

HAMPSHIRE COUNTY COUNCIL

Decision Report

Decision Maker:	Executive Lead Member For Children's Services
Date:	1 July 2016
Title:	Proposed Family Support Service
Reference:	7497
Report From:	Director of Children's Services

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1 Executive Summary

- 1.1 The purpose of this report is to make recommendations and seek approval from the Executive Lead Member for Children's Services regarding the future of Hampshire County Council's early help services, including the proposed closure of designated children's centres.
- 1.2 This report seeks to summarise what is meant by early help and to set out the contextual position in relation to the current and proposed future early help services delivered by Hampshire County Council.
- 1.3 Public and staff consultations have been conducted on proposals for bringing Early Help Hubs, children's centres and youth support services into a single Family Support Service (FSS), to align with the Supporting Troubled Families Programme (STFP).
- 1.4 The methodology and findings from both the public consultation and staff consultation are summarised and the responses to these consultations are set out within the report.
- 1.5 An Equalities Impact assessment has been undertaken, and the legal and financial implications are included in the report.
- 1.6 The report makes three recommendations for the Executive Lead Member for Children's Services to consider.

1.7 Summary of recommendations

Having considered the contents of this report and the attached appendices, the Executive Lead Member is asked to consider the following recommendations.

- **Recommendation 1** – That the Executive Lead Member for Children's Services considers the outcome of the public consultation, staff and union consultation, any

additional responses received outside the consultation period and the petitions submitted, as detailed in this report.

- **Recommendation 2** – That the Executive Lead Member for Children’s Services agrees to the proposal to develop a new integrated Family Support Service for families with children aged 0–19 years (up to 25 for young adults with learning difficulties and/or disabilities), as set out in this report, having regard to the necessary human resource implications and particularly the restructuring and reduction in the workforce.
- **Recommendation 3** – That the Executive Lead Member for Children’s Services, having taken account of the responses to the consultation and the Equality Impact Assessment, agrees to reduce the number of designated children’s centres from 54 to 11, by closing buildings listed in **Appendix 5**.

2 Contextual Information

2.1 Definition of early help.

- 2.1.1 Early help is defined as the identification of needs within vulnerable families at an early stage and providing support and intervention before problems become complex and more intractable, thus requiring statutory intervention from children’s social care services. Early help can mean intervening ‘early’ in terms of the age of a child, or intervening ‘early’ after the emergence of a particular need arising at any age in the life of a child from pre-birth to 19 years (or up to 25 for young adults with learning difficulties and/or disabilities).
- 2.1.2 An early response to an arising need can be more effective for the child and family and a more efficient way of delivering services. As Professor Eileen Munro highlighted in her review of child protection, ‘preventative services can do more to reduce abuse and neglect than reactive services.’¹ It is preferable to provide an intense, focused intervention when problems first emerge, rather than delivering a potentially more costly and intrusive statutory intervention when needs and risks have escalated. Since the mid 2000s, an approach termed ‘progressive universalism’ has been applied to some national policies including the development of children’s centres. In essence, this policy seeks to reach the most vulnerable through services that are accessible to all, or universal. Increasingly, this is a model that is becoming difficult to sustain in a climate of financial reductions. An alternative model requires effectively targeting services where and for whom they are most needed, in order to reduce or prevent specific problems from getting worse and becoming deep seated or entrenched. The ultimate aim of such targeted early help services remains that of reducing the demands upon specialist and higher level services, thus enabling these services to be deployed where they are most needed.

2.2 Hampshire’s current early help offer

- 2.2.1 In Hampshire, early help is offered by a range of services and agencies. This includes public health nursing, child and adolescent mental health services (CAMHS), maternity services, pre-schools, schools and colleges, the voluntary sector, nurseries and some aspects of Adult Services, particularly in relation to domestic abuse, mental health and substance misuse. These services are co-ordinated through Early Help Hubs which have a range of early help practitioners

employed by the County Council. Hampshire County Council's early help offer also currently includes children's centres and the Supporting Troubled Families Programme (STFP).

- 2.2.2 In line with the requirements of the statutory guidance, Working Together to Safeguard Children (2013), Hampshire developed a 'threshold of need' chart which was agreed by the Children's Trust, Hampshire Safeguarding Children's Board. This was revised in line with the requirements of Working Together to Safeguard Children (2015). The threshold of need chart helps multi-agency practitioners identify and understand the levels of need being experienced by families, so that practitioners can respond accordingly. This is a practitioner tool to help with ensuring that the most appropriate support is delivered to families when it is needed. It can be difficult to differentiate 'wants' from 'need' but Ofsted define early help as being required for "those children and young people at risk of harm (but who have not yet reached the "significant harm" threshold and for whom a preventative service would reduce the likelihood of that risk or harm escalating)..".
- 2.2.3 The threshold of need chart therefore identifies 4 levels of need:
- Level 1 (universal) – all families and children where there are no specific needs;
 - Level 2 (early help) – families where there is a need for support, but this can be met within a specific setting e.g. pre-school or school and by one single service or agency, i.e. a speech and language therapist providing advice and help;
 - Level 3 (targeted early help for vulnerable families) – families and children with more needs requiring more than one service or agency to be involved; and
 - Level 4 (children's social care) – families and children with a high level of unmet and complex needs and meeting the threshold for children's social care intervention.
- 2.2.4 Effective early help relies on services working closely together in order to support families when this is required. Statutory children's social care services should only become directly involved when children and families have the most complicated needs and problems, resulting in unmet needs and risks to children.
- 2.2.5 There are currently ten multi-agency Early Help Hubs covering the eleven districts in Hampshire (Hart and Rushmoor are combined) and these have been incrementally rolled out across Hampshire since January 2014. The Early Help Hubs offer a co-ordinated multi-agency response to vulnerable families at level 3 with children aged 0-19 (up to 25 for young adults with learning difficulties and/or disabilities). The Early Help Hubs also offer advice and guidance to professionals supporting families with children who have level 2 needs.
- 2.2.6 Approximately 1,000 families (2,200 children) at any one time are receiving a level 3 range of interventions via the Early Help Hubs. Approximately 50% of these children will have 'stepped down' from statutory children's social care interventions at level 4 (following completion of specialist work and reduction of risk) and 50% will have 'stepped up' from level 2 via schools and the community, as risks and increasing needs are identified. Approximately 10% of those families identify as having one or

more children with a disability/SEN, but do not meet the threshold for statutory intervention.

- 2.2.7 There are currently 54 designated children’s centres in Hampshire. Of these 51 are managed by two external voluntary sector providers and operate in fifteen clusters. There are also three standalone centres linked to the clusters but managed by local maintained nursery schools. There are approximately 2,000 families with needs at levels 2 – 4 who are accessing children’s centre services at any one time. There are also families accessing services at level 1. These services are delivered by approximately 145 family support and play workers. Some of these families may also be included in the 1,000 families receiving support from the Early Help Hubs, as highlighted in 2.2.6.
- 2.2.8 Children’s centres are a fundamental part of the early help offer but also have their own statutory status. The guidance for children’s centres applies to health and Jobcentre Plus as well as local authorities and services must be delivered in partnership with them. The measure of how well the local authority is meeting its statutory duties in relation to children’s centres is assessed through the OFSTED inspection framework for children’s centres.² The core purpose of children’s centres is to improve outcomes for young children aged 0 – 4 and their families, in order to help reduce inequalities between those families in greatest need and their peers in relation to:
- child development and school readiness;
 - parenting aspirations, self-esteem and skills; and
 - child and family health and life chances.
- 2.2.9 Children’s centres were rolled out in Hampshire in three phases. In phase 1 (2004 – 2006) there were seven children’s centres designated in the most deprived areas in Hampshire. In phase 2 (2006 – 2008) a further 53 were designated, followed by phase 3 (2008 – 2010), where a further 23 were designated in the most advantaged areas of Hampshire, bringing the total number of children’s centres in 2010 to 83. This meant that there were children’s centre services provided across the whole of Hampshire. The requirements of children’s centres during this time were very specific, determined by central government and with little opportunity for flexibility. However, the guidance was updated and has subsequently become much less prescriptive. This allowed local authorities to take a more flexible approach, whilst ensuring that statutory requirements were met. Between 2010 and 2012, a number of individual children’s centres in Hampshire were merged, resulting in a reduction from 83 to 54 designated centres.
- 2.2.10 The Supporting Troubled Families Programme (STFP) is a Government initiative which predominantly offers targeted support to families identified as having level 3 needs and who meet the Government criteria. There are six family issues defined under phase 2 of the programme and families have to meet at least two of them in order to qualify for support. These are poor school attendance or exclusions, anti-social behaviour or crime, families with unemployment or at risk of financial exclusion, domestic abuse and families with health problems.
- 2.2.11 The STFP is also part of Hampshire’s early help offer and at the current time support from this programme can be accessed via the Early Help Hubs, or directly via

Supporting Troubled Families Senior Responsible Officers (SROs). There are ten SROs in Hampshire, one in each district, (with Rushmoor and Hart combined). In phase 2 of the STFP (2015-2020), the current Government requirement is to identify 5,560 families within Hampshire over the next four years for targeted support. Some of these families will receive support from the Intensive Support Service commissioned within this programme and support for the remainder is coordinated by the ten SROs and local coordination groups (multi-agency meetings), with each family having a family plan. The District and Borough Councils are key partners. In some areas, early help hub meetings perform the role of the STFP local coordination groups.

2.2.12 The current total combined budget for early help services is £14.4million, plus a Government grant of around £2 million for the STFP. The Government grant specifically for the STFP does not form part of the savings proposals that are outlined in this report.

2.3 The proposed Family Support Service (FSS) model

- 2.3.1 In 2015, the County Council undertook a countywide consultation (Shaping Hampshire Spending Review: www3.hants.gov.uk/budget/spendingreviewsurvey.htm) with residents to seek views on options for managing the anticipated £98 million shortfall between its projected income and expenditure, by April 2017. Along with the other departments, Children's Services were asked to achieve a share of the shortfall, which represents £21.5 million, or a 14% reduction in the departmental budget. The consultation indicated that for savings in Children's Services, the majority of residents and stakeholders opposed reducing spend on services for children, older people and vulnerable people because these were rated as being the most important services to protect. Instead, respondents gave a preference that the County Council should focus on making savings by seeking efficiencies and making overall delivery more effective.
- 2.3.2 The above feedback from the 2015 consultation informed the development of a proposal to deliver £8.5 million of savings by combining children's centres, Early Help Hubs and the youth support budgets (which would include a previously agreed target saving of £1 million from youth support services) into a single Family Support Service targeted at the most vulnerable families. This proposal went before the Executive Lead Member for Children's Services on 16 September 2015 and was agreed by Cabinet on 5 October 2015, with a requirement that there would be further public consultation on any proposed model, including any proposed closure of children's centres.
- 2.3.3 The need to make savings has provided Hampshire County Council with an opportunity to review the work of the children's centres and Early Help Hubs (including youth support services) and to consider whether there are more efficient and effective ways of delivering early help services to those vulnerable families who most need it. One of the key considerations of this review has been how Hampshire County Council and its partners, e.g. health and the voluntary sector, can offer a more flexible, responsive and coordinated service that provides help to families who have additional needs, where and when this is required. With this in mind, it is proposed that these services could be brought together to become one complete, holistic, integrated service, providing support to vulnerable children and young people aged 0-19 (or age 25 where young adults have learning difficulties and/or disabilities)

and their families and aligned closely with the STFP. By targeting these services at those families and children with multiple needs who require the involvement of more than one agency (categorised at level 3 of the threshold of need), as well as providing some services for families in level 2 priority groups, (e.g. teenage parents, service families); the proposed Family Support Service (FSS) would be operated from fewer designated children's centre buildings, requiring a lower level of staffing and a more streamlined management structure, all of which would contribute towards delivering the proposed savings.

2.3.4 The proposed FSS would aim to enable children at risk of poor outcomes to achieve educationally, socially and physically by supporting parents and carers to build their skills and resilience. By enabling parents to more effectively meet their children's developmental needs and by offering support as needs arise, difficulties can be prevented from escalating into something more complex, requiring statutory intervention.

2.3.5 The key principles of the proposed FSS would be to:

- provide a single approach to supporting vulnerable families with targeted early help across the 0-19 age range at level 3 (or up to 25 years for young adults with learning difficulties and/or disabilities).
- work with families to avoid an escalation into children's social care, when this is possible or appropriate (level 4);
- provide a clear process for 'step up' and 'step down' across the levels of need, so that families do not become 'stuck' at particular levels and can receive the right levels of support, at the right time, without unnecessary state intrusion;
- work with families' strengths to develop skills and confidence;
- provide some support for children (level 2) aged 0-5 to meet statutory duties as attached in section 7;
- provide targeted youth support services as part of the FSS model by coordinating in-house and commissioned provision;
- provide professional supervision and training for all early help/family support service delivery staff in order to ensure the highest quality of service provision; and
- provide integrated strategic management of the full range of early help services.

2.3.6 The proposed FSS model would be set against a backdrop of:

- an enlarged health visiting service delivering support to families with young children, including five mandatory contacts for all children under five and support for families where additional support with child development is identified. For 2016/17 the budget for the health visiting service and family nurse partnership service is approximately £17m. The health visitor workforce has increased by 95% in Hampshire since 2012. There were 121.6 full time equivalent posts (fte) in March 2012 and 237.82 fte in March 2016, representing an increase of 116. Such services will now be commissioned by Hampshire County Council via its Public Health service allowing for much greater synergies than hitherto, **(see Appendix 1 for description of support offered by the health visiting service);**

- the offer of free early years education for eligible two year olds became a statutory requirement in September 2014. The budget available for this in 2016-17 is now £6.8m;
- the introduction of the early years pupil premium (in April 2015) to support three and four year old children in early years education who may need additional resources and the development of a range of community services. The funding available for this in 2016-17 is now £667,000;
- the extension of the free early years entitlement from 15-30 hours for most working families
- a range of alternative, non-Hampshire County Council services, delivered through, for example, community groups and designed to provide support to those families at levels 1 and 2 of the threshold of need (see Appendix 2 for details of the wide range of such services that would continue to be available).

2.3.7 It is considered that in-house delivery of the FSS, with all staff being multi-skilled and able to offer individual and group activities, would allow for the greatest flexibility both within and across service areas. Whilst consideration was given to contracting out services or, for example, a proportion of the FSS activity at level 2 (circa £350,000), this would result in less flexibility to respond to changing community needs, due to contractual arrangements. Given the reduced resources and the impact this may have on the ability to flexibly target those most in need, it has therefore been rejected as part of the proposals at this stage.

Staffing

2.3.8 The proposed Family Support Service (FSS) model would have significant human resource and staffing implications, as follows:

- Redundancies arising from a reduced workforce of up to 60% of all the staff group in scope. There are approximately 272 full time equivalent (fte) staff in scope, 127 fte roles in the proposed new structure and as a result up to 145 fte potential redundancies.
- Insourcing of children's centre provision, as part of the proposed new FSS; specifically the TUPE transfer of staff from current external providers to Hampshire County Council (up to approximately 183 fte). TUPE regulations would apply to the Action For Children and 4Children staff, as all other staff in scope of the review are already employed by Hampshire County Council,
- In addition, there are also potential changes to work bases, working hours, pension arrangements and terms and conditions arising from the proposal.

2.3.9 All possible steps would be taken to minimise compulsory redundancies arising from the proposed service change. With this in mind, it is proposed to offer enhanced voluntary redundancy (EVR), on Hampshire County Council EVR2 terms, to eligible staff in scope of this proposed service change. A consistent offer of voluntary redundancy across all staff is considered necessary in order to secure the appropriate balance of skills and experience within the future workforce, treat staff

equitably and minimise the requirement for compulsory redundancy. There would be no obligation upon current external children centre providers to reduce staffing prior to transfer. Under TUPE Regulations external (non-Hampshire County Council) staff in scope would transfer into the new service and the County Council would be liable for the cost of staff reductions. To avoid the unnecessary TUPE transfer of staff who are accepted for voluntary redundancy, it is proposed that staff would be allowed to leave on grounds of voluntary redundancy prior to transfer. In order to effect this, Hampshire County Council proposes to fund the cost of voluntary redundancy for eligible staff, because these costs would ultimately fall to the Council in any event, post transfer. As well as minimising disruption for staff and providing a structured exit process to ensure service continuity, this approach would provide a more efficient and cost effective process for change.

Buildings

- 2.3.10 It is proposed that the number of designated children's centres is reduced from 54 to a core minimum of 11 (one per Hampshire district). A designated children's centre is one which is managed by, on behalf of, or under arrangements with the local authority, with a view to securing that early childhood services in the local authority's area are made available in an integrated way; through which early childhood services are made available (either by providing the services on-site, or by providing advice and assistance on gaining access to services elsewhere); and at which activities for young children are provided'.³
- 2.3.11 The 11 remaining buildings would act as the proposed Family Support Service Hubs (one in each Hampshire district) and also as designated children's centres in each district. These FSS Hubs would be used as service delivery sites and office bases for the FSS staff. It is important to note that services would be delivered from a variety of service delivery sites across districts and not just from each hub building. The needs of families are not static and often fluctuate over time and the needs of families within a district are also often varied. It is therefore essential that the proposed FSS model is able to respond to these needs in a more flexible way, rather than being confined to a particular building. It is acknowledged that families cannot and should not be expected to travel across a district to access services from the one FSS district hub.
- 2.3.12 With the above in mind, it is proposed that the FSS would be delivered from a wide range of other service delivery sites across a district, to ensure that support can be accessed locally across the county. For example, in the district of Basingstoke, 26 potential service delivery sites have been identified, covering 10 key localities within the district; and in the district of East Hampshire, 28 potential service delivery sites have been identified, covering seven key localities. **(A list of proposed service delivery sites for each of the 11 districts can be found at Appendix 3).** In this way, services would be delivered where they are needed, thus providing a more responsive service to those who need it, whilst reducing the fixed costs associated with running a wider range of buildings. In addition there are two mobile units that are currently used for children's centre delivery in New Forest and East Hampshire. These mobile units would provide additional flexibility to take services to local communities.
- 2.3.13 There is currently a total of 75 venues from which designated children's centres services are delivered. It is proposed that those children's centre buildings which

could be closed as children's centres would be made available for alternative community use, or be declared surplus to the requirements of Hampshire County Council. **This report proposes alternative uses for those buildings that may not be retained as part of the proposed FSS model, the details of which are set out in Appendix 4.** Alternative uses include return or transfer to school, return or transfer to community centres, return to library services and use to meet identified demand for childcare places. The proposals relating to which buildings would be retained under this proposal, were based on a number of factors including the requirement in the proposals for one FSS hub/children's centre per district, the level of deprivation in each location and the suitability for future use. Additionally an audit of footfall was undertaken in the summer of 2015 in order to assess the level of usage of each children's centre building (excluding access to childcare provision). For this purpose, footfall refers to the number of people entering each children's centre building. This audit showed significant variation between children's centres but on average, 79 families each week access children's centre buildings. However, 46% of current children's centres have a footfall of less than 50 (low usage), 23% have footfall between 51 and 100 (medium usage) and 31% have a footfall of over 101 (high usage).

2.3.14 The table below identifies which buildings are being proposed to become the Family Support Service Hub and retained as the designated children's centres for each of the 11 districts of Hampshire. **A more detailed rationale, district by district, outlining why other current designated children's centre buildings are not being proposed as future FSS Hub sites, can be found at Appendix 5.**

District/Borough	Building	Rationale for retention
Basingstoke	Honeycomb Childrens Centre, Chiltern Way, Basingstoke	In one of the most deprived areas within Basingstoke (building in highest area of deprivation represents greater opportunity for alternative use) and meets the service delivery and staff accommodation requirements for the proposed FSS service. This has the greatest footfall of the Basingstoke children's centres, based on current service delivery (medium usage).
East Hampshire	Bushy Leaze Nursery School, Alton	Located in an area of deprivation within East Hampshire and meets the service delivery and staff accommodation requirements for the proposed FSS service.
Eastleigh	Aviary Children's Centre, Blackbird Road, Eastleigh	Located in an area of deprivation within Eastleigh and meets the service delivery and staff accommodation requirements for the proposed FSS service. It has high footfall.
Fareham	Oak Meadow Children's	Located in an area of high

	Centre, Tewkesbury Avenue, Fareham	deprivation and meets the service delivery and staff accommodation requirements for the proposed FSS. It has the highest footfall in the Fareham district.
Hart	Turners Wood Children's Centre, Evesham Heath	This meets the service delivery and staff accommodation requirements for the proposed FSS. It has the highest footfall in the Hart district.
Havant	Sharps Copse Children's Centre, Prospect Lane, Havant	Located in an area of high deprivation and meets the service delivery and staff accommodation requirements for the proposed FSS. It has the highest footfall in the Havant district.
Gosport	Rowner Sure Start Children's Centre, Rower, Gosport	Located in an area of high deprivation and meets the service delivery and staff accommodation requirements for the proposed FSS. It has a high level of footfall.
New Forest	Cadland Children's Centre, Holborn	Meets the service delivery and staff accommodation requirements for the proposed FSS.
Rushmoor	Park Children's centre, Aldershot	Located in an area of high deprivation and meets the service delivery and staff accommodation requirements for the proposed FSS. It has a high level of footfall.
Test Valley	Spring Meadow Children's Centre, Andover	Located in an area of high deprivation and meets the service delivery and staff accommodation requirements for the proposed FSS. It has the highest level of footfall in the Test Valley district.
Winchester	Merry-go-Round Children's Centre, Wickham	Located in an area of higher deprivation within Winchester district and meets the service delivery and staff accommodation requirements for the proposed FSS. It has the highest level of footfall in Winchester.

How support would be accessed/delivered

2.3.15 Requests for support to be provided by the FSS would come from a range of partner agencies, including health, education, professionals within the community and families themselves. A decision would be made based on an assessment with the family to understand what type of support is required. The one-to-one level 3 offer

provides parents and carers with specialist support tailored to their individual needs and the needs of their family. A skilled and knowledgeable practitioner would work with the family, drawing upon a variety of evidence based practice, including parenting interventions, using a solution focused approach to meet a range of identified, complex needs. One-to-one work could include supporting the family to build resilience, mediating between parents and children and supporting parents to implement routines and boundaries. Families with level 3 needs could also attend evidence based group programmes like ‘the family links nurture programme’, ‘incredible years’ ‘triple P’ or ‘the freedom programme’. The practitioner would act as a single point of contact for families.

- 2.3.16 Level 2 support for a family assessed as being in a priority group would be offered via group programmes, like those mentioned above. In addition, each district based FSS would also offer groups that are responsive to the needs of the local community. Level 2 priority groups would be agreed locally, based on need, but could include young parents, service families, first time vulnerable parents, those families where domestic abuse is a feature and support with language and development. In addition, each district would offer a minimum of two surgeries per week in different geographies within the district. The venue for these surgeries would be flexible in order to respond to needs as they arise. For example, they could take place in a community centre, alongside a parent and toddler group or in the same venue as a health visiting clinic. These surgeries would be appointment based and offer the opportunity for parents/carers of children of any age to meet with practitioners in order to discuss issues that may be arising for them, get appropriate help and find out what is available locally to support their families.
- 2.3.17 For example, within Gosport, it is proposed that on a weekly basis, the FSS would deliver one-to-one intensive work to up to 72 families, up to ten evidenced based parenting programmes, two priority groups as defined in paragraph 2.3.16 determined locally, and two surgeries. This is based on the proposed model of 11 FSS Hubs/children’s centres and maximum staffing. **Appendix 6 offers a similar breakdown of what interventions would be on offer for each of the 11 districts across Hampshire.**
- 2.3.18 Under this proposal, services to level 2 and 3 families delivered by the FSS would not incur any charge. However where activities are under-subscribed, places could be offered to other families, who do not have the relevant identified needs, on a charged for basis, in order to ensure maximum value for money. We estimate that these costs could vary from as little as £1 up to a maximum of £9, which represents full cost recovery (see also 3.4.27 below).
- 2.3.19 Integral to the delivery of the FSS would be collaboration with other local professionals and services such as maternity, health visiting, parent and toddler groups, schools, colleges and the voluntary sector, in order to ensure that the needs of the whole family are addressed. Support provided through FSS would be time specific, with clear goals and outcomes, monitored and shared with other professionals supporting the family. The overall range of services on offer would be agreed at a local level through a parent and professional forum, based upon an understanding of the types of need in the community and range of other services available. This could be activities to support health and wellbeing (e.g. organic cookery school) and specialist parental support (e.g. Homestart). It is expected that many of the services currently delivered in children’s centres by other providers will

continue to be available in the local community, but may be delivered in an alternative venue.

2.3.20 It is considered that there are a number of potential benefits to these proposals:

- families with children of different ages would receive a seamless service;
- staff could be used flexibly across the age ranges, sharing expertise and specialisms;
- there would be enhanced social work supervision of non-social care staff so that they would be better equipped to meet level 3 needs and ensure a robust approach to safeguarding;
- staff would benefit from unified management and training;
- there would be a single point of contact for partner agencies who currently liaise with various levels of help and support separately;
- the support offer would be designed to take into account other services already available in the locality;
- there would be a single management team overseeing family interventions and outcomes therefore, less opportunity for a family's needs falling between services.

3 Consultation

3.1 Public consultation methodology

- 3.1.1 A 10 week public consultation on the proposed new Family Support Service model ran from 23 February 2016 to midday on 3 May 2016.
- 3.1.2 During the consultation period, communication took place in a range of ways to raise awareness of the consultation and provide opportunities for key stakeholders to raise questions.
- 3.1.3 In 8 October 2015, prior to the public consultation period, pre-engagement events were undertaken with a particular focus on key stakeholders and providers. Feedback from these events supported the development of the proposed model and the consultation. For example running more programmes for those children five to ten years and providing a good on-line directory. The events were attended by 136 key stakeholders including children's centre staff, partnership advisory board members, early help workers, local councils, voluntary organisations, schools, colleges, early years, health, job centre plus and parents/users of the service.
- 3.1.4 A dedicated webpage providing full details of the consultation timeframe, awareness raising drop-in events and links to the consultation document and online questionnaire, was created on Hantsweb. The web address for the consultation web page or hyperlinks to the page were included in all communications publicising the consultation. An in-box was specifically set up during the consultation to deal with particular enquiries which were addressed as they came in.
- 3.1.5 The consultation was publicised through editorial in Hampshire newspapers, broadcast items on regional television and radio news bulletins, together with TV and radio interviews with the Executive Lead Member for Children's Services.

- 3.1.6 A news item was placed on the home page of the County Council's website (Hantsweb) and also on its intranet for staff (Hantsnet) with encouragement to spread the word about the consultation. Information was displayed on the plasma screens in the County Council's headquarters' reception/foyer and café areas.
- 3.1.7 Postings were placed at the start of the consultation on the County Council's Twitter feed (@hantsconnect) that has 43,800 followers, Hampshire County Council's Facebook account (over 2,000 followers) and on the County Council's LinkedIn account (9,000 followers). Additional reminder postings were placed at intervals during the consultation period. The postings were aimed at alerting people to the consultation and encouraging responses.
- 3.1.8 An article about the consultation was included in the March issue of the County Council's e-magazine for residents: 'Your Hampshire'. The article was shared with @hantsconnect Twitter followers and Facebook followers. A news in brief reminder about the consultation was included in the April edition.
- 3.1.9 News items about the consultation were also placed in the County Council's Health and Wellbeing Newsletter (650 subscribers) and its newsletter to all of Hampshire's 240 Parish Councils.
- 3.1.10 Postcards with details of the consultation and how to respond were distributed to parents through children's centres, to those using children's centre services and those supported by the Early Help Hubs.
- 3.1.11 Information about the consultation was sent to Support4SEND, Hantslocaloffer, Hampshire Parent Carer Network and Parent Voice, for sharing with/dissemination to parents and carers of children with learning difficulties and disabilities within in their networks.
- 3.1.12 Consultation information was sent to County Council contacts with the Forces: RAF Families Federation, Queen's Own Gurkha Logistic Regiment (Wives Club), Army Families Federation, Naval Families Federation, Greater Rushmoor Nepali Community, Aldershot Garrison Commander, as well as the community link for the Eastleigh and Winchester Ghurkha and Nepali community.
- 3.1.13 Families supported through the children's centres and services for young children were provided with information either verbally through group work, individual home visits and in writing. Over 1,700 of the families provided with information in this way were identified as being in priority groups including, parents of children with special education needs and disabilities (825), young parents (291), families from black and minority ethnic groups (81), families on low incomes (119), families experiencing domestic abuse (116) and service families (134).
- 3.1.14 900 families, (accounting for 2000 children) who had been supported through the early help hubs in the six months prior to the consultation opening were written to, with details about the consultation and inviting them to submit their views.
- 3.1.15 Through the County Council's schools communication channel, information was disseminated to all of Hampshire's 534 schools' headteachers and governors, and schools with nursery units (11) and the County Council's three maintained nursery schools to notify them of the consultation and asking for details and links to be included in their own parent mail communications.

- 3.1.16 A blog from services for young children was emailed to private, voluntary and independent providers of early years education, out of school clubs and holiday childcare providers (2,594 recipients) to alert them to the consultation and encourage feedback.
- 3.1.17 A briefing paper, copy of the consultation document and the consultation questionnaire were sent via email to all Hampshire County Councillors, Hampshire MPs and the Chief Executives of the 11 district local authorities in the county.
- 3.1.18 All groups and organisations that host a children's centre were contacted by phone prior to the opening of the consultation. This was to ensure they were fully aware of the consultation and had opportunity to comment on the proposals set-out in the consultation document.
- 3.1.19 A number of information and engagement events were held for health partners – including commissioners and providers, as well as the County Council's public health & services for young children, midwifery, health visiting service (Southern Health), and children's therapies (speech and language, occupational therapy and physiotherapy)
- 3.1.20 During the consultation period a series of awareness raising, drop-in events took place across the county – one event in each of Hampshire's 11 districts. The events were designed to be informal opportunities for people to ask Children's Services officers questions about the consultation and the proposals to aid their understanding. A rolling presentation played continuously throughout each event. This presentation helped to outline the proposals and what the new service could mean for people, if it was to be taken forward. Attendance at the events ranged from 20 to 70 people.
- 3.1.21 There are a number of partnership groups across Hampshire that support in identifying needs and shaping services for families. These include the Children's Centre Partnership Advisory Boards, the Local Children's Partnerships and the Supporting Troubled Families local co-ordination groups. Briefings have taken place for these groups to explain the proposals and consult with them on the future shape of partnership meetings and stakeholder engagement.

3.2 Staff/trade union consultation methodology

- 3.2.1 All affected staff and their union representatives have been consulted on the staffing implications of the proposed model.
- 3.2.2 At the start of the staff consultation, ten briefings were held across the county with all affected staff in scope of the review. There is ongoing consultation on the detailed staffing proposals and the proposed human resource (HR) processes for implementing change, should the proposal be agreed. Questions have been captured and a frequently asked set of questions and answers has been circulated to staff via email and have been placed on the restructure web page for Hampshire County Council staff. An additional six staff briefings have also taken place more recently to provide further support regarding the staffing implications.

Staff have been encouraged to provide comments and feedback through:

- a) Staff briefings – held in April, May and June 2016.

- b) Team meetings – managers were asked to hold focused discussions in team meetings on the proposed model and to collate responses and questions.
- c) Emails to their relevant human resources teams.
- d) Trade union representatives or elected staff representatives

3.2.3 Recognised trade union and employee representatives have been fully informed of the proposals through a s.188 notice which was issued on 11 April 2016. There have been meetings throughout the consultation period with union representatives and they have raised concerns that echo those identified by staff, particularly in relation to the proposed level of reduction of staff, the impact upon lower paid female staff, the funding of voluntary redundancy and concerns about access to and a reduction in service provision.

3.3 Findings from the consultation – (full analysis of the public consultation can be found at Appendix 7)

3.3.1 A total of 2,017 online responses were submitted and 107 completed consultation questionnaire responses submitted by post. The majority of responses came from groups most impacted by the proposals. 77% of respondents who answered declared their age as being between 25 and 44, and 83% of respondents who answered the question declared that they had at least one child under the age of 18 in their household. 70% of respondents stated that they use children's centres, with 9% using Early Help Hubs and 5% engaging with the Supporting Troubled Families Programme (STFP).

3.3.2 There have been an additional 56 consultation contacts received by post, telephone and email that were not submitted using the online questionnaire. The largest number of these came from members of the public (14), as well as Councillors from District Council's across Hampshire (10) and charities (5). Submissions were also received from nurseries and pre-schools, Clinical Commissioning Group representatives, local councils, local MPs, community groups and individuals who identified themselves as employees of children's centres and local authorities.

3.3.3 Of those expressing an opinion on the proposals, the majority opposed the principles relating to the Family Support Service (FSS), with some responses supporting the principles. The main concerns were in relation to the closure of children's centres and the proposed selection of FSS Hubs in regard to local need, with some respondents indicating that they would be more likely to support the proposals if phased in gradually, or if additional children's centres could remain in areas of higher deprivation. Common issues with the proposed reduction in the number of designated children's centres were accessibility for families to remaining centres, the impact on early intervention programmes (for level 1 and level 2 families), the cost-effectiveness of the proposals and the potential impact on the mental health general health and social isolation of affected families. Three petitions were also forwarded opposing the proposed closure of designated children's centres. Comments submitted through the petitions voiced opposition to the closures, as well as citing examples of the signatories own experiences of using children's centres. The most common points raised about children's centres were their role in supporting families with young children and the benefit of providing meeting places for mothers and young children.

- 3.3.4 There were seven expressions of interest in taking over children’s centres being proposed for potential closure. These were largely from nurseries, preschools and charities. Some contacts requested paper consultation forms and these were handled by the Children’s Services Department. Some contacts asked questions about the proposals, potential arrangements for joint working with other organisations, scheduling drop-in sessions around the consultation and how to respond to the consultation. One charity provided feedback from their own service users on the issues they face and their experiences with children’s centres.
- 3.3.5 Contacts were responded to and questions answered where contact information was provided. Those who had not indicated having used the online questionnaire were directed towards it to invite them to respond to the consultation through that channel.
- 3.3.6 Respondents were also asked about their income, ethnicity, gender, and whether they had a disability. 14.7% of respondents who declared their household income stated that it was up to £15,999; 34.3% declared a household income of £15,600 to £36,999; 26.7% a household income of £36,400 to £51,999 and 24.2% declared a household income of £52,000 and above. 96.3% of respondents who declared an ethnicity identified themselves as white, 1.4% from mixed or multiple ethnic groups, 1.0% from Asian or Asian British, 0.4% from Black, African, Caribbean or Black British, and 0.9% from any other ethnic group. 90.1% of respondents who declared their gender stated that they were female, the remaining 9.1% declaring themselves to be male. 4.3% of respondents who answered about their disability status stated that they had a disability, whilst 95.7% declared that they did not.
- 3.3.7 Respondents were asked to indicate their level of approval against six questions in regard to the consultation proposal, as follows:
- 3.3.8 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?**
- Overall, 25% of respondents agreed with this proposal, compared with 68% who disagreed with it. Respondents aged 45-64 were most likely to agree with the proposal (over 37% agreed, around 54% disagreed), whilst those aged 25 to 34 strongly opposed it (18% agreed, 75% disagreed).
- Users of children’s centres were more likely to disagree with the proposal (17% agreed, 76% disagreed) than those of Early Help Hubs and the STFP. Users of the STFP showed a stronger overall agreement with the proposal (45% agreed, 54% disagreed).
- 3.3.9 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?**
- Overall, 25% of responses agreed with this principle, compared with 68% who disagreed with it. Respondents aged 45-64 were most likely to agree with the principle (over 37% agreed, over 53% disagreed), whilst those aged 25 to 34 were least likely to agree with it (18% agreed, 75% disagreed).

Users of children’s centres were more likely to disagree with the principle (19% agreed, 74% disagreed) than those of Early Help Hubs and the STFP (over 37% agreed, under 55% disagreed).

Of the respondents who disagreed with the proposal, the most common reasons were the views that all families need access to children’s centre services, that early intervention is vital and that less vulnerable children will be less supported if services are targeted at the most vulnerable. Other frequent reasons cited were that respondents felt that the services are important features of local communities, that the services offer vital support to new parents and that that the categorisation of who is ‘vulnerable’ may not describe those most in need of support.

3.3.10 Would you be prepared to pay for non targeted services, eg 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.

Whilst there was overall opposition to the proposal, 38% of respondents were prepared to pay for these sessions, compared with 62% not willing to do so. Responses were varied across demographic groups and income bands. However, there was no significant difference between the views of respondents with dependent children under the age of 18 in their household compared with those without.

Respondents from the highest household income band (£52,000 and above) were most likely to be prepared to pay for these sessions (55% agreed, 45% disagreed), whilst those with a household income of under £16,000 were least likely to be prepared to pay for these sessions (31% agreed, 69% disagreed). Disabled respondents were also less likely to be willing to pay for these sessions than non-disabled respondents.

Users of children’s centres were more likely to be prepared to pay for these sessions (37% agreed, 63% disagreed) than those of Early Help Hubs and the STFP (approximately 25% agreed, 75% disagreed), possibly reflecting the more vulnerable circumstances of these users.

3.3.11 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?

Overall, 13% of respondents agreed with these proposals, compared with 83% who disagreed with it. These proposals were unpopular with all respondent groups. Respondents from higher income bands were more likely to agree with the proposals than those from lower income bands.

Respondents with dependent children under the age of 18 in their household were more likely to disagree with the proposals (10% agreed, 86% disagreed) than those without dependent children under the age of 18 in their household (21% agreed, 75% disagreed).

Users of children’s centres were more likely to disagree with the proposals (9% agreed, 88% disagreed) than those engaged with Early Help Hubs and the STFP (approximately 16% agreed, 78% disagreed).

3.3.12 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?

Overall, 14% of respondents agreed with this proposal, compared with 81% who disagreed with it, showing overall opposition to the proposal. Respondents with dependent children under the age of 18 in their household were more likely to disagree with the proposal (11% agreed, 84% disagreed) than those with those without dependent children under the age of 18 in their household (25% agreed, 70% disagreed).

Users of children's centres were more likely to disagree with the proposal (9% agreed, 87% disagreed) than those of Early Help Hubs and the STFP (over 23% agreed, under 71% disagreed). Respondents from higher income bands were more likely to agree with the proposals than those from lower income bands.

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

This question drew overall strong disagreement from respondents, as 12% of respondents agreed with the proposed locations, compared with 69% who disagreed with them. Disabled respondents were more likely to disagree with the proposed locations (9% agreed, 81% disagreed) than non-disabled respondents (11% agreed, 68% disagreed).

Respondents with dependent children under the age of 18 in their household were more likely to disagree with the proposed locations (10% agreed, 69% disagreed) than those with those without dependent children under the age of 18 in their household (18% agreed, 67% disagreed). Users of children's centres were more likely to disagree with the proposed locations (9% agreed, 71% disagreed) than those of Early Help Hubs and the STFP (19% agreed, just over 66% disagreed)

The most common reasons given for disagreeing with the proposed locations were to do with accessibility issues, with the most frequent issue being that the proposed FSS Hubs/children's centres are located too far from users. People also frequently commented that people without transport would be negatively impacted by the locations and that vulnerable people would be unable to afford the public transport needed to access the hubs.

3.3.14 Further Comments

Respondents were asked if they had any suggestions on alternative ways to make the required savings of £8 million. The most common comment (46% of responses) was that the Council should make savings elsewhere, with reductions to staffing, management, high salaries, expenses, wastage, bureaucracy and red tape all suggested. Better use of digital services was also mentioned under this heading.

37% of responses disagree with the cutting of children's centres, as they are seen as vital to vulnerable families and needed to combat social exclusion. 35% of responses suggested that there was a willingness to pay for services, but that £9 per session was too high a cost and that this should be means testing.

3.3.15 Impact on Equalities

38% of respondents felt that there would be a positive or negative impact on equalities which the Council should take into account in the decision making process.

The most common perceived impact was to families, mothers and pregnant women. People with disabilities and mental health problems were also seen as likely to be negatively impacted by the changes. In addition to this, there was a common perception that the proposals would impact people who are not classed as vulnerable, and that services should be available universally.

Other groups identified by respondents as being impacted included families with low incomes, people without access to transport, and people who need services located close to them.

3.4 Response to Public Consultation

Access to services

- 3.4.1. Concerns were raised during the consultation that families would have to travel to the retained FSS Hub/children's centre building in each district in order to access support.
- 3.4.2 Feedback was received from several District Councils suggesting that one FSS Hub/children's centre building in their district would be insufficient. In particular it was suggested that there should be two buildings in the districts of Gosport, Rushmoor (one in Farnborough and one in Aldershot), East Hampshire and Basingstoke and that the proposed building for retention in Hart is in the wrong place. Concerns have also been expressed that the proposed model does not have an FSS Hub/children's centre in the centre of the city of Winchester.
- 3.4.3 Additionally, respondents expressed the view that currently families are able to drop into a children's centre to obtain support and that this would be compromised if the FSS Hub was further away from where some families live.3.4.4 The new service is designed so that service users would be able to access services delivered more flexibly at a range of delivery sites in local communities. In response to the consultation, Hampshire County Council is taking great care to ensure that a suitable range of locally accessible venues that meet the needs of families within their local communities would be available and this work would be built upon on an on-going basis. **A list of the venues that have already been identified is shown in Appendix 3** and this represents an increase over the number of current children's centre venues. For example, the district of New Forest, under the proposed model, would have 22 identified service delivery sites spanning nine key localities and Havant 13 identified service delivery sites, spanning six key localities within the district. The use of community venues as service delivery sites would offer greater opportunity to respond flexibly to changing needs and to move the delivery of services to where they are most needed, rather than being reliant upon a particular building. Ensuring the right spread of venues to meet customer needs would be an ongoing part of service management responsibilities and County Council officers would expect that the 'mix' could change over time in line with need. In addition to

this, the proposed new service would continue to have access to two mobile units that are currently used for children's centre delivery in New Forest and East Hampshire. These mobile units would provide the proposed new FSS additional opportunities to take services to where they would be most needed. This represents the difference between a modern, flexible service that is responsive to need, setting up services and programmes on a small, local scale, rather than a service with lots of fixed assets that require maintaining.

- 3.4.4 Hampshire County Council set out the proposed flexible delivery site approach in written responses to queries and at engagement and consultation events. The service would make it a priority to make sure that families understand how to access support. Increasingly, parents/carers seek initial information, advice and guidance through digital media and the service would also ensure that information could be accessed in this way (whilst recognising that not all families have access to, or are confident in using, information technology).
- 3.4.5 In the summer of 2015, an exercise took place to establish the number of families accessing children's centres, not just to drop in but also to access activities. This showed that whilst some children's centres buildings were well used, many buildings had very low footfall, with 19% having fewer than 20 families a week accessing the building. Therefore alternative ways of delivering services in a more responsive and flexible way, either through outreach/service delivery venues or through digital means, would help ensure that families have continued access to support when and where they need it.
- 3.4.6 In terms of the level of service that could be expected from the new proposed FSS at a local district level, in Havant, for example, on a weekly basis, the FSS would deliver to 84 families via one-to-one intensive work, would offer up to 11 evidence based parenting groups, three priority groups determined locally and two surgeries. **What this could look like for each Hampshire district is outlined in Appendix 6.** These calculations are based on the proposed FSS model of 11 hub buildings and maximum staffing – any reduction in staff funding would alter this offer. Essentially what this means is that if more than 11 FSS Hub sites were retained, this would necessitate a reduction in staff, thus impacting on service delivery.
- 3.4.7 For those districts where feedback suggested there should be more than one FSS Hub, there would be a clear presence in each of the identified areas through surgery style sessions as well as other activities taking place weekly in those localities. For example in Rushmoor, services would be delivered in Farnborough and in Aldershot.
- 3.4.8 Some respondents expressed concern about the proposal that Winchester city would not have a FSS Hub, because the proposed hub for the Winchester district would be in Wickham.
- 3.4.9 Hampshire County Council officers carefully considered the location of all the hubs and as a result of the consultation, we have re-examined the basis for choosing Wickham. The children's centre in Wickham is in the second highest area of deprivation in the Winchester district. This building would be suitable for the proposed FSS Hub and has the highest footfall of all children's centre buildings in the Winchester district (based on an audit undertaken in July 2015). Of the other children's centres within the Winchester district, the two in Kingsworthy and Bishops Waltham, with low deprivation, have a low level of footfall. In Alresford, where

deprivation is low, footfall is medium, but lower than Wickham. The centre in Denmead has a low level of footfall, with a medium level of deprivation, but lower than Wickham.

- 3.4.10 The children's centre in Winnall is placed in the most deprived part of the Winchester district. However the building is exceptionally small and would be unsuitable for both group work delivery and as a staff base. There would also be only limited space in the children's centres in Stanmore and at Lanterns, Weeke.
- 3.4.11 **Appendix 5 provides a breakdown of which children's centres are being proposed as FSS Hubs for each district across Hampshire**, which are not and the rationale for these proposals. However, it is important to provide reassurance that there would be service delivery sites within Winchester city and these sites could be used flexibly, based on need at any given time. **Appendix 3** identifies 24 potential delivery sites across the Winchester district, spanning the localities of Winchester city, Winnall, Weeke, Stanmore, Kings Worthy, Whiteley, Bishops Waltham, Denmead and Alresford. **A breakdown for the remaining 10 districts can also be found at Appendix 3.**
- 3.4.12 The average cost of keeping a building open is £27,000 per annum. Therefore, given that staffing is the only significant flexible cost within the proposed model, keeping additional buildings open would impact directly upon the number of staff within the model able to deliver services, with a reduction of approximately one Family Support Worker for any additional building retained. In any one district, removing a Family Support Worker would reduce the number of families who could receive one-to-one support (approximately 20 families) and also evidenced based groups (approximately 16 families) across the year, due to the reduced capacity.

Future use of children's centres

- 3.4.13 Consultation respondents asked what would happen to children's centre buildings not identified as future FSS Hubs. Hampshire County Council has prepared a summary of the proposed alternative uses for these buildings which can be found at **Appendix 4** and this should answer these queries and hopefully allay any concerns that they would be left unused. This recommends that:
- up to 27 buildings would be returned/transferred to schools;
 - six would be handed back to the library service;
 - up to are 17 would be considered for additional childcare places (either through expansion of existing childcare provision on site, new childcare provision or schools lowering their age range);
 - up to are nine could be returned to landlords if not required by other services;
 - one building would be considered for relocation in order to support future school expansion and the site proposed for sale;
 - three buildings would be declared surplus to requirements and offered to other service departments, or could be let or sold and
 - one building would return to the County Council's estate.

- 3.4.14 Notices would be placed on all children's centre buildings if they are to be closed/used for different purposes, giving advice about how the public could contact Hampshire County Council's Children's Services if they require help and support.

Services for disabled children

- 3.4.15 Some respondents were not clear on the services that would be available for families of disabled children within the proposed new FSS.
- 3.4.16 Currently the County Council delivers and commissions a range of services specifically for families of disabled children including short breaks, early support, Portage as well as specialist SEN educational provision (e.g. Bushy Leaze). These services would not be affected by the FSS proposals. Additionally, families who are identified with an additional need that meets the threshold for FSS support, including those where a child or parent has a disability, would be able to access the services available free of charge, including individual support where necessary.

Reduction in universal and level 2 services

- 3.4.17 Concerns were raised that the reduction in universal services would lead to greater isolation and would place increased pressure on other services including health visiting. Additionally it was felt that community groups would not have the skills to be able to effectively support families with additional needs. A further suggestion was received that universal services should continue for children aged 0-2, in recognition that after this children are supported through funded early years provision.
- 3.4.18 In the course of designing the proposed new FSS, officers carefully considered the large range of other services available to families within specific communities that are delivered by voluntary and independent providers. Some of these are currently delivered within children's centre buildings, e.g. 'boogie mites' but are not delivered directly by children's centre staff. This also includes parent and toddler groups, groups providing development activities such as 'rhyme time' as well as the support that continues to be available for families through health visiting. These would continue to be delivered, but not always necessarily from a FSS Hub/children's centre building.
- 3.4.19 The health visiting offer includes the five mandatory contacts for every child under five, all of which take place before the child's third birthday. This offer also includes support for families and children where additional support needs regarding child development such as toileting and behaviour are identified. Therefore health visitors are a key service for children in the 0 – 2 years age range and this support would continue.
- 3.4.20 An FSS service directory would be developed and maintained by the FSS to provide information for families detailing services that are available in their local community. **A sample list of the types of services that would continue to be available within districts is included in Appendix 2, although this is not exhaustive.**

Reduced opportunity to identify families' needs

- 3.4.21 It was felt that by removing universal services and reducing level 2 services, there would be a risk that the needs of parents and children would not be identified.

There were some individual families who said that they only had their needs identified (e.g. domestic abuse) because they had attended universal groups and through communication with skilled staff, had been able to disclose their difficult, personal circumstances. There was a concern that the additional needs of families are often not obvious and that these only come to light following a period of contact when either an assessment can be made by a skilled member of staff or families feel safe to disclose.

- 3.4.22 Hampshire County Council officers have considered these concerns carefully, because the identification of need and the management of risk is at the heart of all Children's Services activities. The proposed FSS would give greater opportunity for staff to work closely with community groups such as those described in **Appendix 2** in order to support them in developing their skills in identifying families with additional needs and how they could be supported. However these groups are currently skilled and able to contact the relevant agencies if this becomes necessary and the expectation is that this would continue. Additionally key professionals who already provide universal services, for example health visitors, school nurses and teachers (with whom almost all children and families come into regular contact) would continue to work as they do now and use information sharing pathways to seek additional support for families, if and when this is required.

Stigmatising service users

- 3.4.23 Many respondents felt that targeting services to those most in need would lead to families feeling stigmatised and therefore less likely to access the services that would remain available to them.
- 3.4.24 Officers appreciate and understand these concerns, because they sit in the background of any contact with professional social care help and support. These are issues that staff manage on a daily basis across Children's Services. The FSS staff would therefore be skilled at working with families and would have a good understanding of how to engage families and work with them. Based on consultation feedback, careful consideration would be given to the delivery venues so that, wherever possible, they are buildings used by a range of community members, thus making it less obvious that the families accessing the buildings would be accessing the FSS.

Charging for services

- 3.4.25 Concerns were raised by some families and leaders of groups within children's centres that charging for services would prevent them from being able to access services, particularly if the charge was £9, as referred to in the consultation document. Some respondents expressed concern about the reference to charging, with some believing that families at level 3 of the threshold of need would have to pay to access services. However, 38% of parents indicated that they would be willing to pay a contribution towards attending a parenting programme. Something in the region of £2 per session, it was most commonly said, would be more acceptable and feasible.
- 3.4.26 It is proposed that services to level 3 families and priority need level 2 families, delivered by the FSS, would not incur any charge. However where programmes or activities are under-subscribed, places may be offered on a charged for basis to other

families who do not have relevant identified needs, in order to ensure maximum value for money.

3.4.27 The charge could vary from as little as £1, up to a maximum of £9, depending upon the number of places already taken up by FSS eligible users. For example, if a parenting programme like 'HENRY' was almost full from FSS referrals, the full costs of the programme would be almost covered and so the charge for those at level 1 could be as little as £1 or £2. If a course was offered with no FSS eligible families attending, then the charge could be up to a maximum of £9, to cover all of the costs of running that course.

3.4.28 Some universal services delivered in children's centres currently are delivered by external organisations but commissioned and paid for by the children's centre. In future, it is anticipated that these services would charge parents directly.

3.5 Key findings from staff and union consultation

3.5.1 The key themes that have emerged to date in summary are:

- a) **Proposed service delivery model.** Staff and unions have sought clarity on the proposed nature of work, for example how much outreach work would be undertaken, the types of programmes that would be offered; the range of services 0-19 (25); the ability to commission services and the type of limited level 2 work that would be undertaken.
- b) **Proposed locations and buildings.** Clarification has been sought in relation to the decision process regarding the buildings that would be retained, future delivery locations, the proposed location of drivers and vehicles; parking; work bases; refurbishment and future potential use of the buildings.
- c) **Staffing structure and reductions.** Staff have raised questions regarding the staffing profile in each district and how the profile was calculated and the proposed number of reductions. Union representatives have raised significant concern about the impact of staff reductions and the effect on lower paid female staff.
- d) **HR Processes.** Staff have raised questions regarding the HR timeline; the selection and appointment process and the variation between staff groups; (for example what is involved in the desktop exercise); how the ring-fences were calculated; clarity regarding the roles in the new structure that each staff group would be eligible to apply for; and the redeployment process. Staff have also raised queries relating to the proposed TUPE transfer process.
- e) **Voluntary/ compulsory redundancy process.** Queries have been in relation to who would be eligible to apply for enhanced voluntary redundancy (EVR) how to apply; how to calculate the value of their EVR package; the criteria for selection; potential leaving dates and implications for employees who have been accepted for EVR. Union representatives have challenged the proposal for HCC to fund enhanced voluntary redundancy for eligible staff in scope of the restructuring
- f) **Pay and conditions.** Staff have asked about the implication of TUPE on continuous service, redundancy payments and pensions; changes to terms and conditions post transfer.
- g) **Transition plans;** Staff have raised a number of issues relating to the transition between the old and new service; such as transition of case files; resources; IT

equipment; work bases and the availability of training to ensure success in the proposed new roles within the proposed FSS model.

4 Proposals and implementation

4.1 Hampshire Council has listened to the views expressed through both the public and staff consultations. The proposed FSS delivery model below is predicated on offering families a more local, flexible, targeted and responsive early help service, within the current financial constraints. The public and staff consultations have provided Hampshire County Council with new ideas to take forward in order to ensure that services continually evolve. For example, wherever possible, the FSS would provide services from community buildings that are well used for a variety of other community events/purposes, in order to help reduce the risk of stigmatisation for families when accessing a family support service from these venues. The consultation responses have also highlighted the need for a robust digital strategy, in order to provide families with update to date and easy to navigate on-line signposting support. Having taken all of the above into consideration, the proposed Family Support Service would offer the following:

- A single approach to supporting vulnerable families with targeted early help across the 0-19 age range at level 3 (or up to 25 for young adults with learning difficulties and/or disabilities);
- To work with families to avoid escalation into children's social care, when this is possible or appropriate (level 4);
- A clear process for 'step up' and 'step down' across the levels of need, so that families do not become 'stuck' at particular levels and can receive the right levels of support, at the right time, without unnecessary state intrusion;
- To work with families' strengths to develop skills and confidence;
- To provide some support for children (level 2) aged 0-5 to meet the statutory duties as outlined in section 7;
- Targeted youth support services as part of the FSS, by coordinating in-house and commissioned provision;
- Professional supervision and training for all early help/family support service delivery staff, in order to ensure the highest quality of service provision;
- Integrated strategic management of the full range of early help services.
- Close alignment with the Supporting Troubled Families programme (STFP);
- To work with some families at level 2 of the threshold of need, so long as they were identified as priority groups. For example teenage parents, or families experiencing domestic abuse;
- Support at a range of service delivery sites within districts, so that families would not need to travel to the one children's centre in each district for support.

4.2 Following consultation, whilst there was some feedback regarding specific buildings and locations, the proposed buildings for retention and the rationale are listed below:

District/Borough	Building	Rationale for retention
Basingstoke	Honeycomb Childrens Centre, Chiltern Way, Basingstoke	In one of the most deprived areas within Basingstoke (building in highest area of deprivation represents greater opportunity for alternative use) and meets service delivery and staff accommodation requirements for FSS service. Has greatest footfall of the Basingstoke Children's Centres based on current service delivery (medium usage).
East Hampshire	Bushy Leaze Nursery School, Alton	Located in an area of deprivation within East Hampshire and meets service delivery and staff accommodation requirements for a FSS.
Eastleigh	Aviary Children's Centre, Blackbird Road, Eastleigh	Located in an area of deprivation within Eastleigh and meets service delivery and staff accommodation requirements for FSS. High footfall.
Fareham	Oak Meadow Children's Centre, Tewkesbury Avenue, Fareham	Located in an area of high deprivation and meets service delivery and staff accommodation requirements for a FSS. Highest footfall in Fareham district.
Hart	Turners Wood Children's Centre, Elvetham Heath	Meets service delivery and staff accommodation requirements for a FSS. Highest footfall in Hart district.
Havant	Sharps Copse Children's Centre, Prospect Lane, Havant	Located in an area of high deprivation and meets the service delivery and staff accommodation requirements for a FSS. Highest footfall in Havant district.
Gosport	Rowner Sure Start Children's Centre, Rowner, Gosport	Located in an area of high deprivation and meets the service delivery and staff accommodation requirements for a FSS. High level of footfall.
New Forest	Cadland Children's Centre, Holbury	Meets the service delivery and staff accommodation requirements for a FSS.
Rushmoor	Park Children's centre, Aldershot	Located in an area of high deprivation and meets the service delivery and staff accommodation requirements for a FSS. High level of footfall.
Test Valley	Spring Meadow Children's Centre, Andover	Located in an area of high deprivation and meets the service

		delivery and staff accommodation requirements for a FSS. Highest level of footfall in Test Valley.
Winchester	Merry-go-Round Children's Centre, Wickham	Located in an area of higher deprivation within Winchester district and meets the service delivery and staff accommodation requirements for a FSS. Highest level of footfall in Winchester.

5 Equality Impact Assessment (EIA)

- 5.1 The EIA outlines the background to the proposed changes, the current shape of service delivery and the proposals for a new Family Support Service (FSS), as well as the methodology and outcomes of the public and staff consultations that took place.
- 5.2 The EIA describes how the County Council has considered the impact of the proposed changes on those with protected characteristics and the actions that would be taken by the County Council to minimise this impact. It is divided into two sections. The first is in relation to service users and the second is in relation to staff.

Impact Upon Service Users

AGE - Impact before mitigation - HIGH Impact after mitigation - MEDIUM

- 5.3 **Specific issues:** Children's centres currently only serve families with children under 5; with 29,067 children being supported in the last year. Early Help Hubs serve families with children aged 0-19 (up to 25 for those with learning difficulties and/or disabilities), although they primarily work with those aged 5 - 14, with 3,042 children currently being helped (with an average age of 10).
- 5.4 The proposed changes would primarily negatively impact children under 5 and their families who currently are assessed as having level 1 and 2 needs and who get support from children's centres. This is because the proposed new FSS would move from a universal service to a more targeted service. This means that those families who are classed as having level 1 needs and level 2 non priority needs would have less access to early help services provided by Hampshire County Council
- 5.5 **Mitigating actions:** The proposed changes to early help services, which would move to targeting the most vulnerable children and families, are based on feedback from residents in the 'Shaping Hampshire – Spending Review Consultation' that took place between 26 May and 6 July 2015.
- 5.6 Hampshire County Council recognises the importance of having services available for families with level two needs, in order to reduce the risk of problems escalating to level 3 needs. There is a range of universal services (available to all) operating and

managed by voluntary and independent providers across the Hampshire. The FSS would offer an online local resource directory to signpost which community services could be accessed by families in their locality. This directory would also publicise the Hampshire County Council offer for level 2 priority families. The early help offer would be a joined up and holistic offer, with services provided by Hampshire County Council forming a part of what would be on offer locally. The universal health visiting service would also be a key early help service.

PREGNANCY AND MATERNITY - Impact before mitigation - HIGH Impact after mitigation - MEDIUM

- 5.7 **Specific issues:** The data collected by children’s centres shows that 13% of individuals who have used the service in the last financial year were in a stage of either pregnancy or maternity. It is acknowledged that this group could be negatively affected as early help services delivered by Hampshire County Council potentially move from a universal model to a targeted service.
- 5.8 **Mitigating actions:** It is proposed that the FSS would continue to provide support to this group of carers if they are identified as vulnerable i.e. have a level 3 need. However, universal and free support (currently provided by children’s centre staff) would be reduced for carers with level 1 or 2 needs, although some targeted support would be offered to families assessed as having priority level 2 needs. However, services provided by maternity and health visiting services are available universally to all levels of need and these would continue to be available, although they may not be delivered from a designated FSS hub/ children’s centre. As noted earlier in this paper, health visiting services have expanded significantly since 2012.
- 5.9 To mitigate the impact of this, the FSS proposal includes the creation of an online signposting resource directory for those with level 1 needs. It would be a web based directory of universal services, some of which would be based in the community and provided by the voluntary/independent sector. For those with level 2 needs, there would be limited continued support, such as appointment based triage surgery sessions and targeted group work.

SEX - Impact before mitigation - MEDIUM Impact after mitigation - MEDIUM

- 5.10 **Specific issues:** 56% of the children who have visited children’s centres in the past financial year are female, while 44% are male. 60% of the current children being served by Early Help Hubs are male, whereas 40% are female. Taken as a whole, this shows a fairly even split between the sexes. 81% of the carers who have visited children’s centres in the past year have been female.
- 5.11 **Mitigating actions:** The proposed FSS would be delivered with local needs in mind, with support taking the form of a combination of group work and one-to-one support

and advice, which would result in it being individually tailored to the needs of vulnerable families. Whilst targeted, the service would be open and inclusive, focussing on family needs, and would fundamentally not discriminate based on sex.

- 5.12 The support given would be co-ordinated amongst different agencies, such as health and other statutory and voluntary/independent services. A family plan would be produced, which would take into account the needs of the child and the broader needs of the family. With evidence-based parenting groups, intensive support and alignment with the STFP, it is proposed that the county's most vulnerable children and their families would be given the opportunity to stay safe, stay healthy, grow and learn.

**DISABILITY - Impact before mitigation - LOW
Impact after mitigation - LOW**

- 5.13 **Specific issues:** The data shows that 1.15% of children and 1.55% of carers who have visited children centres in the past financial year have been disabled. This is lower than the national average, which shows that around 6% of children and 16% of working adults are disabled⁴. However, 7% of children who are currently using Early Help Hubs have been recorded as disabled, which is slightly above the national average.
- 5.14 **Mitigating actions:** It is proposed that the FSS would target support at families with level 3 needs who have children aged between 0 to 19 years old (up to 25 if they have learning difficulties and/or disabilities). The reduction in service capacity would primarily be taken from the universal aspect of children's centres. This means that the remaining funding would be used to continue to deliver level 3 support, as is currently delivered by Early Help Hubs. Therefore level 3 support to families, which as the data suggests is more likely to be used by those children with a disability, would not be significantly changed.

**POVERTY - Impact before mitigation - MEDIUM
Impact after mitigation - MEDIUM**

- 5.15 **Specific issues:** 12.5% of families who have visited children's centres in the last financial year were recorded as being in poverty. This compares to a 15.9% poverty rate amongst the general population in 2013⁵. The proposed changes to the early help services could negatively affect those families in poverty who have level 1 needs.
- 5.16 **Mitigating actions:** It is proposed that the FSS would provide an integrated and focused service, starting with those with a level 3 need. This would mean that those families in poverty who have a level 3 need would continue to be helped by the proposed new service, free of charge. However, it is acknowledged that the removal of universal services could negatively affect those families in poverty who have level 1 or 2 needs. The intention of the proposed FSS model would be to provide a signposting service to free and paid services within the community. Furthermore, the proposed FSS would continue to offer grants to organisations delivering youth

support, which could be targeted at those with a level 2 need. Priority families with level 2 needs would be supported, free of charge, by the FSS.

**RURALITY - Impact before mitigation - MEDIUM
Impact after mitigation - LOW**

- 5.17 **Specific issues:** 13.85% of those families who visited a children’s centre in the past financial year were categorised as living in a rural environment. This compares to 23% of Hampshire’s general population living in conditions of rurality (“Socio-Economic Profile of Rural Hampshire”, Environment Department, Hampshire County Council, 2010). Whilst there are currently lower than average numbers of rural users, it is acknowledged that closing buildings and making services accessible by appointment only could have an impact on accessibility for vulnerable clients who live some distance from the remaining FSS hubs/designated children’s centres. It could be especially difficult for those who have low incomes and rely on public transport, which can be expensive and are also reducing in availability in some areas.
- 5.18 **Mitigating actions:** To mitigate this, outreach services would continue to be delivered in a number of service delivery sites within localities and a mobile service would continue to be operated, which is intended to ensure that the proposed FSS could reach all areas, especially those that are isolated and in greatest need. This approach would mean that the service could be flexible in it’s delivery and change its focus in accordance with geographic demand.
- 5.19 **For the groups which are categorised under the EIA criteria listed below, there is low or no impact**
- Gender Re-assignment
 - Sexual Orientation
 - Marriage and Civil Partnership
 - Religion
 - Race
- 5.20 This is because it is the intention of the proposed FSS to provide an inclusive service, which focuses on the individual needs of the most vulnerable children and their families. This would ensure that the needs of service users in relation to the above criteria would be fully met.

Summary for Service Users

- 5.21 The impact of the proposed FSS would primarily be on current children’s centre service users who access universal services. In relation to demographics, this could negatively affect families with children under the age of 5, or who have a family

member in the stages of pregnancy or maternity. It could also affect those who are in poverty and who rely on the universal provision offered by children's centres.

- 5.22 Considering the budget pressures and in line with consultation feedback from residents, as well as the increase in service demand from vulnerable children, the FSS would focus its resources on targeting the most vulnerable children and families in Hampshire. This would happen by joining up and integrating existing early help services, to provide a holistic and sustainable service. The service would align with a broad spectrum of public and voluntary services, helping to provide effective plans to help those most in need.
- 5.23 Where possible, the negative impacts of this proposed change would be mitigated through services such as outreach and delivery sites in order to reach those in rural locations, as well as a signposting service to help those who are in poverty and wish to access universal services.

Impact Upon Staff

- 5.24 The proposed FSS model would operate out of 11 FSS hub buildings, with one located in each district, with the addition of outreach service/delivery sites across districts, including mobile outreach. The implications for staff are that this would reduce full time equivalent staff (fte) from 267.16 to 129.63. (This includes caretakers and cleaners and the figure indicative as at the start of the staff consultation).
- 5.25 Staff from the three organisations (Hampshire County Council, ActionForChildren and 4Children) who currently provide early help services would be affected. They have been consulted in relation to the changes.
- 5.26 If the decision is taken on 1 July 2016 by the Executive Lead Member for Children's Services to move forward with the proposals, decisions would be made about EVR2 applications. The remaining staff from Action-For-Children and 4Children would then transfer into Hampshire County Council under TUPE Regulations.

AGE - Impact before mitigation - HIGH Impact after mitigation - MEDIUM

- 5.27 **Specific issues:** Relative to the Hampshire County Council average, early help services currently employ a higher percentage of younger staff. 75% of early help staff employed by Hampshire County Council are between the ages of 30-54, which is significantly more than the County Council average of 63.6%. 4Children and ActionForChildren employ a higher proportion of staff aged between 16-29, at 23% and 14% respectively, compared to the County Council average of 12.1%.
- 5.28 **Mitigating actions:** An option to reduce the impact on staff would be to offer enhanced voluntary redundancy (EVR), which would be open to all eligible staff in scope of the review, who have more than two years of service.

SEX - Impact before mitigation - HIGH Impact after mitigation - MEDIUM

- 5.29 **Specific issues:** Staff who are involved in providing early help services are predominantly female, to a much greater extent than the County Council average of 64%. The data shows that of the staff providing early help services, 90% employed by Hampshire County Council, 100% employed by 4Children and 98% employed by ActionForChildren are female.
- 5.30 **Mitigating actions:** The staff and trade union consultation was designed to ensure that all staff, regardless of sex, are equally consulted on the proposals. Furthermore, the EVR2 scheme would be open to all eligible staff and consideration of all applications would be carried out fairly regardless of the gender of the applicant and would take account of personal circumstances such as caring responsibilities. The terms of the EVR scheme represent a significant enhancement ameliorating the adverse impact of the overall reduction in staff numbers.

**POVERTY - Impact before mitigation - HIGH
Impact after mitigation - MEDIUM**

- 5.31 **Specific issues:** The majority of staff who provide early help services in Hampshire County Council work in relatively low paid positions. 77% of staff at 4Children and 57% of staff at Action-For-Children earn up to £17,583. Of those who work for the County Council, 64% earn between £19,455 and £27,126, which is less than the national average salary of £27,600⁶.
- 5.32 **Mitigating actions:** One of the proposals that staff have been consulted on is that all staff in scope of the review could be appointed onto Hampshire County Council's EHCC2007 terms and conditions, within the proposed new service. From an initial review of salaries and benefits, it appears that staff currently employed by Action-For-Children and 4Children would be financially better off if appointed onto EHCC2007 terms and conditions.
- 5.33 The opportunity for eligible staff to apply for EVR2 would provide a severance package to those individuals who are at risk of redundancy over and above what they would be entitled to receive in a compulsory redundancy situation.
- 5.34 For staff who are not successful in securing a position within the new proposed service, there would be access to employment support, such as CV writing, to support them to find alternative employment.

5.35 **For the groups which are categorised under the EIA criteria listed there is low or no impact**

- Gender Re-assignment

- Sexual Orientation
- Marriage and Civil Partnership
- Religion
- Race*
- Disability*

*Data available shows that a significantly lower than average percentage of staff have ethnic minority status or a disability

Summary for Staff

5.36 Hampshire County Council officers have worked to ensure that all staff have had a continued opportunity to engage with the process and voice concerns through consultations and briefings. Measures are in place to support staff through any potential transition, including a formal consultation process and an EVR2 scheme. Staff who were not successful in securing a position within the proposed service, would have access to support to help increase their ability to find alternative employment. The unions have been fully consulted on these proposals. Through consultation it is intended that the project ensures proportionality in achieving the legitimate aims of saving £8.5 million. This is necessary to meet the County Council’s savings targets in Transformation 2017, whilst providing a fully integrated and targeted early help service; the continued provision of which (subject to the consultation) is thought to be best secured by the rationalisation necessitated by external economic factors outside the County Council’s control.

6 Financial Considerations

6.1 The County Council must meet a funding shortfall of £98 million by April 2017 and the Council has allocated savings of £21.5million to be met from the Children’s Services budget. It is proposed that £8.5 million of savings could be delivered from the proposals to develop a new Family Support Service.

6.2 The current expenditure on the services that are covered by these proposals is £14.4m. This is broken down as follows:

Area of spend	Budget £'000
Children’s Centres	9,014
Early Help Hubs	3,107
Grants to voluntary organisations	2,302
Total	14,423

6.3 These services are currently funded as follows:

Budget	Budget £'000
Children's Services cash limit	9,751
Public Health grant	3,178
Dedicated Schools grant	1,494
Total	14,423

6.4 The costs of the proposed model are as follows:

Area	Budget £'000
Family Support Service	4,823
Family Support Service grants	1,100
Total	5,923

6.5 The proposed new FSS would be funded as follows:

Budget	Budget £'000
Children's Services cash limit	1,251
Public Health grant	3,178
Dedicated Schools grant	1,494
Total	5,923

6.6 The proposals aim to achieve the following savings:

	Budget – current service	Budget – proposed service	Saving
	£'000	£'000	£'000
Staff *	10,401	3,938	6,463
Non-staff	1,730	885	845
Grants to voluntary organisations	2,292	1,100	1,192
Total	14,423	5,923	8,500

* A proportion of these staff are currently employed by the children's centre contracted providers Action for Children and 4Children.

- 6.7 If the proposal to deliver a FSS is agreed, there would be some one off costs of implementation. These costs would be funded from one off reserves and can be broken down as follows:

Area of one off spend	Forecast £'000
HR related expenditure	3,465
Buildings related expenditure	1,009
Total	4,474

- 6.8 There is a potential risk that capital funding received under the Sure Start Early Years and Childcare Grant would need to be repaid under specific circumstances if the future use of buildings is not acceptable to the Department for Education .

7 Legal & Statutory Considerations

- 7.1 Under the Childcare Act 2006, local authorities must secure such consultation as they think appropriate is carried out;
- Before making arrangements for provision of a children’s centre,
 - Before any significant change is made in the services provided through a relevant children’s centre,
 - Before anything is done that would result in a relevant children’s centre ceasing to be a children’s centre.
- 7.2 A change in the manner of which, or location at which services are provided is treated as a change in services
- The local authority must have regard to what is set out in Sure Start Children’s Centres Statutory Guidance 2013. **This Guidance is in Appendix 8 and sets out the relevant legislation and the local authority’s duties in respect of children’s centres.**
- 7.3 It is for the Executive Member, as decision maker, to have due regard to the need to eliminate discrimination, harassment, victimisation and any other conduct prohibited under the Equality Act and advance equality of opportunity and foster good relations between persons who share a relevant characteristic and persons who do not share it.

8 Recommendations

Having considered the contents of this report and the attached appendices, the Executive Lead Member is asked to consider the following recommendations.

- **Recommendation 1** – That the Executive Lead Member for Children’s Services considers the outcome of the public consultation, staff and union consultation, any additional responses received outside the consultation period and the petitions submitted, as detailed in this report.
- **Recommendation 2** – That the Executive Lead Member for Children’s Services agrees to the proposal to develop a new integrated Family Support Service for families with children aged 0–19 years (up to 25 for young adults with learning difficulties and/or disabilities), as set out in this report, having regard to the necessary human resource implications and particularly the restructuring and reduction in the workforce.
- **Recommendation 3** – That the Executive Lead Member for Children’s Services, having taken account of the responses to the consultation and the Equality Impact Assessment, agrees to reduce the number of designated children’s centres from 54 to 11, by closing buildings listed in **Appendix 5**.

CORPORATE OR LEGAL INFORMATION:**Links to the Corporate Strategy**

Hampshire safer and more secure for all:	yes
Maximising well-being:	yes
Enhancing our quality of place:	yes

Other Significant Links

Links to previous Member decisions:		
<u>Title</u>	<u>Reference</u>	<u>Date</u>
Transformation to 2017 - Revenue Savings Proposals	6889	16 September 2015
Medium Term Financial Strategy Update and Transformation to 2017 Savings Proposals	6920	5 October 2015
Direct links to specific legislation or Government Directives		
<u>Title</u>	<u>Date</u>	
¹ Professor Eileen Munro, The Munro review of child protection: final report – a child-centred system, Department for Education, 2011; www.gov.uk/government/publications/munro-review-of-child-protection-final-report-a-child-centred-system		
² https://www.gov.uk/government/publications/childrens-centre-inspection-handbook-for-inspections-from-april-2013 (page 42).		
³ Sure Start Children’s Centres statutory guidance, April 2013, Dept for Education		
⁴ See “Disability Facts and Figures” 16 January 2014 www.gov.uk (https://www.gov.uk/government/publications/disability-facts-and-figures/disability-facts-and-figures#fn:3)		
⁵ See “Persistent Poverty in the UK and EU, 2008-2013”, 20 May 2015 (http://webarchive.nationalarchives.gov.uk/20160105160709/http://www.ons.gov.uk/ons/rel/household-income/persistent-poverty-in-the-uk-and-eu/2008-2013/persistent-poverty-in-the-uk-and-eu--2008-2013.html)		
⁶ Annual Survey of Hours and Earnings (ASHE) - Office for National Statistics		

Section 100 D - Local Government Act 1972 - background documents

The following documents discuss facts or matters on which this report, or an important part of it, is based and have been relied upon to a material extent in the preparation of this report. (NB: the list excludes published works and any documents which disclose exempt or confidential information as defined in the Act.)

Document

Location

None

IMPACT ASSESSMENTS:

1. Equality Duty

- 1 The County Council has a duty under Section 149 of the Equality Act 2010 ('the Act') to have due regard in the exercise of its functions to the need to:
 - Eliminate discrimination, harassment and victimisation and any other conduct prohibited under the Act;
 - Advance equality of opportunity between persons who share a relevant protected characteristic (age, disability, gender reassignment, pregnancy and maternity, race, religion or belief, gender and sexual orientation) and those who do not share it;
 - Foster good relations between persons who share a relevant protected characteristic and persons who do not share it.

Due regard in this context involves having due regard in particular to:

- a) The need to remove or minimise disadvantages suffered by persons sharing a relevant characteristic connected to that characteristic;
- b) Take steps to meet the needs of persons sharing a relevant protected characteristic different from the needs of persons who do not share it;
- c) Encourage persons sharing a relevant protected characteristic to participate in public life or in any other activity which participation by such persons is disproportionately low.

Equalities Impact Assessment:

Equality Impact Assessment produced in full in section 5 of the report

2. Impact on Crime and Disorder:

Close alignment of Family Support Services with the Supporting Troubled Families Programme will support the achievement of positive outcomes for vulnerable children and young people and in turn for their communities through a reduction in anti-social behaviour.

3. Climate Change:

- 1 How does what is being proposed impact on our carbon footprint / energy consumption?
- 2 How does what is being proposed consider the need to adapt to climate change, and be resilient to its longer term impacts?
 - Not directly considered as part of this decision.