

SHEFFIELD CITY COUNCIL

EXECUTIVE FUNCTIONS DECISION RECORD

The following decisions were taken on Wednesday 10 May 2017 by the Cabinet.

Date notified to all members: Monday 15 May 2017

The end of the call-in period is 4:00 pm on Friday 19 May 2017

The decision can be implemented from Saturday 20 May 2017

Item No

8. **DEVELOPING SERVICES FOR CHILDREN, YOUNG PEOPLE AND FAMILIES IN SHEFFIELD - REVIEWING OUR MODEL FOR CHILDREN'S CENTRE AREAS**

8.1 The Executive Director, People Services, submitted a report reporting back on the Children's Centre consultation between 1st November 2016 and 31st January 2017 and recommending proposals to develop a new delivery model for Children's Centre areas into Family Centre areas which:

- Are for pre-birth – 19 year olds (25 year olds if the young person has special educational needs or disabilities);
- Are located in the 20% most deprived areas of the City within 7 locality areas; and
- Provide services across Sheffield from link and outreach sites, including community venues and in the home.

8.2 **RESOLVED:** That Cabinet approves:-

- (a) a new service delivery model based on dividing the city into 7 geographical locality areas, each area will include a main centre and linked centres or other community outreach sites for service delivery across the locality;
- (b) an extension of the age range from pre-birth to 5 to pre-birth to 19 year olds (25 year olds if the young person has special educational needs or disabilities);
- (c) that the 7 Family Centre main sites named in the report to be the designated Children's Centres addresses in order to meet a statutory duty to ensure provision of sufficient Children's Centres in the Local Authority's area, whilst noting that such designation will result in all services pre-birth - 5 in the whole Family Centre locality being regulated and inspected by Ofsted under the current inspection framework for Children's Centres;
- (d) that services will be delivered in main and linked centres and outreach venues across the locality. They will run at various times and days and with core and extra services provided by a range of agencies at a variety of

venues. Those services could include clinics, groups, drop-in and timetabled sessions; and

- (e) to continue the current governance model of multi-agency partnership boards in each area which will support the assessment of need across the locality to ensure services meet the needs of families when and where they are required.

8.3 **Reasons for Decision**

- 8.3.1 On the 19th October 2016 a report was approved at Cabinet to allow statutory consultation to take place on a proposal to re-model the Children's Centres in Sheffield. The proposal supports the development of a more integrated approach with a greater focus on early help and with partnership working between the Council health, Police, schools and voluntary sector to deliver a broader range of services provided across a network. This allows professionals to respond to a breadth of family needs such as health and wellbeing, housing, education, and employment. It is underpinned by information sharing protocols and builds on the premise that the safeguarding of children and young people and outcomes for families will be improved. The key elements of the proposal are as follows:

Development of Family Centres

- The redesign of Children's Centres, developing a new delivery model based on family centres. These centres would be available for families of children pre-birth up to 19 year olds (25 year olds if the young person has SEND).

The creation of a Family Centre delivery model builds on the principle of early help and focuses on making interventions at an early stage once problems have begun but before they escalate. It provides an opportunity to build on the existing locality models that were piloted with many schools across the city and evaluated very positively. This model is now being developed further to include a broader range of partners including police, health, SEND teams and housing staff.

- 7 locality areas
- Children's Centres would be re-organised into an integrated locality model. It moves away from a single centre delivery model to a networked locality model based on the achievement of common outcomes.

The city would be divided into 7 geographical areas and the existing centres areas will be altered to create seven locality areas. In each area there will be a lead centre which will remain a designated Children's Centre address and will be inspected under the current Children's Centre Ofsted Inspection framework in relation to services for children and families pre- birth to five years old. This inspection will cover all centres and services delivered in the whole geographical area.

- **Locations**

The main site for the Family Centres, the linked sites and outreach services will be located in the 20% most deprived areas of the city. It will act as a base for a full range of integrated services, to enable a clear focus for services on local need and priorities, and to provide support to those who are most vulnerable. Additional services also be available across Sheffield from link and outreach sites including schools, GP surgeries local community venues such as church halls and youth centres and in the home. These sites will offer clinics, groups and drop in services on a timetabled basis. Families will be able to access support outside these times through the venues or through one to one support in the home.

The proposal is intended to build on existing strengths, expertise and current infrastructure in Children's Centres and will join together and coordinate services around children and families. It recognises the critical role that Children's Centres have played in prevention and early intervention and will support further development, allowing us to join together and coordinate services offering the community universal, targeted and specialist services.

In summary the model will:

- Provide a range of early help services for families with children pre-birth to 19 year olds (25 year olds if the young person has SEND) either in the lead centre, link site or outreach venue using different channels to include face to face in the home, centre, drop ins, group work, internet access, online advice guides, email, text, telephone and social media.
- Provide services to include support with physical and emotional health, practical advice on keeping children safe, support with education and learning, support with parenting, home, money, work, training and volunteering.
- Have a main address located in 20% areas of highest need based on the IDACI index of deprivation, with outreach services for all families delivered jointly with universal services.
- Be developed with families, partners and stakeholders within communities building on the current Children's Centre governance model in relation to community partnerships and stakeholder forums.
- Align to the seven localities with families being able to access services where it meets their needs.
- Have services delivered at venues in a mix of times and days through regular, ad hoc, drop in basis, and one to one with opportunity to extend and develop this.

The Council has a statutory duty to ensure that there are sufficient children's centres in its area to meet local need. The proposal will require a reduction in the number of buildings designated as a main Children's Centre address from the current 16 to 7 main family centre areas but with the addition of link sites in the most disadvantaged areas of the city which should allow for greater access to services. More services would be delivered at outreach and community sites

reaching those most in need in their own community.

Key research, evidence base:

The Munro review of child protection calls for local authorities to take a greater focus on preventative services, providing Early Help to children and families and summarises three key messages:

- Preventative services will do more to reduce abuse and neglect than reactive services.
- Coordination of services is important to maximise efficiency and with preventative services.
- There needs to be good mechanisms for helping people identify those children and young people who are suffering or likely to suffer harm from abuse or neglect and who need a referral to children's social care.

Munro, (2011), The Munro Review of Child Protection: final report, DFE

The All party Parliamentary Group on Sure Start Children's Centres 2015 pre-election report states that 'One of the greatest strengths of Children's Centres has always been their capacity to join up a wide range of services around a child to provide a true "holistic" model of support'.

The report continues to state that 'the ultimate aim should be to position Children's Centres at the heart of service provision in their communities , to enable them to provide the sort of holistic offer we know to be valued and effective'.

The Centre for Social Justice argued that 'Children's Centres should become "Family Hubs" which enable parents to access all family related support including universal support and specialist help to meet their most pressing needs'.

The key findings from the Evaluation of Children's Centres in England (ECCE) , a six year study producing a detailed picture of the first 2 phases of Children's Centres in England , these which were aimed at the 30% most disadvantaged areas found that :

- There was a clear move away from standalone centres to those featuring clustering.
- Higher Leadership and management scores were found in centres reporting better multi agency working.
- There was a high level of shared vision , however there were tensions in terms of communication and data sharing and misunderstanding over professional roles.
- Staff felt ill prepared over the policy shift to more targeted interventions.

- Centres shifted towards a more focused targeted range of services for parents and outreach to family homes.
- The number of services remained constant, the nature of the services changed, the frequency was often thinning and 'open access services' were being reduced while targeted services increased.
- Well evidenced programmes e.g. FNP were widely used by centres but were less common than other named programmes

8.4 **Alternatives Considered and Rejected**

- 8.4.1 The alternative approach would be for the council to continue to deliver Children's Centre Services from 16 children's centre areas, this approach does not align to the principles set out in the early help model, the Best Start 'A Great Start in Life' strategy, the SEND reform and Working Together to Safeguard Children which are underpinned by delivery of services based in localities where services work together to achieve improved outcomes for families as close to their homes and communities as possible.

8.5 **Any Interest Declared or Dispensation Granted**

None

8.6 **Reason for Exemption if Public/Press Excluded During Consideration**

None

8.7 **Respective Director Responsible for Implementation**

Jayne Ludlam, Executive Director, People Services

8.8 **Relevant Scrutiny and Policy Development Committee If Decision Called In**

Children, Young People and Family Support

9. **MONTH 12 CAPITAL APPROVALS**

- 9.1 The Acting Executive Director, Resources submitted a report providing details of proposed changes to the Capital Programme as brought forward in Month 12 2016/17
- 9.2 **RESOLVED:** That Cabinet approves the proposed variations, slippage and additions to the Capital Programme listed in Appendix 1 of the report, including the procurement strategies, and delegates authority to the Interim Director of Finance and Commercial Services to award the necessary contracts following stage approval by Capital Programme Group.
- 9.3 **Reasons for Decision**

9.3.1 To record formally changes to the Capital Programme and gain Member approval for changes in line with Financial Regulations and to reset the capital programme in line with latest information.

9.4 **Alternatives Considered and Rejected**

9.4.1 A number of alternative courses of action are considered as part of the process undertaken by Officers before decisions are recommended to Members. The recommendations made to Members represent what Officers believe to be the best options available to the Council, in line with Council priorities, given the constraints on funding and the use to which funding is put within the Revenue Budget and the Capital Programme.

9.5 **Any Interest Declared or Dispensation Granted**

None

9.6 **Reason for Exemption if Public/Press Excluded During Consideration**

None

9.7 **Respective Director Responsible for Implementation**

Eugene Walker, Acting Executive Director, Resources

9.8 **Relevant Scrutiny and Policy Development Committee If Decision Called In**

Overview and Scrutiny Management Committee