# Agenda Item 9



**Author/Lead Officer of Report:** Nicola Shearstone, Acting Assistant Director, Jackie Robinson, Service Manager EIP service.

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| Report of:   | Executive Director, Children Families   | Young people and |  |
|--|---|------------------|--|
| Report to:   | Cabinet   |                  |  |
| Date of Decision:  | 10 May 2017   |                  |  |
| Subject:   | Developing Services for Chil<br>and Families in Sheffield – F<br>for Children's Centre Areas. |                  |  |
| Is this a Key Decision? If Yes,  | reason Key Decision:-   | Yes x No         |  |
| - Expenditure and/or savi  | ngs over £500,000   |                  |  |
| - Affects 2 or more Wards  |   | х                |  |
| Which Cabinet Member Portfolio does this relate to? Children & Young People  |   |                  |  |
| Which Scrutiny and Policy Development Committee does this relate to? Children, Young People and Family Support Scrutiny and Policy Development Committee |   |                  |  |
| Has an Equality Impact Assessment (EIA) been undertaken?   |   | Yes x No         |  |
| If YES, what EIA reference number has it been given? EIA1220   |   |                  |  |
| Does the report contain confidential or exempt information?  |   | Yes No x         |  |
| If YES, give details as to whether the exemption applies to the full report / part of the report and/or appendices and complete below:-                  |   |                  |  |
|  |   |                  |  |

#### **Purpose of Report:**

This paper reports back on the Children's Centre consultation between 1<sup>st</sup> November 2016 and 31<sup>st</sup> January 2017 and recommends proposals to develop a new delivery model for Children's Centre areas into Family Centre areas which:

- Are for pre-birth 19 year olds (25 year olds if the young person has special educational needs or disabilities);
- Are located in the 20% most deprived areas of the City within 7 locality areas; and
- Provide services across Sheffield from link and outreach sites, including community venues and in the home.

#### Recommendations:

This Family Centre Locality Model builds on the existing strengths, expertise and current infrastructure of Children's Centres and confirms our commitment to Early Years and the importance of high quality, flexible and accessible services for the very youngest.

Therefore we recommend that Cabinet approves:

- a new service delivery model based on dividing the city into 7 geographical locality areas, each area will include a main centre and linked centres or other community outreach sites for service delivery across the locality;
- an extension of the age range from pre-birth to 5 to pre-birth to 19 year olds (25 year olds if the young person has special educational needs or disabilities); and
- that the 7 Family Centre main sites named in the report to be the designated Children's Centres addresses in order to meet a statutory duty to ensure provision of sufficient Children's Centres in the Local Authority's area, whilst noting that such designation will result in all services pre-birth - 5 in the whole Family Centre locality being regulated and inspected by Ofsted under the current inspection framework for Children's Centres.
- that services will be delivered in main and linked centres and outreach venues across the locality. They will run at various times and days and with core and extra services provided by a range of agencies at a variety of venues. Those services could include clinics, groups, drop-in and timetabled sessions.
- to continue the current governance model of multi-agency partnership boards in each area which will support the assessment of need across the locality to ensure services meet the needs of families when and where they are required.

**Background Papers:** Early Help Strategy; Best Start Strategy

| Lead Officer to complete:-   |  |  |  |
|--|--|--|--|
| 1  | departments in respect of any relevant implications indicated on the Statutory and Council Policy  | Finance: Andy Bray   |  |
|  |  | Legal: Louise Bate   |  |
| Checklist, and comments have been incorporated / additional forms completed / EIA completed, where required. | Equalities: Bashir Khan  |  |  |
|  | Legal, financial/commercial and equalities implications must be included within the report and the name of the officer consulted must be included above.   |  |  |
| 2  | EMT member who approved submission:  | Jayne Ludlam   |  |
| 3  | Cabinet Member consulted:  | Councillor Jackie Drayton  |  |
| 4  | I confirm that all necessary approval has been obtained in respect of the implications indicated on the Statutory and Council Policy Checklist and that the report has been approved for submission to the Decision Maker by the EMT member indicated at 2. In addition, any additional forms have been completed and signed off as required at 1. |  |  |
|  | Lead Officer Name: Nicola Shearstone Jackie Robinson   | Job Title:<br>Acting Assistant Director for EIP<br>Service Manager WEST MAST |  |
|  | Date:  |  |  |

#### 1. PROPOSAL

#### **Proposed Family Centre Areas**

#### 1.1 Background

Our vision for Sheffield is for every child, young person and family to achieve their full potential, to recognise their strengths and to be supported to build capacity and resilience resulting in sustained independence now and in the future in spite of any disadvantages 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 which acknowledges that a problem for one person in the family cannot be isolated from affecting other family members.

It is proposed that across the city, families of children pre-birth to 19 years (0 - 25) years if the young person has special educational needs or disabilities ("SEND")) will continue to have access to the full range of early help services either delivered on site, through outreach in suitable community venues or in the family home. This proposal will support the work currently taking place with a range of partners to further develop an Early Help model for the city and will enhance the ability to deliver against the Best Start Strategy.

The Local Authority has a statutory duty to ensure there are sufficient Children's Centres in its area. It is proposed that the 7 main Family Centres are designated as Children's Centre main addresses in order to comply with the statutory duty. As a result, the centre areas will be inspected under the current Ofsted inspection framework for services for families with children in the pre-birth to five years old age range. The Family Centres will become the main address for Children's Centre Ofsted inspection purposes. Each of the 7 locality areas that link to these sites will be inspected under the Ofsted inspection framework in the future; with particular focus being given to the services provided to families within each locality rather than the Family Centre buildings themselves.

#### 1.2 The Proposed Model

City divided into 7 geographical areas the map at appendix 1 shows the localities.

The proposed model is based on the rationale of a main Family Centre area with the lead building address based in the 20% most disadvantaged areas of the City with linked sites and outreach venues delivering services to families across the areas. This will ensure city wide coverage utilising a range of venues to include GP surgeries and community buildings where they are needed.

The proposal takes into consideration the outcome of the consultation.

Based on the data used and the outcome of the consultation, it is proposed that within the 7 Family Centre areas the lead centres, which will be the main address for Ofsted purposes are:

#### Localities

- A. Early Days
- B. First start (Firth Park)
- C. Darnall
- D. Shortbrook
- E. Valley Park
- F. Sharrow
- G. Primrose

The following sites will be linked sites:

- A. Angram Bank
- B. Burngreave + The Meadow
- C. Brightside + Wybourn
- D. Woodthorpe
- E. Chancet Wood
- G. Shooters Grove + Stocksbridge

We are also looking into the potential of developing an additional Area E link site in the Bankwood / Heeley Green area.

There will also be outreach sessions across the 7 areas in a range of venues where they are needed.

The tables below describe proposals and rationale for each of the 7 localities.

# Locality A Parson Cross / Ecclesfield

| Current Centres in Locality | Proposal  | Rationale   |
|-----------------------------|---|---|
| Early Days                  | Develop Early days as<br>the main Family Centre<br>address for Ofsted<br>purposes | 50% of under 5's in locality A live in the 20% most deprived LSOAs* in the country according to IDACI** |
| Angram Bank                 | Angram Bank will be a linked site.  Outreach services to be                       | 78% of children (1584) live in<br>the 20% most deprived LSOA<br>in the current Early Days<br>reach area |
|                             | delivered in community  |   |
|                             | venues across the locality  | 12% of children (184) live in the 20% most deprived   |
|                             | locality  | LSOAs in the current Angram Bank reach area   |

# Locality B Shiregreen / Burngreave

| Current<br>Centres in<br>Locality | Proposal  | Rationale   |
|-----------------------------------|---|---|
| First Start                       | Develop First Start as the main Family Centre address for Ofsted purposes   | 86% of under 5's in locality B live in the 20% most deprived LSOAs in the country according to IDACI                                    |
| Burngreave<br>and Meadow          | Burngreave and The Meadow will be linked sites  Outreach services to be delivered in community venues across the locality | 100% of children (1095) in<br>the First Start reach area<br>live in the 20% most<br>deprived LSOAs in the<br>country according to IDACI |
|                                   |   | 76% of children (1656) in<br>the Burngreave reach area<br>live in the 20% most<br>deprived % LSOAs in the<br>country according to IDACI |

# Locality C Arbourthorne / Manor / Darnall / Tinsley

| Current<br>Centres in<br>Locality | Proposal  | Rationale  |
|-----------------------------------|---|--|
| Darnall                           | Develop Darnall as the main<br>Family Centre address for<br>Ofsted purposes | 66% of under 5's in locality C live in the 20% most deprived LSOAs in the country according to IDACI |
| Wybourn and Brightside            | Wybourn and Brightside will be linked sites                                 | 83% (2260) of children in  |
| Drightside                        | be lifficed sites   | the Darnall reach area and   |
|                                   | Outreach services to be delivered in community                              | 81% (1386) of children in the Wybourn reach area live  |
|                                   | venues across the locality  | 20% most deprived LSOAs in the country according to IDACI  |

# Locality D Mosborough / Handsworth

| Current    | Proposal   | Rationale  |
|------------|--|--|
| Centres in |  |  |
| Locality   |  |  |
| Shortbrook | Develop Shortbrook as the main Family Centre address for Ofsted purposes   | 14% of under 5's in locality D live in the 20% most deprived LSOAs in the country according to IDACI                               |
| Woodthorpe | Woodthorpe will be a link site. Consideration will be taken to identifying a main site in the Woodthorpe area during 2017/18 | 3% of children (92) in the<br>Shortbrook reach area live<br>in the 20% most deprived<br>LSOAs in the country<br>according to IDACI |
|            | Outreach services to be delivered in community venues across the locality  | 31% of children (630) in the Woodthorpe reach area live in the 20% most deprived LSOAs in the country according to IDACI.          |
|            |  | However, plans for the existing building mean that it would not be possible to name this as the main Family Centre address         |

# Locality E Greenhill / Gleadless Valley

| Current<br>Centres in<br>Locality | Proposal  | Rationale   |
|-----------------------------------|---|---|
| Valley Park                       | Develop Valley Park as a<br>Main Family Centre<br>address for Ofsted<br>purposes  | 43% (1623) of children in<br>the locality E live in the<br>20% most deprived<br>LSOAs in the country<br>according to IDACI.   |
| Chancet<br>Wood                   | Chancet Wood will be a link site  Outreach services to be delivered in community venues across the locality   | 46% of children (911) in<br>the Valley Park reach<br>area live in the 20% most<br>deprived LSOAs in the<br>country according to<br>IDACI                                    |
|                                   |   | The Valley Park CC building is situated at the top of the Gleadless Valley with the most deprived LSOAs are in the lower end of Gleadless Valley, Bankwood and Heeley Green |
|                                   |   | 40% of children (712) in<br>the Chancet Wood reach<br>area live in the 20% most<br>deprived LSOAs in the<br>country according to<br>IDACI                                   |
|                                   | We are looking into the potential to develop a link site in the more deprived lower end of Gleadless Valley i.e. Bankwood, Heeley Green and Lowedges Batemoor, Jordanthorpe | However the most deprived children live in Lowedges, Batemoor & Jordanthorpe  |

### Locality F Rivelin / Sheaf

| Current<br>Centres in<br>Locality | Proposal  | Rationale   |
|-----------------------------------|---|---|
| Sharrow                           | Develop Sharrow as a main Family Centre address for Ofsted purposes.      | 24% (576) of under 5s in<br>Sharrow are in the 20%<br>most deprived in the<br>country according to IDACI. |
|                                   | Outreach services to be delivered in community venues across the locality |   |

### Locality G Hillsborough / Upper Don

| Current                               | Proposal  | Rationale   |
|---------------------------------------|---|---|
| Centres in<br>Locality                |   |   |
| Primrose                              | Develop Primrose as a main Family Centre address for Ofsted purposes  It is recognised that there is a level of deprivation in the Winn Garden, Liberty Hill and Wisewood area. | 8% (622) of children in the locality F live in the 20% most deprived LSOAs in the country according to IDACI.  8% of children (433) in the Primrose part of the reach area live in the 20% most |
| Shooters Grove<br>And<br>Stocksbridge | Shooters Grove and Stocksbridge linked sites  Outreach services to be delivered in community venues across the locality   | deprived LSOAs in the country according to IDACI.  However this is masked as Primrose reach area covers Ecclesall   |
|                                       | vertues across trie locality  | 9% of children (189) in the<br>Shooters Grove reach area<br>live in the 20% most<br>deprived LSOAs in the<br>country according to IDACI   |
|                                       |   | 0% of children (0) in the<br>Stocksbridge reach area live<br>in the 20% most deprived<br>LSOAs in the country<br>according to IDACI.  |

<sup>\*</sup> LSOA = lower layer super output area (a geographic hierarchy designed to improve the reporting of small area statistics in England and Wales)

<sup>\*\*</sup> IDACI = income deprivation affecting children index (which measures in a local area the proportion of children under the age of 16 that live in low income households). It is supplementary to the <a href="Indices of Multiple Deprivation">Indices of Multiple Deprivation</a> and is used for calculation of the <a href="Contextual value added">Contextual value added</a> score, measuring children's educational progress)

#### 2. HOW DOES THIS DECISION CONTRIBUTE?

2.1 Greater integration of locally based services is 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 by providing support at the right time and in the right place.

#### In Sheffield we want:

- Every child and young person is healthy, with good mental health and emotional wellbeing;
- Every child and young person achieves the education, training and skills and resilience to gain employment and independence;
- Early identification and assessment of needs will help people to get the support that they need and which they feel is right for them;
- Improved access to local services across the city;
- Support for all families so they can provide a stable, nurturing, safe and loving environment for children and young people,;
- Children, young people and families are engaged in shaping the services in their communities; and
- All staff are supported to develop their skills and knowledge and to share their expertise.
- 2.2 The new proposed Family Centre Areas delivery model and way of working builds on the principle of early help and prevention and focuses on making interventions at an early stage once problems have begun but before they escalate.

The Family Centre proposal builds on the existing strengths, expertise and current infrastructure of Children's Centres and confirms our commitment to Early Years and the importance of high quality, flexible and accessible services for the very youngest. It will join together and coordinate services around children and families with an extended remit from pre- birth to 19 year olds (25 year olds if the young person has SEND). It recognises the critical role that Children's Centres have played in prevention and early intervention services and will join together and coordinate services offering community universal, targeted and specialist services.

This model is a networked locality model based on the achievement of common outcomes. The proposal is that in the seven localities there will be a lead centre acting as a base for a full range of integrated services. To ensure compliance with children's centres statutory duty, the lead centre will 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. There will be linked sites and outreach sessions delivered from community venues in localities offering clinics, groups and drop in services.

#### 3. HAS THERE BEEN ANY CONSULTATION?

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

On the 19<sup>th</sup> October 2016 a report was approved at Cabinet to allow statutory consultation to take place on a proposal to re-model the Children's Centres in Sheffield.

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

The consultation closed on the 31<sup>st</sup> January 2017. Analysis of the consultation responses indicates a positive response to the proposal. The consultation helped the Council understand children's; young people's and families' needs and concerns in each locality.

The questionnaire findings and other comments and suggestions have been 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 the new way of working.

The findings of the consultation will be made available online, in Children's Centres and through social media.

The Council followed the Sure Start Children's Centres statutory guidance April 2013 in preparing consultation, which was designed to seek the views of the people who may be affected most by the proposals. These included:

- 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

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 published online on Sheffield City Council's consultation website Citizen Space on 1 November and remained online throughout the 90 day consultation period.
- Further help and information was available via a phone line or email. This
  offer was 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 sessions 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.
- 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 in sessions.

#### 3.2 **Outcome of the consultation** (see appendix 2)

#### 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 that commented said 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 year olds (25 year olds if the young person has SEND) 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.

### 3.3 **Summary**

The main themes that emerged from the consultation were around:

- Child development
- Health and wellbeing
- Networking, social family time, groups in particular twins groups, dads groups, SEND groups
- Information, advice, and guidance locally available using different channels
- Adult support for training, entry to employment
- Extended opening hours

The overall conclusion from the consultation can be summarised as follows:

#### That:

- There was support for the proposal that Family Centre areas provide a range of early help services for families with children pre-birth to 19 year olds (25 year olds if the young person has SEND).
- Services should include support with physical and emotional health and wellbeing practical advice on keeping children safe, developing social networks through groups, support with education and learning, parenting, positive family routines, home and money, advice and support with training and entry into employment.
- The Family Centre main address should be based in the most vulnerable areas of the City
- Services should be delivered in localities utilising community venues for outreach delivery allowing families to access services where it meets their

needs.

• Parents and carers reiterated they want high quality flexible services in the right place at a variety of days and times.

The recommendations that we are putting forward reflect the concerns that were raised during consultation e.g. all previous centres that are not a main address are now a linked centre.

#### 4. RISK ANALYSIS AND IMPLICATIONS OF THE DECISION

The proposal, if approved by Cabinet, will provide families with accessible locally based services offering information, advice and guidance, with a focus on early help identifying need when it first appears offering a holistic support service. This would mean that whatever the point of access for parents they would be able to find a service or range of services to meet their needs and those of their children.

The proposal will ensure that the Council continues to meet its statutory duty as set out in the Childcare Act 2006 and fulfils its duty to improve outcomes for all children whilst reducing inequalities between them.

It builds on the importance of identifying children and families who would benefit from early help as set out in Working Together to Safeguard Children (March 2016).

The Joint Needs Assessment (2013) for the City recognised the necessity to 'find new ways of responding to need which places a premium on prevention and early intervention, integrated working and care in the community'.

The proposals build upon the current partnership working between the Council health, education, social care and employment services and offers opportunities for further co-location and joint delivery of integrated services for the 'whole family'.

There is a potential risk of claw back of funding from Government, if any Sure Start buildings no longer provide services for families with children under 5 years old. There is no risk of claw back within this proposal as services for families of children under 5 years will continue to be delivered in those buildings.

#### 4.1 Equality of Opportunity Implications

- 4.1.1 Decisions need to take into account the requirements of the Public Sector Equality Duty contained in Section 149 of the Equality Act 2010. This is the duty to have due regard to the need to:
  - eliminate discrimination, harassment, victimisation and any other conduct that is prohibited by or under the Act
  - advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it
  - foster good relations between persons who share a relevant protected

- characteristic and persons who do not share it
- To help evidence meeting the requirements of the duty, we have carried out a full Equality Impact Assessment (EIA) and which is attached as Appendix 3.

The Equality Act 2010 identifies the following groups as a protected characteristic:

- age
- disability
- gender reassignment
- marriage and civil partnership
- pregnancy and maternity
- race
- religion or belief
- sex
- sexual orientation

An Equality Impact Assessment has been carried out and highlights that the new Family Centres will have a positive impact on tackling poverty; improved health outcomes; a wider age range (young people 0-19 or 0-25 where a young person is disabled); disability; pregnancy and maternity; different racial groups; both gender's though it is recognised that the majority of staff and service users are female; the Voluntary, Community and Faith sector and partner organisations will have a key role.

#### 4.2 <u>Financial and Commercial Implications</u>

4.2.1 The proposals reconfigure the way the existing services are organised but core services will continue to be delivered in various sites across the city but no additional costs will be incurred.

Any changes in the use of individual buildings (i) will be agreed with each hosting organisation and will be subject to a further Cabinet report if required (ii) will ensure that there continues to be early years delivery to avoid any potential risk of claw back of Surestart Capital grant.

#### 4.3 Legal Implications

4.3.1 Duties to arrange services / provide Children's Centres:

Section 3(2) of the Childcare Act 2006 ("the Act") places a duty on the Local Authority to make arrangements to secure that early childhood services in their area are provided in an integrated manner which is calculated to a) facilitate access to those services; and b) to maximise the benefit of those services to parents, prospective parents and young children.

In deciding what arrangements to make under this section, a Local Authority must have regard to a) the quantity and quality of early childhood services that are provided, or that the authority expects to be provided, in its area and b) where in that area those services are provided or are expected to be provided.

In discharging duties under this section a Local Authority must also have regard to any guidance given from time to time by the Secretary of State. Consideration has been given to the Sure Start Children's Centre Statutory Guidance 2013 in forming the proposals contained within this report.

Section 5A of the Act places a specific duty on the Local Authority to make arrangements, so far as is reasonably practicable, for sufficient provision of Children's Centres to meet local need.

The Act does not prohibit the use of Children's Centres for other purposes, and any integration of services for 5 – 19 year olds (25 year olds where the young person has SEND) can be implemented under the Council's general power of competence as set out in section 1 of the Localism Act 2011.

#### Public Sector Equality duty:

The public sector equality duty described at 4.1.1 above has been taken into account in drawing up the proposal recommended in this report, and in carrying out consultation. Regard has been had to the responses to the consultation in finalising the proposal.

#### 4.4 Other implications

#### 4.4.1 Property:

This paper seeks approval to develop a new delivery model based on 7 geographical areas that cover the entire city with delivery of services from a main Family Centre site and link centres and outreach services being delivered across the locality from community venues or in the home.

The proposals do not seek to close any of the 16 Children's Centre sites, but recommends that 7 of those sites remain the designated address i.e. the proposed Family Centre sites. The remaining 9 sites are proposed as link sites within the new delivery model and will continue to provide community outreach services All sites and services delivered pre-birth to 5 years in the 7 localities will be subject to Ofsted inspection.

#### 5. ALTERNATIVE OPTIONS CONSIDERED

The alternative approach would be for the council to continue to deliver Children's Centre Services from 16 children's centre areas, this approach does not align to the principles set out in the early help model, the Best Start 'A Great Start in Life' strategy, the SEND reform and Working Together to Safeguard Children which are underpinned by delivery of services based in localities where services work together to achieve improved outcomes for families as close to their homes and communities as possible.

Fundamental to the proposal is a whole household approach, by not extending the age range of services and developing Family Centres with link and outreach sites, the alternative would be to continue to deliver services to families pre-birth to five years old. This would not support the provision of integrated early help for families, would not align to the early help services for families aged five to eleven years or to the targeted youth support service leading to more negative outcomes for both children and families.

#### 6. REASONS FOR RECOMMENDATIONS

On the 19th October 2016 a report was approved at Cabinet to allow statutory consultation to take place on a proposal to re-model the Children's Centres in Sheffield. The proposal supports the development of a more integrated approach with a greater focus on early help and with partnership working between the Council health, Police, schools and voluntary sector to deliver 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 redesign of Children's Centres, developing a new delivery model based on family centres. These centres would be available for families of children pre-birth up to 19 year olds (25 year olds if the young person has SEND).

The creation of a Family Centre delivery model builds on the principle of early help and 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, SEND teams and housing staff.

#### 7 locality areas

Children's Centres 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 city would be divided into 7 geographical areas and the existing centres areas will be altered to create seven locality areas. In each area there will be a lead centre which will remain a designated Children's Centre address and will 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 all centres and services delivered in the whole geographical area.

#### Locations

The main site for the Family Centres, the linked sites and outreach services will 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 to provide support to those who are most vulnerable. Additional services 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 venues or through one to one support in the home.

The proposal is intended to build on existing strengths, expertise and current infrastructure in Children's Centres and will join together and coordinate services around children and families. It recognises the critical role that Children's Centres 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 year olds (25 year olds if the young person has SEND) 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.
- Have a main address 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.
- Have services delivered at venues in a mix of times and days through regular, ad hoc, drop in basis, and one to one with opportunity to extend and develop this.

The Council has a statutory duty to ensure that there are sufficient children's centres in its area to meet local need. The proposal will require a reduction in the number of buildings designated as a main Children's Centre address from the current 16 to 7 main family centre areas 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.

#### Key research, evidence base:

The Munro review of child protection calls for local authorities to take a greater focus on preventative services, providing Early Help to children and families and summarises three key messages:

- Preventative services will do more to reduce abuse and neglect than reactive services
- Coordination of services is important to maximise efficiency and with preventative services
- There needs to be good mechanisms for helping people identify those children and young people who are suffering or likely to suffer harm from abuse or neglect and who need a referral to children's social care

Munro, (2011), The Munro Review of Child Protection: final report, DFE

The All party Parliamentary Group on Sure Start Children's Centres 2015 preelection report states 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'.

The Centre for Social Justice argued that 'Children's Centres should become "Family Hubs" which enable parents to access all family related support including universal support and specialist help to meet their most pressing needs'.

The key findings from the Evaluation of Children's Centres in England (ECCE), a six year study producing a detailed picture of the first 2 phases of Children's Centres in England, these which were aimed at the 30% most disadvantaged areas found that:

- There was a clear move away from standalone centres to those featuring clustering
- Higher Leadership and management scores were found in centres reporting better multi agency working
- There was a high level of shared vision, however there were tensions in terms of communication and data sharing and misunderstanding over professional roles
- Staff felt ill prepared over the policy shift to more targeted interventions.
- Centres shifted towards a more focused targeted range of services for parents and outreach to family homes.

- The number of services remained constant, the nature of the services changed, the frequency was often thinning and 'open access services' were being reduced while targeted services increased.
- Well evidenced programmes e.g. FNP were widely used by centres but were less common than other named programmes

#### Recommendations

It is essential that the new model of early help for families builds on the current arrangements of integrated services with health, education, social care, police, DWP, community youth team, voluntary and private sector. There are opportunities presented by the proposal for further co location and joint delivery of services across the age range in order to provide a whole family approach.

This will build on the premise that safeguarding of children and young people and outcomes for families will be improved when services work together.

We would ask cabinet to agree the following recommendations:

- a new service delivery model based on dividing the city into 7 geographical locality areas, each area will include a main centre and linked centres or other community outreach sites for service delivery across the locality;
- an extension of the age range from pre-birth to 5 to pre-birth to 19 year olds (25 year olds if the young person has special educational needs or disabilities); and
- that the 7 Family Centre main sites named in the report to be the designated Children's Centres addresses in order to meet a statutory duty to ensure provision of sufficient Children's Centres in the Local Authority's area, whilst noting that such designation will result in all services pre-birth - 5 in the whole Family Centre locality being regulated and inspected by Ofsted under the current inspection framework for Children's Centres.
- that services will be delivered in main and linked centres and outreach venues across the locality. They will run at various times and days and with core and extra services provided by a range of agencies at a variety of venues. Those services could include clinics, groups, drop-in and timetabled sessions.
- to continue the current governance model of multi-agency partnership boards in each area which will support the assessment of need across the locality to ensure services meet the needs of families when and where they are required.

Appendix 1 - Map

Appendix 2 – Summary of consultation

Appendix 3 – Equalities Impact Assessment