Report to:	Cabinet	Date of Meeting:	7 <sup>th</sup> December 2017								
Subject:	The Development o	The Development of Family Wellbeing Centres									
Report of:	Director Social Care and Health	Wards Affected:	(All Wards);								
Portfolio:	Cabinet Member - 0	Cabinet Member - Children, Schools and Safeguarding									
Is this a Key Decision:	Yes	Included in Forward Plan:	Yes								
Exempt / Confidential Report:	No										

#### Summary:

In March 2017 the Council approved the proposed development of locality working in light of community feedback gathered in recent years and extensive research into early intervention prevention models. As part of this work the Director of Social Care and Health has worked with others to develop a draft strategic approach for Family Wellbeing Centres, taking into consideration Children Centres, Family Centres, School Readiness funding and the childcare subsidy. This report provides an update including the public consultation feedback, an equalities analysis and presents options considered and discounted and recommendations for consideration and decision.

In developing the proposals relating to locality working and the proposed Family Wellbeing approach the Council has actively listened to the views of the community and the recommendations in this report reflect this. The community clearly supports the principles of the 0-19 Family and Wellbeing approach and Officers will progress the implementation of this strategic approach, subject to Cabinet considering the information in this report. However, the community did not support the development of three 0-19 Family Wellbeing Centres, and the recommendations in this report take account of this feedback.

If the recommendations are approved how the change is implemented will be explored and reviewed within the Council and with the Head Teachers and Governing bodies. The potential decisions and changes if approved are:

- The three 0-19 Family Wellbeing centres are not developed, and early help are wholly delivered by the Children Centres
- Seaforth is not relocated
- A new funding methodology is introduced in 2018 that considers:
  - The reach (geography) that Family and Children Centre management are responsible for thereby impacting on their budgets
  - All early help are within Children Centres
  - A possible impact on number and type of activities taking place
  - A possible reduction in opening hours for a number of Family and Children Centres
  - Management and staffing
- Officers will work with Health colleagues to look at the potential development of Health and Wellbeing Centres

As the locality model develops and the 0-19 strategic approach is implemented the Council and partners will continue to explore future opportunities. The Council is keen to work with partners to ensure that positive approaches are put in place that will help all members of our community to live happy and healthy lives, with positive approaches in place for those that need that bit of extra support from time to time.

In the future once current service delivery has been redesigned and the duplication of current Council activity removed, a more integrated model with NHS partners could be reconsidered. Through existing work it is clear that they have an ambition to explore the development of Health and Wellbeing Centres.

#### Recommendation(s):

Cabinet is asked to

- 1. Take account of the Vision Outcomes Framework at para 1.6 in considering the recommendations in this report.
- 2. Consider and take account of community feedback, risks, and equality reports when considering the options and recommendations
- 3. Approve the principles, as described at para 3.6, for a 0-19 Family Wellbeing approach, described in paragraph 6.3
- 4. Approve that all existing Children and Family centres remain open in their current locations; and that the offer is revised to take account of the extended age range (0-19 year olds). The funding for the Family, Children centres and School Readiness will be contained within a new funding methodology identified in paragraph 7.4 which will in many cases reduce budgets, which will in turn potentially impact on activity delivery and opening hours.
- 5. Approve that the Council explore its ambition to work with health and all partners to deliver Health and Wellbeing centres within the context of locality working
- 6. Agree that the funding methodology be refreshed on a biennial basis (every two years), using updated information
- 7. Approve that the management oversight of all Family and Children centres sits within Council control
- 8. Agree that the Council Officers continue to engage with schools on the implementation of the approved change
- 9. To note that the Health and Wellbeing Executive Group, with Officers, will consider opportunities for the formation of Health and Well Being Centres in Sefton that would potentially see the community able to access Health and Council services in shared locations
- 10. Agree the schedule of childcare subsidy removal, and the further consultation with head teachers and governors as shown at paragraph 6.9
- 11. Agree to the commencement of all appropriate activity as detailed, including for example, consultation with head teachers, governors, employees and engagement with partners and contractual changes. Subject to discussions the new arrangements are to be introduced by the end of July 2018
- 12. Note that officers will comply with agreed HR policies, with particular attention to staffing, equalities and procedures including relevant consultation with Trade Unions and reports to the Cabinet Member (Regulatory, Compliance & Corporate Services), and Officers may be permitted to implement change as required after appropriate procedures.
- 13. Delegate authority for future decisions relating to the implementation of this recommended change and biennial changes to the methodology, to Cabinet Member for Children, Schools and Safeguarding in consultation with the Director

for Social Care and Health.

#### Reasons for the Recommendation(s):

Council decisions over the last 6 years have centred on the priority given to our most vulnerable people and those core services that communities expect to see delivered. The Council has a proven track record of engagement, consultation, listening and considering feedback in the decision making process. The recommendations in this report take account of community and partner feedback, the Council's Core Purpose and seek to protect the most vulnerable, shift focus towards prevention and ensure equity of funding across Children's, Family Centres and School Readiness. Only such a strategic approach can mitigate the demand and financial pressures that will continue to be faced by the Council.

The Council is at a point where doing more of the same or trying to do more of the same with less money is going to fail children, young people, families and the communities.

### Alternative Options Considered and Rejected: (including any Risk Implications)

Maintaining the status quo is not an option due to demographic and budgetary pressures and the lack of a transparent funding methodology.

There have been a number of alternative proposals submitted by schools, Family and Children centres and members of the public. These have given the Council additional useful suggestions and have been considered, however they, for the most, did not consider borough wide need nor provide the equity that a funding methodology provides. In developing the methodology Officers considered the suggestions made but not the centre focused suggestions that were given. The options considered are listed within the report at paragraph 5.4 and rejected including:

- Proposal consulted on Move to three Family Wellbeing Centres with additional complementary bases
- Continue with current funding allocation methods

# What will it cost and how will it be financed?

#### (A) Revenue Costs

Within the following report are details of the key revenue budget changes that will be experienced as a result of this strategic review. The financial implications focus on the removal of the childcare subsidy provided to some Children Centres on a phased basis from 2018 and a new funding formula in relation to Children's, Family Centres and School Readiness. These proposals will generate savings to the Council as set out within the report and these will be captured as part of the Councils overall Medium Term Financial Plan.

## (B) Capital Costs

#### Implications of the Proposals:

## Resource Implications (Financial, IT, Staffing and Assets):

The financial implications arising from this strategic review are as set out in the report. It is anticipated that the current childcare subsidy will reduce on a phased basis by £655,000 per annum with the budget for Children's and Family Centres reducing by around £996,550 per annum based on the formula proposed. It is proposed that this funding methodology will be reviewed on a biennial basis

The proposals contained within this report have a potential impact upon employees and the potential for both voluntary and compulsory redundancies. It will be necessary for the Authority to comply with the duty to consult with recognised Trade Unions and employees and to complete as necessary a notification under Section 188 of the Trade Union Labour Relations (Consolidation) Act 1992. Also form HR1 to the Department of Business Innovation and Skills notifying of redundancies has yet to be filed. Full and meaningful consultation should continue to take place with the Trade Unions and employees on the matters contained within this report.

The impact on physical assets will be assessed during the implementation phase. All Family and Children centres will remain open under these recommendations.

## Legal Implications:

Childcare Act 2006 and associated statutory guidance.

The requirements for fair consultation are also set out in *R v North and East Devon Health Authority*, ex p Coughlan [2001] 1 QB 213 as follows [at 108]:

- (a) The consultation must be undertaken at a time when the proposals are still at a formative stage;
- (b) It must provide sufficient information, in detail and clarity, for consultees to give the proposals intelligent consideration and an intelligent response;
- (c) There must be adequate time for the response;
- (d) The responses must be considered conscientiously and taken into account when the decision is taken.

## **Equality Implications:**

In relation to compliance with the Equality Act 2010, Section 149, Members need to make decisions in an open minded balanced way showing due regard to the impact of the recommendations being presented. Members need to have a full understanding of any risks in terms of people with protected characteristics and any mitigation that has been put in place. Equality Impact Assessments, including consultation, provide a clear process to demonstrate that Cabinet and Council have consciously shown due regard and complied with the duty.

## **Contribution to the Council's Core Purpose:**

Protect the most vulnerable: the proposed strategic approach seeks to

- Ensure a focused 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

Facilitate confident and resilient communities: the proposed model seeks to

• 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
- 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.
- Recognise importance of friendship circles

Commission, broker and provide core services: the proposed model will see the Council act as outcome focused commissioner of services which meet the defined needs of communities, are person-centred and localised.

Place – leadership and influencer: the Council will work with partners, in particular Health, to work towards common goals in relation to the potential to create Health Wellbeing Centres

Drivers of change and reform: the proposed model seeks to

- ensure a focus on outcomes
- ensure a targeted and evidence-based approach for those children and families who are in the greatest need

Facilitate sustainable economic prosperity:

Greater income for social investment:

Cleaner Greener

#### What consultations have taken place on the proposals and when?

## (A) Internal Consultations

The Head of Corporate Resources (FD 4934/17) and Head of Regulation and Compliance (LD.4219/17) have been consulted and any comments have been incorporated into the report.

#### (B) External Consultations

The external consultations are detailed in the consultation report provided as a background document and summarised further in this report. The methodology was approved by Sefton's public engagement and consultation panel.

#### Consultation included:

- Meetings at Children Centres with Q&A sessions
- Meetings with head teachers, governors and advisory boards
- Council webpages giving information, a frequently asked questions section, progress updates
- Messages given out through social media
- Monitoring and collecting views from social media discussion groups (such as on Twitter and Facebook)
- Access to a questionnaire with information on Council's internet

- Hard copies of questionnaires at all centres, libraries, leisure centres
- Questionnaires in other languages
- Easy Read questionnaires
- Attendance and meetings with targeted representative groups
- Attendance at and meetings with specialist groups such as Making a Difference, New Beginnings and the two NHS Clinical Commissioning Group, Governing Bodies responsible for commissioning health care in Sefton.

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## **Appendices:**

The following appendices are attached to this report:

- A Map of existing Family and Children centres
- B & C Centre budget information
- D Summary of proposed funding arrangements
- Consultation report;
- All Children's Centres Public Engagement and Consultation Sessions from 25 September – 17 November 2017;
- · Equalities report on proposal;
- · Equalities report on funding methodology.

## **Background Papers:**

The following background papers, which are not available elsewhere on the Internet, can be accessed on the Council website:

- Children's Commissioner Family Hubs October 2016
   <a href="http://modgov.sefton.gov.uk/moderngov/ecCatDisplay.aspx?sch=doc&cat=13837">http://modgov.sefton.gov.uk/moderngov/ecCatDisplay.aspx?sch=doc&cat=13837</a>
- O&S report early intervention and prevention October 2017 <a href="http://modgov.sefton.gov.uk/moderngov/ecCatDisplay.aspx?sch=doc&cat=13837">http://modgov.sefton.gov.uk/moderngov/ecCatDisplay.aspx?sch=doc&cat=13837</a>
- Note population data and deprivation information is available on the Council website here
- SEND Improvement Plan <u>http://modgov.sefton.gov.uk/moderngov/ecCatDisplay.aspx?sch=doc&cat=13837</u>
- Equality and Diversity Policy 2016 2020 (refresh 2017) <a href="http://smbc-modgov-01/ieDecisionDetails.aspx?ID=10437">http://smbc-modgov-01/ieDecisionDetails.aspx?ID=10437</a>

# 1. Background

- 1.1 Family is one of the most important influences in a child's life. Children depend on family to protect them and provide for their needs. By nurturing and teaching children and young people families play a lasting role in making sure that children reach their full potential. The friendship networks that families are part of also play a key role in supporting parents and carers along the way. These networks often develop through being a member of a group or attending a local community activity. Sometimes families need a bit of extra support so that children and young people thrive and parents and carers learn new skills or access information and advice. However, there are times when child protection concerns become so great that the child or young person no longer lives with their family.
- 1.2 The network that currently supports Sefton families includes 10 Children, 4 Family Centres and the School Readiness Service. However, since the introduction of the Children and Family Centres in 2006-2007 there has been no review of the strategic vision and given the significant change in successive Government and local policies, Sefton is now taking a strategic approach taking account of the Council's Core Purpose and the approved approach to locality working.
- 1.3 Currently within Sefton, there are 10 Children's Centres operating from a number of schools and Council bases with delivery points in community bases. Nine Children centres are based on Nursery or Primary School premises; operating as a commissioned service, governed by the school and quality assured by the Council's School Readiness Team, who is part of the Council's localities model. The tenth centre is under direct management of the Council and operates from a Council building. All Children's Centres are subject to inspection by Ofsted; however this inspection regime is currently paused pending a government review. For latest inspection outcomes see Annex B
- 1.4 In addition to this there are 4 Family centres, two of these Family centres are already co-located with a Children's Centre and two stand alone. The Family Centres are wholly directly managed by the Council. Again all Family Centres are subject to inspection by Ofsted.
- 1.5 In recent years the Council has carried out extensive consultation with the community and has a proven track record of engagement, consultation, listening and considering feedback in the decision making process, on occasion changing the proposal consulted on because of community feedback.
- 1.6 Members will recall the Council's commitment to taking account of the Vision Outcomes Framework in the decision making process and in considering the recommendations in this report Cabinet is asked to take particular account of the following outcomes
  - All of our communities live happy and healthy lives, with positive approaches in place for those that need that bit of extra support from time to time
  - People are influencing decisions which affect them and communities work together and with partners to deliver effective change
  - People feel safe and supported and are free from discrimination and harm

- People understand and exercise their safeguarding responsibilities
- People are well informed
- People enjoy being part of energetic local communities with their own unique identities and sense of pride
- People are accessing improved information enabling easy access to cultural, leisure and social opportunities

## 2. The Current Operating Model

- 2.1 A Children's Centre is a place, or group of places, where individuals, local families, and those with young children can go and enjoy activities and receive support that they need. The purpose of a Children's Centre is to improve outcomes and ensure that all children have the opportunity to reach their full potential for young children and their families by shaping:
  - child development and school readiness
  - parenting aspirations and skills
  - child and family health & wellbeing, mental health and life chances

Families are offered a wide range of universal and targeted services such as:

- postnatal services including bonding with your child
- stay and play (often supplemented with Welfare Reform Support)
- confidence to re-join the workforce
- supply of vitamins to support health and wellbeing of families

Those families who are most in need are offered tailored support pathways across a wider range of services, such as support through periods of poor mental health or low mood, from a dedicated skilled team.

Some of Sefton's Children's Centres provide childcare which is subsidised by the Council – see paragraph 6.9 and annex B.

- 2.2 In 2006, in line with government policy, Sefton took a phased approach to the implementation of Children's Centres, with phase 1 being for families in those areas with the highest deprivation. Phase 2 took place 2007/2008 and phase 3 in 2010 in order to provide a wider offer across the borough. Annex A provides a map of Children & Family Centres.
- 2.3 The table at annex B details further current information relating to Children's Centres.
- 2.4 Family Centres provide services to Sefton's most vulnerable children, young people and their families. Their work includes
  - the development of early help (interventions that addresses families concerns to avoid them needing a statutory service, e.g. parenting help, relationship support) plans and delivery of some of the associated activity
  - working with children and young people who are subject of interim care orders

- working with children and young people who are subject to Child Protection and Child in Need plans
- parenting assessments with families under any social care plan
- direct work with children on plans in order to understand their lived experience and how to improve their outcomes
- supervision of and assess contact between looked after children and their parents
- unannounced safeguarding visits to family homes where there is high risk of domestic abuse, substance misuse and mental health issues
- supporting social workers to ensure that children who are receiving statutory intervention through social care involvement are safe to remain with their families, and to support families to improve family life to a level that they no longer require state intervention

For those children who are subject of Interim Care Orders, the assessments are filed with the Courts in order to support plans for children either to remain in permanent placements away from the family home or whether children should be remain with or be returned to their parents.

- 2.5 Annex C details current Family Centres funding.
- 2.6 School Readiness provides two elements of delivery only part of which is aligned to proposed Family Wellbeing Centres, these are services to vulnerable young children and families. Their work includes:
  - The work primarily focuses on early years children and families
  - Delivering group sessions to families in Children's Centres
  - Working with families through supervised contacts in Family Centres
  - Supporting children and families to access and deliver the two year old offer
  - 1:1 support for vulnerable families

## 3 Family Wellbeing Centres – A proposed new approach

- 3.1 For some time our communities have told us that they want a more joined up approach to working with families. In March 2017 Council approved the concept of locality working. In developing this proposal the Council adopted a collaborative approach to change. It is important to stress that the proposals consulted on are not just about reducing costs, they are driven by a combination of factors such as a desire to reduce inequalities in our communities and shift the focus towards prevention. The approach taken in developing the proposals was to enable people to have a say and a role in how we achieve the change or suggest alternative solutions. In developing the proposals for consultation Officers have endeavoured to identify the impact on the community of Sefton.
- 3.2 The Director of Social Care and Health has led this review of the current Children's Centre and Family Centre offer, delivery points and associated funding.

Following extensive work a draft vision for the future of the Children & Family Centres has been developed and resulted in the draft strategic vision described below within the principles.

- 3.3 The Director of Social Care and Health also held internal working groups and conducted a number of meetings with Head teachers to develop a draft strategic approach. In addition, visits to all the Children and Family Centres have been undertaken, including some visits alongside Cabinet Members.
- 3.4 The proposal for remodelling and developing a 0-19 Family Wellbeing approach is part of a wider transformation process relating to Early Intervention and Prevention –Locality Working an integrated approach to multi-agency working. The proposal takes account of the fact that parents are children's first and most enduring educators. Building the capability and capacity of parents and family members to support themselves and support one another is central to our proposed approach.
- 3.5 The draft strategic approach for the Family Wellbeing approach clearly outlines the principles and approach the Council wishes to adopt. It was proposed that Sefton widens the offer to 0-19 by extending outreach support into schools and the community. This also complements the work undertaken by Overview and Scrutiny Management Board working group on Early Intervention and Prevention Strategy.
- 3.6 The proposed key principles of the Family Wellbeing approach are to:
  - 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.
- 3.7 This approach is supported by a report produced by the Children's Commissioner in October 2016 (included as a background document) that describes the benefits of family hubs, promoting and encouraging the development of integrated support around the needs of the whole family. The report goes on to recommend a coordinated approach that provides an environment for services to work together

- and not in isolation this doesn't necessarily mean merging buildings but joining up of intelligence and working better together.
- 3.8 This approach will extend the offer at Family and Children Centres to include support for parents, carers and all children regardless of age.
- 3.9 Further evidence that supports this approach is the report of Sefton's Overview and Scrutiny Management Board Early Intervention and Prevention Strategy working group, October 2017. This report recommends the integration of a wider set of health and clinical services to be integrated into Sefton Council's hubs, working together with an integrated approach to deliver the required services (as described within the report). This shows further synergy with the Family Wellbeing 0-19 integrated approach.

## 4 Consulting on the proposed new approach

- 4.1 In order to ensure that people are influencing decisions which affect them a consultation commenced on 25<sup>th</sup> September 2017 and closed on 17<sup>th</sup> November 2017. In developing the approach to consultation schools and partners based within Family and Children's centres were notified that the consultation would take place, with centre managers coproducing the questionnaire and all aspects of consultation. As with other changes that impact on the community the Council has adopted a collaborative approach. Through this consultation the Council has sought to further improve its understanding of the impact associated with the proposals, the desired outcomes and associated risks.
- 4.2 A summary of the consultation report is available below and the detailed report is available as a background document.
- 4.3 The consultation asked about the proposals to create 3 Family Wellbeing Centres, working with complementary Children centres.
- 4.4 The intention of the consultation was to provide:
  - 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 and the broader community which can be taken into account when re-designing the approach
  - Access for those who have more difficulty to give views but wish to do so
  - Adequate time for those wishing to respond to have the opportunity to do so
- 4.5 The consultation included groups who may not currently use the Family and Children centres and these include:
  - Young parents
  - Families from minority ethnic groups
  - Disabled parents
  - Parents of disabled children / children with SEN
  - Travellers

- People who have difficulty reading, writing or speaking English
- Parents on low income
- Groups such as 'Making a difference'; New Beginnings; Chameleons and Buddy Up.

The methods were supported by a number of tools, including:

- > A maintained webpage
- Frequently Asked Questions
- Social media
- Press & Media briefings
- > Radio
- Posters
- > Easy read questionnaires
- Translated questionnaires (Polish, Latvian and Lithuanian)

The schedule of consultation and engagement was as follows:

Date 2017	Activity
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
26th 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
5 <sup>th</sup> December	Overview and Scrutiny Committee (Children's Services
	and Safeguarding)
7 <sup>th</sup> December	Cabinet consider recommendations

- 4.6 Listening to the communities of Sefton is critical in the decision making process. Regardless of how people are engaged, it's important to understand that listening involves more than just hearing the words that are directed at the Council. The Council has actively listened and understood people's views in this consultation considered and assessed the feedback and the recommendations later in this report reflect what has been heard.
- 4.7 Reponses have been analysed and taken into account. Findings from the evaluation have formed part of the considerations in recommending the new funding methodology and operational changes.
- 4.8 Consultation key points and responses:
  - 1. There were 1662 responses to the questionnaire and not all answered every question, of these

- a. 71% (the largest group) were from parents and/or carers
- b. 3% of respondents were from children with caring responsibilities
- 2. There was a good return from every centre with the highest returns from Linaker (by far); First Steps and Seaforth, of these:
  - a. 57% used their Children Centres weekly
  - b. The highest percentage walked to their centre 50%, closely followed by use of a car 33%
- 3. In answering the question of what activities are used regarding health and wellbeing, key responses were:
  - a. Child development 19%; vitamin collection 13% and emotional wellbeing 9%
  - b. Other responses stating popular key activities being accessed at Family and Children centres are detailed in the consultation report and include, well baby clinic; stay and play; baby massage; using the centre as a drop in.
  - c. The feedback highlights a significant amount of health services accessed by the community
- 4. Regarding the proposed principles for 0-19 Family Wellbeing Centres and the associated proposals, the questionnaire responses, for those that answered, showed that:
  - a. For the principles 80% agreed and 15% disagreed with some or all
  - b. For the proposals to create three Family Wellbeing centres 33% agreed but 63% disagreed
- 5. Three best activities identified by 542 respondents are:
  - a. 298 (55%) respondents considered stay and play as a vital service
  - b. 129 (24%) people considered family support vital to them
  - c. 63 (9%) people considered breast feeding support one of the top vital health and wellbeing service
- 6. From the presentations and meetings the key themes raised throughout were the following:
  - a. Getting there is an issue for access to proposed 0-19 Family Wellbeing centres as the majority walk and the difficulty of using public transport with buggies, plus for those who use their car (second highest mode of travel) parking is seen as an issue.
  - b. Friendship networks have been formed and are vital for support and the community indicated in their responses that they utilise community offers, such as those offered by the voluntary, community and faith sector, at many locations throughout their local neighbourhood
  - c. Some respondents were concerned that the proposed principles are too targeted and they won't be able to utilise the proposed 0-19 Family Wellbeing Centres to access a universal offer.
  - d. Some parts of the community do not wish to travel to another centre that they view as being outside their neighbourhood
  - e. There were a number of comments about suitability and disrepair of buildings for a Family Wellbeing centre, including lack of car parking and general appearance.
- 7. There were a number of additional items submitted, as follows:
  - a. Keep Linaker Children's Centre Unchanged and Remaining Open for the Public petition
  - b. Linaker Save our only Children's Centre petition
  - c. Seaforth children centre petition

- d. One unnamed centre petition but with Southport postcodes
- e. A number of letters from the community and employees
- f. E-petition to keep Children's Centre unchanged
- g. Letter from Hope Baptist Church
- h. Letters with personal stories from a number of parents
- i. Pack of information from Thornton with case studies and statistics with regard to SEN
- i. A number video clips and presentations from the community
- k. Note that 42 questionnaires were returned and 1 petition submitted after the consultation closing date. These have been accepted.
- 8. Some selected comments (all within consultation report) from the feedback within questionnaires and the various meetings include:

"I agree in principle with all these proposed approaches however I seriously doubt that they will be achieved without local centres that are fully staffed. An approach that centres around 3 bases with smaller outreach is doomed to fail. The focus will be on the most demanding and needy families and on crisis support rather than the current approach of preventative services. Health and wellbeing is the most important part of support work and without local support with consistent staff many opportunities will be missed. Children's centres have built up a reputation of being a safe place to go for help and advice so I can only assume that fewer centres means lots of families will miss out on this support due to inability to travel to the centres or due to the lack of confidence in new outreach centres"

"Agree with principles but not with reduction in centres where they can be accessed."

"There are families who are forgotten about, the ones that don't qualify for anything so having a children's centre to go to should not be taken away from them. It is not all just pupil premium children who need looking after"

"I worry about the co-location proposals because I feel it will have a detrimental effect on services for vulnerable families. In particular I feel that families who have children with disabilities will be disadvantaged due to access difficulties. There must be a focus on outreach services for this group of families and a clear pathway for support for every need. Mental health must also be given a high profile for parents, carers and children. Consultation is ok if opinions are taken into account and if these proposals go ahead then I feel it is essential that service users are given a voice in shaping future services with advocacy support for people who struggle to have a voice e.g. disabled people, people with substance misuse issues, children, children with disabilities"

"Parent run classes could be a great initiative in centres to promote social interaction from 0 years. I feel if we could get parents CRB checked and then support and encourage them to run the groups. I would be more than happy to run one via the centre on my day off when I return back to work. Donations of toys from families could help support but in terms of cost savings it means a colleague can be free to support elsewhere rather than do the stay and plays."

#### 5 Options Discounted Based on Consultation Feedback & Further Research

5.1 The proposals for remodelling and developing a Family Wellbeing approach is part of a wider transformation process relating to Early Intervention and

Prevention – Locality Teams. However the consultation clearly evidences a lack of support for the proposed creation of 3 Family Wellbeing Centres with the remaining Children centres becoming complementary bases.

- 5.2 There have been a number of alternative proposals submitted by schools, Children and Family centres and members of the public. These have given the Council additional useful suggestions and been considered, however, as they, for the most, did not consider borough wide need nor provide the equity that a funding methodology provides we used general suggestions but not the individual centre focussed suggestions that were given.
- 5.3 Officers have given due consideration to these alternative suggestions and undertaken further analysis.
- 5.4 The table below summarises the options considered by officers and the reason why their progression is not recommended;

#### Option Reason not recommended Proposal consulted Having undertaken an extensive, open and transparent on consultation with the community there is clear Move to three Family agreement with the draft strategic principles Wellbeing Centres and additional complementary however, there is a significant lack of support for the proposed creation of the three Family Wellbeing bases Centres with complementary bases proposed. During the consultation many people shared their life experiences openly and how their current local centre has supported them at difficult times in their lives. Many people raised similar issues with the proposed change such as friendship and support circles, getting to a different venue, and the mix of activity at each venue. One of the proposed Family Wellbeing Centres, Waterloo, is a proposal that the school governors do not wish to pursue. However, Cambridge and Seaforth has expressed an interest to become a Family Wellbeing Centre. In addition to the community feedback further analysis has identified building work requirements at certain The locality working project has now locations. identified potential opportunities associated with the use of buildings that would maximise customer usage of assets throughout the Borough. The number of other integration projects, proposed Health Wellbeing hubs and the potential integration of other public bodies suggest that a staged approach should be taken to align better, if appropriate, at a later date.

Option	Reason not recommended								
Continue with current funding allocation methods	Current funding allocation methods are based on historical decisions, It is not recommended to continue on this basis as it does not readily provide transparency nor enable enough flexibility to be reviewed and revised when demographics change with the focus on the 0-19 principles.								
Individual school proposals	These have given the Council additional useful suggestions and been considered, however, as they, for the most, did not consider borough wide need nor provide the equity that a funding methodology provides. In developing the methodology Officers considered the suggestions made but not the centre focused suggestions that were given.								

#### 6 Recommendation

- 6.1 In developing these recommendations Officers have taken into account further analysis and research with the communities feedback relating to the outcomes achieved, benefits of local Family and Children centres on them as individuals, families and networks.
- 6.2 The consultation evidences clear support for the proposed Family Wellbeing principles and a lack of support to the proposal to move to three Family Wellbeing Centres and additional complementary bases. Cabinet is asked to:
  - Approve the principles, as described at para 3.6, for a 0-19 Family Wellbeing approach, described in paragraph 6.3
  - Approve that all existing Children and Family centres remain open in their current locations; and that the offer is revised to take account of the extended age range (0-19 year olds). The funding for the Family, Children centres and School Readiness will be contained within a new funding methodology identified in paragraph 7.4 which will in many cases reduce budgets, which will in turn potentially impact on activity delivery and opening hours.
  - The Council explore its ambition to work with health and all partners to deliver Health and Wellbeing centres within the context of locality working
  - The funding methodology be refreshed on a biennial basis (every two years), using updated information
  - Management oversight of all Family and Children centres sits within Council control
  - Officers continue to engage with schools on the implementation of the approved change
  - To note that the Health and Wellbeing Executive Group, with Officers, will consider opportunities for the formation of Health and Well Being Centres in Sefton that would potentially see the community able to access Health and Council services in shared locations

6.3 The implications of implementing the recommended operating model are described below. For developing the principles but not the 0-19 Family Wellbeing centres, Officers will implement a Family Wellbeing approach that uses the agreed principles and applies that to the way the Family, Children centres and School Readiness work with each other to become an integrated service joining up early help and 0-19 services.

<u>Families</u> - The recommendations will provide the opportunity to access the current estate as it is now. Activities, including those provided as outreach, will be reviewed on a regular basis as they are now.

For some families there may be a change with their key worker, this may impact on the families' networks and friends. The early help work currently accessed by some families in Family Centres will now take place in children centres. This along with redesigning the service delivery will address current duplication.

<u>Head teachers / Governing Bodies</u> — The recommendations may represent a significant change to schools who have invested time and expertise in the formation of a commissioned model. Consequently careful discussion and negotiation will be needed and this has started with outline discussions. Therefore further discussion and negotiation will be required with individual schools and governors to explore the implications of this. It could be possible that a hybrid approach can be adopted to suit the needs and strengths of individual schools.

In some areas the 'reach' (footprint) is recommended to be changed producing a new footprint to support localities in accessing services closer to their communities, as well as making efficiencies across some systems. The following is the recommended footprint:

Existing footprint	Recommended footprint						
Seaforth	Seaforth						
Waterloo & Thornton	Waterloo						
Springwell	Springwell						
Netherton	Netherton & Thornton						
Hudson	Hudson						
Freshfield	See below						
Kings Meadow & Farnborough	Kings Meadow & Farnborough & Freshfield						
Linaker	Linaker						
Cambridge	Cambridge						
Litherland	Litherland						

Given the intertwined nature of schools and Children's Centres there will be a number of ancillary issues; such as related staffing, contracts and use of buildings. This will require individual discussion with each school.

<u>Staffing</u> – The recommendations in this report will inevitably have consequences for employees of both the Authority centrally and those employed by schools.

Existing procedures are in place whereby school employees are employed by delegated responsibility to schools and their Governors. Centrally employed Local Authority employees have direct line management within the Local Authority.

In terms of the implementation of the model, there will be a necessity, after considering the potential staffing implications, to follow both procedures as required.

General principles around any implementation will be discussed as normal through the recognised Joint Trade Union Forum and one particular issue that has been agreed is that there will be a necessity for some modification of existing redeployment opportunities whereby school based staff are given access as agreed with trade unions.

Some school based staff may ultimately need to also move away from the delegated responsibility of a school to become a centrally employed Local Authority employee and this again will need to be the subject of careful discussion with schools, trade unions and employees.

The officers are acutely aware of the need to deal with all matters sensitively following appropriate procedures and following recognised consultation process with trade unions.

In relation to school employees moving to centrally employed Local Authority status, schools currently hold budgets up to April 2018, so potentially the actual move of responsibility would potentially take place after this date.

<u>Buildings</u> – If the service is no longer commissioned (following discussion with school governors), further negotiation and work will be needed to secure the use of the current children's centres as delivery sites and/or secure the use of the children's centre footprint for delivery of 0-5 services.

- 6.4 <u>Childcare Subsidy</u> Members will be aware that the current childcare service is distinct from the core children's centre offer and the Council currently provides a subsidy to a number of Children Centres who offer childcare (see annex B).
- 6.5 Since 2013 the Government has introduced funding for eligible 2 year olds to enable access to free early education and childcare. The introduction of the funded 2 year old offer coincided with the Government's push for all schools to alter their age range allowing them to admit and register children from the age of 2. This has resulted in a changing childcare landscape, as many schools have absorbed 2 year olds into their school provision, without the requirement for financial support or a subsidy. For Children Centres with childcare, this has meant a constant flow of funded 2-4 year olds into their provision.
- 6.6 Given the government changes to childcare funding policy, school priorities, community take up of two year old funding and pressure on Council budgets the childcare subsidy is no longer appropriate and is recommended to be ceased in a phased manner, in accordance with individual school/community needs and the extent of existing services. It should be noted that there are many opportunities to access high, quality childcare provision in Sefton.

6.7 Over time, a number of schools have utilised the childcare subsidy so that it supports childcare services beyond the intended 0-5 age range. In these cases, an extended and phased removal of the subsidy is suggested allowing those schools in question to make alternative provision/arrangements.

#### 6.8 Implications:

<u>Families</u> - The removal of the childcare subsidy may affect some families, in that in a number of cases families will need to source alternative provision. However, the latest sufficiency data suggests that there is ample high quality provision within the pram pushing 1.5 mile radius. Whilst this may be an upheaval for some families they will be supported through the process, on an individual basis. It is worthy of note that the childcare market across Sefton is of a very high standard (above National and Regional averages) therefore finding a good or outstanding alternative provider should not be problematic. Some market development with the private child care sector may be required to cater for government to provide 30 hours free child care for working parents.

<u>Head teachers / Governing Bodies</u> – Each school presents a differing picture and stance on childcare. As a result transition arrangements will need to vary from school to school and be co-produced with governors and head teachers on an individual basis and within differing timescales.

<u>Staffing</u> – It is anticipated that the removal of the subsidy will result in a number of job losses in schools. Some schools may choose to redeploy some of those at risk internally.

Existing procedures are in place whereby school employees are employed by delegated responsibility to schools and their Governors. Centrally employed Local Authority employees have direct line management within the Local Authority.

In terms of the cessation of the subsidy, there will be a necessity, after considering the potential staffing implications, to follow existing procedures as required.

General principles around any implementation will be discussed as normal through the recognised Joint Trade Union Forum and one particular issue that has been agreed is that there will be a necessity for some modification of existing redeployment opportunities whereby school based staff are given access as agreed with trade unions.

As with other potential changes in this report officers are acutely aware of the need to deal with all matters sensitively following appropriate procedures and following recognised consultation process with trade unions.

<u>Buildings</u> – It is important to note that once a building is no longer used to offer childcare there is the potential of a clawback claim, it is not anticipated that this will occur as the intention is to use such space to continue activities that includes supporting 0-5 delivery.

6.9 Following engagement with schools the proposals for the cessation of the subsidy are detailed below

Childcare delivered from	Current Amount £	Timescale proposals
Cambridge Road	103,635	Removal of subsidy from April 2018
Springwell	118,626	Phased reduction of subsidy with full removal by July 2018
Litherland	135,840	Removal of subsidy from July 2018
Hatton Hill	90,471	Removal of subsidy from July 2018
Linaker	86,183	Removal of Subsidy from July 2018
Seaforth (Sand Dunes)	121,000	Removal of the subsidy from April 2018

- 6.10 Cabinet is asked to agree the schedule of subsidy, and the further consultation with head teachers and governors as shown in the above table.
- 6.11 During the consultation period a number of issues were raised about the current numbers of children attending Seaforth Nursery School and its consequential impact and viability of the Centre. This matter will be further explored in 2018.

# 7 Funding the recommendation

- 7.1 Any change to the operating approach would require a new approach to funding in order to ensure future sustainability. A new funding methodology will provide a more equitable and fair distribution of monies across our most deprived areas, enabling the best possible outcomes.
- 7.2 In line with the recommended strategic vision it is proposed that a new funding methodology will underpin the new model. The need based methodology will allocate staffing and operational costs on a clearly defined basis that reflects the Council's ambition for families within the resources available according to a given reach.
- 7.3 The current Children's Centre and Family Centre budgets, including commissioned services linked to Children's Centres and the budget associated to part of the Council's School Readiness team is the baseline for the development of the methodology. The budget linked to Family Centre management has already been accounted for within locality working.
- 7.4 The recommended funding model has been developed using

- the Income Deprivation Affecting Children Index (IDACI), which is also used locally to allocate some school funding
- inequalities in particular disability, migrants (English as a Second Language), travellers
- reach footprints
- the number of new births
- an indication of the percentage of children in an area requiring social care support
- case weighting for children in need and looked after children
- a minimum funding protection factor that ensures no centre will see a reduction in funding by more than 31% of its historical funding.

The model will bring parity and see resources targeted to deprivation and disadvantage and some allocated universally. It will support the allocation of staffing and other costs on a clearly defined basis

- 7.5 A weighted funding methodology has been adopted which takes account of and supports a flexible and well trained workforce. The recommended methodology has taken consideration of the detailed assessment on equality in the background documents.
- 7.6 It is recommended that the methodology is refreshed on a biennial basis so that it reflects changing demographics and need.
- 7.7 The implications of implementing the recommended funding methodology include:
  - <u>Families:</u> Due to the weightings within the methodology, it will ensure that
    the requirements of those most in need are met, in particular those with
    protected characteristics, but will continue to recognise the benefits of
    universal access to information, advice and support
  - <u>Safeguarding:</u> balancing the risk of a reduced budget in Family Centres against a reduced budget in Children's Centres and School Readiness is a complex issue. The proposed methodology has taken consideration of this challenge and identifies the number of staff required in every centre to ensure safeguarding activity is optimised.
  - <u>Staff:</u> Overall there will be a reduction in staffing with a matrix management approach. The recommended model will require flexibility as new ways of working develop. The changes in ways of working will require investment in staff development and training.
    - <u>Centre budgets:</u> The impact on each centre's budget is summarised in annex D
- 7.8 Members should be aware that the proposed funding methodology does not include any allowance for childcare.

#### 8 Implementation of the recommendations

8.1 The implementation of this change, subject to approval of Cabinet, will be complex. Once decisions are made, an implementation plan will be developed and progress reported back to Cabinet Member Children, Schools and Safeguarding on a regular basis.

- 8.2 The change will be managed by the newly appointed Localities Service Managers, in conjunction with the Corporate Support and Strategic Support team. This will ensure that dependencies on other projects, other areas of the Council and partners are understood and carefully managed.
- 8.3 Where the service is commissioned it will be based on the 0-19 Family Wellbeing principles as described in paragraph 3.6, the implementation plan will be coproduced with governors, head teachers, partners and management of the Children centres.
- 8.4 A continuous open dialogue has continued all through the development and consultation period. This will continue with each school and governors to discuss the practical application of the model and the management model they wish to adopt.

# 8.5 Further engagement with families

- 8.5.1 As plans develop activities in the Children Centres may change the early help support currently delivered in Family Centres will be accessed at Children's Centre locations, some activities may stop and some may be offered as outreach, and new activities may be added. Already in our children's centres we regularly review the activities that offered as need, demand and the seasons change. For example peer support coffee mornings have recently stopped, open access play and stay where universal credit support and advice is available introduced which is being taken up by many families. A mental health and wellbeing pathway has recently been introduced which includes Nurture and Thrive sessions and a Theraplay approach.
- 8.5.2 As now families will be kept fully informed of planned changes to activities and schedule. It will be important that changes are effectively communicated to ensure that the expectation of our communities can be managed.
- 8.5.3 The Council will ensure that children and young people continue to be safeguarded.

## 8.6 Workforce Development & Training

8.6.1 If the recommendations in section 6 are agreed staff will require development and specific training relating to 0-19 age range. An understanding of the functions and integrated working model will be analysed to look at the skills required and the mix available. For some it may mean a change in culture for approach with the locality multi-disciplinary model will be developed across the localities.

## 8.7 Locality working including partners

8.7.1 The approval in March 2017 for the multi-agency locality model is now entering into phase 2. Phase 1 has developed the Council's approach and staffing for locality working with a number of services. Phase 2 widens this

approach by including social care and phase 3 includes partners being part of this model, such as health and other partners. As described earlier in this report this is a staged approach and this model will fit within the approach and will be part of this integrate and matrix management approach.

#### 8.8 Policy, Process & Procedural Change

8.8.1 If the recommendation is approved officers will examine all policies, processes and procedures detailed within this work area, linking to the wider integration agenda.

#### 8.9 Commissioned activity and Performance Management

8.9.1 Understanding and measuring performance will be paramount to develop so performance and successful outcomes are considered and addressed. A clear considered set of outcome measures will be controlled and managed by the teams to ensure the service continues to deliver at a very high standard and is meeting the needs of our community.

## 9 Legal considerations

- 9.1 In order to implement the new operating model, consideration has been given to the relevant legislation incorporated within the Childcare Act 2006. Key aspects which have been considered and addressed are:
  - 9.1.1 Section 5A which places a duty on local authorities to make "arrangements for sufficient provision of children's centres to meet local need". "Local need" is the need of parents, prospective parents and young children in the authority's area.
  - 9.1.2 Section 5D which requires a local authority to secure that such consultation as they think appropriate is carried out
    - Before any significant change is made in the services provided through a relevant children's centre or
    - Before anything is done that would result in a relevant children's centre ceasing to be a children's centre [i.e. closing a children's centre].
  - 9.1.3 In discharging this duty, local authorities must have regard to statutory guidance. Statutory guidance states that local authorities "should not close an existing children's centre site in any reorganisation of provision unless they can demonstrate that, where they decide to close a children's centre site, the outcomes for children, particularly the most disadvantaged, would not be adversely affected and will not compromise the duty to have sufficient children's centres to meet local need. The starting point should therefore be a presumption against the closure of children's centres".
  - 9.1.4 With regard to consultation, statutory guidance states that local authorities should allow adequate time for responses actively encourage parents from disadvantaged groups to participate and demonstrate in their decision that they have taken consultation responses into account.

- 9.2 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 Children Centres will be registered as standalone children's centres with Ofsted. The remaining Children centres will be listed as linked or satellite sites and will no longer be subject to individual inspections. However, it is to be noted that these sites will remain open and accessible to the community.
- 9.3 The proposed model also aligns with how we anticipate Children's Centres will be inspected by Ofsted in the future. Rather than a single centre inspection, it is expected that they will be considered as part of the overall Children's Service inspection regime; as recent Joint Targeted Area Inspections have included some inspection of Children's Centre service delivery. Therefore the existing single centre configuration, managed by schools, does not necessarily lend them to an Early Help, preventative approach.

## 10 Risk Management

- 10.1 As part of the review process Officers have regularly reviewed strategic and operational risks associated with the review and put in place measures to manage those risks.
- 10.2 In considering those risks identified, Officers continue to be mindful of a range of risk factors including but not limited to the following:
  - No change in way of working
  - Existing Family or Children centres and School Readiness are no longer sustainable as a result of new funding methodology
  - The wider integration model does not materialise
- 10.3 There is always a risk that future demand exceeds the funding provided by the methodology. As this new service encompasses children in greatest need there is the potential of future safeguarding risks. However, this will be mitigated by a biennial review of the methodology and the new operating model would see Children and Family centres working in an aligned and integrated way supporting each other's workload. Also, the current restructure within Social Care could provide additional capacity for social workers to have greater contact with families.
- 10.4 Cabinet is asked to note and take account of the risks & mitigating actions outlined above.

## 11 Equality Analysis

11.1 As members make decisions, there is a need to be clear and precise about our processes and impact assess potential change proposals, identifying any risks and mitigating these as far as possible. The impact assessments, including any feedback from consultation or engagement, are made available to Members when recommendations are presented for a decision. This ensures that Members make

decisions in an open minded balanced way showing due regard to the impact of the recommendations being presented in compliance with the Equality Act 2010.

- 11.2 In order to ensure a greater understanding of the specific changes to services on offer, an analysis of information and data will be required on which services will continue to be delivered, reduced and or ceased in line with the new proposals linked to protected characteristic, demographic needs and usage trends. Assessment will also be required on the how families currently access or are signposted into the provision along with the reasons why.
- 11.3 The Council is under a statutory duty to pay due regard to section 149 of the Equality Act 2010 the Public-Sector Equality Duty. Two full equality analysis reports have been completed on both the proposed changes to the children's centres and the funding methodology. The equality analysis on the proposed children's centres recognises that the proposal has been revised to take account of community feedback and further analysis; the equality analysis strongly supports this position and in addition recommends:
  - In developing implementation plans the Council will take account of understanding the needs of disabled users and there is an active process to meet this need
  - English as a second language courses/programmes are embedded services in the most appropriate Family and Children centres
  - The funding methodology takes the above points in to consideration, to ensure Family and Children centres providing for disabilities or English as a Second Language are not disproportionally impoverished compared to other Family and Children Centres.
  - In developing implementation plans the Council will take account of concerns over safeguarding. Issues have been raised in relation to merging Family and Children's Centres and increasing the age of users to 19. Whilst there is evidence of good practice where these two services already share facilities, it's recommended that a policy and practice review takes place, including interested parties and partners, to address public concerns and to alleviate any public anxiousness
- 11.4 The equality analysis on the new funding methodology recognises that it is a clear way forward, with the recommendation that the methodology ensures that:
  - There is consideration and revision/ adjustments to the mechanism to include weighting for disability and language needs
  - There is a clear assessment of the Children Centres that were in receipt of the 'subsidy' as to what they used the subsidy on. That the council will work with head teachers and governing bodies during the recommended schedule of subsidy removal to ensure that the impact on the community is minimal.
- 11.5 Cabinet is asked to consider and take account of the equality analysis report when considering the recommendations.

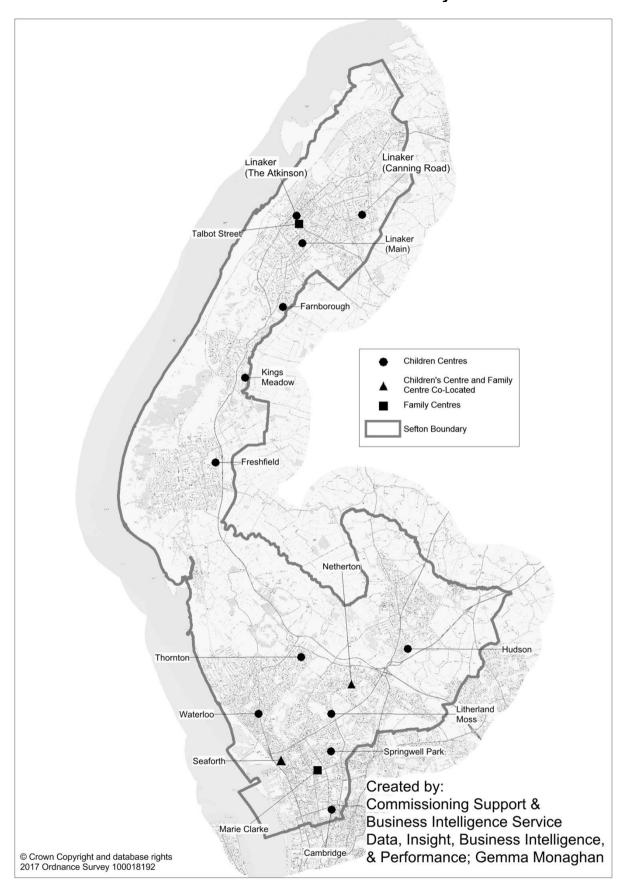
#### 12. Summary

12.1 In developing the proposals relating to locality working and the proposed Family Wellbeing approach the Council has actively listened to the views of the community and the recommendations in this report reflect this. It is clear at this

stage that the community supports the principles of the 0-19 Family and Wellbeing approach and Officers will progress the implementation of this strategic approach, subject to Cabinet approval. However, the community did not support the development of three 0-19 Family Wellbeing Centres, it should be recognised that the community expressed concern about safeguarding, travelling, building suitability and the importance of the locality of the Family and Children centres.

- 12.2 As a result it is proposed that the new funding methodology addresses these areas and focuses on deprivation and other areas set out within this report. Therefore, it is possible to retain the Family and Children Centres within their current bases, however to accommodate the changes within the available budget, it will not be possible to provide the same level of opening hours within all the Children Centres. This will be explored and reviewed within the Council and with the Head Teachers and Governing bodies.
- 12.3 As the locality model developments and the 0-19 strategic approach is implemented the Council and partners will continue to explore future opportunities. The Council is keen to work with partners to ensure that positive approaches are put in place that will help all members of our community to live happy and healthy lives, with positive approaches in place for those that need that bit of extra support from time to time.
- 12.4 In future once the current service delivery has been redesigned and the duplication of current Council activity removed, a more integrated model with NHS partners could be reconsidered. Through existing work it is clear that there is a joint ambition to explore the development of Health and Wellbeing Hubs. Cabinet is asked to agree the creation of a working group to consider the formation of Health and Wellbeing Hubs in Sefton that would potentially see the community able to access Health and Council services in shared locations.

# Annex A Location of Current Children's Centres and Family Centres



Annex B – Current Children Centre budget, Ofsted outcome and childcare subsidy

Children's Centre Phase & yr. established	Ofsted Outcome & Date of Inspection	Children's Centre Budget (£) (without subsidy)	Governance	Childcare Offered	Childcare Subsidy (£)
Cambridge 1 27/04/2007	Good (Feb 13)	228,456	Commissioned service, governed by Cambridge Nursery School	Yes	103,635
Linaker 1 11/07/2006	Outstanding (Sept 2010)	568,767	Commissioned service, governed by Linaker Primary School	Yes	86,183
Litherland 1 24/03/2006	Requires Improvement (July 14)	419,710	Commissioned service, governed by Litherland Moss Primary School	Yes	135,840
Netherton 1 18/09/2006	Good (April 12)	413,650	Local Authority	No	0
Seaforth 1 13/02/2006	Good (Nov 11)	382,050	Commissioned service, governed by Sand Dunes primary School	Yes	121,000
Springwell 1 23/03/2006	Good (Nov 10)	264,676	Commissioned service, governed by Springwell Primary School	Yes	118,626
First Steps (Kings Meadow & Farnborough Road) 2/3 25/02/2008	Good (Nov 14)	207,300	Commissioned service, governed by Farnborough Road Infant School	No	0
Hudson 2	Requires Improvement	187,600	Commissioned service, governed by	No	0

Children's Centre Phase & yr. established	Ofsted Outcome & Date of Inspection	Children's Centre Budget (£) (without subsidy)	Governance	Childcare Offered	Childcare Subsidy (£)
25/02/08	(Feb 14)		Hudson Primary School		
Waterloo/Thornton 2 01/11/07	Good (Jul 14)	325,800	Commissioned service, governed by Waterloo Primary School	No	0
Freshfield 3 28/02/2010	inspected 97,250		Commissioned service, governed by Freshfield Primary School	No	0
Hatton subsid	vith	90,471			

# ANNEX C - CURRENT FAMILY CENTRE BUDGET

Family Centre	Family Centre Budget
Southport (Talbot Street)	571,700
Marie Clarke (Bootle)	500,000
Netherton	503,300
Seaforth	496,000

ANNEX D Summary of proposed funding arrangements

	Linaker	First Steps	Waterloo	Seaforth CC	Hudson	Netherton	Litherland	Springwell	Cambridge	TOTAL
		(including	(without			CC				
		Freshfield)	Thornton)			(including				
						Thornton)				
Change in funding	-£104,418.48	£ 57,159.27	-£ 66,185.45	£ 93,648.71	£ 58,156.45	£163,044.74	£ 130,110.69	-£58,833.76	£126,290.43	-£ 605,267.11
Protection factor			£7,222.00		£16,071.00	£103,087.00	£56,503.00			£182,883.00
% change in funding	-18.36%	-18.77%	-31.00%	-24.51%	-31.00%	-31.00%	-31.00%	-22.23%	55.28%	

	Tal	bot Street	Sea		Seaforth		Seaforth		Ne	therton	Mai	rie Clarke		Total
Change in Funding Protection factor	£.	177,227 £5,258		£	25,232		÷	49,087	£	41,199	÷	292,745 5,258		
% change in funding		-31.00%			-5.72%			-10.31%		-8.72%				