

CHILDREN AND YOUNG PEOPLE OVERVIEW AND SCRUTINY COMMITTEE

1 AUGUST 2017

TRANSFORMATION OF EARLY HELP SERVICES – OUTCOME OF THE CONSULTATION

Report from: Ian Sutherland, Director of Children and Adults Services

Author: Helen Jones, Assistant Director, Commissioning, Business and Intelligence

Summary

This report provides the Children and Young People Overview and Scrutiny Committee with feedback from the Transformation of Early Help Services' public consultation carried out between 31 May and 12 July 2017.

1. Budget and Policy Framework

- 1.1 The Council priority of 'supporting Medway's people to realise their potential' leading to resilient families has a focus on strengthening the Early Help offer.
- 1.2 The legal and policy framework under which Children's Centre services are provided is the Childcare Act 2006 which places a duty on local authorities to secure early childhood services to improve the well-being of young children in their area and reduce inequalities between them; and to ensure that there are sufficient Children's Centres, so far as reasonably practicable, to meet local need.
- 1.3 The Education and Skills Funding Agency (ESFA) has introduced new directives requiring local authorities to pass a higher proportion of government funding to nursery and childcare providers. This means that, while Government support for childcare is increasing, a smaller proportion of the funding is available to the Council for other early years services including Children's Centres.
- 1.4 The budget for 2017-18 was agreed by full Council on 23 February 2017.
- 1.5 This item has been circulated separately to the main agenda. The Chairman of the Committee is of the opinion that it should be considered at this meeting as a matter of urgency as permitted under section 100B of the Local

Government Act 1972 to enable the Committee's comments to be submitted to the Cabinet before it makes any decisions on the future of Early Years provision on 8 August 2017.

2. Background

- 2.1 Changes in national policy and funding arrangements for local government, including Early Years provision, require the Council to review its offer, including the number of Children's Centres and the scope of services provided. In meeting its statutory responsibilities for early childhood services and reducing inequality, it was proposed that the Council refocuses its resources to target children and families in most need and takes the opportunity to better integrate the range of services available to children and families, and to provide a model that offers more outreach into the community from those who need it the most.
- 2.2 The Transformation of Early Help Services paper presented at Cabinet on the 9 May 2017 recommended a transformation of Early Help services, including Children's Centres, to maximise opportunities for Children's Centres to work collaboratively with Early Help services and alongside schools and early years providers in the community.
- 2.3 The Council is obliged to consult widely prior to making any significant changes to Children's Centres. Taking into account budgetary pressures and implementation timelines it was, therefore, recommended to Cabinet that a public consultation took place for a period of six weeks, with a wide range of opportunities for parents and service users to give their views in person, in writing and online during that period. Cabinet agreed with the recommendation to carry out a public consultation. A staff consultation also took place and staff have submitted a counter proposal for the staffing structure which will be considered and determined in accordance with the Council's Organisational Change Policy (see paragraph 8.5).

3. Options

- 3.1 Medway Council undertook a consultation exercise between 31 May 2017 and 12 July 2017 on proposals to transform early help services for families of children and young people aged 0 to 19 years by providing a broader range of services through Children and Family Hubs (designated Children's Centres) and satellites, rather than the 0-5 year age range separately.
- 3.2 The consultation sought:
 - Opinions on the suggested proposals
 - Views on expanding the service age range from 0-5 years to 0-19 years
 - Options for delivering the proposed service
 - Alternative suggestions about services and how they could be provided within the budget envelope
 - Other comments and suggestions.

4. Advice and analysis

- 4.1 Appendix A provides full detail of the outcome of the public consultation
- 4.2 Taking into account the analysis of the consultation exercise, work is currently underway to formulate a recommended way forward and the associated business case, in consultation with the Portfolio Holder for Children's Services (Lead Member), for consideration by the Cabinet at its meeting on 8 August 2017. The views of this Committee will be reported to the Cabinet.

5. Consultation

- 5.1 The consultation included ten public consultation meetings, five meetings with professional representatives from education and health, a direct e-mail address for comments, 19 meetings at existing centres with staff and users and an online and paper based survey.
- 5.2 The consultation was widely advertised in the local media and in libraries and community hubs.
- 5.3 The website and intranet pages received just under 2,500 views, of which 1,867 were unique. On average, visitors spent just under 5 minutes on the pages. There were also eight cluster meetings with Children's Centre staff, who have produced a formal response.
- 5.4 89 people (excluding consultation staff) attended the 10 public meetings. Some 14 people attended more than one session; with two attending four sessions.
- 5.5 The five meetings with professional partner organisations were held at Gun Wharf. Two meetings included representation from Medway Maritime Hospital, Medway Community Health, Public Health, Early Years and Commissioners. However, representatives from health also attended all the other professional partner meetings as well.
- 5.6 A further session was held with Clinical Commissioning Group (CCG) partners. One meeting had an education focus, attended by 11 head teachers or their representatives from the schools where the centres are located.
- 5.7 There was also a session with 27 Early Years Private and Voluntary Independent (PVI) provider representatives.
- 5.8 Formal staff consultation started on 13 June and ran for 37 days. Two formal meetings were held with all staff and Trade Unions at Lordswood Leisure Centre. In addition, 3 informal consultation meetings were held with staff on 29 June.
- 5.9 A petition with 1,274 signatures was presented at Council on 20 July 2017 calling on '...Medway Council to stop the closure of 19 Sure Start Centres'. This is currently being dealt with in accordance with the Council's Petition Scheme. A response was sent out by the Director of Children and Adults Services to the Lead Petitioner on 25 July 2017 and should the Lead

Petitioner be dissatisfied with the response, the matter will be referred to this Committee for further consideration.

6. Risk management implications

- 6.1 Any risk management implications of the implementation of the transformation of Early Help Services will reported to Cabinet on 8 August 2017.

7. Financial implications

- 7.1 Changes to Education and Skills Funding Agency (ESFA) regulations introduced from April 2017 require local authorities to pass to nurseries, schools and private providers a minimum of 93% of the Early Years block of the Dedicated Schools Grant (EY DSG), leaving only 7% which can be retained by local authorities. The minimum pass-through percentage will increase to 95% from April 2018.
- 7.2 The 2016/17 Early Years budget retained over 15% of the EY DSG to run central services and the 2017/18 budget transferred £1.343m of Early Years spend back to the General Fund as a pressure, in order to reduce the centrally retained element of the EY DSG block to 7%.
- 7.3 The overall 2017/18 budget for the Early Years services is £16.715m, of which £15.842m represents DSG funded spend and of this 93%, or £14.733m will be passed to providers. This leaves the centrally retained spend within the Early Years division, including Children's Centres and corporate recharges, at £1.982m.
- 7.4 The current service structure would cost £3.584m, however savings in response to the capping of the DSG reduced this figure to the £1.982m referred to above. This included the one off use of £431,000 of DSG reserves and £215,000 representing an estimate of the part year effect of a review of Children's Centre.
- 7.5 This service review is expected to deliver savings equivalent to £1.6m which includes the planned additional capping when the centrally retained spend cap reduces from 7% to 5%.

8. Legal implications

- 8.1 Legislation about early years and Children's Centres is contained in the Childcare Act 2006 (as variously amended by subsequent Acts including the Apprenticeships, Skills, Children and Learning Act (ASCL) 2009, Education Act 2011, and Children and Families Act 2014). This refers to the following sections of the Childcare Act:
- Section 1: Duty on local authorities to improve the well-being of young children in their area and reduce inequalities between them
 - Section 3: Duty on local authorities to make arrangements to secure that early childhood services in their area are provided in an integrated manner

in order to facilitate access and maximise the benefits of those services to young children and their parents

- Section 5A: Arrangements to be made by local authorities so that there are sufficient Children's Centres, so far as reasonably practicable, to meet local need.
- Section 5D: Duty on local authorities to ensure there is consultation before any significant changes are made to Children's Centre provision in their area.

8.2 The decision as to what would constitute "sufficient" Children's Centres is for the local authority to assess, and is not determined in statute or guidance.

8.3 The local authority is responsible for determining the duration and scope of the consultation before significant changes are made according to local circumstances.

8.4 The scale of the financial savings required means that any of the range of options for future services is likely to require a significant reduction in the number of early years and Children's Centre staff employed by Medway Council.

8.5 The Organisational Change Policy sets out Medway Council's approach to dealing with potential redundancies, team/service and organisational changes, which would have a material impact on individual's roles and/or responsibilities.

9. Recommendation

9.1 It is recommended that the Children and Young People's Overview and Scrutiny Committee notes the outcome of the consultation and refers any comments to Cabinet.

Lead officer contact

Helen Jones, Assistant Director, Commissioning, Business and Intelligence, Gun Wharf, T: 01634 334049, E: helenm.jones@medway.gov.uk

Appendices

Appendix A - Public Consultation – Summary of Responses July 2017

Background papers

None

**MAKE
YOUR
VOICE
HEARD**



Transformation of early help services

Public Consultation

**Summary of Responses
July 2017**

Medway
Local Authority
Serving You

1. Background

- 1.1 Medway Council provides a wide range of services that support children and families, offering early help to prevent escalation of need to statutory social care services.
- 1.2 Medway Council undertook a consultation exercise between 31 May and 12 July 2017 on proposals to transform early help services for families of children and young people aged 0 to 19 years by providing a broader range of services through Children and Family Hubs (designated Children's Centres) and satellites sites, rather than the 0-5 year age range separately. Due to the reduction in budget, there will inevitably be fewer universal services are more targeted to families in most need.
- 1.3 The consultation sought:
 - Opinions on the suggested proposals
 - Views on expanding the service age range from 0-5 years to 0-19 years
 - Options for delivering the proposed service
 - Alternative suggestions about services and how they could be provided within the budget envelope
 - Other comments and suggestions

2. Consultation Process

- 2.1 A wide range of methods were used to communicate and engage local people in the consultation. These included:
 - A large number of public meetings and engagement events
 - Advertising in the local media
 - Promotion in our Children's Centres, libraries and community hubs
 - Information leaflets
 - A dedicated section on our website and intranet
 - An online and paper copy of the questionnaire (1 850 paper copies distributed by hand)
 - Electronic newsletters to more than 18 000 recipients
- 2.2 The consultation included ten public consultation meetings, five meetings with professional representatives from education and health, a direct e-mail address for comments, 19 meetings at existing centres with staff and users and an online and paper based survey.
- 2.3 There were also eight cluster meetings with Children's Centre staff, who have produced a formal response.
- 2.4 89 people (excluding consultation staff) attended the 10 public meetings. Some 14 people attended more than one session; with two attending four sessions.

Attendance details at Public Meetings

Date/Location	Public	Employees	Councillors	Total
12/6 White Road	7			7
12/6 Deanwood	16	4		20
14/6 Wainscott	4	1		5
16/6 Parkwood	1	2	2	5
16/6 Gun Wharf	9	1	1	11
19/6 High Halstow	3			3
20/6 Brompton	8	2	2	12
22/6 Oaklands	12	3		15
22/6 Borstal	4		2	6
28/6 Grain	14	4	1	24
Overall Total	78	17	8	103

- 2.5 The five meetings with professional partner organisations were held at Gun Wharf. Two meetings included representation from Medway Maritime Hospital, Medway Community Health, Public Health, Early Years and Commissioners. However, representatives from health also attended all the other professional partner meetings as well. A further session was held with Clinical Commissioning Group (CCG) partners. One meeting had an education focus, attended by 11 headteachers or their representatives from the schools where the centres are located. There was also a session with 27 Early Years Private and Voluntary Independent (PVI) provider representatives.
- 2.6 The meetings at the 19 children's centres were attended by 295 people, an average of 16 per session, as set out in the table below. In total 69 burning issues, comments and questions were identified.

Attendance at Children's Centre Sessions

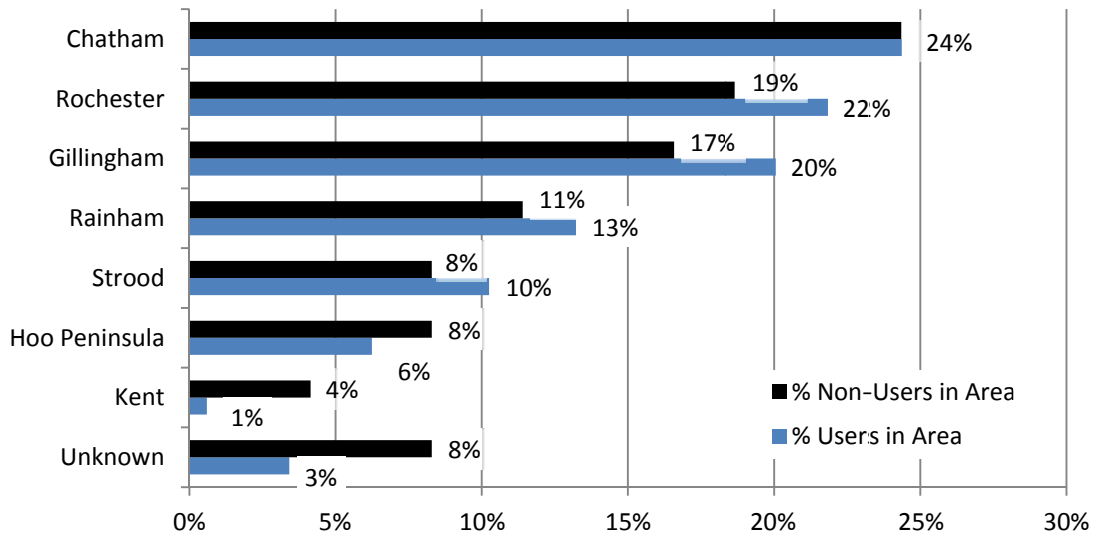
Location	Date/Time	Users
All Saints	6 June, 10-11am	15
Brompton	6 June, 2-3.30pm	9
St Peter's Church Hall (St Margaret's at TT)	7 June, 10-11am	31
Delce	7 June, 2-3pm	21
Lordswood	9 June, 9.30-10.30am	20
Hand in Hand	9 June, 1.30-3pm	15
Deanwood	12 June, 10-11.30 am	14
Gun Lane	12 June, 1.30-2.45 pm	22
Saxon Way	13 June, 10-11am	10
Woodlands	13 June, 2-3pm	28
Riverside	14 June, 9.30-10.30am	26
Kingfisher	14 June, 12.30-2pm	15
Cliffe Woods Primary School (Peninsula)	15 June, 9.30-10.30am	15
Wayfield	15 June, 1.30-2.30pm	4
Oaklands	16 June, 9.30-10.30am	17
Temple Mill	16 June, 1-3pm	9
Cuxton Library (Bligh)	19 June, 10-11am	10
Burnt Oak	20 June, 9.20-10.20am	10
Miers Court	20 June, 1.30-2.30pm	4
TOTAL		295

- 2.7 The online pages received just under 2 500 views, of which 1 867 were unique. On average, visitors spent just under 5 minutes on the pages.
- 2.8 Responses were received from individuals and organisations and a mix of users and professionals. Some responses were submitted before the formal survey period. This includes comments from staff, trades unions, councillors and local MPs. In total 41 e-mails and 10 letters were received.
- 2.9 Formal staff consultation started on 13th June and ran for 37 days. Two formal meetings were held with all staff and Trade Unions at Lordswood Leisure Centre. In addition, 3 informal consultation meetings were held with staff on 29 June.
- 2.10 The survey included a number of open questions, including the ability to comment on multiple choice and ranking elements. All public meetings were recorded and the transcripts, together with the survey comments, have been analysed to provide qualitative and, to a more limited extent, quantitative data.
- 2.11 A number of the public meeting attendees and some respondents expressed concern about the quality of the survey and associated consultation document. This included the number of questions, clarity on terminology and definitions, for example the word 'vulnerable'. It was also considered that some of the questions were misleading, suggesting enhanced services rather than the proposed consolidation.
- 2.12 The timescale of the consultation was also challenged, with some believing it was too short and should continue beyond August. It was also suggested that the proposal for the establishment of four hubs was incomplete with a lack of detail on where the hubs might be located and possible numbers/locations of any satellites.
- 2.13 These views, as well as those expressed by parents, professionals and residents on social media and saveoursurestarts.co.uk have been incorporated into the analysis undertaken within this paper.
- 2.14 A petition with 1 274 signatures was received on 20 July calling on '...Medway Council to stop the closure of 19 Sure Start Centres'.

3. Demographics

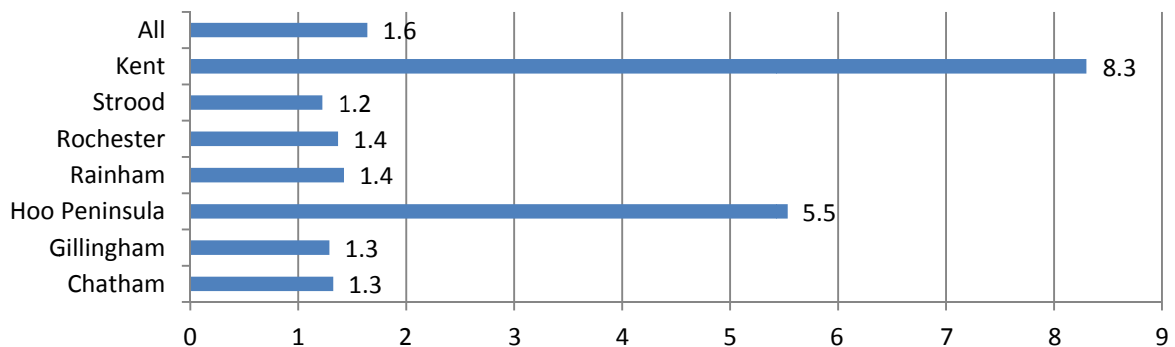
- 3.1. A detailed summary of the survey responses is attached as Appendix A. The survey had 866 unique responses from parents, employees and volunteers, professional partners and residents. Of those responding, 673 (78%) have been users of a Children's Centre in the last twelve months, representing less than one fifth of the approximate 3,500 families who used the centres during the consultation period.
- 3.2. Around two-thirds of the respondents live in Chatham, Gillingham or Rochester, with more responses from users of Delce than any other centre. Three quarters use their centre at least once a week. 9% did not state which centre they used.

% respondents by Area of Residence and Centre Use



3.3. Most respondents were women (85%) aged 26-40 (62%) who are married, in a civil partnership or co-habiting (79%). Most are White British (84%), with English as their main language (92%). All of this is in line with the demographics of centre users. Around 9% have a long term disability, of which 37% are aged 40+.

Average Miles Travelled by Area of Residence

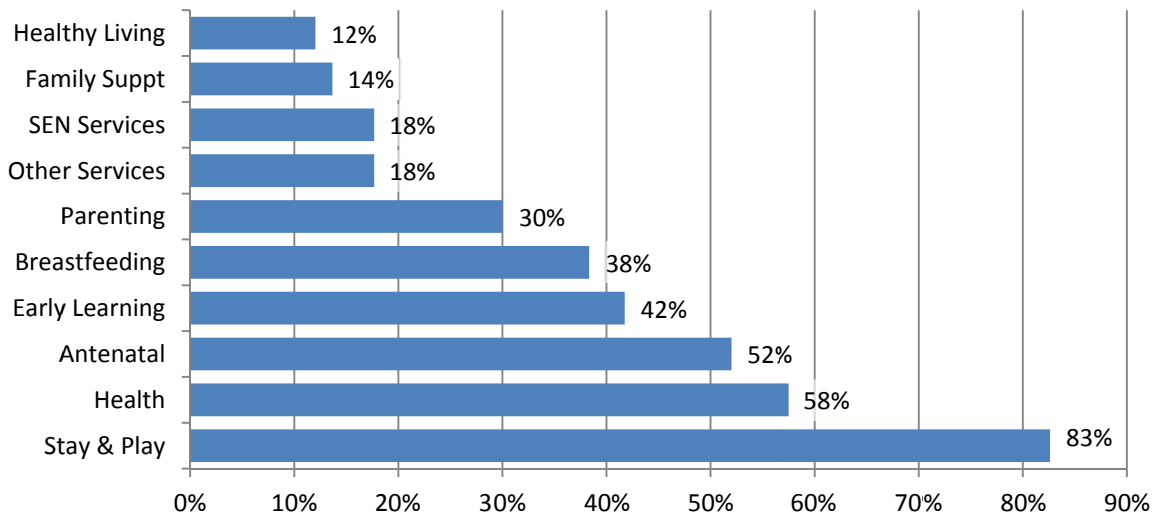


3.4. Apart from those living in rural areas, on average centre users travel 1.3 miles to attend a centre. Those living on the Hoo Peninsula area travel 5.5 miles on average, also reflected in the distance travelled by those attending St James. Some users choose to travel to a wide range of centres some distance away from their nearest centre, including Riverside, Bligh, Deanwood and Woodlands.

3.5. Most users who responded have children aged 0-2 (55%), which is below average of those using centres. Two thirds of users said they were responding as a parent, or potential parent, of an under five year old.

3.6. The most used services were the 'Stay and Play' universal sessions, followed by health services, antenatal sessions and to a lesser extent Early Learning, Breastfeeding and Parenting sessions. Targeted Special Educational Needs sessions and family support were attended less by users, but universal healthy living sessions were attended the least. Other services included many that were universal in nature.

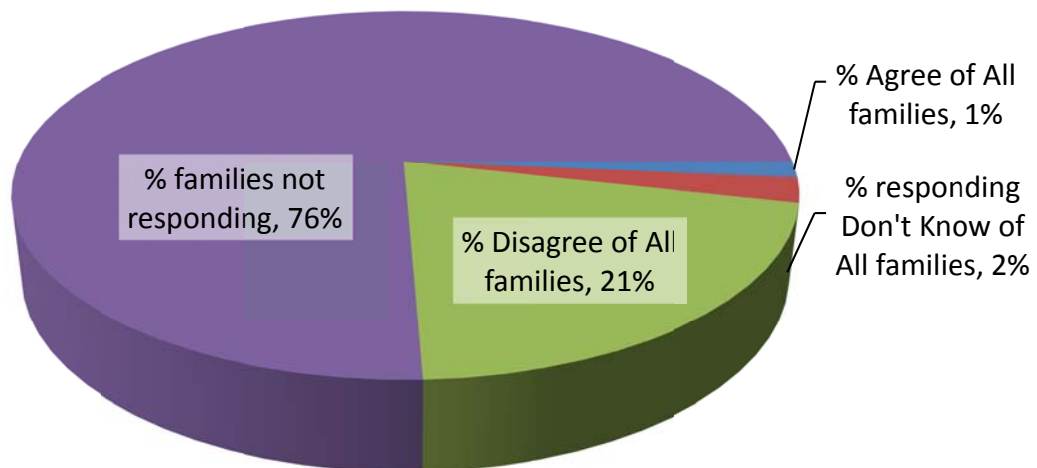
% Responding that use Centre Services by Type of Service



4. Response to Main Proposals

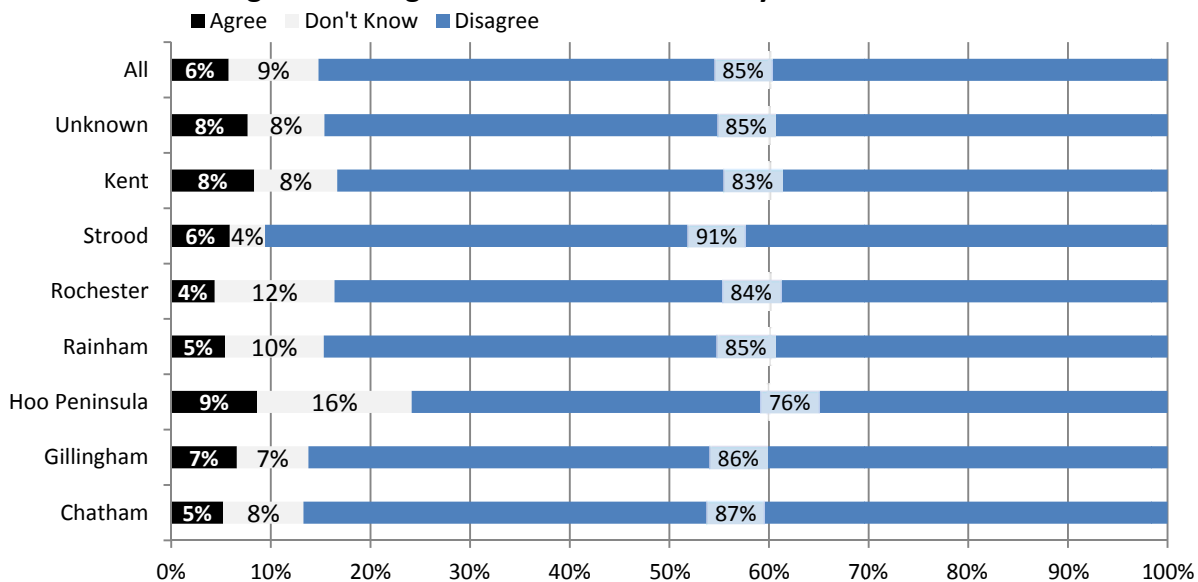
4.1. It is not really possible to know how those who did not respond to the survey viewed the proposals or why they did not engage. However, if the balance of the 3,500 families who attended a children's centre during the consultation period is factored into consideration, those in favour of the proposals are 1%, those against 21% and unknown 78%.

Respondents who agreed, disagreed or didn't know, as well as those not responding as a percentage of all families who attended a centre during the survey period



4.2. Overall, 85% of respondents disagreed with the proposed four-hub model, and just 6% supported the Council's proposals. There was slightly more support from those living in the Hoo Peninsula and Kent (see below).

% Agree or Disagree with a 4-hub Model by Area of Residence



- 4.3. However, it should be noted that many of those opposed appeared not to have understood that the proposal included the establishment of a number of additional satellite sites, believing the existing 19 sites would reduce to just four.
- 4.4. Support for the outreach model was mixed. Around a third of respondents felt it would be good to have services in the home, but noted that this already happened, and this should not be at the expense of work in a Children's Centre. About a quarter disagreed, suggesting this could result in further isolation, or expressing concerns that it would cause limited resources to be stretched further. One person suggested wider use of social media to provide outreach support.
- 4.5. There was further lack of consensus about whether an all age (0-19) model was a good idea. Just over a third felt it would be good to allow older children into sessions, but a third disagreed, noting that having even six year olds and babies in the same play space might be difficult. It was also noted by some that schools provide more support for over-fives and that services for them were better kept separate. This reflects a misunderstanding about the model which would not have teenagers mix with under-fives.
- 4.6. The most valued services were very much in line with those services used the most. A number of respondents wanted to rank all the services as equally important, although others felt that some services were duplicated and were being provided by others, such as employment advice.
- 4.7. Those responding to the survey, as well as those attending the public and professional staff meetings, identified a number of key issues, set out in the sections below.

5. Information Advice and Support and Professional Staff

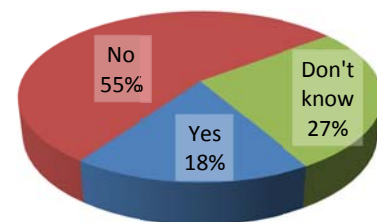
- 5.1. 86% of respondents (90% of users who responded) emphasised the value of information, advice and support Children's Centres provide. The current offer was seen by some as having already diminished in the last twelve months. Other concerns focused on the importance of well-run sessions that are universal, allowing peers and professionals to share concerns in a non-threatening environment.

"...I was able to take my baby out of the house from 2 weeks old to socialise with other babies and meet other mums. The centres honestly changed my life, they made me realise that certain rashes/cradle cap/changing her feeds were completely normal and it was a massive help to talk to other mums who were also suffering sleep deprivation..."

Deanwood User

- 5.2. Respondents stressed the value of seeing the same professional staff, with half mentioning this specifically, building strong relationships with them and other parents and carers. The importance of paid, professional staff came through strongly, with fewer than a fifth of survey respondents seeing volunteers as appropriately qualified to run centres. It was noted that most centres already have volunteers, and this should be encouraged, but not to the exclusion or instead of paid staff.

Can volunteers run a Centre?



- 5.3. Some of those attending the public meetings expressed concern that services may become less joined up, with health services separating from early years services if the latter became purely targeted. This might limit sharing of best practice or at the very least limit the ability of some parents to find the support they needed. Some parents said that they found it difficult to get their child into a nursery, that parent and toddler groups were hard to find and that the Children's Centres helped meet their need for universal services.
- 5.4. Early Years Private and Voluntary Independent providers (PVIs) shared significant concerns about their ability to meet the demand for places to two-year-olds as the government funding was insufficient. They also expressed the esteem they held the services provided by the central Early Years Team.
- 5.5. Staff, through the trade unions, felt that the staffing structure did not offer enough staff 'on the ground' to deliver an effective universal service. They proposed a manager for each hub who would take responsibility for ensuring that parenting support, child development, partnership with health and volunteers are all managed within each hub as part of their strategic role. This would replace the need for a lead for each of these areas and the need for two team leaders, and provide capacity for more frontline staff. This will be considered as part of the staff restructure and implementation plan.

6. Travel and Transport

- 6.1. Overall, 78% of respondents cited concerns about travelling if their centre was to close. Parents of very young children reported that they find it difficult to travel far to attend centres, especially those suffering with physical or mental health problems such as a recent caesarean section or ante/post-natal depression.
- 6.2. Parents on a low income felt they would struggle to meet the cost of public transport and typically they do not own a car. Those who did have a car cited problems with traffic/congestion and parking. Indeed some respondents who lived close to a centre were in favour of proposals precisely because it might mean an end to users parking outside their house.

"I don't drive and bus fares are very expensive. For me to get down to say Chatham that would cost me £5.50. If there were three sessions each week that I wanted to attend I simply could not afford it. This change will hit the low income families hardest."

Lordswood User

- 6.3. For those who can afford to travel, including those with their own car, many cited the time taken to travel and how this would prevent use of centres due to time pressures such as the need to pick up older children from school, for example. Others referred to the environmental impact, as well as increase in congestion, with a few residents expressing concern about the limited availability of parking at some centres that impacts their ability to park locally.
- 6.4. Social barriers that prevent families from some areas travelling to other parts of Medway were also identified. For example, families living in the Riverside area said they do not travel to other areas of Rainham. Some professions felt there were families in Gillingham and Chatham who had language needs or military backgrounds that require appropriate support.

7. Centre/Hub Size and Capacity

- 7.1. Professionals and users felt that current centres already offered targeted support to children in need, parents at risk of abuse or with mental or physical health problems using an integrated approach. It was felt that changes to a hub model could actually hinder some of this work and co-location might dilute the services on offer to families with a 0-5 year old. Some also felt that co-location might not necessarily encourage joint working, as professionals from different disciplines worked alongside each other without the time or capacity to engage.
- 7.2. Staff are trusted for their expertise and universal sessions such as stay and play are popular and well attended. The universal nature of services was valued and recognised as providing equality of opportunity and prevented a sense of stigmatising that might be experienced if services were targeted.
- 7.3. Centres based in schools were considered particularly helpful to parents with another child at that school as they could pick up the older child more easily, maximising available time, and those at risk of domestic violence were able to attend without risk of repercussions as they could explain their visit to an abusive partner as a trip to the child's school.

- 7.4. Respondents felt that current provision was to relatively small groups, which helped ensure problems were picked up early, encouraged relationship building and good child development. Many cited the importance of continuity of care and relationships between staff, volunteers and other parents and the children.
- 7.5. Just under a third expressed concerns that existing centres were not big enough to act as hubs, and if they were closed the physical space would be lost. This view was shared by many of the professional partners and staff. It was also felt that larger centres might either lack capacity or have the appropriate facilities for the number of groups that would need to take place or provide diluted quality of care.

"They will be too big and crowded. People who struggle with being around people will find it harder meaning they will stay at home. Also all the classes will be too busy and booked up that not every child will get to do what they want."

Gun Lane User

8. Child Development

- 8.1. A majority of respondents (59%) felt that centres provided critical support to parents to help ensure their children develop well in the first few years of life. The rise in Foundation Stage Profile results since the centres were opened in 2007 was seen to demonstrate that they had been effective in preparing children for school.
- 8.2. There was concern that, if parents do not attend a centre as a result of the distance required to reach it as well as other associated barriers, much of this development support will be lost. Whilst some respondents felt that volunteers and the voluntary/community sector could be a valuable source of support for early years provision, this was not considered as good as the dedicated Children's Centre provision.
- 8.3. At the extreme end of this, some professionals and parents were concerned that it could lead to an increase in safeguarding incidents, as families struggled with domestic violence, child neglect and loneliness.

"My son is quite shy but by having the opportunity to go to a community based centre where he can socialise and feel comfortable as he is in a familiar environment has given him far more confidence. Also the fact that we have been able to attend sessions since he was new born means that he has established friendships which he otherwise wouldn't have had the opportunity to do. I have also been able to seek advice on weaning and given help and support with raising my child. Without the support and availability of the children's centres and their staff my sons first years would have been far less enriched. "

Deanwood User

9. Social Isolation and Mental Health

- 9.1. At present centres allow parents to engage in community provision that is non-stigmatising and provides mutual support opportunities overseen by professional staff.
- 9.2. There is concern that early signs of depression and parenting problems will no longer be identified, causing family problems that could otherwise have been prevented. The proposal to target services may result in parents considering themselves insufficiently vulnerable or in need despite having issues that could be effectively addressed through low level support services.
- 9.3. Some parents cited sessions as so valuable they literally 'saved their life', i.e. from suicidal tendencies.

"You don't speak to another adult (apart from maybe your partner, if you have one) for days on end. You get paranoid that your child isn't developing normally or that you're not doing things right or that you're a terrible mother. You get depressed and isolated. You won't ask for help because you're scared someone will take your baby away from you. You're scared that you'll be judged by others for not coping. You become more depressed and more isolated."

Delce Parent

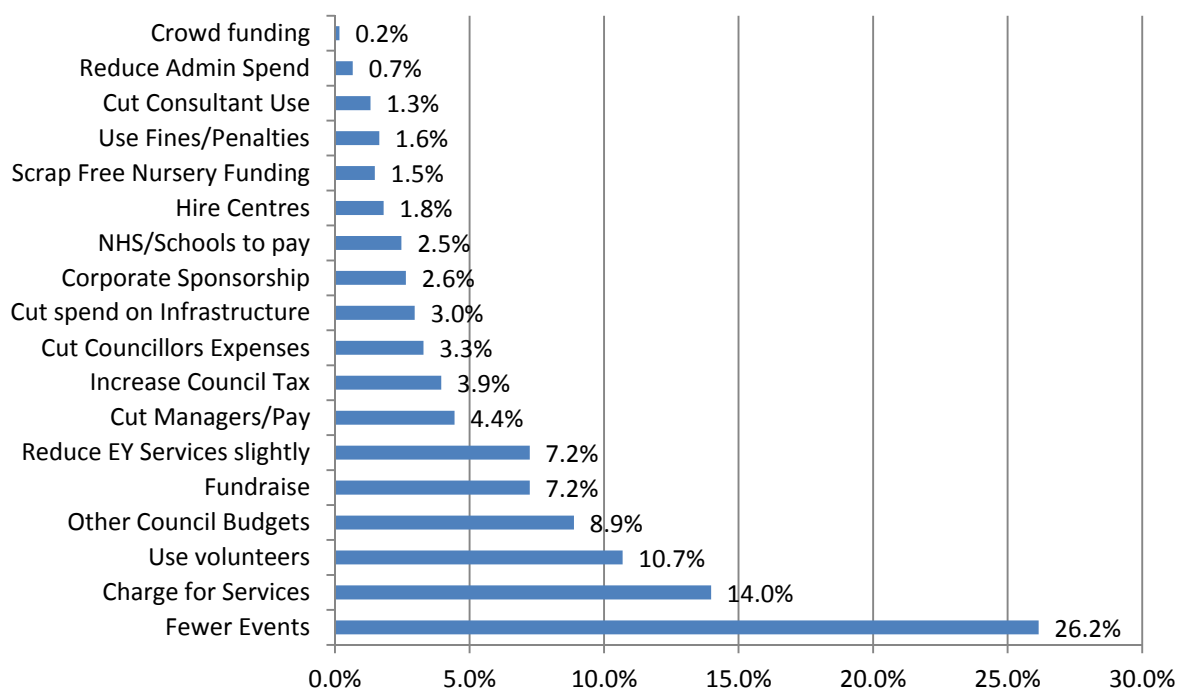
10. Additional Long Term Costs

- 10.1. Many professional partners and Early Years staff (including 8% of users responding) cited a strong probability that short term savings through centre closure might lead to additional costs.
- 10.2. Some cited poorer early years progress and lower school attainment – requiring additional funding in primary/infant school nursery and reception classes.
- 10.3. It was also suggested there would be an increase in troubled families and children's social care costs as early problems were missed and escalated into greater levels of need.
- 10.4. Users said they would probably increase their visits to GPs and secondary health services, especially mental health – many said they would need to go to their GP if the centres were inaccessible, as well as those citing mental health issues.
- 10.5. Health partners in particular cited insufficient capacity within the four hubs for the delivery of universal health services, even assuming access issues could be resolved, resulting in additional expenditure on other local facilities.
- 10.6. Others suggested there would be a reduction in social cohesion, including volunteering, that may even make the hubs harder to run as existing volunteers cannot make it to them. Schools cited centre volunteers as a natural source of teaching assistants as the experience gained and knowledge of child development was transferable.

11. Alternative Proposals/Funding Sources Identified

- 11.1. In considering alternative options, some made broader points they associated with the proposals. Councillor's expenses, employment of consultants and senior managers were all cited as areas that should be used instead of reducing centres and associated frontline staff. Many proposals were outside the scope of the Council's control. These included reducing MP salaries, changes to national government and not providing the two-year-old funding or infant school meals. There was general support for the Council to petition central government on issues of early years funding.
- 11.2. Private and Voluntary Independent nursery providers noted at the professional meeting that some of them would be unable to provide the additional two-year-old hours as the rates provided did not cover their costs.
- 11.3. There was widespread mention of the desire to redirect money spent on other services to children's centres, with the suggestion of fewer events such as the Battle of Medway, Dicken's Festival and fireworks (26.3%), as well as less spent on infrastructure projects such as the Chatham Dockside renewal (3%). The use of fines and penalties such as parking and environmental health were also proposed (1.5%).
- 11.4. Other means of raising extra funding included increasing Council tax (3.3%), corporate sponsorship, hiring out centres for out-of-hours use, and other centre-based fundraising events (about 26.2% in total). One respondent suggested the Children's Centres should be turned into a charity. About (7%) suggested that existing services should be reduced slightly so that centres had less of an offer without actually closing. This included suggestions of closing just a few centres but retaining at least one in each of the current clusters.
- 11.5. Some respondents (14%) felt that a small voluntary donation or charge would be appropriate, with a few suggesting it should be means tested.
- 11.6. Finally, 2.4% suggested that professional partners such as the NHS and schools should be asked to make a contribution and this was linked to the likely increased costs and lower attainment it was felt would otherwise result. The graph below shows the percentage of survey respondents that suggested each area of alternative funding.

Alternative Funding Sources Proposed



12. Potential Sites for the Hubs

12.1. A significant number of people (70%) refused to suggest where the hubs should be located, emphasising the need to keep all, or at least most of the centres open. Of those who did respond, some suggested there should be five or six hubs, based in the 'main town centres'. Others suggested that all or most of the centres should be maintained as satellite sites.

12.2. The majority of respondents who did make suggestions prioritised Chatham (19%), Gillingham (18%), Strood (14%) and Rochester (13%). Lower priority was given to Rainham (11%), the Hoo Peninsula (7%) and Walderslade/Lordswood (4%). Most were also clear that it should be about making centres available close to good transport links (18%), with adequate parking (5%) and evenly or so that the majority of people could reach them according to need (13%).

12.3. A map was taken to each of the 19 centres for individuals to suggest hub locations and the results of this exercise were in line with the survey findings.

12.4. The importance of delivering universal services on school sites was also emphasised, with the explanation that this enable the use of existing resources effectively but most importantly was non-stigmatising as schools were a neutral community venue, especially important to those suffering domestic violence or mental health problems.

13. Conclusion

13.1. The majority who responded to the consultation were clearly opposed to the proposals. The majority cited the excellence of existing services and would wish them to remain the same. There was recognition of the need for budget reductions, but a strong message was given that these should be sought from elsewhere, and it was the view of some that proposals may incur greater costs in the medium to long term.

13.2. Whilst few of the alternative proposals are completely worked out, there are a number of options that will be evaluated to form part of the business case following the consultation.

Appendix A – Details of the Survey Responses

Numbers Responding by Area of Residence and Centre Use

Area	Chatham	Gillingham	Hoo	Rainham	Rochester	Strood	Kent	Unknown	All
Users	164	135	42	89	147	69	4	23	673
Non-Users	47	32	16	22	36	16	8	16	193
All Respondents	211	167	58	111	183	85	12	39	865
% area that are centre users	78%	81%	72%	80%	80%	81%	33%	59%	78%
Users by area %	24%	20%	6%	13%	22%	10%	1%	3%	
Respondents by Area %	24%	19%	7%	13%	21%	10%	1%	5%	

Age Group, Gender and Marital Status

To protect personal data, numbers relating to respondents' demographics have been rounded to the nearest five and below five have been repressed, in line with ONS guidelines. So, for example, the number of responses is shown as 865, not 866. Therefore, numbers in many of the tables below may not match due to rounding.

Marital Status	>20	20-25	26-30	31-35	36-40	41-45	46-50	50+	N/A	All
Married/Civil partnership/Cohabiting	>5	30	115	185	165	75	30	70	15	680
Separated/Divorced/Widowed	0	>5	5	10	5	10	5	20	>5	50
Single	5	10	15	15	10	5	>5	5	0	65
Not Stated	0	5	10	5	5	5	5	10	25	70
All Respondents	5	45	140	215	185	90	45	100	40	865
% by Age Group	1%	5%	16%	25%	21%	11%	5%	12%	5%	
% Married/Civil partnership/Cohabiting	17%	65%	81%	86%	88%	80%	74%	70%	38%	79%
% Separated/Divorced/Widowed	0%	2%	3%	4%	3%	11%	7%	18%	5%	6%
% Single	83%	26%	10%	7%	6%	3%	5%	3%	0%	7%

Respondents with a Disability

Age Range	>20	20-25	26-30	31-35	36-40	41-45	46-50	50+	N/A	All
Have a Disability	0	>5	15	15	15	10	5	15	5	75
No Disability	5	40	120	190	160	70	35	75	10	705
Not Stated	>5	>5	5	10	15	10	5	10	30	85
All	5	45	140	215	185	90	45	100	40	865
% With Disability	0%	2%	9%	6%	7%	12%	9%	16%	7%	9%

Ethnicity and Gender

Ethnicity	Numbers	% Female	% Male	% Ethnicity overall	% Ethnicity that are Female	% Ethnicity that are Male
White British	730	88%	9%	84%	87%	86%
Not Stated	60	48%	10%	7%	4%	8%
Other White	40	92%	5%	5%	5%	3%
White Irish	10	88%	13%	1%	1%	1%
White and Asian	10	71%	14%	1%	1%	1%
Indian	5	100%	0%	0%	0%	0%
Other Asian	5	50%	25%	0%	0%	1%
Other Multi-Ethnic	5	100%	0%	1%	1%	0%
Black Caribbean	5	100%	0%	0%	0%	0%
All	865	85%	9%	100%	100%	100%

Responses were also received from less than five of the following categories (all female):

- Gypsy/Romany/Traveller of Irish Heritage
- Black African
- Other Black
- White & Black Caribbean
- Chinese
- Pakistani

English is Main Language

Age Range	>20	20-25	26-30	31-35	36-40	41-45	46-50	50+	N/A	All
English	5	45	135	200	170	85	40	100	20	800
Other Language	0	0	5	10	15	5	>5	0	5	35
Not Stated				5	5	5		>5	20	35
All Respondents	5	45	140	215	185	90	45	100	40	865
% English	100%	100%	96%	94%	91%	93%	98%	98%	48%	92%
% EAL	0%	0%	4%	4%	7%	3%	2%	0%	7%	4%

Respondents with Children with Special Educational Needs or Disabilities

Number with Children with SEND	105
Number with Children without SEND	650
Number Not Stated/No Children/Not Applicable	110
All Respondents	865
% Respondents with Children with SEND	12%

Centres Used by Respondents with Frequency of Use

Centre User	Unknown	Never	>Monthly	Monthly	Weekly	2+ days/ Week	All	% weekly plus
All Saints	0	0	10	10	10	25	60	67%
Bligh	>5	0	5	5	15	15	40	77%
Brompton	>5	0	>5	>5	5	11	20	79%
Burnt Oak	>5	0	5	5	20	15	45	74%
Deanwood		0	5	5	10	10	30	68%
Delce	>5	0	10	15	25	15	70	60%
Gun Lane	0	0	>5	5	15	15	35	78%
Hand in Hand	0	0	>5	>5	10	5	20	84%
Kingfisher	0	0	>5	>5	5	5	15	77%
Lordswood	0	>5	10	5	15	20	50	69%
Miers Court	0	0		5	15	5	20	82%
Oaklands	0	0		>5	5	15	20	95%
Riverside	>5	0	5	5	10	15	30	68%
Saxon Way	0	0	>5	5	10	5	20	77%
St James	0	0	5	>5	5	5	20	72%
St Margaret's	>5	0	10	5	15	10	40	64%
Temple Mill	0	0	5	5	15	10	30	66%
Wayfield	0	0	0	>5	5	5	10	78%
Woodlands	0	0	5	10	10	10	35	56%
Not Stated	>5		5	5	15	35	60	83%
All Centres	10	>5	80	100	230	250	675	72%
No Centre Used	0	190	5	0	0	0	190	0%
All Respondents	10	190	80	100	230	250	865	56%

Numbers of Children Represented - by Centre and whether a Centre User

Centre	Unborn	Under 3	3 to 5	Primary	Over 12	Adults	All	% All
All Saints	5	35	25	10	10	5	60	7%
Bligh	5	35	15	10	>5	>5	55	6%
Brompton	5	15	5	10	>5	0	25	3%
Burnt Oak	10	30	20	20	5	5	55	6%
Deanwood	>5	20	15	5	5	5	40	4%
Delce	5	65	30	10	5	>5	100	11%
Gun Lane	5	30	15	10	>5	0	55	6%
Hand in Hand	0	15	10	10	>5	0	25	3%
Kingfisher	0	10	5	5	>5	0	20	2%
Lordswood	10	35	25	20	10	>5	70	7%
Miers Court	5	25	5	5	>5	5	30	3%
Oaklands	5	15	10	5	5		30	3%
Riverside	5	25	10	5	5	>5	40	4%
Saxon Way	0	15	15	>5	0	5	25	3%
St James	>5	15	10	10	5	>5	25	2%
St Margaret's	5	30	15	12	0	0	50	5%
Temple Mill	5	22	20	5	5	5	50	5%
Wayfield	>5	5	5	>5	5	5	10	1%
Woodlands	5	30	15	10	5	5	45	5%
Not Stated	10	45	35	15	>5	5	90	9%
All Centre Users	80	520	305	175	70	40	900	95%
All Non-Users	15	10	30	70	30	50	50	5%
All Respondents	95	525	330	245	105	90	950	
% Respondents	10%	55%	35%	26%	11%	10%		

Based on the number of children cited by respondents together with centre used/not used

Stated Reason for Responding to the Survey by Area and Centre Use

Area	Parent - Unborn	Parent 0-5	Parent - Primary	Parent of 12+	Employee/Volunteer	Prof	Resident	Cllr	Oth
Rochester Users	10	125	20	5	5	5	10	0	5
Chatham Users	10	130	20	10	5	15	20	0	10
Gillingham Users	10	105	25	5	5	15	15	0	>5
Rainham Users	5	75	10	5	5	5	10	0	5
Strood Users	5	60	10	5	>5	5	10	0	>5
Hoo Users	>5	35	10	5	0	5	>5	0	>5
Kent Users	0	5	0	0	0	>5	0	0	0
Unknown Users	>5	10	>5	0	5	5	>5	0	5
All Users	40	550	95	35	25	55	70	0	25
Rochester N/U	>5	5	15	5	>5	10	15	0	>5
Chatham N/U	>5	5	15	5	5	15	20	0	>5
Gillingham N/U	5	5	5	>5	>5	10	15	0	5
Rainham N/U	>5	5	5	5	>5	5	5	0	>5
Strood N/U	0	>5	5	5	5	>5	5	0	>5
Hoo N/U	>5	>5	5	>5	>5	>5	5	0	5
Kent N/U	0	>5	0	0	0	5	0	0	>5
Unknown N/U	0	0	>5	0	>5	5	5	>5	5
All Non-Users	10	20	50	20	15	50	65	>5	15
All Respondents	50	570	150	50	40	110	135	>5	40
% Respondents	6.0%	65.8%	17.1%	5.9%	4.8%	12.5%	15.5%	0.1%	4.6%

Services Used as % Centre Users including Area of Residence

Services Used	Chatham	Gillingham	Hoo	Rainham	Rochester	Strood	Kent	Unknown	All
Stay & Play	81%	80%	88%	85%	84%	91%	75%	57%	83%
Health	62%	48%	64%	62%	62%	54%	50%	39%	58%
Antenatal	47%	49%	48%	61%	58%	54%	50%	39%	52%
Early Learning	47%	39%	45%	39%	39%	48%	50%	26%	42%
Breastfeeding	38%	33%	40%	47%	41%	33%	50%	26%	38%
Parenting	30%	32%	26%	24%	32%	32%	25%	35%	30%
Other Services	17%	16%	12%	15%	20%	23%	0%	26%	18%
SEN Services	23%	18%	19%	13%	14%	16%	25%	22%	18%
Family Support	17%	14%	5%	15%	10%	13%	0%	26%	14%
Healthy Living	12%	7%	12%	13%	16%	13%	0%	13%	12%

Services Used as % of all Responders including Area of Residence

Services Used	Chatham	Gillingham	Hoo	Rainham	Rochester	Strood	Kent	Unknown	All
Stay & Play	69%	66%	69%	72%	69%	75%	33%	38%	68%
Health	50%	40%	50%	50%	50%	44%	33%	31%	46%
Antenatal	37%	42%	40%	50%	46%	44%	25%	28%	42%
Early Learning	40%	32%	36%	32%	32%	40%	25%	18%	34%
Breastfeeding	32%	28%	34%	38%	33%	27%	33%	23%	31%
Parenting	27%	26%	24%	20%	26%	27%	17%	28%	26%
Other Services	18%	17%	10%	13%	20%	22%	0%	18%	17%
Family Support	21%	14%	16%	11%	11%	13%	8%	21%	15%
SEN Services	16%	12%	9%	13%	10%	11%	0%	21%	12%
Healthy Living	11%	7%	10%	11%	14%	11%	8%	15%	11%

Support for the proposals – by Area

“To what extent do you agree or disagree with the proposal to introduce four hubs/ satellite site and outreach support to provide an enhanced service to children, young people and their families?”

	Chatham	Gillingham	Hoo	Rainham	Rochester	Strood	Kent	Unknown	All
Strongly agree	9	8	4	4	4	4		2	35
Agree	2	3	1	2	4	1	1	1	15
Neither agree nor disagree	6	8	3	6	10	2		1	36
Disagree	38	35	8	15	31	18	2	11	158
Strongly disagree	145	109	36	79	122	59	8	22	580
Don't know	11	4	6	5	12	1	1	2	42
All Respondents	211	167	58	111	183	85	12	39	866
% Agree	5%	7%	9%	5%	4%	6%	8%	8%	6%
% Disagree	87%	86%	76%	85%	84%	91%	83%	85%	85%
% Don't know	8%	7%	16%	10%	12%	4%	8%	8%	9%

Families Attending the Centres between 31/5/2017 and 12/7/2017	3555
Maximum possible % of families responding	24%
% Agree of All families attending centres	1%
% responding Don't Know/neither agree or disagree of All families	2%
% Disagree of All families	21%
Minimum % of families not responding	76%

How much do you agree or disagree with the following statement: "It is important that support is provided to a broader range of children, young people (ages 0-18) and their families than we currently offer at the Children's Centre (ages 0-5)"

	Chatham	Gillingham	Hoo	Rainham	Rochester	Strood	Kent	Unknown	All
Strongly agree	9	8	4	4	4	4		2	35
Agree	2	3	1	2	4	1	1	1	15
Neither agree nor disagree	6	8	3	6	10	2		1	36
Disagree	38	35	8	15	31	18	2	11	158
Strongly disagree	145	109	36	79	122	59	8	22	580
Don't know	11	4	6	5	12	1	1	2	42
All Respondents	211	167	58	111	183	85	12	39	866
% Agree	5%	7%	9%	5%	4%	6%	8%	8%	6%
% Disagree	87%	86%	76%	85%	84%	91%	83%	85%	85%

How much do you agree or disagree with the following statement: 'It is important to offer more services to vulnerable children/ families, than to all children/ families'?

	Chatham	Gillingham	Hoo	Rainham	Rochester	Strood	Kent	Unknown	All
Strongly agree	32	24	10	10	24	12	2	4	118
Agree	33	31	12	17	31	7		7	138
Neither agree nor disagree	44	37	11	24	40	16	4	14	190
Disagree	56	45	14	34	44	27	4	4	228
Strongly disagree	37	21	9	22	32	18	2	5	146
Don't know	9	9	2	4	12	5		5	46
All Respondents	211	167	58	111	183	85	12	39	866
% Agree	31%	33%	38%	24%	30%	22%	17%	28%	30%
% Disagree	44%	40%	40%	50%	42%	53%	50%	23%	43%

These two questions can then be matched up to indicate support for both proposals. The table below shows support for all age services in rows and for targeted services in columns.

Targeted \ All age	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree	Don't know	All
Strongly agree	59	15	35	25	11	9	154
Agree	17	45	33	55	12	7	169
Neither agree or disagree	13	40	57	48	24	4	186
Disagree	10	26	39	72	24	5	176
Strongly disagree	11	8	20	15	62	1	117
Don't know	8	4	6	13	13	20	64
All	118	138	190	228	146	46	866

This shows that 16% agree and 20% disagree with both proposals.

How much do you agree or disagree with the following statement: 'It is important that some of the more specialist and targeted work with families is provided to them in their homes and other locations rather than in a council building'?

	Chatham	Gillingham	Hoo	Rainham	Rochester	Strood	Kent	Unknown	All
Strongly agree	33	27	10	8	26	14	4	5	127
Agree	36	32	20	23	34	14	3	6	168
Neither agree nor disagree	80	52	12	34	60	26	2	11	277
Disagree	29	33	9	24	32	12	3	4	146
Strongly disagree	17	10	3	13	18	14		5	80
Don't know	16	13	4	9	13	5		8	68
All Respondents	211	167	58	111	183	85	12	39	866
% Agree	33%	35%	52%	28%	33%	33%	58%	28%	34%
% Disagree	22%	26%	21%	33%	27%	31%	25%	23%	26%

Do you think that any of the group/activities currently offered by your Children's Centres(s) could be run by volunteers and / or community groups in your local area?

Volunteering	Chatham	Gillingham	Hoo	Rainham	Rochester	Strood	Kent	Unknown	All
Yes	46	29	7	18	39	15	1	1	156
No	102	86	35	69	98	57	7	22	476
Don't know	63	52	16	24	46	13	4	16	234
All Respondents	211	167	58	111	183	85	12	39	866
% Yes	22%	17%	12%	16%	21%	18%	8%	3%	18%

Do you think that having health visitors, midwives and school nurses working together with children centre staff enhanced the services?

Partnership	Chatham	Gillingham	Hoo	Rainham	Rochester	Strood	Kent	Unknown	All
Yes	179	150	48	102	167	75	11	32	764
No	2		3		5	4		1	15
Don't know	30	17	7	9	11	6	1	6	87
All Respondents	211	167	58	111	183	85	12	39	866
% Yes	85%	90%	83%	92%	91%	88%	92%	82%	88%

Average Distances Travelled by Centre Users Responding and Area of Residence

	Chatham	Gillingham	Rainham	Rochester	Strood	5 Town Average	Hoo	Kent	All Areas
All Saints	0.8	1.9	3.9	1.7		1.0	9.1	14.1	1.6
Bligh	6.7			3.3	1.4	2.2		7.8	2.3
Brompton	1.9	1.5	4.6	1.6	3.2	1.9			1.9
Burnt Oak		0.6	4.3			0.7			0.7
Deanwood	3.8	2.4	1.2	5.9		1.7			1.7
Delce	1.4			0.8	2.2	0.9			0.9
Gun Lane	2.0		6.5	1.2	0.9	1.1	8.1		1.7
Hand in Hand	3.4	2.2	1.1			2.0	16.7		2.7
Kingfisher	1.1	3.0	2.8	3.3		1.5			1.5
Lordswood	1.1	4.2	4.8			1.4			1.4
Miers Court		2.9	0.9			1.2			1.2
Oaklands	1.4	0.6				1.4			1.4
Riverside	9.1	2.3	0.9			1.4		3.0	1.4
Saxon Way	4.2	0.7	2.3	3.9		1.2			1.2
St James							5.4		5.4
St Margaret's	1.1	5.0		1.1		1.2	7.4		1.3
Temple Mill			6.8	2.0	1.4	2.0	3.8		2.7
Wayfield	1.5					1.5			1.5
Woodlands	2.3	1.0	2.9	3.7		1.5			1.5
All Centres	1.3	1.3	1.4	1.4	1.2	1.3	5.5	8.3	1.6

Free Text Analysis

The survey included a number of opportunities to provide comments and clarifications. An analysis of these was undertaken, and some common themes emerged. These have been grouped together for ease of understanding, and more details are set out in the main summary.

Issue	Users	Non-Users	All
Loss of Information Advice & Support	90%	75%	86%
Travel and Access to Centre	80%	69%	78%
Isolation, Mental Health, loss of Community	73%	49%	67%
Poorer Child Development and Education Outcomes	63%	46%	59%
Loss of Professional Staff and Quality of Service	46%	50%	47%
New Hubs too big/impersonal, but not enough capacity	31%	21%	29%
Financial impact – fares, fees, alternatives, jobs	28%	30%	28%
Need for Equality, Diversity and Fairness	17%	14%	16%
Potential increase in child safeguarding incidents	9%	15%	10%
Increased Long term Costs; extra GP use, social care	8%	6%	8%

Alternative Proposals: Survey respondents suggested a range of alternatives to fund Centres, which have also been grouped and are listed below:

Values	Respondents	%
Fewer Events such as Battle of Medway, Fireworks, etc	228	26.3%
Introduce a small charge/donation for services	120	13.9%
Increase the use of volunteers	116	13.4%
Find money from other council budgets	89	10.3%
Undertake fundraising, including community events	61	7.0%
Reduce existing services slightly to avoid centre closures	61	7.0%
Cut managers and or cut their pay	37	4.3%
Increase council taxes	29	3.3%
Cut councillors expenses	28	3.2%
Cut infrastructure spending – e.g. Big Screen, Rochester Airport	26	3.0%
Corporate sponsorship – e.g Pampers	26	3.0%
Seek more funding from partners - e.g. NHS, schools, PVIs	21	2.4%
Hire Centres out of hours	17	2.0%
Use Fines/Penalties e.g. parking, planning	13	1.5%
Scrap Free Nursery Funding	10	1.2%
Less use of consultants	10	1.2%
Reduce Admin spend	5	0.6%
Use crowdfunding	3	0.3%
Overall fundraising/charging/hire/sponsorship/crowdfunding	227	26.2%

Location/ Considerations for the Location of Hubs – by Area of Residence

Given that responses were free text, they have been summarised into the main areas suggested. This included merging those suggesting Walderslade or Lordwood. Suggested centres have been grouped into the town in which they are based. The area the respondent lives in provides some context – it should be noted that responses do not total, as multiple suggestions were made. The percentage is of total respondents. Some 610 (70.4%) respondents did not state an area (although they may have suggested the need to be near transport hubs, etc).

	Chatham	Gillingham	Hoo	Rainham	Rochester	Strood	Kent	Unknown	All	%
Chatham	47	29	11	31	28	12	2	1	161	19%
Gillingham	35	35	9	34	26	11	2	2	154	18%
Strood	24	12	14	20	23	25	1	1	120	14%
Rochester	16	16	8	23	34	10			107	12%
Rainham	14	17	3	42	13	5	1	1	96	11%
Hoo	8	6	25	3	8	5	1		56	6%
Walderslade	20	3	2	4	5				34	4%
Luton	5	2		4					11	1%
Near Good Transport Links	40	29	12	19	32	16	2	5	155	18%
Evenly Across Medway	11	10	1	14	10	7	1	4	58	7%
Where there is the greatest need	16	9		7	10	4	1	2	49	6%
With good/free parking	12	10	2	2	10	5		1	42	5%
In/by Schools	2	4			2	1			9	1%
Near Housing Estates		1				1			2	0%