Children's Services, Education and Skills Transformation Programme

BUSINESS CASE – EARLY YEARS

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1. Introduction

This document provides the outline business case for the proposed transformed Early Years Service as part of the Children's Services, Education and Skills Transformation Programme.

Within the document, our proposed themes for transformation are described and Members are asked to approve the new model for implementation.

2. Context

The Rewiring Public Services Programme is the City of York Council's transformation programme and was introduced in October 2013 to help the Council effectively manage the major challenges ahead. The transformation programme recognises that we need to be a more responsive and more flexible Council – a Council that puts residents first.

As part of the Re-wiring programme, Children's Services Education and Skills is transforming the way it delivers Early Years services from Children's Centres with a saving of £400k attached to this project.

3. Underpinning Principles

Across the work of transformation programme, we will adhere to the following principles:

- We will always protect the most vulnerable
- The transformation programme will ensure that defining the role of the local authority as the champion of better outcomes for all children and young people in York is maintained through this programme
- The transformation programme will ensure that the local authority maintains its statutory duties whilst working with partners to develop innovative models of service delivery through maintaining local relationships and enabling local partnerships and local solutions e.g. cluster based models of delivery
- To ensure a cohesive offer remains in place across the new service delivery arrangements.

4. Priorities

The priorities for Early Years services that will direct the transformation programme are:

- To narrow the gap between disadvantaged children and the rest
- To deliver a transformed Early Years Offer which is codesign, co-delivered, flexible and sustainable
- Preserving a Children's Centre offer, vision and the outcomes
- Focus on quality places for vulnerable 2 year olds, CiN, LAC and CPP children and the expansion of places.
- Improve outcomes for children in the IDACI/SOA areas and children for vulnerable groups pre birth to 5 years
- For all children to be school ready
- Increase and support Early Help and Early Intervention in Early Years
- To improve health and wellbeing of all early years children;
- Partnership working to implement a range of integrated child and health services

5. Current Model

5.1. Children's Centres

The core purpose of the Children's Centres is to reduce inequalities for children and families in the greatest need and to improve the following outcomes:

- child development and school readiness
- parenting aspirations and parenting skills
- child and family health and life chances.

There are currently 9 Children's Centres in York

Seven of the centres have co-located Health and Social Care professionals. All centres deliver a core universal offer providing access to services for a population of over 10,000 children age from pre birth to 4 years old.

5.2. Services

The services available through Children's Centres focus on early learning; information and activities for families; adult learning and employment support; integrated child and family health services and targeted parenting and family support.

The Universal offer is open to any family with children under 5.

Services are also provided for vulnerable families. These families have normally been referred into these services due to identified specific needs and require targeted support.

Children's Centres are currently open 5 days per week. Whilst the Centres are predominantly open to the public from 8.30-5pm, reception areas close during lunchtime and from 4pm so there is limited access to the public at this time.

5.3. Staffing

All Centres have a Children's Centre leader (manager), an information champion and a team of Children's Centre support workers.

5.4. Key Stats

Children's Centre	Carr	Clifton	Haxby Road	Hob Moor	Knavesmire	New Earswick	St Lawrences	Westfield	The Avenues
No of children registered	890	894	642	967	914	753	659	615	806
Total foot fall into Centre	529	482	311	537	512	393	336	386	407
No of Groups run from Centre	18	26	23	26	20	18	28	20	23
No of groups run by CYC	10	6	10	7	6	6	10	10	8

6. Engagement and Consultation

There has been extensive engagement and consultation. An initial open engagement activity took place where residents, partners and stakeholders were invited to comment on how they would transform Children's Centre Services. Around 600 responses were received with strong positive messages about knowledge of the staff, opportunities for meeting other parents, access to support for parents and a real appetite to be involved in running groups as volunteers. Based on engagement feedback, the following 4 options were developed to go out to consultation

6.1. Options

Model 1

The three main children's centres, serving areas of greatest deprivation, would remain open all year and would maintain their current opening hours. These are: Clifton in the north, The Avenues (Tang Hall) in the south east and Hob Moor in the west of the city. The other six centres would remain open, but with reduced opening hours. In these six centre parents, volunteers and community groups would be encouraged to use the buildings to run and participate in local activities.

Model 2

Six of the nine children's centres would remain open full time, two in the north, two in the south east and two in the west of the city, with the three main centres Clifton, The Avenues and Hob Moor closing or being used as community venues. Parents, volunteers and community groups would be supported and encouraged to use the 6 buildings to run and participate in local activities

Model 3

Three of the nine centres would remain open: - Clifton in the north, The Avenues (Tang Hall) in the south east and Hob Moor in the west of the city. Six centres would be closed.

Model 4

Children's Centres Services would be run by alternative providers. For example, the voluntary sector (local or national); a social enterprise, a charity, a private provider or a school. The council's role would be to commission services and then co-ordinate, monitor, and ensure such services are of a good quality and meet priority local needs.

6.2 Response to Consultation

1700 responses were received in total. The majority of feedback supported Models 1 and 2. Feedback indicated that those who responded value the importance of the Centres as places for parents to meet and receive services. it is clear from the consultation that people value their Children's Centre. The majority of respondents state a willingness to consider a different configuration of Children's Centres but not at the expense of their

local centre. The consultation process indicated an overwhelming preference for accessible provision within local communities.

Coming through strongly from the engagement feedback was that more parents would like to volunteer to run non statutory groups but previously felt they haven't had the opportunity to do so.

The detail of the Engagement and Consultation can be found in Annex A.

7. Outcomes

It is imperative that the key outcome of this transformation programme is to deliver a co-designed, flexible Children's offer which has longevity to take us through to 2020.

The outcomes are intended to achieve:

- improved outcomes for young children and their families
- reduction in inequality between families in greatest need and their peers in relation to:
 - child development and school readiness
 - parenting aspirations and parenting skills
 - child and family health and life chances.

8. Recommended Model

The proposed model is in response to the consultation, with the public clearly stating they value local places and local service delivery. In order to provide both what the public require and the service needs it is recommended that a phased approach to the transformation of Children's Centres is adopted.

The phasing will ultimately blend the models consulted on; adopting whichever model fits each community the best. This however will take time to achieve and must be based on information gathered and community needs. Therefore the below phased approach is recommended.

8.1. Phasing

Phase One from 1st April 2015 – Implement Model 1.

This model means that no Children's Centres will close in this first phase, however the Centres will only be open for part of the week initially. The Early Years service will operate out of the building for part of the week, concentrating on targeted, statutory provision to our most vulnerable families. Volunteers, other council services and partners will be enabled, encouraged and trained to deliver non statutory Universal services to the rest of the community.

The centres will operate in a cluster model and each cluster will consist of 1 hub and 2 satellites.

The majority of the savings will be achieved through reductions in staffing. The main reductions will be in management and front of house staff keeping reductions to the front line workers to the minimum. This model would result in the loss of three front line workers.

Phase Two - Assess Community Take Up

Once phase one is embedded, a clearer picture will be developed regarding the capacity for the community to deliver the non statutory early years offer. Whilst the message came out strongly from engagement that Parents and Volunteers would be keen to run groups, it is important to gauge the reality of this. Once this is done, each Children's Centre will be evaluated, taking into consideration the alternative community venues available in each area and the level of volunteer take up. Decisions can then be made regarding the viability of the building as a community resource.

Phase Three – Whole Family Support

The longer term strategy is to focus more closely on family needs and encourage further integration of services with other agencies to provide whole family support and early intervention and prevention. The intention is to roll this model out into the communities and use the best facility each area has to offer. In some areas, the Children's Centre is likely to be the most appropriate venue, in other areas it may be an alternative community hub will be used and the Centre is closed.

This recommendation is in line with the long term CYC strategy to empower communities to deliver services and become more resilient.

8.2. Team Focus

The transformed Children's Centre service will focus on early intervention and family support, ensuring that families in greatest need are prioritised and recognising that the early response to problems can often prevent escalation where formal intervention is required

Community delivery of services will be developed with opportunities to use centres by others and developing community capacity this will be supported by the local authority.

A summary of the revised offer is tabled below

Universal	Applies to all children - will be run by community groups/parent volunteers or delivered by existing services (eg Private company)
Perinatal to 2 years (universal targeted)	Early intervention model which will be directly delivered by Children's Services Teams and Partners. Consistent and systematic access to information and advice at key stages of a child's development pre birth to two years.
Targeted	All targeted provision to be delivered by Children's Services Teams and Partners Eg - Vulnerable children accessing Early Education offer Provision for vulnerable groups pre birth to 3 years
Intensive Home Visiting	Pre birth to 5 – delivered by Children's Services Teams and Partners

9. Community Impact Assessment

The summary of the Community Impact Assessment is as follows:

Positive impact. This model meets the top recommendations of the Engagement process and ensures that centres are available in local communities. This model will build community capacity and empower parents to be involved in the delivery of services. As services have an increased focus on those in need, access may be improved further.

The outreach services for the most vulnerable families or target groups i.e. service families will continue to mitigate against disadvantaging those who have a greater distance to travel to access children's centre service.

A comprehensive communication and information plan will be put in place to ensure customers understand the availability of services for early year's children in their communities and the children's centre role in that.

The full CIA can be found in Annex B and a summary of the CIAs for alternative models in Annex C

10. Funding

The proposed model will be funded by general funds and achieves the target savings of 400k.

11. Recommendation

It is recommended that Cabinet approve the phased approach in order for Children's Centres to become more sustainable, develop community capacity and support the long term vision for Whole Family Support.

Appendix A

ANALYSIS OF RESPONSES TO CHILDREN'S CENTRES CONSULTATION AUGUST 2014

Model 2

Model 3

Model 4

Model 1

Model 1	wodei z	wodei 3	wodei 4	
3 Main centres 6 satellites	6 Small Centres	3 Main Centres	Commissioned Service	TOTAL
6	77	13	2	98
63	69	119	7	258
19	175	10	2	206
19	38	58	1	116
21	110	3	4	138
13	64	7	1	85
12	45	0	3	60
52	20	73	0	145
6	92	5	0	103
5	10	0	0	15
215	193	57	34	499
431	893	345	54	1723
	3 Main centres 6 satellites 6 63 19 19 21 13 12 52 6 5 215	3 Main centres 6 satellites 6 Small Centres 6 77 63 69 19 175 19 38 21 110 13 64 12 45 52 20 6 92 5 10 215 193	3 Main centres 6 satellites 6 Small Centres 3 Main Centres 6 77 13 63 69 119 19 175 10 19 38 58 21 110 3 13 64 7 12 45 0 52 20 73 6 92 5 5 10 0 215 193 57	3 Main centres 6 satellites 6 Small Centres 3 Main Centres Commissioned Service 6 77 13 2 63 69 119 7 19 175 10 2 19 38 58 1 21 110 3 4 13 64 7 1 12 45 0 3 52 20 73 0 6 92 5 0 5 10 0 0 215 193 57 34

The number of responses for each model from the hub sites, smaller centres and via online has been scored as follows: -

4 points for the highest number of responses, 3 points for the second highest number of response, 2 points for the third highest number of responses and 1 to the lowest number of responses

	MODEL 1	MODEL 2	MODEL 3	MODEL 4
POINTS	3 Main centres 6 satellites	6 Small Centres	3 Main Centres	Commissioned Service
Online	4	3	2	1
Hub Sites	3	2	4	1
Small Centres	3	4	2	1
TOTAL	10	9	8	3

SECTION 1: CIA SUMMARY



Community Impact Assessment: Summary

1. Name of service, policy, function or criteria being assessed:

Early Years Children's Centres transformation

2. What are the main objectives or aims of the service/policy/function/criteria?

Phase One from 1st April 2015 – Implement Model 1.

This model means that no Children's Centres will close in this first phase, however the Centres will only be open for part of the week initially. The Early Years service will operate out of the building for part of the week, concentrating on targeted, statutory provision to our most vulnerable families. Volunteers, other council services and partners will be enabled, encouraged and trained to deliver non statutory Universal services to the rest of the community.

The centres will operate in a cluster model and each cluster will consist of 1 hub and 2 satellites.

The Service

Children's Centres work together with partners to support families with children from birth to five. The core burpose of children's centres is to improve outcomes for young children and their families and reduce inequalities between families in greatest need and their peers in: child development and school readiness; parenting aspirations and parenting skills; and child and family health and life chances

Specifically:

- Children's Centres work 1:1 with parents and their children to support them with parenting of young children (from pregnancy to age 5) This is often called family support or home visiting
- Children's Centre Support Workers advocate for young children (birth five) and their families on integrated support plans
- Children's Centres provide specialised groups where parents bring their children to help them practice and learn key developmental activities that help their child to develop and grow.
- Children's Centres provide weekly information and advice sessions with health colleagues for all parents to find out what to expect at key developmental stages, encourage their child's development and how to keep them safe. This is called the Universal Parenting Track
- Children's Centres work with other partners and volunteers to develop 'stay and play' groups in the local community where parents bring children to socialise and play with others These are often called 'drop ins' and are universal groups
- Children's Centres work with partners to provide parents with opportunities to build personal skills and access training and employment
- Children's Centres provides a range of evidence based parenting support groups, targeted at parents with the most needs with the youngest children

Children's Centres support families to access early education and childcare

Children's Centres are a 'concept' as well as a workforce and a group of buildings
The concept is that they recognise the needs of very young children (from pre-birth to age 5) in a
community. They assess these needs and then deliver services or work with partners to make sure that the
right services are available.

Children's Centres are the 'body' that make sure that the right services are in place for children before they go to school and that the more vulnerable children are accessing these services

3. Name and Job Title of person completing assessment:

Paula Richardson Acting Head of Service Early Years

4. Have any impacts	Community of	Summary of impact:
been Identified? (Yes/No) Yes	Identity affected: Age	Positive impact. This model meets the top recommendations of the Engagement process and ensures that centres are available in local communities. This model will build community capacity and empower parents to be involved in the delivery of services. As services have an increased focus on those in need, access may be improved further.
		The outreach services for the most vulnerable families or target groups i.e. service families will continue to mitigate against disadvantaging those who have a greater distance to travel to access children's centre service.
		A comprehensive communication and information plan will be put in place to ensure customers understand the availability of services for early year's children in their communities and the children's centre role in that.
5. Date CIA completed:	26/09/14	

5. Date CIA completed: 26/09/14

6. Signed off by:

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•	Tall satisfied that this service, policy, function has been successfully impact assessed.
Na	me:
Po	sition:
Da	te:

8. Decision-making body:	Date:	Decision Details:

Send the completed signed off document to ciasubmission@york.gov.uk It will be published on the intranet, as well as on the council website.

Actions arising from the Assessments will be logged on Verto and progress updates will be required

SECTION 2: CIA FORM



Community Impact Assessment (CIA)

Community Impact Assessment Title:

Early Years - Children's Centre Transformation

What evidence is available to suggest that the proposed service, policy, function or criteria could have a negative (N), positive (P) or no (None) effect on quality of life outcomes? (Refer to guidance for further details)

Can negative impacts be justified? For example: improving community cohesion; complying with other legislation or enforcement duties; taking positive action to address imbalances or under-representation; needing to target a particular community or group e.g. older people. NB. Lack of financial resources alone is NOT justification!

Community of Identity: Age Staff Customer **Quality of Life Impact Impact Evidence Indicators** (N/P/None (N/P/N)one) The core purpose of children's centres is Health to improve outcomes for young children Education and their families and reduce Individual, family and social inequalities between families in greatest life need and their peers in: child Participation, influence and development and school readiness; voice. parenting aspirations and parenting skills; and child and family health and life chances. https://www.gov.uk/government/public **Positive** ations/sure-start-childrens-centres. None All Childrens Centres are currently one stop shops for young children, their parents, child minders and other carers. They offer family support and outreach; access to health and wellbeing services; and to advice, information and guidance; including access to Jobcentre Plus services. All Children's Centres provide a range of services, focusing on early

intervention to provide a seamless service for families with children from pre birth onwards. There are 10,703 of York's population who are aged 0-4. 73% (7773) are registered with a children's centre. 78% (3207) of the 0-4's living in less than 50% IDACI areas are registered with a children's centre. 87% of all Children Aged 0-4 living in less the 10% IDACI Areas are registered with a children's centre. 100% Teenage Parents are registered Staff profile; Transformation, recruitment, selection and support are undertaken in the context of equalities legislation and Council guidelines. http://colin.york.gov.uk/beSupported/Human Resources/current staff/emplo yees/supporting transformation overview/				
Details of Impact	Can negative impacts be justified ?	Reason/Action	Lead Officer	Compl etion Date
Staff: There is not expected to be any positive or negative impact upon this community of identity. As deleted posts may be located at higher levels within the structure, this may have the potential to affect more experienced employees (ie longer serving and possibly therefore older) than younger employees. However appointments do not take account of age and it is possible that skilled and		Ensure a comprehensive communication and information plan is in place	Paula Richardso	April 2015

experience, but younger, with clear, honest, timely n people are appointed to and relevant communications to senior posts. customers. To ensure a planned and sustained Customers: This model meets approach to communication the top recommendations of and marketing to support the Engagement process and the delivery of children's ensures that centres are centres. available in local This will manage and communities. Following the monitor communication analysis of the consultation with all involved in the results which indicated the delivery of services to importance of the Centre children and their families April itself rather than purely the through children's centres. 2015 services delivered. The Paula Ensuring the customers consultation revealed that Richardso understanding the people value their Children's availability of services for Centre, are happy to consider early year's children in their closing venues but would communities and the prefer local service provision children's centre role in within their communities. that. This model will build community capacity and Volunteers and partners will empower parents to be need to be identified, involved in the delivery of enabled, encouraged and services. trained to deliver non statutory universal services to the rest of the Children's centres are for community. children under the age of five Capacity needs to be and their families. The established to ensure proposal for children's volunteer/communities are centres would have no impact supported and trained e.g. on service users on the basis training about equality, of age (i.e. age of users will identification of remain the same). There may vulnerability, safe guarding, be a perception by universal quality, outcomes and families of a reduction of impact. Regular supervision service. Services would and monitoring also needs continue to be targeted to to be available children under five and their families living in poverty (including outreach work). As

services have an increased focused on those in need, access may be improved

further. Teenage parents in particular generally require a greater level of engagement so could potentially be more affected by a reduction in budget impacting on the amount of universal provision. Teenage parents are recognised as a priority group for targeted support by children's centres and service providers will be required to demonstrate how they can continue to provide this support Low Income/Disadvantaged families - The proposed change to children's centres would have no impact on service users on the basis of income Wider City/rural - Although proposals may involve the merging of the management of some centres, services will continue to be offered through existing venues and outreach. Therefore, impact on rural areas should be minimal. The outreach services for the most vulnerable families or target groups i.e. service families will continue to mitigate against disadvantaging those who have a greater distance to travel to access children's centre service All under 5s and their families can access children's centre

All under 5's will be able to

services.

access all three levels of programme support universal, targeted, intensive		
depending on need. Childrens Centre services are designed to meet the needs		
of all children aged 0-5 and their families. Outreach work will continue to be developed		
and targeted to meet the needs of the children pre birth to 5 years		
DILLII LO 3 YEARS		

Community of Identity: Carers of Older or Disabled People Staff Customer **Quality of Life Impact Impact Evidence** (N/P/N)**Indicators** (N/P/None one) The core purpose of children's centres is Health to improve outcomes for young children Education and their families and reduce Individual, family and social inequalities between families in greatest life need and their peers in: child Participation, influence and development and school readiness; None None voice parenting aspirations and parenting skills; and child and family health and life chances. https://www.gov.uk/government/public ations/sure-start-childrens-centres. Can Comple negative Lead impacts **Details of Impact** Reason/Action tion Officer be Date justified? Staff: There is not expected to be any positive or negative impact upon this community of identify Childrens Centres are designed to meet the needs of all children and their families, particularly those who may be

more vulnerable.		
Customers:- Access is unlikely to change for disabled children and parents, as services will largely continue to be offered in the same buildings, with a range of outreach services in local		

Cor	Community of Identity: Disability								
Evidence		Quality of Life Indicators	Customer Impact (N/P/None)	Staff Impact (N/P/N one)					
The core purpose of children's centres is to improve outcomes for young children and their families and reduce inequalities between families in greatest need and their peers in: child development and school readiness; parenting aspirations and parenting skills; and child and family health and life chances. https://www.gov.uk/government/public ations/sure-start-childrens-centres. Staff: As above. Transformation, recruitment, selection and support are undertaken in the context of equalities legislation and Council guidelines 27 children 2-4 with a Disability who were registered with children's centres in July 2014		Health Education Individual, family and social life Participation, influence and voice	None	None					
Details of Impact	Can negative impacts be justified?	Reason/Action	Lead Officer	Comple tion Date					
Children's Centres are designed to meet the needs of all children and their families, particularly those who may be more vulnerable. Families of children with disabilities or special need									

banafit from targeted compart		
benefit from targeted support		
at Children's Centres. Support		
would continue to be required and centres will have to show		
how they can meet the needs		
of these families as part of the		
performance management		
process.		
Some centres work with the		
Portage Service to run groups		
specifically for children with		
Special Educational Needs. This		
targeted work will continue.		
We will take into account the		
use of local buildings for		
outreach services in relation to		
Disability Discrimination Act		
(DDA) to ensure people do not		
feel unable to take part		
because of accessibility.		
Access is unlikely to change for		
disabled children and parents,		
as services will largely continue		
to be offered in the same		
buildings, with a range of		
outreach services in local		
community venue.		

Community of Identity: Gender				
Evidence	Quality of Life Indicators	Customer Impact (N/P/None)	Staff Impact (N/P/N one)	
The core purpose of children's centres is to improve outcomes for young children and their families and reduce inequalities between families in greatest need and their peers in: child development and school readiness; parenting aspirations and parenting skills; and child and family health and life chances. https://www.gov.uk/government/public ations/sure-start-childrens-centres.	Health Education Individual, family and social life Participation, influence and voice	None	None	

Staff: Transformation, recruitm selection and support are under the context of equalities legisla Council guidelines. Customer - Women, Men, boys carers (of children, disabled or people) Characteristics of childrents registering at childrents are recorded in the Database. I profiling reports are generated identify profiles for individual of This includes data on the number fathers accessing services (a specific transfer of the content of the services are group for childrents.)	rtaken in tion and , girls, older ren and s centres nternal to entres. er of ecific centres).			
Details of Impact	Can negative impacts be justified?	Reason/Action	Lead Officer	Comple tion Date
More females are employed in the service so more females are affected by the restructure. Females are not disproportionally affected. The transformation of children's centres will have no impact on the basis of the gender of service users. Specific groups are set up to encourage the participation of fathers. The changes would have no impact on service users on the basis of gender. Building on existing good practice to engage and involve fathers and male carers in children's centre services is recognised.				

Community of Identity: Gender Reassignment				
Evidence	Quality of Life Indicators	Customer Impact (N/P/None	Impact	

)	one)
			None	None
Details of Impact	Can negative impacts be justified?	Reason/Action	Lead Officer	Comple tion Date
There is not expected to be any positive or negative impact upon customers or staff.				

Community of Identity: Marriage & Civil Partnership					
Evidence			Quality of Life Indicators	Customer Impact (N/P/None)	Staff Impact (N/P/N one)
The core purpose of children' to improve outcomes for your and their families and reduce inequalities between families need and their peers in: child development and school read parenting aspirations and par skills; and child and family her chances. https://www.gov.uk/governmations/sure-start-childrens-cees Staff: as above 694 Lone Parents were register children's centres in July 2014	in greatest iness; enting alth and life nent/public ntres.	n/a		None	None
Details of Impact	Can negative impacts be justified?		Reason/Action	Lead Officer	Comple tion Date
There is not expected to be any positive or negative impa upon customers or staff. Lone parents benefit from	ct				

targeted support at Children's		
Centres. Support would		
continue to be required and		
centres will have to show how		
they can meet the needs of		
these families as part of the		
performance management		
process		

Community	of Iden	tity: Pregnancy / Mate	ernity	
Evidence		Quality of Life Indicators	Customer Impact (N/P/None)	Staff Impact (N/P/N one)
The core purpose of children's to improve outcomes for young and their families and reduce inequalities between families in need and their peers in: child development and school reading parenting aspirations and parenskills; and child and family heal chances. https://www.gov.uk/governmeations/sure-start-childrens-centstaff: Transformation, recruitmes selection and support are under the context of equalities legisla Council guidelines. More femalemployed in the service so morare affected by the restructure were not disproportionally affects Customer; - Pregnancy and Ma Pregnancy/ pre birth and the five years of life are a specific prioring group for children's centre service users is record database.	g children in greatest in ess; inting th and life ent/public tres. ent, ertaken in tion and es are re females cted. ternity - rst two ity user vices. The	Health Education Individual, family and social life Participation, influence and voice	None	None
Details of Impact	Can negative impacts be justified?	Reason/Action	Lead Officer	Comple tion Date

The change to children's centres would have minimal impact on service users on the basis of pregnancy /maternity During pregnancy parents are encouraged to engage in children's centre services at the earliest opportunity through midwife and health visitors. This will continue to be the case, but access may be via other children's centre venues rather than their current centre.	Ensure robust partnership working to implement a range of integrated child and health services through the JSNA. Ensure the LA Early Years is involved in discussions around Health Visiting as the commissioning responsibilities come to the LA in October 2015 to ensure an integrated service.	Paula Richardso n	April 2015
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Community of Identity: Race				
Evidence	Quality of Life Indicators	Customer Impact (N/P/None)	Staff Impact (N/P/N one)	
The core purpose of children's centres is to improve outcomes for young children and their families and reduce inequalities between families in greatest need and their peers in: child development and school readiness; parenting aspirations and parenting skills; and child and family health and life chances. https://www.gov.uk/government/public ations/sure-start-childrens-centres. Staff – as above Customers- Characteristics of children and parents registering at children's centres are recorded in the Database. Internal profiling reports are generated to identify profiles for individual centres.	Health Education Individual, family and social life Participation, influence and voice	None	None	
This includes data on BME and Travellers, who are specific target groups. 614 BME 0-4s were in July 2014				

100% Traveller children 0-4s are registered with the children's co	_			
Details of Impact	Can negative impacts be justified?	Reason/Action	Lead Officer	Comple tion Date
Centres will be required to demonstrate how they can meet the needs of families from diverse ethnic backgrounds, based on demographic information for their area. Childrens Centre services are designed to meet the needs of all children aged 0-5 and their families. Outreach work will continue to be developed and targeted to meet the needs of Black, Asian and minority ethnic families and communities and traveller communities at a local level. Resources will continue to be targeted to ensure support to families who may find it difficult to access the services they need.				

Community of Identity: Religion / Spirituality / Belief				
Evidence	Quality of Life Indicators	Customer Impact (N/P/None)	Staff Impact (N/P/N one)	
The core purpose of children's centres is to improve outcomes for young children and their families and reduce inequalities between families in greatest need and their peers in: child development and school readiness; parenting aspirations and parenting skills; and child and family health and life chances.	n/a	None	None	

https://www.gov.uk/government/public ations/sure-start-childrens-centres. Staff – As above Customers -Religion / Spirituality /Belief - Those registering at a children's centre are not asked about their beliefs and so the profile of service users by faith is unknown. Access on the basis of faith would be unlikely to change				
Details of Impact	Can negative impacts be justified?	Reason/Action	Lead Officer	Comple tion Date
The transformation of Children's Centres will have no impact on service users on the basis of Religion / Spirituality /Belief. Children's centres service providers are required to implement equal opportunities policies and to actively promote an inclusive culture. This will continue to be practise. There will be a continued expectation that staff and volunteers will understand a range of religions/beliefs and what they mean for families i.e. diet				

Community of Identity: Sexual Orientation					
Evidence	Quality of Life Indicators	Customer Impact (N/P/None)	Staff Impact (N/P/N one)		
The core purpose of children's centres is to improve outcomes for young children and their families and reduce inequalities between families in greatest need and their peers in: child development and school readiness; parenting aspirations and parenting	n/a	None	None		

skills; and child and family he chances. https://www.gov.uk/governnations/sure-start-childrens-cestaff — As above Customers -Those registering children's centre are not asked their sexual preference and suprofile of service users by this characteristic is unknown.	nent/public entres. at a d about o the			
Details of Impact	Can negative impacts be justified?	Reason/Action	Lead Officer	Comple tion Date
Children's centres implement equal opportunities policies and actively promote an inclusive culture. This will continue to be the practise				