RMBC - Equality Analysis Form for Commissioning, Decommissioning, Decision making, Projects, Policies, Services, Strategies or Functions (CDDPPSSF)

**Under the Equality Act 2010 Protected characteristics** are age, disability, sex, gender reassignment, race, religion or belief, sexual orientation, civil partnerships and marriage, pregnancy and maternity. Page 6 of guidance. Other areas to note see guidance appendix 1

Name of policy, service or function. If a policy, list any associated policies:	Early Help Strategy 2016-19 Phase Two & Three implementation:
Name of service and Directorate	Early Help: Children and Young People's Services (CYPS)
Lead manager	David McWilliams: Assistant Director, Early Help & Family Engagement
Date of Equality Analysis (EA)	V1.0 January 2018. PG V1.1 June 2018. DMcW V1.2 September. DMcW 26/09/18 Community Reference Group V1.3 October 2018. DMcW
Names of those involved in the EA (Should include at least two other people)	David McWilliams Paul Grimwood Jenny Lingrell Karla Capstick Susan Claydon Anne Hawke Debi Scott

**Aim/Scope** (who the Policy /Service affects and intended outcomes if known) See page 7 of guidance step 1

The Early Help Service is an essential component of Rotherham Metropolitan Borough Council's (RMBC) Improvement Plan. It is designed to meet the needs of children, young people and families swiftly, when they first emerge, and to prevent the requirement for statutory intervention. Since the publication of the Graham Allen report, Early Intervention: the next steps in 2011 and the subsequent creation of the Early Intervention Foundation (EIF), evidence has been collated to make the case for Early Intervention. The evidence shows that outcomes are better for children and young people if agencies intervene earlier; that working with the whole family is most effective and that the work yields cost benefits across public service, including adult social care; the criminal justice and welfare systems. (The Cost of Late Intervention, EIF, 2016).

Early Help spans a wide age range; 0-19 years (and up to 25 years if there is a disability or special educational need). It incorporates pre-birth, early years, adolescence through to early adulthood. Early Help has a critical role to play at the key transition points in a child's journey from dependence to independence. The service brings together a range of statutory and non-statutory functions including; Family Support Services, Education Welfare, Youth Justice and Youth Support Services.

The statutory guidance, Working Together to Safeguard Children (2018), sets out the requirements for Early Help Services, stating;

The provision of early help services should form part of a continuum of support to respond to the different levels of need of individual children and families.

Local areas should have a comprehensive range of effective, evidence-based services in place to address assessed needs early. The early help on offer should draw upon any local assessment of need, including the Joint Strategic Needs Analysis (JSNA) and the latest evidence of the effectiveness of early help programmes.

In addition to high quality support in universal services, specific local early help services will typically include family and parenting programmes, assistance with health issues, including mental health, responses to emerging thematic concerns in extra-familial contexts, and help for emerging problems relating to domestic abuse, drug or alcohol misuse by an adult or a child.

Services may also focus on improving family functioning and building the family's own capability to solve problems. This should be done within a structured, evidence-based framework involving regular review to ensure that real progress is being made. Some of these services may be delivered to parents but should always be evaluated to demonstrate the impact they are having on the outcomes for the child.

The statutory guidance makes it clear that; all local agencies should work together to support children and families.

The Early Help Strategy 2016-19 Vision is for;

"All agencies working together to ensure Children, young people and families have their needs identified early so that they can receive swift access to targeted help and support," and articulates the 'journey' to put in place an effective, value for money early help offer over three phases.

This supports and directly contributes to the Children and Young People's Services vision;

Working with children, families and our partners, for Rotherham's Children's Services to be rated outstanding by 2018;

Children and young people are healthy and safe from harm Children and young people start school ready to learn for life Children, young people and their families are ready for the world of work

This will mean our children, young people and families are proud to live and work in Rotherham.

**Phase One** of the Early Help Strategy was about going back to the basics. Putting effective systems and processes in place that are easy to access and simple to understand.

Phase Two is the whole service delivery redesign; developing new job roles and more efficient and effective ways of working to embed a shared responsibility across the

partnership for meeting the needs of families earlier. We will build on our achievements in phase one and refine our early Help Offer through further integration and service redesign with our partners and stakeholders.

Phase Three will ensure that we have an effective early help offer that is sustainable and critical to the ambitions of the partnership and the council and implement more radical approaches to ensuring better outcomes for Children, young People and families in Rotherham. We will explore the potential for all-age family integrated services and reshape our existing centres into all age delivery points in localities and communities. We will review our staffing structures and seek to reduce our management capacity as the early help offer becomes further embedded.

This equality analysis concerns Phase Two and Three of the Strategy which proposes the consolidation of key skills within the workforce, an improved management structure, and a redistribution of resources to ensure the needs of the community are matched with demand and need. This includes proposals on which buildings are; Best Value, the most appropriate for direct delivery, accessible to the community, staff bases and co-location with key partners.

A summary of the key changes proposed are:

The development of locality Family Hubs, (Early Help Team bases with staff co-located alongside RMBC services, social care and health partners and provide delivery points for the 0-19 Offer). The commitment to explore the development of Family Hubs is an objective within Phase Three of the Early Help Strategy and is informed by the rationale contained within; Family Hubs, A Discussion Paper, The Children's Commissioner, October 2016.

The introduction of a borough wide Intervention Hub. This will expand upon the current evidenced based programmes used by Early Help practitioners across the borough to achieve better and more sustained outcomes for children, young people and families in Rotherham.

An expansion of the Family Group Conferencing (FGC) and Edge of Care (EoC) provision to ensure that children and families receive high quality, cost effective interventions.

A reduction in the number of Heads of Service posts from four to three.

The creation of an Early Help Service Manager Post.

Greater integration of the Youth Offending Team, bringing interventions into localities so that young offenders are integrated more effectively into their communities and enhancing the multi-agency response from Education, Schools and social care. This is in line with the recommendations of the Taylor Review of the Youth Justice System in England & Wales December 2016.

A proposed reduction in the number of registered Children Centres from 12 to 9, whilst

ensuring the Children Centre Offer within the locality is retained by delivering universal and targeted services from a range of sites better suited to the needs of families. DfE Sure Start Children's Centre Statutory Guidance (April 2013) states;

A children's centre should make available universal and targeted early childhood services either by providing the services at the centre itself or by providing advice and assistance to parents (mothers and fathers) and prospective parents in accessing services provided elsewhere.

The statutory definition of a children's centre states that;

Children's centres are as much about making appropriate and integrated services available, as it is about providing premises in particular geographical areas.

The proposed Children Centres in scope are;

- Park View (Central Locality)
- Broom Valley (Central Locality)
- Wath Victoria (North Locality)

A proposed reduction in the number of local authority maintained Youth Centres and Early Help Team bases from eleven to six.

The Statutory Guidance, Section 507B of the Education and Inspections Act 2006. States that;

It is therefore local authorities' duty to secure, so far is reasonably practicable, equality of access for all young people to the positive, preventative and early help they need to improve their well-being. This includes youth work and other services and activities that:

- a. Connect young people with their communities, enabling them to belong and contribute to society, including through volunteering, and supporting them to have a voice in decisions which affect their lives;
- b. Offer young people opportunities in safe environments to take part in a wide range of sports, arts, music and other activities, through which they can develop a strong sense of belonging, socialise safely with their peers, enjoy social mixing, experience spending time with older people, and develop relationships with adults they trust;
- c. Support the personal and social development of young people through which they build the capabilities they need for learning, work, and the transition to adulthood – communication, confidence and agency, creativity, managing feelings, planning and problem solving, relationships and leadership, and resilience and determination;

- d. Improve young people's physical and mental health and emotional well-being;
- e. Help those young people at risk of dropping out of learning or not achieving their full potential to engage and attain in education or training; and
- f. Raise young people's aspirations, build their resilience, and inform their decisions and thereby reducing teenage pregnancy, risky behaviours such as substance misuse, and involvement in crime and anti-social behaviour.

The proposed Youth Centres and Team Bases in scope are;

- Herringthorpe (Central Locality)
- Treeton (South Locality)
- Kiveton (South Locality)
- Maltby Linx (South Locality)
- Swinton (North Locality)

A set of Guiding Principles were agreed with Early Help Managers and were subsequently approved at the 10<sup>th</sup> July 2017 Cabinet Meeting.

The guiding principles of the Early Help Strategy consultation are:

- To build on what's working well
- To embed whole family working (one family, one worker, one plan)
- To address the current inequities in roles, responsibilities and remuneration
- To support integrated locality working and the Thriving Neighbourhoods programme
- To work restoratively with a culture of continuous improvement and excellence
- To deliver value for money and our approved savings
- To seek savings through reducing the management structure
- To ensure there are clear lines of responsibility and clear progression routes
- To invest in workforce development
- To enable flexible working with high quality and affordable delivery points (Places to go and things to do)

What equality information is available? Include any engagement undertaken and identify any information gaps you are aware of. What monitoring arrangements have you made to monitor the impact of the policy or service on communities/groups according to their protected characteristics? See page 7 of guidance step 2

A snapshot of the service (June 18) shows 3912 children and young people in 1757 families working with Early Help practitioners. Referrals came from a range of health providers, (including adult and children's mental health), a range of education providers (Primary, Secondary and Special). Housing, individuals, Children's and adult social care, nurseries voluntary and community agencies, refuges, police and other emergency services and other local authorities.

The bringing together of services that were previously disparate to provide a coherent and targeted offer means Early Help has an increasing detailed knowledge of the needs of individuals, families and communities.

An analysis of demand shows; Parenting (38.5%) followed by Mental Health and Emotional Wellbeing (20.5%), Family Relationships (9.7%), Attendance and School Engagement (7.2%) and Domestic Violence (3.5%) as the key presenting issues resulting in an Early Help intervention.

Ages of children within the scope of the service range from unborn to 25, with gender distributed as 47% Female and 52% Male. Disabilities account for 1.4% of those worked with.

The Ethnicity of those worked with shows different proportions to the overall ethnic population of Rotherham identified in the 2011 census. White British are a lower proportion and BME groups are higher. This will to some extent reflect further migration from European countries since the last population census, but is still larger than the predicted increase of 10% in BME groups, (Office of National Statistics) indicating a growth in need amongst these groups.

Ethnic Group	Early Help Data	PLASC 2016 Numbers	PLASC 2016 Percentages
A1 - White British	81.45%	36,442	82.6%
A2 - White Irish	7.00%	47	0.1%
A3 - Any other White background	2.62%	1,056	2.4%
A5 - Gypsy / Roma	3.95%	706	1.6%
B1 - White and Black Caribbean	1.01%	299	0.7%
B2 - White and Black African	0.59%	193	0.4%
B3 - White and Asian	1.50%	475	1.1%
B4 - Any other mixed background	0.87%	211	0.5%
C2 - Pakistani	2.72%	2,914	6.6%
C3 - Bangladeshi	7.00%	27	0.06%

C4 - Any other Asian background	0.94%	393	0.9%
D1 - Caribbean	3.00%	26	0.06%
D2 - African	1.36%	480	1.1%
D3 - Any other Black background	0.14%	66	0.15%
E1 - Chinese	0.17%	135	0.3%
E2 - Any other ethnic group	2.41%	292	0.7%
E3 - Refused	7.00%	63	0.1%

Comparison of the 1,657 children worked with in 2017 and the 44,128 children surveyed for the 2016 school census (PLASC) shows that the White British percentage is representative of Rotherham with 84% of those known from this ethnicity.

The percentages White Irish, Bangladeshi, Caribbean and Other ethnic group are high relative to population sizes.

The percentage of Pakistani children worked with is relatively low as a proportion of the overall cohort.

In order to ensure the service maintains an effective and inclusive offer to all groups and communities, the service has a monthly dashboard which is monitored by senior managers Bi-weekly as well as scrutiny through; The Performance Board, The Children and Young People's Partnership, The Early Help Review Board, The Early Help Steering Group and the Children's Transformation Board. This ensures the service knows its target population, can monitor delivery to different groups and also in conjunction with intelligence shared by partners, (e.g. services across the council, police, schools and health), respond to trends within communities.

Engagement undertaken with customers. (date and group(s) consulted and key findings) See page 7 of guidance step 3

A team of Young Inspectors have been involved in the inspection of some Early Help services resulting in improvement action plans and the views of young people will continue to inform service transformation through the delivery of the Early Help strategy.

Children, Young People and Families who receive a service from Early Help are routinely asked to complete an 'Exit Survey' once the intervention comes to an end as part of the Early Help Quality Assurance Framework.

The total number of surveys completed, since the system was launched is 390.

- North 82
- South 70
- Central 221
- Borough wide Services 6
- Children's Disability 1

• Not provided (i.e. skipped Question 10)

Top three presenting needs identified through Exit Surveys are;

- Parenting support for behaviour
- Low self-esteem, self-confidence, self-worth
- Financial difficulties/debt

A summary of feedback below shows that Families value the support from Early Help Practitioners.

97% (360 people/families who responded to this question) got support when they most needed it

98% (364 people/families who responded to this question) received the service they were expecting

97% (364 people/families) rated their overall experience of the help and support they received from the worker(s) within the Early Help Team as Good or Excellent

81% of respondents (291 people/families who responded to this question) are still using something they have learnt from us now.

98% (364 people/families who responded to this question) felt listened to and involved in the planning of services and support they received.

95% (329 people/families who responded to this question) said that the support/services provided by the Early Help Team had a positive impact on their life and the life of their children.

Through the proposals in the Early Help Review, these roles will be strengthened further with greater equity in workload and remuneration and better career development opportunities.

In the Autumn and winter of 2016/17 a significant consultation was undertaken during with; children and young people, staff, Voluntary and Community Sector, the Children and Young People's Strategic Partnership, Health and Wellbeing Board, Local Safeguarding Board, Safer Rotherham Partnership, Early Help Steering Group, Department for Communities & Local

Government, Troubled Families Unit, Sheffield City Council, Department for Education, Practice Improvement Partner (Lincolnshire County Council) and all Rotherham Ward and Parish Councillors.

A robust 90 day consultation (60 day Public and 30 day Staff) will involve meetings with all staff as well as formal communication via letter and the offer of individual support through Human Resources (HR) and Early Help managers. The consultation will involve the Trade Unions and will be delivered through a combination of public meetings, online surveys and use of existing fora, for example Children Centre Advisory Panel. This consultation will seek the views of; parents, young people, Members, partners, stakeholders, professionals and members of the community through a series of consultation events across the borough. There will also be a dedicated Twitter account #earlyhelpconsultation2018 and an email account earlyhelp.consultation@rotherham.gov.uk for Frequently Asked Questions (FAQs).

Partners to be engaged in the Early Help Whole Service Redesign consultation include;

All Early Help RMBC staff, all Ward and Parish Councillors, CYP Strategic Partnership, HWB Board, Safeguarding Board, Safer Rotherham Partnership, all school Headteachers and school Governors, Voluntary Action Rotherham, Voluntary and Community Sector, Children and Families Consortium, South Yorkshire Police, Rotherham Ethnic Minority Alliance (REMA), Health Watch, Rotherham United FC, Public Health, Rotherham Doncaster and South Humber NHS Foundation Trust (RDaSH), The Rotherham NHS Foundation Trust (TRFT), Clinical Commissioning Group (CCG), Youth Cabinet, LAC Council. Barnardo's, Community Plan.

A 60 day Public and Partner consultation began on 9<sup>th</sup> April 2018 and ceased on 7<sup>th</sup> June 2018. This consisted of 17 public and partner events across the borough including bespoke sessions in centres and buildings in scope, and presentations via strategic fora.

An online consultation was also available for public and partners.

In total 276 individuals or agencies participated in the Public and Partner consultation process:

(CDDPPSSF)
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On line consultation	164
Youth consultation	47

PublicEvents 65 (including VCS)

Engagement undertaken with staff about the implications on service users (date and group(s)consulted and key findings) See page 7 of guidance step 3 A 30 day staff consultation commenced on 8<sup>th</sup> June and finished 8<sup>th</sup> July. All Early Help staff received formal notification via letter of the 8 formal consultations taking place in June and was offered individual support on request through Human Resources (HR) and Early Help managers, who were also in attendance at the meetings.

Three informal talk back sessions were also held with Early Help staff in April prior to the public consultation

A separate email box was provided for questions, comments and suggestions from staff. (Frequently asked Questions) and these were updated during the consultation with comments and placed on the RMBC website for all to see.

The informal talk back sessions saw a total 103 staff attending and 233 staff in all attended the 8 consultation meetings.

The FAQ email generated 132 enquiries.

### The Analysis

How do you think the Policy/Service meets the needs of different communities and groups? Protected characteristics of age, disability, sex, gender reassignment, race, religion or belief, sexual orientation, Civil Partnerships and Marriage, Pregnancy and Maternity. Rotherham also includes Carers as a specific group. Other areas to note are Financial Inclusion, Fuel Poverty, and other social economic factors. This list is not exhaustive - see guidance appendix 1 and page 8 of guidance step 4

The Early Help Service covers a wide range of need and includes working directly with different communities and groups. However, some need is universal and not unique to protected characteristics (e.g. parenting). The proposed service will need to take account of cultural differences and strengths, and the unique circumstances of some young people and families in Rotherham.

In order to achieve this, the service has remodelled the Early Help Assessment (EHA) process to align with the Signs of Safety (SoS) model that all staff within Early Help are being trained in.

To date 96% of staff have been trained and are embedding the approach within their work with families. This is an innovative strengths-based, safety-organised approach to working with children and families. At the heart of the Signs of Safety process is an assessment and case planning format that integrates professional knowledge with local family and cultural knowledge, to identify and implement interventions that will benefit children, young people and families avoiding the need for further costly interventions'. Early indications of its use with Early Help families are positive.

The impact of changes across the protected characteristics groups that Early Help works with is detailed below and is most likely to be initially experienced in the form of less frequent interventions or different models of engagement.

As the service moves towards more evidenced based, outcome focussed, and targeted forms of delivery, those individuals from protected groups are likely to experience a more enhanced service.

It is of particular importance that the service is agile enough and has tools that are flexible to respond to future need and changing demographics such as the population becoming more culturally diverse.

As well as responding to need as illustrated in the snapshot, the service also takes account of the fact that those most likely to require help and support are located in areas of multiple deprivation,

31.5% of Rotherham's population live in areas which are amongst the most deprived 20% in England and the most deprived areas in Rotherham are;

In Ferham, Eastwood, East Herringthorpe and Canklow circa 60% of children are affected by income deprivation. Although there are also high pockets of deprivation in other areas e.g. Maltby. The proposals within the redesign include relocating resources both management and staff to better reflect this need and to revise job descriptions to enable a more flexible workforce that is better able to respond to changes or spikes of need and demand.

The remodelling of the service aligns with the direction of travel in the proposed Working Together Guidance 2018. This emphasises the importance of Early Help in conjunction with partners to deal with unmet or emerging need in local communities and via evidence based assessment, utilising other evidence based tools, to work with families in context taking account not just of need and protected characteristics but the social context in which families find themselves.

The proposed changes to Children's Centres are likely to offer a more appropriate service to families and those with protected characteristics. Although three centres are proposed for deregistration with two presenting difficulties with access. The capacity of the service will remain and the 'offer' within the community will remain with delivers secured through a 10 hour Service Level Agreement (SLA) with the majority of the services continuing to be delivered in the community, as is the case at present.

0-4 years Context

- 15,675 children aged between 0 and 4 years
- 0-4 years increased by 2.5% since 2011
- Early Years numbers are projected to decrease very slowly until 2019 then stabilise
- 8361 (53%) live in areas within the most deprived 30% of England
- Rotherham South and Rotherham North have the most children
- Rother Valley South and Wentworth Valley the fewest.
- Most deprived areas in the Borough tend to have a higher proportion of children aged 0-4 (reflected in the numbers living in the most deprived 30% of areas)
- Rotherham South and Wentworth South have highest numbers living in areas of high deprivation

### Park View (Central Locality)

Wards affected: Hoober Ward, Keppel Ward, Rotherham West Ward and Wingfield Ward.

Rationale: Serves 677 children from the 30% most deprived areas

No specific areas with very high deprivation.

Pockets of moderately high deprivation spread over a wide geographical area.

\*Previously considered for de-registration under the last restructure.

Manager and staff are predominately based at the Central Children's Centre.

Consists of a small community room and office space in the school site.

36% of families access services at the building and 77% access services in the community 22% using other Centres.

Community can be served without a physical building.

Deprivation lower here compared to other Central Children's Centres.

#### **Broom Valley (Central Locality)**

Wards affected: Boston Castle Ward, Brinsworth and Catcliffe Ward, Rotherham East Ward, Rotherham West Ward, Sitwell Ward, Silverwood Ward, Valley Ward, Wickersley Ward.

**Rationale:** Serves Central Rotherham and areas to the South Diverse area, large number of children and significant areas of deprivation

Located in a difficult location on a steep hill, and private road.

Running limited activities since April 2017.

Reach area split between Park View and Coleridge.

No concerns raised by parents, Advisory Board members or partners.

40% of families access services at the centre.

Mainly health services which could be re located to the busier Coleridge area.

62% of families currently access services within the community and a further 12% access services elsewhere.

Deprivation level lower compared to other Central Children's Centres

#### Wath Victoria (North Locality)

Wards affected: Hoober Ward, Swinton Ward and Wath Ward.

**Rationale:** Deprivation levels average for the borough, pockets of higher deprivation scattered across the 'Reach' area.

Wath Victoria serves 364 children from the 30% most deprived areas.

Accessible from Brampton and West Melton (to the West).

Two small community rooms and a small office space attached to the school.

72% of families currently accessing services from other venues.

26% of families also accessing other Centres.

\*Previously considered for de-registration under the last restructure.

It is proposed that the Youth Building remains in Wath in order to develop a 0-19 'Family Hub' and a Service Level Agreement (SLA) will be implemented for 10 hours Children's Centre use as a 'linked site.'

In addition to the dashboard and scrutiny mentioned above The service carries out frequent audits of cases and evaluates services provided to ensure we are continuing to meet the disparate needs of the population. In addition Early Help is more than just an RMBC service and works in partnership with agencies to respond to Rotherham communities. Recent examples include responses to Hate Crime and CSE.

### Analysis of the actual or likely effect of the Policy or Service:

See page 8 of guidance step 4 and 5

Does your Policy/Service present any problems or barriers to communities or Group? Identify by protected characteristics Does the Service/Policy provide any improvements/remove barriers? Identify by protected characteristics

Analyses of the proposals show that there will be an impact for staff in the reduction of posts within the service.

Whilst communities, families and young people are likely to feel some impact in terms different delivery models and different locations, this will be offset in the longer term by an increased skilled workforce, the increased use of evidence based interventions and assessments and Early Help interventions that build on existing strengths within the individual, family and community.

The proposed changes to the Early Help Staffing establishment would deliver a ratio of Management to frontline staff as follows;

Management: 13%Frontline staff: 87%

he analysis of current need within the Early Help population and the desire to continue Rotherham's improvement journey indicates that in order to continue to provide an effective service to the needs (illustrated in the snapshot data), the service needs to upskill the workforce to provide an enhanced level of skills and support to both families and partners.

The proposed redesign of the service will also incorporate the reduction of 12 registered Children's Centres to 9 and 11 Youth Centres to 6. It is proposed that the Children

Centres that become deregistered will continue to run from linked sites with schools providing day care.

### A Summary of the Youth Centre Proposals:

Swinton Youth Centre – Proposal: Decant & transfer to school with SLA

#### Rationale:

Four 'early help' buildings within close proximity in this area of the borough.

Attendance declined by 48% in two years.

Majority of youth contact associated with Swinton Centre is street based

Only 23% of youth work delivered from this centre is Universal.

77% Targeted (44% street based).

Service Level Agreement with the school to ensure current and future demand The street based detached youth work will continue to be targeted and remain unaffected by these proposals.

• Herringthorpe Youth Centre – Proposal: Decant & provide youth offer through different venues & provide better accommodation for staff

**Rationale:** Lowest engagement with young people compared with the other youth centres in the Central patch.

Attendance declined 42% in two years.

Diverts young people away from the multi-agency centre (The Place) where Health, Early Help and Children's Social Care are collocated and where wider needs can be met in one place.

\*Staff cannot base themselves to work due to the poor facilities.

Does not operate as a traditional 'open access' Youth Club.

Use is exclusively by invitation only (targeted).

• Treeton Youth Centre – Proposal: Decant & provide youth offer through different venues & offer better accommodation for staff

#### Rationale:

Majority of youth work undertaken in Treeton is 'open access' or street based.

Building in a poor state of disrepair and requires significant investment.

Youth work undertaken in Treeton is targeted group work or street-based.

Site includes the old school house (used by staff as office space).

MUGA (Multi Use Games Area) on site.

Staff have an alternative base at Catcliffe school.

Will also offer shared delivery with the Children's Centre Linked Site.

Staff 'hot desk' from Aston Service Centre and benefit from the colocation with social care and health colleagues.

Discussions underway re developments and space in Brinsworth.

• Kiveton Youth Centre – Proposal: Decant & provide youth offer through different venues & offer better accommodation for staff

#### Rationale:

Centre is in a very poor condition.

Roof leaks, Damp, Structural cracks & requires replacement.

Building is not fit for purpose and inadequate for the delivery of a high quality youth offer Not an appropriate staff base.

Insufficient capital in the CYPS capital programme to rectify.

Attendance declined 52% over last two years.

Majority of youth work undertaken in Kiveton is open access or street based.

\*Also used for the delivery of adult services and a community radio station and will require an exit strategy for all services using this building.

 Maltby Linx Youth Centre – Proposal: Decant & transfer to school with SLA in place with the school for negotiated space

#### Rationale:

Majority of youth work is open access or street based and this will continue in the future.

Located within the school grounds.

Discussions taken place with Maltby Academy to negotiate continued use of the building in the evenings and daytime for targeted work.

Attendance declined 64% in two years.

School already use the Centre during lunchtimes.

Minimum disruption to provision as the primary focus of the proposal is regarding the staff bases and better, use of the children's centre (proposed to become a 0-19 family hub). Delivery of some youth sessions and targeted work will move to the family hub within the children's centre.

It is anticipated that school will continue to agreed use of the building due to the good working partnerships already developed.

Minimum disruption to young people and improve working conditions for staff.

A consultation in March 2016 with young people found the majority who responded did not visit council youth centres but felt it was "important they remain open, suggesting that the current youth offer isn't attractive enough for young people, but that it is important services are re-designed in such a way that they are relevant and accessible. Under the redesign targeted outreach/detached workers will still be accessible and some buildings will become Family Hubs. (Early Help Team bases with staff co-located with social care and health partners and delivery points for the 0-19 offer).

Comparison data for Q1 2016 and Q1 2017 shows:

- Recorded attendances at Youth Centres overall have dropped from 3381 to 1735 (Approximately a 48% reduction).
- **AGE:** In Q1 2016, 16 year olds were the largest group of attendees at 17.5%, whilst in 2017 13 year olds were the largest group at 26.4%.
- **Gender:** Males form the largest group at 59.4% for Q1 in 2016, reducing slightly for Q1 2017 to 54.4%
- Ethnicity: 6.5% of all attendees were BME in Q1 2016, rising slightly in Q1 2017 to 10.3%
- In Q1 2016; 27.3% of attendances were recorded as detached work (non-building based).
- In Q1 2017; 24.3% of attendances were recorded as detached work.
- In Q1 2016; 53.9% of attendances were open access sessions.
- In Q1 2017; 55.9% of attendances were open access sessions.
- In Q1 2016; 18.8% of attendances were recorded as targeted sessions.
- In Q1 2017; 19.9% of attendances were recorded as targeted sessions.

#### Feedback Summary: Staff

A 30-day staff consultation commenced on the 8<sup>th</sup> June. All Early Help staff received formal communication via letter of consultation events and were offered individual support on request through Human Resources (HR) and Early Help managers. Trade Unions were regularly updated through meetings with the Senior Director for Early Help and attended all staff consultation meetings.

Three informal talk back sessions were held with Early Help staff in April in tandem with the public consultation. Eight formal staff consultation meetings were then held in June to discuss the implementation proposals in more detail.

103 staff engaged in talkback sessions and 233 attended formal staff consultation meetings.

133 questions were submitted by staff in relation to the proposals.

The majority of staff were supportive of the proposals, seeking clarity on more technical issues relating to job descriptions and implementation timelines.

Some staff expressed concerns of possible 'de-skilling' of a specific specialisms, whilst others welcomed the opportunity to widen their skills and knowledge through the expanded job roles.

### Feedback Summary: Service users, partners

The initial 60 day public consultation was delivered through 17 public and partner events across the borough including bespoke sessions in the centres and buildings in scope and presentations at strategic fora. Details of meetings are outlined in this appendix. All schools were informed by email of the events and were offered the opportunity to attend an event or engage in the online consultation.

In total 276 individuals or agencies participated in the Public and Partner consultation

process through the following methods:

Partner /Public Activity	Numbers Participating
On-line consultation	164
Youth consultation	47
Public events	65
Existing Fora	4 meetings attended
Email	4 partner responses
Correspondence from MP's	1

122 adults and 113 parents

116 (95%) were Rotherham residents

13 (10.6%) had a disability

77 parents (63%) said that they would travel between one and ten miles to access provision for 0-5 years

35 parents (31%) said that they would travel between one and ten miles to access provision for children plus five years

27 (24%) of parents said they would be willing and able to pay to access early help services

70 parents (62%) said they would be willing to pay (dependent on cost)

Parents valued the Children's Centre offer particularly weaning and feeding advice, Health Visitor weigh-in, baby clinics, health advice, drop-in sessions and parenting programmes

#### Themes:

- Strong support for locally based centres and the need for low cost, or no cost activities
- Greater clarity required on the differences between a Children Centre (physical building) and delivery of a 'Children Centre Offer'
- Schools rated the Early Help Offer highly
- Schools spoke highly of the support that they receive from Early Help
- Strong support from young people and youth workers for retaining a discrete 'Group Work Offer' for young people from vulnerable groups

#### Feedback Summary: Young People

Findings from the children and young people who responded to the Youth Survey indicated that:

18 (38%) were aware of services offered

29 (62%) were not aware of services provided

11 (24%) said that they were accessing youth provision.

21 (44%) of young people said that they had never accessed any RMBC youth provision

### Does your Policy/Service present any problems or barriers to communities or Group?

Proposed move towards a more targeted service for those in need of early help, it is not envisaged that the service will present any barriers to communities and groups.

Accessibility, physical and geographical will be considered as part of the consultation process. This will continue to be carefully monitored by the service.

### Does the Service/Policy provide any improvements/remove barriers?

Early Help services are not delivered in isolation and the Early Help Strategy 2016-19 emphasises the importance of developing partnerships with wider services across the Council and key partners and agencies to achieve greater synergy and further efficiencies (e.g. buildings, workforce, information sharing, systems and processes). This process began in Phase One with the co-production of the Early Help Offer, Request for Support and the Early Help Assessment.

What affect will the Policy/Service have on community relations? Identify by protected characteristics

A = Age, C= Carers D= Disability, G = Gender, GI Gender Identity, O= other groups, RE= Race/ Ethnicity, RoB= Religion or Belief, SO= Sexual Orientation, PM= Pregnancy/Maternity, CPM = Civil Partnership or Marriage.

The Early Help Strategy 2016-19 will ensure that the service continues to work with the specific specified groups identified through the Protected Characteristics. Anticipated Impact will be low.

#### A: Staff

Early Help Workforce By Age Range: January 2018					
FTE	16 to 24	25 to 39	40 to 49	Over 50	
235.10	3.65%	35.56%	29.48%	31.31%	

Staff in the main were supportive of the need for a 0-19 approach to delivery and in full agreement with regarding implementing an equitable pay structure. The range of roles within teams provided opportunities for staff members to share and develop skills.

The proposed management structure was felt to be top heavy and concerns were raised about what was seen as the removal of distinct professional roles (e.g. youth work). It was felt that outreach work was not the same as detached work.

Staff queried the differentiation between Band F and Band G job descriptions and the Band H roles within the YOT.

Questions were also raised about part time working and flexible working and how this would be articulated within the new structure.

#### A: Service Users

Young people are likely to experience limited or no reductions in service provision as a result of reconfiguration in 18/19 and 19/20. This is most likely to take the form of less universal (open access) youth work sessions in each locality.

The Service will maintain a commitment to the Voice and Influence of young people, and this will be a locality responsibility in future.

The Service will continue to adhere to the principles of engaging young people and is committed to ensuring young people have a say in the future of the service, as illustrated by the continuation of the young inspectors programme.

Services will still be maintained and accessible in all the locality areas of Rotherham, with the potential to increase provision by working with partners/local communities. In addition services will be local and therefore more accessible to the different community groups within Rotherham.

The service retains a statutory commitment for learning difficulties and disability up to the age of 25. Provision for this group will be more localised and targeted which may offset any reductions in frequency. The service will continue to maintain positive experiences and opportunities for those with disability.

Comments from the public consultation showed strong support for locally based services, but concerns about distance to be travelled and outreach services. Further clarification was required when concerns were raised that centres are closing rather than continuing to deliver and offer services within the community or through SLA's and alternative building management arrangements through asset transfers. More specifically, concerns were expressed about services running from Maltby Lynx and how these will continue via a service level agreement with the school.

Although only 29% of young people responding said they had accessed youth activities the majority of these rated activities as good or excellent. Concerns were also expressed about delivery from Maltby Lynx in relation to young people with Autism. The provision of youth activities in Kiveton was also raised.

Partners favoured the Early Help model. Schools reported strong working relationships with Early Help and thought the model identified students with needs sooner enabling positive support to children and families before problems developed further. All agencies agreed that interagency working and communication had improved.

#### D:

8.01% of the Early Help workforce has identified themselves as having a disability.

The public and youth consultation were concerned that a service level agreement may not be sufficient to maintain sessions at Maltby Lynx for disabilities and autism. The staff consultation raised a question that a more generic working model may restrict support to

specific groups including learning difficulties

#### R/F:

The total BME of the early Help workforce for January 2018 is 4.82%.

The service is committed to working with equality and diversity and the snapshot evidences this. The Service will continue to place a high priority on community cohesion and community relations. And in particular is looking to improve hate crime reporting. The service will continue to work in partnership with agencies and groups at a locality level to deliver interventions tailored to different ethnic groups, including new arrivals and refugees.

#### RoB:

The Service has a strong commitment to respecting religion or belief, where these do not advocate harm to others, and a proven track record, (e.g. Children's centres, youth services). In celebrating with young people and others those beliefs that are relevant to communities in

Rotherham. This will continue to be the case and will not change as a result of the proposals.

#### PM:

Sexual Health services and clinics for young people will continue. Young people for whom there are associated risks either to themselves or their babies, (e.g. CSE, potential neglect,

drug use), will continue to receive a service either directly from Early Help or jointly with Social Care. Where there is little or no associated risk and young people have other support in the community then services will reduce.

#### CPM:

Analysis suggests that there will be a low impact from Early Help services with this group.

#### G:

It is likely that some universal group work delivered to groups of young men and women will no longer be available. However, assessments of service users will define interventions and this will involve specific delivery (group work or individual) for identified gender needs. Project work such as sexual health clinics will continue.

#### GI/SO:

Young people who identify as LGBT are likely to have specific needs and to therefore fall within the remit of targeted early help provision. A service will therefore continue to be offered to this group but models of delivery may change. This group is one of those that are most likely to experience prejudice, discrimination and hate crime. Targeted provision will assist in promoting community relations.

As noted above the staff consultation raised a question that a more generic working model may restrict support to specific group, learning disabilities, those not in education or training, 0-5, and LGBT

### 0:

In respect of other groups and specifically the older generation the Service does not specifically engage or target them unless it is part of an intervention (whole Family Working) within the scope of the service. Young people can often be perceived by older generations to be disrespectful and at worst engaging in antisocial behaviour Work has been done to present young people in a more positive light to older people and this will continue. The current relationships with local for and will continue to be maintained, and the service will seek to promote positive community relations between generations.

For other socio economic factors that may impact disparately on Rotherham's communities, the ambition of the service in conjunction with partners is to work to a Rotherham Family Model.

• This combines three methodological approaches; 'Signs of Safety' 'Restorative Practice' and Social Pedagogy which have common principles that are grounded in relationship based practice. This includes placing high emphasis on the nature and style of communication and promotes the importance of producing simple, solution focused plans that appropriately meet need to achieve tangible change. Both methodologies promote the value base that sustainable change is most likely to be achieved when families are empowered to find their own solutions to the issues that they face. This is reinforced by placing high support, as well as high challenge, at the centre of practice and emphasises risk, as well as strengths, to enable families to 'own' their plan and understand what is needed to produce strong outcomes for children and the wider family.

The staff consultation recognised that the training opportunities within this approach are providing a baseline for a consistent family centred approach.

Please list any **actions and targets** by Protected Characteristic that need to be taken as a consequence of this assessment and ensure that they are added into your service plan.

**Website Key Findings Summary:** To meet legislative requirements a summary of the Equality Analysis needs to be completed and published.

**Equality Analysis Action Plan** - See page 9 of guidance step 6 and 7

### Time Period April 2018 – February 2019

Manager: David McWilliams Service Area: Early Help

### **Title of Equality Analysis:**

If the analysis is done at the right time, i.e. early before decisions are made, changes should be built in before the policy or change is signed off. This will remove the need for remedial actions. Where this is achieved, the only action required will be to monitor the impact of the policy/service/change on communities or groups according to their protected characteristic.

List all the Actions and Equality Targets identified

Action/Target	State Protected Characteristics (A,D,RE,RoB,G,GI O, SO, PM,CPM, C or All)*	Target date (MM/YY)
ACTION: Consultation with Children, Young People and Families.  TARGET: Presentation and meetings will take place from April 2018.	All	Public consultation: 9 <sup>th</sup> April – 7 <sup>th</sup> June. Staff consultation: 8 <sup>th</sup> June – 8 <sup>th</sup> July.
ACTION: Ensure services remain accessible to those most in need.		
TARGET: Continue to report on performance data via early help dashboard  TARGET: Development of evidence based interventions and impact measurement	All	Monthly
ACTION: Response to tensions within communities	All	March 2019

TARGET: To ensure all agencies are proactive in supporting the work of the Early Help Service		
TARGET: Attendance at CIMs – proactive response to community issues. (e.g. operations KeepSafe and Scorpio)		
ACTION: Mitigate reductions in youth service provision / Children Centres	All	March 2019
TARGET: Early Help locality Managers to develop and explore partnership alternatives for open access provision.		
ACTION: Maintain the annual programme of events that raise awareness, and educate and bring people from different groups together.	All	March 2019
Promote community cohesion and One Town, One Community		
TARGET: Locality teams to promote specific themes		
Name Of Director who approved Plan	Date	

<sup>\*</sup>A = Age, C= Carers D= Disability, S = Sex, GR Gender Reassignment, O= other groups, RE= Race/ Ethnicity, RoB= Religion or Belief, SO= Sexual Orientation, PM= Pregnancy/Maternity, CPM = Civil Partnership or Marriage.

Website Summary – Please complete for publishing on our website and append to any reports to Elected Members SLT or Directorate Management Teams

Directorate: CYPS

Function, policy or proposal name: Early Help

Strategy

Function or policy status: New

Name of lead officer completing the

assessment:

David McWilliams

Date of assessment: January 2018

Additional information that might be added could include:

- Information on investment and resources
   Clarification of how Children's Centres fit into the Early Help offer
- How does this link to voluntary sector?
   Time frames for interventions to start
- How does health fit in? In particularly, are there clear links to CAMHS and End of Life Services?
- How will early help support transition from children's to adult services?

Early Help services in Rotherham requires a shift in emphasis from open access, universal provision to targeted interventions.

Following Public, Partner, Youth, and Staff consultations there is broad acceptance of the Early Help model

se issues. A number of issues were identified around capacity, availability and suitability of service, changes in role and support for vulnerable young people. Within TRFT an increase in safeguarding means the service has difficulty in completing Early Help assessments

To ensure the Early Help offer is outcome focused and developed in partnership with partners, service users and wider services across the Council to achieve synergy and further efficiencies (e.g. buildings, workforce, partnerships, shared systems and processes).

RMBC - Equality Analysis Form for C	ommissioning	, Decommiss	ioning, Decisi	ion makin	g, Proje	cts, Poli	cies,	Servi	ces,
Strategies or Functions (CDDPPSSF)									
	1 -				I				

Concerns have been expressed about specific buildings and specific groups, and the deregistration of some building has been associated with closure. Further reassurance is required on these issues.

For partners a number of issues were identified around capacity, availability and suitability of service, changes in role and support for vulnerable young people. Within TRFT an increase in safeguarding means the service has difficulty in completing Early Help assessments

Staff raised the issue of whether generic models may impact on specific groups and required clarification in relation to F, G, and H Banding.

Part time/flexible working

Discussion with school and with specific groups to reassure or clarify continuation of provision for specific groups within the SLA

Reassurance/explanation to specific communities regarding deregistration and how services will continue to be provided

Reassurance to partners

To be considered by SLT and incorporated into final document

Will be considered by SLT/HR and incorporated into final arrangements for the process of reorganising staff.