

Report to Children, Young People and Family Support Scrutiny & Policy Development Committee Monday 20th February 2017

Report of: Dawn Walton, Acting Director, Children, Young People and

Families Service

Subject: Developing Services for Children, Young People and Families in

Sheffield – Reviewing our model for Children's Centre Areas

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Summary:

This report will provide an update with regards to proposals to develop children's centres into family centres, which would provide services for families with children from pre-birth to 19 years old, or 0 - 25 if the young person has a disability. These proposals are being consulted on between 1st November 2016 and 31st January 2017. This report will provide an update in terms of the outcomes of this consultation process and next steps.

Type of item: The report author should tick the appropriate box

- Jps of too the report state of the area alphabetes	
Reviewing of existing policy	
Informing the development of new policy	
Statutory consultation	X
Performance / budget monitoring report	
Cabinet request for scrutiny	
Full Council request for scrutiny	
Community Assembly request for scrutiny	
Call-in of Cabinet decision	
Briefing paper for the Scrutiny Committee	
Other	

The Scrutiny Committee is being asked to:

Understand the statutory requirements for consultation and the proposed changes to the Children's Centres in Sheffield that has led to this consultation. The committee is asked to acknowledge and support the summary of the consultation outcomes prior to the submission of recommendations to cabinet in March 2017.

Background Papers:

- Cabinet report dated 19th October 2016 consultation on proposals relating to Children's Centres
- Equality Impact Assessment
- Consultation plan
- Children's Centre Statutory guidance
- Children's Centre OFSTED guidance
- Evaluation of the locality pilots with schools

1. The Proposal

Our vision for Sheffield is for every child, young person and family to recognise their strengths and to be supported to build capacity and resilience resulting in sustained independence that enables them to reach their full potential now and in the future in spite of any disadvantages that they may face.

Early help and prevention, identifying needs and providing support when they first appear at any point in a child, young person or family's journey is key to delivering this vision. Fundamental to the method is a whole household approach that acknowledges that a problem with one person in the family cannot be isolated from affecting other family members.

Greater integration of locally based services is also key in supporting those who are most vulnerable. Sheffield is committed to enabling and supporting all of its children, young people and families to be safe, healthy and successful. We can best do this by identifying any additional needs as early as possible and providing support at the right time and in the right place.

In Sheffield we want to ensure that:

- Every child, young person is healthy, has good mental health and emotional wellbeing
- Every child and young person has the education, skills and resilience to enter adulthood and gain employment
- Improved earlier identification and assessment of needs helps people to get the support that they need and feel is right for them
- There is Improved access to local services across the city
- Every family provides a stable and nurturing environment that is resilient, independent and ready for the future
- Children, young people and families are engaged in shaping the services in their communities
- All staff are supported to develop their skills and knowledge and to share their expertise

On the 19th October 2016 a report was approved at cabinet to allow statutory consultation to take place on a proposal to re-model and widen the remit of the Children's Centre Areas in Sheffield. The proposal supports the development of a

more integrated approach with a greater focus on early help and with a broader range of services provided across a network. This allows professionals to respond to a breadth of family needs such as health and wellbeing, housing, education, and employment. It is underpinned by information sharing protocols and builds on the premise that the safeguarding of children and young people and outcomes for families will be improved. The key elements of the proposal are as follows:

Development of family centres

The principle behind this was to redesign children's centres, developing a new delivery model based on family centres. These centres would be available for 0 - 19 year olds (0-25 years old if the young person has a disability).

The creation of a Family Centre Area delivery model builds on the principle of early help and prevention focuses on making interventions at an early stage once problems have begun but before they escalate. It provides an opportunity to build on the existing locality models that were piloted with many schools across the city and evaluated very positively. This model is now being developed further to include a broader range of partners including police, health, Special Education Needs and Disability (SEND) teams and housing staff.

7 locality areas

Children's Centre Areas would be re-organised into an integrated locality model. It moves away from a single centre delivery model to a networked locality model based on the achievement of common outcomes.

The boundaries for the existing centres will be altered to create seven locality areas. These 7 geographic areas will cover the whole city. In each area there will be a lead centre which will remain a designated children's centre address with link site and outreach services across the locality. All these services would be inspected under the current Children's Centre Ofsted Inspection framework in relation to services for children and families pre- birth to five years old. This inspection will cover how well that centres supports families within the whole geographical reach.

Locations

The main site for the family centres would be located in the 20% most deprived areas of the city. It will act as a base for a full range of integrated services, to enable a clear focus for services on local need and priorities and supporting those who are most vulnerable. Additional services would also be available across Sheffield from link and outreach sites including schools, GP surgeries local community venues such as church halls and youth centres and in the home. These sites will offer clinics, groups and drop in services on a timetabled basis. Families will be able to access support outside these times through the lead centre, or one to one support in the home.

The proposal is intended to build on existing strengths, expertise and current infrastructure in the existing children's centre areas and will join together and coordinate services around children and families. It recognises the critical role that Children's Centre Areas have played in prevention and early intervention and

will support further development, allowing us to join together and coordinate services offering the community universal, targeted and specialist services.

In summary the model will:

- Provide a range of early help services for families with children pre-birth to 19 years (25 years if the young person has a disability) either in the lead centre, link site or outreach venue using different channels to include face to face in the home, centre, drop ins, group work, internet access, online advice guides, email, text, telephone and social media.
- Provide services to include support with physical and emotional health, practical advice on keeping children safe, support with education and learning, support with parenting, home, money, work, training and volunteering.
- Be located in 20% areas of highest need based on the IDACI index of deprivation, with outreach services for all families delivered jointly with universal services.
- Be developed with families, partners and stakeholders within communities building on the current children's centre governance model in relation to community partnerships and stakeholder forums.
- Align to the seven localities with families being able to access services where it meets their needs.
- Be open during core hours on an ad hoc drop in basis, with opportunity to extend this.

The council is required, as a statutory duty, to ensure that there are sufficient children's centres. The proposal would require a reduction in the numbers of buildings designated as a lead Children's Centres from the current 16 to 7 main family centre hubs but with the addition of link sites in the most disadvantaged areas of the city which should allow for greater access to services. More services would be delivered at outreach and community sites reaching those most in need in their own community, and where at present there are no services.

2. Why we are consulting

The council has a Statutory Duty, as set out in the Childcare Act 2006, to: Undertake statutory consultation in relation to any proposed change to Children's Centres.

Any proposed change to Children's Centre services is subject to full statutory consultation of 90 days.

3. The consultation plan

The consultation was designed to seek the views of the people who may be affected most by the proposals. These include:

- Parents and carers/expectant parents and carers
- Local Communities
- Children's Centre staff and stakeholder forum members
- Statutory partners and stakeholders
- Voluntary and community sector organisations

- Early Years providers
- Local Councillors
- Partners who share the site of the Children's Centre areas e.g. schools

The consultation was launched on 1 November 2016 and ran until 31 January 2017.

The following actions were taken to ensure all communities were aware and able to access the consultation:

- Information about the consultation and the questionnaire were put online on Sheffield City Council's consultation website Citizen Space on 1 November and remained online throughout the 90 days consultation period.
- Further help was available for anyone having difficulty via a phone line or email. This offer has been translated into 8 community languages.
- An easy read consultation questionnaire was developed for use where necessary.
- Children's centres were asked to direct families to the consultation website in the first instance but were also given a supply of paper copies of the information and the questionnaire for use if families were not able to access the online version. Flyers and posters detailing drops ins and the website address were also supplied.
- 24 drop in events were held across the city, mainly during November and December 2016. These were held across the city, including a city centre venue. Some of these were held in an evening to ensure anyone unable to attend during the day still had the opportunity to obtain further information.
- Children's centres promoted the consultation in all activities throughout the period within the centre itself and in the local area.
- There were regular articles in the Parents Assembly Bulletin and on social media. The children's centre Facebook page and website also had a link to the consultation webpage and the timetable of events.
- The Sheffield Star ran 2 articles during the consultation period with a link to the questionnaire and Radio Hallam advertised it on their hourly news bulletin in December 2016.
- Various local newsletters/community newspapers have promoted the consultation
- Partner organisations, schools and childcare providers were briefed on the consultation and asked to promote this, encouraging their clients to take part in the consultation/attend drop-ins.

4. Outcome of the consultation

Breadth of response

A total of 616 questionnaires were received and recorded on citizen space. Those taking part were asked which centre they currently use to assess whether there was a clear spread of respondents. Approximately 21% did not use a children's Centre but within the remaining 78% all centres were represented.

There was a wide range of services that respondents said they utilise including midwifery, health visiting, toddler groups, training opportunities and advice services.

Approximately 21% of respondents did not feel that they currently used children's centre services.

Of those that supplied information, 20% stated that they were from an ethnic background other than white British. The majority of respondents were female (90%) and the majority (53%) were in the age bracket of 25-34 years. 7% reported that they had a disability and 9% that their child had a disability.

Availability of services

Respondents were asked what was important to them in accessing services. The following areas were felt to be the most important:

- To support their own and their child's health and wellbeing
- To meet other parents/children and develop support networks
- To support knowledge and understanding of child development
- To access support and advice during pregnancy including having a baby and parenting classes

To support access to adult learning, training and employment was seen as the least important reason to access services.

Change of location

The questionnaire asked what families would do if the services moved location. Of those that answered the question 81% stated that they would either move to the new location or to the location nearest to them. 13% said that they would find an alternative way of meeting their needs. 30% of responders chose not to answer this question.

When asked if they received services in other places already, 37% of those that answered this question access services for under 5s at GP surgeries/clinics and 21% at local libraries.

The comments received indicated that the distance they would need to travel would be the influencing factor and services local and close to home were important often because of the difficulty of using public transport. However easy access by public transport was considered by some and many commented that they would be willing to consider travel and that they often already do.

It was clear from the variety of alternative venues identified that many families already access services at outreach within their local area, perhaps without realising it.

Family centres

When asked their views on extending services to pre-birth to 19 (25 years if child has a disability), providing support for the whole family 74% agreed or

strongly agreed with this proposal Only 13% either disagreed or strongly disagreed.

When asked what type of support would benefit them as a family, those that answered the question said that the most important were:

- Supporting with physical health & wellbeing (77%)
- Supporting to help children get the most from their education (81%)
- General information, advice and guidance (82%)
- Support and practical advice on keeping children safe (80%)
- Support in developing social networks through peer support and groups (81%)
- Support with meeting children and families emotional needs (79%)

Access to support regarding home and money including impartial debt advice was seen as the least important but was still highlighted by 46% of respondents to the question.

The additional comments highlighted that existing services should not be diluted in order to offer services to the older age group and asked that these changes ensure that the importance of early years is still recognised as part of this wider work.

Other services

Respondents were asked to outline whether there were other services that should be offered. The comments included community café, dad's groups, playground for families, twin group, activities for children with disabilities, advice on applying for school or nursery places, after school or school holiday activities, exercise classes, coffee mornings, family cooking classes, first aid, groups targeted at teenagers, health visitor clinics, mental health support, homework clubs, and an advice line.

5. Next steps

The consultation closed on the 31st January 2017. Analysis of the responses indicates a positive response to the proposal. The consultation helps us to understand children's, young people's and families' needs in each locality and this itself will help to address many of the concerns raised

The questionnaire findings and other comments and suggestions will be used to inform the final proposal put before the Cabinet. This information including feedback from the consultation with the public and with professionals will be used in the development of this new way of working.

The findings of the consultation will be made available online, in children's centres and through social media so that those who took part will know that we have listened to their views to understand what they need and will know whether there is agreement with the proposal.

6. Recommendations

There is growing evidence that a child's experience in their early years has a major impact on their health and life chances, and that high quality interventions can make a significantly positive difference to their development. The All party Parliamentary Group on Sure Start Children's Centres 2015 pre-election report stated that 'One of the greatest strengths of Children's Centres has always been their capacity to join up a wide range of services around a child to provide a true "holistic" model of support'. The report continues to state that 'the ultimate aim should be to position children's centres at the heart of service provision in their communities to enable them to provide the sort of holistic offer we know to be valued and effective'.

We acknowledge the research evidence and remain committed to supporting our early years work. Our combined commitment to early years, and to consulting and learning from research, professionals, partners, community, parents and carers is embodied in these proposals.

Recommends that the committee:

- Notes the Council's continued commitment to every child getting a 'best start in life' and the importance of Early years Services
- Note the feedback in this report in relation to the consultation on the proposal to re-design Children's Centre Areas in Sheffield
- Support the proposal outlined in this report
- Note that a further report will be taken to cabinet in March 2017 which will outline the results of this consultation and recommend next steps based on this.