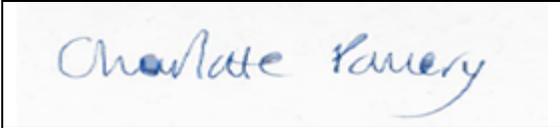


## Equality Impact Assessment (EqIA)

Name of Project	Children's Centres Transformation	Cabinet meeting date <i>If applicable</i>	10 November 2015
Service area responsible	Commissioning		
Name of completing officers	Renata Bailey/Ngozi Anuforo	Date EqIA created	May 2015 Updated October 2015
Approved by Director / Assistant Director		Date of approval	28th October 2015

The Equality Act 2010 places a 'General Duty' on all public bodies to have 'due regard' to:

- Eliminating discrimination, harassment and victimisation
- Advancing equality of opportunity
- Fostering good relations

In addition the Council complies with the Marriage (same sex couples) Act 2013.

Haringey Council also has a 'Specific Duty' to publish information about people affected by our policies and practices.

**All assessments must be published on the Haringey equalities web pages. All Cabinet papers MUST include a link to the web page where this assessment will be published.**

This Equality Impact Assessment provides evidence for meeting the Council's commitment to equality and the responsibilities outlined above, for more information about the Council's commitment to equality; please visit the Council's website.

Stage 1 – Names of those involved in preparing the EqlA	Contributors
1. Project Lead – Ngozi Anuforo	
2. Equalities / HR – Ben Ritchie	
3. Legal Advisor - Stephen Orumwense-Lawrence	
4. Trade union	

**Stage 2 - Description of proposal including the relevance of the proposal to the general equality duties and protected groups**

This EqlA helps to inform proposals on Haringey’s children’s centre model. An EqlA was produced in June 2015 prior to consultation on the proposed changes

[http://www.minutes.haringey.gov.uk/documents/s79043/20150422\\_EqlA%20Childrens%20Centres%20%20Appendix%20VII.pdf](http://www.minutes.haringey.gov.uk/documents/s79043/20150422_EqlA%20Childrens%20Centres%20%20Appendix%20VII.pdf)

This current version of the EqlA has been updated to reflect that the consultation has now finished, with Sections 7 and 8 below now complete.

**The Initial Proposals (May 2015)**

In June 2015, the Council launched a statutory consultation on a set of proposals for the future delivery of children’s centres in Haringey. These were to:

- Widen the focus of children’s centre services from 0-5 years of age to 0-19 years of age, and up to 25 years for children and young people with special educational needs.
- Establish five children’s centre planning areas, aligned with Haringey Schools’ Network Learning Communities (NLCs)
- Reduce the number of designated children’s centres from 16 to 9.
- Close seven designated children’s centres
- Increase current service availability to include evenings, weekends and across 48 weeks of the year.
- Identify community access points across the borough where children and families can access a wider range of services as part of a 0-19 children’s centre service offer.
- Establish new Children’s Centre Advisory Boards (CCAB) for each children centre planning area
- Develop Parent Engagement Forums for each children’s centre planning area.

The proposals were developed in response to a need to reduce the early years budget by £1,44M by 2018/19 and as part of implementing our early help strategy. There proposals reflected a desire to make changes to our current children’s centre delivery model that encompassed a more robust ‘whole family approach’, and therefore extend the current conception to 5 focus to conception to 25; taking into account young people with special educational needs and disabilities. The proposals also reflected a need to strengthen the infrastructure both in, and around, children’s centres, and improve the connectivity and pathways between children’s centres and other services.

Key aspects of the initial proposals:

It is proposed that Haringey move to a locality model of delivery, based on the 6 Network Learning Clusters (NLCs) across the borough. There will be 9 children’s centre hubs across the borough. Services may be delivered at Children Centre hub building(s) and through a co-ordinated programme of outreach. Recognising that we need to maintain access points, we have proposed a number of ‘delivery sites’ in the new model. A delivery site is likely to deliver stay & play sessions, health and other appointments and advice sessions. These services will be organised by the children’s centre hub. Delivery of services will not be limited to the children’s centres and delivery sites – and the programme of outreach may also take services nearer to people’s homes through the use of other community buildings, including libraries, leisure centres and health centres, or taking services in to the home, as appropriate.

Across each locality there will be a universal offer of services which will consist of services that are absolutely needed by all across the borough to achieve positives outcomes for families. There will also be a targeted offer - the range of services and how they will be delivered will be driven by the needs and voices of the children, young people and families.

We are proposing the following children’s centre hubs and key delivery sites:

<b>Children’s centre planning area</b>	<b>Children's centre hub</b>	<b>Key delivery site</b>
<b>Muswell Hill / Highgate &amp; Hornsey / Stroud Green</b>	Rokesly	Campsbourne
		Stonecroft
<b>Wood Green</b>	Woodside	Bounds Green
		Noel Park
<b>Harringay / West Green</b>	Broadwaters	The Ladder
	Woodlands Park	South Grove
<b>North East Tottenham</b>	Park Lane	
	Rowland Hill	
<b>South East Tottenham</b>	Pembury	Earlsmead
	Triangle	Bruce Grove

To staff the children's centres and deliver the early years offer, we are proposing to have a core staff team made up of the following roles:

- Centre Manager
- Assistant Manager
- Outreach and Early Intervention Officer
- Admin / Reception Officer
- Learning/Volunteering Co-ordinator
- Early Years Learn & Play Worker

The aims of the new model are to:

- improve transition for children, young people and families across the 0-25 age range
- develop a stronger, cross sector approach that builds effective local partnerships, common purpose and professional competence and confidence through increased co-location and joint working
- address inequalities in the borough (access to services and the quality of services) across the conception to 25 age range
- incorporate the delivery of a universal 0-19 healthy child programme
- incorporate an early help approach that enables models of early identification, assessment and response to needs, across the conception to 25 age range, to be implemented through a community-based, integrated network of services
- establish mechanisms that build and support the capacity within the community for peer-support, self-support and self-sufficiency

#### **How does the proposal impact on our equality duties and protected groups**

The overarching objective of the transformation is to enable the continuation of children's centre services in Haringey with reduced funding. The proposals, if implemented, contribute to the achievement of the £1.44m budgetary savings required across the Council's early years services by 2018/19.

In terms of impact on the community, in the context of having to make significant changes to the way on which services are provided, we are seeking to ensure **equity of access** to sufficient, quality services which improve outcomes for all children, young people and families. All groups of residents with young children, regardless of their characteristics (e.g. ethnicity, sex, religion, age etc), will have the opportunity to access universal Children's Centre services.

The new delivery model intends to take services nearer to people's homes through the use of other community buildings, including libraries, leisure centres and health centres, or taking services in to the home, as appropriate. This should enhance opportunities to access services

among all groups of residents

The locality model will encourage diversity of provision, support the development of local solutions and will draw on a range of data sources, effective practice, expert knowledge and experience to identify and meet the needs of the locality. This will take into account the different profiles and characteristics of residents in these localities.

As part of the local authority's performance management of the children's centres, there are a range of targets which must be met and which include the specific focusing upon the inclusion of priority and excluded groups. Children's centres report qualitative and quantitative data of engaging with the following groups of people:

- Lone parents, teenage mothers and pregnant teenagers
- Children from low income backgrounds
- Children living with domestic abuse, adult mental health issues and substance abuse
- Children 'in need' or with a child protection plan
- Children who are offenders and/or those in custody
- Fathers, particularly those with any other identified need, for example, teenage fathers and those in custody
- Those with protected characteristics as defined by the Equalities Act 2010 – these may include those for whom English is an additional language, those from minority ethnic groups, those from Gypsy, Roma and Traveller families, and those from lesbian, gay and transgender families
- Adopted children and adopter families
- Looked after children
- Children who are being cared for by members of their extended family such as a grandparent, aunt or older sibling
- Families identified by the Local Authority as a 'troubled family' who have children under the age of 5
- Families who move in and out of the area relatively quickly (transient families) such as asylum seekers, armed forces personnel and those who move in to the areas seeking employment or taking up seasonal work
- Any other vulnerable group or individual families including

Part of the proposed model does entail reducing the number of designated Children's Centre buildings in some areas. The following table sets out, by ward, where families will have reduced access to children's centres in their immediate locality -

Ward	Centres in current model		Centres in new Model		Change
	No.	Centres	No.	Centres	
West Green	1	Broadwater CC	1	Broadwater Farm CC	No change

Harringay	1	The Ladder CC	0	Woodlands Park CC	Reduction of 1 centre, to no centres
St Ann's	2	Woodlands Park CC & South Grove CC	1	Woodlands Park CC	Reduction of 1 centre. Still have 1 centre in ward.
Alexandra	0		0	Rokesly CC	No change
Crouch End	0		0	Rokesly CC	No change
Fortis Green	0		0	Rokesly CC	No change
Highgate	0		0	Rokesly CC	No change
Hornsey	2	Campsbourne CC & Rokesly	1	Rokesly CC	Reduction of 1 centre. Still have 1 centre in ward.
Muswell Hill	1	Stonecroft CC	0	Rokesly CC	Reduction of 1 centre, to no centres
Stroud Green	0		0	Rokesly CC	No change
Northumberland Park	1	Park Lane CC	1	Park Lane CC	No change
White Hart Lane	1	Rowland Hill CC	1	Rowland Hill CC	No change
Bruce Grove	0		0	Pembury CC	No change
Tottenham Hale	1	Pembury CC	1	Pembury CC	No change
Seven Sisters	1	Triangle	1	Triangle CC	No change
Tottenham Green	2	Earlsmead CC & Welbourne CC	1	Welbourne CC	Reduction of 1 centre. Still have 1 centre in ward.
Bounds Green	1	Bounds Green	0	Woodside CC	Reduction of 1 centre, to no centres
Noel Park	1	Noel Park	0	Woodside CC	Reduction of 1 centre, to no centres
Woodside	1	Woodside	1	Woodside CC	No change

In terms of access to a designated children's centre building, Noel Park, Bounds Green, Harringay and Muswell Hill wards are likely to be most affected by the change because these are the wards where designated Children's Centre buildings will be reduced most.

The risk of reducing the number of designated Children Centre buildings is if, as a consequence of a closure, particular groups of service users and residents in the future disengage from seeking support from children centre services altogether rather than travel to an alternative Children's Centre in a neighbouring ward.

Following production of an EqIA, initial proposals were refined and when put out to statutory consultation were as follows;

#### **Proposals as set out in the statutory consultation**

- To reduce the number of designated children's centres from 16 to 9
- To close seven designated children's centres but to support these sites to become Community Access Points (CAPs) offering some support to children and families to access services

- To establish five children's centre planning areas
- Widen the focus of children's centre services from families with children 0-5 years of age to 0-19 years of age, and up to 25 years for children and young people with special educational needs
- Increase current service availability to include evenings, weekends and across 48 weeks of the year
- Establish new Children's Centre Advisory Boards(CCAB)
- Develop Parent Engagement Forums for each children's centre planning area.

This EqIA considers the extent of this risk, and in Section 6 and 8 identifies mitigating measures which will be put in place which will lower the potential for this negative impact to materialise.

### **Updated Proposals (October 2015)**

The initial proposals have been revised following the statutory consultation. A new set of proposals have been developed informed by the consultation exercise and further appraisal of the options during the consultation period. The proposals now being considered as part of this EqIA are as follows:

- To reduce the number of designated children's centres from 16 to 9
- To close the following seven designated children's centres by the 31<sup>st</sup> March 2016:
  - Bounds Green Children's Centre
  - Campsbourne Children Centre
  - Earlsmead Children's Centre
  - Noel Park Children's Centre
  - South Grove Children's Centre
  - Stonecroft Children's Centre
  - The Ladder Children's Centre
- To close the following school-based children's centre at the request of the school's governing body by the 31<sup>st</sup> March 2016.
  - Rokesly Children's Centre
- To identify a new provider to deliver children's centre services covering Alexandra, Crouch End, Fortis Green, Hornsey, Highgate, Muswell Hill and Stroud Green wards
- Not to proceed with Community Access Points (CAPs)
- To establish five children's centre planning areas, aligned with Haringey school's Network Learning Communities (NLCs)
- That children's centres should retain a focus on delivering services for children aged 0-5 years and their families and that future

developments should consider the co-location of services of children and young people aged 5 plus and their families, where appropriate.

- To increase current service availability to across 48 weeks of the year and note that work will continue with partner services to enable greater access to services in the evenings and at weekends.
- To bring the current arrangements for Children’s Centre Advisory Boards to an end by 31<sup>st</sup> March 2016 and establish new Children’s Centre Advisory Boards (CCAB) from April 2016.
- To develop Parent Engagement Forums for each children’s centre planning area.

**Stage 3 – Scoping Exercise - Employee data used in this Equality Impact Assessment**

Identify the main sources of the evidence, both quantitative and qualitative, that supports your analysis. This could include for example, data on the Council’s workforce, equalities profile of service users, recent surveys, research, results of recent relevant consultations, Haringey Borough Profile, Haringey Joint Strategic Needs Assessment and any other sources of relevant information, local, regional or national.

Data Source (include link where published)	What does this data include?
EqIA profile	Age, gender, ethnicity, disability information

**Stage 4 – Scoping Exercise - Service data used in this Equality Impact Assessment**

This section to be completed where there is a change to the service provided

Data Source (include link where published)	What does this data include?
Joint strategic needs assessment <a href="http://www.haringey.gov.uk/social-care-and-health/health/joint-strategic-needs-assessment-jsna">http://www.haringey.gov.uk/social-care-and-health/health/joint-strategic-needs-assessment-jsna</a>	Age, gender, ethnicity, disability in the context of the health and well-being needs of Haringey residents
E-Start data	Details on current profile of residents that use Haringey’s children’s centres

A breakdown of these figures is used in Section 5

Noel Park, Bounds Green, Harringay and Muswell Hill wards are likely to be most affected by the change because these are the wards where designated Children's Centre buildings will be reduced most

To the right are profile snapshots of the characteristics of residents and children in these wards:

### **Noel Park**

- There are 875 children aged 0-4 years; this is 6.3% of the ward population
- There are in total 544 households with dependent children (all ages) with no adult in employment; this is 9.8% of the ward population
- 46.4% of the population are stated to be Christian, 21.3% have no religion and 19.1% declare to be Muslim
- 79.8% of the ward population reported themselves to be in very good health or good health.
- 33.8% of the ward population have qualifications of Level 4 or above
- The ethnicity profile of the ward is as follows – 54.8% declared to be of white ethnic background, 6.7% mixed ethnic background, 13.4% asian ethnic background, 19.8% black ethnic background, 5.3% other
- There are 739 lone parent households with dependent children of all ages; this is 13.3% of the ward population.
- 94.6% of these lone parents are female, of which 27.2% are in part-time employment, 18.7% are in full-time employment and 54.1% are unemployed.
- 5.4% of these lone parents are male, of which 15% are in part-time employment, 25% are in full-time employment and 6% are unemployed.

### **Bounds Green**

- There are 992 children aged 0-4 years; this is 6.7% of the ward population
- There are in total 410 households with dependent children (all ages) with no adult in employment; this is 7.1% of the ward population
- 49% of the population are stated to be Christian, 21.9% have no religion and 14.6% declare to be Muslim
- 84.3% of the ward population reported themselves to be in very good health or good health.
- 37.3% of the ward population have qualifications of Level 4 or above
- The ethnicity profile of the ward is as follows - 60.2% declared to be of white ethnic background, 6.7% mixed ethnic background, 11.3% asian ethnic background, 17.1% black ethnic background, 4.7% other
- There are 616 lone parent households with dependent children of all ages; this is 10.6% of the ward population.
- 92.5% of these lone parents are female, of which 28.1% are in part-time employment, 24.5% are in full-time employment and 47.4% are unemployed.

- 7.5% of these lone parents are male, of which 17% are in part-time employment, 33% are in full-time employment and 50% are unemployed.

### **Harringay**

- There are 853 children aged 0-4 years; this is 6.4% of the ward population
- There are in total 270 households with dependent children (all ages) with no adult in employment; this is 4.9% of the ward population
- 39% of the population are stated to be Christian, 32.7% have no religion and 14.1% declare to be Muslim
- 84.2% of the ward population reported themselves to be in very good health or good health.
- 46.6% of the ward population have qualifications of Level 4 or above
- The ethnicity profile of the ward is as follows – 65.6% declared to be of white ethnic background, 6.3% mixed ethnic background, 11.4% asian ethnic background, 11.8% black ethnic background, 4.7% other
- There are 390 lone parent households with dependent children of all ages; this is 7.2% of the ward population.
- 91.3% of these lone parents are female, of which 32.9% are in part-time employment, 20.5% are in full-time employment and 46.6% are unemployed.
- 8.7% of these lone parents are male, of which 14.8% are in part-time employment, 41.2% are in full-time employment and 44.1% are unemployed.

### **Muswell Hill**

- There are 633 children aged 0-4 years; this is 5.9% of the ward population
- There are in total 99 households with dependent children (all ages) with no adult in employment; this is 2.2% of the ward population
- 39.5% of the population are stated to be Christian, 40% have no religion, 5.3% declare to be Jewish and 3% declare to be Muslim
- 88% of the ward population reported themselves to be in very good health or good health.
- 62.8% of the ward population have qualifications of Level 4 or above
- The ethnicity profile of the ward is as follows – 83.7% declared to be of white ethnic background, 5.3% mixed ethnic background, 4.3% asian ethnic background, 4.6% black ethnic background, 2.1% other
- There are 219 lone parent households with dependent children of all ages; this is 7.2% of the ward population.
- 92.7% of these lone parents are female, of which 27.6% are in part-time employment, 40.9% are in

full-time employment and 31.5% are unemployed.

- 7.3% of these lone parents are male, of which 18.8% are in part-time employment, 50% are in full-time employment and 31.2% are unemployed.

**Stage 5a – Considering the above information, what impact will this proposal have on the following groups in terms of impact on residents and service delivery:**  
**Positive and negative impacts identified will need to form part of your action plan.**

**The following assessment is based on our current user profile. The data is based on Haringey carers and children seen at children’s centres from 1st April 2014 – 31<sup>st</sup> March 2015.**

	Positive	Negative	Details	None – why?														
<b>Sex</b>	X	X	<p>12,814 carers were seen by children’s centres in 2014/15. 79.9% of these are females. Consequently, the impact of the new children’s centre model will be felt more by women because mothers/female carers are more likely to use the centres.</p> <p>11,477 children aged 0 – 4 were seen in 2014/15. 49.3% of these were female.</p> <p>In the new model, there will be an increased focus on encouraging more fathers to access children’s centres services.</p>															
<b>Gender Reassignment</b>			Those registering at a children’s centre are not asked about gender reassignment and so the profile of service users is unknown.															
<b>Age</b>		X	<p>The age profile of carers is as follows:</p> <table border="1"> <thead> <tr> <th>Age</th> <th>% of users</th> </tr> </thead> <tbody> <tr> <td>16 - 24</td> <td>7%</td> </tr> <tr> <td>25 - 34</td> <td>42%</td> </tr> <tr> <td>35 - 44</td> <td>33%</td> </tr> <tr> <td>45 - 54</td> <td>4%</td> </tr> <tr> <td>55 +</td> <td>2%</td> </tr> <tr> <td>Unknown</td> <td>11%</td> </tr> </tbody> </table> <p>The changes will have most impact on residents aged 25 – 44 years.</p>	Age	% of users	16 - 24	7%	25 - 34	42%	35 - 44	33%	45 - 54	4%	55 +	2%	Unknown	11%	There is no restriction by age across children’s centre services
Age	% of users																	
16 - 24	7%																	
25 - 34	42%																	
35 - 44	33%																	
45 - 54	4%																	
55 +	2%																	
Unknown	11%																	
<b>Disability</b>			<p>67 carers with disabilities were seen.</p> <p>162 children with a disability were seen.</p>	We will ensure that all children’s centres														

				and delivery sites comply with the Disability Discrimination Act (DDA) to ensure that access to children's centre services by this group is not affected.
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<b>Race &amp; Ethnicity</b>			<table border="1"> <thead> <tr> <th>Ethnicity</th> <th>% of carers</th> </tr> </thead> <tbody> <tr> <td>Black</td> <td>22%</td> </tr> <tr> <td>Asian</td> <td>11%</td> </tr> <tr> <td>Mixed</td> <td>4%</td> </tr> <tr> <td>Other</td> <td>6%</td> </tr> <tr> <td>Unknown</td> <td>1%</td> </tr> <tr> <td>White</td> <td>21%</td> </tr> <tr> <td>White minorites</td> <td>34%</td> </tr> </tbody> </table>	Ethnicity	% of carers	Black	22%	Asian	11%	Mixed	4%	Other	6%	Unknown	1%	White	21%	White minorites	34%	Services and access to services are not restricted to or by race and ethnicity.
			Ethnicity	% of carers																
			Black	22%																
			Asian	11%																
			Mixed	4%																
			Other	6%																
			Unknown	1%																
			White	21%																
White minorites	34%																			
The group that would be affected mostly is White Minorities followed by Black.																				

<b>Sexual Orientation</b>			Those registering at a children's centre are not asked about their sexual orientation and so the profile of service users is unknown.	
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<b>Religion or Belief (or No Belief)</b>			<table border="1"> <thead> <tr> <th>Religion</th> <th>% of carers</th> </tr> </thead> <tbody> <tr> <td>Atheist</td> <td>0.34%</td> </tr> <tr> <td>Buddhist</td> <td>0.48%</td> </tr> <tr> <td>Christian</td> <td>23.71%</td> </tr> <tr> <td>Hindu</td> <td>0.87%</td> </tr> <tr> <td>Jewish</td> <td>0.36%</td> </tr> <tr> <td>Muslim</td> <td>11.93%</td> </tr> <tr> <td>None</td> <td>9.33%</td> </tr> <tr> <td>Not Stated</td> <td>50.52%</td> </tr> <tr> <td>Other</td> <td>2.23%</td> </tr> </tbody> </table>	Religion	% of carers	Atheist	0.34%	Buddhist	0.48%	Christian	23.71%	Hindu	0.87%	Jewish	0.36%	Muslim	11.93%	None	9.33%	Not Stated	50.52%	Other	2.23%	Services and access to services are not restricted to or by religion and belief.
			Religion	% of carers																				
			Atheist	0.34%																				
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			Muslim	11.93%																				
			None	9.33%																				
Not Stated	50.52%																							
Other	2.23%																							

			<table border="1"> <tr> <td>Pagan</td> <td>0.03%</td> </tr> <tr> <td>Sikh</td> <td>0.21%</td> </tr> </table>	Pagan	0.03%	Sikh	0.21%	
Pagan	0.03%							
Sikh	0.21%							
			The majority of current users have reported no religion.					
<b>Pregnancy &amp; Maternity</b>			1,996 pregnant carers were seen at centres. This represents 15.6% of carers seen at centres.	Services and access to services are not restricted.				
<b>Marriage and Civil Partnership</b>			This is not reported on by children's centres.					

**Stage 5b – For your employees and considering the above information, what impact will this proposal have on the following groups: Positive and negative impacts identified will need to form part of your action plan.**

	Positive	Negative	Details	None – why?
<b>Sex</b>			See separate HR EQIA	
<b>Gender Reassignment</b>			See separate HR EQIA	
<b>Age</b>			See separate HR EQIA	
<b>Disability</b>			See separate HR EQIA	
<b>Race &amp; Ethnicity</b>			See separate HR EQIA	
<b>Sexual Orientation</b>			See separate HR EQIA	
<b>Religion or Belief (or No Belief)</b>			See separate HR EQIA	
<b>Pregnancy &amp; Maternity</b>			See separate HR EQIA	
<b>Marriage and Civil Partnership</b>			See separate HR EQIA	

**Stage 6 - Initial Impact analysis**

**Actions to mitigate, advance equality or fill gaps in information**

<p><b>PLEASE NOTE: - This section of the EqIA was completed prior to the consultation, informed through the data sets and analysis outlined in Stages 3-5. Following the consultation, Sections 7 and 8 below have been completed, which provide a final analysis of the impact of the proposals and mitigating actions which will be put in place</b></p>	<ul style="list-style-type: none"> <li>• The new model aims to maximise the resource that we have for service delivery and target the available resources based on needs</li> <li>• In the new model, there will be an increased focus on encouraging more fathers to access children's centres services.</li> </ul>
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Haringey is a diverse borough, and the services required, and the way that they need to be delivered, varies across the borough. A locality model recognises /celebrates these differences between local areas and the needs of those within it.

Basing the locality model on the 6 existing Network Learning Communities which are well established across education will facilitates partnership working between children's centres and schools, supporting school readiness and transition.

As a whole, the community are not expected to be adversely affected by the transformation - the strategy is driven by the need to provide equity of access to quality services. However the proposals will result in some potentially negative impact on service users, particularly those who traditionally have used the centres which are proposed for de-designation as they may have to travel further to a children centre hub.

- Hubs will provide a welcoming place for all, and through greater outreach, there will be more places for families to get involved as a whole. This will have a positive effect on equity of access to Children Centre services.
- Service users and staff will be engaged as part of the consultation. Their views will be fed into the full Equalities Impact Assessment, which will return to Cabinet following the consultation period. This will include more detailed analysis of the impact of de-designating the selected centres on service users.
- In areas where centres will be dedesignated, we will work with Governing Bodies to ensure that services based on need are still accessible there.
- Noel Park, Bounds Green, Harringay and Muswell Hill wards are most likely to feel the impact in terms of access to children's centre hubs. It will be particularly important throughout the consultation to understand from these families how best we can support them to access a children's centre.
- We will review the opening hours of children's centres, to advance equity. Children's centre will also be required to ensure delivery of services and/or an information point which is available to service users when they sites are not open.
- In proposing the future hub sites we considered, amongst other factors, whether the site is located in an area of high deprivation, and whether the site is accessible by public transport. We will continue to test our assumptions and analysis throughout the consultation period.
- To raise awareness of the children's centre services and promote equity of access the branding around the renewed offer will be

	<p>carefully considered.</p> <ul style="list-style-type: none"> <li>• Discussions with neighbouring boroughs are ongoing to ascertain their plans for services that may affect families living in Haringey, particularly near the borders.</li> </ul>

**Stage 7 - Consultation and follow up data from actions set above**

<b>Data Source (include link where published)</b>	<b>What does this data include?</b>
<p>Changes to Haringey’s Children’s Centres – Statutory Public Consultation: Report of Responses</p> <p>Full details of the consultation can be found at <a href="http://www.haringey.gov.uk/children-and-families/family-information-childcare-and-early-years/childrens-centres-consultation">http://www.haringey.gov.uk/children-and-families/family-information-childcare-and-early-years/childrens-centres-consultation</a></p>	<p><b><u>Key findings from the consultation were:</u></b></p> <ul style="list-style-type: none"> <li>• The overwhelming feedback from all stakeholders consulted was that children’s centres are an essential service for local children and families. The proposal of closing Centres was opposed by the greatest majority of the respondents.</li> <li>• Most respondents did not totally understand the concept and practical use of Key Community Access Points (KCAPs) as described in the proposal. Governors and some staff members raised concerns about the management and accountability for the staff and the work happening in the KCAPs.</li> <li>• The services that respondents most valued were Stay &amp; Play, health services, adult learning and parents’ support.</li> <li>• Generally, respondents would want out of hours opening with a significant number preferring health services and family activities on Saturdays and health appointments for working families in the evenings.</li> <li>• Respondents generally agreed with the idea to extend services to families with children over 5 years; although some respondents expressed concerns about mixing older children with younger ones.</li> <li>• Respondents also agreed that having an Advisory Board to oversee the operation of Children Centres was a good idea. The introduction of Parental Engagement Forums was also perceived as a good idea.</li> </ul>

The data in this report includes the Equality results of the 398 questionnaires returned as part of the consultation.

The greatest majority of respondent were women (70%). We can therefore infer that women will be significantly impacted on by the changes. This is consistent with the current profile of centre users where 79% are female.

In terms of age, again there are parallels between the age profile of respondents (66% in the 30 to 44 age group) and the centres users (75% are between 35 and 44 years of age). Although the views of child service users were not elicited through the consultation exercise due to their age, it is acknowledged that it is the children aged 0-4 who are likely to be most impacted by the proposed changes. In 2014/15, children's centre had had contact with just over 11,000 children aged 0-4 in the borough. The proposed centre closures cover centre reach areas in which an estimated 6491 children aged 0-4 reside (based on 2011 Census population estimates).

In terms of ethnicity, the White British group is overrepresented in the profile of respondents (41%) compared to the profile of users (21%) this is also confirmed by 59% of respondents declaring that English is their first language.

As far as disability is concerned 64% of respondents did not respond to this question. It is not therefore possible to ascertain how the proposal could impact on this group. In terms of users, only 67 carers and 162 children with disabilities were seen by the centres. Again, a very small proportion of all registered centres' users. Whilst the number of 0-4 year old children with a disability (162 in 2014/15) is a relatively small proportion of the 11,477 children seen during the same period, the impact for children with a disability may be significant and this group of children disproportionately affected.

Similarly, the number of parents/carers with a disability (67 in 2014/15) is a relatively small proportion of the 12, 814 parents/carers seen during the same period and therefore, the impact for parents/carers with a disability may be significant and this group of service users disproportionately affected.

We had set out our commitment in Section 6. of this document to address the following actions as part of the

consultation process. These actions, some of which are ongoing, are detailed below:

- The proposals developed following consultation take into account the need to reduce expenditure over the next three years and are designed to make best use of limited resources but also to develop a commissioned model for the future commissioning of children's centres that can be sustained.
- Through the outreach activity undertaken during the consultation period, contact was made with men using children's centres services and their views were captured during these sessions. The responses via the statutory consultation form were however, largely from women (70% of all respondents). The feedback from the consultation suggested that children centre services need to be more accessible for men; namely fathers in the future. Part of the proposed service offer going forward is the commission of support specifically aimed at fathers; including young fathers.
- The feedback from the consultation showed mixed views about the proposals to extend the age range of children's centres which reflected the suggestion that the children's centre could become places for families to get involved as a whole. 28% of respondents supported the proposal to widen the scope of centres to 0-19 year olds, 19% strongly support this proposal and 20% do not support this proposal. In addition to this, some of the written comments expressed concerns about the physical space in centres, the ability and appropriateness of the environment within centres to accommodate older children and young people and the pressure this may place on children's centres staff.

On the basis of this feedback it is being proposed that children's centres retain their focus on 0-5 year old children and their families but we will ensure that the plans for children's centres going forward include the development of greater links between other early help services, which, in the main cover, children and young people aged 0-19 (25 if they have special educational needs or disabilities). This approach will be supported by achieving the co-location of key services for families, as and where appropriate.

- Haringey residents were informed of the consultation on line via the Haringey website and through social media. Other methods of communication used included the children's centres and other community organisations such as libraries and health Centres. Residents were also able to obtain paper copies of the consultation booklet, questionnaire and a freepost envelope from the children's

centres.

A series of evening and weekend public meetings were organised in a variety of sites, covering the whole of the borough from July 6<sup>th</sup> 2015 to September 14<sup>th</sup> 2015 – with a break during the summer school holidays. In addition to this, targeted outreach activities were organised at some children's centres with officers meeting with parents attending Stay & Play sessions and parents meetings in July 2015.

Two meetings with all affected staff took place during the consultation period.

- Work with Governing Bodies to ensure that services based on need are still accessible at de-designated sites will be ongoing. A number of meetings with school governors were organised as part of the process on 1<sup>st</sup> July 2015 and between 3<sup>rd</sup> September and the 11<sup>th</sup> September 2015. There remains a need to have further discussion with individual governing bodies establish a full picture of future levels of service access at de-designated sites.
- Noel Park, Bounds Green, Harringay and Muswell Hill wards are most likely to feel the impact in terms of access to children's centre hubs In order to gather local views, public consultation meetings were held in these areas at locations thought to be accessible for residents within those wards. These included :

Muswell Hill Ward - Muswell Hill Baptist Church, 2 Dukes Avenue, N10

Noel Park Ward – Cypriot Community Centre, Earlham Grove, Wood Green N22

Bounds Green - A meeting was held for parents at Bounds Green Children's Centre

Harringay – St. Ann's Church Hall, Avenue Road N15

The profile of respondents showed a level of engagement from the four wards, with Muswell Hill indicating the least. Levels of responses by post code:

N10 (including Muswell Hill ward ) : 1%

N4 (including Harringay ward): 14%

N22 (including Bounds Green and Noel Park wards): 13%

- The consultation sought feedback on hours of opening. Views were sought on extending centre opening

hours to include evenings and weekends. Consideration was also given to the cost of extending hours of opening to include these times.

- The consultation asked respondents to indicate which method of transport they used to travel to children’s centres. A large number of respondents (83%) walked to the children’s centres they used, followed by 24% using the bus and 11% driving to the centres. This indicates an impact for some families may have to walk further distances to reach the nearest centres based on the proposal to close a number of centres. Consideration was given to the accessibility of the centres we have proposed to keep open and the impact for residents on the time it may take to reach their nearest centre.

<b>Children’s Centre propose for closure (a)</b>	<b>Nearest Children’s Centre proposed to remain open (b)</b>	<b>Distance between (a) and (b)</b>	<b>Travel time if walking between (a) and (b)</b>
Bounds Green	Woodside	0.9 miles	18 minutes
Campsbourne	<i>New centre to be commissioned</i>	Not known	Not known
Earlsmead	Welbourne	0.4 miles	8 minutes
Noel Park	Woodside	0.7 miles	14 minutes
Rokesly	<i>New centre to be commissioned</i>	Not known	Not known
South Grove	Triangle	0.4 miles	8 minutes
Stonecroft	<i>New centre to be commissioned</i>	Not known	Not known
The Ladder	Woodlands Park	0.3 miles	6 minutes

An assumption we are making is that travel to the alternative children’s centre will take longer than the current journey respondents may be making to a children’s centre now. This may not be the case but data about where respondents would be travelling from is not available and therefore this cannot be fully assessed at this time.

- As part of any future implementation of a new children’s centre delivery model, we will need to develop information for all residents about the children’s centre offer they can expect to receive. This will need to take into account the different languages spoken amongst current and potential future service users. A robust communications plan will need to ensure we are working with key universal services such as GPs, Midwifery and Health Visiting, Schools and Libraries to raise awareness of childrens’ centres and other early help services and how families can access this wherever they live within the borough.
- Discussion with neighbouring boroughs will be on-going in order to evaluate the impact of changes to children’s centre services in other areas on families in Haringey, as well as the impact of changes we are proposing to make on usage of centre services elsewhere outside of the borough. One option to mitigate the impact of a reduction in the number of children’s centres in Haringey on families in the borough is to give consideration to prioritising access to children’s centre service for Haringey residents. This is already an approach taken in neighbouring boroughs such as Islington and Barnet.

**Stage 8 - Final impact analysis**

This EqIA has identified the potential for negative impacts on those groups of service users and residents who use Children’s Centre buildings which will be de-designated as a result of this proposal. The risk is that as a consequence of closing a centre, groups of service users and residents disengage from seeking support from children centre services altogether rather than travel to an alternative Children’s Centre in a neighbouring ward. Noel Park, Bounds Green, Harringay and Muswell Hill wards are likely to be most affected by the change because these are the wards where designated Children’s Centre buildings will be reduced most.

To help mitigate these potential impacts, a number of actions have been identified. These are outlined in the table below.

The proposals form part of the Council's transformation agenda for children's services. There is a quarterly Strategic (Best Start in Life) Priority Board which will have oversight of the strategic delivery of the transformation proposals, which is supported by monthly Operational (Best Start in Life) Priority Boards and by the Early Help Partnership Board. In addition, the Children's Centre Performance Framework will enable quarterly monitoring of the take-up of services across children's centres in the borough. This will help us to identify any changing patterns of usage and wider activity, in particular by protected groups which may disengage, and which can be reported to the Strategic Priority Board as appropriate. The Cabinet Member sits on the Strategic Priority Board and will receive regular reports from this process.

It is worth noting that as part of the performance management of children's centres in Haringey, there are a range of targets which must be met and which include a specific focus upon the inclusion of priority and excluded groups. Children's centres report qualitative and quantitative data about engaging with the following groups of people:

- Lone parents, teenage mothers and pregnant teenagers
- Children from low income backgrounds
- Children living with domestic abuse, adult mental health issues and substance abuse
- Children's 'in need' or with a child protection plan
- Children in offenders and / or those in custody
- Fathers, particularly those with any other identified need, for example, teenage fathers and those in custody
- Those with protected characteristics as defined by the Equalities Act 2010 – these may include those for whom English is an additional language, those from minority ethnic groups, those from Gypsy, Roma and Traveller families, and those from lesbian, gay and transgender families
- Adopted children and adopter families
- Looked after children
- Children who are being cared for by members of their extended family such as a grandparent, aunt or older sibling
- Families identified by the Local Authority as 'troubled family' who have children under the age of 5
- Families who move in and out of the area relatively quickly (transient families) such as asylum seekers, armed forces personnel and those who move in to the areas seeking employment or taking up seasonal work
- Any other vulnerable group or individual families including

The proposal's intention is to maintain levels of overall access to children's centre services, whilst operating within the budget envelope agreed by full Council in February 2015. The new delivery model will improve access to services through increased outreach, alignment of other commissioned services to children's centres and the use of other community buildings, including libraries, leisure centres and health centres, as appropriate. The locality model will encourage diversity of provision, support the development of local solutions and will draw on a range of data sources, effective practice, expert knowledge and experience to identify and meet the needs of the locality. This will take into account the

different profiles and characteristics of residents in these localities. All groups of residents with young children, regardless of their characteristics (e.g. ethnicity, sex, religion, age etc), will still have the opportunity to access universal Children’s Centre services in Haringey.

Other options considered include:

- i) Maintaining 16 designated children’s centres – which would maintain the same level of coverage as is currently in place  
An analysis of this option suggested that this would cost £2.834m funding. This is nearly £1m more than the recommended option and over £400k more than the current service delivery cost.
- ii) Maintaining 9 designated children’s centres and 7 community access point open for 15 hours service delivery per week  
An analysis of costs suggested that the funding required to meet the delivery model as informed by the consultation would be £2.194m. This would represent a saving on the current budget but is still £334K more than the recommended option.

The proposed option balances improving outcomes for all children and families in the borough with the requirement to stay within the reduced budget envelope agreed for the service.

Recommendation	Risks/Impact	Mitigation
<p>Reduction in the number of designated centres from 16 to 9 to cover the whole borough and closing 7 centres and to close Rokesly at the request of the Governing Body.</p>	<p>Children aged 0-4 across the borough could have potentially reduced access to universal and targeted services</p> <p>Children with disabilities could be disproportionately affected by the reduction in children’s centres.</p> <p>The families currently accessing services at the children’s centres that will be closed may need to go to other centres for services and this may mean a longer journey for some families. This may have greater significance for parents who have children with a disability and for parents/carers with a disability.</p> <p>Closure of high quality provision may lead to</p>	<ul style="list-style-type: none"> <li>• Strengthen the outreach offer to ensure contacts with families are maximised in spite of operating from a reduced number of sites. This will mean an increase in contact with families within the community and strong links with partner services that undertake outreach into the community as part of their normal service delivery.</li> <li>• Integrate the SEND local offer to ensure that information for parents and carers is available as part of the children’s centre offer and that support for young children with a disability and their family can be accessed via the designated children’s centre.</li> <li>• Having named Health Visitors for each</li> </ul>

loss of expertise and local knowledge across the system.

Reduced choice for local residents

Safeguarding issues may not be identified or responded to immediately

designated centre and for two sites developing co-located teams this will strengthen universal contacts with all children under 5 and increase opportunities to signpost and refer vulnerable families to appropriate services.

- We will make sure each designated centre has a named Social Worker in order to ensure meaningful long term support for vulnerable children and that safeguarding issues are identified and responded to in a timely fashion
- Risk assessments will be undertaken in line with agreed Haringey safeguarding processes and protocols. These proposals do not change the thresholds in place in the borough for responding to social care concerns and specifically safeguarding and do not amend individual organisational responsibilities for responding to these thresholds.
- A more general consideration of how safeguarding will work in the context of designated centres working in partnership with other sites or partner services has been undertaken in order to mitigate any risks and to ensure roles, responsibilities and accountabilities are clear across partners. This is reflected in the roles and responsibilities set out in the draft accountability framework.
- We will make sure each designated centre has a named Family Support Worker in order to ensure meaningful

early help support for families at risk of becoming vulnerable.

- We will introduce clear and robust information sharing protocols and systems to ensure families' needs are identified and met.
- To reduce the impact of the proposals on current and prospective children's centre parents and carers who are disabled, we will work with a range of services, including Haringey's Adult Social Care service to develop a travel arrangement approach that will encompass a number of options and solutions for individuals.
- We will work with a range of partners services to ensure current and prospective children's centre service users who are disabled, have access to information about children's centre services.
- We will produce high quality information in order to raise awareness of the children's centres' network of services and promote equity of access
- We will have a robust implementation plan for the new commissioning model which will include a comprehensive induction and training plan for all staff
- Designated centre must consider alternative locations for service delivery in the local area working in partnership with other settings/organisations to maximise access. This will be clearly reflected in the commissioning arrangements

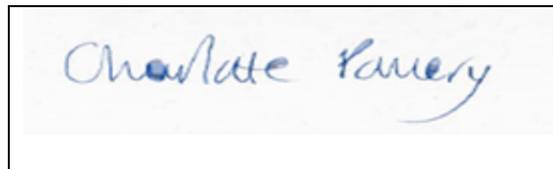
		<ul style="list-style-type: none"> <li>• We will consider where possible extended opening hours as part of working with families with children 0 to 19 and when resources can be pulled together to support delivery</li> <li>• The final design also takes into account location and visibility of the designated centre as a key to ensuring locality based services</li> </ul>
	Women and children are the largest users of Children’s centres services and therefore their access to services could be negatively impacted upon by a reduction in number of designated centres.	<ul style="list-style-type: none"> <li>• We will ensure centres work within a network of services, including maternity and breastfeeding support services, to support women in their journey to become mothers.</li> <li>• We will produce high quality information in order to raise awareness of the children’s centres’ network of services and promote equity of access</li> </ul>
	Fathers are the group that least use children’s centres currently, therefore a reduction in number could further impact on the number of fathers accessing services.	<ul style="list-style-type: none"> <li>• We will commission specific services working with fathers linking with existing networks</li> <li>• We will produce high quality information in order to raise awareness of the children’s centres’ network of services and promote equity of access</li> </ul>
	Access to services for most vulnerable children could be substantially reduced	<ul style="list-style-type: none"> <li>• We have designed our proposed commissioning model in such a way to ensure that resources are focused on areas of greater need and deprivation.</li> <li>• The new commissioning model will increase rigour in the provision of information and data about protected groups and specifically vulnerable population of children and families.</li> </ul>

		<ul style="list-style-type: none"> <li>The final design also takes into account location and visibility of the designated centre as a key to ensuring locality based services</li> </ul>
Not to proceed with establishing Community Access Points	The residents of the following wards Noel Park, Bounds Green, Harringay, Hornsey and Muswell Hill wards are most likely to feel the impact in terms of not having a designated centre in their ward and therefore potentially having reduced access to services.	<ul style="list-style-type: none"> <li>We will link each designated centre to the relevant early help locality team and ensure there is a named Health Visitor, Social worker and Family Support Worker for each children's centre. This will increase the coverage of children's centres in areas such as Noel Park, Bounds Green and Harringay through the establishment of strong referral and information sharing systems. Designated centres will also be expected to provide access to services through a variety of means including the use of off-site locations within their planning areas. This will increase the opportunities for families living in these wards to access services.</li> <li>We will seek to identify a new children's centre provider in response to Rokesly Children's Centre's request to be de-designated. This will provide the opportunity to develop a model of delivery that will take into account access to services for residents living in Hornsey and Muswell Hill wards.</li> </ul>
To establish 5 children's centres planning areas, aligned with Haringey school's Network Learning Communities	All wards in Haringey will be served by children's centres services	None needed
Note that children's centres should still focus on delivering early years services for families 0-5 years; however as a future development we ought to look at developing co-located	Maintain the focus of services for families with children in the early years	None needed

services for a wider age range.		
Increase current service availability across more weeks of the year	Services will be available for longer to local families with limited holiday closure	None needed
To bring the current arrangement for children's centres Advisory Boards to an end by 31 <sup>st</sup> March 2016 and establish new Children's Centres Advisory Boards (CCAB) from April 2016	Maintain partnerships and integrated working with a variety of agencies	None needed
Develop Parent Engagement Forums for each children's centre planning area	Develop strong parental voice building on existing structures	None needed

### Stage 9 - Equality Impact Assessment Review Log

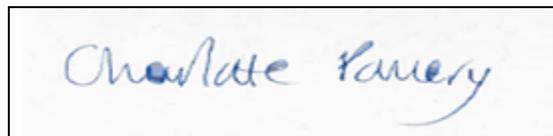
Review approved by Director / Assistant Director



Date of review

20<sup>th</sup> October 2015

Review approved by Director / Assistant Director



Date of review

28<sup>th</sup> October 2015

### Stage 10 – Publication

Ensure the completed EqIA is published in accordance with the Council's policy.