

REPORT FOR: **CABINET**

Date of Meeting:	19 February 2015
Subject:	Children and Families - Children's Centres
Key Decision:	Yes
Responsible Officer:	Chris Spencer, Interim Corporate Director of Children and Families
Portfolio Holder:	Councillor Simon Brown, Portfolio Holder for Children, Schools and Young People
Exempt:	No
Decision subject to Call-in:	Yes
Wards affected:	All
Enclosures:	Appendix 1 Consultation Analysis report Appendix 2 EqlA Appendix 3 EqlA information analysis Appendix 4 Letters from organisations responding to consultation Appendix 5 Petitions Appendix 6 Health analysis paper

Section 1 – Summary and Recommendations

This report sets out the proposals for the future model of Children's Centres in order to address proposed savings; it includes consultation feedback and analysis of impact on particular community groups. The report recommends one option, based on this analysis.

Recommendations:

Cabinet is requested to:

1. Note the outcomes of the Children's Centre consultation.
2. Subject to the overall Council budget approval at Full Council in February 2015, approve Option 3 as the preferred future model, namely:

Retain 2 Children's Centres at Cedars and Hillview that fulfils the statutory definition of Children's Centres.

Operate 8 "delivery sites" that will continue to offer access to some of the early childhood services on behalf of the 2 children's centres.

- a) Close St. Josephs Children's Centre.
- b) Close Whitefriars Children's Centre merging the services with Cedars and retaining Whitefriars as a delivery site.
- c) Close Kenmore Park Children's Centre and merge services with Hillview retaining Kenmore Park as a delivery site.
- d) Close Rayners Lane, Earlsmead, Vaughan, Roxbourne and The Pinner Centre, Children's Centres as delivery sites.
- e) Retain The Pinner Centre building as a community resource building.

Reason:

To ensure the sustainability of Children's Centres' services for the communities of Harrow within a reduced budget, whilst also addressing the Council's budget pressures.

Option 3 allows for the possibility of community-run projects, potentially offering:

- Greater opportunities for reaching those most in need of support
- Sustaining and increasing places for 2, 3 and 4 year olds
- A space for the Harrow Preschool Language unit to rent
- Social enterprise opportunities
- Expenses for the Pinner Centre building, with potential to support Health and PVI services to continue

Section 2 – Report

Introductory paragraph

1. There are proposed changes to the Children's Centres' model as part of Children's Services and specifically Early Intervention Service, linked to Harrow Council's challenge of delivering £83 million of cuts to its budget over the next four years.
2. The Council have already, at this time, and for this current level of savings required, considered and discarded, the option of moving to 1 core Children's Centre. The aim is to ensure the sustainability of Children's Centres' services for the communities of Harrow whilst also addressing the Council's current budget pressures. The belief is that Harrow can meet the statutory requirements to deliver Children's Centre services within a reduced budget.
3. The consultation outcome demonstrates strong opposition to closing Children's Centres. 69.95% of respondents strongly disagree or disagree with savings being made to Children's Centres budgets. 13.7% of respondents strongly agree or agree with savings being made through Children's Centres budgets.
4. Option 3 emerges as the option that users of centres, partners, staff and residents prefer if closure of some centres is necessary.

Background

5. The core purpose of Children's Centres (taken from Children's Centres statutory guidance, April 2013) is to improve outcomes for young children and their families, with a particular focus on families in greatest need of support in order to reduce inequalities in:
 - Child development and school readiness
 - Parenting aspirations and parenting skills
 - Child and family health and life chances
6. This contributes to local authorities fulfilling their wider duty to improve the well-being of young children in Harrow and to reduce inequalities. (Well-being in this wider context is defined by the Act as: physical and mental health and well-being; protection from harm and neglect; education, training and recreation; the contribution made by them to society; social and economic well-being.)
7. The guidance also describes another outcome as: families are able to access all the early childhood services they need through Children's Centres. Local authorities should consider how they can use their network of Children's Centres to the greatest effect through links with other services, including through links with midwifery, GP's and health visitors.

8. Long standing working partnerships with Health Visiting and Midwifery Services will allow positive outcomes from any necessary changes e.g. relocation of service delivery to an alternative Children's Centre location. Option 3 offers opportunity for minimal disruption to these service provisions. Consideration has been given to how any impact on Health delivery will be mitigated and the analysis is contained in Appendix 6.
9. There is a need to ensure that the Council's Children's Centres continue to provide universal and targeted services to meet the needs of the local communities and have the flexibility to respond to changes to promote a sustainable model.

Current situation

10. The current structure of Harrow's Children's Centres follows 2 previous reorganisations and is developed around 3 Children's Centre 'Hub' groups. These include 5 Children's Centres, with 11 'delivery points'.
11. The current reach for each group is:
 - Cedars Hub (including 5 sites): 2,805 children, 2,080 children from deprived areas
 - Hillview Hub (including 7 sites): 2,780 children, 1,985 children from deprived areas
 - Kenmore Hub (including 4 sites): 2,535 children, 1,650 children from deprived areas

Why a change is needed

12. Harrow Council has the challenge ahead of delivering £83 million of cuts to its budget over the next four years. The Draft Revenue Budget 2015-16 and Medium Term Financial Strategy 2015-16 to 2018-19 was approved by Cabinet in December 2014 which included savings proposals totalling £1.189m in respect of Early Intervention and Children's Centres services and management. These proposals for savings include changes to Children's Centres services which include closing some centres.
13. All 3 options proposed would offer the same level of savings totalling £1.189 million from the Children's Services budget.

Options considered

14. The Council has at this time, and for the current level of savings required, already considered, and discarded, the option of moving to 1 core Children's Centre. The aim is to ensure the sustainability of services for the communities of Harrow whilst also addressing the Council's budget pressures. Whilst there is a need to make significant

savings from front line services, it is believed that the statutory requirements to deliver services within a reduced budget can be met.

The three options proposed to meet the proposed budget savings and consulted on for the future of Harrow's Children's Centres were:

- Option 1: Retain 3 Children's Centres and 4 'delivery points'
- Option 2: Retain 3 Children's Centres and 6 'delivery points'
- Option 3: Retain 2 Children's Centres and 8 'delivery points'

These options were developed based on data used by Children's Centre managers and staff, together with feedback from our partners, staff, parents/carers and children. The Ofsted framework for Children Centre inspections recognises that can be delivered by a single centre, but with services delivered from satellite sites. The Children's Centre's leadership and management team will have overall responsibility for services delivered from external sites.

The Council also has the option to maintaining the current level of children's centres; however this will impact on the proposed budget. The Council's overall budget is being considered at February Cabinet, for recommendation up to full Council. If savings are not made from the children's centre budget, the Council will have to consider what alternatives are available to meet its anticipated budgetary shortfall. Alternatives could include cutting services elsewhere, use of reserves and increasing council tax. Information on these options are included in the budget report, which is being considered at the same Cabinet meeting as this report.

There are 3 approaches to the legal framework for inspecting Children's Centres; standalone, collaborative and group, Harrow Centres would have been inspected as 2 collaborative and 1 standalone; in the future they will be inspected as 2 standalones.

A standalone is where there is a 'Main' centre that has its own manager, has other places identified to provide services (delivery sites), and does not have another main centre within its organisation.

The inspection looks at access to services and activities by families through the main centre and the delivery sites; the services on offer; and the impact they have. It does not make separate judgements about the individual delivery sites.

Consultation information

15. The council consulted on the possibility of closing children's centres as part of the Take Part consultation. The result of this consultation was fed back to cabinet in December 2014 and can be viewed at: - <http://www.harrow.gov.uk/www2/documents/s118033/Appendix%206%20->

[%20Take%20Part%20feedback%20presentation.pdf](#). Following the Take Part consultation, it was considered necessary to carry out a specific consultation with stakeholders on the options around children's centres.

16. As part of Take Part, petitions were submitted, which are attached at Appendix 5. The Children's Centre petitions derived from the Take Part consultation.
17. Specific consultation took place between the dates Tuesday 11th November 2014 through to Sunday 4th January 2015. This included term time and school holidays as use of the centres differs during these periods.

There were many ways used to gain views:

- online survey at www.harrow.gov.uk/CCconsultation
- Fill in a paper copy of the survey, available at all Children's Centres
- Join the conversation on Facebook at www.facebook.com/harrowcc
- Drop in to one of 18 'Have Your Say' engagement events

The standard online platform the council uses for hosting surveys; Objective system – Have Your Say - was used to record all online and hard copy survey results.

The analysis of the consultation questions has been completed and is available at appendix 1.

18. A best practice EqIA stakeholder group was set up and met on 3 occasions with positive results in assessing the responses received to the consultation and therefore allowing intervention to support increased representation from underrepresented groups.
19. There were eleven questions consulted on to determine; which centres are usually used, the demography of those responding, the savings options, the option/s that meet the needs of the communities, meeting needs of the deprived areas, community projects, the preferred proposed option, the best option, the potential impact, proposed staffing and the proposed closures of centres. There was opportunity for any other comments to be offered. There is a belief that the petitions had an impact on the number of people completing the consultation survey. There was some confusion shared by residents about the 'Take Part' consultation as people informed that they had completed a survey and it then emerged that it was the 'Take Part' one and not the Children's Centre Have Your Say, therefore the results from both consultations should be taken into account.
20. The final report from the Have Your Say entry was created on 7th January 2015. The response was considered to be a 'good' level of response.
 - 504 Total respondents were entered into the online survey

- 271 of these respondents completed these via a paper survey
 - 16 emails
 - 7 phone calls
 - 15 letters from head teachers, school governors, preschools managers, LSCB chair, Clinical Commissioning Group, North West London Health Trust
 - 2 parent led petitions and 1 school/governor led petition with a total of 1,065 signatures
 - Consultation event notes were collated
 - Quantitative question responses and interpretation of the data
 - Full feedback paper available.
21. The response via the Have Your say Objective system has offered statistical, graphical and narrative feedback to support decision making. The levels of response differed for each question. Feedback was received which indicated that for some of the population of respondents the questions were not clear to them as individuals and some suggested that they did not have access to enough information to make a response, or in some cases an informed response.
22. The paper supporting the consultation was a separate paper to the survey and one could consider that some people were not referring to this when answering the questions e.g. Response: *'it is difficult to comment without knowing the current structure'*, and yet the current structure was within the paper.
23. The EqIA scrutiny demonstrates that our engagement with different groups of users was satisfactory or above.
24. The overall strong outcome in response to the future preferred model was that if Children's Centres are required to close then option 3 was preferred to effectively meet needs.
(Amended figures)

Option 1

- **26.39% strongly agree or agree**
- **27.78% strongly disagree or disagree**
- 33.54% either did not respond or 'don't know'
- 12.30% were neutral

Option 2

- **32.34% strongly agree or agree**
- **21.63% strongly disagree or disagree**
- 33.73% did not respond or 'don't know'
- 12.30% were neutral

Option 3

- **42.46% strongly agree or agree**
- **16.27% strongly disagree or disagree**
- 28.57% did not respond or 'don't know'
- 12.70% were neutral

25. Seventy five additional comments were received related to this question and there were no comments that favoured fully the preferred option 3 instead there were a number of comments that had the following themed points:-

'I think closing any of the centres will mean some families in need simply won't be able to access these essential services, but of all the options I believe option 3 to be the best choice for families within the borough'.

'I feel the services provided at the moment only just meet the needs of the community'.

Full responses to all questions are available via the objective report at:-
http://harrow-consult.limehouse.co.uk/public/cs/childrens_centres/childrens_centres_consultation
and further responses are included in the analysis report in appendix 1.

Respondents

26. Data

- 66.87% of respondents were parent /carers of a child under 5 years old
- 8.73% were parents/carers of a child aged 5-12 years
- 1.98% were parents/ carer of a child aged 13-17 years
- 16.87% were 'other' which includes:- staff, partners from health, midwifery, health visiting, PVI sector, therapy services, G.P's, CCG, LNWHT, schools, Head Teachers, Governors, nurseries, preschools, L.A officers, adult learners, traveller liaison officer, residents, grandparents.

The following themes emerged from the comments in the consultation responses:

- Impact of the decision on other early years providers, including private nurseries and childminders;
- Services to over 5's – whilst there were mixed views, a number of respondents felt that if services had to be cut, then it was reasonable to cut services for over 5 year olds, as these children attend school. After school support was considered important as well as services for children with SEN;
- Impact on families – there was a high level of concern about the impact on children and families, including lower levels of development, higher rates of post natal depression and isolation and increasing reliance on other statutory agencies;
- Distance – some respondents commented that some centres were quite closely located, however a number of respondents commented that distance would hinder their ability to attend centres, as they would not be within walking distance;
- Services offered – there were differing opinions between having fewer centres offering more services and current services being

over capacity. Using the buildings for other uses and charging for services were put forward as options for consideration.

- SEN – there were comments that children with SEN should be protected and that services offered to these children and their families were vital.

Letters were received from the Local Safeguarding Children Board and North West London Health Trust, Clinical Commissioning Group, plus a letter which was submitted by 10 different schools. These are attached at Appendix 4.

There were 3 petitions received (Appendix5) with a total of 1,065 signatures, 2 were 'Save Harrow's Children's Centres' and the other stated:-

'We the undersigned petition Harrow Borough Council to maintain the current levels of service provided by the Children's Centres. These are key to supporting children's development across the borough. Failing to maintain this service will have a long term impact on individual children and their families. The loss of this service will also have long term financial implications for Harrow Council. We think that this should be prioritised at the expense of other areas of the council's budget, outside of Children's Services'.

Women

Women are more likely to be affected than men as women are more often the main carer of children, and maternity services and breastfeeding services are provided through centres. The intention with option 3 is that these services are not affected, instead if required in the case of one centre for the service to be relocated.

Women are well represented as users of Children's Centres, which is an expectation as prenatal services are provided, and mothers are registered as main carers.

73.21% of respondents stated that they were women. 6.55% of all parents completing the survey were lone parents, a higher proportion than expected as data shows that there are 3.3% of all parents accessing centres are lone parents.

There are no specific services for lone parents, universal and specialist services are accessed by lone parents. Views of lone parents were represented well in respondents.

There are some specialist interventions and services for teenage parents these are not affected in the changes whichever option is chosen. Teenage parents were well represented in the survey. 4.56% of all parents completing the survey were teenage parents, a higher proportion than expected as data shows that there are 0.5 % of all parents accessing centres are teenage parents.

Children with SEN and children with disabilities

The centres where there are specific facilities and services for children with SEN and children with disabilities are retained in option 2 and 3 with option 3 offering maximum opportunity to meet the needs of these children. Therapy services and interventions are retained fully and have opportunity for enhancing in option 3.

Children with SEN and children with disabilities are welcome and integrated at all services in centres and clearly respondents considered that the more places for services to be provided the least impact this would have on communities including those with specific needs.

Travel

Option 3 maximises the opportunity to reduce the impact of accessing relocated services as the retention of 10 places to provide services gives greater choice for location and less changes to current delivery of services than option 1 or 2 offer.

It is clear that there will be a need for some families to travel further to access services, the centres and delivery sites have been chosen to reach the highest level of families in deprived areas; retain health service access, and maximise space and facilities available within them.

Work has been undertaken to explore bus and train travel facilities in relation to the locations of the centres and delivery sites.

Recommendations

27. It is recommended that cabinet approve option 3 in its entirety which is:
 - 2 Children's Centres: Cedars and Hillview as Full Core Offer Centres
 - 8 Delivery sites: Kenmore Park, Gange, Chandos, Stanmore Park, Whitefriars, Grange, Elmgrove and Pinner Wood that will continue to offer access to some early childhood services on behalf of Cedars and Hillview
 - the proposed staffing structure
 - an additional building retained; The Pinner Centre, for community run projects and health services.

28. The reason for approving option 3 is that the option will maximise the opportunities to:
 - Respond to the voice of the people contributing to the Children's Centres Have Your Say consultation

- Respond positively to the views they expressed that it is most able to meet the needs of the communities in Harrow
- Reach 7,115 children under 5 years with 5,715 of these from the deprived areas of the borough
- Maintain delivery of core services and the majority of wider services currently provided by the 5 existing Children's Centres
- Improve targeting of services for those most in need
- Maintain delivery of midwifery, health visiting services at 2 centres and 5 delivery points
- Relocate some services to 3 other delivery points
- Continue delivery of speech and language therapy services
- Relocate some services at closed sites to different centres
- Offer outreach services to additional venues
- Increasing our current support to the private, voluntary and independent sectors
- Sustain a preschool provision for 2, 3 and 4 year olds at Cedars, Gange and Stanmore Park
- Increase the number of pre-school places for vulnerable children and 2 year olds
- Offer opportunities to develop community-run projects at Pinner Centre
- Ensure that supervised contact can be provided without incurring additional costs to other children's services departments e.g. targeted services / looked after children
- Balance the pressure on the Council to reduce its budget with the need to provide services to families through Children's Centres.

Implications of the Recommendation

Considerations

29. There is a need to ensure that the Council's Children's Centres continue to provide universal and targeted services to meet the needs of the local communities and have the flexibility to respond to changes to promote a sustainable model; and are able to meet increasing pressures, such as:
- Unavoidable financial pressures arising from reduced public sector funding
 - The need to improve outcomes for children in health, well-being, school readiness and end of foundation stage results
 - Increase in demand to support parenting aspiration and parenting support
 - Demographic changes including the increase in under-fives and child population and an increase in ethnic groups requiring particular types of services
 - Higher levels of deprivation and an increase in the numbers of children eligible for Free School Meals
 - Offering 2, 3 and 4 year olds access to education
 - An increase in children with special educational needs and children with disabilities

30. The recommended option places centres in the best position to respond to and minimise the impact of reorganisation despite the savings. This option offers greatest opportunity to meet statutory requirements and provide a wide range of more localised universal and targeted services, targeted to meet the needs of the communities in Harrow. The option also reduces the impact of relocation of health services and offers good opportunity for sustaining partnership working.
31. The proposed reach to communities that are in need of support has been devised and the demography data for each Hub will need to be reviewed, this implies that there will be a learning curve for the managers and staff at centres.
32. Centres managers will need to become even more targeted in their approach to planning provision, whilst at the same time maintaining important services, both for families most in need and the wider community.
33. Services will be provided through a new staff structure; streamlining management and increasing staff providing services directly for children under 5 years old and their families. The new structure offers staff new opportunities and also means that there will be potential redundancies.
34. Government frameworks for Children's Centres recognise that services can be delivered by single centres under one management team, with services being available from delivery sites. When the standalone centres are inspected, the services delivered at the satellite sites will be considered at the same time.
35. Option 3 supports best the inspection process and the opportunity to have good and outstanding outcomes from inspection. There will be an 'at risk' period through the reorganisation implementation; however this will be managed by following the Protocol for Managing Organisational Change. Further detail is set out in the staffing/workforce section.
36. The Hub approach is already embedded in the Harrow Children's centre offer; working as a network, sharing expertise, knowledge and having a considered coordinated, joined up consistent approach. This has supported the previous 2 reorganisations therefore implementing the new model will be managed by individuals who are practiced at doing so, reducing negative implications of change.
37. Key considerations have been:
 - Reducing the number of Children's Centres which offer all core services
 - Focusing on services for children under 5 years old
 - Reducing the number of senior roles
 - Reviewing our data to determine the borough's most deprived areas
 - Reducing services to children over 5 years old (school age)

- Reviewing the delivery of services, targeting our provisions for children most in need
- Increasing links to other areas of Children's Services, together with the private, voluntary and independent sectors. This includes exploring opportunities for community-run projects.
- The need for future conversation with schools related to the provision of after school clubs and holiday scheme provision. It is the intention that a piece of work is undertaken by the council officers in response to this need.

Staffing/workforce

38. The workforce will be affected by the proposals with potential redundancies, potential reduction in some posts and potential increase in other posts. There are some current vacancies that support the potential impact on all staff.
39. Staff will be supported through any necessary change process and the protocol for Managing Organisational Change will be implemented at all stages.
40. The proposed staff structure (full time equivalents) for this option would be:
- 2 Hub Managers
 - 3 Project and Network Coordinators
 - 10 Practitioners
 - 4 Educators
 - 3.5 Cleaners
 - 1.5 staffing cover

Plus: 1 Service Manager shared across the Early Intervention Service (Early Intervention Teams and Children's Centres).

The current staffing structure (full time equivalents)

- Service Manager
- 3 Hub Managers
- 2 Coordinators
- 4 Hub and Spoke Coordinators
- 1 Project and Network Coordinator
- 10 Practitioners
- 6 Educators
- 1 Handyperson/caretaker
- 2.5 Cooks/Assistant cooks
- 6 Cleaners/Assistant cleaners

Performance Issues

41. There are key partners that will be affected by the decision. Health Visiting and Midwifery services are both affected. There will be the need for reorganising some health delivery; the impact has been mitigated as

far as is possible by scrutiny of data, a health impact paper and relocation ideas developed.

42. Children's Centres are subject to inspection by Ofsted, and the DfE must be notified of any changes, the current Children's Centre Ofsted inspection approach will continue to work well within the proposed reorganisation, as Hubs with full core offer centres and delivery sites are being retained. There will be an 'at risk' period whilst changes are implemented as managers will need to up skill and learn about the different communities in Harrow that they will be serving. Relocation of staff and relocation of services have disruptive influences and this will require positive and timely attention to reduce any potential impact at inspection time.
43. Data and reach figures and performance measures will have to be adjusted and changes put in place to evidence the continued impact. This will need to be planned for to secure success at inspection times. Children's centre staff and the performance intelligence team have previously successfully made changes through 2 other reorganisations.

Environmental Implications

44. There are no environmental implications

Risk Management Implication

Claw back of capital expenditure

45. One centre, St. Josephs, and 4 delivery sites, Pinner, Rayners Lane, Roxbourne and Earlsmead, that are proposed for closure were originally developed with capital funding from the Department for Children, Schools and Families (now Department for Education). The 2 centres due to merge, Whitefriars and Kenmore Park were developed with capital funding from the department of education. The DfE has a right to clawback funding of an asset that is no longer used for the purpose for which it is given. One of the centres and three of the delivery sites proposed to be closed are within school sites and the Council is not proposing to dispose of the site for a capital sum. The centres will become available for use by the schools and will be considered for school place planning purposes when considering utilisation of school land in order to meet demand for school places.

Risk included on Directorate risk register?

No, as it would have pre-empted the outcome of the consultation, however depending on decision of members it will be included in the future iteration of the risk register.

Separate risk register in place? No

Legal Implications

The Childcare Act 2006 sets out the statutory duties for local authorities in relation to childcare and children's centres. The following sections are particularly relevant:

Section 1 – duty to improve the well-being of young children and reduce inequalities.

Section 3 – duty to make arrangements to secure that early childhood services are provided in an integrated manner to facilitate access and maximise benefits to young children and their parents.

Section 4 – duty on commissioners of local health services and Jobcentre Plus to work together with local authorities in their arrangements for improving the well-being of young children and securing integrated early childhood services.

Section 5A – arrangements to be made to ensure sufficient children's centres to meet local need.

Section 5C – duty to ensure each children's centre is within the remit of an advisory board.

Section 5D – duty to ensure there is consultation before any significant changes are made to children's centre provision in their area.

Statutory guidance in relation to children's centres was published in April 2013. This confirms that there is a presumption against closure of children's centres and when consulting on significant changes, everyone who could be affected should be consulted, including local families, users of the centres, children's centre staff, advisory board members and service providers. Particular attention should be given to ensuring disadvantaged families and minority groups participate in the consultation. Decisions following consultation should be announced publicly and give reasons for the decision.

There is a statutory duty to consult. As a matter of public law consultation must be carried out fairly. In general, a consultation can only be considered as proper consultation if:

- Comments are genuinely invited at the formative stage;
- The consultation documents include sufficient reasons for the proposal to allow those being consulted to be properly informed and to give an informed response;
- There is adequate time given to the consultees to consider the proposals; and
- There is a mechanism for feeding back the comments and those

comments are conscientiously taken into account by the decision maker / decision making body when making a final decision.

When making policy decisions, the Council must take account of all relevant considerations; including importantly the duty to give due regards to the public sector equality duties and in particular any potential differential and/or adverse impact. When consulting on proposed service cuts or closure of services, it will not be unusual for the majority of respondents to be against the proposals. These views must be taken into account, however this is not a simple headcount of those in favour and those against proposals and even in situations where the majority of respondents are opposed to the proposals, the Council may decide to implement this if there are good policy reasons for doing so. The Council must have regard to and weigh up all relevant factors, including financial resources, alternative options, equality impact and consultation responses, which in the context of the function being exercised; it is proper and reasonable for the Council to consider.

The guidance confirms that children's centres should have a named health visitor and access to a named social worker as a minimum. The guidance recommends that children's centres are commissioned as part of local authorities' wider early intervention strategy and strategy for turning around the lives of troubled families.

Children's centres are subject to Ofsted inspection. From April 2013, inspections are organised according to how local authorities deliver their children's centres.

Each Children's Centre must have an advisory board, however centres clustered together can share a board. The board must include representatives from each Children's Centre within its remit, the local authority and parents and prospective parents in the area. Other representatives should be included on the board as set out in the guidance.

Financial Implications

The Draft Revenue Budget 2015-16 and Medium Term Financial Strategy 2015-16 to 2018-19 was approved by Cabinet in December 2014. The Final Revenue Budget 2015-16 and Medium Term Financial Strategy 2015-16 to 2018-19 is due to be considered at Cabinet at the same meeting that this matter is being considered. The budget includes savings proposals totalling £1.189m in respect of Early Intervention and Children's Centres services and management. If Cabinet agree the budget, it will be recommended up to Full Council for approval. The budget is not agreed until it is approved by Full Council. This report is subject to approval of the budget and any decision to agree an option will only be implemented if the reduced budget for children's centres is approved by Full Council. All three options proposed would achieve savings totalling £1.189m.

Equalities implications / Public Sector Equality Duty

The Council is required under the Equality Act 2010, to have due regard to the need to eliminate discrimination, harassment, victimisation and any other conduct that is prohibited by or under the Act; advance equality of opportunity between those with a protected characteristic and those without; promote good relations between those with a protected characteristic and those without. The relevant protected characteristics are age, disability, gender reassignment, pregnancy and maternity, race, religion or belief, sex, sexual orientation. It also covers marriage and civil partnership with regard to eliminating discrimination.

An initial and full equalities impact assessment has been completed and kept under review during the consultation process. The full EqIA can be found at Appendix. The children's centres are more likely to be used by children aged 0-5, parents of those children, particularly women and by pregnant women. Marital status may be relevant as many parents receiving support from the centres are lone parents, although there is currently no data on marital status. The response to consultation shows that the majority of parents responding had children aged 0-5. Any changes to children's centres are therefore more likely to impact on these groups than other groups. In addition specific services for children over 5 years will cease to be provided by Children's Centre staff and an alternative provider will need to be sourced. A number of respondents also raised concern about reducing services to children with SEN or disabilities and the impact issues raised by users related to travel e.g. proximity of centres to their home address or the school where a sibling attends. There is not an intention to reduce services for SEN children under five years. 0.6% of all children accessing centres parents have stated they have a disability. 14 individuals indicating they have a child with disabilities have responded to the consultation which is 6% of all adults/parents that have completed the survey (based on 230 responses). This is a higher proportion than the 0.6% of children with disabilities seen on eStart which indicates they have been fairly represented on the consultation responses so far.

The centres to continue to provide services were chosen to ensure that services continue to be targeted at the most vulnerable families in the borough. This approach ensures that reduced resources are focused on those who most require support. This is an attempt to reduce inequality, by targeting the most vulnerable at an early age, with a key objective to reduce inequality in educational attainment and health and wellbeing. Ensuring support to increase employment opportunities for parents will support a number of protected groups. Improving the targeting of services will have a positive impact on those families most in need, which impacts on the protected characteristics of age, gender, disability and potentially marital status. Whilst reducing the opening hours of some centres and closing some of the existing centres has a potentially negative impact on users of those centres, services will continue to be offered from centres across the Borough, and other centres in the locality will have existing opening hours, which should mitigate any negative impact.

In option 3 the outcome of the EqIA demonstrates that following careful considerations, scrutiny and mitigation the potential protected characteristic that proposals could have a disproportionate adverse impact on is 'age', more

specifically school aged children; over the age of five years. The EqlA action plan shows the approach to reduce the impact. Appendix 3.

The EqlA outcome demonstrates that minor adjustments to remove / mitigate adverse impact or advance equality have been identified and actions have been proposed to take to address this in an Improvement Action Plan.

Full details of the EqlA and the EqlA analysis by the best practice stakeholder group are provided as enclosures.

Council Priorities

The Council's vision:

Working Together to Make a Difference for Harrow

All four of the administration priorities are incorporated, specifically and strongly as the decision has an impact for the vulnerable, families and communities.

- **Making a difference for the vulnerable**
- **Making a difference for communities**
- **Making a difference for local businesses**
- **Making a difference for families**

Section 3 - Statutory Officer Clearance

Name: Jo Frost	<input checked="" type="checkbox"/>	on behalf of the Chief Financial Officer
Date: 2 February 2015		
Name: Sarah Wilson	<input checked="" type="checkbox"/>	on behalf of the Monitoring Officer
Date: 1 January 2015		

Ward Councillors notified:	NO, as it impacts on all Wards
EqIA carried out:	YES
EqIA cleared by:	EqIA Equality Assurance Group

Section 4 - Contact Details and Background Papers

Contact: Hilary O'Byrne ccprojectwork@harrow.gov.uk

Background Papers:

Have Your Say full report

http://harrow-consult.limehouse.co.uk/public/cs/childrens_centres/childrens_centres_consultation

Children's Centre consultation paper

<http://www.harrow.gov.uk/www2/mgCalendarMonthView.aspx?GL=1&bcr=1>

Call-In Waived by the Chairman of Overview and Scrutiny Committee	NOT APPLICABLE <i>[Call-in applies]</i>
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