# RESHAPING CHILDREN’S SERVICES

<table>
<thead>
<tr>
<th>Cabinet Meeting</th>
<th>16 December 2015</th>
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<tbody>
<tr>
<td>Children &amp; Young People and Strategic Commissioning</td>
<td>Cllr Paul McLain</td>
</tr>
<tr>
<td>Key Decision</td>
<td>Yes</td>
</tr>
</tbody>
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## Background Documents

1. Children and Young People’s Plan 2015-18
2. Cabinet Report, Young People’s Services July 2015
3. Scrutiny Task group report ‘Recruitment and retention of social workers’
4. Individual Cabinet Member Decision Report June 2015: Reshaping Services for Families with Young Children.
5. Pre-engagement Report.
6. Commissioning plan for Families with Children aged 0-11 Years
7. Due Regard Statements for each Locality
8. Due Regard Statement - Re-shaping children services.

## Location/Contact for inspection of Background Documents

7. Due Regard Statements for each Locality.

## Main Consultees

- Parent, carers and young children.
- Social care staff including social workers
- Children’s centre staff, managers and managing organisations.
- Professionals and partners who deliver services to children and to families with young children.
- NHS Gloucestershire CCG through the Joint Commissioning Partnership.
- Gloucestershire Schools Forum.
| **Planned Dates** | • Cabinet decisions Dec 2015, February (budget) and May 2016.  
• Budget consultation Dec 2015 – Feb 2016  
• Consultation on options for family support January- March 2016.  
• A procurement process for a revised service May- October 2016.  
• A revised service in place by March 2017. |
| **Divisional Councillor** | All |
| **Officer** | Linda Uren, Commissioning Director, Children and Families (statutory Director of Children’s Services)  
Email: linda.uren@gloucestershire.gov.uk |
| **Purpose of Report** | To seek Cabinet approval to invest in children’s social worker capacity and consult on options for the future delivery of family support services for families with young children. |
| **Recommendations** | 1) To agree to propose investment of £3.7m between 2016/18 in additional social worker capacity as part of the Medium Term Financial Strategy, and  
2) To authorise the Commissioning Director for Children and Families to undertake a formal consultation on the proposed options for family support outlined in this report during January to March 2016. |
| **Reasons for recommendations** | To ensure the council can meet its statutory duties in respect of vulnerable children by targeting investment more effectively and authorise a consultation process to develop family support services for families with children under 11 years of age. |
| **Resource Implications** | The total budget in 2015/16 for services for vulnerable children including early help, prevention and children’s social care is £76.6m, this rises to £81.1m if Public Health grant funded services are included...  
The budget for education, health and family support for young families in 2015/16 is £37m. This includes public health nursing (health visiting and school nursing), nursery education, children’s centres and other family support services funded by the council.  
The proposed budget for children’s centre services in 2016/17 is £8.0m. The consultation process described in this report will inform budget decisions from 2017/18.  
The Early Years Funding Block of the Dedicated Schools grant is £25.3m (2015/16) which includes £22.6m allocated to nursery provision for 2, 3 and 4 year olds and £2.7M allocated to children’s centres. |
In October 2015 funding for public health nursing (health visiting) transferred to local authorities as part of the Public Health grant; this will mean £3.141m additional funding in 2015/16 (£6.282M in full year). In addition the Public health grant funds the school nursing service (£1.6m, 2015/16). However the government has announced reductions in the Public Health grant over the next five years and these will have to be taken into account in the council’s budget decisions.

Income received by children’s centres for 2015/2016 will be approximately £2.3m due to the provision of nursery education places. Budget allocations to each children’s centre locality are based on the number of children identified through Indices of Deprivation Affecting Children Index (IDACI) in children’s centre area as being in greatest deprivation.
MAIN REPORT CONTENTS

1. Introduction

The purpose of this report is twofold: to respond to the pressures on the children’s social care system and to outline options for the development of education, health and family support services for families with young children as the basis for consultation.

Background

The Children and Young People’s Plan agreed by the council and its partners has a clear ambition: for all children to receive the best start in life and to reach their full potential. Most children in the county continue to live and do well; there is however a continued need to focus on the most vulnerable children and families. As a consequence the plan has the following aims, that our vulnerable children will thrive with help from their family, their community and universal services and with specialist help when needed.

The council has already consulted on and agreed its key policies which includes helping people to help themselves, a core principle that underpins the support needed by young families. Any new service models need to align with the need for greater community engagement and user-led services.

The pressures on children’s social care are well known both nationally and locally; these partly relate to higher expectations in respect of support provided to our most vulnerable children and also to the national shortage of experienced, qualified social workers. Locally we have seen a sustained increase in referrals to both the police and social care, with an increase of 5.3% in the numbers of children in Care since October 2014. Despite successful recent recruitment the workforce as a whole is inexperienced and turnover rates remain high (13% averaged across the service).

In this context it is very important that early help arrangements are effective and successful in reducing demand on specialist provision. The council and its partners have recently reconfigured early help arrangements to integrate targeted family support with Families First (Troubled Families) and establish an early help hub within each district. Early Help hubs aim to support local partnerships to coordinate effective support for families, children and young people who need additional help but do not need specialist services such as social care.

The transfer of responsibility for public health nursing (health visiting) to the council and the expiry of current children’s centres contracts in March 2017 provides a unique opportunity to reconsider how a number of core family support services might be better coordinated and targeted to achieve the best possible outcomes and value for money. This is reflected nationally, with the government having just announced a review of children’s centres and Ofsted pausing its inspection programme.

There is a need for system wide change across the partnership working with vulnerable children and their families. As a consequence the council has put in place a Vulnerable Children’s programme which aims to reshape provision based on feedback from families and evidence. The aim is to target investment and intervention on those who most need it. Cabinet has already considered a report on working with the most vulnerable young people.
and their families in July; this report describes plans for children’s social care and family support for children up to 11 years.

**Proposals**

There are two overarching aims:

- To improve outcomes for children ‘at risk’ through high quality interventions which achieve stability within a family setting
- To ensure that vulnerable children are identified and supported to achieve good outcomes within local communities

To achieve these aims, commissioning intentions are:

- To shift and increase investment into the social care workforce to improve the quality of interventions
- To reshape family support services for families with younger children to ensure they target emerging needs effectively
- To continue to support a diverse range of early years provision to work in an integrated way to support all families

The proposed investment in social work capacity is based on analysis of current workload, turnover, absence rates and use of agency cover. Assumptions have been made about the need to protect workload of newly qualified staff and also that retention rates will improve over time. The analysis also recognises the need to ensure additional supervision and therefore line management to ensure the system is safe. The investment will provide additional social workers to reduce high caseloads, improve quality of practice and recruitment and retention. This will aim to reduce the reliance on agency staff over a three year period. A more stable workforce should reduce caseloads over time and improve the effectiveness of work undertaken. The consultation on the 2016/17 budget will allow for these proposals to be tested before final decision in February 2016.

It is also proposed to consult on the attached commissioning plan for services for young families, this is a joint commissioning plan agreed with Gloucestershire Clinical commissioning group (GCCG). The plan is based on the six principles as set out in the pre-engagement phase; it describes how health, education and care services need to work together to support families effectively and emphasises the importance of the workforce offering integrated support. It also envisages stronger support for parent and community led organisations and a redefined role for family support services working across children’s centre buildings.

The key features of the plan include:

- The development of a Parent and Community Support service to offer advice and support to schools and voluntary and community groups who wish to run services within children centre buildings including early education and childcare provision.
- Refocussing Children’s Activity Grants on the under 11s and encouraging councillors to support community and parent led groups through this process.
• Expanding existing children’s centres childcare facilities to meet government proposals to increase the nursery education entitlement to 30 hours a week for 3 and 4 years olds of working parents.

• A high quality public health nursing ‘offer’ based on the national model Healthy Child programme working closely with midwifery services and family support.

• Maintaining the current network of Gloucestershire children’s centres as the basis for:
  - Early education and childcare for targeted families.
  - Informal support for families delivered by communities.
  - Bases for professionals who work with families

and reconfiguring children’s centre and Families First Plus staff teams to provide a locality based and integrated family support response based in and around 16 Children and Family Centres, located in the most deprived areas. These teams will work closely with other local providers to provide high quality, evidence based family support and reach greater numbers of vulnerable children.

Current Issues that need to be addressed

These proposals are based on an analysis of the issues that need to be addressed and feedback from surveys and pre engagement work.

Safeguarding pressures

There are a number of pressures, nationally and locally, which need to be addressed. Our understanding of children and young people’s vulnerabilities has increased as have our expectations about the quality of professional response. We have seen an increase in the numbers of young people identified as being at risk of CSE and have also sought to improve our practice and decision making in respect of permanence for young children, especially where neglect is an issue. These pressures are reflected nationally with the numbers of children in Care being at an all time high (69,540 March 2015). Although numbers have risen locally, they seem to be consistent with or lower than statistical neighbours.

At the same time difficulties in retaining experienced social workers, especially in those in front line safeguarding teams, has left the service being over stretched as described in the Scrutiny Task group report. Arguably this risks higher workloads with workers and managers not able to progress casework as effectively as possible and may account for relatively high re-referrals where families re-enter the social care system for the second time and increase the risk that Care becomes the only option.

Poor health, education and social outcomes in areas of deprivation

While the general level of child health, wellbeing and attainment in Gloucestershire is above average for England, approximately 14,693 children and young people (0-18 years) live in poverty (11% of the overall total). Most of these children and young people live in one of the
38 most deprived Lower Super Output Areas (LSOAs) in Gloucestershire according to national indicators of multiple deprivation. This pattern of need impacts on all services.

The demand for social care is increasing across the county but the greatest needs are seen in urban areas. Gloucester City in particular accounts for approximately 40% of referrals and work in social care. There has been an increase of 5.3% in the numbers of children in Care since October 2014. This percentage rise relates to the increase of 27 between October 2014 and October 2015 – 508 up to 535.

The number of children subject of a CP Plan in Gloucestershire has risen by 29.0% since October 2014, from 428 to 552 at the end of October 2015. Referrals have increased by 13.60%, Initial assessments have increased by 16.48% and safeguarding investigations have increased by 22.58%.

Growing up in areas of deprivation has an adverse impact on children’s health, wellbeing and future life chances and this is reflected in the poor education, health and social outcomes of these children. However, only 46% of children under 5 years in the most deprived areas had contact with a children’s centre during 2014-2015. Professional support is not always targeted on those who need it more.

**Early identification of and engagement with vulnerable families**

A ‘Deep Dive’ of Early Help provision by the Gloucestershire Safeguarding Children Board (GSCB) was completed in November 2015. The case file audit found that even at the stage of early help, needs were often multiple and complex. The report also confirmed that the rural/urban nature of the County poses challenges for Early Help delivery. There are more vulnerable children and young people in the two urban districts of Gloucester and Cheltenham than in the other four districts added together. It reinforces the need for delivery models that reflect those demands and differences in need.

Effective early help can prevent the need for more specialist services and also support ‘step down’ from social care. Evaluation of local services for families with children aged 0-5 indicates that although current services are generally appropriate and effective for the families who use them there needs to be a more co-ordinated approach with partner organisations as to how vulnerable families are identified and supported.

17,703 families accessed universal services through a children’s centre during 2014. 23% of these families were identified as being vulnerable and received targeted 1 to 1 support or a group intervention through a children’s centre.

**Effective targeted family support and informal support**

A recent survey of families with children aged 0-11 ‘Having a Good Childhood in Gloucestershire’ (Jan- March 2015) highlighted the importance given by families to the informal support from friends, family and community groups. As part of the survey, a series of focus groups were conducted by the Playgroup and Toddlers Association (PATA) to ensure the views of parents of children in greatest need were included in the feedback.
Without exception all 60 parents interviewed reported their experience of parent and community led groups as exceptional. They particularly valued the mutual support they gained from attending groups, the realisation that they were no longer alone, and that they received practical advice and support from other parents in the same position as them, in a non-judgemental and friendly setting.

Although there is a wide range of family support available across the county it is not always targeted on the greatest need or effective in reducing demand for specialist high cost interventions. The varying skills, knowledge and understanding across the workforce means that families do not always receive consistent, evidence based services.

Children centres are currently limited, in the main, to working with children under 5 and their families.

Survey feedback

An annual social work health check survey is undertaken. The outcome of this year’s survey demonstrated the impact of workload pressures with 31% of social workers describing issues with their caseloads. Staff overall reported that there is a culture of working extra hours and not taking breaks during the day. The main reasons for leaving were career development (51%) and workloads (29%). Nevertheless staff also reported very positively about peer and line manager support, citing their very positive feelings about their team and colleagues as one of the main reasons they would not leave Gloucestershire.

The ‘First 11 Years: Having a Good Childhood in Gloucestershire’ (March 2015) survey gave parents and carers the opportunity to give their views on services for young children.

195 parents responded online and 60 parents were interviewed in focus groups. The focus groups included families from BME communities, parents of children with SEND, foster parents, teenage parents and families who had experienced domestic violence or who had children receiving support from children’s social care.

Parents indicated that lack of information and advice on what was available or where to go was a barrier to getting early help. Another barrier was the perception that services from different agencies were disjointed and that advice and support was duplicated or conflicting.

A number of solutions were identified by parents to addressing the barriers to accessing support. These included information on how to access support in places they used regularly such as GP surgeries and libraries; an effective first contact; services that were integrated, more responsive and supported families with children from pre-birth to 11 years of age.

32% of parents expressed an interest in being a volunteer, 25% in being part of a network of parents who offer support in the community and 31% in providing support for an individual parent.

Preparing to Consult – Pre-engagement sessions

An Individual Cabinet Member decision in June 2015 agreed six principles as the basis for a consultation on future planning for services for families with young children years and
authorised the Commissioning Director, Children and Families to undertake a formal consultation on the proposed principles:

- **Services organised around families**: support from services for families should be integrated at point of delivery.

- **Resources targeted to reflect levels of need and geographical location**: All families should benefit from high quality universal nursery education, maternity, ante natal and post natal services with good community access. Levels of need vary across the county and the allocation of resources and shape of services needs to reflect this.

- **Consistent and good early identification of need**: services should be able to identify children and families who may have additional needs and easily ensure that families receive appropriate targeted support early on.

- **Consistent use of evidence based/ informed programmes**: Services should optimise and improve targeted support for children and young people aged 0-11 and their families to reduce risk, increase resilience and help families to support themselves.

- **Parent/ community led services should be supported and encouraged**: The involvement of parents and communities in supporting each other should be encouraged.

- **Services will be appropriate to diverse need and will make a difference**: Services should respond to the expected outcomes for each individual vulnerable child including those with SEN and disabilities.

A series of events during September 2015 were used to obtain feedback on these six principles, identify key participants for a future consultation on options for a revised service and the preferred methodologies for consultation. Barriers to participation were identified and solutions suggested.

The pre-engagement programme included seven locality events, which were facilitated by GCC officers, and attracted 161 participants from education, health, social care and the voluntary and community sectors. The seven locality Children’s Centre Partnership Advisory Boards were also briefed about the pre-engagement process and members also attended the locality events.

Concurrently Parent Champions were also trained to act as facilitators to lead pre-engagement sessions at 28 parents groups which took place during October 2015. The eight Parent Champions and three Parent Champion mentors who undertook the sessions, which were attended by 194 parents and carers included parents and carers who did and did not access children’s centre services.

Key messages from the pre-engagement sessions were:
• The importance of strong multi-professional integrated working across key services including social care, education, health and community support with a common purpose and agreed action and who consider the family as a whole.
• An experienced and well-trained workforce with a persistent, assertive and challenging approach to helping a family through practical ‘hands on’ support.
• Skilled and dedicated key workers who understand the needs of the whole family and help to support the family regardless of the age of the child.
• The desire to have services accessible from one place and the colocation of professionals who work with families.
• A local offer of services that are available to a family within a community.
• One information sharing and case management system and one method of assessment for all services.
• An infrastructure to support parent and community led provision.
• A need to focus on family strengths and not just address the problems, and work with community to build up support networks for families.

Parents believed that information across agencies was not shared effectively and they had to repeat their story to multiple professionals and agencies. Parents also perceived a lack of clarity about roles and expectations of professionals working with families with young children and that services for families with children with additional needs needed to be more accessible.

Options

A number of options have been considered with respect to possible investment in children’s social workers. These include not investing at all, investing over a more extended period and increasing investment in 2016/17 only. These alternative options have been rejected because they either fail to significantly address the workload or turnover challenges or would not be possible to successfully implement in the timescales required. Failure to shift investment as proposed in the current financial context would put services at risk of failing to achieve permanence for children in a timely way.

The preferred option for reshaping family support services has been set out in this report; however, it is proposed to consult on the commissioning plan as a whole. In particular to obtain feedback through the consultation process on the location of the 16 Children’s Centres offering the integrated family support response. It is also proposed to consult on the age range of the children who are able to access support from this reshaped service.

The option of retaining current arrangements in respect of family support services was considered but not recommended as it was assessed as being inconsistent with the principles adopted. In particular, it would not provide flexibility to respond to emerging need or achieve a consistent approach to targeted support for families with children aged 0-11 years of age.

The other option considered was to de-designate all children’s centres and provide a service for families not governed by children’s centre core purpose as identified in Childcare Act 2006. This option was rejected as there would be a risk that the council was failing to provide sufficient children centres to meet its statutory duty.
Risk Assessment

The main risk in respect of the proposals for children’s social care is that it is not possible to recruit and retain sufficient social workers and that the current budget pressures persist. Whilst it is not possible to mitigate all the many factors driving up demand there is a robust workforce development strategy in place for children’s social workers. The model developed will enable us to closely monitor trends in respect of, for example, turnover and use of agency staff, and to identify further action as necessary.

The main risk associated with the proposed consultation is that it does not reach all stakeholders and final proposals are not informed by the views of families, community and voluntary groups, professionals, partners and providers. This risk has been mitigated by the extensive pre engagement process and will be managed by a wide ranging consultation process. The consultation process will deliberately seek to engage with and seek the views of families who may be less likely to contribute and who live across the county.

Officer Advice

The Cabinet is recommended to agree the proposal to shift investment to increase capacity in children’s social work and authorise the Commissioning Director for Children and Families to undertake a formal consultation on the proposed options for family support as outlined in this report during January to March 2016.

The pressures on children’s social care are long standing and current trends do not suggest any reduction in demand, especially as Gloucestershire does not have high numbers of children in Care, compared to elsewhere. In the current financial context it is essential that investment and professional capacity is targeted where it will have most impact. Feedback from families suggests that informal support is most valued and therefore it makes sense for the council to focus and shift its investment from open access universal provision as proposed.

The wider recommendations of the Scrutiny Task group have been referred to the Social Care workforce development group, a full response and plan will be considered by Cabinet in February 2016.

As far as family support services are concerned the intention is to undertake a wide ranging consultation with families, staff, providers, professionals and community stakeholders to consider how to redesign the service. The consultation needs to enable a full discussion about the challenges faced and include opportunities for communities and parents to participate more actively in supporting themselves. This should include consideration as to whether services for 5-11 year olds should be included in any redesigned family support service.

It is important that all health, education and social care services are effectively joined up to meet the needs of families across the continuum of need. Agreeing commissioning intentions as set out in the attached plan allow the council and the CCG to do this.

A children’s centre is defined in the Childcare Act 2006 as being a place or group of places which is managed by on behalf of the locality authority with a view to securing that early childhood services in the local authority area are made available in an integrated way.
services can be provided at the children’s centre itself or by providing advice and assistance to parents and prospective parents in accessing services provided elsewhere. The government is reviewing the role of children’s centres; our current assumption is that the 16 Children’s Centres offering the integrated family support service would continue to be formally designated as Children’s Centres under the 2006 Childcare Act.

When considering making changes to children’s centres, the Local Authority is required under the statutory duty outlined in the Childcare Act 2006 to demonstrate that they are providing sufficient children’s centres to meet ‘local need’. Local need is defined as the needs of parents, prospective parents and young children in the authority area. The Act also states a children’s centre must provide more than one activity on site to meet the statutory definition and are part of the Local Authority’s general duty to improve the well-being of children and reduce inequalities.

The Sure Start Capital grant that was allocated to Local Authorities to support the building of Sure Start children’s centres is subject to a 25 year claw back clause that has implications for the use and allocation of buildings and resources. Any future service delivery model has to consider this and the council’s statutory duties.

Analysis of current issues and feedback from families undertaken to date would suggest that the proposed commissioning plan will enable the council to continue to meet its responsibilities as required. However the consultation process will further test these proposals so that any final recommendations will enable the council to continue to discharge its statutory duties.

Any redesign of services will be a significant change and will require adequate planning and preparation and new contractual arrangements. It will also need to reflect the differing levels of need across the county e.g. ensuring any new service can reach families in rural areas who may face challenges in accessing support.

Resource Implications

The total budget for services for vulnerable children is currently £76.6m (excluding Public Health funded services). There are considerable current budget pressures which includes a £1.4m projected over spend on social work budgets. Given these pressures and the overall financial context the proposals in this report would make savings in universal, open access services and reinvest these over a two year period into front line safeguarding work by increasing the capacity of social work teams. The saving reductions would allow additional investment of £3.7M into social work teams by 2018.

There is currently no risk to current employees; this investment involves expanding the staff group. Additional social work staff would be recruited according to the current workforce strategy which seeks to offer a balance between recruiting the more readily available (and inexperienced) newly qualified social workers while working hard to attract more experienced staff.

Equalities considerations

A due regard statement has been completed for the proposals outlined in this report for each of the seven localities reflecting the way services are currently organised. A separate
Due regard assessment concerning children’s social care has been undertaken. As small changes in our current workforce can make a significant difference in the percentage of our workforce with a particular protected characteristic, we will pay due regard to the diversity of our workforce at the start of recruitment. This will enable us to identify where we need to take positive action to help ensure our workforce better mirrors the diversity of our community of service users.

Consultation about the reshaping of services for families with young children will include feedback from service users with protected characteristics as defined by the Equality Act 2010 across all localities in Gloucestershire. Pre-engagement sessions with professionals and parents have identified barriers to engaging specific groups and how these barriers should be overcome.

Opportunities for consultation will be provided through focus groups, and an online survey. This will include families with children under 11, lone parents, parents to be, teenage parents, parents from BME communities and parents with children with SEN/Disabilities.

Opportunities for engagement with young children will also be developed as part of this process.

**Performance Management/Follow-up**

The Strategic Joint Commissioning Framework for Children, Young People and Families (2015) has been agreed between Gloucestershire County Council and Gloucestershire Clinical Commissioning Group with a view to having a more integrated and strategic approach to commissioning services that spans the whole of childhood. This framework will shape any subsequent commissioning of services following the proposed consultation. Normal performance management and contract management arrangements will be put into place.

The outcomes of the consultation and subsequent recommendations will be considered by Cabinet in May 2016.
<table>
<thead>
<tr>
<th><strong>Report Title</strong></th>
<th><strong>Reshaping Children’s services</strong></th>
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| **Statutory Authority** | Childcare Act 2006  
Children’s Centre OFSTED Framework |
| **Relevant County Council policy** | Children and Young Peoples Plan 2015-2016  
| **Resource Implications** | The total current children centre budget is £8.2M; budget allocations to each locality are based on the number of children identified through Indices of Deprivation Affecting Children Index (IDACI) in children’s centre area as being in greatest deprivation.  
The total budget in 2015/16 for services for vulnerable children including early help, prevention and children’s social care is £76.6m, this rises to £81.1m if Public Health grant funded services are included.  
The budget for education, health and family support for young families in 2015/16 is £37m. This includes public health nursing (health visiting and school nursing), nursery education, children’s centres and other family support services funded by the council.  
The proposed budget for children’s centre services in 2016/17 is £8.0m. The consultation process described in this report will inform budget decisions from 2017/18.  
The Early Years Funding Block of the Dedicated Schools grant is £25.3m (2015/16) which includes £22.6m allocated to nursery provision for 2, 3 and 4 year olds and £2.7M allocated to children’s centres.  
The financial implications of extending the current children’s centres contracts beyond 31st March 2016 will be managed within existing resources and will reflect any service changes required |
| **Sustainability checklist:** |  
**Partnerships** | Specific arrangements will be made for engaging strategic partners in this consultation. |
<p>| <strong>Decision Making and Involvement</strong> | The consultation process will ensure meaningful engagement with all individual and communities who will be affected by any changes to current provision. |</p>
<table>
<thead>
<tr>
<th>Category</th>
<th>Implications</th>
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<tbody>
<tr>
<td>Economy and Employment</td>
<td>No direct implications</td>
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<tr>
<td>Caring for people</td>
<td>The focus of the proposed consultation is the role that the Council and communities play in caring for vulnerable people.</td>
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<tr>
<td>Social Value</td>
<td>No direct implications</td>
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<tr>
<td>Built Environment</td>
<td>The Sure Start Capital grant that was allocated to Local Authorities to support the building of Sure Start Children’s Centres is subject to a 25 year claw back clause that has implications for the use and allocation of buildings and resources. Any future service delivery model has to consider this. It is anticipated that by continuing to use the buildings through schools, community groups and partners delivering universal children’s activity the Council will mitigate this risk.</td>
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<tr>
<td>Natural Environment’ including Ecology (Biodiversity)</td>
<td>No direct implications</td>
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<td>Education and Information</td>
<td>The report recognises the role the Council has to play in providing information, advice and guidance in order to help people make informed choices about services in their area.</td>
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<tr>
<td>Tackling Climate Change</td>
<td>Carbon Emissions Implications? Neutral Vulnerable to climate change? No</td>
</tr>
<tr>
<td>Due Regard Statement</td>
<td>Has a Due Regard Statement been completed? Yes Yes - considerations included in main body of report A copy of the full Due Regard Statement can be accessed on GLOSTEXT via <a href="http://glostext.gloucestershire.gov.uk/uuCoverPage.aspx?bcr=1">http://glostext.gloucestershire.gov.uk/uuCoverPage.aspx?bcr=1</a> Alternatively a hard copy is available for inspection from Jo Moore, Democratic Services Unit, e-mail: <a href="mailto:jo.moore@gloucestershire.gov.uk">jo.moore@gloucestershire.gov.uk</a>.</td>
</tr>
<tr>
<td>Human rights Implications</td>
<td>It is not envisaged that any of the proposals in this cabinet report would have any significant human rights implications.</td>
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<tr>
<td>Consultation Arrangements</td>
<td>This cabinet report seeks authorisation for further wide-ranging consultation to take place during January – March 2016.</td>
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