

# Agenda Item 8

## Sefton Public Engagement and Consultation Panel

**Date:** 22<sup>nd</sup> September 2017

**Title:** Proposal to undertake Consultation and Engagement Activity: Family and Children's Centres

**Report of:** Dwayne Johnson, Director of Health and Social Care

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### **1. Purpose of the Report**

1.1 To receive information with regard to the consultation plans being developed for Family and Children's Centres.

### **2. Background**

2.1 The main purpose of the Public Engagement and Consultation Panel is to coordinate and ensure the quality of public engagement and consultation, in accordance with the standards for engagement and consultation.

2.2 In March 2017 the Council approved the proposed development of locality working. This consultation relates to that proposal.

### **3. Family and Children's Centres**

3.1 Following discussions with head teachers, centre managers, and visits to Centres alongside Cabinet Members a proposed strategic approach for Children's Centres and Family Centres was shared. The proposal is for a new 0-19 Family Well Being Service.

3.2 The discussions outlined the existing outdated funding mechanism for children's centres and proposals for the development of a new funding formula which will ensure children and families who need services most receive a targeted offer (whilst not losing the universal community focus of the service).

3.3 In summary the discussions provided significant detail on the context of Children's Centres and Family Centres – including their budget, performance data, role, functions and finally staffing.

3.4 The strategic direction for a Family Well-being service clearly outlines the vision and approach the Council wishes to adopt. It was proposed that we widen the offer to 0-19 by providing outreach support into schools and the community. This would complement the approach the Council has taken surrounding health and well-being services and their approach to multi-disciplinary working in the context of working within defined bases.

3.5 Key benefits for the introduction of a family well-being service are to:

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- Respect families starting points, and intervene early to provide the required support in a timely way.
- Develop a “whole family” approach where root cause issues can be addressed and families limit the number of times they need to tell their story
- Ensure a focussed response on providing improved outcomes for the children and young people themselves on occasions where the “whole family” approach does not work.
- Ensure that the child's voice is heard and that safeguarding thresholds are maintained through service redesign and delivery
- Ensure a targeted and evidence-based approach for those children and families who are in the greatest need
- Support children and families that are failing to thrive or reach their potential, particularly with regard to attachment, language acquisition and early childhood milestones
- Promote good mental health and emotional wellbeing for all children and young people, parents and care givers in Sefton and improve access to targeted support to address health inequalities.

3.6 The vision is embedded within a broader Early Intervention and Prevention Strategy. The purpose of this broader strategy, which aligns to the Family and Children Centre vision, is to enable an early resolution to problems faced by people, thereby developing their resilience. The model tackles the multiple needs of households in a joined up way and at an earlier stage.

### **4. Proposals for changes to Family and Children Centres.**

4.1 The proposals for remodelling and developing a family well-being service is part of a wider transformation process relating to Early Intervention and Prevention – Locality Teams. The proposals will align to three identified localities in the North, Central and South of the Borough.

4.2 It is proposed that each locality will be served by a lead Family and Well-being ‘hub’. A Manager will be allocated to each locality. The lead ‘hub’ centre will be responsible for co-ordinating the delivery of the family well-being service and managing the distribution of activity and staff within their area according to need. The impact on staffing will be a reduction of management. Frontline and admin staffing will be reduced according to the formula. This approach will allow for increased joint planning and management across the whole locality and particularly in relation to service design and improvement

4.3 In order to account for the large geographical area; it is proposed that the North and Central localities will be sub divided into two service delivery hubs – this will ensure that the budget and staffing can be aligned closer to communities

4.4 It is expected that each lead ‘hub’ will be supported by the majority of remaining Children’s Centres and Family Centres, which will operate as link or satellite centres and will effectively be delivery points together with outreach activities

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- 4.5 Although the existing Family Centre functions differ to Children Centres; the data scrutinised, clearly identifies, in some cases, similar cohorts of families attending both family and children's centres. By integrating the centres it is possible to offer a more universal offer which is in line with our strategic approach. This will provide improved outcomes with more joined up partnership work. A renewed focus will be on health and well-being, identifying early help and supporting families through periods of need. It will also provide some opportunities to identify efficiencies through staffing changes.
- 4.6 The proposed new model will support the concept as outlined in the Statutory Guidance for Children's Centres 2013, which states that children's centres are as much about making appropriate and integrated services available, as they are about providing premises in particular geographical areas. In practical terms, this means less centres will be registered as standalone children's centres with Ofsted. The remaining centres will be listed as linked or satellite sites and will no longer be subject to individual inspections.
- 4.7 The proposed operating model is that services will also be delivered from a number of key sites, either community or school based. This network of delivery points will ensure services can be delivered close to the community and ensure travel times are not drastically increased for service users accessing the provision. It will enable a more focused and targeted approach to meeting resident needs and priorities
- 4.8 Further detailed work will be required to determine conclusively which buildings the offer will be delivered from, however, the strategic vision is committed to delivering the offer as close to the community as possible.

### **5. Engagement with Providers and Service Users**

- 5.1 Engagement activity will take place with providers and partners on the proposed new vision and models to seek their views and ideas to shape how services could look in the future.
- 5.4 The key messages given throughout the process by the Council and partners/providers will be open and transparent. The key messages will be developed into a comprehensive communications plan. Key messages include:-
- The new models are about working together and about delivering services from key sites
  - Not all existing service users may be impacted by the proposed changes – it will depend on individual circumstances

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## 6 The Consultation and Engagement methodology

- 6.1 The draft principles and processes for the consultation and engagement process are shown for Panel Members to review and comment on.
- 6.2 The consultation will be underpinned by a robust Communications Plan and will consist of proposals to merge Family Centre and Children's Centre functions into a Family Well-being Service and to establish/change the offer in each centre and delivery point.
- 6.3 The intention of consultation is to provide:
- Adequate time for those wishing to respond to have the opportunity to do so
  - Sufficient information for those being consulted to form a considered view on the matters on which they are being consulted
  - A tailored consultation process to the scale of the changes
  - A clear account of the views of those who use family centres and children's centres as well as social work teams and the broader community which can be taken into account when re-designing the service
- 6.4 The methods will be supported by a number of tools, which may include the following if required:
- Frequently Asked Questions
  - Press & Media briefings
  - Posters
- 6.5 Some of the specific barriers that we anticipate may happen include reaching groups who do not currently use the centres and those who are seldom heard, these include:
- Young parents
  - Families from minority ethnic groups
  - Disabled parents
  - Parents of disabled children / children with SEN
  - Gypsies and Travellers
  - People who have difficulty reading, writing or speaking English
  - Parents on low income
- 6.6 The engagement process will seek to overcome these barriers by ensuring there is open, accessible, timely information, (for all), using the range of methods described in the communications and consultation methodology and by also working with partners, including the MAD group and Young Advisors.

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## 7. Engagement Schedule

7.1 The engagement schedule for this work is described in Annex A

## 8 Consultation plan

8.1 A consultation plan has been drafted and there will be regular web-based and user group briefings to ensure accurate information is made available.

8.2 The engagement process will be monitored to ensure effective delivery, and will be adapted as and when required to ensure people are supported to fully participate.

8.3 A resource from the Communication Team has been identified and discussions have taken place on the right level of information to provide that doesn't raise unnecessary concern but at the same time provides factual information.

## 9. Conclusion

9.1 The combined impact of demographic pressures and reduced government funding presents a significant challenge that will require a sustained and robust Council wide response with continued engagement with key partners. Only a strategic approach can mitigate the demand and financial pressures that will continue to be faced by the council.

9.2 Change can be difficult, challenging and sometimes uncomfortable for service users, families, carers and the workforce but the Council is at a point where doing more of the same or trying to do more of the same with less is going to fail people, families and the communities.

## 10. Legal Department Comments

10.1 The Council's Legal Department have been consulted on the consultation and engagement proposals. The Legal Department has made comments in relation to the proposed timetable and consultation period and these have been shared with the relevant Officers.

## 11. Recommendations

11.1 The Public Engagement and Consultation Panel is recommended to:

a) Appraise this targeted engagement and consultation approach, methodology and plan and approve

b) Request that the officers return to the Panel to provide feedback

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### Annex A KEY DATES

| <b>Date 2017</b>           | <b>Activity</b>   |
|----------------------------|---|
| 11 <sup>th</sup> September | Update head teachers  |
| 13 <sup>th</sup> September | Update Trade Unions   |
| 14 <sup>th</sup> September | Consultation with Family Centre and Children's Centre employees commences |
| 15 <sup>th</sup> September | Public Engagement & Consultation Panel papers published                   |
| 22 <sup>nd</sup> September | Public Engagement & Consultation Panel                                    |
| 25 <sup>th</sup> September | Consultation commences (subject to Panel comments)                        |
| 26 <sup>th</sup> September | Overview and Scrutiny Committee (Children's Services and Safeguarding)    |
| 17 <sup>th</sup> November  | Public Engagement and consultation closes                                 |
| 20 <sup>th</sup> November  | Analysis of responses takes place   |
| 7 <sup>th</sup> December   | Cabinet Consider consultation response                                    |

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|  |  |                   |                              |
|--|--|-------------------|------------------------------|
| <b>Project Title:</b>  | Family and Children's Centres  |                   |                              |
| <b>Is your project linked to:</b>  |  |                   |                              |
| An existing service  |  |                   |                              |
| <b>Lead officer:</b>   | Dwayne Johnson   | <b>Contact no</b> | 934 3333                     |
| <b>Designation</b>   | Director of Health & Social Care   | <b>E-mail</b>     | Dwayne.johnson@sefton.gov.uk |
| <b>Which of the Council's Priorities does your Consultation relate to (please tick)</b>                    |  |                   |                              |
| ✓  | The Economy  |                   |                              |
| ✓  | The Most Vulnerable  |                   |                              |
| ✓  | Health and Wellbeing   |                   |                              |
| ✓  | Reshaping the Council  |                   |                              |
| ✓  | Resilient Communities  |                   |                              |
| ✓  | The Environment  |                   |                              |
| <b>Which of the Health and Wellbeing Board's Priorities does your Consultation relate to (please tick)</b> |  |                   |                              |
| ✓  | Ensure all children have a positive start in life  |                   |                              |
| ✓  | Support people early to prevent and treat avoidable illnesses and reduce inequalities in health                        |                   |                              |
|  | Support older people and those with long term conditions and disabilities to remain independent and in their own homes |                   |                              |
| ✓  | Promote positive mental health and wellbeing   |                   |                              |
| ✓  | Seek to address the wider social, environmental and economic issues that contribute to poor health and wellbeing       |                   |                              |
| ✓  | Build capacity and resilience to empower and strengthen communities  |                   |                              |

|   |  |                                      |
|---|--|--------------------------------------|
| <b>Does this consultation relate to an item on the Forward Plan? If so which one?</b> |  |                                      |
| Family and Children's Centres   |  |                                      |
| <b>Other partners involved (please state if internal or external to the Council)</b>  |  |                                      |
| <b>External</b>   | Service Users, providers, VCF,   |                                      |
| <b>Internal</b>   | Health & Wellbeing, Public Health, Schools & Families, Children's ~Social Care, Legal, Communications, Transformation, Finance & ICT, Neighbourhoods, Built Environment, Workforce |                                      |
| <b>(Planned) start date</b>   | <b>(Planned) end date:</b>   | <b>What is the allocated budget?</b> |
| 25th September 2017   | 17 <sup>th</sup> November  | None – within existing resources     |

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## Background/Rationale

Following discussions with head teachers, centre managers, and visits to Centres alongside Cabinet Members a proposed strategic approach for Children's Centres and Family Centres was shared. The proposal is for a new 0-19 Family Well Being Service.

The discussions outlined the existing outdated funding mechanism for children's centres and proposals for the development of a new funding formula which will ensure children and families who need services most receive a targeted offer (whilst not losing the universal community focus of the service)..

In summary the discussions provided significant detail on the context of Children's Centres and Family Centres – including their budget, performance data, role, functions and finally staffing.

## Aims & Objectives

The strategic direction for a Family Well-being service clearly outlines the vision and approach the Council wishes to adopt. It was proposed that we widen the offer to 0-19 by providing outreach support into schools and the community. This would complement the approach the Council has taken surrounding health and well-being services and their approach to multi-disciplinary working in the context of working within defined bases.

This consultation and engagement process will be aligned with, and will not duplicate, consultation and engagement processes scheduled as part of any further consultation on the overall budget. This will ensure that the public and service users are not over-consulted, receive consistency of message and delivers value for money.

## Target Audience

- Individuals
- Families
- Hard to Reach Groups
- Voluntary Community Faith sector organisations/groups/networks and forums
- Partners
- Childminder
- Children's Centre Advisory Board
- Children's Centre staff
- Family Centre staff
- Social Work Teams
- Early Years setting or provider
- General public
- Health partner
- Parent/ grandparent/ carer
- Volunteer
- Sefton Council staff
- Children and young people

## Methodology

The draft principles and processes for the consultation and engagement process are shown for Panel Members to review and comment on.

The methods will be supported by a number of tools, which may include the following if required:

- Web-based Frequently Asked Questions
- Press & Media briefings if required
- Easy Read material/briefing sheets
- Questionnaires
- Targeted information to those registered with centres
- Posters and information leaflets



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|   |                              |  |
|---|------------------------------|--|
| <ul style="list-style-type: none"> <li>➤ Information briefing sessions at centres or convenient local facilities</li> <li>➤ Area Committees</li> </ul>  |                              |  |
| <b>Potential barriers to involvement and action to overcome barriers</b>  |                              |  |
| <p>Some of the specific barriers that we anticipate may happen include:<br/>         Some of the specific barriers that we anticipate may happen include reaching groups who do not currently use the centres and those who are seldom heard, these include:</p> <ul style="list-style-type: none"> <li>• Young parents</li> <li>• Families from minority ethnic groups</li> <li>• Disabled parents</li> <li>• Parents of disabled children / children with SEN</li> <li>• Gypsies and Travellers</li> <li>• People who have difficulty reading, writing or speaking English</li> <li>• Parents on low income</li> </ul> <p>The engagement process will seek to overcome these barriers by ensuring there is open, accessible, timely information, (for all), using the range of methods described in the communications and consultation methodology and by also working with partners, including the MAD group and Young Advisors and also Community Connectors</p> |                              |  |
| <b>How will you protect the confidentiality of participants?</b>  |                              |  |
| Engagement processes will be conducted in accordance with Data Protection procedures.   |                              |  |
| <b>How and when do you intend to report or publish the findings?</b>  |                              |  |
| The findings will be published and shared on a phased basis subject to the timetable being confirmed using a range of inclusive methods.  |                              |  |
| <b>Level and type of patient/public engagement (place a tick in all that apply)</b>   |                              |  |
| <b>Tick</b>   | <b>Level</b>                 | <b>Description</b>   |
| X   | Informing                    | Giving people information about something (a limited opportunity for them to be involved)    |
| X   | Consulting/Engagement        | Getting people's views to help you develop/change your services/plans                        |
|   | Deciding together            | Making decisions using patients' and public's views  |
|   | Acting together              | Local people will be involved in making decisions and reviewing your plans/services          |
|   | Supporting local initiatives | Local people will have the opportunity to lead, develop and deliver activities independently |
| <b>Does your project include:</b>   |                              |  |
|   | <b>Yes/No</b>                | <b>If No please explain</b>  |
| Questionnaire<br>(Please attach – even if it is only in draft format)   | Yes                          |  |
| Other materials<br>(i.e. promotional materials)   | Yes                          | Poster and information leaflets in all centres   |

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|---|------------|---|
|   |            | <p>Examples of assistive technology</p> <p>Internet FAQ</p> <p>Information posted directly to those registered with the centres</p> |
| <p>A stakeholder map<br/>(a tool to help you identify your target audience – included in toolkit)</p>   | <p>Yes</p> | <p>See consultation plan</p>  |
| <p>Reference to existing data or information that has already been completed (i.e. recent consultation/ research where results can be used to inform your consultation)</p> | <p>Yes</p> | <p>Data on usage is available</p>   |
| <p><b>Any other information you would like to provide?</b></p>  |            |   |
| <p>None</p>   |            |   |

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### Appendix. Methods of consultation.

| <b>Product – what we will produce</b>   | <b>People – who will be involved</b>  | <b>Process – how we will do it</b>  | <b>Resources – what we will need</b> | <b>Timing – when it will happen</b> |
|---|---|---|--------------------------------------|-------------------------------------|
| Presentation  | Director of Health and Social Care  | Question and answer sessions at Family and Children's Centres and other appropriate venues  | Staff time                           | In period to be planned             |
| Letter with questionnaire to all registered users of centres from over the last 12 months | PMO staff   | Encourage completion with link via social media   | Staff time and questionnaires        | From 25.09.17                       |
| Questionnaires  | To be placed in libraries, family centres, children's centres, health clinics                                   | Family Centre staff and Children's Centres outreach workers to identify key places for questionnaires<br>:<br>Each service user to be given a questionnaire and 'signed for' as proof of receipt.<br><br>A record will be kept to ensure all service users are included in the distribution | Questionnaires                       | From 25.09.17                       |
| Questionnaires – with staff support for completion  | To be used at parenting groups, Health Clinics and other local non children's centre venues by outreach workers | Centre managers and outreach workers to target key groups and work with partners to gain responses from existing groups<br><br>This will include children.  | Staff time questionnaires            | From 25.09.17                       |
| Consultation with users of partners   | To encourage participation by   | Centre managers and outreach  | Staff time                           | From 25.09.17                       |

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| <b>Product – what we will produce</b>               | <b>People – who will be involved</b>                      | <b>Process – how we will do it</b>                           | <b>Resources – what we will need</b> | <b>Timing – when it will happen</b> |
|---|---|--|--------------------------------------|-------------------------------------|
| services  | seldom hear groups  | workers.   |                                      |                                     |
| Questionnaires with partners                        | To be used to seek views from key partners                | Manager's to send out to key partners                        | Staff time                           | From 25.09.17                       |
| Consultation on portal web page                     | To enable online responses                                | Manager to submit online if handed response                  | Staff time                           | From 25.09.17                       |
| Press releases                                      | Raise awareness that consultation is happening            | Officer to link with corporate communications team           | Staff time                           | 22.09.17                            |
| Email information to staff to support participation | Raise awareness that consultation is happening            | Head of Service  | Staff time                           | 22.09.17                            |
| Contact with elected members                        | To promote consultation and seek views of elected members | Director/Head of Service – to make contact with ward members | Staff time                           | Continuous                          |
| Focus Groups/Interviews                             | To be used to seek views from interested parties          | Senior Council Officers                                      | Staff time                           | In period and to be planned         |

In addition the usual staff consultation following HR procedures will take place