as a strategic resource: priorities for methods and workforce. *Public health research & practice*, 25(4). Doi: 10.17061/phrp2541540

Kohl, P. L., Edleson, J. L., English, D. J., & Barth, R. P. (2005). Domestic violence and pathways into child welfare services: Findings from the National Survey of Child and Adolescent Well-Being. *Children and Youth Services Review*, 27(11), 1167-1182.

Lee, A., Elliott, M., Scourfield, J., Bedston, S., Broadhurst, K., Ford, D. V., & Griffiths, L. J. (2022). Children receiving care and support and children in need, administrative records in Wales. *International Journal of Population Data Science*, 7(1). doi: 10.23889/ijpds.v7i1.1694.

Little, R. J., & Rubin, D. B. (2020). *Statistical Analysis with Missing Data* (3rd Ed.). Hoboken: Wiley. doi: 10.1002/9781119482260

Local Government Association (2023). *The Equality Act and protected characteristics*. Retrieved from <https://www.local.gov.uk/equality-act-and-protected-characteristics#:~:text=The%20characteristics%20that%20are%20protected%20by%20the%20Equality,maternity%20race%20religion%20or%20belief%20sex%20sexual%20orientation.>

Long, S. J., Evans, R. E., Fletcher, A., Hewitt, G., Murphy, S., Young, H., & Moore, G. F. (2017). Comparison of substance use, subjective well-being and interpersonal relationships among young people in foster care and private households: a cross sectional analysis of the School Health Research Network survey in Wales. *BMJ open*, 7(2), e014198.

MacAlister, J. (2022). The independent review of children's social care. Department of Health and Social Care, available at: [www.gov.uk/government/groups/independent-review-of-childrens-social-care](http://www.gov.uk/government/groups/independent-review-of-childrens-social-care).

Mannay, D., Staples, E., Hallett, S., Roberts, L., Rees, A., Evans, R. E., & Andrews, D. (2015). *Understanding the educational experiences and opinions, attainment, achievement and aspirations of looked after children in Wales*.

McManus, S., Bebbington, P. E., Jenkins, R., & Brugha, T. (2016). *Mental health and wellbeing in England: the adult psychiatric morbidity survey 2014*. NHS digital.

Miller, K.M., 2006. The impact of parental incarceration on children: An emerging need for effective interventions. *Child and Adolescent Social Work Journal*, 23, pp.472-486.

Page, N., Langford, M., & Higgs, G. (2018). An evaluation of alternative measures of accessibility for investigating potential 'deprivation amplification' in service provision. *Applied Geography*, 95, 19-33.

Pitchforth, J., Fahy, K., Ford, T., Wolpert, M., Viner, R. M., & Hargreaves, D. S. (2019). Mental health and well-being trends among children and young people in the UK, 1995–2014: analysis of repeated cross-sectional national health surveys. *Psychological medicine*, 49(8), 1275-1285.

Roberts, L., Maxwell, N. and Elliott, M., 2019. When young people in and leaving state care become parents: What happens and why?. *Children and Youth Services Review*, 104, p.104387.

Roy, J. (2021). Children living with parental substance misuse: A cross-sectional profile of children and families referred to children's social care. *Child & Family Social Work*, 26(1), 122-131.

Royal College of Paediatrics and Child Health (2020). Young Carers. Retrieved from <https://stateofchildhealth.rcpch.ac.uk/evidence/family-and-social-environment/young-carers/#:~:text=Young%20carers%20are%20children%20and%20young%20people%20under,members%20of%20their%20family%20who%20are%20unable%20to.>

Rehm, J., & Shield, K. D. (2019). Global burden of disease and the impact of mental and addictive disorders. *Current psychiatry reports*, 21, 1-7.

Sebba, J., Berridge, D., Luke, N., Fletcher, J., Bell, K., Strand, S., ... & O'Higgins, A. (2015). *The educational progress of looked after children in England: Linking care and educational data*. University of Oxford Department of Education/University of Bristol.

Simkiss, D.E. et al. (2012) 'Health service use in families where children enter public care: a nested case control study using the General Practice Research Database', *BMC Health Services Research*, 12(1), p. 65. doi:10.1186/1472-6963-12-65.

Simkiss, D.E., Stallard, N. and Thorogood, M. (2013) 'A systematic literature review of the risk factors associated with children entering public care: Risk factors for public care', *Child: Care, Health and Development*, 39(5), pp. 628–642. doi:10.1111/cch.12010.

Social Care Wales (2020, February 24). *New dashboard for understanding local authority spend on social care*. Retrieved 16 February, 2023 from <https://socialcare.wales/news-stories/new-dashboard-for-understanding-local-authority-spend-on-social-care>

Staines, J. (2017). Looked after children and youth justice: a response to recent reviews. *Safer Communities*, 16(3), 102-111.

Stats Wales (n.d.). *Children in need*. Retrieved 16 February, 2023, from <https://statswales.gov.wales/Catalogue/Health-and-Social-Care/Social-Services/Childrens-Services/Children-in-Need>

Strokosch, K., & Osborne, S. P. (2016). Asylum seekers and the co-production of public services: Understanding the implications for social inclusion and citizenship. *Journal of Social Policy*, 45(4), 673-690.

UCAS (2022). *Next Steps: What is the experience of students from a care background in education?* Retrieved 16 February, 2023 from <https://www.ucas.com/file/658381/download?token=CjzUGJ79>

UK Government (n.d.). *Benefits and financial support if you're disabled or have a health condition.* Retrieved from <https://www.gov.uk/browse/benefits/disability>

UK Government (2023). *Code of Practice for Statistics.* Retrieved 16 May 2023 from [Code of Practice for Statistics \(statisticsauthority.gov.uk\)](https://www.statistics.gov.uk/code-of-practice)

UK Statistics Authority (2023). *List of National Statistics.* Retrieved from <https://uksa.statisticsauthority.gov.uk/list-of-national-statistics/#:~:text=What%20is%20a%20National%20Statistic%3F%20Official%20statistics%20are,in%20the%20Statistics%20and%20Registration%20Service%20Act%202007>. UNICEF UK. (1989). *The United Nations convention on the rights of the child.* [https://downloads.unicef.org.uk/wp-content/uploads/2010/05/UNCRC\\_PRESS200910web.pdf?\\_ga=2.78590034.795419542.1582474737-1972578648.1582474737](https://downloads.unicef.org.uk/wp-content/uploads/2010/05/UNCRC_PRESS200910web.pdf?_ga=2.78590034.795419542.1582474737-1972578648.1582474737)

Wales Centre for Public Policy (2022). *Children's social services and care rates in Wales: A survey of the sector.* Retrieved from <https://www.wcpp.org.uk/publication/children-looked-after-in-wales-survey/>

Webb, C. J. R., & Bywaters, P. (2018). Austerity, rationing and inequity: trends in children's and young peoples' services expenditure in England between 2010 and 2015, *Local Government Studies*, 44(3), 391-415.

Webb, C., Bywaters, P., Scourfield, J., Davidson, G. and Bunting, L. (2020). Cuts both ways: ethnicity, poverty, and the social gradient in child welfare interventions. *Children and Youth Services Review*, 117, 105299.

Welsh Government (2013). *Social Mobility Indicators.* Retrieved from <https://www.gov.uk/government/publications/social-mobility-indicators>

Welsh Government (2014). *Social Services and well-being (Wales) Act 2014.* Available at [Social Services and Well-being \(Wales\) Act 2014 \(legislation.gov.uk\)](https://www.legislation.gov.uk/ukpga/2014/12)

Welsh Government (2015). *Help if you have a disabled child.* Retrieved 16 February from: <https://www.gov.uk/help-for-disabled-child>

Welsh Government (2019). *Social Services Performance Measures: April 2018 to March 2019.* Retrieved 16 February 2023 from [Social services performance measures: April 2018 to March 2019 | GOV.WALES](https://www.gov.wales/social-services-performance-measures)

Welsh Government (2023). *Performance and Improvement Framework Social Services Additional Guidance*. Retrieved 31 May 2023 from <https://www.gov.wales/performance-and-improvement-framework-social-services-additional-guidance-2023-2024>

Welsh Government (2021). *An integrated approach to improving the educational outcomes for looked after children*. Retrieved 16 February, 2023 from <https://www.gov.wales/sites/default/files/statistics-and-research/2021-09/an-integrated-approach-to-improving-educational-outcomes-for-looked-after-children-in-wales.pdf>

Welsh Government (2022). *Mental Health (Wales) Measure 2010: July to September 2022*. Retrieved 16 February, 2023 from <https://www.gov.wales/mental-health-wales-measure-2010-july-september-2022>

Welsh Government (2023). *DataMapWales – What we do*. Retrieved from <https://datamap.gov.wales/>

Welsh Government (2023). *National Survey for Wales: Technical information*. Retrieved from <https://www.gov.wales/national-survey-wales-technical-information>

Welsh Parliament (2022). *Plenary Record 22/03/2022*. Retrieved from <https://record.assembly.wales/Plenary/12659#A71168>

Whalen, A. (2015). *Provision for young care leavers at risk of homelessness*. Public Policy Institute for Wales. Retrieved from <https://dera.ioe.ac.uk/32545/1/Report-Provision-for-young-care-leavers-at-risk-of-homelessness-FINAL.pdf>

Wood, S., Scourfield, J., Stabler, L., Addis, S., Wilkins, D., Forrester, D., & Brand, S. L. (2022). How might changes to family income affect the likelihood of children being in out-of-home care? Evidence from a realist and qualitative rapid evidence assessment of interventions. *Children and Youth Services Review*, 143, 106685.

# Annex

## **Appendix 1. Roles and organisations of participants in consultation interviews**

Research Fellow, Sheffield Methods Institute

Official in Social Services, Welsh Government

Data and Intelligence Manager, Social Care Wales

Senior Statistical Officer, Health, Social Services and Population Statistics, Welsh Government

Deputy Chief Inspector, Care Inspectorate Wales

Head of Children's Services, Rhondda Cynon Taff Local Authority

Head of Children's Services, Cardiff Council

Senior Information Manager, NHS Performance, Welsh Government

Community Safety and Strategic Partnerships Service Manager, Rhondda Cynon Taff Local Authority

Data Scientist, Population Data Science, Swansea University

Head of Housing Conditions Evidence Team, Welsh Government

Head of Education and Data, Swansea County Council

Joint Head of Centre for Crime and Justice, Office for National Statistics

## **Appendix 2. Interview schedules**

### **Questions for Official in Social Services, Welsh Government**

Could you explain your role in Welsh Government

In your experience, what data are used to inform discussions and decisions about services to support children and families?

In terms of the research and the data sets, could you explain a little bit about what you do, do you then feed that back to services or heads of services?

How could the use of data and feedback to services be improved?

Is there any data that isn't collected by children's social services currently that you think would be helpful?

What multi-agency data do you use?

What multi-agency data would be helpful within children's social care services?

Are there any key data quality concerns with the social care data sets?

Do you know of any local authorities using their data particularly well?

Is there anyone who you think we should talk to about using publicly available social care data in Wales?

### **Questions for Data and Intelligence Manager, Social Care Wales**

How do you currently use children's social care data?

How is it used by others within your organisation?

How could it be used better?

Are there any data that aren't collected by children's social services that you think would be useful to inform services?

Are there any key data quality concerns with the children's social care data sets that could prevent them from being useful to local authorities?

Coverage, Completeness, Consistency, Accuracy, Timeliness, Relevance

How are decisions made about which data are selected to display on the SCW data platforms?

Are there any project plans for the SCW data portal developing?

Do you ask for feedback on the data displayed on the SWC data platforms?

If yes, from who and how do they use the platform?

Do you have evidence of any LAs using the platform to aid decision making?

How do you currently use multi-agency data?

How is it used by others?

How could it be used better?

Are there any multi-agency data that aren't collected by children's social services that you think would be useful to inform services?

What do you consider to be the key benefits of using publicly available multi-agency data more effectively in local authorities?

What strategies have you seen work well when it comes to local authorities effectively using publicly available multi-agency data to inform decision making?

What types of analysis, data or trends do you think local authorities should explore to help them inform decision making for children and families?

What do you think are the potential risks of using multi-agency data in local authorities?

Are there any particular technologies or tools that can help local authorities to use multi-agency data more effectively?

In an ideal scenario how could local authorities use multiagency data to aid decision making for children and families?

Do you have any suggestions for data experts or leaders in education, criminal justice, housing, mental health or substance misuse that may be beneficial to speak to about this?

### **Questions for Senior Statistical Officer, Health Social Services and Population Statistics, Welsh Government**

How do you currently use children's social care data within your organisation

How is it used by others in your organisation?

How could it be used better?

Are there any data that aren't collected by children's social services that you think would be useful to inform services?

Are there any key data quality concerns with the education/social care data sets that could prevent them from being useful to local authorities?

Coverage, Completeness, Consistency, Accuracy, Timeliness, Relevance

Are there any publicly available data on referrals to children's social care (CRCS data does not include referrals)?

Have you been involved in any projects using multiagency data to inform social services?

In an ideal scenario how could local authorities use multiagency data to aid decision making for children and families?

What types of analysis do you think could be most beneficial to LAs to inform services?

Do you know any LAs that are using their data (well) to inform services that you think we should speak to?

If not, how could LAs use data to inform decision-making / strategic development?

Who should we be approaching within local authorities that will have a strong understanding of the data their LA has?

### **Questions for Deputy Chief Inspector, Care Inspectorate Wales**

How do you use publicly available children's services data within CIW?

How do you use publicly available multi-agency data within CIW?

Are there data that aren't available that would be useful for CIW?

How do you think data use expectations within CIW might compare with with Ofsted?

How do you think LAs are using children's services data to inform services?

Need, Services, Outcomes, Accessibility

How do you think LAs are using multi-agency data to inform services?

Need, Services, Outcomes

Do you know of any LAs that are using data particularly well?

Do you know of any people using data it would be useful for us to talk to?

### **Questions for Heads of Children's Services**

What data do you currently use to inform services?

Where do you get this data from?

What do you know about Stats Wales? Do you use this website? (Share website?)

What data do you own?

What data do you provide?  
 Does data inform your knowledge and understanding of need in your area? If so, what data and how is it helpful?  
 What do you feel you need to know about need in your LA? What's available / what's not available?  
 What do you feel you need to know about need in other LAs? What's available / what's not available?  
 In relation to services for children and families in your area...  
     What data do you collect about your own services?  
     What would you like to know more about in relation to your own services?  
 Do you think data from other local services (such as education, crime, health) would be helpful?  
     If so, information from which services would be most helpful? (e.g. health, police)?  
     What specifically would you want to know?  
 What do you know from different data sources about outcomes for children involved in children's social services in your area?  
 What would be helpful to know about outcomes?  
 How would you use information about outcomes to inform your services?  
 What would help you to make better use of data?  
 Is it important/helpful for you to be able to compare data to other LAs in Wales?  
     If so, why?  
     How do you think you could use that information?  
 What about looking at smaller geographies within your LA e.g. is it helpful to have data about certain neighbourhoods or is LA level enough?  
 How current would data need to be to be useful to inform services? E.g. a month, 6 months, a year old?

### **Questions for Senior Information Manager, NHS Performance, Welsh Government**

Tell me about your role?  
 Tell me about mental health data in Wales / the mental health measure?  
     StatsWales – NHS returns, Psychiatric Census, National Survey for Wales, Office for National Statistics, Social Care Wales mental disorder projections  
 Who are your key audience / who uses the mental health data in gathered in Wales?  
     How do they use it?  
 Do you get any feedback on the data?  
 How are decisions made on what data is gathered and how it is used?  
 How else could data on the mental health of adults / children / vulnerable populations be measured / gathered in Wales?  
 Do you know how England / the other UK nations measure and gather data on mental health?  
 How comparable is Wales data on mental health with the rest of the UK?  
 Are there any key data quality concerns with the social care/mental health data sets that could prevent them from being useful to local authorities?  
     Coverage, Completeness, Consistency, Accuracy, Timeliness, Relevance  
 Do you currently use any children's social care data within your role?

How well do you think mental health and social care data are linked / used in a comparative or informative way in Wales?

How is it used by others in your organisation?

How could it be used better?

Have you been involved in any projects using multiagency data?

In an ideal scenario how could local/national government and local authorities/other organisations use multiagency data to aid decision making for children and families?

What types of analysis do you think could be most beneficial to LAs to inform services?

Do you know any local authorities or organisations in Wales that are using their data (well) to inform services?

If not, do you think LAs/other organisations should use data to inform decision-making / strategic development?

### **Questions for Community Safety and Strategic Partnerships Service Manager, Rhondda Cynon Taff Local Authority**

What data do you currently use to inform your work and the services provided?

Where do you get this data from?

Sources of publicly available crime / anti-social behaviour / domestic violence

Do you use data to inform decision-making or strategic planning?

How could that data be used to inform children and family services

What data do you own?

What data do you provide?

What do you know about Stats Wales? Do you use this website?

Does data inform your knowledge and understanding of need in your area? If so, what data and how is it helpful?

What do you feel you need to know about need in your LA? What's available / what's not available?

What do you feel you need to know about need in other LAs? What's available / what's not available?

In relation to services for children and families in your area...

What data do you collect about your own services?

What would you like to know more about in relation to your own services?

Do you think data from other local services (such as education, crime, health) would be helpful?

If so, information from which services would be most helpful? (e.g. health, police)?

What specifically would you want to know?

What do you know from different data sources about outcomes for and families in your area?

What would be helpful to know about outcomes?

How would you use information about outcomes to inform your services?

Do you make use of data from other agencies / services?

Does that data inform your decision-making or strategic planning?

What would help you to make better use of data?

Is it important/helpful for you to be able to compare data to other LAs in Wales?

If so, why?

How do you think you could use that information?

What about looking at smaller geographies within your LA e.g. is it helpful to have data about certain neighbourhoods or is LA level enough?  
How current would data need to be to be useful to inform services? E.g. a month, 6 months, a year old?

### **Questions for Data Scientist, Population Data Science, Swansea University**

Tell me about publicly available Education data in Wales.

What areas are covered in the publicly available data.

Who are the key audience / who uses the publicly available education data in gathered in Wales?

How do they use it?

Are there ways to feedback on the data?

How are decisions made on what data is gathered and how it is used?

How else could education data be measured / gathered in Wales?

Do you know how England / the other UK nations measure and gather Education data?

How comparable is Wales data on education with the rest of the UK?

Are there any key data quality concerns with the education data sets that could prevent them from being useful to local authorities?

Coverage, Completeness, Consistency, Accuracy, Timeliness, Relevance

How well do you think education and social care data are linked / used in a comparative or informative way in Wales?

How could it be used better?

Have you been involved in any projects using multiagency data?

In an ideal scenario how could local/national government and local authorities/other organisations use multiagency data to aid decision making for children and families?

What types of analysis do you think could be most beneficial to LAs to inform services?

Do you know any local authorities or organisations in Wales that are using their data (well) to inform services?

If not, do you think LAs/other organisations should use data to inform decision-making / strategic development?

### **Questions for Head of Housing Conditions Evidence Team, Welsh Government**

Tell me about your role?

Tell me about housing data in Wales?

Who are your key audience / who uses the housing data in gathered in Wales?

How do they use it?

Do you get any feedback on the data?

How are decisions made on what data is gathered and how it is used?

What outputs are available?

How else could data on the housing be measured / gathered in Wales?

Do you know how England / the other UK nations measure and gather data on housing?

How comparable is Wales data on education with the rest of the UK?

Are there any key data quality concerns with the housing data sets that could prevent them from being useful to local authorities?

Coverage, Completeness, Consistency, Accuracy, Timeliness, Relevance

Do you currently use any children's social care data within your role?  
How well do you think housing and social care data are linked / used in a comparative or informative way in Wales?  
How is it used by others in your organisation?  
How could it be used better?  
Have you been involved in any projects using multiagency data?  
In an ideal scenario how could local/national government and local authorities/other organisations use multiagency data to aid decision making for children and families?  
What types of analysis do you think could be most beneficial to LAs to inform services?  
Do you know any local authorities or organisations in Wales that are using their data (well) to inform services?  
If not, do you think LAs/other organisations should use data to inform decision-making / strategic development?

### **Questions for Head of Education and Data, Swansea County Council**

Tell me about education data in Wales?  
Who are your key audience / who uses the education data gathered in Wales?  
How do they use it?  
Do you get any feedback on the data?  
How are decisions made on what data is gathered and how it is used?  
How else could data on the education / children / vulnerable populations be measured / gathered in Wales?  
Do you know how England / the other UK nations measure and gather data on education?  
How comparable is Wales data on education with the rest of the UK?  
Are there any key data quality concerns with the education data sets that could prevent them from being useful to local authorities?  
Coverage, Completeness, Consistency, Accuracy, Timeliness, Relevance  
Do you currently use any children's social care data within your role?  
How well do you think education and social care data are linked / used in a comparative or informative way in Wales?  
How is it used by others in your organisation?  
How could it be used better?  
Have you been involved in any projects using multiagency data?  
In an ideal scenario how could local/national government and local authorities/other organisations use multiagency data to aid decision making for children and families?  
What types of analysis do you think could be most beneficial to LAs to inform services?  
Do you know any local authorities or organisations in Wales that are using their data (well) to inform services?  
If not, do you think LAs/other organisations should use data to inform decision-making / strategic development?

### **Questions for Joint Head of Crime and Justice, Office for National Statistics**

Can you give me an overview of your role?  
Do you currently use children's social care data within your organisation?  
How is it used by others in your organisation?

How could it be used better?  
Are there any data that aren't collected by children's social services that you think would be useful to inform services?  
At what geographical and geopolitical areas are crime data usually made available?  
Would other geographies be more useful?  
How do crime data differ between Wales and England/Scotland/NI  
Are there any key data quality concerns with the crime data sets (social care data sets if known) that could prevent them from being useful to local authorities?  
Coverage, Completeness, Consistency, Accuracy, Timeliness, Relevance  
Overview of how crime data are published / made available publicly?  
In an ideal scenario how could local authorities use crime data to aid decision making for children and families?  
What types of analysis do you think could be most beneficial to LAs to inform services?  
Do you know any LAs that are using crime data (well) to inform services?

## Author Details

**Sophie Wood** is a Research Associate, Children's Social Care Research and Development Centre (CASCADE)

**Louisa Roberts** is a Research Assistant, Children's Social Care Research and Development Centre (CASCADE)

**Caitlin Trotman** is a Research Assistant, Children's Social Care Research and Development Centre (CASCADE)

For further information please contact:

**WCPP Lead**

Wales Centre for Public Policy

+44 (0) 29 2087 5345

[info@wcpp.org.uk](mailto:info@wcpp.org.uk)

**OGL** This report is licensed under the terms of the Open Government License