

Agenda Item No: 7 (c)

DERBYSHIRE COUNTY COUNCIL

CABINET

14 June 2016

Report to the Strategic Director for Children's Services

**Report on the Findings of the Consultation Undertaken on the Proposals
to Review Children's Centres – (Children's Services)**

1. Purpose of the Report

To report to Cabinet the outcome of the Children's Centre public consultation on the detailed proposals agreed by Cabinet in January 2016 and to ask Cabinet to consider how to proceed. The proposals at that time were:

- i. To close 32 Children's Centres – Crich, Belper, Blackwell, Whaley Thorns, Arkwright, Dronfield, Clowne, Bakewell, Chapel-en-le-Frith, Harpur Hill, Wirksworth, Coton-in-the-Elms, Etwall, Long Eaton (rural), Sandiacre, West Hallam, Somercotes, Chesterfield Town Centre (Queens Park), Brimington, Newhall, Stonebroom, South Normanton, Ripley, Hasland, Brampton, Clay Cross, Tupton, New Mills, Killamarsh, Eckington, Gamesley and Kirk Hallam.
- ii. To transfer services from Kirk Hallam Children's Centre to Charnos Family Support Centre in Ilkeston.
- iii. To retain staff to work in the Newhall and Sandiacre areas.
- iv. To implement the revised structure and staffing reductions subject to consultation with trade unions and staff.

2. Information and Analysis

A report was submitted to Cabinet on 26th January 2016 to seek approval to consider the implementation of a new model of service delivery, which following public consultation, could potentially result in the closure of some centres.

In order to achieve the Children's Services savings it is proposed that the Children's Centres budget is reduced by £4,470k.

The Children's Centre review is exploring how we can best utilise the remaining resources (£2.7 million) to families where there are children aged 0-5 who need the most support. This would mean the removal of the provision of universal services to all 0-5s. Resources would need to be directed to children with an identified need. This decision would be in line with the Sure Start Statutory Guidance 2013 which states; "The core purpose of Children's Centres and their families is to improve outcomes for young children with a particular focus on families in *greatest need of support*".

Derbyshire currently has 50 Children's Centres which have developed over a number of years to offer a range of services including health, parenting and family support, early education and childcare. It is well evidenced that during a child's early years the social and emotional development structures within the brain are formed which can promote positive outcomes in later life.

The proposals to close centres, (and subsequent consultation,) is based on the considered view that early childhood services and family support can be delivered effectively without the extent of the current network of Children's Centre buildings. By removing building related costs, such as utility charges, cleaning and leasing, the budget can be directed to the families who are most in need of the Council's help.

2.1 The Review Criteria to determine the Future of Individual Centres in Derbyshire

The Cabinet report submitted on January 26th 2016 requested approval for the following proposed criteria to be applied to the 50 Children's Centres.

- i. To retain centres in the areas of highest need across the county using data from the Index of Multiple Deprivation (2015). The proposal was to retain centres where there is 10%, i.e. the highest, level of deprivation, and then consider other areas where there are levels of 20% and 30% alongside the following factors:

- a) Geographical spread of provision across the county and related transport links and travel routes between Centres.
- b) Suitability of the building in terms of condition and location.
- c) Locations where Thriving Communities projects are in existence.
- d) Other services within a locality which are accessible to families; including health services; other children's services including schools and community services, libraries and adult learning.

The application of these criteria to the 50 Children's Centres identified the Centres proposed for closure and formed the starting point for public consultation.

Feedback from the consultation on the criteria used is contained within Appendix 1 (Summary Consultation document.)

Having considered the feedback on the criteria, as well as the alternatives suggested, it is proposed that the five criteria are applied as originally envisaged.

Appendix 2 shows the application of the five criteria set out in Paragraph 2.1 to each of the Centres proposed for closure.

All of the Centres proposed for closure meet the criteria except in the case of Eckington and Gamesley where the travel times to an alternative Centre exceed what is considered reasonable based on consultation responses. The consultation feedback suggests that the majority of parents (37%) said they would only be willing to travel for 10 minutes with 27% suggesting 20 minutes maximum. The position of Eckington and Gamesley Centres is therefore considered further below.

It is recognised that there is still a need to provide support for families within the early years where Centres are closing and this is taken account of in the recommendations that follow.

There will also be an opportunity to use available resources in partnerships with other early year's services although at this stage in most cases the extent and type of co-location is still subject to further discussions with partners.

Co-location and sharing venues would help to minimise any impact of closing a Centre and working together would help to maintain early year's services. It is intended therefore that a targeted service will continue to be provided using alternative community centres wherever this is feasible. This will be monitored as part of the action plan attached to the Equality Impact assessment summary (Appendix 3, pages 230-234)

2.2 Children's Centre Public Consultation

The public consultation on the proposals took place from 10th February to 4th April 2016. There were 1,264 respondents to the consultation via an online or paper questionnaire. In addition, there were seven staff feedback consultation events across the county. Children's Centre Co-ordinators discussed the proposals at Children's Centre Advisory Group meetings and provided relevant feedback.

A summary of the consultation responses received is at Appendix 1 and in paragraph 2.3 below.

In addition to public consultation correspondence has also been received from the following stakeholders - Citizens Advice, Clinical Commissioning Groups, DCHS, Unison, High Peak Borough Council, NHS and voluntary organisations.

The points raised by stakeholders are as follows;

Organisation/Stakeholder	Key Points
Citizens Advice Bureau	<p>Agree with IMD but several other communities will be affected with other significant needs.</p> <p>Irregular and expensive transport links, rural isolation and lack of internet access.</p> <p>Pockets of deprivation and need not within 10%,20% and 30%</p> <p>Cost and distance to access support needed.</p> <p>Loss of community facility is a barrier to engagement with help and support</p> <p>Difficulties travelling on public transport (particularly with young children or mobility issues).</p> <p>Support on housing, relationships, education, financial stability and debt- these needs are present in each and every community.</p> <p>CAB provide a reactive service and a proactive and preventative service</p> <p>Settings provide a safe, confidential and familiar location.</p> <p>Familiarity and rapport built between families and staff encourages people to</p>

	<p>attend sessions. Families may not readily access the service elsewhere</p> <p>Closures could ultimately increase public spending and cause more work for statutory services.</p>
Derbyshire Community Health Services	<p>Detrimentially affect the health and wellbeing of both current and future generations of children and young people across Derbyshire.</p> <p>Every child should be given the best start in life in order to reduce health inequalities across the life course</p> <p>To ensure that the most appropriate input is provided to minimise escalation of issues into more specialist and therefore costly services.</p> <p>DCHS will be unable to take on any additional responsibilities that may arise from the need generated if other Children's Services is retracted.</p>
CCG	<p>Effect the closure of Centres will have on the health and wellbeing on children and families.</p> <p>Instances of domestic violence, poor mental health are present in all communities.</p> <p>Concerned that children and families will no longer receive effective early intervention that might reduce the trajectory of problem escalation.</p>
High Peak BC	<p>General concern at the loss of vital services provided by the Centres which are often a gateway to other services</p> <p>Concern that no Centres left open in central area of the Borough with travel needed to Fairfield or Glossop.</p> <p>New Mills and Chapel CC run lots of services.</p>

	<p>Concerns expressed for level of deprivation, isolation, impact of the County Councils review of subsidised bus services, new housing planned in the central area of the Borough.</p>
<p>Glossopdale Children's Centre Advisory Board meeting Minutes</p>	<p>Closing Gamesley CC would have greatest impact on the most vulnerable families.</p> <p>Two buses or bus/train 40-60 minute walk to Glossop or Hadfield CC from Gamesley.</p> <p>Limited access to other services if Gamesley CC closes.</p>
<p>Save Belper Children's Centre Document</p>	<p>No mention of alternative services for Belper area in the last Cabinet report.</p> <p>Voluntary sector is unlikely to have the required skills to provide specialist support and Belper has had closure of two of its pre-schools.</p> <p>Abandoning young vulnerable families now will increase the need for Adult Care in the future putting further pressures on the system going forward.</p> <p>Not enough consultation time to comment and limited internet access to disadvantaged groups</p> <p>Should look at how many families who have a high level need use the Centre</p> <p>How many vulnerable families will be left without support and what will the impact be?</p> <p>Other services offered at Belper- BEARS, Freedom Programme, Careers Advice, Health Visitor, Foodbank</p>

The position of Citizens Advice as the provider of services commissioned by the Council at Children's Centres is commented on further below at paragraph 2.9

Unison has made the following suggestions for alternatives to closure of the Children's Centres;

1. The immediate cessation of plans to close Children's Centres in Derbyshire in its current form with a view to review the whole of Social Services and the possibility of a New Generic Service.
2. Settle outstanding Equal Pay cases which will free up projected costs.
3. Cap senior management pay.
4. Review accommodation. Changing the Way Derbyshire Works. Working from home. Share accommodation with other district councils, Parish Councils health and Criminal Justice and Health.
5. Fully Explore options of joint funding in Adult and Children's Services with clinical commissioning groups public health. £3.8 billion available in joint funding.
6. Open VR to all staff including previously ring fenced jobs such as social work
7. £200 million in reserves, used to help offset these decisions of service closure.

8. Retaining the investments of a highly skilled and experienced workforce maintaining a stance against Tory plans to force the privatisation of Public Services.

In addition it is understood that UNISON intend to submit a petition opposing closures but this has not been received to date.

The following petitions have been received:

- Signatures from 163 people opposing closure of Belper CC.
- Signatures from 92 people opposing closure of Ironville CC.

It should be noted that Ironville is not proposed for closure.

The public, stakeholder and staff consultation feedback, public letters and letters from professionals have been considered in formulating the recommendations made below.

2.3 Relevant considerations

2.3.1 Equality Analysis

To analyse the proposals in more depth, and in particular the impact on those people with protected characteristics, a detailed Equality Analysis has been carried out.

The Equality Analysis, a summary of which is provided to Members at Appendix 3 is divided into the six localities within Derbyshire and contains details of the Children's Centres proposed for closure within each of those localities. A copy of the full analysis will also be made available to Members and Members will be advised separately how to access this..

Included in the equality document is detailed information on consultation responses relating to the protected groups by individual centre and also a health analysis which records health implications as part of the consultation feedback and data. The equality analysis, whilst focusing on protected groups, also therefore examines the level of need in each area in line with our statutory duty.

The potential impact on rural areas which tend to be more isolated in terms of early years provision is identified as a particular issue within the equality analysis. In formulating the recommendations particular consideration has therefore been given to the impact of closure of a Children's Centre building where additional services have also been delivered such as, foodbanks and Citizens Advice Bureaus.

In that connection Members are asked to note that:

12% of respondents to the consultation used Children's Centres support to access foodbanks,
23% accessed support from the Citizens Advice Bureau and

16% used other services which are detailed in the analysis.

The analysis includes a number of measures which Children's Services intends to take to seek to mitigate the adverse impact of the proposals. These are set out at pages 230-234 of Appendix 3. It is however unavoidable that there will remain the potential for significant adverse impact even after this mitigation has been applied.

2.3.2 Consultation

The outcome of consultation can be found in Appendix 1.

Members' attention is drawn to the high level of opposition to the closure of centres generally;

70% of respondents using a centre which was proposed for closure were very dissatisfied,
7% were fairly dissatisfied,
4% were neither satisfied or dissatisfied,
3% were fairly satisfied and
2% very satisfied.

Respondents to the public consultation also provided feedback on the impact the closure of a Children's Centre would have on children and families. Responses to the concerns raised are contained in more detail within the Equality Analysis. This table provides the most reported responses in priority order.

Description	% of respondents
Miss the support and advice and signposting to other services	12.9%
No socialisation	12.3%
Transport to another centre is a problem	10.7%
Miss general activities	8.6%
Loss of early education, learning and child development	5.4%
Feeling isolated	5.1%

Consultation feedback from respondents also provides us with suggestions on how to lessen the impact of Children's Centre closures. These are recorded in the table below;

Description	% of respondents
Keep the centre open	12.6%
Opposed to closure/disagree with cuts	7.8%

Run groups in local halls/community buildings	6.3%
Provide outreach support services in community buildings at accessible regular times	5.7%
Don't close well used ones in areas of high need	3.9%
Families to pay for some services/groups	3.9%

Given the significant reduction in the Children's Services budget set out above it is not considered feasible to keep all Centres open.

As explained above the new Children's Centre delivery, with a reduction in resources, would need to become a targeted service focussing on those most in need.

There were 3 general themes arising for the consultation with the public that merit particular consideration:

- (i) The suggestion from the consultation to charge families to access the service.

It is considered that this proposal if implemented could potentially exclude or create a barrier for those in greatest need of support and it is therefore not proposed to proceed with this suggestion.

- (ii) The consultation feedback also suggests the use of community venues as an alternative to closures.

An important restricting factor here is the cost of using alternative venues. However, through the equality analysis for areas where the children's centres are proposed for closure, alternative service delivery sites have been considered.

- (iii) Concerns re access issues

Access to alternative provision forms part of the criteria applied set out in the Table of Centres and Criteria found at Appendix 2

In addition, detailed exploration of transport links to alternative services and avoidance of possible isolation will be included in the analysis.

2.4 Recommendations in respect of individual Children's Centres

It is considered that having taken account of:

- (1) the application of the criteria,

- (2) the consultation responses and
 - (3) the equality impact assessment, including the mitigation referred to in the latter,
- the recommendations set out below should be made to Members.

In considering the recommendations Members are asked to give careful consideration to the detailed contents of the consultation responses and equality impact documents alongside the following brief narrative (and not to rely on the narrative alone.)

(A) Amber Valley

In Amber Valley the proposals submitted to Cabinet for consideration were for 4 Children Centres to remain open and 4 to close. The 4 to remain open were Ironville, Langley Mill, Alfreton and Heanor. The 4 proposed for closure were Crich, Somercotes, Ripley and Belper.

Crich

Crich Children's Centre is not located in an area where there is a 30% level of deprivation. There is a concern that it is located in a rural setting with limited transport options. Families travel to Belper (6 miles), Alfreton (5.5 miles) or Matlock (7 miles) to access Job Centre services and other amenities.

The Multi Agency Team is based in Belper and Social Care are based in Ripley which is 5.2 miles from Crich.

However, although transport is needed to use these services there are some services within the reach area that a family would be able to access.

It is therefore recommended that Crich Children's Centre closes as it is not in an area of high deprivation and has alternative amenities for families with children 0-5 which are reasonably accessible.

Belper and Ripley

There is a concern that the proposals to close Ripley and Belper Children's Centres do not allow for services to the west of the Amber Valley locality. The rural community would be left isolated and travel to the remaining centres would not be straightforward.

Although it is recognised that this is a significant issue, it is considered that constraints on the budget can no longer support the presence of a Children's Centre building in Ripley or Belper which are in the west of the locality. However, Belper requires further consideration for the reasons set out below.

Belper

Belper Children's Centre's reach area is not located in an area where there is a 30% level of deprivation. It is situated on the Parks estate and is within reach of the town centre which has a number of amenities including schools and a site for Amber Valley Health services.

On the Parks estate itself are 4 pre-schools, three full time day care nurseries, 8 registered childminders, 6 primary schools and one secondary school.

The recommendation is therefore that Belper Children's Centre be closed.

However as part of the consultation, a voluntary sector group has indicated it wishes to continue to deliver some services for 0-5s from the building in Belper, picking up the relevant costs. This is seen as a very proactive and positive move for the Amber Valley group of Children's Centres as it can potentially help ensure families can receive support in that geographical location.

It has been clarified with the group that this is not intended to be an expression of interest under the 'Right to Challenge' provisions of the Localism Act.

Whilst the recommendation is that Belper Children's Centre closes, it is intended to hold further discussions with the group with a view to offering some staff time to work alongside the group to assist them in seeking to develop their plan to utilise the current building, to deliver non statutory services. The group will be assisted and supported in the development of their plans, which are for the provision of groups for children and their families, to be delivered from the existing building. Discussions would need to take place about the detail and duration of the support and the transfer of toys and equipment to help establish the group.

Ripley

Ripley Children's Centre has reach areas within the top 20% and 30% deprived across England.

However, space in Ripley Children's Centre is limited and the analysis shows a number of alternative local services that families would be able to access in the Ripley area.

The children's centre is within easy walking distance of the town centre where there are many activities and groups for families with children under 5. There is a local Community, Voluntary Services office in the market place.

The nearest Children's Centres to remain open are Ironville (4.3 miles), Heanor (4.6 miles) and Langley Mill (5.8 miles).

The availability of local services and the limited space within the Centre have therefore informed the decision to recommend closure of the Ripley Children's Centre.

Somercotes

Somercotes Children's Centre has reach areas within the top 20% and 30% deprived across England.

There are good transport links to Alfreton Children's Centre (1.4 miles). Alternative services for families to access are also available locally.

As there are good transport links to Alfreton Children's Centre and alternative services for families, it is therefore proposed that Somercotes Children's Centre will close.

Summary

The proposals to close Crich, Ripley, and Somercotes will stand. It is proposed that a decision on Belper is deferred for further investigation. This will leave children's centre buildings in Ironville, Langley Mill, Alfreton and Heanor which are areas of high need and have transport links allowing for accessibility.

(B) Bolsover/North East Derbyshire

The proposals submitted to Cabinet on January 26th 2016 were to close Arkwright, Blackwell, Dronfield, Clowne, Killamarsh, Eckington, Whaley Thorns, Clay Cross, Tupton, Stonebroom and South Normanton Children's Centres.

Blackwell

Blackwell Children's Centre does not have a reach area within the top 10%, 20% or 30% most deprived area in England and is therefore not considered to be in an area of need.

Blackwell village has a GP surgery, a shop, a community centre, four schools, two nurseries a pre-school and one day-care provider. The nearest children's centre is Alferton which is 3.2 miles.

As the community has alternative provision for under 5s and is not in an area of need, it is recommended that the Blackwell Children's Centre closes.

Whaley Thorns

Whaley Thorns Children's Centre does not have reach areas within the top 10%, 20% and 30% most deprived in England and is therefore not considered to be in an area of need.

There are no voluntary or community groups for the under 5s in the area.

However, Shirebrook Children's Centre is 2.8 miles away and nine minutes on the bus.

Shirebrook has a number of amenities and services for families with under 5s including a library, nurseries, day care, an adult education site, health services, access to Foodbanks, Job Centre Plus, housing office and Employment Advice Centre.

As the community has access to alternative provision for under 5s and is not in an area of need, it is recommended that Whaley Thorns Children's Centre closes.

Arkwright

Arkwright Children's Centre does not have reach areas within the top 10%, 20% and 30% most deprived in England and are therefore not considered to be in an area of need.

Arkwright has a frequent bus service to Bolsover Children's Centre.

Bolsover has amenities which families can access such as a library and CAB services and is a ten-minute bus journey away. Chesterfield also has services for families with under 5s and is also a ten-minute bus journey.

Arkwright school has a community focus and offers support to families. There is also a community venue.

As the community has alternative provision for under 5s within a short travelling distance and is not in an area of need, it is recommended that Arkwright Children's Centre closes and the sensory room equipment is transferred to local services for its continued use.

Dronfield

Dronfield Children's Centre does not have reach areas within the top 10%, 20% and 30% most deprived in England and are therefore not considered to be in an area of need.

Dronfield has a good provision of nursery and pre-school places. It also has a baby and toddler group in the library, and nine toddler groups in schools and village halls. There are also swimming sessions for babies and small children.

As the community has alternative provision for under 5s, and is not in an area of need, it is recommended that Dronfield Children's Centre closes.

Clowne

Clowne Children's Centre does not have reach areas within the top 10%, 20% and 30% most deprived in England and are therefore not considered to be in an area of need.

The nearest children's centre is Creswell which is a 20-minute bus journey and 10 minutes by car.

There are "Mums and tots" sessions twice weekly at Barlborough Village Hall and "Tots and Carers" weekly sessions at the Salvation Army in Clowne.

Clowne has local amenities that families with children 0-5 can access.

As the community has alternative provision for under 5s and is not in an area of need, it is recommended that Clowne Children's Centre closes.

Eckington

Eckington Children's Centre has reach areas in the top 30% most deprived areas of England.

The centres proposed to remain open that will be used by current users of Eckington Children's Centre are Old Whittington and Staveley. There is a regular bus route to Old Whittington and to Staveley, and the journey time is 25 minutes. The consultation feedback suggests that the majority of parents (37%) said they would only be willing to travel for 10 minutes with 27% suggesting 20 minutes maximum.

Eckington has a large building and provides accommodation for the Children's Centre, Social Care and the Multi Agency team. It also has a day-care provision. The Children's Centre incurs a small annual running cost of £6,000. It is proposed that charging for use of the building by other services currently using the site would support its current running costs.

On the basis that the Centre can be 'self-financing' it is therefore proposed that Eckington Children's Centre remains open.

Killamarsh

Killamarsh Children's Centre has reach areas in the top 30% most deprived areas of England.

The centre to remain open that will be used by current users of Killamarsh Children's Centre is Staveley. This is on an hourly bus route from Killamarsh and is a 45-minute journey time, which is more than parents who responded to the survey said they would travel. However, families from Killamarsh would be able to travel to Eckington Children's Centre if it remains open (3.3 miles-9 minutes in a car, or 27 minutes by bus).

A number of respondents said they would be willing to walk to a different Children's Centre, but due to the distance, this would not be possible. There are some playgroups and toddler groups in Killamarsh that could be accessed by families.

The analysis has highlighted the need to retain a centre within the north of the locality. It is therefore recommended that Eckington Children's Centre, which is a larger building and incurs a small annual running cost of £6,000, is retained. As explained above it is anticipated that charging for use of the building by other services currently using the site would support its current running costs.

It is proposed therefore that Killamarsh Children's Centre would close. However, families from Killamarsh would be able to access the Children's Centre at Eckington.

South Normanton

South Normanton Children's Centre has one reach area in the top 20% most deprived area of England and two reach areas in the top 30% most deprived areas.

The equality analysis for South Normanton evidences a number of alternative services for local families to access; health services, a library, training facilities, adult education, and pre-school setting. Alfreton Children's Centre is 2.4 miles away.

In addition to this, families could access Pinxton Youth Centre nearby (1.8 miles) which could be used for support and targeted work.

It is the recommended therefore that South Normanton Children's Centre closes.

Stonebroom

Stonebroom has the same level of deprivation as South Normanton (one reach area in the top 20% most deprived areas of England and two reach areas in the top 30%).

The analysis shows poor transport links to alternative services and the nearest Children's Centre would be North Wingfield.

Local amenities include a GP surgery, nursery and pre-school provision.

With poor links to other services and limited local services, it is recognised that with the level of need, there would need to be some targeted support. However, the current centre costs can no longer be sustained within the significantly reduced budget. . It is therefore recommended that the Centre closes but an outreach provision or sessional use in a venue located in that area is identified and a £5k budget is set along with a staffing allocation to deliver the service.

Clay Cross

Clay Cross Children's Centre reach area contains some areas within the top 30% levels of deprivation across England.

The equality analysis for Clay Cross identifies a good range of local and accessible services for families with children under 5 such as social care, adult education and library and transport links to other services in Tupton and Chesterfield. North Wingfield Children's Centre is 2 miles away (12 minutes using a bus).

With access to alternative services, it is recommended that this Centre closes.

Tupton

Tupton Children's Centre has one reach area within the top 30% most deprived area across England, showing there is some level of need. Families who reside in Tupton would need to travel to access some services. However, there are 2 parent and toddler groups and a G.P practice locally and transport links to Clay Cross.

Given the reasonable access to alternative services, it is recommended that this Centre closes.

Summary

It is therefore recommended that the Centres proposed for closure in the North East and Bolsover localities do close as envisaged, with the exception of Eckington. It is also recommended that financial provision is made for an occasional service delivery point in the Stonebroom area and families from the South Normanton reach area access support at the Pinxton Multi-Agency base located at Pinxton Youth Centre.

(C) Chesterfield

The proposals submitted to Cabinet on January 26th 2016 were to close Chesterfield Town Centre (Queens Park), Brimington, Brampton and Hasland Children's Centres.

Chesterfield locality is urban, and as such, transport links have not been highlighted as a prominent concern. For this reason, the recommendations based on the consultation and local information focus on need and suitability of buildings in order to deliver services.

Brampton

Brampton Children's Centre has some areas of 20% and 30% deprivation within its reach area. Although there is a level of need, families would be able to access services at Holme Hall (1.5 miles) or Birdholme Children's Centre (2 miles) as there are transport links. There are also a number of alternative services within close proximity for a family with 0-5 year olds to access in Chesterfield Town Centre.

It is therefore recommended that the Centre closes.

Hasland

Hasland Children's Centre has one area of 20% and one area of 30% level of deprivation. It is within walking distance of Birdholme Children's Centre and local services. It is therefore recommended that the Centre closes.

Brimington

Brimington has reach areas in the top 20% and 30% most deprived in England.

The Children's Centre is located next to a library and two health surgeries and families have access to local amenities including schools, day care and a community hall.

Staveley and Brimington centres serve similar communities; Staveley centre is more accessible to surrounding villages which have a high level of need.

Although it is recognised that Brimington Children's Centre is easily accessible to Staveley residents, and is a much larger building with more capacity to deliver services, the running costs of Staveley are half the costs for Brimington, and within the limited budget, this has to be considered.

It is therefore the recommendation that Brimington Children's Centre closes but that Staveley remains open.

Chesterfield Town Centre

Chesterfield Town Centre (Queens Park) Children's Centre has reach areas in the top 20% and 30% most deprived in England.

However, the centre has accrued high maintenance costs and although it delivers services to areas of high need, alternative services such as the Healthy Living Centre (where midwifery are located), Library, GP surgeries and the Multi-Agency Team base are within close proximity of the reach area.

Families can also access the facilities in Chesterfield Town Centre and Birdholme Children's Centre (2 miles away), with good transport links

It is therefore recommended that the Centre closes.

Summary

The proposals submitted to Cabinet on January 26th, for the Chesterfield locality, stand based on consultation feedback, Equality Analysis and subject to a mitigation plan as set out in Appendix 3.

(D) Erewash

The proposals presented to Cabinet in January 2016 for Children's Centres in the Erewash locality were to close West Hallam, Long Eaton 2

(rural), Kirk Hallam and Sandiacre Centres. It was proposed to relocate Kirk Hallam to Charnos Family Support Centre and to retain staffing for Sandiacre Children's Centre.

West Hallam

West Hallam's Centre has reach areas within the top 20% and 30% most deprived in England. The areas of greatest need are located in an area which is close to Cotmanhay Children's Centre. Families from West Hallam are already accessing groups at Charnos Family Support Centre which is a short bus journey (3.6 miles) to attend.

There is also evidence of alternative services available locally for families. The Centre is close to local amenities such as the post office, a chemist, GP surgery and other small businesses. The centre is a few miles away from Ilkeston which has a library and community hospital.

It is recommended that West Hallam Children's Centre closes and families continue to access services delivered from the Charnos Family Support Centre.

Sandiacre

Sandiacre's Centre has reach areas within the top 10%, 20% and 30% deprived areas across England.

The Centre is close to local amenities such as the post office, a chemist, GP surgery and other small businesses.

The Children's Centre is on a school site and due to the increase in numbers of children attending, and the subsequent need for classrooms, the school has since acquired some of the space for service delivery. As a result, group sessions and other services are largely provided outside of the centre within local community venues.

To reflect this, it is proposed that Sandiacre Children's Centre closes and a £5k budget is set to allow for targeted service delivery from a community venue, which could be accessed by families in Sandiacre, where associated staffing is provided.

Kirk Hallam

Kirk Hallam has an identified need with areas within the top 20% and 30% most deprived in England.

Families are currently able to access Cotmanhay Children's Centre and Charnos Family Support Centre.

The equality analysis examines the proposal to relocate to Charnos Family Support Centre as this is 1.9 miles away and can be easily accessed by families.

There is therefore not a need to sustain Kirk Hallam Children's Centre in addition to the Charnos site so the recommendation would be for the Centre to close and for the services currently provided to be relocated to the Charnos Family Support Centre site.

Long Eaton (rural)

Long Eaton 2 (rural) Children's Centre services are delivered from Long Eaton 1 (urban) Children's Centre building. This building would remain but staffing would no longer be in place to support families within the Long Eaton 2 area as it does not serve families with a high level need in the top 30% most deprived areas in England.

The families who live within the rural pockets of Long Eaton are able to access amenities within Long Eaton itself.

Information for alternative services and transport options will be provided to the communities as set out in the Equality Impact Assessment mitigation Action Plan at Appendix 3.

In summary it is proposed that West Hallam, Sandiacre and Long Eaton (rural) Children's Centres will close with a staffing provision for the Sandiacre area. Kirk Hallam will transfer to Charnos Family Support Centre

(E) High Peak/North Dales

The proposal was to close Gamesley, Chapel-en-le-Frith, Bakewell, Wirksworth and Harpur Hill Children's Centres, as submitted to Cabinet in January 2016.

The rurality of this area and accessibility to services is a key theme and has been highlighted by respondents in the public consultation.

Transport links and travel time have been a predominant issue, with the main concern being the distance for families living in the New Mills and Chapel-en-le-Frith area having to travel to Glossop or Buxton to access services.

New Mills

New Mills has a reach area within the top 30% deprived areas in England and has a recognised need.

81.7% of respondents to the consultation were very dissatisfied with the proposed closure.

Within the New Mills area are 9 primary schools, 1 secondary school, 1 special school and 5 pre-school/nurseries. There are also a good range of local amenities.

Transport links from New Mills to alternative Children's Centres are infrequent and take above 30 minutes to both Glossop and Buxton.

The running costs of the New Mills building are significant and within the context of the financial challenges, it is difficult to maintain the complete children's centre facility. It is however recognised that this would leave a large rural area with a level of need without a service.

It is therefore recommended that the Centre closes but a staffing allocation allows for targeted group work to continue in a single room in a shared community venue to be identified, on a sessional hire basis with a £10k budget being set to support this.

Chapel-En-Le-Frith

Chapel-en-le-Frith Children's Centre does not have any reach areas within the top 30% most deprived in England.

Within the reach area are fourteen primary schools, two secondary schools and a support centre. Chapel-en-le-Frith has a range of local amenities but these are difficult for families living in rural areas to access.

The nearest support is reasonably accessible at New Mills.

It is therefore recommended that the Centre closes.

Gamesley

The equality analysis for Gamesley has highlighted similar concerns with difficulty for Gamesley residents in accessing transport links to Glossop and Hadfield Children's Centres which are proposed to remain open.

Gamesley Children's Centre has reach areas within the top 10%, 20% and 30% most deprived areas across England. It is because of this that it has been selected as an area to dedicate to a "Thriving Communities project".

The Thriving Communities project is seeking to support the community in identifying community needs and developing supportive projects.

The consultation data shows Gamesley received the highest number of respondents (85.7%) who were dissatisfied with the proposal to close the Children's Centre.

Transport links to Hadfield would involve two bus journeys or a train and a bus. There is a bus service to Glossop.

Gamesley has three primary schools, three Voluntary settings, an Early Excellence Centre, GP surgery, High Peak Community Housing Office and a library.

There is recognition of the high level of need in Gamesley and the need to sustain some level of support to targeted families. It is therefore recommended that the Centre remains open as a Children's Centre. However, it may be necessary to re-shape and reduce the services that are delivered from this Centre.

Wirksworth

Wirksworth Children's Centre does not have any reach areas within the top 30% most deprived in England.

The centre is located in the heart of a thriving commercial centre offering a good range of amenities. There is also one pre-school, five primary schools and one secondary school. Doctor's surgeries are central to the village and the nearest job centre is Matlock. The nearest children's centre would be Matlock which is 5 miles.

It is recommended, due to the low level of need and alternative local services that the Centre closes.

Bakewell

Bakewell Children's Centre does not have any reach areas within the top 30% most deprived in England.

The centre serves a large rural area which can access Matlock, Chesterfield and Buxton by occasional public transport. The nearest Children's Centre would be Matlock which is 8 miles away.

Bakewell has a good range of services in the town, and in the reach area.

It is recommended that, due to the low level of need and reasonable availability of alternative local services, the Centre closes.

Harpur Hill

Harpur Hill Children's Centre does not have any reach areas within the top 30% most deprived in England.

Services currently run from Buxton library to be accessible to the families in greatest need of support.

Harpur Hill Children's Centre is 3 miles away from Buxton (Fairfield Children's Centre).

With access to services in Buxton and Fairfield Children's Centre, it is recommended that Harpur Hill Children's Centre closes.

(F) South Derbyshire

The Equality Analysis for South Derbyshire examines the locality as a whole taking into account the impact of rurality as a key theme whilst looking at level of need and consultation responses.

The proposal agreed by Cabinet for consultation was to close Children's Centres in Newhall (whilst retaining staff), Coton-in-the-Elms and Etwall and retain Woodville.

Coton-in-the-Elms

Coton-in-the-Elms Children's Centre's reach area is not located within one of the top 30% most deprived areas in England.

The Centre is close to local amenities including a community hall where there is a pre-school. The local area is approximately five miles from the centre of Swadlincote and is bordered by Leicestershire - three miles in one direction and Staffordshire two miles in another direction. Woodville Children's Centre is 6.6 miles from Coton-in-the-Elms, Stapenhill Children's Centre (Staffordshire is 3.9 miles) and Measham and Moira Children's Centres (Leicestershire) are 7 miles.

There are six primary schools and four pre-school/nurseries in the reach area.

It is therefore recommended that, due to the low level of need and available services for 0-5s, the Centre closes.

Newhall

Newhall Children's Centre has reach areas in the top 20% and 30% most deprived areas in England which are approximately two miles from Swadlincote Town Centre. Swadlincote has a good range of local amenities.

The need of the community is recognised; however, within budget constraints it is necessary to recommend closure of the Centre. However, it is considered viable to identify a £5k budget to fund a community venue, which is more practical, to deliver a targeted service. In addition to this would be a level of staffing provided to deliver an outreach service. Closure of the Centre is recommended in this basis.

Etwall

Etwall Children's Centre's reach area is not located in an area where there is a 30% level of deprivation. As a single centre, it reaches 2,099 0-5 year olds.

Families living in Etwall and Melbourne will travel to Derby City, Burton or Leicestershire for universal services as public transport between the main towns and city are good. However transport between villages is limited and a new housing development from the Hilton area has increased demand on the support provided by the Children's Centre.

Woodville Children's Centre is 10 miles from Etwall Children's Centre.

The rurality of this area has been noted. Given the recognition that services would not be easily accessible to families, it is recommended that Etwall Children's Centre closes but a £10k budget is provided to continue sessional targeted groups in part of the building or from a community venue with an associated staffing allocation.

In summary, it is proposed that Newhall, Coton-in-the-Elms, and Etwall Children's Centres close with a staffing resource to cover Newhall and the rural area surrounding Etwall.

2.5 Additional Proposals.

In reviewing the Children's Centre provision across the County, it has identified that the provision at Bolsover Children's Centre, which only contains office space, is not fit for purpose. It is therefore proposed that arrangements will be made to transfer to a more suitable nearby venue which has activity space and will enhance the service delivery for children and their families in that area.

As this is a re location of services to a nearby site with no changes to the service delivery public consultation is required.

2.6 Staffing

In addition to savings resulting from a reduced number of buildings, there will be a reduction in staffing.

106 respondents to the consultation, out of a total of 782, who commented on “alternative suggestions for how the Council can make savings”, suggested reducing middle & higher management costs.

This was considered as part of the consultation responses and given the proposed reduction in Children’s Centre buildings that require managing, and the associated reduction in staffing, it is proposed that there is a reduction of management staff from 14.82fte to 6 fte Children’s Centre Co-ordinators across the county.

The further reduction in Children’s Centre Co-ordinators posts identified in the previous Cabinet paper to 6fte would allow for more grade 8 posts (Foundation Years Practitioner/Family Support Worker). The reduction of the management structure proposed is considered appropriate to the needs of the service going forward.

2.7 Integration

With a reduced workforce, there is a need to integrate Children’s Centre Services with wider health, education, voluntary sector and day care services. This process is part of an on-going development with children and families at the heart of the decision-making.

2.8 Community Services

The public consultation highlighted a positive response from local communities to embrace community and parent volunteer groups to lead on support and projects.

It is proposed that we invest time in assisting community volunteers to deliver some early help services, such as play and learning, parenting programmes or childcare funded by Government initiatives. Where this is it is likely to help mitigate the impact of the proposed closures. However as this point in time no assurances can be given as to the extent of any mitigation.

2.9 CAB services in Children’s Centres

Currently, the Council contracts with CAB to provide financial/welfare benefits advice in Children’s Centres and GP surgeries to help families to maximise their household income:

Service:	Funding per year:
CAB service in Children's Centres	£444,460
CAB service in GP surgeries	£859,600

The potential impact of closing Children's Centres on the CAB service was considered as part of the consultation and equality impact assessment as referred to above at Paragraph 2.2 above and in the Equality Impact Assessment.

In addition, the CAB service responded to the consultation on the proposed closure of the Children's Centres as indicated above.

Subject to the recommendations to reduce the number of Children's Centres being approved, discussions have also taken place via Public Health as to the implications of this for the funding of the current contract for provision of service provided by Citizens Advice i.e. the proposed reduction in funding as a consequence of the reduced amount of CAB provision to be delivered out of the Children's Centres in future. Citizens Advice has accepted that the current contract may be varied to take account of the changed position.

It is proposed that the overall contract value for CAB services in Children's Centres would reduce by 50% from £444,460 to £222,230. Public Health will meet the cost of continuing to fund the contract at this reduced level, in the Children's Centres which remain open and/or in alternative community venues.

It should be noted that the Equality Impact Assessment identifies that there would be an adverse impact from reducing the level of service. However in partial mitigation, £222,230 (50%) of the funding will remain. CAB services are available in most GP surgeries in the County, although these sessions are already operating at full capacity and further demand may lead to longer waiting lists. Further consultation will be required with the CAB as identified in the report to mitigate the impact of this change so far as that is possible.

Following the Cabinet meeting, it is intended that further discussions will take place with CAB to ensure that the remaining CAB provision is distributed as equitably as possible to reflect local need.

3. Human Resources Considerations –

3.1 Impact on Children's Services Department

The proposal to close 29 Children's Centres will necessitate a reduction of Children's Services employees, as detailed in the table below.

Post Title	Grade	Current permanent FTE	Proposed future posts FTE	Reduction FTE
Children Centre Co-ordinator	12	14.82	6.00	8.82
Family Support Worker (Early Years)	8	93.12	28.5	64.62
Foundation Years Practitioner	8	42.41	20.00	22.41
Totals		150.35	54.50	95.85

In anticipation of the proposed Children's Centre closures, 11.31 FTE posts in the Children's Centre service (excluding Business Services) have been filled on a fixed-term basis and 18.18 FTE posts have been held vacant. This data is in addition to the above table. The fixed-term contracts will be brought to an end in line with the indicative timetable for the review attached as Appendix 4 and the vacancies will be deleted to contribute to the necessary savings.

Under these proposals the overall reduction of 125.34 FTE posts, which includes established employees, fixed-term contracts and vacancies, will provide a resultant saving of £3,803,239. For further details of the staffing and budget reduction for the Children's Services Department, refer to the staffing schedule at Appendix 5 and the Financial Considerations section of this report.

The existing and proposed organisational structures for Children's Services are attached as Appendix 6 and 7. The proposed structure, for posts included in the review, will be consistent with the Council's Organisational Design Principles and will enable and support service delivery.

The proposed reduction of Children's Centres buildings would also necessitate a reduction of 18 FTE Business Services posts and a resultant saving of £351,550 (including on costs). These will be achieved, subject to Cabinet approval, through the deletion of 14 FTE existing funded vacancies together with a further 4 anticipated Business Services vacancies through predicated turnover up to 31 December 2016.

It is proposed that the reduction in Children Centre Co-ordinators (Grade 12), Family Support Workers (Early Years) (Grade 8) and Foundation Years Practitioners (Grade 8) will be achieved through a redundancy selection out process, in accordance with the Council's agreed Redundancy, Redeployment, Buy Out of Hours and Protection of Earnings Policy. The proposed process, the determination of selection pools and

selection criteria will be subject to consultation with trade unions and affected employees. The indicative timetable for the staffing reductions is attached at Appendix 4.

3.2 Human Resource Considerations – impact on Corporate Property

Corporate Property, (Facilities Delivery), part of the Corporate Resources Department, provides Facilities Delivery Services to Children's Centres via a number of Service Level Agreements.

Subject to these proposals being approved at Cabinet, it will be necessary for Children's Services to reduce the requirement for Property Facilities Delivery at the affected Centres. On approval of these proposals, Children's Services will notify Property of the reduced facilities delivery required to take effect from 31st January 2017.

The proposed impact of this on Facilities Delivery employees, from the 32 Children's Centres affected are 22 positions (6.5 FTE) are to be deleted where Children's Centres and Services are closing completely. The details of affected staff are attached in Appendix 5.

There may also be a small consequential reduction in some multi-centre usage, where the Children's Centre Service has closed within a multi-use centre where Facilities Delivery Services are provided.

Property Services (Facilities Delivery) hope to mitigate this reduction by Children's Services, (through consideration of the Service Level Agreements at these sites with the Corporate Landlord) and a change of use to the areas that the Children's Centre Services vacates. This may however be sufficient to constitute compulsory redundancy, where further services cannot be agreed and a Buy Out of Hours is not possible, potentially affecting a further 7 positions (3.1FTE).

3.3 Overall -HR Considerations

Informal briefings have already taken place with trade unions and employees and formal consultation will commence should this report be approved. Both group and individual consultation will be carried out and in order to facilitate this process it is proposed, subject to Cabinet approval, that this report be sent to affected employees and the trade unions.

Formal consultation will be undertaken in accordance with Section 188 of the Trade Union and Labour Relations (Consolidation) Act 1992 and will be covered by the Council's corporate notification to the Secretary of State of potential redundancies under Section 193 of the Act.

The Council will seek to mitigate the number of compulsory redundancies and also seek to identify suitable alternative employment in line with the

provisions set out in the Council's Redundancy, Redeployment, Buy out of Hours and Protection of Earnings Policy.

As a measure to mitigate against redundancies a robust vacancy control procedure has been implemented within the Children's Services Department. The application of this procedure should increase future redeployment opportunities for any 'at risk' employees. Discussions with CMT have also taken place regarding the introduction of a cross-departmental vacancy control process..

To ensure safe practice in children's centre service delivery and service delivery within the wider early help services, it may be necessary, in exceptional circumstances, to employ agency staff for a very short period whilst the review progresses and up to its conclusion, rather than increase the number of fixed-term contracts.

As the proposals necessitate an overall reduction in posts, every effort will be made to achieve the reductions through voluntary means. Cabinet is requested to approve the use of voluntary release schemes for individuals within the redundancy selection pools. It is intended to request expressions of interest in the schemes from these groups of staff over the same timeframe as the selection out process for compulsory redundancy. Decisions regarding voluntary release, however, will only be made following completion of the selection out process.

In addition, it is proposed that the voluntary release schemes are made available to other relevant job types where "bump" opportunities may help to minimise any redundancies. In the first instance, the "bump" groups, to ensure they are accurately targeted, will be identified by consideration of whether they match the job family, grade, skills, geographic locations, work pattern etc. of the employees identified in the redundancy selection pools.

It is also proposed that later in the review process, in order to mitigate against any remaining compulsory redundancies, that consideration is given to identifying further targeted "bump" groups once better information is available of the skills, experience, location etc. of the individuals at risk is known.

If the individuals affected are not selected for a post within the revised structures, are not redeployed, or do not volunteer for voluntary redundancy/voluntary early retirement, the indicative timetable at Appendix 4 will be progressed to manage any potential compulsory redundancies.

4 Financial Considerations

The disestablished posts as set out in Appendix 5 will result in a saving of £3,803,000 (including on costs of 22.71%). In the event that it is not

possible to redeploy the post holders, and they are made compulsorily redundant, the costs will be met from the Corporate Budget for redundancy and premature retirement.

The proposed closure and changes to buildings as detailed in the report will result in a saving of £667,000. £75,000 of this figure relates to payments to external landlords which will be achieved as break clauses in lease agreements arise. A significant proportion of the savings will come from the cessation of internal payments including those to other parts of the Council and a number of schools for shared accommodation and contributions towards running costs of sites total £127,000. A further £149,000 of the saving relates to Derbyshire County Council Property Services for caretaking and cleaning services. Any potential impact on staffing levels for Property Services will be dependent on the future use of each site and are considered in section 3.2 of this report.

Subject to the discussions with Citizen's Advice referred to above, there will be a reduction in spend by Children's Services of £222,000. This will contribute £114, 000 savings to Children's Services budget reductions target and will allow the release of £119,000 from earmarked reserves which was being used to support the contract with CAB.

Total ongoing saving to Children's Centre revenue budgets will be £4,470,000 plus a further £114,000 to ongoing commissioned services.

Although not applied by the DfE to other authorities which have closed Children's Centres in recent years, there is a risk that the Authority is asked to repay capital grant. This will be mitigated by the continuing use of the investment in provision for children. The Authority will be working with schools and other groups to ensure that this is the case for as many centres as possible. If any centre cannot be used in this way, it would be sold and any receipt available to fund a potential claim by the DfE.

5. Legal Considerations

The Childcare Act (2006) Section 5A places a duty on Local Authorities "*to make arrangements so that there are sufficient Children's Centres, so far as is reasonably practicable, to meet local need*".

The Act (Section 5C) also places a "*duty on local authorities to ensure there is consultation before any significant changes are made to children's centre provision in their area*".

A Sure Start children's centre is defined in the Act as a place or group of places:

- Which is managed by or on behalf of, or under arrangements with the local authority with a view to securing that early childhood services in the local authority's area are made available in an integrated way;
- Through which early childhood services are made available (either by providing the services on site, or by providing advice and assistance on gaining access to services elsewhere); and
- At which activities for young children are provided.

The Sure Start Children's Centre statutory guidance states that local authorities *"should not close an existing children's centre site in any reorganisation of provision unless they can demonstrate that, where they decide to close a children's centre site, the outcomes for children, particularly the most disadvantaged, would not be adversely affected and will not compromise the duty to have sufficient children's centres to meet local need. The starting point should therefore be a presumption against the closure of children's centres"*.

The Guidance also emphasizes that local authorities should allow adequate time for responses, actively encourage parents from disadvantaged groups to participate, and demonstrate in their decision how they have taken consultation responses into account.

Members will need to give careful consideration, in particular, to the Council's duties under the Equality Act.

Under the Equality Act 2010, Cabinet Members are reminded that they are under a personal duty, when considering what decision to make, to have due regard to, in short, the need to protect and promote the interests of persons with protected characteristics (e.g. persons who are vulnerable on account of age, gender reassignment, pregnancy or maternity, race, disability, religion or belief, sex, sexual orientation).

Section 149 requires a public authority to have due regard to the need to-

- Eliminate discrimination, harassment, victimisation, and any other conduct that is prohibited by/or under the Act.
- Advance equality of opportunity between persons who share a 'relevant protected characteristics' and persons who do not share those characteristics
- Foster good relations between persons who share a relevant protected characteristic and persons who do not share it.

Having had careful regard to the equality impact analysis and also the consultation responses, Cabinet Members are under a personal duty to have due (that is, proportionate) regard to the need to protect and promote the interests of persons with protected characteristics (see above) and (i) to consider and analyse how the decision is likely to affect those with protected characteristics, in practical terms, (ii) to remove any unlawful discrimination, harassment, victimisation and other prohibited conduct, (iii) to consider whether practical steps should be taken to mitigate or avoid any adverse consequences that the decision is likely to have, for persons with protected characteristics and indeed, to consider whether the decision should not be taken at all, in the interests of persons with protected characteristics, (iv) to consider whether steps should be taken to advance equality, foster good relations and generally promote the interests of persons with protected characteristics, either by varying the recommended decision or by taking some other decision.

Whilst Cabinet Members are under a duty to have serious regard to the need to protect and promote the interests of persons with protected characteristics, in the ways just described, in reaching their decision, they may also take into account other considerations, such as the desirability of providing cost-effective and good quality services. They may ultimately decide that those types of considerations ultimately justify a decision that does to some extent adversely impact on persons with protected characteristics.

6. Property Considerations

If the properties are declared surplus to the operational requirements of Children's Centres, the Corporate Landlord will assess, in conjunction with all service departments, the Council's strategic need for the property to meet the wider objectives of the Authority.

The properties, which are in the leasehold or freehold ownership of the Council, or form part of a school site, will either be retained to meet the service needs of Children's Services or other departments within the Authority. For those properties which are not required, approval will be sought to declare the site and buildings surplus to requirements resulting in site-related running cost savings and a potential redevelopment

opportunity and/or a capital receipt on the sale of the site and buildings would be realised.

Any premises or security costs, incurred up until the disposal of the property or an alternative occupier is identified, will remain the responsibility of Children's Services.

7. Background Papers

1. Department for Education Sure Start Children's Centres; Statutory Guidance, April 2013.
2. Cabinet report: January 26th 2016.
3. Full Equality Impact Analysis (including Health Impact Assessment) April 2016.

8. Key Decision

Yes.

9. Call-In

No, waiver of call- in is not sought.

10 Strategic Director's Recommendation

It is recommended that Cabinet notes the outcome of the Children's Centre consultation, and findings of the Equality Analysis and Health Impact Assessment, and agrees to:

(1) the closure of the following Children's Centres:

Arkwright
Bakewell
Belper
Blackwell
Brampton
Brimington
Chapel-en-le-Frith
Chesterfield Town Centre (Queens Park)
Clay Cross
Clowne
Coton-in-the-Elms
Crich
Dronfield
Etwall
Harpur Hill

Hasland
Killamarsh
Long Eaton 2 (rural)
Newhall
New Mills
Ripley
Sandiacre
Somercoates
South Normanton
Stonebroom
Tupton
West Hallam
Whaley Thorns
Wirksworth

(2) the relocation of the Centre and associated services at Kirk Hallam as indicated in the report

(3) to note that the following centres will remain open:

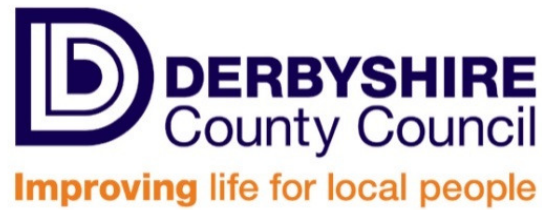
Alfreton
Birdholme
Bolsover
Buxton (Fairfield)
Cotmanhay
Creswell
Eckington
Gamesley
Glossop
Hadfield
Heanor
Holme Hall
Ironville
Langley Mill
Long Eaton 1 (Urban)
Matlock
North Wingfield
Old Whittington
Shirebrook
Staveley
Woodville

(4) Approval and implementation of the staffing reductions subject to consultation with trade unions and staff.

(5) Approval to apply the voluntary early release schemes to the redundancy selection pool and other identified targeted job groups that may help mitigate against the need for compulsory redundancies.

(6) That the proposed reduction in CAB funding is approved in principle, subject to further consultation with the CAB as to mitigating the impact of this reduction.

Jane Parfremment
Strategic Director for Children's Services



Derbyshire County Council

Children's Centre Review

Consultation February- April 2016

Summary

The Public Consultation response- A Derbyshire Overview

Derbyshire Responses to the Children's Centre Review Consultation; February to April 2016.

Online and Paper questionnaire

The total number of responses to the online and paper questionnaire was 1264. Of these responses;

53% were parents/carers currently using a children's centre.

31% were Derbyshire residents.

26% were parents/carers who had previously used a children's centre.

16% were parents/carers who may use a children's centre in the future.

18% were staff.

9% were others (including volunteers and other services working in partnership or delivering services from Children's Centres).

(some of these responses show that respondents may have ticked duplicate categories).

The majority of respondents were female (88%) with 7% male. Of these, 7% considered themselves to be disabled.

The ethnicity of the respondents was 89% white, 2% mixed race and 1% Asian/Asian British.

The majority of respondents were aged between 25-34(40%) with 28% aged 35-44, 11% 45-54, 8% 17-24 ,5% 55-64 and 2% 65+.

Additional correspondence/input to the consultation

There were 7 meetings with staff across the county where comments were recorded and considered. Discussions were held and recorded at Children's Centre Advisory board meetings. In addition to this there have been individual letters from service users, residents, staff, partners and stakeholders with comments on the review and proposals to be considered for use of any potential vacant Children's Centre building.

This level of input has provided a meaningful response to consider and evaluate the impact on Derbyshire of the proposals submitted to cabinet on January 20th to close 32 Children's Centres.

How satisfied were respondents with the criteria applied to each centre?

Derbyshire responses were as follows;

28% were very dissatisfied.

21% fairly dissatisfied.

21% fairly satisfied.

17% neither satisfied or dissatisfied.

9% Very satisfied.

The consultation allowed for the opportunity to suggest other criteria which could have been used and as part of the analysis this has been considered;

Suggestion	Response
Keep the centre open	To achieve budget targets we have to close some centres
Reduce middle management and higher management / costs	Intention to look at staffing structure during the review
How much centre is used and who by	Children's Centres work with the <u>needs</u> of people using centre, not the numbers of attendees
Council to work more efficiently	No specifics mentioned
Families to pay for some services/groups	Not in line with Statutory Guidance- would create barriers to those in greatest need being able to access the service
Run groups in local halls / community buildings	Explore through Equality Analysis- but still need to achieve lower budget
(Number of) families receiving support with Mental Health/ Impact on Mental Health	Explore through Equality Analysis
Cuts to other services	This has been considered
Charge other services and/or public who want to use the centre	To be considered
Provide outreach support services in community buildings/schools at accessible regular times	Possibility but needs to be at a low cost with a staffing resource
Collaborate with partners to jointly provide services and share funding.	The work on this has started

Don't close well used ones in areas of high need	The proposals have been based on criteria where there is high need
Close buildings but keep the staff	Closure of all buildings would still not meet the savings we are required to achieve
(Number of) Family Support & Speech and Language Support/Referrals	We are looking into this
Co-locate with other council services	This is under consideration as if centres close staff will have to relocate
Other services that use the centre	This forms part of the Equality Analysis and consultation
Not just considering areas of deprivation- other families have needs too	Our Statutory Duty means we have to meet the needs of the most vulnerable as a priority
Need in rural communities where there are poor transport links	To be explored through the Equality Analysis
Where there are pockets of deprivation within an area	We have applied this criteria to formulate our proposals
Stagger services across the county	The Equality Analysis will look at the geographical spread across the County
Views of Service Users should be taken into consideration	This forms part of the Public Consultation
Look at utilities bills in buildings	Financial analysis of utility buildings have been considered as part of the process
Charge more for other services	Charging may limit access to services by those families we need to target for support
Agree with criteria	
(Number of) DV incidents in the area	This will form part of the Equality Analysis
Building not fit for purpose	This has formed part of the proposals
Focus on targeted families	This has formed part of the criteria which has been applied
Order resources via cheaper options	To be considered
Challenge Government	Comment

Reduce other government funded initiatives	This has been considered
Make services available from other County buildings	This has been considered
Part time support across more areas	This would still incur the running costs of buildings
Sell unused council buildings and land	This has been considered
Examine building repair costs	This has been considered
Reduce Council promotional and publication materials	To be considered
Parking & access	Access is part of the Equality Analysis
Suitability of building	This is part of the criteria that has been applied to the centre proposals
Make staff training more local	To be considered
(Number of) Looked after Children	We have looked at where there is a high level of need
Partner feedback on quality of support	We have a duty to provide a quality service to targeted groups
Numbers and types of requests for support (eg starting point)	This has been considered

Satisfaction with proposal of closure of Centre

70% of respondents using a centre which was proposed for closure were very dissatisfied, 7% were fairly dissatisfied, 4% were neither satisfied or dissatisfied, 3% were fairly satisfied and 2% very satisfied.

AMBER VALLEY CLUSTER

Alfreton, Somercotes, Belper, Crich, Heanor, Langley Mill, Ripley, Ironville.

Alfreton				
Parent Responses			Aggregated Parent's Responses to Specific Service Usage	
Parent/Carer Respondent	Actual	%	Area	Average usage weekly - monthly
Current	9	69	Parenting Support	77%
Previous	7	54	Meeting friends and socialisation	69%
Potential use	3	23	Promoting Health	62%
Staff member or service user	1	8	Breastfeeding Support	54%
Derbyshire Resident (Any of the above)	5	39	CAB and Food Bank	23% 23%
Other –	3	23	Child and Family Health	46%
Total	28		Nutrition and Weaning Advice	46%
Disability declared (2) 15% Type of disability (if declared) (1) 9% Learning disability.			Child Physical Development and Family Fitness	38%
			Smoking and Substance Misuse	16%
			Access to FP and Sexual Health Services	15%
			Support with early education & school readiness	54%

Qualitative comments

- I go to here to talk to other mums and get advice. Other baby groups are activity based and don't have time to talk. With low maternity money, it is hard to afford any baby groups at all. They develop community spirit. They link children who may go to the same school together.*

- *CAB and Food Banks I would struggle as I wouldn't know where else to get help with food banks, etc. and citizen's advice is in Chesterfield and they always send us to a children's centre.*
- *Would not travel to Heanor to access breastfeeding support.*
- *Being a first time mum the support and socialisation is very much needed.*

DCHS provision, impact and mitigation.

- Weekly well-baby clinic with good attendance.
- Closure of this centre would require the baby clinic to be re-located to other health premises which are at the far end of the town and over a mile to walk for some of the more deprived areas of Alfreton.

Local Concern

- Impact on integrated partnership working with DCC and Health colleagues.
- Lack of child friendly venues to hold health led groups.
- Significant number of children with language delay.

Somercotes				
Parent Responses			Aggregated Parent's Responses to Specific Service Usage	
Parent/Carer Respondent	Actual	%	Area	Average usage weekly - monthly
Current	10	77	Parenting Support	55%
Previous	5	39	Meeting friends and socialisation	47%
Potential use	2	15	Promoting Health	31%
Staff member or service user	1	8	Breastfeeding Support	31%
Derbyshire Resident (Any of the above)	5	39	CAB and Food Bank	23% 23%
Other –	1	8	Child and Family Health	54%
Total	24		Nutrition and Weaning Advice	31%

Disability declared (0) Type of disability (if declared) (0)	Child Physical Development and Family Fitness	31%
	Smoking and Substance Misuse	15%
	Access to FP and Sexual Health Services	15%
	Support with early education & school readiness	47%

Qualitative comments

- I have received a lot of advice and support in the past which I do not believe would have been available elsewhere in the area – e.g. meal planning, potty training and dealing with difficult behaviour in my son.*
- At present I am able to come to the centre for help and support within 10 minutes of my home but if it closes it will cost me £5 to travel to the nearest centre and back and I cannot afford this.*
- The benefit of the centre is that there is no stigmatisation when accessing support for breastfeeding or post-natal depression.*
- My child is now at school f/t but I am looking at having further children in the future and would greatly miss having access to that local support. The benefit of the centres is they attract a mixed group of families from all different backgrounds meaning no one feels stigmatised when accessing support for breast feeding or postnatal depression etc.*

DCHS provision, impact and mitigation.

- Twice monthly well-baby clinic with good attendance.
- Closure of this centre would require the baby clinic to be re-located to other health premises in Alfreton or hire of community venue which are not child friendly.
- Impact on integrated partnership working with DCC and Health colleagues.

Local Concern.

- Limited community support for families in Somercotes.
- Additional expense for families to travel to other towns to access groups or clinics.
- Significant number of children with language delay.
- Lack of child friendly venues to hold health led groups.

Belper				
Parent Respondents			Aggregated Parent's Responses to Specific Service Usage	
Parent/Carer Respondent	Actual	%	Area	Average usage weekly - monthly
Current	44	76	Parenting Support	53%
Previous	23	40	Meeting friends and socialisation	62%
Potential use	17	29	Promoting Health	47%
Staff member or service user	1	2	Breastfeeding Support	45%
Derbyshire Resident (Any of the above)	16	28	CAB and Food Bank	7% 9%
Other –	8	14	Child and Family Health	38%
Total	109		Nutrition and Weaning Advice	42%
Disability declared (1) 2% Type of disability (if declared) (0)			Child Physical Development and Family Fitness	38%
			Smoking and Substance Misuse	4%
			Access to FP and Sexual Health Services	3%
			Support with early education & school readiness	41%

Qualitative comments

- *I have found the service very helpful in the development of my new child.*
- *Wouldn't have met friends after having a baby and be able to meet and play once a week. It would stop us from making new friends and it is the only free group.*
- *I am a single parent with no family around me. If it wasn't for the children's centre I'd be raising my children in a refuge. The centre have helped me with housing, parenting, mental health, accessing courses, accessing childcare, reduced isolation, and helped with child development and weaning advice. Without these services I would not be able to care for my children in a safe way.*
- *Loss of local support for breastfeeding, socialisation and parent support.*

DCHS provision, impact and mitigation.

- Belper well-baby clinic held on site at Babington hospital.
- Breastfeeding support group held in Children Centre, Alternative health premises not suitable for holding this group.
- Impact on integrated partnership working with DCC and Health colleagues.

Local Concern.

- Many families are socially isolated and the children centre provides opportunities for families and children to socialise and get the support they need.

Crich				
Parent Respondents			Aggregated Parent's Responses to Specific Service Usage	
Parent/Carer Respondent	Actual	%	Area	Average usage weekly - monthly
Current	12	67	Parenting Support	45%
Previous	8	44	Meeting friends and socialisation	73%
Potential use	3	17	Promoting Health	34%
Staff member or service user	3	17	Breastfeeding Support	56%
Derbyshire Resident (Any of the above)	6	33	CAB and Food Bank	22% 6%
Other –	1	6	Child and Family Health	45%
Total	33		Nutrition and Weaning Advice	34%
Disability declared (0) Type of disability (if declared) (0)			Child Physical Development and Family Fitness	28%
			Smoking and Substance Misuse	6%
			Access to FP and Sexual Health Services	6%
			Support with early education & school readiness	33%

Qualitative comments

- *Loss of breastfeeding support.*
- *I'd have to travel to other sites which would not be possible (not close as this is a rural community and transport links are poor. It would mean that I am not meeting other parents in my accrual community.*
- *I get vitamin drops here as they stopped being available from the local GP surgery.*
- *No more baby group, new mums will be alone, I personally do not have a car so would be unable to get on a bus with two small children to get to another centre.*
- *Lack of support as we wouldn't go to Alfreton.*

DCHS provision, impact and mitigation.

- All health led groups such as well-baby clinic are held at the Glebe centre.

Local Concern.

- Rural village with limited transport links, nearest town to access health support is Belper.
- Risk of social isolation for new mothers.

Heanor				
Parent Respondents			Aggregated Parent's Responses to Specific Service Usage	
Parent/Carer Respondent	Actual	%	Area	Average usage weekly - monthly
Current	16	84	Parenting Support	64%
Previous	10	53	Meeting friends and socialisation	69%
Potential use	6	32	Promoting Health	32%
Staff member or service user	0	0	Breastfeeding Support	26%
Derbyshire Resident (Any of the above)	7	37	CAB and Food Bank	5% 0%
Other –	1	5	Child and Family Health	48%
Total	40		Nutrition and Weaning Advice	43%

Disability declared (0) Type of disability (if declared) (0)	Child Physical Development and Family Fitness	36%
	Smoking and Substance Misuse	5%
	Access to FP and Sexual Health Services	11%
	Support with early education & school readiness	32%

Qualitative comments

- *I would not get to any other centre. Travel fare is too expensive.*
- *My children's centre has been instrumental in keeping me out of depression.*
- *Loss of local support for breastfeeding.*
- *Lack of places to go for advice and support. Lack of places to meet, socialise with other parents, access support groups, bumps and babies etc.*
- *I help out at a centre and I get a sense of achievement. I am always looking for courses they make available to improve myself and my families' life, and these are definitely aren't available anywhere else in the community.*
- *I would be unable to access professional advice and support for my children without going to the GP. I would be unable to carry out volunteering work to build up my skills and experience to help me gain paid work.*
- *My child would lose socialisation and development groups. I have been given help with breastfeeding, nutrition.*
- *Wouldn't be able to attend other locations due to being a single mum of three young children and unable to drive. Distance and school hours for older child means travel is difficult.*

DCHS provision, impact and mitigation.

- Weekly well-baby clinic and breastfeeding support held in children centre, good attendance.

Local Concern.

- If the children centre closed the clinics and groups would have to be re-located to Heanor Health Centre which has poor facilities for running groups.
- Reduced opportunities for integrated working.
- High number of children with delayed language skills.

Langley Mill				
Parent Responses			Aggregated Parent's Responses to Specific Service Usage	
Parent/Carer Respondent	Actual	%	Area	Average usage weekly - monthly
Current	13	81	Parenting Support	63%
Previous	9	56	Meeting friends and socialisation	88%
Potential use	6	38	Promoting Health	51%
Staff member or service user	1	6	Breastfeeding Support	25%
Derbyshire Resident (Any of the above)	8	50	CAB and Food Bank	25% 6%
Other –	1	6	Child and Family Health	63%
Total	38		Nutrition and Weaning Advice	51%
Disability declared (0) Type of disability (if declared) (0)			Child Physical Development and Family Fitness	44%
			Smoking and Substance Misuse	12%
			Access to FP and Sexual Health Services	13%
			Support with early education & school readiness	57%

Qualitative comments

- *I would miss the child health clinics.*

Due to my children being at school, I do not now use the centre, but I would still ring or call in if I needed advice (housing, debt or parenting support).

.DCHS provision, impact and mitigation.

- Weekly well-baby clinic and breastfeeding support held in children centre, good attendance.

Local Concern.

- If the children centre closed the clinics and groups would have to be re-located to Heanor or Ripley making accessing support difficult for some families who rely on public transport.
- Reduced opportunities for integrated working.
- High number of children with delayed language skills.

Ripley				
Parent Respondents			Aggregated Parent's Responses to Specific Service Usage	
Parent/Carer Respondent	Actual	%	Area	Average usage weekly - monthly
Current	21	72	Parenting Support	54%
Previous	14	48	Meeting friends and socialisation	67%
Potential use	8	28	Promoting Health	45%
Staff member or service user	1	3	Breastfeeding Support	54%
Derbyshire Resident (Any of the above)	9	31	CAB and Food Bank	14% 0%
Other –	5	17	Child and Family Health	48%
Total	58		Nutrition and Weaning Advice	45%
Disability declared (0) Type of disability (if declared) (0)			Child Physical Development and Family Fitness	38%
			Smoking and Substance Misuse	3%
			Access to FP and Sexual Health Services	7%
			Support with early education & school readiness	40%

Qualitative comments

- *I would have to travel to other sites, and not meet local parents.*
- *I would not be able to volunteer anymore, I would seriously struggle to access other children's centres and we are a low income family and money does not stretch to an additional £6 a day to access children's centres in other areas.*
- *I am a mum to be with my second child. The breastfeeding groups are the best things i could have used when i had my first child. The people were amazing.*

- *Fine somewhere else for breastfeeding support.*
- *Loss of an important service that helps safeguard children.*

Reduce the ability for mums and children to have a chance to socialise and join in activities that would not be available.

DCHS provision, impact and mitigation.

- Well-baby clinic held in Methodist Church community rooms.
- Reduced opportunities for integrated working.
- High number of children with delayed language skills.

Ironville				
Parent Responses			Aggregated Parent's Responses to Specific Service Usage	
Parent/Carer Respondent	Actual	%	Area	Average usage weekly - monthly
Current	1	100	Parenting Support	100%
Previous			Meeting friends and socialisation	100%
Potential use			Promoting Health	100%
Staff member or service user			Breastfeeding Support	100%
Derbyshire Resident (Any of the above)			CAB and Food Bank	0% 0%
Other –			Child and Family Health	100%
Total	1		Nutrition and Weaning Advice	100%
Disability declared (1) 100% Type of disability (if declared) (0)			Child Physical Development and Family Fitness	100%
			Smoking and Substance Misuse	0%
			Access to FP and Sexual Health Services	100%
			Support with early education & school readiness	100%

Qualitative comments

None available specific to Ironville.

DCHS provision, impact and mitigation.

- Well baby held in Ironville Primary School twice a month.
- Integrated 2 year reviews held at children centre.

Local Concern.

- Very deprived village, poor transport links, families unlikely to travel to neighbouring village and close border with Nottinghamshire.
- Good integrated working and information sharing between health and DCC for vulnerable families in Ironville.
- High levels of language and general developmental delay.
- High levels of poverty and social isolation.

BOLSOVER/NORTH EAST CLUSTER

Arkwright, Bolsover, Blackwell, South Normanton, Stonebroom, Clowne, Cresswell, Shirebrook, Whaley Thorns, North Wingfield, Clay Cross, Tupton, Dronfield, Eckington, Killamarsh.

Arkwright				
Parent Respondents			Aggregated Parent's Responses to Specific Service Usage	
Parent/Carer Respondent	Actual	%	Area	Average usage weekly - monthly
Current	14	74	Parenting Support	64%
Previous	8	42	Meeting friends and socialisation	95%
Potential use	5	26	Promoting Health	62%
Staff member or service user	2	11	Breastfeeding Support	36%
Derbyshire Resident (Any of the above)	9	47	CAB and Food Bank	11% 16%

Other –	2	11	Child and Family Health	74%
Total	40		Nutrition and Weaning Advice	48%
Disability declared (0) Type of disability (if declared) (0)			Child Physical Development and Family Fitness	36%
			Advice on Smoking and Substance misuse	10%
			Access to FP and Sexual Health Services	16%
			Support with early education & school readiness	48%

Qualitative comments

- *Me and my children won't see people on a regular basis. We have made friends there and like to meet up to talk and share stories and problems about our children. I won't be able to ask for advice and probably won't get my baby weighed as much.*
- *It would mean my son missing out on much needed groups to boost his about to mix with other people and have new experiences. There is now only one group a week for us to attend and now that one isn't even being run by the children's centre. Arkwright is a lovely place with fantastic facilities and a great outdoor area and to close this centre seems just completely ridiculous. Where my eldest had a lot of friends before nursery age I feel my youngest will have none as he won't have the chance to mix. He will therefore enter nursery without social skills and will struggle to fit in. The change in a matter of two years is really sad.*

DCHS provision, impact and mitigation.

- Well baby held in Arkwright Children centre once a month which is integrated into a play group for young children and babies.
- In the event of the centre closing, DCHS would seek to re-locate the clinic to a room at the local primary school.

Local Concern.

- Good integrated working and information sharing between health and DCC for vulnerable families in Arkwright.
- High levels of language and general developmental delay.
- Families attend this centre from Bolsover, North East and Chesterfield areas as they bring their children to the local primary school.
- Social isolation for some children and families.

Bolsover				
Parent Respondents			Aggregated Parent's Responses to Specific Service Usage	
Parent/Carer Respondent	Actual	%	Area	Average usage weekly - monthly
Current	13	68	Parenting Support	64%
Previous	9	47	Meeting friends and socialisation	84%
Potential use	4	21	Promoting Health	69%
Staff member or service user	2	11	Breastfeeding Support	42%
Derbyshire Resident (Any of the above)	7	37	CAB and Food Bank	5% 16%
Other –	2	11	Child and Family Health	63%
Total	37		Nutrition and Weaning Advice	48%
Disability declared (0) Type of disability (if declared) (0)			Child Physical Development and Family Fitness	58%
			Smoking and Substance Misuse	10%
			Access to FP and Sexual Health Services	16%
			Support with early education & school readiness	52%

Qualitative comments

- *Me and my youngest child will not be able to socialise locally.*
- *Transport poor between Cresswell Bolsover and Shirebrook and Clowne would take me 30 – 40 minutes with added costs.*
- *My children would miss out I would only be able to go once a week.*
- *Nowhere for children to socialise in a safe and friendly environment.*

DCHS provision, impact and mitigation.

- Weekly baby clinic and breastfeeding support group held in Welbeck Road Health centre with high attendance numbers.

Local Concern.

- Close proximity of health centre and children's centre supports good integrated working and good communication, this would be more difficult if the centre closed.
- Impact on breastfeeding initiation and sustainment.

Blackwell				
Parent Respondents			Aggregated Parent's Responses to Specific Service Usage	
Parent/Carer Respondent	Actual	%	Area	Average usage weekly - monthly
Current	4	50	Parenting Support	76%
Previous	4	50	Meeting friends and socialisation	89%
Potential use	3	38	Promoting Health	64%
Staff member or service user	1	13	Breastfeeding Support	51%
Derbyshire Resident (Any of the above)	3	38	CAB and Food Bank	38%
Other –	0	0	Child and Family Health	64%
Total	15		Nutrition and Weaning Advice	38%
Disability declared (2) 25% Type of disability (if declared) (0)			Child Physical Development and Family Fitness	51%
			Smoking and Substance Misuse	13%
			Access to FP and Sexual Health Services	13%
			Support with early education & school readiness	64%

Qualitative comments

We would struggle as we wouldn't know where else to get help with foodbanks, etc. and citizens advice as in Chesterfield they always send us to a children's centre.

DCHS provision, impact and mitigation.

- Monthly well-baby clinic, numbers attending are very low e.g. 4 babies a month.
- Impact on breastfeeding initiation and sustainment.

- Increase in home visits for health reviews and breastfeeding support.

Local Concern.

- If the children centre closed mothers would have to travel to South Normanton or Tibshelf to access a baby clinic or breastfeeding group.
- Poor transport links, social isolation.

South Normanton				
Parent Respondents			Aggregated Parent's Responses to Specific Service Usage	
Parent/Carer Respondent	Actual	%	Area	Average usage weekly - monthly
Current	24	69	Parenting Support	72%
Previous	19	54	Meeting friends and socialisation	81%
Potential use	12	34	Promoting Health	61%
Staff member or service user	1	3	Breastfeeding Support	58%
Derbyshire Resident (Any of the above)	16	46	CAB and Food Bank	23% 20%
Other –	4	11	Child and Family Health	73%
Total	76		Nutrition and Weaning Advice	37%
Disability declared (2) 6% Type of disability (if declared) A learning disability (1) 3%			Child Physical Development and Family Fitness	38%
			Advice on Smoking and Substance misuse	12%
			Access to FP and Sexual Health Services	12%
			Support with early education & school readiness	43%

Qualitative comments

- *I will no longer be able to access the health visitor clinics or breastfeeding support worker.*
- *If South Normanton were to close I would be affected due to the support they are providing me to help deal with my child's anger issues, without their support I feel it would leave a big hole in an excellent service as I would not know who to turn to get help and support I am receiving.*

DCHS provision, impact and mitigation.

- Weekly well baby clinic and breastfeeding support group held in children centre.
- If the children centre closed the clinic and group would be re-located within the same Hub building to the health Education room.

Local Concern.

- Alternative provision not as inviting or child friendly than those of children centre.
- Impact on integrated working.
- Impact on breastfeeding initiation and sustainment.

Stonebroom				
Parent Respondents			Aggregated Parent's Responses to Specific Service Usage	
Parent/Carer Respondent	Actual	%	Area	Average usage weekly - monthly
Current	8	50	Parenting Support	63%
Previous	10	63	Meeting friends and socialisation	63%
Potential use	2	13	Promoting Health	44%
Staff member or service user	1	6	Breastfeeding Support	44%
Derbyshire Resident (Any of the above)	5	31	CAB and Food Bank	19% 13%
Other –	0	0	Child and Family Health	38%
Total	26		Nutrition and Weaning Advice	37%
Disability declared (2) 13% Type of disability (if declared) (0)			Child Physical Development and Family Fitness	19%
			Advice on Smoking and Substance misuse	12%
			Access to FP and Sexual Health Services	6%
			Support with early education & school readiness	32%

Qualitative comments

- *It would have a negative on my child's development and social skills. It would also affect my social and emotional wellbeing as it helped me greatly with my mental health. The transport links to others not practical and too expensive to use.*

- *Would struggle as we would not know where else to get help to get good banks, and citizen's advice.*
- *It is within walking distance for me and my son, and he loves to meet up with his friends and it is company for me also.*
- *It is the one session per week where I walk 2 miles each way with a friend to get fresh air and exercise. Once at the centre I am able to socialise with others in my situation, discuss their approaches to elements of parenting, it allows my child to interact with others, communicate, and play safely with toys aimed at her target age group. None of this is possible elsewhere.*

DCHS provision, impact and mitigation.

- If the children centre closed mothers would have to travel to South Normanton, Pilsley or Tibshelf to access a baby clinic or breastfeeding group.

Local Concern.

- Poor transport links.
- Social isolation.
- High levels of language delay.

Clowne				
Parent Responses			Aggregated Parent's Responses to Specific Service Usage	
Parent/Carer Respondent	Actual	%	Area	Average usage weekly - monthly
Current	6	50	Parenting Support	66%
Previous	9	75	Meeting friends and socialisation	92%
Potential use	5	42	Promoting Health	49%
Staff member or service user	3	25	Breastfeeding Support	50%
Derbyshire Resident (Any of the above)	4	33	CAB and Food Bank	17% 33%
Other –	2	17	Child and Family Health	58%
Total	29		Nutrition and Weaning Advice	50%
Disability declared (0) Type of disability (if declared) (0)			Child Physical Development and Family Fitness	33%
			Smoking and Substance Misuse	8%
			Access to FP and Sexual Health Services	8%
			Support with early education & school readiness	41%

Qualitative comments

- *CAB have helped me out of a crisis. Without their support I could have been made homeless.*
- *My daughter in law and granddaughter would be affected as this is a regular weekly meeting place for her to meet new mums and friends, also for my granddaughter to be able to mix with other babies and children alike. They have met and made new friends at the Clowne Centre and I believe this will have an impact on all the new families that attend. The mums and babies who attend are also not just from Clowne, but from Barlborough and Mastin Moor, they pass on information to one another.*

DCHS provision, impact and mitigation.

- Well baby clinic and breastfeeding support delivered from Springs Health Centre.

Local Concern.

- Impact on good integrated working.
- High levels of language delay.

Cresswell				
Parent Responses			Aggregated Parent's Responses to Specific Service Usage	
Parent/Carer Respondent	Actual	%	Area	Average usage weekly - monthly
Current	4	80	Parenting Support	60%
Previous	3	60	Meeting friends and socialisation	60%
Potential use	3	60	Promoting Health	80%
Staff member or service user	1	20	Breastfeeding Support	60%
Derbyshire Resident (Any of the above)	1	20	CAB and Food Bank	20% 60%
Other –	0	0	Child and Family Health	60%
Total	12		Nutrition and Weaning Advice	60%
Disability Declared (0) Type of Disability (if declared) (0)			Child Physical Development and Family Fitness	40%
			Smoking and Substance Misuse	20%
			Access to FP and Sexual Health Services	409%
			Support with early education & school readiness	60%

Qualitative comments

- None available specific to Cresswell.

DCHS provision, impact and mitigation.

- Well baby clinic held in children Centre which is well attended due to close proximity of nursery school.
- In the event of closure of children centre, DCHS would look to re-locate the clinic at the local primary school or GP surgery.

Local Concern.

- Social isolation and poor transport links.
- High levels of deprivation and vulnerable families.
- Impact on current good integrated working.
- Impact on breastfeeding initiation and sustainment.

Shirebrook				
Parent Respondents			Aggregated Parent's Responses to Specific Service Usage	
Parent/Carer Respondent	Actual	%	Area	Average usage weekly - monthly
Current	8	67	Parenting Support	67%
Previous	6	50	Meeting friends and socialisation	66%
Potential use	4	33	Promoting Health	58%
Staff member or service user	1	8	Breastfeeding Support	50%
Derbyshire Resident (Any of the above)	5	42	CAB and Food Bank	17% 33%
Other –	1	8	Child and Family Health	76%
Total	25		Nutrition and Weaning Advice	33%
Disability declared (1) 9% Type of disability (if declared) Other (1) 9%			Child Physical Development and Family Fitness	41%
			Advice on Smoking and Substance misuse	16%
			Access to FP and Sexual Health Services	17%
			Support with early education & school readiness	67%

Qualitative comments

- *I will become isolated again, which won't help my family. I look forward to meeting other parents and the additional support from a family support worker who has helped me and my baby.*

- *My child would be affected as she used the children's centre on a Monday to interact with other children and play with them. She also attends on a Tuesday for time for 2's session, to prepare her for nursery and again to play and interact with others. She really enjoys going.*

DCHS provision, impact and mitigation.

- Well baby clinic held in children Centre which is well attended due to close proximity of nursery school.
- In the event of closure of children centre, DCHS would look to re-locate the clinic at Shirebrook Health centre.

Local Concern.

- Social isolation.
- Poor transport links.
- High levels of deprivation and vulnerable families.
- Impact on breastfeeding initiation and sustainment.
- Impact on current good integrated working.
- High levels of language delay in pre-school children.

Whaley Thorns				
Parent Respondents			Aggregated Parent's Responses to Specific Service Usage	
Parent/Carer Respondent	Actual	%	Area	Average usage weekly - monthly
Current	4	67	Parenting Support	67%
Previous	3	50	Meeting friends and socialisation	66%
Potential use	2	33	Promoting Health	50%
Staff member or service user	0	0	Breastfeeding Support	50%
Derbyshire Resident (Any of the above)	2	33	CAB and Food Bank	0% 50%
Other –	0	0	Child and Family Health	67%
Total	11		Nutrition and Weaning Advice	34%

Disability declared (1) 17% Type of disability (if declared) (0)	Child Physical Development and Family Fitness	50%
	Advice on Smoking and Substance misuse	0%
	Access to FP and Sexual Health Services	17%
	Support with early education & school readiness	66%

Qualitative comments

Lack of places to go for advice and support, lack of places to meet, socialise with other parents, access support groups, bumps and babies, baby massage etc.

DCHS provision, impact and mitigation.

- Well baby clinic held twice a month in children Centre which is well attended due to close proximity of nursery school.
- In the event of closure of children centre, DCHS would look to re-locate the clinic at Shirebrook Health centre.

Local Concern

- Social isolation and poor transport links.
- High levels of deprivation and vulnerable families.
- Impact on current good integrated working.
- High levels of language delay in pre-school children.
- Impact on breastfeeding initiation and sustainment.

North Wingfield				
Parent Respondents			Aggregated Parent's Responses to Specific Service Usage	
Parent/Carer Respondent	Actual	%	Area	Average usage weekly - monthly
Current	10	53	Parenting Support	59%
Previous	10	53	Meeting friends and socialisation	74%
Potential use	6	32	Promoting Health	58%
Staff member or service user	2	11	Breastfeeding Support	48%

Derbyshire Resident (Any of the above)	11	58	CAB and Food Bank	32%
Other –	2	11	Child and Family Health	53%
Total	41		Nutrition and Weaning Advice	42%
Disability declared (3) 16% Type of disability (if declared) (0)			Child Physical Development and Family Fitness	26%
			Advice on Smoking and Substance misuse	10%
			Access to FP and Sexual Health Services	5%
			Support with early education & school readiness	48%

Qualitative comments

- *It would be a great loss to the community. Children need to socialise with other children, and families who need support need children's centres to be able to provide the best care for their children.*
- *It would be a major loss, these centres are vital for every parent, I use centres for baby groups to meet other mums and to access health visitor provision for baby weight etc. My son is disabled and has attended baby groups for 3 years this is integral to his development.*
- *As an older mum with a small child I would feel isolated.*
- *No transport, nowhere to go with my children. Wouldn't meet friends, not enough money to get the bus, at the moment I am in walking distance of the local centre. Nowhere to go for help and advice for support when needed the most, it will cause more worry stress and hardship knowing that my children have nowhere safe to play and learn new skills while socialising with other children learning through play ready for school.*

DCHS provision, impact and mitigation.

- Weekly well-baby clinic and breastfeeding support group held in children centre with high attendance numbers.
- In the event of children centre closure the clinic would be re-located in a community venue in North Wingfield.

Local Concern.

- High levels of deprivation and vulnerable families.
- Impact on current good integrated working.
- Impact on breastfeeding initiation and sustainment.
- High levels of language delay in pre-school children.

Clay Cross				
Parent Respondents			Aggregated Parent's Responses to Specific Service Usage	
Parent/Carer Respondent	Actual	%	Area	Average usage weekly - monthly
Current	13	52	Parenting Support	64%
Previous	14	56	Meeting friends and socialisation	64%
Potential use	7	28	Promoting Health	44%
Staff member or service user	2	8	Breastfeeding Support	52%
Derbyshire Resident (Any of the above)	9	36	CAB and Food Bank	28% 20%
Other –	3	12	Child and Family Health	48%
Total	48		Nutrition and Weaning Advice	36%
Disability declared (2) 8% Type of disability (if declared) (0)			Child Physical Development and Family Fitness	32%
			Smoking and Substance Misuse	8%
			Access to FP and Sexual Health Services	8%
			Support with early education & school readiness	44%

Qualitative comments

- *Loss of local support for breastfeeding. Socialisation and parent support.*
- *I will only have my doctor to talk to; the children centre has helped me and still helping me with PND and anxiety, money issues. I need them to talk to otherwise I'll be going 10 steps backwards.*
- *Nothing hardly to do around Clay Cross really, North Wingfield would be a bus ride to get to and with no other form of transport I rely on getting to Clay Cross as I live in Danesmoor. There are a lot of stay at home mums in Clay Cross with under 5's and by not having a centre nearby and what are they to do?*

DCHS provision, impact and mitigation.

- 2 weekly well baby clinic held in Children centre, good attendance numbers.
- In the event of closure the clinic would be relocated to another venue within Clay Cross such as a local church or community hospital but these are not child friendly.

Local Concern.

- *Social isolation.*
- *Lack of pre-school activities in area.*
- *Impact on integrated working.*
- **Impact on breastfeeding initiation and sustainment.**

Tupton				
Parent Respondents			Aggregated Parent's Responses to Specific Service Usage	
Parent/Carer Respondent	Actual	%	Area	Average usage weekly - monthly
Current	6	50	Parenting Support	58%
Previous	7	58	Meeting friends and socialisation	83%
Potential use	2	17	Promoting Health	50%
Staff member or service user	1	8	Breastfeeding Support	58%
Derbyshire Resident (Any of the above)	6	50	CAB and Food Bank	17% 33%
Other –	1	8	Child and Family Health	59%
Total	23		Nutrition and Weaning Advice	58%
Disability declared (1) 8% Type of disability (if declared) (0)			Child Physical Development and Family Fitness	33%
			Advice on Smoking and Substance misuse	8%
			Access to FP and Sexual Health Services	8%
			Support with early education & school readiness	59%

Qualitative comments

None available specific to Tupton.

DCHS provision, impact and mitigation.

- Twice monthly clinic held in children centre.

- In the event of closure families would have to travel to North Wingfield or Grassmoor for nearest clinic.

Local Concern.

- Impact on integrated working.
- Poor transport links between the villages.

Dronfield				
Parent Respondents			Aggregated Parent's Responses to Specific Service Usage	
Parent/Carer Respondent	Actual	%	Area	Average usage weekly - monthly
Current	20	74	Parenting Support	82%
Previous	10	37	Meeting friends and socialisation	81%
Potential use	3	11	Promoting Health	62%
Staff member or service user	1	4	Breastfeeding Support	59%
Derbyshire Resident (Any of the above)	6	22	CAB and Food Bank	19% 11%
Other –	2	7	Child and Family Health	64%
Total	42		Nutrition and Weaning Advice	56%
Disability declared (2) 7% Type of disability (if declared) (1) 4% Learning disability.			Child Physical Development and Family Fitness	33%
			Advice on Smoking and Substance misuse	7%
			Access to FP and Sexual Health Services	7%
			Support with early education & school readiness	34%

Qualitative comments

- *I would have really struggled in the early days without the support of the breastfeeding group and post-natal group. Having a centre within walking distance cannot be overestimated, especially early on. Having had a caesarean I was unable to drive and whilst public transport is available it is not easy to use with a pram and is expensive. I really appreciated being able to get to the centre even when I was struggling to go anywhere else. I currently use the centre twice a week, I would certainly struggle to attend groups elsewhere whilst on maternity leave.*

DCHS provision, impact and mitigation.

- There are 2 baby clinics held in Dronfield, one is in Gladys Buxton CC and the other is held on the west side of the town at Stubley Medical Centre. A postnatal group and breastfeeding support group is also held at the children centre. These clinics/groups have very good attendance and parents often travel from neighbouring villages to access this support. If the children centre was to close DCHS would look to secure accommodation to continue to run the clinics and groups at a community venue in the town or bring the services back to Stubley Medical centre.

Local Concern.

- Dronfield is a large town, if the clinics and groups were held at Stubley this could impact on access for families with no transport to get from one side of the town to the other.
- Social isolation for some families.
- Impact on integrated working between health and children centre staff.
- Impact on breastfeeding initiation and sustainment.

Eckington				
Parent Respondents			Aggregated Parent's Responses to Specific Service Usage	
Parent/Carer Respondent	Actual	%	Area	Average usage weekly - monthly
Current	9	60	Parenting Support	73%
Previous	6	40	Meeting friends and socialisation	60%
Potential use	4	27	Promoting Health	67%
Staff member or service user	3	20	Breastfeeding Support	34%
Derbyshire Resident (Any of the above)	6	40	CAB and Food Bank	40% 20%
Other –	2	13	Child and Family Health	76%
Total	30		Nutrition and Weaning Advice	40%
Disability declared (0)			Child Physical Development and Family Fitness	40%

Type of disability (if declared) (0)	Advice on Smoking and Substance misuse	20%
	Access to FP and Sexual Health Services	14%
	Support with early education & school readiness	54%

Qualitative comments

- *I have used the children's centre to have my baby's weight monitored and be given helpful advice by the health visitor.*
- *There are a lot of extremely helpful staff in Eckington centre who parents feel that they can talk to and ask for help without feeling judged and not looked down upon. Without the support children's language would be encouraged as it should if parents are not able to find the help they need. Health Visitors are rushed and not approachable. Children's Centre staff put themselves in your shoes and make things seem achievable.*
- *My daughter would not be able to go to another nursery close by as they are full.*

DCHS provision, impact and mitigation.

- Weekly well baby clinic and breast feeding support group held in children centre.
- Integrated 2 year reviews held at the children centre.
- If the centre closed these groups would move back to Eckington Health Centre.

Local Concern.

- Impact on integrated working and information sharing.
- Impact on breastfeeding sustainment.
- Reduced support for children with language delay.
- Social isolation for some families.

Killamarsh				
Parent Respondents			Aggregated Parent's Responses to Specific Service Usage	
Parent/Carer Respondent	Actual	%	Area	Average usage weekly - monthly
Current	2	17	Parenting Support	58%
Previous	10	83	Meeting friends and socialisation	41%
Potential use	2	17	Promoting Health	41%
Staff member or service user	3	25	Breastfeeding Support	33%
Derbyshire Resident (Any of the above)	6	50	CAB and Food Bank	42% 17%
Other –	2	17	Child and Family Health	42%
Total	25		Nutrition and Weaning Advice	25%
Disability declared (0) Type of disability (if declared) (0)			Child Physical Development and Family Fitness	25%
			Advice on Smoking and Substance misuse	8%
			Access to FP and Sexual Health Services	8%
			Support with early education & school readiness	49%

Qualitative comments

- *Very badly affected, I do not drive and have two children so getting to another centre would be very difficult. I believe there are many parents in this situation.*
- *It would be a great loss to the community, children need to socialise with other children, and families who need support from children centres to be able to provide the best care for their children.*

DCHS provision, impact and mitigation.

No health led services are held at Killamarsh CC, baby clinics and groups held at the clinic.

Local Concern.

- Reduced support for children with language delay.

Social isolation for some families, deprived community with poor transport links **CHESTERFIELD CLUSTER**
Birdholme, Hasland, Chesterfield, Brampton, Staveley, Brimington, Holme Hall, Old Whittington.

Birdholme				
Parent Respondents			Aggregated Parent's Responses to Specific Service Usage	
Parent/Carer Respondent	Actual	%	Area	Average usage weekly - monthly
Current	5	42	Parenting Support	58%
Previous	7	58	Meeting friends and socialisation	66%
Potential use	5	42	Promoting Health	49%
Staff member or service user	2	17	Breastfeeding Support	50%
Derbyshire Resident (Any of the above)	7	58	CAB and Food Bank	25% 17%
Other –	2	17	Child and Family Health	58%
Total	28		Nutrition and Weaning Advice	41%
Disability declared (0) Type of disability (if declared) (0)			Child Physical Development and Family Fitness	33%
			Smoking and Substance Misuse	16%
			Access to FP and Sexual Health Services	17%
			Support with early education & school readiness	57%

Qualitative comments

- *I would have to attend two separate sessions elsewhere.*

DCHS provision, impact and mitigation.

- Health led well-baby clinics and stay and play session held twice a month.

- Children attend the centre for their healthy child programme reviews with the HV.

Local Concern.

- Parents would be required to travel to next nearest centre to access clinics and group support.
- Impact on integrated working between health and Children centre staff.
- High levels of language delay in this catchment area.

Hasland				
Parent Respondents			Aggregated Parent's Responses to Specific Service Usage	
Parent/Carer Respondent	Actual	%	Area	Average usage weekly - monthly
Current	16	52	Parenting Support	46%
Previous	17	55	Meeting friends and socialisation	64%
Potential use	10	32	Promoting Health	43%
Staff member or service user	3	10	Breastfeeding Support	27%
Derbyshire Resident (Any of the above)	13	42	CAB and Food Bank	16% 13%
Other –	2	7	Child and Family Health	53%
Total	61		Nutrition and Weaning Advice	32%
Disability declared (1) 3% Type of disability (if declared) (0)			Child Physical Development and Family Fitness	26%
			Advice on Smoking and Substance misuse	3%
			Access to FP and Sexual Health Services	6%
			Support with early education & school readiness	46%

Qualitative comments

- It would make taking my daughter to be weighed and to play groups more difficult as I do not drive and getting to other centres in bad weather can be a hassle with a young baby in a pram. It would affect my child's social development and my wellbeing as I wouldn't readily have a place to see people in the same situation as me.*

- *I had just moved to Chesterfield when my son was born. I had no friends or family in the area. I was at risk for postnatal depression. Hasland children's centre provided me with a safe place to take my son and meet new mum's like myself. I made a fantastic group of new friends through a Baby PEEPs course that we attended. We now continue to meet at Stay and Play. Both activities also provide great inspiration for ways to enable my child to develop and grow at home. If the centre were to close, I would be deprived of a fun, educational and safe place to take my son and socialise. Both his development and my health and well-being would be negatively impacted.*

DCHS provision, impact and mitigation.

- Health led well-baby clinics held twice a month with 25 -30 mothers attending each session.

Local Concern.

- Parents would be required to travel to next nearest centre to access clinics and group support which is a bus journey away.
- Impact on breastfeeding sustainment.
- Social isolation.

Chesterfield				
Parent Respondents			Aggregated Parent's Responses to Specific Service Usage	
Parent/Carer Respondent	Actual	%	Area	Average usage weekly - monthly
Current	18	53	Parenting Support	53%
Previous	18	53	Meeting friends and socialisation	75%
Potential use	9	27	Promoting Health	39%
Staff member or service user	1	3	Breastfeeding Support	33%
Derbyshire Resident (Any of the above)	14	41	CAB and Food Bank	12% 12%
Other –	2	6	Child and Family Health	51%
Total	62		Nutrition and Weaning Advice	36%
Disability declared (1) 3%			Child Physical Development and Family Fitness	27%

Type of disability (if declared) (0)	Advice on Smoking and Substance misuse	12%
	Access to FP and Sexual Health Services	9%
	Support with early education & school readiness	42%

Qualitative comments

- *It would be a major loss these centres are vital for every parent I use centres for baby groups to meet other mums and to access health visitor provision for baby weigh etc. my son is disabled and attended baby groups for 3 years this was integral to his.*
- *It would seriously affect me and my child we use Hasland Sure Start regularly for baby weigh in and stay and play and also Queens Park. Through attending these centres my daughter and I have made friends which have prevented us from being isolated.*

DCHS provision, impact and mitigation.

- Health led well baby clinic held weekly, attendance of 25-30 mothers.
- Weekly breastfeeding group.
- In the event of closure of the centre the clinic would have to be re-located to Wheatbridge Health Centre.

Local Concern.

- Impact on breastfeeding sustainment.
- Social isolation and a long way to travel to next centre if not a car user.

Brampton				
Parent Respondents			Aggregated Parent's Responses to Specific Service Usage	
Parent/Carer Respondent	Actual	%	Area	Average usage weekly - monthly
Current	4	29	Parenting Support	42%
Previous	8	57	Meeting friends and socialisation	49%
Potential use	3	21	Promoting Health	35%
Staff member or service user	1	7	Breastfeeding Support	28%
Derbyshire Resident (Any of the above)	5	36	CAB and Food Bank	21% 7%
Other –	2	14	Child and Family Health	42%
Total	23		Nutrition and Weaning Advice	28%
Disability declared (0) Type of disability (if declared) (1) 7% Other.			Child Physical Development and Family Fitness	21%
			Smoking and Substance Misuse	14%
			Access to FP and Sexual Health Services	7%
			Support with early education & school readiness	28%

Qualitative comments

- *It would another support service that is gone, having small children is hard work and lonely. By removing the service you will be potentially cutting people off from the rest of society. The centres that you are keeping open are in difficult to reach places and will only be able to be used by those with cars or that live locally.*
- *We would have to travel to a different centre for weighing/ health visitor clinic which are already busy. We would probably not go to breastfeeding support group as it would be harder to get to and ultimately that would have affected the duration I breastfed my child for.*

DCHS provision, impact and mitigation.

- Health led well-baby clinics held twice a month.
- In the event of closure, the clinic could be re-located to Wheatbridge Health Centre.

Local Concern.

- Parents would be required to travel to next nearest centre to access clinics and group support.

Staveley				
Parent Respondents			Aggregated Parent's Responses to Specific Service Usage	
Parent/Carer Respondent	Actual	%	Area	Average usage weekly - monthly
Current	15	79	Parenting Support	69%
Previous	3	16	Meeting friends and socialisation	69%
Potential use	2	11	Promoting Health	68%
Staff member or service user	2	11	Breastfeeding Support	37%
Derbyshire Resident (Any of the above)	4	21	CAB and Food Bank	21% 26%
Other –	1	5	Child and Family Health	58%
Total	27		Nutrition and Weaning Advice	48%
Disability declared (1) 5% Type of disability (if declared) (0)			Child Physical Development and Family Fitness	43%
			Advice on Smoking and Substance misuse	10%
			Access to FP and Sexual Health Services	16%
			Support with early education & school readiness	64%

Qualitative comments

- *If Staveley were to close, this would have a major impact on mine and Jenson's week as we don't always have a car, plus my husband works away. Sometimes Play & Explore and Little Stars are the only interaction we get with other people. I use Brimington when I have the car and it would be very sad to see the Centre close. Jenson really enjoys Play & Explore there and*

loves the Sensory Room. I have put the answers to Q9 as bus and own car - but the bus would cost a lot of money, and I only have my own car if my husband is home.

- *Lack of travel to the services. Wouldn't leave house as much. Wouldn't meet new families and mums.*

DCHS provision, impact and mitigation.

- Weekly well baby clinic which is well attended.
- Clinic could be re-located to Staveley Clinic on Lime Avenue but space and parking is difficult.

Local Concern.

- High numbers of vulnerable families.
- Impact on breastfeeding sustainment.
- Social isolation.
- Reduce support for children with developmental and language delays.

Brimington				
Parent Respondents			Aggregated Parent's Responses to Specific Service Usage	
Parent/Carer Respondent	Actual	%	Area	Average usage weekly - monthly
Current	39	80	Parenting Support	61%
Previous	12	25	Meeting friends and socialisation	73%
Potential use	8	16	Promoting Health	52%
Staff member or service user	3	6	Breastfeeding Support	28%
Derbyshire Resident (Any of the above)	14	29	CAB and Food Bank	14% 12%
Other –	2	4	Child and Family Health	50%
Total	78		Nutrition and Weaning Advice	32%
Disability declared (1) 2% Type of disability (if declared) (0)			Child Physical Development and Family Fitness	39%
			Advice on Smoking and Substance misuse	4%
			Access to FP and Sexual Health Services	8%
			Support with early education & school readiness	46%

Qualitative comments

- *My child would miss out on our Friday and Wednesday group but we have been lucky to experience these children's centres when he was very young! The groups helped me to leave the house and socialise with other mums, the service helped with my post-natal depression and making friends from these groups also helped with this, I felt supported when I had issues and questions and didn't know where to go for advice. My child got to experience play with other children his age and social and develop I would not have been able to afford the private groups. I feel sad that other parents won't get the support and benefit of these amazing groups and the staff that work for them. It's a travesty that far too many and extremely busy children's centres are closing down more first time mums are going to struggle without the support I had.*
- *It would restrict my daughter's interaction with other children in readiness for nursery as this is where she gets chance to interact most with groups of children. My wife also uses it to get support in feeding and parenting support, not only through the workers but the other parents too.*

- *If Children's Centre will close, my boy won't be able to have a chance to play with other kids what he does every week.*

DCHS provision, impact and mitigation.

- Weekly well baby clinic which is well attended.
- Clinic could be re-located to Brimington Clinic next door but space and parking is difficult and accommodation is not child friendly.

Local Concern.

- High numbers of vulnerable families.
- Impact on breastfeeding sustainment.
- Social isolation.
- Reduce support for children with developmental and language delays.
-

Holme Hall				
Parent Respondents			Aggregated Parent's Responses to Specific Service Usage	
Parent/Carer Respondent	Actual	%	Area	Average usage weekly - monthly
Current	7	88	Parenting Support	63%
Previous	2	25	Meeting friends and socialisation	88%
Potential use	1	13	Promoting Health	38%
Staff member or service user	1	13	Breastfeeding Support	76%
Derbyshire Resident (Any of the above)	4	50	CAB and Food Bank	25% 0
Other –	2	25	Child and Family Health	76%
Total	17		Nutrition and Weaning Advice	38%
Disability declared (0) Type of disability (if declared) (0)			Child Physical Development and Family Fitness	51%
			Advice on Smoking and Substance misuse	0
			Access to FP and Sexual Health Services	13%
			Support with early education & school readiness	25%

Qualitative comments

- I personally would lose the opportunity to connect with other mums and families living in the local area. The children's centre also acts as a gateway to hearing about other groups and events in the local area. It is a lifeline to the local community, especially important when new to the area and when you have no family nearby.*

DCHS provision, impact and mitigation.

- Health led well-baby clinics held twice a month.
- In the event of closure, the clinic would have to be re-located to another community venue or GP surgery in Holmehall.

Local Concern.

- Parents would be required to travel to next nearest centre to access clinics and group support.
- Limited transport links.
- Social isolation.
- Impact on integrated working between professionals.

Old Whittington				
Parent Respondents			Aggregated Parent's Responses to Specific Service Usage	
Parent/Carer Respondent	Actual	%	Area	Average usage weekly - monthly
Current	9	60	Parenting Support	74%
Previous	6	40	Meeting friends and socialisation	87%
Potential use	1	7	Promoting Health	73%
Staff member or service user	2	13	Breastfeeding Support	53%
Derbyshire Resident (Any of the above)	5	33	CAB and Food Bank	27% 20%
Other –	1	7	Child and Family Health	74%
Total	24		Nutrition and Weaning Advice	47%
Disability declared (1) 7%			Child Physical Development and Family Fitness	47%

Type of disability (if declared) (0)	Advice on Smoking and Substance misuse	13%
	Access to FP and Sexual Health Services	14%
	Support with early education & school readiness	66%

Qualitative comments

- *Unable to get my baby weighed. Less socialising. Get out less. Less support and advice.*

DCHS provision, impact and mitigation.

- Health led well-baby clinics held twice a month.
- In the event of closure, the clinic would have to be re-located to the nearest venue at Peter Webster Centre.

Local Concern.

- Parents would be required to travel to next nearest centre to access clinics and group support.
- Limited transport links and social isolation.
- Impact on integrated working between professionals.
- Impact on breastfeeding sustainment.

EREWASH CLUSTER

Cotmanhay, West Hallam, Long Eaton, Sandiacre, Kirk Hallam.

Cotmanhay				
Parent Responses			Aggregated Parent's Responses to Specific Service Usage	
Parent/Carer Respondent	Actual	%	Area	Average usage weekly - monthly
Current	16	70	Parenting Support	70%
Previous	10	44	Meeting friends and socialisation	57%
Potential use	5	22	Promoting Health	38%
Staff member or service user	3	13	Breastfeeding Support	26%
Derbyshire Resident (Any of the above)	7	30	CAB and Food Bank	30% 22%
Other –	0	0	Child and Family Health	48%
Total	41		Nutrition and Weaning Advice	25%
Disability declared (2) 9% Type of disability (if declared) (1) 5%, Disability affecting hearing. (1) 5% Learning disability. (1) 5% Other.			Child Physical Development and Family Fitness	35%
			Smoking and Substance Misuse	4%
			Access to FP and Sexual Health Services	4%
			Support with early education & school readiness	47%

Qualitative comments

- *Wouldn't be able to get my little boy weighed. Wouldn't be able to pop in and ask for advice.*

DCHS provision, impact and mitigation.

- Weekly well baby clinic which is well attended.

- Access to health provision is vital for this village due to high number of vulnerable families, other alternate community venues would be explored in the event of closure of the children centre.

Local Concern.

- Vulnerable families and social isolation.
- Impact on partnership working and integration of services.
- Importance of support for children with language and developmental difficulties.
- Impact on breastfeeding sustainment.

West Hallam				
Parent Respondents			Aggregated Parent's Responses to Specific Service Usage	
Parent/Carer Respondent	Actual	%	Area	Average usage weekly - monthly
Current	4	67	Parenting Support	84%
Previous	3	50	Meeting friends and socialisation	84%
Potential use	1	17	Promoting Health	100%
Staff member or service user	0	0	Breastfeeding Support	50%
Derbyshire Resident (Any of the above)	2	33	CAB and Food Bank	17% 33%
Other –	0	0	Child and Family Health	84%
Total	10		Nutrition and Weaning Advice	34%
Disability declared (1) 17% Type of disability (if declared) (0)			Child Physical Development and Family Fitness	50%
			Advice on Smoking and Substance misuse	0%
			Access to FP and Sexual Health Services	17%
			Support with early education & school readiness	67%

Qualitative comments

- *My child does not get to social as much with other children as we're can't afford to pay for other sessions.*

DCHS provision, impact and mitigation.

- Health led well baby clinics held twice a month.
- Look to retain clinic in local school if centre closed.

Local Concern.

- Cost of transport to next village/town to access clinics and groups.
- Impact on integrated working.
- Impact on breastfeeding sustainment.

Long Eaton				
Parent Respondents			Aggregated Parent's Responses to Specific Service Usage	
Parent/Carer Respondent	Actual	%	Area	Average usage weekly - monthly
Current	6	67	Parenting Support	55%
Previous	4	44	Meeting friends and socialisation	67%
Potential use	3	33	Promoting Health	33%
Staff member or service user	1	11	Breastfeeding Support	55%
Derbyshire Resident (Any of the above)	5	56	CAB and Food Bank	0 0
Other –	3	33	Child and Family Health	33%
Total	22		Nutrition and Weaning Advice	33%
Disability declared (0) Type of disability (if declared) (0)			Child Physical Development and Family Fitness	33%
			Advice on Smoking and Substance misuse	0
			Access to FP and Sexual Health Services	11%
			Support with early education & school readiness	22%

Qualitative comments

- *None available specific to Long Eaton.*

DCHS provision, impact and mitigation.

- Health led well baby clinic held at Long Eaton Health Centre.

Local Concern.

Sandiacre				
Parent Respondents			Aggregated Parent's Responses to Specific Service Usage	
Parent/Carer Respondent	Actual	%	Area	Average usage weekly - monthly
Current	4	67	Parenting Support	67%
Previous	3	50	Meeting friends and socialisation	67%
Potential use	2	33	Promoting Health	50%
Staff member or service user	1	17	Breastfeeding Support	50%
Derbyshire Resident (Any of the above)	2	33	CAB and Food Bank	0% 0%
Other –	2	33	Child and Family Health	50%
Total	14		Nutrition and Weaning Advice	50%
Disability declared (0) Type of disability (if declared) (0)			Child Physical Development and Family Fitness	50%
			Advice on Smoking and Substance misuse	0%
			Access to FP and Sexual Health Services	17%
			Support with early education & school readiness	33%

Qualitative comments

- *None available specific to Sandiacre.*

DCHS provision, impact and mitigation.

- Monthly health led well-baby clinic.
- In the event of closure of the children centre would look to re-locate the clinic in a community room or in the school.

Local Concern.

- Costs for families to travel to next town to access services.
- Impact on integrated working between services.
- Impact on breastfeeding sustainment.

Kirk Hallam				
Parent Respondents			Aggregated Parent's Responses to Specific Service Usage	
Parent/Carer Respondent	Actual	%	Area	Average usage weekly - monthly
Current	24	89	Parenting Support	67%
Previous	9	33	Meeting friends and socialisation	66%
Potential use	5	19	Promoting Health	33%
Staff member or service user	1	4	Breastfeeding Support	19%
Derbyshire Resident (Any of the above)	5	19	CAB and Food Bank	30% 11%
Other –	1	4	Child and Family Health	34%
Total	45		Nutrition and Weaning Advice	30%
Disability declared (2) 7% Type of disability (if declared) (1) 4% Learning disability.			Child Physical Development and Family Fitness	29%
			Advice on Smoking and Substance misuse	4%
			Access to FP and Sexual Health Services	4%
			Support with early education & school readiness	55%

Qualitative comments

- *Would be unable to get to proposed relocation. This would impact my daughter's development.*
- *Nowhere local to go that is easily accessible on foot.*
- *Looking at Ilkeston there are two locations already within the town yet Kirk Hallam (a village two miles away) has been chosen to close. What about people with twins/2 small children in prams who can't access buses?*
- *Children's centre provides a safe place for parents to talk about their worries - information is given in a way that can be understood - peer support with other parents making friend.*

DCHS provision, impact and mitigation.

- Health led well baby clinic held twice a month with attendance of up to 20 each session.
- In the event of children centre closure this clinic would be re-located at the local school or merge with Ilkeston Hospital.
- Transport links are good for families to attend other services such as Charnos Family Centre.

Local Concern

- Impact on integrated working between professionals.

HIGH PEAK/NORTH DERBYSHIRE CLUSTER

Matlock, Wirksworth, Buxton, Bakewell, New Mills, Chapel en le Frith, Gamesley, Glossop, Hadfield, Harpur Hill.

Matlock				
Parent Respondents			Aggregated Parent's Responses to Specific Service Usage	
Parent/Carer Respondent	Actual	%	Area	Average usage weekly - monthly
Current	11	73	Parenting Support	47%
Previous	6	40	Meeting friends and socialisation	67%
Potential use	3	20	Promoting Health	54%
Staff member or service user	3	20	Breastfeeding Support	66%
Derbyshire Resident (Any of the above)	9	60	CAB and Food Bank	20% 7%
Other –	5	33	Child and Family Health	40%
Total	37		Nutrition and Weaning Advice	40%
Disability declared (0) Type of disability (if declared) (0)			Child Physical Development and Family Fitness	34%
			Smoking and Substance Misuse	7%
			Access to FP and Sexual Health Services	7%
			Support with early education & school readiness	33%

Qualitative comments

- *None available specific to Matlock. DCHS provision, impact and mitigation.*
- Bumps and babies group where infants can be weighed and get health advice held at Matlock Children Centre.
- Other clinics held in Matlock at GP surgeries on Imperial Road and Whitworth centre in Darley Dale.

Local Concern.

- Social isolation if families have no transport.
- Impact on integration between professionals.
- Impact on breastfeeding sustainment.
-

Wirksworth				
Parent Respondents			Aggregated Parent's Responses to Specific Service Usage	
Parent/Carer Respondent	Actual	%	Area	Average usage weekly - monthly
Current	11	65	Parenting Support	59%
Previous	7	41	Meeting friends and socialisation	71%
Potential use	3	18	Promoting Health	36%
Staff member or service user	2	12	Breastfeeding Support	59%
Derbyshire Resident (Any of the above)	4	24	CAB and Food Bank	18% 6%
Other –	1	6	Child and Family Health	65%
Total	28		Nutrition and Weaning Advice	42%
Disability declared (0) Type of disability (if declared) (0)			Child Physical Development and Family Fitness	35%
			Smoking and Substance Misuse	12%
			Access to FP and Sexual Health Services	12%
			Support with early education & school readiness	24%

Qualitative comments

- *We have already lost our toy library from the centre as it no longer opens on that day and now we are set to lose stay and play. A service which provides for a families with children of all ages. A lifeline to new mums and 'weathered' mums alike. A channel to make new friends, to get you out of the house, to encourage or children to socialise, to teach healthy eating, all lost. There are no other premises suitable to do all of these things in Wirksworth. So sad.*
- *Reduced opportunity for social input and support with parenting.*
- *I go weekly as a breastfeeding volunteer to help new parents, it's also an putting for my twin girls to meet new people and friends in the area.*

DCHS provision, impact and mitigation.

- Weekly well baby clinic and under 1 year baby club
- Provision would need to be re-located to alternative venue such as Hannage Brook Medical Centre.

Local Concern.

- Social isolation if families have no transport due to rural location.
- Impact on integration between professionals.
- Impact on breastfeeding sustainment.

Buxton				
Parent Respondents			Aggregated Parent's Responses to Specific Service Usage	
Parent/Carer Respondent	Actual	%	Area	Average usage weekly - monthly
Current	8	53	Parenting Support	81%
Previous	7	47	Meeting friends and socialisation	80%
Potential use	4	27	Promoting Health	74%

Staff member or service user	1	7	Breastfeeding Support	60%
Derbyshire Resident (Any of the above)	5	53	CAB and Food Bank	53% 7%
Other –	1	7	Child and Family Health	80%
Total	26		Nutrition and Weaning Advice	67%
Disability declared (1) 7% Type of disability (if declared) (0)			Child Physical Development and Family Fitness	67%
			Smoking and Substance Misuse	20%
			Access to FP and Sexual Health Services	20%
			Support with early education & school readiness	53%

Qualitative comments

- *Longer journeys. Access to the Fairfield centre is difficult for anyone who does not live on the estate and does not have a car.*
- *I suffered from post-natal depression with my first child and became house bound. With my second child I attended the children's centre and made many friends interacted with workers and other parents and it really helped me with my depression. My child has become much more confident and loves attending the centres. I couldn't get to the other centre in my town getting back to pick my oldest child up from school on time. I feel you are making decisions based on paper and figures on not actually.*
- *The children centre should be available to everyone, it's really helped me socialise after having my first child. I feel a lot more confident parent with the help of the children's centre and staff. Also my baby gets to learn new things and meet children that we wouldn't be able to do otherwise. Me and my baby are learning lots from the centre.*

DCHS provision, impact and mitigation.

- Well baby clinic held at Fairfield twice a month.
- Breastfeeding group held in Pavilion gardens.
- Clinic would be re-located to alternative premises in the event of children centre closure.
- Potential impact on good integrated working.

Local Concern.

Bakewell				
Parent Respondents			Aggregated Parent's Responses to Specific Service Usage	
Parent/Carer Respondent	Actual	%	Area	Average usage weekly - monthly
Current	7	78	Parenting Support	88%
Previous	4	44	Meeting friends and socialisation	100%
Potential use	3	33	Promoting Health	66%
Staff member or service user	2	22	Breastfeeding Support	66%
Derbyshire Resident (Any of the above)	7	78	CAB and Food Bank	33% 11%
Other –	1	11	Child and Family Health	66%
Total	24		Nutrition and Weaning Advice	44%
Disability declared (1) 11% Type of disability (if declared) (0)			Child Physical Development and Family Fitness	55%
			Smoking and Substance Misuse	11%
			Access to FP and Sexual Health Services	11%
			Support with early education & school readiness	66%

Qualitative comments

- *It gets me out of the house. My child plays with his friends. I meet other parents. I get help with family issues. It is a life line and has been since my son was born.*
- *No other venue to access support.*

DCHS provision, impact and mitigation.

- Well baby clinic held in children centre which has good attendance.
- Potential impact on integrated working.
- Alternative site of GP practice would be used if clinic had to move.

Local Concern.

- Social isolation.
- Impact on breastfeeding sustainment.

New Mills				
Parent Respondents			Aggregated Parent's Responses to Specific Service Usage	
Parent/Carer Respondent	Actual	%	Area	Average usage weekly - monthly
Current	27	79	Parenting Support	60%
Previous	12	35	Meeting friends and socialisation	80%
Potential use	12	35	Promoting Health	57%
Staff member or service user	2	6	Breastfeeding Support	54%
Derbyshire Resident (Any of the above)	21	62	CAB and Food Bank	21% 15%
Other –	1	3	Child and Family Health	71%
Total	75		Nutrition and Weaning Advice	42%
Disability declared (0) Type of disability (if declared) (1) 3% Disability affecting hearing.			Child Physical Development and Family Fitness	60%
			Advice on Smoking and Substance misuse	9%
			Access to FP and Sexual Health Services	6%
			Support with early education & school readiness	42%

Qualitative comments

- *I would be greatly affected, New Mills children's centre is our local centre, I do not drive and with two young children use this service regularly, for my youngest daughter weighing, for advice from health visitors and also the sessions that ensure my children can socialise with other children. There is not a lot on in new mills for children and the centre is a vital part of the community.*
- *Children at school age now, so writing this on behalf of those without internet access or harder to reach with the consultation. You can't point us towards public transport to the next nearest (from New Mills it lists Buxton and Glossop) with bus subsidies about to be removed. Closing any of the centres removes any potential for early intervention in health or social problems, and restricts opportunities for youngsters to play with others, be creative or simply get out of the house.*

- *All my family live in London - I have no one nearby and very few friends locally. I would be isolated if I wasn't able to bring my son to the Children's Centre. I am unable to drive (my eyesight doesn't meet DVLA's criteria) so I would have to rely on buses to Glossop/Buxton (which are not frequent and expensive). If New Mills is in a high area of need, why close it? My son has FAS and needs the opportunity to interact with peers at an early age.*

DCHS provision, impact and mitigation.

- Monthly well baby clinic held in children centre.
- Monthly breastfeeding support group held at Hayfield school which will continue.
- Potential impact on integrated working.
- Clinic could move to New Mills Health centre if children centre closed.

Local Concern.

- Very rural with poor transport links.
- Limited pre-school provision in New Mills which is a community with a high number of vulnerable children and families.
- Support for children with language delay.

Chapel				
Parent Responses			Aggregated Parent's Responses to Specific Service Usage	
Parent/Carer Respondent	Actual	%	Area	Average usage weekly - monthly
Current	7	54%	Parenting Support	38%
Previous	6	46%	Meeting friends and socialisation	47%
Potential use	5	39%	Promoting Health	54%
Staff member or service user	1	8%	Breastfeeding Support	38%
Derbyshire Resident (Any of the above)	9	69%	CAB and Food Bank	31% 39%
Other –	2	15	Child and Family Health	54%
Total	30		Nutrition and Weaning Advice	23%
Disability declared (0) Type of disability (if declared) (1) 8% Disability affecting hearing.			Child Physical Development and Family Fitness	46%
			Smoking and Substance Misuse	16%
			Access to FP and Sexual Health Services	15%
			Support with early education & school readiness	31%

Qualitative comments

- *Reduced groups to take baby. Important for both of us sensory, weighing clinics and health visitors, socialise with other parents, peer support.*
- *I would use them more at present but some activities we used to access have been cancelled/ moved to a different day due to cuts. My son would have very few opportunities to mix with other children. He is cared for by myself and when I'm working by his grandparents, so does not attend nursery (he is 21 months old). We all take him to sessions at Chapel and New Mills with the express purpose of allowing him to mix with other children.*

DCHS provision, impact and mitigation.

- Monthly well baby clinic held in children centre.
- Potential impact on integrated working.
- Clinic could move to Chapel –en-le Frith Health centre if children centre closed.

Local Concern.

- Very rural with poor transport links.
- Limited pre-school provision in Chapel.
- Support for children with language delay.

Gamesley				
Parent Respondents			Aggregated Parent's Responses to Specific Service Usage	
Parent/Carer Respondent	Actual	%	Area	Average usage weekly - monthly
Current	13	72	Parenting Support	83%
Previous	9	50	Meeting friends and socialisation	78%
Potential use	3	17	Promoting Health	61%
Staff member or service user	0	0	Breastfeeding Support	33%
Derbyshire Resident (Any of the above)	4	22	CAB and Food Bank	11% 17%
Other –	1	6	Child and Family Health	46%
Total	30		Nutrition and Weaning Advice	57%
Disability declared (3) 17% Type of disability (if declared) (0)			Child Physical Development and Family Fitness	46%
			Advice on Smoking and Substance misuse	6%
			Access to FP and Sexual Health Services	11%
			Support with early education & school readiness	56%

Qualitative comments

- *I wouldn't go to the other centres as I would struggle to get there. I would be more isolated and this would affect my mental health and my children would be stuck in the house.*
- *Gamesley is my closest centre I would not be able to attend any other centres as I do not drive and there are no busses that run from Gamesley to Hadfield. I attend weekly baby groups with my 6 month old baby these groups have helped me with weaning baby problems anxiety they have helped me meet new people and to get out of the house to spend time with my baby the workers are outstanding and are there to help with whatever I need.*
- *It would be a huge lost to the community and the whole area. Travelling in and out of our area is difficult. Being at the edge of Derbyshire means we are isolated from many services easily accessible for other areas but we are unable to use Tameside either.*
- *It is a central hub of Gamesley which is high in unemployment and with awful transport links, the people here will be cut off if this much needed centre is closed. How are they expected to get their children to nursery without a decent bus service?"*
- *Gamesley is an area that is in great need of its children's centre. I and many other parents would be lost without it and many are unable to travel to other ones. Gamesley has a great sense of community that involves all of its services and there would be a great community loss of it was to close. It would mean many family's at a disadvantage in an already struggling area.*
- *Socially - friends for both myself and my child will suffer. Support with learning will go, centres help show how to maximise play with children.*
- *Don't close the centre Invest in them - help them provide more services.*
- *Without the help and support of the children's centre I wouldn't have coped. I lost a child and then had a premature baby with the help of the centre I had access to housing help, debt and budgeting advice, the food bank. I was diagnosed with PTSD severe depression and anxiety. The support was invaluable for over a year and I know where I can go if needed. It is a safe and stable place for people to go.*

DCHS provision, impact and mitigation.

- Weekly well attended baby clinic held in children centre.
- Centre used for children to attend their healthy child reviews.
- Potential impact on good integrated working practice between health and CC staff.
- Other premises would be used for delivery of baby clinic as due to geography of area it is too far to expect families to travel.
- Additional home visits would be undertaken to support child health/development and breastfeeding.

Local Concern.

- Isolated community with a high number of vulnerable children and families.
- Social isolation.
- Poor transport links and rurality make it difficult for families to travel beyond Gamesley.

Glossop				
Parent Respondents			Aggregated Parent's Responses to Specific Service Usage	
Parent/Carer Respondent	Actual	%	Area	Average usage weekly - monthly
Current	6	50	Parenting Support	67%
Previous	5	42	Meeting friends and socialisation	75%
Potential use	3	25	Promoting Health	59%
Staff member or service user	1	8	Breastfeeding Support	75%
Derbyshire Resident (Any of the above)	8	67	CAB and Food Bank	17%
Other –	1	8	Child and Family Health	58%
Total	24		Nutrition and Weaning Advice	58%
Disability declared (0)			Child Physical Development and Family Fitness	58%
Type of disability (if declared) (0)			Advice on Smoking and Substance misuse	16%
			Access to FP and Sexual Health Services	17%
			Support with early education & school readiness	49%

Qualitative comments

- *Long walk to another centre as the bus is only every hour Lack of social support for me and my children. Volunteering opportunities limited.*
- *The centre was a lifeline for me. Helped with post-natal depression - something which the doctors & health visitors didn't give me the support I needed.*

DCHS provision, impact and mitigation.

- Weekly well attended baby clinic held in children centre.
- Centre used for children to attend their healthy child reviews.
- Potential impact on good integrated working practice between health and CC staff.
- Other premises would be used for delivery of baby clinic as due to geography of area it is too far to expect families to travel.
- Additional home visits would be undertaken to support child health/development and breastfeeding.

Local Concern.

- Isolated community with a high number of vulnerable children and families.
- Social isolation.
- Poor transport links and rurality make it difficult for families to travel beyond Glossop.
-

Hadfield				
Parent Respondents			Aggregated Parent's Responses to Specific Service Usage	
Parent/Carer Respondent	Actual	%	Area	Average usage weekly - monthly
Current	10	59	Parenting Support	59%
Previous	7	41	Meeting friends and socialisation	65%
Potential use	2	12	Promoting Health	47%
Staff member or service user	1	6	Breastfeeding Support	59%
Derbyshire Resident (Any of the above)	6	35	CAB and Food Bank	24% 18%
Other –	1	6	Child and Family Health	59%
Total	27		Nutrition and Weaning Advice	54%
Disability declared (0) Type of disability (if declared) (0)			Child Physical Development and Family Fitness	48%
			Advice on Smoking and Substance misuse	6%
			Access to FP and Sexual Health Services	6%
			Support with early education & school readiness	36%

Qualitative comments

- *Would have to travel to another less local. Socialising is more difficult as I wouldn't live in the area.*
- *My 16 month does not yet attend nursery. The children's centres are a great place for him to attend, so he can learn to socialise, share, play and do new activities, we wouldn't do at home. We used to attend a group called bubbles and music, however this was stopped due to government cuts. This was great as the children could sing, play with instruments as well as copying the actions to the songs. This was great for communication.*
- *I would lose a source of support in the early days of my baby's life. The children's centre helps me avoid social isolation and the groups provide valuable advice that I would otherwise miss out on, The breastfeeding group has enable me to continue my breastfeeding journey with success.*

DCHS provision, impact and mitigation.

- monthly well baby clinic held in children centre.
- Centre used for children to attend their healthy child reviews.
- Potential impact on good integrated working practice between health and CC staff.
- Other premises would be used for delivery of baby clinic as due to geography of area it is too far to expect families to travel.
- Additional home visits would be undertaken to support child health/development and breastfeeding.
- Impact on breastfeeding sustainment.

Local Concern.

- Isolated community which is rural.
- Social isolation.
- Poor transport links and rurality make it difficult for families to travel beyond Hadfield.

Harpur Hill				
Parent Respondents			Aggregated Parent's Responses to Specific Service Usage	
Parent/Carer Respondent	Actual	%	Area	Average usage weekly - monthly
Current	18	72	Parenting Support	76%
Previous	10	40	Meeting friends and socialisation	88%
Potential use	7	28	Promoting Health	60%
Staff member or service user	2	8	Breastfeeding Support	44%
Derbyshire Resident (Any of the above)	8	32	CAB and Food Bank	36% 8%
Other –	0	0	Child and Family Health	64%
Total	45		Nutrition and Weaning Advice	48%
Disability declared (0) Type of disability (if declared) (0)			Child Physical Development and Family Fitness	60%
			Advice on Smoking and Substance misuse	12%
			Access to FP and Sexual Health Services	16%
			Support with early education & school readiness	56%

Qualitative comments

- I would be more isolated, along with the other people who come to the weekly volunteer led parent and toddler group. My 3 year old daughter wouldn't get to play with others and gets very fed up and misbehaves at home. This would make me feel unhappy and could affect my mental health (having previously suffered post-natal depression).*
- My daughter would be really upset as we use this centre twice a week. We have been coming since she was a baby. (now 2 and a half). The centre has been a life line for us both as we were new to the area and have formed special bonds with other parent and staff.*
- What about the number of people who use the mental health service? This may be the only place they can get/feel comfortable to come to. -How many people use the Citizens Advice Bureau? - How many people need to come to see the health visitor and get their baby weighed. It is expensive to get to Fairfield on the bus and they may not get chance to speak to them if there are too many people there. How many people use the building for contact? It's a friendly environment with lots of toys, ideal for this*

purpose. How often does the school use the sensory room for special needs pupils. The number of pre-school children who need support with speech and language.

DCHS provision, impact and mitigation.

- Monthly well baby clinic held in children centre.
- Centre used for children to attend their healthy child reviews.
- Potential impact on good integrated working practice between health and CC staff.
- Other premises such as the library would be used to accommodate of baby clinic if the centre closed.
- Additional home visits would be undertaken to support child health/development and breastfeeding.

Local Concern.

- Isolated community with a high number of vulnerable children and families.
- Social isolation.
- Poor transport links and rurality make it difficult for families to travel beyond Buxton.

SOUTH DERBYSHIRE CLUSTER

Etwall, Newhall, Coton in the Elms, Woodville

Etwall				
Parent Respondents			Aggregated Parent's Responses to Specific Service Usage	
Parent/Carer Respondent	Actual	%	Area	Average usage weekly - monthly
Current	52	71	Parenting Support	51%
Previous	37	51	Meeting friends and socialisation	66%
Potential use	23	32	Promoting Health	30%
Staff member or service user	2	3	Breastfeeding Support	40%
Derbyshire Resident (Any of the above)	24	33	CAB and Food Bank	7% 0
Other –	2	3	Child and Family Health	60%
Total	140		Nutrition and Weaning Advice	36%
Disability declared (3) 4% Type of disability (if declared) (2) 3% Other.			Child Physical Development and Family Fitness	33%
			Advice on Smoking and Substance misuse	1%
			Access to FP and Sexual Health Services	6%
			Support with early education & school readiness	18%

Qualitative comments

- *My children use the centre twice a week with their nanny for the parent led activity and the childminding group. The next nearest children's centre is a 30 minute drive away (or 2 buses) and that just isn't practical for us to use.*
- *There would be no local centre for me to take my daughter to see the health visitor. Also breastfeeding support is highly important and this would be no longer available. I won't be made to travel an hour round trip for these services.*

- *As I live in Hilton and hasn't got a second car, Etwall has got all the facilities that I need, with good transport link from my village and from slightly further villagers like Repton, Willington and various other villages located in south Derbyshire, closing this would be deviating for so many people and specially new mothers and babies as we get all the guidance from the health visitors.*
- *I don't drive and am on a budget. We use the play groups to bring on the children's social skills. Also as a mother gets me out the house which I think helps any mother with mental wellbeing.*
- *Woodville is not a realistic area in which families with babies will be able to travel. Which would impact general care of children as I'm sure people wouldn't go that far.*
- *It would mean that I would not travel to other children's centres only for clinics. Excess travel expense. Disappointed that there is no local service and advice locally without travelling a great distance. No local support or meeting point for breast feeding support.*
- *Living in Hilton I would need to travel approximately one hour by public transport to Woodville to use the services for my 1 year old and my new born due in September. I would not have as close relationships to other parents as I can foresee many would stop using the services if travel became a factor. As a breastfeeding mother getting support from local parents and healthcare workers is essential.*
- *We will lose playgroup, sensory room, clinic service and social support from our centre bringing up a small child. Our child's development will be affected. Woodville is too far to travel & the journey there is too long on public transport.*
- *I do not drive and don't have access to anywhere else. Etwall Children's centre is invaluable to us on many levels. As a parent I have been given help, support and advice on breastfeeding, behavioural issues and everyday problems. My children consequently have a happy, healthy and confident parent. I have made lifelong friends and the centre provides a safe venue for us to meet. My children were breast fed, the breastfeeding support group had a significant impact on the success of this.*
- *Etwall children's centre was a vital source of support, especially when I first became a mother in May 2013. Being a first time mother and not having many friends with children in the local area, the services run by the centre meant I could meet other new mothers and their babies and become part of a community. I really feel it was a lifeline. The friends I have made I am still in touch with. I attended the breastfeeding club on a weekly basis from when my son was 2 weeks old.*
- *I would be unable to volunteer at the under 5s group I run. My daughter would be unable to participate in groups which aid her development. My daughter and I would have less social interaction with other families.*
- *Increasingly isolated, feel unsupported (HV team difficult to access if not in cc).*

DCHS provision, impact and mitigation.

- Weekly well attended baby clinic held in children centre.
- Centre used for children to attend their healthy child reviews.
- Potential impact on good integrated working practice between health and CC staff.
- Other premises would be used for delivery of baby clinic as due to geography of area it is too far to expect families to travel.
- Additional home visits would be undertaken to support child health/development and breastfeeding.

Local Concern.

- Social isolation.
- Limited early years provision in area.

Newhall				
Parent Respondents			Aggregated Parent's Responses to Specific Service Usage	
Parent/Carer Respondent	Actual	%	Area	Average usage weekly - monthly
Current	19	83	Parenting Support	61%
Previous	8	35	Meeting friends and socialisation	42%
Potential use	5	22	Promoting Health	33%
Staff member or service user	2	9	Breastfeeding Support	34%
Derbyshire Resident (Any of the above)	9	39	CAB and Food Bank	22% 0%
Other –	1	4	Child and Family Health	69%
Total	44		Nutrition and Weaning Advice	22%
Disability declared (0) Type of disability (if declared) (0)			Child Physical Development and Family Fitness	17%
			Advice on Smoking and Substance misuse	0%
			Access to FP and Sexual Health Services	4%
			Support with early education & school readiness	21%

Qualitative comments

- *I would have to get transport with 2 kids up to Gresley and is much easier visiting the children's centre.*
- *The centre has been a real lifeline for me. I have a disabled daughter, I am also caring for my nephews. My daughter has been weighed at least twice a month her whole life, if I had to travel further, to a busier centre this would be a real problem. Woodville is the next nearest centre and it is two bus rides away. Last year when I had a real crisis, I turned up at the centre in tears, somebody saw me immediately and provided me with loads of support and have done since. We use the sensory room.*
- *Newhall have been extremely helpful to me throughout my process of pregnancy/ having my baby. Whether it be to go to for advice (not just the health visitors, all of the staff are trained to give advice) or to get my child out socializing with other children, I can't fault the centre or its services. I am also a childminder and find the groups/ sensory room provided are always educational and fit in around my EYFS plans for the children. Newhall is also down the road from me and easily accessible.*

DCHS provision, impact and mitigation.

- Weekly well attended baby clinic held in children centre.
- Centre used for children to attend their healthy child reviews.
- Potential impact on good integrated working practice between health and CC staff.
- Other premises would be used for delivery of baby clinic as due to geography of area it is too far to expect families to travel Repton.
- Impact on breastfeeding sustainment.
- Additional home visits would be undertaken to support child health/development and breastfeeding.

Local Concern.

- Social isolation.
- Limited early years provision in area.

Coton in the Elms				
Parent Respondents			Aggregated Parent's Responses to Specific Service Usage	
Parent/Carer Respondent	Actual	%	Area	Average usage weekly - monthly
Current	15	83	Parenting Support	78%
Previous	6	33	Meeting friends and socialisation	89%
Potential use	4	22	Promoting Health	40%
Staff member or service user	0	0	Breastfeeding Support	39%
Derbyshire Resident (Any of the above)	6	33	CAB and Food Bank	11% 0%
Other –	1	6	Child and Family Health	39%
Total	32		Nutrition and Weaning Advice	51%
Disability declared (0) Type of disability (if declared) (0)			Child Physical Development and Family Fitness	34%
			Advice on Smoking and Substance misuse	0%
			Access to FP and Sexual Health Services	6%
			Support with early education & school readiness	35%

Qualitative comments

- *It already feels as though there are only just enough children's services in the area, the classes I go to are always full and are very popular if they were condensed into one there wouldn't be enough spaces for everyone to use them and it will be just too far for so many people to get to. Look at other services to reduce.*
- *We would really miss out on the opportunity to get our children to play and meet other children as it is the only free classes in the area, we would miss out on the songs and rhyme time and the messy play. If I had more children I would miss the support of the baby and breast feeding groups and feel much more isolated.*

DCHS provision, impact and mitigation.

- No services delivered by health from this children's centre.

Woodville				
Parent Respondents			Aggregated Parent's Responses to Specific Service Usage	
Parent/Carer Respondent	Actual	%	Area	Average usage weekly - monthly
Current	20	80	Parenting Support	60%
Previous	8	32	Meeting friends and socialisation	84%
Potential use	5	20	Promoting Health	52%
Staff member or service user	2	8	Breastfeeding Support	56%
Derbyshire Resident (Any of the above)	7	28	CAB and Food Bank	16% 0%
Other –	1	4	Child and Family Health	52%
Total	43		Nutrition and Weaning Advice	32%
Disability declared (0) Type of disability (if declared) (0)			Child Physical Development and Family Fitness	28%
			Advice on Smoking and Substance misuse	0%
			Access to FP and Sexual Health Services	4%
			Support with early education & school readiness	32%

Qualitative comments

- *I've just recently moved to the area so don't know anyone. The centre provides me with the opportunity to meet other new mums.*

DCHS provision, impact and mitigation.

- Weekly well attended baby clinic held in children centre.
- Centre used for children to attend their healthy child reviews.
- Potential impact on good integrated working practice between health and CC staff.
- Impact on breastfeeding sustainment.
- Other premises would be used for delivery of baby clinic as due to geography of area it is too far to expect families to travel to Swadlincote.

- Additional home visits would be undertaken to support child health/development and breastfeeding.

Local Concern.

- Social isolation.

High number of vulnerable children and families reside in this reach area.

The Children's Centres are used at least once a week for the following services (top five considered in rank order);

1. To meet friends and socialise.
2. Parenting Support.
3. Early Education/School readiness and Breastfeeding Support.
4. Promoting Health/Child and Family Health Services.
5. Child Physical Development and Family Fitness.

Of the additional services delivered from Children's Centres;

12% used Foodbanks.

23% used the Citizens Advice Bureau.

16% used other services.

How would the respondent be affected if a Children's Centre was to close?

The following key themes in rank order have been highlighted through the consultation;

1. *Transport to another centre is a problem - this has been examined within the Equality Impact Analysis for each individual centre.*
2. *Would miss the support and advice and signposting to other services - this has been considered within the Equality Analysis for each centre and alternative services have been mapped locally.*
3. *Would feel isolated - isolation and socialisation are a theme which has been considered within the health impact analysis.*
4. *No access to information - this has been considered as part of the Equality Analysis for each centre.*
5. *No socialisation - this has been considered as part of the Equality Analysis and alternative local services.*
6. *Lose breastfeeding support - this has been considered as part of the Health Impact Assessment.*

7. *Negative effect on Community - the impact on volunteering has been considered as part of the Equality Analysis.*
8. *Would miss Health Services - this has been considered as part of the Health impact analysis by each individual centre.*
9. *Would lose my volunteering opportunity - this will be considered as part of the Equality Impact Analysis.*
10. *Would lose the use of a sensory room - this needs to be considered as part of the Equality Impact Analysis.*
11. *Some children may not be ready for school - this needs to be part of the Equality Impact Analysis.*

Responses to the consultation feedback with proposed mitigations are contained in detail for each children's centre later in this report. The information is grouped by centres within each locality.

How could you travel to any alternative services?

48% would use their own car.

29% would use a bus.

23% would walk.

5% would use friends transport.

4% would use a taxi.

How much time would you be willing to take to get there?

37% would take up to 10 minutes.

27% would take up to 20 minutes.

13% would take up to half an hour.

Children's Centres and criteria

CHILDREN'S CENTRE	LEVEL OF DEPRIVATION TOP 10%,20% or 30%	MILES TO NEAREST CHILDREN'S CENTRE(DURATION OF JOURNEY BY PUBLIC TRANSPORT IF OVER 20 MINS)	SUITABILITY OF BUILDING(CONDITION OR LOCATION)	THRIVING COMMUNITIES	OTHER SERVICES FOR 0-5s (AS LISTED IN EA)AVAILABLE LOCALLY
Crich	No	Alfreton 5.5 miles Matlock 7 miles	Small site in rural setting but with other amenities available	No	Yes
Belper	No	Heanor 6.4 miles		No	Yes
Ripley	Top 20% and 30%	Ironville 4.3 miles Heanor 4.6 miles Langley Mill 5.8 miles	Limited space	No	Yes
Somercotes	Top 20% and 30%	Alfreton 1.4 miles	Alfreton CC is accessible	No	Yes
Blackwell	No	Alfreton 3.2 miles	Alfreton CC is accessible	No	Yes
Whaley Thorns	No	Shirebrook 2.8 miles Creswell 3.2 miles	Shirebrook CC is accessible	No	Amenities for under 5s in Shirebrook
Arkwright	No	Bolsover Children's Centre	Bolsover CC is accessible	No	Amenities for under 5s in Bolsover
Dronfield	No	Old Whittington 6.9 miles		No	Amenities for under 5s in Dronfield
Clowne	No	Creswell 3.2 miles		No	Yes
Eckington	Top 30%	Old Whittington 4.6 miles Staveley 3.6 miles (25 minute bus journey)	Large multi-use building	No	Yes
Killamarsh	Top 30%	Staveley 5.3 miles(Not close to town	No	Yes

		45 minute bus journey) Shortbrook CC 2.3 miles Kiveton Park CC 2.3 miles	amenities		
South Normanton	20% and 30%	Alfreton CC is 2.4 miles Pinxton Youth Centre/MAT is 1.8 miles	Building difficult to access	No	Yes
Stonebroom	20% and 30%	North Wingfield 4.1 (poor public transport links)	Rural location- poor transport links. Limited space	No	Yes
Clay Cross	30%	North Wingfield CC is 2 miles	Located near local amenities. Limited space	No	Yes
CHILDREN'S CENTRE	LEVEL OF DEPRIVATION TOP 10%,20% or 30%	TRANSPORT LINKS TO NEAREST CENTRE	SUITABILITY OF BUILDING(CONDITION OR LOCATION)	THRIVING COMMUNITIES	OTHER SERVICES FOR 0-5s (as listed in EIA)accessible locally
Tupton	30%	North Wingfield 1.3miles	Near Clay Cross amenities	No	Yes
Brampton	20% and 30%	Holme Hall 1.5 miles Birdholme is 2 miles	Within easy reach of Chesterfield Town Centre	No	Yes
Hasland	20% and 30%	Birdholme is 1 mile	Local amenities. CC not in area of need	No	Yes
Brimington	20% and 30%	Staveley is 2 miles	Multi use site- local amenities	No	Yes
Chesterfield Town Centre	20% and 30%	Birdholme is 2 miles	Town Centre amenities Centre at risk of flooding	No	Yes
West Hallam	20% and 30%	Cotmanhay is 4.5miles Charnos FSC is 3.6		No	Yes

		miles			
Sandiacre	10%,20% and 30%	Move staff to Long Eaton 1 CC	Limited space	No	Yes
Kirk Hallam	20% and 30%	Charnos Family Support Centre is 1.9 miles	Small building	No	Yes
Long Eaton(2)	No	Long Eaton 1 CC	Shared site with Long Eaton 1	No	Yes
New Mills	30%	Buxton 11.4miles Glossop 6.6 miles (Both 30 minutes)	Multi use- local amenities	No	Yes
Chapel- en- le Frith	No			No	Yes
Gamesley	10%,20% and 30%	Hadfield is 1.9 miles Glossop is 1.8 miles	Multi use centre	Yes	Yes
Wirksworth	No	Matlock is 5 miles		No	Yes
Bakewell	No	Matlock is 8 miles		No	Yes
Harpur Hill	No	Fairfield is 3 miles		No	Yes
Coton- in- the -Elms	No	Woodville CC is 6.6 miles		No	Yes
Newhall	20% and 30%	Staff move to Woodville CC	Limited space	No	Yes in Swadlincote
Etwall	No	Woodville CC is 10 miles	Rurality	No	No



Derbyshire County Council

Equality Impact Analysis (Summary)

Children's Centre Review – April 2016

Derbyshire County Council

Equality Analysis



Department	Children's Services
Service Area	Derbyshire Children's Centres
Changes or proposals	Children Centre Review
Chair of Analysis Team	Tracy Marsh
Date of Analysis	April 2016
Version	1

1. Prioritising what is being analysed

a Description of current service arrangements

There are currently 50 Children's Centres in Derbyshire offering a range of services including early education and childcare, health services, parenting and family support.

b Details of proposals or changes

A report was submitted to cabinet on 26th January 2016 seeking approval to proceed with a formal public consultation on the proposals to close 32 Children's Centres in Derbyshire.

The feedback from the consultation is contained within this report. Each analysis considers the impact the potential closure of a centre may have on a protected group and mitigations which may reduce the impact are summarised in a table at the end of this report.

C Rationale for proposed changes

The Children's Centre Review is exploring ways to ensure children continue to be safe, and families with young children receive the support they need to enable them to be healthy and ready to learn.

Due to significant financial pressures placed on the County Council a full review of the children's centre future is being undertaken. With options to make savings whilst developing a clearer, effective Children's Centre model that will maximise the impact on supporting young children and their families to have the best start in life equipping them for future positive outcomes.

The budget reduction of 4.3m is challenging and it was agreed by cabinet on 26th January 2016 to begin the process by examining the location and suitability of Children's Centre buildings to meet the needs of vulnerable young children and their families as defined in the Sure Start Statutory Guidance.

2. The team carrying out the analysis

<i>Name</i>	<i>Area of expertise/ role</i>
Tracy Marsh(Chair)	Lead for Children's Centres
Nusrat Sohail	MAT Manager completing Equality Analysis for Erewash
Liz Morris	MAT Manager completing Equality Analysis for Amber Valley
Dona Womack	MAT Manager completing Equality Analysis for Chesterfield
Debbie Hedley	MAT Manager completing Equality Analysis for High Peak and North Dales
Gareth Lecky	MAT Manager completing Equality Analysis for South Derbyshire
Ann Saunders	MAT Manager completing Equality Analysis for North East and Bolsover
Elaine Reddish	MAT Manager completing Equality Analysis for North East and Bolsover
Joanne Robinson	MAT Manager completing Equality Analysis for North East and Bolsover
Matthew Drew	Assistant Policy and Research Officer- Quality and Performance
Teresa Cresswell	Principal Public Health Manager, Lead for Starting Well and Public Health Nursing
Jane Hicken	Public Health Manager
Mike Davie	Public Health Manager
Mary Hague	Senior Public Health Manager
Jannine McCarthy	Public Health Manager
Victoria Cummins	Public Health Manager

Julie Hirst (CAB)	Senior Public Health Manager
Vanessa Roberts	Healthy Child Programme Lead 0-5 (DCHS)

3. Existing information and consultation based feedback

Sources of data and reason for using

Public Consultation February 2016 to April 2016	Public opinion on proposed changes to determine impact on those using each centre and any potential ways to mitigate impact.
Staff consultation events February 2016 to March 2016	Staff feedback obtained on proposed changes to determine impact on those using the centre and any ways to mitigate the impact.
Derbyshire Management Information	To provide data on monitoring of service users accessing children's centres.
Health Impact Analysis using Public Consultation February 2016 to April 2016	Public opinion obtained on proposed changes to determine the health impact on those using each centre and potential ways to mitigate the impact.
Property Services	Examine suitability of running services (health and safety, location and cost).
Sure Start Statutory Guidance April 2013	Defines the duties on local authorities to deliver an appropriate Children's Centre Service.
Children's Centre Self Evaluation Framework	To identify and include local knowledge, current service provision by centre and local data.
Derbyshire Customer Segmentation Information(sub cluster 303)	To identify geographical areas where residents live who have a family make up which predominantly means they would benefit from a children's centre service (child aged 0-5 living in the property).
IMD Deprivation data(2015)	To identify areas in Derbyshire where there are levels of high deprivation.
1264 Online and paper questionnaire feedback from public consultation	To gain public response to consultation on proposed closures.
Derbyshire Safeguarding Board Protocols and Guidance	To ensure that safeguarding is considered as a priority when evaluating the impact of proposed service changes.
Correspondence from CCG	To highlight concerns on proposed Children's Centre closures as part of consultation.
Correspondence from Citizens Advice Bureau	To highlight concerns on proposed Children's Centre closures as part of consultation.

Correspondence from Unison	To highlight concerns on proposed Children's Centre closures as part of consultation.
Individual letters from parents	To highlight concerns on proposed Children's Centre closures as part of consultation.
Correspondence from High Peak Borough Council	To highlight concerns on proposed Children's Centre closures as part of consultation.
Correspondence from Belper Children's Centre Volunteer Group	To highlight concerns on proposed Children's Centre closures as part of consultation and suggest alternative service delivery.
Proposal from Chesterfield One to One service	To offer support and suggest alternatives to Chesterfield Children's Centre provision.
Feedback from staff meetings	To gain knowledge of workers in local children's centre areas and workforce responses to proposals.

4. Known impact on different protected characteristic groups and any mitigation.

The Statutory Protected groups are as follows;

1. Age, including children and families, older people.
2. Disabled people including mobility, sensory, learning, mental health, HIV, and also include carers and relatives.
3. Race – including all racial groups, including impact, if any, on Gypsies and Travellers.
4. Gender (Sex) including men and women, boys and girls.
5. Gender reassignment – including impact, if any, on transgender people (*Gender reassignment is not a key factor affecting the delivery of the service and is therefore not relevant to the analysis*).
6. Religion and belief including non-belief, including religious minority communities, (*Data relating to communities is not available and is not relevant for the purposes of this analysis*).
7. Sexual orientation- including the impact, if any, on any, lesbian, gay and bisexual people-*(the sexual orientation of parents is not a determining factor in the delivery of children's centre services and is therefore not relevant to this analysis)*
8. Pregnancy and maternity – including new mothers/ parents.

Non-statutory

- Poorer and disadvantaged communities and groups, including people who experience financial exclusion.
- Marriage and civil partnership – also include impacts on lone parents and unmarried couples.
- Rural Communities.
- Impact of Employees of Derbyshire County Council

These are contained within this document by locality.

Protected Groups

1. Age including children and families, older people

- a) From existing data and information – who is likely to be adversely affected, how, and to what degree? Will anyone gain or benefit from the proposals?

Amber Valley

Somercotes Children Centre	<p>There are 854 children under 5 in the area where Somercotes children centre provides services. 71.9% (614) are registered with the centre.</p> <p>Number of children registered by age</p> <table border="1" data-bbox="395 741 983 987"> <tr> <td>Under one year</td><td>77</td></tr> <tr> <td>Under two years</td><td>200</td></tr> <tr> <td>Under three years</td><td>323</td></tr> <tr> <td>Under four years</td><td>469</td></tr> <tr> <td>Under five years</td><td>614</td></tr> </table> <p>The majority of respondents 66% were between the ages of 25-44 years.</p>	Under one year	77	Under two years	200	Under three years	323	Under four years	469	Under five years	614
Under one year	77										
Under two years	200										
Under three years	323										
Under four years	469										
Under five years	614										
Belper Group Under 5 total population 2177 of which 1561 (71.7%) are registered.											
Belper Children Centre	<p>There are 853 children under 5 in the area where Belper children centre provides services. 665 (78%) are registered with the centre.</p> <p>Number of children registered by age</p> <table border="1" data-bbox="429 1431 1021 1677"> <tr> <td>Under one year</td><td>77</td></tr> <tr> <td>Under two years</td><td>92</td></tr> <tr> <td>Under three years</td><td>173</td></tr> <tr> <td>Under four years</td><td>169</td></tr> <tr> <td>Under five years</td><td>154</td></tr> </table> <p>The majority of respondents 38% were between the ages of 25-24 years.</p>	Under one year	77	Under two years	92	Under three years	173	Under four years	169	Under five years	154
Under one year	77										
Under two years	92										
Under three years	173										
Under four years	169										
Under five years	154										
Crich Children Centre	<p>There are 592 children under 5 in the area where Crich children centre provides services. 410 (69.3%) are registered with the centre.</p>										

	Number of children registered by age	
	Under one year	57
	Under two years	62
	Under three years	87
	Under four years	106
	Under five years	98
	The majority of respondents 40% were between the ages of 35-44 years.	
Ripley Children Centre	There are 941 children under 5 in the area where Ripley children centre provides services. 72 (77.3%) are registered with the centre.	
	Number of children registered by age	
	Under one year	34
	Under two years	51
	Under three years	64
	Under four years	77
	Under five years	77
	The majority of respondents 32% were between the ages of 25-24 years.	

Bolsover/North East Derbyshire - Arkwright

There are 274 children under 5 living in the area where Arkwright Children's Centre provides a service. 193 (70.4%) are registered with the Centre.

Number of children registered by age

Under one year	24/50
Under two years	58/92
Under three years	96/151
Under four years	139/212
Under five years	193/274

24 parents commented specifically about Arkwright Children's Centre. Their average age was 31, being aged between 24 and 33.

79% of parents said they were dissatisfied that Arkwright Children's Centre was proposed to close.

Dronfield, Killamarsh, Eckington

Dronfield Group – Under 5 total population 2068 of which 1801 (87%) are registered with the children's centres.

Dronfield Children's Centre

There are 1052 children under 5 in the area where Dronfield children centre provides services. 898 (88%) are registered with the centre.

Number of children registered by age

Under one year	115
Under two years	288
Under three years	470
Under four years	660
Under five years	898

41 parents commented about Dronfield Children's Centre. The average age of parents completing the questionnaire was 33. Respondents were between the ages of 22 and 45.

Eckington Children's Centre

There are 557 children under 5 in the area where Eckington children centre provides services. 458 (82.2%) are registered with the centre.

Number of children registered by age

Under one year	65
Under two years	149
Under three years	241
Under four years	344
Under five years	557

16 parents commented about Eckington Children's Centre. The average age of parents completing the questionnaire was 36. Respondents were between the ages of 27 and 62.

Killamarsh Children Centre

There are 459 children under 5 in the area where Killamarsh children centre provides services. 416 (90.6%) are registered with the

	centre.
	Number of children registered by age
	Under one year 31
	Under two years 110
	Under three years 195
	Under four years 289
	Under five years 459
	12 parents commented about Killamarsh Children's Centre. The average age of parents completing the questionnaire was 37. Respondents were between the ages of 24 and 38.

Whaley Thorns

There are children 307 under 5 in the Whaley Thorns reach area. 86.3% are registered with the Children's Centre.

Number of registered children by age

Under one year 30/66
Under two year 76/127
Under three year 135/193
Under four year 209/253
Under five year 265/307

The average age of respondents completing the questionnaire from Whaley Thorn's Children's Centre was 55. Respondents were between the ages of 28 to 83.

Blackwell, South Normanton, Stonebroom

Families with children aged 0-5 years that access the Children's Centres

Blackwell	Population	Participation	Registered
0			
1	79	70/88.6%	72/91.9%
2	183	127/69.4%	138/75.4%
3	285	181/63.5%	221/77.5%
4	374	253/67.6%	305/81.6%
5	474	336/70.9%	399/84.2%

South Normanton	Population	Participation	Registered
0			
1	162	62/38.3%	74/45.7%
2	329	164/49.8%	216/65.7%
3	501	228/45.5%	345/68.9%
4	665	362/54.4%	517/77.7%
5	829	481/58.0%	657/79.3%

Stonebroom	Population	Participation	Registered
0			
1	98	63/64.3%	82/83.7%
2	204	124/60.8%	164/80.4%
3	332	183/55.1%	266/80.1%
4	468	281/60.0%	382/81.6%
5	603	398/66.0%	507/84.1%

Clowne

There are 1380 children under 5 in the area where Clowne children centre provides services.

80.9% are registered with the centre.

Number of children registered by age (total 1380).

Under one year	34
Under two years	93
Under three years	196
Under four years	303
Under five years	419 (1380)

14 parents responded to the survey specifically about Clowne Children's Centre. Parents were aged between 28 and 51 and their average age was 36. No males responded.

86% of parents were very dissatisfied at the proposed closure of Clowne Children's Centre

Most of the parents said they used the centre every week; the main reason they reported was to see friends and socialise. A third said they attended for child and family health support and support with early education and school readiness, also parenting, health promotion and breastfeeding support. 21% had used foodbanks.

One parents said they could not travel to another centre, and the rest were divided in willing to catch a bus or use their own car. Most said they were willing to travel for 10 minutes to get to another centre.

Clay Cross and Tupton

There are children 569 under 5 in the Clay Cross reach area. 81% are registered with the Children's Centre.

Number of registered children by age

Under one year 85/125
Under two year 190 /231
Under three year 271/345
Under four year 370/467
Under five year 465/569

The average age of respondents completing the questionnaire from Clay Cross Children's Centre was 25-34. Respondents were between the ages of 17 to 64.

There are children 569 under 5 in the Tupton reach area. 81 are registered with the Children's Centre.

Number of registered children by age

Under one year 49/84
Under two year 122/175
Under three year 187/282
Under four year 268/397
Under five year 351/511

The average age of respondents completing the questionnaire from Clay Cross Children's Centre was 25-34. Respondents were between the ages of 17-65+.

Chesterfield

Brampton

There are 639 children under 5 in the reach area of Brampton CC. 539 (84%) are registered at the centre.

Under 1 year	71 / 105
Under 2 years	174 / 227
Under 3 years	290 / 354
Under 4 years	414 / 501
Under 5 years	539 / 639

Brimington

There are 1096 children under 5 in the reach area of Brimington CC. 901 (82%) are registered at the centre.

Under 1 year	126 / 235
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Under 2 years	307 / 417
Under 3 years	480 / 664
Under 4 years	677 / 891
Under 5 years	901 / 1096

Hasland

There are 729 children under 5 in the reach area of Hasland CC. 672 (92%) are registered at the centre.

Under 1 year	84 / 105
Under 2 years	215 / 297
Under 3 years	353 / 441
Under 4 years	503 / 576
Under 5 years	672 / 729

Queen's Park

There are 532 children under 5 in the reach area of Town Centre CC. 458 (86%) are registered at the centre.

Under 1 year	58 / 101
Under 2 years	160 / 208
Under 3 years	253 / 313
Under 4 years	355 / 414
Under 5 years	458 / 532

Erewash

West Hallam Children Centre	<p>There are 959 children under 5 in the area where west Hallam children centre provides services. 79.5% (762) are registered with the centre.</p> <p>Number of children registered by age</p> <table border="1" data-bbox="783 1547 1370 1794"> <tr> <td>Under one year</td><td>122/182</td></tr> <tr> <td>Under two years</td><td>262/369</td></tr> <tr> <td>Under three years</td><td>417/557</td></tr> <tr> <td>Under four years</td><td>592/768</td></tr> <tr> <td>Under five years</td><td>762/959</td></tr> </table> <p>The average age of respondents completing the questionnaire from West Hallam children centre was 23 respondents were between the ages of 29 and 52.</p>	Under one year	122/182	Under two years	262/369	Under three years	417/557	Under four years	592/768	Under five years	762/959
Under one year	122/182										
Under two years	262/369										
Under three years	417/557										
Under four years	592/768										
Under five years	762/959										

Kirk Hallam Group Under 5 total population 2212 of which 1694 (76.6 %) are registered.											
Kirk Hallam Children Centre	<p>There are 975 children under 5 in the area where Kirk Hallam children centre provides services. 80% (780) are registered with the centre.</p> <p>Number of children registered by age</p> <table border="1"> <tr> <td>Under one year</td><td>120/189</td></tr> <tr> <td>Under two years</td><td>284/395</td></tr> <tr> <td>Under three years</td><td>457/574</td></tr> <tr> <td>Under four years</td><td>612/760</td></tr> <tr> <td>Under five years</td><td>780/975</td></tr> </table> <p>The average age of respondents completing the questionnaire from Kirk Hallam Children Centre was 38. Respondents were between the ages of 20 and 58.</p>	Under one year	120/189	Under two years	284/395	Under three years	457/574	Under four years	612/760	Under five years	780/975
Under one year	120/189										
Under two years	284/395										
Under three years	457/574										
Under four years	612/760										
Under five years	780/975										
Sandiacre Children Centre	<p>There are 1237 children under 5 in the area where Sandiacre children centre provides services. 73.9% (914) are registered with the centre.</p> <p>Number of children registered by age</p> <table border="1"> <tr> <td>Under one year</td><td>99/232</td></tr> <tr> <td>Under two years</td><td>275/445</td></tr> <tr> <td>Under three years</td><td>454/733</td></tr> <tr> <td>Under four years</td><td>680/990</td></tr> <tr> <td>Under five years</td><td>914/1237</td></tr> </table> <p>The average age of respondents completing the questionnaire from Sandiacre children centre was 33. Respondents were between the ages of 28 and 61.</p>	Under one year	99/232	Under two years	275/445	Under three years	454/733	Under four years	680/990	Under five years	914/1237
Under one year	99/232										
Under two years	275/445										
Under three years	454/733										
Under four years	680/990										
Under five years	914/1237										
Long Eaton Group Under 5 total population 2151 of which 1570 (73%) are registered.											
Long Eaton 1 Children Centre	There are 942 children under 5 in the area where Long Eaton 1 children										

	<p>centre provides services 74.5% (702) are registered with the centre.</p> <p>Number of children registered by age</p> <table> <tr> <td>Under one year</td><td>85/182</td></tr> <tr> <td>Under two years</td><td>226/385</td></tr> <tr> <td>Under three years</td><td>372/567</td></tr> <tr> <td>Under four years</td><td>540/748</td></tr> <tr> <td>Under five years</td><td>702/942</td></tr> </table> <p>The average age of respondents completing the questionnaire from Long Eaton children centre was 37 respondents were between the ages of 21 and 54.</p>	Under one year	85/182	Under two years	226/385	Under three years	372/567	Under four years	540/748	Under five years	702/942
Under one year	85/182										
Under two years	226/385										
Under three years	372/567										
Under four years	540/748										
Under five years	702/942										
Long Eaton 2 Children Centre	<p>There are 1209 children under 5 in the area where Long Eaton 2 children centre provides services. 71.8% (868) are registered with the centre.</p> <p>Number of children registered by age</p> <table> <tr> <td>Under one year</td><td>109/221</td></tr> <tr> <td>Under two years</td><td>268/463</td></tr> <tr> <td>Under three years</td><td>477/762</td></tr> <tr> <td>Under four years</td><td>682/944</td></tr> <tr> <td>Under five years</td><td>868/1209</td></tr> </table> <p>The average age of respondents completing the questionnaire from Long Eaton children centre was 37 respondents were between the ages of 21 and 54.</p>	Under one year	109/221	Under two years	268/463	Under three years	477/762	Under four years	682/944	Under five years	868/1209
Under one year	109/221										
Under two years	268/463										
Under three years	477/762										
Under four years	682/944										
Under five years	868/1209										

High Peak and North Dales

Bakewell Children's Centre	<p>There are 580 children under 5 in the area where Bakewell Children's Centre provides services. 73.4% (426) are registered with the centre.</p> <p>Number of children registered by age</p> <table> <tr> <td>Under one year</td><td>57/105</td></tr> <tr> <td>Under two years</td><td>139/196</td></tr> </table>	Under one year	57/105	Under two years	139/196
Under one year	57/105				
Under two years	139/196				

	<table><tr><td>Under three years</td><td>220/298</td></tr><tr><td>Under four years</td><td>325/444</td></tr><tr><td>Under five years</td><td>426/580</td></tr></table> <p>The average age of respondents completing the questionnaire from Bakewell Children’s Centre was 41. Respondents were between the ages of 18 and 61.</p>	Under three years	220/298	Under four years	325/444	Under five years	426/580				
Under three years	220/298										
Under four years	325/444										
Under five years	426/580										
Wirksworth Children’s Centre	<p>There are 421 children under 5 in the area where Wirksworth Children’s Centre provides services. 59.4% (250) are registered with the centre.</p> <p>Number of children registered by age</p> <table><tr><td>Under one year</td><td>35/69</td></tr><tr><td>Under two years</td><td>64/145</td></tr><tr><td>Under three years</td><td>119/224</td></tr><tr><td>Under four years</td><td>184/322</td></tr><tr><td>Under five years</td><td>250/421</td></tr></table> <p>The average age of respondents completing the questionnaire from Wirksworth Children Centre was 40. Respondents were between the ages of 25 and 65.</p>	Under one year	35/69	Under two years	64/145	Under three years	119/224	Under four years	184/322	Under five years	250/421
Under one year	35/69										
Under two years	64/145										
Under three years	119/224										
Under four years	184/322										
Under five years	250/421										
Harpur Hill Children’s Centre	<p>There are 742 children under 5 in the area where Harpur Hill Children’s Centre provides services. 85% (631) are registered with the centre.</p> <p>Number of children registered by age</p> <table><tr><td>Under one year</td><td>99/138</td></tr><tr><td>Under two years</td><td>222/274</td></tr><tr><td>Under three years</td><td>335/418</td></tr><tr><td>Under four years</td><td>480/569</td></tr><tr><td>Under five years</td><td>631/742</td></tr></table> <p>The average age of respondents completing the questionnaire from Harpur Hill Children’s Centre was 36.</p>	Under one year	99/138	Under two years	222/274	Under three years	335/418	Under four years	480/569	Under five years	631/742
Under one year	99/138										
Under two years	222/274										
Under three years	335/418										
Under four years	480/569										
Under five years	631/742										

	Respondents were between the ages of 20 and 60.										
High Peak Group - Under 5 total population 1560 of which 1320 (84.6%) are registered.											
New Mills Children's Centre	<p>There are 684 children under 5 in the area where New Mills Children's Centre provides services. 91.8% (628) are registered with the centre.</p> <p>Number of children registered by age</p> <table border="1"> <tr> <td>Under one year</td><td>83/136</td></tr> <tr> <td>Under two years</td><td>210/263</td></tr> <tr> <td>Under three years</td><td>337/396</td></tr> <tr> <td>Under four years</td><td>472/553</td></tr> <tr> <td>Under five years</td><td>628/684</td></tr> </table> <p>The average age of respondents completing the questionnaire from New Mills Children's Centre was 37 respondents were between the ages of 18 and 68.</p>	Under one year	83/136	Under two years	210/263	Under three years	337/396	Under four years	472/553	Under five years	628/684
Under one year	83/136										
Under two years	210/263										
Under three years	337/396										
Under four years	472/553										
Under five years	628/684										
Chapel Children's Centre	<p>There are 876 children under 5 in the area where Chapel Children's Centre provides services. 79% (692) are registered with the centre.</p> <p>Number of children registered by age</p> <table border="1"> <tr> <td>Under one year</td><td>67/149</td></tr> <tr> <td>Under two years</td><td>196/311</td></tr> <tr> <td>Under three years</td><td>350/477</td></tr> <tr> <td>Under four years</td><td>515/687</td></tr> <tr> <td>Under five years</td><td>692/876</td></tr> </table> <p>The average age of respondents completing the questionnaire from Chapel Children's Centre was 40 respondents were between the ages of 18 and 68.</p>	Under one year	67/149	Under two years	196/311	Under three years	350/477	Under four years	515/687	Under five years	692/876
Under one year	67/149										
Under two years	196/311										
Under three years	350/477										
Under four years	515/687										
Under five years	692/876										
Gamesley Children's Centre	<p>There are 286 children under 5 in the area where Gamesley Children's Centre provides services. 77.6% (222) are registered with the centre.</p>										

	Number of children registered by age	
	Under one year	24/39
	Under two years	66/89
	Under three years	112/147
	Under four years	168/222
	Under five years	222/286
The average age of respondents completing the questionnaire from Gamesley Children's Centre was 37 respondents were between the ages of 20 and 74.		

South Derbyshire and South Dales (SDSD)

Newhall Children's Centre.	There are 761 children under 5 in the area where Newhall Children Centre provides services. 543 (71.4%) are registered with the centre.	
	Number of children registered by age	
	Under one year	73 (57.0%)
	Under two years	174 (61.1%)
	Under three years	271 (61.3%)
	Under four years	397 (67.4%)
	Under five years	543 (71.4%)

Coton in the Elms Children's Centre.	There are 244 children under 5 in the area where Coton in the Elms Children Centre provides services. 237 (97.1%) are registered with the centre.		
	Number of children registered by age		
	Under one year	28 (56%)	
	Under two years	67 (74.4%)	
	Under three years	110 (80.3%)	
	Under four years	163 (83.2%)	
	Under five years	237 (97.1%)	
<u>Etwall Children's Centre</u>			
		population	registered
	Under 1	395	157
Total under 5 population is 2099 of which 1334 (63%) are registered.			%
			39.7

	Under 2	759	413	54.4
	Under 3	1194	694	58.1
	Under 4	1647	1018	61.8
	Under 5	2099	1370	65.3

- b) From existing customer and other feedback including consultation feedback—who is likely to be adversely affected, how and to what degree? Will anyone gain or benefit?

Amber Valley

Somercotes Children Centre	<ul style="list-style-type: none"> • Children getting ready for school –fewer opportunities re development and socialisation. • Children that are intending to attend a school not deemed to be Good at Ofsted. • Parents who walk to a centre.
Belper Children Centre	<ul style="list-style-type: none"> • New parents isolated with young babies. • Parents and children with poor emotional health. • Children requiring opportunities for socialisation. • Children with disabilities. (Specialist group at centre). • Those not deemed “deprived” but requiring a service. • Grandparents with mobility issues or who do not have independent transport. “It has stimulated my grandchildren.” • Volunteers for support for their development and providing services. • Respondents stated that Belper residents would not travel to Heanor. • Concern was raised that data around centre attendance and families with high need was not being referred to in the consultation.
Crich Children Centre	<ul style="list-style-type: none"> • Local families not being able to access support from a local children centre due to the rurality of area and isolation. • Families with low income and no independent transport. • Families with poor parental mental health and those requiring breastfeeding support in the area. Vulnerable children’s development and

	socialisation.
Ripley Children Centre	<ul style="list-style-type: none"> • New parents and young babies. • Children with disabilities. • Vulnerable children acquiring social skills. • Parents who feel isolated. • Parents and children with emotional health needs. • Parents unable to afford travel costs to other areas to access services. • Children accessing learning and development opportunities. • Breastfeeding parents and children.

Bolsover/North East Derbyshire – Arkwright

Some of the comments from parents responding specifically about Arkwright Children's Centre:

People use different Children's Centres different weeks. I personally use three of the ones that are closing and one that is staying open as they all do different things that the children enjoy. Closing the busier ones is going to make the ones that are staying busier, therefore the risk of children missing out as they won't be big enough to accommodate larger numbers of children.

I don't think any should close. I am not deprived but live in a deprived area where the children's centre is staying open. I go to here to talk to other mums and get advice. Other baby groups are activity based and don't have time to talk. With low maternity money, it is hard to afford any baby groups at all. They develop community spirit. They link children who may go to the same school together. They provide a Base for child contact where social workers can attend too. They ensure all children get social skills and some musical interaction even from the poorest families. They are brilliant!

The centre is situated on the Arkwright school site, if this centre is closed DCC will still have to maintain the building, they can't exactly sell it off. There are other children's centres within the area which are leased buildings and are not due to be closed.

I won't be able to go to a baby group as Bolsover one is the wrong time of day for me.

My child is now at school f/t but I am looking at having further children in the future and would greatly miss having access to that local support. The benefit of the centres is they attract a mixed group of families from all different backgrounds meaning no-one feels stigmatised when accessing support for breast feeding or postnatal depression etc.

I wouldn't be able to bring my children to play groups/Health Visitors as the times at the other local Centres aren't suitable. I feel this would affect their learning / social skills as well as a chance for me to socialise.

Me and my children won't see people on a regular basis. We have made friends there and like to meet up to talk and share stories and problems about our children. I won't be able to ask for advice and probably won't get my baby weighed as much.

I use both Bolsover and Arkwright - both are really different and already really busy all the time - if some were to close resources would surely hit breaking point and service would lose quality.

If have to close centre then keep staff so group can still happen somewhere else close by.

The majority of parents said they would use their own car to get to other centres. 8 said they would travel by bus. The majority of parents said they would be willing to travel for 10 minutes to get to the other centres.

Dronfield, Killamarsh, Eckington

Of the 41 parents (majority female) who commented specifically about Dronfield Children's Centre, 88% were dissatisfied that the centre was proposed to be closed.

Nearly half of the parents said they had used the centre once a week for parenting support. Parents also said they used the centre mostly for breastfeeding support and meeting friends and socialising.

Of the 16 parents (majority female) who commented specifically about Eckington Children's Centre, 63% were dissatisfied that the centre was proposed to be closed.

Over half of the parents said they had used the centre a few times a week mainly for early education and school readiness support and also parenting support and meeting friends and socialising. 7 also reported using the CAB there.

Of the 12 parents (majority female) who commented specifically about Killamarsh Children's Centre, 75% were dissatisfied that the centre was proposed to be closed.

Two thirds of the parents said they had used the centre once a week for early education and school readiness support and parenting support. Parents also said they used the centre mostly for meeting friends and socialising, health promotion and breastfeeding.

Some of the comments are as follows applicable to the Dronfield grouping:

I can see no good reason to close all the Children's Centres in the north of N E Derbyshire. The alternatives suggested are Staveley a good 30 minute bus ride or Old Whittington almost an hour by bus from Killamarsh. Neither of these are appropriate for taking a small child with or without a pushchair. Has this process considered how any changes to the bus service might affect it, Stagecoach has recently cut the service 50.

Many families in need would not be able to get to Staveley easily. Renishaw also use this centre (high level of need.) Buses are expensive and few. Families may also have another child in school and be time tied. They may not seek support when they need it resulting in serious issues. Dronfield closure is understandable but there are still some families in need of help. Killamarsh is also to close. Again public transport is poor and expensive for families with little income, small children and buggies to transport. Eckington is central to this area and closure should be reconsidered.

I am unlikely to travel to Staveley for services and certainly not Old Whittington. The Centres in Killamarsh, Eckington & to a lesser extent Dronfield have other facilities nearby so you can do your shopping at the same time. You are unlikely to want or be able to manage with a pushchair, child & shopping on a bus.

I would struggle to access a centre further away with two young children which would leave me feeling alone and unsupported.

Whaley Thorns

Poor transport links and associated travelling costs may result in families not readily participating and engaging in children's centre services on a regular if at all basis, which may impact on school readiness and children's development.

Accessibility and public transport between villages is difficult due to the rurality of the area and pending cuts to transport, as this budget is currently under review.

Increased social isolation of families, opportunities to meet in a social grouping, form new friendships and create local support networks.

Job losses.

Families will have a lack of local places to go for advice and support.

Vulnerable families will not have an accessible, local support group to meet their needs from specialist services more centrally located in main towns.

Other services will lose a local venue and link to the community with nowhere to offer a service from for example access to a specialist support group, child health

clinic which in turn would result in no suitable premises to carry out children's health reviews.

Support for pregnant mothers – ante natal care.

Breastfeeding support.

Increased pressure on other services/professionals for example health, education and social care. Nowhere to signpost onto.

Support with money/debt problems and access to CAB's.

Impact on those with parental mental health.

Low income/unemployed families unable to pay for services and changes in benefits re universal credits.

Children with poor speech and language skills.

69% of those consulted are very dissatisfied with potential closure.

Blackwell, South Normanton, Stonebroom

Blackwell

46 responded to the consultation questionnaire.

Respondent category	Number	Percentage %
No reply	0	0
A parent/carer currently using a children's centre	7	64
A parent/carer who has recently used a children's centre	5	46
A parent/carer who might use a children's centre in the future	4	36
A member of staff working in a children's centre which is proposed to close	-	-
A member of staff working in a children's centre that is proposed to remain open	-	-
A member of staff working in a multi-agency team	1	9
A Derbyshire resident	3	27
Other	-	-

Comments received during consultation process:-

'Needs of the area. If transport links are poor families rely on the centre. Equally those that are at risk are unable to pay for public transport'.

'I am a CAB advisor. We refer clients to these centres. They provide invaluable support to our vulnerable clients'.

I don't think any should close. I am not deprived but live in a deprived area where the children's centre is staying open. I go to here to talk to other mums and get advice. Other baby groups are activity based and don't have time to talk. With low maternity money, it is hard to afford any baby groups at all.

They develop community spirit. They link children who may go to the same school together. They provide a Base for child contact where social workers can attend too. They ensure all children get social skills and some musical interaction even from the poorest families. They are brilliant!

How much it costs to uses buses to get from place to place. Do you know how much a bus is!

How will we get to a centre buses etc?

I would have to travel on 2 buses to reach Alfreton as bus in my area is not very good.

South Normanton

Respondent	Number	percentage
A parent/carers currently using a children's centre	35	75
A parent/carers who has previously used a children's centre	23	49
A parent/carers who may use a children's centre in the future	15	32
A member of staff working in a children's centre which is proposed to be closed	2	4
A member of staff working in a children's centre which is proposed to remain open (1)	1	2
A member of staff working within a Multi-Agency Team (1)	1	2
A Derbyshire Resident (20	20	43
Other	4	9

Other

Children's services worker.

Support Worker.

volunteer at children's centre which is proposed to be closed.

previous children's centre worker due to close.

Comments' from respondents.

South Normanton to not is in the Bolsover area, and already on the outskirts of any support structure.

Most sites are miles away in Bolsover. Leisure centres and events are always outside the village.

Having the children centre in the village helps access, when without a car.

If Other, please specify:

Breastfeeding support and health visitor.

HV clinics.

Breastfeeding support.

Parent and toddler groups Toy library Baby clinic.

Health and baby clinic.

community outreach support.

Q. If the children's centre that you use closes, how would you be affected?

Be very upset has I like coming to playgroup has it got me and my lad out of house for bit it get him

(My son) use other kids I can have some adult conversation.

My son would no longer be able to access the children's groups that are run at the centre being he

Would no longer be able to engage in play outside of the home or socialise.

wouldn't have access to toddler groups for my 2 children and I wouldn't have chance to socialise with my children in a safe environment.

As a professional this would greatly affect the families that we support.

I would lose my job and o can't imagine what would happen to the families that are unable to access these. It would be dark times for DCC.

If South Normanton were to close I would be affected due to the support they are providing me to help deal with my child's anger issues without their support I feel it would leave a big hole in an excellent service as I wouldn't know who to turn to do to get the help and support I am receiving

It would be a great loss to the community. Children need to socialise with other children, and families who need support need children's centres to be able to provide the best care for their children I would struggle to get the advice I needed face to face with someone at a time and at a place convenient to me.

Due to me having no transport, I wouldn't be able to access the Alfreton centre of my local South Normanton centre was to close (also Alfreton centre is a very small and run down centre which I have been to once before). I also couldn't catch the bus with multiple children (trying to breastfeed and nearly every time I have caught a bus the pram space is taken up on these buses). If my local centre closes then I won't go to one basically meaning I will receive no support, help or socialising for both myself and my children, increasing my risk of developing postnatal depression again.

I personally would lose the opportunity to connect with other mums and families living in the local area. The children's centre also acts as a gateway to hearing about other groups and events in the local area. It is a lifeline to the local community, especially important when new to the area and when you have no family nearby.

Affect me greatly I have used all the support groups offered to me at this centre and still attend some that apply from baby massage group, to weigh in clinics, first time parent support, toddler time group, breastfeeding support group and even help from courses offered. I wouldn't be willing to travel or pay to travel with a small child for support from another centre. I feel that all parents are entitled to local support in their community with regular health visitors and people you know and trust. I especially wouldn't be willingly to travel if I had a newborn. Therefore I would miss out on the vital support I gained from attending my local South Normanton children's centre. The centre is a purpose built centre that offer me great facilities in which I can access at ease.

Myself and my child have received great support and friendships from the centre with local people that we will know throughout my child's development.

We would struggle as we wouldn't know where else to get help with food banks, etc. and citizens advice is in Chesterfield and they always send us to a children's centre.

I will no longer be able to access the health visitor clinics or breastfeeding support worker.

I would no longer be able to meet with local mums on a regular basis. The groups at South Normanton children's centre have been a massive help in getting me out of the house with my two small children when I have been suffering with severe depression and anxiety. It is one of the few places I have felt safe and comfortable attending.

Local children's groups won't run, no clinic to keep an eye on my child's weight or any advice about children development etc.

I would be left without a vital support network and access to help. Without it I would be left without a place to go for advice.

I know a large number of families that without the support would have struggled. I ran a first time parents group of which we had an average of 15 parents attending weekly.

The Children's centre has offered me invaluable support when my daughter was born. They supported me with my confidence as a first time parent and also with breastfeeding. I and my daughter have made friends we otherwise would not have met who have also been a great support to us. Now I am expecting my second child I am worried that the support I received with my first will no longer be in place, I will have no reason to leave the house, this concerns me greatly as a mum who has suffered with PND.

I would have no accessible free toddler groups.

When you have a new born baby travelling to the next town is simply not an option, it is hard enough to get out of the house to the local centre. Travelling further would not be an option.

Support and learning opportunities for me and my family will be gone. There would be nobody to go to for support when things get difficult.

I wouldn't be able to go to any others.

I use the children centre to get my baby weighed and for her to have monthly check ups on her head measurements. I don't drive and I have another 4 children so it's hard to travel out of South Normanton.

I would have to travel on 2 buses to reach alfreton as bus in my area are not very good.

Lack of access to other sites as not always with a car, and no funds to pay for taxis and buses for 4 people (3 children).

Miss going to groups and getting support and advice when needed.

I take my child to the parenting group weekly. This is great for getting out, meeting people, finding out about other local resources, monitoring her development and giving her opportunity for play with other children's and toys.

As a council this would present serious problems primarily for those with the greatest needs and are vulnerable. Please note I am not a user however as a Cllr I have responsibilities particularly where it effects health and well-being.

(Breastfeeding support)

No reply (0)

Every Week day (2)

A few times a week (2)
 0% Once a week (14)
 Once a fort-night (3)
 Once a month (1)
 Never (14)
 Other (2) 4%
 30%
 2%
 6%
 19%
 4%
 4%
 3

Stonebroom

78 people completed the consultation questionnaire for Stonebroom Children's centre.

30% of respondents used the centre every day for parenting support with a further 10% of respondents used the centre a few times a week.

For child & family health services 29% accessed support at least weekly.

Risk of isolation due to building good relationships with other parents and carers after taking a lot of courage to attend the group initially. Less opportunity for my daughter to interact with other children her age and be ready for Nursery through the activities that they do at the Children's Centre.

Personally I would not be affected that much, as my children are now 9 and 12. However I see the support it gives to many in the community and I know that many parents who do not drive will not want to take multiple babies/ toddlers on a public bus to North Wingfield. Therefore these families will drop out of the support system available to them. As a parent governor at Stonebroom primary I also see the mutually beneficial support the school and centre give each other, especially concerning Vulnerable families. It will be a tragedy if this is lost.

There will be significant impact on the services that support the families in the Stonebroom reach area. The Children's Centre is used by a variety of professionals that provide their support in times of crisis. Children witnessing and men/women who are victims of domestic violence use the centre to access women's aid services as a discreet and confidential environment. There are no other apparent venues in the close locality that could serve the same purpose. This is also the case for supporting young people who are in the youth justice system as a venue to meet their workers. MAT Personal Advisors regularly see young people in the centre to provide support to help them into employment, education or training.

Quotes from consultation from professionals using the centre:-

'The vital role that the centres play in supporting families and facilitating access to other services. As a service we offer regular drop in sessions and often meet clients at children's centres. For some clients this is the only opportunity they get to see workers away from the perpetrator'.

'I don't think that all the deprived areas have been considered. Stonebroom itself may not be a high area of social deprivation but within the catchment area for the children's centre there are pockets of extreme deprivation which will become worse and have more need for social care if early intervention is not available as currently through children's centres.

Poor transport links, associated travelling times and cost of public transport with affect their participation and engagement in services. The current transport review could have a negative impact on the more needy families living in isolation in villages such as Mickley and Shirland. The cost of transport will be prohibitive in accessing social integration.

Child health clinics are ran from the centre twice a month, and is a distribution centre for vitamins and health start vouchers.

Clowne

Some parent responses:

I don't think any should close. I am not deprived but live in a deprived area where the children's centre is staying open. I go to here to talk to other mums and get advice. Other baby groups are activity based and don't have time to talk. With low maternity money, it is hard to afford any baby groups at all. They develop community spirit. They link children who may go to the same school together. They provide a Base for child contact where social workers can attend too. They ensure all children get social skills and some musical interaction even from the poorest families. They are brilliant!

As the transport like are poor between Creswell, Bolsover, Shirebrook and Clownes it would take me 30 to 40 minutes to get to the next centre with the added cost and my children would miss out on all the child centred activities the do and would only be able to go once a week.

My daughter in law and granddaughter would be affected as this is a regular weekly meeting place for her to meet new mums and friends, also for my granddaughter to be able to mix with other babies and children alike. They have met and made new friends at the Clowne Centre and I believe this will have an impact on all the new families that attend. The mums and babies who attend are also not just from Clowne, but from Barlborough and Mastin Moor, they pass on information to one another about caring for their children and it also helps the babies to interact with each other. What are new mums as my daughter in law supposed to do when this closes as they have no support. They feel quite strongly about this and have started a petition.

Clay Cross and Tupton

Respondents stated:

Some areas are more isolated and mothers with post-natal depression would be less likely to travel.

Families on low incomes, the unemployed and those on maternity benefits.

Parents with poor mental health

Support for pregnant mothers – ante natal care.

New parents

Breastfeeding support.

Victims of Domestic Violence.

Families experiencing financial difficulties.

Families with disabilities.

Families will have a lack of local places to go for local advice and support.

Increased pressure on other services/professionals for example health, education and social care. Nowhere to signpost onto.

Children being less ready for nursery/school.

78% of respondents were very dissatisfied that the Clay Cross centre would close.

76% of respondents were very dissatisfied that the Tupton centre would close.

Chesterfield

Brampton

A loss to the community

Children need to socialise

Families need support to care for their children

Isolation of new parents

Baby weighing and health visitor services

Social activities for parents and babies

No gains identified

Brimington

Access to baby weighing sessions

Opportunities for children to socialise and prepare for nursery

This is a busy and popular centre

Time and cost of travel to other centres

Preventing parental isolation

Develop community spirit

Children accessing contact with parents

Access to the sensory room

No gains identified

Hasland

Social time for parents and babies
Health visitor and baby weighing
Breast feeding support
Support for children with additional needs
Free groups
Twins group

It was identified that most families accessing the service were not a targeted group

Queen's Park

Baby weighing
Activities
Cost and difficulty of transport to other centres
A busy and popular centre
Impact on other centres becoming too busy
Risk to vulnerable mothers
Long term impact of loss of early years support
Access to the sensory room and soft play area

No gains identified.

High Peak and North Dales

Bakewell Children's Centre	Breast feeding mothers. Parents who are at risk of rural isolation. Parents not able to access Matlock Children's Centre easily or can afford the extra cost. Providing an experience that some parents cannot afford e.g. new toys and messy play. Speech and language input. Too difficult for parents to access other centres when not able to drive. No direct bus service. Other professionals and staff. Expectant Mothers. People suffering Domestic Abuse, Drugs and Alcohol misuse, and/or Low Mood. Children/parents requiring socialisation opportunities. Staff at risk of losing jobs therefore affecting other family members. Knock on effect for other services using the centre i.e. CAB
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	<p>Parents not able to access face to face advice locally.</p> <p>Schools wanting children ready to learn will not have this as they will not have attended children centre groups.</p> <p>The centre provides a good start in life for vulnerable young children.</p> <p>Families in this rural area would prefer centres located in market towns central so easily accessible.</p> <p>As a professional this would greatly affect the support we can offer the families we are working with.</p> <p>It will cut off a massive support to the community if centres were to close.</p> <p>As a professional I regular refer to the children's centres, some of the proposed closures are in deprived areas, these service users find the centres invaluable so would impact on the client group I work with.</p> <p>Where will parents get the vitamin drops at the reduced cost?</p> <p>Apart from, being at risk of job losses I feel the parents that come for our support that don't necessarily met the child threshold as you are cutting off the early intervention that makes a difference.</p> <p>Being able to identify parents and child's needs early.</p> <p>76% of respondents are fairly /very dissatisfied with proposed closure.</p>
Wirksworth Children's Centre	<p>Children/parents requiring socialisation opportunities.</p> <p>Local families not being able to access other children centre due to the rurality of the area and isolation.</p> <p>Families with low income (reliant on benefits) with no independent transport.</p> <p>Less groups to go to, so more time at home alone with my baby</p> <p>I would miss out on learning new skills.</p> <p>Loss of support for breastfeeding.</p> <p>Already Lost the toy library and the centre has closed three days a week this service was providing a life line for new</p>

	<p>mums and weathered mums it was chance to make friends and get out of the house.</p> <p>No other premises to socialise in Wirksworth.</p> <p>Children's health clinics will not be easily accessible.</p> <p>I would have to drive to Matlock once a week to help with the breastfeeding support group. I am able to walk to Wirksworth Children's Centre, being a volunteer this would add to costs i.e. fuel and parking.</p> <p>Health visitors and school health services have been reduced now this service is being reduced, who do we leave with for support for child development.</p> <p>No weigh ins for babies I would have to travel to Matlock and I don't have a car. It would cost £4.70 return to Matlock from Wirksworth, and then the cost to get to the children's centre is another £2, not affordable for a one hour activity.</p> <p>82% of respondents are very/ fairly dissatisfied with the proposed closure</p>
Harpur Hill Children's Centre	<p>Local families not being able to access other children centre due to the rurality of the area and isolation.</p> <p>Parents that are breast feeding.</p> <p>Parents accessing baby massage, weaning and first aid courses</p> <p>People whom have been victims of sexual violence, domestic violence.</p> <p>Children and parents that need socialisation opportunities vital for development and wellbeing.</p> <p>Local families with no independent transport, having to use public transport, sometimes two buses.</p> <p>Professionals and staff.</p> <p>Parents making special bond with their baby through the activities provided.</p> <p>Parents getting advice from professionals.</p> <p>Parents not wanting to feel stigmatised due to their background.</p> <p>Parents with mental health issues.</p>

	<p>Families that are offered early help. Families will less opportunity for information, advice and guidance around all parenting issues leading to a reduction of the early help preventative offer and this could result in an increase of referrals to Starting Point.</p> <p>Families that live in areas of high deprivation.</p> <p>Families on a low income that are also having benefits cut.</p> <p>Family support workers will continue to provide support for the families that meet the threshold in their homes however there are families who access support at the children's centres that do not meet the threshold for social care input.</p> <p>Children centre workers will only have the capacity to do parenting assessments therefore a lot of families will slip through the net.</p> <p>When I had my first child I suffered from severe post-natal depression when I became pregnant again I was terrified this would happen again but the children centre staff and making friends helped me with my depression, my second child is now much more confident than my first child was, I would not be able to get to any other centre if I had another child. My child attends the pre-school in the same building as the children's centre – what would happen?</p> <p>Without the children's centre I believe I would of encountered severe post-natal depression I was so lost I couldn't even get dressed, but the support from the centre gave me reason to get up dressed and out of the house.</p> <p>The one stop shop for local families would disappear.</p> <p>Even though you are offering alternative children centres their services are also going to be reduced.</p> <p>Redeployment of staff that have already been through reorganisation process causing a lot of stress.</p> <p>83% of all respondents are fairly/ very</p>
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	dissatisfied with the proposed closure
New Mills Children's Centre	<p>Residents with young children that attend sessions.</p> <p>Families wishing to access CAB services locally.</p> <p>Vulnerable families to seek advice and support.</p> <p>Families with no modes of transport to access other centres at a time that bus subsidies about to be removed.</p> <p>Affordability for low income families.</p> <p>Families who are at risk of isolation.</p> <p>Parents with low confidence and self-esteem.</p> <p>Teenage parents.</p> <p>New Parents wanting advice on feeding and weaning.</p> <p>Services delivering form the children's centre, connections will be lost if the centre is to close.</p> <p>Children will not be ready for school.</p> <p>Not be able to use the Sensory Room at New Mills for stimulation for my baby</p> <p>Professionals and staff at risk of losing their jobs.</p> <p>Restricting opportunities for children's to socialise in sessions.</p> <p>Taking away the benefit of peer support, meeting other parents.</p> <p>Reduced opportunities to meet other local mothers with young babies and access informal support in a relaxed, universal, non-stigmatised environment.</p> <p>Support services for families I work with access the services on daily basis and the limitation on.</p> <p>Access to services reduced which will be detrimental to families' engagement in services.</p> <p>It would also be such a waste of a fantastic purpose built community resource.</p> <p>Closing New Mills centre will put increasing pressure on existing baby/toddler groups in the area egg St Georges play group which is already</p>

	<p>well. attended and has limited space. Closure promotes isolation.</p> <p>90% of all respondents are fairly/ very dissatisfied with the proposed closure.</p>
Chapel Children's Centre	<p>Local families with no excess to transport. Families with young children who attend sessions and could become isolated. Families who are at risk of not receiving support in the local rural area in safe multi-functional spaces. Children at risk of social development. Parents as live in a community with high deprivation, it's important that some of these vital services remain available for families. It would cause hardship to families having to travel to another centre which is what is proposed. Parents at risk of poor outcomes when suffering domestic abuse drug and alcohol misuse, isolation, low mood.</p> <p>80% of all respondents are fairly/ very dissatisfied with the proposed closure.</p>
Gamesley Children's Centre	<p>Children under 5 and their families – social isolation as there are no universal PVI sector parent and toddler groups on the estate.</p> <p>Only 55.3% of children attending Gamesley Primary achieved a GLD compared to the national average of 66.3%. The FYPs need to deliver EYFS programmes to the children under 2 living in Gamesley to contribute to improving this figure. These programmes need to be delivered on the estate in order for families to be able to access them, as families have said that they would not be prepared to walk for 40-60 minutes to access provision at Glossop or Hadfield Children's Centres. It would also involve 2 bus journeys or a bus and a train to get to Hadfield Children's Centre. Families</p>

	<p>cannot afford the fare and the services are limited and also under threat of being withdrawn. Only 45.5 % of the population have access to a car.</p> <p>For the above travel reasons families would struggles to attend TAF and core group meetings held at Glossop or Hadfield Children's Centres. Retaining these services in Gamesley would enable more families to attend.</p> <p>The closure could impact on the health of children under 5 if weigh, stay and play are no longer available in Gamesley. Currently child obesity rates for children living in Gamesley are 13.29% (ranked 53/54 children's centres) and local knowledge suggests breastfeeding rates are low. Parents with toddlers have said that they find it difficult to attend the healthy baby clinic at the Glossop Primary Care Centre as this entails a 40 minute walk with no guarantee that their baby will be seen before it is time to leave to get back to Gamesley to collect their older sibling.</p> <p>91% of the respondents were fairly/ very dissatisfied with the proposal to close the centre.</p>
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South Derbyshire and South Dales (SDSD)

Etwall Children's Centre

74 respondents stated that they were 'very dissatisfied' with the proposal to close the centre (84%).

One of the main themes for Etwall respondents is social isolation and the distance from Etwall children's centre to Woodville (centre to be retained). Some of the responses are directly quoted below :

"I have found it invaluable for dealing with support for me and my Family and without it would be at my GP more looking for other services constantly as to get to Swadlincote would take 3 buses for me".

“As a parent who uses public transport, Etwall children's centre is the only centre I can get to weigh my 6 month old regularly. If this was to close, I wouldn't be able to know if I am maintaining a healthy weight”.

“The distance to any other children's centre is too far for me”.

“Some of the areas are isolated and not everyone has access to transport or even able to afford a bus journey”.

“3 buses to get to Swadlincote is not achievable in my school hours”.

“Without this local support and facility there will be less sense of community and the strong parenting bond which you find with all parents who attend the centre will disappear.”

Several responses refer to the breastfeeding clinic at Etwall children's centre as well as other health services such as baby weighing clinics, so clearly new mothers are a group who would be affected. The socialisation aspect is also a regular theme typified by the response below:

“The breast feeding support group was invaluable with my first child and now also my second. this group also supported me emotionally during post-natal depression. By providing socialisation and friendship where I may otherwise have been isolated with no family living nearby.”

“I also regularly use the child health clinic for advice on feeding, weight etc and without this service it would be difficult to find a professional to talk to”.

“closing this would be devastating for so many people and specially new mothers and babies as we get all the guidance from the health visitors”.

“I go to a monthly meeting with other parents who children have learning disabilities and it helps me get through daily struggles”.

The centre provides a number of universal and targeted services which are attended by local families. The universal groups include Under 1's and Bouncing Beans. Under 1's is the centres longest running group and most popular seeing on average 10-20 parents and babies per session. The local health team promote this group during their universal visits and encourage families to attend in order to reduce feelings of isolation for parents. This group is the only one of its kind in the area and would have a huge impact on both new and experienced mums with young babies should it no longer run. The closure of this centre and this group would potentially see an increase in the local area of parents feeling isolated which could have a knock on effect with feels of depression for mums and in turn could impact on the emotional wellbeing of their children. Over the last year this group has seen an attendance of 78 individuals therefore identifying the need for parents and children requiring the opportunity to socialise in their own community.

Families living in the Etwall reach area rely heavily on the 1:1 outreach support service offered by centre staff. Given the geographical size of the area and the challenging transport links between villages, families find it difficult to physically access services delivered directly from the centre therefore depend upon our outreach services. For example, families living in the Stenson Fields area cannot get buses direct to Etwall Children's Centre therefore it is essential the centres is able to deliver outreach services which meet the needs of individual families.

Coton in the Elms Children's Centre

16 respondents stated that they are very dissatisfied with the proposal to close Coton Children's centre (84%).

One of the main themes from consultation feedback is the distance between Coton in the Elms and Woodville Children's centre. The children's centre serves a rural community and the issues of community cohesion, socialisation and emotional support are all themes in the feedback.

There are bus services which run between the two areas every two hours as seen below. A further connecting bus from Swadlincote to Woodville would be required and this takes 6 minutes (run frequently).

Examples of consultation feedback are below:

"There is not another children's centre in close proximity and not easily transferred to by public transport".

"I live on a farm so we are very out of the way and the Coton-in the-Elms centre is close by and easy to reach, it also means we are meeting people from the villages in the same area, people she is likely to go to school with etc. It is a vital service to this community".

"The groups offer at Coton have been vital for me. Living in a small village near to Coton, at times it was the only time I would go out in the week with my little boy".

"There is not another centre locally and other centres are a good distance away as this is a rural location. This is such a valuable centre for meeting parents in the first trying months of having a baby. It was invaluable to me and would be a loss for other parents in the same situation. Rural services are being eroded and offering far fewer opportunities for parents and children for meeting points and social support, than in the towns".

"The Children's centres are different in that the advice given is not driven by commercial interests, children are given time to settle in and the balance of structure versus free play is good. In addition, the support has been helping me feel mentally well and resilient, and I would feel like I've lost an invaluable source of help".

"I had (and sometimes relapse) anxiety and panic attacks after I gave birth which lasted at their worst, for about 10 weeks, which with a new baby (and how much care they need at the beginning) felt like an eternity. The fact that this group was a) on my doorstep - therefore no need to brave a car journey to Woodville and b) so friendly, helped my recovery massively week by week and I can honestly say it was a lifeline to me. I have no family close by and have fairly recently moved to the area and worked very far away therefore knew very few local people for support".

"The Coton in Elms centre is very popular and really good access for the small villages round it which need this service. If it wasn't for this centre I would have become very depressed, stayed at home and my little girl would not have socialised with other children".

Newhall Children's Centre

The vast majority of respondents stated they were very dissatisfied with the proposal to close the Newhall centre (13/60%).

The main themes from consultation feedback are the health services on offer at the Newhall centre (weighing clinics), social inclusion, and the travelling required to attend Woodville Children's centre. Below are examples of some feedback:

"I go to here to talk to other mums and get advice. Other baby groups are activity based and don't have time to talk. With low maternity money, it is hard to afford any baby groups at all. They develop community spirit. They link children who may go to the same school together".

"Newhall have been extremely helpful to me throughout my process of pregnancy/ having my baby. Whether it be to go to for advice (not just the health visitors, all of the staff are trained to give advice) or to get my child out socializing with other children, I can't fault the centre or its services".

"The centre has been a real lifeline for me. I have a disabled daughter, I am also caring for my nephews. My daughter has been weighed at least twice a month her whole life, if I had to travel further, to a busier centre this would be a real problem. Woodville is the next nearest centre and it is two bus rides away."

"The health clinic is always so busy, and it's been a great place to meet other parents from the area."

"We would really miss out on the opportunity to get our children to play and meet other children as it is the only free classes in the area, we would miss out on the songs and rhyme time and the messy play."

"Less groups for my son to attend and socialise. Less opportunities to volunteer. Less chance to interact with other parents less chance to offer breastfeeding support".

2. Protected Group

Disabled people including mobility, sensory, learning, mental health, HIV, and also include carers and relatives

- a) From existing data and information – who is likely to be adversely affected, how, and to what degree? Will anyone gain or benefit from the proposals?

Amber Valley

Alfreton Group	
Somercotes Children Centre	<p>There are 6 disabled children under 5 years of age registered with Somercotes children centre from a population of 5 disabled children.</p> <p>There are 4 disabled parents from a known population of 2.</p> <p>4% of the respondents indicated they considered themselves to have a disability.</p>
Belper Children Centre	<p>There are 7 disabled children under 5 years of age registered with Belper children centre from a population of 12 disabled children.</p> <p>10 registered parents with a disability.</p> <p>4% of the respondents indicated they considered themselves to have a disability.</p>
Crich Children Centre	<p>There is 1 disabled child under 5 years of age registered with Crich children centre from a population of 3 disabled children.</p> <p>2 registered parents with a disability.</p> <p>3% of the respondents indicated they consider themselves to have a disability.</p>
Ripley Children Centre	There is 1 disabled child under 5

	<p>years of age registered with Ripley children centre from a population of 2 disabled children.</p> <p>7 registered parents with a disability.</p> <p>4% of the respondents indicated they consider themselves to have a disability.</p>
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Bolsover/North East Derbyshire - Arkwright

Two disabled children under 5 live in the reach area.

Of the 24 responses from parents, one parent reported themselves disabled.

There is a sensory room at the Children's Centre; this is used infrequently at present.

Dronfield, Killamarsh, Eckington

Dronfield Group	
Dronfield Children Centre	<p>There are 2 disabled children under 5 years of age registered with Dronfield children centre from a population of 3 disabled children.</p> <p>There are 4 disabled parents from a known population of 4.</p>
Eckington Children Centre	<p>There are 4 disabled children under 5 years of age registered with Eckington children centre from a population of 6 disabled children.</p> <p>There are 1 disabled parents from a known population of 5.</p>
Killamarsh Children Centre	<p>There are 8 disabled children under 5 years of age registered with Killamarsh children centre from a population of 10 disabled children.</p> <p>There are 1 disabled parents from a known population of 2.</p>

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Whaley Thorns

There are 2 disabled children under 5 years of age registered with Whaley Thorn's children's centre from a population of 3 disabled children.

There are 6 disabled parents registered from a known population of 1.

9% of respondents indicated they considered themselves to have a disability. One respondent stated: 'I can't get my daughter to Shirebrook as she has additional needs and we have a baby and are very low income'.

The sensory area at the centre is used by children with additional needs and specialist services to provide 1:1 support.

Blackwell, South Normanton, Stonebroom

Blackwell

There are 4 diagnosed disabled children within the population and of these 2 are registered with the children's centre. The registration rate is 50% and the participation is 50%. Many of the children that access the children's centre present with issues that may later in childhood be diagnosed as a learning disability or be somewhere on the autistic spectrum. These children often present early as behaviour or development issues and Children's Centres support the family regarding parenting management.

There were 3 parents that had a disability according to management information figures. 2 parents were registered with the children's centre giving registration rate of 66.7% and participation of 33.3%.

South Normanton

There are 15 diagnosed disabled children within the population and of these 13 are registered with the children's centre. The registration rate is 86.7% and the participation is 86.7%. Many of the children that access the children's centre present with issues that may later in childhood be diagnosed as a learning disability or be somewhere on the autistic spectrum. These children often present early as behaviour or development issues and Children's Centres support the family regarding parenting management.

There was 1 parent that had a disability according to management information figures. 3 parents were registered with the children's centre giving registration rate of 100% and participation of 100%.

Stonebroom

There are 7 diagnosed disabled children within the population and 4 of these are registered with the children's centre. The registration rate is 57.1% and the participation is 57.1%. Many of the children that access the children's centre present with issues that may later in childhood be diagnosed as a learning disability or be somewhere on the autistic spectrum. These children often present early as behaviour or development issues and Children's Centres support the family regarding parenting management.

Over the last 12 months around 20 individual parents have been seen by the children's centre that have a diagnosed mental condition however this could possibly be higher than more than 50% with undiagnosed mental health issues.

There were 2 parents that had a disability according to management information figures. 3 parents were registered with the children's centre giving registration rate of 100% and participation of 50%.

Clowne

100% of children with disabilities (6 children under 5) are both registered and participate with the centre.

Targeted groups such as Fairplay have been run at the centre which supports families who have children with disabilities.

None of the 14 parents reported themselves as having a disability.

Clay Cross and Tupton

There are 4 disabled children under 5 years of age registered with Clay Cross centre from a population of 5 disabled children.

There are 14 disabled parents registered from a known population of 4 of which participation is.

8% of respondents indicated they considered themselves to have a disability.

There are 6 disabled children under 5 years of age registered with Tupton children's centre from a population of 9 disabled children.

There are 4 disabled parents registered from a known population of 0 of which participation is.

5% of respondents indicated they considered themselves to have a disability.

Chesterfield

Brampton

11 disabled children under 5 years of age registered at this children's centre from a population of 11 disabled children.

There are 9 disabled parents registered with the centre from a known population of 3.

0 of the 15 respondents who answered this question identified themselves as having a disability.

Brimington

8 disabled children under 5 years of age registered at this children's centre from a population of 11 disabled children.

There are 5 disabled parents registered with the centre from a known population of 2.

2 of the 68 respondents who answered this question identified themselves as having a disability.

Hasland

5 disabled children under 5 years of age registered at this children's centre from a population of 8 disabled children.

There are 5 disabled parents registered with the centre from a known population of 0.

1 of the 33 respondents who answered this question identified themselves as having a disability.

Queen's Park

10 disabled children under 5 years of age registered at this children's centre from a population of 11 disabled children.

There are 5 disabled parents registered with the centre from a known population of 0.

2 of the 39 respondents who answered this question identified themselves as having a disability.

Erewash

West Hallam Children Centre	<p>There is 1 disabled child under 5 years of age registered with West Hallam children centre from a population of 3 disabled children.</p> <p>There are 3 disabled parents from a known population of 3.</p> <p>3 of the 24 respondents indicated they considered themselves to have a disability.</p>
Kirk Hallam Group	
Kirk Hallam Children Centre	<p>There are 3 disabled children under 5 years of age registered with Kirk Hallam children centre from a population of 7 disabled children.</p> <p>4 registered parents with a disability out of a known population of 4</p> <p>0 of the 68 respondents 7 indicated they considered themselves to have a disability</p>
Sandiacre Children Centre	<p>There is 7 disabled child under 5 years of age registered with Sandiacre children centre from a population of 9 disabled children.</p> <p>6 registered parents with a disability out of a known population of 6</p> <p>3 of the 29 respondents indicated they consider themselves to have a disability</p>
Long Eaton Group	
Long Eaton 1 Children Centre	<p>There are 11 disabled children under 5 years of age registered with Long Eaton children centre from a population of 14 disabled children.</p>

	2 registered parents with a disability out of a known population of 2
Long Eaton 2 Children Centre	<p>There are 1 disabled children under 5 years of age registered with Long Eaton children centre from a population of 2 disabled children.</p> <p>0 registered parents with a disability out of a known population of 0</p>

High Peak and North Dales

Bakewell Children's Centre	<p>There is 1 disabled child under 5 years of age registered with Bakewell Children's Centre from a known population of 1 disabled child.</p> <p>There are 6 disabled parents registered from a known population of 1.</p> <p>8 of the 44 respondents indicated they considered themselves to have a disability.</p>
Wirksworth Children's Centre	<p>There are 4 disabled children under 5 years of age registered with Wirksworth Children's Centre from a known population of 6 disabled children.</p> <p>There are 3 disabled parents registered from a known population of 2.</p> <p>6 of the 49 respondents indicated they considered themselves to have a disability.</p>
Harpur Hill Children's Centre	<p>There is 1 disabled child under 5 years of age registered with Harpur Hill Children's Centre from a known population of 1 disabled child.</p> <p>There are 7 disabled parents registered from a known population of 3.</p>

	3 of the 58 respondents indicated they considered themselves to have a disability.
New Mills Children's Centre	<p>There are 4 disabled children under 5 years of age registered with Wirksworth Children's Centre from a known population of 4 disabled children.</p> <p>There are 3 disabled parents registered from a known population of 1.</p> <p>5 of the 84 respondents indicated they considered themselves to have a disability.</p>
Chapel Children's Centre	<p>There is 1 disabled child under 5 years of age registered with Chapel Children's Centre from a known population of 2 disabled children.</p> <p>There are 6 disabled parents registered from a known population of 1.</p> <p>5 of the 44 respondents indicated they considered themselves to have a disability.</p>
Gamesley Children's Centre	<p>There is 1 disabled child under 5 years of age registered with Gamesley Children's Centre from a known population of 1 disabled child.</p> <p>There is 1 disabled parent registered from a known population of 1.</p> <p>13 of the 83 respondents indicated they considered themselves to have a disability.</p>

South Derbyshire and South Dales (SDSD)

<p>Newhall Group –There are 9 disabled parents with children under 5 living in the Newhall grouping reach area. 100% of these are registered and participating with the Centre. There are 10 disabled children under 5 in the Newhall grouping – 50% of these are registered and participating in CC activities.</p>	
Newhall Children Centre	There are 3 disabled parents with

	<p>children under 5 in the Newhall reach area, of which 100% are registered and participating, and there are 4 children under 5 in the Newhall reach area, of which 50% are registered and participating. Elmsleigh School which is an enhanced resource school, access the Centre's sensory room, playroom and outdoor area on a weekly basis with their SEN children and families. Newhall CC also holds an ANTS group on a monthly basis which is supported by a Volunteer with a disabled child. The sensory room is also bookable on a daily basis for all families registered with Centres. In the last year this has been accessed 128 adults and 138 children. There have also been 35 referrals for families where there is parental mental health with children under 5 in the Newhall reach area in the past year. Newhall CC also runs a Terrific Tots group which promotes school readiness with a focus on ECAT – to support speech and language and promote positive learning. There have been 14 families referred for ECAT where support has been provided in the home by CC staff.</p> <p>None of the respondents from consultation classified themselves as disabled.</p>
Coton in the Elms Children's Centre	<p>There are 3 disabled parents with children under 5 in the Coton reach area. All 3 are registered and participating with the centre.</p> <p>One respondent from the consultation classified themselves as disabled.</p>
Etwall Children's Centre	<p>3 respondents from the consultation considered themselves to have a disability.</p> <p>The centre sees a population of 4</p>

	<p>disabled children in its reach area and records 100% local authority contact with those children. Some of these children access CC services where others receive specialist support from the disabled children's team.</p> <p>The centre has historically had strong links with organisations who offer support to families with disabled children for example Umbrella and SHOUT. Umbrella have delivered monthly support sessions for parents from the centre with SHOUT (South Derbyshire support group) extending its services from Swadlincote to those families in the Etwall reach area.</p> <p>The centre has invested in sensory equipment which is available for parents and children to enjoy on a weekly basis. Availability of the room is prioritised for children with additional needs however is widely available and used by parents and children who do not have additional needs. 125 individuals have accesses this provision over the period of a year.</p>
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- b) From existing customer and other feedback including consultation feedback—who is likely to be adversely affected, how and to what degree? Will anyone gain or benefit?

Amber Valley

Summary of who could be affected:

Disabled children and families would be adversely affected without the access to the sensory room at Belper children centre.

"I wouldn't be able to drive to the nearest centre so my child would miss out on the sensory room which is really educational."

"I have used the sensory room which is a fabulous asset to Belper".

Those with mobility issues:

Respondents said that there is poor parking at Belper Clinic and Riversdale Belper which would make accessing services there difficult.

“My disabled sister and her baby attend the centre and rely heavily on the centre. As she isn’t very mobile she couldn’t attend another centre”.

Bolsover/North East Derbyshire - Arkwright

By closing both Arkwright and Chesterfield town centre children's centres you are closing the sensory rooms which many parents find useful for children and which many parents use from birth to school age.

The centre currently holds the only group that I can currently attend due to work. It also has the sensory room which I have found to be amazing for my daughter as many parents have found for their children.

Dronfield, Killamarsh, Eckington

5 disabled parents responded to the survey.

Whaley Thorns

Disabled children who do not meet the criteria for support from the county’s disability team, based on their level of disability.

Parents who have a disability.

Children awaiting a diagnosis.

Blackwell, South Normanton, Stonebroom

There were 2 respondents that indicated that they had a disability. It was not indicated as to what type of disability.

Disabled children who do not meet the criteria for support from the county’s disability team, based on their level of disability.

Parents who have a disability.

Children awaiting a diagnosis.

Clay Cross and Tupton

Disabled children who do not meet the criteria for support from the county’s disability team, based on their level of disability.

Parents who have a disability.

Children awaiting a diagnosis.

Chesterfield

Disabled children and their parents would lose the opportunity to access the sensory room at Brimington and the soft play area at Queen's Park.

Parents of disabled children would lose easy access to support for benefits and generic advice.

The closure of local centres would add a further layer of isolation for the parents of disabled children who face barriers to inclusion.

High Peak and North Dales

Bakewell Children's Centre	
Wirksworth Children's Centre	
Harpur Hill Children's Centre	
New Mills Children's Centre	
Chapel Children's Centre	
Gamesley Children's Centre	Children with a disability and children with disabled parents living in Gamesley may not access services at Glossop and Hadfield Children's Centres as it would take in excess of 30 minutes to walk to those centres and the majority of respondents have stated that this is the maximum time they would be prepared to travel for. They may be excluded from using public transport due to cost and availability. Only 45.5% of the population have access to a car.

South Derbyshire and South Dales (SDSD)

Several respondents (across all centres proposed for closure) describe their use of the sensory rooms. This facility is particularly of use for disabled children.

Elmsleigh primary school (Newhall) use the sensory room at Newhall

Children's centre every Monday for pupils with special educational needs. **Coton in the Elms primary school** also **use the sensory room at Coton children's centre** for positive play sessions.

Etwall Children's centre hosts a monthly meeting for parents of children with learning disabilities – this is reflected in consultation feedback.

"I am a young single mum of 2 and the only place I go to meet other mums is Etwall Childrens centre. My eldest son has a disability and my youngest is 3. I go to a monthly meeting with other parents who children have learning disabilities and it helps me get through daily struggles."

“There is not another local children's centre that has the facilities such as sensory room and stay and play with versatile indoor and outdoor equipment. As a parent of a toddler with significant health difficulties this is essential as a means of relaxation for her, physio and meaningful time to play safely.”

3. Protected Group

Race – including all racial groups, including impact, if any, on Gypsies and Travellers

- a) From existing data and information – who is likely to be adversely affected, how, and to what degree? Will anyone gain or benefit from the proposals?

Amber Valley

Somercotes Children Centre	<p>Most families are of White British origin.</p> <p>Traveller parents 0 Traveller children 0.</p> <p>26 children under 5 years are registered as Black and Ethnic minority with Somercotes children centre, although population is 12.</p> <p>Out of the respondents who answered 86% indicated they were of White British origin and 2% were Mixed race.</p>
Belper Children Centre	<p>Most families are of White British origin.</p> <p>Traveller parents 0 Traveller children 0.</p> <p>29 children under 5 years are registered as Black and Ethnic minority with Belper children centre, although population is 8.</p> <p>Out of the respondents who answered 88% indicated they were of White British origin and 2% indicated they were Mixed race.</p>

Crich Children Centre	<p>Most families are of White British origin.</p> <p>6 children under 5 years are registered as Black and Ethnic minority with Crich children centre, although population is 2.</p> <p>Traveller children 1.</p> <p>Out of the respondents who answered 91% indicated they were of White British origin.</p>
Ripley Children Centre	<p>30 children under 5 years are registered as Black and Ethnic minority with Ripley Children Centre, although population is 20.</p> <p>Traveller parents 0 Traveller children 0.</p> <p>Out of the respondents who answered 89% indicated they were of White British origin and 3% were of mixed race.</p>

Bolsover/North East Derbyshire – Arkwright

One Traveller family with a child under 5 has accessed the centre five times during Oct 2014 – 2015.

Out of 24 parents completing the questionnaire one described themselves as mixed race.

Dronfield, Killamarsh, Eckington

65 parents who responded to the survey are white, 1 mixed race, 2 Asian/Asian British and 1 black/black British.

Whaley Thorns

Out of the 1264 respondents who answered 86% indicated they were of White British origin and 6% indicated they were mixed race. There are no Traveller children registered currently.

14 children under 5 years are registered as Black and Ethnic minority although the population is 2 potentially due to the highly transient nature of the community. Contacts with 12 of the 14 families over the year have resulted in 92 contacts altogether.

The Children's Centre has access to interpreters to communicate with parents. Multi-cultural reading material, toys and other resources are provided for families and children.

The advisory board has identified BME as a target group and a task and finish group was convened to identify transient families in the community and bring partner agencies together to share resources.

Blackwell, South Normanton, Stonebroom

Blackwell

Black and Minority ethnic data.

17 are registered

15 are participating

However the population data reveals only 8 within the population hence the percentage is 100%

South Normanton

Black and Minority Ethnic data

21 are registered

14 are participating

However the population data reveals only 3 hence the percentage is 100%

Stonebroom

Black and Minority Ethnic Data

21 are registered

18 are participating

However the population data reveals 1 hence the percentage of 100%

Ethnicities are unclear in the data provision.

Clowne

There are 10 under 5s who are of black or minority ethnic origin.

5 of these children are registered with the centre.

All the parents who responded to the survey were white.

Clay Cross and Tupton

Out of the 1264 respondents who answered 85% indicated they were of White British origin and 8% indicated they were mixed race. There are no Traveller children registered currently.

19 children under 5 years are registered as Black and Ethnic minority although the population is 10. Contacts with

Multi-cultural reading material, toys and other resources are provided for families and children.

Out of the 1264 respondents who answered 94% indicated they were of White British origin and 4% indicated they were mixed race. There are no Traveller children registered currently.

10 children under 5 years are registered as Black and Ethnic minority although the population is 0.

Multi-cultural reading material, toys and other resources are provided for families and children.

Chesterfield

Brampton

Most families in the area are of White British origin

28 respondents who answered the indicated they were of White British origin, 2 that they were mixed race and 1 Asian/British

There are no traveller families registered at this centre

45 children in the reach area are registered as BME from a population of 0

Brimington

Most families in the area are of White British origin

97 respondents who answered the question indicated they were of White British origin and 1 that they were Asian/British

There is 1 traveller child registered at this centre from a population of 0

2 Traveller Parents registered from a known population of 0

27 children in the reach area are registered as BME from a population of 23

Hasland

Most families in the area are of White British origin

41 respondents who answered the question indicated they were of White British origin and 3 that they were **mixed** race.

There 0 traveller children registered at this centre from a population of 0

1 Traveller Parent registered from a known population of 0

24 children in the reach area are registered as BME from a population of 32

Queen's Park

Most families in the area are of White British origin

75 respondents who answered the question indicated they were of White British origin and 1 that was Asian/British

There are no traveller families registered at this centre

41 children in the reach area are registered as BME from a population of 24

Erewash

West Hallam Children Centre	<p>Most families are of White British origin.</p> <p>14 children under 5 years are registered as Black and Ethnic minority with West Hallam children centre, out of a population of 14.</p> <p>Traveller parents 0 Traveller children 0.</p> <p>Out of the 24 respondents who answered 83% indicated they were of White British origin and 4% were Mixed race and 4% Black/Black British (8.3% no response)</p>
Kirk Hallam Group	
Kirk Hallam Children Centre	<p>Most families are of White British origin.</p> <p>15 children under 5 years are registered as Black and Ethnic minority with Kirk Hallam children centre of of a population of 15.</p> <p>Traveller parents 0 Traveller children 0.</p> <p>Out of the 68 respondents who answered 88.2% indicated they were of White British origin and 2.9%</p>

	<p>indicated they were mixed race,1.5% were Black British,1.5% other and5.9% no reply</p>
Sandiacre Children Centre	<p>Most families are of White British origin.</p> <p>24 children under 5 years are registered as Black and Ethnic minority with Sandiacre Children centre, out of a population of 24.</p> <p>Traveller children 0.</p> <p>Out of the 29 respondents who answered 196.6% indicated they were of White British origin and 3.4% did not reply</p>
<p>Long Eaton Group: 48 respondents:87.5% White British,4.2% mixed race,2.1% Asian/Asian British,2.1% Black/Black British, 4.2% no reply</p>	
Long Eaton 1 Children Centre	<p>Most families are of White British origin.</p> <p>59 children under 5 years are registered as Black and Ethnic minority with Long Eaton children centre, out of a population of 59</p> <p>Traveller parents 0 Traveller children 0.</p>
Long Eaton 2 Children Centre	<p>Most families are of White British origin.</p> <p>19 children under 5 years are registered as Black and Ethnic minority with Long Eaton 2 children centre, out of a population of 19</p> <p>Traveller parents 0 Traveller children 0.</p>

High Peak and North Dales

Bakewell Children's Centre	<p>Most families are of White British Origin. Out 53 respondents who answered 91% indicated they were White British, 1% Mixed, 2% Other and 5% didn't answer.</p> <p>13 children under 5 years are registered as Black and Ethnic minority with Matlock Children's Centre, although known population is 0.</p>
Wirksworth Children's Centre	<p>Most families are of White British Origin. Out 49 respondents who answered 92% indicated they were White British, 2% Mixed, 2% Other and 4% didn't answer.</p> <p>20 children under 5 years are registered as Black and Ethnic minority with Matlock Children's Centre, although known population is 2.</p>
Harpur Hill Children's Centre	<p>Most families are of White British Origin. Out 59 respondents who answered 95% indicated they were White British, 2% Mixed, and 3% didn't answer.</p> <p>27 children under 5 years are registered as Black and Ethnic minority with Harpur Hill Children's Centre, although known population is 1.</p>
New Mills Children's Centre	<p>Most families are of White British Origin. Out 84 respondents who answered 94% indicated they were White British, 4% Mixed, 2 and 2% didn't answer.</p> <p>31 children under 5 years are registered as Black and Ethnic minority with New Mills Children's Centre, although known population is 0.</p>
Chapel Children's Centre	<p>Most families are of White British Origin. Out 44 respondents who answered 91% indicated they were White British, 5% Mixed, and 5% didn't answer.</p> <p>22 children under 5 years are registered as Black and Ethnic minority with Chapel Children's Centre, although known population is 3.</p>

Gamesley Children's Centre	<p>Most families are of White British Origin. Out 84 respondents who answered 88% indicated they were White British, 4% Mixed, and 8% didn't answer.</p> <p>5 children under 5 years are registered as Black and Ethnic minority with Gamesley Children's Centre, although known population is 7.</p>
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South Derbyshire and South Dales (SDSD)

<p>Newhall Grouping. There are 43 families from Black and Minority Ethnic race in the grouping reach area – 38 (88.4%) are registered with the Centre. In South Derbyshire and South Dales there are 11 traveller parents with children under 5 and 15 children under 5 who are registered with the SDSD Children's Centres.</p>	
Newhall Children's Centre	<p>In NCC reach area there are 15 (100%) BME families with children under 5 registered.</p> <p>23 respondents from the consultation classified themselves as white. This was the only ethnic group noted.</p>
Coton in the Elms Children's Centre	<p>There are 8 BME families in the Coton reach area of which 100% are registered. There are 3 traveller parents who are registered with the children's centre.</p> <p>20 consultation respondents classify themselves as white. This was the only ethnic group noted.</p>
Etwall Children's Centre	<p>85 respondents from the consultation classified themselves as White with 2 stating 'other'.</p> <p>Most families are of white British origin in the Etwall reach area.</p> <p>Etwall Children's Centre sees one of the largest cohort of travelling families in the authority. Given the nature of this minority group, it is often difficult to determine the total numbers of families in the area. The centre and</p>

	<p>its partner agencies has good links with the local traveller sites with a mix of agencies regularly visiting the site. Those who visit the sites include children's centre staff, MAT staff, Health, social care and elected home education service.</p> <p>The centres largest ethnic minority groups predominantly live in the Stenson Fields area which borders Derby City. These families rely heavily on the outreach support offered by the centre given the challenge they face with public transport as previously described. Data tells us the centre has a population of 43 from Ethnic Minority group however records 86 BME families as registered with the centre. The centre records 63% participation with this cohort.</p>
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- b) From existing customer and other feedback including consultation feedback—who is likely to be adversely affected, how and to what degree? Will anyone gain or benefit?

Amber Valley

Most respondents did not specifically respond regarding Race, however this comment was received:

“The benefits of the centres is that they attract a mixed group of families from all different backgrounds meaning no one feels stigmatised when accessing support for breastfeeding or postnatal depression etc.

Whaley Thorns

Increased social isolation for newly arrived and settled Eastern European families and Traveller and Gypsy families.

Language is often a barrier to a child's readiness for school.

Increased impact on partner agency resources.

Blackwell, South Normanton, Stonebroom

Blackwell

There is limited amount of information available for travellers in Blackwell.

South Normanton

Travellers

The data reveals that there is only 1 child under 5 within the South Normanton reach area; however Pinxton has a large community of travellers that live in houses and consider themselves to be second generation travellers. Many of these families continue to follow cultural traditions going back generations.

Showman's Guild travellers.

There are several families within Pinxton that travel around the country and return to Pinxton periodically during the year and access services.

Eastern European families have also moved into the area although the number is very difficult to quantify as there is reluctance to access early intervention services and the population tends to be very transient. When groups or services are accessed books and other materials in the various languages are available.

The children in these groups are very vulnerable and if services were not held locally they would not be aware of where to go for support. Accessing public transport would be prohibitive due to the language barrier as well as financial.

Stonebroom

Out of the respondents 100% indicated that they were of White British origin. There are no traveller children registered with Stonebroom Children's Centres.

Increased social isolation is a real concern for newly arrived eastern European families, some wishing to remain 'under the radar of services.

Issues such as domestic violence, poverty and school readiness are hidden and do not reach services until crisis point. Local Children's Centres could pick up these families before crisis happens and the drain on front line 'urgent' services diminished.

Clay Cross and Tupton

Increased impact on partner agency resources.

Increased impact on partner agency resources.

Chesterfield

Race issues have not been identified as a significant consideration by respondents to this consultation.

High Peak and North Dales

Children Centre's in High Peak and North Dales	Children from BME backgrounds living in High Peak and North Dales may not access services at other Children's Centres across the locality as it would take in excess of 30 minutes to travel to those centres and the majority of respondents have stated that this is the maximum time they would be prepared to travel for. They may be excluded from using public transport due to cost and availability.
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South Derbyshire and South Dales (SDSD)

The issue of race/ethnicity was not addressed in consultation feedback.

4. Protected Group

Gender (Sex) including men and women, boys and girls

- a) From existing data and information – who is likely to be adversely affected, how, and to what degree? Will anyone gain or benefit from the proposals?

Amber Valley

Somercotes Children Centre	Respondents : 12% male , 78% female.
Belper Children Centre	Respondents : 6% males , 87% female.
Crich Children Centre	Respondents : 7% male , 79% female.
Ripley Children Centre	Respondents : 7% males , 83% female.

Bolsover/North East Derbyshire – Arkwright

187 fathers of children under 5 live in the reach area.

Dronfield, Killamarsh, Eckington

Dronfield Group	
Dronfield Children Centre	Three male parents responded, the rest female
Eckington Children Centre	One male parents responded, the rest female
Killamarsh	All parents responding were female

Whaley Thorns

142 out of a population of 213 are registered with the centre.

82% of respondents were female and 18% male.

Blackwell, South Normanton, Stonebroom

The population of fathers with children under 5 is 449.

286 (63.7%) of these are registered and 41 (9.1) of these participates.

Clowne

81 fathers participate in activities and events.

Clay Cross and Tupton

462 out of a population of 569 are registered with the centre.

85% of respondents were female and 10% male.

351 out of a population of 511 are registered with the centre.

91% of respondents were female and 4% male.

Chesterfield

(Parents only)

Brampton

Total Respondents 32 (20 Parents) 30 Female 2 Male

Brimington

Total Respondents 98 (91 Parents) 96 Female 1 Male

Hasland

Total Respondents 44 (31 Parents) 43 Female 1 Male

Queen's Park

Total Respondents 83 (64 Parents) 80 Female 2 Male

Erewash

West Hallam Children Centre	24 respondents: 1 male , 22 female. (1 unknown)
Kirk Hallam Group	
Kirk Hallam Children Centre	68 respondents: 6 males, 57 female. (5 unknown)
Sandiacre Children Centre	29 respondents: 3 male, 24 female. (2 unknown)
Long Eaton Group	48 respondents: 2 male, 24 female (2 unknown)
Long Eaton 1 Children Centre	
Long Eaton 2 Children Centre	

High Peak and North Dales

Bakewell Children's Centre	44 respondents : 36 female, 5 male, 3 no response
Wirksworth Children's Centre	49 respondents : 42 female, 5 male, 2 no response
Harpur Hill Children's Centre	58 respondents : 50 female, 4 male, 4 no response
New Mills Children's Centre	84 respondents : 71 female, 8 male, 5 no response
Chapel Children's Centre	44 respondents : 37 female, 4 male, 3 no response
Gamesley Children's Centre	83 respondents : 70 female, 10 male, 3 no response

	238 dads reside in the reach area of Gamesley Children's Centre. 113 of these are registered with the Children's Centre.
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South Derbyshire and South Dales (SDSD)

Newhall Grouping – There are currently 1435 fathers in the reach area with children under 5. There are 784 (54.6%) registered.	
Newhall Children's Centre.	There are currently 315 (49.8%) fathers with children under 5 registered with Newhall CC. 23 respondents of the consultation were female, none were male.
Coton in the Elms Children's Centre	There are 313 fathers with children aged 5 and under in the reach area with 143 registered (45.7%). All respondents (20) were female.
Etwall Children's Centre	3 respondents of the consultation identified themselves as male, with 72 females.

- b) From existing customer and other feedback including consultation feedback—who is likely to be adversely affected, how and to what degree? Will anyone gain or benefit?

Whaley Thorns

82% of respondents were female and 18% male.

Blackwell, South Normanton, Stonebroom

93% of respondents were female and 7% were male.

Further questions need to be asked regarding the numbers of men taking part in the consultation.

Clay Cross and Tupton

85% of respondents were female and 10% male.

91% of respondents were female and 4% male.

Chesterfield

Gender balance of the service users has not been identified as a significant factor by the respondents to the consultation.

High Peak and North Dales

Bakewell Children's Centre	<p>Parents living in this area may not access services located at other centres. 27% of respondents said they would travel up to 10 minutes 30% of respondents said they would travel up to 20 minutes. 14% of respondents said they would travel up to 30 minutes. 7% of respondents said they would travel up to 1 hour.</p> <p>They may be excluded from using public transport due to cost and availability. Only 43% of the respondents have access to a car.</p>
Wirksworth Children's Centre	<p>Parents living in this area may not access services located at other centres. 27% of respondents said they would travel up to 10 minutes 37% of respondents said they would travel up to 20 minutes. 16% of respondents said they would travel up to 30 minutes. 4% of respondents said they would travel up to 1 hour.</p> <p>They may be excluded from using public transport due to cost and availability. Only 55% of the respondents have access to a car.</p>
Harpur Hill Children's Centre	<p>Parents living in this area may not access services located at other centres. 47% of respondents said they would travel up to 10 minutes 24% of respondents said they would travel up to 20 minutes. 7% of respondents said they would travel up to 30 minutes.</p>

	<p>3% of respondents said they would travel up to 1 hour.</p> <p>They may be excluded from using public transport due to cost and availability. Only 53% of the respondents have access to a car.</p>
New Mills Children's Centre	<p>Parents living in this area may not access services located at other centres.</p> <p>30% of respondents said they would travel up to 10 minutes</p> <p>38% of respondents said they would travel up to 20 minutes.</p> <p>11% of respondents said they would travel up to 30 minutes.</p> <p>4% of respondents said they would travel up to 1 hour.</p> <p>They may be excluded from using public transport due to cost and availability. Only 46% of the respondents have access to a car.</p>
Chapel Children's Centre	<p>Parents living in this area may not access services located at other centres.</p> <p>34% of respondents said they would travel up to 10 minutes</p> <p>27% of respondents said they would travel up to 20 minutes.</p> <p>16% of respondents said they would travel up to 30 minutes.</p> <p>2% of respondents said they would travel up to 1 hour.</p> <p>They may be excluded from using public transport due to cost and availability. Only 61% of the respondents have access to a car.</p>
Gamesley Children's Centre	<p>Parents living in this area may not access services located at other centres.</p> <p>30% of respondents said they would travel up to 10 minutes</p> <p>21% of respondents said they would travel up to 20 minutes.</p> <p>17% of respondents said they would</p>

	<p>travel up to 30 minutes. 10% of respondents said they would travel up to 1 hour.</p> <p>They may be excluded from using public transport due to cost and availability. Only 33% of the respondents have access to a car.</p>
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South Derbyshire and South Dales (SDSD)

A significant amount of consultation feedback is from parents, particularly mothers who benefit from meeting other mother's at various Children's centre activities. There is a lot of anxiety that this sense of community cohesion and low level emotional support gained from such groups will be lost should children's centres close. Parents reference the possible impact of this, citing increases in parental mental health issues etc.

I dread to think of the negative impact it's closure could have on new Mum's struggling to adjust to their new role and feeling isolated!!! Is this not the start of deep imbedded problems that manifest themselves into low motivation, lack of confidence, feelings of loneliness and the onset of more severe physiological issues??? How would this affect our children in the long run? (Etwall respondent).

Newhall Children's Centre	<p>In NCC reach area there are 15 (100%) BME families with children under 5 registered.</p> <p>23 respondents from the consultation classified themselves as white. This was the only ethnic group noted.</p>
Coton in the Elms Children's Centre	<p>There are 8 BME families in the Coton reach area of which 100% are registered. There are 3 traveller parents who are registered with the children's centre.</p> <p>20 consultation respondents classify themselves as white. This was the only ethnic group noted.</p>
Etwall Children's Centre	<p>85 respondents from the consultation classified themselves as White with 2 stating 'other'.</p> <p>Most families are of white British origin in the Etwall reach area.</p>

	<p>Etwall Children's Centre sees one of the largest cohort of travelling families in the authority. Given the nature of this minority group, it is often difficult to determine the total numbers of families in the area. The centre and its partner agencies has good links with the local traveller sites with a mix of agencies regularly visiting the site. Those who visit the sites include children's centre staff, MAT staff, Health, social care and elected home education service.</p> <p>The centres largest ethnic minority groups predominantly live in the Stenson Fields area which borders Derby City. These families rely heavily on the outreach support offered by the centre given the challenge they face with public transport as previously described. Data tells us the centre has a population of 43 from Ethnic Minority group however records 86 BME families as registered with the centre. The centre records 63% participation with this cohort.</p>
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5. Protected Group

Gender reassignment – including impact, if any, on transgender people

Gender reassignment is not a key factor affecting the delivery of the service and is therefore not relevant to the analysis.

6. Protected Group

Religion and belief including non-belief, including religious minority communities, Humanists

Data relating to communities is not available and is not relevant for the purposes of this analysis.

7. Protected Group

Sexual orientation – including the impact, if any, on any lesbian, gay and bisexual people

The sexual orientation of parents is not a determining factor in the delivery of Children Centre services and is therefore not relevant to this analysis.

8. Protected Group

Pregnancy and maternity – including new mothers/ parents

- a) From existing data and information – who is likely to be adversely affected, how, and to what degree? Will anyone gain or benefit from the proposals?

Amber Valley

Somercotes Children Centre	<p>There are 2 children in care and 1 child protection child registered with the Somercotes children centre.</p> <p>Number of Parenting Assessments : 0</p> <p>There are 9 teenage parents registered with Somercotes children centre from a known population of 8.</p>
Belper Children Centre	<p>There are 2 children in care and 1 child protection child registered with the Belper children centre.</p> <p>Number of Parenting Assessments : 1</p> <p>There are 4 teenage parents registered with Belper children centre from a known population of 5.</p>
Crich Children Centre	<p>There are 3 children in care and 1 child on a protection plan children registered with the Crich children centre</p> <p>There is 1 teenage parent registered with Crich children centre from a known population of 3.</p>

	Number of Parenting Assessments : 0 There is 1 teenage parent registered with Crich children centre from a known population of 3.
Ripley Children Centre	There are 3 children in care and 4 child protection children registered with the Ripley children centre. Number of Parenting Assessments : 3 There are 4 teenage parents registered with Ripley children centre from a known population of 2.

Bolsover/North East Derbyshire – Arkwright

There are 50 under 1 year olds living in the reach area.

Dronfield, Killamarsh, Eckington

Dronfield Group	
Dronfield Children Centre	There are 1 teenage parents registered with Dronfield children centre from a known population of 2.
Eckington Children Centre	There are 6 teenage parents registered with Eckington children centre from a known population of 6.
Killamarsh Children Centre	There are 1 teenage parents registered with Killamarsh children centre from a known population of 2.

Whaley Thorns

There are 5 teenage parents registered from a known population of 2.

Blackwell, South Normanton, Stonebroom

Blackwell

2 Teenage parents:
2 are registered

2 are participating
100%
0 Pregnant Teenagers

South Normanton

9 Teenage Parents:
9 are registered
9 are participating

Pregnant teenagers
1 is registered
1 is participating
100%

Stonebroom

4 Teen Parents:
4 Are registered
4 Are participating
100%

1 Pregnant teenager
1 registered
1 participating
100%

Clowne

97% participation of babies and mothers.
100% participation from teenage mothers.
100% participation with pregnant teenagers.

Clay Cross and Tupton

There are 4 teenage parents registered from a known population of 2.

There is 1 teenage parent registered from a known population of 2.

Chesterfield

Brampton

There is no accurate information available in respect of new and expectant mothers.

There are 8 teen parents registered at this centre from a known population of 3.

Brimington

There is no accurate information available in respect of new and expectant mothers.

There are 15 teen parents registered at this centre from a known population of 5.

Hasland

There is no accurate information available in respect of new and expectant mothers.

There are 4 teen parents registered at this centre from a known population of 2.

Queen's Park

There is no accurate information available in respect of new and expectant mothers.

There are 6 teen parents registered at this centre from a known population of 4.

Erewash

West Hallam Children Centre	<p>There is 1 child in care and 5 children registered on a child protection plan with the West Hallam children centre.</p> <p>There are 5 teenage parents registered with West Hallam children centre from a known population of 6.</p>
Kirk Hallam Group	
Kirk Hallam Children Centre	<p>There is 1 child in care and 6 children on child protection plan registered with the Kirk Hallam children centre.</p> <p>There are 2 teenage parents registered with Kirk Hallam children centre from a known population of 2.</p>
Sandiacre Children Centre	<p>There are 0 children in care and 6 children on a child protection plan children registered with the Sandiacre children centre.</p> <p>There is 4 teenage parent registered with Sandiacre children centre from a known population of 8.</p>

	The data for mothers accessing ante natal support through children's centres is not collected. Limited information on Health Visitor referrals is received on a centre by centre basis.
Long Eaton Group	
Long Eaton 1 Children Centre	<p>There are 0 children in care and 7 children on a child protection plan children registered with the Long Eaton children centre.</p> <p>There are 6 teenage parents registered with Long Eaton children centre from a known population of 12.</p> <p>The data for mothers accessing ante natal support through children's centres is not collected. Limited information on Health Visitor referrals is received on a centre by centre basis. At this time no information is available for Long Eaton.</p>
Long Eaton 2 Children Centre	<p>There are 5 children in care and 7 children on a child protection plan registered with the Long Eaton 2 children centre.</p> <p>There are 5 teenage parents registered with Long Eaton 2 children centre from a known population of 5.</p>

High Peak and North Dales

Bakewell Children's Centre	<p>There are 0 Children in Care and 0 Child protection Children registered with Bakewell Children's Centre.</p> <p>There are 3 teenage parents registered with Bakewell Children's Centre from a known population of 4.</p>
Wirksworth Children's Centre	There are 1 Children in Care and 2 Child protection Children registered with Wirksworth Children's Centre.

	There are 3 teenage parents registered with Wirksworth Children's Centre from a known population of 1.
Harpur Hill Children's Centre	There are 6 Children in Care and 10 Child protection Children registered with Harpur Hill Children's Centre. There are 6 teenage parents registered with Harpur Hill Children's Centre from a known population of 4.
New Mills Children's Centre	There are 0 Children in Care and 4 Child protection Children registered with New Mills Children's Centre. There are 0 teenage parents registered with New Mills Children's Centre from a known population of 0.
Chapel Children's Centre	There are 0 Children in Care and 2 Child protection Children registered with Chapel Children's Centre. There are 5 teenage parents registered with Chapel Children's Centre from a known population of 2.
Gamesley Children's Centre	There are 0 Children in Care and 2 Child Protection Children registered with Gamesley Children's Centre. There are 4 teenage parents registered with Gamesley Children's Centre from a known population of 4.

South Derbyshire and South Dales (SDSD)

Newhall Grouping.	
Newhall Children's Centre.	We have 19 teenage parents registered at Newhall CC with 100% participating in Centre activities. There are 3 Children in Care registered at the Newhall CC with 100% participating. Newhall CC provide a venue for contact sessions for Social Care, and currently average at 205 adults and children a month –

- b) From existing customer and other feedback including consultation feedback—who is likely to be adversely affected, how and to what degree? Will anyone gain or benefit?

Amber Valley

Summary of who could be affected:

- New parents, breastfeeding mums, volunteers and lone parents:
- Respondents stated that the centres benefit first time mums - for socialisation and support.

“It acts as a way gateway to hearing about other groups and events in the local area.”

- Closure of the centre would adversely impact those with no family nearby and those with no local knowledge of the area.
- New mums seeking to make new friends.
- Those in need of local support for breastfeeding, socialisation and parent support.
- Suffers of post-natal depression.
- Families needing support to access 2 year funding, childcare settings and school.
- The BEAR volunteer peer supporters would receive less supervision and have fewer opportunities to support.
- There would be a loss of the link professional for immediate support for vulnerable parent/child eg. calling a midwife following discussion over a concern.
- Concern has been expressed over how targeted support will be provided with a reduced workforce or by those not sufficiently experienced.

“I’d no longer be able to meet other parents at parenting at parenting groups which is vital for my own well-being as a mum on maternity leave”.

“I would be unable to access professional age appropriate advice and support for my children without going to the GP”.

- Those unable to travel independently

“I’d have to travel to other sites which wouldn’t be possible - not close as this is a rural community, transport links are poor”.

Dronfield, Killamarsh, Eckington

Breastfeeding and parental support are the main reasons why parents reported they used the centres.

Whaley Thorns

Teenage parents.
Expectant and new mother's.

Blackwell, South Normanton, Stonebroom

Blackwell

Teenage parents, pregnant women.

Pregnant teenagers and teenage parents find it difficult to build relationships with professionals through fear of judging their situation. Children's Centres provide an environment of safety and trust and workers have the skills to develop good relationships with the teenagers.

South Normanton

Teenage parents, pregnant women.

Pregnant teenagers and teenage parents find it difficult to build relationships with professionals through fear of judging their situation. Children's Centres provide an environment of safety and trust and workers have the skills to develop good relationships with the teenagers.

Stonebroom

Teenage parents, pregnant women.

Pregnant teenagers and teenage parents find it difficult to build relationships with professionals through fear of judging their situation. Children's Centres provide an environment of safety and trust and workers have the skills to develop good relationships with the teenagers.

New parents also need support with coping with a new baby although all have access to a health visitor for developmental checks support regarding breast feeding and weaning fall to children's centres to provide support. Health budgets are under review and services can be very limited to a worried new parent.

The building has been increasingly used since the reformed multi agency teams by South Normanton MAT staff to work with families and young people.

Consultation quotes from a parent:

'It is the one session per week where I walk two miles each way with a friend to get fresh air and exercise. Once at the centre I am able to socialise with others in my situation, discuss their approaches to elements of parenting, it allows my child to interact with others, she can communicate and play safely with toys aimed at her target group. None of this is possible elsewhere. If this centre closes my nearest will be Alfreton, to which I am not able to reach without public transport'

'Stonebroom is in an isolated location with a very poor bus service, There is no way families on low incomes could reach the suggested centre replacement'.

Clowne

One response as follows:

My daughter in law was informed of the closure of Clowne at very short notice. She is a first time mum and very upset this is happening. No information has actually been given as to why so may are to close down and how a decision to close certain centres down when it is so vital for these new mums to be part of this service.

Clay Cross and Tupton

Teenage parents.
Pregnant mothers.
Midwives/FNP
Teenage parents.
Pregnant mothers.
Midwives/FNP

Chesterfield

Social isolation of new and young mothers was identified as an important consideration in each of the consultations. It was highlighted that this group would be less likely to have their own transport and would find it difficult to access a centre further from home.

Some parents identified the importance of breast feeding support. The breast feeding figures for this locality have dropped recently and the result of closure will impact further.

High Peak and North Dales

High Peak and North Dales Children's Centre's	38 children under 5's in the HPND locality registered with the Children Centres are on a Child Protection Plans. There are 39 teenage parents registered with the Children Centres in HPND. There are 9 children under 5 in care who are registered with a Children Centre within HPND locality.
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	Possible increase in Post Natal Depression as families would not travel for more than 30 minutes, and not all families have access to a car. If Chapel and New Mills are closed it would be difficult for new mothers to use public transport in the time they feel able to travel.
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South Derbyshire and South Dales (SDSD)

New parents, breastfeeding mums, volunteers and lone parents. A regular theme from respondents was that the centres benefit first time mums - for socialisation and support.

“I have enjoyed some of the support groups at Etwall, one I used after only a couple of days after giving birth. If that support was lost close by for parents they will be less likely to succeed at parenting issues”.

“I had invaluable help with breastfeeding from Etwall Children's Centre. I may not have been able to continue without it. I went on to breastfeed my daughter for 18 months and she was rarely poorly as a result and has rarely been ill ever since.”

“I also used the breastfeeding cafe which was a massive support for me. It's so isolating living far away from the city centre. This is my way of meeting other mums and making friends”.

Priority Group

Marriage and civil partnership – also include impacts on lone parents and unmarried couples

- a) From existing data and information – who is likely to be adversely affected, how, and to what degree? Will anyone gain or benefit from the proposals?

Amber Valley

Somercotes Children Centre	<p>529 families with children under 5 years in the Somercotes area have registered with the children centre and of those 50.1% have used the service within the last 12 months.</p> <p>There are 42 lone parents registered with Somercotes children centre from a known population of 135.</p>
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	There are 238 fathers registered at Somercotes children centre from a known population of 631.
Belper Children Centre	<p>575 families with 665 children under the age of 5, of that, 483 children (72.6%) of the under 5's have participated in the last 12 months.</p> <p>There are 53 lone parents registered with Belper children centre from a known population of 80.</p> <p>There are 314 fathers registered at Belper Children Centre from a known population of 671.</p>
Crich Children Centre	<p>342 families with 410 children under the age of 5, of that, 253 children (61.7%) of the under 5's have participated in the last 12 months.</p> <p>There are 14 lone parents registered with Crich children centre from a known population of 40.</p> <p>There are 224 fathers registered at Crich children centre from a known population of 530.</p>
Ripley Children Centre	<p>77% of parents with children under 5 years in the Ripley area have registered with the children centre and of those 51% have used the service within the last 12 months.</p> <p>There are 59 lone parents registered with Ripley children centre from a known population of 130.</p> <p>There are 358 fathers registered at Ripley children centre from a known population of 685.</p>

Whaley Thorns

There are 32 lone parents registered in the reach area from a known population of 45 with participation being 44%.

There are 140(65%) fathers registered from a known population of 213 with 21%.participating.

Blackwell, South Normanton, Stonebroom

Blackwell

Lone parents

Population: 60

16 participating 26.7%

23 registered 38.3%

Lone fathers

Population 393

65 participating 16.5%

237 registered 60.3%

South Normanton

Lone parents

Population: 95

Participation is 32 33.7%

Registration is 44 46.3%

Lone fathers

Population 73

Participating 74 11.2%

Registered 391 59%

Stonebroom

Lone parents

Population is 70

Participation is 24 34.3%

Registration is 50 71.4%

Lone fathers

Population 449

Participating 41 9.1%

Registered 286 63.7%

Clowne

29.1% participation with lone parents.

Clay Cross and Tupton

There are 50 lone parents registered in the reach area from a known population of 85 with participation being 32%.

There are 280 (66%) fathers registered from a known population of 419 with 10% participation.

There are 16 lone parents registered in the reach area from a known population of 25 with participation being 7%.

There are 211 (51%) fathers registered from a known population of 407 with 7% participation.

Youth workers and PAs could work more closely together with remaining CC staff to offer aspirational and social support to teen parents.

Chesterfield

Brampton

There are 35 lone parents registered from a known population of 95.

Brimington

There are 68 lone parents registered from a known population of 150.

Hasland

There are 31 lone parents registered from a known population of 85.

Queen's Park

There are 38 lone parents registered from a known population of 45.

Erewash

West Hallam Children Centre	<p>646 families with children under 5 years in the West Hallam area have registered with the children centre and of those 63.5% have used the service within the last 12 months.</p> <p>There are 59 lone parents registered with West Hallam children centre from a known population of 110.</p> <p>There are 509 fathers registered at West Hallam children centre from a known population of 740.</p>
Kirk Hallam Group	

Kirk Hallam Children Centre	<p>651 of parents with children under 5 years in the Kirk Hallam area have registered with the Children Centre and of those 61.9% have used the service within the last 12 months.</p> <p>There are 59 lone parents registered with Kirk Hallam children centre from a known population of 105.</p> <p>There are 470 father registered at Kirk Hallam Children Centre from a known population of 746.</p>
Sandiacre Children Centre	<p>790 of parents with children under 5 years in the Sandiacre area have registered with the Children Centre and of those 44.1% have used the service within the last 12 months.</p> <p>There are 77 lone parents registered with Sandiacre children centre from a known population of 165.</p> <p>There are 454 fathers registered at Sandiacre children centre from a known population of 1059.</p>
Long Eaton Group	
Long Eaton 1 Children Centre	<p>603 of parents with children under 5 years in the Long Eaton area have registered with the Children Centre and of those 55.4% have used the service within the last 12 months.</p> <p>There are 95 lone parents registered with Long Eaton children centre from a known population of 155.</p> <p>There are 404 fathers registered at Long Eaton children centre from a known population of 697.</p>
Long Eaton 2 Children Centre	<p>739 of parents with children under 5 years in the Long Eaton area have</p>

	<p>registered with the children centre and of those 49.4% have used the service within the last 12 months.</p> <p>There are 72 lone parents registered with Long Eaton children centre from a known population of 110.</p> <p>There are 478 fathers registered at Long Eaton Children Centre from a known population of 910.</p>
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High Peak and North Dales

Bakewell Children's Centre	There are 21 lone parents registered with Bakewell Children's Centre.
Wirksworth Children's Centre	There are 11 lone parents registered with Wirksworth Children's Centre.
Harpur Hill Children's Centre	There are 48 lone parents registered with Harpur Hill Children's Centre.
New Mills Children's Centre	There are 42 lone parents registered with New Mills Children's Centre.
Chapel Children's Centre	There are 32 lone parents registered with Chapel Children's Centre.
Gamesley Children's Centre	There are 36 lone parents registered with Gamesley Children's Centre.

South Derbyshire and South Dales (SDSD)

Newhall Group – The reach area for Newhall grouping has a population of 210 lone parents. 155 (73.8%) of these are registered with the Centres and 50% are participating.	
Newhall Children Centre	There are 72 (60%) lone parents registered with Newhall children centre from a known population of 120.
Coton in the Elms	<p>There are 35 lone parents living in the reach area of which 18 are registered (51.4%).</p> <p>There are 313 fathers living in the reach area with 143 registered (45.7%).</p>

Etwall Children's centre	There are 95 lone parents in the centres reach area with 70% registered and 45% accessing its services.
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- b) From existing customer and other feedback including consultation feedback—who is likely to be adversely affected, how and to what degree? Will anyone gain or benefit?

Amber Valley

Summary of who could be affected:

Single parents

- Single parent with no family around – “I would have been lost without their support”.
- Those supported by regular visits and support from family support worker.

Whaley Thorns

Data relating to communities is not available and is not relevant for the purposes of this analysis.

Blackwell, South Normanton, Stonebroom

Increased social isolation is a real concern; some families wish to remain ‘under the radar of services.

Issues such as domestic violence, poverty and school readiness are hidden and do not reach services until crisis point. If services were to reduce Stonebroom could be the hub for delivery of children's services and could pick up these families before crisis happens and the drain on front line ‘urgent’ services diminished.

South Normanton

Increased social isolation is a real concern for newly arrived eastern European families, some wishing to remain ‘under the radar of services.

Issues such as domestic violence, poverty and school readiness are hidden and do not reach services until crisis point. If services were to reduce Pinxton youth centre could be the hub for delivery of children's services and could pick up these families before crisis happens and the drain on front line ‘urgent’ services diminished.

Services can be delivered from Pinxton youth centre. Lone parents are unlikely to be able to afford public transport and can lack motivation through social isolation and self-esteem to enable them to go further for support

Stonebroom

Increased social isolation is a real concern; some families wish to remain 'under the radar of services.

Issues such as domestic violence, poverty and school readiness are hidden and do not reach services until crisis point. If services were to reduce Stonebroom could be the hub for delivery of children's services and could pick up these families before crisis happens and the drain on front line 'urgent' services diminished.

Services can be delivered from Stonebroom children's centre as a Hub for delivery. Lone parents are unlikely to be able to afford public transport and can lack motivation through social isolation and self-esteem to enable them to go further for support.

Clay Cross and Tupton

Data relating to communities is not available and is not relevant for the purposes of this analysis.

Chesterfield

Lone parents are an already isolated group, often on limited income.

The closure of local centres will further isolate them and make access to information, support and adult education more difficult.

This may have an impact on their aspirations for themselves and their children.

They may become Troubled Families.

High Peak and North Dales

High Peak and North Dales Children Centre's

Lone parents living in HPND may not access services at Gamesley, Chapel, New Mills, Harpur Hill, Bakewell and Wirksworth Children's Centres as it could take in excess of 30 minutes to travel to those centres that are staying open and the majority of respondents have stated that this is the maximum time they would be prepared to travel for. They may be excluded from using public transport due to cost and availability.

Priority Group

Poorer and disadvantaged communities and groups, including people who experience financial exclusion

- a) From existing data and information – who is likely to be adversely affected, how, and to what degree? Will anyone gain or benefit from the proposals?

Amber Valley

Somercotes Children Centre	There are 7 families registered with domestic violence in the family from a known population of 9.
Belper Children Centre	There are 3 families registered with domestic violence in the family from a known population of 4.
Crich Children Centre	There is 1 families registered with domestic violence in the family from a known population of 1.
Ripley Children Centre	There are 4 families registered with domestic violence in the family from a known population of 4.

Dronfield, Killamarsh, Eckington

Dronfield Group	
Dronfield Children Centre	There are 9 families registered with domestic violence in the family from a known population of 10.
Eckington Children Centre	There are 5 families registered with domestic violence in the family from a known population of 12.
Killamarsh Children Centre	There are 2 families registered with domestic violence in the family from a known population of 5.

Whaley Thorns

A duty does exist to ensure those families living in areas of greatest need, being in a deprived area, have sufficient access to services for children and families (provided as part of a children's centre).

Additional travel costs may be incurred by families living in the areas if they have to travel further afield to a nearby Children's Centre or to an alternative provision. Families should not be put at a disadvantage and miss the opportunity to access groups or services; there is a responsibility to minimise any additional travel costs to

service users by ensuring the communication of local community groups although there are none in the area.

The centre is part of the SureStart Phase One Programme and is a satellite of the main centre in Shirebrook which is 2.8 miles away. It is ranked 6th out of 54 children's centres for being situated in an area of highest deprivation.

The area sits within Deciles 1-2.

	Population	Registered No.	Reg. %	Part. Of Population	Part. %
Langwith	307	265	86.3%	221	72%
Decile 1	116	97	83.6%	91	78.4%
Decile 2	191	168	81.5%	130	69.1%

The centre itself is a former school building and shares its grounds with Scarcliffe Parish Council. Whaley Thorns Community Primary and Nursery School are close by, being just a few minute walk away. The centre is spacious with good facilities and resources. It hosts safeguarding meetings, disability services, adult education services and provides families with an opportunity to meet in a safe environment with appropriate resources including sensory area.

Whaley Thorns is a rural village, mainly residential area. Local amenities include a post office, general store, cafe, GP Practice, pharmacy, train station and bus routes albeit limited. Two nursing homes employ mostly local people.

267 children are registered as living in the top 30% most deprived out of a known population of 307, with 72.6% participation.

Dependent 0-4s in Workless Households

2014 data	Population	Workless households
Langwith	85	32.4%

This figure is higher than the Derbyshire average of 21.3% of children under the age of 5 living in a workless household. Unemployment is known to be high in the area.

There are 32 lone parents registered in the Langwith reach area from a known population of 45.

71% are registered with 37% participation. These parents are all in receipt of income support.

There are 4 families registered with domestic violence in the family from a known population of 3 with 100% participation.

There are 2 children in care and 3 child protection children registered.

Local evidence suggest families are reluctant to access services in Shirebrook..

5 respondents said they would use their own car to access services.

Blackwell, South Normanton, Stonebroom

Blackwell

Under 5's 30 % most deprived

Population 171

135 participating 78.9%

149 registered 87.1%

South Normanton

Under 5's 30 % most deprived

Population 252

168 participating 66.7%

212 registered 84.1%

Stonebroom

Under 5's 30 % most deprived

Population 203

133 participating 65.5%

178 registered 88.7%

Clowne

Dependent children in workless households 0 – 4s is 265.

Dependent children in workless households 0 – 5 years is 445.

Clowne has pockets of high deprivation. In the highest areas of deprivation 91% of children under 5 participate with the children's centre. (190).

Clay Cross and Tupton

Clay Cross is part of the SureStart phase two programme. Being 1.7 miles away from Alice's View, the nearest phase one Children's Centre. It is ranked 6th out of 54 children's centres for being situated in an area of high deprivation.

420 children are registered as living in the top 30% most deprived out of a known population of 473, with 88.8% participation. Clay Cross is within deciles 2 and 4 most deprived

	Population	Registered No.	Reg. %	Part. Of Population	Part. %
C/Cross	473	420	88.8%	329	69.9%
Decile 2	288	251	84.7%	188	60.2%
Decile 3	185	166	89.4%	138	75.8%

The designated Children's Centre is a room within an DCC Adult Education Centre. Facilities and resources.

Clay Cross is a town surrounded by rural villages. It is close to the town of Chesterfield, sited 5.8miles away (22 minutes). There are good local amenities both central and nearby which include a large supermarket, market place, library, adult education centre, social care office, GP's and dentists. Clay Cross has a good public transport infra structure in and around the area.

Dependent 0-4s in Workless Households

2014 data	Population	Workless households
C/Cross	50	10%

This is under the Derbyshire average of 21.3% of children under the age of 5 living in a workless household.

There are 50 lone parents registered in the Clay Cross reach area from a known population of 50.

These parents are all in receipt of income support.

There are 4 families registered with domestic violence in the family from a known population of 4 with 100% participation.

5 child protection children, all are registered. Data not available for children in care.

40% of respondents said they would use their own car and 27% would travel by bus to access services.

39% of respondent s said they would be willing to travel 10minutes to access another location and 21% willing to travel up to 20 minutes.

Tupton Children's Centre is part of a third wave SureStart programme. Being 1.7 miles away from Alice's View, the nearest phase one Children's Centre. It is ranked 40th out of 54 children's centres for being situated in an area of high deprivation.

The area sits within Deciles 2 and 4.

	Population	Registered No.	Reg. %	Part. Of Population	Part. %
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Tupton	138	101	73.2%	85	61.6%
Decile 2	95	67	70.5%	55	57.9%
Decile 4	43	34	79.1%	30	69.8%

Tupton CC is a purpose built building situated on the grounds of Tupton Primary school. It has good facilities and resources.

The village of Tupton is 1.9 miles and a 7 minute journey to the town of Clay Cross and 20 minutes (4.5miles) to the town of Chesterfield. Local amenities include a primary and secondary school, GP practise, post office/convenience store, fish and chip shop, youth centre, church and hairdresser's.

67 children are registered as living in the top 30% most deprived out of a known population of 95307, with 57.9% participation.

Dependent 0-4s in Workless Households

2014 data	Population	Workless households
Tupton	50	10%

This figure is higher than the Derbyshire average of 21.3% of children under the age of 5 living in a workless household.

There are 16 lone parents registered from a known population of 25. These parents are all in receipt of income support.

Data not available There are 4 families registered with domestic violence in the family from a known population of 3 with 100% participation.

There is 1 child in care and 1 child protection children, neither are registered.

37% of respondents said they would travel by bus and 33% would use their own car to access services.

37% of respondents said they would be willing to travel 10minutes to access another location and 21% willing to travel up to 20 minutes.

Chesterfield

Brampton

326 children in the top 30% most deprived in England are registered at the centre from a known population of 375

1 looked after child is registered at the centre from a known population of 0

2 children subject to child protection plans registered with the centre from a known population of 4

Brimington

626 children in the top 30% most deprived in England are registered at the centre from a known population of 782

4 looked after children are registered at the centre from a known population of 3

6 children subject to child protection plans registered with the centre from a known population of 5

Hasland

92 children in the top 30% most deprived in England are registered at the centre from a known population of 96

3 looked after children are registered at the centre from a known population of 2

1 child subject to child protection plans registered with the centre from a known population of 2

Queen's Park

458 children in the top 30% most deprived in England are registered at the centre from a known population of 532

1 looked after child is registered at the centre from a known population of 1

4 children subject to child protection plans registered with the centre from a known population of 4

Erewash

West Hallam Children Centre	<p>There are 283 children living in the 30% most deprived areas of which 270 are registered</p> <p>There are 165 children under 5 living in workless households of which 17 are registered</p> <p>There are 5 families registered with</p>
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	domestic violence in the family from a known population of 11.
Kirk Hallam Group	
Kirk Hallam Children Centre	<p>There are 863 children living in the 30% most deprived areas of which 661 are registered</p> <p>There are 190 children under 5 living in workless households of which 23 are registered</p> <p>There are 7 families registered with domestic violence in the family from a known population of 12.</p>
Sandiacre Children Centre	<p>There are 365 children living in the 30% most deprived areas of which 261 are registered</p> <p>There are 245 children under 5 living in workless households of which 18 are registered</p> <p>There are 5 families registered with domestic violence in the family from a known population of 15.</p>
Long Eaton Group	
Long Eaton 1 Children Centre	<p>There are 596 children living in the 30% most deprived areas of which 455 are registered</p> <p>There are 215 children under 5 living in workless households of which 22 are registered</p> <p>There are 15 families registered with domestic violence in the family from a known population of 16.</p>
Long Eaton 2 Children Centre	There are 220 children living in the 30% most deprived areas of which

	<p>156 are registered</p> <p>There are 160 children under 5 living in workless households of which 13 are registered</p> <p>There are 10 families registered with domestic violence in the family from a known population of 12.</p>
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High Peak and North Dales

Bakewell Children's Centre	<p>5.4% of children aged 0-4 living in Bakewell live in workless households</p> <p>3.98% of children qualify for free school meals</p>
Wirksworth Children's Centre	<p>12.7% of children aged 0-4 living in Wirksworth live in workless households</p> <p>8.14% of children qualify for free school meals</p>
Harpur Hill Children's Centre	<p>8.68% of children aged 0-4 living in Harpur Hill live in workless households</p> <p>10.13% of children qualify for free school meals</p>
New Mills Children's Centre	<p>15.69% of children aged 0-4 living in New Mills live in workless households</p> <p>9.41% of children qualify for free school meals</p>
Chapel Children's Centre	<p>10.21% of children aged 0-4 living in Chapel live in workless households.</p> <p>6.49% of children qualify for free school meals</p>
Gamesley Children's Centre	<p>23.32 % of children residing in the reach area of Gamesley Children's Centre are eligible for free school meals. 36.67% of children aged 0-4 living in Gamesley live in workless households.</p>

South Derbyshire and South Dales (SDSD)

<p>Newhall Grouping – In the Newhall grouping there are 350 families with children under 5 who are living in workless households.</p>

	<p>7.</p> <p>9.5% of the centres reach area are children living in workless households. In partnership with Job Centre Plus, the centre recently delivered Job Club sessions which saw 2 families enter into employment. 100% of the centres cohort of unemployed parents are seeking support from JCP.</p> <p>80% of those living in workless households are lone parents and 84% of those lone parents have received parenting support.</p> <p>A third of the referrals received by the centre were for support with DV. 100% of those referred were offered specialist DV services support which is delivered direct form the centre by Next Steps. All families referred for outreach support are offered a CAB appointment with over a third taking up specialist support which has contributed to improving their financial stability.</p>
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- b) From existing customer and other feedback including consultation feedback—who is likely to be adversely affected, how and to what degree? Will anyone gain or benefit?

Amber Valley

Somercotes Children Centre	<ul style="list-style-type: none"> • Those families who want to attend classes. • Those families unable to afford the cost of getting to alternative services. • Parents unable to travel to other centres due to low income and financial issues. • The centre provides a place for parents to go to when they are struggling. • The community cohesion the centre provides.
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	<p>“Closing centres mean that money is spent further down the line when families hit crisis point and end up requiring social services support rather than being held and supported by their children’s centre”.</p>
Belper Children Centre	<ul style="list-style-type: none"> • Families fleeing DV • “If it wasn’t for the children centre I’d be raising my children in a refuge.” <p>Families with Mental Health issues.</p> <ul style="list-style-type: none"> • “The children centre has helped me with housing, parenting, mental health, accessing courses, accessing childcare, isolation, child development, weaning advice and much more.” • Families which are isolated and on low incomes. <p>by “No other free activities close that are within walking distance, Heanor isn’t close to Belper”.</p> <ul style="list-style-type: none"> • Families who benefit from information, social interaction, those who need support to reach services. • Families with no independent travel –travel takes too long and not viable with young children. <ul style="list-style-type: none"> • Increase in referrals to Belper foodbank from 3 mile radius of children centre. 33/92 in 2016 from the children centre. • 2 local pre-schools have recently closed in Belper.

Crich Children Centre	<ul style="list-style-type: none"> • Those with no independent means of travel – especially those on low incomes. • Bus users ; Limited bus routes, further travel would incur costs to users. <p>“Lack of support as wouldn’t go to Alfreton”.</p> <p>“Transport is not good so wouldn’t go anywhere”.</p> <p>“I do not have a car”.</p>
Ripley Children Centre	<ul style="list-style-type: none"> • Those families with restricted budgets. • Those who live in identified areas of need. • <p>“Don’t close centres that are in areas of need – as a teacher I can see long term implications”.</p> <ul style="list-style-type: none"> • As a parent the centres proposed to be kept open are not easily accessible by public transport or foot. • Those families that benefit from accessing services regularly. <p>“There are other groups in the area but they cost so I wouldn’t be able to go every week”.</p>

Whaley Thorns

Families with no transport unable to walk to their local centre to access services.

Parents and children with disabilities.

Families experiencing social isolation with a lack of local safe places to meet and access good quality play and learning opportunities.

Reduction in local healthcare services resulting in children not reaching their developmental milestones with increased numbers of children not ready for school.

Pressure on other agencies to break the cycle of benefits claimants and raise aspirations for future generations.

Blackwell, South Normanton, Stonebroom

Citizens Advice Bureau.

Blackwell, South Normanton & Stonebroom .

12 month period CAB have advised 104 clients regarding financial/debt issues.

Troubled Families

South Normanton reach area:

15 families with children under 5 years

Substance misuse	Debt/finance	Domestic Violence	Parental Mental Health	Worklessness
2	3	4	9	4

Clay Cross and Tupton

Families with no transport, lack of funds and/or those unable to walk to their local centre to access services.

Parents and children with disabilities.

Families experiencing social isolation with a lack of local safe places to meet and access good quality play and learning opportunities.

Lack of affordable local childcare provisions with increased numbers of children not ready for school.

Pressure on other agencies to break the cycle of benefits claimants and raise aspirations for future generations.

High Peak and North Dales

High Peak and North Dales Children's Centre's	Children who live in workless households and /or are eligible for free school meals who are living in HP&ND may not access services at Children's Centres that are remaining open as it would take in excess of 30 minutes to travel to those centres and the majority of respondents have stated that this is the maximum time they would be prepared to travel for. They may be excluded from using public transport due to cost and availability. Children would miss out on socialisation and care including holiday activities. There would be a lack of local places for parents to meet if both New Mills and
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	Chapel Children's Centres were closed. Families would miss out on the health clinics held at the centres. Parents would not be able to volunteer within the Children's Centre to build up their skills and knowledge.
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South Derbyshire and South Dales (SDSD)

Parents who have a limited budget are likely to be adversely affected. This is particularly relevant for those who rely on public transport. Some of the quotes are seen below.

I don't drive and am on a budget. We use the play groups to bring on the children's social skills.

I wouldn't be able to go as have no car to drive to other places and can't afford to catch bus all time to much money when on tight budget.

It would mean that I would not travel to other children's centres only for clinics. Excess travel expense.

Several respondents for the Etwall Children's centre query using income levels as criteria for closing their centre. The quote below sums up this view:

Just because the area surrounding the children's centre is in general 'more affluent' than other areas it does not mean that all the local families are well off or have transport. The children's centre is a life line for parents needing regular 'normal' moral support and without it these parents potentially could slip into needing more serious social support and referral from medical professionals which would further strain other council resources rather than attendance to largely volunteer led play and support sessions

Priority Group

Rural communities

- a) From existing data and information – who is likely to be adversely affected, how, and to what degree? Will anyone gain or benefit from the proposals?

Amber Valley

See information in other sections.

Whaley Thorns

Whaley Thorn's is small village.

Blackwell, South Normanton, Stonebroom

Blackwell

Increased social isolation is a real concern; some families wish to remain 'under the radar of services.

Issues such as domestic violence, poverty and school readiness are hidden and do not reach services until crisis point. If services were to reduce Stonebroom could be the hub for delivery of children's services and could pick up these families before crisis happens and the drain on front line 'urgent' services diminished.

South Normanton

Increased social isolation is a real concern; some families wish to remain 'under the radar of services.

Issues such as domestic violence, poverty and school readiness are hidden and do not reach services until crisis point. If services were to reduce Pinxton youth centre could be the hub for delivery of children's services and could pick up these families before crisis happens and the drain on front line 'urgent' services diminished.

Stonebroom

Increased social isolation is a real concern; some families wish to remain 'under the radar of services.

Issues such as domestic violence, poverty and school readiness are hidden and do not reach services until crisis point. If services were to reduce Stonebroom could be the hub for delivery of children's services and could pick up these families before crisis happens and the drain on front line 'urgent' services diminished.

Clay Cross and Tupton

Clay Cross is a market town.

Tupton is a small village in a rural area.

Erewash

West Hallam Children Centre	
Kirk Hallam Group	
Kirk Hallam Children Centre	
Sandiacre Children Centre	Small villages in a partially rural and urban area

Long Eaton Group	
Long Eaton 1 Children Centre	
Long Eaton 2 Children Centre	

High Peak and North Dales

High Peak and North Dales Children's Centre'	HP&ND is a large rural area of approximately 513 square mile radius. This area has poor transport links that are also being under review and will be cut in October 2016. According to health data, there is a higher level of adult suicide in the rural farming communities with the cut of Children's Centres causing rural isolation. Keeping open Gamesley and New Mills Children's Centres this would cut down some of the travel for some families.
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South Derbyshire and South Dales (SDSD)

Etwall Children's Centre

This issue is particularly relevant for Etwall and its reach area.

Etwall Children's Centre is one of the largest rural areas across the authority covering the most villages compared to any other stand alone children's centre group.⁰ In addition to Etwall's reach area and cohort the centre has recently absorbed the Ashbourne reach area for outreach early help services.

Not only would the Etwall families have difficulty accessing Woodville Children's Centre should Etwall close, the Ashbourne families would experience a greater challenge particularly with regards to public transport.

There is no direct bus from Ashbourne to Woodville. Families would have to **take a bus to Derby City centre and another out of Derby to Woodville.** For a family with young children, this would be a difficult task which would **take over two hours for a one way journey** which would also include waiting time.

A similar journey would be required for families from the Etwall reach area. From the Etwall reach area to Woodville, families would need to take an hourly bus service to Burton, wait at least half an hour for a connecting bus then another hourly bus service to Woodville, then the same with the return journey. The cost of this per parent would be around £10. The centres most vulnerable families are not in a

position to afford such journeys, consideration should be given to a parent experiencing unstable emotional wellbeing and two children with challenging behaviour and the difficult situation this is for a parent.

Of course, it is not merely a practical issue. For rural communities the sense of community cohesion and emotional support a children's centre offers is crucial. This is demonstrated in the consultation feedback. There is a lot of concern that low level emotional/mental health issues could escalate over time with a centre closing.

- b) From existing customer and other feedback including consultation feedback—who is likely to be adversely affected, how and to what degree? Will anyone gain or benefit?

Amber Valley

Belper Children Centre	<ul style="list-style-type: none"> • Individuals who have mobility issues, health issues or confidence or mental health needs that prevent them from independently accessing services and meeting people. <p>“I wouldn’t have anyone coming out to me to help me get out to my appointments.”</p> <p>“I can’t get buses because of my health and I can’t walk far I would be stuck on my own again.”</p> <ul style="list-style-type: none"> • Respondents stated that there would be no services to the West of Amber Valley. The rural community is being left isolated and travel to the remaining centres is not straight forward. • Other centres are accessible to car users. Those families who can drive may benefit from being able to access support. • Families with no independent transport or on a low budget. <p>“Travelling to Heanor I would not go”.</p>
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	<p>“Transport is not good to get elsewhere”.</p> <p>“It would be too far to travel to Heanor or Alfreton”.</p> <p>“I would not be confident enough to travel to Heanor to access a similar group”.</p> <p>“Travel – too expensive and impractical with a baby.I –wouldn’t be able to go”.</p> <p>“I would not be able to go up the road and get help”.</p> <p>“If a family is in need it is unlikely that they will get on 2 buses to Heanor. It is unlikely they will have the funds or confidence to do this”.</p>
Crich Children Centre	<ul style="list-style-type: none"> • Respondents stated that some areas are isolated and that not everybody has access to transport or can even afford a bus journey. • Parents with mental health needs: eg. Mothers with postnatal depression would be less likely to travel due to anxiety.
Ripley Children Centre	<ul style="list-style-type: none"> • Families at risk of isolation, reduction in opportunities to make friends and for support when feeling low. Respondents stated that the centres they are proposing to keep open are not always easily accessible for parents who don’t drive.

Whaley Thorns

Low income and unemployed families.

One respondent stated ‘don’t close a decile one area in a rural area’.

Blackwell, South Normanton, Stonebroom

Increased social isolation is a real concern; some families wish to remain 'under the radar of services.

Issues such as domestic violence, poverty and school readiness are hidden and do not reach services until crisis point. If services were to reduce Pinxton youth centre could be the hub for delivery of children's services and could pick up these families before crisis happens and the drain on front line 'urgent' services diminished.

Clowne

Other services in the area such as day care providers either have limited numbers of places for vulnerable children or the facility is not within achievable walking distance. There are very few other family orientated meeting places or facilities where they could be provided from (without a cost).

Clay Cross and Tupton

Low income families.
Expectant mothers.
Victims of DV.

South Derbyshire and South Dales (SDSD)

Examples of feedback from the Etwall consultation are below:

"As a parent who uses public transport, Etwall children's centre is the only centre I can get to weigh my 6 month old regularly. If this was to close, I wouldn't be able to know if I am maintaining a healthy weight".

"The distance to any other children's centre is too far for me".

"Some of the areas are isolated and not everyone has access to transport or even able to afford a bus journey".

"3 buses to get to Swadlincote is not achievable in my school hours".

"Without this local support and facility there will be less sense of community and the strong parenting bond which you find with all parents who attend the centre will disappear".

Impact on employees of Derbyshire County Council or prospective employees

Amber Valley

Somercotes Children Centre	<ul style="list-style-type: none">• Staff respondents have stated they are concerned they will be unemployed.• Staff are concerned that they have built up trust with a community and understand their needs and are concerned that this will impact on vulnerable families.
Belper Children Centre	<ul style="list-style-type: none">• Staff are concerned that there will be a loss of skills and highly trained staff.• Staff respondents have stated the recruitment and potential relocation of staff due to the Review will lead to the need to re-forge relationships with families.• Staff have stated that there will be an impact on Starting Point when considering support for referrals for under 5 year olds.• There will be a loss of shared knowledge with other professionals.
Crich Children Centre	<ul style="list-style-type: none">• As staff will need to cover a larger reach area there will be an increase in mileage costs.• There will be a loss of hot-desking locations for staff usage and venues to meet families.
Ripley Children Centre	<ul style="list-style-type: none">• Staff respondents have stated that their jobs are at risk and that the area serviced by Belper, Crich, Ripley and previously Duffield would not meet requirements for Early Help (Ofsted).

Whaley Thorns

Approximately half of the Centre workforce are Derbyshire residents resulting in their jobs being at risk.

Blackwell, South Normanton, Stonebroom

Feedback from briefing session
Blackwell, South Normanton and Stonebroom
Staff:
More referrals – less staff
Health Visitor review has an impact on DCC services

Different roles in different areas
Concerns over allocation – deprivation data
Accuracy of data

Will children be school ready?
 Not enough 2 year funding provision
 Who will pick up under 5's voice
 Lower staff numbers bigger area
 Lots of child protection who is going to do it when social care can't cope?
 Who will pick up child contact?

Clowne

To support the setting up and promotion of new and existing community and voluntary groups for U5s.

Chesterfield

Staff at all the centres are concerned about their job security.

Staff are concerned about losing the links with the MATs that are currently based at Children's Centres and may be moved further away from the community they serve.

There is a strong view that the wrong decision has been made about the decision to keep Staveley open and to close Brimington. Staff have expressed that the building at Brimington is used for MAT, Youth Groups and for contact in addition to busy health clinic and children's centre groups.

Erewash

West Hallam Children Centre	
Kirk Hallam Group	
Kirk Hallam Children Centre	<ul style="list-style-type: none"> • staff respondents concerned job losses • staff respondents concerned increased pressure on staff • Staff respondents concerned about Reduction in referrals from children centres to other services. • staff respondents concerned about Negative impact of relationships with the community – centres are a valuable resource • staff respondents expressed concern of reduction of school readiness work – will impact on children's attainment
Sandiacre Children Centre	<ul style="list-style-type: none"> • staff respondents concerned about Less staff knowledge and experience being passed to new

	<p>employees</p> <ul style="list-style-type: none"> • A loss of meeting rooms. • Staff respondents concerned Reduction in referrals from children centres to other services. • staff respondents concerned about Job losses
Long Eaton Group	
Long Eaton 1 Children Centre	
Long Eaton 2 Children Centre	<ul style="list-style-type: none"> • staff respondents concerned risk of job losses • increased demand on support services so may not be able to refer families to other agencies

High Peak & North Dales

High Peak and North Dales	<p>Over 50% of the HP&ND Children's Centre staff have answered the questionnaires and 50% of staff were very dissatisfied with the criteria that has been used to decide which centres should close. Should the proposals go ahead there would be a significant reduction in the number of Family Support Workers – Early Help and Foundation Years Practitioners. Currently across the High Peak and North Dales there are 13.5 FTE FSW's and 7 FTE FYP's. The proposal would mean that this area would have 6 FTE FSW and 2 FTE FYP'S. There would be 1.5 proposed Children's Centre Co-ordinators.</p> <p>The FSWs caseloads would significantly change making it necessary to change the thresholds at which family Support would be accepted. The FSW's currently complete Early Help Assessments, 1:1 family support work, Parenting Assessments and supervise contact to enable early help to prevent families going into child protection proceedings. and they are already at capacity. Some</p>
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	<p>FSW's also deliver the Incredible Years 1-8 years and Solihull Approach parenting programme's twice a year in each area, this would significantly have to change as there would not be enough staff or time to deliver the 2 12 week programmes 8 times a year across the High peak and North Dales area. FSWs would not have the capacity to continue with this workload.</p> <p>FYPs would need to travel throughout the locality to deliver EYFS programmes, covering a minimum 72 mile round trip (Glossop to Wirksworth at a mileage cost of £32.40 per worker) to provide a 1 hour session. FYPs would need to be based at a centre for a day to deliver EYFS programmes and/or 1:1 ECaT support in the home. FYP/FSW's would not be available for service users to drop in, in a personal crisis/seeking advice for support from workers as they currently do, as the distance between the centres would make this impossible to have workers available at all centres each day. This work would then fall to the Business Service Assistants to sign post to other professionals.</p>
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Children’s Centre Closures - Summary of Impact on Protected groups and Mitigation Plan

PROTECTED GROUP(STATUTORY)	ADVERSE IMPACT	MITIGATION/ACTION	SPECIFIC NEEDS IDENTIFIED FOR SOME AREAS
Age, including children and families, older people	<ul style="list-style-type: none"> • Will reduce “school readiness” for children preparing to attend school. • Loss of development of socialisation skills for parents and children. • Would not be able to access health services easily • Parents who walk to a centre which may close. • Parents isolated with young babies due to rurality of the area in which they live • Grandparents with mobility issues who bring grandchildren to a centre • Volunteers who have opportunities at the centre • Loss of support for teenage parents 	<ul style="list-style-type: none"> • Ensure information of alternative pre-school support and provision for under 5s that are accessible locally are available to families • Information of alternative centres or services is available through a robust communication process • Transport links - information is given to local parents • Ensure partnership working and access to health services • Teenage parents will be identified and supported through the MAT Personal Advisors and signposted to Family Nurse Partnership if appropriate . • Parenting programmes to be accessible 	
Disabled people including mobility, sensory, learning, mental health, HIV and also carers and relatives	<ul style="list-style-type: none"> • Loss of use of sensory room • Isolation may impact on mental health- post natal depression- fear of travel to other unfamiliar sites 	<ul style="list-style-type: none"> • Centres where there are sensory rooms to have portable equipment or signpost families to other local sensory spaces. • Donate sensory 	

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	<ul style="list-style-type: none"> • Parents who have a disability may find getting to another centre difficult • Support for children awaiting diagnosis of a disability • Support for disabled children who do not meet criteria for support from disability team 	<p>equipment from centre closing to another local venue or group</p> <ul style="list-style-type: none"> • Outreach support to avoid social isolation. • Consider alternative venues and ensure they are accessible to parents/children with disabilities 	
Race- including all racial groups, including impact if any, on Gypsies and Travellers	<ul style="list-style-type: none"> • Centres attract a mixed group of families- no stigmatisation • Isolation for newly arrived and settled East European families and Traveller and Gypsy Families • Language barriers 	<ul style="list-style-type: none"> • Continue to offer services to all communities • Ensure information of alternative services is in any relevant language format. 	
Gender(Sex) including men and women ,boys and girls	None identified		
Gender reassignment- including impact, if any ,on transgender people	<i>Gender reassignment is not a key factor affecting the delivery of the service and is therefore not relevant to the analysis</i>		
Religion and belief including non-belief, including religious minority communities	<i>Data relating to religion and belief is not available and is not relevant for the purpose of this analysis</i>		
Sexual orientation-including the impact, if any, on any lesbian, gay and bisexual people.	<i>The sexual orientation of parents is not a determining factor in the delivery of Children's Centre services and is therefore not relevant to this analysis</i>		
Pregnancy and Maternity-including new mothers and parents	<ul style="list-style-type: none"> • New mums seeking new friends and signposting 	<ul style="list-style-type: none"> • Ensure information is provided on other local 	

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	information to other services <ul style="list-style-type: none"> Breastfeeding mums Parent support Sufferers of Post Natal Depression 	parent groups <ul style="list-style-type: none"> Breastfeeding support could be offered at other local groups or through the Health Visiting Service 	
PROTECTED GROUPS(NON-STATUTORY)			
Poorer and disadvantaged communities and groups, including people who experience financial exclusion	<ul style="list-style-type: none"> Parents unable to afford transport costs to other centres Not having “free” services to access locally Not being able to access new toys or an experience that parents can’t afford Access to Foodbank service delivered from Children’s Centre 	<ul style="list-style-type: none"> Information where CAB advice is available locally where a centre is proposed to close Retain centres where there is a high level of deprivation Maintain links with CAB, Foodbank and Job Centre Plus services Identify children in workless households through the Troubled Families Programme 	
Marriage and civil partnership-also impacts on lone parents and unmarried couples	<ul style="list-style-type: none"> Single/lone parents would lose support and advice 	<ul style="list-style-type: none"> Ensure information of available advice locally is issued 	
Rural communities	<ul style="list-style-type: none"> Individuals with mobility issues would be able to access services Unable to access services with poor travel links Feeling of isolation Excluded from using 	<ul style="list-style-type: none"> Need to ensure good signposting to other local services Support families initially to access these services Work in partnership with other services and 	Additional staffing for rural areas to provide outreach; Stonebroom / Pinxton(North East) New Mills(High Peak) Etwall(South Derbyshire)

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	public transport due to cost and availability <ul style="list-style-type: none"> • Loss of community hub 	voluntary sector, providing outreach support where possible <ul style="list-style-type: none"> • Ensure key services remains accessible within reasonable travelling distance 	
Derbyshire County Council Employees	<ul style="list-style-type: none"> • Unemployment • Loss of skills in workforce • Fewer centres to use as a base • Increased mileage costs • Will need to build new relationships with service users • Increased referrals and less time to deliver Parenting Programmes and ECAT Support • Relocated to sites where there are not MATS or partner agencies 	<ul style="list-style-type: none"> • Re deployment opportunities and support from HR • Offer of VER to groups which will allow for vacancies in other job roles and opportunities for staff • Look at bases of staff to avoid excessive mileage • Workforce Development Plan in place • Work in partnership with schools, health , voluntary sector to share 	

Are there any gaps in information and understanding of the impact of your policy and services? Please indicate whether you have identified ways of filling these gaps.

Gaps in data	Action to deal with this(if any)
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Pregnancy and maternity – including new mothers/ parents The data for mothers accessing ante natal support through children’s centres is not collected.	Going forward there is a need to start collecting this data from health partners to understand what percentage of ante natal parents use a children’s centre. This will be reviewed as part of Derbyshire County Council’s partnership agreement currently under development with Children Centres.
Religion and belief including non-belief, including religious minority communities, Humanists. No collection of this data is currently available	It would be useful to collect this information for more detailed assessments relating to the communities in the future. We will review adding this to Children Centre forms as part of the single assessment and Children Centre registration process.
BME data is not collected until the child is of school age (5).	Data needs collecting at the earliest opportunity prior to school admission at age 5 years.

Health response to children centre consultation

Parents only feedback

1. Introduction

Public Health have extrapolated and summarised parent response data relevant to health provision from the Children Centre Consultation to enable DCHS and Public Health to identify approaches to mitigate the impact of the closures, and alongside this to prompt further discussion and planning around service integration and to maximise the use of resources.

2. Public Health general mitigating factors:

Commissioned Services

- **Breastfeeding Peer Support** covers Derbyshire County. Contract in place until 2017.
- **Children’s Public Health Provision 0-19’s** Contract in place until 2018 with a possibility of plus one year – Health Visiting mandated provision in place until 31st March 2017 then await further guidance.
- **Family Nurse Partnership (FNP)**. Targeted teenage mother support with entry criteria. Delivered in all areas except High Peak and Derbyshire Dales. Contract October 2017.
- **Integrated Sexual Health Service (ISHS)** is a mandated service. Contract in place until 2017. Possibility of plus two years. Delivered county-wide by DCHS, the lead provider and includes other providers – Chesterfield Royal Hospital staff, Pharmacy, general practice and voluntary sector. ISHS delivers a comprehensive sexual health service across a range of settings some co-located with other services. Delivery includes:
 - STI testing and treatment (incl. Chlamydia screening)
 - Contraception (including Long Acting Reversible Contraception and Oral Emergency Contraception)
 - Sexual Health aspects of Psychosexual counselling
 - Targeted Sexual Health Promotion including HIV Prevention
 - Prevention and self-care is across the whole service.

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- **HENRY.** Delivered via Children’s Services and Health Visitors. New contract 1st April 2016 – 31st March 2017.
- **CAB and Food Bank Provision** (reliant on continuation of funding to ensure local access – e.g. Public Health core funding is 50% and possibly additional resource from the Prevention Fund). CAB is delivered in all children centres, where centres are subject to closure it is incumbent upon CAB to provide the community with information where alternative provision can be accessed. There is significant provision in each locality where CAB is delivered in GP surgeries.
- **Substance Misuse Services.** The Specialist Substance misuse service for children and young people is currently commissioned until 31st March 2017. There will be a new contract from April 2017 following a procurement process that is currently underway. The service for Children and Young People affected by the substance misuse of others is being delivered by service level agreement until the 31st March 2017. From the 1st April 2017, there will be a new contract, prior to which there will be a procurement process where organisations will be invited to apply for the contract. For both of these services, the new contracts will initially be for 3 years with the option to extend.
- **Live Life Better Derbyshire** - Derbyshire integrated wellbeing approach (wellbeing, weight management, smoking cessation, physical activity, MECC – Contract October 2017).

Derbyshire Community Healthcare Services (DCHS)

Key themes of concerns from all clusters:

- Potential impact on effective integrated working and communication sharing between Health and Children Centre workforce when provision are no co-located
- Closure of children centres will require DCHS to source alternative accommodation to delivery services currently delivered within the centres. Alternate accommodation may potentially be non-child and family friendly, restrictive open times and less responsive to needs of parents e.g. GP surgeries, community
- Reduction in Children centre premises to bring children in for their healthy child development reviews including integrated 2 year reviews
- Reduction in UNICEF Baby Friendly children centre sites to facilitate breastfeeding support and other parenting groups
- Limited sites to offer early language support such as ECAT and other Early Years sessions
- Potential impact on breastfeeding sustainment.

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Overall mitigation - all Clusters

- Delivery of core health activities within Children’s Centres facilitates good integration and communication between the two services and reduces barriers to families accessing provision provided by the centres.
- In the event of a children centre closing, DCHS health staff will retain good links with the Children centre workforce by meeting regularly to share referrals and information at allocation meetings, offer hot desk facilities in all Children Centre and DCHS Health premises.
- Promote with all families use of social media to access support for local information and ask advice from a health professional via Website and Facebook and also signpost to team contact details.
- Increase home visits to families when accessing appointments in community venues is challenging or inappropriate.
- Reduced opportunities/sites to conduct integrated 2 year reviews with Health and Early Years within children’s centres will look at the reviews taking place in an alternative venue such as a Health Centre or undertaken in child’s home.
- Reduction in UNICEF Baby Friendly community venues for Breastfeeding support, alternative venues sourced will be checked to ensure they are UNICEF compliant.
- Signpost breastfeeding mothers to local Breastfeeding groups, DCHS breastfeeding website, peer supporters and specialist advisors.

Impact upon the 0-19 Children and Young People’s Contract.

- The delivery of the 0-19 Children and Young People’s Contract is dependent upon joint and integrated working arrangements with Children’s Services and good referral pathways to collaboratively respond to children and families with more complex needs. The financial aspect of the contract has no flexibility. Therefore the concern is directly related to the joint capacity to respond effectively to children and families with additional needs. There will be an impact upon shared premises with the loss of physical resource to jointly accommodate staff and deliver services.

3. Key health themes from parental responses:

Quantitative and qualitative parental response data by each cluster area children’s centres is set out in the tables below.

The emergent key themes identified are in relation to health provision:

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- Socialisation and emotional wellbeing and the importance of meeting peers and receiving professional help as appropriate.
- Travel and access to child health provision particularly with young children and sporadic bus provision and the associated costs.
- Access to health information that included parenting support, promoting health, CAB, child and family health services, food nutrition and weaning advice, physical development and family fitness.
- Breastfeeding support and value of the groups had a high response.

9. Action planning in response to the completed analysis

<i>Objective</i>	<i>Planned action</i>	<i>Who</i>	<i>When</i>	<i>How will this be monitored?</i>
<i>What you want to achieve</i> Families currently using children’s centres proposed for closure are informed of closure dates, alternative local services(with transport information) or community provision	<i>What you intend to do</i> Write to all registered families at each centre with clear information about the changes with contact numbers and alternative centres and local services	<i>Responsible person or department</i> MAT Managers/Children’s Centre Coordinators	<i>Timing of action</i> Achieved by September 1 st 2016	<i>Monitoring and review arrangements</i> Monitoring to ensure process is complete by Lead for Children’s Centres and Heads of Service(Locality)
Robust communication process for information on alternative services	All local children’s service providers receive clear information about pre-	MAT Managers/Children’s Centre Coordinators	4 weeks to prior of centre closure	Monitored by Heads of Service

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or centres	school support, local groups and activities so they can also signpost families			
	Ongoing monitoring of impact	MAT Managers to report concerns to Lead for Children’s Centres	From implementation of change date.	MAT Managers/Children’s Centre Coordinators to report to Lead for Children’s Centres
Monitor and review the situation once the proposals are implemented to ensure no unforeseen effects have occurred	Inform Members and consider further mitigations if the outcomes are more negative than anticipated	MAT Managers to Feedback to Heads of Service(Locality)	Ongoing during transition and follow up	Heads of Service/MAT Mangers
Support local voluntary sector and community groups to develop groups for 0-5s where appropriate	To encourage parents and the voluntary sector to take ownership of services in the community	Children’s Centre Coordinators/Community Engagement Workers	Ongoing until established	MAT Managers
Identify if there is a need to reach BME population in the area who are accessing the centre	To ensure service users with language barriers are not excluded from receiving information in	Children’s Centre Coordinators	By September1st	MAT Managers

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and ensure communication methods are put in place	relation to the change in service delivery			
Ensure Teenage parents are still identified and offered support	To ensure teenage parents are identified and signposted to family Nurse Partnership if required or any other further support	Multi Agency Team Personal Advisors	From point of closure of centre onwards	Personal Advisors/MAT Managers
Ensure Parenting Programmes are still accessible to parents who need support	To ensure parents know where they can access support and to be aware of a point of contact	Children’s Centre Coordinators and partner agencies	4 weeks before closure of centre	MAT Managers
Ensure where centres are closing that have previously had sensory rooms, equipment is available locally	Distribute sensory equipment from centres closing to other local provision s for 0-5s e.g day care provision	Children’s Centre Coordinators	4 weeks before closure	Children’s Centre Coordinators
Reduce social isolation in rural areas	Consider outreach work in homes where there is a staffing provision Identify community or alternative venues to deliver services to areas where isolation is a risk	MAT Managers/Children’s Centre Coordinators	Identify during transition and put in place, if needed from date of centre closing	MAT Managers

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Support Breastfeeding	Contact other local groups for parents and Health Visitors to support breastfeeding and signpost to support groups	Coordinators/Health partners	Identify during transition and inform parents prior to centre closure	Children's Centre Coordinators
Ensure information where there is access to CAB and Foodbanks is available	Inform parents of other local venues where Foodbanks and CAB services can be accessed	MAT Manager Children's Centre Coordinators	Identify during transition and inform parents prior to centre closure	Children's Centre Coordinators
Ensure we are still reaching the most vulnerable families	Identify families in greatest need through Troubled Families Programme	All members of the Multi Agency Teams, Health Visitors, Day Care, Early Years Team	Ongoing	MAT Managers/Heads of Service
Support the Derbyshire Workforce	Offer VER where appropriate Support with re deployment Reduce travel to work bases Work in partnership with schools voluntary sector, health to reduce work loads Support with workforce development plan	HR team	Throughout process	Heads of Service/HR/MAT Managers/Lead for Children's Centres

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APPENDIX 4

CHILDREN’S CENTRE REVIEW/CLOSURES **INDICATIVE TIMETABLE**

Activity	Timescales
• Cabinet	• 14 June 2016
• Commence formal consultation – Issue Section 188 Notices to employees and trade unions. Staff who are ‘group at risk’ are advised accordingly.	• 22 June 2016
• Consultation meetings	• 29 June to 8 July 2016
• Management consider responses to initial consultation and make changes to proposals as necessary	• w/c 11 July 2016
• Write to individuals with the outcome of initial consultation, the selection criteria assessment form/ process and invitation for VR/VER	• w/c 18 July 2016
• Panels to undertake selection out process for new structures, by Locality followed by consideration/approvals of VR/VER requests	• 8 August to 30 September 2016
• Completion of VR/VER approvals and selection out process	• 30 September 2016
• Individuals notified in writing of the outcome of the selection out process/VR/VER applications and advised of right to individual consultation (representation) meeting and where appropriate informed of ‘individual at risk’ status	• w/c 3 October 2016
• Individual consultation (representation) Meetings	• w/c 17 October 2016
• Individuals notified of outcome of individual consultation (representation) meetings	• w/c 24 October 2016

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| • End of formal consultation with trade unions and employees | • 28 October 2016 |
| • Issue 12 weeks compulsory redundancy notice to staff not placed in the new structure or released under VR/VER schemes and provide right of appeal to Elected Members | • w/c 31 October 2016 |
| • Final date for receipt of appeal notification | • 18 November 2016 |
| • Appeal hearings | • December 2016/January 2017 |
| • Final date of dismissal | • 29 January 2017 |
| • Implementation date for new structures | • 30 January 2017 |

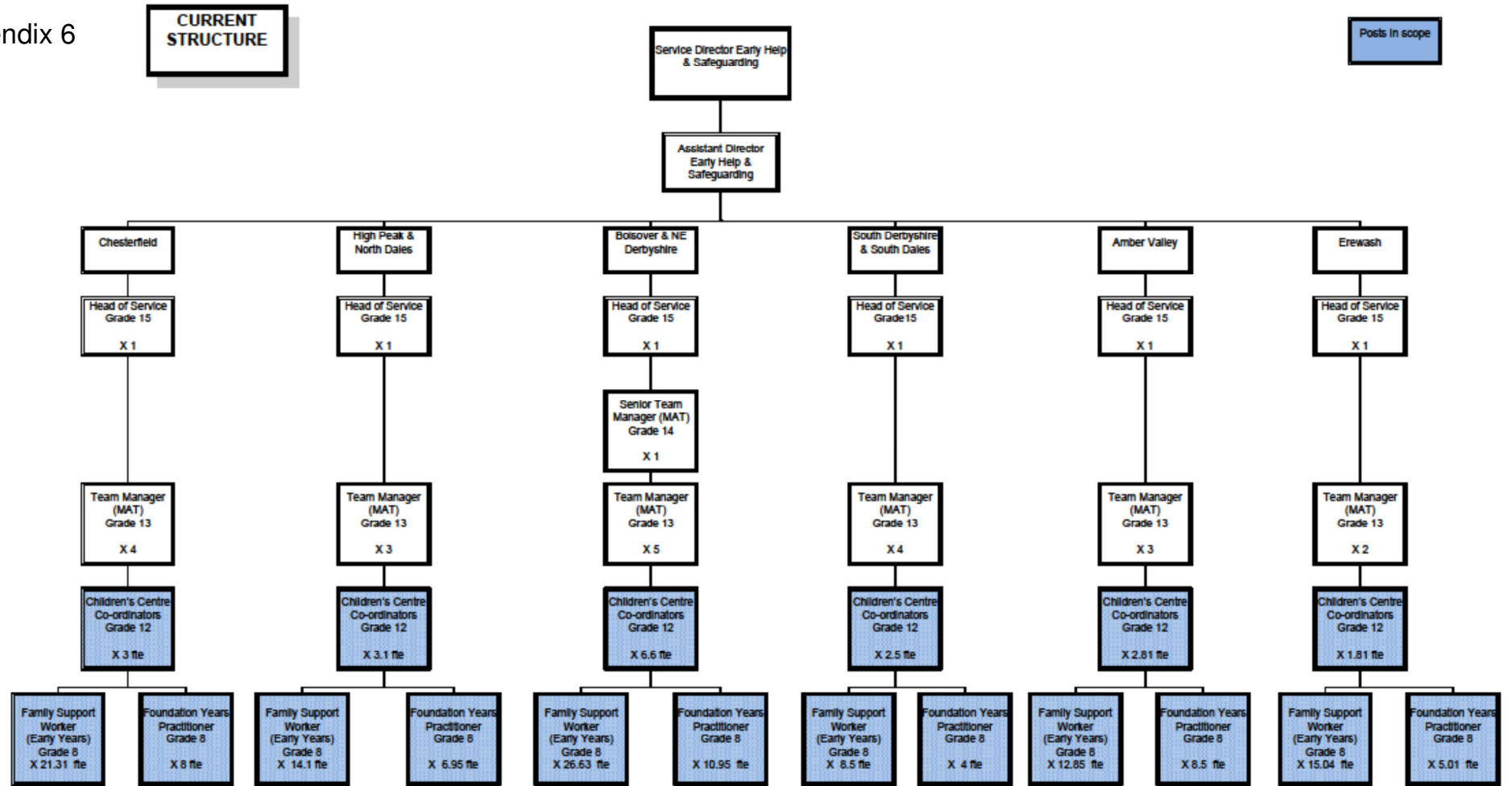
“RESTRICTED” status up to & including Informal Cabinet stage, then “CONTROLLED” status thereafter.

Appendix 5

Service Area	Childrens Centres														
Post Title	Proposed Changes (see Note 1)	Changed Job details	Proposed approach	Structure Adjustments								Current Annual Costs (see Note 2)		Proposed Annual Costs (see Note 2)	
	Current Salaries				Proposed Salaries										
	no change; deleted; changed job; changed title; fte increase/decrease; new job		eg Selection Out; Appointment In; Slot; Variation to Contract	Min Point	Max Point	Grade	FTE	Min Point	Max Point	Grade	FTE	Min Point	Max Point	Min Point	Max Point
Children Centre Co-ordinators	Deleted		Selection Out	£34,171	£37,221	12	18					£615,078	£669,978		
Family Support Workers & Foundation Years	Deleted		Selection Out	£21,321	£23,042	8	93					£1,982,853	£2,142,906		
Business Services Assistants	Deleted			£15,916	£15,916	4	18					£286,488	£286,488		
		Total										£2,884,419	£3,099,372		
		Totals including on costs (Note 3)										£3,539,471	£3,803,239		
GUIDANCE NOTES															
1) This provides details of the impact on each current job in the structure, and will inform the approach to selection, whether job evaluation is required and of the changes that are needed on SAP re JE data. Use two categories eg changed job title and fte reduction where appropriate. Job Evaluation is required for new and changed jobs. A changed job is one which curently exists but the content is changing.															
2) Use minimum and maximum salaries															
3) On costs for 2016/17 are 22.71%															

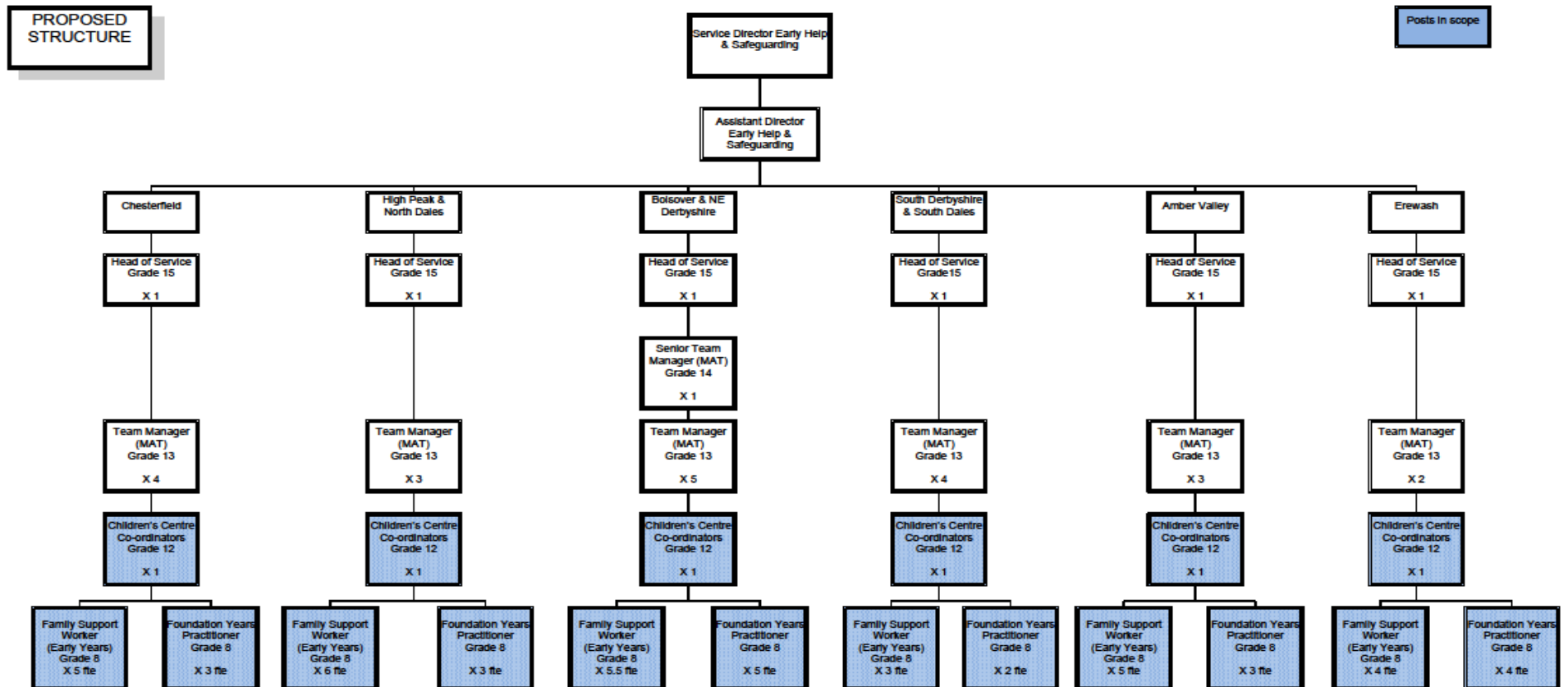
“RESTRICTED” status up to & including Informal Cabinet stage, then “CONTROLLED” status thereafter.

Appendix 6



“RESTRICTED” status up to & including Informal Cabinet stage, then “CONTROLLED” status thereafter.

Appendix 7



“RESTRICTED” status up to & including Informal Cabinet stage, then “CONTROLLED” status thereafter.

Appendix 8

Service Area	Property Services		Impact of closure of centres;												
Post Title	Proposed Changes (see Note 1)	Changed Job details	Proposed approach	Structure Adjustments								Current Annual Costs (see Note 2)		Proposed Annual Costs (see Note 2)	
	Current Salaries				Proposed Salaries				Min Point	Max Point	Min Point	Max Point			
	no change; deleted; changed job; changed title; fte increase/decrease; new job		eg Selection Out; Appointment In; Slot; Variation to Contract	Min Point	Max Point	Grade	FTE	Min Point					Max Point	Grade	FTE
Impact of closure of centres;															
Cleaner	deleted posts	n/a	Centre closure-all selected	£14,049	£14,457	3	2.7				0.0	£37,932	£39,034	£0	£0
Caretaker	deleted posts	n/a	Centre closure-all selected	£14,657	£15,445	4	3.8				0.0	£55,697	£58,691	£0	£0
Totals							6.5				0.0				
Multi-use Centres, potential for further reductions in the future;															
Cleaner	possible reduction to hours in the future	n/a	Buy out of hours or redundancy	£14,049	£14,457	3	0.4	£14,049	£14,457	3	0.4	£5,620	£5,783	£5,620	£5,783
Caretaker	possible reduction to hours in the future	n/a	Buy out of hours or redundancy	£14,657	£15,445	4	1.9	£14,657	£15,445	4	1.9	£27,848	£29,346	£27,848	£29,346
Facilities Management Assistant	possible reduction to hours in the future	n/a	Buy out of hours or redundancy	£15,664	£16,680	5	0.8	£15,664	£16,680	5	0.8	£12,531	£13,344	£12,531	£13,344
Totals							3.1				3.1				

“RESTRICTED” status up to & including Informal Cabinet stage, then “CONTROLLED” status thereafter.

Totals	9.6		3.1	£139,628	£146,197	£45,999	£48,473
Totals including on costs at 22.71%				£171,338	£179,398	£56,445	£59,481
Total saving (inc. Oncosts, excluding Living Wage Allowance)							£119,917

“RESTRICTED” status up to & including Informal Cabinet stage, then “CONTROLLED” status thereafter.