

## **Appendix 1**

### **Report on the Data and Themes from the Children's Centre Closure Public Consultation**

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# **1 Introduction**

The public consultation for the children's centre proposed closures began on Monday 3<sup>rd</sup> February and ended on the 30<sup>th</sup> April 2014. The survey was available online on the council website and at children's centres in paper form. We had a mailbox specifically for the children's centre consultation for people to email us their views. We also held 14 public events for people to come to see us face to face raising their views and asking questions.

## **1.1 Objectives and Scope**

The objective of this document is to provide a report on the data collected during this public consultation. It is presented to the Early Years management team to draw up a conclusion of the consultation results and to put forward their final proposals to cabinet.

## 2 Highlights from the Consultation Responses

### Highlights from all responses

1746 people responded to the consultation survey. 81.6% were parents or carers and 82% are using the centres at least once a week.

44% of the respondents said that their **nearest centre** is one of the ones proposed to stay open and 48% of the respondents said that their **nearest centre** is one of the ones proposed to close. The remainder were centres not recognised or out of area.

41.5% of respondents said that they **use** one of the centres proposed to stay open, 50.3% said that they use one of the centres proposed to close. Note that some people selected more than one centre. The remaining 8.3% were centres not recognised or out of area.

43% of respondents agree with the chosen centres (57% disagree) and 58% of respondents agree with outreach proposals (42% disagree).

The top 3 services listed when asked what a children's centre should provide were all child specific services: baby clinics/groups; stay and play sessions; early education and childcare. The remainder were adult focused groups such as parenting groups; breastfeeding groups and dads' groups.

When asked about impact, 34.3% of respondents said that they will not use a children's centre at all if they close and 17.7% said that they will use them less often.

The top 3 themes coming out of the consultation comments sections were: travel and location; the community and social impact; and the direct impact on children.

186 respondents said that they would be willing to take on a centre proposed to close, 173 of which would be interested in working with the remaining centres to continue children's centre activities. 142 respondents said that they would be willing to take on the day care provision in a centre proposed to close. However, only 101 of all respondents left contact details. No proposals were given at this stage.

## **Highlights from respondents living in an area of 30% or less IMD score**

On the survey, we asked respondents for their post codes. This has allowed us to see whether respondents live in the areas of most deprivation, ultimately, where we have proposed to keep a children's centre open; or whether they lived outside of these areas, where ultimately, we have proposed to close the children's centres.

Of the 1746 respondents, 796 of them (45.6%) live in the most deprived areas (30% or less IMD score), 857 (49%) live in other areas of the borough and 93 (5.3%) did not supply their postcode or were out of area. This shows that 4% less people from deprived areas responded to the survey.

Of those 796 respondents in the most deprived areas, 51.7% agreed with the proposed centres and 62.3% agreed with the outreach proposals. This shows that not everyone in the most deprived areas agreed with the proposals.

### 3 Survey Questions and Responses

#### Question 1 What is your status?

This question had 5 options and respondents were able to tick more than one.

Number of responses	%	Status description
1273	72.91%	You are a parent/carer of children aged under 5
149	8.53%	None of these
135	7.73%	You are a professional working with children under 5
88	5.04%	You are a parent/carer of children aged under 5, You are a professional working with children under 5
41	2.35%	You are a parent/carer of children aged under 5, You will be a parent soon
16	0.92%	You will be a parent soon
15	0.86%	You are a childminder of children aged under 5
11	0.63%	You are a parent/carer of children aged under 5; You are a childminder of children aged under 5
6	0.34%	You are a parent/carer of children aged under 5; You are a childminder of children aged under 5; You are a professional working with children under 5
4	0.23%	You are a parent/carer of children aged under 5; None of these
3	0.17%	You will be a parent soon; You are a professional working with children under 5
2	0.11%	You are a childminder of children aged under 5; You are a professional working with children under 5
2	0.11%	You are a parent/carer of children aged under 5; You will be a parent soon; You are a professional working with children under 5
1	0.06%	You are a professional working with children under 5; None of these
<b>1746</b>	<b>100.00%</b>	

Including those where respondents ticked more than one option, 81.6% of them were a parent/carer of children under age 5. This shows that a majority of respondents are current users or potential users of our children's centres, who will be directly affected by the proposed closures.

Duplicates – this table demonstrates how many times each response was ticked when it was in a multiple response answer.

1425	81.6%	You are a parent/carer of children aged under 5
237	13.6%	You are a professional working with children under 5
62	3.6%	You will be a parent soon
154	8.8%	You are a childminder of children aged under 5

## Question 2 How often do you use children's centre services in Rotherham?

Number of responses	%	How often?
956	55%	Two or more times a week
478	27%	Once a week
107	6%	Once a month
85	5%	Less than once a month
120	7%	Never
<b>1746</b>	<b>100%</b>	

82% of respondents use the centre at least once per week. We therefore know that a majority of respondents were people that actually use the service regularly. These people have current, first-hand experience of using a children's centre and will directly be impacted by the proposed closures.

120 respondents said they never use a centre and in the previous question, 149 respondents said they are not a parent/carer/worker/childminder. These respondents could be local community members, a family member or a friend of those using the centre, someone from a local business, organisation or authority etc.

This demonstrates that people in local communities are interested in the proposed children's centre closures, even if they don't use the centre themselves.

### Question 3 Which is the nearest children's centre to your home?

This was a mandatory free text field, resulting in many different name combinations and sometimes a list of centres rather than just one. Some names given were not children's centres or not within the Rotherham borough.

Here are the centres where one valid centre was selected (the remaining variations that are not listed here were less than 0.7% each).

A column has been added to show whether that centre is proposed to close. This demonstrates that not only the people living near a centre proposed to close have responded. In fact, some of the highest numbers were from people living near a centre proposed to stay open:

Number of responses	%	Nearest Centre	Is the centre proposed to close or remain open?
196	11.2%	<b>Arnold Centre</b>	<b>Open</b>
150	8.6%	<b>Aughton</b>	<b>Open</b>
123	7.0%	Silver Birch	Close
118	6.8%	Wath Victoria	Close
116	6.6%	<b>Swinton (Brookfield)</b>	<b>Open</b>
91	5.2%	Kimberworth	Close
90	5.2%	<b>Stepping Stones</b>	<b>Open</b>
89	5.1%	Park View	Close
82	4.7%	Dinnington	Close
73	4.2%	Cortonwood	Close
65	3.7%	<b>Valley</b>	<b>Open</b>
62	3.6%	Meadows	Close
58	3.3%	Sue Walker Centre	Close
56	3.2%	<b>Thrybergh</b>	<b>Open</b>
46	2.6%	<b>Coleridge</b>	<b>Open</b>
44	2.5%	Rockingham	Close
40	2.3%	Thorpe Hesley	Close
33	1.9%	<b>Rawmarsh</b>	<b>Open</b>
28	1.6%	Thurcroft	Close
25	1.4%	Marcliff	Close
17	1.0%	<b>Central</b>	<b>Open</b>
12	0.7%	Ryton Brook	Close

44% of respondents nearest centre are proposed to remain open, whilst 48% of respondents nearest centre are proposed to close. The remaining 8% of responses were not applicable or they listed multiple centres.

Please note that these are the centres that people *tell us* is their nearest centre. The information found by postcode will show a slight difference.

#### Question 4 Which children's centre do you use? Please list.

This was more difficult to analyse as it was a free text field enabling respondents to list 3 centres. This resulted in a very large number of variations.

Below is the number of times each centre was listed. Because people listed more than one centre, the total is more than 1746.

A column has been added to show whether that centre is proposed to close. This demonstrates that not only the people using a centre that is proposed to close have responded. In fact, some of the highest numbers were from people using a centre proposed to stay:

Number of times selected	%	Centre Used	Is the centre proposed to close or remain open?
227	10.6%	<b>The Arnold Centre</b>	<b>Open</b>
159	7.4%	Silver Birch	Close
147	6.9%	<b>Aughton Early Years</b>	<b>Open</b>
138	6.4%	Wath Victoria	Close
130	6.1%	Not stated	
128	6.0%	<b>The Brookfield Centre</b>	<b>Open</b>
115	5.4%	Kimberworth Community	Close
106	4.9%	Park View	Close
97	4.5%	Dinnington	Close
92	4.3%	<b>Valley</b>	<b>Open</b>
88	4.1%	<b>Stepping Stones</b>	<b>Open</b>
87	4.1%	Cortonwood	Close
80	3.7%	Marcliff	Close
73	3.4%	The Sue Walker	Close
70	3.3%	The Meadows	Close
66	3.1%	<b>Coleridge</b>	<b>Open</b>
58	2.7%	Rockingham	Close
48	2.2%	<b>Rotherham Central</b>	<b>Open</b>
48	2.2%	<b>Thrybergh Rainbow Centre</b>	<b>Open</b>
45	2.1%	<b>Rawmarsh</b>	<b>Open</b>
45	2.1%	Thorpe Hesley	Close
43	2.0%	Non RMBC	
33	1.5%	Thurcroft	Close
20	0.9%	Ryton Brook	Close
<b>2143</b>	<b>100.0%</b>		

41.5% of respondents use the centres proposed to stay open, 50.3% are using centres proposed to close. 6.1% did not state and 2% listed a non RMBC centre.

Note: that some respondents selected more than one centre.

130 respondents didn't state a centre, but there were 120 that said they never use a centre in a previous question.

These are close to the percentages of those who agree with the chosen centres against those who disagree:

- 41.5% of respondents use the centres proposed to stay open and 43% of people agree with the closures.
- 50.3% of respondents use the centres proposed to close and 57% of people disagree with the proposed centres.

Note: that around 8% didn't state a centre/say they do not use them etc.

## Question 5 Do you agree with the chosen centres?

Number of responses	%	Agree?
745	43%	Yes
1001	57%	No
<b>1746</b>	<b>100%</b>	

Of those respondents in the most deprived areas, 51.7% agreed with the proposed centres. This shows that nearly half of the respondents living in a deprived area where the centres are proposed to remain open, still do not agree with the proposed closures. So the respondents that are answering yes to this question, do not necessarily live in an area where the centre is proposed to stay.

It must be noted that when saying they agree with the proposals, they are not necessarily saying that they agree with closing centres, they are agreeing that the centre in the list should remain open. Many comments were made in the free text field to say 'Yes, but I would like to see all centres remain open'.

For those who answered No to this question, we asked them to tell us why in a free text field. See the Themes section of this document for further details.

## Further breakdown on those who agree with the chosen centres

The below tables break down the number of people that answered yes or no by which centre they say they use.

*Note: 130 people didn't answer the question about centre used so their responses haven't been included in these tables.*

*Note: that some people said they use more than one centre. These people have been counted more than once as they have been counted as an individual user at each centre that they told us they use, making the total more than 1746.*

*Note: that these figures on the centre people say they use and the deprived figures were taken using the respondents post code.*

### Centres proposed to stay open:

Centre Used	Number who disagree (No)	Number who agree (Yes)	Grand Total	% who agree
The Arnold Centre	34	193	227	85.02%
Aughton Early Years	34	113	147	76.87%
The Brookfield Centre	29	99	128	77.34%
Valley	18	74	92	80.43%
Stepping Stones	20	68	88	77.27%
Coleridge	12	54	66	81.82%
Thrybergh Rainbow Centre	14	35	49	71.43%
Rotherham Central	21	27	48	56.25%
Rawmarsh	21	24	45	53.33%
<b>Total</b>	<b>203</b>	<b>687</b>	<b>890</b>	<b>77.19%</b>

*Note: according to these responses, there are more people using a centre in the most deprived than there are living in the most deprived areas.*

77.19% of respondents who say that they use one of the centres proposed to stay open, agree with the proposals. A quarter of people using those centres still disagree with the proposals. Some of the comments made said that people were pleased that the centre they used was proposed to stay, but they disagree with closing other centres. One of the reasons was because the closure of other centres will impact on the capacity and usage of the centre that they use.

**Centres Proposed to Close:**

Centre Used	Number who disagree (No)	Number who agree (Yes)	Grand Total	% who agree
Silver Birch	138	21	159	13.21%
Wath Victoria	124	14	138	10.14%
Kimberworth Community	103	12	115	10.43%
Park View	96	10	106	9.43%
Dinnington	95	2	97	2.06%
Cortonwood	83	4	87	4.60%
Marcliff	68	12	80	15.00%
The Sue Walker	68	5	73	6.85%
The Meadows	59	11	70	15.71%
Rockingham	56	2	58	3.45%
Thorpe Hesley	38	7	45	15.56%
Thurcroft	29	4	33	12.12%
Ryton Brook	20	0	20	0.00%
<b>Total</b>	<b>977</b>	<b>104</b>	<b>1081</b>	<b>9.6%</b>

Only 9.6% of respondents who say they use one of the centres proposed to close, agree with the proposals. So 90.4% of those people disagree with the proposals.

The difference in the 2 tables above suggests that the answer to this question is often governed by whether their centre is proposed to close. People may have answered yes to the question, 'do you agree with the chosen centres' but they may not necessarily agree with any closures, they are saying yes because they are pleased their centre is staying open.

Therefore, it needs to be considered that although the overall 43% of people who said Yes they agree with the proposed chosen centres, are not saying that they agree with the closure of any children's centres.

## Question 6 Do you agree with the proposal for outreach services?

Number of responses	%	Agree?
1012	58%	Yes
734	42%	No
<b>1746</b>	<b>100%</b>	

Of the 796 respondents that live in the most deprived areas (30% or less IMD score), 62.3% of those respondents agreed with the outreach proposals.

For all of those who answered No to this question, we asked them to tell us why in a free text field. See the Themes section of this document for further details.

## Question 7 Which services do you think a children's centre should provide?

There were 12 options in a tick list for this question. Respondents were able to tick more than one option, therefore the numbers total more than 1746.

Number of times selected	Service
1633	Baby Clinics/Groups
1615	Stay and play sessions
1549	Early Education and Childcare
1509	Parenting groups
1492	Breastfeeding support
1406	Dads groups
1404	Family learning sessions
1383	Healthy eating and cooking sessions
1320	Prenatal groups
1139	Managing on a budget
1078	Adult Learning Groups
227	Other

The top 3 selected services are services directly for children and babies. The 8 following are services delivered for parents. The high numbers selected for each service demonstrates that the services are all valued. This suggests that the priority should be on the actual children's services, followed by parenting/family services.

This data can be used and further analysed for shaping the future service once the outcome of the consultation is known.

## Question 8 What impact will the reduction of children's centres have on you?

There were 7 options to tick in answer to this question. Respondents were able to tick more than one. Therefore, the number of variations coming through was very large.

This table shows the number of times each option was selected:

Number of times selected	%	Impact
713	34.34%	I will not use children's centres at all
368	17.72%	I will use children's centre services less often
307	14.78%	Don't know
274	13.19%	I will attend alternative (non- children's centre) activities(e.g. swimming
221	10.64%	No impact
109	5.25%	I will attend another children's centre instead
84	4.04%	Other
<b>2076</b>	<b>100%</b>	

This table displays the variations of multi options selected. You can see here when someone says they will not use a centre, if they also say that will use an alternative etc. (any variations with less than 10 have not been listed in this document as the list is very large):

Number of responses	%	Impact
560	32.2%	I will not use children's centres at all
270	15.5%	Don't know
216	12.4%	I will use children's centre services less often
215	12.3%	No impact
90	5.2%	I will attend alternative (non-children's centre) activities (e.g. swimming, visiting friends, attending other local groups etc.)
71	4.1%	I will not use children's centres at all; I will attend alternative (non-children's centre) activities (e.g. swimming, visiting friends, attending other local groups etc.)
66	3.8%	Other (please specify)
60	3.4%	I will use children's centre services less often; I will attend alternative (non- children's centre) activities (e.g. swimming, visiting friends, attending other local groups etc.)

48	2.8%	I will attend another children's centre instead
35	2.0%	I will use childrens centre services less often; I will not use children's centres at all
13	0.7%	I will use children's centre services less often, I will attend another childrens centre instead, I will attend alternative (non-childrens centre) activities(e.g. swimming, visiting friends, attending other local groups etc.)
11	0.6%	I will attend another childrens centre instead, I will attend alternative (non-childrens centre) activities(e.g. swimming, visiting friends, attending other local groups etc.)
11	0.6%	I will not use childrens centres at all, Don't know
10	0.6%	I will not use childrens centres at all, Other (please specify)

Some of the people selecting 'no impact' will be from respondents that do not use the service at all. As mentioned before, these could be members of the community, family, friends etc.

## **Question 9 Would you or your organisation be willing to take on a children's centre building that is proposed to close?**

There were 2 parts to this question. If the respondent answered no to the first part, they didn't need to answer the second part. However, some people still answered the other both parts.

<b>Number of responses</b>	<b>%</b>	<b>Answer</b>
186	11%	Yes
1560	89%	No
<b>1746</b>	<b>100%</b>	

**Part 2 - If Yes, would you be interested in working with the remaining children's centres so that some children's centre activity could continue in the building you take on?**

<b>Number of responses</b>	<b>%</b>	<b>Answer</b>
173	10%	Yes
1012	58%	No
561	32%	No answer
<b>1746</b>	<b>100%</b>	

Further details in Question 10 below.

## **Question 10 Would you or your organisation be willing to take on the day care provision in a CC building that is proposed to close?**

<b>Number of responses</b>	<b>%</b>	<b>Answer</b>
142	8%	Yes
1604	92%	No
<b>1746</b>	<b>100%</b>	

**Question 9 and 10 If you answered Yes, please leave contact details**

101 people left contact details after answering yes to either question 9 or 10. A further 11 people who answered no to these questions still left contact details. Details of proposals have not been given.

It is to be noted that many of the people answering yes are parents/carers or members of the public who are volunteering to help as opposed to taking on the centre. Further work will be done on this section separately, following the results of the consultation.

## 4 Narrative Analysis

There were 2 questions and a final comments section that allowed people to make comments. In order to analyse the narrative part of the questions, we have read through all of these comments to pull out the recurring themes. This is a manual process so it has to be taken into consideration that numbers are approximate as it is not possible to do a systematic count of particular comment types in free text fields.

Many of the themes are repeated in all 3 comments sections (question 5, question 6 and Any Other Comments). A summary of all themes is given at the end of this section.

### Question 5 – Do you agree with the chosen centres?

43% of people answered Yes

57% of people answered No

We then asked '*If not, please tell us why*'.

#### Themes:

Here are the recurring themes. The list is in order of most recurring themes:

- Location, travel and travel costs
- The impact children's centres have on the community, social interaction and isolation
- The impact on the child, their development, their transition to school, their education and attainment levels
- The support, information and advice received at centres
- Staff skills and relationships built with children and parents
- Activities, sessions, groups, courses, classes that people attend at centres
- Day care/childcare requirements
- Capacity for the remaining centres, workloads on staff and the impact on the quality of service
- Buildings, facilities and environment, having everything in one place with consistency and familiarity
- The impact on the employment of parents from not having local centres, support and day care
- Familiarity of location, building, surroundings, staff, other parents and children
- People will not use them
- The children's centres have been a lifeline

## **Question 6 – We propose to deliver an outreach service to all areas. Do you agree with this proposal?**

58% of people answered Yes

42% of people answered No

We then asked '*If not, please tell us why*'.

### **Themes:**

Here are the recurring themes. The list is in order of most recurring themes:

- Buildings
  - Existing centres are purpose built
  - Existing buildings comfortable, happy and friendly
  - Community buildings are not fit for purpose or suitable and in some areas, no buildings are available
  - Facilities and standards of facilities in centres are good
  - Everything in one building works better
  - A safe, clean, secure, comfortable environment is needed
  - Cost/hire of other buildings
- The location of and travelling to outreach services
- Familiarity and consistency of service, location and staff; routine and stability; feeling safe, secure and comfortable
- Outreach will be inadequate/insufficient and the quality of service will drop
- Services available at centres such as support, activities, classes, groups etc. and the drop in service that will not be available via outreach
- The impact on the community and the social aspect of being in a local children's centre
- The impact on the child, their development, their transition to school, stability for children and safeguarding could be missed
- Childcare and day care requirements – this will impact on families, employment etc.
- Children's centre staff are good, people have built relationships and trust and are familiar with them
- People will not use outreach, attendance will drop
- Capacity and practicality of doing this via outreach. Remaining centres will be oversubscribed and workloads will increase for outreach workers
- The service works as it is, why change it?

## **Comments – Are there any further comments you would like to make about the proposals?**

This is a free text field allowing for any further comments people would like to make about the proposals.

### **Themes:**

Here are the recurring themes. The list is in order of most recurring themes:

- Direct impact on children, their development, socialising, their future, education and transition to school.
- The impact on the community having no central hub and socialising with other parents. Isolation loneliness and depression will increase with no central place to go.
- Staff bonds and relationships built. Lots of complements about staff skills, knowledge, experience, they are supportive, helpful, caring, friendly and approachable
- Support, advice, guidance and information received at centres
- Travel issues, cost of travel, travelling with young children or disability access. Location is a huge factor in usage and accessibility.
- Sessions, activities, groups, classes used at centres
- Employment will be effected due to day care reduction
- Buildings are welcoming, a caring environment, purpose built, everything is in one place including other services such as health. Facilities are good, people feel safe and secure there. There are insufficient buildings/facilities in the community. The 'Drop in' service will be lost.
- Vulnerable people will be at risk. Safeguarding and early intervention will be impacted increasing deprivation
- PND support is currently good. Without this there will be an increase in cases. The centres have been a lifeline for many.
- Capacity and oversubscription
- Health service impact - joined up working will be lost
- The quality of service will drop
- People will not use the services
- Long term effects

## Summary of All Themes

Pulling all of the themes together, these are the most recurring themes throughout the whole consultation response:

**Travel/Location:** The most recurring theme throughout the consultation comments combined was travel and location. People like the convenience of having a centre local to them. For many it is vital to have one in walking distance. Having a centre within walking distance allows access to all.

Not everyone has transport. People cannot always afford to travel; have time to travel; have the ability to travel further. There are many reasons for this such as having children in prams; having several children to manage and carry things for; having children with special needs; being post operation or have just given birth/c section; having a child at a local school so having to manage the timings between locations; taking children to the centre for childcare around working times; having a disability or child with a disability making travelling or public transport difficult. Pushchairs, prams, wheelchairs and equipment can prove difficult on public transport. Public transport is not always available or reliable.

Not having a centre within reach of their home, work or childcare placement means that people will not be able to use a centre at all.

**Community/Social:** following travel/location, people want a local centre for the needs of the community too. Having a central place to meet others in the local area brings the community together. Parents/carers have the opportunity to meet other parents and other people going through the same issues as them. They share advice, experiences and knowledge with others. People become friends and find comfort in meeting others who understand what they are going through. Becoming a parent can be very difficult for some, even if they already have children. Having a community of other new parents helps them come together to support each other and to develop their parenting skills.

Without the centres people will become isolated. They will not have a place to go and to get them out of the house. This could increase levels of depression, isolation and loneliness affecting the health of both parents and children. This will further impact on the health service and on social services.

**Child impact:** Children's centres offer children a good start in life. They provide a starting point for nursery and school and help with that transition to school. Centres provide a place for children to socialise with other children, learn life skills, bond with others and begin their education. Many have developed in all aspects of their lives through the help and support of a children's centre.

For any centres that close, there will be an impact on children that have to change childcare/centres. Children like stability and familiarity. They are attached to staff, friends, other parents and the surroundings that they know. Changing those things will have an effect on the young children currently using the centres.

The future of children will be affected if they do not have a local centre with the opportunities currently provided. This will have an impact further down the line with attainment and attendance levels in schools and a child's education long term.

Safeguarding could also be missed by not having a local centre. Early intervention can start by things being picked up at centres. This will impact on social care and the future of those children that could slip through the net.

**Buildings:** People feel that the buildings are a very important part of the service. They provide a familiar, stable, permanent place for children to go. They are built for purpose, are clean, safe and secure. They have excellent facilities and the standards are all very good. Parents also need that stability and familiarity. Some parents are uncomfortable in new environments and people and may not have the confidence to try somewhere new.

People like that everything is under one roof. They know where to go for help and can drop in when they need to. They know which activities and groups etc. are on and when.

Community buildings will not be fit for purpose, they could be cold, unsafe, unhygienic, not secure, have other members of the public using them etc. Some areas of the borough don't even have any available buildings. The cost of getting these buildings up to standard, cost of hire etc. will need taking in to consideration.

If unsuitable buildings are used, people will not go.

**Support:** People really value the support that they receive from the centres. They can drop in when needed and seek advice, support, information and guidance. They have access to skilled staff members who are experienced and willing to help. Support is given to parents and children, impacting the whole family.

Without a centre, people will not have somewhere to go to for this advice and information when needed. They will not know where to go for support and many have said it would have had a detrimental effect if they had not had it when needed. This support is a lifeline to some.

**Staff:** Staff are very highly valued. Parents and children are familiar with the staff at the centres, they have built relationships with them and have bonded with them. Many people have commented that the staffing should not change as part of this review due to the attachments with children and parents already attending the centres. The staff work hard and the success of the centres is due to their hard work and dedication. Parents and children have built trust with the staff. They are caring, helpful, skilled, experienced, knowledgeable, dedicated, they go the extra mile, are approachable and are friendly.

If staff were to change, or be lost, the service would not be the same high standard. Children would be affected due to their attachment with the staff. Parents may not use the services due to losing those relationships and the trust they have built.

**Activities/groups/sessions:** people really value the groups, activities, classes, courses etc. run at centres for both children and adults. There is a need for all of these services to continue. They help children to develop and parents have gained parenting skills along with many other educational and life skills themselves.

Should these services cease, people will not learn the parenting skills required. Children will not develop as well and will be unprepared for school. This will impact on child development and the future of entire families.

**Child care and employment:** people are concerned about what will happen with child care/day care/after school care. Children are settled and have built relationships there. Childcare is an essential service for many particularly those who depend on it to be able to work.

There will be an impact on the employment of parents who depend on childcare. People cannot always afford private childcare and some parents have chosen children's centre childcare because of the high standards and believe that it is of better quality than private child care. Some areas of the borough do not have any other childcare available. This may lead to more people being out of work, impacting the economy of the area and family life for many families. Removing familiar childcare from those children currently placed there will have a direct impact on those children involved.

**Familiarity:** parents and children like familiarity. They are familiar with the environment and surroundings at the centre, the staff, other parents, other children. They feel safe/secure and comfortable at the centres.

Again, taking this away could impact on a child's development. Parents may not use the outreach services if they are in unfamiliar settings with unfamiliar and irregular staff that they don't know. Consistency is required for both parents and children.

**Capacity:** There is concern over the capacity of the centres that remain open. How will they cope with the larger reach areas?

Centres and groups will be oversubscribed. The quality of the service will drop because of this. Services will become more stretched. The workload on staff is concerning as this will impact on the quality of the service that they deliver.

**Outreach:** Outreach 'is better than nothing' and should be considered as an alternative only. If it is planned right, in principle, it could work. We would have to have a very good communication strategy in place to ensure that all parents are aware of what is happening, where and when. Services need to be regular, reliable and in suitable settings, of a good quality and run by professionals. It needs to be community focused and based locally to encourage people to use it. They should be run from children's centres to provide a familiar, stable and suitable environment.

Outreach services cannot provide the same level of service as children's centres. It will be inadequate and insufficient. Outreach doesn't cater for child care. If people don't know what services are available, where to access them and when they are, large pockets of the community will be missed. If the settings are not right, people will not go back. The location of the outreach service is very important in its success as people will not travel and they want a service that is within their local community. People do not want an outreach service, they want a children's centre.

**Risks to vulnerable:** Children's centres reach out to vulnerable people in all areas. They help to identify risks early on. PND support is currently very good. Children's centre staff have helped to identify problems in children, even helping parents to gain a diagnosis in some cases. Supporting parents through difficult times and helping to identify problems and provide the right advice, information and contacts has been a lifeline for some.

Without this support vulnerable people will be at further risk. PND and other problems will increase as people will not get the support that they need. Issues may go undetected in both parents and children.

**Joined up working:** The centres provide a central place for many services. Health advice is available, baby weigh in and services that people will otherwise have to travel to a GP surgery for.

Again, problems could go undetected because people don't have easy access to health professionals and advice. Not having services working together under one roof will not only impact on children and families, but will impact on services such as the Health service and Social services further down the line.

## 5 Suggestions and Proposals

Most comments made were around the impact that centres have had on people's lives and the predicted impact of closing centres.

There were also a number of comments around the rationale used for selecting which centres should close and suggestions for alternative rationales and the future of the service.

### Comments and Suggestions made for the Rationale

Here are the most common themes coming through in the comments around the rationale in order of most commonly mentioned:

- Equality – it is unfair to only have a centre in an area that is classed as the most deprived. It is not only the deprived people of Rotherham that are vulnerable and that need access to a centre. Everyone needs the service and support no matter what area they live in, what their status is or what is defined as their level of deprivation. All parents and all children need and deserve support and access to a centre. Parents and children are vulnerable no matter where they live.
- The spread of centres and geography is not equal. Too many are closing leaving insufficient coverage. There are large parts of the borough left without anything in their area, whilst some have the option of more than one. Poor transport links mean that some areas don't have realistic access to a centre at all.
- There are vulnerable children and families in other areas, not just those identified as the most deprived. Those vulnerable families will be missed. All children in all areas need centres

Other less recurring themes for rationale suggestions were:

- 'Consider aligning our outreach boundaries, health ward and learning communities. Currently, when carrying some joint working with Health colleagues we have to exclude certain postcodes from attending as they do not fall into the Health teams ward regardless of being within our own reach areas.'
- The new model could be based on matching Health Locality teams to enable closer working. If two or more Health teams are within a Centre reach it is very difficult to plan and target set. A centre within each health area would seem a more pragmatic approach.
- We should consider performance data when selecting centres to stay open. The centres that are performing best should be considered.
- Close the centres with the least attendance
- Close those that cost the most
- Look at the areas individually as to what is available in terms of other provision and available community buildings. Some areas may be left with nothing at all whilst other areas have a centre as well as other provisions.

## Ideas and suggestions for the future of the service

Some comments made were suggestions for keeping children's centres running or ways of saving money:

- Funding
  - Use other funding
  - Private providers could take them on board
  - Schools could run them
- Staff
  - Look at job roles and descriptions for duplication
  - Reduce high level managers/salaries
  - Reduce the number of councillors
  - Reduce wages of CE/Leaders/Members including allowances
  - Cut staff wages and bonus and reduce staff in centres
  - Consider small cuts to ALL centre staff hours particularly during quieter times of the days/year.
- Create revenue
  - Hire out rooms for parties, groups, meetings, exercise, community groups and craft
  - Charge for some services
  - Fundraise
  - Allow companies to advertise at centres
  - Create courses for adults and charge for them
  - Hold craft sessions and re-open the café
- Building usage - Use the centres as a pre-school option rather than close

There were also suggestions for running of the future service:

- Ensure these services are embedded into education and working more closely with schools (post year 7) offering a programme across all years from preventative, addressing the teenage pregnancy to personal and social education across all aspects of family life.
- Some centres are rarely used by the public 8-9am and 4-6 pm yet have to be manned and appropriately supplied by heating and lighting etc. Change the opening hours to reduce costs. You could consider alternative opening hours for day-care provision (as long as it meets the majority of service users and target group needs).
- Consider providing centres with more freedom to shop around for their supplies, maintenance and consumables rather than being tied into contacts with suppliers, as they often charge way over the odds for items and labour.

## 6 Public Events

We held 14 events and had approximately 619 attendees.

Date	Area of Event	Centres	Number Attended
06/02/14	Rockingham	Central, Kimberworth, Park View, Rockingham, Thorpe Hesley	110
17/02/14	Clifton	Coleridge	24
12/03/14	Rawmarsh	Rawmarsh, Thrybergh/Dalton, Silver Birch, Marcliff	40
20/03/14	Wath	Brookfield, Wath Victoria, Cortonwood	122
25/03/14	Ferham	Central, Kimberworth, Park View, Rockingham, Thorpe Hesley	19
27/03/14	Clifton	Valley, Arnold	22
31/03/14	Thurcroft	Aughton Early Years, Meadows, Sue Walker, Ryton Brook, Thurcroft	45
02/04/14	Flanderwell	Rawmarsh, Thrybergh/Dalton, Silver Birch, Marcliff	20
03/04/14	Wales	Aughton Early Years, Meadows, Sue Walker, Ryton Brook, Thurcroft	62
07/04/14	Dinnington	Maltby, Dinnington	41
08/04/14	Aston	Aughton Early Years, Meadows, Sue Walker, Ryton Brook, Thurcroft	90
09/04/14	Maltby	Maltby, Dinnington	10
22/04/14	Catcliffe		8
28/04/14	Rockingham	Central, Kimberworth, Park View, Rockingham, Thorpe Hesley	6

### Themes

The themes at the public events were the same as the ones being submitted via the consultation response form. A few additional areas that were questioned were:

- Expressions of interest – people were asking how to express an interest in the centres
- Staffing questions about the structure and applying for jobs etc.
- Privatisation – what will the LA responsibility be, how will we safeguard, what support will we put in place?
- How will the service work?
- Volunteers – the impact of having volunteers, training costs, availability etc.

## Rationale Suggestions and Questions

Many of the questions asked, issues raised and suggestions made at the public events were around the rationale used for selecting children's centres to remain open.

These have been grouped in to themes. Each theme is then summarised in to one suggestion for looking at an alternative rationale.

### Spread of centres / geography

- Why can't you make sure the 7 remaining CC's are spread evenly across the borough?
- Have you looked at distribution and geography?
- Within 5 km of Rotherham town centre, there are 6 staying open. In 10k of our area there is just 1. Baring in mind you are keeping 7 open, would it not be sensible to place a children's centre in each area assembly area?
- All of the centres in Rotherham town centre are staying open. Why is that?
- Can you explain the rationale around the cluster of 7 for those being left open?

**Suggestion:** to look at spreading the centres across the whole of the borough by area/geography rather than keeping several together in one area. This way, everyone will be in reach of a centre.

### Numbers / changing numbers of people in an area

- Your rationale is based on 400 children under the age of 5 in an area. What happens over the next few years as those figures change? It could be a different area that has more children under the age of 5,
- The numbers will change as people have children all of the time.
- The figures that were quoted in the slides, how recent are these figures? There is new housing being built in Thurcroft, so these numbers may not be accurate.
- This may not be up-to-date. Not only families with young children are registered with a GP.
- What is the date when the figure was 352 for Dinnington? There have been lots of new houses built with new families moving in, 352 could now be miles out.
- The rationale chosen is flawed, this area needs a provision, housing developments are proposed which would increase numbers, therefore this centre is critical.
- In relation to Thurcroft, there are lots of developments, more than 500 homes, and we are cutting services, the number of facilities will not be enough.

**Suggestion:** to look at more up to date data on the population in each area as many have grown due to new housing developments. To also look at housing developments that are in progress and the potential numbers of families that will be living in each area.

### **What is vulnerable and why?**

- Having read all the literature you will be targeting those in greatest need, what are the criteria? Who are these people?
- Not everyone in Wath is deprived but not everyone works. Why did you use this rationale and not others? Why is this area not considered a vulnerable area? The rationale you have used does not take all factors into consideration.
- What makes one person disadvantaged as opposed to another (linking to the index rationale on the slides)? I am registered blind and would not have been able to get out without help. I would feel isolated. I need a familiar easily accessible area to give me the confidence to get out (Silver Birch CC).
- You need to add disabled parents and children to the rationale used to define 'vulnerable'.
- Why is the rationale only around deprivation, we both work, however this is my lifeline
- It feels that some parts of the borough are getting more than others. Deprivation is not just the only factor. There are challenges for families living across the borough and not just deprivation.

**Suggestion:** to look at other criteria such as the needs and challenges for all families, not just those who are deemed as being deprived. Also to include parents with disabilities and children with disabilities in each area

### **Centre Usage**

- Why not use the Children Centres numbers to see where there is a highest need? I am concerned that the deprivation index was from 2008 and 2001 census which was nearly 13 years old. It's got 38 indicators. Why have we not factored in the usage of centres? Information used is 13 years old
- In relation to the rationale used and those staying open, are these all well used? Has this been looked at? Is the list going to change?
- The rationale used has been around the vulnerable and deprived areas. Has there been any consideration at looking at actual attendance at children centres rather than reach figures?
- Have you looked at the current usage of the facilities at each CC?
- Have you done audits on the amount of usage at each centre and who is using them e.g. children with difficult needs or financially struggling parents and linking into social services? Workers are supporting families with these needs even if not in that 30% area. If I didn't have a link worker and get access, then maybe some of the issues I experienced wouldn't have been addressed. Workers have good connections with the families. Is there an audit on the needs of the community not just the level of deprivation?

**Suggestion:** to look at the usage at each centre to see which centres are used the most. Also, to look at those people using the centres, what are they made up of? E.g. disabled children, CIN, special needs, financially struggling parents, parents with needs?

### **People using centres not in their own area**

- Is it correct that there will be vulnerable children who attend a children centre outside of their area? If this is the case then those vulnerable children would be affected by the closure of a children's centre that they access?

- What if 500+ 'vulnerable' children live in an area (rationale to keep the children centre open) but only a small number access the children centre? I.e. if parents are working, they may access another children centre.
- Do you take into consideration people who come to Thurcroft Children Centre but this is not their actual local centre?
- I live in Maltby but prefer to travel to Thurcroft to access their services, is this included in the figures?
- When determining the areas and children's centres to close, have you found out which CC people access, it may not be the one closest to them?

**Suggestion:** to look at usage in terms of how many people use a centre that is not in their area as this will affect the number of vulnerable people using each centre.

### Performance

- Surely you want to provide the best quality service so why close Wath and Cortonwood? These are both the best centres, as proved by Ofsted Inspections, but you are closing them and keeping the lower performing centres open. Rationale should consider performance of centres when proposing to close
- Have you considered looking at the effectiveness of the indicators of the centres as a form of evaluation?

**Suggestion:** to look at performance levels at each centre and consider keeping open the best performing centres?

### Cost of a Centre

- All you've done is draw up figures to get what centres the members want. The most expensive ones to run will be left over
- You would only need to close the 8 most expensive centres to save the money you have to save. Therefore, you are closing 5 unnecessarily.
- It is unclear where the savings are being made with regards to Thurcroft. It is a small building attached to the Infant school.
- Could we request that another rationale to be looked at is the costs of running the building? This could be another option.

**Suggestion:** to look at the running cost of each building with the possibility of keeping open the ones that cost the least to run, resulting in more centres remaining open. Look at the savings made by closing each one so that you know which centres will save the most money to meet the target.

### Percentage of vulnerable in each area rather than number

- Therefore, Wath and Cortonwood have been penalised for being smaller areas. Percentage wise, ours are at 70% of children living in a disadvantaged area as opposed to 37% which is the percentage rate of others that may be kept open. Our children are disadvantaged.

**Suggestion:** to look at the percentage of vulnerable children in an area as opposed to the number. Some of the smaller areas have a majority of children vulnerable, but because they don't meet the 400 number, they are not meeting the criteria used in the current proposals.

### **Clustering of smaller areas**

- Overall some of the reach areas are larger and based on numbers so would need to be clustered.
- If Anston and Dinnington are added together it takes the numbers over 400, surely there is an option to join centres in this area?
- Could Dinnington stay open to cover Anston and Thurcroft? If only Maltby was open the catchment would be more than 1000.
- If Thurcroft, Ryton and Dinnington all close, it feels as if you have forgotten about us. Just bring all 3 together as alternative

**Suggestion:** to cluster some of the smaller areas to make them in to one, this would meet the criteria and avoid large parts of the borough being without a centre at all.

### **Facilities in an area**

- Have you been around and looked at the facilities throughout the borough when doing your rationale? You've picked inaccessible villages. Some of the closing CC's are the most deprived areas in the borough. They were put there for a reason and you are closing them.

**Suggestion:** Look at those areas with the most facilities available for closing centres. Keep centres open in the areas that do not have alternative provisions or buildings available as they will be left with no options.

## **Suggestions and Ideas**

Other suggestions made at the public events were:

- Wath and Cortonwood are running on nil balance. They are actually making money by delivering childcare. This money could be used to support other centres.
- Why can't you reduce something at each centre instead of closing some?
- We have looked at the Town Centre CC's and the parents there are quite happy to move to other CC's. This (Wath) is a much smaller tighter nit community where people feel comfortable in their own area. People here will not go to other areas. Why not keep ours open and close central ones where people are happy to move?
- I used to work in the health service. Wath has one of the highest in the country for heart disease. We need the health education in this area. Closing CC's is closing the education from the start of those lives and the future of heart health in Wath. This impacts health too not just social care. This should be taken in to consideration.
- Could Thurcroft look at options such as 'Big Local' and 'Lottery Funding' to keep open their children centre?
- What if Thurcroft could raise  $\frac{3}{4}$  of the money required to keep open their children centre, would the local authority consider putting in the further monies required to keep it open?
- What if all centres including the ones proposed to remain open, were asked to look for some private funding and partnership working – would this not leave funding to keep more centres open?

- Could half of the building be sold to help fund the remainder of the centres?
- Sheffield uses a community co-operative model, is this an option?
- How are we going to work with our partners in terms of boundaries as we reduce children's service provision? How do we work more effectively with health teams as health teams criteria for involvement is different to ours? A broad agreement needed.
- Could we pay for the children's centres, I would be prepared, how much could that bring in

## 7 Other Contacts

We have also had a number of other contacts via email and letter.

### Email enquiries to the Children's Centre Consultation mailbox

We have had emails from:

- 17 Parents/grandparents/carers
- 1 resident
- 2 former workers
- 3 not stated

All emails are against the closure of the Centres, sharing views and experiences. The themes coming from these emails mirror the ones coming from the consultation response forms. The main themes are:

- **Staff** – current staff are knowledgeable, experienced, professional, welcoming, dedicated, friendly, and have built bonds and relationships with children and parents. All of this will be lost if we change staff or close centres.
- **Community and Social impact** – the centres are a base for the community, bringing people together, encouraging people to socialise with others in their area. They bring people out of isolation and allow them to meet other parents and children.
- **Support** – The support received from centres on a number of issues and circumstances is invaluable. These centres have provided a lifeline for some parents.
- **Advice and Information** – again, invaluable. Where will people go for this if their local centre closes? Also the 'drop in' service allows people to gain access to advice and information at any time.
- **Location and travelling** – people will struggle to travel, they don't all have transport and public transport can be difficult and unreliable. The location of a centre is very important to parents as they need something close to home and convenient.
- **Childcare** – people are concerned with having to change childcare or having to use a private provider. The childcare service provided by children's centres is valued. They promote healthy eating in children with healthy, varied meals. Parents employment will be effected by not having local, affordable, effective childcare.
- **Environment** – the environment in children's centres is good, nurturing, caring, safe, secure and welcoming. The buildings are purpose built and have very good facilities including outdoors. There are concerns about what buildings will be available and suitable.
- **Long term benefits** – children's centres support child development, their transition to school and help with early intervention. The future costs will be impacted by reducing the level of service provided in those early years.
- **Health** – people have experienced help with issues such as mental health, diagnosis for children's conditions, PND for parents etc. The centres work together with health and other agencies to improve outcomes for children and families.

## Emails/Letters from Groups/Representatives

Other contacts have been received from groups, representatives, councillors, centres and schools.

There have been emails, letters and reports on the impact that the centres have on people, the predicted impact of closing children's centres, why centres should remain open and challenges against the rationale.

In brief, we have had the following contacts:

- Thrybergh Parish Council - regarding the risk that the proposed closure of the local centre will have
- NHS CCG - sharing the views of the GP Clinical Lead for Children's Services and that the impact the closures will have
- Cllr Jacquie Falvey backed up by Cllr and Governor Jane Havenhand - challenging the rationale with reasons not to close the Dinnington centre
- Wath Learning Community Cooperative Trust - about Wath and Cortonwood Centres, suggesting clustering of the 2 centres.
- Brampton Bierlow Parish Council - questioning the rationale and suggesting clustering of centres in Wath and Brampton amounting to large numbers of disadvantaged
- Our Futures Group (Dinnington Disadvantaged Community Programme) – full report received about Dinnington with statistics included and why Dinnington should not close.
- Head teacher at Wales High - the value the CC's provide to the community, to working parents as well as the vulnerable.
- Church Action on Poverty (Dinnington) - about Dinnington area and why the children's centre should remain
- Councillor for Maltby/Dinnington - suggestion for Maltby to cover the Silver Birches children's centre at Sunnyside and to try to retain one centre covering the Dinnington and Anston areas
- Anston Parish Council – against the closure
- Children's Centre Head at Rawmarsh - views about closures from a Head's perspective including things that should be considered for the future model
- A Children's Centre Coordinator - about the effectiveness of centres and their potential
- Wath CC - a presentation from Wath Victoria about what they do and reasons to stay open
- Maltby CC - suggestions around rationale from Maltby Children's Centre Acting Head
- Portage – about their links to CC's and the impact it will have on the Portage service

## 8 Petitions

We have received petitions against closures including:

1123 signed petition from Rawmarsh  
172 signed petition from Arnold  
27 signed petition from Thrybergh/Dalton

## **9 Expressions of Interest**

We have had 30 contacts via emails and letters expressing an interest in the centres.

From the survey, we have had 101 contacts left from people saying they would be willing to take on a children's centre building that is proposed to close or take on the day care provision at a building proposed to close.

Further work can be done on these expressions if required, following the result of the consultation.

## 10 Equalities Data

We asked respondents if they would like to answer some equal opportunities questions. 81% said yes, but some people did not answer all questions. The results are expressed as a % of those who responded to each question.

A majority of respondents were female aged 25-34 years. 9% of respondents were disabled or had a limiting long term illness/condition. 9% were carers. 90% were white British followed by 2.8% Asian or Asian/British Pakistani. 53% were Christian followed by 38.4% with no religion or belief.

### Would you like to answer some equal opportunities questions?

Number	%	Response
1419	81%	Yes
327	19%	No
<b>1746</b>	<b>100%</b>	

### What is your gender?

Number	%	Response
122	9%	Male
1293	91%	Female
<b>1415</b>		

### Is your gender identity the same as the sex you were assigned at birth?

Number	%	Response
1366	98%	Yes
24	2%	No
<b>1390</b>		

### What is your age?

Number	%	Response
200	14%	Under 25
676	49%	25 to 34
364	26%	35 to 44
84	6%	45 to 54
49	4%	55 to 64
15	1%	65 or older
<b>1388</b>		

**Are you disabled or do you have a long term limiting illness or condition?**

Number	%	Response
120	9%	Yes
1290	91%	No
<b>1410</b>		

**Please give further details below if you wish:**

Number	Type if stated
10	Learning disability/difficulty (such as Down's syndrome or dyslexia) or cognitive impairment (such as autism spectrum disorder)
25	Long-standing illness or health condition (such as cancer, HIV, diabetes, chronic heart disease, or epilepsy)
42	Mental health condition (such as depression or schizophrenia)
4	Mental health condition (such as depression or schizophrenia), Other
4	Mental health condition (such as depression or schizophrenia), Long-standing illness or health condition (such as cancer, HIV, diabetes, chronic heart disease, or epilepsy)
13	Physical or mobility impairment (such as difficulty using your arms or mobility issues which mean using a wheelchair or crutches)
3	Physical or mobility impairment (such as difficulty using your arms or mobility issues which mean using a wheelchair or crutches), Long-standing illness or health condition (such as cancer, HIV, diabetes, chronic heart disease, or epilepsy)
2	Physical or mobility impairment (such as difficulty using your arms or mobility issues which mean using a wheelchair or crutches), Mental health condition (such as depression or schizophrenia)
11	Sensory impairment (such as being blind or deaf or visual/hearing impaired)
2	Sensory impairment (such as being blind or deaf or visual/hearing impaired), Mental health condition (such as depression or schizophrenia)
1	Sensory impairment (such as being blind or deaf or visual/hearing impaired), Mental health condition (such as depression or schizophrenia), Long-standing illness or health condition (such as cancer, HIV, diabetes, chronic heart disease, or epilepsy)
0	Other?
<b>117</b>	

**Are you a carer?**

Number	%	Response
131	9%	Yes
1288	91%	No
1419		

**How do you describe your ethnic origin?**

Group	Number	%	Subgroup
White	1250	90.1%	British
	6	0.4%	Irish
	27	1.9%	Any other White background
Asian or Asian British	7	0.5%	Indian
	39	2.8%	Pakistani
	1	0.1%	Bangladeshi
	0	0.0%	Kashmiri
	4	0.3%	Any other Asian background
Multiple Heritage	2	0.1%	White and Asian
	1	0.1%	White and Black African
	3	0.2%	White and Black Caribbean
	8	0.6%	Any other Mixed background
Black or Black British	0	0.0%	Caribbean
	15	1.1%	African
	3	0.2%	Any other black background
Gypsy or Traveller	0	0.0%	Gypsy/Roma
	0	0.0%	Irish Traveller
	0	0.0%	Any other Gypsy or traveller background
Chinese, Yemeni, Arab	3	0.2%	Chinese
	0	0.0%	Yemeni
	0	0.0%	Arab
Other Ethnic Group	6	0.4%	Any other ethnic group
	12	0.9%	Not Stated
<b>Total</b>	<b>1387</b>		

**What is your religion or belief (if any)?**

Number	%	Response
630	53.03%	Christianity
457	38.47%	No religion or belief
78	6.57%	Other (please specify)
14	1.18%	Islam
3	0.25%	Hinduism

3	0.25%	Humanism
2	0.17%	Buddhism
1	0.08%	Sikhism
0	0.00%	Judaism
<b>1188</b>	<b>100%</b>	

## 11 Final Word - What does the consultation tell us?

A majority of people responding to this consultation were parents, carers or childminders of children under the age of 5, who will be directly impacted by the closure of any children's centres should they go ahead. We also received responses from professionals, community groups, members and people from local communities.

People do not want centres to close. Those who agreed with the chosen centres were mostly users of centres proposed to remain open. However, this does not necessarily mean that they agree with children's centre closures. They are answering yes to the question because they agree that their centre should remain open.

People do not agree with replacing the centres with outreach but they would agree with outreach as an alternative, if there is nothing else and if it is run correctly.

People disagree with our rationale because vulnerable people live in all areas of the borough. Everyone needs a centre not just those in deprived areas. It is seen as inequality. People are often unable to travel or the transport is simply not there or not realistic. Geography should be taken in to consideration to make the remaining children's centres accessible to all. Without a local centre, many people will not access services at all.

Families value the centres. The centres have a very positive impact on children, families and the community. People like a familiar, fit for purpose, regular building with regular staff whom parents and children can build relationships with. It's about having a place to go, somewhere to socialise that is familiar, safe, secure and comfortable. A place where they know support is available and they can drop in when they need to. A place for the community to come together.

The services most important to people are those directly for children closely followed by the adult/parental groups. Accessing multiple services, including health, in one location is effective and convenient.

Children's centres are not only about the children, they are about the health and wellbeing of parents and families; the support, the social interaction for parents; and the community togetherness.

The consensus is, do not close our children's centres. If we have to close some centres, than the rationale should be reconsidered to allow realistic access to everyone across the borough. Outreach should be put in place, in each local community without a centre and should be run by regular, familiar staff in regular, familiar, safe and secure buildings that are fit for purpose.

The information in this report is the result of all data gathered from the children's centre proposed closure public consultation. The information is provided is the views and opinions of the public and has been gathered to allow the leaders of our Early Years Services to review the proposals, assess whether there should be any alterations and to put forward their final proposals to Cabinet.

## 12 The Survey

### Have Your Say on the Future of Sure Start Children's Centres in Rotherham

We are committed to keeping you involved and are keen to listen to your views.

Please complete the following questions to help us make the best decisions on the future of Sure Start children's centre services in Rotherham.

All responses must be received no later than 5pm on Wednesday 30<sup>th</sup> April 2014

**Q1 Please tick all that apply**

I am a parent/carer of children aged under 5	<input type="checkbox"/>
I am a childminder of children aged under 5	<input type="checkbox"/>
I will be a parent soon	<input type="checkbox"/>
I am a professional working with children under 5	<input type="checkbox"/>
None of these	<input type="checkbox"/>

**Q2 How often do you use children's centre services in Rotherham?**

Two or more times a week	<input type="checkbox"/>
Once a week	<input type="checkbox"/>
Once a month	<input type="checkbox"/>
Less often than once a month	<input type="checkbox"/>
Never	<input type="checkbox"/>

**Q3 Which is the nearest children's centre to your home?**

**Q4 Which children's centre(s) do you use (please list)?**

1	
2	
3	

**Q5. Our approach is to cover the most vulnerable areas in Rotherham with a Children's Centre.**

**The chosen centres are:**

- Arnold Children's Centre
- Aughton Early Years Centre
- Coleridge Children's Centre
- Maltby Stepping Stones Children's Centre
- Rawmarsh Children's Centre
- Rotherham Central Children's Centre
- Swinton Brookfield Children's Centre
- Thrybergh/Dalton Children's Centre
- Valley Children's Centre

Do you agree with the chosen centres?

Yes		No	
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If not, please tell us why.

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**Q6. We propose to deliver an outreach service to all areas**

(by 'outreach', we mean activities being delivered in other buildings within the local communities) Do you agree with this proposal?

Yes		No	
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If not, please tell us why.

**Q7 Which services do you think a Children's Centre should provide (please tick all that apply)?**

Adult Learning Groups	
Baby Clinics/Groups	
Breastfeeding support	
Dads Groups	
Early Education and Childcare	
Family learning sessions	
Healthy eating and cooking sessions	
Managing on a budget	
Parenting Groups	
Prenatal Groups	
Stay and Play Sessions	
Other (please indicate)	

**Q8 What impact (if any) will the proposed reduction in the number of children's centres have on you? (please tick all that apply)**

No impact	
I will use children's centre services less often	
I will not use children's centres at all	
I will attend alternative (non-children's centre) activities (e.g. swimming, visiting friends, attending other local groups etc.)	
I will attend another children's centre instead	
Don't know	
Other (please indicate what)	

**Q9 Would you or your organisation be willing to take on a children's centre building that is proposed to close?**

Yes		No	
-----	--	----	--

If yes, would you be interested in working with the remaining children's centres so some children's centre activity could continue in the building you take on?

Yes		No	
-----	--	----	--

**Q10 Would you or your organisation be willing to take on the daycare provision in a children's centre building that is proposed to close?**

Yes		No	
-----	--	----	--

If yes, would you be interested in working with the remaining children's centres so some children's centre activity could continue in the building you take on?

Yes		No	
-----	--	----	--

**Q11 Are there any other comments you would like to make about the proposals?**

**Please enter your postcode in the box below**

## **Equal Opportunities**

The information you provide will be treated in the strictest confidence and will only be used to monitor take up of services and ensure that no particular individual or group of people are discriminated against in the provision of service. This monitoring information could be passed on to other services of the Council, who need to use it for the same purpose.

### **1. What is your gender?**

<input type="checkbox"/> Male	<input type="checkbox"/> Female
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### **2. Is your gender identity the same as the sex you were assigned at birth?**

<input type="checkbox"/> Yes	<input type="checkbox"/> No
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### **3. What is your age?**

### **4. Are you disabled or do you have a long term limiting illness or condition?**

<input type="checkbox"/> Yes	<input type="checkbox"/> No
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#### **Please give further details below if you wish:**

- Physical or mobility impairment (such as difficulty using your arms or mobility issues which means using a wheelchair or crutches):
- Sensory impairment (such as being blind or deaf or visual / hearing impairment)
- Mental health condition (such as depression or schizophrenia):
- Learning disability/difficulty (such as Down's syndrome or dyslexia) or cognitive impairment (such as autistic spectrum disorder):
- Long-standing illness or health condition (such as cancer, HIV, diabetes, chronic heart disease, or epilepsy):
- Other (Please Specify):

## 5. Are you a Carer?

A Carer is someone who looks after a partner, relative or friend who is an older person, has a disability or long term illness. The Carer may, or may not live in the same household.

Yes

No

## 6. How do you describe your ethnic origin?

<b>White</b> <input type="checkbox"/> British <input type="checkbox"/> Irish <input type="checkbox"/> Other white background - please specify: <hr/>	<b>Black or Black British</b> <input type="checkbox"/> Caribbean <input type="checkbox"/> African <input type="checkbox"/> Other black background – please specify <hr/>
<b>Asian or Asian British</b> <input type="checkbox"/> Indian <input type="checkbox"/> Pakistani <input type="checkbox"/> Bangladeshi <input type="checkbox"/> Kashmiri <input type="checkbox"/> Other Asian background - please specify: <hr/>	<b>Gypsy or Traveller</b> <input type="checkbox"/> Gypsy/Roma <input type="checkbox"/> Irish Traveller <input type="checkbox"/> Other Gypsy or Traveller background - please specify: <hr/>
<b>Multiple Heritage</b> <input type="checkbox"/> Asian and White <input type="checkbox"/> Black African and White <input type="checkbox"/> Black Caribbean and White <input type="checkbox"/> Other multiple Heritage - please specify: <hr/>	<b>Chinese, Yemeni, Arab</b> <input type="checkbox"/> Chinese <input type="checkbox"/> Yemeni <input type="checkbox"/> Arab <input type="checkbox"/> Other Ethnic Group - please specify: <hr/>

## 7. What is your religion or belief (if any)?

<input type="checkbox"/> Buddhism <input type="checkbox"/> Hinduism <input type="checkbox"/> Islam <input type="checkbox"/> Sikhism <input type="checkbox"/> Other please specify _____	<input type="checkbox"/> Christianity <input type="checkbox"/> Humanism <input type="checkbox"/> Judaism <input type="checkbox"/> No religion or belief
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**Thank you for completing this form. The information you have provided will be used to help us to improve our services to you and other people in Rotherham.**

## 13 Glossary of Terms

Abbreviation	Explanation
RMBC	Rotherham Metropolitan Borough Council
CC	Children's Centre
CYPS	Children and Young Peoples Services
PND	Postnatal Depression

## 14 Change History

Issue	Owner	Date	Change Details
1	C Woodward	15/05/14	Initial Draft
2	C Woodward	16/05/14	Report complete
3	C Woodward	02/06/14	Removal of headers/footers for insertion in to the final report as an appendix