



# Hampshire County Council

# Family Support Services

# Consultation 2016

## Report of Consultation

## Findings

Opinion Research Services  
22<sup>nd</sup> June 2016



Hampshire  
County Council



## **Hampshire County Council**

## **Family Support Services Consultation 2016**

## **Report of Consultation Findings by Opinion Research Services**

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# 1. Introduction

## Overview of the Consultation

- 1.1 In February 2016, following a county-wide spending review consultation in 2015, Hampshire County Council published a consultation document containing proposals for developing a new Family Support Service for families with children/young people aged 0–19 years (or up to 25 for young adults with learning difficulties and/or disabilities).
- 1.2 Results from the 2015 Spending Review consultation found that there was a high level of support for the County Council's existing financial strategy which included raising the rate of Council Tax, using the County Council's reserves differently and reducing spending on specific services. Services for children, older people and vulnerable people were ranked as being the 'most important' services for the County Council to continue to support and deliver.
- 1.3 The County Council has a statutory responsibility for identifying and supporting children who are 'in need', which includes those in need of protection. A number of different services have grown in Hampshire, over time, in line with particular Government initiatives, legislation and funding streams, including Children's centres, Early Help Hubs, Youth Support Services and the Supporting Troubled Families Programme.
- 1.4 This proposal would combine the Early Help Hubs (including Youth Support Services), children's centre services, and align with the Supporting Troubled Families Programme to create a single Family Support Service. This service would provide a joined-up, whole-family service to those who have high levels of need, but who do not meet the threshold for statutory social care.
- 1.5 The focus of the new Family Support Service would be to ensure that available support is targeted to the most vulnerable families and children. Typically, these would be families and children with multiple needs who require the involvement of more than one agency (categorised at Level 3). The statutory social care work provided to families and children at Level 4 would remain unchanged.
- 1.6 The total cost for Early Help Hubs, Youth Support Services and Children's centres is £14.4 million. There is also a Government grant of around £2 million for the Supporting Troubled Families Programme. It is proposed that £8.5 million of savings could be delivered by the development of a single service. These savings would contribute to meeting the £98 million funding shortfall by April 2017.
- 1.7 The consultation on the development of the new Family Support Service ran from 23<sup>rd</sup> February until 3<sup>rd</sup> May 2016. During the consultation period, the public and interested stakeholders were invited to provide feedback via an open questionnaire, available online via the Council's website and distributed in paper format upon request. Additionally, there was also the opportunity to provide views by writing directly to ORS, or via email directly to the Council using an email address which could be found through the Council's dedicated web page.

- 1.8 2,124 responses were received to the open consultation questionnaire either online or in paper format, with 2,012 responses from individuals and 112 on behalf of organisations.
- 1.9 Opinion Research Services (ORS) is a spin-out company from Swansea University with a UK-wide reputation for social research and major statutory consultations. ORS was appointed by HCC to facilitate aspects of the consultation process and to provide an independent report of the formal consultation programme.

## Nature of Consultation

### Accountability

- 1.10 Consultation should promote accountability and assist decision making: public bodies should give an account of their plans or proposals and they should ensure that all responses are taken into account in order to:
- » Be informed of any issues, viewpoints, implications or options that might have been overlooked;
  - » Re-evaluate matters already known; and
  - » Review priorities and principles.
- 1.11 Nevertheless, a consultation is not a vote; and influencing public policy through consultation is not simply a ‘numbers game’ in which the loudest voices or the greatest numbers automatically determine the outcome, for all the various consultation methods have to be assessed.
- 1.12 All types of consultation responses are important – for example, in the current consultation we received a range of different responses from individuals and organisations.
- 1.13 This report aims to identify where strength of feeling may be particularly intense while recognising that interpreting consultation is not simply a matter of counting responses.

## Interpreting the Consultation Outcomes: The Council’s Role

- 1.14 Importantly, the different consultation methods cannot just be combined to yield a single point of view on the proposed changes to Hampshire’s Children’s Services that reconciles everyone’s differences and is acceptable to all stakeholders involved.
- 1.15 In our experience there is no formula in any consultation process that can reconcile everyone’s differences. Whilst the consultation process highlights aspects of this information that stakeholders consider to be important, the Council will need to consider the appropriate emphasis to be placed on each element. In this sense there can be no single ‘right’ interpretation of all the consultation elements and other information available to the Council in their decision-making process.
- 1.16 ORS is clear that its role is to outline and report the opinions and arguments of those who have responded to the consultation, but not to make any recommendations as to how the Council should make use of the reported results. Whilst this report brings together a wide range of evidence for the Council to consider, the report does not provide a single, public point of view on the proposed changes for Hampshire’s Children’s Services. It is for the elected members to take high-level policy decisions based on their understanding of the evidence presented.

## 2. Executive Summary

### Summary of Main Findings

- 2.1 The following paragraphs selectively highlight some key findings, but readers are referred to the detailed graphics for the full story. The suite of ORS reports also includes full cross tabulations.
- 2.2 The executive summary reviews responses received from individuals to the open consultation questionnaire. Responses from organisations have been reported separately in the report.

### Current use of Services

- 2.3 There are currently 54 children's centres in Hampshire, which offer help to families at all levels of need. Ten Early Help Hubs across Hampshire co-ordinate multi-agency support provided to families of children and young people at Level 3, while the Supporting Troubled Families Programme is aimed at families experiencing specific issues relating to education, domestic violence and abuse, antisocial behaviour, health, employment and risk of financial exclusion and young children failing to thrive.
- 2.4 Almost three quarters (73%) of respondents currently access at least one of the listed existing Children's Services provided by Hampshire County Council, including 70% who currently access children's centres. Around 1 in 10 (9%) access Early Help Hubs (including Youth Support Services) and 1 in 20 (5%) access the Supporting Troubled Families Programme.
- 2.5 More than a quarter (27%) of respondents to the consultation do not currently access Hampshire's Children's Centres, Early Help Hubs or the Supporting Troubled Families Programme.

### Perceptions of Key Aims

- 2.6 Respondents were initially asked whether they agreed or disagreed with the proposal to combine children's centre services and Early Help Hubs and align with the Supporting Troubled Families Programme to create a new Family Support Service. While a quarter (25%) of respondents agreed with this proposal, more than two thirds (68%) of respondents disagreed. While agreement with the proposed Family Support Service was particularly low among users of children's centres (17%), higher levels of agreement were found among users of the Supporting Troubled Families Programme (45%) and Early Help Hubs (37%).
- 2.7 When asked about prioritisation of services, a quarter (25%) of respondents agreed that the Council should prioritise support to the most vulnerable children and families, rather than offering services universally. However, more than two thirds (68%) of respondents disagreed with this principle. Once again, agreement with this proposal was particularly higher among users of Early Help Hubs (37%) and the Supporting Troubled Families Programme (40%), but lower among users of children's centres (19%).

- 2.8 Respondents who disagreed with the proposed changes to children’s centres and the development of the new Family Support Service were asked for the reasons for their disagreement. More than half (52%) of respondents giving a response to this question made comments pertaining to a need for universal services that are available to families of all backgrounds, not just to vulnerable families. Relatedly, 32% of respondents made comments pointing to the early intervention and preventative work done by children’s centres, a lack of which, it was suggested, would result in an increased need for support in future. A similar proportion (31%) disagreed with the proposed changes to services on the basis that there would be a reduction in support for less vulnerable families.
- 2.9 As part of the proposed changes, some non targeted services such as ‘stay and play’ and ‘cook and eat’ might no longer be available to all families free of charge. Respondents were asked whether they would be prepared to pay up to £9.00 per session for non targeted services. Around two fifths (38%) of respondents said that they would be prepared to pay for these services, while around three fifths (62%) said that they would not be prepared to pay. For this proposal, users of Early Help Hubs (70% saying no) and the Supporting Troubled Families Programme (75% saying no) were particularly less likely to be willing to pay for non targeted services.
- 2.10 A key proposal of the consultation was to reduce the number of buildings designated as children’s centres that would deliver the new Family Support Service from 54 designated centres to 11. This proposal received the highest levels of disagreement among individual respondents in the consultation. Just 13% agreed with the proposed reduction in designated centres, while more than four fifths (83%) disagreed with this proposal.
- 2.11 The proposal to have one Hub in each of the 11 districts across Hampshire received similar levels of support and opposition to the previous proposal to reduce the number of centres from which to deliver the new Family Support Service. More than one in ten (14%) agreed with this proposal. However, around four fifths of respondents (81%) disagreed with the proposal of having one Hub per district. Agreement with this proposal was comparatively high among Early Help Hub (23%) and Supporting Troubled Families Programme (27%) users.
- 2.12 After having been asked about the proposal to have one Hub per district, respondents were asked the extent to which they agreed or disagreed with the proposed locations for these hubs. This proposal received the lowest level of agreement of any question in the consultation, and the highest proportion of neutral answers. 12% of respondents agreed with the proposed locations for the 11 Family Support Service Hubs. Around 7 in 10 (69%) disagreed with the proposed locations and around a fifth (19%) neither agreed nor disagreed.
- 2.13 Respondents who disagreed with any of the proposed locations for Family Support Service Hubs were asked why this was. The most frequent responses referred to issues with access. Over half (52%) of those responding to this question made comments that the proposed hubs were too far away, or that local access, such as within walking distance, was needed. A third (33%) expressed a belief that the proposals would negatively impact people without personal transport or that were unable to travel to children’s centres for other reasons. This was commonly assumed to be families who were of a vulnerable background. Almost a quarter (23%) expressed concerns that families in deprived areas, those on low incomes or who couldn’t afford to travel would be negatively affected by the proposed locations of the Family Support Service Hubs.

## Further comments

2.14 A further comments question was included, asking respondents for any alternative suggestions they might have for making the required savings of £8 million. More than a third (35%) of respondents used this opportunity to make further comments. Almost half (46%) of suggestions were for Hampshire County Council to seek to make savings elsewhere. Common suggestions were to reduce management levels, spending on agency staff, administrative/back office staff or more generally to reduce bureaucracy/red tape to make savings. Other such suggestions were to examine other departments' budgets, rationalise high salaries or councillor expenses or to make better use of electronic or digital services. Almost two fifths (37%) of respondents used this comment box more generally to express their disagreement with the proposed reductions to children's centres, with many promoting the 'vital' nature of children's centres, especially in regards to the vulnerable, disadvantaged and socially isolated. Comments relating to paying for services also came up frequently in these responses. More than a third (35%) of those responding to this question indicated that they were prepared to pay for services. However, £9 was not considered a reasonable amount. A fee of around £2 was most commonly suggested, while others suggested that the amount should be means tested.

## Equalities

2.15 Finally, respondents were asked about equalities. Specifically, this was whether there were any positive or negative impacts relating to equalities that they believed the County Council should take into account when making decisions. Almost two fifths (38%) believed that there were impacts relating to equalities that the Council should take into account when making decisions about the consultation. More than half (52%) of these respondents indicated that families of all backgrounds need access to children's centre services. Almost a third (32%) expressed the vital nature of early intervention, and a concern that the proposals would increase the need for support service use in the future. A similar proportion (31%) were concerned that children who are less vulnerable would miss out on services if the Council chooses to focus on the most vulnerable children and families exclusively, resulting in a reduction in support for families with less complex needs.

## Suggested Alternatives

2.16 More than 300 responses advocated for savings to be made elsewhere in the Council. Suggestions for where these savings could be made typically focussed on making reductions in administrative/back office staff, management levels and the use of agency workers. Others backed a reduction in councillor expenses or high salaries in the Council, while some respondents made general suggestions about reducing bureaucracy.

2.17 Suggestions were frequently made about charging for services, with many respondents indicating that they would be prepared to pay for some services, but at a lower rate than that proposed in the consultation.

2.18 94 respondents indicated that they felt that the number of centres could be reduced, but that the scale of the reductions should be decreased. The number of centres which respondents suggested should remain ranged considerably, but typically these respondents felt that between two thirds and half of centres should remain. Others suggested that the reductions should be phased in over time.

Less commonly, there were also some suggestions to reduce the hours in which services were offered or to offer them on fewer days of the week, rather than closing centres. There were also some suggestions for the attendance of activities to be analysed and the least attended activities cut instead.

- 2.19 Suggestions to improve joint working and combining elements of different services in order to make efficiencies and save money by avoiding duplication also appeared frequently. The services that could be combined varied from administrative to 'front line' services, such as establishing better links with health, employment and youth services. There were also suggestions to form partnerships with volunteer organisations or with local businesses which might provide sponsorship, or to employ parents as volunteers.
- 2.20 Focussing on the existing buildings, some respondents suggested that income could be increased by renting rooms in existing children's centres, using fundraising events or requesting donations for money or equipment to centres.
- 2.21 Others suggested using alternative buildings to deliver services, including sharing space in buildings with existing uses, such as schools, church halls, libraries and community centres. This could, it was suggested, make savings by reducing the cost of rent.
- 2.22 More general suggestions were made to raise council tax and use financial reserves or relief funds in order for services to be maintained.

# 3. The Open Consultation Questionnaire

## The Open Questionnaire

- 3.1 The formal consultation on the development of a new Family Support Service was launched on 23<sup>rd</sup> February 2016 and ended on 3<sup>rd</sup> May 2016. Hampshire County Council produced a consultation document outlining the purpose of the consultation, information about the current provision of Children’s Services and details of the proposed changes.
- 3.2 A consultation questionnaire was also developed with the assistance of ORS, which included questions that examined the current use of services and perceptions of the key aims of the proposals. Additional sections were included which allowed respondents to raise any comments or concerns relating to equalities or any further comments regarding the proposals and wider consultation. Information was also captured about the type of response being submitted, as well as monitoring respondents’ demographic information.
- 3.3 This questionnaire was available to the public both in an online format and as a paper version, and could be completed by individuals or on behalf of organisations.
- 3.4 Paper versions of the questionnaire were available upon request included as an insert in physical copies of the consultation document.
- 3.5 In total, 2,124 responses were received to the open consultation, including 2,012 from individual and 112 on behalf of organisations.

## Respondent Profile of Consultation Questionnaire

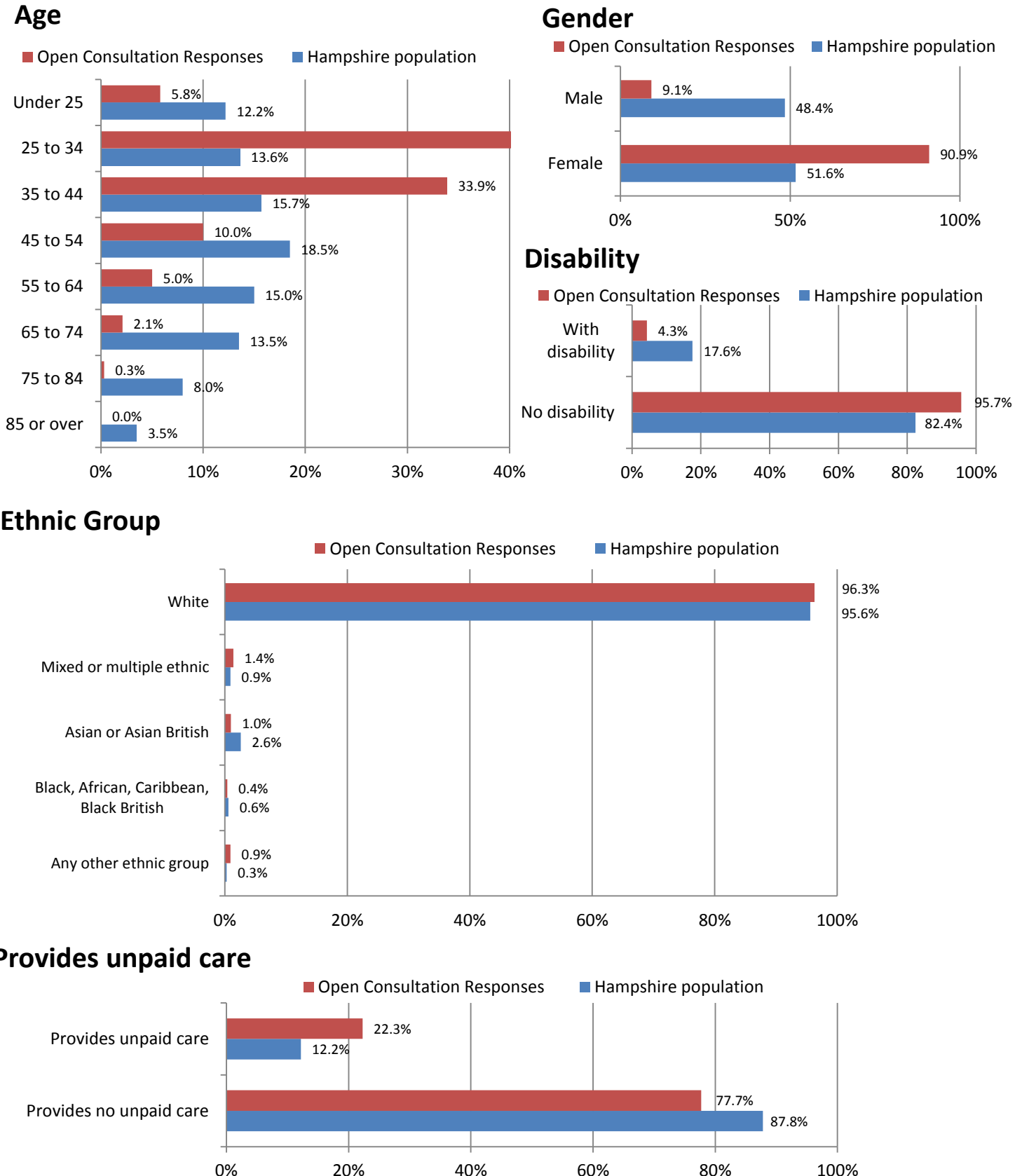
- 3.6 Table 1 below provides a breakdown of the respondent profile from the 2,012 individuals who responded either online or by post to the open consultation questionnaire. Figures for Hampshire's population are also outlined for comparison.
- 3.7 Figures for Hampshire's population are based on ONS 2014 Mid-Year Population Estimates (for age and gender) and Census 2011 data (for ethnicity and disability). ORS prefers to report ONS Mid-Year population estimates (over Census 2011 data) where possible as we believe this more accurately reflects the current state of the population. Where this is not possible due to data being unavailable (e.g. for ethnicity, disability and providing unpaid care data), Census 2011 data has been used as an alternative. As a result, the total number of occurrences in the population across the two data sources will not match exactly.

**Table 1: Socio-demographic characteristics for the consultation questionnaire and Hampshire's population (Note: Percentages may not sum due to rounding)**

Characteristic	All Responses		Hampshire population 16+		
	Number of Responses	% of Valid Responses	Number of occurrences	% of population	
<b>BY AGE</b>	Under 25	111	5.8%	133,843	12.2%
	25 to 34	820	42.9%	149,558	13.6%
	35 to 44	647	33.9%	172,452	15.7%
	45 to 54	191	10.0%	203,268	18.5%
	55 to 64	95	5.0%	164,369	15.0%
	65 to 74	41	2.1%	147,684	13.5%
	75 to 84	6	0.3%	88,331	8.0%
	85 or over	0	0%	37,872	3.5%
	<b>Total valid responses</b>	<b>1,911</b>	<b>100.0%</b>	<b>1,097,377</b>	<b>100.0%</b>
<i>Not known</i>	<i>101</i>	-	-	-	
<b>BY GENDER</b>	Male	173	9.1%	531,035	48.4%
	Female	1,735	90.9%	566,342	51.6%
	<b>Total valid responses</b>	<b>1,908</b>	<b>100.0%</b>	<b>1,097,377</b>	<b>100.0%</b>
	<i>Not known</i>	<i>104</i>	-	-	-
<b>BY ETHNIC GROUP</b>	White	1,784	96.3%	1,024,360	95.6%
	Mixed or multiple ethnic	26	1.4%	9,830	0.9%
	Asian or Asian British	19	1.0%	27,751	2.6%
	Black, African, Caribbean, Black	7	0.4%	6,366	0.6%
	Any other ethnic group	16	0.9%	3,076	0.3%
	<b>Total valid responses</b>	<b>1,852</b>	<b>100.0%</b>	<b>1,071,383</b>	<b>100.0%</b>
<i>Not known</i>	<i>160</i>	-	-	-	
<b>BY DISABILITY</b>	With disability	81	4.3%	187,733	17.6%
	No disability	1,788	95.7%	880,436	82.4%
	<b>Total valid responses</b>	<b>1,869</b>	<b>100.0%</b>	<b>1,068,169</b>	<b>100.0%</b>
	<i>Not known</i>	<i>143</i>	-	-	-
<b>BY PROVIDES UNPAID CARE</b>	Provides unpaid care	417	22.3%	940,839	12.2%
	Provides no unpaid care	1,449	77.7%	130,544	87.8%
	<b>Total valid responses</b>	<b>1,866</b>	<b>100.0%</b>	<b>1,071,383</b>	<b>100.0%</b>
	<i>Not known</i>	<i>146</i>	-	-	-

3.8 When considering differences between the achieved sample (completed returns) and population data, it is apparent that certain groups are over-represented and others under-represented in the data, most noticeably in the distribution of age and gender.

**Figure 1: Comparison of socio-demographic characteristics for the consultation questionnaire and Hampshire’s population**  
(Note: Percentages may not sum due to rounding)



- 3.9 The following tables show the profile characteristics of household type and gross household income for respondents to the survey where reliable comparative secondary data is not available.

**Table 2: Household type – All individual respondents (Note: Percentages may not sum due to rounding)**

Household Type	Number of responses	% of Valid Responses
With children	1,578	83.1%
Without children	322	16.9%
<i>Not known</i>	112	-
<b>TOTAL</b>	<b>1,900</b>	<b>100%</b>

**Table 3: Gross Household Income – All individual respondents (Note: Percentages may not sum due to rounding)**

Gross Household Income	Number of responses	% of Valid Responses
Up to £15,599	217	14.7%
£15,600 to £36,399	506	34.3%
£36,400 to £51,999	394	26.7%
£52,000 and above	357	24.2%
<i>Not known</i>	538	-
<b>TOTAL</b>	<b>1,474</b>	<b>100%</b>

## Geographical Spread of Respondents

- 3.1 Due to Hampshire County Council’s concerns over the anonymity of individuals responding to the consultation, only partial postcode data was requested on the open questionnaire. This meant it was not possible to map responses to a consistent geographical level.
- 3.2 Because only partial postcodes were captured, it is not possible to ascertain in all cases exactly which postcode district a respondent is from (e.g. whether they are from the postcode sector PO1 1 or the postcode district PO11), and therefore in these ambiguous postcodes have been grouped together under postcode areas.
- 3.3 This data consists of postcode districts with either low sample sizes or groups of non-contiguous areas, and therefore any geographical analysis using data at this level would not be appropriate.

**Table 4: Breakdown of responses to the questionnaire by area and comparison to Hampshire’s population**  
(Note: Percentages may not sum due to rounding)

Characteristic	All Responses		Characteristic	All Responses			
	Number of Responses	% of Valid Responses		Number of Responses	% of Valid Responses		
BY POSTCODE DISTRICT	BH24	4	0.2%	BY POSTCODE DISTRICT	GU9	2	0.1%
	SO14	2	0.1%		GU10	1	0.1%
	SO15	3	0.2%		GU15	2	0.1%
	SO16	8	0.4%		GU16	2	0.1%
	SO18	2	0.1%		GU17	16	0.8%
	SO19	3	0.2%		GU22	1	0.1%
	SO20	8	0.4%		GU26	1	0.1%
	SO21	21	1.1%		GU30	7	0.4%
	SO22	65	3.4%		GU34	105	5.4%
	SO23	44	2.3%		GU35	25	1.3%
	SO24	21	1.1%		GU46	38	2.0%
	SO30	16	0.8%		GU51	27	1.4%
	SO31	25	1.3%		GU52	14	0.7%
	SO32	21	1.1%		PO2	2	0.1%
	SO40	78	4.0%		PO4	1	0.1%
	SO41	41	2.1%		PO5	2	0.1%
	SO42	3	0.2%		PO6	2	0.1%
	SO43	2	0.1%		PO7	54	2.8%
	SO45	46	2.4%		PO8	42	2.2%
	SO50	70	3.6%		PO9	63	3.3%
	SO51	36	1.9%		PO10	6	0.3%
	SO52	3	0.2%		PO16	24	1.2%
	SO53	21	1.1%		PO17	10	0.5%
	SP5	2	0.1%		<b>Ambiguous Postcodes</b>		
	SP6	7	0.4%		BH	19	1.0%
	SP7	1	0.1%		SO	4	0.2%
	SP9	2	0.1%		RG	88	4.6%
	SP10	56	2.9%		GU	202	10.5%
	RG1	1	0.1%		SP	22	1.1%
	RG7	1	0.1%		PO	241	12.5%
	RG21	74	3.8%		NO	1	0.1%
	RG22	79	4.1%		<b>Total valid responses</b>		
RG23	16	0.8%	<b>1929</b>				
RG24	102	5.3%	Invalid postcode				
RG25	17	0.9%	7				
RG40	1	0.1%	<i>Not known</i>				
			76				
			-				

## Interpretation of the Data

- 3.4 The results for the Consultation Questionnaire are presented in a largely graphical format. The pie charts and other graphics show the proportions (percentages) of respondents making relevant responses.
- 3.5 Where possible, the colours of the charts have been standardised with a ‘traffic light’ system in which green shades represent positive responses, red shades represent negative responses, and beige and purple shades represent neither positive nor negative responses.
- 3.6 The bolder shades are used to highlight responses at the ‘extremes’, for example, strongly agree or strongly disagree.
- 3.7 Where percentages do not sum to 100, this may be due to computer rounding, the exclusion of “don’t know” categories, or multiple answers. Throughout the volume an asterisk (\*) denotes any value less than half of one per cent. In some cases figures of 2% or below have been excluded from graphs.
- 3.8 All open-ended responses have been classified using a standardised code frame. This approach helps ensure consistency when classifying different comments and the resulting codes represent themes that have been repeatedly mentioned in a more quantifiable manner. The various comments provided by a respondent to any single text question may present a number of different points or arguments, therefore in many cases the overall number of coded comments counted in a particular question can actually be higher than the number of people responding to that open-ended question.

## Further analysis by sub-groups

- 3.9 For some questions, further analysis revealed differences in responses by key demographic and other variables e.g. usage of various children’s services. Such analysis highlights how sub-groups within key variables (e.g. within ‘age’, those aged 25-34) provided different answers compared to the overall average.
- 3.10 Where results are particularly higher or particularly lower for certain sub-groups, in comparison to the overall score they are further discussed in commentary text. Such analysis has been applied to all of the key, closed questions from the consultation questionnaire.

## Possible Misinterpretation

- 3.11 As has been alluded to in places in the findings of the consultation, such as in the discussion of the role of outreach workers in the ‘Further comments’ section, there appeared to be a proportion of respondents who may have misinterpreted some elements of the proposals for the delivery of the new service. While the consultation document stated that ‘Some of the remaining buildings could continue to be used as outreach venues to deliver services, or released for other purposes within the community’ and ‘To ensure services remain locally accessible, buildings such as community centres would continue to be hired by the Family Support Service for support to Level 3 families – at an estimated cost of approximately £90,000 a year’, some respondents made comments suggesting that they believed that the Council was intending for services only to be available at hubs. Some illustrative quotes include the following:

*Having 11 centres is a nonsense. How all those people who use the current 75 venues are supposed to squeeze in 11 venues?*

*I understand the council need to prioritise the most vulnerable but I think it would be really sad if those activities for new mothers move to 'hubs' outside of the immediate localities, half the point of these activities is to allow new mums to meet other mums and support each other. I don't think this would happen if one had to travel a distance to get to the hubs*

*Throughout Hampshire the Hubs are widespread, and the distance to travel to access services could be great, potentially putting off many people who need to access these services. Is there not a way to maintain a more local feel to the Hubs?*

*Although main hubs could be beneficial for workers, the proposal really concerns me for families that do not drive. Also c-section mums would not be able to drive for 6 weeks and may also struggle. Is there any scope to have main hubs and outreach workers that do occasional drop in's at the other centres?*

- 3.12 There were also some instances where respondents acknowledged this information but expressed a desire for further details.

*There are many areas of need in Basingstoke and by having just one you are restricting access to those who can't drive or can't get there. I am aware you will still run from other venues for certain activities but who is going to decide that?*

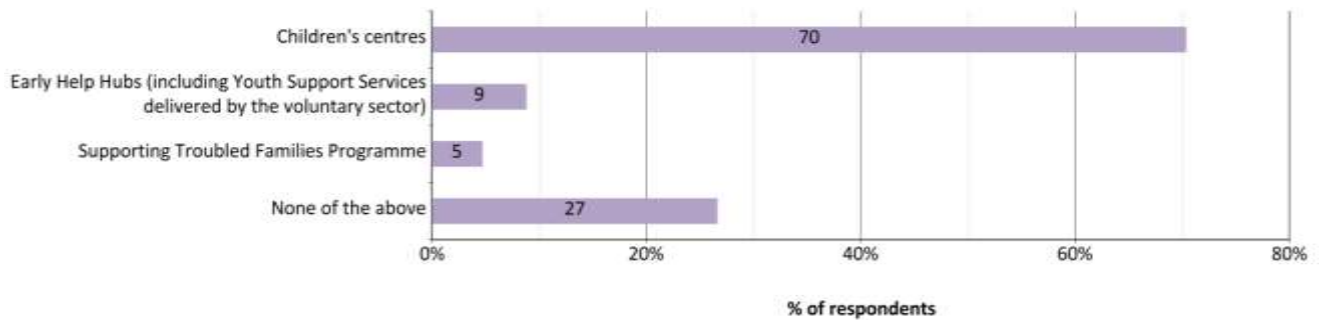
*There is not enough information provided to convince the reader that services will be elsewhere.*

## Findings of the Open Consultation Questionnaire

### Current use of services

*Are you currently accessing services provided by any of the following?*

**Figure 2: Current service use**



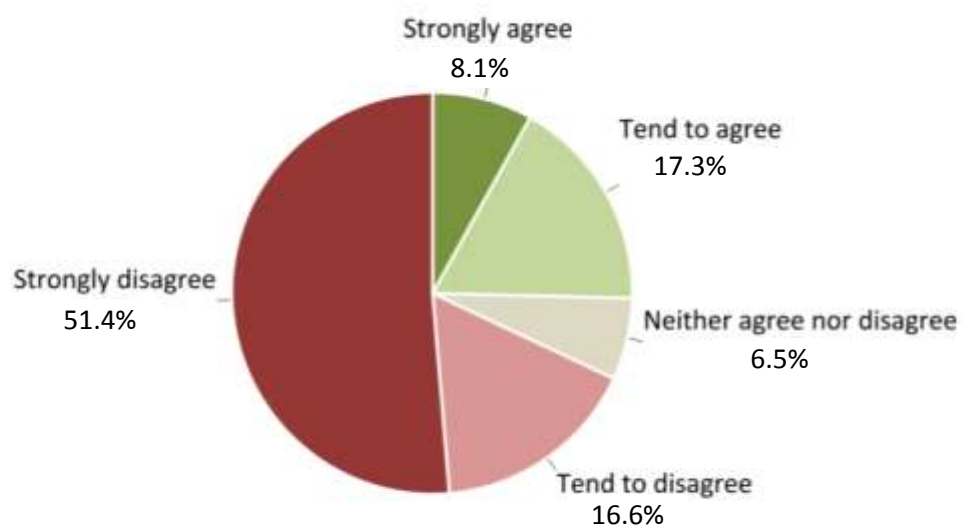
**Base: All Individuals (1974)**

- 3.13 Almost three quarters (73%) of respondents access at least one of the listed existing Children's Services provided by Hampshire County Council, including 70% who currently access children's centres. Around 1 in 10 (9%) access Early Help Hubs (including Youth Support Services) and 1 in 20 (5%) access the Supporting Troubled Families Programme.
- 3.14 However, more than a quarter (27%) of respondents to the consultation do not currently access the Hampshire's Children's Services listed above.

## Perceptions of Key Aims

*To what extent do you agree or disagree with the proposal to combine the Early Help Hubs (including Youth Support Services), children’s centre services, and align with the Supporting Troubled Families Programme to create a single Family Support Service for families with children/young people aged 0-19?*

Figure 3: Levels of support and opposition for the creation of a single Family Support Service

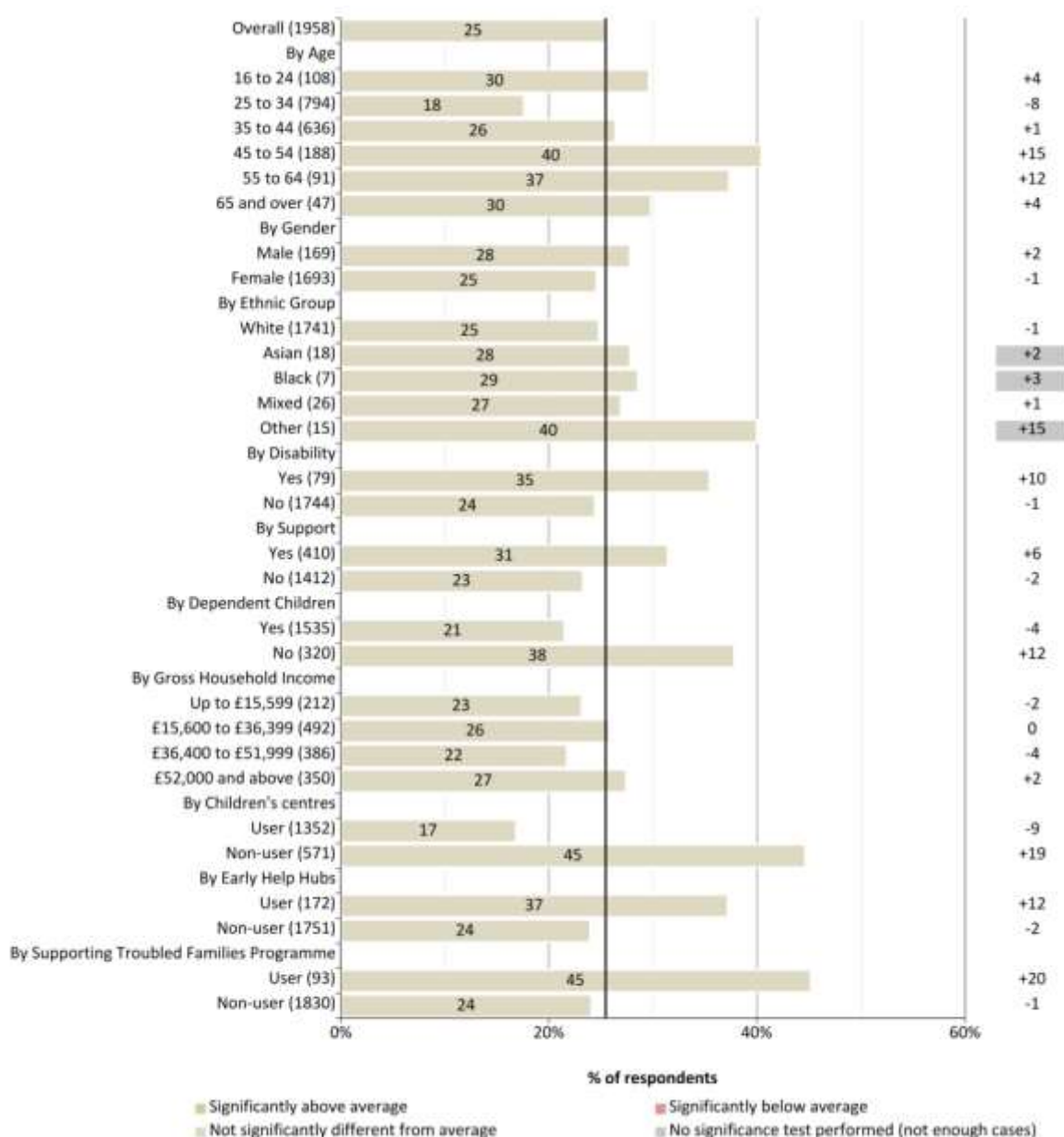


Base: All Individuals (1958)

<sup>3.15</sup> While a quarter (25%) of respondents agreed with the proposal to create a single Family Support service, more than two thirds (68%) of respondents disagreed with this proposal.

Respondents who agree

Figure 4: Differences in agreement for the creation of a single Family Support Service (Respondents who agree)

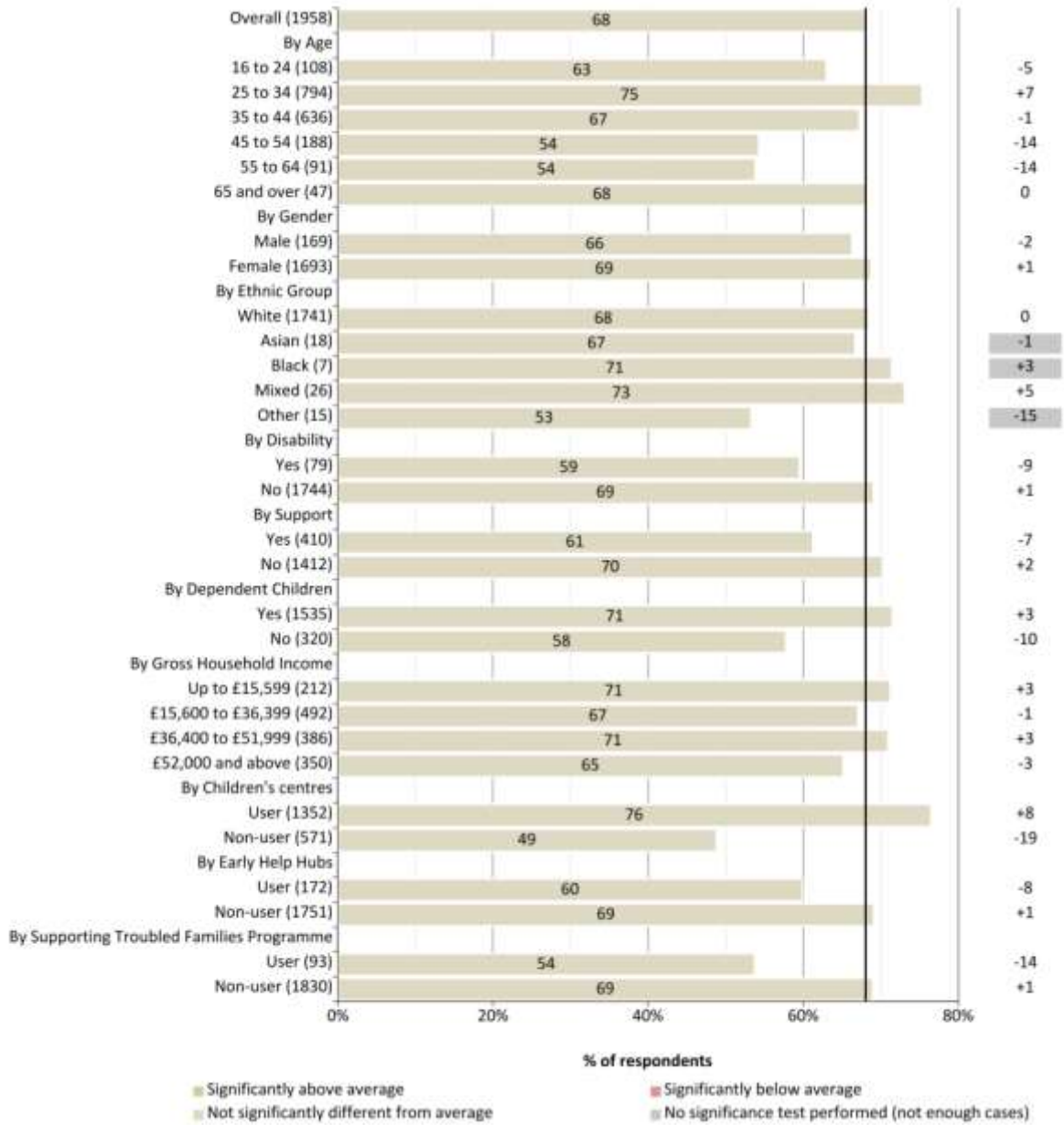


Base: All Individuals (number of individuals shown in brackets)

3.16 Respondents who are aged 45-64, disabled respondents, respondents who look after or give help or support to family members, friends, neighbours or others because of long-term physical or mental ill health/disability or problems relating to old age, those without dependent children, non-users of children’s centres, users of the Early Help Hubs and users of the Supporting Troubled Families programme are particularly likely to agree with the proposal to create a single Family Support Service.

Respondents who disagree

Figure 5: Differences in agreement for the creation of a single Family Support Service (Respondents who disagree)

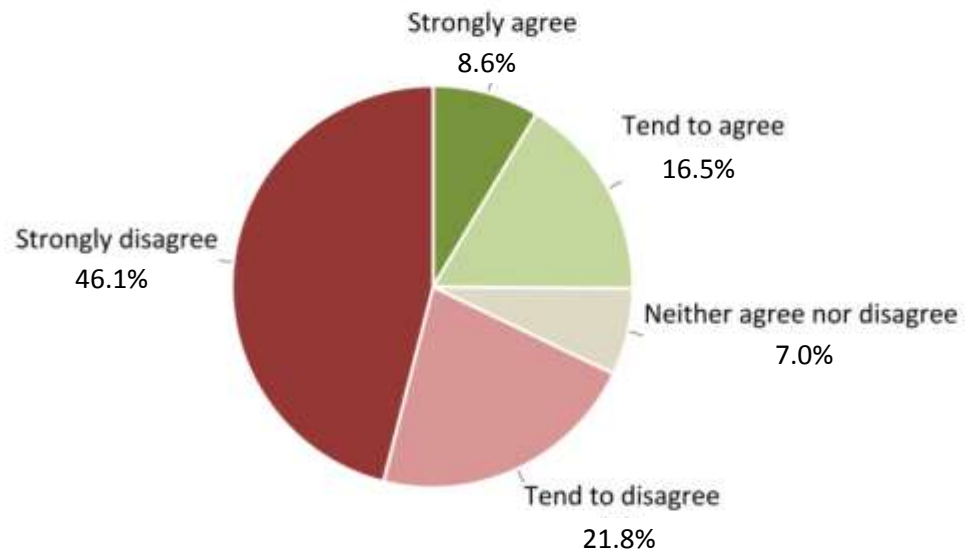


Base: All Individuals (number of individuals shown in brackets)

3.17 Respondents aged 25-34 and users of children’s centres are particularly likely to disagree with the proposal for the new Family Support Service.

*To what extent do you agree or disagree with the principle of the County Council prioritising support for the most vulnerable children and families, as opposed to offering services universally to all children and families, regardless of levels of need, as is currently the case?*

**Figure 6: Levels of support and opposition for prioritising support to the most vulnerable families**

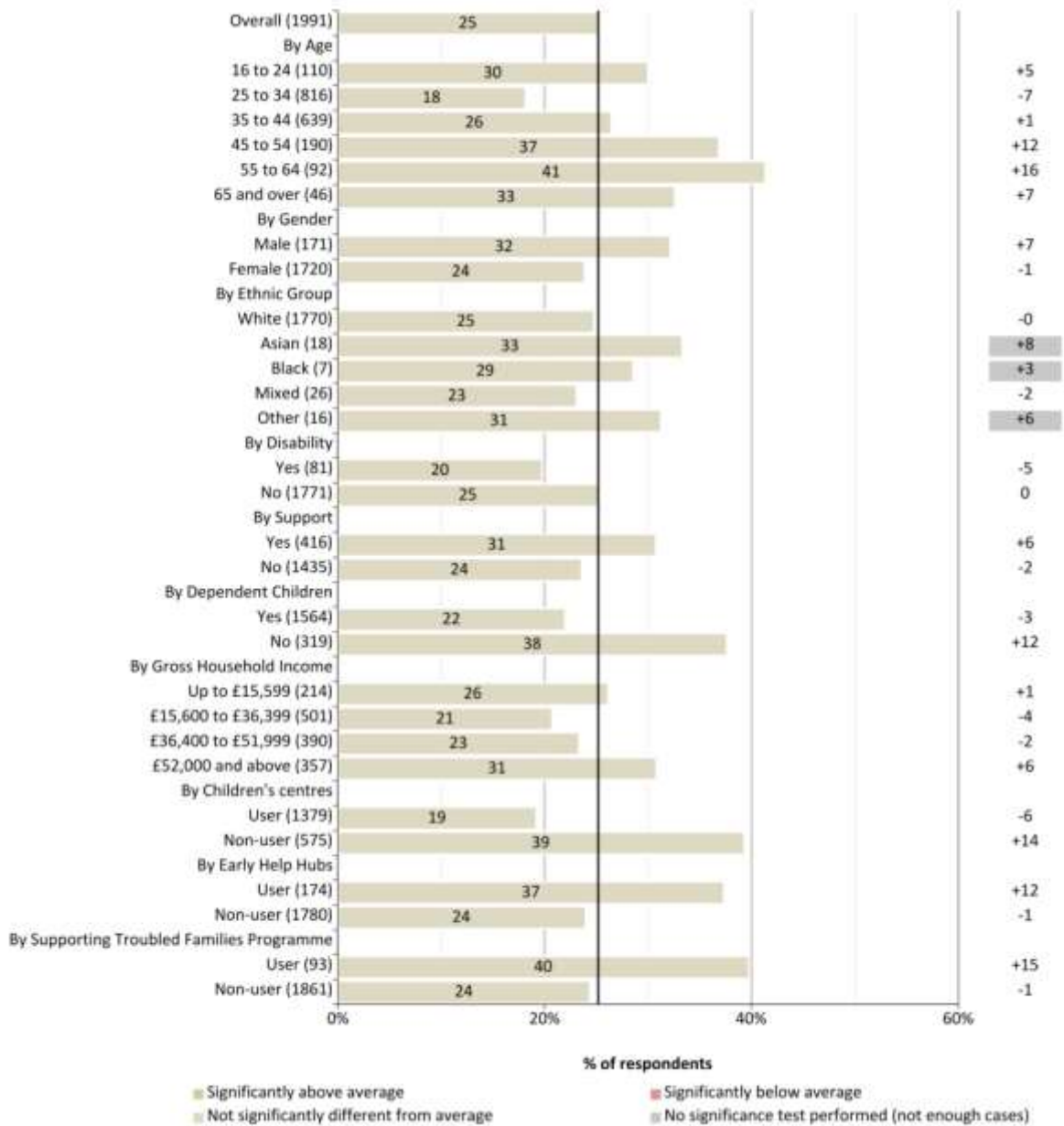


**Base: All Individuals (1991)**

- <sup>3.18</sup> When asked about prioritisation of services, a quarter (25%) of respondents agreed that the Council should prioritise support to the most vulnerable children and families, rather than offering services universally. However, more than two thirds (68%) of respondents disagreed with this principle.

Respondents who agree

Figure 7: Differences in agreement for prioritising support to the most vulnerable families (Respondents who agree)

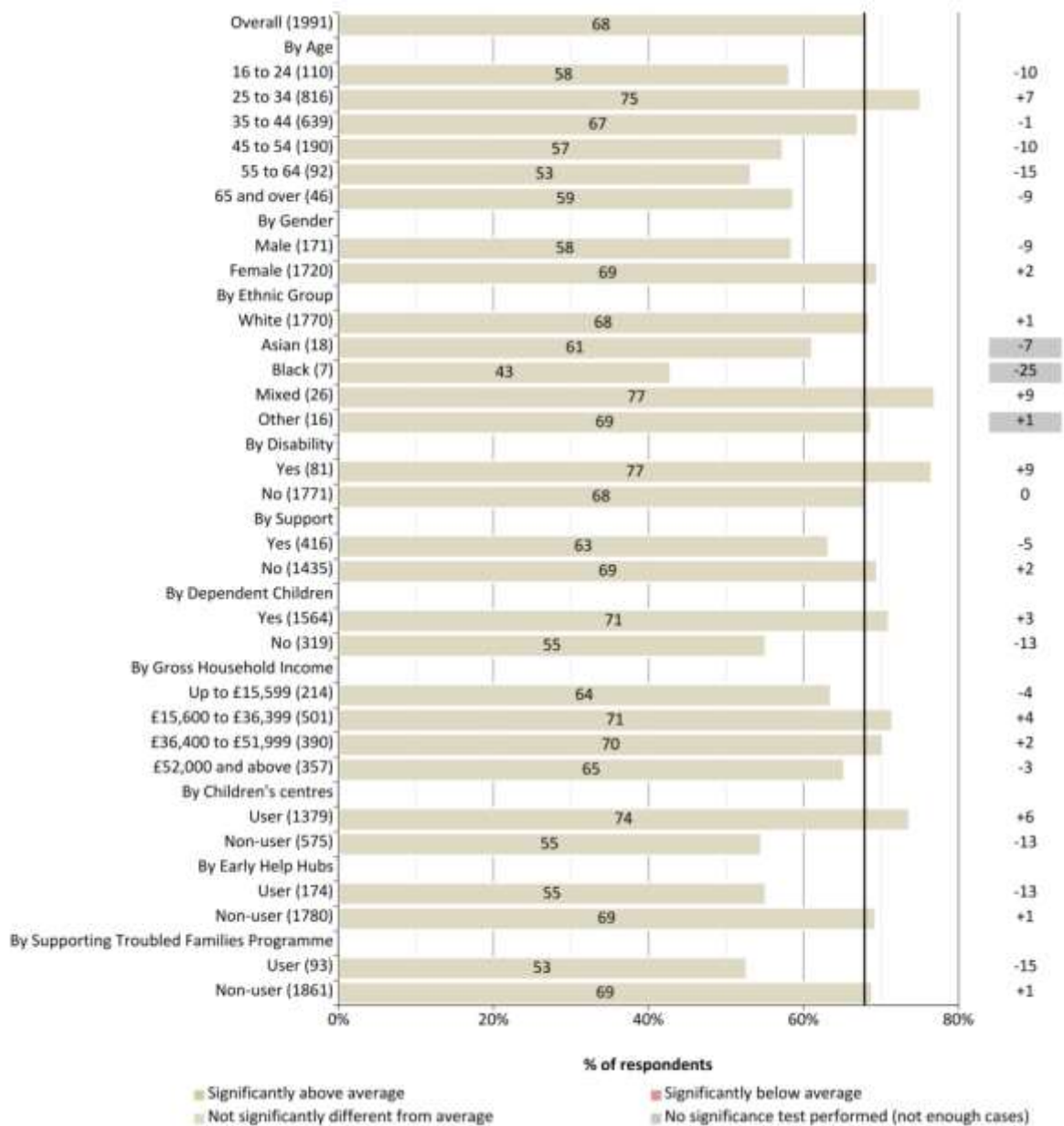


Base: All Individuals (number of individuals shown in brackets)

3.19 Respondents who are aged 45-64, male respondents, respondents who look after or give help or support to family members, friends, neighbours or others because of long-term physical or mental ill health/disability or problems relating to old age, those without dependent children, those whose gross household income is £52,000 and above, non-users of children’s centres, users of the Early Help Hubs and users of the Supporting Troubled Families programme are particularly likely to agree with the prioritisation of support to the most vulnerable children and families.

Respondents who disagree

Figure 8: Differences in agreement for prioritising support to the most vulnerable families (Respondents who disagree)



Base: All Individuals (number of individuals shown in brackets)

3.20 Respondents who are aged 25-34, those from a mixed/multiple ethnic background, respondents with a disability and users of children’s centres are particularly likely to disagree with the prioritisation of support to the most vulnerable children and families, as opposed to offering support universally.

*If you disagree with the development of a Family Support Service and the changes proposed to children's centres services, please tell us why.*

- 3.21 Respondents who disagreed with the development of a Family Support Service and the changes proposed to children's centres services were asked to provide the reasons for their disagreement. In order to take these comments into account, a code frame was produced to highlight frequently occurring themes within the data.
- 3.22 From the 746 respondents who provided valid answers to this question, 2,677 different comments have been classified, the details of which are outlined below.

**Figure 9: Reasons for disagreement with the development of a Family Support Service and changes to children's centres**

Coded comment	% of respondents	Base
ACCESS: All families need access to children's centre services/universal access is needed/children's centres provide support for families of all backgrounds, not just vulnerable families	52%	389
GENERAL: Early intervention is vital/prevention is better than cure/proposals will result in increased need for support services in the future	32%	239
GENERAL: Children who are less vulnerable will miss out on services if the council focuses exclusively on the most vulnerable/proposals will lead to less support for level 1-3 families	31%	228
GENERAL: Disagree with proposals as services are important features of local communities/act as meeting places/give people a sense of community/social interaction between parents	28%	209
GENERAL: Children's centre services offer important support for new parents/single mothers	20%	149
GENERAL: Concerns about how families are categorised as 'vulnerable'/vulnerability cannot be assessed beforehand/issues such as post-natal depression can affect people from all backgrounds	18%	135
GENERAL: Generally disagree with proposals/disagree with cuts/closures/need to maintain the same level of provision	16%	122
GENERAL: Disagree with proposals as worried that children/families won't get the support needed/a lot of people will slip through the net	16%	120
GENERAL: Disagree with proposals as services are vital features in preventing isolation/proposals will increase risk of isolation	15%	114
GENERAL: Children's centre services prevent/help deal with mental health issues e.g. post-natal depression etc.	15%	111
ACCESS: Proposals will negatively impact access/families will have to travel further/need local access i.e. in walking distance	12%	88
GENERAL: £9 charge is too high/will prevent people from being able to access services	11%	79
GENERAL: Children's centre services are important for children's social development/allow children of different backgrounds to socialise	10%	74
GENERAL: Agree that vulnerable children/families need to be prioritised, but not at the expense of the non-vulnerable	9%	68
GENERAL: Solely providing support to vulnerable families will stigmatise the service/will cause segregation between the vulnerable and non-vulnerable	8%	60
GENERAL: Lack of prevention will cause more expenditure/strain on other services	7%	54

such as education/NHS/criminal justice system/benefits etc.		
GENERAL: Children's centres are important in providing courses/access to courses is vital (non-specific)	7%	52
GENERAL: Sure Start programmes/centres need to be maintained/provide an important service	4%	29
GENERAL: Reduction in children's centres will have a negative impact on breast feeding due to less support/classes	4%	27
GENERAL: Disagree as proposals will result in lower attendance rates in Children's Centres	3%	21
SPECIFIC - Need to maintain services in Alton/Bushy Leaze provides good service	2%	17
GENERAL: Disagree as proposals will create additional pressure/strain on existing service/will create a stretched service	2%	15
GENERAL: This is just a cost cutting exercise/proposals are financially motivated	1%	11
GENERAL: Children's Centres are important in providing stay and play classes/access to stay and play classes is important	1%	11
GENERAL: Don't agree with combining services/each age group should have their own specific service/younger children shouldn't be around older children/different age groups have different needs	1%	11
GENERAL: Consultation is biased/flawed/other unhappy with consultation	1%	10
GENERAL: Children's Centres are important in providing rhyme time/access to rhyme time is important for children	1%	10
GENERAL: Happy to pay for services but £9 is too much/willing to pay a lesser amount	1%	10
GENERAL: The drop-in system shouldn't be cut/want to keep the drop-in availability	1%	9
GENERAL: Children's Centres are important in providing classes for baby massages/access to baby massage classes is important for parents	1%	9
GENERAL: Happy to combine services/combining ages between 0-19 is a good idea	1%	8
GENERAL: We already pay council tax/shouldn't have to pay any more money for services	1%	8
GENERAL: Disagree with cutting staff/adequate number of staff are vital for family services	1%	8
SPECIFIC - Need to maintain services in Petersfield/services within Petersfield currently good	1%	7
GENERAL: Need to have adequate access to centres available for weigh ins/need to have somewhere to be able to weigh babies	1%	5
SPECIFIC - Need to maintain service in Basingstoke/services within Basingstoke currently good	1%	5
'Other' <sup>1</sup>	17%	124

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<sup>1</sup> Responses made by less than 1% of respondents have been combined into the 'Other' category

- 3.23 The most frequent response explaining the reasons for opposition to the development of a new Family Support Service related to the opinion that services should be accessible universally and by all families regardless of background, rather than being specifically targeted to vulnerable families. These comments were typically concerned with 'borderline' cases where families didn't quite meet thresholds for greater support and referred to the benefits of children's centre support to families at a lower level of need.

*While targeted support is always needed it is never fully effective unless it rests on a comprehensive safety net of universal services. The removal of these sees families and children suffering in ways that could have been avoided while they wait to reach the required level of 'trouble' for a targeted intervention.*

*When it comes to becoming a parent, "vulnerability" cannot be measured purely on the basis of age, income or level of education. I became a mum at 30, I have a good job and I am educated to postgraduate level - yet I cannot stress enough the importance of the drop in sessions which were available when my eldest child was a baby. They gave me the chance to receive support and to meet and form friendships with other new parents. Taking away this universal support will increase levels of PND.*

*I believe if you take away this service for all to use then there will become more at risk children in the area and possibly slipping through the net completely. All parents/carers need support at some stages even if just to let kids play and interact with adults as home parenting can become very lonely and isolated. More children will lack social skills as some parents cannot afford childcare/nurseries so those children will have no experience of other children.*

- 3.24 In addition to commenting on the benefits of children's services to those with less complex needs, some individuals also remarked on the benefits of hosting universal groups to families with higher levels of needs.

*Families in difficulties can draw support other families. They can feel part of a service for children-families not singled out as problem families. They can be inspired and stimulated by the activities of families/children with fewer problems and challenges. There are role models of alternative behaviours in mixed groups.*

- 3.25 Related to comments about universal support were themes expressing the importance of early intervention and its role in preventing the needs of children and families from escalating and increasing the demand for support services in the future.

*The children's centres offer targeted and universal children's services and the varied services means that as help is offered early on and readily available, those who may potentially have more significant problems are picked up at a far earlier stage therefore meaning that they don't progress into the category of the most vulnerable of families which they may have done were it not for the children's centres.*

*The work carried out in Children's Centres supports a wide range of families some with complex needs but with working with them from an early stage & helping with parenting skills & healthy living ensures the children develop with the right support and prevents troubled family issues developing at a later stage.*

*Whilst it is obvious that vulnerable families need robust services, prevention is better than a cure and completely cutting universal services will undoubtedly lead to many more family's becoming level 3 and 4. This will be counterproductive as it will take much more money to support these families once they reach the stage they need more intensive support.*

- <sup>3.26</sup> A further 228 respondents believed that under the proposed changes there would be a reduction in support for level 1-3 families and that children with less apparent needs would miss out on services if the council focused exclusively on the most vulnerable.

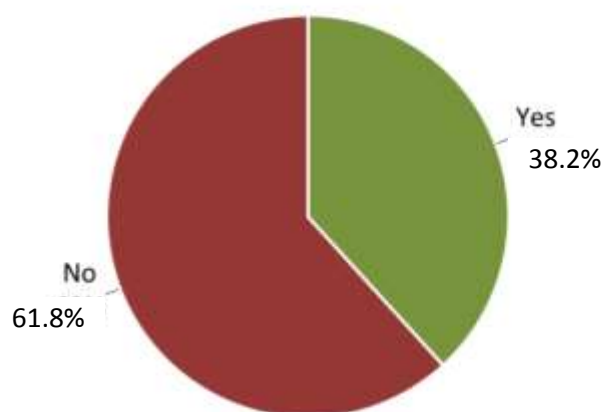
*Whilst I appreciate vulnerable children and families need maximum support, I think by focussing only on these families you are potentially letting many 'borderline' families fall between stools. Offering services universally means everyone will feel welcome and then trained staff see more people and can help more people who have not been identified as vulnerable or would not identify themselves in this way but could urgently do with help.*

*While I can see some logic in providing a 0-19 service which will streamline services and provide continuity of support, the closure of the vast majority of centres will make the service completely inaccessible to the very families it will be aimed at. The cessation of a 'universal' service will lead to an increase in Level 2 and above clients as the readily available support and peer support on offer at the universal sessions will no longer exist.*

*Whilst I support charging for some activities having a structure and getting out of the house daily can be very important. To attend a single session that costs £9 each day would cost £45 a week which is beyond most, particularly if on maternity leave.*

*Would you be prepared to pay for non targeted services, e.g. stay and play and cook and eat activities that may not be delivered by the Family Support Service for free? Services could cost up to £9.00 per session.*

**Figure 10: Support and opposition for paying for non targeted services.**

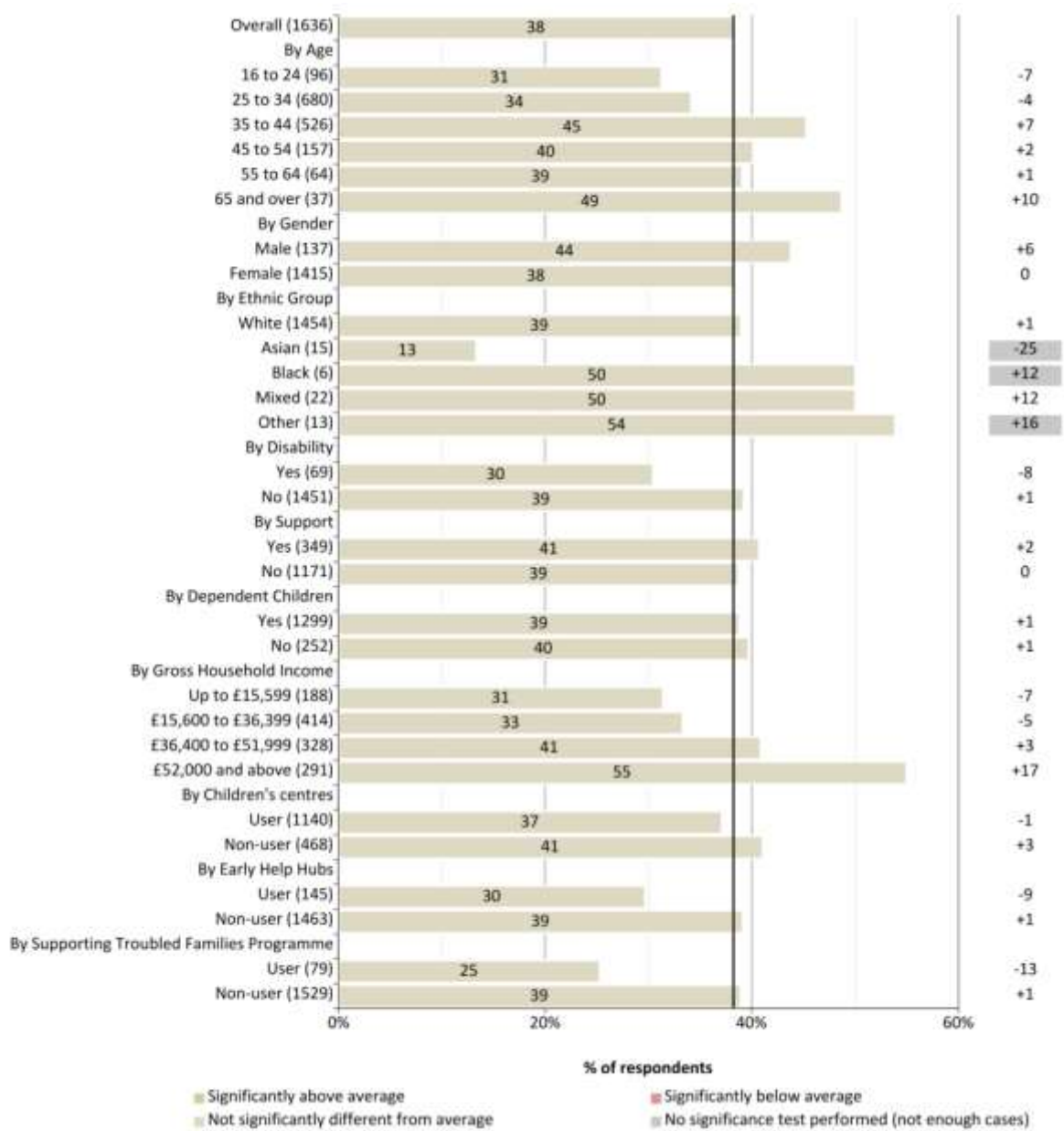


**Base: All Individuals (1636)**

- 3.27 Respondents were asked whether they would be prepared to pay up to £9 for non targeted services that might not be delivered by the Family Support Service for free.
- 3.28 Around two fifths (38%) of respondents said that they would be prepared to pay for these services, while around three fifths (62%) said that they would not be prepared to pay.

Respondents who agree

Figure 11: Differences in willingness to pay for non targeted services (Respondents who agree)

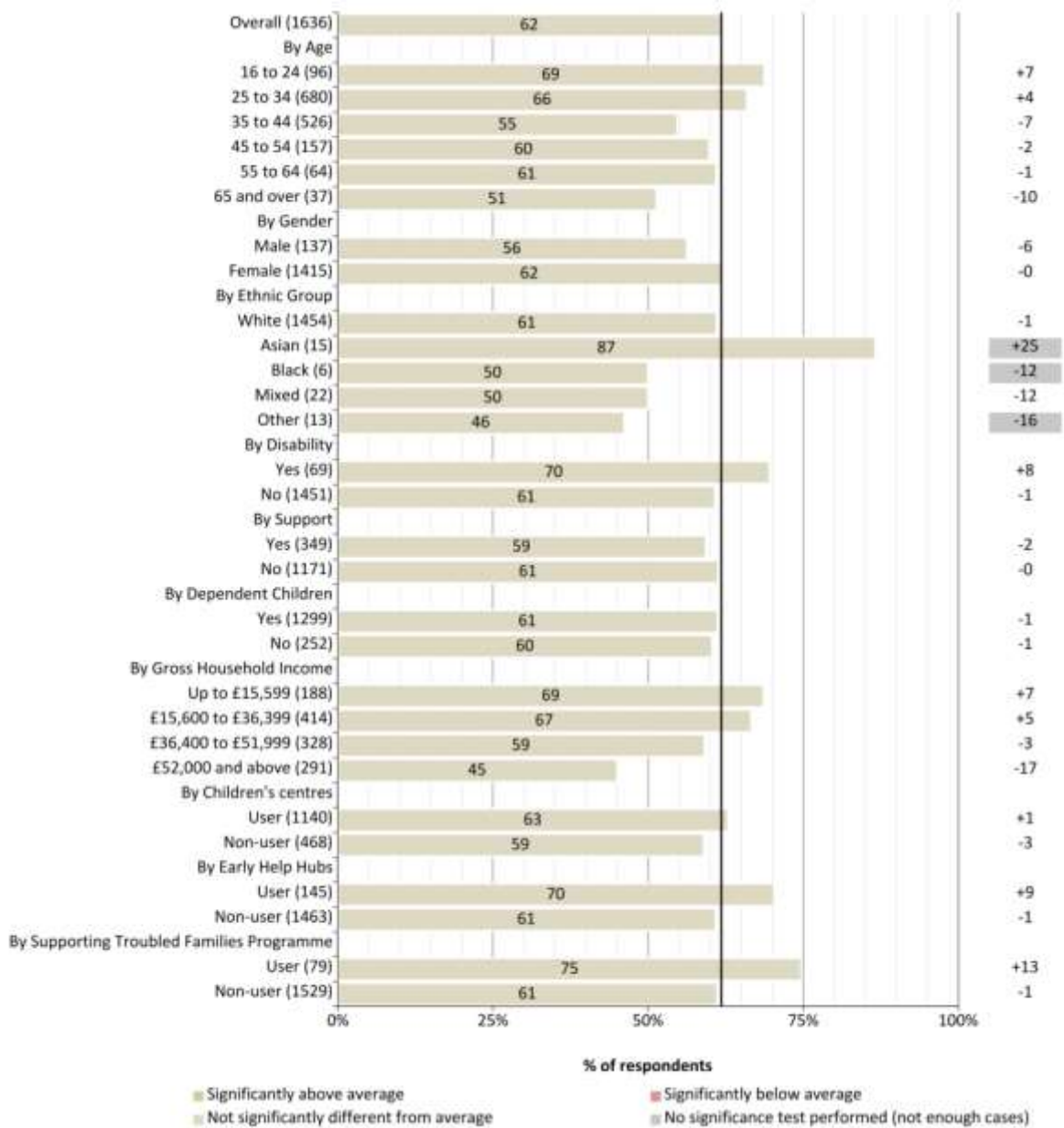


Base: All Individuals (number of individuals shown in brackets)

3.29 Respondents aged 35 to 44 and 65 or over, male respondents, respondents from a mixed/multiple ethnic background and those with a gross household income of £52,000 and over are particularly likely to say that they are prepared to pay for non targeted services.

Respondents who disagree

Figure 12: Differences in willingness to pay for non targeted services (Respondents who disagree)

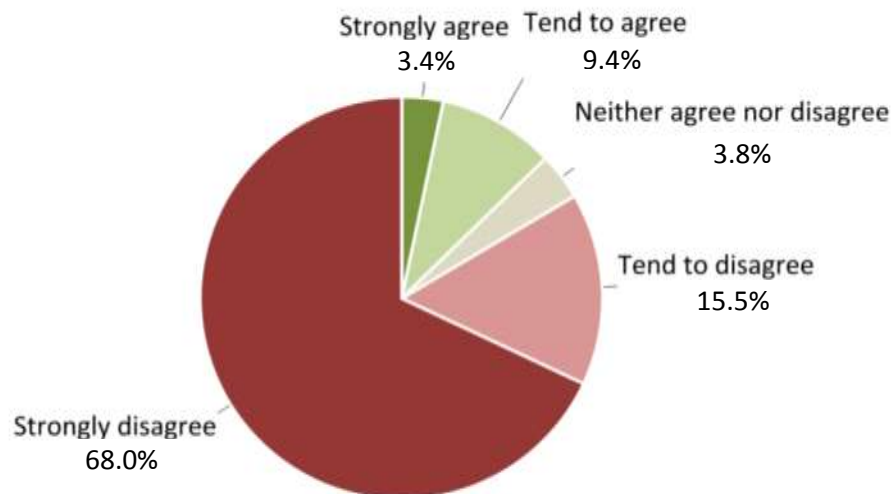


Base: All Individuals (number of individuals shown in brackets)

3.30 Respondents aged 16 to 24, respondents with a disability, those with gross household incomes of up to £15,599 and users of Early Help Hubs and the Supporting Troubled Families programme are particularly less likely to say they are prepared to pay for non targeted services.

*Do you agree or disagree with proposals to reduce the number of buildings designated as children’s centres from which to deliver the proposed Family Support Service?*

**Figure 13: Levels of support and opposition for the reduction of buildings designated as children’s centres**

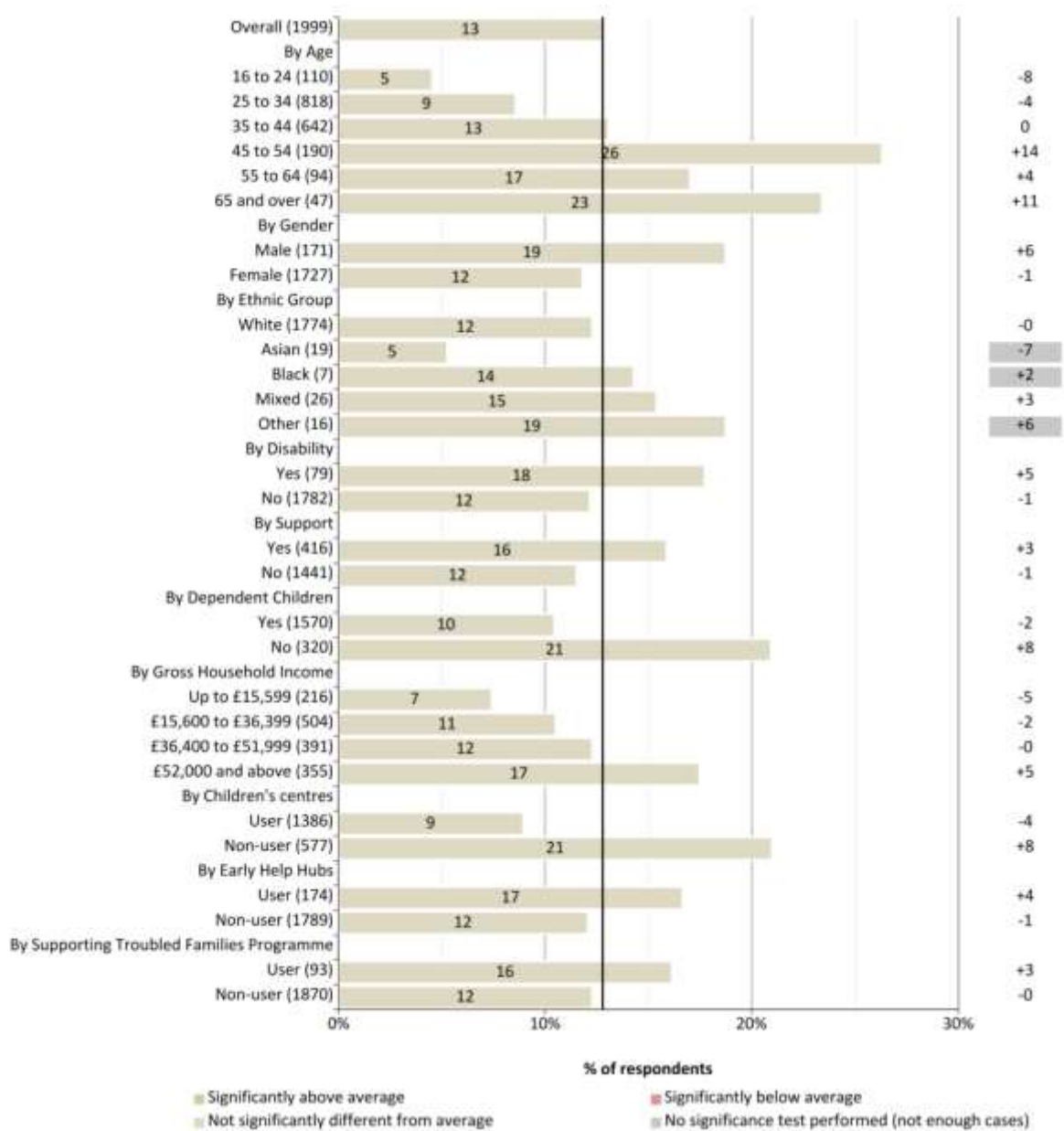


**Base: All Individuals (1999)**

- 3.31 A key proposal of the consultation was to reduce the number of buildings designated as children’s centres that would deliver the new Family Support Service from 54 designated centres to 11.
- 3.32 This proposal received the highest levels of disagreement among individual respondents in the consultation. Just 13% agreed with the proposed reduction in designated centres, while more than four fifths (83%) disagreed with this proposal.

Respondents who agree

Figure 14: Differences in agreement with proposals to reduce buildings designated as children’s centres (Respondents who agree)

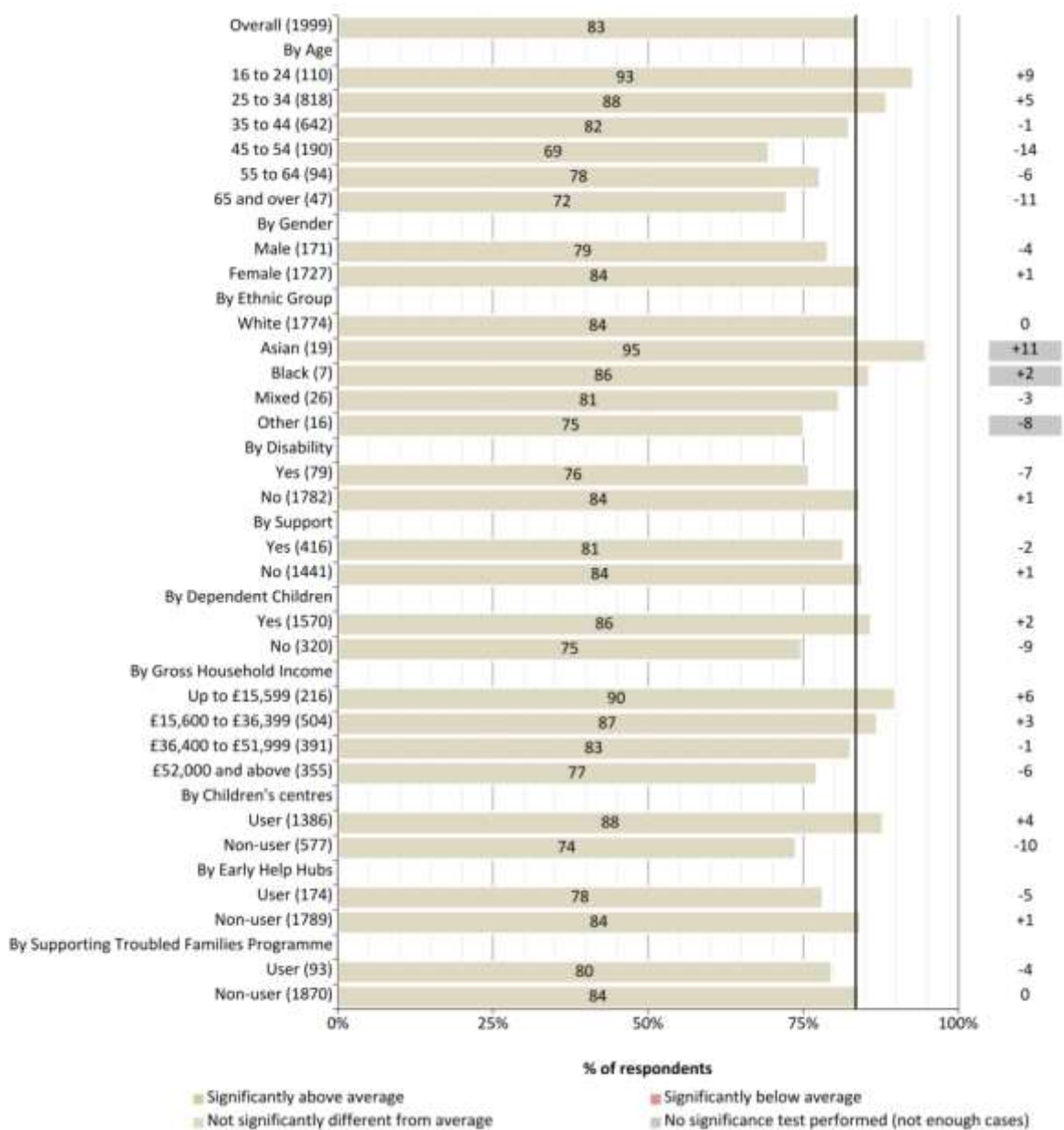


Base: All Individuals (number of individuals shown in brackets)

3.33 Respondents aged 45-54 and 65+, male respondents, those without dependents children and non-users of children’s centres are particularly likely to agree with the proposed reduction of buildings that are designated as children’s centres.

Respondents who disagree

Figure 15: Differences in agreement with proposals to reduce buildings designated as children’s centres (Respondents who disagree)

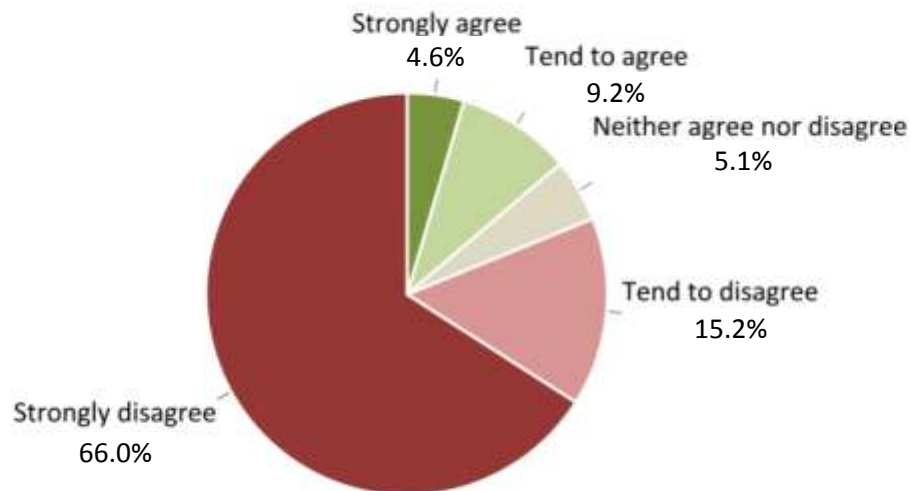


Base: All Individuals (number of individuals shown in brackets)

3.34 Conversely, respondents aged 16-24 and those with a gross household income of up to £15,599 are particularly likely to disagree with the proposed Children’s Centre building reduction.

*To what extent do you agree or disagree with the proposal to have one Family Support Service Hub in each of the 11 districts across Hampshire?*

**Figure 16: Levels of support and opposition for the proposal to have one Family Support Service Hub in each of the 11 districts across Hampshire?**

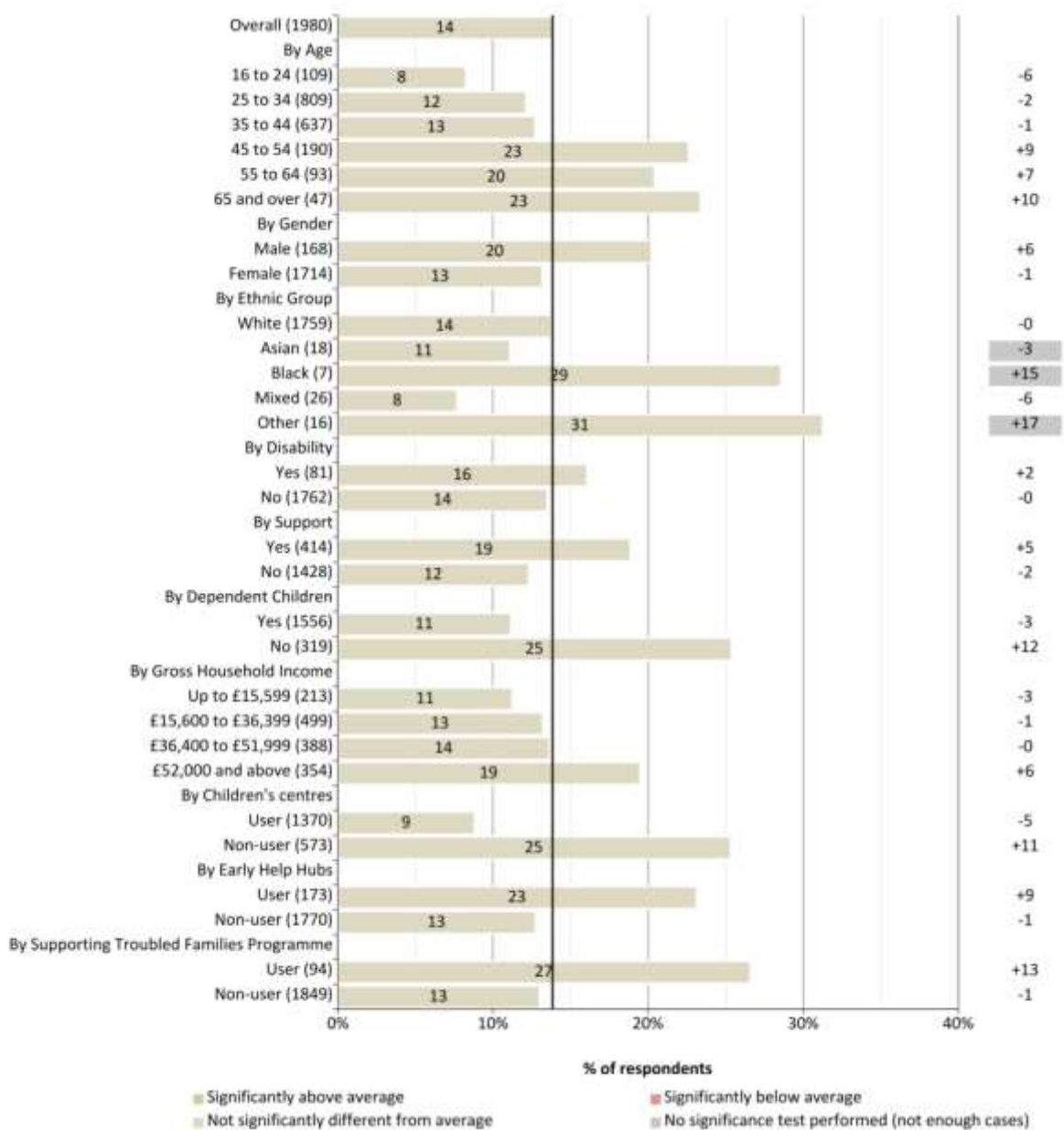


**Base: All Individuals (1980)**

3.35 When respondents were asked the extent to which they agreed or disagreed with the proposal to have one Family Support Service Hub in each of the 11 districts across Hampshire, more than one in ten (14%) agreed with this proposal. However, around four fifths of respondents (81%) disagreed with this proposal.

Respondents who agree

Figure 17: Differences in agreement with proposal to have one Family Support Service Hub per district (Respondents who agree)

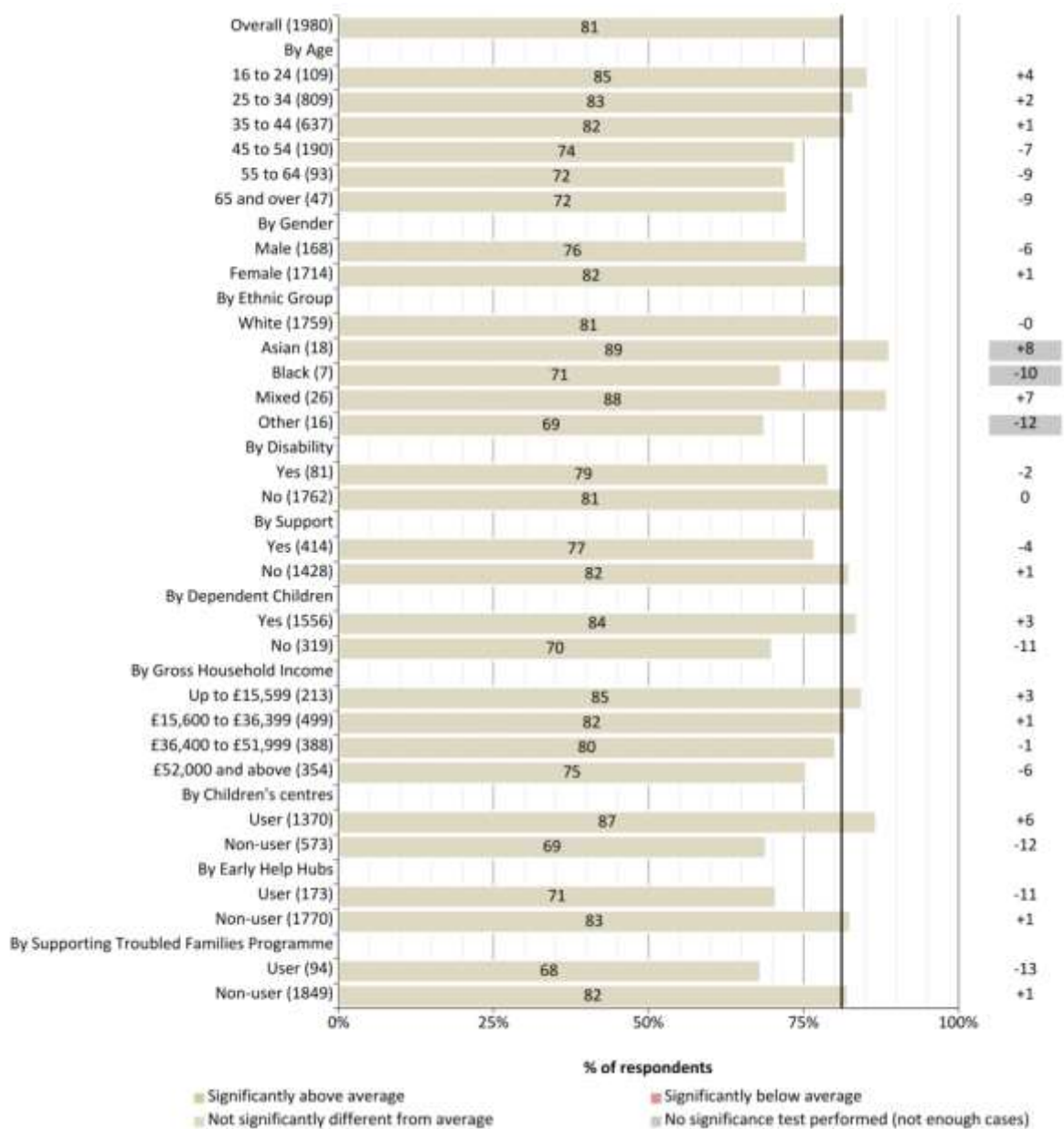


Base: All Individuals (number of individuals shown in brackets)

3.36 Respondents aged 45 and over, male respondents, those without dependent children, those with a gross household income of £52,000 and above, non-users of children’s centres, and users of Early Help Hubs and the Supporting Troubled Families Programme were particularly likely to agree with the proposal to have one hub per district in Hampshire.

Respondents who disagree

**Figure 18: Differences in agreement with proposal to have one Family Support Service Hub per district (Respondents who disagree)**

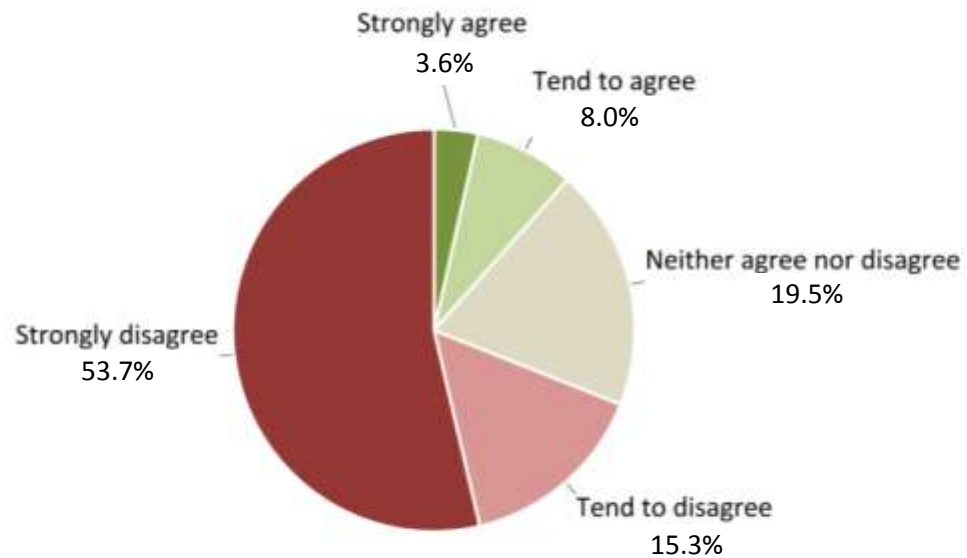


Base: All Individuals (number of individuals shown in brackets)

3.37 Respondents from a mixed/multiple ethnic background and children’s centre users were particularly likely to disagree with the proposal of having one hub in each of the 11 districts across Hampshire.

*To what extent do you agree or disagree with proposed locations for the 11 Family Support Service Hubs?*

**Figure 19: Levels of support and opposition with the proposed locations for the Family Support Service Hubs**

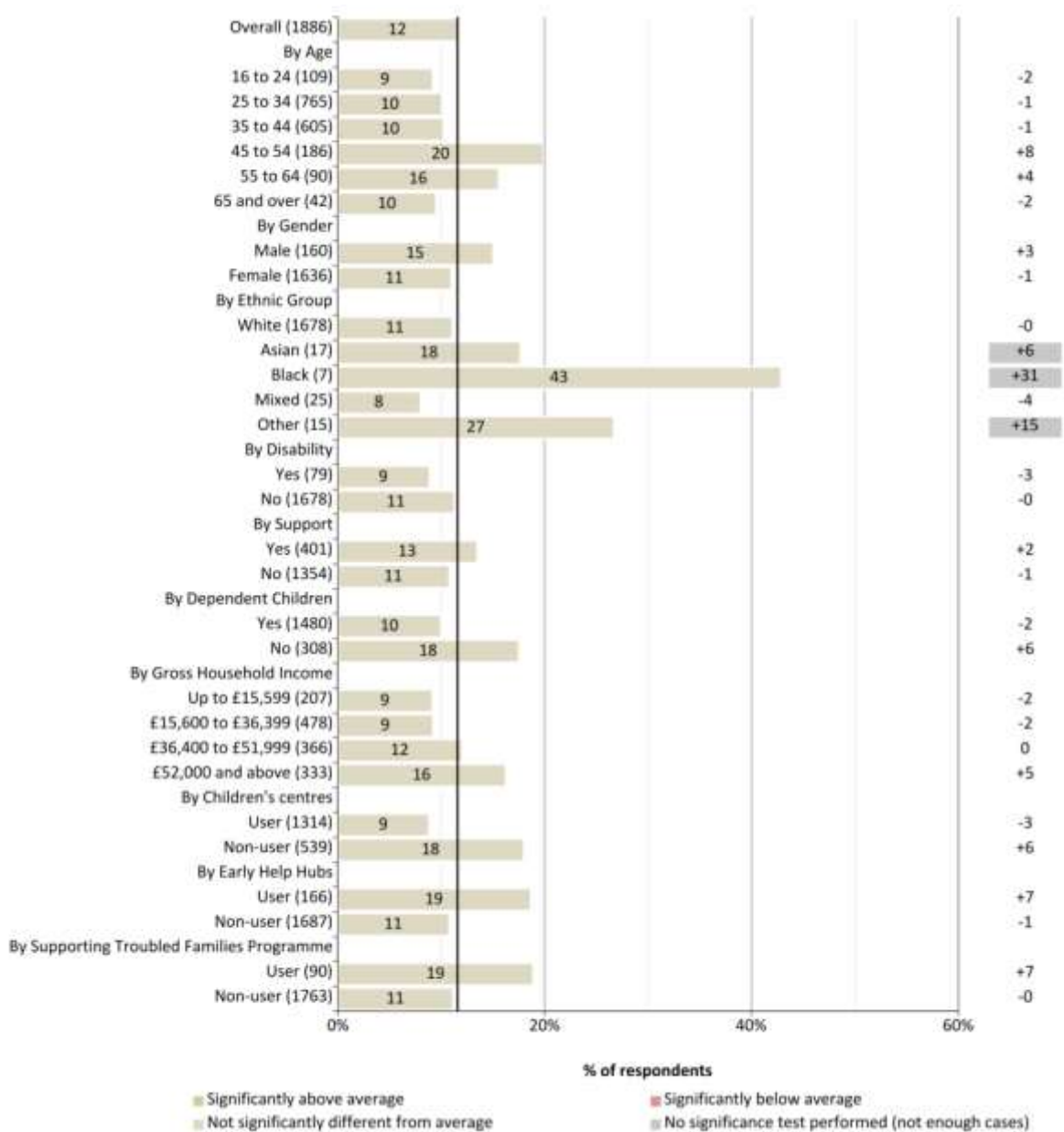


**Base: All Individuals (1886)**

- 3.38 Respondents were asked the extent to which they agreed or disagreed with the proposed locations of the Family Support Service Hubs.
- 3.39 This proposal received the lowest level of agreement of any question in the consultation, and the highest proportion of neutral answers. 12% of respondents agreed with the proposed locations for the 11 Family Support Service Hubs. Around 7 in 10 (69%) disagreed with the proposed locations and around a fifth (19%) neither agreed nor disagreed.

Respondents who agree

**Figure 20: Differences in agreement with the proposed locations for the Family Support Service Hubs (Respondents who agree)**

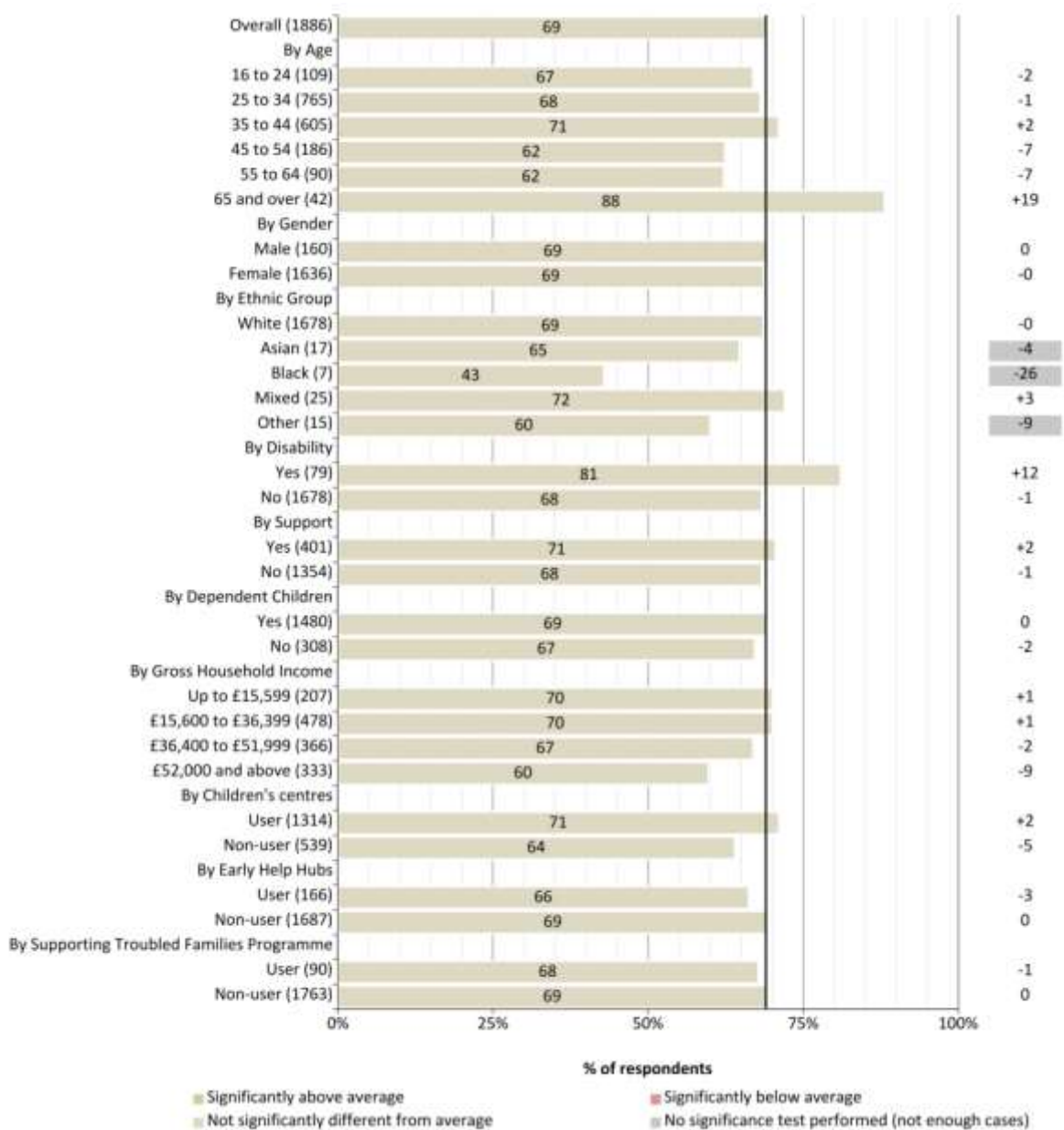


Base: All Individuals (number of individuals shown in brackets)

3.40 Respondents aged 45-54, those without dependent children, non-users of children’s centres and users of the Early Help Hubs and Supporting Troubled Families programme were particularly likely to agree with the proposed locations.

Respondents who disagree

**Figure 21: Differences in agreement with the proposed locations for the Family Support Service Hubs (Respondents who disagree)**



Base: All Individuals (number of individuals shown in brackets)

3.41 Respondents aged 65+ and respondents with a disability were particularly likely to disagree with the proposed locations of the Family Support Service Hubs.

*If you disagree with any of the proposed locations for Family Support Service Hubs, please tell us why.*

- 3.42 Respondents who expressed disagreement with the proposed locations for the Family Support Service Hubs were asked for further details explaining why this was.
- 3.43 Of the 664 respondents who were asked this question, 2,041 different comments have been classified according to a standardised code frame, the details of which are outlined below.

**Figure 22: Reasons for disagreement with the proposed locations for Family Support Service Hubs**

Coded comment	% of respondents	Base
ACCESS: Proposed hubs are too far away generally/need local access to the hubs/need local access to help and support/needs to be within walking distance	52%	342
ACCESS: Proposals will negatively impact people without transport/cars/who cannot travel to a children's centre	33%	220
ACCESS: Proposals will negatively impact families in deprived areas/of a vulnerable background/people who can't afford to travel/people on low income	23%	154
ACCESS: Proposals will negatively affect attendance rates in services/attendance rates will suffer as people won't be able to access them as easily	19%	124
ACCESS: Disagree with new locations due to the poor public transport provision in the area/hard to reach via public transport	19%	123
GENERAL: Disagree with cuts in services/need to maintain current provision of services	13%	88
GENERAL: Disagree with proposals as 11 hubs are not enough/need more than 11 hubs in Hampshire/1 hub per area is not enough	13%	88
ACCESS: Disagree with proposals due to difficulty in travelling with families/small children/too far to travel with young children	13%	85
ACCESS: Disagree with proposals as services are important features of local communities/act as meeting places for smaller communities/give people a sense of community/social interaction between parents/children	10%	64
ACCESS: Disagree with proposals due to cost/it is too expensive to travel to proposed locations (non-specific)	9%	62
GENERAL: Proposed new services/centres will struggle to cope due to too many people/services will be strained with additional areas/staff will be strained/won't be an adequate amount of staff to cover	9%	57
GENERAL: Proposals will mean people will not everyone will get the help and support needed/families and children will suffer/people will fall through the net	7%	48
ACCESS: Proposals don't take into account pressures of being a new parent/access to local hubs vital for new mothers	7%	45
ACCESS: Proposals will make families/people isolated/create further isolation problems within area	7%	45
ACCESS: Disagree with proposed provision in Winchester/Wickham is too far away from Winchester/poor access to Wickham from Winchester	6%	43
ACCESS: New proposed position of hubs are too spread out/doesn't provide enough cover	6%	40
ACCESS: Disagree with proposed locations due to them not being central enough/centres need to be more central to areas they serve	5%	31
GENERAL: Generally disagree with proposals/disagree with new proposed locations	4%	29

of Family Support Service Hubs		
ACCESS: Proposals won't provide adequate coverage for rural areas/negatively impact those that live in rural areas	4%	26
GENERAL: Current provision of services needed as they are busy/will affect people who are currently using them	4%	25
ACCESS: Disagree with proposals due to provision of parking/lack of adequate parking available at proposed site/additional parking would be needed	3%	22
GENERAL: Cuts to children's centres will inevitably place more pressure/cost on other authorities e.g. education/criminal justice system/NHS etc.	3%	19
ACCESS: Disagree with new locations due to travelling causing more stress/anxiety/causing people will mental health illness problems	2%	15
GENERAL: Appreciate there needs to be savings/change/review in services	2%	15
ACCESS: Disagree with proposals as New Forest West has insufficient cover	2%	14
SPECIFIC: Basingstoke is a large area/covers a large population/needs more than 1 hub	2%	14
ACCESS: Disagree with new locations as distance is too far between Farnborough and Aldershot/people aren't going to travel between Farnborough and Aldershot	2%	12
GENERAL: Disagree with £9 charge as it is too much/£9 per session is too expensive	2%	12
GENERAL: Proposals are financially motivated/just a cost cutting exercise/care more about money than people's health	1%	9
SUGGESTION: Alternative building/venue suggested - look out for this code	1%	6
GENERAL: Disagree with decreasing hubs due to increasing population/increased demand	1%	4
GENERAL: Generally agree with proposals/agree with new proposed locations of Family Support Service Hubs	>1%	1
'Other'	21%	142

- 3.44 The most frequently appearing comments made by respondents when asked why they disagreed with the proposed locations for the Family Support Service Hubs related to a desire for local access to hubs. Many comments expressed a belief that hubs that were far away from their homes would impact on their ability to access services.

*The proposed location for the Hub in our area is too far away from the areas of deprivation/social housing etc. and these families will not travel to the proposed location (this has been proven in previous years). These parents need the support within walking distance and in a building they feel comfortable in, with practitioners that they have built relationships with.*

*The distance that is going to be expected of families, especially those who are the most vulnerable, is excessive. Those families are not going to either be able to or want to travel that far.*

*Support is often needed locally, it could be the only first point of contact for young or vulnerable mothers. Trust is built up by familiarity.*

- 3.45 This issue of local access to hubs was related to concerns over transportation, and specifically how those without their own cars would access the hubs. Indeed, many responses suggested that the demographic that may need access to hubs might also be one that has limited access to personal

transport. It was commonly suggested that this would create a financial burden on families from a vulnerable background or deprived families unable to afford to travel.

*Most folk needing the services are unable to travel to centres. Lack of money, lack of transport*

*I would have thought that the more vulnerable would be the least likely to have transport or to be able to afford the petrol even if they do have a car.*

*I am concerned that vulnerable children will lose the opportunity to use centres because of travelling restrictions. Having worked with families it can often be difficult enough to persuade some parents to use such services.*

- 3.46 Other responses highlighted other potential barriers to vulnerable families accessing services due to the proposed locations of the hubs, many of which focussed on the potential change to unfamiliar services.

*Vulnerable families, without a hub in their location, will not feel comfortable accessing services in an unfamiliar place.*

*Winchester will not have one and there is no way the families of need will travel to Wickham, even with a car I would not. Winchester has pockets of deprivation and these have very needy families that have to gain trust of a centre and the staff to begin to improve and have support offered. I don't feel the health visiting team can pick this up.*

- 3.47 Additional transport related concerns emerged over the use of public transport systems to access hubs. Specifically, doubts were raised over whether public transport provision would be able to take families from rural communities to hubs and the practicalities of using busses to travel to centres with young children.

*Transport will be difficult if there are more parents trying to get on the bus at the same time with prams. Also it will not be practical to get on the bus for an hour and half session from Farnborough to Aldershot and back. The closure will discourage people from accessing these facilities which can cause isolation to some people and then cause long term problems.*

- 3.48 Some respondents felt that the issues with access would affect attendance rates to the hubs, and discourage users from attending.

*By basing the centres in fewer locations automatically discriminates against those who are unable to travel. The number of attendees will reduce, which is what the council want, but the ones who need help the most will not be able to access the support.*

*Being within a school at busy times and the lack of parking will cause a risk to families attending the school and hub centre.*

- 3.49 Among the concerns over access to hubs there was an indication that a proportion of respondents to the consultation believed that services and activities would only be available at the proposed hubs, and there was some confusion over whether any services would be provided at outreach venues.

*The proposed plans in my area mean I would not be able to access any of the children's centre services as the nearest hub is miles and miles away. I feel this is going to create more vulnerable families as we will not be able to access groups.*

*Although main hubs could be beneficial for workers, the proposal really concerns me for families that do not drive. Also c-section mums would not be able to drive for 6 weeks and may also struggle. Is there any scope to have main hubs and outreach workers that do occasional drop in's at the other centres?*

- 3.50 There were additional arguments that arose but that did not appear frequently enough to be captured by the code frame or elsewhere in the consultation. One of these arguments was about Special Educational Needs provision. One comment focussed on the SEN support provided by Bushy Leaze that is not currently available elsewhere at other nurseries, although it is unclear from the comment whether this refers to nurseries provided by Hampshire Children's Centres or private nurseries. Meanwhile, another respondent was explicitly concerned with the loss of SEN expertise in certain locations.

*Bushy Leaze provide services for many of Alton's surrounding villages and towns like Bentley, Liss, Liphook, Petersfield. From many locations there are children that attend the nursery at Bushy Leaze with Special Education Needs. Something that isn't provided by other nurseries.*

*Some of the locations benefit from SEN expertise in the hub but in other places you would be losing a lot of expertise.*

- 3.51 This question received many responses that made references to specific areas within Hampshire. In particular, 43 respondents specifically disagreed with the proposed provision in Winchester, many of whom expressing that they did not feel that individuals from Winchester could access a Hub in Wickham.

*I am a Winchester resident and to have the Family Support Service hub in Wickham would be highly impractical for parents from Winchester to access, many of which don't have cars. Even if a parent did have access to a car, the journey time it would take would make it very difficult given the practicalities traveling with young children/babies. The plans need to be re-considered to take into account the high population of families in Winchester who need the support.*

*The Winchester District is going to be in Wickham? The transport links to Wickham are terrible, it should at the very least be based in Winchester.*

*Not sure why Winchester would be in Wickham School, as Wickham residents could quite easily access Fareham.*

- 3.52 Basingstoke was also one of the more frequently mentioned areas in terms of proposed provision. These comments typically mirrored general concerns around access.

*There are many areas of need in Basingstoke and by having just one you are restricting access to those who can't drive or can't get there. I am aware you will still run from other venues for certain activities but who is going to decide that?*

*The proposal for the service hub to be in Brighton Hill I think is fine for parents and families who live in Brighton Hill. However, in other large areas of deprivation identified in Basingstoke (e.g. Popley, Oakridge, Buckskin), families are not going to be able to access these services. At a recent conference looking at areas in Basingstoke, at Basingstoke and Deane Council, we*

*identified the need to take services to the hard to reach areas, and yet this is completely the opposite.*

- 3.53 Gosport was also an area specifically mentioned in responses to this question by 19 respondents. Multiple comments were concerned with perceived high levels of deprivation in the area.

*In Gosport Rowner is a very deprived area, however due to the redevelopment of the Rowner estate many of the vulnerable families have been moved into the town centre. This will make it difficult for families to access services from such a distance as it is an hour's walking distance, does not have good public transport links, and would be costly to access by public transport.*

*I don't think that having one centre per district will cater for the imbalance of needs. Gosport will have an extremely high demand and one centre will not cope.*

- 3.54 Feedback on specific centres was also analysed. In particular, there were 25 responses which made specific reference to Bushy Leaze. The majority of these comments discussed the difficulty in accessing this centre from the surrounding area (e.g. Petersfield), while one respondent argued that the facility itself lacked the space and parking necessary to accommodate the proposed changes.

*Bushy Leaze does not have the space or parking to cope with more yet is a fab facility in the community*

## Further Comments

*If you have suggestions for any alternative ways that we can make the required savings of around £8 million, please provide further details.*

3.55 More than a third (35%) of respondents gave further comments relating to alternative ways that the Council could make £8 million in savings. Of the 698 respondents that provided further details, 1,866 separate comments were classified according to a code frame, the details of which are outlined below.

**Figure 23: Further comments**

Coded comment	% of respondents	Base
HCC should make savings elsewhere (e.g. reduce management levels; rationalise high salaries/councillors' expenses; reduce waste; examine other departments' budgets; reduce spending on agency staff; reduce administrative/back office staff; make better use of electronic/digital services; reduce bureaucracy/red tape)	46%	324
Disagree with reductions to children's centres/children's centres are vital, especially for vulnerable and disadvantaged families and to combat social isolation	37%	259
Prepared to pay for services (but £9 per session too much for some/should be means tested)	35%	247
HCC should raise income (e.g. room rental; fundraising events; selling off building and land assets) and encourage donations (e.g. finance; equipment) to centres	26%	180
Early intervention/prevention is important, especially to prevent 'escalation' in the case of less vulnerable families	20%	143
Reducing children's centres will result in impacts on/costs for other services	15%	106
Some reductions necessary - but scale of change is too large	13%	94
Need local access to children's centres (especially in rural areas)/too great a distance between centres	10%	69
Use alternative locations (i.e. schools, community centres, church halls, libraries)	8%	53
Make more use of volunteers (i.e. parents) in running children's centres	7%	51
HCC should form partnerships (i.e. with local businesses/voluntary sector)	7%	47
More joined-up/combined service required for efficiency and value for money	6%	44
Would prefer to pay more council tax to maintain services	6%	42
Make savings but maintain services by reducing staff/hours/days of the week	3%	23
Services must be better promoted and/or organised to encourage use and participation	3%	24
Acceptance that savings must be made	3%	20
Focus on best-attended centres/services/activities (and close least attended)	3%	19
HCC should use financial reserves/relief fund to meet budget deficit	2%	16
Require more information on spending to make an informed decision	2%	14
Service should be properly funded (i.e. from Government/National Lottery)	1%	9
Public should not be expected to make decision	1%	8
Other (e.g. rationalise MP salaries; ensure large corporations pay taxes; reduce benefit levels; reduce immigration; change of Government required; lobby Government to reduce austerity)	11%	74

- 3.56 As the table above shows, over 300 comments were made about the need to identify efficiencies elsewhere within HCC in order to protect frontline services such as children's centres. Some suggestions were very specific, but the most typical related to: reducing management levels; rationalising high salaries and councillors' expenses; reducing waste; decreasing spend on agency staff; reducing administrative 'back-office' staff; ensuring value for money from contractors; making better use of electronic and digital services; and minimising bureaucracy:

*Cuts need to be made in other areas...*

*I think key services are education, families and health. I think other areas should be scrutinised exceptionally carefully and savings made where possible*

*Stop wasting money on things that are not required. Look at where the money is being spent instead of trying to cut an invaluable service*

*Cut the amount of councillor allowances. Reduce wasteful spending that is still prevalent within the county. Revenue generation on contracts on services that are placed into tender. For example penalising organisations that do not perform to their contracts...*

- 3.57 A further 259 comments failed to identify any alternative means of making the required £8 million savings, but took the opportunity to express opposition to the proposed reductions to children's centres in the context of the 'vital' role they play in helping vulnerable and disadvantaged families and combating social isolation on the part of parents (and, of course, consequently their children). Some of the very many typical comments included the following:

*The budget should not be having to be cut at all. We should be investing in our children's future not cutting their route to help and advice when needed*

*I feel strongly that the fantastic work the children's centres do cannot be replicated and should not be cut financially*

*Children's centres are a vital component of the community...to cut the services would have a detrimental effect on local communities and isolate already vulnerable people.*

*I can express what is important, and that is to continue reaching and supporting vulnerable and universal families. The changes proposed are seeming to disregard this, and it is undeniable that the limitation of services and support is going to have a worryingly bad consequence for those families who rely on it so badly*

*The services are already overloaded, cutting them dramatically will mean families are missed who need provision. This could end up with children in need being missed. The effect on their whole life, not just their childhood will be impacted. Their ability to function in society, regulate themselves, integrate appropriately and raise their own children will be completely altered. We all have a duty of care to the vulnerable in our society...*

*Please remember those of us working full-time careers, suddenly at home with a baby and no close friends or family nearby, are extremely vulnerable*

*These centres are a lifeline for families. I have so many mums over the past few months who have struggled with confidence and anxieties about getting out and meeting new people. Going*

*to these fantastic groups are essential...not only are these groups socially fantastic, but they [improve] wellbeing*

*You cannot decrease the children's centres as much as you are proposing to without causing many families to feel alone and isolated. I certainly would be one of those and know many people who would be the same...while I don't need masses of support I know they are there when I need them, even if it's just a shoulder to cry on or reassurance that the terrible twos won't last forever!*

*Families need somewhere to go so they can meet new people, where kids can have fun, and where parents can learn tips and get advice on how to bring up their children in the right way. Families benefit a lot from children's centres, and they can especially help the vulnerable who struggle to socialise and to leave their house*

*Motherhood is hard beyond your appreciation. A woman is more likely to experience mental health problems in the postnatal period than at any other time in her life. A positive childhood is essential for a happy and healthy society and so supporting mothers in a local community is the most important investment you can make...*

- 3.58 Indeed, as highlighted in the example quotations below, many respondents described their own circumstances and how their local children's centre had been essential in helping them through a difficult time:

*They literally have changed my life. I have two children and was suffering with severe depression, they helped and advised me better than any doctor could because most of them are mums or work with children every day...they have helped me with children's sleep issues, home problems, finance issues, child behaviour problems, adult education and the list goes on...they have given me confidence, and brought the old me back...*

*The timetabled services offered by centre staff are in fact a small part of what centres provide to vulnerable new parents. After giving birth to my second child in 2010 I suffered from postnatal depression and found my local centre (which was in walkable distance) to be a sanctuary where I could go to cry, escape, offload and in many ways just 'be'. I felt safe and supported by human contact - caring staff who could signpost additional services; parents (from all walks of life) that were experiencing the shared journey of parenting - the sense of belonging and not being alone was literally a lifeline*

*In my own case I believe the children's centre has saved the government and the NHS in particular a lot of money. When I realised, with the help of the postnatal group and the lady who ran it that I was ill with depression I was already in a really dark place...I was really good at hiding what I was going through so if I hadn't been getting out once a week to this group I don't think I would've gone out and sought the help I needed...*

*Feeling like you have no support network is frightening, and becoming a parent for the first time is even scarier. I was new to the area and rhyme time, messy play and other great classes have given me the chance to meet other mums feeling the same, I don't feel isolated anymore. I honestly know for a fact that mental health issues in postnatal care will be on the immediate rise if this proposal is approved.*

- 3.59 On a related note, and as alluded to in some of the quotations above, many respondents suggested that reducing the amount of support available to families in the form of children's centres will not only have negative consequences in terms of health, wellbeing and parenting (and other) skills, but also financial repercussions in the form of additional burdens on other services such as health and education:

*Someone who is not even recognised on any level may hide away from these services but with the invitation of a family support play group...that person will then be able to reach into the community and feel more confident to ask for support rather than suffering alone. If someone was suffering alone then they will most likely become a higher level and cost the government more money in the long-term. Preventing vulnerability rather than treating it will cost less money!*

*It seems very simple - by making these cuts, the service will diminish and become less effective, which ultimately will become a more expensive issue in the long run. The issue runs a lot wider than making simple cuts; emergency services, doctors and schools will undoubtedly bear the brunt of this drastic change*

*Taking funds from such a crucial support system for families has a wider and longer term effect that hasn't been quantified. The effect on health services and education in the future will be conversely affected due to this proposal*

*The short term savings made by all these cuts are going to have long term expensive consequences in the future. Millions is going to be spent on supporting all the children of today who will be the adults of the future because of the lack of family support given by children's centres*

*It is the unmeasurable value and savings that early intervention and prevention offer that need to be considered; these costs don't fit into spreadsheets or pie charts but that doesn't mean they should be ignored.*

- 3.60 This was considered especially relevant in the context of decreasing avenues of support for families that may be in lesser need, but have the potential to progress to a higher category without the prevention and early intervention currently offered. Again, some of the very many comments made on this issue were:

*Reducing the number of families who fall into category 2, 3, 4 has to be the way forward as a society. Cutting services to categories 1, 2, and 3...will result in more category 4 families, and will ultimately cost more than the £8 million*

*I strongly believe that prevention is better than cure...I feel it is vital that we support families as early as possible in order that thresholds of need are not escalated. My concern is that having the hub that is not accessible to parents due to location or cost implications, they will not be able to seek that early help and support...and as a consequence the number of families reaching level 4 will increase, which will push up that budget even higher! We continue to try and put out the fire instead of working from the grass roots and giving the families that support early on so the fire doesn't take hold!*

*Rather than preventing families becoming highly vulnerable, they will have to get into this position before receiving any support, which is not cost-effective or ethical. I would suggest investing more heavily in early years support, not cutting it. Good support in early years will mean savings can be made in services that tend to exist to deal with issues that developed in childhood as a result of a poor start*

*The support we currently offer to these children, to the families that care for them as a whole is so crucial to their development. This early intervention is, for so many young families, the difference between achieving potential and repeating mistakes. The relationships formed and the community built have provided families with the support, advice, knowledge and confidence they need to make positive change for themselves and for their children. The removal of this is a huge step backwards to the days of only intervening when the situation has gone too far...having seen this cycle endlessly repeated, it is so disheartening to witness what is another...divisive move that marginalises those that most need our support*

*Whilst targeting the vulnerable and those 'at risk', you are isolating a huge number of families who may on the surface be 'universal' but actually have needs...*

*As an unsupported single parent with caring responsibilities for my own dying mother I know how important sure starts can be when jobs centres and child support agencies fail and there is no local childcare...we need access for all, to remove stigma and isolation. We need to open more centres and not close. Focusing on most vulnerable does nothing to stop families sliding into trouble...*

*It's limiting access for children to the most in need, which is really unfair - soon we will be left with nothing...*

*These are a lifeline for many families, the early intervention prevents them being level 4 families, which will cost more money and create more vulnerable families, putting a bigger strain on the ever decreasing statutory services...*

*Fewer centres make sense, but the centres remaining should be accessible to all that need or feel they need help. It is important to support everyone, even level 1 families, as it may just be that little extra help they need to stop them becoming higher level need*

*In years to come when people are wringing their hands because of the increase in need at levels 3 and 4 I wonder if some bright spark will come up with the idea of universal early intervention...*

*All families should get support from these centre, not just ones with 'specific needs', because if you take this away from the families who you clearly seem to think don't need the support, then you fail to realise that these centres being there, and having the sessions to go to, keeps these families going so that they don't need extra support...*

*Access to these sure starts are enriching to child and parent but can also provide prevention in helping the families to feel part of a community and as a signposting service. It is not socially responsible to expect families who want to engage with other local mums and children of different ages in a safe environment to pay private companies and individuals for teacher-based classes; fine to provide an option but stay at home parents on limited income, not necessarily*

*benefits, do not have the spare capital and risk both themselves and their children being isolated from their community and support.*

- 3.61 It should be noted, though, that a small minority of respondents supported a greater focus on the most vulnerable families insofar as they are perhaps not the typical users of children's centres in some areas. These, it was said, are frequented by 'middle class' families that are perhaps not in need of their services (though some of the comments highlighted above on the issue of social isolation go some way to explaining why they attend):

*I think it's fair to focus your attention on families with greater needs. All the children's centre groups I go to are full of middle class families, who, while the support is nice, do not desperately need it.*

*The Waterside Children's Centre is a classic example of a children's centre that is being used by individuals who were not the intended target market...the purpose was to provide a facility/services for parents and single parents who were in need of support. The individuals who use the Waterside facility, albeit some of them may have a need, the vast majority of them do not but are happy to take advantage of heavily discounted or free services...*

- 3.62 The issue of charging for sessions at children's centres was raised by almost 250 people: most recognised that savings must be made and said they would be prepared to pay a reasonable amount towards the sessions they and their children attend in the interest of maintaining as much provision as possible. However, £9 was not considered a reasonable amount; in fact, it was described as a higher fee than that levied by many private companies and one that will deter many families from attending any sessions at all. Something in the region of £2 per session would, it was most commonly said, be more acceptable and feasible:

*I would sooner see a smaller donation being required for play sessions than no sessions at all*

*Charging reasonable fees for these elements at a little less than the commercial companies could allow access for those not considered vulnerable at a cost but remaining in locations which are easily accessible. In addition this would make the service available for those considered vulnerable again in accessible locations and still for free*

*£9 per session is too high. I would not be prepared to pay this. It is higher than specific classes in the private sector*

*I feel that asking £9 for a session is very expensive and will turn people away from activities that the children's centres may offer. Asking for a nominal amount would be fine but £9 for a single session isn't going to attract families to attend*

*It should be mandatory to pay to attend. Perhaps £2 a class...there is no way it should be as high as £9 as that is not good value for money*

*£9 a session is too steep, a couple of pounds would be more achievable. There would be very few attending at a high price. Especially on maternity pay!*

- 3.63 This is not to say that there was universal agreement with charging even a nominal fee for sessions at children's centres: a few respondents argued that this would result in the centres being accessible

only to wealthier families, and many others suggested that any charges should be means tested to avoid such a situation:

*The financial segregation promoted as a result of the idea to charge for courses is absolutely concerning. This is the quickest way to build barriers between the wealthy and those who continue to struggle on a weekly basis...these changes will be letting down so many children who have done nothing wrong but be born into an impoverished area and family*

*Please consider a discounted rate for families in financial hardship too i.e. an income related benefit*

*For a lot of families they just can't afford it. Why can't you say that families on benefits can get it free and those who can afford to pay, should pay?*

- 3.64 It should also be noted that some respondents criticised the organisation and running of certain sessions they have attended and felt that the current offer, if it is to be chargeable, must be improved to attract sufficient numbers of families:

*A few of the groups I have been to are a bit naff, but I don't mind because they are cheap. I pay a lot more for privately-run groups, but they are a lot better*

*If you are to charge families not in need for sessions such as baby massage/rhyme time you will need to ensure that these are well run, the admin is organised, communication with users is good otherwise families won't pay to use them and then it won't be worth you running them for the ones who don't have to pay.*

- 3.65 In terms of reducing the number of centres across Hampshire, while there was some understanding that change is both necessary and desirable, its proposed scale (from 54 to 11) was typically considered too extreme and potentially damaging to vulnerable families, as the following quotations – including suggested alternatives – demonstrate:

*I understand cuts have to be made, but to cut so dramatically will not decrease the number of families in need, in fact it may exacerbate the level of service they need*

*Reduce the number of centres less dramatically...keep one in two or three*

*I understand the need for reducing the number of centres, but 54 to 11 is just not viable. Surely if they are reduced by a third it can be reviewed again if further locations need to be removed...*

*Merge children's centre buildings so that only one building is eliminated in each area, but ensure that children's centre staff are still able to access community spaces to offer support to families in all areas*

*Maybe reducing the centre down by 50% per area and reducing the number of classes and sessions to help all children would help recover some of these costs?*

*I understand that some charges may be needed for some services to help with the saving and also that some centres may need to close. But I feel that if the reduction is too sharp then the suggested 'vulnerable' children this proposed plan is aiming to help will become more vulnerable.*

- 3.66 The importance of local access to children's centres – especially in rural and disadvantaged areas – was frequently noted. Respondents suggested that, without this, the most vulnerable families may find it difficult to access services at all due to transport difficulties:

*It is important to have locally accessible centres, ones that families can reach, so that as many as possible can obtain support and intervention as early as possible and avoid crisis situations wherever possible*

*What happens to the people who don't drive and can't afford [to travel] on a bus to get the support they need but also aren't classed vulnerable enough to have someone to come to their home?*

*What happens when a mother is in need and doesn't drive, how is she meant to get to a centre that might have originally been down the road but is now six miles away?!*

*If you are hoping to reach the typically hard-to-reach, you can't only have one centre per district. Those people who don't want to engage are not going to - possibly won't be able to - travel to these places, so you are actively making it harder for those people to get support*

*Public transport in Hampshire is still costly and not great, and is hugely difficult with prams/pushchairs and the additional 'goods' (nappies/milk etc.) needed for the longer journey. I fear many parents wouldn't bother, therefore missing out on vital services...there is also a higher risk of mums with postnatal depression not accessing services unless they are in the community*

*Perhaps in built up areas with good transport links you can consolidate some services, but rural and semi-rural locations where you have already decimated the public transport cannot have this vital service removed.*

- 3.67 Furthermore, a few responses implied the understanding that services would only be available at the hubs. These pointed out that outreach work will be essential in continuing to engage those families that may fall 'off the radar' without local and easy access to a Hub:

*If you are to centralise to 11 locations, you need to ensure that families can access the location they find the easiest to get to, not just the one their post code falls into. You will need to offer outreach sessions as my experience is that if it is too difficult for families in need to access support, they won't bother and travel is often used as an excuse*

*A lower number of hubs is okay only if staff travel out and visit other venues and places regularly as they do in Whitchurch*

*I disagree with one unit per 11 areas, unless this is just for central basing and services/groups/classes and general outreach still takes place within the community...*

- 3.68 Joint-working and combining as many elements of different services as possible was considered imperative by almost 50 respondents in terms of making efficiencies, avoiding duplication, offering better value for money and ensuring a better customer experience. As such, this was encouraged:

*Shared services (administration, reception/customer services) are usually beneficial where services are merged...*

*Children's centres have already established good links and partnerships with local health services, employments services, youth services, etc. so it makes sense for these various services to work together to help provide a better support service for families than currently proposed. This will take time to discuss and develop but would be much more worthwhile*

*Closer working together amongst agencies to avoid duplication and safe information sharing could all enable savings...without joined-up working many could fall between the net and circumstances which could be prevented are very likely to escalate out of control*

*Create a "joined up" service, possibly in conjunction with other stakeholders such as local school clusters, churches and charities...this would reduce any duplicated work the organisations may be carrying out, resources and ideas could be shared thus saving everyone money and a service that works better. In addition, these local organisations could implement 'mini FSS hubs' in the community which could signpost additional services and refer people on to the main hubs if required*

*More collaborative work. Initial outlay to improve systems and structures will lead to long-term gains as outcomes for families improve...children's services, mental health and adult services needs to be improved from within and all agencies working together in true collaboration.*

- <sup>3.69</sup> Other commonly suggested means of either making savings or generating revenue were to: raise income via room rental, fundraising events and selling off building and land assets; encourage donations (money or equipment for example) to centres; use alternative locations – such as schools, community centres, church halls and libraries – for service delivery; incorporate chargeable soft play activities (and/or a café) into centres; make more use of parental and other volunteers in running activities; and form partnerships with the voluntary sector and local businesses (and, in the case of the latter, seek sponsorship):

*I think a lot of money could be made by looking to maximise income generation by leasing out rooms in the building for groups like NCT, groups of parents looking for somewhere to meet, or for birthday parties*

*As the children's centres act as hubs in the centre of communities, I would find ways to further utilise them. Can libraries and children's centres merge? Can they be more open to the public? Open a café and play area or soft play to generate income and invite more people to use them? Profit from the café can be put back into the service...my suggestion is to see the children's centres as hubs....*

*Have one building/hub for all paperwork and staff to work out of but maybe rent rooms, church halls, WI halls in the local communities to hold the drop in sessions...*

*Use schools so that you are where your clients need to be. If you used them after school and on Saturdays you will save money*

*Train up parents and young people that have used services in the past as champions (voluntary work, unpaid) to help with staffing universal work. Yes training costs money, but after that they would be working voluntary saving you staff salaries. This is also peer work and good for better engagement with our future service users*

*Have volunteer run community services attached i.e. a coffee bar, craft businesses. Hold fund raising events. Have volunteer peer run services to reduce staff numbers. Have maintenance of buildings completed by service users. Explore the opportunities the communities using these centres can provide you*

*Use volunteers to run sessions. Mums themselves might be happy to do this where specialist training isn't required (e.g. baby massage)*

*I propose that you ask one of the charities currently providing services for families in Hampshire to do the job*

*Contact local businesses to see if there is any interest in them donating goods and services to the children's centres where, in return, the children's centres can promote/advertise their business to families in the area...*

*How about partnering or being sponsored by a coffee house, NCT, children's clothing stores, book stores, shoe shops, Argos, Asda, etc.? These sorts of companies would make a killing from all the parents coming and going, and could take over the overhead costs from the Council...*

3.70 Less commonly raised issues were that: council tax levels should be raised to allow services to be maintained; savings should be made through staffing reductions and offering services for fewer hours or on fewer days of the week (as opposed to closing centres); children's centre services should be better promoted and/or organised to encourage use and participation; HCC could consider focusing on the best-attended centres and activities and close others; the Council should use its financial reserves or relief fund to mitigate against the need for such large-scale changes; the service should be properly funded; and that more information on spending is required to make an informed decision. Some typical comments included the following:

*Maybe a slight raise in council tax to support universal families...*

*Reduce the number of activities provided and increase the charges, but keep them local*

*Cut back on the services offered but don't take things away entirely, such as the Stay and Play and school holiday one-off activities*

*Canvas parents and staff to look at what services are currently used best in which locations. This would allow for a reduction in the number of centres in areas where service uptake was lower but still allowing families access to services by having several centres in each area rather than one single centre*

*Publicise better, use social media, have centralised online booking, have microsites for each centre. Build better awareness and invest in staff. Perhaps if more information was made available, and made better for the sure start and parent support, they would be more effectively used. I didn't know what a sure start centre was when I had my daughter*

*Stop offering so many courses that people don't necessarily go to encourage others that would benefit families*

*Use reserves and prudential borrowing powers to fund in short term, using the time this buys the council to mount a countrywide campaign to demand a return to funding so a needs budget can be set.*

- 3.71 Finally, the following comments were made around the difficulties involved in accessing 'hard-to-reach' and transient families, as well as the lack of reference to support for disabled children within HCC's documentation:

*Even in 'healthy and wealthy' Hart District there is the problem of reaching families who need support due to high numbers of people moving to the area, including many new residents to the new developments as well as the service families who come and go on a regular basis and traveller and gypsy families*

*Having a disabled child, these proposed cuts worry me, as they seem to have been forgotten. Nowhere in the consultation does it mention how they will still access support...*

*Nothing in your whole document includes the needs of children who are disabled. None of the examples include a family with a child with a disability. There are many, many of these children who won't ever be involved with level 4 services, and they don't need to be. But here again they have remained invisible within your service plans, and you have not given any confidence that families with a disabled child will get access to the local services they need. The central offer in each area is a good idea but you have excluded some people either by omission or by intention. They will simply come to your expensive higher level service, therefore not a good use of council resources. Some people will find it hard to travel around to the main centres so definitely has to be sessions and meetings held in the remaining other centres. They can access activities that provide a short break, and it is great that this is still there. But while this is essential, and statutory under the short break regulation to provide a break from caring; this won't ever meet all the needs of families, they need this full range of support services too so that is on offer to everyone else. It looks like they are excluded and staff won't have any expertise at all to help them, what a shame*

*The consultation talks about 19-25 year olds with learning difficulties or disabilities, but this group don't get anything much at all now through youth support services. Please make it clear what will be on offer to them in this future scheme.*

- 3.72 While alternative ways of achieving the £8 million savings have been examined above using the code frame, some comments were particularly detailed or raised issues which did not occur frequently enough to appear in the code frame.
- 3.73 One comment in particular gave a detailed response regarding how school buildings could be used to deliver services.

*Buildings which are not on school grounds should be sold off. Schools should be in charge of the buildings on their site to run courses they need for their community, 0-11 on primary school age sites. Clear timetables should be published and accessed via social media i.e. Facebook. [...] there should be a pool of specialist trainers on a HCC database whose schools can book for these courses on rotational basis, keeping these at walking distance to schools enables people to attend, but also builds a local community who all look out for each other too. {...} these centres*

*can be used at weekends/school holidays too for activities, not just left locked up! There could be classes for craft for school children and parents to give a break from the home surroundings.*

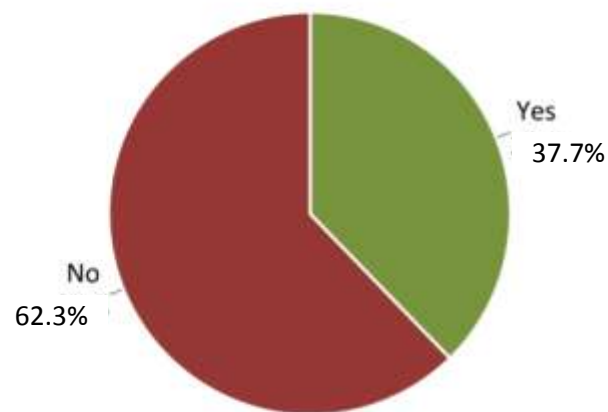
<sup>3.74</sup> Additionally, one respondent queried the focus on home visits, suggesting that it was a more effective use of time to host groups rather than visit families individually.

*1 person in a group of 15, or sending 1 person out to 15 houses? 1 hour per visit = 15 hours or 1 hour group meeting with 15 people.*

## Equalities

*Are there any positive or negative impacts relating to equalities that you believe that the County Council should take into account in the decision making process?*

**Figure 24: Impacts relating to equalities**



**Base: All Individuals (1912)**

<sup>3.75</sup> Almost two fifths of respondents (38%) believed that there were impacts relating to equalities that the council should take into account when making decisions about the consultation.

*Are you able to provide any supporting evidence and suggest any ways to reduce or remove any potential negative impact and increase any positive impact?*

- 3.76 The 38% of respondents who said that there were positive or negative impacts relating to equalities were then asked if they had any supporting evidence or suggestions to reduce negative impacts or increase positive impacts.
- 3.77 From the 341 respondents giving comments on perceived impacts on equalities, 711 separate comments were classified using a standardised code frame. Comments which did not relate to the question have been separated into an 'other/comments not relating to equalities' category.

**Figure 25: Impacts relating to equalities – coded responses**

Coded comment	% of respondents	Base
Proposals will negatively impact families/families with young children/pregnant women/new mums/young mums	29%	100
Proposals will negatively impact people with disabilities i.e. won't be able to travel far/mobility problems/affect people with mental health issues etc.	22%	75
Proposals will negatively impact people who are not classed as vulnerable/services should be universally accessible to all, not just vulnerable families	19%	65
Proposals will negatively impact people from disadvantaged families/families on low income i.e. won't be able to afford to travel far etc.	18%	62
Need local access/people won't be able to access the services	18%	62
Proposals will negatively impact people without access to personal transport/rely on public transport	14%	47
Proposals will negatively impact children/young people	12%	40
Disagree with any cuts/don't close any centres/maintain current provision	11%	38
Proposals will create a divide in communities/divide socio-economic groups	7%	25
Proposals will negatively impact vulnerable people/people most in need of help	6%	19
Proposals will negatively impact women (non-specific)	5%	18
Proposals will negatively impact social interaction/children's centres are a meeting place	5%	18
Proposals will negatively impact people in rural areas	2%	6
Proposals will negatively impact families from non-English speaking backgrounds/families with English as a second language	2%	6
Prevention is better than cure/early intervention is essential	1%	5
Proposals will negatively impact people from different religions	1%	4
Not qualified to answer this/have no information/this decision shouldn't be up to the public	1%	3
Proposals will negatively impact people from different races/ethnicities	1%	3
Proposals will negatively impact people under the Equality Act 2010 (non-specific)	1%	2
'Other/comments not relating to equalities'	8%	27

- 3.78 More than a quarter (29%) of responses related to potential negative effects that the proposals could have on families and families with young children in general, or expecting/new/young mothers specifically. Comments typically related to the prohibitive costs of accessing services for families, and the additional support needed by new parents.

*When on maternity leave you are on reduced wages, this puts a strain on family's finances. You should be able to access the support services and activities for free when you are on SMP.*

*All negative. This cut is huge and the families of Hampshire who can't afford to go places are the ones who suffer. This cut must mean people like me and my kids will suffer the most. The impact of this cut must make an impact on families like mine at the very least. Putting charges, etc. on clubs, like dads club would be a huge impact as most would have to close.*

*The people who access these centres and the support they provide are by definition quite vulnerable. New mothers with young babies need help and support[...] Having a welcoming children's centre on a drop in basis is the most effective way of reaching most people at a low level of need.*

- 3.79 More than a fifth of the responses (22%) concerned the possible negative impacts on people with disabilities. Some respondents questioned how those with mobility problems would travel to hubs, while others focussed on the impact of the changes to people with mental health issues.

*As a middle class, older mum who has had post-natal depression twice, I found great support from my local Children's Centre staff over the past 3 years. Sadly I fear that as on paper I would be classified as level 1, the proposed changes risk missing supporting mums who may have low level issues that could easily escalate into the bigger issues (basically, the current proposal seems more about cure than prevention!)*

*Disability - A significant number of children with special and additional needs will not receive apportion support and intervention for them to reach their potentials. Early intervention, family education and support will reduce funding needed for them later in life*

*Disabled parents are more likely to fall into low income families. They are also more likely to have higher travel costs. Therefore reducing the number of centres will increase the cost of accessing these services, and make it less likely they will access them.*

- 3.80 65 respondents used this opportunity to express that children not classified as vulnerable will be negatively impacted upon by the proposals, with many reiterating sentiments that services should be available on a universal basis.

*Universal access is the best way to be inclusive in any way. Allowing children to play together despite any of the above protected characteristics is the best way to teach the citizens of the future.*

*Your consultation documentation says this: "In recent years, the number of children and young people needing support in these two areas has increased significantly, mirroring the national position. Between 2011 and 2014, there was a 61% increase in the number of referrals to Hampshire children's social care; a 43% increase in the number of assessments undertaken; a 51% increase in the number of child protection plans; and a 17% increase in looked after children, especially those between the ages of 10 and 18." The children's centres have been*

*focussing on only the vulnerable for this time-so the vulnerable get greater in number when you are purely reactive. All young people are at risk if these changes are agreed without some thought into how EVERY CHILD MATTERS.*

*The integrated service as it stands is far better in creating an understanding society. If services are only provided to families with special needs they will feel singled out and everyone else will feel left out. This would create a gap and a barrier. Children that grow up around disability or people that are "different" turn out as more accepting individuals.*

- 3.81 Respondents also raised concerns about the impacts on people from 'disadvantaged families', such as families on low income who might not be able to afford to pay for non targeted services or to travel large distances to hubs.

*The children and families who will be affected by these changes are historically in the lower socio-economic groups, they will not be able to afford sessions costing £9.00. They will also experience difficulties travelling to hubs due to the infrequent and expensive public transport in some areas.*

*Expecting parents to pay for baby activity groups means only people on an adequate income could take advantage of this.*

*My daughter thoroughly loves attending the rhyme time sessions every Thursday-I'm currently on maternity pay and when I go back to work have to pay childcare costs to be able to help my husband provide for our family, therefore our income isn't great-I don't feel it would be fair for my daughter to miss out on doing activities that she loves [...] just because the service isn't provided to all children.*

*There would be negative impact on parents and children with disabilities who can't travel, those with no access to transport be it private or public and will restrict the poor*

*Closing children's centres would affect a lot of the more vulnerable children and families, those who do not need statutory interventions but who need support with various general aspects of parenting. A great number of parents in the lower wealth brackets can't afford to drive and bus fares are expensive so closing children's centres would preclude those whom the help is aimed at from accessing the support.*

## 4. Organisation Responses

### Overview

- 4.1 Of the 2,124 open consultation questionnaire responses, 112 indicated that they had been submitted on behalf of an organisation. Each response from an organisation typically represents the views of many individuals, and feedback from these organisations has therefore been reported separately in this report.
- 4.2 Organisations that responded were informed on the questionnaire that their views may be published in full, and were asked to provide further details about their organisation, including what the organisation represents, the specific group or department, the area the organisation covers and how the views of members were gathered. Not all organisations supplied this information, but the names of organisations have been included in the report where provided. Some organisations had multiple responses submitted on their behalf, and these have been reported together where applicable.
- 4.3 Results for the closed questions have been presented below to provide a contrast between views from organisations and individuals.

### Findings from Organisations

- 4.4 Compared to individual responses, there were notably higher levels of support among organisations for the proposal to combine the Early Help Hubs and children's centre services, and align with the Supporting Troubled Families Programme to create a single Family Support Service. Almost three fifths (57%) of organisations agreed with this proposal, in contrast to just a quarter (25%) of individuals.
- 4.5 A third of organisations (33%; 25% of individuals) agreed with the principle of prioritising support for the most vulnerable children, as opposed to offering services universally.
- 4.6 A fifth (20%; 13% of individuals) agreed with the proposal to reduce the number of buildings designated as children's centres from which to deliver the proposed Family Support Services.
- 4.7 More than a quarter of organisations (26%; 14% of individuals) agreed with the proposal to have one Family Support Service Hub per district, and 15% (12% of individuals) agreed with the proposed locations of these hubs.
- 4.8 Some of the more detailed responses from organisations have been summarised overleaf.

## Current use of services

- 4.9 When discussing the proposal for a new Family Support Service, many organisations made comments relating to the proposed targeting of support services. Basingstoke Children's Services, Eastleigh Central Partnership Board, Fareham and Gosport Wellbeing, Fareham and Gosport Solent NHS Trust, Day Care [Unspecific], Hampshire Children's Centre (PO15), Kindling Forest School Kindergarten, YMCA Fairthorne Group, Lee-on-the-Solent Infant School, Romsey School ASD Resource, Havant West Children's Centres, Lanterns Children's Centre Partnership Advisory Board, Bushy Leaze Children & Families Centre Partnership Advisory Board all pointed to the preventative role that children's services have with regards to less vulnerable families who could be at risk of developing more complex needs without early intervention or sufficient support provision. In particular, Fareham and Gosport Wellbeing emphasised the need for families to receive support before reaching crisis point to prevent escalation of mental health disorders.
- 4.10 It was suggested that universal services were key in providing early intervention to those who have not been identified as having more complex needs.

*We strongly believe that universal provision will ensure all stakeholders' needs are met. We have evidence that a number of our families who have not had access to L1/L2 support have become L3/L4 families.*

### **Lee-on-the-Solent Infant School**

- 4.11 Havant West Children's Centres credited the role of universal groups with identifying hidden vulnerabilities, and Keepsake Children's Centre (4Children) argued that universal services are able to identify the appropriate support that is needed, and that this may not be identified if families do not first engage with children's centres and attend associated activity groups. Indeed, a response on behalf of Waterside Children's Centre gave their experience of where universal services revealed previously undisclosed issues.

*There are many problems within families that attend children centres that are not initially identified and only become apparent when that family has gained your trust. I have run many baby massage courses that have had parents disclose [postnatal depression]. These two scenarios are frequent and I worry that these universal families will have nowhere to share their worries.*

### **Waterside Children's Centre, Hythe**

- 4.12 There were suggestions that the loss of universal services could cost the Council more by increasing the need for support elsewhere. The Health and Community Team (Eastleigh Council) and Alton Community Association Youth Services both suggested that universal support helps identify issues early on and prevents them from escalating, meaning that savings are made in the future. Lanterns Children's Centre Partnership Advisory Board expressed concerns that parents would have to reach a crisis point before receiving an intervention, increasing costs long-term.
- 4.13 Also concerned about the identification of vulnerabilities, Bushy Leaze Children and Families Centre (Full Governing Body) stated that feedback they had received from pre-schools and nurseries suggests they feel unqualified to identify or support those children and families at level 2 & 3, and that currently most children with Special Educational Needs are identified in Children's Centre toddler groups by trained staff.

- 4.14 While these responses indicated that the proposals could impact families who had not been identified as having more complex needs, some organisations suggested that the proposed changes to children’s services provision could also have negative consequences specifically to level 3 families. Andy Pandy Pre-School (Portchester Community Association), while supporting the prioritisation of more vulnerable families, suggested that specifically targeting them could result in stigma, a comment corroborated by HCC Children’s Services (SO31) who pointed out that the universalism of the current children’s centre provision made them a less stigmatising service to access, giving children the opportunity to integrate with a variety of other children. Southern Health NHS Foundation Trust – Andover Health Visiting Team also credited universal provision of children’s services with reducing stigma surrounding seeking support in general, and Bushy Leaze Children and Families Centre (Full Governing Body) stated that an ‘exclusive’ rather than ‘inclusive’ service would deter families from seeking help. They also suggested that level 1 and 2 families served as ‘role models’ for level 3 families.

*We believe that returning to an outdated model based on a limited number of targeted initiatives, restricted to those families facing the most severe problems will be stigmatizing for those involved and divisive for communities.*

#### **Haven Nursery School and Children's Centre**

*Having children's centres accessible to all families prevents them being viewed as a stigmatising place to go. People feel comfortable accessing their support and are exposed to a breadth of information. Many families without unmet needs are using these services which actually prevent unmet needs occurring. It also enables children to integrate with a wide variety of others.*

#### **Hampshire Children's Services (SO31)**

- 4.15 There were also concerns raised over the quality of the service provided due to the range of ages for which the service would be available. Haven Nursery School and Children's Centre stated that combining the Early Help Hubs and Troubled Families Programme with children’s centre services would result in a ‘diluted’ service for children aged 0-5.

*There is a vague reference to families with lower levels of need being ‘signposted to other community services’. This raises the question - who will provide these services and how will the level of funding be determined? A service for families with children aged 0 – 25 requires a staff team with a broad range of knowledge and skills. Working with a child of 18 months requires a very different skill set to working with a young adult of 18 years. Will the staffing structure for the proposed service provide the necessary skill mix?*

#### **Haven Nursery School and Children's Centre**

*I am concerned about the level of expertise that would be available in a 0-19 hub. Would experts in each age group always be on hand?*

**Kings Worthy Church Worker**

- 4.16 However, Spotlight UK, while raising concerns over the impact of the changes on early intervention, showed some support for a more joined-up service, and indeed Queen Mary's College stated that they agreed with the idea of the Family Support Service, but had chosen to disagree in the consultation due to doubts regarding who would provide universal services.

*Having more hubs which work with the whole family (with children aged 0-19) is far more practical so that parents can get help in one place instead of getting support for under 5, then having to go to another agency for children 5-16 year old and another agency if they also have a young person 16-19 year old. The families we work with prefer not too many agencies involved with them when they are in a vulnerable state especially if a parent has mental health issues including depression and anxiety.*

#### **Spotlight UK**

- 4.17 Changes to the availability of drop-in centres also featured among responses from some organisations. Lymington URC highlighted a demand for drop in centre use, particularly in the Lymington and Pennington area, and The Alresford Surgery also expressed concerns over the future of drop-in clinics, stating that the needs of families often only become apparent through unstructured and unplanned contact.

*We also understand there would not be a drop in service at the Hub but feel that families would feel more supported if they could access somewhere in a moment of need and this would be better suited to a more central location.*

#### **Lanterns Children's Centre Partnership Advisory Board**

- 4.18 Finally, Gosport Children's Centres added considerations regarding venue hire for the delivery of services, including hiring costs for the buildings, the availability of premises for hire and taking into account any health and safety considerations.

## Proposed Locations

- 4.19 When considering the proposed locations of the Family Support Service Hubs, organisations typically raised objections involving access to services generally as well as issues that were specific to local areas or hubs.
- 4.20 The most prevalent concerns organisations had with the proposed locations of the hubs related to impacts on access due to travel distances. Some organisations raised geographical considerations about Hampshire generally, including the size of the county and districts. Hampshire Unison described Hampshire as one of the largest counties in the UK, and queried how 11 hubs would be accessible to all residents across Hampshire. Andover Crisis and Support centre was concerned that hubs covering such large areas would cause provision to become stretched.

*Location is necessarily more of a problem for vulnerable families than professionals. Hampshire is also a very diverse county so it is essential that access does not become a further obstacle to some families' reticence to access support and resources.*

### **Noadswood School**

- 4.21 This was closely linked with concerns over rurality of communities and Hampshire's public transport system. Eastleigh Central Partnership Board, Southern Health NHS Foundation Trust - Health Visiting Team (GU14), Bushy Leaze Children & Families Centre (Partnership Advisory Board), Yateley Town Council, RAF Odiham Community Support Team, Havant West's Children's Centres, Gosport Opportunity Group, Lanterns Nursery School and Children's Centre and Cherrywood Community Childcare all made comments pertaining to inadequate public transport provision to allow communities to easily access the proposed Family Support Hubs. In particular, Bushy Leaze Children & Families Centre (Partnership Advisory Board) described rurality and poor transport links as a barrier to accessing services, and Norden Community Association expressed concerns over the perceived costs and impracticalities of putting children and vulnerable families onto buses for lengthy journeys to take them to Family Support Hubs.

*By only having one Family Support Service Hub within each location a large number of families, including those who are most vulnerable, will be unable or find it extremely difficult to access services due to distance to travel including time and financial impact (e.g. reliant on or no direct public transport, cost of travel, cost of services). [A] major problem is that those families who are vulnerable but do not meet thresholds will be affected most.*

### **Southern Health NHS Foundation Trust - Health Visiting Team (GU14)**

- 4.22 For those with access to personal transport, Cherrywood Community Childcare raised concerns over limited parking at Park Primary School. Waterside Children's Centre had similar considerations of Cadland, Havant West Children's Centres about Sharps Copse and Wickham Church of England Primary School also raised this as a concern.

*Parking at Cadland is dire and new hub staff will not get parked as most spaces go to the school staff, plus parking in streets nearby outrages the public*

### **Waterside Children's Centre**

- 4.23 Issues which were specific to certain hubs ranged considerably. Yateley Town Council put forward the opinion that the ability of people living in Yateley, Darby Green and Frogmore to access a children's centre in Hart would be greatly reduced in part because of the lack of public transport. RAF Odiham Community Support team cited the limited public transport from the area and the reliance of families in the military community on the current local provision of children's centres.
- 4.24 Spotlight UK was more positive about the proposed hub in Basingstoke, but still raised concerns similar to those mentioned by other organisations and individuals around the ability of vulnerable/deprived families and those without transport to access hubs.

*The location of the hub suggested in Basingstoke is great as it is in one the most deprived parts of Basingstoke so would reach a number of vulnerable families however by taking away centres from other parts of Basingstoke would mean a large number of other vulnerable families from other deprived parts of Basingstoke would become isolated and be unable to access support due to financial restraints*

#### **Spotlight UK**

- 4.25 In addition to considering travel difficulties for families accessing Children's services, Bushy Leaze Children and Families Centre (Full Governing Body) raised the issue of travelling in relation to outreach workers, stating that travel time and distances would limit their time to deliver services. This topic was also raised by Lanterns Nursery School and Children's Centre (Senior Leadership Team), who queried whether the limited number of outreach teams would have to travel between hubs, and raised concerns over the travel expenses involved in this. YMCA Fairthorne Group also commented on the role of outreach teams, mentioning that they will have to have high visibility in order to reach families in need.

*There are only eight teams of staff for 11 Hubs. Will they be travelling between hubs? There is likely to be an increase in travel claims from staff travelling to and from centres and to family homes or outreach venues. Staff based in Wickham will have large travel expenses as it is a distance from the centre of Winchester.*

#### **Lanterns Nursery School and Children's Centre (Senior Leadership Team)**

## Equalities

- 4.26 Organisations raised a number of issues regarding equalities, many of which that were in-line with those mentioned by individuals.
- 4.27 Most commonly, organisations cited concerns regarding access to services for ‘vulnerable families’. Basingstoke Children’s Services (Early Help Hub), South Farnborough Infant School, Southern Health NHS Foundation Trust – Andover Health Visiting Team, and the Test Valley Borough Council Housing Service focussed specifically on travel issues for vulnerable families, highlighting problems with public transport and difficulties in accessing non-local centres without personal transport. Spotlight UK pointed out that although the proposals intend to target the most vulnerable families, cutting venues would affect the ability of more deprived families to access services if they could not afford to travel. Basingstoke Children’s Services raised concerns that the combined cost of travel and parenting group activities would exclude families and young people from equal access to services and lead to safeguarding concerns for children who would not have the opportunity to be seen by professionals. The Test Valley Borough Council Housing Service also identified transport cost as a potential barrier to accessing services for lower income families living in rural areas.
- 4.28 Fareham and Gosport Wellbeing, Havant East Children's Centres (Action for Children), Havant Sixth Form College, and Southern Health NHS Foundation Trust - Andover Health Visiting Team all raised concerns over the provision for issues relating to mental health. Havant East Children’s Centres (Action for Children) queried how those with mental health issues will be identified and enabled to access the service, stating that access to community groups will be vital to build rapport in the community, and that time needs to be given to build relationships with families for them to access groups/courses. Havant Sixth Form College identified an increase in students they are seeing with significant mental health issues, and Fareham and Gosport Wellbeing stressed the limited services available for young people with mental health issues and the importance of early intervention.

*We are seeing increasing numbers of young people suffering distress with mental health issues and support is already limited. It is essential to develop and maintain a service that addresses this at the earliest possible stage.*

### **Fareham and Gosport Wellbeing**

- 4.29 A number of organisations raised considerations on the impact of the proposals on women. Kindling Forest School Kindergarten felt that the proposals would disproportionately affect women, being the main users of Children’s Centres and related services. Havant East Children's Centres (Action for Children) and the Primary School that responded from the rural Winchester area cited concerns about increases in travel distances for pregnant women, and Hampshire Unison put forward the impact on low paid women and single parent families.

## Further Comments

- 4.30 RAF Odiham Community Support Team were particularly concerned with military families living in Hampshire, who they believed could benefit considerably from children's centre services due to their 'transient nature'. They described themselves as an organisation that currently offers a satellite venue for children's centre workers to work from as well as providing resources to enable that work to take place, and suggested that partnerships could be formed with local organisations to use existing facilities for Family Support Workers to operate and continue providing services.

*Keep the Children's Centre Family Support Workers or at least one locally and work in partnership with local organisations to use the facilities and resources that are available and already in place. Consider selling the remaining buildings so there is still a 'virtual' Children's Centre but without the infrastructure and physical building. We do not doubt the value of the Family Support Workers that work alongside professionals and families here at RAF Odiham and feel the loss of these workers would be huge to those engaging with them. The families that are being supported and have in the past been supported by the Family Support Workers have fully engaged and embraced the work, the staff are incredibly knowledgeable and tailor their responses to the needs of the children and their carers, the workers have also worked in partnership with the Community Support Team based here and created new initiatives for those impacted by the effects of military life, this is ongoing and is hugely successful.*

### **RAF Odiham Community Support Team**

- 4.31 Rural Areas Play Project (RAPP) suggested that even small amounts of funding, especially around holiday periods, to existing play schemes could assist in supplementing services.

*The Rural Areas Play Project (RAPP) has seen a significant rise in younger children & toddlers attending in the past year as there have been cut backs in Children's Centre's provision. RAPP use to receive some funding from HCC towards its costs but that was cut, but with minimal funding allocated to a mobile project as this one then we can go a long way towards helping fill the gaps especially in East Hampshire.*

### **Rural Areas Play Project (RAPP)**

- 4.32 South Farnborough Infant School suggested that existing children's centres might be retained if re-located to community buildings to save on rent. Starlings Preschool even offered to extend their services to accommodate children in the event that Buttercups Children's Centres no longer offered services.

*If the Buttercups children centre was no longer being used for this purpose Starlings would like to extend the preschool to accommodate the children already attending's needs. The room would be used to encourage speech and language in a smaller quieter area, English additional language support, and more able groups. Depending on costs and our budget we would like to add an additional 8 children in the am sessions and 8 children in the pm sessions. This will give spaces to more of the children already waiting on our waiting list and will also provide job opportunities as the area will need two more staff to safeguard the children.*

### **Starlings Preschool**

- 4.33 Views were expressed in particular around services for very young children. Both Haven Nursery School and Children's Centre and Gosport Children's Centre made reference to what was described as government strategy and research of the '1001 Critical Days' in respect to a reduction in support to families with young children. Yellow Brick Road Projects suggested that universal services should be continued for children aged 0-2, and suggested that family support could otherwise be reduced to term-time only to make savings.
- 4.34 Among the responses were a number of suggestions for alternative venues from which to deliver services to save money. The Hart District Councillor responding to the consultation suggested Hart District Council Civic centre or Harlington Library as potential venues, in addition to suggesting that a longer term community hub building might be needed in new housing developments such as the proposed development in Winchfield. There were further suggestions for relocating services generally to buildings with other uses such as doctor's surgeries, schools or community centres from South Farnborough Infant School.
- 4.35 Other suggestions included forming greater partnerships with commercial companies (such as 'Pampers') or the NHS to deliver and fund services, or tendering out services to organisations that are able to apply for funding streams that might not be available to Hampshire County Council.
- 4.36 Yateley Town Council also suggested that there was a risk that the Department for Education might ask for their previous investment in services given to Hampshire County Council to be returned. They suggested that a proportion of the savings made should be devolved to local partners to enable them to meet local need, and offered to assist in the co-ordination of this if Hampshire County Council did so.

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## 6. Appendix

### Organisations Responding to the Consultation

Organisations responding to the consultation	
A school in Rushmoor (GU14) [Unspecified]	Local Secondary School (RG24) [Unspecified]
Alton Community Association Youth Services	Lymington URC
Andover Childminders Association	Maple Ridge Primary School
Andover Crisis & Support Centre	Nature Trails Day Nursery
Andy Pandy Pre-School, Portchester Community Association	Norden Community Association
Basingstoke & Deane Borough Council	Oakwood Infant School
Basingstoke Children's Services, Early Help Hub	Overton Parish Council
Belle Vue Infant School and Newport Junior School	Padnell Pre-School
Binsted CE Primary School	Pre-school Nursery (GU34)
Bushy Leaze Children & Families Centre, Partnership Advisory Board	Primary School - Rural Winchester area
Bushy Leaze Children and Families Centre (Full Governing Body)	Queen Mary's College, Basingstoke
Bushy Leaze Early Years Centre	RAF Odiham, Community Support Team.
Cherrywood Community Childcare	Registered child-minders (Tuesdays and Wednesdays group)
Cherrywood Community Primary School	Romsey School ASD Resource
Clanfield Junior School (Governing Body)	Romsey Youth Council
Day Care [Unspecific]	Rooksdown Community Association
Eastleigh Central Partnership Board.	Rural Areas Play Project (RAPP)
Education Noadswood School	Rushmoor Voluntary Services
Fareham and Gosport Wellbeing	'Services for Young Children' [Unspecific]
Fareham and Gosport, Solent NHS trust	South Farnborough Infant School
Fernhill Primary School	South Farnborough Junior School
GosConCen	Southern Domestic Abuse Service (GU14)
Gosport Children's Centres	Southern Domestic Abuse Service (PO9)
Gosport Opportunity Group	Southern Health Foundation Trust Health Visitor
Hampshire Children's Centre (PO15)	Southern Health NHS Foundation Trust - Farnborough Health Visiting Team
Hampshire Children's Services (SO31)	Southern Health NHS Foundation Trust - Andover Health Visiting Team
Hampshire Unison	Southern Health NHS Foundation Trust - Children and Family Services
Hart District Council Councillor, representing residents in Fleet West	Southern Health NHS Foundation Trust - Health Visiting Team (GU14)
Hart Local Children's Partnership (Hart Voluntary Action)	Spotlight UK, Popley

Hatch Warren Under Fives Preschool	St. James' Primary School, Emsworth,
Hatch Warren Under Fives Preschool (?)	Starlings Preschool
Havant East Children's Centres (Action For Children)	Stokewood Surgery.
Havant Sixth Form College	Sun Hill Junior School
Havant West Children's centres,	Sunbeams Children's Centre, Alresford
Haven Nursery School and Children's Centre	Sure start centre , Bordon
Health and Community Team (Eastleigh Council)	The Alresford Surgery
Health Visiting	The Arnewood Practice
Home-Start Rushmoor & Hart	The Kings Arms Youth Centre
Home-Start Winchester and Districts	Turtle Tots Southampton
Housing Service, Test Valley Borough Council.	Waterside Children's Centre, Hythe
Hythe and Dibden Parish Council	Wickham Church of England Primary School
Keepsake Children's Centre. 4Children.	Wilson Practice, Alton
Kindling Forest School Kindergarten	Winchester area Partnership Advisory Board
Kings Worthy Church Worker	Yateley School
Lanterns Children's Centre (Partnership Advisory Board)	Yateley Town Council
Lanterns Children's Centre	Yellow Brick Road Projects
Lanterns Nursery School and Children's Centre (Senior Leadership Team)	YMCA Fairthorne Group
Lee-on-the-Solent Infant School	[Unspecific Organisation] Works with vulnerable families
Little Elves Community Pre School	[Unspecific Organisation] Works with vulnerable families