

Shaping the Future of Children's Centres in Kent

Post Consultation Report

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Section 1: Introduction

There are currently 97 Children's Centres in Kent.

A Sure Start Children's Centre is defined in the Childcare Act 2006 as a place or a group of places:

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

It follows from the statutory definition of a Sure Start Children's Centre 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 nationally prescribed core purpose of a Children's Centre (Appendix A) is to improve outcomes for young children and their families and reduce inequalities between families in greatest need and their peers through a combination of the following universal and targeted services:

Universal Services:

1. High quality, inclusive, early learning and childcare
2. Information and activities for families
3. Adult learning and employment support
4. Integrated child and family health services

Targeted Services:

1. Parenting and Family Support
2. Targeted evidence-based early intervention programmes
3. Links with Specialist Services

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 and prospective parents in accessing services provided elsewhere¹. Local authorities must ensure that Children's Centres provide some activities for young children on site².

¹ Section 5A (5)

² Section 5A(4)(c)

Section 2: Reason for the Consultation

Children's Centres were identified as one of the first service areas to be reviewed as part of a Future Service Options (FSO) Programme.

The Children's Centre FSO Programme builds on areas for development identified through a Peer Challenge and aims to;

- Review the model and method of operation of Kent's 97 Children's Centres (11 currently operate part time), in the context of 'Bold Steps for Kent,' early intervention and prevention, value for money, delivery of the nationally prescribed core offer (Appendix A), the revised statutory guidance and a revised Ofsted Inspection Framework.
- Develop and appraise future service options that meet efficiency savings of at least £1.5 million in the 2014/15 financial year whilst optimising Children's Centres potential to reach and support all families through a universal core offer of services and ensuring resources are targeted at those most in need.

These savings are in addition to £1.4m savings from April 2013 and a budget reduction of £2.8m between April 2010 and April 2012.

A reconfigured Children's Centres programme will support the delivery of KCC's vision for Children's Centres.

Kent's Vision for Children's Centres

Every child gets the healthiest start in life and is ready for school. The needs of the most vulnerable children and their families are met at the earliest opportunity and pre-school children and their primary aged siblings get the best all round help. We will achieve this by;

- *Continuing to deliver high quality, coordinated services through an integrated model of delivery which provides a continuum of support for children and families pre birth to 11 years.*
- *Providing a range of services that are accessible, reflective and responsive to the changing needs of local communities, including supporting families who may also have older children to access the services that they need.*
- *Effectively promoting services so that families know what is available and can easily access the right information, advice and support when required, resulting in positive outcomes for children and families.*
- *Placing children and families at the heart of all that we do, enabling them to have their say and ensuring every child has a chance to develop, is ready to learn and receives the best start in life.*
- *Delivering services in an efficient, sustainable and cost effective way and employing a multi-skilled, talented, trained and committed workforce that can offer flexible support to achieve the required outcomes.*
- *Putting in place effective governance arrangements which will scrutinise and challenge Children's Centres and the services which they provide in a multi-agency setting.*

Section 3: Decision Making Process

The following information gathering and formal decision making process has been followed for the consultation.

Stage	Key Dates
Review of Service	<ul style="list-style-type: none"> • Review of current Children’s Centre Programme in Kent (September – November 2012) • Outcome presented to Corporate Board 10th December 2012.
Engagement	<ul style="list-style-type: none"> • Strategic Workshop – 14th January 2013 • 12 District Workshops – February 2013
Development of proposals	<ul style="list-style-type: none"> • Proposals developed and assessed (including equality impact assessed) - March and April 2013 • Presentation of 3 options for consultation to Corporate Board on 13th May 2013. • Report to Public Health and Social Care Cabinet Committee on 12th June https://democracy.kent.gov.uk/mqConvert2PDF.aspx?ID=40679
Consultation	<ul style="list-style-type: none"> • Launched on 4th July 2013 at 9am to 4th October 2013 at 5pm. Details of consultation at www.kent.gov.uk/childrenscentres • Report to Public Health and Social Care Cabinet Committee on 4th October 2013 to enable the Committee to respond to the consultation https://democracy.kent.gov.uk/documents/s42748/C2%20-%20Shaping%20the%20Future%20of%20Childrens%20Centres%20in%20Kent%20V2.pdf
Analysis of consultation to influence proposals	<ul style="list-style-type: none"> • Analysis of consultation (including reassessing equality impacts) – October 2013 • Outcomes of consultation presented to Corporate Board 18th November 2013
Formal decision making process	<ul style="list-style-type: none"> • Formal Executive Decision published at https://democracy.kent.gov.uk/mglIssueHistoryHome.aspx?Ild=27786&Opt=0 • Report to Public Health and Social Care Cabinet Committee on 5th December 2013. <i>Link to be inserted</i> • Petition Debate at Public Health and Social Care Cabinet Committee on 5th December 2013 <i>Link to be inserted</i> • Decision by Cabinet Member for Specialist Children’s Services <i>Link to be inserted</i> • 5 working days to appeal (until 16th December 2013) • Scrutiny Committee (if required) – 10th January 2014

Section 4: Engagement Process and Outcomes

On the 14th January 2013 a Strategic Workshop sought strategic senior partners' endorsement to a number of principles and the FSO programme planning and next steps.

During February, a series of District engagement workshops, building on the principles established at the Strategic Workshop, took place. The events were aimed at key local stakeholders, were independently facilitated and sought to;

- Raise awareness of the Children's Centre FSO Programme and the need for change;
- Identify local solutions/ local choices /principles and gain views on these; and
- Identify the next steps in the Children's Centre FSO Programme.

The 12 workshops were well attended with over 360 stakeholders with strong representation from all sectors including Children's Lead GPs, Public Health and Kent Community Health Trust (KCHT).

The views from the District engagement events (Appendix B) broadly reflect the views from the strategic workshop (Appendix C). In summary participants supported a policy and planning approach which:

- Gave emphasis to a consistent approach to service delivery and planning across Kent;
- Supported a shift to more focus on neediest children and families by developing a Kent enhanced offer;
- Harnessed Children's Centres to add value to existing services and extend functional role and brief to support siblings of Under 5s up to age 11;
- Ensured the continued provision of Children's Centres in every community;
- Ensured consolidation of service provision and embedding of integrated working;
- Encouraged service delivery alignment and integration.

Section 5: Consultation Proposal

One proposal was consulted on which included;

- Reducing the number of Children's Centres
- Linking Children's Centres to reduce management and administrative costs
- Reducing hours at some Children's Centres

Specifically;

- Closing 22 Children's Centres (the proposal includes either The Village or Folkestone Early Years Centre with services relocated to the remaining building which will become a 'Children's Centre Plus')
- Closing and merging 2 Children's Centres and relocating them to an existing building in Dover Town Centre.
- Linking 40 full time Centres and 18 part time Centres to 16 Children's Centre Plus' (Hubs).
- Reducing the hours to part-time at 13 Centres.

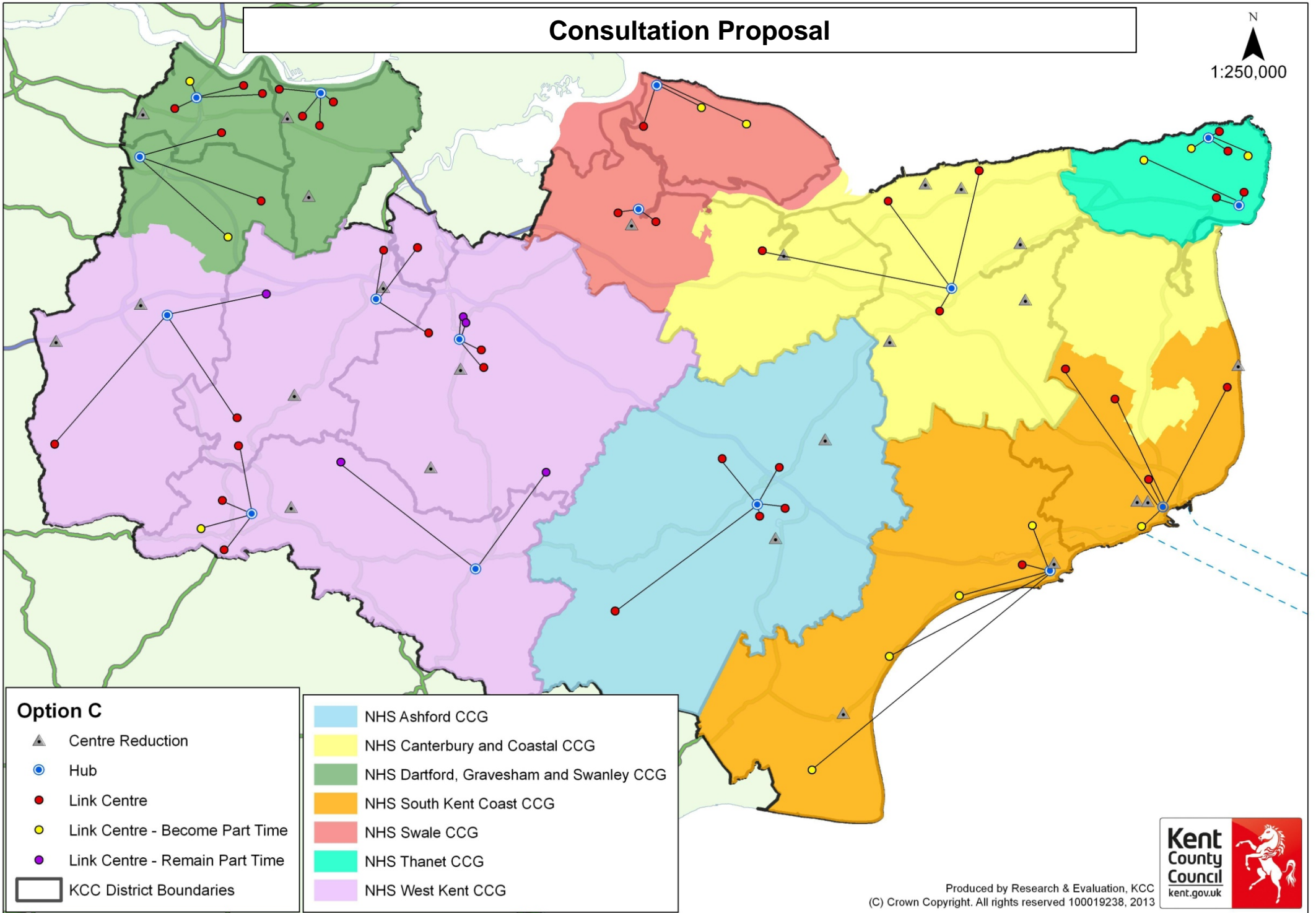
Proposed closures included;

- Cherry Blossom (Wye) – Ashford
- Squirrel Lodge (Furley Park) – Ashford
- Little Bees (Littlebourne) – Canterbury
- Apple Tree (Chartham) – Canterbury
- Briary – Canterbury
- St. Mary of Charity (Faversham) – Swale
- Swalecliffe – Canterbury
- Tina Rintoul (Hersden) – Canterbury
- Little Painters (Painters Ash) –Gravesham
- Maypole – Dartford
- Daisy Chains (Meopham) - Gravesham
- Buttercup (St. Radigunds) and Daisy (Tower Hamlets) –Dover District (Proposal to merge and relocate to Dover Town Centre).
- The Village (Folkestone)or Folkestone Town Children's Centre – Shepway
- New Romney Shepway
- Primrose (North Deal) – Dover
- Woodgrove (Sittingbourne) – Swale
- Loose – Maidstone
- Marden - Maidstone
- Dunton Green –Sevenoaks
- Merry – Go Round (Westerham) –Sevenoaks
- Hadlow and East Peckham –Tonbridge and Malling
- Larkfield – Tonbridge and Malling
- Pembury –Tunbridge Wells

A copy of the consultation materials, including the consultation document are provided at Appendix D.

Consultation Proposal

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1:250,000



Option C

- ▲ Centre Reduction
- Hub
- Link Centre
- Link Centre - Become Part Time
- Link Centre - Remain Part Time
- KCC District Boundaries

- NHS Ashford CCG
- NHS Canterbury and Coastal CCG
- NHS Dartford, Gravesham and Swanley CCG
- NHS South Kent Coast CCG
- NHS Swale CCG
- NHS Thanet CCG
- NHS West Kent CCG

Section 6: Consultation Process

The consultation on “Shaping the future of Children’s Centres in Kent” was launched at 9am on Thursday 4th July. The consultation ran for approximately 3 months, closing at 5pm on Friday 4th October.

In summary the following consultation activity was undertaken;

3 rd July 2013	FSC Member Briefing, the Cabinet Member for Specialist Children’s Services shared the details of the consultation with 43 County Councillors
4 th July 2013	Consultation launched at 9am (press release) All 86 Kent County Councillors were informed of the consultation by email. Details of the Children’s Centre Consultation were located at www.kent.gov.uk/childrenscentres 6,000 paper copies of the consultation document were available in Children’s Centres 15,000 consultation leaflets were between Children’s Centres, Primary Schools located on a CC site, Health Visitors, SCS District Offices and Libraries within 800m of a Children’s Centre.
4 th and 5 th July 2013	Notification of the consultation launch was sent to approximately 40,000 email addresses (see Appendix E).
4 th August 2013	Review of consultation responses to date. Shortfalls in responses from target groups were identified and targeted activity undertaken to address any gaps. (See Appendix F) Frequently Asked Questions updated at kent.gov.uk
5 th August 2013	An additional 6,000 paper copies of the consultation document were available in Children’s Centres An additional 15,000 consultation leaflets were between Children’s Centres, Primary Schools located on a CC site, Health Visitors, SCS District Offices and Libraries within 800m of a Children’s Centre.
14 th August 2013	Consultation document published in Polish, Russian and Nepali in response to public request.
4 th September 2013	Review of consultation responses to date. Shortfalls in responses from target groups were identified and targeted activity undertaken to address any gaps. (See Appendix F) Frequently Asked Questions updated at kent.gov.uk
4 th July – 4 th October 2013	Consultation highlighted to 26,034 attendees at 1,032 events/activities across the County, including for example; Children’s Centre drop-in, Q&A sessions, facilitated discussions at existing groups, parental support to fill in consultation forms (online or hard copy), attendance at community events to raise awareness.
	97 letter/ email responses, 21 queries and 5 Freedom of Information Requests relating to the consultation were responded to.
	Cabinet Member for SCS (or deputy) visited Children’s Centres affected by the proposal to meet with parents, local residents, Councillors and MPs.
4 th October 2013	Consultation closed at 5pm.

Initial Communications

On the 3rd July, at the FSC Member Briefing, the Cabinet Member for Specialist Children's Services shared the details of the consultation with 43 County Councillors. All 86 Kent County Councillors were informed of the consultation by email from the FSC Directorate Manager on behalf of the Cabinet Member for Specialist Children's Services on 4th July 2013.

On the 4th and 5th of July notification of the consultation launch was sent to approximately 40,000 email addresses. This included key stakeholders (detailed in Appendix E) such as Borough/ District and Parish Councillors, service delivery partners and registered Children's Centre users (35,000 emails).

Online Document

Details of the Children's Centre Consultation were located at www.kent.gov.uk/childrenscentres. Contained on this site are a number of documents, including the consultation document, links to the online consultation questionnaire, frequently asked questions, legal requirements, summaries for district workshops, equality impact assessments and maps.

Between the 4th July 2013 and 4th October 2013 the 'Shaping the Future of Children's Centres in Kent' consultation web home page at kent.gov.uk was viewed 15,403 times by 12,605 individual computers. The Swale, Canterbury, Shepway and Ashford proposal webpages had the largest number of views and unique page views after the home page.

	4th July - 4th August 2013		5th August - 4th September 2013		5th September 2013 - 4th October 2013		FULL CONSULTATION PERIOD	
	Page views	Unique Page views	Page views	Unique Page views	Page views	Unique Page views	Page views	Unique Page views
Home Page	8,682	7,028	3,210	2,670	3,511	2,907	15,403	12,605
Ashford	332	284	106	94	92	77	530	455
Canterbury	405	343	74	68	80	75	559	486
Countywide	288	173	92	60	92	72	472	305
Dartford	255	224	106	90	76	68	437	382
Dover	232	181	59	50	50	47	341	278
FAQs	75	69	65	52	65	53	205	174
Gravesham	283	231	57	52	58	50	398	333
Maidstone	284	245	92	80	122	106	498	431
Sevenoaks	238	193	78	64	80	76	396	333
Shepway	339	286	109	81	88	79	536	446
Swale	428	372	113	88	115	100	656	560
Thanet	277	227	77	71	74	66	428	364
Tonbridge and Malling	206	185	78	65	91	77	375	327
Tunbridge Wells	166	140	76	69	61	53	303	262

Paper Document

A 32 page consultation document was also produced which outlined the proposal for Kent's Children's Centres. The document also contains a hard copy response form to the consultation for those unable to access the internet.

There was an expectation that vulnerable users would be supported in filling out any consultation responses by appropriate members of Children's Centre staff. This was communicated to District Children's Centre Managers.

A FREEPOST address was created for consultation response forms. Children's Centres also created "drop-boxes" for consultation responses to be securely left in. Distribution of consultation documents, leaflets and posters were based on the 0-4 population in a district and were as follows:

District	No. of Consultation Documents on 4th July 2013	No. of Consultation Documents on 5th August 2013	Total
Ashford	385	385	770
Canterbury	375	375	750
Dartford	340	340	680
Dover	310	310	620
Gravesham	335	335	670
Maidstone	485	485	970
Sevenoaks	350	350	700
Shepway	300	300	600
Swale	440	440	880
Thanet	405	405	810
Tonbridge and Malling	375	375	750
Tunbridge Wells	365	365	730
Central	1,535	1,535	3070
Total	6,000	6,000	12,000

Leaflets and Posters

An A5 leaflet was produced which gave a broad outline of the proposal, provided a summary of the county proposal and gave details on why we were consulting

Leaflets were shared with;

- Children's Centres
- Primary Schools located on a CC site
- Health Visitors
- SCS District Offices
- Libraries within 800m of a Children's Centre

An A3 poster has also been produced and displayed at all Children's Centres, libraries, gateways and social services offices. Primary Schools and all Early Years Providers were provided with a pdf version of the poster via the schools e-bulletin and/ or e-mail. Distribution of consultation leaflets and posters were based on the 0-4 population in a district and were as follows:

District	No. of Leaflets on 4 th July 2013	No. of Leaflets on 5 th August 2013	Total (Leaflets)	No. of Posters on 4 th July 2013
Ashford	870	870	1740	53
Canterbury	850	850	1700	52
Dartford	800	800	1600	39
Dover	750	750	1500	55
Gravesham	750	750	1500	40
Maidstone	1000	1000	2000	66
Sevenoaks	830	830	1660	50
Shepway	760	760	1520	44
Swale	970	970	1940	61
Thanet	940	940	1880	48
Tonbridge and Malling	850	850	1700	58
Tunbridge Wells	860	860	1720	46
Central	4,770	4,770	9540	188
Total	15,000	15,000	30,000	800

Translations

In line with KCC policy, translations of any document were available on request. The 32 page document was translated into Russian, Polish and Nepali.

Encouraging Stakeholders to engage

A link to the consultation website remained on the home page of the kent.gov.uk website throughout the consultation. Social Media sites were also used to promote the consultation and a number of parents also set up specific social media pages in response to the consultation and to raise the profile.

A number of press releases were made by KCC in relation to the Consultation and at least 67 newspaper articles were produced by the local press.

District Children's Centre Managers (DCCM's) and Community Engagement Officers facilitated the consultation locally, raising awareness and advertising the consultation to service users and professionals. This included engaging with specific target groups and supporting them to participate in the consultation.

In total the District Children's Centre Managers and Community Engagement Officers supported 1,032 events/activities across the County. This highlighted the consultation to at least 26,034 attendees. Appendix F provides a summary of these activities and the specific target groups who attended.

Example engagement methods used during the consultation phase include;

- Children's Centre drop-in
- Q&A sessions
- Facilitated discussions at existing groups
- Parental support to fill in consultation forms (online or hard copy)
- Attendance at community events to raise awareness

Consultation Target Groups

We are committed to listening to all views, but were particularly interested to hear the views of people whom Children's Centre services are targeted at. This was to help us identify the impact of our proposals. Target groups for the consultation included;

- Lone Parents
- Fathers
- Teenage mothers
- Teenage fathers
- Pregnant teenagers
- Parents aged 25 or under
- Parents aged over 35
- Parents of children from low income backgrounds
- Parents from minority ethnic groups
- White parents from low income backgrounds
- Gypsy, Roma and Traveller parents
- Parents with English as an additional language
- Lesbian, Gay and Transgender parents
- Disabled parents

Information was also collected relating to; religion, sexual orientation, gender and marital status to support the identification of equality impacts.

Community Engagement Officers also held 7 focus groups with Children's Centre users to further support the consultation and identifying any potential impact on users. The following groups were held.

- New Romney Children's Centre focus group at New Community Hub, Marsh Academy
- The Daisy and The Buttercup Children's Centre focus group at The Ark, Dover (x2)
- North Deal Primrose Children's Centre focus group at Deal Town Hall
- St. Marys Children's Centre focus group at the Alexander Centre, Faversham
- Briary Children's Centre focus group at Briary Children's Centre
- Woodgrove Children's Centre focus group at Swale CVS, Sittingbourne

10/12 participants, who were current users of the Children's Centre were invite to attend each focus group. A crèche was provided to support attendance.

Jenny Whittle, Cabinet Member for Specialist Children's Services also visited 22 Children's Centres throughout the consultation to meet with parents, local residents, Councillors and MPs. The Cabinet Member addressed a number of questions and queries raised through the consultation and listened to the views of attendees.

A number of papers were taken to strategic meetings to ensure that key stakeholders were engaged in the consultation and various articles appeared in professional newsletters and bulletins e.g. schools e-bulletin and fostering newsletter. Articles also appeared on Knet and in Kmail.

District Advisory Board chairs also signposted to the consultation where possible, and raised awareness through attendance and district meetings.

Monitoring the Consultation Process

District Children's Centre Managers and Community Engagement Officers have recorded and reported on activity delivered locally on a monthly basis throughout the consultation. This has been reviewed alongside initial analysis of the consultation responses on the 4th of each month during the consultation phase. Any shortfalls in responses from target groups were identified and targeted activity undertaken to address any gaps.

Section 7: Consultation Respondents and Responses

In summary the following consultation responses have been received and considered;

- 6,008 Consultation Questionnaires, 5,229 (87%) from the public and 779 (13%) from professionals. (Four responses were received in Russian and these were translated.)
- 97 letter or email responses
- Feedback from 7 focus groups held at New Romney, Briary, The Buttercup, The Daisy, St.Mary's, Primrose North Deal and Woodgrove and supplementary questions asked at Temple Hill Children's Centre
- 6 petitions with a total of 4,036 signatures.

Consultation Questionnaire

6,008 consultation questionnaires were completed. (Four responses were received in Russian and these were translated.)

Appendix G provides a detailed analysis of the consultation responses by proposal and affected Centre. In summary;

The vast majority of those electing to respond to the consultation disagree to some extent with reducing the number of Children's Centres (87%, 5,098 individuals/professionals.) Around 1 in 7 of the professionals responding support the proposals (including 23% of the nursery/pre-school staff responding to the consultation).

Amongst those members of the public who disagree with reducing the number of Children's Centres, 26% (1,174 individuals) indicate that they will not use Children's Centres at all as a result. Amongst those objecting to the proposal who feel that they will not use Children's Centres at all, travel is clearly a key concern. Other key concerns include the feeling that Centres form a local community hub and/or a chance to meet people.

64% (3,625 individuals/professionals) disagree with reducing hours at some Children's Centres; this is significantly lower than the level of disagreement to reduce the number of Children's Centres.

Amongst those members of the public who disagree with reducing hours at some Children's Centres, 15% (474 individuals) indicate that they will not use Children's Centres at all as a result.

Opinions are more divided with respect to linking Children's Centres to reduce administrative and management costs. Whilst 47% disagree (or disagree strongly) with the proposal, 25% support it. Around two-fifths (39%) of the professionals responding disagree with the proposals (rising to 53% of the Children's Centre staff responding to the consultation).

Amongst members of the public objecting to linking Children's Centres, a number are concerned over the proximity of services and the ability to travel. Other key concerns include the potential impact on quality and a perception that the proposals will lead to less help and support being available for parents, that services will be oversubscribed and that staff will be overstretched.

Petitions

KCC has received 6 petitions. The table below summarises the petitions and number of signatures.

Number	Petition	Type of Petition	Total Number of Signatures
1	"Save Briary Children's Centre"	www.kent.gov.uk e-petition (53 signatures) Paper (189 signatures)	242
2	"The Marden Parent Action Group is opposed to the closure of Marden Children's Centre, especially at a time when we need more community services due to the expansion plans for the village"	Paper (335 signatures of which 72 have recorded they are users of the Centre.)	335
3	"Do not reduce the opening hours of Temple Hill Sure Start Children's Centre! "	Paper	170
4	"We call upon Kent County Council to commit to keeping every Sure Start Children's Centre in Kent open and fully funded for every family"	Callis Grange CC petition - paper (257 signatures) Paper (893 signatures) www.change.org.uk (1103 signatures)	3234
5	"We call upon Kent County Council to commit to keeping every Sure Start Children's Centre in Kent open and fully funded"	Paper (981 signatures)	
6	"Asking KCC to consider options other than closure for Children's Centres"	www.kent.gov.uk e-petition	55

Two petitions submitted (number 4 and 5) had the same title and have therefore been treated as one petition in terms of total number of signatures. This petition has received over 3,000 signatures and will be debated at the Social Care and Public Health Cabinet Committee on 5th December 2013. *Outcome to be inserted.*

Written responses

During the consultation 96 letters or email responses were received. This is in addition to 21 queries for further information. The table below demonstrates if the responses related to a specific Centre or district. Appendix H summaries the responses.

Responses relating to....	Number of Responses Received	Responses relating to....	Number of Responses Received
Countywide	10		
Ashford	2	Cherry Blossom (Wye)	0
		Squirrel Lodge (Furley Park)	0
Canterbury	11	Apple Tree (Chartham)	0
		Briary	8
		Little Bees (Littlebourne)	2
		Swalecliffe	3
		Tina Rintoul (Hersden)	0
Dartford	3	Maypole	2
		Temple Hill	2
Dover	2	The Buttercup and The Daisy	0
		Primrose	0
		Samphire (Aycliffe)	0
Gravesham	0	Daisy Chains (Meopham)	1
		Little Painters (Painters Ash)	0
Maidstone	0	Loose	0
		Marden	1
Sevenoaks	1	Dunton Green	0
		Merry-Go-Round (Westerham)	3
		West Kingsdown	0
Shepway	2	New Romney	2
		The Village or Folkestone Early Years (FEY)	3 joint responses, The Village – 1, FEY - 15
		Dymchurch	0
		Hawkinge and Rural	0
		Hythe Bay	0
		Lydd'le Stars (Lydd)	1
Swale	5	St. Mary's (Faversham)	2
		Woodgrove (Sittingbourne)	6
		Beaches (Warden/Leysdown)	0
		Lilypad (Minster)	0
Thanet	0	Birchington	0
		Callis Grange	0
		Garlinge	0
Tonbridge and Malling	2	Hadlow/East Peckham	5
		Larkfield	2
Tunbridge Wells	0	Pembury	0
		Harmony (Rusthall)	0
Sub- total	38	Sub- total	58
TOTAL – 97 responses			

Focus Groups

7 focus groups were at New Romney, Briary, The Buttercup, The Daisy, St. Mary's, Primrose North Deal and Woodgrove Children's Centres. Supplementary questions were also displayed on flip chart paper at the Temple Hill Children's Centre in the main in-door space and parents/carers/visitors were able to complete post-it notes with their comments for each question.

Appendix I provides a record of responses and key points raised at each focus group. In general key points related to;

Centre	Key Points
Briary	<ul style="list-style-type: none"> • The parents did not want to see the Briary closed all together but thought that a reduction to part time hours could be advantageous • Other local services such as church baby groups focus on the children – there is no facility for the parents to chat and support each other • Other services could be delivered on site such as dental checks, immunisation programmes and hearing tests – it was felt that the parents and children would be less stressed as they were in a familiar environment.
New Romney	<ul style="list-style-type: none"> • All of the participants said that they would not choose to access a different centre should the proposals to close go ahead. • There was a general consensus that New Romney Children's Centre was a "community", that by closing it and services being accessed from different locations, this would lead to a loss of the community.
The Buttercup and The Daisy (2 groups)	<ul style="list-style-type: none"> • The steep hill means the Daisy centre is not easily accessible. • The group found it difficult to comment on the proposed relocation as an exact destination had not been identified. It was explained that although rumours were circulating no site had been chosen. The group assumed the Dover Discovery Centre would be used as that was the only suitable site they could think of. • The Charlton Centre is a possibility as it's not utilised enough and costs £2 for the whole day to park. • Merging two centres just won't be enough space for everyone. Too many people wanting to use the centres.
St.Mary's	<ul style="list-style-type: none"> • If you attend Canterbury CC you are unlikely to meet those people again whereas locally you would meet people who live nearby • Making friends with children of similar age is important and the advantage of St Mary's location is then you can go for coffee afterwards in town. • The two centres do not overlap as they offer suitable events on different days. • There is a poor public transport service to Bysing Wood, and St Mary's is more central and 'easier' get to. If the decision is taken to close the children's centre, then they will not attend so often. • These closures will increase isolation and mean additional costs elsewhere to deal with the consequences.
Primrose (North Deal)	<ul style="list-style-type: none"> • The furthest the participants would be prepared to travel would depend on what is available and on cost. Those who would use another centre would use Blossom CC, but would not go to Dover. • It would depend on the detail outreach services, the timing and quality of provision, as to whether users would use these services. If services were of the same quality it was felt that they would be used. • CCs are community 'centres' – "they bring the community together."
Woodgrove	<ul style="list-style-type: none"> • "We can also go into town after a session here and this makes this the best centre for us, it prevents isolation and fosters good support for us." • Walking is the predominant method of attending the Woodgrove CC • Less frequent attendance would be a direct consequence of closure of the

	<p>centre.</p> <ul style="list-style-type: none">• Attendees could not give any venues that they felt would offer the same opportunities and suggested that GP surgeries were not necessarily the right place.• Any reduction should be during quiet times of the year (school holidays etc)
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Freedom of Information Requests

KCC received 6 Freedom of Information requests in relation to the consultation. A copy of requests and responses are available at Appendix J. In summary these relate to;

- The number of Children's Centres in Kent, the number offering daycare and the number of Centres proposed for closure.
- Facilities costs, staff costs, and initial build costs at the Apple Tree Children's Centre.
- Running costs for Little Bees Children's Centre including cost of building and staffing.
- The total projected savings for the proposals affecting Swale Children's Centres for 2013/14 and 2014/15.
- The number of consultation documents printed, printing costs and officer time.
- Perinatal services and number of fathers accessing services.

Section 7: Equality Analysis

A Countywide Equality Impact Assessment (EqIA) was undertaken for the proposal prior to the launch of the consultation in July 2013. 37 Equality Impact Assessments were also undertaken for each Centre proposed to close or reduce hours. All 38 EqIAs were available on the consultation website throughout the consultation period.

These initial screening identified that four full impact assessment were required due to potential high impact of proposals on service users.

Following the consultation the following EqIAs have been undertaken;

- A full EqIA on the Countywide proposal,
- A full EqIA on the closure of New Romney Children's Centre
- A full EqIA on the closure of North Deal Primrose Children's Centre
- A full EqIA on the closure and merger of The Buttercup and The Daisy Children's Centres and relocation to an existing community facility in Dover Town Centre
- The remaining 34 Equality Impact Assessments (screened as low and medium impact) were reviewed and updated. This included updating action plans to mitigate any impact related to protected characteristics.

The Countywide full EqIA identified a potential adverse impact on teenage mothers (age), teenage parents (age), lone parents (marriage and civil partnerships), expectant parents (pregnancy and maternity) and fathers (gender). Across all characteristics there are concerns about continued accessibility of services, the costs and difficulties of travelling to alternative locations and the reduction in opening hours and possible unsuitable hours. The assessment recommends that a closure should not go ahead unless suitable alternative venues are found for service delivery.

The assessments identify that adverse impacts could be minimised if the following actions are implemented; services continue to be provided in the local area; outreach is maintained or increased; partnerships are further developed, particularly with health colleagues to ensure access to services at appropriate accessible locations.

The revision of the 34 EqIAs (initial screenings) following the consultation have identified that the assessment for Folkestone Early Years Centre has increased from medium to high impact based on potential high negative impact on service users with a disability should proposals be agreed to close the Centre. The remaining 33 screenings identify medium or low negative impacts should the consultation proposals be agreed.

A copy of all EqIAs can be found at Appendix K.

Section 8: Post Consultation

This Section will be updated once a decision has been made.

DRAFT

Due to the size of the documents the following Appendices of the Post Consultation Report have not been printed.

- Appendix A: Statutory Guidance - Children's Centres
- Appendix B: Views from the District Engagement Workshops
- Appendix C: Views from the Strategic Engagement Workshop
- Appendix D: A copy of the consultation materials, including the consultation document
- Appendix E: Key Stakeholder consultation notification list
- Appendix F: Summary of local consultation activities and the specific target groups who attended
- Appendix G: Consultation Analysis report (questionnaire) – pages 34 to 524.
- Appendix H: Summary of written responses to the consultation
- Appendix I: Focus Group Feedback
- Appendix J: Freedom of Information Requests

These will be available electronically at
www.kent.gov.uk/childrenscentres

Appendix ; : Consultation Analysis report (questionnaire)

Shaping the Future of Children's Centres in Kent

Children's Centres Main
Consultation Exercise

Full Report

Sure Start
Children's Centres



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Section 1: Executive Summary

The public consultation 'Shaping the future of Children's Centres in Kent' was launched at 9am on Thursday 4th July. The consultation ran for approximately 3 months, closing at 5pm on Friday 4th October. Over this period a total of 6,008 responses were received via the consultation questionnaire, 5,229 from members of the public and 779 from professionals.

Proposal 1: Reducing the Number of Children's Centres

As expected, the vast majority of those electing to respond to the consultation disagree to some extent with the proposal to reduce the number of Children's Centres (87%). Around 1 in 7 of the professionals responding support the proposals (including 23% of the nursery/pre-school staff responding to the consultation).

The proposed closures of St Mary's, New Romney, Folkestone Early Years, and Woodgrove have received the most objections.

Amongst those members of the public who disagree with the proposal, 26% indicate that they will not use Children's Centres at all as a result. This figure rises significantly for fathers, teenage parents/pregnant teenagers, Gypsy/Roma/Traveller families and parents with a disability.

Amongst members of the public objecting to the proposal who feel that they will not use Children's Centres at all as a result, travel is clearly a key concern. Other key concerns include the feeling that Centres form a local community hub and/or a chance to meet people. Amongst professionals issues connected with travel and accessibility are also mentioned, but the key concerns appear to be around the fear that the proposed closures will have a detrimental impact on the support provided to children and families.

Levels of response to the consultation from users of the 24 Centres proposed for closure differ quite dramatically, from just 5% to more than 70%. For most Centres, the vast majority of users responding to the consultation are in opposition to the proposed closures, although the figure falls below 65% amongst users of Cherry Blossom, The Buttercup, The Daisy, Little Painters and Loose. Across the 25 Centres, the proportion of users who feel that they will no longer use Children's Centres as a result of the proposals varies quite considerably, from less than 10% to more than half.

Proposal 2: Linking Children's Centres to Reduce Management & Administrative Costs

Amongst those responding to the consultation, opinions are more divided on this issue. Whilst 47% disagree (or disagree strongly) with the proposal, 25% support it. Lone parents, expectant parents, lesbian, gay and transgender parents and disabled parents are particularly likely to disagree with the proposal. Around two-fifths (39%) of the professionals responding disagree with the proposals (rising to 53% of the Children's Centre staff responding to the consultation).

Amongst members of the public objecting to the proposal, a number are concerned over the proximity of services and the ability to travel. Other key concerns include the potential impact on quality and a perception that the proposals will lead to less help and support being available for parents, that services will be oversubscribed and that staff will be overstretched. Professionals are particularly concerned about the impact on staff and the value of the roles played by administrative and management staff.

Proposal 3: Reducing the Opening Hours at Some Children's Centres

Whilst it is the case that the majority of those electing to respond to the consultation disagree to some extent with this proposal (64%), this is significantly lower than the level of disagreement with Proposal 1 (87%). Around 1 in 5 of the professionals responding support the proposals.

The proposed reductions in opening hours at Lydd'le Stars, Hawkinge & Rural, Hythe Bay, Dymchurch, Samphire and Temple Hill have received the most objections.

Amongst those members of the public who disagree with the proposal, 15% indicate that they will not use Children's Centres at all as a result. This figure rises for lone parents, fathers, teenage parents, lesbian/gay/transgender parents and parents with a disability.

Amongst members of the public objecting to the proposal who feel that they will not use Children's Centres at all as a result, travel is clearly a key concern. Other key concerns include concerns directly related to the new opening hours. Amongst professionals issues connected the new opening hours are also mentioned, but the fear that the proposed reductions in opening hours will have a detrimental impact on the support provided to children and families is also a key concern for this group.

Levels of response to the consultation from users of the 13 Centres proposed for reduced hours are fairly low in most instances. The highest proportions are for Hawkinge and Rural, Hythe Bay and Lydd'le Stars, where 22%, 23% and 30% of the users of each of these Centres have responded to the consultation.

It is interesting to note that, whilst the majority of users of each of these Centres responding to the consultation are in opposition to the proposed reductions in opening hours, this proportion is 75% or less in all but 2 cases (namely Lydd'le Stars and Callis Grange). Across the 13 Centres, the proportion of users who feel that they will no longer use Children's Centres as a result of the proposals varies quite considerably, from less than 10% to more than a third.

Section 2: Introduction & Methodology

Introduction

Children's Centres were identified as one of the first service areas to be reviewed as part of a Future Service Options (FSO) Programme.

The public consultation 'Shaping the future of Children's Centres in Kent' was launched at 9am on Thursday 4th July. One proposal was consulted on which included;

- Reducing the number of Children's Centres
- Linking Children's Centres to reduce management and administrative costs
- Reducing hours at some Children's Centres

Specifically;

- Closing 22 Children's Centres
- Closing and merging 2 Children's Centres and relocating them to an existing building in Dover Town Centre.
- Linking 40 full time Centres and 18 part time Centres to 16 Children's Centre Plus' (Hubs).
- Reducing the hours to part-time at 13 Centres.

The consultation ran for approximately 3 months, closing at 5pm on Friday 4th October.

This report provides a full analysis of the responses to the questionnaire included within the main consultation document: 'Shaping the Future of Children's Centre in Kent'. Full details of the background to the consultation and the consultation process can be found in the full Post Consultation Report.

The main body of this document provides a question-by-question analysis of the responses to the consultation questionnaire, as well as a detailed analysis of the objections received in connection with each individual proposed closure/reduction in opening hours. Further thorough, in-depth analysis and particularly analysis by population sub-groups is available in an interactive analysis tool, provided in Appendix A.

Please note that the analysis presented in this report is analysis of responses to a public consultation exercise and should be interpreted as such. In particular, participation in the consultation both by members of the public and professionals is entirely voluntary. Whilst there has been significant activity aimed at publicising the proposals and the consultation as an opportunity for individuals and organisations to have their say, it is ultimately left up to individuals to decide whether or not they feel that they would like to contribute their views. It is in no way a representative or random sample of Kent residents (or parents, or indeed users of Children's Centres). This should be borne in mind when interpreting the results. It is highly likely that those electing to respond to the consultation are skewed towards those disagreeing with one or more of the proposals.

Methodology

Questionnaire Design & Fieldwork

In order to capture the views of both members of the public and professionals, a questionnaire was developed, which was intended as the main vehicle for interested parties wishing to contribute their views to the consultation process. Whilst the overall questioning approach was the same for members of the public and professionals, separate questionnaire variants were produced, with tailoring of questions as appropriate. The questionnaire adopted closed questioning techniques wherever possible, supplemented by open-ended questions as necessary. The questionnaires were offered both in an online format and in hard copy.

The questionnaires were subject to a rigorous design and approval process prior to the launch of the consultation, including input from relevant parties (including the Consultation team and Digital Services) and 'live' testing on Children's Centre users. The questionnaire design process was overseen by specialists within Research & Evaluation. Fieldwork ran from 4th July to 4th October, with a total of 6,008 responses received. The final questionnaire is provided in Appendix B.

Data Processing & Analysis

A specialist agency, Facts International, were commissioned to conduct the data entry for the hard copy public-facing questionnaires (3,545 questionnaires) and to 'code' responses from members of the public to all of the open-ended questions for both the online and hard-copy variants of the questionnaire (5,229 questionnaires). Both the data entry and the coding of responses from professionals were conducted in-house, by Strategic Commissioning.

The coding process involved scrutinising each individual open-ended comment, and organising (or 'coding') them into common themes (the 'codeframe'). In this way, it has been possible to analyse the frequency with which comments have been made on particular topics (e.g. how often issues with transport are mentioned as a reason for discontinued use of Children's Centres), which is invaluable when analysing such a large volume of responses.

This report details the analysis of the 'coded' data derived from the open-ended responses provided, but this is supplemented with references to a selection of the original, individual open-ended comments. All coding of the public-facing responses (online and hard-copy) were subject to Facts International's rigorous quality procedures, as outlined in Appendix C.

Due to the parallel design of the questionnaire variants, it was possible to combine responses from members of the public and professionals, and from the online and hard-copy questionnaires into a single database for analysis. Interim datasets from the online questionnaires were analysed on a weekly basis, with interim data from the hard copy questionnaires added monthly. This interim data was used to monitor response levels at both the overall and individual Centre level, as well as for a number of target groups.

An interactive analysis tool was created as the key vehicle for analysis of the questionnaire data (with additional analysis conducted as necessary). This tool allows for analysis of the responses to each of the proposals, both at a total level and for various sub-groups, including those objecting to particular Centres, users of each of the current 97 Centres and key respondent types (including target groups). The interactive analysis tool is included in Appendix A.

Section 3: Respondents

The consultation was open to members of the public and professionals (i.e. those wishing to respond in a professional capacity) between 4th July and 4th October 2013. Over this period a total of 6,008 responses were received via the consultation questionnaire¹, as follows.

Total Questionnaires Received



The questionnaire was available both online and in paper format (although professionals were strongly encouraged to submit their responses online).

A total of 5,229 responses were received from members of the public, with 85% of those providing a response indicating that they are parents of children aged under 5².

Public

Parent/carer of children aged under 5	4446	85%
Parent/carer of children aged 5-11	1262	24%
Parent/carer of children aged 12-18	361	7%
Parent/carer soon	213	4%
None of these	239	5%

Base: All (public) responding (5220)

¹ Details of responses received in other forms, including via focus groups, petitions and written responses from key partners, are included in the full Post Consultation Report.

² Unless stated otherwise, throughout this report percentages are calculated based only on those providing a response to the consultation question (i.e. with those skipping the question removed from the denominator).

In terms of target groups, the table below shows the numbers of individuals belonging to a range of target groups who responded to the main consultation³.

Target Groups

Lone parents	659	13%
Fathers***	335	6%
Teenage mothers	85	2%
Teenage fathers	3	0%
Pregnant teenagers	18	0%
Parents aged 25 or under	688	13%
Parents aged over 35	1305	25%
Parents of children from low income backgrounds	1241	24%
Parents from minority ethnic groups*	487	9%
White parents from low income backgrounds	1065	20%
Gypsy, Roma & Traveller parents	24	0%
Parents with English as an Additional Language	263	5%
Lesbian, Gay & Transgender parents	33	1%
Disabled parents**	92	2%

In all cases, parents are taken here to be parents of children aged under 5

*For the purposes of this analysis, minority ethnic groups are defined as all groups except White British

**For the purposes of this analysis, disabled parents are defined as those stating that they day-to-day activities are 'limited a lot' by a health problem or disability

***All male parents/carers of children aged under 5

This indicates coverage of all of the above target groups, with detailed analysis by target group available through the interactive analysis tool in Appendix A.

³ In this case, percentages are calculated based on all members of the public responding to the consultation.

The table below provides a summary of the numbers of responses received from individuals with a series of additional characteristics, including a number of those protected under the Equality Act 2010.

Other Special Interest Groups

Mothers****	3989	76%
Ethnicity: White British parents	3709	71%
Ethnicity: White Other parents	203	4%
Religion: Christian parents	2004	38%
Religion: Buddhist parents	15	0%
Religion: Hindu parents	18	0%
Religion: Jewish parents	6	0%
Religion: Muslim parents	35	1%
Religion: Sikh parents	16	0%
Religion: Parents with any other religion	84	2%
Religion: Parents with no religion	1817	35%
Married/Civil Part/Cohabiting parents	3532	68%
Separated/Divorced/Widowed parents	159	3%
Single parents	500	10%
Sexual Orientation: Heterosexual parents	3910	75%
Sexual Orientation: Bi/Bisexual parents	43	1%
Sexual Orientation: Gay woman/Lesbian parents	17	0%
Sexual Orientation: Gay male parents	2	0%
Sexual Orientation: 'Other' parents	26	0%
Parents with gender not the same as at birth	14	0%

Base: All public (5229)

****All female parents/carers of children aged under 5

Again, this indicates coverage of all of the above protected characteristics, with detailed analysis by a number of these available through the interactive analysis tool in Appendix A.

In terms of Children's Centre usage, the table below shows the frequency with which those members of the public who responded to the main consultation use Children's Centres.

Centre Usage

Two or more times a week	2067	40%
Once a week	1706	33%
Once a month	617	12%
Less often than once a month	436	8%
Never	361	7%

Base: All (public) responding (5187)

Overall, 93% of those responding to this question on the public consultation questionnaire indicate that they are users of Children's Centres, with the majority doing so at least once a week.

The tables below show the numbers of responses from users of each individual Centre.

Ashford, Dover & Shepway

Bluebells	50	1%
Cherry Blossom	7	0%
Little Explorers	25	1%
Ray Allen	100	2%
Squirrel Lodge	39	1%
Sure Steps	38	1%
Waterside	36	1%
The Willow	147	3%
Blossom	69	1%
Buckland & Whitfield	101	2%
The Buttercup	79	2%
The Daisy	63	1%
Primrose	36	1%
Samphire	64	1%
Snowdrop	27	1%
The Sunflower	50	1%
Caterpillars	61	1%
Dymchurch	68	1%
Folkestone Early Years Centre	224	5%
Hawkinge & Rural	137	3%
Hythe Bay	105	2%
Lydd'le Stars	124	3%
New Romney	263	6%
The Village	162	3%

Canterbury, Swale & Thanet

Apple Tree	73	2%
Briary	201	4%
Joy Lane	139	3%
Little Bees	55	1%
Little Hands	85	2%
The Poppy	118	3%
Riverside, Canterbury	71	2%
Swalecliffe	153	3%
Tina Rintoul	39	1%
Beaches	41	1%
Bysing Wood	203	4%
Grove Park	197	4%
Ladybird	48	1%
Lilypad	32	1%
Milton Court	111	2%
Murston	51	1%
Seashells	50	1%
St. Mary's	393	8%
Woodgrove	318	7%
Birchington	60	1%
Callis Grange	49	1%
Cliftonville	14	0%
Garlinge	56	1%
Millmead	35	1%
Newington	43	1%
Newlands	43	1%
Priory	54	1%
Six Bells	32	1%

Dartford, Gravesham & Swanley

Brent	49	1%
Greenlands	46	1%
Knockhall	22	0%
Maypole	126	3%
Oakfield	56	1%
Swanscombe	22	0%
Temple Hill	79	2%
Bright Futures	44	1%
Daisy Chains	103	2%
Kings Farm	57	1%
Little Gems	30	1%
Little Painters	30	1%
Little Pebbles	88	2%
Riverside, Gravesend	97	2%
New Ash Green	34	1%
Swanley	29	1%
West Kingsdown	14	0%

Maidstone, Sevenoaks, Tonbridge & Malling, & Tunbr

East Borough	35	1%
Greenfields	78	2%
Headcorn	35	1%
Howard de Walden	35	1%
Loose	43	1%
Marden	69	1%
The Meadow	44	1%
Sunshine	122	3%
West Borough	45	1%
Dunton Green	41	1%
Edenbridge	39	1%
Merry-go-Round	22	0%
Spring House	38	1%
Borough Green	8	0%
Burham	11	0%
Hadlow/East Peckham	9	0%
Larkfield	22	0%
Little Foxes	32	1%
Snodland	9	0%
South Tonbridge	31	1%
Woodlands	66	1%
The Ark	63	1%
Cranbrook	53	1%
Harmony	92	2%
Little Forest	73	2%
Paddock Wood	45	1%
Pembury	33	1%
Southborough	43	1%

Base: All (users) responding (4678)

A total of 779 professionals responded to the consultation questionnaire, with around a third of these being Children’s Centre staff.

Professionals

Children's Centre staff	256	33%
Other KCC staff	93	12%
Teacher	55	7%
Other Health staff	60	8%
Health Visitor or Midwife	62	8%
Nursery/Pre-school staff	56	7%
Childminder	15	2%
VCS Staff and volunteers	53	7%
A provider of Children's Centre services	30	4%
Local Council staff	22	3%
Councillor	20	3%
Job Centre Plus staff	4	1%
Other	46	6%

Base: All (professionals) responding (772)

Response volumes and the profile of responses were monitored on a regular basis by the Commissioning team throughout the consultation period via a series of 11 questionnaire volume reports, produced roughly weekly.

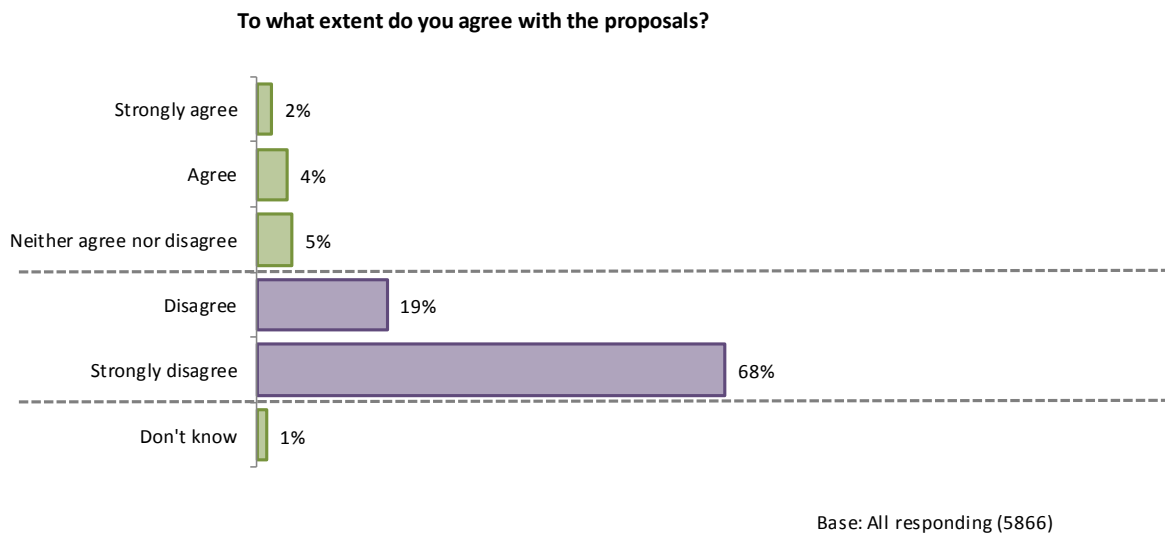
Section 4: Consultation Responses

Proposal 1: Reducing the Number of Children's Centres

Overview

Agreement Levels

The chart below shows the extent to which the members of the public and professionals providing their views agree or disagree with the proposal to reduce the number of Children's Centres in Kent.



As expected, the vast majority of those electing to respond to the consultation disagree to some extent with this proposal (87%), with 68% indicating that they strongly disagree.

The following groups are the most likely to disagree with this proposal:

- Fathers (94%)
- Teenage parents (91%)
- Expectant parents (96%)

The following groups are the least likely to disagree with this proposal:

- Professionals (79% vs 88% of members of the public)
- Those who do not currently use Children's Centres (81% vs 89% of users)
- Those responding online (81% vs 91% of those responding on paper)

The table below compares the profiles of the professionals agreeing and disagreeing with the proposal.

Professionals	All responding			
	All agreeing		All objections	
Children's Centre staff	37	35%	195	32%
Other KCC staff	15	14%	75	12%
Health Visitor or Midwife	6	6%	52	9%
Other Health staff	6	6%	51	8%
Nursery/Pre-school staff	13	12%	39	6%
Teacher	5	5%	43	7%
VCS Staff and volunteers	8	7%	38	6%
A provider of Children's Centre services	6	6%	24	4%
Local Council staff	1	1%	16	3%
Councillor	4	4%	14	2%
Childminder	3	3%	12	2%
Job Centre Plus staff	0	0%	3	0%
Other	3	3%	37	6%

Base: Professionals - All agreeing (107), All objections (606)

This analysis suggests that the nursery/pre-school staff responding to the consultation are more likely to support the proposals than the average across professionals. Interestingly, 14% of the Children's Centre staff responding support the proposed closures.

Objections to Particular Centres

All those disagreeing with this proposal were asked to indicate whether it was the proposed closure of any particular Centre, or Centres, that they objected to. Respondents could select as many or as few of the individual Centres as they wished. Additionally, an option was provided for respondents to indicate that their objections didn't relate to any particular Centre⁴.

Overall, 47% of respondents indicated that their objections related to one Centre only, 16% to two or more of the 24 Centres and 32% that their objections didn't relate to any particular Centre⁵. The numbers of objections to each individual proposed closure are as follows.

⁴ Please note that the presentation of this option differed between the online and paper-based versions of the consultation questionnaire. This is reflected in a higher usage of the 'no particular Centre' option online (46% compared with 24% amongst those submitting paper-based responses).

⁵ The remaining 5% did not provide a response to this question.

Is it the proposed closure of any particular Centre(s) that you object to?

	All responding			
	All agreeing		All objections	
Ashford, Dover & Shepway				
Cherry Blossom	-	-	96	2%
Squirrel Lodge	-	-	142	3%
The Buttercup	-	-	183	4%
The Daisy	-	-	172	3%
Primrose	-	-	134	3%
New Romney	-	-	462	9%
The Village	-	-	299	6%
Folkestone Early Years Centre	-	-	408	8%

Dartford, Gravesham & Swanley				
Maypole	-	-	229	4%
Daisy Chains	-	-	218	4%
Little Painters	-	-	153	3%

No particular Centre

1627	32%
------	-----

	All responding			
	All agreeing		All objections	
Canterbury, Swale & Thanet				
Apple Tree	-	-	157	3%
Briary	-	-	298	6%
Little Bees	-	-	130	3%
Swalecliffe	-	-	261	5%
Tina Rintoul	-	-	112	2%
St Mary's	-	-	507	10%
Woodgrove	-	-	412	8%

Maidstone, Sevenoaks, Tonbridge & Malling, & Tunbridge Wells				
Loose	-	-	118	2%
Marden	-	-	158	3%
Dunton Green	-	-	83	2%
Merry-go-Round	-	-	63	1%
Hadlow/East Peckham	-	-	55	1%
Larkfield	-	-	73	1%
Pembury	-	-	90	2%

Base: All objecting to Proposal 1 (5098)

This indicates that the following proposed closures have received the most objections:

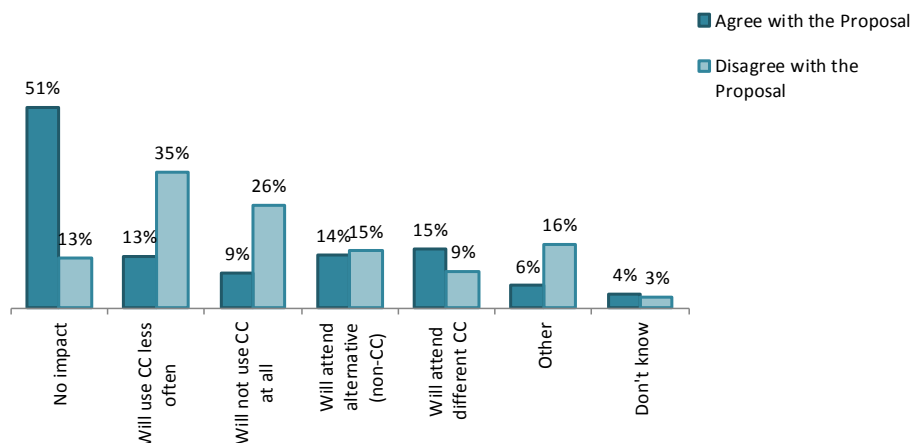
- St Marys
- New Romney
- Woodgrove
- Folkestone Early Years
- The Village
- Briary

Further analysis of the objections received for each individual Centre is provided later in this Section.

Impact – Members of the Public

All members of the public responding to the consultation were asked to indicate what they felt the impact would be on them of the proposed closures. Pre-defined, ‘tick box’ response options were provided (with an additional ‘other’ option for those who needed it). The chart below shows the responses separately for those who support the proposal, and those opposing it.

What impact will the proposal have on you? (Public)



Base: Public - All agreeing (279), All objections (4492)

Around half of members of the public who support the proposals feel that there will be no impact on them. 14% indicated that they will attend alternative (non- Children’s Centre) activities, and 15% that they will attend a different Children’s Centre.

Amongst those members of the public who disagree with the proposal, whilst 15% feel that they will attend alternative non-Children’s Centre activities, 9% that they will use a different Children’ Centre, 13% that it will have no impact on them and 35% that they will just use Children’s Centres less often, 26% indicate that they will not use Children’s Centres at all as a result. This rises to 39% of fathers of under 5’s objecting to the proposal (120 individuals), 52% of the teenage parents objecting to the proposal (40 individuals), 43% of the Muslim parents objecting (13 individuals), 9 of the 19 Gypsy/Roma & Traveller parents objecting, and 10 of the 17 pregnant teenagers objecting.

Reasons for Impact – Members of the Public

Respondents were also asked to tell us, in their own words, why they felt the impact of the closures would be as indicated. These open-ended responses have been individually coded into common themes for analysis. The table below provides a summary of the coded responses separately for those objecting to and supporting the proposal, by the expected impact.

Why do you say that? (Public)

	All agreeing					All objections				
	No impact	Will use CC less often	Won't use CC at all	Use alternatives (non-CC)	Use different CC	No impact	Will use CC less often	Won't use CC at all	Use alternatives (non-CC)	Use different CC
Public										
Will make travel to centres more difficult / alternative centres too distant	1%	31%	41%	24%	10%	7%	24%	31%	19%	15%
Children's centres form a local community hub / chance to meet people	0%	8%	12%	16%	10%	12%	14%	15%	20%	20%
Very happy with my local centre / prefer it to others / we enjoy going there / only use local centre	6%	15%	12%	16%	13%	4%	13%	17%	12%	12%
Centre is close by / easily accessible	1%	4%	6%	4%	10%	2%	14%	17%	11%	6%
Children's centres are necessary / important resources / a lifeline	4%	15%	18%	8%	13%	16%	7%	9%	11%	17%
Bad for people without cars / non-drivers	4%	19%	12%	16%	17%	7%	9%	16%	9%	6%
Will not affect me / local centre not closing / Only occasionally use the centre	52%	0%	0%	4%	10%	45%	1%	1%	0%	1%
Centres supply help / counselling / advice / support / information	0%	8%	6%	16%	20%	10%	8%	9%	10%	11%
Closures will make remaining centres / our local centre busier / under more strain	4%	0%	12%	8%	3%	3%	12%	5%	11%	8%
No alternative to these facilities / less services will be available	0%	15%	6%	4%	7%	1%	11%	11%	9%	4%
Centres provide a wide range of services / services for the entire family	2%	12%	0%	8%	3%	5%	8%	7%	7%	7%
Centres should remain open / Don't close them	2%	4%	0%	8%	3%	10%	4%	5%	5%	5%
Will not use another centre / will use less	1%	12%	6%	4%	3%	1%	8%	6%	3%	6%
Will reduce access to children's services	1%	8%	6%	4%	0%	3%	6%	3%	5%	3%
Will be detrimental to children who are excluded due to cuts	0%	4%	6%	8%	0%	4%	5%	5%	4%	7%
Will have a financial impact on me / make it too expensive - travel / parking, etc.	1%	8%	6%	8%	3%	2%	4%	8%	5%	3%
Supportive / helpful staff	1%	0%	0%	0%	0%	2%	3%	6%	4%	3%
Will impact public health / social exclusion / isolation / mental health issues	0%	4%	0%	4%	3%	5%	4%	3%	2%	3%
People who need support the most will be the most disadvantaged	0%	4%	6%	4%	3%	8%	2%	2%	1%	1%
Children's centre were helpful to me in the past / have used the services in the past	3%	4%	0%	0%	3%	10%	1%	1%	1%	1%
Concerned it will impact others	4%	0%	0%	4%	3%	19%	1%	0%	1%	1%
Helps children's development / learn new skills	0%	0%	0%	4%	0%	2%	2%	2%	5%	6%
Will need to find an alternative to children's centres	0%	0%	0%	0%	3%	1%	2%	1%	14%	4%
It is free to use / affordable / can't afford to pay for activities	0%	8%	0%	4%	3%	1%	3%	2%	5%	4%
Adult education classes / courses / chance to gain new qualifications	0%	4%	0%	4%	3%	1%	2%	3%	2%	3%
Children's centre is an important part of my life	1%	0%	0%	0%	0%	1%	2%	2%	4%	2%
Alternatives offer no / limited parking facilities	0%	0%	12%	0%	0%	0%	3%	3%	1%	0%
Centre has a great atmosphere / welcoming / nice	1%	0%	6%	0%	0%	0%	2%	3%	2%	1%
Friendly staff	1%	0%	0%	0%	0%	1%	2%	3%	2%	1%
Does not suit me i.e. opening times , age restrictions / do not reduce the hours	5%	4%	0%	8%	7%	1%	2%	1%	2%	2%
My area has poor public transport	0%	0%	0%	0%	0%	2%	1%	3%	0%	1%
Would just access another centre	4%	0%	0%	4%	13%	0%	0%	0%	3%	11%
Loss of the centre would be devastating	0%	4%	0%	0%	0%	2%	1%	2%	1%	1%
Working parent / restricts when I can attend the centre	0%	0%	0%	0%	0%	1%	2%	2%	0%	1%
Do not / have not used them	10%	0%	0%	0%	0%	4%	0%	0%	0%	0%
Standards differ from centre to centre	0%	8%	0%	0%	3%	0%	2%	1%	2%	2%
Good relationship with the staff / trust them / familiar	0%	0%	6%	0%	0%	0%	1%	3%	0%	1%
Centre is currently well attended / busy	0%	0%	0%	0%	0%	2%	1%	0%	1%	1%
Other	4%	0%	0%	4%	7%	5%	4%	3%	4%	7%

Base: Public - All agreeing and providing a response (115, 26, 17, 25, 30), All objections providing a response (393, 1216, 998, 464, 268)
 Top mentions (1%+ of 'all respondents')

Amongst those objecting to the proposal who feel that they will not use Children's Centres at all as a result, the most popular comments are⁶:

- 'Will make travel to centres more difficult / alternative centres too distant' – 31%
- 'Very happy with my local centre / prefer it to others / we enjoy going there / only use this one' – 17%
- 'Centre is close by / easily accessible' – 17%
- 'Bad for people without cars / non-drivers' – 16%
- 'Children's centres form a local community hub / chance to meet people' – 15%
- 'No alternative to these facilities / less services will be available' – 11%

Amongst those objecting to the proposal who feel that they will not use Children's Centres at all, travel is clearly a key concern (with 31% mentioning that travel will be difficult or that alternatives Centres are too distant). 16% mentioned it being bad for people without cars and non-drivers and 17% mentioned the ease of access of their current Centre.

"As I have no transport and the children's centre is on the other side of town."

"I do not drive, and so access to any other Children's Centre is difficult"

"The next nearest children's centre to me is the other side of town and too far to walk with little ones."

"Too far to travel to other centres with 2 children under 5."

"Other centres too far or bad parking arrangements."

"At present I can walk to my nearest children's centre. If it were to close, I would have to drive. The car park is tiny and would not cope with increased attendance."

"Because this is the only centre that is within walking distance from my house..."

"Because other one is too far... you have to pay for parking, so it's pointless."

"I don't have the transport or money to travel to other children's centres."

"(xxx) is my closest centre and I do not drive. I have 3 children under 5 and I am an unemployed single parent so having to fork out for bus fare to travel on the bus with 3 children is quite difficult."

"Because I can't drive so it's difficult to get to other children's centres on time and as I have three other children not using the centre in school ... I may not get back in time to pick them up."

"All these centres cater for rural areas, and without a vehicle, alternatives would become nigh impossible to attend."

"Cost of travelling, distance and time taken to get there."

⁶ Please note that individual open-ended comments can be 'coded' to more than one of these key themes.

Praise for their current/local Centre or a preference for a particular Centre was mentioned by 17% of this group.

"I like the programmes at St Mary's and it was an invaluable place after my first child was born."

"Great atmosphere at Maypole. Staff are brilliant."

"Because I like this one."

"Because I've been to the other children centres in Sittingbourne and none are as good as Woodgrove."

"It has the best reputation in Folkestone and people are always recommending it."

"I've used another children's centre further away before and that doesn't have the same feel about it and you don't get the same repeat attendees."

"The baby groups and services that I attend at Squirrel Lodge are far superior to those at other centres in Ashford. The small centre is very friendly and is maintained so well with all of the toys and equipment looked after and kept clean."

"I love the atmosphere which has been created at my local children's centre and I do not believe that this atmosphere can be recreated in a centre which would now be much busier."

"There is a strong sense of community and friendship at this centre which has proved a vital form of support to me during a particularly tough and challenging time. ... I would now be very reluctant to start again at a different centre."

"I feel more comfortable coming here and do not have the confidence to go elsewhere."

"Because the children's centres I attend I feel welcome and safe and I don't like to go to a different one."

"I like my local centre and like the staff and wouldn't want to use another where I don't know people."

"I go to Edenbridge Centre as I know the staff there and have got to trust them and for me that is something I find really hard to do and for that to be taken away I don't think I could do it again as it took a lot for me to do so and has really helped me in ways that are unbelievable."

"The closest centre if Briary is closed is Poppys. We've tried Poppys before and my child doesn't like the staff there."

"The other main children's centre in Herne Bay... has always been very limited in what it offers and has always seemed very unfriendly and selective!!"

"The other children's centre I had a bad experience in and won't go back."

The fact that the Centres form a local community hub and/or a chance to meet people was mentioned by 15% of this group.

“Because it is my local children's centre and I have built up a network of friends for myself and my son in the area in which we live and where he will go to school.”

“(The Centre) is within walking distance and means I can team activities for both my children. It also means we meet local mummies & children rather than people who may not live near us, this means my children build a social circle in preparation for future milestones such as starting nursery & school.”

“It is local to me and it helps me get to know people who live near me and my children make friends with others I can actually meet up with.”

“I like being able to socialise with other parents/ families in my local area; we discuss local issues, schools and my son is in groups at the moments socialising with children he is going to attend nursery with.”

“Local children's centres mean you meet other local parents particularly important for new mums.”

“There is a strong sense of community and friendship at this centre which has proved a vital form of support to me during a particularly tough and challenging time. I feel that if the centre were to be closed and members either went to a different centre or did not attend at all then this community would be totally lost. I would now be very reluctant to start again at a different centre.”

“It's very local to our community. It serves a great purpose & support for all our local parents. It would really affect people's social lives as its hard enough going out with young children. Let alone losing somewhere local, enjoyable and suitable to do it.”

“My baby wouldn't have contact with her peers if the centre was closed. This would be a disadvantage to her development and social skills.”

“The locality of Children Centres is what makes them so unique & a vital part of society.”

Around 1 in 10 specifically mentioned there being no alternative to these facilities.

“If the centre that we use closes there is no other within walking distance that we could use.”

“There are no other childcare centres/groups in the village which I can walk too.”

“In the rural area that Daisy Chains covers the children’s centre is one of the few things accessible to us all.”

“The children’s centre is very friendly and welcoming without the centre there is nothing around here for the kids to do, and nowhere for other parents to go to mingle with other parents, they also run courses which have helped me out and a lot of people out.”

“If my local CC is closed I will no longer be able to access any CC’s as I do not drive and public transport costs are too expensive. I also have an Autistic son who cannot use public transport so I walk to my local centre.”

“Because the services I attend aren’t available at any other centre near me.”

“No other group or place offers what the children’s centre offers me.”

“The sort of activities offered are one of a kind and often not found at other groups which aren’t sure start run.”

“Due to my wife having disabilities we can’t get to any others.”

Amongst those who feel that they will use Children’s Centres less often as a result of the proposals, the key themes are very similar:

- Issues with ‘travel being difficult/alternative Centres being too distant’ were mentioned by 24%, it being ‘bad for people without cars and non-drivers’ by 9% and ‘Centre close by/easily accessible’ by 14%
- That the Centres ‘form a local community hub/chance to meet people’ was mentioned by 14%
- Being ‘happy with my local Centre’ or preferring a Centre to others was mentioned by 13%

Across both supporters of the proposal and those objecting to it, and regardless of opinions on what the personal impact might be, many respondents (10%) made comments pertaining to Children's Centres being a 'necessary/important resource/a lifeline'.

"I think all children's centres should stay open, as they play a vital role in supporting parents with young families."

"I don't use any of the centres that may shut but the ones I do use are invaluable to me as I'm sure the others are to those who use them."

"Having used the Children's Centres and knowing many parents that do, it is a lifeline for parents especially in rural communities where most parents cannot drive or would not be able to cover the costs of public transport and would therefore lose out on such wonderful places."

"The children's centres are of benefit to all, but particularly to those who cannot get to and pay for baby classes etc. For parents without a car in isolated villages ... it will be hard for them to access an alternative."

"After giving birth, the children's centre was a lifeline for me. It's a place to go for advice and to meet other first time mums. I don't know what I would have done without it. Reducing the number of children's centres and services they provide will take away that experience for new mums."

"Children's centres are vital lifelines for new parents. They enable them to seek professional help, to meet other parents and to socialise as well as creating a community hub. To close so many would be damaging to local communities and in particular to women, leaving many very isolated."

"I say this because the Children's Centres are invaluable resources in their respective communities; especially to new parents or those parents who are in some way vulnerable."

Impact – Professionals

Professionals responding to the consultation were also asked to indicate what they felt the impact would be on them of the proposed closures, but in an open-ended format (i.e. in their own words). These open-ended responses have been individually coded into common themes for analysis. The table below provides a summary of the coded responses.

What impact will the proposal have on you? (Professionals)

Professionals	All agreeing		All objections	
Children / families will miss out	7	8%	161	32%
People who need support the most will be the most disadvantaged	9	10%	122	24%
Will reduce access to children's services	6	7%	105	21%
Closures will make remaining centres / our local centre busier / under more strain	18	21%	83	17%
Children's centres are necessary / important resources / a lifeline	2	2%	99	20%
Will make travel to centres more difficult / alternative centres too distant	7	8%	97	19%
No impact	36	42%	25	5%
Less support / advice available	3	3%	55	11%
Concerned I will lose my job / job losses	6	7%	50	10%
Will be detrimental to children / unsettle them	0	0%	52	10%
No alternative to these facilities	5	6%	40	8%
Pressure on social services / safeguarding issues / parental contact	1	1%	39	8%
Concerned it will impact others	5	6%	25	5%
Will lead to problems in the future / loss of early intervention	1	1%	28	6%
Social impact	2	2%	21	4%
Do not close centres / should not be allowed	1	1%	22	4%
Alternative centre not suitable / poor facilities	3	3%	19	4%
Opportunities to make improvement	14	16%	1	0%
Will impact me in a big way / more stress	1	1%	12	2%
Impact on multi-agency / partnership working	0	0%	12	2%
Concerned it will affect the school	0	0%	12	2%
Children's centres form a local community hub / chance to meet people / impact the community	0	0%	16	3%
Concerned will impact service quality	1	1%	7	1%
Adult education will be reduced	1	1%	5	1%
Will impact my mental health / have mental health issues	0	0%	5	1%
Happy with our local centre - opening hours, location	1	1%	4	1%
Concerned it will affect the nursery	0	0%	5	1%
Other	1	1%	10	2%

Base: Professionals - All agreeing and providing a response (97), All objections and providing a response (558)
Top mentions (1%+ of 'all respondents')

The most popular comments amongst those objecting to the proposal are:

- 'Children / families will miss out' – 32%
- 'People who need support the most will be the most disadvantaged' – 24%
- 'Will reduce access to children's services' – 21%
- 'Children's centres are necessary / important resources / a lifeline' – 20%
- 'Will make travel to centres more difficult / alternative centres too distant' – 19%
- 'Closures will make remaining centres / our local centre busier / under more strain' – 17%

Whilst issues connected with travel and accessibility are mentioned by some professionals, the key concerns appear to be around the fear that the proposed closures will have a detrimental impact on the support provided to children and families.

Around a third of the comments relate to the fear that 'children/families will miss out'.

"Children's Centres are an invaluable source of support for the families I work with in my job as a social worker. Without them, there will be a number of children in need without opportunities that other children have."

"...My concern is regarding the impact that it will have on the local families."

"The closure would have an immense impact for the families I work with."

"...Staff within children's centres play a vital role in improving outcomes for children and families and without the buildings to provide these services I feel that we will see a detrimental impact in children and families in the local community..."

"...Families will suffer by not having support and advice in their local area & close to hand..."

"Has the potential to lead to a complete change to the midwifery service for women in the area and a loss of service to them and their families."

"The parents/carers receiving support in this area will suffer when the family support are either moved or reduced from this area."

"Vital services will be reduced and the number of families we are able to reach will suffer. The most vulnerable and hard to reach families are influenced by gradual relationship building which in many cases has been dependant on a daily cheery smile or chat within the locality. The concept of a campus has been of huge benefit in strengthening the community, involving all ages and stages in the support network."

"If they do not have the children centre support the families wellbeing may suffer."

"I have directed many families to the early years centre within that area and feel that without the support they have given these families would suffer."

"(It) will obviously affect our staff, but it is the parents that will ultimately suffer."

"It will mean that a valuable and trusted resource is closed and that local children will suffer."

Others felt that 'people who need the support most will be disadvantaged'.

"It will significantly impact on our work with vulnerable families as well as the wider community."

"The stated aim was for there to be a Children Centre within pram pushing distance of every family - this reduction in centres will negate that aim and permit only those who can drive or who live near one of the remaining centres to access the service - depriving once again the most vulnerable families."

"Less support for most needy families.."

"We are already finding that the staff...have limited staffing to work with us on some vulnerable families. Therefore by stretching resources further will affect vulnerable groups hardest."

"I'm fortunate in that my Centre is not amongst those currently proposed to be affected but I feel that the loss of any Centre is a shame and will have an impact on the families using that centre - not all families can travel to another Centre nearby and it's often the families we most need to support who are in that position."

"Closing Children's Centres will most affect the people that need them most: those less able to get out and network, make friends, find childcare, get training, etc. "

"With the proposal to remove the centre from this site I feel that a lot of families will fall through the net and will miss out on much needed early support. It has been proven that early support is the key for helping those families who need it most."

"Young Parents will not get the necessary support and guidance. These are often vulnerable groups in the FE sector, often with low finances,, closures to centres near them will mean they do not get the relevant support as affording to travel to one further afield will not be an option."

"Closing centres in areas of high deprivation at a time of economic recession feels like a decision which will affect the hardest to reach of society."

"The 'vulnerable and needy' families, who would not otherwise engage with community groups, will not be recognised and support networks would be lost to them."

"The families in most need of support would be the families most seriously impacted by these proposals."

"The most vulnerable children will have limited or no access to vital early years services thus increasing the poverty gap and cycle."

"The very families that need and benefit from local support/groups/activities and Health clinics will be the ones that will miss out and fall under the radar of others when things go wrong."

Some felt that the proposed closures would 'reduce access to children's services'.

"Reducing the number of children's centres will make it harder for families to access these services and may even stop some from accessing them all together."

"We won't be able to provide a service to people in a deprived area that really need our help to succeed in life."

"We offer midwifery services from every Children's Centre. Reduced opening hours or closing would impact significantly on women's ability to access local midwifery services."

"This will put increased pressure on the resources and capacity of the remaining centres, which could potentially result in families who need support not being able to access the services."

"The amount of people able to access services especially in rural areas."

"Less access to develop early preventative intervention."

"Reduction in services available to families."

"The closure of centres could ... mean that we cannot provide the range of services that we currently offer."

"This proposal will reduce the much needed support that CCs give to families, making it difficult to get the childcare that they need to enable them to work to support their families."

"It will offer less choice and support to the parents I work for, and means that the children are not able to access the range of activities provided by the Children's Centres on days they are not at my setting."

Reasons for Impact – Professionals

Professionals were also asked to tell us, in their own words, why they felt the impact of the closures would be as indicated. Again, these open-ended responses have been individually coded into common themes for analysis. The table below provides a summary of the coded responses.

Why do you say that? (Professionals)

Professionals	All agreeing		All objections	
Children's centres are necessary / important resources / a lifeline	5	6%	142	28%
People who need support the most will be the most disadvantaged	6	7%	101	20%
Will make travel to centres more difficult / alternative centres too distant	8	9%	77	15%
Closures will make remaining centres / our local centre busier / under more strain / less safe	9	10%	52	10%
Will reduce access to children's services	7	8%	50	10%
Centres should remain open / Don't close them	4	5%	49	10%
No alternative to these facilities / less services will be available	2	2%	44	9%
Will impact public health / social exclusion / isolation / mental health issues	5	6%	40	8%
Will be detrimental to children who are excluded due to cuts / upset their routine	2	2%	35	7%
This is how I feel / the truth / my experience	2	2%	33	7%
Children's centres form a local community hub / chance to meet people	4	5%	27	5%
Concerned it will impact others	8	9%	20	4%
Will have a financial impact on me / make it too expensive - travel / parking, etc.	2	2%	26	5%
Bad for people without cars / non-drivers	3	3%	21	4%
Loss of the centre would be devastating	1	1%	14	3%
Make cuts elsewhere/proposed model will not deliver savings	3	3%	11	2%
Centres provide a wide range of services / services for the entire family / facilities	0	0%	11	2%
My area has poor public transport	0	0%	10	2%
Will put a strain on other services / agencies	1	1%	11	2%
Adult education classes / courses / chance to gain new qualifications	0	0%	10	2%
Cutbacks are already having an effect	0	0%	9	2%
Will not affect me / local centre not closing / only occasionally use the centre	9	10%	1	0%
Standards differ from centre to centre	6	7%	1	0%
Will lead to problems in the future / more social problems	0	0%	10	2%
Detrimental to multi-agency / partnership working	2	2%	6	1%
Children's centre is an important part of my life	0	0%	5	1%
Supportive / helpful staff	1	1%	4	1%
Alternatives offer no / limited parking facilities	1	1%	4	1%
Need for centres is increasing / less available	1	1%	4	1%
Issues with the local centre	3	3%	2	0%
Good relationship with the staff / trust them / familiar	0	0%	7	1%
Will result in job losses / less staff	1	1%	4	1%
Reduction in services	0	0%	5	1%
Inadequate capacity for outreach (venues, staff, logistics)	2	2%	3	1%
Other	13	15%	28	6%

Base: Professionals - All agreeing and providing a response (86), All objections and providing a response (502)
Top mentions (1%+ of 'all respondents')

The most popular comments amongst those objecting to the proposal are:

- 'Children's centres are necessary / important resources / a lifeline' – 28%
- 'People who need support the most will be the most disadvantaged' – 20%
- 'Will make travel to centres more difficult / alternative centres too distant' – 15%

Many of the comments from professionals mentioned specifically the value of Children's Centres in terms of them being 'necessary/important resources/a lifeline'.

"It is already hard enough to gain the confidence of parents to get support in a safe environment, which the children centres have become. There is an excellent network built into the children centres which parents can access. Parents can meet professionals, other parents, learn and gain support from those round them and link up to many organisations through the children centres. This is vital to many isolated families, especially when doctors, midwives and health visitors time is stretched and limited."

"Children's centres play a fundamental role within communities - in particular communities with high deprivation needs. Children's centres give opportunities to children in their early years which play a vital role in shaping the child's future. Equally, children's centres give strong positive role models for parents, in particular young parents, whose own backgrounds may have lacked positive role models. Children's centres are a fantastic way to stop cycles of poor uneducated parenting very early on."

"Support for families and children is imperative for early intervention and to prevent any escalation to Social Services. Also Children's centres have a good link with some families and can prevent any risk to children when spotting first signs of any neglect or abuse issues."

"The families that I work with find it helpful to have support from CCs as they find them less intimidating than social services. In a number of cases I have worked with that have 'stepped-down', the family have relied on the support from the CC."

"All children's centres I have had dealings with are a life line to so many and provide such an awesome service. Without these society will suffer as a whole."

"...depriving mothers and children of a much needed resource."

"These children centres are so vital in these present times."

"(xxx) is a well used Centre and is important to the families that attend there."

"Children's Centres have developed to be important one stop venues for a wide range of services that support young families. Those using the centre also develop strong local links and self-help support groups. The proposed structure will not support this degree of social cohesion."

Children's Centre Users

The table below provides a summary, for the Centres proposed for closure, of the numbers of users of each Centre responding to the consultation and the numbers objecting to the proposal.

	Consultation responses from users			Objections to Proposal 1 from users		
	Users	Number	As % of all users*	Number	As & of all responses	As % of all users*
Ashford, Dover & Shepway						
Cherry Blossom	86	7	8%	3	43%	3%
Squirrel Lodge	415	39	9%	35	90%	8%
The Buttercup	732	79	11%	42	53%	6%
The Daisy	1042	63	6%	40	63%	4%
Primrose	678	36	5%	29	81%	4%
New Romney	366	263	72%	240	91%	66%
The Village	608	162	27%	131	81%	22%
Folkestone Early Years Centre	764	224	29%	180	80%	24%
Canterbury, Swale & Thanet						
Apple Tree	311	73	23%	60	82%	19%
Briary	539	201	37%	176	88%	33%
Little Bees	245	55	22%	44	80%	18%
Swalecliffe	425	153	36%	121	79%	28%
Tina Rintoul	336	39	12%	29	74%	9%
St Mary's	1047	393	38%	340	87%	32%
Woodgrove	894	318	36%	265	83%	30%
Dartford, Gravesham & Swanley						
Maypole	370	126	34%	110	87%	30%
Daisy Chains	400	103	26%	84	82%	21%
Little Painters	317	30	9%	18	60%	6%
Maidstone, Sevenoaks, Tonbridge & Malling, & Tunbridge Wells						
Loose	384	43	11%	25	58%	7%
Marden	417	69	17%	57	83%	14%
Dunton Green	487	41	8%	35	85%	7%
Merry-go-Round	392	22	6%	17	77%	4%
Hadlow/East Peckham	112	9	8%	7	78%	6%
Larkfield	228	22	10%	15	68%	7%
Pembury	178	33	19%	26	79%	15%

* This analysis is based on activity-based usage figures for October 2012 - September 2013

Levels of response to the consultation from users of the Centres proposed for closure differ quite dramatically. Whilst high proportions of users of Briary, Swalecliffe, St Marys, Woodgrove, Maypole, and particularly New Romney appear to have responded to the consultation (between 34% and 72%), only 5-6% of the users of some of these Centres appear to have responded (i.e. The Daisy, Primrose and Merry-go-Round).

For most Centres, the vast majority of users responding to the consultation are in opposition to the proposed closures, with this proportion particularly high for Squirrel Lodge, New Romney, Briary, St Marys, and Maypole. Interestingly, in the case of Cherry Blossom, The Buttercup, The Daisy, Little Painters and Loose, this figure is below 65%

The table below provides a similar analysis, but based only on sole users of these Centres.

	Sole Users	Consultation responses from sole users		Objections to Proposal 1 from sole users		
		Number	As % of all users*	Number	As & of all responses	As % of all users*
Ashford, Dover & Shepway						
Cherry Blossom	21	0	0%	0	-	0%
Squirrel Lodge	120	12	10%	12	100%	10%
The Buttercup	283	28	10%	19	68%	7%
The Daisy	400	24	6%	17	71%	4%
Primrose	220	14	6%	13	93%	6%
New Romney	149	162	109%	150	93%	101%
The Village	316	97	31%	89	92%	28%
Folkestone Early Years Centre	459	153	33%	135	88%	29%
Canterbury, Swale & Thanet						
Apple Tree	141	33	23%	31	94%	22%
Briary	132	72	55%	66	92%	50%
Little Bees	90	23	26%	19	83%	21%
Swalecliffe	132	59	45%	44	75%	33%
Tina Rintoul	199	21	11%	16	76%	8%
St Mary's	478	226	47%	201	89%	42%
Woodgrove	324	144	44%	123	85%	38%
Dartford, Gravesham & Swanley						
Maypole	223	101	45%	86	85%	39%
Daisy Chains	243	80	33%	69	86%	28%
Little Painters	51	5	10%	2	40%	4%
Maidstone, Sevenoaks, Tonbridge & Malling, & Tunbridge Wells						
Loose	112	8	7%	6	75%	5%
Marden	183	31	17%	27	87%	15%
Dunton Green	227	16	7%	15	94%	7%
Merry-go-Round	216	13	6%	12	92%	6%
Hadlow/East Peckham	66	1	2%	1	100%	2%
Larkfield	47	4	9%	3	75%	6%
Pembury	85	21	25%	18	86%	21%

* This analysis is based on activity-based usage figures for October 2012 - September 2013

Again, high proportions of sole users of Briary, Swalecliffe, St Marys, Woodgrove, Maypole, and particularly New Romney appear to have responded to the consultation (between 44% and 109% (in the case of New Romney)).

The table below provides a summary of the impact users of each of these Centres feel that the proposed closure would have on them.

	Impact on Users					Impact on Sole Users				
	No impact	Will use CC less often	Will not use CC at all	Will attend alternative (non-CC)	Will attend different CC	No impact	Will use CC less often	Will not use CC at all	Will attend alternative (non-CC)	Will attend different CC
Ashford, Dover & Shepway										
Cherry Blossom	0%	29%	14%	43%	43%	-	-	-	-	-
Squirrel Lodge	5%	46%	31%	18%	18%	8%	25%	67%	17%	0%
The Buttercup	11%	46%	13%	15%	23%	14%	32%	14%	14%	21%
The Daisy	25%	41%	13%	14%	8%	21%	38%	13%	29%	4%
Primrose	0%	42%	33%	25%	11%	0%	36%	43%	14%	7%
New Romney	3%	29%	50%	4%	3%	2%	20%	57%	1%	2%
The Village	2%	33%	38%	15%	6%	2%	27%	53%	9%	3%
Folkestone Early Years Centre	4%	27%	44%	18%	5%	3%	20%	54%	18%	3%
Canterbury, Swale & Thanet										
Apple Tree	0%	38%	38%	25%	12%	0%	27%	64%	12%	3%
Briary	2%	49%	29%	15%	6%	0%	35%	47%	18%	3%
Little Bees	2%	42%	38%	24%	9%	0%	35%	57%	26%	9%
Swalecliffe	5%	44%	33%	16%	12%	3%	22%	68%	8%	7%
Tina Rintoul	0%	33%	41%	21%	13%	0%	24%	48%	33%	10%
St Mary's	2%	49%	38%	20%	11%	1%	37%	54%	15%	5%
Woodgrove	1%	43%	27%	17%	20%	0%	31%	44%	15%	12%
Dartford, Gravesham & Swanley										
Maypole	0%	30%	53%	11%	10%	0%	23%	63%	10%	6%
Daisy Chains	2%	28%	50%	24%	3%	1%	23%	55%	25%	3%
Little Painters	0%	70%	7%	27%	13%	0%	60%	20%	60%	40%
Maidstone, Sevenoaks, Tonbridge & Malling, & Tunbridge Wells										
Loose	5%	44%	23%	12%	16%	0%	13%	63%	13%	13%
Marden	4%	39%	35%	14%	13%	3%	19%	58%	10%	0%
Dunton Green	2%	44%	41%	20%	5%	0%	25%	69%	19%	0%
Merry-go-Round	0%	27%	59%	14%	5%	0%	8%	85%	8%	0%
Hadlow/East Peckham	11%	22%	33%	22%	22%	0%	0%	100%	0%	0%
Larkfield	0%	32%	18%	18%	27%	0%	0%	75%	0%	0%
Pembury	6%	30%	36%	24%	21%	5%	24%	43%	29%	24%

Base: All users responding - Users (7, 39, 79, 63, 36, 263, 162, 224, 73, 201, 55, 153, 39, 393, 318, 126, 103, 30, 43, 69, 41, 22, 9, 22, 33), Sole Users (0, 12, 28, 24, 14, 162, 97, 153, 33, 72, 23, 59, 21, 226, 144, 101, 80, 5, 8, 31, 16, 13, 1, 4, 21)

Across the Centres proposed for closure, the proportion of users who feel that they will no longer use Children's Centres as a result of the proposals varies quite considerably, from less than 10% to more than half. As many as 25% of users of The Daisy and 11% of the users of The Buttercup feel that the proposals will have no impact.

Please note the small numbers of users responding to the consultation for some Centres when interpreting these results, and particularly the small numbers of sole users.

Summary

As expected, the vast majority of those electing to respond to the consultation disagree to some extent with the proposal to reduce the number of Children's Centres (87%). Around 1 in 7 of the professionals responding support the proposals (including 23% of the nursery/pre-school staff responding to the consultation).

The proposed closures of St Mary's, New Romney, Folkestone Early Years, and Woodgrove have received the most objections.

Amongst those members of the public who disagree with the proposal, 26% indicate that they will not use Children's Centres at all as a result. This figure rises significantly for fathers, teenage parents/pregnant teenagers, Gypsy/Roma/Traveller families and parents with a disability.

Amongst members of the public objecting to the proposal who feel that they will not use Children's Centres at all as a result, travel is clearly a key concern. Other key concerns include the feeling that Centres form a local community hub and/or a chance to meet people. Amongst professionals issues connected with travel and accessibility are also mentioned, but the key concerns appear to be around the fear that the proposed closures will have a detrimental impact on the support provided to children and families.

Levels of response to the consultation from users of the Centres proposed for closure differ quite dramatically, from just 5% to more than 70%. For most Centres, the vast majority of users responding to the consultation are in opposition to the proposed closures, although the figure falls below 65% amongst users of Cherry Blossom, The Buttercup, The Daisy, Little Painters and Loose. Across the 25 Centres, the proportion of users who feel that they will no longer use Children's Centres as a result of the proposals varies quite considerably, from less than 10% to more than half.

Appendix ? : Equality Impact Assessments

**Equality Impact Assessment Initial Screening post-consultation update
Children’s Centre: Apple Tree**

Location	Chartham, Canterbury
Proposal	Closure
Rationale for proposal	<ul style="list-style-type: none"> • Located in an area of low needs (population). • 58% (210) of users also attend another Children’s Centre (The majority of these attended Canterbury Town Centre (Riverside) and Little Hands at Wincheap where there is no proposed change to provision.)
Consultation Feedback Summary (questionnaires)	<p>A total of 142 members of the public and just 15 professionals objected to the closure of Apple Tree Children’s Centre. Of these 142 members of the public, 58 objected only to the closure of Apple Tree.</p> <p>Approaching a third (31%) of the members of the public objecting to the proposed closure of Apple Tree indicate that they will not use Children’s Centres at all as a result (which is slightly higher than the average across all objectors, of 26%). The most popular comments amongst those indicating that they ‘will not use Children’s Centres at all’ as a result of the proposed closure of Apple Tree are:</p> <ul style="list-style-type: none"> • ‘Will make travel to centres more difficult / alternative centres too distant’ – 38% • ‘Very happy with my local centre / prefer it to others’ – 26% • ‘Bad for people without cars / non-drivers’ - 26% • ‘Children’s centres form a local community hub / chance to meet people’ – 26% • ‘Children’s centres are necessary / important resources / a lifeline’ – 18% • ‘Centre is close by / easily accessible’ – 18% <p>A total of 73 users of Apple Tree Children’s Centre (and 33 sole users) responded to the consultation, representing around 23% of all users of the Centre. The overwhelming majority (90%) disagree to some extent with this proposal. Around two-thirds (66%) of the sole users of Apple Tree objecting to the proposal (21 individuals) indicated that they would no longer use Children’s Centres as a result of the proposed closure.</p>
Conclusions from consultation evidence by protected characteristic	<p>In comparison with all those responding to proposal one (to reduce the number of Children’s Centres), those objecting to the closure of Apple Tree are very similar in terms of their profile.</p> <p>Age: A higher percentage of respondents were aged 31-40 from Apple Tree than the county average and a lower percentage of respondents were aged over 50 from Apple Tree than the county average. No responses were received from services users aged under 20. This supports the initial screening assumptions that lower numbers of teenage parents might be affected as a result of the centre closing.</p>

*All respondent numbers refer to users of Apple Tree Children’s Centre unless otherwise stated

	<p>Disability: Eight responses were received to the consultation from users identifying themselves as having some limiting form of disability. This is slightly higher than previous records suggest.</p> <p>Gender: A higher number of responses were received from females to the consultation for Apples Trees than the county average.</p> <p>Gender identity: No respondents identified themselves as having a gender different to that at their birth.</p> <p>Race: A significantly higher number of responses were received from White British service users than the county average. This is higher than suggested might be the case in the initial screening.</p> <p>Religion or belief: A higher percentage of respondents using Apple Tree classified themselves as Christian than the county average. No responses were received from services users with any other stated religion.</p> <p>Sexual orientation: A higher percentage of respondents using Apple Tree classified themselves as heterosexual than the county average. Less than 5 responses were received from services users of any other sexual orientation. This is broadly comparable to service user data for the Canterbury District gathered in the initial screening.</p> <p>Pregnancy and maternity: 206 pregnant women responded to the consultation, of which 96% disagreed with proposals to reduce the number of Children's Centres. Of these 26% stated that they would not use any other Children's Centre were their local Centre to close. Engagement activities were undertaken at groups linked with Apple Trees attended by pregnant mothers and those with new babies to ensure their views were gathered. (see Appendix B)</p> <p>Marriage and Civil Partnerships: A significantly higher proportion of respondents from Apple Tree were married, cohabiting or in a civil partnership than the county average. As such a lower proportion of single parents responded to the consultation than the county average. This confirms the presumption in the initial screening that lone parents are underrepresented amongst Apple Tree services users. However, engagement activities indicate that lone parents were engaged during the consultation period (Appendix B).</p> <p>Carers responsibilities: Carer data was not gathered as part of the consultation activity</p>
Actions required	<ul style="list-style-type: none"> • Ensure any BME groups are engaged and services are planned to ensure group are not negatively affected by changes to service delivery • Ensure users with a disability are engaged and services are planned and delivered at venues with sufficient access for adults and children with a disability • Engage service users from other religions to ensure any changes made as a result of the consultation are understood and services are planned as appropriate. • Ensure services for pregnant women are planned and delivered in areas of need so this target group continue to receive services required. • Ensure local lone parents are engaged with service redesign and are able to access services if they are relocated as a result of the consultation.
Previous judgement (01.07.13)	Medium impact

*All respondent numbers refer to users of Apple Tree Children's Centre unless otherwise stated

Revised judgement (24.10.13)	Medium impact

*All respondent numbers refer to users of Apple Tree Children's Centre unless otherwise stated

Appendix A: Apple Tree full profile of users responding

*All respondent numbers refer to users of Apple Tree Children's Centre unless otherwise stated

Profiles:

User of...Apple Tree - Canterbury				
	Use this Centre only		All users of this Centre	
Age: Under 20	0	0%	0	0%
Age: 20-25	4	12%	8	11%
Age: 36-30	4	12%	13	18%
Age: 31-35	11	33%	25	34%
Age: 36-40	11	33%	18	25%
Age: 41-45	1	3%	5	7%
Age: 46-50	1	3%	3	4%
Age: Over 50	0	0%	0	0%

Public

Gender: Male	1	3%	4	5%
Gender: Female	31	94%	67	92%

EAL: No	31	94%	66	90%
EAL: Yes	0	0%	3	4%

Ethnicity: White British	28	85%	61	84%
Ethnicity: White Irish	1	3%	3	4%
Ethnicity: White Gypsy/Roma	0	0%	0	0%
Ethnicity: White Irish Traveller	0	0%	0	0%
Ethnicity: White Other	0	0%	2	3%
Ethnicity: Mixed White & Black Caribbean	0	0%	0	0%
Ethnicity: Mixed White & Black African	0	0%	0	0%
Ethnicity: Mixed White & Asian	1	3%	2	3%
Ethnicity: Mixed Other	1	3%	1	1%
Ethnicity: Arab	0	0%	0	0%
Ethnicity: Asian or Asian British Indian	0	0%	0	0%
Ethnicity: Asian or Asian British Pakistani	0	0%	0	0%
Ethnicity: Asian or Asian British Bangladeshi	0	0%	0	0%
Ethnicity: Asian Other	0	0%	0	0%
Ethnicity: Chinese	0	0%	0	0%
Ethnicity: Black or Black British Caribbean	0	0%	0	0%
Ethnicity: Black or Black British African	0	0%	0	0%
Ethnicity: Black Other	0	0%	0	0%
Ethnicity: Other	0	0%	1	1%

Religion: Christian	14	42%	39	53%
Religion: Buddhist	0	0%	0	0%
Religion: Hindu	0	0%	0	0%
Religion: Jewish	0	0%	0	0%
Religion: Muslim	0	0%	0	0%
Religion: Sikh	0	0%	0	0%
Religion: Other	0	0%	0	0%
Religion: None	14	42%	28	38%

Married/Civil Part/Cohabiting	28	85%	64	88%
Separated/Divorced/Widowed	2	6%	2	3%
Single	2	6%	5	7%

User of...Apple Tree - Canterbury				
	Use this Centre only		All users of this Centre	
Disability: Limited a lot	1	3%	3	4%
Disability: Limited a little	5	15%	6	8%
Disability: No	25	76%	62	85%

Sexuality: Bi/Bisexual	1	3%	1	1%
Sexuality: Heterosexual/Straight	30	91%	69	95%
Sexuality: Gay woman/Lesbian	0	0%	0	0%
Sexuality: Gay man	0	0%	0	0%
Sexuality: Other	0	0%	0	0%
Gender not the same as at birth	0	0%	0	0%

Base: Public - Use this Centre only (33), All users of this Centre (73)

**Equality Impact Assessment Initial Screening post-consultation update
Children's Centre: Beaches**

Location	Leysdown, Swale
Proposal	Part Time
Rationale for proposal	<ul style="list-style-type: none"> • Located in an area of low need (population) • 58% (155) of users also attended another Children's Centre in Kent.
Consultation Feedback Summary (questionnaires)	<p>A total of 91 members of the public and 20 professionals objected to the reduction in opening hours at Beaches Children's Centre. Of these 91 members of the public, 28 objected only to the reduction in opening hours at Beaches.</p> <p>Around 1 in 8 (13%) of the members of the public objecting to the proposed reduction in opening hours at Beaches indicate that they will not use Children's Centres at all as a result (which is similar to the average across all objectors).</p> <p>A total of 41 users of Beaches Children's Centre (and just 15 sole users) responded to the consultation, representing around 13% of all users of the Centre. The vast majority (85%) disagree to some extent with this proposal. Of the sole users of Beaches responding to the consultation, 29% (4 individuals) indicated that they 'will not use Children's Centres at all' as a result of the proposed reduction in opening hours.</p>
Conclusions from consultation evidence by protected characteristic	<p>In comparison with all those objecting to proposal 3, those objecting to the reduction in opening hours at Beaches are <u>much</u> more likely to be lone parents and/or parents of children from low incomes.</p> <p>Age: A significantly higher percentage of respondents* were aged 26-30 from Beaches than the county average and a higher percentage of respondents were aged 31-35 from Beaches than the county average. No responses were received from service users aged under 20. This supports the initial screening assumptions that lower numbers of teenage parents might be affected as a result of the centre becoming part-time.</p> <p>Disability: Less than five responses were received to the consultation from users of Beaches identifying themselves as having some limiting form of disability. This supports the previous initial screening suggesting the catchment area "has lower level of need than the Kent average in terms of working aged permanently sick/ disabled (volume)".</p> <p>Gender: A higher number of responses were received from females to the consultation for Beaches than the county average.</p> <p>Gender identity: No respondents identified themselves as having a gender different to that at their birth.</p> <p>Race: No responses were received from service users of any other ethnicity than White British. The original initial assessment suggests a lower than average representation of BME groups in the catchment area for Beaches however, few specific engagement activities have been recorded as being undertaken in the area served by Beaches CC.</p> <p>Religion or belief: The religious belief of service users responding to the consultation are broadly comparable to those responding to the consultation countywide. However the overwhelming majority of respondents classed themselves as being Christian or having no stated religious belief.</p>

*All respondent numbers refer to users of Beaches Children's Centre unless otherwise stated

	<p>Sexual orientation: The sexual orientation of service users responding to the consultation are broadly comparable to those responding to the consultation countywide. However the overwhelming majority of respondents classed themselves as being Heterosexual.</p> <p>Pregnancy and maternity: 206 pregnant women responded to the consultation, of which 96% disagreed with proposals to reduce the number of Children’s Centres. Of these 26% stated that they would not use any other Children’s Centre were their local Centre to close. Four respondents to the consultation that stated they were going to be a parent soon objected to the reduction of hours at Beaches CC. However, these prospective parents were not necessarily users of Beaches CC.</p> <p>Marriage and Civil Partnerships: The marital status of service users responding to the consultation are broadly comparable to those responding to the consultation countywide. The initial screening indicated that lone parents are slightly over-represented amongst Beaches service users, however responses to the consultation do not reflect this.</p> <p>Carers responsibilities: Carer data was not gathered as part of the consultation activity</p>
Actions required	<ul style="list-style-type: none"> • Engage BME groups as a priority to understand impact, plan services and ensure group are not negatively affected by potential changes to service delivery times or locations. • Engage service users from other religions to ensure any changes made as a result of the consultation are understood and services are planned as appropriate. • Ensure <u>local</u> lone parents are engaged with service redesign and are able to access services if they are changed or relocated as a result of the consultation.
Previous judgement (02.07.13)	Medium impact
Revised judgement (25.10.13)	Medium impact (with a specific focus on BME groups and lone parents)

*All respondent numbers refer to users of Beaches Children’s Centre unless otherwise stated

Appendix A: Beaches full profile of respondents

*All respondent numbers refer to users of Beaches Children's Centre unless otherwise stated

Profiles:

User of...Beaches - Swale				
	Use this Centre only		All users of this Centre	
Age: Under 20	0	0%	0	0%
Age: 20-25	1	7%	2	5%
Age: 36-30	6	40%	13	32%
Age: 31-35	5	33%	14	34%
Age: 36-40	0	0%	7	17%
Age: 41-45	0	0%	0	0%
Age: 46-50	0	0%	0	0%
Age: Over 50	4	27%	4	10%

Public

Gender: Male	0	0%	1	2%
Gender: Female	15	100%	39	95%

EAL: No	13	87%	36	88%
EAL: Yes	0	0%	0	0%

Ethnicity: White British	13	87%	38	93%
Ethnicity: White Irish	0	0%	0	0%
Ethnicity: White Gypsy/Roma	0	0%	0	0%
Ethnicity: White Irish Traveller	0	0%	0	0%
Ethnicity: White Other	0	0%	0	0%
Ethnicity: Mixed White & Black Caribbean	0	0%	0	0%
Ethnicity: Mixed White & Black African	0	0%	0	0%
Ethnicity: Mixed White & Asian	0	0%	0	0%
Ethnicity: Mixed Other	0	0%	0	0%
Ethnicity: Arab	0	0%	0	0%
Ethnicity: Asian or Asian British Indian	0	0%	0	0%
Ethnicity: Asian or Asian British Pakistani	0	0%	0	0%
Ethnicity: Asian or Asian British Bangladeshi	0	0%	0	0%
Ethnicity: Asian Other	0	0%	0	0%
Ethnicity: Chinese	0	0%	0	0%
Ethnicity: Black or Black British Caribbean	0	0%	0	0%
Ethnicity: Black or Black British African	0	0%	0	0%
Ethnicity: Black Other	0	0%	0	0%
Ethnicity: Other	0	0%	0	0%

Religion: Christian	6	40%	20	49%
Religion: Buddhist	0	0%	0	0%
Religion: Hindu	0	0%	0	0%
Religion: Jewish	0	0%	0	0%
Religion: Muslim	0	0%	0	0%
Religion: Sikh	0	0%	0	0%
Religion: Other	1	7%	1	2%
Religion: None	5	33%	16	39%

Married/Civil Part/Cohabiting	11	73%	30	73%
Separated/Divorced/Widowed	0	0%	3	7%
Single	1	7%	4	10%

User of...Beaches - Swale				
	Use this Centre only		All users of this Centre	
Disability: Limited a lot	0	0%	1	2%
Disability: Limited a little	0	0%	2	5%
Disability: No	12	80%	33	80%

Sexuality: Bi/Bisexual	0	0%	1	2%
Sexuality: Heterosexual/Straight	13	87%	36	88%
Sexuality: Gay woman/Lesbian	0	0%	0	0%
Sexuality: Gay man	0	0%	0	0%
Sexuality: Other	0	0%	0	0%
Gender not the same as at birth	0	0%	0	0%

Base: Public - Use this Centre only (15), All users of this Centre (41)

**Equality Impact Assessment Initial Screening post-consultation update
Children's Centre: Birchington**

Location	Birchington, Thanet
Proposal	Part Time
Rationale for proposal	<ul style="list-style-type: none"> Local Solution 53% (343) of users also attended another Children's Centre in Kent.
Consultation Feedback Summary (questionnaires)	<p>A total of 97 members of the public and 32 professionals objected to the reduction in opening hours at Birchington Children's Centre. Of these 97 members of the public, 21 objected only to the reduction in opening hours at Birchington.</p> <p>15% of the members of the public objecting to the proposed reduction in opening hours at Birchington indicate that they will not use Children's Centres at all as a result (which is similar to the average across all objectors).</p> <p>A total of 60 users of Birchington Children's Centre (and just 16 sole users) responded to the consultation, representing around 8% of all users of the Centre. The overwhelming majority (90%) disagree to some extent with this proposal. Of the sole users of Birchington responding to the consultation, 27% (4 individuals) indicated that they 'will not use Children's Centres at all' as a result of the proposed reduction in opening hours.</p>
Conclusions from consultation evidence by protected characteristic	<p>In comparison with all those objecting to proposal 3 to reduce hours at some Children's Centres, those objecting to the reduction in opening hours at Birchington are more likely to be lone parents.</p> <p>Age: A significantly higher percentage of respondents* were aged 26-30 from Birchington than the county average. No responses were received from services users aged under 20. This supports the initial screening assumptions that lower numbers of teenage parents might be affected as a result of the centre becoming part time.</p> <p>Disability: Six responses were received to the consultation from users identifying themselves as having some limiting form of disability. This is slightly higher than previous data in the initial screening suggested.</p> <p>Gender: A higher number of responses were received from females to the consultation for Birchington than the county average.</p> <p>Gender identity: One respondent identified themselves as having a gender different to that at their birth.</p> <p>Race: A higher number of responses were received from White British service users than the county average. This is in line with the expectations in the original initial assessment and in line with the population profile of Thanet District itself. Numbers that have identified themselves as having English as an additional language in the Birchington consultation return is lower than the county average but remains an Equality and Diversity priority.</p> <p>Religion or belief: The religious belief of service users responding to the consultation are broadly comparable to those responding to the consultation countywide. However a slightly higher number of respondents classified themselves as having an "other" religion.</p>

*All respondent numbers refer to users of Birchington Children's Centre unless otherwise stated

	<p>Sexual orientation: A higher percentage of respondents using Birchington classified themselves as heterosexual than the county average. Less than 5 responses were received from services users of any other sexual orientation.</p> <p>Pregnancy and maternity: 206 pregnant women responded to the consultation, of which 96% disagreed with proposals to reduce the number of Children’s Centres. Of these 26% stated that they would not use any other Children’s Centre were their local Centre to close. Seven respondents to the consultation that stated they were going to be a parent soon objected to the reduction of hours at Beaches CC. However, these prospective parents were not necessarily users of Birchington CC.</p> <p>Marriage and Civil Partnerships: A higher proportion of respondents from Birchington were married, cohabiting or in a civil partnership than the county average. As such a lower proportion of single parents responded to the consultation than the county average. This seems to confirm the presumption in the initial screening that lone parents are underrepresented amongst Birchington services users.</p> <p>Carers responsibilities: Carer data was not gathered as part of the consultation activity</p>
Actions required	<ul style="list-style-type: none"> • Ensure users with a disability are engaged and services are planned and delivered at venues with sufficient access for adults and children with a disability • Investigate feasibility of gathering more accurate records of the gender identity of service users and ensure services are planned and considered to be inclusive to this target group. • Ensure any BME groups and specifically those with English as an additional language, are engaged and services are planned to ensure group are not negatively affected by changes to service delivery • Engage service users from other religions to ensure any changes made as a result of the consultation are understood and services are planned as appropriate. Investigate wider religious beliefs held by service users to ensure all beliefs are being inclusively incorporated in to CC practice.
Previous judgement (02.07.13)	Medium impact
Revised judgement (25.10.13)	Medium impact

*All respondent numbers refer to users of Birchington Children’s Centre unless otherwise stated

Appendix A: Birchington full profile of respondents

*All respondent numbers refer to users of Birchington Children's Centre unless otherwise stated

Profiles:

	User of...Birchington - Thanet			
	Use this Centre only		All users of this Centre	
Age: Under 20	0	0%	0	0%
Age: 20-25	1	6%	6	10%
Age: 36-30	4	25%	19	32%
Age: 31-35	6	38%	15	25%
Age: 36-40	1	6%	9	15%
Age: 41-45	3	19%	5	8%
Age: 46-50	1	6%	2	3%
Age: Over 50	3	19%	3	5%

Public

Gender: Male	0	0%	4	7%
Gender: Female	16	100%	56	93%

EAL: No	12	75%	54	90%
EAL: Yes	2	13%	2	3%

Ethnicity: White British	13	81%	53	88%
Ethnicity: White Irish	0	0%	0	0%
Ethnicity: White Gypsy/Roma	0	0%	0	0%
Ethnicity: White Irish Traveller	0	0%	0	0%
Ethnicity: White Other	1	6%	1	2%
Ethnicity: Mixed White & Black Caribbean	0	0%	2	3%
Ethnicity: Mixed White & Black African	0	0%	0	0%
Ethnicity: Mixed White & Asian	0	0%	0	0%
Ethnicity: Mixed Other	0	0%	0	0%
Ethnicity: Arab	0	0%	0	0%
Ethnicity: Asian or Asian British Indian	0	0%	0	0%
Ethnicity: Asian or Asian British Pakistani	0	0%	0	0%
Ethnicity: Asian or Asian British Bangladeshi	0	0%	0	0%
Ethnicity: Asian Other	0	0%	1	2%
Ethnicity: Chinese	0	0%	0	0%
Ethnicity: Black or Black British Caribbean	0	0%	0	0%
Ethnicity: Black or Black British African	0	0%	0	0%
Ethnicity: Black Other	0	0%	0	0%
Ethnicity: Other	0	0%	0	0%

Religion: Christian	8	50%	29	48%
Religion: Buddhist	0	0%	0	0%
Religion: Hindu	0	0%	0	0%
Religion: Jewish	0	0%	0	0%
Religion: Muslim	0	0%	0	0%
Religion: Sikh	0	0%	0	0%
Religion: Other	2	13%	3	5%
Religion: None	4	25%	23	38%

Married/Civil Part/Cohabiting	11	69%	49	82%
Separated/Divorced/Widowed	1	6%	2	3%
Single	3	19%	6	10%

	User of...Birchington - Thanet			
	Use this Centre only		All users of this Centre	
Disability: Limited a lot	1	6%	1	2%
Disability: Limited a little	2	13%	5	8%
Disability: No	10	63%	50	83%

Sexuality: Bi/Bisexual	0	0%	0	0%
Sexuality: Heterosexual/Straight	14	88%	57	95%
Sexuality: Gay woman/Lesbian	0	0%	0	0%
Sexuality: Gay man	0	0%	0	0%
Sexuality: Other	0	0%	0	0%
Gender not the same as at birth	0	0%	1	2%

Base: Public - Use this Centre only (16), All users of this Centre (60)

**Equality Impact Assessment Initial Screening post-consultation update
Children's Centre: Briary**

Location	Herne Bay, Canterbury
Proposal	Closure
Rationale for proposal	<ul style="list-style-type: none"> • Located in an area of low need (population). • 78% (439) of users also attend another Children's Centre. The majority of these attended The Poppy Children's Centre (393)
Consultation Feedback Summary (questionnaires)	<p>A total of 161 members of the public and 32 professionals objected to the closure of Briary Children's Centre. Of these 161 members of the public, 80 objected only to the closure of Briary.</p> <p>Around a quarter (26%) of the members of the public objecting to the proposed closure of Briary indicate that they will not use Children's Centres at all as a result (which is the same as the average across all objectors). The most popular comments amongst those indicating that they 'will not use Children's Centres at all' as a result of the proposed closure of Briary are:</p> <ul style="list-style-type: none"> • Will make travel to centres more difficult / alternative centres too distant' – 24% • 'Children's centres form a local community hub / chance to meet people' – 19% • 'Very happy with my local centre / prefer it to others / we enjoy going there / only use this one' – 16% • 'Centre is close by / easily accessible' – 16% • 'No alternative to these facilities / less services will be available' – 14% <p>A total of 201 users of Briary Children's Centre (and 72 sole users) responded to the consultation, representing as many as 37% of all users of the Centre. The overwhelming majority (95%) disagree to some extent with this proposal. Around half (48%) of the sole users of Briary objecting to the proposal (33 individuals) indicated that they would no longer use Children's Centres as a result of the proposed closure.</p>
Conclusions from consultation evidence by protected characteristic	In comparison with all those responding to proposal one, those objecting to the closure of Briary are more likely to be lone parents and/or younger parents (aged 25 or under).
	Age: A significantly higher percentage of respondents* were aged 20-25 than the county average. Other age profiles were broadly comparable. Less than 5 teenage parents or pregnant teenagers who used the Centre objected to the closure of Briary CC. This supports the initial screening assumptions that lower numbers of teenage parents might be affected as a result of the centre closing.
	Disability: Twelve responses were received to the consultation from users identifying themselves as having some limiting form of disability. This is slightly higher than data used in the previous impact assessment suggests.
	Gender: A broadly comparable number of responses were received from males and females compared to the county

*All respondent numbers refer to users of Briary Children's Centre unless otherwise stated

	<p>responses.</p> <p>Gender identity: No respondents identified themselves as having a gender different to that at their birth.</p> <p>Race: A higher number of responses were received from White British service users than the county average. This supports the rationale in the initial screening of an underrepresentation of BME families in the area serviced by Briary CC. It would appear that few BME service users were engaged during the consultation period.</p> <p>Religion or belief: The stated religions of users responding to the consultation regarding Briary CC were broadly comparable to county figures.</p> <p>Sexual orientation: The stated religions of users responding to the consultation regarding Briary CC were broadly comparable to county figures. However, less than 5 responses were received from services users of any other sexual orientation. This is broadly comparable to service user data for the Canterbury District gathered in the initial screening.</p> <p>Pregnancy and maternity: 206 pregnant women responded to the consultation, of which 96% disagreed with proposals to reduce the number of Children's Centres. Of these 26% stated that they would not use any other Children's Centre were their local Centre to close. Engagement activities were undertaken at groups linked with Briary attended by pregnant mothers and those with new babies to ensure their views were gathered. (see Appendix B)</p> <p>Marriage and Civil Partnerships: The stated marital status of users responding to the consultation regarding Briary CC were broadly comparable to county figures. The initial screening identified a potential impact on married or cohabiting couples. The consultation responses confirm this assumption, 75% of users of Briary responding were married, cohabiting or in a civil partnership.</p> <p>Carers responsibilities: Carer data was not gathered as part of the consultation activity</p>
Actions required	<ul style="list-style-type: none"> • Ensure any BME groups are engaged and services are planned to ensure minority group are not negatively affected by changes to service delivery • Ensure users with a disability are engaged and services are planned and delivered at venues with sufficient access for adults and children with a disability • Ensure services for pregnant women are planned and delivered in areas of need so this target group continue to receive services required. • Ensure married and cohabiting couples continue to access services
Previous judgement (01.07.13)	Medium impact
Revised judgement (24.10.13)	Medium impact

*All respondent numbers refer to users of Briary Children's Centre unless otherwise stated

Appendix A: Briary full profile of respondents

*All respondent numbers refer to users of Briary Children’s Centre unless otherwise stated

Profiles:

	User of...Briary - Canterbury			
	Use this Centre only		All users of this Centre	
Public				
Age: Under 20	1	1%	5	2%
Age: 20-25	13	18%	44	22%
Age: 36-30	12	17%	38	19%
Age: 31-35	18	25%	53	26%
Age: 36-40	13	18%	32	16%
Age: 41-45	1	1%	9	4%
Age: 46-50	4	6%	4	2%
Age: Over 50	9	13%	9	4%

Gender: Male	6	8%	12	6%
Gender: Female	61	85%	181	90%

EAL: No	66	92%	188	94%
EAL: Yes	1	1%	4	2%

Ethnicity: White British	64	89%	180	90%
Ethnicity: White Irish	0	0%	1	0%
Ethnicity: White Gypsy/Roma	1	1%	2	1%
Ethnicity: White Irish Traveller	0	0%	0	0%
Ethnicity: White Other	1	1%	4	2%
Ethnicity: Mixed White & Black Caribbean	0	0%	0	0%
Ethnicity: Mixed White & Black African	0	0%	0	0%
Ethnicity: Mixed White & Asian	0	0%	0	0%
Ethnicity: Mixed Other	0	0%	1	0%
Ethnicity: Arab	0	0%	0	0%
Ethnicity: Asian or Asian British Indian	1	1%	1	0%
Ethnicity: Asian or Asian British Pakistani	0	0%	0	0%
Ethnicity: Asian or Asian British Bangladeshi	0	0%	0	0%
Ethnicity: Asian Other	0	0%	1	0%
Ethnicity: Chinese	0	0%	0	0%
Ethnicity: Black or Black British Caribbean	0	0%	0	0%
Ethnicity: Black or Black British African	0	0%	2	1%
Ethnicity: Black Other	0	0%	0	0%
Ethnicity: Other	0	0%	0	0%

Religion: Christian	26	36%	85	42%
Religion: Buddhist	1	1%	1	0%
Religion: Hindu	1	1%	1	0%
Religion: Jewish	0	0%	0	0%
Religion: Muslim	0	0%	1	0%
Religion: Sikh	0	0%	0	0%
Religion: Other	3	4%	4	2%
Religion: None	31	43%	92	46%

Married/Civil Part/Cohabiting	58	81%	151	75%
Separated/Divorced/Widowed	2	3%	8	4%
Single	7	10%	31	15%

	User of...Briary - Canterbury			
	Use this Centre only		All users of this Centre	
Disability: Limited a lot	3	4%	4	2%
Disability: Limited a little	4	6%	8	4%
Disability: No	58	81%	175	87%

Sexuality: Bi/Bisexual	1	1%	1	0%
Sexuality: Heterosexual/Straight	61	85%	181	90%
Sexuality: Gay woman/Lesbian	0	0%	1	0%
Sexuality: Gay man	0	0%	0	0%
Sexuality: Other	1	1%	1	0%
Gender not the same as at birth	0	0%	0	0%

Base: Public - Use this Centre only (72), All users of this Centre (201)

**Equality Impact Assessment Initial Screening post-consultation update
Children's Centre: Callis Grange**

Location	Broadstairs, Thanet
Proposal	Part Time
Rationale for proposal	<ul style="list-style-type: none"> • Local Solution • 60% (304) of users also attended another Children's Centre in Kent.
Consultation Feedback Summary (questionnaires)	<p>A total of 86 members of the public and 26 professionals objected to the reduction in opening hours at Callis Grange Children's Centre. Of these 86 members of the public, 32 objected only to the reduction in opening hours at Callis Grange.</p> <p>Around 1 in 6 (17%) of the members of the public objecting to the proposed reduction in opening hours at Callis Grange indicate that they will not use Children's Centres at all as a result (which is similar to the average across all objectors).</p> <p>A total of 49 users of Callis Grange Children's Centre (and 25 sole users) responded to the consultation, representing around 9% of all users of the Centre. The overwhelming majority (94%) disagree to some extent with this proposal. Of the sole users of Callis Grange responding to the consultation, 36% (9 individuals) indicated that they 'will not use Children's Centres at all' as a result of the proposed reduction in opening hours.</p>
Conclusions from consultation evidence by protected characteristic	<p>In comparison with all those objecting to proposal 3, those objecting to the reduction in opening hours at Callis Grange are more likely to be lone parents.</p> <p>Age: A significantly higher percentage of respondents were aged 26-30 from Callis Grange than the county average and a lower percentage of respondents were aged 36-45 from Callis Grange than the county average. No responses were received from services users aged under 20. This supports the initial screening assumptions that lower numbers of teenage parents might be affected as a result of the centre reducing to part-time hours.</p> <p>Disability: Less than five responses were received to the consultation from users identifying themselves as having some limiting form of disability. This is broadly in line with assumptions from the initial screening</p> <p>Gender: The overwhelming majority of responses from users of Callis Grange were received by females. Less than five responses were received by males. A higher number of responses were received from females to the consultation for Callis Grange than the county average.</p> <p>Gender identity: No respondents identified themselves as having a gender different to that at their birth.</p> <p>Race: All responses were received from White British service users and no respondents identified themselves as having English as an additional language. The initial screening identified a 95% White British population in Thanet but 10% use of Children's Centres by BME groups. As such the responses indicate an underrepresentation from BME CC users even though information events were run at activities in the Centre attended by BME groups.</p> <p>Religion or belief: The stated religious beliefs of respondents using Callis Grange were broadly comparable with the county</p>

*All respondent numbers refer to users of Callis Grange Children's Centre unless otherwise stated

	average although there was a significant underrepresentation of religions other than Christians amongst respondents.
	Sexual orientation: The stated sexual orientation of respondents using Callis Grange were broadly comparable with the county average.
	Pregnancy and maternity: 206 pregnant women responded to the consultation, of which 96% disagreed with proposals to reduce the number of Children’s Centres. Of these 26% stated that they would not use any other Children’s Centre were their local Centre to close.
	Marriage and Civil Partnerships The marital status of respondents using Callis Grange were broadly comparable with the county average. The initial screening indicated that lone parents are underrepresented amongst Callis Grange services users which is not reflected in the responses. However, engagement activities indicate that a wide range of service users were engaged during the consultation period via large summer activities.
	Carers responsibilities: Carer data was not gathered as part of the consultation activity
Actions required	<ul style="list-style-type: none"> • Monitor registrations by service users identifying themselves as having a form of disability or limiting illness. Ensure users with a disability are engaged and services are planned and delivered at venues with sufficient access for adults and children with a disability. • Ensure men, and fathers in particular, are engaged in service planning to ensure participation in a wide variety of activities. • Ensure any BME groups are engaged and services are planned to ensure group are not negatively affected by possible changes to service delivery • Engage service users from religions other than Christianity to ensure any changes made as a result of the consultation are understood and services are planned as appropriate. • Ensure services for pregnant women are planned and delivered in areas of need so this target group continue to receive services required.
Previous judgement (insert date)	Medium impact
Revised judgement (insert date)	Medium impact (with particular reference to Race and Gender)

*All respondent numbers refer to users of Callis Grange Children’s Centre unless otherwise stated

Appendix A: Callis Grange full profile of respondents

*All respondent numbers refer to users of Callis Grange Children's Centre unless otherwise stated

Profiles:

	User of...Callis Grange - Thanet			
	Use this Centre only		All users of this Centre	
Age: Under 20	0	0%	0	0%
Age: 20-25	1	4%	7	14%
Age: 36-30	13	52%	19	39%
Age: 31-35	7	28%	14	29%
Age: 36-40	3	12%	6	12%
Age: 41-45	1	4%	2	4%
Age: 46-50	0	0%	0	0%
Age: Over 50	0	0%	0	0%

Public

Gender: Male	0	0%	1	2%
Gender: Female	24	96%	46	94%

EAL: No	21	84%	42	86%
EAL: Yes	3	12%	3	6%

Ethnicity: White British	21	84%	41	84%
Ethnicity: White Irish	0	0%	0	0%
Ethnicity: White Gypsy/Roma	0	0%	0	0%
Ethnicity: White Irish Traveller	0	0%	0	0%
Ethnicity: White Other	1	4%	1	2%
Ethnicity: Mixed White & Black Caribbean	0	0%	0	0%
Ethnicity: Mixed White & Black African	0	0%	1	2%
Ethnicity: Mixed White & Asian	0	0%	0	0%
Ethnicity: Mixed Other	0	0%	0	0%
Ethnicity: Arab	0	0%	0	0%
Ethnicity: Asian or Asian British Indian	1	4%	1	2%
Ethnicity: Asian or Asian British Pakistani	0	0%	0	0%
Ethnicity: Asian or Asian British Bangladeshi	0	0%	0	0%
Ethnicity: Asian Other	1	4%	1	2%
Ethnicity: Chinese	0	0%	0	0%
Ethnicity: Black or Black British Caribbean	0	0%	0	0%
Ethnicity: Black or Black British African	0	0%	0	0%
Ethnicity: Black Other	0	0%	0	0%
Ethnicity: Other	0	0%	0	0%

Religion: Christian	14	56%	24	49%
Religion: Buddhist	0	0%	0	0%
Religion: Hindu	1	4%	1	2%
Religion: Jewish	0	0%	0	0%
Religion: Muslim	0	0%	0	0%
Religion: Sikh	0	0%	0	0%
Religion: Other	1	4%	1	2%
Religion: None	8	32%	19	39%

Married/Civil Part/Cohabiting	21	84%	40	82%
Separated/Divorced/Widowed	0	0%	1	2%
Single	3	12%	5	10%

	User of...Callis Grange - Thanet			
	Use this Centre only		All users of this Centre	
Disability: Limited a lot	0	0%	0	0%
Disability: Limited a little	1	4%	3	6%
Disability: No	21	84%	41	84%

Sexuality: Bi/Bisexual	0	0%	1	2%
Sexuality: Heterosexual/Straight	23	92%	42	86%
Sexuality: Gay woman/Lesbian	0	0%	1	2%
Sexuality: Gay man	0	0%	0	0%
Sexuality: Other	0	0%	0	0%
Gender not the same as at birth	0	0%	0	0%

Base: Public - Use this Centre only (25), All users of this Centre (49)

**Equality Impact Assessment Initial Screening post-consultation update
Children's Centre: Cherry Blossom**

Location	Wye, Ashford	
Proposal	Closure	
Rationale for proposal	<ul style="list-style-type: none"> Identified as a local solution. Located in an area of low need (population). 77% (139) of users also attend another Children's Centre. The majority of these attended Suresteps and Bluebells. 	
Consultation Feedback Summary (questionnaires)	<p>A total of 88 members of the public and 8 professionals objected to the closure of Cherry Blossom Children's Centre. Of these 88 members of the public, just 7 objected <u>only</u> to the closure of Cherry Blossom, with the majority objecting to other Centre closures as well (and particularly other proposed closures in Ashford and Dover).</p> <p>Amongst this group, 16% (14 individuals) indicate that they will not use Children's Centres at all as a result of the proposed closure.</p> <p>Just 7 users of Cherry Blossom responded to the consultation, with 6 of the 7 disagreeing to some extent with the proposal. Just 1 of these users indicated that they would no longer use Children's Centres as a result of the proposed closure.</p>	
Conclusions from consultation evidence by protected characteristic	Those members of the public who objected to the closure of Cherry Blossom appear to be more likely to be lone parents and/or disabled.	
	Age:	<p>Due to the low level of responses received from Cherry Blossom users, meaningful analysis by protected characteristic cannot be made. Low response levels by CC users may, in itself, indicate a low level of impact on service users, but such an assumption is understandably speculative.</p> <p>The consultation was promoted at outreach activities serving Cherry Blossom families in Wye (see Appendix 2)</p>
	Disability:	
	Gender:	
	Gender identity:	
	Race:	
	Religion or belief:	
	Sexual orientation:	
	Pregnancy and maternity:	
Marriage and Civil Partnerships:		
Carers responsibilities:		
Actions required	<ul style="list-style-type: none"> Ensure any changes to service delivery as a result of the closure of Cherry Blossom are communicated effectively to sole users of this Centre. 	
Previous judgement	Medium impact	

*All respondent numbers refer to users of Cherry Blossom Children's Centre unless otherwise stated

(01.07.13)	
Revised judgement (28.10.13)	Low impact

*All respondent numbers refer to users of Cherry Blossom Children's Centre unless otherwise stated

Appendix A: Cherry Blossom full profile of respondents

*All respondent numbers refer to users of Cherry Blossom Children's Centre unless otherwise stated

Profiles:

User of...Cherry Blossom - Ashford				
	Use this Centre only		All users of this Centre	
Age: Under 20	0	####	0	0%
Age: 20-25	0	####	0	0%
Age: 36-30	0	####	0	0%
Age: 31-35	0	####	4	57%
Age: 36-40	0	####	3	43%
Age: 41-45	0	####	0	0%
Age: 46-50	0	####	0	0%
Age: Over 50	0	####	0	0%

Public

Gender: Male	0	####	0	0%
Gender: Female	0	####	7	100%

EAL: No	0	####	7	100%
EAL: Yes	0	####	0	0%

Ethnicity: White British	0	####	7	100%
Ethnicity: White Irish	0	####	0	0%
Ethnicity: White Gypsy/Roma	0	####	0	0%
Ethnicity: White Irish Traveller	0	####	0	0%
Ethnicity: White Other	0	####	0	0%
Ethnicity: Mixed White & Black Caribbean	0	####	0	0%
Ethnicity: Mixed White & Black African	0	####	0	0%
Ethnicity: Mixed White & Asian	0	####	0	0%
Ethnicity: Mixed Other	0	####	0	0%
Ethnicity: Arab	0	####	0	0%
Ethnicity: Asian or Asian British Indian	0	####	0	0%
Ethnicity: Asian or Asian British Pakistani	0	####	0	0%
Ethnicity: Asian or Asian British Bangladeshi	0	####	0	0%
Ethnicity: Asian Other	0	####	0	0%
Ethnicity: Chinese	0	####	0	0%
Ethnicity: Black or Black British Caribbean	0	####	0	0%
Ethnicity: Black or Black British African	0	####	0	0%
Ethnicity: Black Other	0	####	0	0%
Ethnicity: Other	0	####	0	0%

Religion: Christian	0	####	3	43%
Religion: Buddhist	0	####	0	0%
Religion: Hindu	0	####	0	0%
Religion: Jewish	0	####	0	0%
Religion: Muslim	0	####	0	0%
Religion: Sikh	0	####	0	0%
Religion: Other	0	####	0	0%
Religion: None	0	####	4	57%

Married/Civil Part/Cohabiting	0	####	5	71%
Separated/Divorced/Widowed	0	####	1	14%
Single	0	####	1	14%

User of...Cherry Blossom - Ashford				
	Use this Centre only		All users of this Centre	
Disability: Limited a lot	0	####	1	14%
Disability: Limited a little	0	####	0	0%
Disability: No	0	####	6	86%

Sexuality: Bi/Bisexual	0	####	0	0%
Sexuality: Heterosexual/Straight	0	####	6	86%
Sexuality: Gay woman/Lesbian	0	####	0	0%
Sexuality: Gay man	0	####	0	0%
Sexuality: Other	0	####	0	0%
Gender not the same as at birth	0	####	0	0%

Base: Public - Use this Centre only (0), All users of this Centre (7)

**Equality Impact Assessment Initial Screening post-consultation update
Children's Centre: Daisy Chains**

Location	Meopham, Gravesend
Proposal	Closure
Rationale for proposal	<ul style="list-style-type: none"> • Identified as a local solution. • Located in an area of low need (population). • 46% (168) of users also attend another Children's Centre. The majority of these attended Kings Farm, Little Gems, Bright Futures and Riverside.
Consultation Feedback Summary (questionnaires)	<p>A total of 194 members of the public and 24 professionals objected to the closure of Daisy Chains Children's Centre. Of these 194 members of the public, 87 objected only to the closure of Daisy Chains.</p> <p>A third (33%) of the members of the public objecting to the proposed closure of Daisy Chains indicate that they will not use Children's Centres at all as a result (which is higher than the average across all objectors, of 26%). The most popular comments amongst those indicating that they 'will not use Children's Centres at all' as a result of the proposed closure of Daisy Chains are:</p> <ul style="list-style-type: none"> • 'Will make travel to centres more difficult / alternative centres too distant' – 30% • 'No alternative to these facilities / less services will be available' – 26% • 'Children's centres form a local community hub / chance to meet people' – 25% • 'Will have a financial impact on me / make it too expensive - travel / parking, etc.' – 18% • 'Children's centres are necessary / important resources / a lifeline' – 16% <p>A total of 103 users of Daisy Chains Children's Centre (and 80 sole users) responded to the consultation, representing around 26% of all users of the Centre. The overwhelming majority (96%) disagree to some extent with this proposal. Of the sole users of Daisy Chains objecting to the proposal, 57% indicated that they 'will not use Children's Centres at all' as a result of the proposed closure.</p>
Conclusions from consultation evidence by protected characteristic	<p>In comparison with all those responding to proposal one, those objecting to the closure of Daisy Chains are very similar in terms of their profile.</p> <p>Age: The stated ages of respondents* using Daisy Chains were broadly comparable with the county average. The initial screening stated that lower numbers of teenage parents might be affected as a result of the centre closing. Less than 5 responses were received from centre users aged under 20, however details do suggest the consultation was promoted to a wide number of Daisy Chains service users.</p> <p>Disability: Less than five responses were received to the consultation from users identifying themselves as having some limiting form of disability. This is lower than the county average and is in line with the previous initial screening than indicated</p>

*All respondent numbers refer to users of Daisy Chains Children's Centre unless otherwise stated

	<p>the catchment for this Centre has a lower level of need than the Kent average in terms of working aged permanently sick/ disabled (by volume).</p> <p>Gender: A lower number of responses were received from females to the consultation for Daisy Chains than the county average. As such a higher percentage of responses were received from males.</p> <p>Gender identity: No respondents identified themselves as having a gender different to that at their birth.</p> <p>Race: A higher number of responses were received from White British service users than the county average. Less than five respondents identified themselves as anything other than White British. This is not in line with District figures or CC usage figures, which both identify and higher proportion of service users as being from BME backgrounds.</p> <p>Religion or belief: The stated religious beliefs of respondents using Daisy Chains were broadly comparable with the county average. No religious belief data was gathered for the initial screening.</p> <p>Sexual orientation: The stated sexual orientation of respondents using Daisy Chains were broadly comparable with the county average. Less than 5 responses were received from services users of any other sexual orientation.</p> <p>Pregnancy and maternity: 206 pregnant women responded to the consultation, of which 96% disagreed with proposals to reduce the number of Children’s Centres. Of these 26% stated that they would not use any other Children’s Centre were their local Centre to close. A Daisy Chains service user baby talk activity group was attended to promote the consultation activity to parents of children under one year old (see Appendix B).</p> <p>Marriage and Civil Partnerships: A significantly higher proportion of respondents from Daisy Chains were married, cohabiting or in a civil partnership than the county average. As such a lower proportion of single parents responded to the consultation than the county average. This confirms the presumption in the initial screening that lone parents are underrepresented amongst Daisy Chains services users.</p> <p>Carers responsibilities: Carer data was not gathered as part of the consultation activity</p>
Actions required	<ul style="list-style-type: none"> • Ensure BME service users are engaged and any changes made to services as a result of the Centre closure are planned with and communicated to this target group. • Ensure fathers are engaged and services are planned and delivered to ensure high levels of participation from fathers • Engage service users from all religions to ensure any changes made as a result of the consultation are understood and services are planned as appropriate. • Ensure services for pregnant women are planned and delivered in areas of need so this target group continue to receive services required. • Ensure local lone parents are engaged with service redesign and are able to access services if they are relocated as a result of the consultation.
Previous judgement (02.07.13)	Medium impact
Revised judgement (28.10.13)	Medium impact

*All respondent numbers refer to users of Daisy Chains Children’s Centre unless otherwise stated

Appendix A: Daisy Chains full profile of respondents

*All respondent numbers refer to users of Daisy Chains Children’s Centre unless otherwise stated

Profiles:

	User of...Daisy Chains - Gravesham			
	Use this Centre only		All users of this Centre	
Age: Under 20	0	0%	1	1%
Age: 20-25	5	6%	6	6%
Age: 36-30	9	11%	14	14%
Age: 31-35	25	31%	35	34%
Age: 36-40	18	23%	22	21%
Age: 41-45	9	11%	10	10%
Age: 46-50	3	4%	3	3%
Age: Over 50	10	13%	10	10%

Public

Gender: Male	7	9%	9	9%
Gender: Female	69	86%	89	86%

EAL: No	71	89%	93	90%
EAL: Yes	3	4%	3	3%

Ethnicity: White British	72	90%	93	90%
Ethnicity: White Irish	0	0%	0	0%
Ethnicity: White Gypsy/Roma	0	0%	0	0%
Ethnicity: White Irish Traveller	0	0%	0	0%
Ethnicity: White Other	3	4%	3	3%
Ethnicity: Mixed White & Black Caribbean	0	0%	0	0%
Ethnicity: Mixed White & Black African	0	0%	0	0%
Ethnicity: Mixed White & Asian	0	0%	0	0%
Ethnicity: Mixed Other	0	0%	0	0%
Ethnicity: Arab	0	0%	0	0%
Ethnicity: Asian or Asian British Indian	2	3%	3	3%
Ethnicity: Asian or Asian British Pakistani	0	0%	0	0%
Ethnicity: Asian or Asian British Bangladeshi	0	0%	0	0%
Ethnicity: Asian Other	0	0%	0	0%
Ethnicity: Chinese	0	0%	0	0%
Ethnicity: Black or Black British Caribbean	0	0%	0	0%
Ethnicity: Black or Black British African	0	0%	0	0%
Ethnicity: Black Other	0	0%	0	0%
Ethnicity: Other	0	0%	0	0%

Religion: Christian	48	60%	54	52%
Religion: Buddhist	1	1%	1	1%
Religion: Hindu	1	1%	2	2%
Religion: Jewish	0	0%	0	0%
Religion: Muslim	0	0%	0	0%
Religion: Sikh	1	1%	1	1%
Religion: Other	1	1%	2	2%
Religion: None	24	30%	38	37%

Married/Civil Part/Cohabiting	72	90%	91	88%
Separated/Divorced/Widowed	2	3%	2	2%
Single	3	4%	6	6%

	User of...Daisy Chains - Gravesham			
	Use this Centre only		All users of this Centre	
Disability: Limited a lot	0	0%	0	0%
Disability: Limited a little	1	1%	2	2%
Disability: No	72	90%	93	90%

Sexuality: Bi/Bisexual	0	0%	0	0%
Sexuality: Heterosexual/Straight	72	90%	93	90%
Sexuality: Gay woman/Lesbian	0	0%	0	0%
Sexuality: Gay man	0	0%	0	0%
Sexuality: Other	2	3%	2	2%
Gender not the same as at birth	0	0%	0	0%

Base: Public - Use this Centre only (80), All users of this Centre (103)

**Equality Impact Assessment Initial Screening post-consultation update
Children's Centre:**

Location	Dunton Green, Sevenoaks
Proposal	Closure
Rationale for proposal	<ul style="list-style-type: none"> • Located in an area of low need (population). • 60% (329) of users also attend another Children's Centre. The majority of these attended Spring House (303).
Consultation Feedback Summary (questionnaires)	<p>A total of 194 members of the public and 24 professionals objected to the closure of Daisy Chains Children's Centre. Of these 194 members of the public, 87 objected only to the closure of Daisy Chains.</p> <p>A third (33%) of the members of the public objecting to the proposed closure of Daisy Chains (64 individuals) indicate that they will not use Children's Centres at all as a result (which is higher than the average across all objectors, of 26%). The most popular comments amongst those indicating that they 'will not use Children's Centres at all' as a result of the proposed closure of Daisy Chains are:</p> <ul style="list-style-type: none"> • 'Will make travel to centres more difficult / alternative centres too distant' – 30% • 'No alternative to these facilities / less services will be available' – 26% • 'Children's centres form a local community hub / chance to meet people' – 25% • 'Will have a financial impact on me / make it too expensive - travel / parking, etc.' – 18% • 'Children's centres are necessary / important resources / a lifeline' – 16% <p>A total of 103 users of Daisy Chains Children's Centre (and 80 sole users) responded to the consultation, representing around 26% of all users of the Centre. The overwhelming majority (96%) disagree to some extent with this proposal. Of the sole users of Daisy Chains objecting to the proposal, 57% indicated that they 'will not use Children's Centres at all' as a result of the proposed closure (44 individuals).</p>
Conclusions from consultation evidence by protected characteristic	<p>In comparison with all those responding to the public consultation questionnaire, those objecting to the closure of Daisy Chains are very similar in terms of their profile.</p> <p>Age: A lower percentage of respondents* were aged 31-35 from Dunton Green than the county average and a significantly higher percentage of respondents were aged 36-40 from Dunton Green than the county average. A higher proportion of respondents were aged 41-45 at Dunton Green than the county average but no responses were received at either end of the age range, from either respondents aged under 20 or over 50. As such the age profile of respondents to Dunton Green was older than the county averages. This seems to support the initial screening assumptions that lower numbers of teenage parents</p>

*All respondent numbers refer to users of Dunton Green Children's Centre unless otherwise stated

	might be affected as a result of the centre closing.
	Disability: Less than five responses were received to the consultation from users identifying themselves as having some limiting form of disability. This is in line with the initial screening findings that suggest that the Dunton Green catchment has a lower level of need than the Kent average in terms of working aged permanently sick/ disabled (by volume).
	Gender: A higher number of responses were received from females to the consultation for Dunton Green than the county average. No responses were received from males.
	Gender identity: No respondents identified themselves as having a gender different to that at their birth.
	Race: The stated ethnicity of respondents using Dunton Green were broadly comparable with the county average.
	Religion or belief: A lower percentage of respondents using Dunton Green considered themselves Christian than the county average and, conversely, a higher proportion considered themselves as having no religion at all.
	Sexual orientation: A significantly higher proportion of respondents using Dunton Green classified themselves as heterosexual than the county average. Less than 5 responses were received from services users of any other sexual orientation.
	Pregnancy and maternity: 206 pregnant women responded to the consultation, of which 96% disagreed with proposals to reduce the number of Children’s Centres. Of these 26% stated that they would not use any other Children’s Centre were their local Centre to close.
	Marriage and Civil Partnerships: A significantly higher proportion of respondents from Dunton Green were married, cohabiting or in a civil partnership than the county average. Less than five respondents stated their marital status as single. This confirms the presumption in the initial screening that lone parents are underrepresented amongst Dunton Green services users.
	Carers responsibilities: Carer data was not gathered as part of the consultation activity
Actions required	<ul style="list-style-type: none"> • Investigate age profiles of users of Dunton Green CC and engage users of all ages to ensure services are planned and delivered as appropriate to all. • Engage service users of all religious backgrounds to ensure any changes made as a result of the consultation are understood and services are planned as appropriate. • Ensure services for pregnant women are planned and delivered in areas of need so this target group continue to receive services required. • Ensure local lone parents are engaged with service redesign and are able to access services if they are relocated as a result of the consultation.
Previous judgement (02.07.13)	Medium impact
Revised judgement (28.10.13)	Medium impact

*All respondent numbers refer to users of Dunton Green Children’s Centre unless otherwise stated

Appendix A: Dunton Green full profile of respondents

*All respondent numbers refer to users of Dunton Green Children's Centre unless otherwise stated

Profiles:

User of...Dunton Green - Sevenoaks & Swanley				
	Use this Centre only		All users of this Centre	
Public				
Age: Under 20	0	0%	0	0%
Age: 20-25	1	6%	1	2%
Age: 36-30	4	25%	8	20%
Age: 31-35	4	25%	10	24%
Age: 36-40	4	25%	14	34%
Age: 41-45	2	13%	6	15%
Age: 46-50	1	6%	1	2%
Age: Over 50	0	0%	0	0%

Gender: Male	0	0%	0	0%
Gender: Female	16	100%	40	98%

EAL: No	15	94%	38	93%
EAL: Yes	0	0%	1	2%

Ethnicity: White British	12	75%	33	80%
Ethnicity: White Irish	0	0%	0	0%
Ethnicity: White Gypsy/Roma	0	0%	0	0%
Ethnicity: White Irish Traveller	0	0%	0	0%
Ethnicity: White Other	0	0%	2	5%
Ethnicity: Mixed White & Black Caribbean	0	0%	0	0%
Ethnicity: Mixed White & Black African	0	0%	0	0%
Ethnicity: Mixed White & Asian	0	0%	0	0%
Ethnicity: Mixed Other	0	0%	1	2%
Ethnicity: Arab	0	0%	0	0%
Ethnicity: Asian or Asian British Indian	0	0%	0	0%
Ethnicity: Asian or Asian British Pakistani	0	0%	0	0%
Ethnicity: Asian or Asian British Bangladeshi	0	0%	0	0%
Ethnicity: Asian Other	0	0%	0	0%
Ethnicity: Chinese	0	0%	0	0%
Ethnicity: Black or Black British Caribbean	0	0%	0	0%
Ethnicity: Black or Black British African	0	0%	0	0%
Ethnicity: Black Other	0	0%	0	0%
Ethnicity: Other	0	0%	0	0%

Religion: Christian	6	38%	16	39%
Religion: Buddhist	0	0%	0	0%
Religion: Hindu	0	0%	0	0%
Religion: Jewish	0	0%	0	0%
Religion: Muslim	0	0%	0	0%
Religion: Sikh	0	0%	0	0%
Religion: Other	0	0%	1	2%
Religion: None	7	44%	20	49%

Married/Civil Part/Cohabiting	14	88%	37	90%
Separated/Divorced/Widowed	0	0%	1	2%
Single	0	0%	0	0%

User of...Dunton Green - Sevenoaks & Swanley				
	Use this Centre only		All users of this Centre	
Disability: Limited a lot	0	0%	0	0%
Disability: Limited a little	1	6%	2	5%
Disability: No	14	88%	37	90%

Sexuality: Bi/Bisexual	0	0%	0	0%
Sexuality: Heterosexual/Straight	14	88%	38	93%
Sexuality: Gay woman/Lesbian	0	0%	0	0%
Sexuality: Gay man	0	0%	0	0%
Sexuality: Other	0	0%	0	0%
Gender not the same as at birth	0	0%	0	0%

Base: Public - Use this Centre only (16), All users of this Centre (41)

**Equality Impact Assessment Initial Screening post-consultation update
Children's Centre: Dymchurch**

Location	Dymchurch, Shepway
Proposal	Part Time
Rationale for proposal	<ul style="list-style-type: none"> Located in an area of low need (population)
Consultation Feedback Summary (questionnaires)	<p>A total of 144 members of the public and 13 professionals objected to the reduction in opening hours at Dymchurch Children's Centre. Of these 144 members of the public, 37 objected only to the reduction in opening hours at Dymchurch.</p> <p>In comparison with all those objecting to proposal 3, those objecting to the reduction in opening hours at Dymchurch are less likely to be parents of under 5's, and particularly parents with children from low incomes.</p> <p>A quarter (25%) of the members of the public objecting to the proposed reduction in opening hours at Dymchurch indicate that they will not use Children's Centres at all as a result (which is much higher than the average across all objectors, of 15%). The key issue appears to be transport.</p> <p>A total of 68 users of Dymchurch Children's Centre (and just 18 sole users) responded to the consultation, representing around 19% of all users of the Centre. The vast majority (89%) disagree to some extent with this proposal. Of the sole users of Dymchurch responding to the consultation, just 1 individual indicated that they 'will not use Children's Centres at all' as a result of the proposed reduction in opening hours.</p>
Conclusions from consultation evidence by protected characteristic	<p>In comparison with all those objecting to proposal 3, those objecting to the reduction in opening hours at Dymchurch are less likely to be parents of under 5's, and particularly parents with children from low incomes.</p> <p>Age: A lower percentage of respondents* were aged 20-25 from Dymchurch than the county average and a higher percentage of respondents were aged 36-40 from Dymchurch than the county average. No responses were received from service users aged under 20. This supports the initial screening assumptions that lower numbers of teenage parents might be affected as a result of the centre closing.</p> <p>Disability: Five responses were received to the consultation from users identifying themselves as having some limiting form of disability. A lower percentage of service users for Dymchurch identified themselves as having some limiting form of illness than the county average.</p> <p>Gender: The stated gender of respondents using Dymchurch were broadly comparable with the county average responses.</p> <p>Gender identity: No respondents identified themselves as having a gender different to that at their birth.</p> <p>Race: A significantly higher number of responses were received from White British service users than the county average. This is broadly in line with findings given in the initial screening that indicated an underrepresentation of ethnically diverse neighbourhoods in the Dymchurch CC catchment area.</p> <p>Religion or belief: A lower percentage of respondents using Dymchurch classified themselves as having no religion than the</p>

*All respondent numbers refer to users of Dymchurch Children's Centre unless otherwise stated

	<p>county average.</p> <p>Sexual orientation: The stated sexual orientation of respondents using Dymchurch were broadly comparable with the county average responses. Less than 5 responses were received from services users of any other sexual orientation than heterosexual.</p> <p>Pregnancy and maternity: 206 pregnant women responded to the consultation, of which 96% disagreed with proposals to reduce the number of Children’s Centres. Of these 26% stated that they would not use any other Children’s Centre were their local Centre to close. Engagement activities were undertaken at groups linked with Dymchurch attended by pregnant mothers and those with new babies to ensure their views were gathered. (see Appendix B)</p> <p>Marriage and Civil Partnerships: A higher proportion of respondents from Dymchurch were married, cohabiting or in a civil partnership than the county average. As such a significantly lower proportion of single parents responded to the consultation than the county average. This is contrary to the findings in the initial screening stated that lone parents are overrepresented amongst Dymchurch services users.</p> <p>Carers responsibilities: Carer data was not gathered as part of the consultation activity</p>
Actions required	<ul style="list-style-type: none"> • Ensure any BME groups are engaged and services are planned to ensure group are not negatively affected by changes to service delivery • Engage service users from other religions to ensure any changes made as a result of the consultation are understood and services are planned as appropriate. • Ensure services for pregnant women are planned and delivered in areas of need so this target group continue to receive services required. • Ensure local lone parents are engaged with service redesign and are able to access services if they are relocated as a result of the consultation.
Previous judgement (02.07.13)	Medium impact
Revised judgement (28.10.13)	Medium impact (with regards to Race and Marriage and Civil Partnerships)

*All respondent numbers refer to users of Dymchurch Children’s Centre unless otherwise stated

Appendix A: Dymchurch full profile of respondents

*All respondent numbers refer to users of Dymchurch Children's Centre unless otherwise stated

Profiles:

	User of...Dymchurch - Shepway			
	Use this Centre only		All users of this Centre	
Public				
Age: Under 20	0	0%	0	0%
Age: 20-25	3	17%	4	6%
Age: 36-30	6	33%	16	24%
Age: 31-35	4	22%	18	26%
Age: 36-40	1	6%	17	25%
Age: 41-45	1	6%	6	9%
Age: 46-50	1	6%	2	3%
Age: Over 50	4	22%	4	6%

Gender: Male	1	6%	6	9%
Gender: Female	17	94%	62	91%

EAL: No	17	94%	61	90%
EAL: Yes	0	0%	0	0%

Ethnicity: White British	15	83%	57	84%
Ethnicity: White Irish	1	6%	2	3%
Ethnicity: White Gypsy/Roma	0	0%	0	0%
Ethnicity: White Irish Traveller	0	0%	0	0%
Ethnicity: White Other	0	0%	0	0%
Ethnicity: Mixed White & Black Caribbean	0	0%	0	0%
Ethnicity: Mixed White & Black African	0	0%	0	0%
Ethnicity: Mixed White & Asian	0	0%	0	0%
Ethnicity: Mixed Other	0	0%	0	0%
Ethnicity: Arab	0	0%	0	0%
Ethnicity: Asian or Asian British Indian	0	0%	0	0%
Ethnicity: Asian or Asian British Pakistani	0	0%	0	0%
Ethnicity: Asian or Asian British Bangladeshi	0	0%	0	0%
Ethnicity: Asian Other	0	0%	0	0%
Ethnicity: Chinese	0	0%	0	0%
Ethnicity: Black or Black British Caribbean	0	0%	0	0%
Ethnicity: Black or Black British African	0	0%	0	0%
Ethnicity: Black Other	0	0%	0	0%
Ethnicity: Other	0	0%	0	0%

Religion: Christian	11	61%	30	44%
Religion: Buddhist	0	0%	0	0%
Religion: Hindu	0	0%	0	0%
Religion: Jewish	0	0%	0	0%
Religion: Muslim	0	0%	0	0%
Religion: Sikh	0	0%	0	0%
Religion: Other	1	6%	2	3%
Religion: None	4	22%	21	31%

Married/Civil Part/Cohabiting	15	83%	56	82%
Separated/Divorced/Widowed	0	0%	1	1%
Single	1	6%	2	3%

	User of...Dymchurch - Shepway			
	Use this Centre only		All users of this Centre	
Disability: Limited a lot	0	0%	2	3%
Disability: Limited a little	0	0%	3	4%
Disability: No	17	94%	53	78%

Sexuality: Bi/Bisexual	1	6%	1	1%
Sexuality: Heterosexual/Straight	15	83%	55	81%
Sexuality: Gay woman/Lesbian	0	0%	0	0%
Sexuality: Gay man	0	0%	0	0%
Sexuality: Other	0	0%	0	0%
Gender not the same as at birth	0	0%	0	0%

Base: Public - Use this Centre only (18), All users of this Centre (68)

**Equality Impact Assessment Initial Screening post-consultation update
Children's Centre: Folkestone Early Years Centre**

Location	Folkestone, Shepway
Proposal	Closure of 1 Centre either FEY OR The Village
Rationale for proposal	<ul style="list-style-type: none"> • Local solution – Centres are located 950m apart. • Folkestone Early Years has a higher level of need than The Village Children's Centre in terms of total volume of need. • Folkestone Early Years and The Village have similar levels of usage. Folkestone Early Years has slightly higher levels of sole usage. • Folkestone Early Years offers better accommodation space, better value for money in relation to accommodation (Corporate landlord at The Village is £52,102 vs £6,308 at FEY).
Consultation Feedback Summary (questionnaires)	<p><u>FEY</u> A total of 358 members of the public and 50 professionals objected to the closure of Folkestone Early Years Children's Centre. Of these 358 members of the public, 159 objected only to the closure of Folkestone Early Years (with an additional 89 only objecting to the closure of The Village and Folkestone Early Years Centre).</p> <p>More than a third (36%) of the members of the public objecting to the proposed closure of Folkestone Early Years indicate that they will not use Children's Centres at all as a result (which is higher than the average across all objectors, of 26%). The most popular comments amongst those indicating that they 'will not use Children's Centres at all' as a result of the proposed closure of Folkestone Early Years are:</p> <ul style="list-style-type: none"> • 'Very happy with my local centre / prefer it to others' – 25% • 'Will make travel to centres more difficult / alternative centres too distant' –24% • 'Children's centres form a local community hub / chance to meet people' – 13% • 'Bad for people without cars / non-drivers' – 12% • 'Children's centres are necessary / important resources / a lifeline' – 12% <p>A total of 224 users of Folkestone Early Years Children's Centre (and 153 sole users) responded to the consultation, representing around 29% of all users of the Centre. The overwhelming majority (94%) disagree to some extent with this proposal. Of the sole users of Folkestone Early Years objecting to the proposal, well over half (58%) indicated that they 'will not use Children's Centres at all' as a result of the proposed closure.</p>
Conclusions from consultation evidence by protected characteristic	<p>In comparison with all those responding to proposal one, those objecting to the closure of Folkestone Early Years are more likely to be lone parents and/or younger parents (aged 25 or under).</p> <p>Age: A significantly higher percentage of respondents were aged 20-25 from Folkestone Early Years than the county average and a significantly lower percentage of respondents were aged 31-35 from Folkestone Early Years than the county average.</p>

	<p>This supports the initial screening assumptions that significantly higher numbers of teenage and young parents might be affected as a result of the centre closing.</p> <p>Disability: 34 responses were received to the consultation from users identifying themselves as having some limiting form of disability. A higher proportion of service users suggest that they have a disability that limits them a lot then the county average and significantly lower numbers of service users stating they do not have a disability at all. This is in line with the initial screening findings that suggest that the Folkestone catchment has a <u>higher level</u> of need than the Kent average in terms of working aged permanently sick/ disabled (volume).</p> <p>Gender: A higher number of responses were received from males to the consultation for Folkestone Early Years than the county average.</p> <p>Gender identity: As small number of service users (less than five) identified themselves as having a gender different to that at their birth.</p> <p>Race: A lower number of responses were received from White British service users than the county average. Other responses were broadly in line with county averages for responses.</p> <p>Religion or belief: A lower percentage of respondents using Folkestone Early Years identified themselves as having no religion than the county average.</p> <p>Sexual orientation: The sexual orientation of service users responding to the consultation are broadly comparable to those responding to the consultation countywide.</p> <p>Pregnancy and maternity: 206 pregnant women responded to the consultation, of which 96% disagreed with proposals to reduce the number of Children’s Centres. Of these 26% stated that they would not use any other Children’s Centre were their local Centre to close. Engagement activities were undertaken at groups linked with Folkestone Early Years attended by pregnant mothers and those with new babies to ensure their views were gathered. (see Appendix B)</p> <p>Marriage and Civil Partnerships: A significantly lower proportion of respondents from Folkestone Early Years were married, cohabiting or in a civil partnership that the county average. A significantly higher proportion of single parents responded to the consultation than the county average. This supports the presumption in the initial screening that lone parents are overrepresented amongst Folkestone Early Years services users.</p> <p>Carers responsibilities: Carer data was not gathered as part of the consultation activity</p>
<p>Actions required</p>	<ul style="list-style-type: none"> • Ensure any BME groups are engaged and services are planned to ensure group are not negatively affected by changes to service delivery • Ensure users with a disability are engaged and services are planned and delivered at venues with sufficient access for adults and children with a disability • Engage service users from religious groups to ensure any changes made as a result of the consultation are understood and services are planned as appropriate. • Ensure services for pregnant women are planned and delivered in areas of need so this target group continue to receive services required.

	<ul style="list-style-type: none">• Ensure local lone parents are engaged with service redesign and are able to access services if they are relocated as a result of the consultation.
Previous judgement (02.07.13)	Medium impact
Revised judgement (04.11.13)	Medium/High impact (with regards to Disability)

Appendix A: Folkestone Early Years full profile of respondents

Profiles:

User of...Folkestone Early Years Centre - Shepway				
	Use this Centre only		All users of this Centre	
Age: Under 20	11	7%	12	5%
Age: 20-25	36	24%	49	22%
Age: 36-30	39	25%	53	24%
Age: 31-35	25	16%	39	17%
Age: 36-40	15	10%	30	13%
Age: 41-45	10	7%	14	6%
Age: 46-50	4	3%	7	3%
Age: Over 50	13	8%	13	6%

Public

Gender: Male	23	15%	28	13%
Gender: Female	125	82%	189	84%

EAL: No	132	86%	196	88%
EAL: Yes	15	10%	20	9%

Ethnicity: White British	119	78%	174	78%
Ethnicity: White Irish	3	2%	5	2%
Ethnicity: White Gypsy/Roma	1	1%	1	0%
Ethnicity: White Irish Traveller	0	0%	1	0%
Ethnicity: White Other	8	5%	12	5%
Ethnicity: Mixed White & Black Caribbean	0	0%	0	0%
Ethnicity: Mixed White & Black African	0	0%	0	0%
Ethnicity: Mixed White & Asian	3	2%	3	1%
Ethnicity: Mixed Other	0	0%	1	0%
Ethnicity: Arab	1	1%	1	0%
Ethnicity: Asian or Asian British Indian	3	2%	3	1%
Ethnicity: Asian or Asian British Pakistani	1	1%	1	0%
Ethnicity: Asian or Asian British Bangladeshi	0	0%	0	0%
Ethnicity: Asian Other	0	0%	0	0%
Ethnicity: Chinese	2	1%	2	1%
Ethnicity: Black or Black British Caribbean	1	1%	1	0%
Ethnicity: Black or Black British African	1	1%	1	0%
Ethnicity: Black Other	1	1%	1	0%
Ethnicity: Other	1	1%	1	0%

Religion: Christian	73	48%	105	47%
Religion: Buddhist	0	0%	0	0%
Religion: Hindu	1	1%	1	0%
Religion: Jewish	1	1%	2	1%
Religion: Muslim	7	5%	7	3%
Religion: Sikh	0	0%	0	0%
Religion: Other	2	1%	2	1%
Religion: None	50	33%	78	35%

Married/Civil Part/Cohabiting	87	57%	140	63%
Separated/Divorced/Widowed	12	8%	19	8%
Single	45	29%	52	23%

User of...Folkestone Early Years Centre - Shepway				
	Use this Centre only		All users of this Centre	
Disability: Limited a lot	13	8%	18	8%
Disability: Limited a little	12	8%	16	7%
Disability: No	109	71%	166	74%

Sexuality: Bi/Bisexual	3	2%	3	1%
Sexuality: Heterosexual/Straight	124	81%	187	83%
Sexuality: Gay woman/Lesbian	2	1%	2	1%
Sexuality: Gay man	3	2%	3	1%
Sexuality: Other	2	1%	2	1%
Gender not the same as at birth	3	2%	3	1%

Base: Public - Use this Centre only (153), All users of this Centre (224)

**Equality Impact Assessment Initial Screening post-consultation update
Children's Centre: Hadlow and East Peckham**

Location	Hadlow, Tonbridge and Malling	
Proposal	Closure	
Rationale for proposal	<ul style="list-style-type: none"> • Located in an area of low need (population). • 53% (49) of users also attend another Children's Centre. 	
Consultation Feedback Summary (questionnaires)	<p>Just 44 members of the public and 11 professionals objected to the closure of Hadlow/East Peckham Children's Centre. Of these 44 members of the public, 8 objected only to the closure of Hadlow/East Peckham.</p> <p>Just under a quarter (23%) of the members of the public objecting to the proposed closure of Hadlow/East Peckham indicate that they will not use Children's Centres at all as a result (which is similar to the average across all objectors, of 26%).</p> <p>Just 9 users of Hadlow/East Peckham Children's Centre (and 1 sole user) responded to the consultation, representing around 8% of all users of the Centre. All 9 of these users disagree to some extent with this proposal.</p>	
Conclusions from consultation evidence by protected characteristic	In comparison with all those responding to proposal one, those objecting to the closure of Hadlow/East Peckham are more likely to be parents from ethnic minority groups.	
	Age:	<p>Due to the low level of responses received from Hadlow users, meaningful analysis by protected characteristic cannot be made. Low response levels by CC users may, in itself, indicate a low level of impact on service users, but such an assumption is understandably speculative.</p> <p>The consultation was promoted at various outreach activities serving Hadlow families. (see Appendix 2)</p>
	Disability:	
	Gender:	
	Gender identity:	
	Race:	
	Religion or belief:	
	Sexual orientation:	
	Pregnancy and maternity:	
	Marriage and Civil Partnerships:	
Carers responsibilities:		
Actions required	<ul style="list-style-type: none"> • Ensure any changes to service delivery as a result of the closure of Hadlow are communicated effectively to sole users of this Centre. 	
Previous judgement (02.07.13)	Medium impact	
Revised judgement (29.10.13)	Low/Medium impact	

Appendix A: Hadlow and East Peckham full profile of respondents

Profiles:

User of...Hadlow/East Peckham - Tonbridge & Malling

Public

	Use this Centre only		All users of this Centre	
Age: Under 20	0	0%	0	0%
Age: 20-25	0	0%	0	0%
Age: 36-30	0	0%	3	33%
Age: 31-35	0	0%	4	44%
Age: 36-40	0	0%	1	11%
Age: 41-45	0	0%	0	0%
Age: 46-50	0	0%	0	0%
Age: Over 50	1	100%	1	11%

Gender: Male	0	0%	0	0%
Gender: Female	1	100%	9	100%

EAL: No	1	100%	9	100%
EAL: Yes	0	0%	0	0%

Ethnicity: White British	1	100%	8	89%
Ethnicity: White Irish	0	0%	0	0%
Ethnicity: White Gypsy/Roma	0	0%	0	0%
Ethnicity: White Irish Traveller	0	0%	0	0%
Ethnicity: White Other	0	0%	1	11%
Ethnicity: Mixed White & Black Caribbean	0	0%	0	0%
Ethnicity: Mixed White & Black African	0	0%	0	0%
Ethnicity: Mixed White & Asian	0	0%	0	0%
Ethnicity: Mixed Other	0	0%	0	0%
Ethnicity: Arab	0	0%	0	0%
Ethnicity: Asian or Asian British Indian	0	0%	0	0%
Ethnicity: Asian or Asian British Pakistani	0	0%	0	0%
Ethnicity: Asian or Asian British Bangladeshi	0	0%	0	0%
Ethnicity: Asian Other	0	0%	0	0%
Ethnicity: Chinese	0	0%	0	0%
Ethnicity: Black or Black British Caribbean	0	0%	0	0%
Ethnicity: Black or Black British African	0	0%	0	0%
Ethnicity: Black Other	0	0%	0	0%
Ethnicity: Other	0	0%	0	0%

Religion: Christian	1	100%	5	56%
Religion: Buddhist	0	0%	0	0%
Religion: Hindu	0	0%	0	0%
Religion: Jewish	0	0%	0	0%
Religion: Muslim	0	0%	0	0%
Religion: Sikh	0	0%	0	0%
Religion: Other	0	0%	0	0%
Religion: None	0	0%	3	33%

Married/Civil Part/Cohabiting	1	100%	9	100%
Separated/Divorced/Widowed	0	0%	0	0%
Single	0	0%	0	0%

User of...Hadlow/East Peckham - Tonbridge & Malling

	Use this Centre only		All users of this Centre	
Disability: Limited a lot	0	0%	0	0%
Disability: Limited a little	0	0%	0	0%
Disability: No	1	100%	8	89%

Sexuality: Bi/Bisexual	0	0%	0	0%
Sexuality: Heterosexual/Straight	1	100%	9	100%
Sexuality: Gay woman/Lesbian	0	0%	0	0%
Sexuality: Gay man	0	0%	0	0%
Sexuality: Other	0	0%	0	0%
Gender not the same as at birth	0	0%	0	0%

Base: Public - Use this Centre only (1), All users of this Centre (9)

**Equality Impact Assessment Initial Screening post-consultation update
Children's Centre: Garlinge**

Location	Garlinge, Margate, Thanet
Proposal	Part Time
Rationale for proposal	<ul style="list-style-type: none"> • Local Solution • 64% (345) of users also attended another Children's Centre in Kent.
Consultation Feedback Summary (questionnaires)	<p>A total of 88 members of the public and 29 professionals objected to the reduction in opening hours at Garlinge Children's Centre. Of these 88 members of the public, 14 objected only to the reduction in opening hours at Garlinge.</p> <p>Around 1 in 7 (14%) of the members of the public objecting to the proposed reduction in opening hours at Garlinge indicate that they will not use Children's Centres at all as a result (which is similar to the average across all objectors).</p> <p>A total of 56 users of Garlinge Children's Centre (and just 17 sole users) responded to the consultation, representing around 9% of all users of the Centre. The vast majority (85%) disagree to some extent with this proposal. Of the sole users of Garlinge responding to the consultation, 17% (2 individuals) indicated that they 'will not use Children's Centres at all' as a result of the proposed reduction in opening hours.</p>
Conclusions from consultation evidence by protected characteristic	<p>In comparison with all those objecting to proposal 3, those objecting to the reduction in opening hours at Garlinge are more likely to be lone parents.</p> <p>Age: A higher percentage of respondents* were aged 36-40 from Garlinge than the county average whilst responses from other age groups were broadly in line with county responses. No responses were received from services users aged under 20. Needs analysis for the initial screening assumes that lower numbers of teenage parents might be affected as a result of the centre becoming part-time. However this target group remain a priority for Children's Centre services.</p> <p>Disability: Eleven responses were received to the consultation from users identifying themselves as having some limiting form of disability. As a percentage of respondents this is broadly in line with the county respondent's profiles. The initial screening indicated that for Garlinge CC there is lower level of need than the Kent average in terms of working aged permanently sick/disabled (by volume).</p> <p>Gender: The gender of service users responding to the consultation from Garlinge are broadly comparable to those responding to the consultation countywide.</p> <p>Gender identity: Less than five respondents from Garlinge identified themselves as having a gender different to that at their birth. This information is not currently collected at the point of registration at a Children's Centre in Kent so no comparable figures exist.</p> <p>Race: A significantly higher number of responses were received from White British service users than the county average. This is in line with the ethnicity profile for Thanet and supports assumptions in the initial screening that higher numbers of users are</p>

*All respondent numbers refer to users of Garlinge Children's Centre unless otherwise stated

	<p>of White British origin.</p> <p>Religion or belief: A significantly higher percentage of respondents using Garlinge classified themselves as having no religion than the county average. Less than five responses were received from services users with any stated religion other than Christian.</p> <p>Sexual orientation: A higher percentage of respondents using Garlinge classified themselves as heterosexual than the county average. Less than 5 responses were received from services users of any other sexual orientation.</p> <p>Pregnancy and maternity: 206 pregnant women responded to the consultation, of which 96% disagreed with proposals to reduce the number of Children’s Centres. Of these 26% stated that they would not use any other Children’s Centre were their local Centre to close. Engagement activities were undertaken at groups linked with Garlinge attended by a wide range of parents to ensure their views were gathered. (see Appendix B)</p> <p>Marriage and Civil Partnerships: A higher proportion of respondents from Garlinge were married, cohabiting or in a civil partnership than the county average. However, in comparison to those responding to proposal three (to reduce centres to part-time) a higher number of respondents were lone parents. Conversely the needs analysis in the initial screening of families attending Garlinge Children’s records a lower than Kent average of Lone Parents.</p> <p>Carers responsibilities: Carer data was not gathered as part of the consultation activity</p>
Actions required	<ul style="list-style-type: none"> • Ensure teenage parents and pregnant teenagers are engaged with service planning should the Centre begin operating part-time. • Ensure users with a disability are engaged and services are planned and delivered at venues with sufficient access for adults and children with a disability • Investigate appropriate ways to gather data on gender identity from service users. Ensure all service users are engaged with any planning and scheduling of services should the Centre become part-time. • Ensure services for pregnant women are planned and delivered in areas of need so this target group continue to receive services required. • Ensure local lone parents are engaged with service redesign and are able to access services if they are relocated as a result of the consultation.
Previous judgement (02.07.13)	Medium impact
Revised judgement (29.10.13)	Medium impact

*All respondent numbers refer to users of Garlinge Children’s Centre unless otherwise stated

Appendix A: Garlinge full profile of respondents

*All respondent numbers refer to users of Garlinge Children's Centre unless otherwise stated

Profiles:

User of...Garlinge - Thanet				
	Use this Centre only		All users of this Centre	
Age: Under 20	0	0%	0	0%
Age: 20-25	2	12%	5	9%
Age: 36-30	2	12%	13	23%
Age: 31-35	5	29%	15	27%
Age: 36-40	4	24%	13	23%
Age: 41-45	2	12%	4	7%
Age: 46-50	0	0%	1	2%
Age: Over 50	4	24%	4	7%

Public

Gender: Male	0	0%	4	7%
Gender: Female	16	94%	51	91%

EAL: No	16	94%	53	95%
EAL: Yes	0	0%	0	0%

Ethnicity: White British	16	94%	52	93%
Ethnicity: White Irish	0	0%	0	0%
Ethnicity: White Gypsy/Roma	0	0%	0	0%
Ethnicity: White Irish Traveller	0	0%	0	0%
Ethnicity: White Other	0	0%	0	0%
Ethnicity: Mixed White & Black Caribbean	0	0%	2	4%
Ethnicity: Mixed White & Black African	0	0%	0	0%
Ethnicity: Mixed White & Asian	0	0%	0	0%
Ethnicity: Mixed Other	0	0%	0	0%
Ethnicity: Arab	0	0%	0	0%
Ethnicity: Asian or Asian British Indian	0	0%	0	0%
Ethnicity: Asian or Asian British Pakistani	0	0%	0	0%
Ethnicity: Asian or Asian British Bangladeshi	0	0%	0	0%
Ethnicity: Asian Other	0	0%	1	2%
Ethnicity: Chinese	0	0%	0	0%
Ethnicity: Black or Black British Caribbean	0	0%	0	0%
Ethnicity: Black or Black British African	0	0%	0	0%
Ethnicity: Black Other	0	0%	0	0%
Ethnicity: Other	0	0%	0	0%

Religion: Christian	8	47%	25	45%
Religion: Buddhist	0	0%	0	0%
Religion: Hindu	0	0%	0	0%
Religion: Jewish	0	0%	0	0%
Religion: Muslim	0	0%	0	0%
Religion: Sikh	0	0%	0	0%
Religion: Other	0	0%	1	2%
Religion: None	8	47%	28	50%

Married/Civil Part/Cohabiting	13	76%	46	82%
Separated/Divorced/Widowed	1	6%	2	4%
Single	2	12%	5	9%

User of...Garlinge - Thanet				
	Use this Centre only		All users of this Centre	
Disability: Limited a lot	0	0%	0	0%
Disability: Limited a little	2	12%	6	11%
Disability: No	13	76%	47	84%

Sexuality: Bi/Bisexual	0	0%	1	2%
Sexuality: Heterosexual/Straight	16	94%	53	95%
Sexuality: Gay woman/Lesbian	0	0%	0	0%
Sexuality: Gay man	0	0%	0	0%
Sexuality: Other	0	0%	0	0%
Gender not the same as at birth	0	0%	1	2%

Base: Public - Use this Centre only (17), All users of this Centre (56)

**Equality Impact Assessment Initial Screening post-consultation update
Children's Centre: Harmony**

Location	Rusthall, Tunbridge Wells
Proposal	Part Time
Rationale for proposal	<ul style="list-style-type: none"> • Local Solution • Located in an area of low need (population)
Consultation Feedback Summary (questionnaires)	<p>A total of 92 members of the public and 14 professionals objected to the reduction in opening hours at Harmony Children's Centre. Of these 92 members of the public, the vast majority (86) objected only to the reduction in opening hours at Harmony, potentially reflecting the fact that it is the only proposed reduction in opening hours in the Area.</p> <p>18% of the members of the public objecting to the proposed reduction in opening hours at Harmony indicate that they will not use Children's Centres at all as a result (which is similar to the average across all objectors). The key issue appears to be transport.</p> <p>A total of 92 users of Harmony Children's Centre (and 60 sole users) responded to the consultation, representing around 15% of all users of the Centre. The vast majority (83%) disagree to some extent with this proposal. Of the sole users of Temple Hill responding to the consultation, 20% (10 individuals) indicated that they 'will not use Children's Centres at all' as a result of the proposed reduction in opening hours.</p>
Conclusions from consultation evidence by protected characteristic	<p>In comparison with all those objecting to proposal 3, those objecting to the reduction in opening hours at Harmony are more likely to be parents of under 5's and/or users of Children's Centres.</p> <p>Age: A higher percentage of respondents* were aged 36-40 from Harmony than the county average. The remaining age profile of respondents was broadly in line with the county averages.</p> <p>Disability: Six responses were received to the consultation from users identifying themselves as having some limiting form of disability. This is higher than the initial screening which suggested that no users of Harmony has declared themselves as having any form of disability</p> <p>Gender: The gender of service users responding to the consultation are broadly comparable to those responding to the consultation countywide.</p> <p>Gender identity: Less than five respondents from Harmony identified themselves as having a gender different to that at their birth. This information is not currently collected at the point of registration at a Children's Centre in Kent so no comparable figures exist.</p> <p>Race: A higher number of responses were received from White British service users than the county average. This is in line with the initial screening which recorded Harmony as only having White British service users. However 22% of service users had not recorded their ethnicity at this point.</p>

*All respondent numbers refer to users of Harmony Children's Centre unless otherwise stated

	<p>Religion or belief: A higher percentage of respondents using Harmony classified themselves as Christian than the county average. Other responses were broadly in line with the county averages for respondents.</p> <p>Sexual orientation: A higher percentage of respondents using Harmony classified themselves as heterosexual than the county average. Less than 5 responses were received from services users of any other sexual orientation.</p> <p>Pregnancy and maternity: 206 pregnant women responded to the consultation, of which 96% disagreed with proposals to reduce the number of Children’s Centres. Of these 26% stated that they would not use any other Children’s Centre were their local Centre to close. Engagement activities were undertaken at a wide variety of groups linked with Harmony such as ante-natal clinics and child health clinics to ensure the views of pregnant women and new mothers were captured. (see Appendix B)</p> <p>Marriage and Civil Partnerships: The gender of service users responding to the consultation are broadly comparable to those responding to the consultation countywide. 12% identified themselves as single, a higher proportion of users that suggested in the initial screening (although this data relates to lone parents, which should not be interpreted as the same as single).</p> <p>Carers responsibilities: Carer data was not gathered as part of the consultation activity</p>
Actions required	<ul style="list-style-type: none"> • Ensure users with a disability are engaged and services are planned and delivered at venues with sufficient access for adults and children with a disability • Ensure any BME groups are engaged and services are planned to ensure group are not negatively affected by changes to service delivery. Work to improve data capture at point of Children’s Centre registration. • Engage service users from a wide variety of religions to ensure any changes made as a result of the consultation are understood and services are planned as appropriate. • Engage service users of all sexual orientations in planning and delivery of services and work to improve data capture at point of Children’s Centre consultation. • Ensure services for pregnant women are planned and delivered in areas of need so this target group continue to receive services required. •
Previous judgement (02.07.13)	Medium impact
Revised judgement (29.10.13)	Medium impact

*All respondent numbers refer to users of Harmony Children’s Centre unless otherwise stated

Appendix A: Harmony full profile of respondents

*All respondent numbers refer to users of Harmony Children’s Centre unless otherwise stated

Profiles:

User of...Harmony - Tunbridge Wells				
	Use this Centre only		All users of this Centre	
Age: Under 20	1	2%	2	2%
Age: 20-25	6	10%	7	8%
Age: 36-30	10	17%	16	17%
Age: 31-35	17	28%	30	33%
Age: 36-40	18	30%	25	27%
Age: 41-45	2	3%	4	4%
Age: 46-50	1	2%	1	1%
Age: Over 50	3	5%	3	3%

Public

Gender: Male	7	12%	9	10%
Gender: Female	51	85%	79	86%

EAL: No	56	93%	84	91%
EAL: Yes	4	7%	5	5%

Ethnicity: White British	52	87%	81	88%
Ethnicity: White Irish	1	2%	1	1%
Ethnicity: White Gypsy/Roma	0	0%	0	0%
Ethnicity: White Irish Traveller	0	0%	0	0%
Ethnicity: White Other	2	3%	4	4%
Ethnicity: Mixed White & Black Caribbean	1	2%	1	1%
Ethnicity: Mixed White & Black African	0	0%	0	0%
Ethnicity: Mixed White & Asian	1	2%	1	1%
Ethnicity: Mixed Other	0	0%	0	0%
Ethnicity: Arab	0	0%	0	0%
Ethnicity: Asian or Asian British Indian	0	0%	0	0%
Ethnicity: Asian or Asian British Pakistani	0	0%	0	0%
Ethnicity: Asian or Asian British Bangladeshi	0	0%	0	0%
Ethnicity: Asian Other	0	0%	0	0%
Ethnicity: Chinese	0	0%	0	0%
Ethnicity: Black or Black British Caribbean	0	0%	0	0%
Ethnicity: Black or Black British African	1	2%	1	1%
Ethnicity: Black Other	0	0%	0	0%
Ethnicity: Other	1	2%	1	1%

Religion: Christian	31	52%	50	54%
Religion: Buddhist	0	0%	0	0%
Religion: Hindu	0	0%	0	0%
Religion: Jewish	0	0%	1	1%
Religion: Muslim	2	3%	2	2%
Religion: Sikh	0	0%	0	0%
Religion: Other	1	2%	1	1%
Religion: None	22	37%	33	36%

Married/Civil Part/Cohabiting	45	75%	73	79%
Separated/Divorced/Widowed	5	8%	6	7%
Single	9	15%	11	12%

User of...Harmony - Tunbridge Wells				
	Use this Centre only		All users of this Centre	
Disability: Limited a lot	2	3%	2	2%
Disability: Limited a little	4	7%	4	4%
Disability: No	54	90%	85	92%

Sexuality: Bi/Bisexual	0	0%	0	0%
Sexuality: Heterosexual/Straight	56	93%	85	92%
Sexuality: Gay woman/Lesbian	0	0%	0	0%
Sexuality: Gay man	0	0%	0	0%
Sexuality: Other	0	0%	0	0%
Gender not the same as at birth	0	0%	1	1%

Base: Public - Use this Centre only (60), All users of this Centre (92)

**Equality Impact Assessment Initial Screening post-consultation update
Children's Centre: Hawkinge**

Location	Hawkinge, Shepway
Proposal	Part Time
Rationale for proposal	<ul style="list-style-type: none"> Local solution. The Children's Centre already use Hawkinge Community Centre to deliver the majority of services.
Consultation Feedback Summary (questionnaires)	<p>A total of 167 members of the public and 24 professionals objected to the reduction in opening hours at Hawkinge and Rural Children's Centre. Of these 167 members of the public, 98 objected only to the reduction in opening hours at Hawkinge and Rural.</p> <p>1 in 6 (17%) of the members of the public objecting to the proposed reduction in opening hours at Hawkinge and Rural indicate that they will not use Children's Centres at all as a result (which is similar to the average across all objectors). The key issue appears to be transport.</p> <p>A total of 137 users of Hawkinge and Rural Children's Centre (and 92 sole users) responded to the consultation, representing as many as 22% of all users of the Centre. The overwhelming majority (90%) disagree to some extent with this proposal. Of the sole users of Hawkinge and Rural responding to the consultation, 18% (15 individuals) indicated that they 'will not use Children's Centres at all' as a result of the proposed reduction in opening hours.</p>
Conclusions from consultation evidence by protected characteristic	<p>In comparison with all those objecting to proposal 3, those objecting to the reduction in opening hours at Hawkinge and Rural are much less likely to be parents of children from low incomes.</p> <p>Age: A higher percentage of respondents* were aged 36-40 from Hawkinge than the county average. Responses from all other age groups are broadly comparable to those responding to the consultation countywide.</p> <p>Disability: Nine responses were received to the consultation from users identifying themselves as having some limiting form of disability. A significantly lower percentage of respondents stated that they had no disability than the county average. This is contrary to the previous initial screening that suggests the Hawkinge catchment has a lower level of need than the Kent average in terms of working aged permanently sick/ disabled (by volume).</p> <p>Gender: The gender of service users responding to the consultation are broadly comparable to those responding to the consultation countywide</p> <p>Gender identity: No respondents identified themselves as having a gender different to that at their birth.</p> <p>Race: A significantly lower number of responses were received from White British service users than the county average. Responses were received from service users with a wide range of ethnic backgrounds.</p> <p>Religion or belief: The religious beliefs of service users responding to the consultation are broadly comparable to those responding to the consultation countywide, with the exception that a lower number of respondents using Hawkinge stated they had no religion than countywide figures.</p>

*All respondent numbers refer to users of Hawkinge Children's Centre unless otherwise stated

	<p>Sexual orientation: A lower percentage of respondents using Hawkinge classified themselves as heterosexual than the county average. Less than 5 responses were received from services users of any other sexual orientation. However Hawkinge has a comparatively low response rate regarding the question of sexual orientation. Of all Hawkinge service users responding, 25% chose not to state their sexual orientation.</p> <p>Pregnancy and maternity: 206 pregnant women responded to the consultation, of which 96% disagreed with proposals to reduce the number of Children’s Centres. Of these 26% stated that they would not use any other Children’s Centre were their local Centre to close.</p> <p>Marriage and Civil Partnerships: A lower proportion of respondents from Hawkinge were single than the county average. This confirms the presumption in the initial screening that lone parents are underrepresented amongst Hawkinge services users. However lone parents remain an Ofsted target group for Children’s Centres.</p> <p>Carers responsibilities: Carer data was not gathered as part of the consultation activity</p>
Actions required	<ul style="list-style-type: none"> • Ensure users with a disability are engaged and services are planned and delivered at venues with sufficient access for adults and children with a disability • Ensure any BME groups are engaged and services are planned to ensure group are not negatively affected by changes to service delivery • Engage service users from other religions to ensure any changes made as a result of the consultation are understood and services are planned as appropriate. • Investigate ways to improve data collection for sexual orientation • Ensure services for pregnant women are planned and delivered in areas of need so this target group continue to receive services required. • Ensure local lone parents are engaged with service redesign and are able to access services if they are relocated as a result of the consultation.
Previous judgement (02.07.13)	Medium impact
Revised judgement (31.10.13)	Medium impact (with reference to disability and sexual orientation)

*All respondent numbers refer to users of Hawkinge Children’s Centre unless otherwise stated

Appendix A: Hawkinge full profile of respondents

*All respondent numbers refer to users of Hawkinge Children's Centre unless otherwise stated

Profiles:

User of...Hawkinge & Rural - Shepway

Public

	Use this Centre only		All users of this Centre	
Age: Under 20	1	1%	2	1%
Age: 20-25	10	11%	16	12%
Age: 36-30	19	21%	27	20%
Age: 31-35	32	35%	41	30%
Age: 36-40	18	20%	32	23%
Age: 41-45	6	7%	9	7%
Age: 46-50	1	1%	3	2%
Age: Over 50	3	3%	3	2%

Gender: Male	5	5%	9	7%
Gender: Female	84	91%	123	90%

EAL: No	70	76%	112	82%
EAL: Yes	5	5%	6	4%

Ethnicity: White British	65	71%	99	72%
Ethnicity: White Irish	0	0%	2	1%
Ethnicity: White Gypsy/Roma	0	0%	2	1%
Ethnicity: White Irish Traveller	0	0%	0	0%
Ethnicity: White Other	3	3%	3	2%
Ethnicity: Mixed White & Black Caribbean	0	0%	0	0%
Ethnicity: Mixed White & Black African	0	0%	0	0%
Ethnicity: Mixed White & Asian	0	0%	0	0%
Ethnicity: Mixed Other	1	1%	2	1%
Ethnicity: Arab	0	0%	0	0%
Ethnicity: Asian or Asian British Indian	0	0%	0	0%
Ethnicity: Asian or Asian British Pakistani	0	0%	0	0%
Ethnicity: Asian or Asian British Bangladeshi	0	0%	0	0%
Ethnicity: Asian Other	0	0%	0	0%
Ethnicity: Chinese	1	1%	1	1%
Ethnicity: Black or Black British Caribbean	0	0%	0	0%
Ethnicity: Black or Black British African	1	1%	1	1%
Ethnicity: Black Other	0	0%	0	0%
Ethnicity: Other	2	2%	3	2%

Religion: Christian	33	36%	57	42%
Religion: Buddhist	1	1%	1	1%
Religion: Hindu	0	0%	0	0%
Religion: Jewish	0	0%	0	0%
Religion: Muslim	0	0%	2	1%
Religion: Sikh	0	0%	0	0%
Religion: Other	1	1%	2	1%
Religion: None	34	37%	44	32%

Married/Civil Part/Cohabiting	66	72%	103	75%
Separated/Divorced/Widowed	2	2%	5	4%
Single	6	7%	8	6%

User of...Hawkinge & Rural - Shepway

	Use this Centre only		All users of this Centre	
Disability: Limited a lot	4	4%	6	4%
Disability: Limited a little	2	2%	3	2%
Disability: No	64	70%	101	74%

Sexuality: Bi/Bisexual	0	0%	0	0%
Sexuality: Heterosexual/Straight	65	71%	101	74%
Sexuality: Gay woman/Lesbian	0	0%	0	0%
Sexuality: Gay man	0	0%	0	0%
Sexuality: Other	1	1%	2	1%
Gender not the same as at birth	0	0%	0	0%

Base: Public - Use this Centre only (92), All users of this Centre (137)

**Equality Impact Assessment Initial Screening post-consultation update
Children's Centre: Hythe Bay**

Location	Hythe, Shepway
Proposal	Part-time
Rationale for proposal	<ul style="list-style-type: none"> • Located in an area of low need (population). • There is another KCC facility (a library) within 800m.
Consultation Feedback Summary (questionnaires)	<p>OBJECTORS - A total of 141 members of the public and 17 professionals objected to the reduction in opening hours at Hythe Bay Children's Centre. Of these 141 members of the public, 58 objected only to the reduction in opening hours at Hythe Bay. The volume of objections to the reduction in opening hours at Hythe Bay is fairly high in the context of all of the proposed reductions in opening hours.</p> <p>USERS - A total of 105 users of Hythe Bay Children's Centre (and just 52 sole users) responded to the consultation, representing as many as 23% of all users of the Centre.</p> <p>OBJECTORS – 16% of the members of the public objecting to the proposed reduction in opening hours at Hythe Bay (22 individuals) indicate that they will not use Children's Centres at all as a result (which is similar to the average proportion across all objectors (15%).</p> <p>USERS – The overwhelming majority (92%) disagree to some extent with this proposal. Of the sole users of Hythe Bay objecting to the proposal, 13% (6 individuals) indicated that they 'will not use Children's Centres at all' as a result of the proposed reduction in opening hours.</p>
Conclusions from consultation evidence by protected characteristic	In comparison with all those objecting to proposal 3, those objecting to the reduction in opening hours at Hythe Bay are much less likely to be parents of children from low incomes.
	Age: A lower percentage of respondents were aged 20-25 and aged 26-30 from Hythe Bay than the county average and a higher percentage of respondents were aged 31-35 and from Hythe Bay than the county average. No responses were received from services users aged under 20. This supports the initial screening assumptions that lower numbers of teenage parents might be affected as a result of the centre becoming part-time.
	Disability: Eight responses were received to the consultation from users identifying themselves as having some limiting form of disability. The percentage of Hythe Bay service users responding to the consultation stating they have a disability is broadly comparable to those responding to the consultation countywide.
	Gender: The gender of service users responding to the consultation are broadly comparable to those responding to the

*All respondent numbers refer to users of Hythe Bay Children's Centre unless otherwise stated

	consultation countywide.
	Gender identity: No respondents identified themselves as having a gender different to that at their birth.
	Race: The ethnicity of service users responding to the consultation are broadly comparable to those responding to the consultation countywide.
	Religion or belief: A higher percentage of respondents using Hythe Bay classified themselves as Christian than the county average, conversely a lower number of respondents classified themselves as have no religion than the county average.
	Sexual orientation: The sexual orientation of service users responding to the consultation are broadly comparable to those responding to the consultation countywide. Less than 5 responses were received from services users of any other sexual orientation.
	Pregnancy and maternity: 206 pregnant women responded to the consultation, of which 96% disagreed with proposals to reduce the number of Children's Centres. Of these 26% stated that they would not use any other Children's Centre were their local Centre to close.
	Marriage and Civil Partnerships: A significantly higher proportion of respondents from Hythe Bay were married, cohabiting or in a civil partnership than the county average. As such a lower proportion of single parents responded to the consultation than the county average. This confirms the presumption in the initial screening that lone parents are underrepresented amongst Hythe Bay services users.
	Carers responsibilities: Carer data was not gathered as part of the consultation activity
Actions required	<ul style="list-style-type: none"> • Ensure young and teenage parents are engaged and services are planned to ensure group are not negatively affected by changes to service delivery • Engage service users from other religions to ensure any changes made as a result of the consultation are understood and services are planned as appropriate. • Ensure services for pregnant women are planned and delivered in areas of need so this target group continue to receive services required. • Ensure local lone parents are engaged with service redesign and are able to access services if they are relocated as a result of the consultation.
Previous judgement (02.07.13)	Medium impact
Revised judgement (31.07.13)	Medium impact

*All respondent numbers refer to users of Hythe Bay Children's Centre unless otherwise stated

Appendix A: Hythe Bay full profile of respondents

*All respondent numbers refer to users of Hythe Bay Children's Centre unless otherwise stated

Profiles:

	User of...Hythe Bay - Shepway			
	Use this Centre only		All users of this Centre	
Public				
Age: Under 20	0	0%	0	0%
Age: 20-25	5	10%	5	5%
Age: 36-30	6	12%	16	15%
Age: 31-35	23	44%	40	38%
Age: 36-40	7	13%	24	23%
Age: 41-45	6	12%	11	10%
Age: 46-50	1	2%	3	3%
Age: Over 50	5	10%	5	5%

Gender: Male	4	8%	6	6%
Gender: Female	47	90%	97	92%

EAL: No	50	96%	96	91%
EAL: Yes	2	4%	5	5%

Ethnicity: White British	44	85%	86	82%
Ethnicity: White Irish	0	0%	2	2%
Ethnicity: White Gypsy/Roma	1	2%	1	1%
Ethnicity: White Irish Traveller	0	0%	0	0%
Ethnicity: White Other	1	2%	2	2%
Ethnicity: Mixed White & Black Caribbean	0	0%	0	0%
Ethnicity: Mixed White & Black African	0	0%	0	0%
Ethnicity: Mixed White & Asian	0	0%	0	0%
Ethnicity: Mixed Other	1	2%	1	1%
Ethnicity: Arab	0	0%	0	0%
Ethnicity: Asian or Asian British Indian	1	2%	1	1%
Ethnicity: Asian or Asian British Pakistani	0	0%	0	0%
Ethnicity: Asian or Asian British Bangladeshi	0	0%	0	0%
Ethnicity: Asian Other	0	0%	0	0%
Ethnicity: Chinese	1	2%	1	1%
Ethnicity: Black or Black British Caribbean	0	0%	0	0%
Ethnicity: Black or Black British African	0	0%	2	2%
Ethnicity: Black Other	0	0%	0	0%
Ethnicity: Other	0	0%	2	2%

Religion: Christian	26	50%	55	52%
Religion: Buddhist	0	0%	0	0%
Religion: Hindu	0	0%	0	0%
Religion: Jewish	0	0%	0	0%
Religion: Muslim	1	2%	2	2%
Religion: Sikh	0	0%	0	0%
Religion: Other	0	0%	2	2%
Religion: None	21	40%	33	31%

Married/Civil Part/Cohabiting	48	92%	93	89%
Separated/Divorced/Widowed	0	0%	3	3%
Single	3	6%	4	4%

	User of...Hythe Bay - Shepway			
	Use this Centre only		All users of this Centre	
Disability: Limited a lot	0	0%	2	2%
Disability: Limited a little	2	4%	3	3%
Disability: No	44	85%	90	86%

Sexuality: Bi/Bisexual	0	0%	0	0%
Sexuality: Heterosexual/Straight	45	87%	91	87%
Sexuality: Gay woman/Lesbian	0	0%	0	0%
Sexuality: Gay man	0	0%	0	0%
Sexuality: Other	1	2%	2	2%
Gender not the same as at birth	0	0%	0	0%

Base: Public - Use this Centre only (52), All users of this Centre (105)

**Equality Impact Assessment Initial Screening post-consultation update
Children's Centre: Larkfield**

Location	Larkfield, Tonbridge and Malling
Proposal	Closure
Rationale for proposal	<ul style="list-style-type: none"> • Identified as a local solution. • Located in an area of low need (population). • 78% (112) of users also attend another Children's Centre. The majority of these attended Woodlands and Burham.
Consultation Feedback Summary (questionnaires)	<p>A total of 64 members of the public and just 9 professionals objected to the closure of Larkfield Children's Centre. Of these 64 members of the public, 23 objected only to the closure of Larkfield.</p> <p>Less than a fifth (19%) of the members of the public objecting to the proposed closure of Larkfield indicate that they will not use Children's Centres at all as a result (which is lower than the average across all objectors, of 26%).</p> <p>Just 22 users of Larkfield Children's Centre (and 4 sole users) responded to the consultation, representing around 10% of all users of the Centre. The overwhelming majority (95%) disagree to some extent with this proposal. Of the 4 sole users of Larkfield objecting to the proposal, 3 indicated that they 'will not use Children's Centres at all' as a result of the proposed closure.</p>
Conclusions from consultation evidence by protected characteristic	<p>In comparison with all those responding to proposal one, those objecting to the closure of Larkfield are very similar in terms of their profile.</p> <p>Age: A significantly higher percentage of respondents were aged 26-30 and 31-35 from Larkfield than the county average and a significantly lower percentage of respondents were aged over 20-25, 41-45 and over 50 from Larkfield than the county average. No responses were received from services users aged under 20. This supports the initial screening assumptions that lower numbers of teenage parents might be affected as a result of the centre closing.</p> <p>Disability: Five responses were received to the consultation from users identifying themselves as having some limiting form of disability. This is slightly higher than previous records suggest.</p> <p>Gender: A significantly higher number of responses were received from females to the consultation for Larkfield than the county average.</p> <p>Gender identity: No respondents identified themselves as having a gender different to that at their birth.</p> <p>Race: The responses were in line with the county average for race, this is also in line with the initial EqlA screening.</p> <p>Religion or belief: A higher percentage of respondents using Larkfield classified themselves as no religion than the county average. Other responses were in line with the county average.</p> <p>Sexual orientation: A higher percentage of respondents using Larkfield classified themselves as heterosexual than the county</p>

*All respondent numbers refer to users of Larkfield Children's Centre unless otherwise stated

	average.
	Pregnancy and maternity: 206 pregnant women responded to the consultation, of which 96% disagreed with proposals to reduce the number of Children’s Centres. Of these 26% stated that they would not use any other Children’s Centre were their local Centre to close.
	Marriage and Civil Partnerships: A significantly higher proportion of respondents from Larkfield were married, cohabiting or in a civil partnership that the county average. As such a lower proportion of single parents responded to the consultation than the county average. This confirms the presumption in the initial screening that lone parents are underrepresented amongst Larkfield services users.
	Carers responsibilities: Carer data was not gathered as part of the consultation activity
Actions required	<ul style="list-style-type: none"> • Ensure any BME groups are engaged and services are planned to ensure group are not negatively affected by changes to service delivery • Ensure users with a disability are engaged and services are planned and delivered at venues with sufficient access for adults and children with a disability • Engage service users from other religions to ensure any changes made as a result of the consultation are understood and services are planned as appropriate. • Ensure services for pregnant women are planned and delivered in areas of need so this target group continue to receive services required. • Ensure local lone parents are engaged with service redesign and are able to access services if they are relocated as a result of the consultation. • Engage males in service planning, and engage males through “Dad’s groups” about any changes to services. • Encourage reporting on sexual orientation information at Larkfield Children’s Centre, and engage all service users regardless of sexual orientation in service planning and developments.
Previous judgement 2.7.2013	Medium Impact
Revised judgement 29.10.2013	Medium Impact - Respondents are broadly similar to those in the initial EqIA.

*All respondent numbers refer to users of Larkfield Children’s Centre unless otherwise stated

Appendix A: Larkfield full profile of respondents

*All respondent numbers refer to users of Larkfield Children's Centre unless otherwise stated

Profiles:

User of...Larkfield - Tonbridge & Malling				
	Use this Centre only		All users of this Centre	
Public				
Age: Under 20	0	0%	0	0%
Age: 20-25	0	0%	0	0%
Age: 36-30	4	100%	9	41%
Age: 31-35	0	0%	9	41%
Age: 36-40	0	0%	4	18%
Age: 41-45	0	0%	0	0%
Age: 46-50	0	0%	0	0%
Age: Over 50	0	0%	0	0%

Gender: Male	0	0%	0	0%
Gender: Female	4	100%	22	100%

EAL: No	4	100%	21	95%
EAL: Yes	0	0%	1	5%

Ethnicity: White British	3	75%	19	86%
Ethnicity: White Irish	0	0%	0	0%
Ethnicity: White Gypsy/Roma	0	0%	0	0%
Ethnicity: White Irish Traveller	0	0%	0	0%
Ethnicity: White Other	0	0%	1	5%
Ethnicity: Mixed White & Black Caribbean	0	0%	0	0%
Ethnicity: Mixed White & Black African	0	0%	0	0%
Ethnicity: Mixed White & Asian	0	0%	0	0%
Ethnicity: Mixed Other	0	0%	0	0%
Ethnicity: Arab	0	0%	0	0%
Ethnicity: Asian or Asian British Indian	0	0%	0	0%
Ethnicity: Asian or Asian British Pakistani	0	0%	0	0%
Ethnicity: Asian or Asian British Bangladeshi	0	0%	0	0%
Ethnicity: Asian Other	0	0%	0	0%
Ethnicity: Chinese	0	0%	0	0%
Ethnicity: Black or Black British Caribbean	0	0%	0	0%
Ethnicity: Black or Black British African	0	0%	0	0%
Ethnicity: Black Other	0	0%	0	0%
Ethnicity: Other	0	0%	1	5%

Religion: Christian	2	50%	10	45%
Religion: Buddhist	0	0%	0	0%
Religion: Hindu	0	0%	0	0%
Religion: Jewish	0	0%	0	0%
Religion: Muslim	0	0%	0	0%
Religion: Sikh	0	0%	0	0%
Religion: Other	0	0%	1	5%
Religion: None	2	50%	10	45%

Married/Civil Part/Cohabiting	4	100%	21	95%
Separated/Divorced/Widowed	0	0%	0	0%
Single	0	0%	1	5%

User of...Larkfield - Tonbridge & Malling				
	Use this Centre only		All users of this Centre	
Disability: Limited a lot	0	0%	1	5%
Disability: Limited a little	1	25%	4	18%
Disability: No	3	75%	17	77%

Sexuality: Bi/Bisexual	0	0%	0	0%
Sexuality: Heterosexual/Straight	4	100%	21	95%
Sexuality: Gay woman/Lesbian	0	0%	0	0%
Sexuality: Gay man	0	0%	0	0%
Sexuality: Other	0	0%	0	0%
Gender not the same as at birth	0	0%	0	0%

Base: Public - Use this Centre only (4), All users of this Centre (22)

**Equality Impact Assessment Initial Screening post-consultation update
Children's Centre: Lilypad**

Location	Minster, Swale
Proposal	Part Time
Rationale for proposal	<ul style="list-style-type: none"> Local Solution 59% (333) of users also attended another Children's Centre in Kent.
Consultation Feedback Summary (questionnaires)	<p>A total of 79 members of the public and 15 professionals objected to the reduction in opening hours at Lilypad Children's Centre. Of these 79 members of the public, 16 objected only to the reduction in opening hours at Lilypad.</p> <p>In comparison with all those objecting to proposal 3, those objecting to the reduction in opening hours at Lilypad are more likely to be lone parents and/or parents of children from low incomes.</p> <p>Around 1 in 7 (14%) of the members of the public objecting to the proposed reduction in opening hours at Lilypad indicate that they will not use Children's Centres at all as a result (which is similar to the average across all objectors).</p> <p>A total of 32 users of Lilypad Children's Centre (and just 3 sole users) responded to the consultation, representing around 7% of all users of the Centre. The vast majority (80%) disagree to some extent with this proposal. None of the 3 sole users of Lilypad responding to the consultation indicated that they 'will not use Children's Centres at all' as a result of the proposed reduction in opening hours.</p>
Conclusions from consultation evidence by protected characteristic	<p>In comparison with all those objecting to proposal 3, those objecting to the reduction in opening hours at Lilypad are more likely to be lone parents and/or parents of children from low incomes.</p> <p>Age: A significantly higher percentage of respondents* were aged 26-30 from Lilypad than the county average and a lower percentage of respondents were aged 20-25 and 41-45 from Lilypad than the county average. No responses were received from services users aged under 20. This supports the initial screening assumptions that lower numbers of teenage parents might be affected as a result of the centre closing.</p> <p>Disability: Less than 5 responses were received to the consultation from users identifying themselves as having some limiting form of disability. This is aligned with the initial EqIA screening.</p> <p>Gender: The responses were in line with the county average for gender.</p> <p>Gender identity: No respondents identified themselves as having a gender different to that at their birth.</p> <p>Race: The responses were in line with the county average for race. There were less than 5 responses received from those with EAL needs, and also less than 5 responses from non White British service users, although in line with the county average this is slightly higher than the initial EqIA indicated.</p> <p>Religion or belief: A higher percentage of respondents using Lilypad classified themselves as no religion than the county average. Other responses were in line with the county average.</p>

*All respondent numbers refer to users of Lilypad Children's Centre unless otherwise stated

	<p>Sexual orientation: A higher percentage of respondents using Lilyypad classified themselves as heterosexual than the county average. Less than 5 responses were received from services users of any other sexual orientation.</p> <p>Pregnancy and maternity: 206 pregnant women responded to the consultation, of which 96% disagreed with proposals to reduce the number of Children’s Centres. Of these 26% stated that they would not use any other Children’s Centre were their local Centre to close. Engagement activities</p> <p>Marriage and Civil Partnerships: A higher proportion of respondents from Lilyypad were married, cohabiting or in a civil partnership than the county average.</p> <p>Carers responsibilities: Carer data was not gathered as part of the consultation activity</p>
Actions required	<ul style="list-style-type: none"> • Ensure any BME groups are engaged and services are planned to ensure group are not negatively affected by changes to service delivery • Ensure users with a disability are engaged and services are planned and delivered at venues with sufficient access for adults and children with a disability • Engage service users from other religions to ensure any changes made as a result of the consultation are understood and services are planned as appropriate. • Ensure services for pregnant women are planned and delivered in areas of need so this target group continue to receive services required. • Ensure local lone parents are engaged with service redesign and are able to access services if they are relocated as a result of the consultation.
Previous judgement 2.7.2013	Medium Impact
Revised judgement 30.10.2013	Medium Impact – Respondents are not significantly different from the county average or initial EqIA carried out.

*All respondent numbers refer to users of Lilyypad Children’s Centre unless otherwise stated

Appendix A: Lilypad full profile of respondents

*All respondent numbers refer to users of Lilypad Children’s Centre unless otherwise stated

Profiles:

User of...Lilypad - Swale				
	Use this Centre only		All users of this Centre	
Age: Under 20	0	0%	0	0%
Age: 20-25	0	0%	1	3%
Age: 36-30	1	33%	15	47%
Age: 31-35	1	33%	8	25%
Age: 36-40	0	0%	5	16%
Age: 41-45	1	33%	1	3%
Age: 46-50	0	0%	0	0%
Age: Over 50	1	33%	1	3%

Public

Gender: Male	0	0%	2	6%
Gender: Female	3	100%	29	91%

EAL: No	3	100%	26	81%
EAL: Yes	0	0%	4	13%

Ethnicity: White British	3	100%	27	84%
Ethnicity: White Irish	0	0%	0	0%
Ethnicity: White Gypsy/Roma	0	0%	0	0%
Ethnicity: White Irish Traveller	0	0%	0	0%
Ethnicity: White Other	0	0%	2	6%
Ethnicity: Mixed White & Black Caribbean	0	0%	0	0%
Ethnicity: Mixed White & Black African	0	0%	0	0%
Ethnicity: Mixed White & Asian	0	0%	0	0%
Ethnicity: Mixed Other	0	0%	0	0%
Ethnicity: Arab	0	0%	0	0%
Ethnicity: Asian or Asian British Indian	0	0%	0	0%
Ethnicity: Asian or Asian British Pakistani	0	0%	0	0%
Ethnicity: Asian or Asian British Bangladeshi	0	0%	0	0%
Ethnicity: Asian Other	0	0%	1	3%
Ethnicity: Chinese	0	0%	0	0%
Ethnicity: Black or Black British Caribbean	0	0%	0	0%
Ethnicity: Black or Black British African	0	0%	0	0%
Ethnicity: Black Other	0	0%	0	0%
Ethnicity: Other	0	0%	0	0%

Religion: Christian	0	0%	14	44%
Religion: Buddhist	0	0%	0	0%
Religion: Hindu	0	0%	1	3%
Religion: Jewish	0	0%	0	0%
Religion: Muslim	0	0%	0	0%
Religion: Sikh	0	0%	0	0%
Religion: Other	0	0%	0	0%
Religion: None	3	100%	15	47%

Married/Civil Part/Cohabiting	3	100%	26	81%
Separated/Divorced/Widowed	0	0%	1	3%
Single	0	0%	4	13%

User of...Lilypad - Swale				
	Use this Centre only		All users of this Centre	
Disability: Limited a lot	0	0%	0	0%
Disability: Limited a little	0	0%	1	3%
Disability: No	3	100%	29	91%

Sexuality: Bi/Bisexual	0	0%	1	3%
Sexuality: Heterosexual/Straight	1	33%	26	81%
Sexuality: Gay woman/Lesbian	1	33%	1	3%
Sexuality: Gay man	0	0%	0	0%
Sexuality: Other	0	0%	0	0%
Gender not the same as at birth	0	0%	0	0%

Base: Public - Use this Centre only (3), All users of this Centre (32)

**Equality Impact Assessment Initial Screening post-consultation update
Children's Centre: Little Bees**

Location	Littlebourne, Canterbury
Proposal	Closure
Rationale for proposal	<ul style="list-style-type: none"> • Identified as a local solution (reduced hours). • Located in an area of low need (population). • 59% (204) of users also attend another Children's Centre in Kent. The majority of these attended Riverside, Little Hands and Snowdrop.
Consultation Feedback Summary (questionnaires)	<p>A total of 119 members of the public and just 11 professionals objected to the closure of Little Bees Children's Centre. Of these 119 members of the public, 34 objected only to the closure of Little Bees.</p> <p>More than a quarter (29%) of the members of the public objecting to the proposed closure of Little Bees indicate that they will not use Children's Centres at all as a result (which is similar to the average across all objectors, of 26%). The most popular comments amongst those indicating that they 'will not use Children's Centres at all' as a result of the proposed closure of Little Bees are:</p> <ul style="list-style-type: none"> • 'Will make travel to centres more difficult / alternative centres too distant' – 28% • 'Children's centres form a local community hub / chance to meet people' – 24% • 'Centres supply help / counselling / advice / support / information' – 17% <p>A total of 55 users of Little Bees Children's Centre (and 23 sole users) responded to the consultation, representing around 22% of all users of the Centre. The overwhelming majority (96%) disagree to some extent with this proposal. Of the sole users of Little Bees objecting to the proposal, 59% (13 individuals) indicated that they 'will not use Children's Centres at all' as a result of the proposed closure.</p>
Conclusions from consultation evidence by protected characteristic	<p>In comparison with all those responding to proposal one, those objecting to the closure of Little Bees are more likely to be lone parents.</p> <p>Age: A significantly higher percentage of respondents were aged 26-30 from Little Bees than the county average, there were also a higher percentage of respondents in the 31-35 age group compared to the county average. No responses were received from services users aged under 20. This supports the initial screening assumptions that lower numbers of teenage parents might be affected as a result of the centre closing.</p> <p>Disability: Six responses were received to the consultation from users identifying themselves as having some limiting form of disability. This is slightly higher than previous records suggest.</p>

*All respondent numbers refer to users of Little Bees Children's Centre unless otherwise stated

	<p>Gender: A significantly higher number of responses were received from females to the consultation for Little Bees than the county average.</p> <p>Gender identity: No respondents identified themselves as having a gender different to that at their birth.</p> <p>Race: A higher number of responses were received from White British service users than the county average. This is higher than suggested might be the case in the initial screening.</p> <p>Religion or belief: The Little Bees responses for all religions were in line with the county average.</p> <p>Sexual orientation: A higher percentage of respondents using Little Bees classified themselves as heterosexual than the county average. Less than 5 responses were received from service users of any other sexual orientation. This is broadly comparable to service user data for the Canterbury District gathered in the initial screening.</p> <p>Pregnancy and maternity: 206 pregnant women responded to the consultation, of which 96% disagreed with proposals to reduce the number of Children's Centres. Of these 26% stated that they would not use any other Children's Centre were their local Centre to close.</p> <p>Marriage and Civil Partnerships: The Little Bees responses were in line with the county average for all types.</p> <p>Carers responsibilities: Carer data was not gathered as part of the consultation activity</p>
Actions required	<ul style="list-style-type: none"> • Ensure any BME groups are engaged and services are planned to ensure group are not negatively affected by changes to service delivery • Ensure users with a disability are engaged and services are planned and delivered at venues with sufficient access for adults and children with a disability. • Engage service users from other religions to ensure any changes made as a result of the consultation are understood and services are planned as appropriate. • Ensure services for pregnant women are planned and delivered in areas of need so this target group continue to receive services required. • Ensure local lone parents are engaged with service redesign and are able to access services if they are relocated as a result of the consultation.
Previous judgement (02.07.13)	Medium Impact
Revised judgement (29.10.13)	Medium Impact

*All respondent numbers refer to users of Little Bees Children's Centre unless otherwise stated

Appendix A: Little Bees full profile of respondents

*All respondent numbers refer to users of Little Bees Children's Centre unless otherwise stated

Profiles:

User of...Little Bees - Canterbury				
	Use this Centre only		All users of this Centre	
Age: Under 20	0	0%	0	0%
Age: 20-25	2	9%	5	9%
Age: 36-30	8	35%	17	31%
Age: 31-35	8	35%	19	35%
Age: 36-40	2	9%	9	16%
Age: 41-45	1	4%	2	4%
Age: 46-50	0	0%	1	2%
Age: Over 50	2	9%	2	4%

Public

Gender: Male	1	4%	1	2%
Gender: Female	22	96%	54	98%

EAL: No	21	91%	52	95%
EAL: Yes	1	4%	2	4%

Ethnicity: White British	21	91%	50	91%
Ethnicity: White Irish	0	0%	1	2%
Ethnicity: White Gypsy/Roma	0	0%	0	0%
Ethnicity: White Irish Traveller	0	0%	0	0%
Ethnicity: White Other	1	4%	1	2%
Ethnicity: Mixed White & Black Caribbean	0	0%	0	0%
Ethnicity: Mixed White & Black African	0	0%	0	0%
Ethnicity: Mixed White & Asian	0	0%	1	2%
Ethnicity: Mixed Other	0	0%	0	0%
Ethnicity: Arab	0	0%	0	0%
Ethnicity: Asian or Asian British Indian	0	0%	0	0%
Ethnicity: Asian or Asian British Pakistani	0	0%	0	0%
Ethnicity: Asian or Asian British Bangladeshi	0	0%	0	0%
Ethnicity: Asian Other	0	0%	0	0%
Ethnicity: Chinese	0	0%	0	0%
Ethnicity: Black or Black British Caribbean	0	0%	0	0%
Ethnicity: Black or Black British African	0	0%	0	0%
Ethnicity: Black Other	0	0%	0	0%
Ethnicity: Other	0	0%	0	0%

Religion: Christian	11	48%	27	49%
Religion: Buddhist	0	0%	0	0%
Religion: Hindu	0	0%	0	0%
Religion: Jewish	0	0%	0	0%
Religion: Muslim	0	0%	0	0%
Religion: Sikh	0	0%	0	0%
Religion: Other	1	4%	1	2%
Religion: None	8	35%	23	42%

Married/Civil Part/Cohabiting	12	52%	40	73%
Separated/Divorced/Widowed	3	13%	3	5%
Single	6	26%	9	16%

User of...Little Bees - Canterbury				
	Use this Centre only		All users of this Centre	
Disability: Limited a lot	1	4%	2	4%
Disability: Limited a little	1	4%	2	4%
Disability: No	19	83%	49	89%

Sexuality: Bi/Bisexual	1	4%	1	2%
Sexuality: Heterosexual/Straight	21	91%	52	95%
Sexuality: Gay woman/Lesbian	0	0%	0	0%
Sexuality: Gay man	0	0%	0	0%
Sexuality: Other	0	0%	0	0%
Gender not the same as at birth	0	0%	0	0%

Base: Public - Use this Centre only (23), All users of this Centre (55)

**Equality Impact Assessment Initial Screening post-consultation update
Children’s Centre: Little Painters**

Location	Painters Ash, Gravesham
Proposal	Closure
Rationale for proposal	<ul style="list-style-type: none"> • Identified as a local solution (reduced hours). • Located in an area of low need (population). • 77% (315) also used another Children’s Centre in Kent.
Consultation Feedback Summary (questionnaires)	<p>A total of 143 members of the public and 10 professionals objected to the closure of Little Painters Children’s Centre. Of these 143 members of the public, 34 objected only to the closure of Little Painters.</p> <p>Just 12% of the members of the public objecting to the proposed closure of Little Painters indicate that they will not use Children’s Centres at all as a result (which is much lower than the average across all objectors, of 26%).</p> <p>A total of 30 users of Little Painters Children’s Centre (and just 5 sole users) responded to the consultation, representing around 9% of all users of the Centre. The vast majority (86%) disagree to some extent with this proposal. Of the 2 sole users of Little Painters responding to the consultation and objecting to the proposal, 1 indicated that they ‘will not use Children’s Centres at all’ as a result of the proposed closure.</p>
Conclusions from consultation evidence by protected characteristic	<p>General: In comparison with all those responding to proposal one, those objecting to the closure of Little Painters are more likely to be parents of children from low incomes, parents from minority ethnic groups and/or parents with English as an additional language.</p> <p>Age: A higher percentage of respondents were aged 20 – 25 and a significantly higher percentage of respondents were aged 31 - 35 from Little Painters than the county average. A lower percentage of respondents were aged 41 – 45 from Little Painters than the county average. No responses were received from services users aged 46 and above. Less than five respondents were below 20. 124 teenage parents were registered at Little Painters at the time of the initial screening. Some of these would be attending a Young Active Parents Group at Little Pebbles Centre and would have attended one of the three consultation activities at Little Pebbles. More generally, parents attended two consultation activities at Little Painters. It is expected that parents attending these events would come from a mixed age range.</p> <p>Disability: Less than five responses were received to the consultation from users identifying themselves as having a form of disability.. Less than 5 users at Little Painters are recorded as having a disability at the time of the initial screening.</p> <p>Gender: A higher number of responses were received from females to the consultation for Little Painters than the county average.</p> <p>Gender identity: No respondents identified themselves as having a gender different to that at their birth.</p> <p>Race: A higher number of responses were received from White Other and Asian or Asian British Indian service users of Little Painters than the county average. A significantly lower number of responses were received from White British services users</p>

*All respondent numbers refer to users of Little Painters Children’s Centre unless otherwise stated

	<p>of Little Painters than the county average. The data for White Other and White British service users at Little Painters suggests that a higher proportion of these groups responded to the consultation although the data on registrations at the time of the initial screening includes 23% of users who chose not to record their ethnicity; this may make a difference to the comparisons.</p> <p>Religion or belief: A higher percentage of respondents using Little Painters classified themselves as Christian and Sikh than the county average. A lower percentage of respondents using Little Painters classified themselves as having no religion. Less than five service users classified themselves as Muslim or having another religion. The Gravesham 2011 census data suggests that a lower proportion of service users at Little Painters classified themselves as being Christian.</p> <p>Sexual orientation: No respondents identified themselves as being bisexual, lesbian or gay.</p> <p>Pregnancy and maternity: 206 pregnant women responded to the consultation, of which 96% disagreed with proposals to reduce the number of Children's Centres. Of these 26% stated that they would not use any other Children's Centre were their local Centre to close. Two engagement activities were undertaken at Little Painters. These activities were attended by pregnant mothers and those with new babies.</p> <p>Marriage and Civil Partnerships: A significantly higher proportion of respondents from Little Painters were married, cohabiting or in a civil partnership than the county average. As such a lower proportion of single parents responded to the consultation than the county average. The original screening identified (from available information) that single and lone parents were in alignment with the County average. It is expected that some single/lone parents would have attended engagement activities at Little Painters.</p> <p>Carers responsibilities: Carer data was not gathered as part of the consultation activity.</p>
Actions required	<ul style="list-style-type: none"> • Improve data collection for Race, Religion and Sexuality. • Ensure all ethnic groups are engaged and services are planned to ensure groups are not negatively affected by changes to service delivery. • Ensure users with a disability are engaged and services are planned and delivered at venues with sufficient access for adults and children with a disability. • Engage service users from other religions to ensure any changes made as a result of the consultation are understood and services are planned as appropriate. • Ensure services for pregnant women are planned and delivered in areas of need so this target group continue to receive services required. • Ensure young and lone parents are engaged with service redesign and are able to access services if they are relocated as a result of the consultation.
Previous judgement (02.07.13)	Medium impact
Revised judgement (29.10.13)	Medium impact

*All respondent numbers refer to users of Little Painters Children's Centre unless otherwise stated

Appendix A: Little Painters full profile of respondents

*All respondent numbers refer to users of Little Painters Children's Centre unless otherwise stated

Profiles:

	User of...Little Painters - Gravesham			
	Use this Centre only		All users of this Centre	
Age: Under 20	0	0%	1	3%
Age: 20-25	3	60%	5	17%
Age: 36-30	0	0%	6	20%
Age: 31-35	1	20%	11	37%
Age: 36-40	1	20%	6	20%
Age: 41-45	0	0%	1	3%
Age: 46-50	0	0%	0	0%
Age: Over 50	0	0%	0	0%

Public

Gender: Male	1	20%	2	7%
Gender: Female	4	80%	28	93%

EAL: No	5	100%	23	77%
EAL: Yes	0	0%	6	20%

Ethnicity: White British	4	80%	20	67%
Ethnicity: White Irish	0	0%	0	0%
Ethnicity: White Gypsy/Roma	0	0%	0	0%
Ethnicity: White Irish Traveller	0	0%	0	0%
Ethnicity: White Other	1	20%	3	10%
Ethnicity: Mixed White & Black Caribbean	0	0%	0	0%
Ethnicity: Mixed White & Black African	0	0%	0	0%
Ethnicity: Mixed White & Asian	0	0%	0	0%
Ethnicity: Mixed Other	0	0%	0	0%
Ethnicity: Arab	0	0%	0	0%
Ethnicity: Asian or Asian British Indian	0	0%	2	7%
Ethnicity: Asian or Asian British Pakistani	0	0%	1	3%
Ethnicity: Asian or Asian British Bangladeshi	0	0%	0	0%
Ethnicity: Asian Other	0	0%	0	0%
Ethnicity: Chinese	0	0%	0	0%
Ethnicity: Black or Black British Caribbean	0	0%	0	0%
Ethnicity: Black or Black British African	0	0%	1	3%
Ethnicity: Black Other	0	0%	0	0%
Ethnicity: Other	0	0%	1	3%

Religion: Christian	3	60%	16	53%
Religion: Buddhist	0	0%	0	0%
Religion: Hindu	0	0%	0	0%
Religion: Jewish	0	0%	0	0%
Religion: Muslim	0	0%	1	3%
Religion: Sikh	0	0%	2	7%
Religion: Other	0	0%	1	3%
Religion: None	1	20%	7	23%

Married/Civil Part/Cohabiting	4	80%	26	87%
Separated/Divorced/Widowed	0	0%	1	3%
Single	1	20%	2	7%

	User of...Little Painters - Gravesham			
	Use this Centre only		All users of this Centre	
Disability: Limited a lot	0	0%	1	3%
Disability: Limited a little	1	20%	1	3%
Disability: No	4	80%	26	87%

Sexuality: Bi/Bisexual	0	0%	0	0%
Sexuality: Heterosexual/Straight	4	80%	25	83%
Sexuality: Gay woman/Lesbian	0	0%	0	0%
Sexuality: Gay man	0	0%	0	0%
Sexuality: Other	0	0%	0	0%
Gender not the same as at birth	0	0%	0	0%

Base: Public - Use this Centre only (5), All users of this Centre (30)

**Equality Impact Assessment Initial Screening post-consultation update
Children's Centre: Loose**

Location	Loose, Maidstone
Proposal	Closure
Rationale for proposal	<ul style="list-style-type: none"> • Located in an area of low need (population) • Identified as a local solution by Operational Managers • More than 50% of users also attend another Centre
Consultation Feedback Summary (questionnaires)	<p>A total of 111 members of the public and just 7 professionals objected to the closure of Loose Children's Centre. Of these 111 members of the public, 30 objected only to the closure of Loose.</p> <p>In comparison with all those responding to proposal one, those objecting to the closure of Loose are less likely to be lone parents.</p> <p>Just a fifth (20%) of the members of the public objecting to the proposed closure of Loose indicate that they will not use Children's Centres at all as a result (which is lower than the average across all objectors, of 26%).</p> <p>A total of 43 users of Loose Children's Centre (and just 8 sole users) responded to the consultation, representing around 11% of all users of the Centre. The majority (74%) disagree to some extent with this proposal, although this is a lower level of disagreement than for most of the other proposed closures. Of the 8 sole users of Loose objecting to the proposal, 5 indicated that they 'will not use Children's Centres at all' as a result of the proposed closure.</p>
Conclusions from consultation evidence by protected characteristic	<p>General: In comparison with all those responding to proposal one, those objecting to the closure of Loose are less likely to be lone parents.</p> <p>Age: A significantly higher percentage of respondents* were aged 26 – 30 and 36 – 40 from Loose than the county average. No responses were received from services users aged 25 and under. The needs analysis for Loose Centre (as set out in the initial screening) identified that there is a lower level of need than the Kent average in terms of teenage pregnancy. Two consultation events were held at the centre with 25 families/parents attending and there were also 3 consultation events with over 35 families/parents attending at the centre's outreach facility at Coxheath. It is expected that those attending would be from different age groups.</p> <p>Disability: Six responses were received to the consultation from users identifying themselves as having some limiting form of disability. This is higher than previous records suggest.</p> <p>Gender: A higher number of responses were received from females to the consultation for Loose than the county average.</p> <p>Gender identity: No respondents identified themselves as having a gender different to that at their birth.</p> <p>Race: A significantly higher number of responses were received from White British service users than the county average. The data in the initial screening seems to suggest that there is a lower proportion of BME groups responding to the consultation but this data does include a high proportion of service users who chose not to record their ethnicity. Consultation took place with a</p>

*All respondent numbers refer to users of Loose Children's Centre unless otherwise stated

	<p>family for whom English is an additional language at the Coxheath outreach facility.</p> <p>Religion or belief: A slightly higher percentage of respondents using Loose classified themselves as having no religion than the county average. Less than five responses were received from service users who classified themselves as Buddhist. No responses were received from services users who identified themselves as being Hindu, Jewish, Muslim or Sikh.</p> <p>Sexual orientation: A higher percentage of respondents using Loose classified themselves as heterosexual than the county average. Less than 5 responses were received from services users of any other sexual orientation.</p> <p>Pregnancy and maternity: 206 pregnant women responded to the consultation, of which 96% disagreed with proposals to reduce the number of Children’s Centres. Of these 26% stated that they would not use any other Children’s Centre were their local Centre to close. Two consultation events were held at the centre with 25 families/parents attending and there were also 3 consultation events with over 35 families/parents attending at the centre’s outreach facility at Coxheath. 13 families with young babies were recorded as having attended one of the events.</p> <p>Marriage and Civil Partnerships: A significantly higher proportion of respondents from Loose were married, cohabiting or in a civil partnership that the county average. As such there was a significantly lower proportion of single parents responding to the consultation than the county average. Information (from the initial screening) identified an under representation of some groups of single and lone parents attending the centre but there was an over representation of service users who were lone parents with young children in high crime areas on large social housing estates. However, 3 consultation events were held at the centre’s outreach facility at Coxheath which is an area with higher levels of deprivation so it is expected that some lone/single parents would have attended these events.</p> <p>Carers responsibilities: Carer data was not gathered as part of the consultation activity</p>
Actions required	<ul style="list-style-type: none"> • Improve data collection for disability, race, religion and sexuality. • Ensure any BME groups are engaged and services are planned to ensure group are not negatively affected by changes to service delivery • Ensure users with a disability are engaged and services are planned and delivered at venues with sufficient access for adults and children with a disability • Engage service users from other religions to ensure any changes made as a result of the consultation are understood and services are planned as appropriate. • Ensure services for pregnant women are planned and delivered in areas of need so this target group continue to receive services required. • Ensure young and lone parents are engaged with service redesign and are able to access services if they are relocated as a result of the consultation.
Previous judgement 02/07/13()	Medium impact
Revised judgement (30/10/13)	Medium impact

*All respondent numbers refer to users of Loose Children’s Centre unless otherwise stated

Appendix A: Loose full profile of respondents

*All respondent numbers refer to users of Loose Children's Centre unless otherwise stated

Profiles:

	User of...Loose - Maidstone			
	Use this Centre only		All users of this Centre	
Age: Under 20	0	0%	0	0%
Age: 20-25	0	0%	0	0%
Age: 36-30	2	25%	13	30%
Age: 31-35	1	13%	11	26%
Age: 36-40	1	13%	12	28%
Age: 41-45	1	13%	2	5%
Age: 46-50	0	0%	1	2%
Age: Over 50	3	38%	3	7%

Public

Gender: Male	0	0%	2	5%
Gender: Female	7	88%	40	93%

EAL: No	8	100%	42	98%
EAL: Yes	0	0%	1	2%

Ethnicity: White British	8	100%	41	95%
Ethnicity: White Irish	0	0%	0	0%
Ethnicity: White Gypsy/Roma	0	0%	1	2%
Ethnicity: White Irish Traveller	0	0%	0	0%
Ethnicity: White Other	0	0%	1	2%
Ethnicity: Mixed White & Black Caribbean	0	0%	0	0%
Ethnicity: Mixed White & Black African	0	0%	0	0%
Ethnicity: Mixed White & Asian	0	0%	0	0%
Ethnicity: Mixed Other	0	0%	0	0%
Ethnicity: Arab	0	0%	0	0%
Ethnicity: Asian or Asian British Indian	0	0%	0	0%
Ethnicity: Asian or Asian British Pakistani	0	0%	0	0%
Ethnicity: Asian or Asian British Bangladeshi	0	0%	0	0%
Ethnicity: Asian Other	0	0%	0	0%
Ethnicity: Chinese	0	0%	0	0%
Ethnicity: Black or Black British Caribbean	0	0%	0	0%
Ethnicity: Black or Black British African	0	0%	0	0%
Ethnicity: Black Other	0	0%	0	0%
Ethnicity: Other	0	0%	0	0%

Religion: Christian	6	75%	19	44%
Religion: Buddhist	0	0%	1	2%
Religion: Hindu	0	0%	0	0%
Religion: Jewish	0	0%	0	0%
Religion: Muslim	0	0%	0	0%
Religion: Sikh	0	0%	0	0%
Religion: Other	0	0%	2	5%
Religion: None	2	25%	19	44%

Married/Civil Part/Cohabiting	8	100%	41	95%
Separated/Divorced/Widowed	0	0%	0	0%
Single	0	0%	1	2%

	User of...Loose - Maidstone			
	Use this Centre only		All users of this Centre	
Disability: Limited a lot	1	13%	1	2%
Disability: Limited a little	0	0%	5	12%
Disability: No	7	88%	37	86%

Sexuality: Bi/Bisexual	0	0%	1	2%
Sexuality: Heterosexual/Straight	8	100%	39	91%
Sexuality: Gay woman/Lesbian	0	0%	2	5%
Sexuality: Gay man	0	0%	0	0%
Sexuality: Other	0	0%	0	0%
Gender not the same as at birth	0	0%	0	0%

Base: Public - Use this Centre only (8), All users of this Centre (43)

**Equality Impact Assessment Initial Screening post-consultation update
Children's Centre: Lydd'le Stars**

Location	Lydd, Shepway
Proposal	Part Time
Rationale for proposal	<ul style="list-style-type: none"> Local solution.
Consultation Feedback Summary (questionnaires)	<p>A total of 141 members of the public and 17 professionals objected to the reduction in opening hours at Lydd'le Stars Children's Centre. Of these 141 members of the public, 58 objected only to the reduction in opening hours at Lydd'le Stars.</p> <p>16% of the members of the public objecting to the proposed reduction in opening hours at Lydd'le Stars indicate that they will not use Children's Centres at all as a result (which is similar to the average across all objectors). The most popular comments amongst those indicating that they 'will not use Children's Centres at all' as a result of the proposed reduction in opening hours at Lydd'le Stars are:</p> <ul style="list-style-type: none"> 'Unable to travel to another centre / cannot afford to travel' – 29% 'Opening times are not suitable / do not reduce them / not open long enough / restrictive' – 26% 'Will be to busier when open' – 16% 'Happy with the local centre / great service / better than others / would not use another' – 13% <p>A total of 105 users of Lydd'le Stars Children's Centre (and just 52 sole users) responded to the consultation, representing as many as 23% of all users of the Centre. The overwhelming majority (92%) disagree to some extent with this proposal. Of the sole users of Lydd'le Stars responding to the consultation, 13% (6 individuals) indicated that they 'will not use Children's Centres at all' as a result of the proposed reduction in opening hours.</p>
Conclusions from consultation evidence by protected characteristic	<p>General: In comparison with all those objecting to proposal 3, those objecting to the reduction in opening hours at Lydd'le Stars are <u>much</u> less likely to be a parent/carer of children aged under 5.</p>
	<p>Age: A higher percentage of respondents were aged 20-25 from Lydd'le Stars than the county average and a lower percentage of respondents were aged 36 – 40 from Lydd'le Stars than the county average. The proportion of parents aged under 20 was in line with the county average. The initial screening identified that there was a slightly higher than average proportion of teenage parents. An engagement event for Lydd/New Romney and Folkestone involving 250 families was held. It is expected that attendees would come from different age groups.</p>
	<p>Disability: Ten responses were received to the consultation from users identifying themselves as having some limiting form of disability. This is higher than previous records suggest.</p>
	<p>Gender: The number of responses received from females to the consultation for Lydd'le Stars were in line with the county average.</p>

*All respondent numbers refer to users of Lydd'le Stars Children's Centre unless otherwise stated

	<p>Gender identity: No respondents identified themselves as having a gender different to that at their birth.</p> <p>Race: A significantly higher number of responses were received from White British service users than the county average. The data in the initial screening seems to suggest that there is a lower proportion from BME groups responding to the consultation but this data does include a high proportion of service users who chose not to record their ethnicity.</p> <p>Religion or belief: A higher percentage of respondents using Lydd'le Stars classified themselves as having no religion than the county average. Less than five service users classified themselves as having another religion. There were no service users responding to the consultation who identified themselves as Buddhist, Hindu, Jewish, Muslim or Sikh. The 2011 census identifies the Shepway* district as an area having a slightly higher Hindu faith than the county average. <i>Lydd is situated in the south eastern part of Shepway.</i></p> <p>Sexual orientation: A higher percentage of respondents using Lydd'le Stars classified themselves as heterosexual than the county average. Less than five respondents identified themselves as having another sexual orientation.</p> <p>Pregnancy and maternity: 206 pregnant women responded to the consultation, of which 96% disagreed with proposals to reduce the number of Children's Centres. Of these 26% stated that they would not use any other Children's Centre were their local Centre to close. Needs analysis for the centre (as set out in the interim collection) identified that there is a slightly lower level of teenage pregnancy. An engagement event for Lydd/New Romney and Folkestone involving 250 families was held. It is expected that attendees would include pregnant and nursing mothers.</p> <p>Marriage and Civil Partnerships: The proportion of respondents to the consultation was in line with the county average for: married/civil partner/cohabiting; separated/divorced/widowed; and single. An engagement event for Lydd/New Romney and Folkestone involving 250 families was held. It is expected that attendees would include service users from these groups.</p> <p>Carers responsibilities: Carer data was not gathered as part of the consultation activity</p>
Actions required	<ul style="list-style-type: none"> • Improve data collection for disability, race, religion and sexuality. • Ensure all BME groups are engaged and services are planned to ensure group are not negatively affected by changes to service delivery • Ensure users with a disability are engaged and services are planned and delivered at venues with sufficient access for adults and children with a disability • Engage service users from other religions to ensure any changes made as a result of the consultation are understood and services are planned as appropriate. • Ensure services for pregnant women are planned and delivered in areas of need so this target group continue to receive services required. • Ensure young and lone parents are engaged with service redesign and are able to access services if they are relocated as a result of the consultation.
Previous judgement (07/07/13)	Medium impact

*All respondent numbers refer to users of Lydd'le Stars Children's Centre unless otherwise stated

Revised judgement (29/10/13)	Medium impact
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*All respondent numbers refer to users of Lydd'le Stars Children's Centre unless otherwise stated

Profiles:

	User of...Lydd'le Stars - Shepway			
	Use this Centre only		All users of this Centre	
Age: Under 20	1	2%	2	2%
Age: 20-25	10	20%	24	19%
Age: 36-30	11	22%	27	22%
Age: 31-35	18	35%	39	31%
Age: 36-40	8	16%	16	13%
Age: 41-45	0	0%	7	6%
Age: 46-50	0	0%	0	0%
Age: Over 50	7	14%	7	6%

Public

Gender: Male	2	4%	12	10%
Gender: Female	46	90%	109	88%

EAL: No	50	98%	122	98%
EAL: Yes	1	2%	1	1%

Ethnicity: White British	46	90%	115	93%
Ethnicity: White Irish	1	2%	2	2%
Ethnicity: White Gypsy/Roma	0	0%	0	0%
Ethnicity: White Irish Traveller	0	0%	0	0%
Ethnicity: White Other	1	2%	1	1%
Ethnicity: Mixed White & Black Caribbean	0	0%	0	0%
Ethnicity: Mixed White & Black African	1	2%	1	1%
Ethnicity: Mixed White & Asian	0	0%	0	0%
Ethnicity: Mixed Other	0	0%	0	0%
Ethnicity: Arab	0	0%	0	0%
Ethnicity: Asian or Asian British Indian	0	0%	1	1%
Ethnicity: Asian or Asian British Pakistani	0	0%	0	0%
Ethnicity: Asian or Asian British Bangladeshi	0	0%	0	0%
Ethnicity: Asian Other	0	0%	0	0%
Ethnicity: Chinese	0	0%	0	0%
Ethnicity: Black or Black British Caribbean	0	0%	0	0%
Ethnicity: Black or Black British African	0	0%	0	0%
Ethnicity: Black Other	0	0%	0	0%
Ethnicity: Other	2	4%	2	2%

Religion: Christian	21	41%	59	48%
Religion: Buddhist	0	0%	0	0%
Religion: Hindu	0	0%	0	0%
Religion: Jewish	0	0%	0	0%
Religion: Muslim	0	0%	0	0%
Religion: Sikh	0	0%	0	0%
Religion: Other	1	2%	2	2%
Religion: None	28	55%	56	45%

Married/Civil Part/Cohabiting	37	73%	93	75%
Separated/Divorced/Widowed	3	6%	8	6%
Single	8	16%	18	15%

	User of...Lydd'le Stars - Shepway			
	Use this Centre only		All users of this Centre	
Disability: Limited a lot	1	2%	4	3%
Disability: Limited a little	3	6%	6	5%
Disability: No	45	88%	108	87%

Sexuality: Bi/Bisexual	0	0%	0	0%
Sexuality: Heterosexual/Straight	44	86%	112	90%
Sexuality: Gay woman/Lesbian	1	2%	1	1%
Sexuality: Gay man	0	0%	0	0%
Sexuality: Other	0	0%	0	0%
Gender not the same as at birth	0	0%	0	0%

Base: Public - Use this Centre only (51), All users of this Centre (124)

**Equality Impact Assessment Initial Screening post-consultation update
Children's Centre: Marden**

Location	Marden, Maidstone
Proposal	Closure
Rationale for proposal	<ul style="list-style-type: none"> • Located in an area of low need (population). • 65% (202) of users also used another Children's Centre in Kent.
Consultation Feedback Summary (questionnaires)	<p>A total of 142 members of the public and 16 professionals objected to the closure of Marden Children's Centre. Of these 142 members of the public, 64 objected only to the closure of Marden.</p> <p>More than a quarter (29%) of the members of the public objecting to the proposed closure of Marden indicate that they will not use Children's Centres at all as a result (which is similar to the average across all objectors, of 26%). The key issue for Marden appears to be transport and accessibility, particularly for those reliant on public transport. The most popular comments amongst those indicating that they 'will not use Children's Centres at all' as a result of the proposed closure of Marden are:</p> <ul style="list-style-type: none"> • 'Will make travel to centres more difficult / alternative centres too distant' – 41% • 'Bad for people without cars / non-drivers – 26% • 'Children's centres form a local community hub / chance to meet people' – 18% • 'Centres supply help / counselling / advice / support / information' – 15% • 'My area has poor public transport' – 12% <p>A total of 69 users of Marden Children's Centre (and 31 sole users) responded to the consultation, representing around 17% of all users of the Centre. The overwhelming majority (96%) disagree to some extent with this proposal. Of the sole users of Marden objecting to the proposal, 62% (18 individuals) indicated that they 'will not use Children's Centres at all' as a result of the proposed closure.</p>
Conclusions from consultation evidence by protected characteristic	In comparison with all those responding to proposal one, those objecting to the closure of Marden are very similar in terms of their profile.
	Age: A lower percentage of respondents were aged 26-30 from Marden than the county average and a higher percentage of respondents were aged 31-40 from Marden than the county average. No responses were received from services users aged 46 or over.
	Disability: Six responses were received to the consultation from users identifying themselves as having some limiting form of disability. As a percentage of respondents this is broadly in line with the county average for respondents. The initial screening suggested the Marden catchment has a lower level of need than the Kent average in terms of working aged permanently sick/ disabled (by volume).

*All respondent numbers refer to users of Marden Children's Centre unless otherwise stated

	<p>Gender: A lower number of responses were received from males to the consultation for Marden than the county average.</p> <p>Gender identity: No respondents identified themselves as having a gender different to that at their birth.</p> <p>Race: The ethnicity of service users responding to the consultation are broadly comparable to those responding to the consultation countywide, with the majority of respondents identifying themselves as White British. This is comparable to Maidstone population statistics but shows slightly less levels of BME respondents compared to ethnicity data on registered users at Marden. However, it should also be noted that 25% of service users at Marden have declined to give their ethnic background.</p> <p>Religion or belief: A significantly higher percentage of respondents using Marden classified themselves as Christian than the county average. As such a significantly lower percentage of respondents classified themselves as having no religion. Less than five responses were received from services users with any other stated religion.</p> <p>Sexual orientation: The sexual orientation of service users responding to the consultation are broadly comparable to those responding to the consultation countywide, with the majority of respondents identifying themselves as heterosexual. Less than five responses were received from services users of any other sexual orientation.</p> <p>Pregnancy and maternity: 206 pregnant women responded to the consultation, of which 96% disagreed with proposals to reduce the number of Children’s Centres. Of these 26% stated that they would not use any other Children’s Centre were their local Centre to close. A wide variety of engagement activities were undertaken at groups linked with Marden with at least five aimed at pregnant mothers and those with new babies to ensure their views were gathered. (see Appendix B)</p> <p>Marriage and Civil Partnerships: A higher proportion of respondents from Marden were married, cohabiting or in a civil partnership than the county average. As such a lower proportion of single parents responded to the consultation than the county average. This confirms the presumption in the initial screening that lone parents are underrepresented amongst Marden services users.</p> <p>Carers responsibilities: Carer data was not gathered as part of the consultation activity</p>
<p>Actions required</p>	<ul style="list-style-type: none"> • Ensure male service users are engaged and services such as Dad’s groups are planned to ensure the group are not negatively affected by any changes to service delivery. • Ensure any BME groups are engaged and services are planned to ensure group are not negatively affected by changes to service delivery • Ensure users with a disability are engaged and services are planned and delivered at venues with sufficient access for adults and children with a disability • Engage service users of all religious beliefs to ensure any changes made as a result of the consultation are understood and services are planned as appropriate. • Ensure services for pregnant women are planned and delivered in areas of need so this target group continue to receive services required. • Ensure local lone parents are engaged with service redesign and are able to access services if they are relocated as a result of the consultation.

*All respondent numbers refer to users of Marden Children’s Centre unless otherwise stated

Previous judgement (02.07.13)	Medium impact
Revised judgement (31.10.13)	Medium impact (with a focus on Ethnicity and Religion and Belief)

*All respondent numbers refer to users of Marden Children's Centre unless otherwise stated

Appendix A: Marden full profile of respondents

*All respondent numbers refer to users of Marden Children's Centre unless otherwise stated

Profiles:

	User of...Marden - Maidstone			
	Use this Centre only		All users of this Centre	
Public				
Age: Under 20	1	3%	1	1%
Age: 20-25	3	10%	7	10%
Age: 36-30	1	3%	11	16%
Age: 31-35	12	39%	26	38%
Age: 36-40	8	26%	16	23%
Age: 41-45	4	13%	5	7%
Age: 46-50	0	0%	0	0%
Age: Over 50	0	0%	0	0%

Gender: Male	1	3%	2	3%
Gender: Female	27	87%	61	88%

EAL: No	25	81%	60	87%
EAL: Yes	1	3%	2	3%

Ethnicity: White British	23	74%	57	83%
Ethnicity: White Irish	1	3%	1	1%
Ethnicity: White Gypsy/Roma	1	3%	2	3%
Ethnicity: White Irish Traveller	0	0%	0	0%
Ethnicity: White Other	1	3%	1	1%
Ethnicity: Mixed White & Black Caribbean	0	0%	0	0%
Ethnicity: Mixed White & Black African	0	0%	0	0%
Ethnicity: Mixed White & Asian	0	0%	0	0%
Ethnicity: Mixed Other	0	0%	0	0%
Ethnicity: Arab	0	0%	0	0%
Ethnicity: Asian or Asian British Indian	0	0%	0	0%
Ethnicity: Asian or Asian British Pakistani	0	0%	0	0%
Ethnicity: Asian or Asian British Bangladeshi	0	0%	0	0%
Ethnicity: Asian Other	0	0%	1	1%
Ethnicity: Chinese	0	0%	0	0%
Ethnicity: Black or Black British Caribbean	0	0%	0	0%
Ethnicity: Black or Black British African	0	0%	0	0%
Ethnicity: Black Other	0	0%	0	0%
Ethnicity: Other	0	0%	0	0%

Religion: Christian	17	55%	41	59%
Religion: Buddhist	0	0%	0	0%
Religion: Hindu	0	0%	0	0%
Religion: Jewish	0	0%	0	0%
Religion: Muslim	0	0%	0	0%
Religion: Sikh	0	0%	0	0%
Religion: Other	1	3%	1	1%
Religion: None	8	26%	19	28%

Married/Civil Part/Cohabiting	24	77%	57	83%
Separated/Divorced/Widowed	0	0%	1	1%
Single	2	6%	4	6%

	User of...Marden - Maidstone			
	Use this Centre only		All users of this Centre	
Disability: Limited a lot	3	10%	3	4%
Disability: Limited a little	2	6%	3	4%
Disability: No	21	68%	55	80%

Sexuality: Bi/Bisexual	0	0%	0	0%
Sexuality: Heterosexual/Straight	24	77%	58	84%
Sexuality: Gay woman/Lesbian	0	0%	2	3%
Sexuality: Gay man	0	0%	0	0%
Sexuality: Other	0	0%	0	0%
Gender not the same as at birth	0	0%	0	0%

Base: Public - Use this Centre only (31), All users of this Centre (69)

**Equality Impact Assessment Initial Screening post-consultation update
Children's Centre: Maypole**

Location	Franklin Road, Dartford
Proposal	Closure
Rationale for proposal	<ul style="list-style-type: none"> • Selected as local solution • Located in an area of AVERAGE need (population) but second lowest level of need in Dartford District. • Second lowest level of usage in the Dartford District
Consultation Feedback Summary (questionnaires)	<p>Children's Centre. Of these 214 members of the public, 139 objected only to the closure of Maypole, with the proportion (at 65%) a lot higher than for the majority of the proposed closures.</p> <p>Around a third (34%) of the members of the public objecting to the proposed closure of Maypole indicate that they will not use Children's Centres at all as a result (which is much higher than the average across all objectors, of 26%). The most popular comments amongst those indicating that they 'will not use Children's Centres at all' as a result of the proposed closure of Maypole are:</p> <ul style="list-style-type: none"> • 'Centre is close by / easily accessible' – 28% • 'Very happy with my local centre / prefer it to others' – 27% • 'Will make travel to centres more difficult / alternative centres too distant' – 22% <p>A total of 126 users of Maypole Children's Centre (and 101 sole users) responded to the consultation, representing as many as 34% of all users of the Centre. The overwhelming majority (94%) disagree to some extent with this proposal. Of the sole users of Maypole objecting to the proposal, as many as 64% indicated that they 'will not use Children's Centres at all' as a result of the proposed closure.</p>
Conclusions from consultation evidence by protected characteristic	In comparison with all those responding to proposal one, those objecting to the closure of Maypole are slightly less likely to be lone parents and/or parents of children from low incomes.
	Age: A significantly higher percentage of respondents* were aged 31-35 from Maypole than the county average and a lower percentage of respondents were aged 20-25 from Maypole than the county average. No responses were received from services users aged under 20. This supports the initial screening assumptions that lower numbers of teenage parents might be affected as a result of the centre closing.
	Disability: Seven responses were received to the consultation from users identifying themselves as having some limiting form of disability. This is slightly higher than previous records suggest.
	Gender: The responses for gender were aligned with the county averages.

*All respondent numbers refer to users of Maypole Children's Centre unless otherwise stated

	<p>Gender identity: No respondents identified themselves as having a gender different to that at their birth.</p> <p>Race: The responses for race were aligned with the county average. The initial EqIA showed higher rates of BME than the consultation responses.</p> <p>Religion or belief: A higher percentage of respondents using Maypole classified themselves as Christian than the county average. A significantly lower percentage of respondents using Maypole classified themselves as no religion compared with the county average.</p> <p>Sexual orientation: The percentage of respondents using Maypole classified themselves as heterosexual this was in line the county average. Less than 5 responses were received from services users of any other sexual orientation.</p> <p>Pregnancy and maternity: 206 pregnant women responded to the consultation, of which 96% disagreed with proposals to reduce the number of Children’s Centres. Of these 26% stated that they would not use any other Children’s Centre were their local Centre to close.</p> <p>Marriage and Civil Partnerships: A significantly higher proportion of respondents from Maypole were married, cohabiting or in a civil partnership than the county average. As such a lower proportion of single parents responded to the consultation than the county average. This confirms the presumption in the initial screening that lone parents are underrepresented amongst Maypole services users.</p> <p>Carers responsibilities: Carer data was not gathered as part of the consultation activity</p>
Actions required	<ul style="list-style-type: none"> • Ensure any BME groups are engaged and services are planned to ensure group are not negatively affected by changes to service delivery as lower responses were received on the consultation than indicated by the initial EqIA • Ensure users with a disability are engaged and services are planned and delivered at venues with sufficient access for adults and children with a disability • Engage service users from other religions to ensure any changes made as a result of the consultation are understood and services are planned as appropriate. • Ensure services for pregnant women are planned and delivered in areas of need so this target group continue to receive services required. • Ensure local lone parents are engaged with service redesign and are able to access services if they are relocated as a result of the consultation.
Previous judgement 02.07.2013	Medium Impact
Revised judgement 29.10.2013	Medium Impact – respondents were not overall significantly different from that anticipated from the original EqIA.

*All respondent numbers refer to users of Maypole Children’s Centre unless otherwise stated

Appendix A: Maypole full profile of respondents

*All respondent numbers refer to users of Maypole Children's Centre unless otherwise stated

Profiles:

	User of...Maypole - Dartford			
	Use this Centre only		All users of this Centre	
Age: Under 20	0	0%	0	0%
Age: 20-25	6	6%	7	6%
Age: 36-30	14	14%	22	17%
Age: 31-35	41	41%	51	40%
Age: 36-40	17	17%	20	16%
Age: 41-45	12	12%	13	10%
Age: 46-50	2	2%	2	2%
Age: Over 50	6	6%	6	5%

Public

Gender: Male	12	12%	13	10%
Gender: Female	85	84%	108	86%

EAL: No	85	84%	109	87%
EAL: Yes	6	6%	6	5%

Ethnicity: White British	78	77%	99	79%
Ethnicity: White Irish	1	1%	1	1%
Ethnicity: White Gypsy/Roma	0	0%	0	0%
Ethnicity: White Irish Traveller	0	0%	0	0%
Ethnicity: White Other	3	3%	4	3%
Ethnicity: Mixed White & Black Caribbean	0	0%	0	0%
Ethnicity: Mixed White & Black African	0	0%	0	0%
Ethnicity: Mixed White & Asian	0	0%	0	0%
Ethnicity: Mixed Other	0	0%	0	0%
Ethnicity: Arab	0	0%	0	0%
Ethnicity: Asian or Asian British Indian	4	4%	5	4%
Ethnicity: Asian or Asian British Pakistani	0	0%	0	0%
Ethnicity: Asian or Asian British Bangladeshi	0	0%	0	0%
Ethnicity: Asian Other	0	0%	0	0%
Ethnicity: Chinese	2	2%	2	2%
Ethnicity: Black or Black British Caribbean	1	1%	1	1%
Ethnicity: Black or Black British African	1	1%	1	1%
Ethnicity: Black Other	0	0%	0	0%
Ethnicity: Other	2	2%	2	2%

Religion: Christian	55	54%	64	51%
Religion: Buddhist	0	0%	0	0%
Religion: Hindu	0	0%	0	0%
Religion: Jewish	0	0%	0	0%
Religion: Muslim	0	0%	0	0%
Religion: Sikh	3	3%	4	3%
Religion: Other	3	3%	4	3%
Religion: None	24	24%	34	27%

Married/Civil Part/Cohabiting	88	87%	111	88%
Separated/Divorced/Widowed	3	3%	4	3%
Single	2	2%	2	2%

	User of...Maypole - Dartford			
	Use this Centre only		All users of this Centre	
Disability: Limited a lot	3	3%	3	2%
Disability: Limited a little	3	3%	4	3%
Disability: No	84	83%	107	85%

Sexuality: Bi/Bisexual	2	2%	2	2%
Sexuality: Heterosexual/Straight	87	86%	111	88%
Sexuality: Gay woman/Lesbian	0	0%	0	0%
Sexuality: Gay man	0	0%	0	0%
Sexuality: Other	0	0%	0	0%
Gender not the same as at birth	0	0%	0	0%

Base: Public - Use this Centre only (101), All users of this Centre (126)

**Equality Impact Assessment Initial Screening post-consultation update
Children's Centre: Merry-Go-Round**

Location	Westerham, Sevenoaks
Proposal	Closure
Rationale for proposal	<ul style="list-style-type: none"> • Located in an area of low need (population) • 52% (190) of users attended another Children's Centre in Kent. Mainly Spring House, Edenbridge and Dunton Green.
Consultation Feedback Summary (questionnaires)	<p>A total of 51 members of the public and just 12 professionals objected to the closure of Merry-Go Round Children's Centre. Of these 51 members of the public, 20 objected only to the closure of Merry-Go Round.</p> <p>Almost a third (31%) of the members of the public objecting to the proposed closure of Merry-Go Round indicate that they will not use Children's Centres at all as a result (which is higher than the average across all objectors, of 26%).</p> <p>Only 22 users of Merry-Go Round Children's Centre (and 13 sole users) responded to the consultation, representing around 6% of all users of the Centre. The overwhelming majority (95%) disagree to some extent with this proposal. Of the 13 sole users of Merry-Go Round objecting to the proposal, 11 indicated that they 'will not use Children's Centres at all' as a result of the proposed closure.</p>
Conclusions from consultation evidence by protected characteristic	<p>In comparison with all those responding to proposal one, those objecting to the closure of Merry-Go Round are more likely to be lone parents and/or parents from ethnic minority groups.</p> <p>Age: A significantly lower percentage of respondents* were aged 20-25 from Merry-Go-Round than the county average and a lower percentage of respondents were aged 26-30 from Merry-Go-Round than the county average. No responses were received from services users aged under 20. A significantly higher percentage of respondents were aged 31-40 than the county average. This supports the initial screening assumptions that lower numbers of teenage parents might be affected as a result of the centre closing.</p> <p>Disability: Less than five responses were received to the consultation from users identifying themselves as having some limiting form of disability. As a percentage this is broadly in line with county responses but in terms of actual numbers seems to support the initial screening that identified that the Merry-Go-Round catchment has a lower level of need than the Kent average in terms of working aged permanently sick/ disabled (volume).</p> <p>Gender: A higher number of responses were received from females to the consultation for Merry-Go-Round than the county average.</p> <p>Gender identity: No respondents identified themselves as having a gender different to that at their birth.</p> <p>Race: A higher proportion of responses were received from White Other service users than the county average. This seems to support the initial screening assumption that White service users could be more affected by changes than other BME groups.</p> <p>Religion or belief: A significantly higher percentage of respondents using Merry-Go-Round classified themselves as Christian</p>

*All respondent numbers refer to users of Merry-Go-Round Children's Centre unless otherwise stated

	<p>than the county average. A lower percentage stated they had no religion and no responses were received from services users with any other stated religion.</p> <p>Sexual orientation: A higher percentage of respondents using Merry-Go-Round classified themselves as heterosexual than the county average. No responses were received from services users of any other sexual orientation.</p> <p>Pregnancy and maternity: 206 pregnant women responded to the consultation, of which 96% disagreed with proposals to reduce the number of Children's Centres. Of these 26% stated that they would not use any other Children's Centre were their local Centre to close.</p> <p>Marriage and Civil Partnerships: A higher proportion of respondents from Merry-Go-Round were married, cohabiting or in a civil partnership than the county average. As such a lower proportion of single parents responded to the consultation than the county average. This confirms the presumption in the initial screening that lone parents are underrepresented amongst Merry-Go-Round services users.</p> <p>Carers responsibilities: Carer data was not gathered as part of the consultation activity</p>
Actions required	<ul style="list-style-type: none"> • Ensure Young Parents are engaged with services and are not negatively affected by changes to service delivery. • Ensure any other White groups are engaged and services are planned to ensure group are not negatively affected by changes to service delivery • Engage service users from other religions to ensure any changes made as a result of the consultation are understood and services are planned as appropriate. Ensure Christian service users are not adversely affected by any proposed changes. • Ensure services for pregnant women are planned and delivered in areas of need so this target group continue to receive services required. • Ensure local lone parents are engaged with service redesign and are able to access services if they are relocated as a result of the consultation.
Previous judgement (02.07.13)	Medium impact
Revised judgement (04.11.13)	Medium impact

*All respondent numbers refer to users of Merry-Go-Round Children's Centre unless otherwise stated

Appendix A: Merry-Go-Round full profile of respondents

*All respondent numbers refer to users of Merry-Go-Round Children’s Centre unless otherwise stated

Profiles:

User of...Merry-Go-Round - Sevenoaks & Swanley				
	Use this Centre only		All users of this Centre	
Age: Under 20	0	0%	0	0%
Age: 20-25	0	0%	0	0%
Age: 36-30	1	8%	3	14%
Age: 31-35	8	62%	9	41%
Age: 36-40	4	31%	8	36%
Age: 41-45	0	0%	2	9%
Age: 46-50	0	0%	0	0%
Age: Over 50	0	0%	0	0%

Public

Gender: Male	0	0%	1	5%
Gender: Female	13	100%	21	95%

EAL: No	11	85%	20	91%
EAL: Yes	1	8%	1	5%

Ethnicity: White British	11	85%	19	86%
Ethnicity: White Irish	0	0%	0	0%
Ethnicity: White Gypsy/Roma	0	0%	0	0%
Ethnicity: White Irish Traveller	0	0%	0	0%
Ethnicity: White Other	1	8%	2	9%
Ethnicity: Mixed White & Black Caribbean	0	0%	0	0%
Ethnicity: Mixed White & Black African	0	0%	0	0%
Ethnicity: Mixed White & Asian	0	0%	0	0%
Ethnicity: Mixed Other	0	0%	0	0%
Ethnicity: Arab	0	0%	0	0%
Ethnicity: Asian or Asian British Indian	0	0%	0	0%
Ethnicity: Asian or Asian British Pakistani	0	0%	0	0%
Ethnicity: Asian or Asian British Bangladeshi	0	0%	0	0%
Ethnicity: Asian Other	0	0%	0	0%
Ethnicity: Chinese	0	0%	0	0%
Ethnicity: Black or Black British Caribbean	0	0%	0	0%
Ethnicity: Black or Black British African	0	0%	0	0%
Ethnicity: Black Other	0	0%	0	0%
Ethnicity: Other	0	0%	0	0%

Religion: Christian	6	46%	13	59%
Religion: Buddhist	0	0%	0	0%
Religion: Hindu	0	0%	0	0%
Religion: Jewish	0	0%	0	0%
Religion: Muslim	0	0%	0	0%
Religion: Sikh	0	0%	0	0%
Religion: Other	0	0%	0	0%
Religion: None	5	38%	7	32%

Married/Civil Part/Cohabiting	11	85%	18	82%
Separated/Divorced/Widowed	0	0%	2	9%
Single	1	8%	1	5%

User of...Merry-Go-Round - Sevenoaks & Swanley				
	Use this Centre only		All users of this Centre	
Disability: Limited a lot	0	0%	0	0%
Disability: Limited a little	1	8%	2	9%
Disability: No	11	85%	19	86%

Sexuality: Bi/Bisexual	0	0%	0	0%
Sexuality: Heterosexual/Straight	11	85%	20	91%
Sexuality: Gay woman/Lesbian	0	0%	0	0%
Sexuality: Gay man	0	0%	0	0%
Sexuality: Other	0	0%	0	0%
Gender not the same as at birth	0	0%	0	0%

Base: Public - Use this Centre only (13), All users of this Centre (22)

**Equality Impact Assessment Initial Screening post-consultation update
Children's Centre: Pembury**

Location	Pembury, Tunbridge Wells
Proposal	Closure
Rationale for proposal	<ul style="list-style-type: none"> • Selected as local solution • Located in an area of low need (population) • 52% (95) of users also attended another Children's Centre in Kent.
Consultation Feedback Summary (questionnaires)	<p>A total of 82 members of the public and just 8 professionals objected to the closure of Pembury Children's Centre. Of these 82 members of the public, 42 objected only to the closure of Pembury.</p> <p>Just 17% of the members of the public objecting to the proposed closure of Pembury indicate that they will not use Children's Centres at all as a result (which is much lower than the average across all objectors, of 26%).</p> <p>A total of 33 users of Pembury Children's Centre (and 21 sole users) responded to the consultation, representing around 19% of all users of the Centre. The overwhelming majority (94%) disagree to some extent with this proposal. Of the 20 sole users of Pembury objecting to the proposal, 8 indicated that they 'will not use Children's Centres at all' as a result of the proposed closure.</p>
Conclusions from consultation evidence by protected characteristic	<p>General: In comparison with all those responding to proposal one, those objecting to the closure of Pembury are more likely to be lone parents and/or parents from ethnic minority groups, but less likely to be parents of children from low incomes.</p> <p>Age: A higher percentage of respondents were aged 31- 35 and over 50 from Pembury than the county average. A lower percentage of respondents were aged 20 - 25 from Pembury than the county average. No responses were received from services users aged under 20 and between 46 - 50. Need analysis (as set out in the initial screening) identified that the Pembury catchment area has a lower level of need in terms of teenage pregnancy. 17 consultation events were held at the centre or at other locations in Pembury, with other 200 parents/families attending. It is expected that parents would come from a broad and mixed age range.</p> <p>Disability: Less than five responses were received to the consultation from users identifying themselves as having some limiting form of disability. Centre records for September 2012 showed that no users were recorded as having a disability.</p> <p>Gender: A significantly higher number of responses were received from females to the consultation for Pembury than the county average. There was local consultation with fathers at the Dads group during the consultation.</p> <p>Gender identity: No respondents identified themselves as having a gender different to that at their birth.</p> <p>Race: Less than five responses were received from BME groups. Information from the initial screening indicates 8% of users at Pembury were BME although the data also identifies that 25% chose not to record their ethnicity. This tends to suggest that there was a lower level of responses from users of the centre were from BME groups. However, 17 consultation events were</p>

*All respondent numbers refer to users of Pembury Children's Centre unless otherwise stated

	<p>held at the centre or at other locations in Pembury, with over 200 parents/families attending. It is expected that some parents/families attending were from different ethnic groups.</p> <p>Religion or belief: A significantly higher percentage of respondents using Pembury classified themselves as Christian than the county average. A lower percentage of respondents using Pembury classified themselves as having no religion. No responses were received from services users who were Buddhist, Hindu, Jewish, Muslim or Sikh.</p> <p>Sexual orientation: No responses were received from services users who were bisexual, lesbian or gay.</p> <p>Pregnancy and maternity: 206 pregnant women responded to the consultation, of which 96% disagreed with proposals to reduce the number of Children's Centres. Of these 26% stated that they would not use any other Children's Centre were their local Centre to close. Three consultation events were held at the centre with new parents.</p> <p>Marriage and Civil Partnerships: A significantly higher proportion of respondents from Pembury were separated, divorced or widowed than the county average. 17 consultation events were held at the centre or at other locations in Pembury, with over 200 parents/families attending. It is expected that parents attending the events would cover a broad and mixed range in terms of marital status.</p> <p>Carers responsibilities: Carer data was not gathered as part of the consultation activity</p>
Actions required	<ul style="list-style-type: none"> • Improved data collection for disability, race, religion and sexuality. • Ensure any BME groups are engaged and services are planned to ensure group are not negatively affected by changes to service delivery • Ensure users with a disability are engaged and services are planned and delivered at venues with sufficient access for adults and children with a disability • Engage service users from other religions to ensure any changes made as a result of the consultation are understood and services are planned as appropriate. • Ensure services for pregnant women are planned and delivered in areas of need so this target group continue to receive services required. • Ensure young and lone parents are engaged with service redesign and are able to access services if they are relocated as a result of the consultation.
Previous judgement (02/07/13)	Medium impact
Revised judgement (30/10/13)	Medium impact

*All respondent numbers refer to users of Pembury Children's Centre unless otherwise stated

Appendix A: Pembury full profile of respondents

*All respondent numbers refer to users of Pembury Children's Centre unless otherwise stated

Profiles:

	User of...Pembury - Tunbridge Wells			
	Use this Centre only		All users of this Centre	
Age: Under 20	0	0%	0	0%
Age: 20-25	2	10%	2	6%
Age: 36-30	4	19%	6	18%
Age: 31-35	6	29%	12	36%
Age: 36-40	3	14%	5	15%
Age: 41-45	2	10%	2	6%
Age: 46-50	0	0%	0	0%
Age: Over 50	4	19%	4	12%

Public

Gender: Male	1	5%	1	3%
Gender: Female	20	95%	32	97%

EAL: No	21	100%	33	100%
EAL: Yes	0	0%	0	0%

Ethnicity: White British	17	81%	28	85%
Ethnicity: White Irish	0	0%	0	0%
Ethnicity: White Gypsy/Roma	0	0%	0	0%
Ethnicity: White Irish Traveller	0	0%	0	0%
Ethnicity: White Other	2	10%	2	6%
Ethnicity: Mixed White & Black Caribbean	0	0%	0	0%
Ethnicity: Mixed White & Black African	0	0%	0	0%
Ethnicity: Mixed White & Asian	1	5%	1	3%
Ethnicity: Mixed Other	0	0%	0	0%
Ethnicity: Arab	0	0%	0	0%
Ethnicity: Asian or Asian British Indian	0	0%	0	0%
Ethnicity: Asian or Asian British Pakistani	1	5%	1	3%
Ethnicity: Asian or Asian British Bangladeshi	0	0%	0	0%
Ethnicity: Asian Other	0	0%	0	0%
Ethnicity: Chinese	0	0%	0	0%
Ethnicity: Black or Black British Caribbean	0	0%	0	0%
Ethnicity: Black or Black British African	0	0%	0	0%
Ethnicity: Black Other	0	0%	0	0%
Ethnicity: Other	0	0%	0	0%

Religion: Christian	11	52%	18	55%
Religion: Buddhist	0	0%	0	0%
Religion: Hindu	0	0%	0	0%
Religion: Jewish	0	0%	0	0%
Religion: Muslim	0	0%	0	0%
Religion: Sikh	0	0%	0	0%
Religion: Other	0	0%	0	0%
Religion: None	8	38%	11	33%

Married/Civil Part/Cohabiting	15	71%	25	76%
Separated/Divorced/Widowed	3	14%	4	12%
Single	3	14%	3	9%

	User of...Pembury - Tunbridge Wells			
	Use this Centre only		All users of this Centre	
Disability: Limited a lot	0	0%	0	0%
Disability: Limited a little	0	0%	1	3%
Disability: No	18	86%	28	85%

Sexuality: Bi/Bisexual	0	0%	0	0%
Sexuality: Heterosexual/Straight	20	95%	29	88%
Sexuality: Gay woman/Lesbian	0	0%	0	0%
Sexuality: Gay man	0	0%	0	0%
Sexuality: Other	0	0%	0	0%
Gender not the same as at birth	0	0%	0	0%

Base: Public - Use this Centre only (21), All users of this Centre (33)

**Equality Impact Assessment Initial Screening post-consultation update
Children's Centre: Samphire**

Location	Aycliffe, Dover
Proposal	Part Time
Rationale for proposal	<ul style="list-style-type: none"> Local solution. 62% (449 users) also attended another Children's Centre in Kent.
Consultation Feedback Summary (questionnaires)	<p>A total of 139 members of the public and 15 professionals objected to the reduction in opening hours at Samphire Children's Centre. Of these 139 members of the public, 94 objected only to the reduction in opening hours at Samphire.</p> <p>Around 1 in 8 (12%) of the members of the public objecting to the proposed reduction in opening hours at Samphire indicate that they will not use Children's Centres at all as a result (which is similar to the average across all objectors).</p> <p>A total of 64 users of Samphire Children's Centre (and 31 sole users) responded to the consultation, representing around 10% of all users of the Centre. The vast majority (85%) disagree to some extent with this proposal. Of the sole users of Samphire responding to the consultation, 25% (7 individuals) indicated that they 'will not use Children's Centres at all' as a result of the proposed reduction in opening hours.</p>
Conclusions from consultation evidence by protected characteristic	<p>General: In comparison with all those objecting to proposal 3, those objecting to the reduction in opening hours at Samphire are more likely to be lone parents and/or parents with children from low incomes.</p> <p>Age: A significantly higher percentage of respondents* were aged 25 – 35 from Samphire than the county average. There was a significantly lower percentage of respondents aged 36 – 40 from Samphire than the county average. No responses were received from services users aged under 20. Needs analysis for the centre (as set out in the initial screening) indicate that there is a higher level of need in terms of teenage pregnancy than the county average. However, there were two consultation events for Young Active Parents at a nearby centre where this provision is held. Two consultation events took place at Samphire. It is expected that parents attending the events would represent a broad and mixed age range.</p> <p>Disability: Less than five responses were received to the consultation from users identifying themselves as having some limiting form of disability. Registration data for the centre for September 2012 showed that less than 5 service users had a disability..</p> <p>Gender: The proportion of responses received from both females and males to the consultation for Samphire was in line with the county average.</p> <p>Gender identity: No respondents identified themselves as having a gender different to that at their birth.</p> <p>Race: A lower number of responses were received from White British service users than the county average. Less than 5 responses were received from other White groups and less than five responses were received from BME groups. This appears to be in line with registration data at the centre although ethnicity is not recorded for 25% of service users at Samphire. Consultation activity included a meeting with professionals from the Migrant Helpline.</p>

*All respondent numbers refer to users of Samphire Children's Centre unless otherwise stated

	<p>Religion or belief: A lower percentage of respondents using Samphire classified themselves as Christian than the county average. Five responses were received from service users who were Muslim or who classified themselves as having another religion. No responses were received from services users who were Buddhist, Hindu or Jewish.</p> <p>Sexual orientation: A lower percentage of respondents using Samphire classified themselves as heterosexual than the county average. Less than 5 responses were received from services users who classified themselves as having another sexual orientation.</p> <p>Pregnancy and maternity: 206 pregnant women responded to the consultation, of which 96% disagreed with proposals to reduce the number of Children’s Centres. Of these 26% stated that they would not use any other Children’s Centre were their local Centre to close. Two consultation events took place at Samphire. It is expected that some parents attending the events would be pregnant or nursing mothers.</p> <p>Marriage and Civil Partnerships: A lower proportion of respondents from Samphire were married, cohabiting or in a civil partnership that the county average. Information on service users at Samphire (as set out in the initial screening) identified that 24% are lone parents on low income and 19% are lone parents living in high crime areas on large social housing estates. Two consultation events took place at Samphire. It is likely that parents attending the events would reflect a broad and mixed range relating to marital status.</p> <p>Carers responsibilities: Carer data was not gathered as part of the consultation activity</p>
Actions required	<ul style="list-style-type: none"> • Improve data collection for race, religion and sexuality. • Ensure any BME groups are engaged and services are planned to ensure group are not negatively affected by changes to service delivery • Ensure users with a disability are engaged and services are planned and delivered at venues with sufficient access for adults and children with a disability • Engage service users from other religions to ensure any changes made as a result of the consultation are understood and services are planned as appropriate. • Ensure services for pregnant women are planned and delivered in areas of need so this target group continue to receive services required. • Ensure young and lone parents are engaged with service redesign and are able to access services if they are relocated as a result of the consultation.
Previous judgement (02/07/13)	Medium impact
Revised judgement (30/10/13)	Medium impact

*All respondent numbers refer to users of Samphire Children’s Centre unless otherwise stated

Appendix A: Samphire full profile of respondents

*All respondent numbers refer to users of Samphire Children's Centre unless otherwise stated

Profiles:

User of...Sapphire - Dover				
	Use this Centre only		All users of this Centre	
Age: Under 20	0	0%	0	0%
Age: 20-25	3	10%	10	16%
Age: 36-30	16	52%	25	39%
Age: 31-35	7	23%	15	23%
Age: 36-40	0	0%	4	6%
Age: 41-45	1	3%	3	5%
Age: 46-50	0	0%	1	2%
Age: Over 50	4	13%	4	6%

Public

Gender: Male	3	10%	6	9%
Gender: Female	27	87%	56	88%

EAL: No	23	74%	52	81%
EAL: Yes	4	13%	6	9%

Ethnicity: White British	22	71%	50	78%
Ethnicity: White Irish	1	3%	1	2%
Ethnicity: White Gypsy/Roma	1	3%	1	2%
Ethnicity: White Irish Traveller	0	0%	0	0%
Ethnicity: White Other	1	3%	2	3%
Ethnicity: Mixed White & Black Caribbean	0	0%	0	0%
Ethnicity: Mixed White & Black African	0	0%	0	0%
Ethnicity: Mixed White & Asian	0	0%	0	0%
Ethnicity: Mixed Other	0	0%	0	0%
Ethnicity: Arab	1	3%	1	2%
Ethnicity: Asian or Asian British Indian	1	3%	1	2%
Ethnicity: Asian or Asian British Pakistani	0	0%	0	0%
Ethnicity: Asian or Asian British Bangladeshi	0	0%	0	0%
Ethnicity: Asian Other	0	0%	0	0%
Ethnicity: Chinese	0	0%	0	0%
Ethnicity: Black or Black British Caribbean	0	0%	0	0%
Ethnicity: Black or Black British African	0	0%	0	0%
Ethnicity: Black Other	0	0%	0	0%
Ethnicity: Other	0	0%	1	2%

Religion: Christian	10	32%	24	38%
Religion: Buddhist	0	0%	0	0%
Religion: Hindu	0	0%	0	0%
Religion: Jewish	0	0%	0	0%
Religion: Muslim	1	3%	3	5%
Religion: Sikh	0	0%	0	0%
Religion: Other	2	6%	2	3%
Religion: None	13	42%	27	42%

Married/Civil Part/Cohabiting	19	61%	44	69%
Separated/Divorced/Widowed	3	10%	5	8%
Single	5	16%	9	14%

User of...Sapphire - Dover				
	Use this Centre only		All users of this Centre	
Disability: Limited a lot	1	3%	2	3%
Disability: Limited a little	1	3%	1	2%
Disability: No	20	65%	50	78%

Sexuality: Bi/Bisexual	0	0%	0	0%
Sexuality: Heterosexual/Straight	25	81%	52	81%
Sexuality: Gay woman/Lesbian	0	0%	0	0%
Sexuality: Gay man	0	0%	0	0%
Sexuality: Other	1	3%	1	2%
Gender not the same as at birth	0	0%	0	0%

Base: Public - Use this Centre only (31), All users of this Centre (64)

**Equality Impact Assessment Initial Screening post-consultation update
Children's Centre: Squirrel Lodge**

Location	Furley Park, Ashford
Proposal	Closure
Rationale for proposal	<ul style="list-style-type: none"> • Located in an area of low need (population) • 70% (303) of users also attended another Children's Centre in Kent.
Consultation Feedback Summary (questionnaires)	<p>A total of 126 members of the public and 16 professionals objected to the closure of Squirrel Lodge Children's Centre. Of these 126 members of the public, 47 objected only to the closure of Squirrel Lodge, with the majority objecting to other Centre closures as well.</p> <p>Those members of the public who did object to the closure of Squirrel Lodge appear to be very similar in terms of their profile to all those responding to the public consultation questionnaire.</p> <p>Amongst this group, 17% (21 individuals) indicate that they will not use Children's Centres at all as a result of the proposed closure. A number of the open-ended comments are in praise of this particular Centre, but the key issue appears to be transport and accessibility.</p> <p>A total of 37 users of Squirrel Lodge (and 12 sole users) responded to the consultation, representing around 9% of all users of the Centre. The overwhelming majority (95%) disagree to some extent with this proposal. Of the 12 sole users of Squirrel Lodge responding to the consultation, 8 indicated that they 'will not use Children's Centres at all' as a result of the proposed closure.</p>
Conclusions from consultation evidence by protected characteristic	<p>Those members of the public who did object to the closure of Squirrel Lodge appear to be very similar in terms of their profile to all those responding to the public consultation questionnaire.</p> <p>Age: A significantly higher percentage of respondents were aged 36-40 from Squirrel Lodge than the county average and a higher percentage of respondents were aged 41-45 from Squirrel Lodge than the county average. No responses were received from services users aged under 25. This supports the initial screening assumptions that lower numbers of teenage parents might be affected as a result of the centre closing.</p> <p>Disability: Less than five responses were received to the consultation from users identifying themselves as having some limiting form of disability. This is broadly in line with information gathered in the initial screening.</p> <p>Gender: A significantly higher number of responses were received from males to the consultation for Squirrel Lodge than the county average and as such a lower number of responses were received from females.</p> <p>Gender identity: No respondents identified themselves as having a gender different to that at their birth.</p> <p>Race: The ethnicity of service users responding to the consultation are broadly comparable to those responding to the consultation countywide and are comparative to District figures</p>

*All respondent numbers refer to users of Squirrel Lodge Children's Centre unless otherwise stated

	<p>Religion or belief: A significantly higher percentage of respondents using Squirrel Lodge classified themselves as Christian than the county average and a lower percentage of respondents stated they had no religion than the county average. Less than five responses were received from service users from other religions.</p>
	<p>Sexual orientation: A significantly higher percentage of respondents using Squirrel Lodge classified themselves as heterosexual than the county average. No responses were received from services users of any other sexual orientation.</p>
	<p>Pregnancy and maternity: 206 pregnant women responded to the consultation, of which 96% disagreed with proposals to reduce the number of Children’s Centres. Of these 26% stated that they would not use any other Children’s Centre were their local Centre to close. Engagement activities were undertaken at groups linked with Squirrel Lodges attended by pregnant mothers and those with new babies to ensure their views were gathered. (see Appendix B)</p>
	<p>Marriage and Civil Partnerships: A significantly higher proportion of respondents from Squirrel Lodge were married, cohabiting or in a civil partnership that the county average. As such a lower proportion of single parents responded to the consultation than the county average.</p>
	<p>Carers responsibilities: Carer data was not gathered as part of the consultation activity</p>
<p>Actions required</p>	<ul style="list-style-type: none"> • Ensure young parents and teenage parents are engaged and services are planned to ensure group are not negatively affected by changes to service delivery • Engage service users from other religions to ensure any changes made as a result of the consultation are understood and services are planned as appropriate. • Engage service users of all sexual orientations to ensure any changes made as a result of the consultation are understood. • Ensure services for pregnant women are planned and delivered in areas of need so this target group continue to receive services required. • Ensure local lone parents are engaged with service redesign and are able to access services if they are relocated as a result of the consultation.
<p>Previous judgement (01.07.13)</p>	<p>Medium impact</p>
<p>Revised judgement (31.10.13)</p>	<p>Medium impact (with regard to religion or belief, sexual orientation and lone parents)</p>

*All respondent numbers refer to users of Squirrel Lodge Children’s Centre unless otherwise stated

Appendix A: Squirrel Lodge full profile of respondents

*All respondent numbers refer to users of Squirrel Lodge Children’s Centre unless otherwise stated

Profiles:

	User of...Squirrel Lodge - Ashford			
	Use this Centre only		All users of this Centre	
Age: Under 20	0	0%	0	0%
Age: 20-25	0	0%	0	0%
Age: 36-30	2	17%	7	18%
Age: 31-35	5	42%	16	41%
Age: 36-40	3	25%	8	21%
Age: 41-45	2	17%	6	15%
Age: 46-50	0	0%	1	3%
Age: Over 50	1	8%	1	3%

Public

Gender: Male	3	25%	7	18%
Gender: Female	8	67%	31	79%

EAL: No	10	83%	35	90%
EAL: Yes	1	8%	3	8%

Ethnicity: White British	9	75%	32	82%
Ethnicity: White Irish	0	0%	0	0%
Ethnicity: White Gypsy/Roma	0	0%	1	3%
Ethnicity: White Irish Traveller	0	0%	0	0%
Ethnicity: White Other	1	8%	3	8%
Ethnicity: Mixed White & Black Caribbean	0	0%	0	0%
Ethnicity: Mixed White & Black African	0	0%	0	0%
Ethnicity: Mixed White & Asian	0	0%	0	0%
Ethnicity: Mixed Other	0	0%	0	0%
Ethnicity: Arab	0	0%	1	3%
Ethnicity: Asian or Asian British Indian	1	8%	1	3%
Ethnicity: Asian or Asian British Pakistani	0	0%	0	0%
Ethnicity: Asian or Asian British Bangladeshi	0	0%	0	0%
Ethnicity: Asian Other	0	0%	0	0%
Ethnicity: Chinese	1	8%	1	3%
Ethnicity: Black or Black British Caribbean	0	0%	0	0%
Ethnicity: Black or Black British African	0	0%	0	0%
Ethnicity: Black Other	0	0%	0	0%
Ethnicity: Other	0	0%	0	0%

Religion: Christian	7	58%	23	59%
Religion: Buddhist	0	0%	0	0%
Religion: Hindu	0	0%	0	0%
Religion: Jewish	0	0%	0	0%
Religion: Muslim	0	0%	1	3%
Religion: Sikh	0	0%	0	0%
Religion: Other	0	0%	0	0%
Religion: None	4	33%	13	33%

Married/Civil Part/Cohabiting	12	100%	35	90%
Separated/Divorced/Widowed	0	0%	3	8%
Single	0	0%	1	3%

	User of...Squirrel Lodge - Ashford			
	Use this Centre only		All users of this Centre	
Disability: Limited a lot	0	0%	1	3%
Disability: Limited a little	0	0%	3	8%
Disability: No	12	100%	32	82%

Sexuality: Bi/Bisexual	0	0%	0	0%
Sexuality: Heterosexual/Straight	12	100%	38	97%
Sexuality: Gay woman/Lesbian	0	0%	0	0%
Sexuality: Gay man	0	0%	0	0%
Sexuality: Other	0	0%	0	0%
Gender not the same as at birth	0	0%	0	0%

Base: Public - Use this Centre only (12), All users of this Centre (39)

**Equality Impact Assessment Initial Screening post-consultation update
Children's Centre: St. Mary's**

Location	Faversham, Swale
Proposal	Closure
Rationale for proposal	<ul style="list-style-type: none"> • 51% (459) of users also attended another Children's Centre in Kent. Mainly Bysing Wood. • There is another KCC facility (a library) within 800m. The library already registers child births and has an area that could be used to deliver some other Children's Centre services.
Consultation Feedback Summary (questionnaires)	<p>A total of 459 members of the public and 48 professionals objected to the closure of St Mary's Children's Centre. Of these 459 members of the public, 376 objected only to the closure of St Mary's, with the proportion (at 82%) far higher than for the majority of the proposed closures.</p> <p>A third (33%) of the members of the public objecting to the proposed closure of St Mary's indicate that they will not use Children's Centres at all as a result (which is higher than the average across all objectors, of 26%). The most popular comments amongst those indicating that they 'will not use Children's Centres at all' as a result of the proposed closure of St Mary's are very much dominated by the issue of travel/accessibility:</p> <ul style="list-style-type: none"> • 'Will make travel to centres more difficult / alternative centres too distant' – 46% • 'Centre is close by / easily accessible' – 29% • 'Bad for people without cars / non-drivers' – 18% • 'Children's centres form a local community hub / chance to meet people' – 13% <p>A total of 393 users of St Mary's Children's Centre (and 226 sole users) responded to the consultation, representing as many as 38% of all users of the Centre. The overwhelming majority (98%) disagree to some extent with this proposal. Of the sole users of St Mary's objecting to the proposal, just over half (54%) indicated that they 'will not use Children's Centres at all' as a result of the proposed closure.</p>
Conclusions from consultation evidence by protected characteristic	<p>In comparison with all those responding to proposal one, those objecting to the closure of St Mary's are more likely to be parents of children from low incomes. In comparison with all those responding in a professional capacity, those objecting to the closure of St Mary's are <u>much</u> more likely to be categorised as 'other Health' (i.e. health excluding Health Visitors and midwives).</p> <p>Age: The age profile of service users responding to the consultation are broadly comparable to those responding to the consultation countywide.</p> <p>Disability: Twenty responses were received to the consultation from users identifying themselves as having some limiting form of disability. Responses from St Mary's service users regarding disability were broadly in line with county figures.</p> <p>Gender: The gender of service users responding to the consultation are broadly comparable to those responding to the</p>

*All respondent numbers refer to users of St Mary's Children's Centre unless otherwise stated

	consultation countywide.
	Gender identity: No respondents identified themselves as having a gender different to that at their birth.
	Race: The race of service users responding to the consultation are broadly comparable to those responding to the consultation countywide.
	Religion or belief: A lower percentage of respondents using St Mary's classified themselves as Christian than the county average. Other responses received were broadly in line with county averages.
	Sexual orientation: The sexual orientation of service users responding to the consultation are broadly comparable to those responding to the consultation countywide.
	Pregnancy and maternity: 206 pregnant women responded to the consultation, of which 96% disagreed with proposals to reduce the number of Children's Centres. Of these 26% stated that they would not use any other Children's Centre were their local Centre to close. Engagement activities were undertaken at groups linked with St Mary's attended by pregnant mothers and those with new babies to ensure their views were gathered. (see Appendix B)
	Marriage and Civil Partnerships: The marital status of service users responding to the consultation are broadly comparable to those responding to the consultation countywide. Engagement activities indicate that lone parents were engaged during the consultation period (Appendix B).
	Carers responsibilities: Carer data was not gathered as part of the consultation activity
Actions required	<ul style="list-style-type: none"> • Ensure users with a disability are engaged and services are planned and delivered at venues with sufficient access for adults and children with a disability • Engage service users from all religions to ensure any changes made as a result of the consultation are understood and services are planned as appropriate. • Ensure services for pregnant women are planned and delivered in areas of need so this target group continue to receive services required.
Previous judgement (02.07.13)	Medium impact
Revised judgement (04.11.13)	Medium impact

*All respondent numbers refer to users of St Mary's Children's Centre unless otherwise stated

Appendix A: St Mary's full profile of respondents

*All respondent numbers refer to users of St Mary's Children's Centre unless otherwise stated

Profiles:

User of...St. Mary's - Swale

User of...St. Mary's - Swale

Public

	Use this Centre only		All users of this Centre	
Age: Under 20	12	5%	16	4%
Age: 20-25	28	12%	44	11%
Age: 36-30	50	22%	95	24%
Age: 31-35	61	27%	123	31%
Age: 36-40	41	18%	63	16%
Age: 41-45	13	6%	25	6%
Age: 46-50	9	4%	10	3%
Age: Over 50	10	4%	10	3%

Gender: Male	18	8%	36	9%
Gender: Female	203	90%	349	89%

EAL: No	191	85%	344	88%
EAL: Yes	19	8%	23	6%

Ethnicity: White British	183	81%	331	84%
Ethnicity: White Irish	1	0%	2	1%
Ethnicity: White Gypsy/Roma	1	0%	1	0%
Ethnicity: White Irish Traveller	0	0%	0	0%
Ethnicity: White Other	16	7%	20	5%
Ethnicity: Mixed White & Black Caribbean	1	0%	1	0%
Ethnicity: Mixed White & Black African	1	0%	1	0%
Ethnicity: Mixed White & Asian	2	1%	3	1%
Ethnicity: Mixed Other	1	0%	3	1%
Ethnicity: Arab	0	0%	0	0%
Ethnicity: Asian or Asian British Indian	1	0%	1	0%
Ethnicity: Asian or Asian British Pakistani	0	0%	0	0%
Ethnicity: Asian or Asian British Bangladeshi	0	0%	0	0%
Ethnicity: Asian Other	0	0%	1	0%
Ethnicity: Chinese	0	0%	0	0%
Ethnicity: Black or Black British Caribbean	0	0%	0	0%
Ethnicity: Black or Black British African	1	0%	1	0%
Ethnicity: Black Other	0	0%	1	0%
Ethnicity: Other	0	0%	1	0%

Religion: Christian	90	40%	159	40%
Religion: Buddhist	2	1%	2	1%
Religion: Hindu	1	0%	2	1%
Religion: Jewish	1	0%	2	1%
Religion: Muslim	0	0%	0	0%
Religion: Sikh	0	0%	0	0%
Religion: Other	3	1%	4	1%
Religion: None	95	42%	170	43%

Married/Civil Part/Cohabiting	160	71%	285	73%
Separated/Divorced/Widowed	16	7%	21	5%
Single	32	14%	61	16%

	Use this Centre only		All users of this Centre	
Disability: Limited a lot	2	1%	4	1%
Disability: Limited a little	8	4%	16	4%
Disability: No	192	85%	340	87%

Sexuality: Bi/Bisexual	2	1%	4	1%
Sexuality: Heterosexual/Straight	192	85%	342	87%
Sexuality: Gay woman/Lesbian	1	0%	2	1%
Sexuality: Gay man	0	0%	0	0%
Sexuality: Other	3	1%	3	1%
Gender not the same as at birth	0	0%	0	0%

Base: Public - Use this Centre only (226), All users of this Centre (393)

**Equality Impact Assessment Initial Screening post-consultation update
Children's Centre: Swalecliffe**

Location	Faversham, Swale
Proposal	Closure
Rationale for proposal	<ul style="list-style-type: none"> • Selected as local solution • Located in an area of low need (population) • 78% (317) of users also attended another Children's Centre in Kent.
Consultation Feedback Summary (questionnaires)	<p>A total of 232 members of the public and 29 professionals objected to the closure of Swalecliffe Children's Centre. Of these 118 members of the public, 63 objected only to the closure of Swalecliffe.</p> <p>Around a quarter (26%) of the members of the public objecting to the proposed closure of Swalecliffe indicate that they will not use Children's Centres at all as a result (which is the same as the average across all objectors). The most popular comments amongst those indicating that they 'will not use Children's Centres at all' as a result of the proposed closure of Swalecliffe are:</p> <ul style="list-style-type: none"> • 'Will make travel to centres more difficult / alternative centres too distant' – 34% • 'Bad for people without cars / non-drivers' – 14% • 'Children's centres are necessary / important resources / a lifeline' – 14% <p>A total of 153 users of Swalecliffe Children's Centre (and 59 sole users) responded to the consultation, representing around 36% of all users of the Centre. The overwhelming majority (98%) disagree to some extent with this proposal. Of the sole users of Swalecliffe objecting to the proposal, 68% (40 individuals) indicated that they 'will not use Children's Centres at all' as a result of the proposed closure.</p>
Conclusions from consultation evidence by protected characteristic	<p>In comparison with all those responding to proposal one, those objecting to the closure of Swalecliffe are more likely to be parents aged over 35, and less likely to be parents with children from low incomes.</p> <p>Age: A higher percentage of respondents were aged 36-40 from Swalecliffe than the county average. All other responses by age were broadly in line with the overall county average responses. No responses were received from services users aged under 20. This supports the initial screening assumptions that lower numbers of teenage parents might be affected as a result of the centre closing.</p> <p>Disability: Five responses were received to the consultation from users identifying themselves as having some limiting form of disability. This is comparable with the overall county responses.</p> <p>Gender: The gender of service users responding to the consultation are broadly comparable to those responding to the consultation countywide.</p> <p>Gender identity: No respondents identified themselves as having a gender different to that at their birth.</p>

*All respondent numbers refer to users of Swalecliffe Children's Centre unless otherwise stated

	<p>Race: The ethnicity of service users responding to the consultation are broadly comparable to those responding to the consultation countywide. 11% of responses were received from non-White British respondents, which is line with District data gathered for the initial screening.</p> <p>Religion or belief: A higher percentage of respondents using Swalecliffe classified themselves as Christian than the county average and conversely a lower percentage of respondents stated they had no religion than the county average.</p> <p>Sexual orientation: The gender of service users responding to the consultation are broadly comparable to those responding to the consultation countywide. Less than 5 responses were received from services users of any other sexual orientation.</p> <p>Pregnancy and maternity: 206 pregnant women responded to the consultation, of which 96% disagreed with proposals to reduce the number of Children's Centres. Of these 26% stated that they would not use any other Children's Centre were their local Centre to close. Engagement activities were undertaken at groups linked with Swalecliffe attended by pregnant mothers and those with new babies to ensure their views were gathered. (see Appendix B)</p> <p>Marriage and Civil Partnerships: A higher proportion of respondents from Swalecliffe were married, cohabiting or in a civil partnership than the county average. As such a lower proportion of single parents responded to the consultation than the county average. This confirms the presumption in the initial screening that lone parents are underrepresented amongst Swalecliffe services users. However, engagement activities indicate that a broad range of vulnerable families were engaged during the consultation period (Appendix B).</p> <p>Carers responsibilities: Carer data was not gathered as part of the consultation activity</p>
Actions required	<ul style="list-style-type: none"> Engage service users from other religions to ensure any changes made as a result of the consultation are understood and services are planned as appropriate.
Previous judgement (02.07.13)	Medium impact
Revised judgement (01.11.13)	Low/Medium impact

*All respondent numbers refer to users of Swalecliffe Children's Centre unless otherwise stated

Appendix A: Swalecliffe full profile of respondents

*All respondent numbers refer to users of Swalecliffe Children's Centre unless otherwise stated

Profiles:

	User of...Swalecliffe - Canterbury			
	Use this Centre only		All users of this Centre	
Public				
Age: Under 20	0	0%	0	0%
Age: 20-25	7	12%	12	8%
Age: 36-30	6	10%	29	19%
Age: 31-35	15	25%	42	27%
Age: 36-40	11	19%	35	23%
Age: 41-45	10	17%	19	12%
Age: 46-50	0	0%	0	0%
Age: Over 50	10	17%	10	7%

Gender: Male	6	10%	9	6%
Gender: Female	49	83%	138	90%

EAL: No	53	90%	139	91%
EAL: Yes	0	0%	3	2%

Ethnicity: White British	49	83%	125	82%
Ethnicity: White Irish	2	3%	3	2%
Ethnicity: White Gypsy/Roma	0	0%	1	1%
Ethnicity: White Irish Traveller	0	0%	0	0%
Ethnicity: White Other	1	2%	4	3%
Ethnicity: Mixed White & Black Caribbean	0	0%	0	0%
Ethnicity: Mixed White & Black African	0	0%	1	1%
Ethnicity: Mixed White & Asian	0	0%	0	0%
Ethnicity: Mixed Other	0	0%	3	2%
Ethnicity: Arab	0	0%	0	0%
Ethnicity: Asian or Asian British Indian	0	0%	1	1%
Ethnicity: Asian or Asian British Pakistani	0	0%	0	0%
Ethnicity: Asian or Asian British Bangladeshi	0	0%	0	0%
Ethnicity: Asian Other	0	0%	0	0%
Ethnicity: Chinese	0	0%	0	0%
Ethnicity: Black or Black British Caribbean	0	0%	0	0%
Ethnicity: Black or Black British African	1	2%	1	1%
Ethnicity: Black Other	0	0%	0	0%
Ethnicity: Other	0	0%	0	0%

Religion: Christian	24	41%	60	39%
Religion: Buddhist	0	0%	0	0%
Religion: Hindu	0	0%	0	0%
Religion: Jewish	0	0%	1	1%
Religion: Muslim	1	2%	1	1%
Religion: Sikh	0	0%	0	0%
Religion: Other	3	5%	5	3%
Religion: None	22	37%	69	45%

Married/Civil Part/Cohabiting	44	75%	124	81%
Separated/Divorced/Widowed	2	3%	5	3%
Single	5	8%	9	6%

	User of...Swalecliffe - Canterbury			
	Use this Centre only		All users of this Centre	
Disability: Limited a lot	1	2%	3	2%
Disability: Limited a little	4	7%	5	3%
Disability: No	45	76%	129	84%

Sexuality: Bi/Bisexual	0	0%	1	1%
Sexuality: Heterosexual/Straight	48	81%	132	86%
Sexuality: Gay woman/Lesbian	0	0%	1	1%
Sexuality: Gay man	0	0%	0	0%
Sexuality: Other	2	3%	2	1%
Gender not the same as at birth	0	0%	0	0%

Base: Public - Use this Centre only (59), All users of this Centre (153)

**Equality Impact Assessment Initial Screening post-consultation update
Children's Centre: Temple Hill**

Location	Temple Hill, Dartford
Proposal	Part Time
Rationale for proposal	<ul style="list-style-type: none"> Local Solution – It is believed that the Children's Centre at Temple Hill is not in the best place to encourage families to attend. A reduction in hours at the Centre will enable an increase in the number of hours services are delivered off site in the community.
Consultation Feedback Summary (questionnaires)	<p>A total of 139 members of the public and 15 professionals objected to the reduction in opening hours at Temple Hill Children's Centre. Of these 139 members of the public, 97 objected only to the reduction in opening hours at Temple Hill.</p> <p>11% of the members of the public objecting to the proposed reduction in opening hours at Temple Hill indicate that they will not use Children's Centres at all as a result (which is slightly lower than the average across all objectors).</p> <p>A total of 79 users of Temple Hill Children's Centre (and 49 sole users) responded to the consultation, representing around 10% of all users of the Centre. The majority (78%) disagree to some extent with this proposal (which is lower than for the other 12 Centres affected by this proposal). Of the sole users of Temple Hill responding to the consultation, 19% (7 individuals) indicated that they 'will not use Children's Centres at all' as a result of the proposed reduction in opening hours.</p>
Conclusions from consultation evidence by protected characteristic	<p>In comparison with all those objecting to proposal 3, those objecting to the reduction in opening hours at Temple Hill are more likely to be parents from ethnic minority groups and/or parents with English as an additional language, but less likely to be Children's Centre users.</p> <p>Age: A higher percentage of respondents were aged 20-25 and 31-35 from Temple Hill than the county average and a lower percentage of respondents were aged 26-30 and over 50 from Temple Hill than the county average. No responses were received from services users aged under 20. This is contrary to the initial screening that indicated that higher numbers of teenage parents might be affected as a result of changes to the operating hours of Temple Hill.</p> <p>Disability: Six responses were received to the consultation from users identifying themselves as having some limiting form of disability. A higher percentage of responses were received from respondents stating they had no form of disability than the county average. This is contrary to the initial screening that indicated that higher numbers of disabled service users might be affected as a result of changes to the operating hours of Temple Hill.</p> <p>Gender: The gender of service users responding to the consultation are broadly comparable to those responding to the consultation countywide.</p> <p>Gender identity: No respondents identified themselves as having a gender different to that at their birth.</p> <p>Race: A significantly lower number of responses were received from White British service users than the county average. As such a higher number of responses were received from White Other and Black British African respondents. 30% of responses</p>

	<p>were received from BME groups to the consultation. This is a higher proportion than the 24% BME service users of Temple Hill as identified in the initial screening.</p> <p>Religion or belief: A lower percentage of respondents using Temple Hill classified themselves as having no religion than the county average. 12% of respondents stated a religion other than Christian, higher than the 3% county average.</p> <p>Sexual orientation: A higher percentage of respondents using Temple Hill classified themselves as heterosexual than the county average. Less than 5 responses were received from services users of any other sexual orientation.</p> <p>Pregnancy and maternity: 206 pregnant women responded to the consultation, of which 96% disagreed with proposals to reduce the number of Children's Centres. Of these 26% stated that they would not use any other Children's Centre were their local Centre to close.</p> <p>Marriage and Civil Partnerships: The sexual orientation of service users responding to the consultation are broadly comparable to those responding to the consultation countywide. The presumption in the initial screening is that lone parents are significantly overrepresented amongst Temple Hill services users.</p> <p>Carers responsibilities: Carer data was not gathered as part of the consultation activity</p>
Actions required	<ul style="list-style-type: none"> • Ensure users with a disability are engaged and services are planned and delivered at venues with sufficient access for adults and children with a disability • Engage service users from other religions to ensure any changes made as a result of the consultation are understood and services are planned as appropriate. • Ensure service users of all sexual orientations are engaged in service planning as a result of any changes to opening hours and services. • Ensure services for pregnant women are planned and delivered in areas of need so this target group continue to receive services required. • Ensure local lone parents are engaged with service redesign and are able to access services if they are relocated as a result of the consultation.
Previous judgement (02.07.13)	Medium impact
Revised judgement (01.11.13)	Medium impact (with respect to disability, religion and lone parents)

Appendix A: Temple Hill full profile of respondents

Profiles:

User of...Temple Hill - Dartford				
	Use this Centre only		All users of this Centre	
Age: Under 20	0	0%	0	0%
Age: 20-25	9	18%	16	20%
Age: 36-30	10	20%	13	16%
Age: 31-35	15	31%	28	35%
Age: 36-40	8	16%	12	15%
Age: 41-45	3	6%	5	6%
Age: 46-50	2	4%	2	3%
Age: Over 50	1	2%	1	1%

Public

Gender: Male	9	18%	9	11%
Gender: Female	40	82%	70	89%

EAL: No	38	78%	66	84%
EAL: Yes	10	20%	12	15%

Ethnicity: White British	29	59%	53	67%
Ethnicity: White Irish	0	0%	0	0%
Ethnicity: White Gypsy/Roma	0	0%	0	0%
Ethnicity: White Irish Traveller	0	0%	0	0%
Ethnicity: White Other	8	16%	9	11%
Ethnicity: Mixed White & Black Caribbean	1	2%	1	1%
Ethnicity: Mixed White & Black African	0	0%	0	0%
Ethnicity: Mixed White & Asian	0	0%	0	0%
Ethnicity: Mixed Other	1	2%	1	1%
Ethnicity: Arab	0	0%	0	0%
Ethnicity: Asian or Asian British Indian	0	0%	3	4%
Ethnicity: Asian or Asian British Pakistani	0	0%	0	0%
Ethnicity: Asian or Asian British Bangladeshi	0	0%	0	0%
Ethnicity: Asian Other	1	2%	1	1%
Ethnicity: Chinese	0	0%	0	0%
Ethnicity: Black or Black British Caribbean	2	4%	2	3%
Ethnicity: Black or Black British African	5	10%	5	6%
Ethnicity: Black Other	0	0%	0	0%
Ethnicity: Other	1	2%	2	3%

Religion: Christian	26	53%	39	49%
Religion: Buddhist	0	0%	0	0%
Religion: Hindu	0	0%	1	1%
Religion: Jewish	0	0%	0	0%
Religion: Muslim	2	4%	3	4%
Religion: Sikh	0	0%	2	3%
Religion: Other	2	4%	3	4%
Religion: None	15	31%	25	32%

Married/Civil Part/Cohabiting	37	76%	62	78%
Separated/Divorced/Widowed	3	6%	4	5%
Single	8	16%	11	14%

User of...Temple Hill - Dartford				
	Use this Centre only		All users of this Centre	
Disability: Limited a lot	1	2%	1	1%
Disability: Limited a little	5	10%	5	6%
Disability: No	41	84%	71	90%

Sexuality: Bi/Bisexual	0	0%	1	1%
Sexuality: Heterosexual/Straight	45	92%	73	92%
Sexuality: Gay woman/Lesbian	0	0%	0	0%
Sexuality: Gay man	1	2%	1	1%
Sexuality: Other	0	0%	0	0%
Gender not the same as at birth	0	0%	0	0%

Base: Public - Use this Centre only (49), All users of this Centre (79)

**Equality Impact Assessment Initial Screening post-consultation update
Children's Centre: The Village**

Location	Folkestone, Shepway
Proposal	Closure of 1 Centre either Folkestone Early Years OR The Village
Rationale for proposal	<ul style="list-style-type: none"> • Local solution – Centres are located 950m apart. • Folkestone Early Years has a higher level of need than The Village Children's Centre in terms of total volume of need. • Folkestone Early Years and The Village have similar levels of usage. Folkestone Early Years has slightly higher levels of sole usage. • Folkestone Early Years offers better accommodation space, better value for money in relation to accommodation (Corporate landlord at The Village is £52,102 vs £6,308 at FEY).
Consultation Feedback Summary (questionnaires)	<p><u>The Village</u> A total of 258 members of the public and 41 professionals objected to the closure of The Village Children's Centre. Of these 258 members of the public, 86 objected only to the closure of The Village (although an additional 89 only objected to the closure of The Village and Folkestone Early Years Centre).</p> <p>Around a third (33%) of the members of the public objecting to the proposed closure of The Village indicate that they will not use Children's Centres at all as a result (which is slightly higher than the average across all objectors, of 26%). The most popular comments amongst those indicating that they 'will not use Children's Centres at all' as a result of the proposed closure of The Village are:</p> <ul style="list-style-type: none"> • 'Will make travel to centres more difficult / alternative centres too distant' –20% • 'Centres supplies help / counselling / advice / support / information' – 16% • 'Children's centres form a local community hub / chance to meet people' – 14% • 'Bad for people without cars / non-drivers' – 14% • 'Very happy with my local centre / prefer it to others / we enjoy going there / only use this one' – 13% • 'Centre is close by / easily accessible' – 13% • 'Children's centres are necessary / important resources / a lifeline' – 13% <p>A total of 162 users of The Village Children's Centre (and 97 sole users) responded to the consultation, representing around 27% of all users of the Centre. The overwhelming majority (95%) disagree to some extent with this proposal. Of the sole users of The Village objecting to the proposal, 54% indicated that they 'will not use Children's Centres at all' as a result of the proposed closure.</p>
Conclusions from consultation evidence	In comparison with all those responding* to proposal one, those objecting to the closure of The Village are <u>much</u> more likely to be parents of children from low incomes (32% vs 24% of all members of the public responding to the consultation).

*All respondent numbers refer to users of The Village Children's Centre unless otherwise stated

by protected characteristic	Age: The age of service users responding to the consultation are broadly comparable to those responding to the consultation countywide. However, a higher number of respondents were aged 20-25 from The Village than the county average. These figures seem to support the initial screening assumptions that The Village has a higher level of need in terms of teenage pregnancy and young parents than the county average.
	Disability: 17 responses were received to the consultation from users identifying themselves as having some limiting form of disability. As a percentage of all responses received from The Village service users these figures are broadly in line with county averages.
	Gender: A higher number of responses were received from males to the consultation for The Village than the county average.
	Gender identity: No respondents identified themselves as having a gender different to that at their birth.
	Race: The ethnicity of service users responding to the consultation are broadly comparable to those responding to the consultation countywide. This is higher than suggested might be the case in the initial screening.
	Religion or belief: A higher percentage of respondents using The Village classified themselves as having no religion than the county average. Other responses were broadly in line with county averages.
	Sexual orientation: A higher percentage of respondents using The Village classified themselves as bisexual than the county average. Other responses were broadly in line with county averages.
	Pregnancy and maternity: 206 pregnant women responded to the consultation, of which 96% disagreed with proposals to reduce the number of Children’s Centres. Of these 26% stated that they would not use any other Children’s Centre were their local Centre to close.
	Marriage and Civil Partnerships: A lower proportion of respondents from The Village were married, cohabiting or in a civil partnership than the county average. A higher proportion of separated, divorced or widowed service users responded to the consultation than the county average and a higher proportion of single service users responded to the consultation than the county average. This confirms the presumption in the initial screening that lone parents are overrepresented amongst The Village services users.
Carers responsibilities: Carer data was not gathered as part of the consultation activity	
Actions required	<ul style="list-style-type: none"> • Ensure services for teenage parents and young parents are planned and delivered at venues with sufficient access for this target group. • Ensure users with a disability are engaged and services are planned and delivered at venues with sufficient access for adults and children with a disability • Ensure service remain accessible for service users irrespective of sexual orientation. • Ensure services for pregnant women are planned and delivered in areas of need so this target group continue to receive services required. • Ensure local lone parents are engaged with service redesign and are able to access services if they are relocated as a result of the consultation.
Previous judgement	Medium impact

*All respondent numbers refer to users of The Village Children’s Centre unless otherwise stated

(02.07.13)	
Revised judgement (04.11.13)	Medium impact (with regards to Age, Disability and Marriage and Civil Partnerships)

*All respondent numbers refer to users of The Village Children's Centre unless otherwise stated

Appendix A: The Village full profile of respondents

*All respondent numbers refer to users of The Village Children's Centre unless otherwise stated

Profiles:

	User of...The Village - Shepway			
	Use this Centre only		All users of this Centre	
Public				
Age: Under 20	7	7%	9	6%
Age: 20-25	21	22%	30	19%
Age: 36-30	13	13%	29	18%
Age: 31-35	29	30%	46	28%
Age: 36-40	14	14%	24	15%
Age: 41-45	5	5%	8	5%
Age: 46-50	2	2%	5	3%
Age: Over 50	10	10%	10	6%

Gender: Male	19	20%	23	14%
Gender: Female	76	78%	136	84%

EAL: No	93	96%	150	93%
EAL: Yes	3	3%	8	5%

Ethnicity: White British	89	92%	137	85%
Ethnicity: White Irish	1	1%	2	1%
Ethnicity: White Gypsy/Roma	0	0%	2	1%
Ethnicity: White Irish Traveller	0	0%	1	1%
Ethnicity: White Other	3	3%	8	5%
Ethnicity: Mixed White & Black Caribbean	1	1%	1	1%
Ethnicity: Mixed White & Black African	0	0%	0	0%
Ethnicity: Mixed White & Asian	0	0%	0	0%
Ethnicity: Mixed Other	0	0%	1	1%
Ethnicity: Arab	0	0%	0	0%
Ethnicity: Asian or Asian British Indian	0	0%	0	0%
Ethnicity: Asian or Asian British Pakistani	0	0%	0	0%
Ethnicity: Asian or Asian British Bangladeshi	0	0%	0	0%
Ethnicity: Asian Other	0	0%	0	0%
Ethnicity: Chinese	0	0%	0	0%
Ethnicity: Black or Black British Caribbean	0	0%	0	0%
Ethnicity: Black or Black British African	0	0%	0	0%
Ethnicity: Black Other	0	0%	0	0%
Ethnicity: Other	1	1%	1	1%

Religion: Christian	41	42%	70	43%
Religion: Buddhist	0	0%	0	0%
Religion: Hindu	0	0%	0	0%
Religion: Jewish	0	0%	1	1%
Religion: Muslim	0	0%	1	1%
Religion: Sikh	0	0%	0	0%
Religion: Other	2	2%	3	2%
Religion: None	50	52%	76	47%

Married/Civil Part/Cohabiting	65	67%	112	69%
Separated/Divorced/Widowed	10	10%	16	10%
Single	21	22%	29	18%

	User of...The Village - Shepway			
	Use this Centre only		All users of this Centre	
Disability: Limited a lot	3	3%	6	4%
Disability: Limited a little	8	8%	11	7%
Disability: No	83	86%	136	84%

Sexuality: Bi/Bisexual	6	6%	6	4%
Sexuality: Heterosexual/Straight	86	89%	142	88%
Sexuality: Gay woman/Lesbian	1	1%	1	1%
Sexuality: Gay man	0	0%	0	0%
Sexuality: Other	0	0%	0	0%
Gender not the same as at birth	0	0%	0	0%

Base: Public - Use this Centre only (97), All users of this Centre (162)

**Equality Impact Assessment Initial Screening post-consultation update
Children's Centre: Tina Rintoul**

Location	Hersden, Canterbury
Proposal	Closure
Rationale for proposal	<ul style="list-style-type: none"> • Selected as local solution - Creating a new catchment area split between Riverside Centre (Canterbury City) and The Poppy Children's Centre (Canterbury Coastal, Herne Bay) would enable greater emphasis on services rather than buildings and enable outreach to be increased equitably. • Located in an area of low need (population) • 49% (103) of users also attended another Children's Centre in Kent. Mainly Riverside and Little Hands.
Consultation Feedback Summary (questionnaires)	<p>A total of 89 members of the public and 23 professionals objected to the closure of Tina Rintoul Children's Centre. Of these 89 members of the public, 21 objected only to the closure of Tina Rintoul.</p> <p>Around a quarter (27%) of the members of the public objecting to the proposed closure of Tina Rintoul indicate that they will not use Children's Centres at all as a result (which is similar to the average across all objectors, of 26%). Travel/accessibility for those without cars are a key concern for this group.</p> <p>A total of 39 users of Tina Rintoul Children's Centre (and 21 sole users) responded to the consultation, representing around 12% of all users of the Centre. The overwhelming majority (95%) disagree to some extent with this proposal. Of the sole users of Tina Rintoul objecting to the proposal, around two-fifths (8 individuals) indicated that they 'will not use Children's Centres at all' as a result of the proposed closure.</p>
Conclusions from consultation evidence by protected characteristic	<p>In comparison with all those responding to proposal one, those objecting to the closure of Tina Rintoul are more likely to be lone parents and/or younger parents (aged 25 or under).</p> <p>Age: A higher percentage of respondents were aged 20-25 from Tina Rintoul than the county average and a significantly higher percentage of respondents were aged 31-35 from Tina Rintoul than the county average. No responses were received from services users aged under 20.</p> <p>Disability: Less than five responses were received to the consultation from users identifying themselves as having some limiting form of disability. A significantly higher percentage of respondents stated that they had no disability than the county average. This is in line with the previous initial screening that suggests the Tina Rintoul catchment has a lower level of need than the Kent average in terms of working aged permanently sick/ disabled (by volume).</p> <p>Gender: A higher number of responses were received from females to the consultation for Tina Rintoul than the county average. As such a lower no of response were received from males than the county average.</p> <p>Gender identity: No respondents identified themselves as having a gender different to that at their birth.</p> <p>Race: A higher number of responses were received from White British service users than the county average. This is higher</p>

*All respondent numbers refer to users of Tina Rintoul Children's Centre unless otherwise stated

	<p>than suggested might be the case in the initial screening.</p> <p>Religion or belief: A significantly higher percentage of respondents using Tina Rintoul classified themselves as Christian than the county average and a lower percentage stated they had no religion. This is comparable to the census data for the Canterbury District gathered in the initial screening.</p> <p>Sexual orientation: A higher percentage of respondents using Tina Rintoul classified themselves as heterosexual than the county average. No responses were received from services users of any other stated sexual orientation.</p> <p>Pregnancy and maternity: 206 pregnant women responded to the consultation, of which 96% disagreed with proposals to reduce the number of Children's Centres. Of these 26% stated that they would not use any other Children's Centre were their local Centre to close.</p> <p>Marriage and Civil Partnerships: A higher proportion of respondents from Tina Rintoul were single than the county average. As such a lower proportion of single parents responded to the consultation than the county average. This confirms the presumption in the initial screening that there is a higher proportion of lone parents amongst Tina Rintoul services users. Engagement activities also indicate that lone parents were engaged during the consultation period (Appendix B).</p> <p>Carers responsibilities: Carer data was not gathered as part of the consultation activity</p>
Actions required	<ul style="list-style-type: none"> • Ensure teenage parents are engaged and services are planned to guarantee this target group are not adversely affected should the proposal to close the Centre go ahead. • Ensure any BME groups are engaged and services are planned to ensure group are not negatively affected by changes to service delivery • Engage service users from other religions to ensure any changes made as a result of the consultation are understood and services are planned as appropriate. • Ensure services for pregnant women are planned and delivered in areas of need so this target group continue to receive services required. • Ensure local lone parents are engaged with service redesign and are able to access services if they are relocated as a result of the consultation.
Previous judgement (01.07.13)	Medium impact
Revised judgement (01.11.13)	Medium impact

*All respondent numbers refer to users of Tina Rintoul Children's Centre unless otherwise stated

Appendix A: Tina Rintoul full profile of respondents

*All respondent numbers refer to users of Tina Rintoul Children's Centre unless otherwise stated

Profiles:

User of...Tina Rintoul - Canterbury				
	Use this Centre only		All users of this Centre	

Public

Age: Under 20	0	0%	0	0%
Age: 20-25	6	29%	8	21%
Age: 36-30	2	10%	7	18%
Age: 31-35	8	38%	17	44%
Age: 36-40	3	14%	4	10%
Age: 41-45	2	10%	2	5%
Age: 46-50	0	0%	0	0%
Age: Over 50	1	5%	1	3%

Gender: Male	0	0%	1	3%
Gender: Female	21	100%	38	97%

EAL: No	19	90%	37	95%
EAL: Yes	1	5%	1	3%

Ethnicity: White British	18	86%	36	92%
Ethnicity: White Irish	0	0%	0	0%
Ethnicity: White Gypsy/Roma	0	0%	0	0%
Ethnicity: White Irish Traveller	0	0%	0	0%
Ethnicity: White Other	1	5%	1	3%
Ethnicity: Mixed White & Black Caribbean	0	0%	0	0%
Ethnicity: Mixed White & Black African	0	0%	0	0%
Ethnicity: Mixed White & Asian	0	0%	0	0%
Ethnicity: Mixed Other	0	0%	0	0%
Ethnicity: Arab	0	0%	0	0%
Ethnicity: Asian or Asian British Indian	0	0%	0	0%
Ethnicity: Asian or Asian British Pakistani	0	0%	0	0%
Ethnicity: Asian or Asian British Bangladeshi	0	0%	0	0%
Ethnicity: Asian Other	0	0%	0	0%
Ethnicity: Chinese	0	0%	0	0%
Ethnicity: Black or Black British Caribbean	0	0%	0	0%
Ethnicity: Black or Black British African	0	0%	0	0%
Ethnicity: Black Other	0	0%	0	0%
Ethnicity: Other	1	5%	1	3%

Religion: Christian	14	67%	23	59%
Religion: Buddhist	0	0%	0	0%
Religion: Hindu	0	0%	0	0%
Religion: Jewish	0	0%	0	0%
Religion: Muslim	0	0%	0	0%
Religion: Sikh	0	0%	0	0%
Religion: Other	2	10%	2	5%
Religion: None	5	24%	13	33%

Married/Civil Part/Cohabiting	17	81%	31	79%
Separated/Divorced/Widowed	0	0%	1	3%
Single	4	19%	7	18%

User of...Tina Rintoul - Canterbury				
	Use this Centre only		All users of this Centre	

Disability: Limited a lot	0	0%	0	0%
Disability: Limited a little	0	0%	1	3%
Disability: No	21	100%	38	97%

Sexuality: Bi/Bisexual	0	0%	0	0%
Sexuality: Heterosexual/Straight	19	90%	37	95%
Sexuality: Gay woman/Lesbian	0	0%	0	0%
Sexuality: Gay man	0	0%	0	0%
Sexuality: Other	0	0%	0	0%
Gender not the same as at birth	0	0%	0	0%

Base: Public - Use this Centre only (21), All users of this Centre (39)

**Equality Impact Assessment Initial Screening post-consultation update
Children's Centre: West Kingsdown**

Location	West Kingsdown, Sevenoaks and Swanley
Proposal	Part Time
Rationale for proposal	<ul style="list-style-type: none"> • Located in an area of low need (population)
Consultation Feedback Summary (questionnaires)	<p>A total of 56 members of the public and 15 professionals objected to the reduction in opening hours at West Kingsdown Children's Centre. Of these 56 members of the public, 16 objected only to the reduction in opening hours at West Kingsdown.</p> <p>Around a fifth (21%) of the members of the public objecting to the proposed reduction in opening hours at West Kingsdown indicate that they will not use Children's Centres at all as a result (which is higher than the average across all objectors).</p> <p>A total of 14 users of West Kingsdown Children's Centre (and just 8 sole users) responded to the consultation, representing around 6% of all users of the Centre. The vast majority (86%) disagree to some extent with this proposal. Of the 7 sole users of West Kingsdown responding to the consultation, 4 individuals indicated that they 'will not use Children's Centres at all' as a result of the proposed reduction in opening hours.</p>
Conclusions from consultation evidence by protected characteristic	<p>In comparison with all those objecting to proposal 3, those objecting to the reduction in opening hours at West Kingsdown are more likely to be parents from ethnic minority groups and/or parents with English as an additional language.</p> <p>Age: A higher percentage of respondents* were aged 20-25 from West Kingsdown than the county average and a lower percentage of respondents were aged over 41-45 from West Kingsdown than the county average. No responses were received from services users aged under 20. This supports the initial screening assumptions that lower numbers of teenage parents might be affected as a result of the centre closing.</p> <p>Disability: Less than five responses were received to the consultation from users identifying themselves as having some limiting form of disability. This is in line with the findings of the initial screening that suggest the West Kingsdown catchment has a lower level of need than the Kent average in terms of working aged permanently sick/ disabled (volume) and a lower number of recorded service users with a limiting form of disability.</p> <p>Gender: A higher number of responses were received from females to the consultation for West Kingsdown than the county average. No responses were received from male users of West Kingsdown Children's Centre.</p> <p>Gender identity: No respondents identified themselves as having a gender different to that at their birth.</p> <p>Race: A significantly higher number of responses were received from White British service users than the county average. No responses were received from services users from any other ethnic background than White British. However, engagement activities were undertaken at groups linked with West Kingsdown attended by ethnic minority families to ensure their views were gathered. (see Appendix B)</p> <p>Religion or belief: A higher percentage of respondents using West Kingsdown classified themselves as Christian than the</p>

*All respondent numbers refer to users of West Kingsdown Children's Centre unless otherwise stated

	<p>county average. No responses were received from services users with any other stated religion.</p> <p>Sexual orientation: A higher percentage of respondents using West Kingsdown classified themselves as heterosexual than the county average. No responses were received from services users of any other sexual orientation.</p> <p>Pregnancy and maternity: 206 pregnant women responded to the consultation, of which 96% disagreed with proposals to reduce the number of Children's Centres. Of these 26% stated that they would not use any other Children's Centre were their local Centre to close.</p> <p>Marriage and Civil Partnerships: A significantly higher proportion of respondents from West Kingsdown were married, cohabiting or in a civil partnership that the county average. No responses were received from services users that were separated, divorced or widowed.</p> <p>Carers responsibilities: Carer data was not gathered as part of the consultation activity</p>
Actions required	<ul style="list-style-type: none"> • Ensure young parents are engaged and services are planned to ensure this group are not negatively affected by any changes to service delivery as a result of the consultation outcomes. • Engage fathers to ensure their views are gathered and services are planned that are appropriate for their needs. • Ensure any BME groups are engaged and services are planned to ensure group are not negatively affected by changes to service delivery. • Engage service users from other religions to ensure any changes made as a result of the consultation are understood and services are planned as appropriate. • Ensure services for pregnant women are planned and delivered in areas of need so this target group continue to receive services required. • Ensure local lone parents are engaged with service redesign and are able to access services if they are relocated as a result of the consultation.
Previous judgement (02.07.13)	Medium impact
Revised judgement (04.11.13)	Medium impact (with regards to gender, religion or belief, sexual orientation)

*All respondent numbers refer to users of West Kingsdown Children's Centre unless otherwise stated

Appendix A: West Kingsdown full profile of respondents

*All respondent numbers refer to users of West Kingsdown Children’s Centre unless otherwise stated

Profiles:

User of...West Kingsdown - Sevenoaks & Swanley				
	Use this Centre only		All users of this Centre	
Public				
Age: Under 20	0	0%	0	0%
Age: 20-25	2	25%	3	21%
Age: 36-30	1	13%	3	21%
Age: 31-35	2	25%	4	29%
Age: 36-40	2	25%	3	21%
Age: 41-45	0	0%	0	0%
Age: 46-50	0	0%	0	0%
Age: Over 50	1	13%	1	7%

Gender: Male	0	0%	0	0%
Gender: Female	8	100%	14	100%

EAL: No	8	100%	14	100%
EAL: Yes	0	0%	0	0%

Ethnicity: White British	8	100%	14	100%
Ethnicity: White Irish	0	0%	0	0%
Ethnicity: White Gypsy/Roma	0	0%	0	0%
Ethnicity: White Irish Traveller	0	0%	0	0%
Ethnicity: White Other	0	0%	0	0%
Ethnicity: Mixed White & Black Caribbean	0	0%	0	0%
Ethnicity: Mixed White & Black African	0	0%	0	0%
Ethnicity: Mixed White & Asian	0	0%	0	0%
Ethnicity: Mixed Other	0	0%	0	0%
Ethnicity: Arab	0	0%	0	0%
Ethnicity: Asian or Asian British Indian	0	0%	0	0%
Ethnicity: Asian or Asian British Pakistani	0	0%	0	0%
Ethnicity: Asian or Asian British Bangladeshi	0	0%	0	0%
Ethnicity: Asian Other	0	0%	0	0%
Ethnicity: Chinese	0	0%	0	0%
Ethnicity: Black or Black British Caribbean	0	0%	0	0%
Ethnicity: Black or Black British African	0	0%	0	0%
Ethnicity: Black Other	0	0%	0	0%
Ethnicity: Other	0	0%	0	0%

Religion: Christian	7	88%	8	57%
Religion: Buddhist	0	0%	0	0%
Religion: Hindu	0	0%	0	0%
Religion: Jewish	0	0%	0	0%
Religion: Muslim	0	0%	0	0%
Religion: Sikh	0	0%	0	0%
Religion: Other	0	0%	0	0%
Religion: None	1	13%	6	43%

Married/Civil Part/Cohabiting	7	88%	12	86%
Separated/Divorced/Widowed	0	0%	0	0%
Single	1	13%	2	14%

User of...West Kingsdown - Sevenoaks & Swanley				
	Use this Centre only		All users of this Centre	
Disability: Limited a lot	0	0%	0	0%
Disability: Limited a little	1	13%	1	7%
Disability: No	7	88%	13	93%

Sexuality: Bi/Bisexual	0	0%	0	0%
Sexuality: Heterosexual/Straight	8	100%	13	93%
Sexuality: Gay woman/Lesbian	0	0%	0	0%
Sexuality: Gay man	0	0%	0	0%
Sexuality: Other	0	0%	0	0%
Gender not the same as at birth	0	0%	0	0%

Base: Public - Use this Centre only (8), All users of this Centre (14)

**Equality Impact Assessment Initial Screening post-consultation update
Children's Centre: Woodgrove**

Location	Sittingbourne, Swale
Proposal	Closure
Rationale for proposal	<ul style="list-style-type: none"> 68% (410 users) also attended another Children's Centre in Kent, including Grove Park, Milton Court, Murston and Bysing Wood. There is another KCC facility (a library) within 800m. The library already registers child births and there may be opportunity to deliver or signpost to some other Children's Centre services.
Consultation Feedback Summary (questionnaires)	<p>A total of 378 members of the public and 34 professionals objected to the closure of Woodgrove Children's Centre. Of these 378 members of the public, 306 objected only to the closure of Woodgrove, with the proportion (at 81%) far higher than for the majority of the proposed closures.</p> <p>A quarter (25%) of the members of the public objecting to the proposed closure of Woodgrove indicate that they will not use Children's Centres at all as a result (which is very similar to the average across all objectors, of 26%). The most popular comments amongst those indicating that they 'will not use Children's Centres at all' as a result of the proposed closure of Woodgrove are:</p> <ul style="list-style-type: none"> 'Very happy with my local centre / prefer it to others' – 26% 'Will make travel to centres more difficult / alternative centres too distant' – 24% 'Centre is close by / easily accessible' – 27% 'Bad for people without cars / non-drivers' – 21% 'Children's centres form a local community hub / chance to meet people' – 14% <p>A total of 318 users of Woodgrove Children's Centre (and 144 sole users) responded to the consultation, representing as many as 36% of all users of the Centre. The overwhelming majority (96%) disagree to some extent with this proposal. Of the sole users of Woodgrove objecting to the proposal, 44% indicated that they 'will not use Children's Centres at all' as a result of the proposed closure.</p>
Conclusions from consultation evidence by protected characteristic	This analysis suggests that, in comparison with all those responding to proposal one, those objecting to the closure of Woodgrove are more likely to be parents of children from low incomes and/or parents who are married, cohabiting or in civil partnerships. In comparison with all those responding in a professional capacity, those objecting to the closure of Woodgrove are slightly more likely to be Health Visitors, midwives or providers of Children's Centre services.
	Age: The age profile of service users responding* to the consultation are broadly comparable to those responding to the consultation countywide
	Disability: The disability of service users responding to the consultation are broadly comparable to those responding to the consultation countywide. Previous analysis identified that the Woodgrove catchment has a lower level of need than the Kent

*All respondent numbers refer to users of Woodgrove Children's Centre unless otherwise stated

	average in terms of working aged permanently sick/ disabled (volume).
	Gender: The gender of service users responding to the consultation are broadly comparable to those responding to the consultation countywide.
	Gender identity: Less than five respondents identified themselves as having a gender different to that at their birth.
	Race: A higher number of responses were received from White British service users than the county average. Responses received were broadly in line with the county ethnic profile and service users profile detailed in the initial screening.
	Religion or belief: The religious belief of service users responding to the consultation are broadly comparable to those responding to the consultation countywide.
	Sexual orientation: A higher percentage of respondents using Woodgrove classified themselves as heterosexual than the county average. Less than 5 responses were received from services users of any other sexual orientation. This is broadly comparable to service user data for the Canterbury District gathered in the initial screening.
	Pregnancy and maternity: 206 pregnant women responded to the consultation, of which 96% disagreed with proposals to reduce the number of Children's Centres. Of these 26% stated that they would not use any other Children's Centre were their local Centre to close. Engagement activities were undertaken at groups linked with Woodgrove attended by pregnant mothers and those with new babies to ensure their views were gathered. (see Appendix B)
	Marriage and Civil Partnerships: A significantly higher proportion of respondents from Woodgrove were married, cohabiting or in a civil partnership that the county average. As such a lower proportion of single parents responded to the consultation than the county average. This confirms the presumption in the initial screening that lone parents are underrepresented amongst Woodgrove services users. However, engagement activities indicate that lone parents were engaged during the consultation period (Appendix B).
	Carers responsibilities: Carer data was not gathered as part of the consultation activity
Actions required	<ul style="list-style-type: none"> • Engage BME groups as a priority to understand impact, plan services and ensure group are not negatively affected by potential changes to service delivery times or locations. • Engage service users of all sexual orientations to ensure any changes made as a result of the consultation are understood and services are planned as appropriate. • Ensure services for pregnant women are planned and delivered in areas of need so this target group continue to receive services required. • Ensure local lone parents are engaged with service redesign and are able to access services if they are relocated as a result of the consultation.
Previous judgement (02.07.13)	Medium impact
Revised judgement (04.11.13)	Medium impact

*All respondent numbers refer to users of Woodgrove Children's Centre unless otherwise stated

Appendix A: Woodgrove full profile of respondents

*All respondent numbers refer to users of Woodgrove Children's Centre unless otherwise stated

Profiles:

	User of...Woodgrove - Swale			
	Use this Centre only		All users of this Centre	
Public				
Age: Under 20	5	3%	6	2%
Age: 20-25	20	14%	39	12%
Age: 36-30	30	21%	73	23%
Age: 31-35	39	27%	98	31%
Age: 36-40	24	17%	58	18%
Age: 41-45	13	9%	20	6%
Age: 46-50	1	1%	2	1%
Age: Over 50	14	10%	14	4%

Gender: Male	21	15%	33	10%
Gender: Female	121	84%	277	87%

EAL: No	138	96%	298	94%
EAL: Yes	3	2%	10	3%

Ethnicity: White British	130	90%	285	90%
Ethnicity: White Irish	0	0%	2	1%
Ethnicity: White Gypsy/Roma	0	0%	1	0%
Ethnicity: White Irish Traveller	0	0%	0	0%
Ethnicity: White Other	4	3%	12	4%
Ethnicity: Mixed White & Black Caribbean	1	1%	2	1%
Ethnicity: Mixed White & Black African	0	0%	0	0%
Ethnicity: Mixed White & Asian	0	0%	0	0%
Ethnicity: Mixed Other	1	1%	1	0%
Ethnicity: Arab	0	0%	0	0%
Ethnicity: Asian or Asian British Indian	1	1%	2	1%
Ethnicity: Asian or Asian British Pakistani	0	0%	0	0%
Ethnicity: Asian or Asian British Bangladeshi	0	0%	0	0%
Ethnicity: Asian Other	1	1%	1	0%
Ethnicity: Chinese	0	0%	0	0%
Ethnicity: Black or Black British Caribbean	0	0%	0	0%
Ethnicity: Black or Black British African	0	0%	0	0%
Ethnicity: Black Other	0	0%	0	0%
Ethnicity: Other	1	1%	2	1%

Religion: Christian	64	44%	159	50%
Religion: Buddhist	0	0%	0	0%
Religion: Hindu	0	0%	1	0%
Religion: Jewish	0	0%	0	0%
Religion: Muslim	0	0%	0	0%
Religion: Sikh	1	1%	1	0%
Religion: Other	2	1%	4	1%
Religion: None	63	44%	129	41%

Married/Civil Part/Cohabiting	115	80%	271	85%
Separated/Divorced/Widowed	7	5%	8	3%
Single	17	12%	28	9%

	User of...Woodgrove - Swale			
	Use this Centre only		All users of this Centre	
Disability: Limited a lot	1	1%	2	1%
Disability: Limited a little	7	5%	11	3%
Disability: No	124	86%	286	90%

Sexuality: Bi/Bisexual	0	0%	1	0%
Sexuality: Heterosexual/Straight	131	91%	289	91%
Sexuality: Gay woman/Lesbian	1	1%	3	1%
Sexuality: Gay man	0	0%	0	0%
Sexuality: Other	0	0%	0	0%
Gender not the same as at birth	1	1%	1	0%

Base: Public - Use this Centre only (144), All users of this Centre (318)

KENT COUNTY COUNCIL EQUALITY ANALYSIS / IMPACT ASSESSMENT (EqIA)

This document is available in other formats, Please contact cc.commissioning@kent.gov.uk or telephone on 01622 696678

Directorate: Families and Social Care

Name of policy, procedure, project or service

Children's Centre Future Service Options Programme – Consultation Proposal

(This EqIA builds on the EqIA undertaken in January 2012 on the Review of Kent's Children's Centres)

This EqIA is supported by 37 Centre level EQIAs for proposed closures and reduction to part time hours (see below).

What is being assessed?

Changes to Children's Centres Programme in Kent to operate as a Hub (Children's Centre Plus) and Link Centre model including a reconfiguration of services leading to a reduction of 24 centres (2 merge and relocate to one site. 7 are currently part time).

In addition;

- 13 centres reduce from full time to part time.
- 5 centres remain part time.
- 7 centres that are currently provided by third parties are managed by KCC.

Rationale for Centre closures and part times hours varies by Centre. Further information is provided in the Consultation Document at www.kent.gov.uk/childrenscentres.

In summary these Centres generally:

- Serve an area where smaller numbers of children and families need early support services
- The majority of Centre users also attend another Children's Centre

Some are also;

- Identified as largely signposting only and/or having little impact on user numbers in the surrounding area and/ or library is viewed as an essential community resource more so than the Children's Centre.
- Located within close proximity of another Centre.

Existing catchment areas of potential Centre closures would be reconfigured and merged to enable greater emphasis on services rather than buildings and enable outreach to be increased equitably.

October 2013

The proposal presents 16 Hubs across the County, 40 Link centres, and 18 part time link centres. This proposal has been aligned to CCG areas but CCG area boundaries have not been the basis for any decision making.

This proposal creates savings from administration, management and accommodation. Any changes to staffing structures will be subject to consultation with staff. Such consultation cannot take place until a decision has been made in relation to the reconfiguration of the Children's Centre Programme in Kent (anticipated December 2013). A separate EqIA will be undertaken for any restructuring of Children's Centre staffing, as required, and will be shared with staff through any subsequent consultation. (Some initial staffing data is provided in Appendix C).

Responsible Owner/ Senior Officer

Mairead MacNeil/ Karen Mills

Date of Initial Screening

2nd July 2013

Date of Full EqIA :

August – November 2013

Version	Author	Date	Comment
1.0	Amy Watson	24.04.2013	To support Options appraisal as submitted to Corporate Board 13.05.13
2.0	Clive Lever	May 2013	Reviewed and comments provided.
3.0	Amy Watson	24.06.2013	Wording updated to 'proposal' instead of 'option'. Minor amendments to incorporate corporate team's comments.
4.0	Equality and Diversity Team	01.07.13	Comments on version 3
5.0	Chris Barker	02.07.13	Updated to reflect Equality and Diversity Team comments
6.0	Matthew Mallett	21.11.13	Full EqIA using consultation responses
7.0	Matthew Mallett / Alister McClure	27.11.13	Updated with comments from Equality and Diversity team

Screening Grid

Characteristic	Could this policy, procedure, project or service affect this group less favourably than others in Kent? YES/NO If yes how?	Assessment of potential impact HIGH/MEDIUM LOW/NONE UNKNOWN		Provide details: a) Is internal action required? If yes what? b) Is further assessment required? If yes, why?	Could this policy, procedure, project or service promote equal opportunities for this group? YES/NO - Explain how good practice can promote equal opportunities
		Positive	Negative	Internal action must be included in Action Plan	If yes you must provide detail
Age	<p>Yes. Children’s Centres core purpose is to improve outcomes for young children and their families through reducing inequalities. Young children are classified as pre-birth to age 5.</p> <p>In 2011 there were 1,466,500 residents in the KCC area, 89,300 of these were 0-4 years old (6.1%)¹.</p> <p>In Kent, 42,480² children have been recorded as using a centre at least once between October 2011 and September 2012. 21 % were less than a year old, 24% were 1 year old, 21% were 2 years old, 16% were 3 years old, 12% were 4 years old and 5% were 5 years old.</p>	High	High	<p>a) Yes – Sustain current outreach services and invest in outreach provision to ensure all districts increase registrations and therefore families needs are assessed.</p> <p>Ensure measures are in place to enable vulnerable families (identified via CAF) to access services at alternative locations.</p> <p>Support current Children’s Centres users to understand how changes will affect them and to identify support available within hub and link model. (All children under 5 will remain entitled to access all Children’s Centres in the County).</p> <p>Children’s Centres will continue to signpost to age appropriate provision for children over 5.</p> <p>Due to a reduced number of centres work must be undertaken to ensure that hub and link centres are targeting those</p>	<p>Yes - Provision will be reduced at 37centres (13 proposed reduction to part time and 24 proposed closures). Reduced centres are generally in areas of low levels of need. A reduction in investment at these centres will enable higher level of investment in more needy areas and therefore reduce inequalities in outcomes for children under 5. Outreach services will remain in these areas.</p> <p>This proposal will enable greater emphasis on services rather than buildings and enable outreach to be increased equitably. By working as a hub and link centre model (with one catchment area) centres will be able to increase the proportion of under 5s registered at Children’s Centres. This will support the identification of families’ needs and enable services to be targeted at under 5s who are most in need.</p> <p>Through operating a hub and link model all families will continue to be offered a</p>

¹ Mid year population estimates, KCC

² E-start activity data

	<p>Teenage Parents are a key target group that access support through Children's Centres. In 2012, there were 4048 attendances at a service for teenage parents. This represents 1% of all Children's Centre attendances. (Not individuals)</p> <p>Between 2011 and 2031 it is estimated that the 0-4 population in the KCC area will reduce by 2.3%, to 87,200.</p>			<p>with the highest need across the merged catchment.</p> <p>b) Yes - Full Public Consultation on reduction of centres and reduced hours including identifying impacts of transport access for teenage parents.</p>	<p>service. Services will address locally identified need.</p> <p>It is likely that Children's Centres will continue to support slightly more 1 and 2 year olds than 3, 4 and 5 year olds in order to deliver successful early intervention and prevention.</p> <p>Teenage Parent Service are currently generally delivered at one or two Children's Centres within a district. Through the hub and link centre model (management) signposting to specialist services should increase e.g. Young Active Parents groups. A hub and link model may also increase the likelihood of teenage parents meeting and building peer support networks. A greater emphasis on services rather than buildings should support an increase in Teenage Parent registrations.</p>
<p>Disability</p>	<p>Yes - 7.6% of the population in the KCC area are claiming a disability benefit (3.6% aged 15 and under.)³</p> <p>0.7% of registered users at Children's Centres in 2011 stated they had a disability, a significantly lower proportion than the Kent figure.⁴</p> <p>Between October 2011 and</p>	<p>Medium</p>	<p>Medium</p>	<p>a) Yes – Ensure that parents and carers can access required information if they have print impairments, learning disabilities, are Deaf or hard-of-hearing, or would struggle to access standard print/standard English information in any other way because of their protected characteristics.</p> <p>Ensure measures are in place to enable vulnerable families (identified</p>	<p>Yes – Services will continue to address identified needs on an individual basis. Through a hub and link model centres will be able to share resources including best practice and specialist knowledge. Given the minimal numbers registered, a hub and link model may also increase the likelihood of disabled children and/ or disabled carers meeting and building peer support networks.</p> <p>Through the hub and link centre model</p>

³ KCC District Profiles; http://kent.gov.uk/your_council/kent_facts_and_figures/area_profiles.aspx

⁴ Source: eStart registrations November 2011

	<p>September 2012 0.26% of users (115 children) were recorded as having a disability. However, 99.7% of users do not have this information recorded.⁵</p> <p>Some Centres delivered targeted service for children with disabilities/ SEN. Details are incorporated within Centre level assessments.</p>			<p>via CAF) to access services (transport) at alternative locations. Ensure that disabled children and carers can continue to access services. See individual Centre EqIAs.</p> <p>Ensure that parents and carers are asked about disabilities at registration. Amend database to include a 'do not wish to answer' category and a 'no' category for disability.</p> <p>b) Yes - Full Public Consultation on reduction of centres and reduced hours - Targeted , a large number of disability records have either not been completed or users have not wished to disclose information and therefore it is difficult to measure impact.</p>	<p>(management) signposting to specialist services should increase.</p> <p>A greater emphasis on services rather than buildings will enable outreach to be increased equitably and therefore disabled children's registrations should increase. Through increased targeted work and shared specialist knowledge potential disability related needs should be identified earlier.</p> <p>Children's Centres will not discriminate directly or indirectly against any person because of their disability.</p>
Gender	<p>Yes - In Kent (all ages) 51% of the population are female and 49% are male. In 2012 94% of attendances at Children's Centres were made by a female parent or carer. 6% were made by a male parent or carer. Therefore, this will impact less favourably on females.</p> <p>51% of children who used a</p>	Medium	High	<p>a) Yes – service will address need identified regardless of gender.</p> <p>Continue to deliver 'dad's groups' and interventions targeted at male carers to increase engagement.</p> <p>b) Yes - Full Public Consultation on reduction of centres and reduced hours.</p>	<p>No - It is likely that Children's Centres will continue to support slightly more male under 5s. It is also likely that Children's Centres will continue to support more female carers than males.</p> <p>Yes - Currently some centres run targeted interventions for male carers and some do not. Through the hub and link centre model (management) signposting to these service should increase.</p>

⁵ Source: eStart Activity Data October 2011 – September 2012

	<p>Children's Centre between October 2011 and September 2012 were male and 49% were female. This is in line with the County population for this age group.</p> <p>There is also generally a disproportionately low number of men in part time work; therefore a reduction in operating hours could have a negative impact to gender equality</p>				<p>Children's Centres will not discriminate directly or indirectly against any person because of their gender.</p>
Gender identity	<p>Unknown - No impact has been identified at this stage due to a lack of information.</p>	Unknown	Unknown	<p>a) Yes – In line with KCC's Equality Strategy, KCC will seek to identify gender identity of Kent's residents. b) Yes - Full Public Consultation on reduction of centres and reduced hours. Genders identify questions incorporated. This impact assessment will be updated when such information is available.</p>	<p>Yes - There is an opportunity to promote good practice.</p> <p>Children's Centres will not discriminate directly or indirectly against any person because of their gender identity.</p>
Race	<p>This could impact Black or Minority Ethnic (BME) less favourably as a larger proportion of registered Children's Centres users are BME compared to County populations.</p> <p>In Kent 89% of the population are White British, 6.3% are BME.</p>	Medium	Medium	<p>a) Yes – Ensure language information and ethnicity information is obtained for all families at registration.</p> <p>Ensure that parents and carers can access required information if English is a second language, or they would struggle to access standard print/ standard English information in any other way because of their protected characteristics.</p> <p>Ensure that high levels of BME parents in</p>	<p>Yes – Services will continue to address identified needs on an individual basis. Through a hub and link model centres will be able to share resources including best practice and specialist knowledge e.g. English as an additional language. Given the minimal numbers registered, a hub and link model may also increase the likelihood of families with English as an additional language meeting and building peer support networks.</p>

	<p>Of the children who attended a Children’s Centre between October 2011 and September 2012, 64% were White British, 13% were BME and 23% chose not to record their ethnicity.</p> <p>Language information has not been obtained for 90% of families using Children’s Centres in Kent.⁶ Where information is available, English has been recorded as the first language for 9.32% of users. Polish has been recorded as the second largest proportion at 0.15% (63 users).</p> <p>The majority of Families with English as an additional language and families from ethnic minority communities (including Gypsy/Roma communities in Canterbury) have been identified in previous Equality Impact Assessments as being particularly vulnerable and hard-to-reach with Children’s Centre services.</p> <p>MOSAIC classifications of families attending Children’s Centres in Kent between June 2011 and June 2012</p>			<p>certain areas are able to access the consultation and respond.</p> <p>b) Yes - Full Public Consultation on reduction of centres and reduced hours. Race identification question incorporated. This impact assessment will be updated when language information is available.</p>	<p>Through the hub and link centre model (management) signposting to specialist services should increase.</p> <p>A greater emphasis on services rather than buildings will enable outreach to be increased equitably including to Gypsy/ Roma communities, families with English as an additional language and White British to reflect local populations.</p> <p>Children’s Centres will not discriminate directly or indirectly against any person because of their race.</p>
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⁶ As at 1st October 2012

	identified an overrepresentation amongst young professionals with children, many living in ethnically diverse neighbourhoods.				
Religion or belief	In Kent in the 2011 census 62.5% of the population have recorded their religion as Christian, 0.5% as Buddhist, 0.8% as Hindu, 0.12% as Jewish, 1% as Muslim, 0.72% as Sikh and 0.4% as other religion. 26.8% have stated no religion and 7.3% have not stated if a religion or not. Religion of Children's Centre users is unknown.	Unknown	Unknown	a) Yes – Ensure religion or belief information is obtained for all families at registration. b) Yes - Full Public Consultation on reduction of centres and reduced hours. Religion or belief question incorporated. This impact assessment will be updated when language information is available.	Children's Centres will not discriminate directly or indirectly against any person because of their religion or belief. Targeted services have previously been run in some communities to increase knowledge of all religions. This work will continue.
Sexual orientation	Sexual Orientation data is collected for parents and carers but due to the low number of responses is not valid. Sexual orientation is not a relevant consideration for under 5s	Unknown	Unknown	a) Yes – Continue to collect sexual orientation information b) Yes - Full Public Consultation on reduction of centres and reduced hours. Sexual Orientation question incorporated. This impact assessment will be updated when sexual orientation information is available.	Children's Centres will not discriminate directly or indirectly against any person because of their sexual orientation.
Pregnancy and maternity	Children's Centres core purpose is to improve outcomes for young children and their families through	Low	High	a) Work with Health partners to ensure provision continues at proposed part time link centres, link centres and Hubs. Continued information sharing to identify	Provision will be reduced at 24 centres and provision will be increased accordingly at hub and link centres. This will not affect universal access to Health services or

	<p>reducing inequalities. Young children are classified as pre-birth to age 5 and therefore this group will be impacted less favourably.</p> <p>Children's Centres offer a range of pre-birth and maternity services. This proposal does not plan to make any changes to current health visitor services and maternity services delivered at the majority of Children's Centres in Kent. There will potentially be an impact on services at;</p> <ul style="list-style-type: none"> • Little Painters • Squirrel Lodge, • Apple Tree, • Briary, • St. Mary's, • New Romney, • Woodgrove • Maypole, • Tina Rintoul, • The Buttercup, • The Daisy, • The Village <p>There will be no change to health services delivered in other community buildings i.e. as outreach,</p>			<p>families most in need of support.</p> <p>b) Yes – See Centre level EqIAs. Further engagement with Health colleagues required. EqIA to be updated accordingly.</p>	<p>Health Visitor home visits.</p> <p>It is not expected that Health services will reduce at Part Time centres. As opening hours will be determined locally to reflect need.</p>
<p>Marriage and Civil Partnerships</p>	<p>This is not applicable for under 5 age group. In Kent 48.8% of the</p>	<p>Low (based on</p>	<p>Medium (based on</p>	<p>a) Yes – Investigate feasibility of collecting marriage and civil partnership information at registration.</p>	<p>Yes – Services will continue to address identified needs on an individual basis. Lone Parent will remain a target group for</p>

	<p>population 16 years and over are married, 0.2% are in same sex civil partnerships, 31.3% are single, 2.8% are separated, 9.6% are divorced, 7.3% are widowed.</p> <p>This information is not available for Children's Centre users but MOSAIC classifications of families attending Children's Centres in Kent between June 2011 and June 2012 identified an overrepresentation amongst users for the following groups;</p> <ul style="list-style-type: none"> • Lone parents with young children, living in high crime areas on large social housing estates • Singles and lone parents on low incomes, renting terraces in town centres • Young singles and couples in small privately rented flats and terraces on moderate incomes. <p>It is therefore possible that this could impact singles less favourably.</p> <p>As lone parents are an Ofsted target group, there is the potential that couples,</p>	<p>information available)</p>	<p>information available)</p>	<p>b) Yes - Full Public Consultation on reduction of centres and reduced hours. Marriage and Civil Partnership question incorporated. This impact assessment will be updated when sexual orientation information is available.</p>	<p>Children's Centres in line with Ofsted requirements and will therefore seek to reduce inequalities in outcomes for lone parents and their children.</p>
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	<p>those married, civil partnerships or co-habiting may be negatively impacted. However, this is justifiable if services are delivered on the basis of need.</p>				
<p>Carer's responsibilities</p>	<p>Those children with a disability or families who have a caring responsibility may be impacted by the reconfiguration of approach.</p> <p>This section takes into account those who carry out a caring responsibility other than the parent/carer role. For information on the parent carer relationship please see the above sections.</p> <p>In Kent, 89.6% of the population do not provide unpaid care. 6.7% provide no unpaid care, 1.3% provide 20-49 hours of care, and 2.5% provide more than 50 hours.</p> <p>2.5% of those providing unpaid care are aged under 18 years. Of these, 0.1% are aged 5-7, 0.1% are aged 8-9, 0.3% are aged 10-11, 0.7% are aged 12-14, 0.3% are 15, and 0.8% are aged 16-17.</p>	<p>Low (based on information available)</p>	<p>Medium (based on information available)</p>	<p>a)- Yes- Investigate feasibility of gathering district level data on the number of those with an unpaid caring responsibility accessing children's centre services. b)- This impact assessment will be updated when carer's responsibilities information is available.</p>	<p>Yes- Children's Centres will continue to address needs on an individual basis. As a new protected characteristic, Children's Centres will look to ensure that the needs of carer's are identified.</p> <p>Disabled Children and Children with a Disabled parent are a target group for Children's Centres. Addressing the additional needs of carers will ensure that the best possible service provision is offered.</p>

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	There is no children-centre specific data available for the number of carers accessing services at children's centres				
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INITIAL SCREENING

Proportionality - Based on the answers in the above screening grid what weighting would you ascribe to this function – see Risk Matrix

Low	Medium	High
Low relevance or Insufficient information/evidence to make a judgement.	Medium relevance or Insufficient information/evidence to make a Judgement.	High relevance to equality, /likely to have adverse impact on protected groups

Proportionality

High – This proposal is likely to have an adverse impact on age, disability, gender and pregnancy and maternity protected characteristics. There is also likely to be an adverse impact on single (lone) parents.

Context

Kent’s Children’s Centre programme has been rolled out across the county over the last seven years in three phases, each within tight timescales and different financial constraints. Kent currently have 97 Children’s Centres in operation. All centres are slightly different depending on local need, their level of funding and the range of services they provide. Parents play a key role in influencing services that are provided. They operate from a range of buildings – from new purpose built centres, to refurbished spaces within existing buildings such as schools and from a range of delivery points in local communities. Currently we have 7 agreements in place with voluntary, community and statutory organisations to manage and deliver Children’s Centre services across eight centres. All the other centres are managed by KCC.

Children’s Centres are places where all children under five years old and their families can receive services and information. These services vary according to centre but may include:

- Integrated early education and childcare
- Support for families – including advice on parenting, local childcare options and access to specialist services for families
- Child and family health services – including health screening, health promotion, health visitor and midwifery services, and the healthy child programme.
- Helping parents into work – with links to Jobcentre Plus and training.

There have been recent reductions in government funding for children’s centres as well as changes to government policies about how Children’s Centres should work. This proposal seeks to align with;

- A revised core offer for Children’s centre
- Revised Children’s Centre Statutory Guidance (draft)
- Revised Ofsted Inspection Framework (April 2013)
- Reductions in Early Intervention Grant Funding

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- Health Visitor Implementation Plan

Aims and Objectives

In line with KCC's medium-term plan, Bold Steps for Kent, we need to change the way we work so we can continue to meet the needs of our children and their families with reduced budgets. Kent aims to achieve this by;

- Delivering savings of at least £1.5 million;
- Protecting services which improve health, education and social care;
- Continuing to offer parents and prospective parents a choice about which Centre they use;
- Ensuring we give support to those children and families who need it most;
- Improving co-ordination and access to a range of services for families with children aged 0-11 where at least one child in the family is under 5.

This proposal aims to save **at least** £1.5m by 2014/15.

Beneficiaries

The main beneficiary is the community of Kent, in particular those families with children between 0 – 5 years, including those families and young children who are the most vulnerable.

For example:

- Lone parents, young parents and mothers with post-natal depression.
- Parents with a learning difficulty or disability, or parents who have a child with a learning difficulty or disability.
- Migrant families or families where English is an additional language.
- Families with complex needs or where there is mental illness.
- Families who suffer from domestic violence or where there is substance or alcohol abuse.
- Families living in poverty and poor housing.

The Local Authority (LA) will benefit. Schools, Health Services, childcare providers and voluntary sector providers could benefit.

ASSESSMENT

Involvement and Engagement

(Information on Pre-consultation activity can be found at Appendix 1)

Consultation: Shaping the future of Children's Centres in Kent

The consultation "Shaping the future of Children's Centres in Kent" began on Thursday 4th July and ended on Friday 4th October. Information on the consultation was shared with County Councillors and notification of the consultation launch was sent to approximately 35,000 stakeholder email

addresses (including Borough/District and Parish Councillors, service delivery partners and registered Children's Centre users. Articles were posted on Knet, Kent.gov.uk and in Kmail and a promotional tab advertising the consultation remained on the front page of Kent.gov.uk throughout the duration of the consultation. The KCC Twitter account was also used to publicise the consultation on 4th July. Leaflets and posters were produced and distributed to advertise and promote the consultation.

A paper version of the consultation document was produced outlining the proposal for Kent Children's Centres and providing information on the Children's Centres proposed for closure or reduced operating hours as well as proposed future operating arrangements. The document contained a hard copy response form to the consultation for those unable to access the internet and Children's Centre staff assisted vulnerable users in completing the questionnaire.

The consultation questionnaire was made available online along with other background information including the consultation document, frequently asked questions, legal requirements, equality impact assessments (screening documents) and maps. The web home page for the consultation was viewed 15,403 times by 12,605 individual computers during the period of the live consultation.

Translations of the consultation document were made available on request. The consultation document has been translated into Russian, Polish and Nepali.

Throughout the consultation District Children's Centre Managers promoted the consultation to service users and professionals. Community Engagement Officers raised awareness at the local level and engaged with specific target groups and stakeholders to participate in the consultation. Focus groups were held with centres proposed for closure where the interim analysis of the consultation responses identified the need for further completion of questionnaires relating to those centres. In total, 1,032 events/activities were held across the county, highlighting the consultation to at least 26,034 attendees. Engagement activities included: Children's Centre drop-in events; Q&A sessions; facilitated discussions at existing groups; parental support to fill in consultation forms (online or hard copy) and attendance at community events to raise awareness⁷.

The authority was particularly interested to hear the views of people whom Children's Centre services are targeted at, including those who were under-represented amongst users, and those who were very high volume users.

This was to help identify the impact of our proposals. Target groups for the consultation included;

- Lone Parents

⁷ Further details can be found in the Children's Centre Post-consultation report appendices at www.kent.gov.uk/childrenscentres

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- Fathers⁸
- Teenage mothers⁹
- Teenage fathers
- Pregnant teenagers
- Parents aged 25 or under
- Parents aged over 35
- Parents of children from low income backgrounds
- Parents from minority ethnic groups
- White parents from low income backgrounds
- Gypsy, Roma and Traveller parents
- Parents with English as an additional language
- Lesbian, Gay and Transgender parents
- Disabled¹⁰ parents

Information was also collected relating to; religion, sexual orientation, gender and marital status to support the identification of equality impacts.

Consultation findings

6,008 consultation questionnaires were completed, 5,229 from members of the public and 779 from professionals (Four responses were received in Russian and these were translated.).

Appendix G of the Post Consultation report provides a detailed analysis of the consultation responses by proposal and affected Centre. In summary;

The vast majority of those electing to respond to the consultation disagree to some extent with reducing the number of Children's Centres (87%, 5,098 individuals/professionals.) Around 1 in 7 of the professionals responding support the proposals (including 23% of the nursery/pre-school staff responding to the consultation).

Amongst those members of the public who disagree with reducing the number of Children's Centres, 26% (1,174 individuals) indicate that they will not use Children's Centres at all as a result. Amongst those objecting to the proposal who feel that they will not use Children's Centres at all, travel is clearly a key concern. Other key concerns include the feeling that Centres form a local community hub and/or a chance to meet people.

⁸ For the purposes of the consultation "fathers" always refers to men with children aged 0-4 years old

⁹ For the purposes of the consultation "mothers" always refers to women with children aged 0-4 years old

¹⁰ For the purposes of the consultation "disabled" or "disability" always refers to respondents who indicated that "their day-to-day activities are limited a lot because of a health problem or disability which has lasted, or is expected to last, at least 12 months"

64% (3,625 individuals/professionals) disagree with reducing hours at some Children's Centres; this is significantly lower than the level of disagreement to reduce the number of Children's Centres.

Amongst those members of the public who disagree with reducing hours at some Children's Centres, 15% (474 individuals) indicate that they will not use Children's Centres at all as a result.

Opinions are more divided with respect to linking Children's Centres to reduce administrative and management costs. Whilst 47% disagree (or disagree strongly) with the proposal, 25% support it. Around two-fifths (39%) of the professionals responding disagree with the proposals (rising to 53% of the Children's Centre staff responding to the consultation).

Amongst members of the public objecting to linking Children's Centres, a number are concerned over the proximity of services and the ability to travel. Other key concerns include the potential impact on quality and a perception that the proposals will lead to less help and support being available for parents, that services will be oversubscribed and that staff will be overstretched.

Consultation responses categorised by protected characteristic indicated that those under the Age (teenagers), Gender (fathers), Religion (Buddhist, Sikh and Other Religious parents), Pregnancy and maternity (respondents who will be a parent soon) and Marriage and Civil Partnerships (lone parents) categories were more likely to disagree with proposals to reduce the number of centres and reduce the opening hours at some centres than county average responses.

Responses from other protected characteristic groups, such as those with a Disability, Gender Identity, Race and Sexual Orientation were broadly the same as the county average.

Information and Data

Data used in Initial Screening can be found at Appendix 2

Data for Full Impact Assessment see Appendix 3 and 4

See also: post-consultation report for further details

Potential Impact

Adverse Impact:

The initial screening identified the potential for there to be an adverse impact on the following groups;

- Under 5 year olds
- Teenage parents
- Lone parents
- Disabled children and children with SEN
- Female parents/ carers
- BME
- Pregnancy and Maternity

Impact was unknown for gender identity, religion or belief, sexual orientation and carer's responsibilities.

Post-consultation

The results of the consultation support the findings that proposals in question have the potential to adversely impact:

- Teenage mothers and teenage parents (age),
- Lone parents (marriage and civil partnerships)
- Expectant parents (pregnancy and maternity).

It did not identify a differential impact on disabled parents or BME groups and although responses were slightly higher from Sikh and Buddhist parents than county averages, response rates were very low from these particular target groups.

In addition consultation findings identified the potential for fathers to be adversely impacted. 8% of consultation responses were from males and 88% were from females. In comparison the initial screening identifies 6% males using Children's Centres and 94% females. When responding to the consultation a higher number of fathers objected to both the proposals to close and reduce the opening hours of Children's Centres than average responses across the county. The reasons for these fathers objecting are comparable to those stated in the judgement section below, namely that:

- Will make travel to centres more difficult / alternative centres too distant
- Children's centres form a local community hub / chance to meet people
- Very happy with my local centre / prefer it to others / we enjoy going there / only use this one
- Centre is close by / easily accessible

Positive Impact:

The initial screening identified the potential for there to be a positive impact on some vulnerable groups using the centres, particularly children under 5 years old, male parents/ carers, white British, disabled children, teenage parents and lone parents.

For example through:

- Increased targeting of provision to those most in need.
- Reinvesting resources from areas of less need to areas of high need
- An increase in outreach services and therefore increase in registrations and need assessments – identifying a family's needs earlier.
- Building on strong local partnerships and integrated working approaches currently in place.
- Improved signposting across hub and Link
- Shared knowledge, expertise and best practice across hub and link
- Increased likelihood of targeted group e.g. teenage parents building peer support networks.
- Improving access by under-represented groups
- Improving data collection for categories of data related to gender identity, religion and sexual orientation.

Impact is unknown for gender identity, religion or belief, sexual orientation or carer's responsibilities.

Post-consultation

The consultation did not identify that any protected characteristic grouping would be more positively impacted than another. The proportion of responses received agreeing with the consultation were from professionals from whom the highest group of responses agreeing with the proposals were received.

JUDGEMENT

Initial Screening

Option 1 – Screening Sufficient YES/**NO**

Justification: Further action is required. Full Impact Assessment to be undertaken following full Public Consultation.

Option 2 – Internal Action Required **YES**/NO

There is potential for adverse impact on particular groups and we have found scope to improve the proposal. Please see action plan.

Option 3 – Full Impact Assessment **YES**/NO

Post-consultation

The results of the consultation find that the proposals in question have the potential to adversely impact:

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- Teenage mothers and teenage parents (age),
- Lone parents (marriage and civil partnerships)
- Expectant parents (pregnancy and maternity).
- Fathers (gender)

Across all characteristics there are concerns about continued accessibility of services, the costs and difficulties of travelling to alternative locations and the reduction in opening hours and possible unsuitable hours. The response from families on a low income (as classified by MOSAIC analysis) show a similar level of objection to county responses. However, in this group, those respondents stating that they will use Children's Centre less often or will no longer use a Children's Centre because of the proposals the most popular reasons cited were:

- Will make travel to centres more difficult / alternative centres too distant
- Children's centres form a local community hub / chance to meet people
- Very happy with my local centre / prefer it to others / we enjoy going there / only use this one
- Centre is close by / easily accessible

Low income in Kent, is not restricted to one particular equality group. Similar reasons for no longer using centres are cited across characteristics with respondents stating they value universal services that are local and provide access to a range of services from different providers.

There are also 'known unknowns' that could impact either positively or negatively on different protected characteristic groups and the development of the hub and link model. These include:

- Budget allocations for 2014/2015.
- Service plans for 2014/2015
- Staffing levels
- Availability and costs of accessible venues to run services from.
- Impacts of proposed changes on partnership working
- Services to be commissioned

Generally, from the consultation there are clear messages about the value centre users place on centres in terms of the services provided and support received from core and other services. They are seen as community hubs, serving a wide range of parent/carer and children's needs. Centre users are concerned about the loss of these services locally, and the implications for easy access in terms of transport, costs and time.

As a result of the consultation responses this full Equality Impact Assessment recommends that centre closures should not go ahead unless alternative venues in the local community can be found at which to run services for the four groups of service users listed above.

In addition to the equality implications stated here the Council has re-evaluated its original proposals by:

- Reconsidering need (population based) and re-analysing usage patterns
- Identifying the impact on users (as identified by consultation respondents), and particularly sole users.
- Assessing suitable alternative venues within 1 mile of a proposed closure to enable services to continue to be delivered within the community.
- Identifying property implications including potential future (community) usage of accommodation and the likelihood of DfE clawback of capital monies.

It has therefore recommended the following changes to services:

Based on the re-evaluation of each of the original proposals, as described in Section 5 it is recommended that;

Recommendation	Rationale	Children's Centres
Five Centres are retained in their current form and continue to be Ofsted designated Children's Centres	Based on the largest numbers of sole users impacted by the proposal and the lack of suitable alternative venues	St. Marys, New Romney Folkestone Early Years Woodgrove
	Based on highest need (by volume) and the highest sole usage (by volume)	Temple Hill
Six Children's Centre buildings are retained to offer access to early childhood services ^[1] (with <u>at least</u> part-time hours).	Based on the number of sole users impacted by the proposals and the lack of suitable alternative venues	Maypole, The Village, Swalecliffe, Briary,
	Based on the number of sole users impacted by the proposals and purpose 'built' accommodation	Apple Tree Marden
One Centre is retained as a Part Time Centre	Based on the proportion of sole users (increase of 8%) and purpose 'built' accommodation	Tina Rintoul
One additional hub is	Based on the suggested retention	Joy Lane

^[1] 12 Children's Centres are merged into 6 but all 12 Children's Centre buildings are retained to continue to offer access to early childhood services on behalf of a Children's Centre - linked site/ outreach centre.

created in the Canterbury CCG area	of St. Mary's, Briary, Swalecliffe, Apple Tree and Tina Rintoul	
An alternative Centre becomes the hub in Gravesham and Maidstone	Based on the accommodation space and facilities available	Riverside (instead of Little Pebbles) Meadows (instead of Sunshine)
Merge The Daisy with The Buttercup. Retain Children's Centre services in Tower Hamlets (The Daisy). (New EqIA available at Appendix C – impact assessed a medium.)	Based on lack of suitable alternative accommodation in Dover Town Centre.	The Buttercup The Daisy
Hub and link arrangements are changed so catchments are co-terminus with CCG and district boundaries in most cases.	Based on feedback from key partners.	Little Foxes, South Tonbridge and Borough Green are linked to Woodlands. Greenlands at Darenth is linked to Brent. Westborough is linked to Sunshine.

In line with the recommendations above, the impact on the overall Children's Centre Programme would be;

Consultation Proposal	Proposed Decision
Closing 22 Children's Centres (including either Folkestone Early Years or the Village)	Close 12 Children's Centres BUT retain services within the local community Retain 4 Centres in current form (plus Folkestone Early Years) Retain 6 Children's Centre buildings are retained to offer access to early childhood services (with at least part-time hours). Retain 1 Centre as part time
Closing and merging 2 Children's Centres and relocating them to an existing building in Dover Town Centre	Close the Daisy and merge with The Buttercup. Retain Children's Centre services in Tower Hamlets (The Daisy).
Reducing the hours to part-time at 13 Centres	Reducing the hours to part-time at 12 Centres (retaining Temple Hill as full time.) All KCC services to be delivered within part time hours, some health

	services may be delivered outside of these hours.
Linking 16 hubs with 40 full time Centres and 18 part time Centres	Linking 17 hubs with 43 full time Centres, 18 part time Centre and 7 'outreach centres/ linked sites'.

This will have the following impact on services;

- 39 (KCC) activities and 12 (health) services which are currently delivered at Children's Centres that are recommended for closure will relocate to suitable alternative venues. This includes services currently delivered at; Cherry Blossom, Squirrel Lodge, Little Bees, Daisy Chains, Little Painters, Loose, Dunton Green, Merry-Go-Round, Hadlow, Larkfield, Pembury and Primrose Children's Centres.
- 119 (KCC) activities and 50 (health) services which are currently delivered in Children's Centre buildings (that were proposed for closure) will be retained within the existing Children's Centre accommodation. This includes services currently delivered at; The Village, Marden, Apple Tree, Briary, Woodgrove Swalecliffe and Maypole Children's Centres.

Given the finding of the Impact Assessment it is particularly important to note that the recommendation is that all outreach services remain unaffected including service delivery at Merry- Go Round (Westerham) and Daisy Chains (Meopham) and that the feasibility of retaining some Children's Centre accommodation at Loose, Dunton Green and Hadlow to support the delivery of outreach services is investigated further.

Action Plan

It is proposed that the following actions are taken:

- Undertake the actions in Table 2 and 3 by April 1st 2014.
- Implement service relocation to identified suitable local venues from which to run services that are accessible and appropriate for teenage parents, expectant parents, lone parents and fathers.
- Update the budget allocation formula from which Children's Centre are allocated funding. This new model will ensure area with the highest levels of deprivation are allocated funding appropriately
- Data collection on all protected characteristics at the time of registration with centres

Further detail can be found in the action plan at page 26

Monitoring and Review

It is recommended the following review actions are undertaken on a quarterly basis from April 2014:

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- Monitor registration levels at Centres
- Monitor attendance levels to ensure numbers of services users with protected characteristics accessing services are maintained and improved
- Monitor and quality assure equality data capture on Children's Centre database

Equality and Diversity Team Comments

Whilst the individual proposals evidence medium or low impact and proportionality as a result of individual proposals, the county-wide assessment, at the screening stage identified that there may be wider patterns of impact on some protected characteristics. In particular, age, gender and pregnancy and maternity are impacted both negatively and positively, due to nature of the service. Additionally, the county-wide assessment (at screening stage) indicated that the uptake of services by disabled children and their families was generally low, whilst there was a higher proportion of use by Black and Minority Ethnic people. These patterns needed to be understood and were analysed through the full impact assessment. The service sought consultation feedback to test out some of the service assumptions about impact and to identify any gaps/issues. The full impact assessment four groups who would be potentially impacted negatively by the original proposal (see judgement section above), and have made recommendations to change the proposal as a result of understanding these issues.

Sign Off

I have noted the content of the equality impact assessment and agree the actions to mitigate the adverse impact(s) that have been identified.

Senior Officer



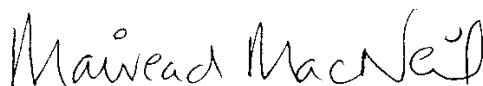
Signed:

Name: Karen Mills

Job Title: Commissioning Manager (Children's)

Date: November 2013

DMT Member



Signed:

October 2013

Name: Mairead MacNeil

Job Title: Director of Specialist Children's Services Date: November 2013

Equality Impact Assessment Action Plan

Protected Characteristic	Issues identified	Action to be taken	Expected outcomes	Owner	Timescale	Cost implications
All	Monitor equality information	Ensure that data is collected from those registering at centres on all protected characteristics (in particular disability, sexual orientation, gender identity, religion or belief, to provide improved information for targeting services.	Improved data on those	Strategic Commissioning / operational managers / eStart user group	January 2014 onwards	TBC
All	Impact on high numbers of sole users	Implement changes in Table 2 to ensure impact is reduced.	Service users remain able to access services within their local communities	Strategic Commissioning	January 2014 – June 2014	TBC
All	Impact on users on lower incomes	Reallocate budget model based on deprivation	Budget distributed more proportionately to those areas most deprived	Strategic Commissioning	October 2013 – March 2014	TBC
All	Inability to access services due to transportation difficulties if Centres close	Sustain and invest in development of outreach services and locate suitable alternative venues in the local community from which to deliver	Continued access to services in local communities and increased level of outreach services targeted at those in greatest need.	Strategic commissioning / Operational Managers	March 2014	TBC

		services should a centre be closed.				
Teenage Mothers / teenage parents (Age)	Impacts of closures/reduced opening hours.	Reducing or changing the opening hours of centres being considered for closure as an alternative to complete closure or locate suitable alternative venues in the local community from which to deliver services	Continued and increased level of service provision.	Strategic commissioning / operational managers	October 2013 – March 2014	TBC based on proposals
Lone parents (Marriage & Civil Partnerships)	Reduced access to services	Work with partners to identify needs and enable development and continuation of universal services and ensure wide provision of signposting users to other services and facilities.	Maintained access to services and increased partnership working	Strategic commissioning / operational managers	October 2013 – March 2014	TBC
Expectant parents (Pregnancy and maternity)	Reduced access to services	Continue to develop partnership working with health services to ensure universal provision at appropriate accessible locations	Maintained or increased support during pregnancy and maternity.	Strategic Commissioning / Operational Managers / Health partner organisations	October 2013 – June 2014	TBC
Fathers	Centre locations and opening hours	Consider venues and opening times specific	Increased accessibility of	Strategic commissioning /	October 2013 – March 2014	TBC

October 2013

(Gender)		to the need of male parents/ carers.	services to male parent/ carers.	operational managers		
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Appendix 1

Pre-consultation engagement activity

On the 14th January 2013 a Strategic engagement workshop was held. Generally, participants supported a policy and planning approach (further analysis is available at Appendix D) which:

- Gave emphasis to a consistent approach to service delivery and planning across Kent;
- Supported a shift to more focus on neediest children and families by developing a “Core Purpose Plus” methodology and policy focus;
- Harnessed Children’s Centres to add value to existing services and extend functional role and brief to support siblings of Under 5s up to age 11;
- Ensured the continued provision of Children’s Centres in every community;
- Ensured consolidation of service provision and embedding of integrated working;
- Encouraged service delivery alignment and integration.

During February a series of District engagement workshops, The 12 workshops were well attended with over 360 stakeholders with strong representation from all sectors including Children’s Lead GPs, Public health and KCHT.

The views from the District engagement events broadly reflect the views from the strategic workshop and views gathered to date. In addition, there is general acceptance that by ‘enhancing the offer’, we could add value to the Children’s Centres core offer.

Across the county;

- 72% supported more effective commissioning
- 70% supported opportunities to make better use of existing community facilities e.g. libraries, gateways, school and adult education facilities (particularly for outreach services).
- 68% of attendees at District engagement events supported a standardised management arrangement, such as hub and spoke or clustering.
- 66% supported a review of existing catchment areas and
- 58% supported a move towards district wide or area budgets (currently 108 budgets).
- 55% supported a greater emphasis on services rather than buildings (55%).

Lower proportions supported the regularisation of staffing structures (48%) and the development of more virtual centres (48%).

Appendix 2

Kent Population Data

Population by gender, 2011 - Kent

Source: 2011 Mid-year population estimates, Office for National Statistics

	Total Persons		Males		Females	
	No.	% of total population	No.	%	No.	%
All Ages	1,466,500	100.0%	717,200	48.9%	749,200	51.1%
0-4	89,300	6.1%	45,800	51.3%	43,500	48.7%
5-9	84,500	5.8%	43,500	51.5%	41,000	48.5%
10-14	90,900	6.2%	46,300	50.9%	44,600	49.1%
15-19	96,100	6.6%	49,300	51.3%	46,800	48.7%
20-24	87,800	6.0%	44,000	50.2%	43,700	49.8%
25-29	83,400	5.7%	41,100	49.3%	42,300	50.7%
30-34	83,000	5.7%	40,500	48.8%	42,400	51.2%
35-39	90,800	6.2%	44,300	48.8%	46,500	51.2%
40-44	108,100	7.4%	53,200	49.2%	55,000	50.8%
45-49	110,200	7.5%	54,800	49.8%	55,300	50.2%
50-54	96,000	6.5%	47,700	49.6%	48,400	50.4%
55-59	85,600	5.8%	42,200	49.3%	43,400	50.7%
60-64	95,800	6.5%	46,800	48.8%	49,100	51.2%
65-69	78,800	5.4%	38,200	48.5%	40,600	51.5%
70-74	60,400	4.1%	28,800	47.6%	31,700	52.4%
75-79	49,800	3.4%	22,700	45.5%	27,100	54.5%
80-84	38,700	2.6%	16,000	41.5%	22,600	58.5%
85-89	23,700	1.6%	8,300	34.9%	15,400	65.1%
90+	13,500	0.9%	3,700	27.3%	9,800	72.7%

Clinical Commissioning Group	2014 Population Projections
NHS Ashford CCG	8,800
NHS Canterbury and Coastal CCG	11,200
NHS Dartford, Gravesham and Swanley CCG	17,100
NHS South Kent Coast CCG	12,000
NHS Swale CCG	7,000
NHS Thanet CCG	8,600
NHS West Kent CCG	29,500
KCC Area	94,200

Disability benefit claimants (Disability Living Allowance or Attendance Allowance)

Kent - May 2012

Source: DWP Longitudinal Study

	All People		Males		Females	
	Number	%	Number	%	Number	%
Total	111,380	7.6%	50,360	7.0%	61,020	4.2%
0-15	10,160	3.6%	7,300	5.0%	2,860	2.1%
16-64	44,920	4.9%	22,350	4.9%	22,560	4.9%
65+	56,300	21.3%	21,640	18.4%	34,660	23.5%
Young people (24 and under)	16,500	3.7%	11,360	5.0%	5,130	2.3%

Population by ethnicity, 2011 - Kent

Source: 2011 Census - Table KS201EW

	Kent		England	
	Number	%	Number	%
All people	1,463,740	100%	53,012,456	100%
White	1,371,102	93.7%	45,281,142	85.4%
BME	92,638	6.3%	7,731,314	15%
English / Welsh / Scottish / Northern Irish / British	1,303,558	89.1%	42,279,236	79.8%
Irish	10,239	0.7%	517,001	1.0%
Gypsy or Irish Traveller	4,685	0.3%	54,895	0.1%
Other White	52,620	3.6%	2,430,010	4.6%
White and Black Caribbean	6,266	0.4%	415,616	0.8%
White and Black African	2,997	0.2%	161,550	0.3%
White and Asian	7,520	0.5%	332,708	0.6%
Other Mixed	5,324	0.4%	283,005	0.5%
Indian	18,136	1.2%	1,395,702	2.6%
Pakistani	2,406	0.2%	1,112,282	2.1%
Bangladeshi	3,381	0.2%	436,514	0.8%
Chinese	5,978	0.4%	379,503	0.7%
Other Asian	17,713	1.2%	819,402	1.5%
African	11,523	0.8%	977,741	1.8%
Caribbean	3,293	0.2%	591,016	1.1%
Other Black	1,400	0.1%	277,857	0.5%
Arab	1,535	0.1%	220,985	0.4%
Any other ethnic group	5,166	0.4%	327,433	0.6%

Population by religion, 2011 - Kent

Source: 2011 Census - Table KS209EW

	Kent		England	
	Number	%	Number	%
ALL PEOPLE	1,463,740	100%	53,012,456	100%
Christian	915,200	62.5%	31,479,876	59.4%
Buddhist	6,802	0.5%	238,626	0.5%
Hindu	10,943	0.7%	806,199	1.5%
Jewish	1,777	0.1%	261,282	0.5%
Muslim	13,932	1.0%	2,660,116	5.0%
Sikh	10,545	0.7%	420,196	0.8%
All other religions	6,145	0.4%	227,825	0.4%
No religion	391,591	26.8%	13,114,232	24.7%
Religion not stated	106,805	7.3%	3,804,104	7.2%

Marital & Civil Partnership Status

Source: 2011 Census Table KS103EW

	Kent		England	
	Number	% of all people 16+	Number	% of all people 16+
All people aged 16 and over	1,180,186	100%	42,989,620	100%
Single (never married or never registered a same-sex civil partnership)	369,334	31.3%	14,889,928	34.6%
Married	576,067	48.8%	20,029,369	46.6%
In a registered same-sex civil partnership	2,388	0.2%	100,288	0.2%
Separated (but still legally married or still legally in a same-sex civil partnership)	32,802	2.8%	1,141,196	2.7%
Divorced or formerly in a same-sex civil partnership which is now legally dissolved	112,916	9.6%	3,857,137	9.0%
Widowed or surviving partner from a same-sex civil partnership	86,679	7.3%	2,971,702	6.9%

People providing unpaid care

Source: 2011 Census Table KS301EW

People providing unpaid care	Kent		England	
	Number	%	Number	%
All People	1,463,740	100.0%	53,012,456	100.0%
Provides no unpaid care	1,311,963	89.6%	47,582,440	89.8%
Provides 1 to 19 hours unpaid care a week	97,464	6.7%	3,452,636	6.5%
Provides 20 to 49 hours unpaid care a week	18,432	1.3%	721,143	1.4%
Provides 50 or more hours unpaid care a week	35,881	2.5%	1,256,237	2.4%

Young people providing unpaid care - 2001

Source: 2001 Census

People providing unpaid care	Kent		Kent		England	
	Number	% of age group	Number	% of age group	Number	% of age group
5-7	156	0.1%	156	0.1%	5,465	0.1%
8-9	182	0.1%	182	0.1%	7,834	0.2%
10 & 11	390	0.3%	390	0.3%	16,267	0.3%
12-14	957	0.7%	957	0.7%	46,394	0.9%
15	422	0.3%	422	0.3%	21,402	0.4%
16-17	1,086	0.8%	1,086	0.8%	52,580	1.0%
All people under 18	3,193	2.5%	3,193	2.5%	149,942	2.9%
All People	127,838	100%	127,838	100%	5,194,568	100%

Household Composition

Source: 2011 Census - Table
KS105EW

2011	Kent	Kent	England
Total Households	605,638	605,638	22,063,368
One person Households	174,331	158,620	5,451,192
<i>Aged 65 and over</i>	79,310	79,310	2,725,596
<i>Other</i>	95,021	79,310	2,725,596
One Family Only	391,641	391,641	13,631,182
<i>All aged 65 and over</i>	56,575	56,575	1,789,465
<i>Married or same-sex civil partnership couple: No children</i>	80,185	80,185	2,719,210
<i>Married or same-sex civil partnership couple: Dependent children</i>	97,024	97,024	3,375,890
<i>Married or same-sex civil partnership couple: All children non-dependent</i>	34,233	34,233	1,234,355
<i>Cohabiting couple: No children</i>	32,221	32,221	1,173,172
<i>Cohabiting couple: Dependent children</i>	27,561	27,561	890,780
<i>Cohabiting couple: All children non-dependent</i>	3,197	3,197	108,486
<i>Lone parent: Dependent children</i>	41,068	41,068	1,573,255
<i>Lone parent: All children non-dependent</i>	19,577	19,577	766,569
Other Household Types	39,666	39,666	1,765,693
<i>With dependent children</i>	13,880	13,880	584,016
<i>All full-time students</i>	2,483	2,483	124,285
<i>All aged 65 and over</i>	1,949	1,949	61,715
<i>Other</i>	21,354	21,354	995,677

MOSAIC classification for Children's Centre Users June 2011 – June 2012

	Group Description	Count of Households in the KCC	Percentage of Households	Families Attending Children's
		Source: MMG3 2010 HH estimates		June 2011 - June 2012
				Households
A	Extremely affluent, well educated owner occupiers living in more rural areas	72,764	11.96%	Low 1918 / 33043
B	Well off families with older children, working in managerial and professional careers	46,151	7.59%	Low 1675 / 33043
C	Retired people living comfortably in large bungalows and houses, often close to the sea	67,625	11.12%	Low 995 / 33043
D	Middle aged couples living in well maintained semi detached houses that they own	51,412	8.45%	Average 2666 / 33043
E	Cusp of retirement owner occupiers with some health issues	32,550	5.35%	Low 1106 / 33043
F	Singles and divorcees approaching retirement, living in privately rented flats and bungalows	40,347	6.63%	Low 1141 / 33043
G	Young professionals with children, many living in ethnically diverse neighbourhoods	74,007	12.17%	High 7371 / 33043
H	Young singles and couples in small privately rented flats and terraces on moderate incomes	21,180	3.48%	High 2919 / 33043
I	Transient young singles on benefits and students, renting terraces in areas of high ethnic diversity	24,162	3.97%	Average 1377 / 33043
J	Middle aged parents receiving benefits, living in social housing in areas of high unemployment	75,113	12.35%	Average 4625 / 33043
K	Singles and lone parents on low incomes, renting terraces in town centres	25,345	4.17%	High 2492 / 33043
L	Lone parents with young children, living in high crime areas on large social housing estates	40,702	6.69%	High 4125 / 33043
M	Elderly pensioners in poor health, living in social housing on very low incomes	36,789	6.05%	Low 633 / 33043

October 2013

Children's Centre Staffing Figures¹¹

Gender

Female	328	92.4%
Male	27	7.6%

Age Band

Age Band		
15-19	<10	
20-24	24	6.8%
25-29	31	8.7%
30-34	45	12.7%
35-39	48	13.5%
40-44	45	12.7%
45-49	63	17.7%
50-54	38	10.7%
55-59	40	11.3%
60-64	11	3.1%
65-69	<10	
70-74	<10	
75-79	<10	
80-84	0	
85-89	0	

Ethnicity

Ethnic Minorities	16	4.5%
White	301	84.8%
Undeclared/Unknown	38	10.7%

Religious Belief

Buddhist	<10	
Christian	186	52.4%
Hindu	0	
Jewish	0	
Muslim	<10	
None	95	26.8%
Other	<10	
Sikh	<10	
Undeclared/Unknown	63	17.7%

Considered Disabled

¹¹ Data taken from Oracle, 2nd April 2013

October 2013

No	317	89.3%
Undeclared/Unknown	33	9.3%
Yes	<10	

Sexual Orientation

Bisexual	<10	
Gay	0	
Gay/Lesbian	0	
Heterosexual	288	81.1%
Lesbian	0	
Undeclared/Unknown	64	18.0%

Marital Status

Civil Partner	0	
Divorced	<10	
Domestic Partner	0	
Legally Separated	<10	
Living Together	<10	
Married	91	25.6%
Single	24	6.8%
Undeclared/Unknown	220	62.0%
Widowed	<10	
Widowed With Surviving Pension	0	

Strategic Engagement Workshop Analysis



Strategic Workshop
Feedback AW.docx

District Workshop Response Analysis



County Analysis.xls

Appendix 3 – Consultation response analysis

<p>Conclusions from consultation evidence by protected characteristic</p>	<p>General: The vast majority of those electing to respond to the consultation disagree to some extent with reducing the number of Children’s Centres (87%, 5,098 individuals/professionals.). 6% agree with these proposals. Amongst those members of the public who disagree with reducing the number of Children’s Centres, 26% (1,174 individuals) indicate that they will not use Children’s Centres at all as a result. 64% (3,625 individuals/professionals) disagree with reducing hours at some Children’s Centres; this is significantly lower than the level of disagreement to reduce the number of Children’s Centres. 12% agree with reducing hours at some centres. Amongst those members of the public who disagree with reducing hours at some Children’s Centres, 15% (474 individuals) indicate that they will not use Children’s Centres at all as a result.</p>
	<p>Age: <u>Parents 0-4</u> 88% disagree with reducing the number of children’s centre and 6% agree. This is comparable to the county average responses. 64% disagree with reducing the hours at some Children’s Centre and 11% agree. This is line with the county average responses. <u>Parents aged 25 or under</u> 89% disagree with reducing the number of children’s centre and 4% agree. This is comparable to average county responses. 69% disagree with reducing the hours at some Children’s Centre and 8% agree. This is a higher number of objectors than the county average responses. <u>Teenage mothers</u> 91% disagree with reducing the number of children’s centre and 6% agree. This is slightly higher number of objectors than average county responses. 72% disagree with reducing the hours at some Children’s Centre and 4% agree. This is higher number of objectors than the county average responses. <u>Pregnant teenagers</u> 94% (17 out of 18 respondents) disagree with reducing the number of children’s centres, all of them strongly. This is higher number of objectors than the county average. The remaining respondent did not know whether they agreed or disagreed.</p>
	<p>Disability: <u>Disabled parents</u></p>

	<p>88% disagree with reducing the number of children’s centre and 6% agree. This is in line with the average county responses. 66% disagree with reducing the hours at some Children’s Centre and 10% agree. This is comparable with county average responses.</p>
	<p>Gender: Of responses to the consultation from the public 88% were from females and 8% were from males</p> <p><u>Mothers and Fathers</u> 76% of those that disagreed with reducing the number of Children’s Centres were mothers of children aged under 5. 76% of those agreeing with reducing the number of Children’s Centres were mothers of children aged under 5. 7% of those that disagreed with reducing the hours at some Children’s Centres were fathers of children aged under 5. 4% of those agreeing with reducing the hours at some Children’s Centres were fathers of children aged under 5.</p> <p><u>Fathers</u> 93% disagree with reducing the number of children’s centre and 3% agree. This is a higher number of respondents disagreeing than the county average and a slightly lower number agreeing than the county respondents. 69% disagree with reducing the hours at some Children’s Centre and 8% agree. This is higher number of respondents disagreeing than the county average.</p>
	<p>Gender identity: 16 responses were received from people identifying themselves as parents having a gender different that of their birth. Of these:</p> <ul style="list-style-type: none"> • 69% (11) disagree with reducing the number of children’s centre and 13% (2) agree. This is lower number of respondents agreeing than the county average • 69% (11) disagree with reducing the hours at some children’s centres and none agree. This is a significantly lower number of respondents agreeing than the county average but is a statistically small cohort of respondents.
	<p>Race: <u>Parents from minority ethnic groups</u> 87% disagree with reducing the number of children’s centre and 3% agree. This is slightly lower number of respondents agreeing than the county average. 67% disagree with reducing the hours at some Children’s Centre and 9% agree. This is slightly lower number of respondents agreeing than the county average.</p> <p><u>Gypsy, Roma and traveller parents</u></p>

	<p>83% (19 out of 23 respondents) disagree with reducing the number of children’s centre and 8% agree. This is a slightly lower number of objectors than average county responses and a lower number of those agreeing.</p> <p>65% (15 out of 23 respondents) disagree with reducing the hours at some Children’s Centre and 9% agree. This is slightly lower number of respondents agreeing than the county average.</p> <p><u>Parents with English as an additional language</u></p> <p>86% disagree with reducing the number of children’s centre and 3% agree. This is slightly lower number of respondents agreeing than the county average.</p> <p>71% disagree with reducing the hours at some Children’s Centre and 6% agree. This is a higher number of objectors than the county average responses and a lower number of respondents agreeing than the county average.</p>
	<p>Religion or belief</p> <p><u>Christian parents</u></p> <p>88% disagree with reducing the number of children’s centre and 5% agree. This is line with the county average responses.</p> <p>65% disagree with reducing the hours at some Children’s Centre and 10% agree. This is line with the county average responses.</p> <p><u>Buddist parents</u></p> <p>97% (14 out of 15 respondents) disagree with reducing the number of children’s centre and one neither agreed nor disagreed. This is a significantly higher number of objectors that county responses.</p> <p>86% disagree with reducing the hours at some Children’s Centres and 7% agree. This is a significantly higher number of objectors that county responses.</p> <p><u>Hindu parents</u></p> <p>72% (13 out of 18 respondents) disagree with reducing the number of children’s centre with 28% neither agreeing nor disagreeing. This is a significantly lower number of objectors than the county average.</p> <p>57% disagree with reducing the hours at some Children’s Centre and 12% agree. This is a lower number of objectors than county responses.</p> <p><u>Jewish parents</u></p> <p>All respondents (6) disagree with reducing the number of children’s centre. This is significantly higher that the county average but represents a statistically small number of responses received countywide.</p> <p>60% (3 out of 5 respondents) disagree with reducing the hours at some Children’s Centre and 20% agree. This represents a higher proportion of respondents agreeing than the county average but is a statistically small cohort of respondents.</p> <p><u>Muslim parents</u></p> <p>88% disagree with reducing the number of children’s centre. The remaining respondents in this category neither agree nor</p>

	<p>disagree or do not know. This represents a lower number of respondents agreeing than the county average. 75% disagree with reducing the hours at some Children’s Centre and 9% agree. This is a significantly higher number of objectors that county responses.</p> <p><u>Sikh parents</u> 94% (15 out of 16 respondents) disagree with reducing the number of children’s centre. The remaining respondent neither agreed nor disagreed. This is a higher number of objectors that county responses. 65% disagree with reducing the hours at some Children’s Centre. The remaining respondents neither agreed nor disagreed. This represents a lower number of respondents agreeing to the proposal than the county average.</p> <p><u>Parents of any other religion</u> 94% disagree with reducing the number of children’s centre and 1% agree. This is a higher number of objectors that county responses and represents a significantly lower number of those agreeing. 68% disagree with reducing the hours at some Children’s Centre and 7% agree. This represents a lower number of respondents agreeing than the county average.</p> <p><u>Parents of no stated religion</u> 87% disagree with reducing the number of children’s centre and 6% agree. This is line with the county average responses. 65% disagree with reducing the hours at some Children’s Centre and 11% agree. This is line with the county average responses.</p>
	<p>Sexual orientation: <u>Lesbian, Gay and transgender parents</u> 88% disagree with reducing the number of children’s centre and 9% agree. This is comparable with county average responses. 82% disagree with reducing the hours at some Children’s Centre. This is a significantly higher number of objectors than the county average responses. No respondents agreed with the proposal.</p>
	<p>Pregnancy and maternity: <u>Will be a parent soon</u> 96% disagree with reducing the number of children’s centre and 1% agree. This is a higher number of objectors that county responses and represents a significantly lower number of those agreeing. 76% disagree with reducing the hours at some Children’s Centre and 8% agree. This is a significantly higher number of objectors that county responses and represents a slightly lower number of those agreeing.</p>
	<p>Marriage and Civil Partnerships:</p>

	<p>Of responses to the consultation from the public 76% were married, 12% were single and 5% were separated, divorced or widowed.</p> <p><u>Lone parents</u> 91% disagree with reducing the number of children’s centre and 5% agree. This is a slightly higher number of objectors than county responses. 71% disagree with reducing the hours at some Children’s Centre and 6% agree. This is a higher number of objectors that county responses and represents a lower number of those agreeing.</p> <p><u>Parents in a civil partnership</u> All respondents (15) disagree with reducing the number of children’s centre. This is a significantly higher number of objectors than county responses but is a statistically small cohort of respondents. 84% (10 out of 12 respondents) disagree with reducing the hours at some Children’s Centre. Of the two remaining respondents, one neither agreed nor disagreed and the other did not know. This is a significantly higher number of objectors that county responses and represents a lower number of those agreeing but is a statistically small cohort of respondents</p> <p>Carers responsibilities: Carer data was not gathered as part of the consultation activity</p>
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Appendix 4

Table 1 General profile of public respondents to consultation

Protected characteristic	Data (relates to those who responded to the questions)
Age	Half of the public respondents to the consultation indicated that they were aged between 26 and 35 with a further 18% in the 36-40 age group; 16% were aged 41 or over, 12 % were aged 20-25 and 2% were under 20 years old.
Disability	The majority (84%) of those responding to the question did not consider themselves to have a disability; just 3% considered themselves to have a disability.
Gender	The majority of respondents indicated that they were female with less than 10% of responses from males.
Gender identity	A small number (<0.5%) of respondent's gender identity was not the same as at birth.
Marriage and civil partnerships	Around three-quarters of respondents indicated that they were either married, in a civil partnership or cohabiting and 12% of responses were from lone parents.
Pregnancy and maternity	4% of respondents indicated that they were to be a parent soon.
Race	The ethnicity indicated by most (83%) respondents was White British with the second largest (4%) group of respondents being White Other. Around 5% of respondents had English as an additional language.
Religion or belief	Most respondents indicated that they were either Christian (46%) or had no religion (40%). Less than 0.5% were Buddhist, less than 0.5% were Hindu, less than 0.5% were Jewish, 1% were Muslim, less than 0.5% were Sikh and 2% were of other religions.
Sexual orientation	Most of those responding to the question (86%) indicated that they were heterosexual.
Carer's responsibilities	Covered by other parent categories.

Table 2 Overview of responses

General response of all respondents
<ul style="list-style-type: none"> • The public represented approximately 87% of respondents. • The majority of public respondents (88%) disagreed with the proposals to close children's centres (Proposal 1). • Half of those who agreed with the proposal (Proposal 1) said that it would have no impact on them, however this represents just 3% of all public respondents • 13% of those who disagreed with the proposal (Proposal 1) said that it would have no impact on them (this represents 12% of all public respondents). • A greater proportion of those who disagreed with the proposal said that they would use a children's centre less often or would not use a children's centre at all compared to those who agreed with the proposal; the main reasons given were that travel to centres would be more difficult and that alternative centres were too distant. • A high proportion of people responding to the consultation were users of children's centres: 90% of respondents to Proposal 1 and 94% of respondents to

- Proposal 3 were users of children’s centres.
- A large proportion of these users were objectors: of the 4704 users who responded to Proposal 1, 4172 (89%) objected to proposed closures; and of the 4538 users who responded to Proposal 3, 2981 (66%) objected to reduce opening times.
 - 288 public objections to Proposal 1 and 192 to public objections to Proposal 3 were received from non-users.

Table 3 Public responses to the consultation by protected characteristic

Age	
Groups	Interpretation of data from the Children’s Centre Consultation
Teenage mothers	<p>Teenage mothers of under 5’s represented 2% of the consultation responses. Over 90% reported that they use centres once or more times a week. Half of these teenage mothers were lone parents and over a third were on low incomes.</p> <p>The overwhelming majority of teenage mothers objected to the closure of children’s centres (Proposal 1) (91%). Three of the five teenage mothers who agreed with the proposal said that they would attend an alternative centre. Half of the teenage mothers who objected to the proposal said that they would not use a Children’s Centre at all and nearly a quarter said that they would use a centre less often; the main reasons cited were the difficulty of travel with alternative centres being too far away and difficulties for people without cars or non-drivers.</p> <p>Of teenage mothers who responded to Proposal 3 on reducing the opening hours of centres, 72% objected. Nearly a third of those objecting said that they would use centres less and over a quarter of this group said that they would not use centres at all. The main reasons given were that opening times would not be suitable or not long enough and that they would be unable to travel or afford to travel to another centre, also working parents would be most affected.</p>
Parents of children aged under 4	<p>Parents of children aged under 5 represented 85% of the public responses.</p> <p>Approximately 88% objected to the closure of children’s centres (Proposal 1). Objectors to the proposal used centres more frequently than supporters; over 80% of objectors compared to 60% of supporters used centres once a week or more. Over a quarter of the parents objecting to proposal 1 were aged over 35 and over a quarter were from low incomes; 15% were lone parents. About half of those who supported the proposal said that it would have no impact on them. Over a third of those who objected said that they would use children’s centres less often and over a quarter said that they would not use centres at all; the main reasons cited for this were due to difficulties with travel and alternative centres being too far away.</p> <p>While half of those who supported the proposal indicated that</p>

	<p>closing centres would have no impact on them, some said that they would use centres less often (15%) or would not use them at all (9%).</p> <p>Of parents of children aged 4 or under who responded to Proposal 3 on reducing the opening hours of centres, 65% objected. Over 40% of objectors said that they would use centres less. The main reasons for this were that opening times would not be suitable. In addition to this reason, of the 15% of objectors who said that they would not use centres, a popular reason given was that they would be unable to travel or afford to travel to another centre.</p>
Disability	
Groups	Interpretation of data from the Children's Centre Consultation
Disabled parents	<p>Disabled parents of children aged under 5 represented just 2% of the responses from members of the public.</p> <p>Around 88% of disabled parents objected to the proposed closure of Children's Centres (Proposal 1). Over 79% of objectors used centres once a week or more. Nearly half of these parents were aged over 35, nearly half were from low incomes and over a quarter were lone parents. Over a quarter of those who objected said that they would use children's centres less often and over a third said that they would not use centres at all; the main reasons for this were due to difficulties with travel and alternative centres being too far away and difficulties for people without cars or non-drivers.</p> <p>Of those disabled parents who responded to Proposal 3, 66% objected to reduce the opening hours of some centres. A third of the objectors said that they would use centres less often and a quarter said that they would not use centres at all. The main reason given for this were that opening times would not be suitable or not long enough and that they would be unable to travel or afford to travel to another centre.</p>
Gender	
Groups	Interpretation of data from the Children's Centre Consultation
Fathers	<p>Males represented 8% of responses from members of the public and 6% were fathers of under 5's. Nearly half of these fathers were aged over 35, a third were from low incomes and around 16% were lone parents. Around three-quarters used centres once a week or more.</p> <p>The overwhelming majority of fathers (93%) objected to the proposed closure of Children's Centres (Proposal 1). A third of those who objected said that they would use children's centres less often and over a third said that they would not use centres at all; the main reasons for this were due to difficulties with travel and alternative centres being too far away.</p> <p>Of those fathers who responded to Proposal 3, 69% objected to reduce the opening hours of some centres. Well over a third of the objectors said that they would use centres less often and a quarter said that they would not use centres at all. The main reasons given</p>

	for this were that opening times would not be suitable or not long enough and that they would be unable to travel or afford to travel to another centre.
Gender identity	
	See sexual orientation.
Marriage and civil partnerships	
Groups	Interpretation of data from the Children's Centre Consultation
Lone parents	<p>Lone parents represented 13% of responses from members of the public. Approaching half of lone parents were aged 25 or under and over a third were from low incomes.</p> <p>The overwhelming majority of lone parents (91%) objected to the proposal to close centres (Proposal 1). Objectors to the proposal used centres more frequently than supporters; over 86% of objectors compared to 53% of supporters used centres once a week or more. Just over a third of those who objected said that they would use children's centres less often and just under a third said that they would not use centres at all; the main reasons for this were due to difficulties with travel and alternative centres being too far away, and difficulties for those without cars or non-drivers.</p> <p>Of those lone parents who responded to the Proposal 3, 71% objected to reduce the opening hours of some centres. Well over a third of the objectors said that they would use centres less often and just less than a quarter said that they would not use centres at all. The main reasons given for this were that opening times would not be suitable or not long enough and that they would be unable to travel or afford to travel to another centre.</p>
Pregnancy and maternity	
Groups	Interpretation of data from the Children's Centre Consultation
Those who would be a parent soon	<p>Those who said that they would be a parent soon represented 4% of responses from members of the public. Around half said that they used centres once a week or more and a further 31% responded that they used centres once a month.</p> <p>Virtually all (96%) objected to the proposal to close centres (Proposal 1). Over two-thirds of those who objected to the proposed closures said that would use centres less often or would not use them at all. The reasons for this were mainly due to difficulties with travel and alternative centres being too far away, as well as difficulties for those without cars or for those who are non-drivers.</p> <p>Of those who said that they would be a parent soon and who responded to Proposal 3, 76% objected to reducing the opening hours of some centres. Nearly a half of the objectors said that they would use centres less often and a 1 in 6 felt that they would not use centres at all. The main reasons given for this were that opening times would not be suitable or not long enough and that they would be unable to travel or afford to travel to another centre. A number mentioned that working parents would be most affected.</p>

<p>Pregnant teenagers</p>	<p>Pregnant teenagers represented less than 0.5% of responses from members of the public (18 responses in total).</p> <p>The overwhelming majority (17 out of 18) pregnant teenagers objected to the proposal to close centres (Proposal 1). Over three quarters of the objectors said either that they would use children's centres less often or that they would not use centres at all; the majority of these (over half) said that they would not use centres at all. The main reasons for this were due to difficulties with travel and alternative centres being too far away, difficulties for those without cars or non-drivers and due to financial impacts of travel. Pregnant teenagers also commented that: Children's Centres form a local community hub and a chance to meet others; they were happy with their local centre and enjoyed going there; there were no alternatives to these facilities and less services would be available; the centres provided a wide range of facilities; and that they had a good relationship with staff.</p> <p>Of pregnant teenagers who responded to the Proposal 3, 72% objected to reduce the opening hours of some centres. Well over a third of the objectors said that they would use centres less often and nearly a quarter said that they would not use centres at all.</p>
<p>Parents of children under the age of 5</p>	<p>Parents of children under the age of 5 have been covered under the protected characteristic of age.</p>
<p>Race</p>	
<p>Groups</p>	<p>Interpretation of data from the Children's Centre Consultation</p>
<p>Parents from minority ethnic groups</p>	<p>Parents of under 5's from minority ethnic groups (those from all groups except White British) represented 9% of responses from members of the public.</p> <p>About 87% of these minority ethnic parents objected to the proposed closure of centres (Proposal 1). Half of the objectors used centres two or more times a week and over a third used centres about once a week. Just under a third of these parents were from low incomes and nearly half had English as an additional language. Over a third of those who objected said that they would use children's centres less often and over a quarter said that they would not use centres at all; The main reasons were due to difficulties with travel and alternative centres being too far away.</p> <p>Of parents from a minority ethnic group who responded to Proposal 3, two-thirds objected to reduce the opening hours of some centres. 44% of the objectors said that they would use centres less often and 16% that they would not use centres at all. The main reasons given for this were that opening times would not be suitable or not long enough and that they would be unable to travel or afford to travel to another centre.</p>
<p>White parents from low incomes</p>	<p>White parents of under 5's from low incomes represented 20% of responses from members of the public.</p>

	<p>Most (89%) of this group objected to the proposed closure of centres (Proposal 1). The majority of this group (whether objectors or supporters) used centres once a week or more with half of the objectors using the centres two or more times a week and a further third using the centres once a week. Just under a quarter of these parents (objectors) were aged 25 or under and nearly a quarter (22%) were lone parents. Over a third said that they would use centres less often and a quarter said that they would not use centres at all. The main reasons for this response were difficulties of travelling to centres and centres being too far away.</p> <p>Of White parents from low incomes who responded to Proposal 3, two-thirds objected to reduce the opening hours of some centres. Over 40% of the objectors said that they would use centres less often and around 1 in 6 that they would not use centres at all. The main reasons given for this were that opening times would not be suitable or not long enough and that they would be unable to travel or afford to travel to another centre.</p>
<p>Gypsy, Roma Traveller parents</p>	<p>Gypsy, Roma Traveller parents represented less than 0.5% of responses from members of the public.</p> <p>Most of this group (19 out of the 23) objected to the proposed closure of centres (Proposal 1). All 19 of those objecting used centres once a week or more. Seven were parents aged 25 or under and 5 had English as an additional language. Fourteen of the 19 objectors said that they would use centres less often or would not use them at all. The main reasons for this were difficulties of travelling to centres and centres being too far away as well as difficulties for people without cars or who were non-drivers.</p> <p>Fifteen of the 23 Gypsy, Roma and Traveller parents who responded to Proposal 3 objected to reduce the opening hours of some centres. Seven of these objectors said that they would use centres less often and 1 that they would not use centres at all.</p>
<p>Parents with English as an additional language</p>	<p>Parents with English as an additional language represented 5% of responses from members of the public.</p> <p>Most (86%) of this group objected to the proposal to close centres (Proposal 1). Nearly all objectors used centres at least once a week. Over a third of objectors said that they would use centres less often and around a quarter said that they would not use centres at all. The main reasons given were difficulties of travelling to centres and centres being too far away.</p> <p>Of parents with English as an additional language who responded to Proposal 3, 70% objected to reduce the opening hours of some centres. 44% of the objectors said that they would use centres less often. The main reasons given for this were that opening times would not be suitable or not long enough. In addition to this reason, a number of the 17% of objectors who said that they would not use centres at all also gave the reason that they would be unable to travel or afford to travel to another centre and/or that they were</p>

	happy with their local centre.
Religion or belief	
Groups	Interpretation of data from the Children's Centre Consultation
Christian parents	<p>Christian parents represented 38% of responses from members of the public.</p> <p>About 88% of Christian parents objected to the proposal to close centres (Proposal 1). Objectors to the proposal used centres more frequently than supporters; 81% of objectors compared to 68% of supporters used centres once a week or more. Around half of those who agreed with the proposals said that the changes would have no impact on them. Over a third of objectors said that they would use children's centres less often and a quarter said that they would not use centres at all; the main reasons for this were due to difficulties with travel and alternative centres being too far away.</p> <p>Of Christian parents who responded to Proposal 3, almost two-thirds objected to reduce the opening hours of some centres. Over 40% of the objectors said that they would use centres less often and 14% that they would not use centres at all. The main reasons given for this were that opening times would not be suitable or not long enough and that they would be unable to travel or afford to travel to another centre.</p>
Parents with no religion	<p>Parents with no religion represented 35% of responses from members of the public.</p> <p>About 88% of parents with no religion objected to the proposal to close centres (Proposal 1). Objectors to the proposal used centres more frequently than supporters; 81% of objectors compared to 50% of supporters used centres once a week or more. Nearly half of those who agreed with the proposals said that the changes would have no impact on them. Over a third of objectors said that they would use children's centres less often and just over a quarter said that they would not use centres at all; the main reasons for this were due to difficulties with travel and alternative centres being too far away.</p> <p>Of parents with no religion who responded to Proposal 3, 65% objected to reducing the opening hours of some centres. Over 40% of the objectors said that they would use centres less often and 16% that they would not use centres at all. Of those who cited that they would not use centres at all the main reasons given were that opening times would not be suitable or not long enough and that they would be unable to travel or afford to travel to another centre.</p>
Sexual orientation	
Groups	Interpretation of data from the Children's Centre Consultation
Lesbian, Gay, Bisexual and Transgender (LGBT)	LGBT respondents with children under the age of 5 represented 1% of responses from members of the public. All used centres once a week or more. Around a quarter of LGBT parents were aged over 35, around a quarter were from low incomes and around a quarter were lone parents.

parents	<p>Around 88% of LGBT parents objected to the proposed closure of children’s centres (Proposal 1). A third of those who objected said that they would use children’s centres less often, 21% said that they would not use centres at all. Although further responses from objectors were low (18 respondents), the main reasons for this were due to difficulties with travel and alternative centres being too far away.</p> <p>Of LGBT parents who responded to Proposal 3, 82% objected to reduce the opening hours of some centres. Nearly half of the objectors said that they would use centres less often and nearly a quarter said that they would not use centres at all. Of the five respondents giving further reasons for this, the main reasons given were that: working parents would be most affected; it would depend on the opening times of the centre; they would be unable to get the support that they needed if opening hours changed; and that mothers feel isolated.</p>
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Table 4 Professional’s responses to the consultation

Professional’s responses to the consultation
<ul style="list-style-type: none"> • Professionals represented approximately 13% of respondents. • About a third of all responses were from Children’s Centre staff. • Most professionals (79%) disagreed with the proposal to close centres (Proposal 1). • The main reasons given for disagreeing with Proposal 1 were that: children and families would miss out; people who needed to be supported would be the most disadvantaged; there would be reduced access to children’s services; children’s centres are necessary/important resources and it would make travel to centres more difficult or alternative centres would be too distant.
Example verbatim comments
<p><i>Children's Centres are an invaluable source of support for the families I work with in my job as a social worker. Without them, there will be a number of children in need without opportunities that other children have. At the moment, all families have a Children's Centre close to where they live. Most of these families do not have cars and would not be able to travel further afield for groups and advice they would normally get from the centres. The children and their families will be more isolated and have less support to make the changes necessary for the care of their children without a local children's centre and the workers who lead them.</i></p> <p><i>We carry out child health clinics in these children centres. The children in these areas will be very disadvantaged and will find it difficult to access health checks/health review. This will definitely affect the health and development of these children.</i></p> <p><i>Closing Children's Centres would discourage families to access support as they have further to travel or could potentially overcrowd other centres which do not have resource.</i></p> <p><i>Many families have English as an additional language and without the help that the children's centre provides to them with services such as the play group they will find it difficult to fit in with the community.</i></p>

October 2013

**KENT COUNTY COUNCIL
EQUALITY ANALYSIS / IMPACT ASSESSMENT (EqIA)**

**This document is available in other formats, Please contact
cc.commissioning@kent.gov.uk or telephone on 01622 696678**

Directorate: Families and Social Care

Name of policy, procedure, project or service

Children's Centre Future Service Options Programme – Consultation Proposal

What is being assessed?

Merging of The Buttercup and The Daisy Children's Centres in Dover and relocation to Dover Town Centre.

Responsible Owner/ Senior Officer

Mairead MacNeil/ Karen Mills

Date of Initial Screening

2nd July 2013

Date of Full EqIA :

15th August – November 2013

Version	Author	Date	Comment
1.0	Karen Roberts	Apr 2013	
2.0	Chris Barker	26.06.13	Update to reflect The Buttercup and The Daisy Children's Centres only
3.0	Equality and Diversity Teams	01.07.13	Comments on version 2
4.0	Chris Barker	02.07.13	Updated to reflect Equality and Diversity changes
5.0	Matthew Mallett	25.11.13	Full EqIA using consultation responses
6.0	Chris Barker/ Alister McClure	27.11.13	Revised Full EqIA incorporating Equality and Diversity Comments

Screening Grid

Characteristic	Could this policy, procedure, project or service affect this group less favourably than others in Kent? YES/NO If yes how?	Assessment of potential impact HIGH/MEDIUM LOW/NONE UNKNOWN		Provide details: a) Is internal action required? If yes what? b) Is further assessment required? If yes, why?	Could this policy, procedure, project or service promote equal opportunities for this group? YES/NO - Explain how good practice can promote equal opportunities
		Positive	Negative	Internal action must be included in Action Plan	If yes you must provide detail
Age	<p>Yes. Children's Centres core purpose is to improve outcomes for young children and their families through reducing inequalities. Young children are classified as pre-birth to age 5.</p> <p>In 2011 there were 111,700 residents in the Dover district¹, 6,200 of these (5.55%) were 0 to 5 years old².</p> <p>In the Dover district 4,358 children have been recorded as using a centre at least once between October 2011 and September 2012. This represents 70.3% of the 0-5 population. 15% were less than a year old, 17% were 1 years old, 17% were 2 years</p>	High	High	<p>a) Yes –sustain current outreach services and promote the hub and link model. Better link children's centre services provided. Maximise the use of resources including staffing to continue to improve outcomes for children and their families.</p> <p>Ensure measures are in place to enable vulnerable families (identified via CAF) to access current services.</p> <p>Provide information to current children's centre users to promote understanding of how the changes could affect them and how to identify any support available within the hub and link model. (All children 0-5 will remain entitled to access all Children's Centres in the County).</p> <p>Children's Centres will continue to signpost to age appropriate provision for children over 5.</p>	<p>Using Dover Town Centre as a Hub centre. This option could enable greater emphasis on services rather than buildings and enable outreach to be increased equitably. By working as a hub and link centre model (with one catchment area) centres may be able to increase the proportion of 0-5 registered at Children's Centres. This could support the identification of families' needs and enable services to be more targeted at 0-5 year olds who are most in need of intervention.</p> <p>Through operating a hub and link model all families should continue to be offered appropriate services. Services will address locally identified need.</p> <p>It is likely that there will be an increase in the numbers of children attending Blossom Children's</p>

¹ 2011 Kent Census Date, ONS

² Mid year population estimates, KCC

	<p>old, 21% were 3 years old, 20% were 4 years old and 10% were 5 years old.</p> <p>Of the 4,358 Children using a centre in Dover at least once between October 2011 and September 2012, 16.5% (720 children) attended The Buttercup Children’s Centre. 13% were less than a year old, 20% were 1 year olds, 17% 2 years old, 16% were 3 years old, 19% were 4 years old and 7% were 5 years old. This represents a larger than average proportion (Kent Children’s Centre average) of 3, 4 and 5 year olds. The proportion of 0-1, 1 and 2 year olds accessing services is far less than the county average.</p> <p>Of these 720 children, 477 also attended another Children’s Centre in Dover and 244 only attended The Buttercup. Others centres accessed included The Daisy, Buckland and Whitfield, Samphire, Blossom, The Sunflower and North Deal Primrose.</p> <p>Needs analysis (volume) for</p>			<p>Close partnership working with the commissioned centre to ensure that services are planned appropriately across the district.</p> <p>b) Yes - Full Public Consultation to be held. Identify any mitigating actions that can be put in place to ensure number of 3, 4 and 5 year old users does not decrease, and actions to attempt to address the lower levels of 0-1, 1 and 2 year olds attending centres in the locality.</p> <p>Ensure that any moves to CCG operating models do not disadvantage any age groups within the South Kent Coast CCG area. Teenage Parent Services which are currently delivered across the locality must continue to be promoted and signposted across CCG boundaries. Both The Daisy and The Buttercup have been listed as high need in terms of Teenage Pregnancy. Services currently delivered must continue.</p>	<p>Centres, particularly in the 1 and 2 year old age brackets. In order to prioritise early intervention and prevention especially as many 3 and 4 year olds access early Years settings than 1 and two year olds. Even with the increase in 2 year old funding through free for two to almost 50% this is still far greater than the approximate 94% of children aged 3 and 4 years in funded places.</p> <p>Based on local knowledge, teenage parent services are currently delivered at two centres in Dover district. The hub and link model should increase signposting to teenage parent services i.e. Young Active Parents groups. The hub and link model may also increase the likelihood of teenage parents meeting and building peer support networks. A greater emphasis on services rather than buildings should support an increase in Teenage Parent registrations.</p> <p>Merging and relocation of services should offer a more coordinated and better managed method of service delivery. This proposal has emerged from local proposals and responds to local need, and therefore any changes should have a potentially high positive impact on this protected characteristic.</p>
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	<p>The Buttercup Children’s Centre identifies that the The Buttercup catchment has a higher level of need than the Kent average in terms of teenage pregnancy.</p> <p>Of the 4,358 Children using a centre in Dover at least once between October 2011 and September 2012, 28.5% (1,243 children) attended The Daisy Children’s Centre. 12% were less than a year old, 17% were 1 year olds, 19% 2 years old, 20% were 3 years old, 20% were 4 years old and 12% were 5 years old. This represents a larger than average proportion (Kent Children’s Centre average) of 3, 4 and 5 year olds. The proportion of 0-1, 1 and 2 year olds accessing services is far less than the county average.</p> <p>Of these 1,243 children, 720 also attended another Children’s Centre in Dover and 523 only attended The Daisy. Others centres accessed included Buckland and Whitfield, Samphire, The Buttercup, The Sunflower,</p>				
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	<p>Blossom, North Deal Primrose and Snowdrop.</p> <p>Needs analysis (volume) for The Daisy Children’s Centre identifies that The Daisy catchment has a higher level of need than the Kent average in terms of teenage pregnancy.</p>				
Disability	<p>9.3% of the population in the Dover district are claiming a disability benefit.³</p> <p>Between October 2011 and September 2012 no users at The Buttercup were recorded as having a disability.</p> <p>Needs analysis for The Buttercup Children’s Centre identifies that The Buttercup catchment has a lower level of need than the Kent average in terms of working aged permanently sick/ disabled (volume).</p> <p>Between October 2011 and September 2012 no users at The Daisy were recorded as</p>	Medium	Low	<p>a) Yes - Ensure that disabled children and carers are offered the opportunity to access services, including prospective disabled children and prospective carers.</p> <p>Ensure that parents and carers are asked about disabilities at registration. Work closely with HVs and Early Years settings to share information gained from developmental assessments.</p> <p>Offer parents the opportunity to amend database to include a ‘do not wish to answer’ category and a ‘no’ category for disability</p> <p>Ensure that parents and carers can access required information if they have print impairments, learning disabilities, are Deaf or hard-of-</p>	<p>Yes – Services will continue to address identified needs on an individual basis. Through a hub and link model centres will continue be able to share resources including best practice and specialist knowledge.</p> <p>Through the hub and link centre model (management) signposting to specialist services may increase.</p> <p>A greater emphasis on local services rather than buildings will enable outreach to be increased appropriately and equitably and therefore disabled children’s registrations should increase. Through increased targeted work obtained through better data collection, services could be more targeted. Sharing information may lead to speedier intervention by specialist services.</p>

³ Kent Business Intelligence Statistics

	<p>having a disability.</p> <p>Needs analysis for The Daisy Children’s Centre identifies that The Daisy catchment has a higher level of need than the Kent average in terms of working aged permanently sick/ disabled (volume).</p>			<p>hearing, or would struggle to access standard print/ standard English information in any other way because of their protected characteristics.</p> <p>b) Yes - Targeted consultation - A large number of disability records have either not been completed or users have not wished to disclose information and therefore it is difficult to measure impact. However a child’s disability may not be apparent at registration so work closely with HVs and Early Years settings to share information gained from developmental assessments. Offer parents the opportunity to amend database to include a ‘do not wish to answer’ category and a ‘no’ category for disability.</p> <p>Consider an annual re-registration system across the County.</p> <p>Close partnership working with the commissioned centre to ensure that services are planned appropriately across the district.</p> <p>Ensure that alterations in district boundaries do not directly impact on the services disabled families and children are able to access.</p> <p>Ensure that relocation of services does not directly impact upon the high levels of working aged</p>	<p>Children’s Centres will not discriminate directly or indirectly against any person because of their disability. We will ensure that front-line staff are diversity aware.</p> <p>With the comparatively high levels of disability in Dover district, Children’s Centres will continue to be a key community venue as required by Sure Start Children’s Centre statutory guidance. Centres will promote equality regardless of disabilities and promote access to services.</p>
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				<p>permanently sick/disabled people currently attending The Daisy Children’s Centre.</p>	
<p>Gender</p>	<p>Yes – In the Dover district 49% of the population are male and 51% are female.</p> <p>In 2012, 94% of attendances at Children’s Centres in Dover were made by a female parent or carer. Therefore, any changes are likely to have a greater negative impact on females.</p> <p>50% of children who used The Buttercup between October 2011 and September 2012 were male and 50% were female. This is broadly consistent with the County population for this age group, and in line with the district demographic.</p> <p>52% of children who used The Daisy between October 2011 and September 2012 were male and 48% were female. This is broadly consistent with the County population for this age group, and in line with the district demographic.</p>	<p>Low</p>	<p>Medium</p>	<p>a) Yes – services will continue to address need identified regardless of gender. Continue to deliver ‘dad’s groups’ and interventions targeted at male carers to increase engagement.</p> <p>b) No</p>	<p>No - It is likely that Children’s Centres will continue to support slightly more male 0-5 year olds. It is also likely that Children’s Centres will continue to support more female carers than males.</p> <p>Yes - Currently some centres run targeted interventions for male carers on behalf of the centres in their area. Through the hub and link centre model (management) signposting to these services would continue.</p> <p>Children’s Centres will not discriminate directly or indirectly against any person because of their gender. We will ensure that front-line staff are diversity aware.</p>

<p>Gender identity</p>	<p>Unknown - No impact has been identified at this stage due to a lack of information.</p>	<p>Unknown</p>	<p>Unknown</p>	<p>a) Yes – In line with KCC’s Equality Strategy, KCC will seek to identify gender identity of Kent’s residents. b) This impact assessment will be updated when such information is available.</p>	<p>Yes - There may be an opportunity to promote and provide more diverse services using a hub and link centre model.</p> <p>The hub and link centres could provide increased opportunity for specific services if needed.</p> <p>Children’s Centres will not discriminate directly or indirectly against any person because of their gender identity. We will ensure that front-line staff are diversity aware.</p>
<p>Race</p>	<p>This could impact Black or Minority Ethnic (BME) less favourably as a larger proportion of registered Children’s Centres users are BME compared to County populations.</p> <p>In the Dover district 96.7% of the population are White British, 3.3% are BME.</p> <p>Of the children who attended a Dover Children’s Centre between October 2011 and September 2012, 71% were White British, 2% were White-Gypsy Roma, 3% were White-Any Other White, 1% were Asian or Asian British-</p>	<p>Medium</p>	<p>Medium</p>	<p>a) Yes –Encourage disclosure of language and ethnicity information for all families at registration. Provide information on the benefits of disclosing this information.</p> <p>Ensure that parents and carers can access required information if English is a second language, or they would struggle to access standard print/ standard English information in any other way because of their protected characteristics.</p> <p>b) Yes - Targeted consultation - A large number of language records have either not been completed or users have not wished to disclose information and therefore it is difficult to measure impact.</p> <p>Promote greater awareness and understanding of diversity within the</p>	<p>Yes – Services will continue to address identified needs on an individual basis. Through a hub and link model centres will be able to share resources including best practice and specialist knowledge e.g. opportunity to access courses such as English as an additional language.</p> <p>Given the minimal numbers registered, a hub and link model may also increase the likelihood of families with English as an additional language meeting and building peer support networks.</p> <p>Through the hub and link centre model (management) signposting to specialist services should increase.</p> <p>A greater emphasis on services rather</p>

	<p>Indian, 1% were Asian or Asian British- Any other Asian, 1% were Mixed Dual-White and Asian, 1 % were Mixed/Dual- Any other Mixed, 1 % were Any other Ethnic Group, and 19% choose not to record their ethnicity.</p> <p>Language information has not been obtained for 81% of families using Children’s Centres in Kent.⁴ Where information is available, English has been recorded as the first language for 18% of users. Polish has been recorded as the second largest proportion with less than 1%.</p> <p>71% of users at The Buttercup were recorded as White British, 2% were Any Other White, 2% were Mixed/Dual- Any other mixed, 1% were Any Other Ethnic Group, and 22% choose not to record their ethnicity. There is therefore likely to be a greater impact on the white population, with a potential impact also likely on specific BME groups.</p>			<p>communities.</p> <p>Statistics illustrate that although comparatively low, there is an extremely diverse community accessing all Dover Children’s Centres. There are also extremely high levels of White British currently accessing services. All races should be encouraged to participate in the targeted consultation. The high levels of those unrecorded also leaves open the potential for there to be much higher levels of BME groups.</p> <p>Children’s Centres must ensure that during a public consultation those who have recorded their first language as not English are able to participate in the consultation.</p>	<p>than buildings will enable outreach to be increased equitably including to Gypsy/ Roma communities, families with English as an additional language and White British to reflect local populations. Services provided will also ensure that they are accessible to all racial groupings.</p> <p>Children’s Centres will not discriminate directly or indirectly against any person because of their race. We will ensure that front-line staff are diversity aware.</p> <p>Hub and linked centres can work together to further develop opportunities for social cohesion, understanding and tolerance of difference.</p> <p>The hub and link centres could provide increased opportunity for specific services if needed.</p> <p>Ensure that Dover Children’s Centres continue to work with young parents in ethnically diverse neighbourhoods, especially those from White British Backgrounds.</p>
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⁴ As at 1st October 2012

	<p>Language information is not recorded for 72% of users at The Buttercup Children’s Centre. 28% are recorded as English.</p> <p>MOSAIC classifications of families attending The Buttercup Children’s Centre between June 2011 and June 2012 DOES NOT identify an overrepresentation amongst young professionals with children, many living in ethnically diverse neighbourhoods.</p> <p>64% of users at The Daisy were recorded as White British, 3% were White-Gypsy Roma, 4% were White-Any other White, 2% were Asian or Asian British- Any other Asia, 1% were Mixed/Dual- Any other Mixed, 1% were Any other Ethnic Group, and 23% choose not to record their ethnicity. There is therefore likely to be a greater impact on the white population, with a potential impact also likely on specific BME groups, in particular the Any Other White</p>				
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	<p>classification.</p> <p>Language information is not recorded for 73% of users at The Daisy Children’s Centre. 26% are recorded as English, and 2% recorded another non-English language.</p> <p>MOSAIC classifications of families attending The Buttercup Children’s Centre between June 2011 and June 2012 DOES NOT identify an overrepresentation amongst young professionals with children, many living in ethnically diverse neighbourhoods.</p>				
Religion or belief	<p>In the Dover 2011 census 64.1% of the population have recorded their religion as Christian, 0.5% as Buddhist, 0.6% as Hindu, 0.1% as Jewish, 0.5% as Muslim, 0% as Sikh and 0.5% as other religion. 26% have stated no religion and 7.6% have not stated if a religion or not. Religion of Children’s Centre users is unknown.</p>	Unknown	Unknown	<p>a) Yes –Encourage religion or belief information is obtained for all families at registration. Provide information on the benefits of disclosing this information</p> <p>b) This impact assessment will be updated when such information is available.</p>	<p>Children’s Centres will not discriminate directly or indirectly against any person because of their religion or belief. We will ensure that front-line staff are diversity aware.</p> <p>Targeted services have previously been run in some communities to increase knowledge of all religions. This work will continue.</p> <p>The hub and link centres could provide increased opportunity for specific services if needed.</p>
Sexual	Sexual Orientation data is	Unknown	Unknown	a) Yes – Continue to encourage parents to	Children’s Centres will not discriminate

<p>orientation</p>	<p>collected for parents and carers.</p> <p>Sexual orientation is deemed not applicable for under 5 age group.</p>			<p>provide information on sexual orientation and discuss individual needs. Provide information on the benefits of disclosing this information</p> <p>b) This impact assessment will be updated when sexual orientation information is available.</p>	<p>directly or indirectly against any person because of their sexual orientation. We will ensure that front-line staff are diversity aware.</p> <p>The hub and link centres could provide increased opportunity for specific services if needed.</p>
<p>Pregnancy and maternity</p>	<p>Children's Centres core purpose is to improve outcomes for young children and their families through reducing inequalities. Children's Centres offer a range of pre-birth and maternity services.</p> <p>The Buttercup Children's Centre provide a number of services, including breastfeeding peer support, a weekly child health clinic, baby massage and antenatal advice.</p> <p>The Daisy Children's Centre provide a number of services, including breastfeeding peer support training, a weekly child health clinic, Makaton baby signing, baby massage and antenatal advice.</p>	<p>High</p>	<p>High</p>	<p>a) Review current services to ensure they are in the right location. Work with Health partners to ensure provision continues at proposed part time link centres, link centres and Hubs.</p> <p>b) Yes – Further engagement with Health colleagues required to identify changes to services and associated impact. EqIA to be updated accordingly.</p> <p>Ensure all those who attend a pregnancy and maternity course at both The Buttercup and The Daisy Children's Centre are encouraged to participate in the targeted consultation.</p>	<p>Level of provision will not be affected and provision will be increased accordingly at hub and link centres. This will not affect universal access to Health services or Health Visitor home visits. Moving to a hub and link model will also promote health services across a joined up catchment area.</p> <p>The changes in the catchment area may better suit health teams in the Dover District.</p> <p>This proposal plans to merge and relocate both Children's Centres. By doing this there is the potential to ensure that services being delivered for those in this protected characteristic are delivered in a more coordinated manner and potentially at more convenient locations.</p>
	<p>In the Dover area 48.3% of</p>	<p>Medium</p>	<p>Medium</p>	<p>a) Yes – Investigate feasibility of collecting</p>	<p>Yes – Services will continue to address</p>

<p>Marriage and Civil Partnerships</p>	<p>the population 16 years and over are married, 0.3% are in same sex civil partnerships, 29.5% are single, 3% are separated, 10.7% are divorced, 8.3% are widowed.</p> <p>This information is not available for Children's Centre users but MOSAIC classifications of families attending The Buttercup and The Daisy Children's Centres between June 2011 and June 2012 identified an underrepresentation amongst users for the following group;</p> <ul style="list-style-type: none"> • Young singles and couples in small privately rented flats and terraces on moderate incomes <p>MOSAIC classifications also identified an overrepresentation amongst users for the following groups at both The Buttercup and The Daisy Children's Centres;</p> <ul style="list-style-type: none"> • Lone parents with young children, living in high crime areas on large social housing estates • Singles and lone parents on low incomes, renting terraces in town centres 			<p>marriage and civil partnership information at registration.</p> <p>b) This impact assessment will be updated when marriage and civil partnership information is available.</p> <p>Ensure that the levels of singles currently accessing services at both Children's Centres does not decline, and that they are actively engaged in a targeted consultation.</p>	<p>identified needs on an individual basis. Lone Parent will remain a target group for Children's Centres in line with Ofsted requirements and will therefore seek to reduce inequalities in outcomes for lone parents and their children.</p> <p>Through the hub and link model we may be able to offer increased Adult Education and other education or training opportunities (due to increased participants)</p> <p>Through the hub and link we may be able to offer longer opportunities to access information on benefits, debt reduction and housing.</p> <p>Children's Centres in the Dover area must continue to work with families who require help, and to assist in providing early intervention and preventative services, limiting the number of families requiring specialist services in the district and locality.</p>
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	<p>Therefore there is the potential for there to be an adverse impact on singles.</p> <p>If services become more targeted and focus on lone parents, couples and those married may be negatively impacted. However, this will be justified if based on need.</p>				
Carer's responsibilities	<p>88.7% of the population in Dover district provide no unpaid care a week. 7.1% provide up to 19 hours, 1.4% provide between 20 and 49 hours, 2.85% provide over 50 hours. This is in line with the county average of 10.4%.</p>	Unknown	Unknown	<p>a) Yes - increased awareness of carer's responsibilities and support for families most in need of intervention.</p> <p>b) No</p>	<p>Yes – increased awareness of carer's responsibilities and support for families most in need of intervention.</p>

INITIAL SCREENING

Proportionality - Based on the answers in the above screening grid what weighting would you ascribe to this function

Low	Medium	High
Low relevance or Insufficient information/evidence to make a judgement.	Medium relevance or Insufficient information/evidence to make a Judgement.	High relevance to equality, /likely to have adverse impact on protected groups

High – This proposal has been rated as potentially having a high impact in terms of proportionality. There is likely to be a high impact on the following characteristics; Age, Disability, and Pregnancy and Maternity. There is likely to be a medium impact on Gender and Marriage and Civil Partnership protected characteristics. Impact on Gender Identity, Race, Religion or Belief, Sexual Orientation and Carer’s Responsibility are unknown.

Context

Kent’s Children’s Centre programme has been rolled out across the county over the last seven years in three phases, each within tight timescales and different financial constraints. Kent currently has 97 Children’s Centres in operation. All centres are slightly different depending on local need, their level of funding and the range of services they provide.

The Buttercup Children’s Centre is a Sure Start Local Programme Children’s Centre, operating out of the Triangle Community Centre. The Buttercup is currently managed alongside The Daisy, Buckland and Whitfield and Samphire Children’s Centres. Users currently accessing Buttercup also access The Daisy, Buckland and Whitfield, Samphire, Blossom, Sunflower and North Deal Primrose.

The Daisy Children’s Centre is a Phase 1 Children’s Centre, operating out of The Ark Christian Centre. The Daisy is currently managed alongside The Buttercup, Buckland and Whitfield and Samphire Children’s Centres. Users currently accessing The Daisy also access Buckland and Whitfield, Samphire, The Buttercup, The Sunflower, Blossom, North Deal Primrose and Snowdrop.

Parents play a key role in influencing services that are provided.

Children’s Centres are places where all children under five years old and their families can receive services and information. These services vary according to centre but may include:

- Integrated early education and childcare
- Support for families – including advice on parenting, local childcare options and access to specialist services for families

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- Child and family health services – including health screening, health promotion, health visitor and midwifery services, and the healthy child programme.
- Helping parents into work – with links to Jobcentre Plus and training.

There have been recent reductions in government funding for children's centres as well as changes to government policies about how Children's Centres should work. This proposal seeks to align with;

- A revised core offer for Children's centre
- Revised Children's Centre Statutory Guidance
- Revised Ofsted Inspection Framework (April 2013)
- Reductions in Early Intervention Grant Funding
- Health Visitor Implementation Plan

Aims and Objectives

In line with KCC's medium-term plan, Bold Steps for Kent, we need to change the way we work so we can continue to meet the needs of our children and their families with reduced budgets. Kent aims to achieve this by;

- ensuring we deliver better, earlier support to those children and families who need it
- ensuring we continue to provide Children's Centre services to improve health, education and social care outcomes
- strengthening the working relationship between Children's Centres, early years settings, schools and health services

Beneficiaries

The community of Kent but in particular families with children between 0 – 5 years, including those families and young children who are the most vulnerable.

For example:

- Lone parents, young parents and pregnant teenagers and mothers with post-natal depression.
- Children in need or with a child protection plan
- Children of offenders and/or those in custody
- Fathers particularly those with any other identified need, for example teenage fathers and those in custody
- Those with protected characteristics as defined by the Equality Act 2010
- Looked after children
- Children who are being cared for by members of their extended family such as a grandparent, aunt or older sibling
- Families identified by the LA as 'troubled families' who have children under five; any other vulnerable groups identified as at risk of harm by other services
- Families who move in and out of the area relatively quickly (transient families), such as those seeking employment or seasonal work

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- Parents with a learning difficulty or disability, or parents who have a child with a learning difficulty or disability
- Migrant families or families where English is an additional language
- Families with complex needs or where there is mental illness
- Families who suffer from domestic violence or where there is substance or alcohol abuse
- Families living in poverty and poor housing

The Local Authority (LA) will benefit. Schools, Health Services, childcare providers and voluntary sector providers could benefit.

ASSESSMENT

Involvement and Engagement

Countywide Consultation: Shaping the future of Children's Centres in Kent

The consultation "Shaping the future of Children's Centres in Kent" began on Thursday 4th July and ended on Friday 4th October. Information on the consultation was shared with County Councillors and notification of the consultation launch was sent to approximately 35,000 stakeholder email addresses (including Borough/District and Parish Councillors, service delivery partners and registered Children's Centre users. Articles were posted on Knet, Kent.gov.uk and in Kmail and a promotional tab advertising the consultation remained on the front page of Kent.gov.uk throughout the duration of the consultation. The KCC Twitter account was also used to publicise the consultation on 4th July. Leaflets and posters were produced and distributed to advertise and promote the consultation.

A paper version of the consultation document was produced outlining the proposal for Kent Children's Centres and providing information on the Children's Centres proposed for closure or reduced operating hours as well as proposed future operating arrangements. The document contained a hard copy response form to the consultation for those unable to access the internet and Children's Centre staff assisted vulnerable users in completing the questionnaire.

The Buttercup

A total of 169 members of the public and 14 professionals objected to the closure of The Buttercup Children's Centre. Of these 169 members of the public, 30 objected only to the closure of The Buttercup (although an additional 50 only objected to the closure of The Buttercup and The Daisy).

In comparison with all those objecting to Proposal 1, those objecting to the closure of The Buttercup are much more likely to be parents of children from low incomes.

Around 1 in 8 (13%,) of the members of the public objecting to the proposed closure of The Buttercup (22 individuals) indicate that they will not use

Children's Centres at all as a result (which is far lower than the average across all objectors, of 26%). Approaching half indicated that they 'will use Children's Centres less often' as a result of the proposed closure, with concerns surrounding travel/accessibility prominent amongst this group.

A total of 79 users of The Buttercup Children's Centre (and 28 sole users) responded to the consultation, representing around 11% of all users of the Centre. The vast majority (84%) disagree to some extent with this proposal, although interestingly 12% agree. Just 4 of the 23 sole users of The Buttercup responding to the consultation who object to the proposal indicated that they 'will not use Children's Centres at all' as a result of the proposed closure.

It may also be worth bearing in mind here that the views being analysed here are those of the users who have elected to submit a response to the consultation proposals. It may well be the case that this is skewed towards those who disagree with the proposals.

Of the users disagreeing with the proposal:

- 66% objected to the closure of The Buttercup (19 of the 23 sole users), and 44% to the closure of The Daisy.
- Nearly a fifth (19%) indicated that their objection didn't relate to any particular Centre.

Consultation responses categorised by protected characteristic indicated that those under the Age (Parents aged 25 or under) and Marriage and Civil Partnerships (Lone parents) were more likely to disagree with proposals to reduce the number of centres and reduce the opening hours at some centres than county average responses.

Responses categorised by protected characteristic indicated that those under the Age (Parents of 0-4's) and Gender (Mothers⁵) were more likely to disagree with proposals to reduce the number of centres and reduce the opening hours at some centres than county average responses.

Responses from other protected characteristic groups, such as those with a Disability⁶, Gender Identity, Race, Religion, Sexual Orientation, Pregnancy and Maternity were broadly the same as the county average.

The Daisy

A total of 161 members of the public and 11 professionals objected to the closure of The Daisy Children's Centre. Of these 161 members of the public, 28 objected only to the closure of The Daisy (although an additional 50 only objected to the closure of The Buttercup and The Daisy).

⁵ Mothers: For the purposes of the consultation "mother" always refers to women with children aged 0-4 years old

⁶ Disabled/disability: For the purposes of the consultation "disabled" or "disability" always refers to respondents who indicated that "their day-to-day activities are limited a lot because of a health problem or disability which has lasted, or is expected to last, at least 12 months

In comparison with all those objecting to Proposal 1, those objecting to the closure of The Daisy are much more likely to be parents of children from low incomes.

Less than 1 in 8 (13%) of the members of the public objecting to the proposed closure of The Daisy (21 individuals) indicate that they will not use Children's Centres at all as a result (which is far lower than the average across all objectors, of 26%). Nearly half (45%) indicated that they 'will use Children's Centres less often' as a result of the proposed closure, with concerns surrounding travel/accessibility prominent amongst this group.

A total of 63 users of The Daisy Children's Centre (and 24 sole users) responded to the consultation, representing around 6% of all users of the Centre. The majority (79%) disagree to some extent with this proposal. Just 3 of the 20 sole users of The Daisy responding to the consultation who object to the proposal indicated that they 'will not use Children's Centres at all' as a result of the proposed closure.

Of the users disagreeing with the proposal:

- 83% objected to the closure of The Daisy (17 of the 20 sole users), and 44% to the closure of The Buttercup.
- A tenth (10%) indicated that their objection didn't relate to any particular Centre.

Consultation responses categorised by protected characteristic indicated that those under the Age (Parents aged 25 or under), Race (Gypsy, Roma and traveller parents) and Marriage and Civil Partnerships (Lone parents) were more likely to disagree with proposals to reduce the number of centres and reduce the opening hours at some centres than county average responses.

Responses categorised by protected characteristic indicated that those under the Gender (Mothers) and Religion or belief (Christian parents) were more likely to disagree with proposals to reduce the number of centres and reduce the opening hours at some centres than county average responses.

Responses from other protected characteristic groups, such as those with a Disability, Gender Identity, Sexual Orientation, Pregnancy and Maternity were broadly the same as the county average.

Information and Data

Data used in Initial Screening can be found at Appendix 1

Data for Full Impact Assessment see Appendix 2 and 3

See also: post-consultation report for further details

Potential Impact

Adverse Impacts

The initial screening identified a potential for there to be some adverse impacts on the following group;

- 0 – 5 year olds
- Teenage parents
- A number of racial groupings
- Married Couples
- Female parents/ carers
- Pregnancy and Maternity
- Those with a disability
- Impact is unknown for gender identity, carer's responsibilities religion or belief and sexual orientation.

Post-consultation

The results of the consultation find that the proposals in question have the potential to adversely impact:

- Parents aged under 25 years old
- Lone parents

At both The Buttercup and The Daisy a higher proportion of those objecting to the proposals came from these two groups. It did not identify a differential impact on the other groups listed above but did find there might be a slight impact on Gypsy, Roma, Traveller parents at The Daisy than those from other racial groupings.

Positive Impact:

The initial screening identified a potential for there to be a positive impact on some vulnerable groups using the centres, particularly 0-5 year olds, male parents/ carers, white British, disabled children, teenage parents and lone parents.

For example through:

- Hub centre be closer and more accessible to families,
- Increased targeting of provision to those most in need.
- Reinvesting resources from areas of less need to areas of high need
- Possible increase in outreach services and therefore in registrations and need assessments – identifying a family's needs earlier.
- Building on strong local partnerships and integrated working approaches currently in place. Better information sharing.
- Improved signposting across hub and Link
- Continued shared knowledge, expertise and best practice across hub and link
- Improving access by underrepresented groups

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- Improving data collection for categories of data related to gender identity, religion and sexual orientation. However this is not dependant on a model more on staffing model and training.
- Alignment with CCG areas to provide health services in a more coordinated way

Impact is unknown for gender identity, religion or belief and sexual orientation.

Post-consultation

The consultation did not identify that any protected characteristic grouping would be more positively impacted than another. The proportion of responses received agreeing with the consultation were from professionals from whom the highest group of responses agreeing with the proposals were received.

JUDGEMENT

Option 1 – Screening Sufficient **No**

Justification: There is the potential for there to be an adverse impact on a large number of racial groups and pregnancy and maternity protected characteristics.

Option 2 – Internal Action Required **Yes**

There is potential for adverse impact on particular groups and we have found scope to improve the proposal. Please see action plan.

Option 3 – Full Impact Assessment **Yes-** A full impact assessment to be conducted on the overall programme during and after consultation on individual proposals

Post-consultation

The results of the consultation find that the proposals in question have the potential to adversely impact:

- Parents aged under 25 years old
- Lone parents
- Gypsy, Roma, Traveller parents (to a lesser degree than parents aged under 25 years old and Lone parents)

Across all characteristics there are concerns about continued accessibility of services, the costs and difficulties of travelling to alternative locations and the reduction in opening hours and possible unsuitable hours. The centres are located in wards with high deprivation (St Radigunds and Tower Hamlets) and a significantly higher proportion of respondents objecting to the proposal were from low income families (as classified by MOSAIC analysis) than the county average.

In this group, those respondents stating that they will use Children's Centre less often or will no longer use a Children's Centre because of the proposals the most popular reasons cited were:

- Will make travel to centres more difficult / alternative centres too distant
- Children's centres form a local community hub / chance to meet people
- Centre is close by / easily accessible
- Centres supply help / counselling / advice / support / information

Low income in Kent, is not restricted to one particular equality group. Similar reasons for no longer using centres are cited across characteristics with respondents stating they value universal services that are local and provide access to a range of services from different providers.

There are also 'known unknowns' that could impact either positively or negatively on different protected characteristic groups and the development of the hub and link model. These include:

- Budget allocations for 2014/2015.
- Service plans for 2014/2015
- Staffing levels
- Availability and costs of accessible venues to run services from.
- Impacts of proposed changes on partnership working
- Services to be commissioned

Generally, from the consultation there are clear messages about the value centre users place on centres in terms of the services provided and support received from core and other services. They are seen as community hubs, serving a wide range of parent/carer and children's needs. Centre users are concerned about the loss of these services locally, and the implications for easy access in terms of transport, costs and time.

As a result of the consultation responses this full Equality Impact Assessment recommends that the centre merger and relocations should only go ahead if alternative venues in the local community can be found at which to run services for the groups of service users listed above.

In addition to the equality implications stated here the Council has re-evaluated its original proposals by:

- Reconsidering need (population based) and re-analysing usage patterns
- Identifying the impact on users (as identified by consultation respondents), and particularly sole users.
- Assessing suitable alternative venues within 1 mile of a proposed closure to enable services to continue to be delivered within the community.

- Identifying property implications including potential future (community) usage of accommodation and the likelihood of DfE clawback of capital monies.

It has therefore recommended the following changes to services:

Table 2

Recommendation	Rationale	Children's Centres
Close The Daisy and merge with The Buttercup. This will require the renegotiation of the existing Buttercup lease to improve service delivery AND the sourcing of additional alternative outreach accommodation at Tower Hamlets – The Daisy	Based on lack of suitable alternative accommodation in Dover Town Centre.	The Buttercup The Daisy

In line with the recommendations above, the impact on the these Children's Centres would be;

Table 3

Consultation Proposal	Proposed Decision
Closing and merging 2 Children's Centres and relocating them to an existing building in Dover Town Centre	Close the Daisy and merge with The Buttercup. This will require the renegotiation of the existing Buttercup lease to improve service delivery AND the sourcing of additional alternative accommodation for outreach at Tower Hamlets (The Daisy).

As a result of this proposed decision a further Equality Impact Assessment screening will be undertaken to ensure there are no additional impacts on service users.

Given the finding of the Impact Assessment it is particularly important to note that the recommendation is that all outreach services remain unaffected.

Action Plan

It is proposed that the following actions are taken:

- Undertake a further screening to assess the impact of the recommendation in Table 2 and 3.
- Data collection on all protected characteristics at the time of registration with centres

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Further detail can be found in the action plan at page 25

Monitoring and Review

It is recommended the following review actions are undertaken on a quarterly basis from April 2014:

- Review further EqlA screening. Undertake and monitor actions as required.
- Monitor attendance levels at Centres in Dover to ensure numbers of services users with protected characteristics accessing services are maintained and improved
- Monitor and quality assure equality data capture on Children's Centre database

Equality and Diversity Team Comments

Several potential impacts, both positive and negative were identified at the screening stage; the service sought consultation feedback to test out the service assumptions about impact and to identify any gaps/issues that may need to be addressed and a full impact assessment was conducted. As a result of the findings (set out in the judgement section above), the service has modified the recommendation to address potential negative impacts.

Sign Off

I have noted the content of the equality impact assessment and agree the actions to mitigate the adverse impact(s) that have been identified.

Senior Officer



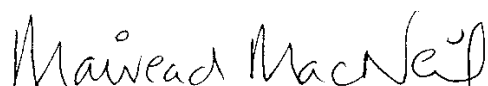
Signed:

Name: Karen Mills

Job Title: Commissioning Manager

Date: November 2013

DMT Member



Signed:

Name: Mairead MacNeil

Job Title: Director of Specialist Children's Services Date: November 2013

Equality Impact Assessment Action Plan

Protected Characteristic	Issues identified	Action to be taken	Expected outcomes	Owner	Timescale	Cost implications
All	No suitable venue in Dover town Centre from which to deliver services	Close The Daisy and merge with The Buttercup, ensuring services continued to be delivered in the local community serviced currently by The Daisy	Service users remain able to access services within their local communities	Strategic Commissioning	January 2014 – March 2014	TBC
All	No suitable venue in Dover town Centre from which to deliver services	Undertake Equality Impact Assessment Initial Screening on proposals	Unknown	Strategic Commissioning	November 2013	Officer time
All	Monitor equality information	Ensure that data is collected from those registering at centres on all protected characteristics (in particular disability, sexual orientation, gender identity, religion or belief, to provide improved information for targeting services.	Improved data on those	Strategic Commissioning / operational managers / eStart user group	January 2014 onwards	TBC
All	Impact on high numbers of sole users	Implement changes in Table 2 to ensure impact is reduced.	Service users remain able to access services within their local	Strategic Commissioning	January 2014 – June 2014	TBC

			communities			
All	Impact on users on lower incomes	Reallocate budget model based on deprivation	Budget distributed more proportionately to those areas most deprived	Strategic Commissioning	October 2013 – March 2014	TBC

Appendix 1

See following sheets

The Buttercup Children's Centre (Dover)

Note: Data for appendices A & B is based on e-start usage between 1.10.11 to 30.9.12

Appendix A – Centre Profile

Gender

Male		Female		Total	
Number	%	Number	%	Number	%
362	50%	358	50%	720	100%

Age

0		1		2		3		4		5		Total	
Number	%	Number	%	Number	%	Number	%	Number	%	Number	%	Number	%
96	13%	146	20%	123	17%	164	23%	140	19%	51	7%	720	100%

Ethnicity

WBRI White - British		WIRI White - Irish		WIRT White - Traveller of Irish Heritage		WROM White - Gypsy / Roma		WOTH White - Any Other White	
Number	%	Number	%	Number	%	Number	%	Number	%
510	71%	<5			0%	<5		17	2%

The Buttercup Children's Centre (Dover)

ABAN Asian or Asian British - Bangladeshi		AIND Asian or Asian British - Indian		APKN Asian or Asian British - Pakistani		AOTH Asian or Asian British - Any Other Asian		BAFR Black or Black British - African		BCRB Black or Black British - Caribbean		BOTH Black or Black British - Any Other Black	
Number	%	Number	%	Number	%	Number	%	Number	%	Number	%	Number	%
<5		<5			0%	<5			0%		0%		0%

CHNE Chinese		MWAS Mixed / Dual - White and Asian		MWBA Mixed / Dual - White and Black African		MWBC Mixed / Dual - White and Black Caribbean		MOTH Mixed / Dual - Any Other Mixed		OOTH Any Other Ethnic Group	
Number	%	Number	%	Number	%	Number	%	Number	%	Number	%
<5		<5		<5		<5		11	2%	6	1%

NOBT Information Not Yet Obtained		REFU Refused		Record blank		Total	
Number	%	Number	%	Number	%	Number	%
	0%		0%	157	22%	720	100%

Language

English		Other (non-English) language		Record blank		Total	
Number	%	Number	%	Number	%	Number	%
204	28%	<5		515	72%		

The Buttercup Children's Centre (Dover)

Disability

Yes		(Blank)		Total	
Number	%	Number	%	Number	%
	0%	720	100%	720	100%

Mosaic (K & M Group)

A		B		C		D		E		F		G		H	
Number	%	Number	%	Number	%	Number	%	Number	%	Number	%	Number	%	Number	%
18	3%	26	4%	30	4%	70	10%	26	4%	26	4%	66	9%	29	4%

I		J		K		L		M		Unknown		Total	
Number	%	Number	%	Number	%	Number	%	Number	%	Number	%	Number	%
12	2%	78	11%	111	15%	202	28%	18	3%	8	1%	720	100%

The Buttercup Children's Centre (Dover)

Appendix B – District Profile

Gender

Male		Female		Total	
Number	%	Number	%	Number	%
2183	50%	2174	50%	4358	100%

Age

0		1		2		3		4		5		Total	
Number	%	Number	%	Number	%	Number	%	Number	%	Number	%	Number	%
653	15%	723	17%	759	17%	896	21%	885	20%	442	10%	4358	100%

Ethnicity

WBRI White - British		WIRI White - Irish		WIRT White - Traveller of Irish Heritage		WROM White - Gypsy / Roma		WOTH White - Any Other White	
Number	%	Number	%	Number	%	Number	%	Number	%
3109	71%	<5		<5		72	2%	135	3%

ABAN Asian or Asian British - Bangladeshi		AIND Asian or Asian British - Indian		APKN Asian or Asian British - Pakistani		AOTH Asian or Asian British - Any Other Asian		BAFR Black or Black British - African		BCRB Black or Black British - Caribbean		BOTH Black or Black British - Any Other Black	
Number	%	Number	%	Number	%	Number	%	Number	%	Number	%	Number	%
7	0%	23	1%	<5		36	1%	<5			0%		0%

The Buttercup Children's Centre (Dover)

CHNE Chinese		MWAS Mixed / Dual - White and Asian		MWBA Mixed / Dual - White and Black African		MWBC Mixed / Dual - White and Black Caribbean		MOTH Mixed / Dual - Any Other Mixed		OOTH Any Other Ethnic Group	
Number	%	Number	%	Number	%	Number	%	Number	%	Number	%
9	0%	24	1%	11	0%	12	0%	45	1%	31	1%

NOBT Information Not Yet Obtained		REFU Refused		Record blank		Total	
Number	%	Number	%	Number	%	Number	%
9	0%	7	0%	819	19%	4358	100%

Language

English		Other (non-English) language		Record blank		Total	
Number	%	Number	%	Number	%	Number	%
1170	27%	36	1%	3152	72%	4358	100%

Disability

Yes	(Blank)	Total
Number	%	Number
<5	4355	100%

The Buttercup Children's Centre (Dover)

Mosaic (K & M Group)

A		B		C		D		E		F		G		H	
Number	%	Number	%	Number	%	Number	%	Number	%	Number	%	Number	%	Number	%
134	3%	93	2%	186	4%	462	11%	262	6%	208	5%	414	9%	182	4%

I		J		K		L		M		Unknown		Total	
Number	%	Number	%	Number	%	Number	%	Number	%	Number	%	Number	%
116	3%	802	18%	539	12%	763	18%	167	4%	30	1%	4358	100%

The Buttercup Children's Centre (Dover)

Appendix C – District Profile (2011 Census)

Appendix C – 2011 Census Data

Gender

Table 1: 2011 Census Total Population for Kent Local Authorities

Local Authority	Total Persons	Males		Females		Area of local authority (Hectares)	Density (persons per hectare)
		No.	%	No.	%		
Ashford	117,958	57,232	48.5%	60,724	51.5%	58,062	2.03
Canterbury	151,145	72,838	48.1%	78,507	51.9%	30,885	4.89
Dartford	97,385	48,061	49.4%	49,304	50.6%	7,277	13.38
Dover	111,674	54,765	49.0%	56,909	51.0%	31,484	3.55
Gravesham	101,720	50,139	49.3%	51,581	50.7%	9,902	10.27
Maidstone	155,143	76,492	49.3%	78,651	50.7%	39,333	3.94
Sevenoaks	114,893	55,743	48.5%	59,150	51.5%	37,034	3.10
Shepway	107,969	53,135	49.2%	54,834	50.8%	35,670	3.03
Swale	135,835	67,152	49.4%	68,683	50.6%	37,341	3.64
Thanet	134,186	64,555	48.1%	69,631	51.9%	10,330	12.99
Tonbridge & Malling	120,805	59,207	49.0%	61,598	51.0%	24,014	5.03
Tunbridge Wells	115,049	56,494	49.1%	58,555	50.9%	33,133	3.47
KCC Area	1,463,740	715,613	48.9%	748,127	51.1%	354,464	4.13
Medway	263,925	130,825	49.6%	133,100	50.4%	19,203	13.74
Kent	1,727,665	846,438	49.0%	881,227	51.0%	373,667	4.62

Source: 2011 Census Table PP04 (unrounded data) released 24 September 2012. Office for National Statistics (ONS), © Crown Copyright

Age

Standard 5-year age group profile - Total persons			
	All ages	0-4	5-9
KCC area	1,466,500	89,300	84,500
Ashford Borough	118,400	7,700	7,400
Canterbury City	150,600	7,500	7,600
Dartford Borough	97,600	6,800	6,000
Dover District	111,700	6,200	5,900
Gravesham Borough	101,800	6,700	6,300
Maidstone Borough	155,800	9,700	8,800
Sevenoaks District	115,400	7,000	6,900
Shepway District	108,200	6,000	5,600
Swale Borough	136,300	8,800	8,000
Thanet District	134,400	8,100	7,300
Tonbridge & Malling Borough	121,100	7,500	7,700
Tunbridge Wells Borough	115,200	7,300	7,000
Medway Unitary Authority	264,900	17,300	16,100
Kent (KCC + Medway)	1,731,400	106,600	100,600
South East Region	8,652,800	536,000	490,800
England	53,107,200	3,328,700	2,990,100

Ethnicity

Table 2: 2011 Census: Population by broad ethnic group in Kent districts, the South East and England

	All usual residents	White		Mixed/ multiple ethnic groups:		Asian/ Asian British:		Black/ African/ Caribbean/ Black British		Other ethnic group:	
		Number	%	Number	%	Number	%	Number	%	Number	%
England	53,012,456	45,281,142	85.4%	1,192,879	2.3%	4,143,403	7.8%	1,846,614	3.5%	548,418	1.0%
South East	8,634,750	7,827,820	90.7%	167,764	1.9%	452,042	5.2%	136,013	1.6%	51,111	0.6%
Kent	1,463,740	1,371,102	93.7%	22,107	1.5%	47,614	3.3%	16,216	1.1%	6,701	0.5%
Ashford	117,956	110,520	93.7%	1,682	1.4%	3,991	3.4%	1,375	1.2%	388	0.3%
Canterbury	151,145	140,620	93.0%	2,551	1.7%	5,135	3.4%	1,937	1.3%	902	0.6%
Dartford	97,365	85,070	87.4%	2,161	2.2%	5,799	6.0%	3,578	3.7%	757	0.8%
Dover	111,674	107,966	96.7%	1,029	0.9%	2,031	1.8%	386	0.3%	262	0.2%
Gravesham	101,720	84,226	82.8%	2,066	2.0%	10,604	10.4%	2,885	2.8%	1,939	1.9%
Maidstone	155,143	145,996	94.1%	2,345	1.5%	4,943	3.2%	1,380	0.9%	479	0.3%
Sevenoaks	114,893	110,029	95.8%	1,675	1.5%	2,085	1.8%	853	0.7%	251	0.2%
Shepway	107,969	102,215	94.7%	1,267	1.2%	3,699	3.4%	458	0.4%	330	0.3%
Swale	135,835	131,155	96.6%	1,575	1.2%	1,489	1.1%	1,395	1.0%	221	0.2%
Thanet	134,186	128,194	95.5%	2,186	1.6%	2,504	1.9%	910	0.7%	392	0.3%
Tonbridge & Malling	120,805	115,872	95.9%	1,677	1.4%	2,431	2.0%	421	0.3%	404	0.3%
Tunbridge Wells	115,049	109,239	94.9%	1,893	1.6%	2,903	2.5%	638	0.6%	376	0.3%
Medway Unitary Authority	263,925	236,579	89.6%	5,176	2.0%	13,615	5.2%	6,663	2.5%	1,892	0.7%
Kent & Medway	1,727,665	1,607,681	93.1%	27,283	1.6%	61,229	3.5%	22,879	1.3%	8,593	0.5%

Source: 2011 Census: Key Statistics Table 201, Office for National Statistics (ONS) © Crown Copyright
Presented by Business Intelligence, Research & Evaluation, Kent County Council

Religion

Table 8: Religion in Kent districts, the South East and England in 2011

Table population : All usual residents

	All People	Christian		Buddhist		Hindu		Jewish		Muslim		Sikh		Other religion		No religion		Religion not dated	
		Number	%	Number	%	Number	%	Number	%	Number	%	Number	%	Number	%	Number	%	Number	%
England	53,012,456	31,479,876	60.4%	238,626	0.6%	806,199	1.6%	261,282	0.6%	2,660,116	6.0%	420,196	0.8%	227,825	0.4%	13,114,232	24.7%	3,804,104	7.2%
South East	8,634,750	5,160,128	60.0%	43,946	0.6%	92,499	1.1%	17,761	0.2%	201,651	2.3%	54,941	0.6%	39,672	0.6%	2,388,286	27.7%	635,866	7.4%
Kent	1,463,740	915,200	62.6%	6,802	0.6%	10,943	0.7%	1,777	0.1%	13,932	1.0%	10,545	0.7%	6,145	0.4%	391,591	26.8%	106,805	7.3%
Ashford	117,956	74,253	62.9%	803	0.7%	1,282	1.1%	116	0.1%	1,019	0.9%	95	0.1%	432	0.4%	30,984	26.3%	8,972	7.6%
Canterbury	151,145	91,122	60.3%	880	0.6%	1,055	0.7%	267	0.2%	1,838	1.2%	245	0.2%	760	0.6%	43,117	28.6%	11,861	7.8%
Dartford	97,365	59,045	60.6%	382	0.4%	1,547	1.6%	86	0.1%	1,566	1.6%	1,543	1.6%	319	0.3%	26,486	27.2%	6,391	6.6%
Dover	111,674	71,541	64.1%	523	0.6%	682	0.6%	97	0.1%	521	0.6%	50	0.0%	525	0.6%	29,047	26.0%	8,688	7.8%
Gravesham	101,720	61,891	60.8%	333	0.3%	942	0.9%	54	0.1%	1,894	1.9%	7,743	7.6%	606	0.6%	21,862	21.6%	6,395	6.3%
Maldstone	155,143	97,578	62.9%	901	0.6%	1,492	1.0%	163	0.1%	1,685	1.1%	176	0.1%	612	0.4%	41,493	26.7%	11,043	7.1%
Sevenoaks	114,893	75,169	66.4%	367	0.3%	385	0.3%	196	0.2%	600	0.6%	180	0.2%	348	0.3%	28,939	26.2%	8,709	7.6%
Shepway	107,969	67,296	62.3%	962	0.9%	1,551	1.4%	78	0.1%	796	0.7%	34	0.0%	506	0.6%	28,575	26.6%	8,171	7.6%
Swale	135,835	85,535	63.0%	275	0.2%	368	0.3%	93	0.1%	792	0.6%	158	0.1%	499	0.4%	39,087	28.8%	9,028	6.6%
Thanet	134,186	82,447	61.4%	491	0.4%	639	0.6%	273	0.2%	1,230	0.9%	94	0.1%	690	0.6%	38,383	28.6%	9,939	7.4%
Tonbridge & Malling	120,805	76,920	63.7%	441	0.4%	539	0.4%	122	0.1%	750	0.6%	169	0.1%	412	0.3%	32,996	27.3%	8,456	7.0%
Tunbridge Wells	115,049	72,403	62.9%	444	0.4%	461	0.4%	232	0.2%	1,241	1.1%	58	0.1%	436	0.4%	30,622	26.6%	9,152	8.0%
Medway	263,925	152,637	67.0%	937	0.4%	2,756	1.0%	208	0.1%	5,169	2.0%	3,846	1.6%	1,392	0.6%	78,995	29.9%	17,985	6.8%
Kent & Medway	1,727,665	1,067,837	61.8%	7,739	0.4%	13,699	0.8%	1,985	0.1%	19,101	1.1%	14,391	0.8%	7,537	0.4%	470,586	27.2%	124,790	7.2%

Source: 2011 Census: Key Statistics Table 209, Office for National Statistics (ONS) © Crown Copyright

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Disability and Carer's Responsibilities

All usual residents

	Kent	Ashford	Canterbury	Dartford	Dover	Gravesham	Maidstone	Sevenoaks	Shepway	Swale	Thanet	Tonbridge & Malling	Tunbridge Wells
All people	1,463,740	117,956	151,145	97,365	111,674	101,720	155,143	114,893	107,969	135,835	134,186	120,805	115,049
Day-to-day activities limited a lot	116,407	8,416	12,427	6,621	10,853	7,796	10,660	7,219	10,753	11,742	15,369	7,579	6,972
Day-to-day activities limited a little	140,631	10,669	14,891	8,114	12,404	9,546	13,845	9,872	11,965	13,580	15,979	10,367	9,399
Day-to-day activities not limited	1,206,702	98,871	123,827	82,630	88,417	84,378	130,638	97,802	85,251	110,513	102,838	102,859	98,678
Very good health	683,205	56,128	70,764	47,273	48,433	47,298	74,636	58,796	45,577	60,198	54,640	60,306	59,156
Good health	510,399	41,385	52,338	33,941	39,477	35,572	54,384	38,344	38,999	48,719	47,109	41,475	38,656
Fair health	194,931	15,027	20,211	11,837	16,745	13,629	19,291	13,180	16,465	19,118	22,377	14,263	12,788
Bad health	58,536	4,163	6,133	3,314	5,538	4,104	5,323	3,569	5,321	6,008	7,785	3,728	3,550
Very bad health	16,669	1,253	1,699	1,000	1,481	1,117	1,509	1,004	1,607	1,792	2,275	1,033	899
Provides no unpaid care	1,311,963	106,137	135,562	88,146	99,020	91,410	139,582	102,948	95,663	121,577	118,684	108,724	104,510
Provides 1 to 19 hours unpaid care a week	97,464	7,686	10,089	5,927	7,892	6,371	10,472	8,501	7,465	8,351	8,925	8,258	7,527
Provides 20 to 49 hours unpaid care a week	18,432	1,428	1,815	1,126	1,579	1,383	1,728	1,190	1,663	1,897	2,190	1,321	1,112
Provides 50 or more hours unpaid care a week	35,881	2,705	3,679	2,166	3,183	2,556	3,361	2,254	3,178	4,010	4,387	2,502	1,900

	Kent	Ashford	Canterbury	Dartford	Dover	Gravesham	Maidstone	Sevenoaks	Shepway	Swale	Thanet	Tonbridge & Malling	Tunbridge Wells
All people aged 16 to 64*	917,880	73,443	97,526	63,390	68,865	64,674	98,962	70,814	66,345	85,916	80,143	75,394	72,408
Day-to-day activities limited a lot: Age 16 to 64	47,613	3,489	4,762	2,718	4,473	3,418	4,182	2,564	4,517	5,357	6,459	2,948	2,726
Day-to-day activities limited a little: Age 16 to 64	65,065	5,107	6,612	3,955	5,815	4,521	6,457	4,182	5,458	6,728	7,325	4,607	4,298
Day-to-day activities not limited: Age 16 to 64	805,202	64,847	86,152	56,717	58,577	56,735	88,323	64,068	56,370	73,831	66,359	67,839	65,384

2011 Census Table KS301: Health and provision of unpaid care

Source: 2011 Census: Office for National Statistics (ONS) © Crown Copyright

Presented by Business Intelligence, Research & Evaluation,
Kent County Council

Table population: All usual residents
(PERCENTAGES)

All usual residents

	Kent	Ashford	Canterbury	Dartford	Dover	Gravesham	Maidstone	Sevenoaks	Shepway	Swale	Thanet	Tonbridge & Malling	Tunbridge Wells	Medway	Kent & Medway
All people	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
Day-to-day activities limited a lot	8.0%	7.1%	8.2%	6.8%	9.7%	7.7%	6.9%	6.3%	10.0%	8.6%	11.5%	6.3%	6.1%	7.5%	7.9%
Day-to-day activities limited a little	9.6%	9.0%	9.9%	8.3%	11.1%	9.4%	8.9%	8.6%	11.1%	10.0%	11.9%	8.6%	8.2%	8.9%	9.5%
Day-to-day activities not limited	82.4%	83.8%	81.9%	84.9%	79.2%	83.0%	84.2%	85.1%	79.0%	81.4%	76.6%	85.1%	85.8%	83.6%	82.6%
Very good health	46.7%	47.6%	46.8%	48.6%	43.4%	46.5%	48.1%	51.2%	42.2%	44.3%	40.7%	49.9%	51.4%	45.7%	46.5%
Good health	34.9%	35.1%	34.6%	34.9%	35.4%	35.0%	35.1%	33.4%	36.1%	35.9%	35.1%	34.3%	33.6%	36.3%	35.1%
Fair health	13.3%	12.7%	13.4%	12.2%	15.0%	13.4%	12.4%	11.5%	15.2%	14.1%	16.7%	11.8%	11.1%	13.0%	13.3%
Bad health	4.0%	3.5%	4.1%	3.4%	5.0%	4.0%	3.4%	3.1%	4.9%	4.4%	5.8%	3.1%	3.1%	3.9%	4.0%
Very bad health	1.1%	1.1%	1.1%	1.0%	1.3%	1.1%	1.0%	0.9%	1.5%	1.3%	1.7%	0.9%	0.8%	1.1%	1.1%
Provides no unpaid care	89.6%	90.0%	89.7%	90.5%	88.7%	89.9%	90.0%	89.6%	88.6%	89.5%	88.4%	90.0%	90.8%	90.5%	89.8%
Provides 1 to 19 hours unpaid care a week	6.7%	6.5%	6.7%	6.1%	7.1%	6.3%	6.7%	7.4%	6.9%	6.1%	6.7%	6.8%	6.5%	5.7%	6.5%
Provides 20 to 49 hours unpaid care a week	1.3%	1.2%	1.2%	1.2%	1.4%	1.4%	1.1%	1.0%	1.5%	1.4%	1.6%	1.1%	1.0%	1.3%	1.3%
Provides 50 or more hours unpaid care a week	2.5%	2.3%	2.4%	2.2%	2.9%	2.5%	2.2%	2.0%	2.9%	3.0%	3.3%	2.1%	1.7%	2.5%	2.5%

* Total for all people aged 16 to 64 taken from table KS102 - Age structure

	Kent	Ashford	Canterbury	Dartford	Dover	Gravesham	Maidstone	Sevenoaks	Shepway	Swale	Thanet	Tonbridge & Malling	Tunbridge Wells	Medway	Kent & Medway
All people aged 16 to 64*	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
Day-to-day activities limited a lot: Age 16 to 64	5.2%	4.8%	4.9%	4.3%	6.5%	5.3%	4.2%	3.6%	6.8%	6.2%	8.1%	3.9%	3.8%	5.3%	5.2%
Day-to-day activities limited a little: Age 16 to 64	7.1%	7.0%	6.8%	6.2%	8.4%	7.0%	6.5%	5.9%	8.2%	7.8%	9.1%	6.1%	5.9%	7.1%	7.1%
Day-to-day activities not limited: Age 16 to 64	87.7%	88.3%	88.3%	89.5%	85.1%	87.7%	89.2%	90.5%	85.0%	85.9%	82.8%	90.0%	90.3%	87.5%	87.7%

Marriage and Civil Partnerships

2011 Census Key Statistics Table 103: Marital and civil partnership status

Presented by Business Intelligence, Research & Evaluation, Kent County Council

Table population: All usual residents aged 16 and over

	All people aged 16 and over	Single (never married or never registered a same-sex civil partnership)		Married		In a registered same-sex civil partnership		Separated (but still legally married or still legally in a same-sex civil partnership)		Divorced or formerly in a same-sex civil partnership which is now legally dissolved		Widowed or surviving partner from a same-sex civil partnership	
		Number	%	Number	%	Number	%	Number	%	Number	%	Number	%
Kent	1,180,186	369,334	31.3%	576,067	48.8%	2,388	0.2%	32,802	2.8%	112,916	9.6%	86,679	7.3%
Ashford	93,411	27,080	29.0%	48,288	51.7%	199	0.2%	2,611	2.8%	8,853	9.5%	6,380	6.8%
Canterbury	125,971	48,662	38.6%	54,131	43.0%	310	0.2%	2,863	2.3%	10,602	8.4%	9,403	7.5%
Dartford	77,342	26,741	34.6%	36,439	47.1%	140	0.2%	2,248	2.9%	6,785	8.8%	4,989	6.5%
Dover	91,382	26,924	29.5%	44,096	48.3%	242	0.3%	2,710	3.0%	9,820	10.7%	7,590	8.3%
Gravesham	80,964	26,202	32.4%	39,473	48.8%	111	0.1%	2,345	2.9%	7,008	8.7%	5,825	7.2%
Maidstone	125,476	37,567	29.9%	64,344	51.3%	206	0.2%	3,367	2.7%	11,458	9.1%	8,534	6.8%
Sevenoaks	92,481	25,276	27.3%	50,388	54.5%	175	0.2%	2,082	2.3%	7,773	8.4%	6,787	7.3%
Shepway	88,760	27,300	30.8%	41,591	46.9%	240	0.3%	2,713	3.1%	9,673	10.9%	7,243	8.2%
Swale	108,539	33,978	31.3%	52,439	48.3%	197	0.2%	3,500	3.2%	10,835	10.0%	7,590	7.0%
Thanet	108,556	34,051	31.4%	47,911	44.1%	270	0.2%	3,591	3.3%	12,873	11.9%	9,860	9.1%
Tonbridge & Malling	95,821	26,932	28.1%	51,132	53.4%	166	0.2%	2,408	2.5%	8,869	9.3%	6,314	6.6%
Tunbridge Wells	91,483	28,621	31.3%	45,835	50.1%	132	0.1%	2,364	2.6%	8,367	9.1%	6,164	6.7%

The Buttercup Children's Centre (Dover)

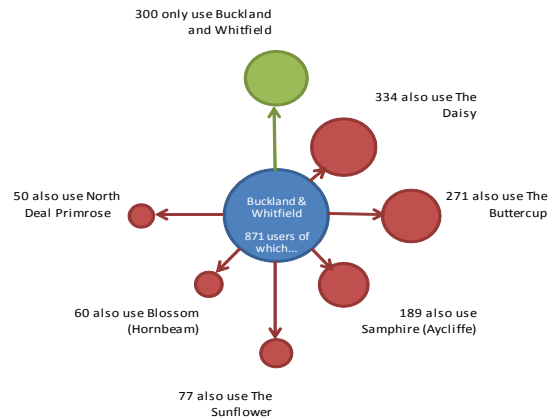
Appendix D – Centre Usage & Needs Analysis

Children's Centre Review - Summary Evidence (Dover)

Centre Usage

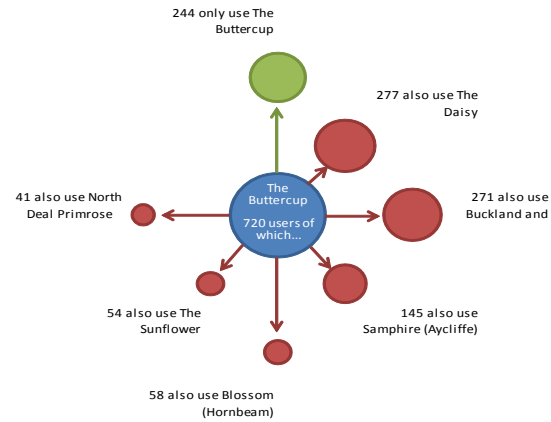
Buckland and Whitfield Children's Centre

Round: R1



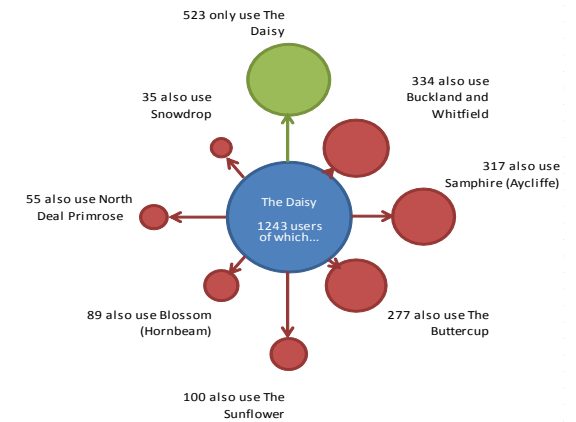
The Buttercup Children's Centre

Round: Ex SSLP



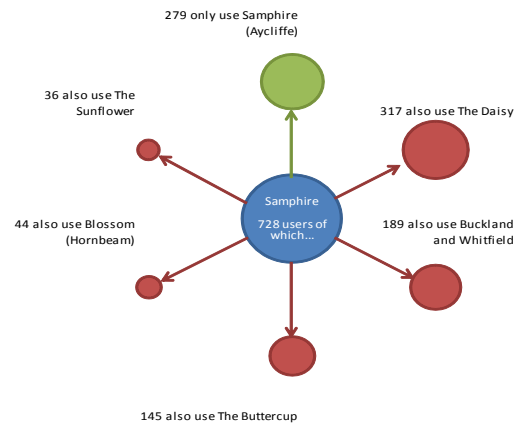
The Daisy Children's Centre

Round: R1



Samphire Children's Centre (Aycliffe)

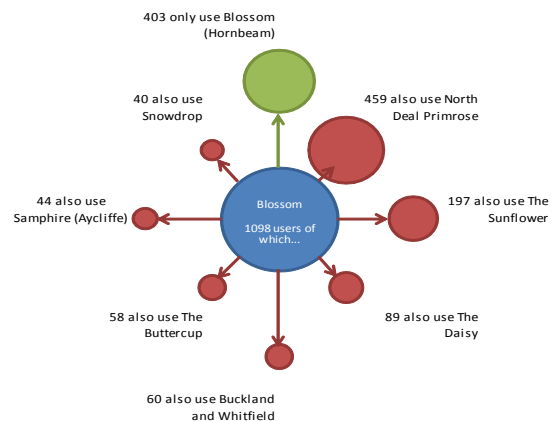
Round: R2



Centre Usage - Continued

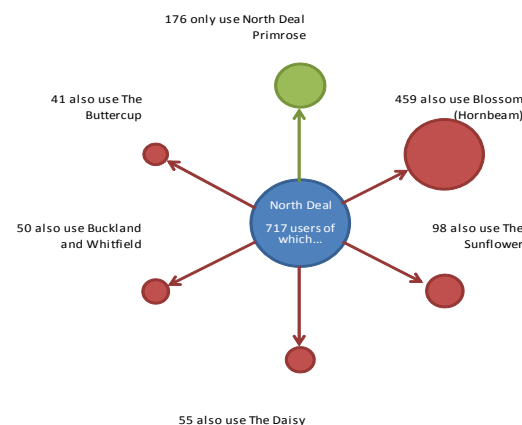
Blossom Children's Centre (Hornbeam)

Round: R2



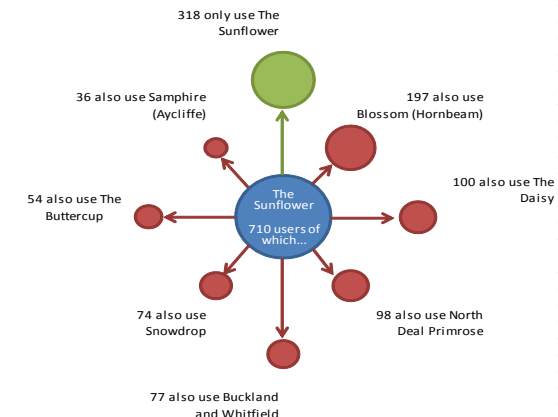
North Deal Primrose Children's Centre

Round: R3



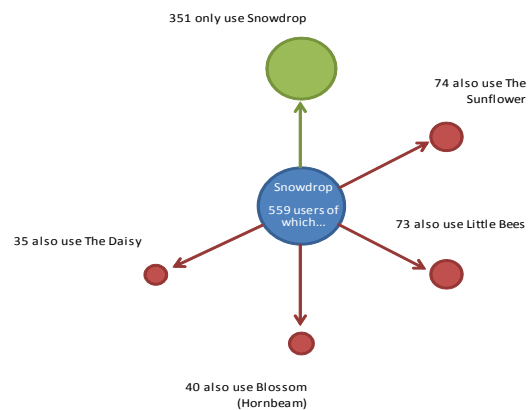
The Sunflower Children's Centre

Round: R2



Snowdrop Children's Centre

Round: R1



Technical Notes:

Based on an analysis of activity data taken from Estart, covering 1st October 2011 to 30th September 2012

Usage bubble chart shows other centres used. In most cases, other centres used by >30 children are shown, up to a maximum of 7 other centres

This analysis is child-based (counting each child only once against each centre they have attended, regardless of frequency), and covers attendees from both within and outside of the registered area (although anonymous attendees are not included).

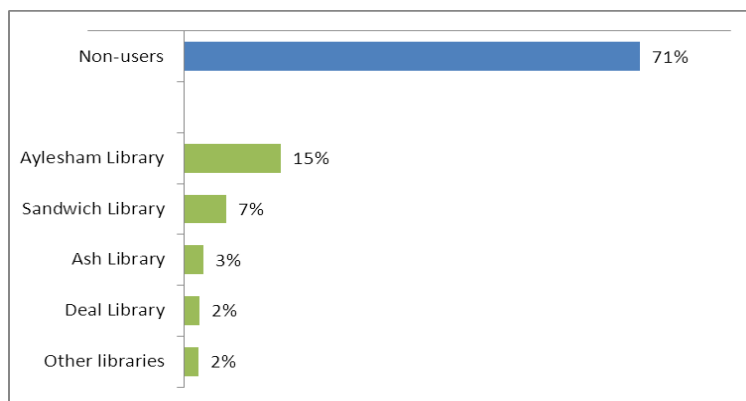


Library Usage Amongst Children's Centre Users

Snowdrop Children's Centre

Round: R1

Library Usage Amongst Families Using Snowdrop Children's Centre



This analysis has not been conducted for any other centres in Dover

Library data relates to users either borrowing or renewing an item between April 2011 and March 2012

Children's centre data based on activity data taken from Estart, covering 1st October 2011 to 30th September 2012

Analysis has been conducted for a list of libraries identified by the library service.

Usage Summary

	Buckland and Whitfield	The Buttercup	The Daisy	Samphire (Aycliffe)	Blossom (Horn-beam)	North Deal Primrose	The Sunflower	Snowdrop	Kent Average
Total number of children seen (reach)	871	720	1243	728	1098	717	710	559	615
% of children who <u>only</u> went to this Centre over the period	34%	34%	42%	38%	37%	25%	45%	63%	49%
Attendance frequency									
<i>Just once</i>	28%	30%	25%	46%	26%	40%	25%	29%	35%
<i>Less than once a month (2-11 times)</i>	40%	36%	45%	33%	37%	35%	34%	56%	47%
<i>1-2 times a month (12-24 times)</i>	7%	8%	15%	7%	9%	12%	16%	10%	10%
<i>At least fortnightly (25-49 times)</i>	22%	25%	14%	13%	25%	11%	20%	4%	6%
<i>At least weekly (50+ times)</i>	2%	1%	1%	1%	2%	1%	5%	1%	2%
Frequent users	35%	36%	31%	23%	40%	27%	43%	22%	24%
Average visits per child	12.7	12.0	9.7	8.0	14.8	8.7	13.8	6.3	8.3
Age (at 1st Oct 2012)									
Under 1	16%	13%	12%	16%	14%	13%	13%	20%	21%
1	21%	20%	17%	15%	17%	19%	17%	20%	26%
2	19%	17%	19%	18%	17%	18%	20%	18%	21%
3	20%	23%	20%	23%	21%	19%	22%	19%	16%
4	18%	19%	20%	20%	22%	21%	20%	17%	11%
5	6%	7%	12%	9%	9%	9%	6%	7%	4%

Catchment Analysis

Need level - based on volume (Numbers)	Average	Average	Average	Average	Average	Low	Average	Average	
Need level - based on penetration (%)	High	High	High	Average	Low	Average	High	Average	
Population projection for 0-5s (provisional)	Up	Up	Up	Up	Similar	Up	Up	Up	Similar

Technical Notes:

Usage statistics based on an analysis of activity data taken from Estart, covering 1st October 2011 to 30th September 2012

Frequent users: Are defined as children recorded as having used the centre 12+ times over the year, with an adjustment made for under 1's

Catchments: Needs are assessed based on the population (with 0-11 year olds) living within the calculated 'actual/natural' catchment for each centre. In this analysis catchments are built at LSOA-level, with each LSOA in Kent allocated to a centre on the basis of the centre that has the most current users living in that LSOA area.

Need Statistics: Levels of need are calculated both in terms of the total volume of need (i.e. numbers of children/households of a range of 11 need types) and in terms of the penetration of the need (i.e. the % of children/households of each of a range of 11 need types)

Population projections: Based on Ward-level projections for 2026, produced by Research & Intelligence, Kent County Council.

Green font indicates the centre is upper quartile on this measure

Red font indicates the centre is lower quartile on this measure

The Buttercup Children's Centre (Dover)

Appendix E – District Workshop (4th Feb 2013) Feedback Report

Kent Children's Centre Programme - 'Local Solutions' District Workshops

Select a District: **Dover**

This document provides an analysis of the feedback forms completed by attendees to the 'Local Solutions' District workshops, held during February 2013. A total of 331 completed forms were received and analysed across all 12 Districts, although it should be noted that at District levels totals are fairly small.

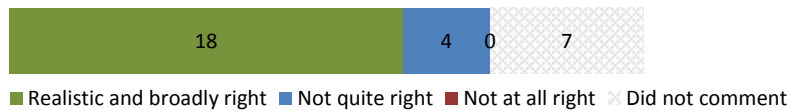
1. The Future Service Options Review aims to look at:

WHAT services are delivered,

WHERE they are accessed or delivered from, and

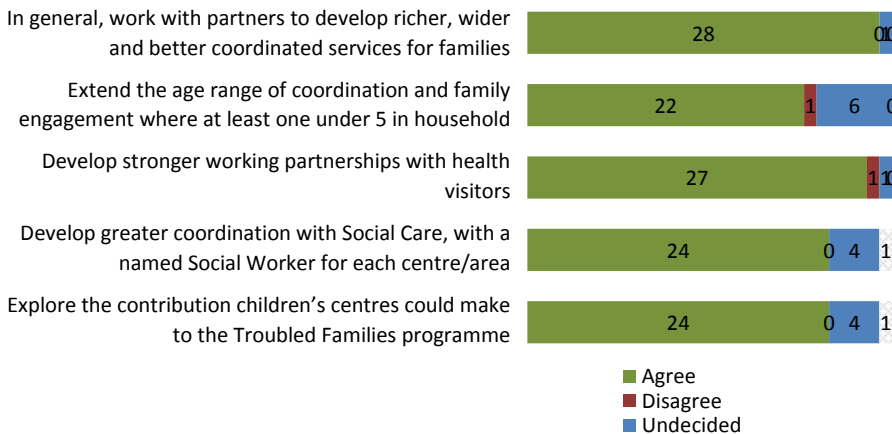
HOW the service is structured to plan and deliver within its financial constraints?

Do you think these aims are the right ones?



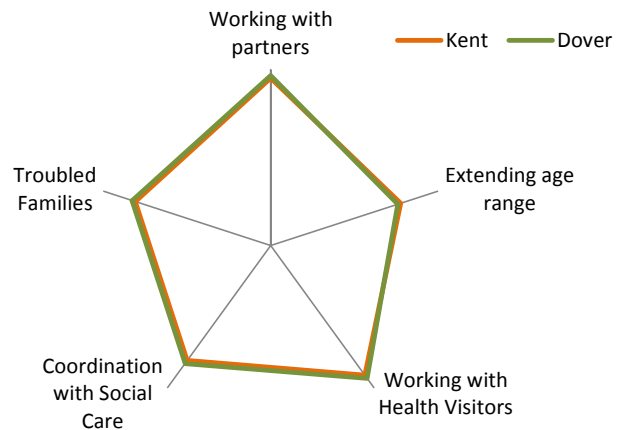
The majority of the attendees to the Dover workshop who responded feel that the Review aims are realistic and broadly right.

2. Service Development: Exercise 1a - No Wrong Front Door



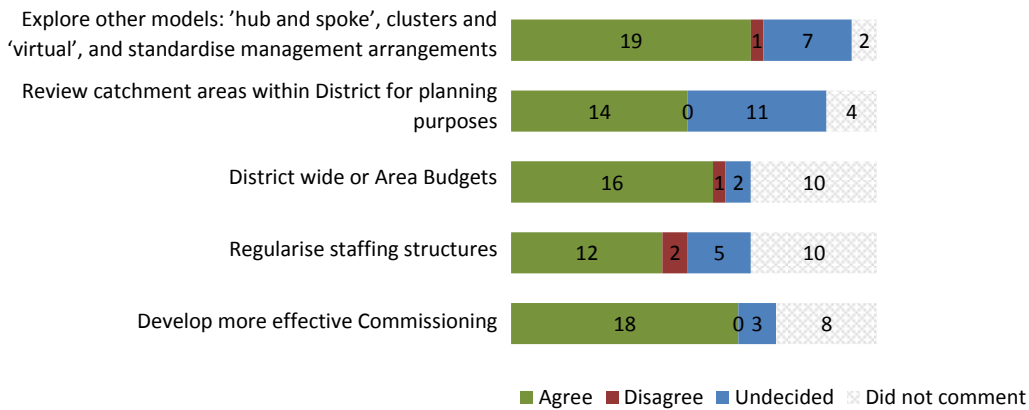
There are high levels of agreement with all areas. However, there is particularly strong agreement that we should, in general, seek to work with partners to develop richer, wider and better coordinated services for families, and that we should seek to develop stronger working relationships with health visitors.

Agreement Levels - Comparison With County Average



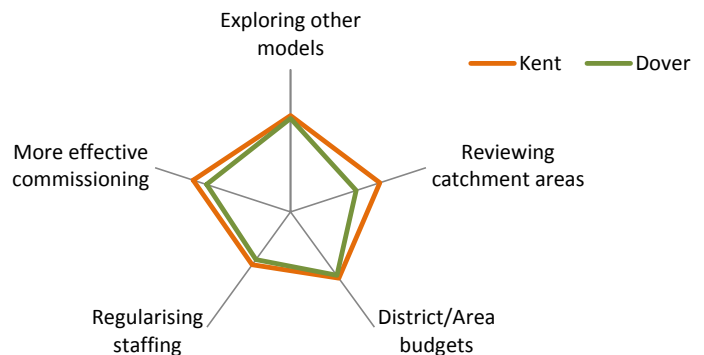
The pattern of responses in Dover is very similar to that for the County overall, with levels of support highest for working with partners, and for developing stronger working relationships with health visitors.

2. Service Development: Exercise 1b - District Planning



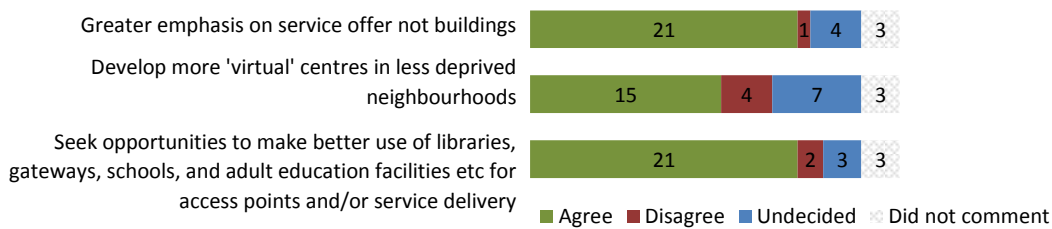
Exploring other models and developing effective commissioning have the highest levels of support in Dover. Less than half of participants agree with reviewing the catchment areas, or regularising staff structures.

Agreement Levels - Comparison With County Average



The pattern of responses in Dover is similar to that for the County overall, with the exception of reviewing of the catchment areas. There appears to be less support for this in Dover, although it should be borne in mind that this result is based on the opinions of 29 individuals.

2. Service Development: Exercise 2 - Scoping Service Delivery and Access Points



Placing a greater emphasis on the service offer and not buildings, and seeking opportunities to make better use of existing facilities have the most support in Dover. Only around half agree with the development of more 'virtual' centres (although the majority of the remainder either indicated being undecided or did not provide an opinion).

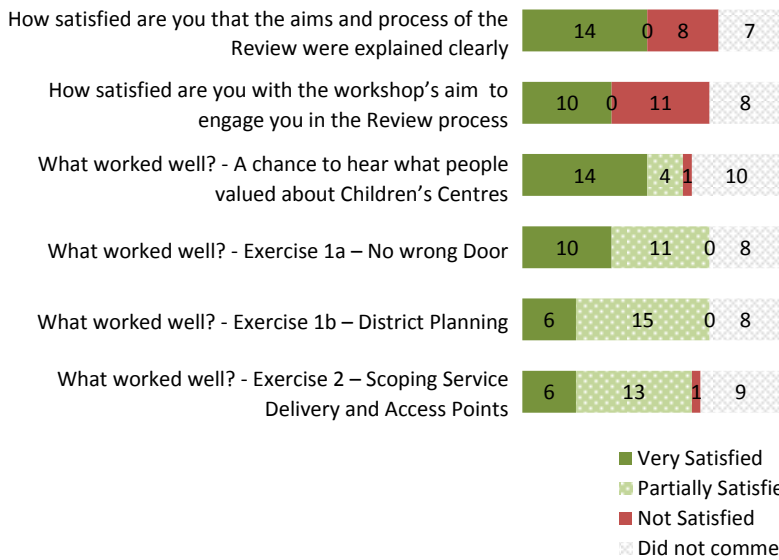
Agreement Levels - Comparison With County Average



The pattern of responses in Dover is similar to that for the County overall, with the exception of placing a greater emphasis on the service offer and not buildings. There appears to be more support for this in Dover, although this does not seem to translate into greater support for more 'virtual' centres, or for the use of other community facilities. (It should also be borne in mind that this result is based on the opinions of 29 individuals.)

3. This workshop was part of the process to engage you in the Future Service Options Review

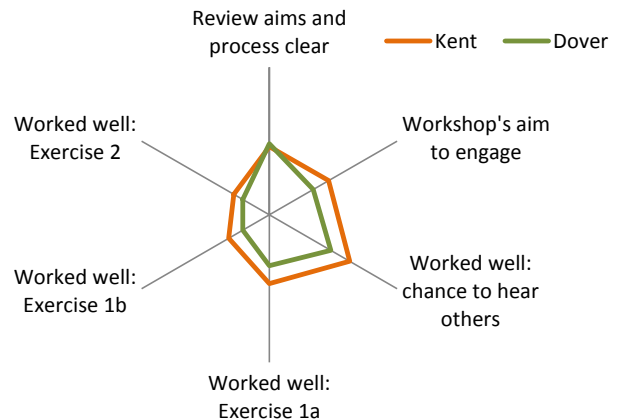
4. What worked particularly well in the workshop?



Opinions were divided in Dover in respect of the aims and process of the Review having been explained clearly, and with the workshop's aim to engage them in the Review process, with a significant number of participants expressing dissatisfaction. There is evidence to suggest that satisfaction with the exercises decreased slightly as the workshop went on, so that by Exercise 2 only 6 participants indicated that they were very satisfied, compared with 10 at Exercise 1a.

Satisfaction Levels ('Very Satisfied') - Comparison With County Average

The pattern of responses in Dover is not dissimilar to that for the County overall, with satisfaction levels with the exercises dropping as the workshop went on. There is some evidence to suggest that levels of participants feeling 'very satisfied' are generally slightly lower in Dover than for the County overall, with the exception of satisfaction that the aims and process of the Review having been explained clearly.



Summary

In terms of levels of agreement, the following garnered the support of more than 80% of participants at the Dover workshop:

- In general, work with partners to develop richer, wider and better coordinated services for families
- Develop stronger working partnerships with health visitors
- Develop greater coordination with Social Care, with a named Social Worker for each centre/area
- Explore the contribution children's centres could make to the Troubled Families programme

The Buttercup Children's Centre (Dover)

Appendix F – District Workshop (4th Feb 2013) Independent Report

CHILDREN'S CENTRES FUTURE SERVICE OPTIONS REVIEW WORKSHOP: DOVER

The Dover workshop was one of a series of workshops held in every Kent District, engaging children's centre leaders, partners and other stakeholders, in a Future Service Options Review of the children's centres programme in Kent. The Review aims to explore:

- **What** services were delivered, in particular looking at the effectiveness of partnerships and the targeting of resources to those who could benefit most;
- **Where** the services are delivered from, and the scope for changes to delivery and access points could improve access and cost effectiveness;
- **How** the services are structured, and whether changes could deliver more consistency where appropriate, better targeting of expenditure, and cost savings;

A summary of contributions is given below, and detailed records of all the written contributions follow.

Aims of the Future Service Options Review

In individual feedback forms, there was consensus that "what, where and how" were the right areas for the review. Individual comments suggested building on the current methods of service delivery and to undertake further analysis of community needs. Participants have indicated a range of options about children's centre models and catchments areas, all of which require further assessment. The focus is on supporting the specific needs of the migrant community whilst also considering services available in rural areas.

Icebreaker

The ice breaker established the qualities of Dover's children's centres and their staff, and their place in the lives of families and communities. They are valued because of their welcoming environment and professional staff. They are recognised as being an important community resource and a place to deliver both universal and targeted services.

"No Wrong Door" – improving partnership effectiveness

In general, there is recognition that closer partnership working with education, health and social care colleagues is essential to achieving a successful early intervention service. Employability services offered by JCP, Adult Education and others could be further developed, new methods of supporting the employability agenda have been identified via Gateway Taktix, G4S and Avanta. To develop the role of parents in the delivery of services to enable professional staff to focus more on those most in need by expanding the current volunteering and buddying schemes.

The voluntary sector have much to offer – local knowledge and experience, and a number of existing groups where further links can be developed to support families in need.

The Buttercup Children's Centre (Dover)

The partnership with health is dependent on developing links and commissioning arrangements with health visitors (0-4 years), school nurses (school age), midwifery clinics, CAMHS and SALT. It was suggested that there is increased potential for children's centres to support the delivery of the Child Health Programme via health professionals being based in children's centres, receiving new birth data, joint records, shared data bases, links with school nurses, the delivery of drop in clinics and joint groups. District level planning would continue to help drive this agenda forward.

The links between Dover's schools and children's centres varied enormously. There are a number of references to the challenges that arise when engaging with academies and primary schools which are not co-located with children's centres.

Dover's children's centres already receive referrals from primary schools, recognise the sibling agenda and are keen to continue to develop partnership working which includes a seamless transition. Support for the 0-11 agenda to be achieved by a multi-agency joined up approach with shared outcomes and targets. A shared approach to family support might better co-ordinate the support to identified families, and make better use of the overall resources.

Though current arrangement between Dover's children's centres and social care worked well for some families, it was suggested confidence building, early help and identification would improve partnership working. More children's centre engagement and sharing of knowledge re clients with social care will lead to greater consistency, and better co-ordinated service to families in high levels of need. The District highlighted issues about the role of CAF/ pre CAF processes, joint data bases and to share information to support the needs of targeted families.

Participants were keen to involve children's centres and their partners in the Troubled Families Initiative; this programme is at an early stage with information on the families and lead professionals to be clarified.

In individual feedback forms, the "no wrong door" principle was overwhelmingly supported.

District Level Planning

Participants supported district level resourcing (which is currently in place), and saw opportunities there to plan and deliver more responsive services by building on the existing model (working well), unrestricted by outdated catchment areas, and potentially pool or share resources with other partners and generate income. Staffing structures need to recognise the value of experienced staff and role of outreach workers, more peripatetic staff and admin functions could be centralised.

Participants listed a range of buildings and catchment areas that could be reviewed based on further analysis these included; - bring Snowdrop into a district offer (services), North Deal could be 'reduced', consider one centre in Dover, North and South divide is a potential for two areas and relocate to larger centres in town at a central location for ease of access and rural hubs with local satellites.

New methods of service delivery were suggested these included; - 'One front desk' creating a single standard for Kent residents by whichever way families choose to contact Kent,

The Buttercup Children's Centre (Dover)

partnerships with other community delivery agents, building partnership working based on need and a centralised reception 'Hot Line'.

In individual feedback forms, more district level planning is supported as long as it planned sensitively in line with local knowledge and community need.

Service and Access Points

Key services point's opportunities to be investigated in Dover include the Gateways, the Discovery Centre, health/NHS premises and co-location of services and the hiring and cost of community facilities. The children's centre buildings could be used by other organisations.

In individual feedback forms, the majority of participants supported the principle of a premises review. Comments stressed the emphasis in Dover District has always been on service delivery not buildings.

Bob Allen & David Wallis

The Daisy Children's Centre (Dover)

Note: Data for appendices A & B is based on e-start usage between 1.10.11 to 30.9.12

Appendix A – Centre Profile

Gender

Male		Female		Total	
Number	%	Number	%	Number	%
647	52%	596	48%	1243	100%

Age

0	1	2	3	4	5	Total							
Number	%	Number	%	Number	%	Number	%						
154	12%	214	17%	233	19%	251	20%	244	20%	147	12%	1243	100%

Ethnicity

WBRI White - British		WIRI White - Irish		WIRT White - Traveller of Irish Heritage		WROM White - Gypsy / Roma		WOTH White - Any Other White	
Number	%	Number	%	Number	%	Number	%	Number	%
796	64%		0%		0%	34	3%	54	4%

The Daisy Children's Centre (Dover)

ABAN Asian or Asian British - Bangladeshi		AIND Asian or Asian British - Indian		APKN Asian or Asian British - Pakistani		AOTH Asian or Asian British - Any Other Asian		BAFR Black or Black British - African		BCRB Black or Black British - Caribbean		BOTH Black or Black British - Any Other Black	
Number	%	Number	%	Number	%	Number	%	Number	%	Number	%	Number	%
<5		6	0%	<5		30	2%		0%		0%		0%

CHNE Chinese		MWAS Mixed / Dual - White and Asian		MWBA Mixed / Dual - White and Black African		MWBC Mixed / Dual - White and Black Caribbean		MOTH Mixed / Dual - Any Other Mixed		OOTH Any Other Ethnic Group	
Number	%	Number	%	Number	%	Number	%	Number	%	Number	%
<5		<5			0%	<5		14	1%	14	1%

NOBT Information Not Yet Obtained		REFU Refused		Record blank		Total	
Number	%	Number	%	Number	%	Number	%
<5			0%	281	23%	1243	100%

Language

English		Other (non-English) language		Record blank		Total	
Number	%	Number	%	Number	%	Number	%
318	26%	22	2%	903	73%	1243	100%

The Daisy Children's Centre (Dover)

Disability

Yes		(Blank)		Total	
Number	%	Number	%	Number	%
	0%	1243	100%	1243	100%

Mosaic (K & M Group)

A		B		C		D		E		F		G		H	
Number	%	Number	%	Number	%	Number	%	Number	%	Number	%	Number	%	Number	%
15	1%	18	1%	33	3%	65	5%	50	4%	45	4%	174	14%	62	5%

I		J		K		L		M		Unknown		Total	
Number	%	Number	%	Number	%	Number	%	Number	%	Number	%	Number	%
68	5%	162	13%	284	23%	221	18%	38	3%	8	1%	1243	100%

The Daisy Children's Centre (Dover)

Appendix B – District Profile

Gender

Male		Female		Total	
Number	%	Number	%	Number	%
2183	50%	2174	50%	4358	100%

Age

0		1		2		3		4		5		Total	
Number	%	Number	%	Number	%	Number	%	Number	%	Number	%	Number	%
653	15%	723	17%	759	17%	896	21%	885	20%	442	10%	4358	100%

Ethnicity

WBRI White - British		WIRI White - Irish		WIRT White - Traveller of Irish Heritage		WROM White - Gypsy / Roma		WOTH White - Any Other White	
Number	%	Number	%	Number	%	Number	%	Number	%
3109	71%	<5		<5		72	2%	135	3%

ABAN Asian or Asian British - Bangladeshi		AIND Asian or Asian British - Indian		APKN Asian or Asian British - Pakistani		AOTH Asian or Asian British - Any Other Asian		BAFR Black or Black British - African		BCRB Black or Black British - Caribbean		BOTH Black or Black British - Any Other Black	
Number	%	Number	%	Number	%	Number	%	Number	%	Number	%	Number	%
7	0%	23	1%	<5		36	1%	<5			0%		0%

The Daisy Children's Centre (Dover)

CHNE Chinese		MWAS Mixed / Dual - White and Asian		MWBA Mixed / Dual - White and Black African		MWBC Mixed / Dual - White and Black Caribbean		MOTH Mixed / Dual - Any Other Mixed		OOTH Any Other Ethnic Group	
Number	%	Number	%	Number	%	Number	%	Number	%	Number	%
9	0%	24	1%	11	0%	12	0%	45	1%	31	1%

NOBT Information Not Yet Obtained		REFU Refused		Record blank		Total	
Number	%	Number	%	Number	%	Number	%
9	0%	7	0%	819	19%	4358	100%

Language

English		Other (non-English) language		Record blank		Total	
Number	%	Number	%	Number	%	Number	%
1170	27%	36	1%	3152	72%	4358	100%

Disability

Yes	(Blank)	Total
Number	%	Number
<5	4355	100%

The Daisy Children's Centre (Dover)

Mosaic (K & M Group)

A		B		C		D		E		F		G		H	
Number	%	Number	%	Number	%	Number	%	Number	%	Number	%	Number	%	Number	%
134	3%	93	2%	186	4%	462	11%	262	6%	208	5%	414	9%	182	4%

I		J		K		L		M		Unknown		Total	
Number	%	Number	%	Number	%	Number	%	Number	%	Number	%	Number	%
116	3%	802	18%	539	12%	763	18%	167	4%	30	1%	4358	100%

The Daisy Children's Centre (Dover)

Appendix C – District Profile (2011 Census)

Appendix C – 2011 Census Data

Gender

Table 1: 2011 Census Total Population for Kent Local Authorities

Local Authority	Total Persons	Males		Females		Area of local authority (Hectares)	Density (persons per hectare)
		No.	%	No.	%		
Ashford	117,958	57,232	48.5%	60,724	51.5%	58,062	2.03
Canterbury	151,145	72,838	48.1%	78,507	51.9%	30,885	4.89
Dartford	97,385	48,061	49.4%	49,304	50.6%	7,277	13.38
Dover	111,674	54,765	49.0%	56,909	51.0%	31,484	3.55
Gravesham	101,720	50,139	49.3%	51,581	50.7%	9,902	10.27
Maidstone	155,143	76,492	49.3%	78,651	50.7%	39,333	3.94
Sevenoaks	114,893	55,743	48.5%	59,150	51.5%	37,034	3.10
Shepway	107,969	53,135	49.2%	54,834	50.8%	35,670	3.03
Swale	135,835	67,152	49.4%	68,683	50.6%	37,341	3.64
Thanet	134,186	64,555	48.1%	69,631	51.9%	10,330	12.99
Tonbridge & Malling	120,805	59,207	49.0%	61,598	51.0%	24,014	5.03
Tunbridge Wells	115,049	56,494	49.1%	58,555	50.9%	33,133	3.47
KCC Area	1,463,740	715,613	48.9%	748,127	51.1%	354,464	4.13
Medway	263,925	130,825	49.6%	133,100	50.4%	19,203	13.74
Kent	1,727,665	846,438	49.0%	881,227	51.0%	373,667	4.62

Source: 2011 Census Table PP04 (unrounded data) released 24 September 2012. Office for National Statistics (ONS), © Crown Copyright

Age

Standard 5-year age group profile - Total persons			
	All ages	0-4	5-9
KCC area	1,466,500	89,300	84,500
Ashford Borough	118,400	7,700	7,400
Canterbury City	150,600	7,500	7,600
Dartford Borough	97,600	6,800	6,000
Dover District	111,700	6,200	5,900
Gravesham Borough	101,800	6,700	6,300
Maidstone Borough	155,800	9,700	8,800
Sevenoaks District	115,400	7,000	6,900
Shepway District	108,200	6,000	5,600
Swale Borough	136,300	8,800	8,000
Thanet District	134,400	8,100	7,300
Tonbridge & Malling Borough	121,100	7,500	7,700
Tunbridge Wells Borough	115,200	7,300	7,000
Medway Unitary Authority	264,900	17,300	16,100
Kent (KCC + Medway)	1,731,400	106,600	100,600
South East Region	8,652,800	536,000	490,800
England	53,107,200	3,328,700	2,990,100

Ethnicity

Table 2: 2011 Census: Population by broad ethnic group in Kent districts, the South East and England

	All usual residents	White		Mixed/ multiple ethnic groups:		Asian/ Asian British:		Black/ African/ Caribbean/ Black British		Other ethnic group:	
		Number	%	Number	%	Number	%	Number	%	Number	%
England	53,012,456	45,281,142	85.4%	1,192,879	2.3%	4,143,403	7.8%	1,846,614	3.5%	548,418	1.0%
South East	8,634,750	7,827,820	90.7%	167,764	1.9%	452,042	5.2%	136,013	1.6%	51,111	0.6%
Kent	1,463,740	1,371,102	93.7%	22,107	1.5%	47,614	3.3%	16,216	1.1%	6,701	0.5%
Ashford	117,956	110,520	93.7%	1,682	1.4%	3,991	3.4%	1,375	1.2%	388	0.3%
Canterbury	151,145	140,620	93.0%	2,551	1.7%	5,135	3.4%	1,937	1.3%	902	0.6%
Dartford	97,365	85,070	87.4%	2,161	2.2%	5,799	6.0%	3,578	3.7%	757	0.8%
Dover	111,674	107,966	96.7%	1,029	0.9%	2,031	1.8%	386	0.3%	262	0.2%
Gravesham	101,720	84,226	82.8%	2,066	2.0%	10,604	10.4%	2,885	2.8%	1,939	1.9%
Maidstone	155,143	145,996	94.1%	2,345	1.5%	4,943	3.2%	1,380	0.9%	479	0.3%
Sevenoaks	114,893	110,029	95.8%	1,675	1.5%	2,085	1.8%	853	0.7%	251	0.2%
Shepway	107,969	102,215	94.7%	1,267	1.2%	3,699	3.4%	458	0.4%	330	0.3%
Swale	135,835	131,155	96.6%	1,575	1.2%	1,489	1.1%	1,395	1.0%	221	0.2%
Thanet	134,186	128,194	95.5%	2,186	1.6%	2,504	1.9%	910	0.7%	392	0.3%
Tonbridge & Malling	120,805	115,872	95.9%	1,677	1.4%	2,431	2.0%	421	0.3%	404	0.3%
Tunbridge Wells	115,049	109,239	94.9%	1,893	1.6%	2,903	2.5%	638	0.6%	376	0.3%
Medway Unitary Authority	263,925	236,579	89.6%	5,176	2.0%	13,615	5.2%	6,663	2.5%	1,892	0.7%
Kent & Medway	1,727,665	1,607,681	93.1%	27,283	1.6%	61,229	3.5%	22,879	1.3%	8,593	0.5%

Source: 2011 Census: Key Statistics Table 201, Office for National Statistics (ONS) © Crown Copyright
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Religion

Table 8: Religion in Kent districts, the South East and England in 2011

Table population : All usual residents

	All People	Christian		Buddhist		Hindu		Jewish		Muslim		Sikh		Other religion		No religion		Religion not dated	
		Number	%	Number	%	Number	%	Number	%	Number	%	Number	%	Number	%	Number	%	Number	%
England	53,012,456	31,479,876	60.4%	238,626	0.6%	806,199	1.6%	261,282	0.6%	2,660,116	6.0%	420,196	0.8%	227,825	0.4%	13,114,232	24.7%	3,804,104	7.2%
South East	8,634,750	5,160,128	60.0%	43,946	0.6%	92,499	1.1%	17,761	0.2%	201,651	2.3%	54,941	0.6%	39,672	0.6%	2,388,286	27.7%	635,866	7.4%
Kent	1,463,740	915,200	62.6%	6,802	0.6%	10,943	0.7%	1,777	0.1%	13,932	1.0%	10,545	0.7%	6,145	0.4%	391,591	26.8%	106,805	7.3%
Ashford	117,956	74,253	62.9%	803	0.7%	1,282	1.1%	116	0.1%	1,019	0.9%	95	0.1%	432	0.4%	30,984	26.3%	8,972	7.6%
Canterbury	151,145	91,122	60.3%	880	0.6%	1,055	0.7%	267	0.2%	1,838	1.2%	245	0.2%	760	0.6%	43,117	28.6%	11,861	7.8%
Dartford	97,365	59,045	60.6%	382	0.4%	1,547	1.6%	86	0.1%	1,566	1.6%	1,543	1.6%	319	0.3%	26,486	27.2%	6,391	6.6%
Dover	111,674	71,541	64.1%	523	0.6%	682	0.6%	97	0.1%	521	0.6%	50	0.0%	525	0.6%	29,047	26.0%	8,688	7.8%
Gravesham	101,720	61,891	60.9%	333	0.3%	942	0.9%	54	0.1%	1,894	1.9%	7,743	7.6%	606	0.6%	21,862	21.6%	6,395	6.3%
Maldstone	155,143	97,578	62.9%	901	0.6%	1,492	1.0%	163	0.1%	1,685	1.1%	176	0.1%	612	0.4%	41,493	26.7%	11,043	7.1%
Sevenoaks	114,893	75,169	66.4%	367	0.3%	385	0.3%	196	0.2%	600	0.6%	180	0.2%	348	0.3%	28,939	26.2%	8,709	7.6%
Shepway	107,969	67,296	62.3%	962	0.9%	1,551	1.4%	78	0.1%	796	0.7%	34	0.0%	506	0.6%	28,575	26.6%	8,171	7.6%
Swale	135,835	85,535	63.0%	275	0.2%	368	0.3%	93	0.1%	792	0.6%	158	0.1%	499	0.4%	39,087	28.8%	9,028	6.6%
Thanet	134,186	82,447	61.4%	491	0.4%	639	0.6%	273	0.2%	1,230	0.9%	94	0.1%	690	0.6%	38,383	28.6%	9,939	7.4%
Tonbridge & Malling	120,805	76,920	63.7%	441	0.4%	539	0.4%	122	0.1%	750	0.6%	169	0.1%	412	0.3%	32,996	27.3%	8,456	7.0%
Tunbridge Wells	115,049	72,403	62.9%	444	0.4%	461	0.4%	232	0.2%	1,241	1.1%	58	0.1%	436	0.4%	30,622	26.6%	9,152	8.0%
Medway	263,925	152,637	57.8%	937	0.4%	2,756	1.0%	208	0.1%	5,169	2.0%	3,846	1.6%	1,392	0.6%	78,995	29.9%	17,985	6.8%
Kent & Medway	1,727,665	1,067,837	61.8%	7,739	0.4%	13,699	0.8%	1,985	0.1%	19,101	1.1%	14,391	0.8%	7,537	0.4%	470,586	27.2%	124,790	7.2%

Source: 2011 Census: Key Statistics Table 209, Office for National Statistics (ONS) © Crown Copyright

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Disability and Carer's Responsibilities

All usual residents

	Kent	Ashford	Canterbury	Dartford	Dover	Gravesham	Maidstone	Sevenoaks	Shepway	Swale	Thanet	Tonbridge & Malling	Tunbridge Wells
All people	1,463,740	117,956	151,145	97,365	111,674	101,720	155,143	114,893	107,969	135,835	134,186	120,805	115,049
Day-to-day activities limited a lot	116,407	8,416	12,427	6,621	10,853	7,796	10,660	7,219	10,753	11,742	15,369	7,579	6,972
Day-to-day activities limited a little	140,631	10,669	14,891	8,114	12,404	9,546	13,845	9,872	11,965	13,580	15,979	10,367	9,399
Day-to-day activities not limited	1,206,702	98,871	123,827	82,630	88,417	84,378	130,638	97,802	85,251	110,513	102,838	102,859	98,678
Very good health	683,205	56,128	70,764	47,273	48,433	47,298	74,636	58,796	45,577	60,198	54,640	60,306	59,156
Good health	510,399	41,385	52,338	33,941	39,477	35,572	54,384	38,344	38,999	48,719	47,109	41,475	38,656
Fair health	194,931	15,027	20,211	11,837	16,745	13,629	19,291	13,180	16,465	19,118	22,377	14,263	12,788
Bad health	58,536	4,163	6,133	3,314	5,538	4,104	5,323	3,569	5,321	6,008	7,785	3,728	3,550
Very bad health	16,669	1,253	1,699	1,000	1,481	1,117	1,509	1,004	1,607	1,792	2,275	1,033	899
Provides no unpaid care	1,311,963	106,137	135,562	88,146	99,020	91,410	139,582	102,948	95,663	121,577	118,684	108,724	104,510
Provides 1 to 19 hours unpaid care a week	97,464	7,686	10,089	5,927	7,892	6,371	10,472	8,501	7,465	8,351	8,925	8,258	7,527
Provides 20 to 49 hours unpaid care a week	18,432	1,428	1,815	1,126	1,579	1,383	1,728	1,190	1,663	1,897	2,190	1,321	1,112
Provides 50 or more hours unpaid care a week	35,881	2,705	3,679	2,166	3,183	2,556	3,361	2,254	3,178	4,010	4,387	2,502	1,900

	Kent	Ashford	Canterbury	Dartford	Dover	Gravesham	Maidstone	Sevenoaks	Shepway	Swale	Thanet	Tonbridge & Malling	Tunbridge Wells
All people aged 16 to 64*	917,880	73,443	97,526	63,390	68,865	64,674	98,962	70,814	66,345	85,916	80,143	75,394	72,408
Day-to-day activities limited a lot: Age 16 to 64	47,613	3,489	4,762	2,718	4,473	3,418	4,182	2,564	4,517	5,357	6,459	2,948	2,726
Day-to-day activities limited a little: Age 16 to 64	65,065	5,107	6,612	3,955	5,815	4,521	6,457	4,182	5,458	6,728	7,325	4,607	4,298
Day-to-day activities not limited: Age 16 to 64	805,202	64,847	86,152	56,717	58,577	56,735	88,323	64,068	56,370	73,831	66,359	67,839	65,384

2011 Census Table KS301: Health and provision of unpaid care

Source: 2011 Census: Office for National Statistics (ONS) © Crown Copyright

Presented by Business Intelligence, Research & Evaluation,
Kent County Council

Table population: All usual residents
(PERCENTAGES)

All usual residents

	Kent	Ashford	Canterbury	Dartford	Dover	Gravesham	Maidstone	Sevenoaks	Shepway	Swale	Thanet	Tonbridge & Malling	Tunbridge Wells	Medway	Kent & Medway
All people	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
Day-to-day activities limited a lot	8.0%	7.1%	8.2%	6.8%	9.7%	7.7%	6.9%	6.3%	10.0%	8.6%	11.5%	6.3%	6.1%	7.5%	7.9%
Day-to-day activities limited a little	9.6%	9.0%	9.9%	8.3%	11.1%	9.4%	8.9%	8.6%	11.1%	10.0%	11.9%	8.6%	8.2%	8.9%	9.5%
Day-to-day activities not limited	82.4%	83.8%	81.9%	84.9%	79.2%	83.0%	84.2%	85.1%	79.0%	81.4%	76.6%	85.1%	85.8%	83.6%	82.6%
Very good health	46.7%	47.6%	46.8%	48.6%	43.4%	46.5%	48.1%	51.2%	42.2%	44.3%	40.7%	49.9%	51.4%	45.7%	46.5%
Good health	34.9%	35.1%	34.6%	34.9%	35.4%	35.0%	35.1%	33.4%	36.1%	35.9%	35.1%	34.3%	33.6%	36.3%	35.1%
Fair health	13.3%	12.7%	13.4%	12.2%	15.0%	13.4%	12.4%	11.5%	15.2%	14.1%	16.7%	11.8%	11.1%	13.0%	13.3%
Bad health	4.0%	3.5%	4.1%	3.4%	5.0%	4.0%	3.4%	3.1%	4.9%	4.4%	5.8%	3.1%	3.1%	3.9%	4.0%
Very bad health	1.1%	1.1%	1.1%	1.0%	1.3%	1.1%	1.0%	0.9%	1.5%	1.3%	1.7%	0.9%	0.8%	1.1%	1.1%
Provides no unpaid care	89.6%	90.0%	89.7%	90.5%	88.7%	89.9%	90.0%	89.6%	88.6%	89.5%	88.4%	90.0%	90.8%	90.5%	89.8%
Provides 1 to 19 hours unpaid care a week	6.7%	6.5%	6.7%	6.1%	7.1%	6.3%	6.7%	7.4%	6.9%	6.1%	6.7%	6.8%	6.5%	5.7%	6.5%
Provides 20 to 49 hours unpaid care a week	1.3%	1.2%	1.2%	1.2%	1.4%	1.4%	1.1%	1.0%	1.5%	1.4%	1.6%	1.1%	1.0%	1.3%	1.3%
Provides 50 or more hours unpaid care a week	2.5%	2.3%	2.4%	2.2%	2.9%	2.5%	2.2%	2.0%	2.9%	3.0%	3.3%	2.1%	1.7%	2.5%	2.5%

* Total for all people aged 16 to 64 taken from table KS102 - Age structure

	Kent	Ashford	Canterbury	Dartford	Dover	Gravesham	Maidstone	Sevenoaks	Shepway	Swale	Thanet	Tonbridge & Malling	Tunbridge Wells	Medway	Kent & Medway
All people aged 16 to 64*	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
Day-to-day activities limited a lot: Age 16 to 64	5.2%	4.8%	4.9%	4.3%	6.5%	5.3%	4.2%	3.6%	6.8%	6.2%	8.1%	3.9%	3.8%	5.3%	5.2%
Day-to-day activities limited a little: Age 16 to 64	7.1%	7.0%	6.8%	6.2%	8.4%	7.0%	6.5%	5.9%	8.2%	7.8%	9.1%	6.1%	5.9%	7.1%	7.1%
Day-to-day activities not limited: Age 16 to 64	87.7%	88.3%	88.3%	89.5%	85.1%	87.7%	89.2%	90.5%	85.0%	85.9%	82.8%	90.0%	90.3%	87.5%	87.7%

Marriage and Civil Partnerships

2011 Census Key Statistics Table 103: Marital and civil partnership status

Presented by Business Intelligence, Research & Evaluation, Kent County Council

Table population: All usual residents aged 16 and over

	All people aged 16 and over	Single (never married or never registered a same-sex civil partnership)		Married		In a registered same-sex civil partnership		Separated (but still legally married or still legally in a same-sex civil partnership)		Divorced or formerly in a same-sex civil partnership which is now legally dissolved		Widowed or surviving partner from a same-sex civil partnership	
		Number	%	Number	%	Number	%	Number	%	Number	%	Number	%
Kent	1,180,186	369,334	31.3%	576,067	48.8%	2,388	0.2%	32,802	2.8%	112,916	9.6%	86,679	7.3%
Ashford	93,411	27,080	29.0%	48,288	51.7%	199	0.2%	2,611	2.8%	8,853	9.5%	6,380	6.8%
Canterbury	125,971	48,662	38.6%	54,131	43.0%	310	0.2%	2,863	2.3%	10,602	8.4%	9,403	7.5%
Dartford	77,342	26,741	34.6%	36,439	47.1%	140	0.2%	2,248	2.9%	6,785	8.8%	4,989	6.5%
Dover	91,382	26,924	29.5%	44,096	48.3%	242	0.3%	2,710	3.0%	9,820	10.7%	7,590	8.3%
Gravesham	80,964	26,202	32.4%	39,473	48.8%	111	0.1%	2,345	2.9%	7,008	8.7%	5,825	7.2%
Maidstone	125,476	37,567	29.9%	64,344	51.3%	206	0.2%	3,367	2.7%	11,458	9.1%	8,534	6.8%
Sevenoaks	92,481	25,276	27.3%	50,388	54.5%	175	0.2%	2,082	2.3%	7,773	8.4%	6,787	7.3%
Shepway	88,760	27,300	30.8%	41,591	46.9%	240	0.3%	2,713	3.1%	9,673	10.9%	7,243	8.2%
Swale	108,539	33,978	31.3%	52,439	48.3%	197	0.2%	3,500	3.2%	10,835	10.0%	7,590	7.0%
Thanet	108,556	34,051	31.4%	47,911	44.1%	270	0.2%	3,591	3.3%	12,873	11.9%	9,860	9.1%
Tonbridge & Malling	95,821	26,932	28.1%	51,132	53.4%	166	0.2%	2,408	2.5%	8,869	9.3%	6,314	6.6%
Tunbridge Wells	91,483	28,621	31.3%	45,835	50.1%	132	0.1%	2,364	2.6%	8,367	9.1%	6,164	6.7%

The Daisy Children's Centre (Dover)

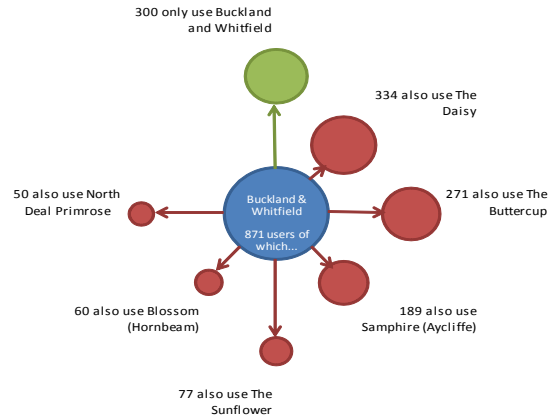
Appendix D – Centre Usage & Needs Analysis

Children's Centre Review - Summary Evidence (Dover)

Centre Usage

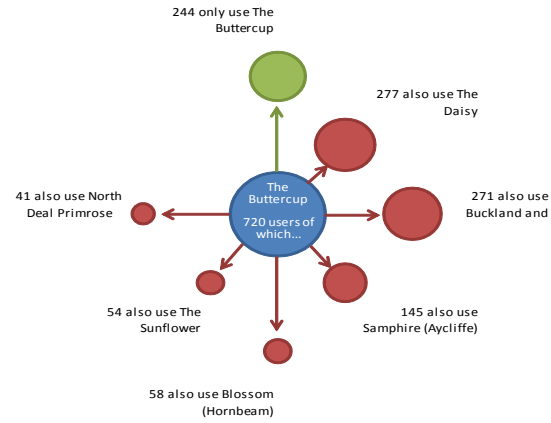
Buckland and Whitfield Children's Centre

Round: R1



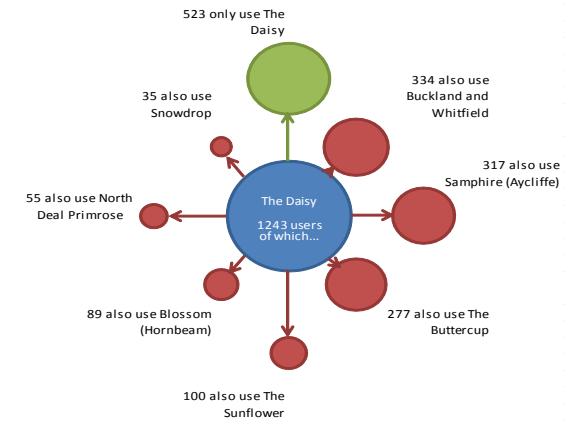
The Buttercup Children's Centre

Round: Ex SSLP



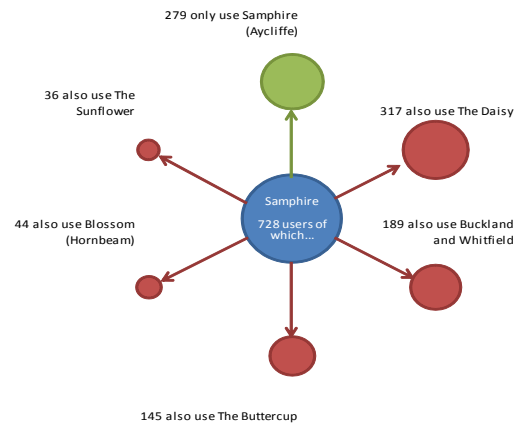
The Daisy Children's Centre

Round: R1



Samphire Children's Centre (Aycliffe)

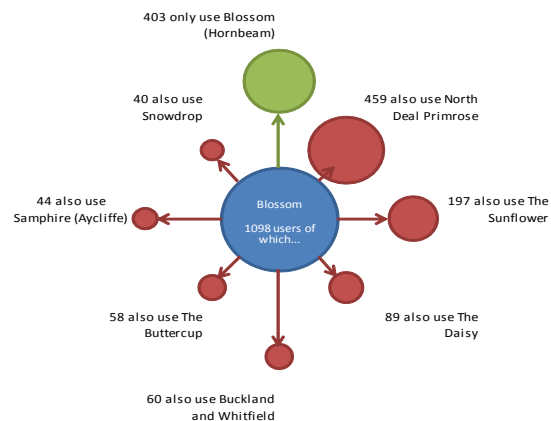
Round: R2



Centre Usage - Continued

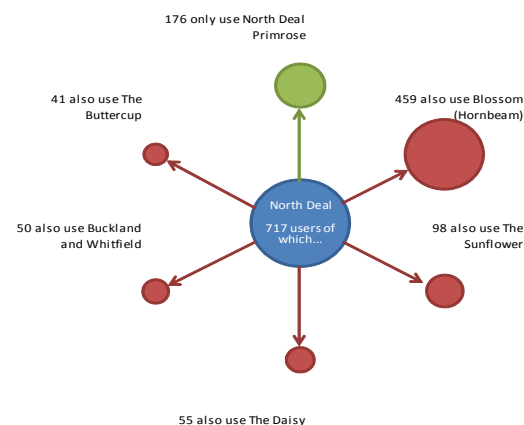
Blossom Children's Centre (Hornbeam)

Round: R2



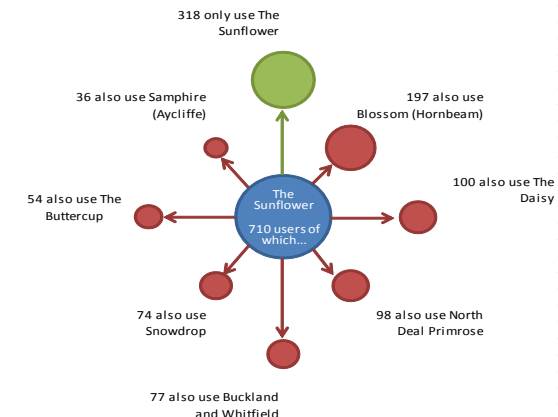
North Deal Primrose Children's Centre

Round: R3



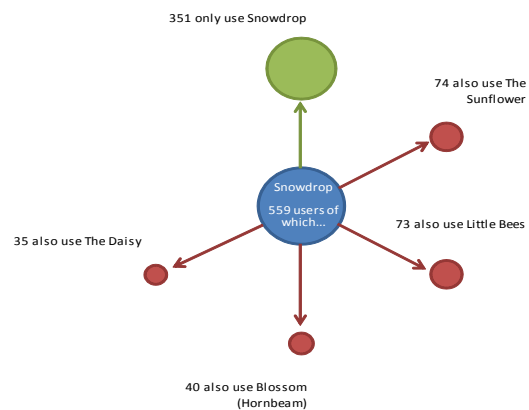
The Sunflower Children's Centre

Round: R2



Snowdrop Children's Centre

Round: R1



Technical Notes:

Based on an analysis of activity data taken from Estart, covering 1st October 2011 to 30th September 2012

Usage bubble chart shows other centres used. In most cases, other centres used by >30 children are shown, up to a maximum of 7 other centres

This analysis is child-based (counting each child only once against each centre they have attended, regardless of frequency), and covers attendees from both within and outside of the registered area (although anonymous attendees are not included).

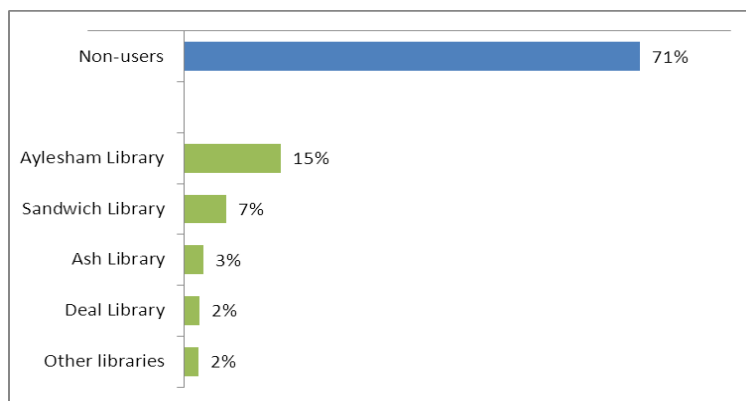


Library Usage Amongst Children's Centre Users

Snowdrop Children's Centre

Round: R1

Library Usage Amongst Families Using Snowdrop Children's Centre



This analysis has not been conducted for any other centres in Dover

Library data relates to users either borrowing or renewing an item between April 2011 and March 2012

Children's centre data based on activity data taken from Estart, covering 1st October 2011 to 30th September 2012

Analysis has been conducted for a list of libraries identified by the library service.

Usage Summary

	Buckland and Whitfield	The Buttercup	The Daisy	Samphire (Aycliffe)	Blossom (Horn-beam)	North Deal Primrose	The Sunflower	Snowdrop	Kent Average
Total number of children seen (reach)	871	720	1243	728	1098	717	710	559	615
% of children who <u>only</u> went to this Centre over the period	34%	34%	42%	38%	37%	25%	45%	63%	49%
Attendance frequency									
<i>Just once</i>	28%	30%	25%	46%	26%	40%	25%	29%	35%
<i>Less than once a month (2-11 times)</i>	40%	36%	45%	33%	37%	35%	34%	56%	47%
<i>1-2 times a month (12-24 times)</i>	7%	8%	15%	7%	9%	12%	16%	10%	10%
<i>At least fortnightly (25-49 times)</i>	22%	25%	14%	13%	25%	11%	20%	4%	6%
<i>At least weekly (50+ times)</i>	2%	1%	1%	1%	2%	1%	5%	1%	2%
Frequent users	35%	36%	31%	23%	40%	27%	43%	22%	24%
Average visits per child	12.7	12.0	9.7	8.0	14.8	8.7	13.8	6.3	8.3
Age (at 1st Oct 2012)									
Under 1	16%	13%	12%	16%	14%	13%	13%	20%	21%
1	21%	20%	17%	15%	17%	19%	17%	20%	26%
2	19%	17%	19%	18%	17%	18%	20%	18%	21%
3	20%	23%	20%	23%	21%	19%	22%	19%	16%
4	18%	19%	20%	20%	22%	21%	20%	17%	11%
5	6%	7%	12%	9%	9%	9%	6%	7%	4%

Catchment Analysis

Need level - based on volume (Numbers)	Average	Average	Average	Average	Average	Low	Average	Average	
Need level - based on penetration (%)	High	High	High	Average	Low	Average	High	Average	
Population projection for 0-5s (provisional)	Up	Up	Up	Up	Similar	Up	Up	Up	Similar

Technical Notes:

Usage statistics based on an analysis of activity data taken from Estart, covering 1st October 2011 to 30th September 2012

Frequent users: Are defined as children recorded as having used the centre 12+ times over the year, with an adjustment made for under 1's

Catchments: Needs are assessed based on the population (with 0-11 year olds) living within the calculated 'actual/natural' catchment for each centre. In this analysis catchments are built at LSOA-level, with each LSOA in Kent allocated to a centre on the basis of the centre that has the most current users living in that LSOA area.

Need Statistics: Levels of need are calculated both in terms of the total volume of need (i.e. numbers of children/households of a range of 11 need types) and in terms of the penetration of the need (i.e. the % of children/households of each of a range of 11 need types)

Population projections: Based on Ward-level projections for 2026, produced by Research & Intelligence, Kent County Council.

Green font indicates the centre is upper quartile on this measure

Red font indicates the centre is lower quartile on this measure

The Daisy Children's Centre (Dover)

Appendix E – District Workshop (4th Feb 2013) Feedback Report

Kent Children's Centre Programme - 'Local Solutions' District Workshops

Select a District: **Dover**

This document provides an analysis of the feedback forms completed by attendees to the 'Local Solutions' District workshops, held during February 2013. A total of 331 completed forms were received and analysed across all 12 Districts, although it should be noted that at District levels totals are fairly small.

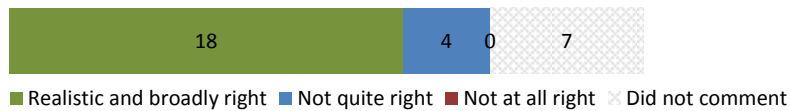
1. The Future Service Options Review aims to look at:

WHAT services are delivered,

WHERE they are accessed or delivered from, and

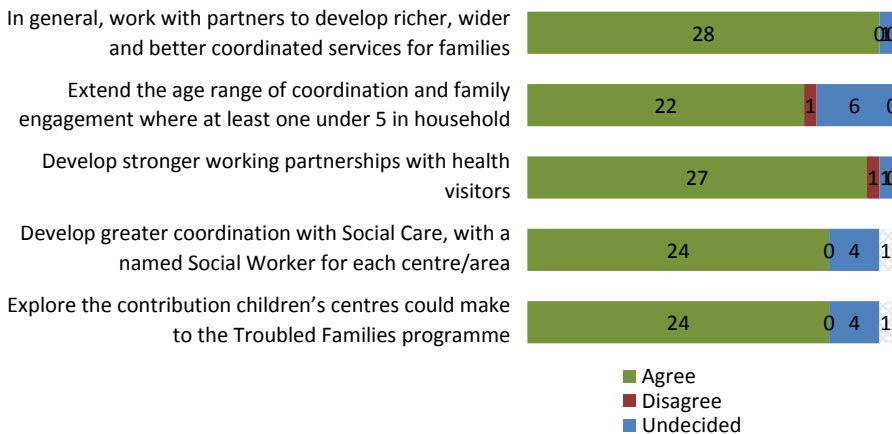
HOW the service is structured to plan and deliver within its financial constraints?

Do you think these aims are the right ones?



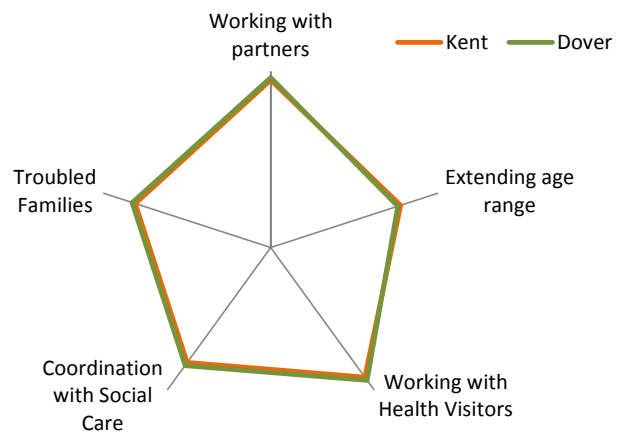
The majority of the attendees to the Dover workshop who responded feel that the Review aims are realistic and broadly right.

2. Service Development: Exercise 1a - No Wrong Front Door



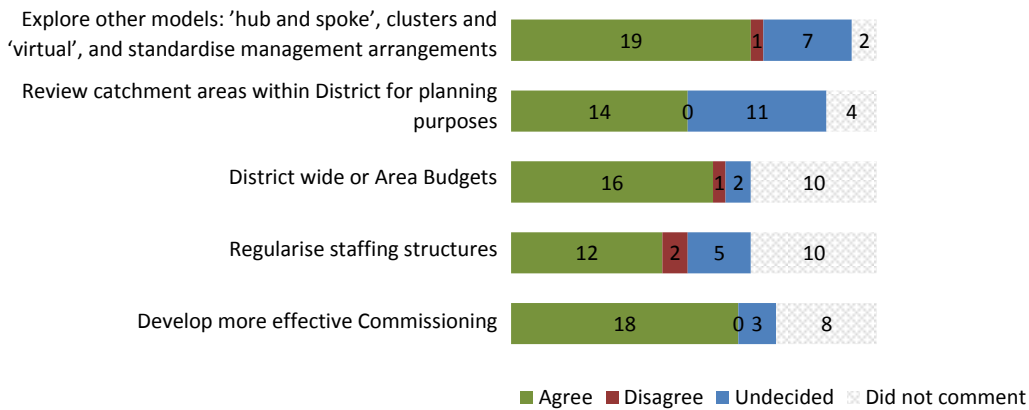
There are high levels of agreement with all areas. However, there is particularly strong agreement that we should, in general, seek to work with partners to develop richer, wider and better coordinated services for families, and that we should seek to develop stronger working relationships with health visitors.

Agreement Levels - Comparison With County Average



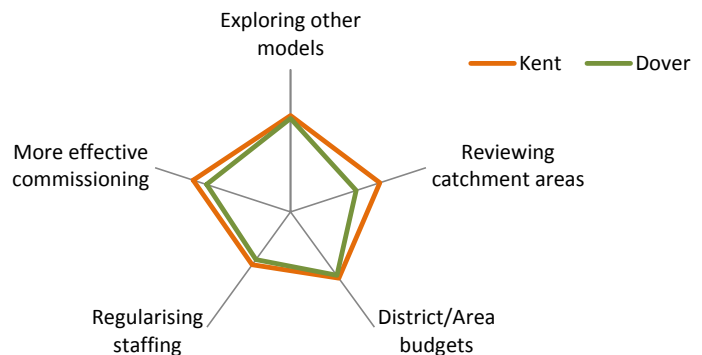
The pattern of responses in Dover is very similar to that for the County overall, with levels of support highest for working with partners, and for developing stronger working relationships with health visitors.

2. Service Development: Exercise 1b - District Planning



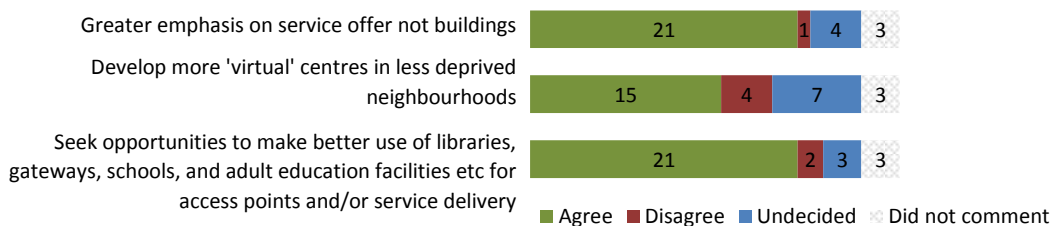
Exploring other models and developing effective commissioning have the highest levels of support in Dover. Less than half of participants agree with reviewing the catchment areas, or regularising staff structures.

Agreement Levels - Comparison With County Average



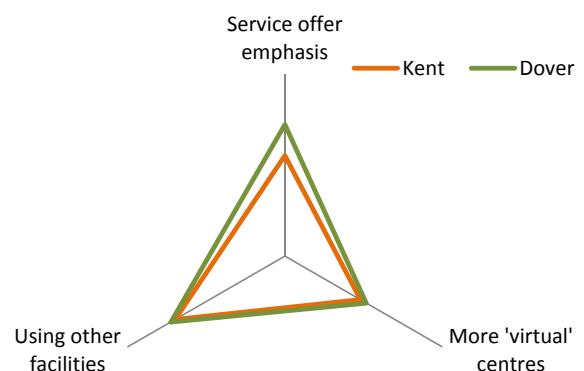
The pattern of responses in Dover is similar to that for the County overall, with the exception of reviewing of the catchment areas. There appears to be less support for this in Dover, although it should be borne in mind that this result is based on the opinions of 29 individuals.

2. Service Development: Exercise 2 - Scoping Service Delivery and Access Points



Placing a greater emphasis on the service offer and not buildings, and seeking opportunities to make better use of existing facilities have the most support in Dover. Only around half agree with the development of more 'virtual' centres (although the majority of the remainder either indicated being undecided or did not provide an opinion).

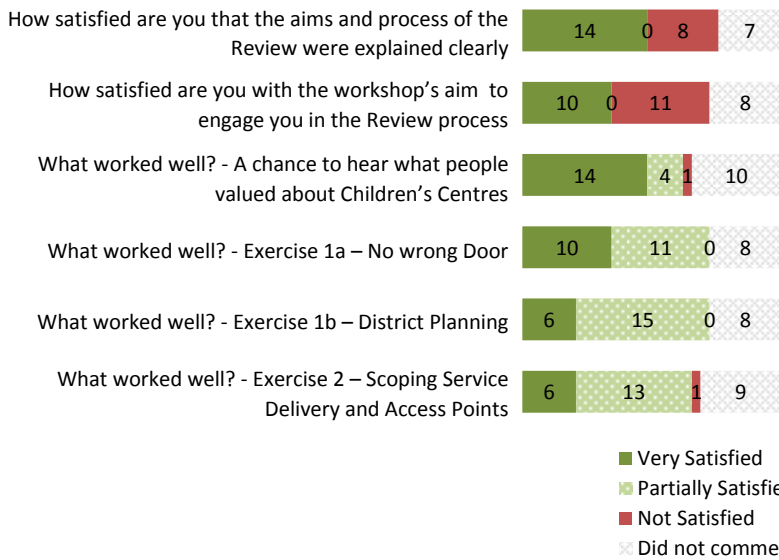
Agreement Levels - Comparison With County Average



The pattern of responses in Dover is similar to that for the County overall, with the exception of placing a greater emphasis on the service offer and not buildings. There appears to be more support for this in Dover, although this does not seem to translate into greater support for more 'virtual' centres, or for the use of other community facilities. (It should also be borne in mind that this result is based on the opinions of 29 individuals.)

3. This workshop was part of the process to engage you in the Future Service Options Review

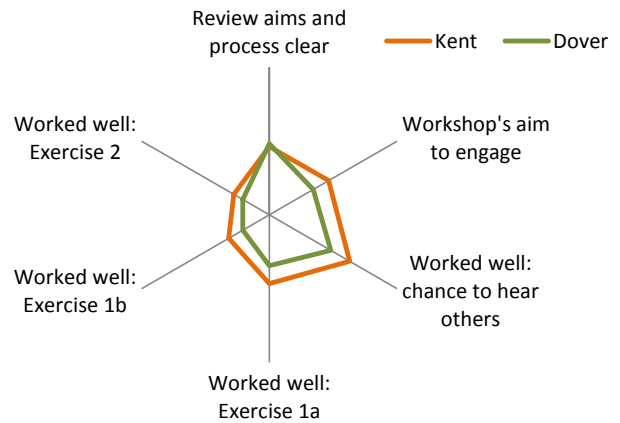
4. What worked particularly well in the workshop?



Opinions were divided in Dover in respect of the aims and process of the Review having been explained clearly, and with the workshop's aim to engage them in the Review process, with a significant number of participants expressing dissatisfaction. There is evidence to suggest that satisfaction with the exercises decreased slightly as the workshop went on, so that by Exercise 2 only 6 participants indicated that they were very satisfied, compared with 10 at Exercise 1a.

Satisfaction Levels ('Very Satisfied') - Comparison With County Average

The pattern of responses in Dover is not dissimilar to that for the County overall, with satisfaction levels with the exercises dropping as the workshop went on. There is some evidence to suggest that levels of participants feeling 'very satisfied' are generally slightly lower in Dover than for the County overall, with the exception of satisfaction that the aims and process of the Review having been explained clearly.



Summary

In terms of levels of agreement, the following garnered the support of more than 80% of participants at the Dover workshop:

- In general, work with partners to develop richer, wider and better coordinated services for families
- Develop stronger working partnerships with health visitors
- Develop greater coordination with Social Care, with a named Social Worker for each centre/area
- Explore the contribution children's centres could make to the Troubled Families programme

The Daisy Children's Centre (Dover)

Appendix F – District Workshop (4th Feb 2013) Independent Report

CHILDREN'S CENTRES FUTURE SERVICE OPTIONS REVIEW WORKSHOP: DOVER

The Dover workshop was one of a series of workshops held in every Kent District, engaging children's centre leaders, partners and other stakeholders, in a Future Service Options Review of the children's centres programme in Kent. The Review aims to explore:

- **What** services were delivered, in particular looking at the effectiveness of partnerships and the targeting of resources to those who could benefit most;
- **Where** the services are delivered from, and the scope for changes to delivery and access points could improve access and cost effectiveness;
- **How** the services are structured, and whether changes could deliver more consistency where appropriate, better targeting of expenditure, and cost savings;

A summary of contributions is given below, and detailed records of all the written contributions follow.

Aims of the Future Service Options Review

In individual feedback forms, there was consensus that "what, where and how" were the right areas for the review. Individual comments suggested building on the current methods of service delivery and to undertake further analysis of community needs. Participants have indicated a range of options about children's centre models and catchments areas, all of which require further assessment. The focus is on supporting the specific needs of the migrant community whilst also considering services available in rural areas.

Icebreaker

The ice breaker established the qualities of Dover's children's centres and their staff, and their place in the lives of families and communities. They are valued because of their welcoming environment and professional staff. They are recognised as being an important community resource and a place to deliver both universal and targeted services.

"No Wrong Door" – improving partnership effectiveness

In general, there is recognition that closer partnership working with education, health and social care colleagues is essential to achieving a successful early intervention service. Employability services offered by JCP, Adult Education and others could be further developed, new methods of supporting the employability agenda have been identified via Gateway Taktix, G4S and Avanta. To develop the role of parents in the delivery of services to enable professional staff to focus more on those most in need by expanding the current volunteering and buddying schemes.

The voluntary sector have much to offer – local knowledge and experience, and a number of existing groups where further links can be developed to support families in need.

The Daisy Children's Centre (Dover)

The partnership with health is dependent on developing links and commissioning arrangements with health visitors (0-4 years), school nurses (school age), midwifery clinics, CAMHS and SALT. It was suggested that there is increased potential for children's centres to support the delivery of the Child Health Programme via health professionals being based in children's centres, receiving new birth data, joint records, shared data bases, links with school nurses, the delivery of drop in clinics and joint groups. District level planning would continue to help drive this agenda forward.

The links between Dover's schools and children's centres varied enormously. There are a number of references to the challenges that arise when engaging with academies and primary schools which are not co-located with children's centres.

Dover's children's centres already receive referrals from primary schools, recognise the sibling agenda and are keen to continue to develop partnership working which includes a seamless transition. Support for the 0-11 agenda to be achieved by a multi-agency joined up approach with shared outcomes and targets. A shared approach to family support might better co-ordinate the support to identified families, and make better use of the overall resources.

Though current arrangement between Dover's children's centres and social care worked well for some families, it was suggested confidence building, early help and identification would improve partnership working. More children's centre engagement and sharing of knowledge re clients with social care will lead to greater consistency, and better co-ordinated service to families in high levels of need. The District highlighted issues about the role of CAF/ pre CAF processes, joint data bases and to share information to support the needs of targeted families.

Participants were keen to involve children's centres and their partners in the Troubled Families Initiative; this programme is at an early stage with information on the families and lead professionals to be clarified.

In individual feedback forms, the "no wrong door" principle was overwhelmingly supported.

District Level Planning

Participants supported district level resourcing (which is currently in place), and saw opportunities there to plan and deliver more responsive services by building on the existing model (working well), unrestricted by outdated catchment areas, and potentially pool or share resources with other partners and generate income. Staffing structures need to recognise the value of experienced staff and role of outreach workers, more peripatetic staff and admin functions could be centralised.

Participants listed a range of buildings and catchment areas that could be reviewed based on further analysis these included; - bring Snowdrop into a district offer (services), North Deal could be 'reduced', consider one centre in Dover, North and South divide is a potential for two areas and relocate to larger centres in town at a central location for ease of access and rural hubs with local satellites.

New methods of service delivery were suggested these included ; - 'One front desk' creating a single standard for Kent residents by whichever way families choose to contact Kent,

The Daisy Children's Centre (Dover)

partnerships with other community delivery agents, building partnership working based on need and a centralised reception 'Hot Line'.

In individual feedback forms, more district level planning is supported as long as it planned sensitively in line with local knowledge and community need.

Service and Access Points

Key services point's opportunities to be investigated in Dover include the Gateways, the Discovery Centre, health/NHS premises and co-location of services and the hiring and cost of community facilities. The children's centre buildings could be used by other organisations.

In individual feedback forms, the majority of participants supported the principle of a premises review. Comments stressed the emphasis in Dover District has always been on service delivery not buildings.

Bob Allen & David Wallis

Appendix 2 - The Buttercup consultation analysis

<p>Conclusions from consultation evidence by protected characteristic</p>	<p>General: The vast majority of those electing to respond to the consultation disagree to some extent with reducing the number of Children’s Centres (87%, 5,098 individuals/professionals.). Of these 5,098 individuals/professionals, 183 indicated that their objection related to the proposed closure of The Buttercup (with 152 of these 183 objecting to the proposed closures of other named Centres <u>as well as</u> The Buttercup).</p> <p>84% of the users of The Buttercup responding to the consultation disagree with reducing the number of children’s centres and 12% agree. This compares with 89% and 5% respectively of all responses to the consultation countywide from users of Children’s Centres, and so represents a <u>higher</u> level of agreement with the proposal.</p> <p>Amongst those members of the public who objected to the closure of The Buttercup, 13% (22 individuals) indicate that they will not use Children’s Centres at all as a result (which is a <u>much lower</u> proportion than the 26% of all members of the public objecting to the proposed closures countywide).</p>
	<p>Age:</p> <p><u>Parents 0-4</u> 80% of those objecting to the proposed closure of The Buttercup are parents of 0-4s, which is <u>lower</u> than the 85% of all those members of the public objecting to the proposed closures countywide.</p> <p><u>Parents aged 25 or under</u> 18% of those objecting to the proposed closure of The Buttercup are parents of 0-4s aged 25 or under, which is <u>higher</u> than the 13% of all those members of the public objecting to the proposed closures countywide.</p> <p><u>Teenage mothers</u> 2% of those objecting to the proposed closure of The Buttercup are teenage mothers (with 0-4s), which is the same as the 2% of all those members of the public objecting to the proposed closures countywide.</p> <p><u>Pregnant teenagers</u> Less than 0.5% of those objecting to the proposed closure of The Buttercup are pregnant teenagers, which is the same as the proportion observed across all those members of the public objecting to the proposed closures countywide.</p>
	<p>Disability:</p> <p><u>Disabled parents</u> 3% of those objecting to the proposed closure of The Buttercup are disabled parents of 0-4s, which is similar to the 2% of all those members of the public objecting to the proposed closures countywide.</p>

	<p>Gender: 85% of those objecting to the proposed closure of The Buttercup are female, which is similar to the 88% of all those members of the public objecting to the proposed closures countywide.</p> <p><u>Mothers</u> 67% of those objecting to the proposed closure of The Buttercup are mothers of 0-4's, which is <u>lower</u> than the 76% of all those members of the public objecting to the proposed closures countywide.</p> <p><u>Fathers</u>⁷ 9% of those objecting to the proposed closure of The Buttercup are fathers of 0-4's, which is similar to the 7% of all those members of the public objecting to the proposed closures countywide.</p> <hr/> <p>Gender identity: None of those objecting to the proposed closure of The Buttercup identified themselves as being parents of 0-4's having a gender different to that of their birth, which is which is in line with the <0.5% of all members of the public objecting to the proposed closures countywide.</p> <hr/> <p>Race: <u>Parents from minority ethnic groups</u> 5% of those objecting to the proposed closure of The Buttercup are parents of 0-4s from ethnic minority groups, which is similar to the 9% of all those members of the public objecting to the proposed closures countywide.</p> <p><u>Gypsy, Roma and traveller parents</u> 1% of those objecting to the proposed closure of The Buttercup are Gypsy/Roma and traveller parents of 0-4's, which is in line with the <0.5% of all members of the public objecting to the proposed closures countywide.</p> <p><u>Parents with English as an additional language</u> 2% of those objecting to the proposed closure of The Buttercup are parents of 0-4s with English as an additional language, which is similar to the 5% of all those members of the public objecting to the proposed closures countywide.</p> <hr/> <p>Religion or belief <u>Christian parents</u> 36% of those objecting to the proposed closure of The Buttercup are Christian parents of 0-4's, which is similar to the 39% of all</p>
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⁷ Fathers: For the purposes of the consultation "fathers" always refers to men with children aged 0-4 years old

	<p>those members of the public objecting to the proposed closures countywide.</p> <p><u>Buddist parents</u> None of those objecting to the proposed closure of The Buttercup are Buddhist parents of 0-4's, which is in line with the <0.5% of all those members of the public objecting to the proposed closures countywide.</p> <p><u>Hindu parents</u> None of those objecting to the proposed closure of The Buttercup are Hindu parents of 0-4's, which is in line with the <0.5% of all those members of the public objecting to the proposed closures countywide.</p> <p><u>Jewish parents</u> None of those objecting to the proposed closure of The Buttercup are Jewish parents of 0-4's, which is in line with the <0.5% of all those members of the public objecting to the proposed closures countywide.</p> <p><u>Muslim parents</u> 1% of those objecting to the proposed closure of The Buttercup are Muslim parents of 0-4's, which is the same as the 1% of all those members of the public objecting to the proposed closures countywide.</p> <p><u>Sikh parents</u> None of those objecting to the proposed closure of The Buttercup are Sikh parents of 0-4's, which is in line with the <0.5% of all those members of the public objecting to the proposed closures countywide.</p> <p><u>Parents of any other religion</u> 2% of those objecting to the proposed closure of The Buttercup are parents of 0-4's with an 'other' religion, which is the same as the 2% of all those members of the public objecting to the proposed closures countywide.</p> <p><u>Parents of no stated religion</u> 31% of those objecting to the proposed closure of The Buttercup are parents of 0-4's indicated that they have no religion, which is similar to the 35% of all those members of the public objecting to the proposed closures countywide.</p>
	<p>Sexual orientation:</p> <p><u>Lesbian, Gay and transgender parents</u> None of those objecting to the proposed closure of The Buttercup are Lesbian, Gay or transgender parents of 0-4's, which is in line with the <0.5% of all those members of the public objecting to the proposed closures countywide.</p>
	<p>Pregnancy and maternity:</p> <p><u>Will be a parent soon</u> 4% of those objecting to the proposed closure of The Buttercup indicated that they would be a 'parent/carer soon', which is the same as the 4% of all those members of the public objecting to the proposed closures countywide.</p>

	<p>Marriage and Civil Partnerships:</p> <p><u>Lone parents</u> 20% of those objecting to the proposed closure of The Buttercup are lone parents of 0-4's, which is <i>higher</i> than the 13% of all those members of the public objecting to the proposed closures countywide.</p> <p><u>Parents in a civil partnership</u> None of those objecting to the proposed closure of The Buttercup are parents of 0-4's in a civil partnership, which is in line with the <0.5% of all those members of the public objecting to the proposed closures countywide.</p>
	<p>Carers responsibilities: Carer data was not gathered as part of the consultation activity</p>

<p>Conclusions from consultation evidence by protected characteristic</p>	<p>General: The vast majority of those electing to respond to the consultation disagree to some extent with reducing the number of Children’s Centres (87%, 5,098 individuals/professionals.). Of these 5,098 individuals/professionals, 172 indicated that their objection related to the proposed closure of The Daisy (with 144 of these 172 objecting to the proposed closures of other named Centres <u>as well as</u> The Daisy).</p> <p>79% of the users of The Daisy responding to the consultation disagree with reducing the number of children’s centres and 7% agree. This compares with 89% and 5% respectively of all responses to the consultation countywide from users of Children’s Centres, and so represents a <u>lower</u> level of disagreement with the proposal.</p> <p>Amongst those members of the public who objected to the closure of The Daisy, 13% (21 individuals) indicate that they will not use Children’s Centres at all as a result (which is a <u>much lower</u> proportion than the 26% of all members of the public objecting to the proposed closures countywide).</p>
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The Daisy Consultation analysis

	<p>Age: <u>Parents 0-4</u> 81% of those objecting to the proposed closure of The Daisy are parents of 0-4s, which is similar to the 85% of all those members of the public objecting to the proposed closures countywide. <u>Parents aged 25 or under</u> 22% of those objecting to the proposed closure of The Daisy are parents of 0-4s aged 25 or under, which is <i>higher</i> than the 13% of all those members of the public objecting to the proposed closures countywide. <u>Teenage mothers</u> 2% of those objecting to the proposed closure of The Daisy are teenage mothers (with 0-4s), which is the same as the 2% of all those members of the public objecting to the proposed closures countywide. <u>Pregnant teenagers</u> Less than 0.5% of those objecting to the proposed closure of The Daisy are pregnant teenagers, which is the same as the proportion observed across all those members of the public objecting to the proposed closures countywide.</p>
	<p>Disability: <u>Disabled parents</u> 4% of those objecting to the proposed closure of The Daisy are disabled parents of 0-4s, which is similar to the 2% of all those members of the public objecting to the proposed closures countywide.</p>
	<p>Gender: 86% of those objecting to the proposed closure of The Daisy are female, which is similar to the 88% of all those members of the public objecting to the proposed closures countywide. <u>Mothers</u> 69% of those objecting to the proposed closure of The Daisy are mothers of 0-4's, which is <i>lower</i> than the 76% of all those members of the public objecting to the proposed closures countywide. <u>Fathers</u> 9% of those objecting to the proposed closure of The Daisy are fathers of 0-4's, which is similar to the 7% of all those members of the public objecting to the proposed closures countywide.</p>
	<p>Gender identity: None of those objecting to the proposed closure of The Daisy identified themselves as being parents of 0-4's having a gender different to that of their birth, which is which is in line with the <0.5% of all members of the public objecting to the proposed</p>

	<p>closures countywide.</p> <p>Race: <u>Parents from minority ethnic groups</u> 6% of those objecting to the proposed closure of The Daisy are parents of 0-4s from ethnic minority groups, which is similar to the 9% of all those members of the public objecting to the proposed closures countywide.</p> <p><u>Gypsy, Roma and traveller parents</u> 3% of those objecting to the proposed closure of The Daisy are Gypsy/Roma and traveller parents of 0-4's, which appears to be <i>slightly higher</i> than the <0.5% of all members of the public objecting to the proposed closures countywide.</p> <p><u>Parents with English as an additional language</u> 5% of those objecting to the proposed closure of The Daisy are parents of 0-4s with English as an additional language, which is the same as the 5% of all those members of the public objecting to the proposed closures countywide.</p> <p>Religion or belief <u>Christian parents</u> 32% of those objecting to the proposed closure of The Daisy are Christian parents of 0-4's, which is <i>lower</i> than the 39% of all those members of the public objecting to the proposed closures countywide.</p> <p><u>Buddist parents</u> None of those objecting to the proposed closure of The Daisy are Buddhist parents of 0-4's, which is in line with the <0.5% of all those members of the public objecting to the proposed closures countywide.</p> <p><u>Hindu parents</u> None of those objecting to the proposed closure of The Daisy are Hindu parents of 0-4's, which is in line with the <0.5% of all those members of the public objecting to the proposed closures countywide.</p> <p><u>Jewish parents</u> None of those objecting to the proposed closure of The Daisy are Jewish parents of 0-4's, which is in line with the <0.5% of all those members of the public objecting to the proposed closures countywide.</p> <p><u>Muslim parents</u> 1% of those objecting to the proposed closure of The Daisy are Muslim parents of 0-4's, which is the same as the 1% of all those members of the public objecting to the proposed closures countywide.</p> <p><u>Sikh parents</u> None of those objecting to the proposed closure of The Daisy are Sikh parents of 0-4's, which is in line with the <0.5% of all those members of the public objecting to the proposed closures countywide.</p>
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	<p><u>Parents of any other religion</u> 3% of those objecting to the proposed closure of The Daisy are parents of 0-4's with an 'other' religion, which is similar to the 2% of all those members of the public objecting to the proposed closures countywide.</p> <p><u>Parents of no stated religion</u> 34% of those objecting to the proposed closure of The Daisy are parents of 0-4's indicated that they have no religion, which is similar to the 35% of all those members of the public objecting to the proposed closures countywide.</p>
	<p>Sexual orientation: <u>Lesbian, Gay and transgender parents</u> None of those objecting to the proposed closure of The Daisy are Lesbian, Gay or transgender parents of 0-4's, which is in line with the <0.5% of all those members of the public objecting to the proposed closures countywide.</p>
	<p>Pregnancy and maternity: <u>Will be a parent soon</u> 5% of those objecting to the proposed closure of The Daisy indicated that they would be a 'parent/carer soon', which is similar to the 4% of all those members of the public objecting to the proposed closures countywide.</p>
	<p>Marriage and Civil Partnerships: <u>Lone parents</u> 22% of those objecting to the proposed closure of The Daisy are lone parents of 0-4's, which is <i>higher</i> than the 13% of all those members of the public objecting to the proposed closures countywide.</p> <p><u>Parents in a civil partnership</u> None of those objecting to the proposed closure of The Daisy are parents of 0-4's in a civil partnership, which is in line with the <0.5% of all those members of the public objecting to the proposed closures countywide.</p>
	<p>Carers responsibilities: Carer data was not gathered as part of the consultation activity</p>

Appendix 3

Table 1 General profile of public objectors to the closure of The Buttercup

Protected characteristic	Objectors to the closure of The Buttercup (percentages relate to all objectors)
Age	Over half (52%) of objectors were aged between 26 and 35. A further 17% were aged 20-25 and 11% were aged 36-40. Teenage mothers comprised 2% of objectors.
Disability	The majority (80%) of objectors did not consider themselves to have a disability; just 4% considered that their day-to-day activities were 'limited a lot' because of a health problem or disability. Parents with a disability made up 3% of objectors.
Gender	The majority (85%) of objectors were female with around two-thirds of the objections from mothers of children under 5 years. Fathers of children aged 5 or under made up 9% of objectors.
Gender identity	No objector's gender identity was different to that at birth.
Marriage and civil partnerships	Over two-thirds (70%) of objectors were either married, in a civil partnership or cohabiting and 20% of objections were from lone parents (of children aged under 5).
Pregnancy and maternity	Those who would be a parent soon made up 4% of objectors. Most (80%) objectors were parents / carers of children under age 5; around one-third were parents / carers of children aged 5-11; and 11% were parents / carers of children aged 12-18.
Race	Most objectors (86%) were White British, 7% were from minority ethnic groups and 4% had English as an additional language.
Religion or belief	Objectors who were Christian comprised 49% of objectors and those who had no religion 34%. Muslims made up 2% of objectors and those of other religions made up a further 3%. The remainder of objectors did not respond to the question.
Sexual orientation	Most objectors (86%) were heterosexual (with 13% not responding to the question).
Carer's responsibilities	Covered by other parent categories.

Table 2 Responses to the consultation relating to The Buttercup

General responses of objectors	
Data on objectors	
<ul style="list-style-type: none"> • There were 183 objections to the closure of Buttercup which represented approximately 4% of all objections (including objections from professionals) • Of the 183 that objected to the changes with respect to Buttercup CC, 83% strongly disagreed and 17% disagreed • Of the 183 objections to closure of centres including Buttercup, 31 only objected to changes to Buttercup • Of the 183 objections, 169 were from the public and 14 were from professionals • Of the 169 objections to closure of centres including Buttercup from the public, 30 only objected to the changes with respect to Buttercup • There were 79 users of Buttercup that responded to the consultation and of these 84% objected • There were 42 objections to the closure of The Buttercup specifically from all users of Buttercup and of these 19 were from users who only accessed Buttercup 	

<ul style="list-style-type: none"> • Of the 14 objections to closure of centres including Buttercup from the professionals, 1 only objected to the changes with respect to Buttercup • Just 1 of the 14 objections from professionals was from Children’s Centre staff
<p>Impact on the public</p> <ul style="list-style-type: none"> • A small number of respondents whose objection included changes to The Buttercup (12%), said that the proposals would have no impact; by implication there would be an impact on the majority of respondents • Just under half of objectors (45%) said that they would use children’s centres less often • 13% said they would not use a centre at all • 12% said they would attend a different children’s centre • The most popular reason given for using centres less often or not at all were because it would make travel to centres more difficult or alternative centres were too distant • 53% of all users and 9 of the 23 sole users of Buttercup Children’s Centre said that if the centre closed they would use a centre less often • 16% of all users and 4 of the 23 sole users said if the centre closed they would not use a centre at all • 16% of all users and 4 of the 23 sole users said that if the centre closed they would attend an alternative (non-children’s centre) facilities • 16% of all users and 3 of the 23 sole users of Buttercup Children’s Centre said that if the centre closed they would attend a different children’s centre
<p>Example verbatim comments from the public</p> <p><i>Need local ones. Don't drive</i></p>
<p>Professionals view of impacts</p> <p>Of the 12 professionals who responded with comments on their objections including to changes to Buttercup:</p> <ul style="list-style-type: none"> • Over half (7) considered that children and families will miss out • A third (4) felt that it would reduce access to children’s services
<p>Example verbatim comments from professionals</p> <p><i>Many families in deprived areas will not be able to access centres that are further away.</i></p> <p><i>Some of the most deprived and needy families will not travel out of their areas to attend groups and receive the support they need. Leaving them vulnerable.</i></p> <p><i>Having to use public transport is off putting to parents with more than one child and children in buggies or prams. The transport service is poor in many rural areas</i></p>

Table 3 General profile of public objectors to the closure of The Daisy

Protected characteristic	Objectors to the closure of Daisy (percentages relate to all objectors)
Age	Most (67%) of objectors were aged between 20 and 35. A further 10% were aged 36-40. Teenage mothers comprised 2% of objectors.
Disability	The majority (79%) of those objectors responding to the question did not consider themselves to have a disability. Parents with a disability made up 4% of objectors.
Gender	The majority (86%) of objectors were female with over two-thirds of the objections from mothers of children under 5 years. Fathers of children aged 5 or under made up 9% of objectors.
Gender identity	No objector's gender identity was different to that at birth.
Marriage and civil partnerships	Around two-thirds (66%) of objectors were either married, in a civil partnership or cohabiting and 22% of objections were from lone parents of under 5's.
Pregnancy and maternity	Those who would be a parent soon made up 5% of objectors. Most (81%) objectors were parents / carers of children under age 5; around one-third were parents / carers of children aged 5-11; and 11% were parents / carers of children aged 12-18.
Race	Most objectors (84%) were White British, 8% were from other ethnic groups (with 3% being White Gypsy/Roma) and 6% had English as an additional language.
Religion or belief	Objectors who were Christian comprised 43% of objectors and those who had no religion 38%. Muslim parents made up 2% of objectors and those of other religions made up a further 4%. The remainder of objectors did not respond to the question.
Sexual orientation	Most objectors (86%) were heterosexual (with 14% not responding to the question).
Carer's responsibilities	Covered by other parent categories.

Table 4 Responses to the consultation relating to The Daisy

General responses of objectors	
Data on objectors	<ul style="list-style-type: none"> • There were 172 objections to the closure of The Daisy which represented approximately 3% of all objections (including objections from professionals) • Of the 172 that objected to the changes with respect to Daisy CC, 80% strongly disagreed and 20% disagreed • Of the 172 objections to closure of centres including Daisy, 28 only objected to changes to Daisy • Of the 172 objections, 161 were from the public and 11 were from professionals • Of the 161 objections to closure of centres including Daisy from the public, 28 only objected to the changes with respect to Daisy • There were 63 users of Daisy that responded to the consultation and of these 79% objected • There were 40 objections to the closure of The Daisy specifically from all users of Daisy and of these 17 were from users who only accessed Daisy • Of the 11 objections to closure of centres including Daisy from the professionals, there were no objections that only related to Daisy • There were no objections from professionals from Children's Centre staff

Impact on the public
<ul style="list-style-type: none"> • A small number of respondents whose objection included changes to Daisy (13%), said that the proposals would have no impact; by implication there would be an impact on the majority of respondents • Just under half of objectors (45%) said that they would use children's centres less often • 13% said they would not use a centre at all • 16% said they would attend an alternative (non-children's centre) facility • 11% said they would attend a different children's centre • The most popular reason given for using centres less often or not at all were because it would make travel to centres more difficult or alternative centres were too distant • 48% of all users and 9 of the 20 sole users of Daisy Children's Centre said that if the centre closed they would use a centre less often • 17% of all users and 3 of the 20 sole users of Daisy Children's Centre said that if the centre closed they would no longer attend a Children's Centre • 15% of all users and 6 of the 20 sole users of Daisy Children's Centre said that if the centre closed they would attend an alternative (non-children's centre) facility • 8% of all users, but none of the sole users, said that they would attend a different children's centre
Example verbatim comments from the public
<p><i>I am looking to do some courses and it may affect if I can attend my local centre. The Ark (Daisy) is only a few minutes away from where I live and I don't drive. It's harder for me to get to town.</i></p> <p><i>Some parents can't get into town very easily and will feel more alone if their local centre closes.</i></p> <p><i>It's about ease of getting to and from the centres. Don't want to always use my car, I can walk to and from the Daisy Centre. It's good for me and my child.</i></p>
Professionals view of impacts
<p>Of the 10 professionals who responded with comments on their objections including to changes to Daisy:</p> <ul style="list-style-type: none"> • Over two thirds (7) considered that children and families will miss out • Four felt that it would reduce access to children's services
Example verbatim comments from professionals
<p><i>Currently Health Visiting and Midwifery services hold baby clinics and joint delivery of health promotion sessions with CC staff, the closure may mean loss of local availability for some families to be able to access these services.</i></p>

KENT COUNTY COUNCIL EQUALITY ANALYSIS / IMPACT ASSESSMENT (EqIA)

This document is available in other formats. Please contact cc.commissioning@kent.gov.uk or telephone on 01622 696678.

Directorate: Families and Social Care

Name of policy, procedure, project or service

Shepway District Children's Centres Future Service Options Programme – Consultation Proposal

What is being assessed?

Closure of the New Romney Children's Centre in Shepway.

The catchment area for the centre would merge with Lydd and Dymchurch Children's Centres. This will enable greater emphasis on services rather than buildings and enable outreach to be increased equitably.

Responsible Owner/ Senior Officer

Mairead MacNeil / Karen Mills

Date of Initial Screening

21st June, reviewed 2nd July 2013

Date of Full EqIA :

August 2013 – November 2013

Version	Author	Date	Comment
1.0	Chris Barker	21.06.13	Initial Draft
2.0	Equality and Diversity Team	01.07.13	Comments on version 1
3.0	Chris Barker	02.07.13	Updated to reflect Equality and Diversity comments
4.0	Chris Barker	14.08.13	Overall proportionality (pg 12) amended from medium to high potential impact. Also Pregnancy and maternity (pg 9) amended from medium to high for both positive & negative.
5.0	Amy Noake	21.11.2013	Full EqIA using consultation responses
6.0	Matthew Mallett/Alister McClure	27.11.2013	Revised Full EqIA incorporating Equality and Diversity Comments

Screening Grid

Characteristic	Could this policy, procedure, project or service affect this group less favourably than others in Kent? YES/NO If yes how?	Assessment of potential impact HIGH/MEDIUM LOW/NONE UNKNOWN		Provide details: a) Is internal action required? If yes what? b) Is further assessment required? If yes, why?	Could this policy, procedure, project or service promote equal opportunities for this group? YES/NO - Explain how good practice can promote equal opportunities
		Positive	Negative	Internal action must be included in Action Plan	If yes you must provide detail
Age	<p>Yes. Children's Centres core purpose is to improve outcomes for young children and their families through reducing inequalities. Young children are classified as pre-birth to age 5.</p> <p>In 2011 there were 108,200 residents in the Shepway district, of these 6,000 (5.5%) were 0 to 5 years old¹.</p> <p>In the Shepway district 2,987 children have been recorded as using a centre at least once between October 2011 and September 2012. This represents 49.8% of the 0-5 population. 19% were less than a year old, 25% were 1 years old, 20% were 2 years old, 16% were 3 years old, 14% were 4 years old and 6% were 5 years old.</p>	Medium	Medium	<p>a) Yes –sustain current outreach services and promote the hub and link model. Better link children's centre services provided. Maximise the use of resources including staffing to continue to improve outcomes for children and their families.</p> <p>Ensure measures are in place to enable vulnerable families (identified via CAF) to access current services.</p> <p>Provide information to current children's centre users to promote understanding of how the changes could affect them and how to identify any support available within the hub and link model. (All children 0-5 will remain entitled to access all Children's Centres in the County).</p> <p>Children's Centres will continue to signpost to age appropriate provision for children over 5.</p> <p>Close partnership working with the commissioned centre to ensure that</p>	<p>Using Folkestone as a Hub centre. This option could enable greater emphasis on services rather than buildings and enable outreach to be increased equitably. By working as a hub and link centre model (with one catchment area) centres may be able to increase the proportion of 0-5 registered at Children's Centres. This could support the identification of families' needs and enable services to be more targeted at 0-5 year olds who are most in need of intervention.</p> <p>Through operating a hub and link model all families should continue to be offered appropriate services. Services will address locally identified need.</p> <p>It is likely that there will be an increase in the numbers of children attending Lydd and Dymchurch Children's Centres, particularly in 1-5 age brackets. In order to prioritise early intervention and prevention</p>

¹ Mid year population estimates, KCC

	<p>Of the 2,987 Children using a centre in Shepway at least once between October 2011 and September 2012, 5.6% (167 children) attended New Romney Children's Centre. 13% were less than a year old, 25% were 1 year olds, 23% 2 years old, 18% were 3 years old, 14% were 4 years old and 7% were 5 years old. These figures are broadly comparable to the Kent average (Kent Children's Centre average) for 1, 2, 3, 4 and 5 year olds. The proportion of under 1 year olds accessing services is significantly less than the county average.</p> <p>Of these 167 children, 96 also attended another Children's Centre in Shepway and 96 only attended New Romney. Others centres accessed included Lydd and Dymchurch.</p> <p>Needs analysis (volume) for the New Romney Children's Centre identifies that the New Romney catchment has a lower level of need</p>			<p>services are planned appropriately across the district.</p> <p>b) Yes - Full Public Consultation to be held.</p> <p>Identify any mitigating actions that can be put in place to ensure numbers 1-5 year old users does not decrease, and actions to attempt to address the lower levels of under 1 year olds attending centres in the locality.</p> <p>Ensure that any moves to CCG operating models do not disadvantage the South Kent Coastal CCG area. Teenage Parent Services which are currently delivered across the locality must continue to be promoted and signposted across CCG boundaries.</p>	<p>especially as many 3 and 4 year olds access early Years settings than 1 and two year olds. Even with the increase in 2 year old funding through free for two to almost 50% this is still far greater than the approximate 94% of children aged 3 and 4 years in funded places.</p> <p>Local solutions also identified that a greater emphasis on services rather than buildings should support an increase in Teenage Parent registrations at Children's Centres in Shepway.</p>
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	than the Kent average in terms of teenage pregnancy.				
Disability	<p>9.9% of the population in the Shepway district are claiming a disability benefit.²</p> <p>Between October 2011 and September 2012 no users at New Romney were recorded as having a disability.</p> <p>Needs analysis for the New Romney Children’s Centre identifies that the New Romney catchment has a lower level of need than the Kent average in terms of working aged permanently sick/ disabled (volume).</p>	Low	Low	<p>a) Yes - Ensure that disabled children and carers are offered the opportunity to access services.</p> <p>Ensure that parents and carers are asked about disabilities at registration. Work closely with HVs and Early Years settings to share information gained from developmental assessments.</p> <p>Offer parents the opportunity to amend database to include a ‘do not wish to answer’ category and a ‘no’ category for disability</p> <p>Ensure that parents and carers can access required information if they have print impairments, learning disabilities, are Deaf or hard-of-hearing, or would struggle to access standard print/ standard English information in any other way because of their protected characteristics.</p> <p>b) Yes - Targeted consultation - A large number of disability records have either not been completed or users have not wished to disclose</p>	<p>Yes – Services will continue to address identified needs on an individual basis. Through a hub and link model centres will continue be able to share resources including best practice and specialist knowledge.</p> <p>Through the hub and link centre model (management) signposting to specialist services may increase.</p> <p>A greater emphasis on local services rather than buildings will enable outreach to be increased appropriately and equitably and therefore disabled children’s registrations should increase. Through increased targeted work obtained through better data collection, services could be more targeted. Sharing information may lead to speedier intervention by specialist services.</p> <p>Children’s Centres will not discriminate directly or indirectly against any person because of their disability. We will ensure that front-line staff are diversity aware.</p>

² Kent Business Intelligence Statistics

				<p>information and therefore it is difficult to measure impact. However a child's disability may not be apparent at registration so work closely with HVs and Early Years settings to share information gained from developmental assessments. Offer parents the opportunity to amend database to include a 'do not wish to answer' category and a 'no' category for disability.</p> <p>Consider an annual re-registration system across the County.</p> <p>Close partnership working with the commissioned centre to ensure that services are planned appropriately across the district.</p> <p>Ensure that alterations in district boundaries do not directly impact on the services disabled families and children are able to access.</p>	
Gender	<p>Yes – In the Shepway district 49.2% of the population are male and 50.8% are female. In 2012 94% of attendances at Shepway Children's Centres were made by a female parent or carer. 6% were made by a male parent or carer. Therefore this will impact less favourably on females.</p>	Low	Low	<p>a) Yes – services will continue to address need identified regardless of gender. Continue to deliver 'dad's groups' and interventions targeted at male carers to increase engagement.</p> <p>b) No</p>	<p>No - It is likely that Children's Centres will continue to support slightly more male 0-5 year olds. It is also likely that Children's Centres will continue to support more female carers than males.</p> <p>Yes - Currently some centres run targeted interventions for male carers on behalf of the centres in their area. Through the hub and link centre model (management) signposting to these</p>

	54% of children who used New Romney between October 2011 and September 2012 were male and 46% were female. This is broadly consistent with the County population for this age group, and in line with the district demographic.				<p>services would continue.</p> <p>Children's Centres will not discriminate directly or indirectly against any person because of their gender. We will ensure that front-line staff are diversity aware.</p>
Gender identity	Unknown - No impact has been identified at this stage due to a lack of information.	Unknown	Unknown	<p>a) Yes – In line with KCC's Equality Strategy, KCC will seek to identify gender identity of Kent's residents.</p> <p>b) This impact assessment will be updated when such information is available.</p>	<p>Yes - There may be an opportunity to promote and provide more diverse services using a hub and link centre model.</p> <p>The hub and link centres could provide increased opportunity for specific services if needed.</p> <p>Children's Centres will not discriminate directly or indirectly against any person because of their gender identity. We will ensure that front-line staff are diversity aware.</p>
Race	<p>This could impact Black or Minority Ethnic (BME) less favourably as a larger proportion of registered Children's Centres users are BME compared to County populations.</p> <p>In the Shepway district 94.7% of the population are White</p>	Low	Medium	<p>a) Yes –Encourage disclosure of language and ethnicity information for all families at registration. Provide information on the benefits of disclosing this information.</p> <p>Ensure that parents and carers can access required information if English is a second language, or they would struggle to access standard print/ standard English information in any other way because of</p>	<p>Yes – Services will continue to address identified needs on an individual basis. Through a hub and link model centres will be able to share resources including best practice and specialist knowledge e.g. opportunity to access courses such as English as an additional language.</p> <p>Given the minimal numbers registered, a hub and link model may also</p>

	<p>British, 5.3% are BME.</p> <p>Of the children who attended a Shepway Children’s Centre between October 2011 and September 2012, 58% were White British, 3% were Asian or Asian British- Any Other Asian, 1% were Mixed/Dual- White and Asian, 1% were Mixed/Dual- White and Black Caribbean, 1% were Mixed/Dual- Any Other Mixed, 1% were Any other ethnic group, and 33% choose not to record their ethnicity.</p> <p>57% of users at New Romney and 35% choose not to record their ethnicity. There were less than 5 responses in a number of other categories.</p> <p>Language information has not been obtained for 81% of families using Children’s Centres in Kent.³ Where information is available, English has been recorded as the first language for 18% of users. Polish has been recorded as the second largest proportion with less</p>			<p>their protected characteristics.</p> <p>b) Yes - Targeted consultation - A large number of language records have either not been completed or users have not wished to disclose information and therefore it is difficult to measure impact.</p> <p>Promote greater awareness and understanding of diversity within the communities.</p> <p>Ensure that all racial groups within the community are encouraged to partake in the targeted consultation process. This is especially relevant for White British as it is the biggest grouping.</p> <p>Consultation responses from BME groups and white groups needs to be monitored to ensure targeting of services is right in the future.</p>	<p>increase the likelihood of families with English as an additional language meeting and building peer support networks.</p> <p>Through the hub and link centre model (management) signposting to specialist services should increase.</p> <p>A greater emphasis on services rather than buildings will enable outreach to be increased equitably including to Gypsy/ Roma communities, families with English as an additional language and White British to reflect local populations.</p> <p>Children’s Centres will not discriminate directly or indirectly against any person because of their race. We will ensure that front-line staff are diversity aware.</p> <p>Hub and linked centres can work together to further develop opportunities for social cohesion, understanding and tolerance of difference.</p> <p>The hub and link centres could provide increased opportunity for specific services if needed.</p> <p>Ensure that Shepway Children’s Centres continue to work with young parents in ethnically diverse</p>
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³ As at 1st October 2012

	<p>than 1%.</p> <p>Language information is not recorded for 73% of users at the New Romney Children’s Centre. 27% record English as their first language, with no other specific languages identified.</p> <p>MOSAIC classifications of families attending New Romney between June 2011 and June 2012 DOES NOT identify an overrepresentation amongst young professionals with children, many living in ethnically diverse neighbourhoods.</p>				neighbourhoods.
Religion or belief	<p>In the Shepway 2011 census 62.3% of the population have recorded their religion as Christian, 0.9% as Buddhist, 1.4% as Hindu, 0.1% as Jewish, 0.7% as Muslim, 0.5% as Sikh and 0.5% as other religion. 26.5% have stated no religion and 7.6% have not stated if a religion or not.</p> <p>Religion of Children’s Centre users is unknown.</p>	Unknown	Unknown	<p>a) Yes –Encourage religion or belief information is obtained for all families at registration. Provide information on the benefits of disclosing this information</p> <p>b) This impact assessment will be updated when such information is available.</p>	<p>Children’s Centres will not discriminate directly or indirectly against any person because of their religion or belief. We will ensure that front-line staff are diversity aware.</p> <p>Targeted services have previously been run in some communities to increase knowledge of all religions. This work will continue.</p> <p>The hub and link centres could provide increased opportunity for specific services if needed.</p>
	Sexual Orientation data is	Unknown	Unknown	a) Yes – Continue to encourage parents to	Children’s Centres will not discriminate

<p>Sexual orientation</p>	<p>collected for parents and carers.</p> <p>Sexual orientation is deemed not applicable for under 5 age group.</p>			<p>provide information on sexual orientation and discuss individual needs. Provide information on the benefits of disclosing this information</p> <p>b) This impact assessment will be updated when sexual orientation information is available.</p>	<p>directly or indirectly against any person because of their sexual orientation. We will ensure that front-line staff are diversity aware.</p> <p>The hub and link centres could provide increased opportunity for specific services if needed.</p>
<p>Pregnancy and maternity</p>	<p>Children’s Centres core purpose is to improve outcomes for young children and their families through reducing inequalities. Children’s Centres offer a range of pre-birth and maternity services.</p> <p>New Romney Children’s Centre currently provides a number of services to those associated with this protected characteristic. Weekly antenatal services are delivered at the centre. There are also other programmes run by external providers at the centre, focussing on breastfeeding, midwifery services and other targeted health services.</p> <p>This proposal does not plan to stop these services, but would alter the delivery</p>	<p>High</p>	<p>High</p>	<p>a) Review current services to ensure they are in the right location. Work with Health partners to ensure provision continues at proposed part time link centres, link centres and Hubs.</p> <p>b) Yes – Further engagement with Health colleagues required to identify changes to services and associated impact. EqIA to be updated accordingly.</p> <p>Yes- Ensure that health services provided remain at appropriate and convenient locations for service users.</p>	<p>Level of provision will not be affected and provision will be increased accordingly at hub and link centres. This will not affect universal access to Health services or Health Visitor home visits. Moving to a hub and link model will also promote health services across a joined up catchment area.</p> <p>The changes in the catchment area may better suit health teams in the Shepway District.</p>

	<p>location and potentially times of delivery. There may be an impact in terms of service users currently accessing these services at this centre.</p>				
<p>Marriage and Civil Partnerships</p>	<p>This is not applicable for under 5 age group.</p> <p>In the Shepway area 46.9% of the population 16 years and over are married, 0.3% are in same sex civil partnerships, 30.8% are single, 3.1% are separated, 10.9% are divorced, 8.2% are widowed.</p> <p>This information is not available for Children's Centre users but MOSAIC classifications of families attending New Romney Children's Centre between June 2011 and June 2012 identified an underrepresentation amongst users for the following group;</p> <ul style="list-style-type: none"> • Lone parents with young children, living in high crime areas on large social housing estates • Singles and lone parents on low 	<p>Medium</p>	<p>Medium</p>	<p>a) Yes – Investigate feasibility of collecting marriage and civil partnership information at registration.</p> <p>b) This impact assessment will be updated when marriage and civil partnership information is available.</p>	<p>Yes – Services will continue to address identified needs on an individual basis. Lone Parent will remain a target group for Children's Centres in line with Ofsted requirements and will therefore seek to reduce inequalities in outcomes for lone parents and their children.</p> <p>Through the hub and link model we may be able to offer increased Adult Education and other education or training opportunities (due to increased participants)</p> <p>Through the hub and link we may be able to offer longer opportunities to access information on benefits, debt reduction and housing.</p> <p>Children's Centres in the Shepway area must continue to work with families who require help, and to assist in providing early intervention and preventative services, limiting the number of families requiring specialist services in the district and locality.</p>

	<p>incomes, renting terraces in town centres</p> <ul style="list-style-type: none"> • Young singles and couples in small privately rented flats and terraces on moderate incomes <p>Therefore there is the potential for there to be an adverse impact on married couples, especially as lone parents are a target group. However, this negative impact may be appropriate if based on need.</p>				
<p>Carer's responsibilities</p>	<p>89.5% of the population in Shepway district provide no unpaid care a week. 6.1% provide up to 19 hours, 1.4% provide between 20 and 49 hours, 3% provide over 50 hours. This is in line with the county average of 10.4%.</p> <p>2.8% of children aged under 18 provide unpaid care.</p>	<p>Unknown</p>	<p>Unknown</p>	<p>a) Yes - increased awareness of carers responsibilities and support for families most in need of intervention. b) No</p>	<p>Yes – increased awareness of carers responsibilities and support for families most in need of intervention.</p>

Proportionality - Based on the answers in the above screening grid what weighting would you ascribe to this function

Low	Medium	High
Low relevance or Insufficient information/evidence to make a judgement.	Medium relevance or Insufficient information/evidence to make a Judgement.	High relevance to equality, /likely to have adverse impact on protected groups

High - This proposal may have some minimal adverse impact on age, disability and gender. There is the potential for medium impact on race and marriage and civil partnerships. There is the potential for there to be a high impact on the pregnancy and maternity protected characteristic.

Context

Kent’s Children’s Centre programme has been rolled out across the county over the last seven years in three phases, each within tight timescales and different financial constraints. Kent currently has 97 Children’s Centres in operation. All centres are slightly different depending on local need, their level of funding and the range of services they provide.

New Romney is a Round 2 Centre that is a purpose built centre located within the New Romney area of Shepway. New Romney is currently managed alongside Lydd Children’s Centre. Users currently accessing New Romney also access Lydd and Dymchurch Children’s Centres.

Parents play a key role in influencing services that are provided.

Children’s Centres are places where all children under five years old and their families can receive services and information. These services vary according to centre but may include:

- Integrated early education and childcare
- Support for families – including advice on parenting, local childcare options and access to specialist services for families
- Child and family health services – including health screening, health promotion, health visitor and midwifery services, and the healthy child programme.
- Helping parents into work – with links to Jobcentre Plus and training.

There have been recent reductions in government funding for children’s centres as well as changes to government policies about how Children’s Centres should work. This proposal seeks to align with;

- A revised core offer for Children’s centre
- Revised Children’s Centre Statutory Guidance
- Revised Ofsted Inspection Framework (April 2013)
- Reductions in Early Intervention Grant Funding
- Health Visitor Implementation Plan

Aims and Objectives

In line with KCC's medium-term plan, Bold Steps for Kent, we need to change the way we work so we can continue to meet the needs of our children and their families with reduced budgets. Kent aims to achieve this by;

- ensuring we deliver better, earlier support to those children and families who need it
- ensuring we continue to provide Children's Centre services to improve health, education and social care outcomes
- strengthening the working relationship between Children's Centres, early years settings, schools and health services

Beneficiaries

The community of Kent but in particular families with children between 0 – 5 years, including those families and young children who are the most vulnerable.

For example:

- Lone parents, young parents and pregnant teenagers and mothers with post-natal depression.
- Children in need or with a child protection plan
- Children of offenders and/or those in custody
- Fathers particularly those with any other identified need, for example teenage fathers and those in custody
- Those with protected characteristics as defined by the Equality Act 2010
- Looked after children
- Children who are being cared for by members of their extended family such as a grandparent, aunt or older sibling
- Families identified by the LA as 'troubled families' who have children under five; any other vulnerable groups identified as at risk of harm by other services
- Families who move in and out of the area relatively quickly (transient families), such as those seeking employment or seasonal work
- Parents with a learning difficulty or disability, or parents who have a child with a learning difficulty or disability
- Migrant families or families where English is an additional language
- Families with complex needs or where there is mental illness
- Families who suffer from domestic violence or where there is substance or alcohol abuse
- Families living in poverty and poor housing

The Local Authority (LA) will benefit. Schools, Health Services, childcare providers and voluntary sector providers could benefit.

ASSESSMENT

Involvement and Engagement

(Information and data relating to Pre-consultation activity can be found at Appendix 1.)

Consultation: Shaping the future of Children's Centres in Kent

The consultation "Shaping the future of Children's Centres in Kent" began on Thursday 4th July and ended on Friday 4th October. Information on the consultation was shared with County Councillors and notification of the consultation launch was sent to approximately 35,000 stakeholder email addresses (including Borough/District and Parish Councillors, service delivery partners and registered Children's Centre users. Articles were posted on Knet, Kent.gov.uk and in Kmail and a promotional tab advertising the consultation remained on the front page of Kent.gov.uk throughout the duration of the consultation. The KCC Twitter account was also used to publicise the consultation on 4th July. Leaflets and posters were produced and distributed to advertise and promote the consultation.

A paper version of the consultation document was produced outlining the proposal for Kent Children's Centres and providing information on the Children's Centres proposed for closure or reduced operating hours as well as proposed future operating arrangements. The document contained a hard copy response form to the consultation for those unable to access the internet and Children's Centre staff assisted vulnerable users in completing the questionnaire.

The consultation questionnaire was made available online along with other background information including the consultation document, frequently asked questions, legal requirements, equality impact assessments (screening documents) and maps. The web home page for the consultation was viewed 15,403 times by 12,605 individual computers during the period of the live consultation.

Translations of the consultation document were made available on request. The consultation document has been translated into Russian, Polish and Nepali.

Throughout the consultation District Children's Centre Managers promoted the consultation to service users and professionals. Community Engagement Officers raised awareness at the local level and engaged with specific target groups and stakeholders to participate in the consultation. Focus groups were held with centres proposed for closure where the interim analysis of the consultation responses identified the need for further completion of questionnaires relating to those centres. In total, 1,032 events/activities were held across the county, highlighting the consultation to at least 26,034 attendees. Engagement activities included: Children's Centre drop-in events; Q&A sessions; facilitated discussions at existing groups; parental support to

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fill in consultation forms (online or hard copy) and attendance at community events to raise awareness⁴.

The authority was particularly interested to hear the views of people whom Children's Centre services are targeted at. This was to help identify the impact of our proposals. Target groups for the consultation included;

- Lone Parents
- Fathers⁵
- Teenage mothers⁶
- Teenage fathers
- Pregnant teenagers
- Parents aged 25 or under
- Parents aged over 35
- Parents of children from low income backgrounds
- Parents from minority ethnic groups
- White parents from low income backgrounds
- Gypsy, Roma and Traveller parents
- Parents with English as an additional language
- Lesbian, Gay and Transgender parents
- Disabled parents⁷

Information was also collected relating to; religion, sexual orientation, gender and marital status to support the identification of equality impacts.

Consultation findings

6,008 consultation questionnaires were completed across the County, 5,229 from members of the public and 779 from professionals (Four responses were received in Russian and these were translated.).

Appendix G of the Post Consultation report provides a detailed analysis of the consultation responses by proposal and affected Centre. Details regarding responses for New Romney are as follows:

⁴ Further details can be found in the Children's Centre Post-consultation report appendices at www.kent.gov.uk/childrenscentres

⁵ Fathers: For the purposes of the consultation "fathers" always refers to men with children aged 0-4 years old

⁶ Mothers: For the purposes of the consultation "mothers" always refers to women with children aged 0-4 years old

⁷ Disabled/disability: For the purposes of the consultation "disabled" or "disability" always refers to respondents who indicated that "their day-to-day activities are limited a lot because of a health problem or disability which has lasted, or is expected to last, at least 12 months

All Objecting to the Closure of New Romney Children's Centre:

A total of 408 members of the public and 54 professionals objected to the closure of New Romney Children's Centre. Of these 408 members of the public, 295 objected only to the closure of New Romney, with the proportion (at 72%) amongst the highest of all the proposed closures. The volume of objections to the closure of New Romney is high in the context of all of the proposed closures.

in comparison with all those objecting to Proposal 1, those objecting to the closure of New Romney are much less likely to be a parent/carer of children aged under 5 (67% vs 85% of all those objecting to Proposal 1).

Nearly two-fifths (38%) of the members of the public objecting to the proposed closure of New Romney indicate that they will not use Children's Centres at all as a result (which is far higher than the average across all objectors, of 26%). The most popular comments amongst those indicating that they 'will not use Children's Centres at all' as a result of the proposed closure of New Romney are:

- 'Will make travel to centres more difficult / alternative centres too distant' – 35%
- 'Children's centres form a local community hub / chance to meet people' – 20%
- 'Bad for people without cars / non-drivers' – 15%
- 'Will have a financial impact on me / make it too expensive - travel / parking' – 15%
- 'Adult education classes / courses / chance to gain new qualifications' – 15%

Professionals also raised concerns with respect to travelling, but the key concern amongst this group is children and families missing out.

A total of 263 users of New Romney Children's Centre (and 162 sole users) responded to the consultation, representing a very high proportion of all users of the Centre (72%). The overwhelming majority (98%) disagree to some extent with this proposal. As many as 59% of the sole users of New Romney objecting to the proposal indicated that they would no longer use Children's Centres as a result of the proposed closure. This equates to 92 individuals, which is one of the highest levels across the proposed closures.

Users of New Romney

A total of 263 users of New Romney Children's Centre (and 162 sole users) responded to the consultation, representing a very high proportion of all users of the Centre (72%)⁸. The chart below shows the extent to which these New Romney users agree or disagree with the proposal to reduce the number of Children's Centres in Kent.

⁸ Based on activity-based usage figures for the period October 2012 – September 2013.

The overwhelming majority (98%) disagree to some extent with this proposal, with 87% indicating that they strongly disagree.

Of the users disagreeing with the proposal:

- 95% objected to the closure of New Romney (96% of sole users)
- Just 4% indicated that their objection didn't relate to any particular Centre

Amongst those members of the public who objected to the closure of New Romney, 38% (157 individuals) indicate that they will not use Children's Centres at all as a result (which is a much higher proportion than the 26% of all members of the public objecting to the proposed closures countywide).

Of the sole users of New Romney responding to the consultation and objecting to the proposal, 59% indicated that they 'will not use Children's Centres at all' as a result of the proposed closure.

Consultation responses categorised by protected characteristic indicated that those under the Pregnancy and Maternity characteristic (respondents who will be a parent soon) were more likely to disagree with proposals to reduce the number of centres and reduce the opening hours at some centres than the county average responses.

Those under the Age (parents of 0-4's), Gender (Mothers), Race (Parents from minority ethnic groups, and Parents with English as an additional language), Religion or belief (Christian Parents, and Parents of no stated religion) were more likely to agree with proposals to reduce the number of centres and reduce the opening hours at some centres than the county average.

Responses from other protected characteristic groups, such as those with a Disability, Gender Identity, Sexual Orientation and Marriage and Civil Partnerships were broadly the same as the county average.

Information and data

See Appendices 2 and 3.

See post-consultation report.

Potential Impact

Adverse Impact:

The initial screening identified the potential for there to be some adverse impacts on the following groups;

- 0 – 5 year olds
- Teenage parents
- Lone parents
- Female parents/ carers
- White British and BME groups
- Pregnancy and Maternity
- Marriage and Civil Partnerships
- Impact is unknown for gender identity, carer's responsibilities religion or belief and sexual orientation
- Those with a recognised disability

Post-consultation

Please note 67% of those objecting to the proposed closure of New Romney are parents of 0-4s, which is *much lower* than the 85% of all those members of the public objecting to the proposed closures countywide.

The results of the consultation support the findings that the proposal in question has the potential to adversely impact:

- Pregnancy and Maternity (particularly expectant parents)
- Impact is unknown for carer's responsibilities

It did not identify an adverse impact on;

- Parents of 0- 4 year olds
- Teenage mothers and pregnant teens
- Lone parents
- Female parents/ carers
- White British and BME groups (parents)
- Marriage and Civil Partnerships (parents)
- Gender identity (parents)
- Religion or belief (parents)
- Sexual orientation (parents)
- Those with a recognised disability (disabled parents)

In addition consultation findings identified the potential for fathers/ males to be adversely impacted. 84% of consultation responses were females. In comparison the initial screening identified that 94% of attendances at Shepway Children's Centres were made by a female parent or carer.

Positive Impact:

The initial screening identified the potential for there to be a positive impact on some vulnerable groups using the centres, particularly 0-5 year olds, male parents/ carers, white British, disabled children, teenage parents and lone parents.

For example through:

- Hub centre be closer and more accessible to families,
- Increased targeting of provision to those most in need.
- Reinvesting resources from areas of less need to areas of high need
- Possible increase in outreach services and therefore in registrations and need assessments – identifying a families needs earlier.
- Building on strong local partnerships and integrated working approaches currently in place. Better information sharing.
- Improved signposting across hub and Link
- Continued shared knowledge, expertise and best practice across hub and link
- Improving access by under represented groups
- Improving data collection for categories of data related to gender identity, religion and sexual orientation. However this is not dependant on a model more on staffing model and training.
- Alignment with CCG areas to provide health services in a more coordinated way
- Extensive Pregnancy and Maternity services delivered in a more coordinated way through hub and link approach

Impact is unknown for gender identity, religion or belief and sexual orientation.

Post-consultation

The consultation did not identify that any protected characteristic grouping would be more positively impacted than another. The proportion of responses received agreeing with the consultation were from professionals from whom the highest group of responses agreeing with the proposals were received.

JUDGEMENT

Option 1 – Screening Sufficient No

Justification: Due to the high numbers of services currently provided at New Romney Children’s Centres to those in the pregnancy and maternity characteristic, further investigation of the impact is required.

Option 2 – Internal Action Required Yes

There is potential for adverse impact on particular groups and we have found scope to improve the proposal. Please see action plan.

Option 3 – Full Impact Assessment Yes

A full impact assessment to be conducted on the overall programme during and after consultation on individual proposals

Post-consultation

The results of the consultation find that the proposals in question have the potential to adversely impact:

- Pregnancy and Maternity (particularly expectant parents)
- Impact is unknown for carer's responsibilities

Across all characteristics there are concerns about continued accessibility of services, the costs and difficulties of travelling to alternative locations and the reduction in opening hours and possible unsuitable hours. The response from families on a low income (as classified by MOSAIC analysis) show a similar level of objection to county responses. However, in this group, those respondents stating that they will use Children's Centre less often or will no longer use a Children's Centre because of the proposals the most popular reasons cited were:

- Will make travel to centres more difficult / alternative centres too distant
- Children's centres form a local community hub / chance to meet people
- Very happy with my local centre / prefer it to others / we enjoy going there / only use this one
- Centre is close by / easily accessible

Low income in Kent is not restricted to one particular equality group. Similar reasons for no longer using centres are cited across characteristics with respondents stating they value universal services that are local and provide access to a range of services from different providers.

There are also 'known unknowns' that could impact either positively or negatively on different protected characteristic groups and the development of the hub and link model. These include:

- Budget allocations for 2014/2015.
- Service plans for 2014/2015
- Staffing levels
- Availability and costs of accessible venues to run services from.
- Impacts of proposed changes on partnership working
- Services to be commissioned

Generally, from the consultation there are clear messages about the value centre users place on centres in terms of the services provided and support received from core and other services. They are seen as community hubs, serving a wide range of parent/carer and children's needs. Centre users are concerned about the loss of these services locally, and the implications for easy access in terms of transport, costs and time.

As a result of the consultation responses this full Equality Impact Assessment recommends that centre closures should not go ahead unless alternative venues in the local community can be found at which to run services for the group of service users listed above.

In addition to the equality implications stated here the Council has re-evaluated its original proposals by:

- Reconsidering need (population based) and re-analysing usage patterns
- Identifying the impact on users (as identified by consultation respondents), and particularly sole users.
- Assessing suitable alternative venues within 1 mile of a proposed closure to enable services to continue to be delivered within the community.
- Identifying property implications including potential future (community) usage of accommodation and the likelihood of DfE clawback of capital monies.

It has been recommended that New Romney Children's Centre is retained as a full time Children's Centre based on the number of sole users impacted by the proposal and the lack of suitable alternative venues.

In line with this recommendation, New Romney's Children's Centre would become a full time link Centre assigned to Folkestone Town Centre hub.

Action Plan

It is proposed that the following actions are taken:

- Undertake the actions in Table 2 and 3 by April 1st 2014.
- Update the budget allocation formula from which Children's Centre are allocated funding. This new model will ensure areas with the highest levels of deprivation are allocated funding appropriately.
- Collect data on all protected characteristics at the time of registration at Centres.

Further detail can be found in the action plan at page 23

Monitoring and Review

It is recommended the following review actions are undertaken on a quarterly basis from April 2014:

- Monitor registration levels at Centre.

October 2013

- Monitor attendance levels to ensure numbers of services users with protected characteristics accessing services are maintained and improved.
- Monitor and quality assure equality data capture on Children's Centre database.

Equality and Diversity Team Comments

Several potential impacts, both positive and negative were identified at the screening stage; the service sought consultation feedback to test out the service assumptions about impact and to identify any gaps/issues that may need to be addressed. A full impact assessment was conducted and the findings (set out in the judgement section above) have led to changes in the proposals.

Sign Off

I have noted the content of the equality impact assessment and agree the actions to mitigate the adverse impact(s) that have been identified.

Senior Officer



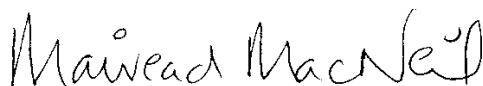
Signed:

Name: Karen Mills

Job Title: Commissioning Manager

Date: November 2013

DMT Member



Signed:

Name: Mairead MacNeil

Job Title: Director of Specialist Children's Services Date: November 2013

Equality Impact Assessment Action Plan

Protected Characteristic	Issues identified	Action to be taken	Expected outcomes	Owner	Timescale	Cost implications
All	Monitor equality information	Ensure that data is collected from those registering at centres on all protected characteristics (in particular disability, sexual orientation, gender identity, religion or belief, to provide improved information for targeting services.	Improved data on those	Strategic Commissioning / operational managers / eStart user group	January 2014 onwards	TBC
All	Impact on high numbers of sole users	Implement changes in Table 2 to ensure impact is reduced.	Service users remain able to access services within their local communities	Strategic Commissioning	January 2014 – June 2014	TBC
All	Impact on users on lower incomes	Reallocate budget model based on deprivation	Budget distributed more proportionately to those areas most deprived	Strategic Commissioning	October 2013 – March 2014	TBC
All	Inability to access services due to transportation difficulties if Centres close	Sustain and invest in development of outreach services and locate suitable alternative venues in the local community from which to deliver	Continued access to services in local communities and increased level of outreach services targeted at those in greatest need.	Strategic commissioning / Operational Managers	March 2014	TBC

October 2013

		services should a centre be closed.				
Expectant parents (Pregnancy and maternity)	Reduced access to services	Continue to develop partnership working with health services to ensure universal provision at appropriate accessible locations	Maintained or increased support during pregnancy and maternity.	Strategic Commissioning / Operational Managers / Health partner organisations	October 2013 – June 2014	TBC

Appendix 1

Pre-consultation activity

See following page

New Romney Children's Centre (Shepway)

Note: Data for appendices A & B is based on e-start usage between 1.10.11 to 30.9.12

Appendix A – Centre Profile

Gender

Male		Female		Total	
Number	%	Number	%	Number	%
90	54%	77	46%	167	100%

Age

0		1		2		3		4		5		Total	
Number	%	Number	%	Number	%	Number	%	Number	%	Number	%	Number	%
21	13%	42	25%	38	23%	30	18%	24	14%	12	7%	167	100%

Ethnicity

WBRI White - British		WIRI White - Irish		WIRT White - Traveller of Irish Heritage		WROM White - Gypsy / Roma		WOTH White - Any Other White	
Number	%	Number	%	Number	%	Number	%	Number	%
96	57%		0%		0%		0%	<5	

New Romney Children's Centre (Shepway)

ABAN Asian or Asian British - Bangladeshi		AIND Asian or Asian British - Indian		APKN Asian or Asian British - Pakistani		AOTH Asian or Asian British - Any Other Asian		BAFR Black or Black British - African		BCRB Black or Black British - Caribbean		BOTH Black or Black British - Any Other Black	
Number	%	Number	%	Number	%	Number	%	Number	%	Number	%	Number	%
	0%		0%		0%		0%	<5			0%		0%

CHNE Chinese		MWAS Mixed / Dual - White and Asian		MWBA Mixed / Dual - White and Black African		MWBC Mixed / Dual - White and Black Caribbean		MOTH Mixed / Dual - Any Other Mixed		OOTH Any Other Ethnic Group	
Number	%	Number	%	Number	%	Number	%	Number	%	Number	%
<5		<5		<5		<5			0%	<5	

NOBT Information Not Yet Obtained		REFU Refused		Record blank		Total	
Number	%	Number	%	Number	%	Number	%
	0%		0%	59	35%	167	100%

Language

English		Other (non-English) language		Record blank		Total	
Number	%	Number	%	Number	%	Number	%
45	27%	<5		122	73%		

New Romney Children's Centre (Shepway)

Disability

Yes		(Blank)		Total	
Number	%	Number	%	Number	%
	0%	167	100%	167	100%

Mosaic (K & M Group)

A		B		C		D		E		F		G		H	
Number	%	Number	%	Number	%	Number	%	Number	%	Number	%	Number	%	Number	%
8	5%	<5		13	8%	14	8%	43	26%	15	9%	15	9%	12	7%

I		J		K		L		M		Unknown		Total	
Number	%	Number	%	Number	%	Number	%	Number	%	Number	%	Number	%
	0%	30	18%	<5		13	8%	<5			0%	167	100%

New Romney Children's Centre (Shepway)

Appendix B – District Profile

Gender

Male		Female		Total	
Number	%	Number	%	Number	%
1516	51%	1471	49%	2987	100%

Age

0		1		2		3		4		5		Total	
Number	%	Number	%	Number	%	Number	%	Number	%	Number	%	Number	%
571	19%	747	25%	598	20%	491	16%	413	14%	167	6%	2987	100%

Ethnicity

WBRI White - British		WIRI White - Irish		WIRT White - Traveller of Irish Heritage		WROM White - Gypsy / Roma		WOTH White - Any Other White	
Number	%	Number	%	Number	%	Number	%	Number	%
1732	58%	<5			0%		0%	63	2%

ABAN Asian or Asian British - Bangladeshi		AIND Asian or Asian British - Indian		APKN Asian or Asian British - Pakistani		AOTH Asian or Asian British - Any Other Asian		BAFR Black or Black British - African		BCRB Black or Black British - Caribbean		BOTH Black or Black British - Any Other Black	
Number	%	Number	%	Number	%	Number	%	Number	%	Number	%	Number	%
<5		11	0%	<5		90	3%	<5		<5			0%

New Romney Children's Centre (Shepway)

CHNE Chinese		MWAS Mixed / Dual - White and Asian		MWBA Mixed / Dual - White and Black African		MWBC Mixed / Dual - White and Black Caribbean		MOTH Mixed / Dual - Any Other Mixed	
Number	%	Number	%	Number	%	Number	%	Number	%
<5		19	1%	13	0%	17	1%	23	1%

OOTH Any Other Ethnic Group		NOBT Information Not Yet Obtained		REFU Refused		Record blank		Total	
Number	%	Number	%	Number	%	Number	%	Number	%
25	1%	<5		<5		972	33%	2987	100%

Language

English		Other (non-English) language		Record blank		Total	
Number	%	Number	%	Number	%	Number	%
284	10%	11	0%	2692	90%	2987	100%

Disability

Yes		(Blank)		Total	
Number	%	Number	%	Number	%
<5		2983	100%		

New Romney Children's Centre (Shepway)

Mosaic (K & M Group)

A		B		C		D		E		F		G		H	
Number	%	Number	%	Number	%	Number	%	Number	%	Number	%	Number	%	Number	%
113	4%	119	4%	99	3%	185	6%	242	8%	162	5%	447	15%	235	8%

I		J		K		L		M		Unknown		Total	
Number	%	Number	%	Number	%	Number	%	Number	%	Number	%	Number	%
250	8%	426	14%	309	10%	330	11%	61	2%	9	0%	2987	100%

New Romney Children's Centre (Shepway)

Appendix C – District Profile (2011 Census)

Appendix C – 2011 Census Data

Gender

Table 1: 2011 Census Total Population for Kent Local Authorities

Local Authority	Total Persons	Males		Females		Area of local authority (Hectares)	Density (persons per hectare)
		No.	%	No.	%		
Ashford	117,958	57,232	48.5%	60,724	51.5%	58,062	2.03
Canterbury	151,145	72,838	48.1%	78,507	51.9%	30,885	4.89
Dartford	97,385	48,061	49.4%	49,304	50.6%	7,277	13.38
Dover	111,674	54,765	49.0%	56,909	51.0%	31,484	3.55
Gravesham	101,720	50,139	49.3%	51,581	50.7%	9,902	10.27
Maidstone	155,143	76,492	49.3%	78,651	50.7%	39,333	3.94
Sevenoaks	114,893	55,743	48.5%	59,150	51.5%	37,034	3.10
Shepway	107,969	53,135	49.2%	54,834	50.8%	35,670	3.03
Swale	135,835	67,152	49.4%	68,683	50.6%	37,341	3.64
Thanet	134,186	64,555	48.1%	69,631	51.9%	10,330	12.99
Tonbridge & Malling	120,805	59,207	49.0%	61,598	51.0%	24,014	5.03
Tunbridge Wells	115,049	56,494	49.1%	58,555	50.9%	33,133	3.47
KCC Area	1,463,740	715,613	48.9%	748,127	51.1%	354,464	4.13
Medway	263,925	130,825	49.6%	133,100	50.4%	19,203	13.74
Kent	1,727,665	846,438	49.0%	881,227	51.0%	373,667	4.62

Source: 2011 Census Table PP04 (unrounded data) released 24 September 2012. Office for National Statistics (ONS), © Crown Copyright

Age

Standard 5-year age group profile - Total persons			
	All ages	0-4	5-9
KCC area	1,466,500	89,300	84,500
Ashford Borough	118,400	7,700	7,400
Canterbury City	150,600	7,500	7,600
Dartford Borough	97,600	6,800	6,000
Dover District	111,700	6,200	5,900
Gravesham Borough	101,800	6,700	6,300
Maidstone Borough	155,800	9,700	8,800
Sevenoaks District	115,400	7,000	6,900
Shepway District	108,200	6,000	5,600
Swale Borough	136,300	8,800	8,000
Thanet District	134,400	8,100	7,300
Tonbridge & Malling Borough	121,100	7,500	7,700
Tunbridge Wells Borough	115,200	7,300	7,000
Medway Unitary Authority	264,900	17,300	16,100
Kent (KCC + Medway)	1,731,400	106,600	100,600
South East Region	8,652,800	536,000	490,800
England	53,107,200	3,328,700	2,990,100

Ethnicity

Table 2: 2011 Census: Population by broad ethnic group in Kent districts, the South East and England

	All usual residents	White		Mixed/ multiple ethnic groups:		Asian/ Asian British:		Black/ African/ Caribbean/ Black British		Other ethnic group:	
		Number	%	Number	%	Number	%	Number	%	Number	%
England	53,012,456	45,281,142	85.4%	1,192,879	2.3%	4,143,403	7.8%	1,846,614	3.5%	548,418	1.0%
South East	8,634,750	7,827,820	90.7%	167,764	1.9%	452,042	5.2%	136,013	1.6%	51,111	0.6%
Kent	1,463,740	1,371,102	93.7%	22,107	1.5%	47,614	3.3%	16,216	1.1%	6,701	0.5%
Ashford	117,956	110,520	93.7%	1,682	1.4%	3,991	3.4%	1,375	1.2%	388	0.3%
Canterbury	151,145	140,620	93.0%	2,551	1.7%	5,135	3.4%	1,937	1.3%	902	0.6%
Dartford	97,365	85,070	87.4%	2,161	2.2%	5,799	6.0%	3,578	3.7%	757	0.8%
Dover	111,674	107,966	96.7%	1,029	0.9%	2,031	1.8%	386	0.3%	262	0.2%
Gravesham	101,720	84,226	82.8%	2,066	2.0%	10,604	10.4%	2,885	2.8%	1,939	1.9%
Maidstone	155,143	145,996	94.1%	2,345	1.5%	4,943	3.2%	1,380	0.9%	479	0.3%
Sevenoaks	114,893	110,029	95.8%	1,675	1.5%	2,085	1.8%	853	0.7%	251	0.2%
Shepway	107,969	102,215	94.7%	1,267	1.2%	3,699	3.4%	458	0.4%	330	0.3%
Swale	135,835	131,155	96.6%	1,575	1.2%	1,489	1.1%	1,395	1.0%	221	0.2%
Thanet	134,186	128,194	95.5%	2,186	1.6%	2,504	1.9%	910	0.7%	392	0.3%
Tonbridge & Malling	120,805	115,872	95.9%	1,677	1.4%	2,431	2.0%	421	0.3%	404	0.3%
Tunbridge Wells	115,049	109,239	94.9%	1,893	1.6%	2,903	2.5%	638	0.6%	376	0.3%
Medway Unitary Authority	263,925	236,579	89.6%	5,176	2.0%	13,615	5.2%	6,663	2.5%	1,892	0.7%
Kent & Medway	1,727,665	1,607,681	93.1%	27,283	1.6%	61,229	3.5%	22,879	1.3%	8,593	0.5%

Source: 2011 Census: Key Statistics Table 201, Office for National Statistics (ONS) © Crown Copyright
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Religion

Table 8: Religion in Kent districts, the South East and England in 2011

Table population : All usual residents

	All People	Christian		Buddhist		Hindu		Jewish		Muslim		Sikh		Other religion		No religion		Religion not dated	
		Number	%	Number	%	Number	%	Number	%	Number	%	Number	%	Number	%	Number	%	Number	%
England	53,012,456	31,479,876	60.4%	238,626	0.6%	806,199	1.6%	261,282	0.6%	2,660,116	6.0%	420,196	0.8%	227,825	0.4%	13,114,232	24.7%	3,804,104	7.2%
South East	8,634,750	5,160,128	60.0%	43,946	0.6%	92,499	1.1%	17,761	0.2%	201,651	2.3%	54,941	0.6%	39,672	0.6%	2,388,286	27.7%	635,866	7.4%
Kent	1,463,740	915,200	62.6%	6,802	0.6%	10,943	0.7%	1,777	0.1%	13,932	1.0%	10,545	0.7%	6,145	0.4%	391,591	26.8%	106,805	7.3%
Ashford	117,956	74,253	62.9%	803	0.7%	1,282	1.1%	116	0.1%	1,019	0.9%	95	0.1%	432	0.4%	30,984	26.3%	8,972	7.6%
Canterbury	151,145	91,122	60.3%	880	0.6%	1,055	0.7%	267	0.2%	1,838	1.2%	245	0.2%	760	0.6%	43,117	28.6%	11,861	7.8%
Dartford	97,365	59,045	60.6%	382	0.4%	1,547	1.6%	86	0.1%	1,566	1.6%	1,543	1.6%	319	0.3%	26,486	27.2%	6,391	6.6%
Dover	111,674	71,541	64.1%	523	0.6%	682	0.6%	97	0.1%	521	0.6%	50	0.0%	525	0.6%	29,047	26.0%	8,688	7.8%
Gravesham	101,720	61,891	60.9%	333	0.3%	942	0.9%	54	0.1%	1,894	1.9%	7,743	7.6%	606	0.6%	21,862	21.6%	6,395	6.3%
Maldstone	155,143	97,578	62.9%	901	0.6%	1,492	1.0%	163	0.1%	1,685	1.1%	176	0.1%	612	0.4%	41,493	26.7%	11,043	7.1%
Sevenoaks	114,893	75,169	66.4%	367	0.3%	385	0.3%	196	0.2%	600	0.6%	180	0.2%	348	0.3%	28,939	26.2%	8,709	7.6%
Shepway	107,969	67,296	62.3%	962	0.9%	1,551	1.4%	78	0.1%	796	0.7%	34	0.0%	506	0.6%	28,575	26.6%	8,171	7.6%
Swale	135,835	85,535	63.0%	275	0.2%	368	0.3%	93	0.1%	792	0.6%	158	0.1%	499	0.4%	39,087	28.8%	9,028	6.6%
Thanet	134,186	82,447	61.4%	491	0.4%	639	0.6%	273	0.2%	1,230	0.9%	94	0.1%	690	0.6%	38,383	28.6%	9,939	7.4%
Tonbridge & Malling	120,805	76,920	63.7%	441	0.4%	539	0.4%	122	0.1%	750	0.6%	169	0.1%	412	0.3%	32,996	27.3%	8,456	7.0%
Tunbridge Wells	115,049	72,403	62.9%	444	0.4%	461	0.4%	232	0.2%	1,241	1.1%	58	0.1%	436	0.4%	30,622	26.6%	9,152	8.0%
Medway	263,925	152,637	57.8%	937	0.4%	2,756	1.0%	208	0.1%	5,169	2.0%	3,846	1.6%	1,392	0.6%	78,995	29.9%	17,985	6.8%
Kent & Medway	1,727,665	1,067,837	61.8%	7,739	0.4%	13,699	0.8%	1,985	0.1%	19,101	1.1%	14,391	0.8%	7,537	0.4%	470,586	27.2%	124,790	7.2%

Source: 2011 Census: Key Statistics Table 209, Office for National Statistics (ONS) © Crown Copyright

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Disability and Carer's Responsibilities

All usual residents

	Kent	Ashford	Canterbury	Dartford	Dover	Gravesham	Maidstone	Sevenoaks	Shepway	Swale	Thanet	Tonbridge & Malling	Tunbridge Wells
All people	1,463,740	117,956	151,145	97,365	111,674	101,720	155,143	114,893	107,969	135,835	134,186	120,805	115,049
Day-to-day activities limited a lot	116,407	8,416	12,427	6,621	10,853	7,796	10,660	7,219	10,753	11,742	15,369	7,579	6,972
Day-to-day activities limited a little	140,631	10,669	14,891	8,114	12,404	9,546	13,845	9,872	11,965	13,580	15,979	10,367	9,399
Day-to-day activities not limited	1,206,702	98,871	123,827	82,630	88,417	84,378	130,638	97,802	85,251	110,513	102,838	102,859	98,678
Very good health	683,205	56,128	70,764	47,273	48,433	47,298	74,636	58,796	45,577	60,198	54,640	60,306	59,156
Good health	510,399	41,385	52,338	33,941	39,477	35,572	54,384	38,344	38,999	48,719	47,109	41,475	38,656
Fair health	194,931	15,027	20,211	11,837	16,745	13,629	19,291	13,180	16,465	19,118	22,377	14,263	12,788
Bad health	58,536	4,163	6,133	3,314	5,538	4,104	5,323	3,569	5,321	6,008	7,785	3,728	3,550
Very bad health	16,669	1,253	1,699	1,000	1,481	1,117	1,509	1,004	1,607	1,792	2,275	1,033	899
Provides no unpaid care	1,311,963	106,137	135,562	88,146	99,020	91,410	139,582	102,948	95,663	121,577	118,684	108,724	104,510
Provides 1 to 19 hours unpaid care a week	97,464	7,686	10,089	5,927	7,892	6,371	10,472	8,501	7,465	8,351	8,925	8,258	7,527
Provides 20 to 49 hours unpaid care a week	18,432	1,428	1,815	1,126	1,579	1,383	1,728	1,190	1,663	1,897	2,190	1,321	1,112
Provides 50 or more hours unpaid care a week	35,881	2,705	3,679	2,166	3,183	2,556	3,361	2,254	3,178	4,010	4,387	2,502	1,900

	Kent	Ashford	Canterbury	Dartford	Dover	Gravesham	Maidstone	Sevenoaks	Shepway	Swale	Thanet	Tonbridge & Malling	Tunbridge Wells
All people aged 16 to 64*	917,880	73,443	97,526	63,390	68,865	64,674	98,962	70,814	66,345	85,916	80,143	75,394	72,408
Day-to-day activities limited a lot: Age 16 to 64	47,613	3,489	4,762	2,718	4,473	3,418	4,182	2,564	4,517	5,357	6,459	2,948	2,726
Day-to-day activities limited a little: Age 16 to 64	65,065	5,107	6,612	3,955	5,815	4,521	6,457	4,182	5,458	6,728	7,325	4,607	4,298
Day-to-day activities not limited: Age 16 to 64	805,202	64,847	86,152	56,717	58,577	56,735	88,323	64,068	56,370	73,831	66,359	67,839	65,384

2011 Census Table KS301: Health and provision of unpaid care

Source: 2011 Census: Office for National Statistics (ONS) © Crown Copyright

Presented by Business Intelligence, Research & Evaluation,
Kent County Council

Table population: All usual residents
(PERCENTAGES)

All usual residents

	Kent	Ashford	Canterbury	Dartford	Dover	Gravesham	Maidstone	Sevenoaks	Shepway	Swale	Thanet	Tonbridge & Malling	Tunbridge Wells	Medway	Kent & Medway
All people	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
Day-to-day activities limited a lot	8.0%	7.1%	8.2%	6.8%	9.7%	7.7%	6.9%	6.3%	10.0%	8.6%	11.5%	6.3%	6.1%	7.5%	7.9%
Day-to-day activities limited a little	9.6%	9.0%	9.9%	8.3%	11.1%	9.4%	8.9%	8.6%	11.1%	10.0%	11.9%	8.6%	8.2%	8.9%	9.5%
Day-to-day activities not limited	82.4%	83.8%	81.9%	84.9%	79.2%	83.0%	84.2%	85.1%	79.0%	81.4%	76.6%	85.1%	85.8%	83.6%	82.6%
Very good health	46.7%	47.6%	46.8%	48.6%	43.4%	46.5%	48.1%	51.2%	42.2%	44.3%	40.7%	49.9%	51.4%	45.7%	46.5%
Good health	34.9%	35.1%	34.6%	34.9%	35.4%	35.0%	35.1%	33.4%	36.1%	35.9%	35.1%	34.3%	33.6%	36.3%	35.1%
Fair health	13.3%	12.7%	13.4%	12.2%	15.0%	13.4%	12.4%	11.5%	15.2%	14.1%	16.7%	11.8%	11.1%	13.0%	13.3%
Bad health	4.0%	3.5%	4.1%	3.4%	5.0%	4.0%	3.4%	3.1%	4.9%	4.4%	5.8%	3.1%	3.1%	3.9%	4.0%
Very bad health	1.1%	1.1%	1.1%	1.0%	1.3%	1.1%	1.0%	0.9%	1.5%	1.3%	1.7%	0.9%	0.8%	1.1%	1.1%
Provides no unpaid care	89.6%	90.0%	89.7%	90.5%	88.7%	89.9%	90.0%	89.6%	88.6%	89.5%	88.4%	90.0%	90.8%	90.5%	89.8%
Provides 1 to 19 hours unpaid care a week	6.7%	6.5%	6.7%	6.1%	7.1%	6.3%	6.7%	7.4%	6.9%	6.1%	6.7%	6.8%	6.5%	5.7%	6.5%
Provides 20 to 49 hours unpaid care a week	1.3%	1.2%	1.2%	1.2%	1.4%	1.4%	1.1%	1.0%	1.5%	1.4%	1.6%	1.1%	1.0%	1.3%	1.3%
Provides 50 or more hours unpaid care a week	2.5%	2.3%	2.4%	2.2%	2.9%	2.5%	2.2%	2.0%	2.9%	3.0%	3.3%	2.1%	1.7%	2.5%	2.5%

* Total for all people aged 16 to 64 taken from table KS102 - Age structure

	Kent	Ashford	Canterbury	Dartford	Dover	Gravesham	Maidstone	Sevenoaks	Shepway	Swale	Thanet	Tonbridge & Malling	Tunbridge Wells	Medway	Kent & Medway
All people aged 16 to 64*	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
Day-to-day activities limited a lot: Age 16 to 64	5.2%	4.8%	4.9%	4.3%	6.5%	5.3%	4.2%	3.6%	6.8%	6.2%	8.1%	3.9%	3.8%	5.3%	5.2%
Day-to-day activities limited a little: Age 16 to 64	7.1%	7.0%	6.8%	6.2%	8.4%	7.0%	6.5%	5.9%	8.2%	7.8%	9.1%	6.1%	5.9%	7.1%	7.1%
Day-to-day activities not limited: Age 16 to 64	87.7%	88.3%	88.3%	89.5%	85.1%	87.7%	89.2%	90.5%	85.0%	85.9%	82.8%	90.0%	90.3%	87.5%	87.7%

Marriage and Civil Partnerships

2011 Census Key Statistics Table 103: Marital and civil partnership status

Presented by Business Intelligence, Research & Evaluation, Kent County Council

Table population: All usual residents aged 16 and over

	All people aged 16 and over	Single (never married or never registered a same-sex civil partnership)		Married		In a registered same-sex civil partnership		Separated (but still legally married or still legally in a same-sex civil partnership)		Divorced or formerly in a same-sex civil partnership which is now legally dissolved		Widowed or surviving partner from a same-sex civil partnership	
		Number	%	Number	%	Number	%	Number	%	Number	%	Number	%
Kent	1,180,186	369,334	31.3%	576,067	48.8%	2,388	0.2%	32,802	2.8%	112,916	9.6%	86,679	7.3%
Ashford	93,411	27,080	29.0%	48,288	51.7%	199	0.2%	2,611	2.8%	8,853	9.5%	6,380	6.8%
Canterbury	125,971	48,662	38.6%	54,131	43.0%	310	0.2%	2,863	2.3%	10,602	8.4%	9,403	7.5%
Dartford	77,342	26,741	34.6%	36,439	47.1%	140	0.2%	2,248	2.9%	6,785	8.8%	4,989	6.5%
Dover	91,382	26,924	29.5%	44,096	48.3%	242	0.3%	2,710	3.0%	9,820	10.7%	7,590	8.3%
Gravesham	80,964	26,202	32.4%	39,473	48.8%	111	0.1%	2,345	2.9%	7,008	8.7%	5,825	7.2%
Maidstone	125,476	37,567	29.9%	64,344	51.3%	206	0.2%	3,367	2.7%	11,458	9.1%	8,534	6.8%
Sevenoaks	92,481	25,276	27.3%	50,388	54.5%	175	0.2%	2,082	2.3%	7,773	8.4%	6,787	7.3%
Shepway	88,760	27,300	30.8%	41,591	46.9%	240	0.3%	2,713	3.1%	9,673	10.9%	7,243	8.2%
Swale	108,539	33,978	31.3%	52,439	48.3%	197	0.2%	3,500	3.2%	10,835	10.0%	7,590	7.0%
Thanet	108,556	34,051	31.4%	47,911	44.1%	270	0.2%	3,591	3.3%	12,873	11.9%	9,860	9.1%
Tonbridge & Malling	95,821	26,932	28.1%	51,132	53.4%	166	0.2%	2,408	2.5%	8,869	9.3%	6,314	6.6%
Tunbridge Wells	91,483	28,621	31.3%	45,835	50.1%	132	0.1%	2,364	2.6%	8,367	9.1%	6,164	6.7%

New Romney Children's Centre (Shepway)

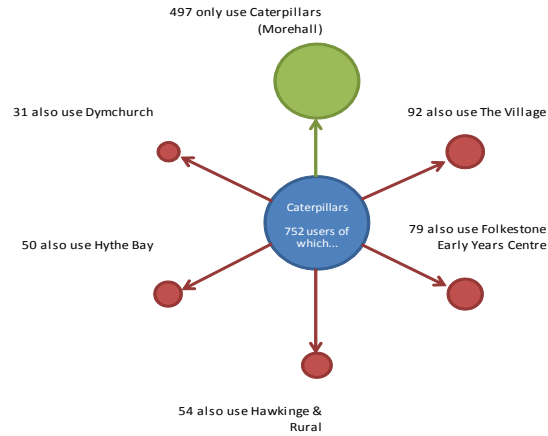
Appendix D – Centre Usage & Needs Analysis

Children's Centre Review - Summary Evidence (Shepway)

Centre Usage

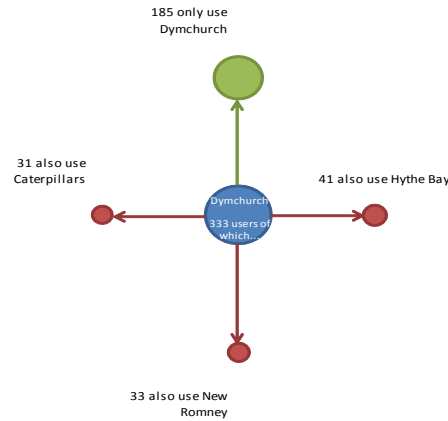
Caterpillars Children's Centre (Morehall)

Round: R2



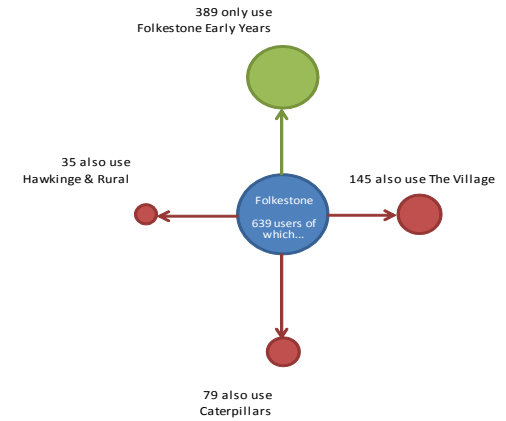
Dymchurch Children's Centre

Round: R2



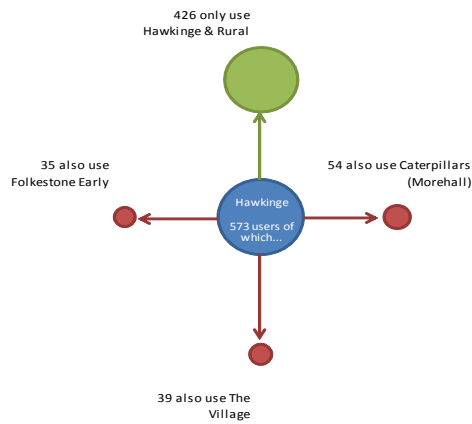
Folkestone Early Years Centre

Round: R2



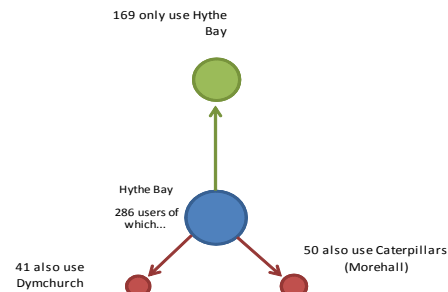
Hawkinge & Rural Children's Centre

Round: R1



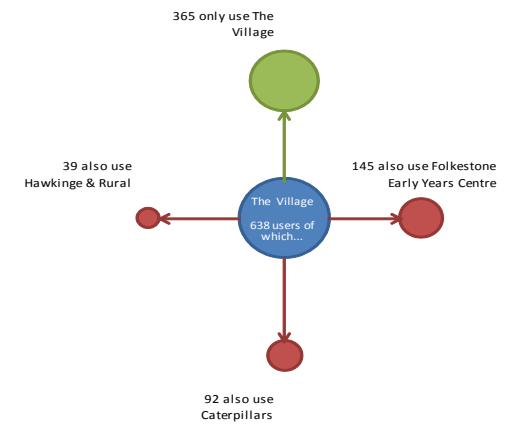
Hythe Bay Children's Centre

Round: R2



The Village Children's Centre

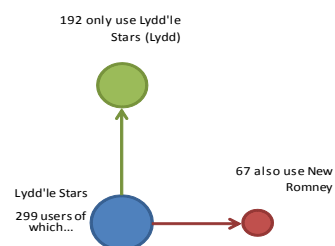
Round: Ex SSLP



Centre Usage - Continued

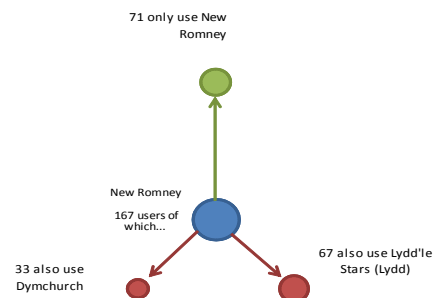
Lydd'le Stars Children's Centre (Lydd)

Round: R2



New Romney Children's Centre

Round: R2



Technical Notes:

Based on an analysis of activity data taken from Estart, covering 1st October 2011 to 30th September 2012

Usage bubble chart shows other centres used. In most cases, other centres used by >30 children are shown, up to a maximum of 7 other centres

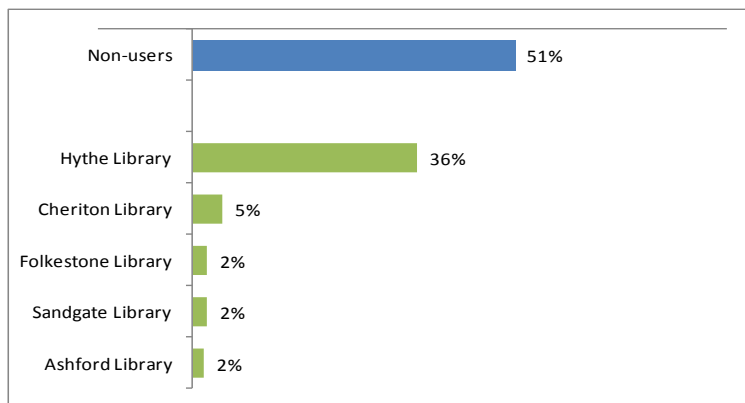
This analysis is child-based (counting each child only once against each centre they have attended, regardless of frequency), and covers attendees from both within and outside of the registered area (although anonymous attendees are not included).

Library Usage Amongst Children's Centre Users

Hythe Bay Children's Centre

Round: R2

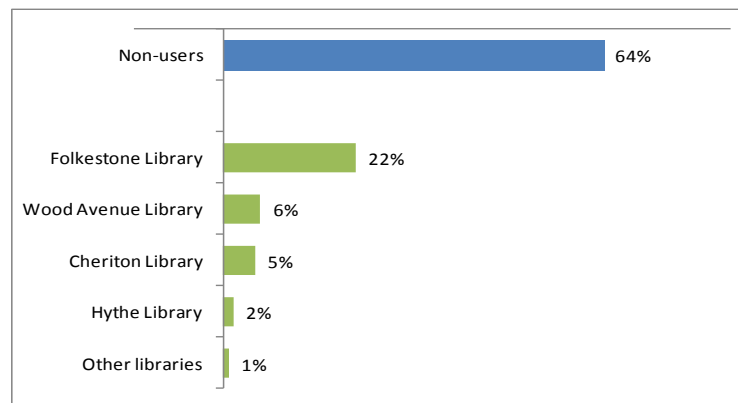
Library Usage Amongst Families Using Hythe Bay Children's Centre



The Village Children's Centre

Round: Ex SSLP

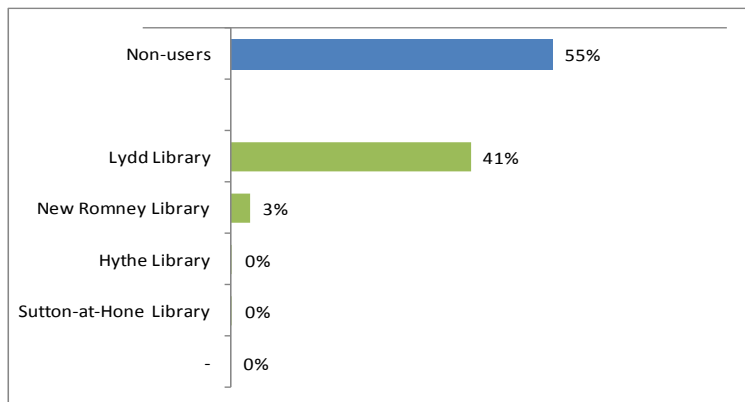
Library Usage Amongst Families Using The Village Children's Centre



Lydd'le Stars Children's Centre (Lydd)

Round: R2

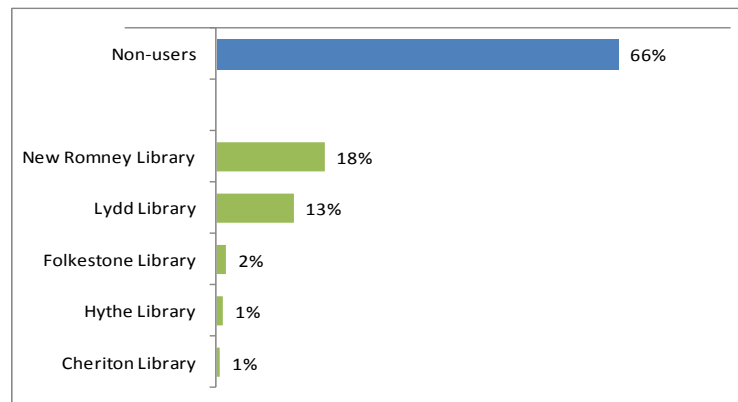
Library Usage Amongst Families Using Lydd'le Stars Children's Centre (Lydd)



New Romney Children's Centre

Round: R2

Library Usage Amongst Families Using New Romney Children's Centre



This analysis has not been conducted for any other centres in Shepway

Library data relates to users either borrowing or renewing an item between April 2011 and March 2012

Children's centre data based on activity data taken from Estart, covering 1st October 2011 to 30th September 2012

Analysis has been conducted for a list of libraries identified by the library service.

Usage Summary

	Caterpillars (Morehall)	Dym- church	Folkestone Early Years Centre	Hawkinge & Rural	Hythe Bay	The Village	Lydd'le Stars (Lydd)	New Romney	Kent Average
Total number of children seen (reach)	752	334	639	573	286	638	299	167	615
% of children who <u>only</u> went to this Centre over the period	66%	55%	61%	74%	59%	57%	64%	43%	49%
Attendance frequency									
<i>Just once</i>	34%	39%	31%	29%	29%	30%	23%	37%	35%
<i>Less than once a month (2-11 times)</i>	50%	45%	41%	43%	51%	41%	50%	43%	47%
<i>1-2 times a month (12-24 times)</i>	11%	8%	11%	16%	15%	9%	15%	11%	10%
<i>At least fortnightly (25-49 times)</i>	6%	5%	5%	11%	5%	17%	8%	4%	6%
<i>At least weekly (50+ times)</i>	1%	3%	12%	2%	0%	3%	4%	5%	2%
Frequent users	24%	19%	32%	35%	28%	33%	35%	23%	24%
Average visits per child	7.0	6.8	20.9	9.5	6.9	11.8	10.6	8.7	8.3
Age (at 1st Oct 2012)									
Under 1	25%	9%	15%	22%	23%	19%	19%	13%	21%
1	30%	22%	25%	27%	35%	25%	23%	25%	26%
2	19%	25%	21%	20%	21%	19%	21%	23%	21%
3	12%	21%	18%	16%	10%	18%	13%	18%	16%
4	10%	16%	13%	11%	9%	15%	16%	14%	11%
5	5%	7%	7%	4%	2%	3%	8%	7%	4%

Catchment Analysis

Need level - based on volume (Numbers)	High	Low	High	Average	Low	High	Low	Low	
Need level - based on penetration (%)	Average	Low	High	Average	Average	High	Average	High	
Population projection for 0-5s (provisional)	Down	Similar	Similar	Down	Similar	Down	Down	Down	Similar

Technical Notes:

Usage statistics based on an analysis of activity data taken from Estart, covering 1st October 2011 to 30th September 2012

Frequent users: Are defined as children recorded as having used the centre 12+ times over the year, with an adjustment made for under 1's

Catchments: Needs are assessed based on the population (with 0-11 year olds) living within the calculated 'actual/natural' catchment for each centre. In this analysis catchments are built at LSOA-level, with each LSOA in Kent allocated to a centre on the basis of the centre that has the most current users living in that LSOA area.

Need Statistics: Levels of need are calculated both in terms of the total volume of need (i.e. numbers of children/households of a range of 11 need types) and in terms of the penetration of the need (i.e. the % of children/households of each of a range of 11 need types)

Population projections: Based on Ward-level projections for 2026, produced by Research & Intelligence, Kent County Council.

Green font indicates the centre is upper quartile on this measure

Red font indicates the centre is lower quartile on this measure

New Romney Children's Centre (Shepway)

Appendix E – District Workshop (11th Feb 2013) Feedback Report

Kent Children's Centre Programme - 'Local Solutions' District Workshops

Select a District: Shepway

This document provides an analysis of the feedback forms completed by attendees to the 'Local Solutions' District workshops, held during February 2013. A total of 331 completed forms were received and analysed across all 12 Districts, although it should be noted that at District levels totals are fairly small.

1. The Future Service Options Review aims to look at:

WHAT services are delivered,

WHERE they are accessed or delivered from, and

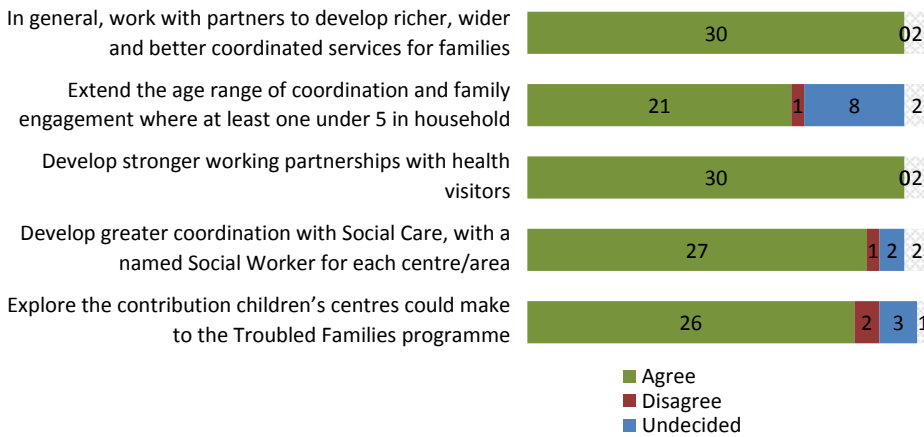
HOW the service is structured to plan and deliver within its financial constraints?

Do you think these aims are the right ones?



The majority of the attendees to the Shepway workshop who responded feel that the Review aims are realistic and broadly right.

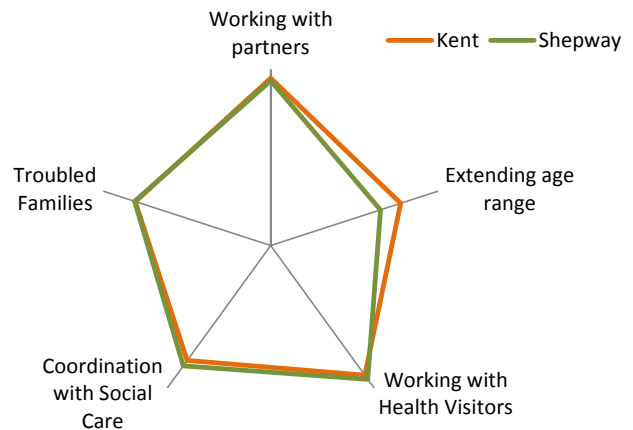
2. Service Development: Exercise 1a - No Wrong Front Door



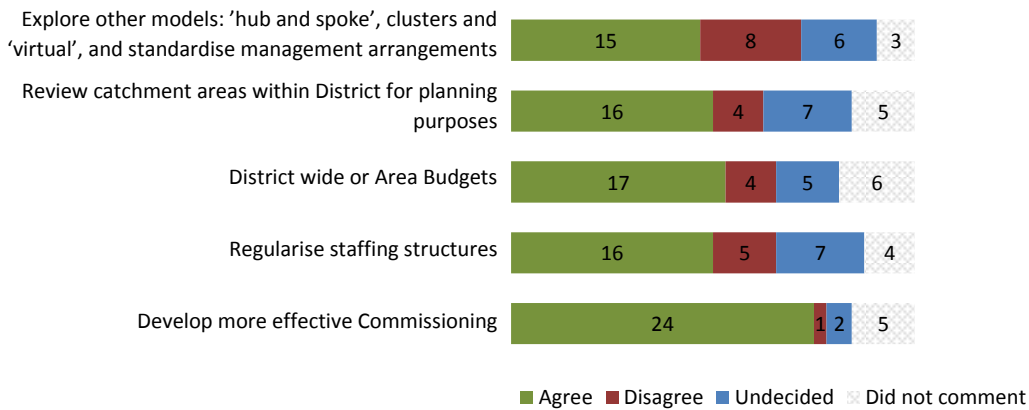
There are high levels of agreement with all areas. However, there is particularly strong agreement that we should, in general, seek to work with partners to develop richer, wider and better coordinated services for families, and that we should seek to develop stronger working relationships with health visitors.

Agreement Levels - Comparison With County Average

The pattern of responses in Shepway is broadly similar to that for the County overall, in that levels of support are highest for working with partners, and for developing stronger working relationships with health visitors. There is perhaps some evidence to suggest that support is lower for extending the age range than is the case for the County overall, but please note that this analysis for Shepway is based on just 32 forms, and so relatively small differences must be interpreted with caution.



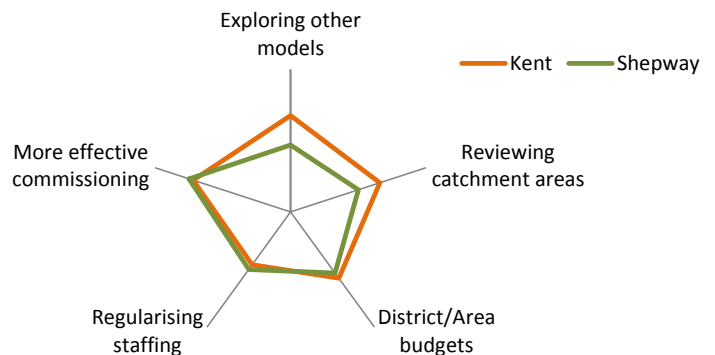
2. Service Development: Exercise 1b - District Planning



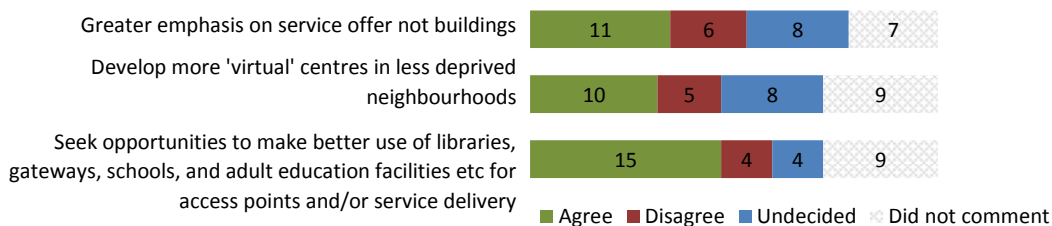
Developing effective commissioning has the highest levels of support. Support is relatively low (at around half of participants) for all other areas.

Agreement Levels - Comparison With County Average

The pattern of responses in Shepway does appear to differ to that for the County overall, with exploring other models and reviewing the catchment areas not particularly well supported.



2. Service Development: Exercise 2 - Scoping Service Delivery and Access Points



Of these three suggestions, seeking opportunities to make better use of existing facilities has the most support in Shepway, although perhaps the key conclusion is that levels of support are actually relatively low for all three.

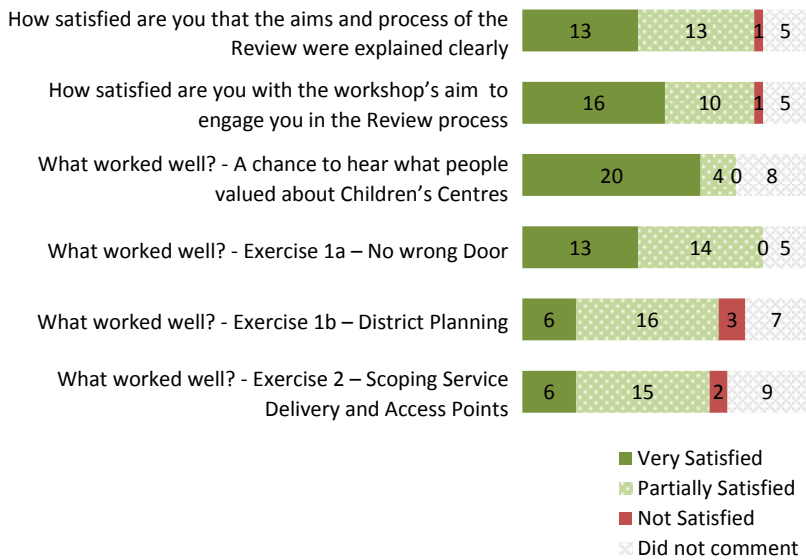
Agreement Levels - Comparison With County Average

The pattern of responses in Shepway is similar to that for the County overall, in that seeking opportunities to make better use of existing facilities has the most support of the three suggestions. However, the level of support is low in Shepway for all three, and lower than is the case for the County overall.



3. This workshop was part of the process to engage you in the Future Service Options Review

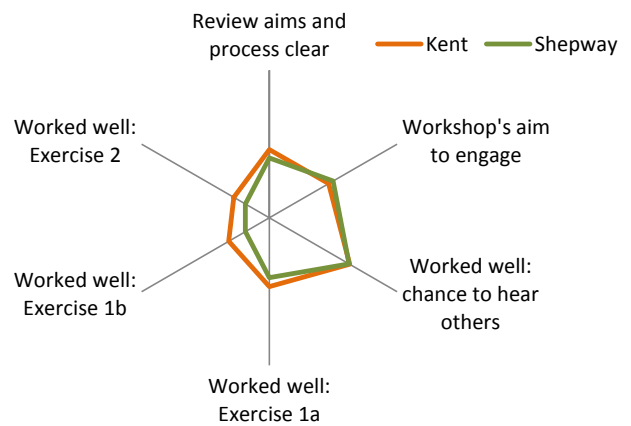
4. What worked particularly well in the workshop?



The majority of participants in Shepway indicated that they were at least partially satisfied that the aims and process of the Review had been explained clearly, and with the workshop's aim to engage them in the Review process. Of the exercises, satisfaction was highest (in terms of participants indicating that they were 'very satisfied') with Exercise 1a.

Satisfaction Levels ('Very Satisfied') - Comparison With County Average

In terms of levels of participants indicating that they were 'very satisfied', the pattern of responses in Shepway is similar to that for the County overall, although satisfaction levels dropped more dramatically in Shepway for Exercise 1b and (to a slightly lesser extent) Exercise 2.



Summary

In terms of levels of agreement, the following garnered the support of more than 80% of participants at the Shepway workshop:

- The aims of the Review are the right ones
- In general, work with partners to develop richer, wider and better coordinated services for families
- Develop stronger working partnerships with health visitors
- Develop greater coordination with Social Care, with a named Social Worker for each centre/area
- Explore the contribution children's centres could make to the Troubled Families programme

New Romney Children's Centre (Shepway)

Appendix F – District Workshop (11th Feb 2013) Independent Report

CHILDREN'S CENTRES FUTURE SERVICE OPTIONS REVIEW WORKSHOP: SHEPWAY

The Shepway workshop was one of a series of workshops held in every Kent District, engaging children's centre leaders, partners and other stakeholders, in a Future Service Options Review of the children's centres programme in Kent. The Review aims to explore:

- **What** services were delivered, in particular looking at the effective of partnerships and the targeting of resources to those who could benefit most;
- **Where** the services where delivered from , and the scope for changes to delivery and access points could improve access and cost effectiveness
- **How** the services are structured, and whether changes could deliver more consistency where appropriate, better targeting of expenditure, and cost savings.

A summary of contributions is given below. Detailed records of all the written contributions follow.

Aims of the Future Service Options Review

In individual feedback forms, there was good support that "what, where and how" were the right areas for the review. Individual comments suggested the review might also focus on usage and access patterns, who delivered services, and might take a more "whole family" approach. There was concern that a consistent approach should not result in a one-size-fits-all answer – services and engagement had to reflect local circumstances. The review might also consider where else funding for children's centres might be found, particularly if centres made a greater contribution to other agenda.

Icebreaker

Participants thought Shepway's children's centres were warm, friendly, and non-judgmental places, providing something for everyone but targeting support towards those who could benefit most. They were local champions, providing a space for families to come together, and playing a leading role in determining local needs and helping to shape direct and wider service delivery to meet those needs, often playing a broking role in bringing different agencies together. They identified problems early and respond quickly, often enabling a holistic response to family needs. They were clear in their ambition to support parenting and better outcomes for children.

"No Wrong Door" – improving partnership effectiveness

Participants considered the potential of parents and carers to break down barriers with harder to reach families, and debated the pros (creating pathways to families with problems and cons (confidentiality) of parent volunteers taking a more active role in family support.

Links with primary schools could be strengthened with more contact between head teachers and centre managers, enabling closer working between FLOs and CIWs to support "whole families", with that culture embedded in CAFs and TAF meetings. Better coordination around transition and more shared use of buildings could also deliver real benefits.

New Romney Children's Centre (Shepway)

Partnerships with health could benefit from better sharing of contact data and case information, including new birth contact data, and potentially obesity levels, A&E admissions and immunisations. It would also be helpful if children's centres knew more about the range of available health services across a district. Children's Centres could deliver more activities to promote healthy lifestyles with health partners.

The speech and language model developed in Lydd, which shows good outcomes, should be rolled out.

The value and potential of the voluntary sector was recognised. Participants considered that greater mutual understanding was needed – challenging given the diversity of the sector. Opening up KCC training to VCS partners might help, and there may be scope for sharing office and delivery spaces.

Children's centres could take a "whole family" learning approach, and bring together service delivery agencies to create a better coordinate range of basic skills/employment training/job search services. Volunteering opportunities could play a strong role.

Communication could be improved with colleagues from social care to improve CAFs, coordinate assessment work, improve the quality of referrals and support CP and CHIN meetings, which might be facilitated by a named social worker, who might be based at the centre. Dealing with a wider age range of children in a family supported by social care could present practical challenges, particularly for centres on a school site. It would be helpful for centres to know where families with new born children are already working with SCS.

In individual feedback forms, participants strongly supported the aims of improving partnerships, though several expressed uncertainty around the proposal to extend the age range. Individual comments noted some of the challenges around deeper integration with partners. Many raised concerns around the proposed extension of the age range. Other individual comments reflected those generated during group exercises.

District Level Planning

Participants considered that area budget could allow greater flexibility in delivery, improve consistency and reduce duplication. Peripatetic staffing offered potential efficiency gains, but local knowledge and a familiar face are important. Abandoning small catchments made sense, though some had concerns on how that would be inspected. It was suggested that Romney and South Ashford could jointly plan some services (being in close proximity but different districts); and Folkestone and The Village could become a paired cluster. But there was potential within a district model to use more community venues, and plan services to where they were needed more.

On cost savings: partners could contribute towards office/venue costs; opening hours could be tailored to the level of need, or opened longer for other community activities.

However, there is a danger of losing community presence and perspective, hot desking creates as well as solves problems, and charging partners might damage relations. Some staff should retain a local remit.

In individual feedback forms, the proposals to move towards greater district planning were supported, but with significant opposition too. Open discussions within the room indicated participants generally felt centres served their catchments well, that they were well placed, and that changes were likely to mean less and not better. That said, the benefits of centralised admin, some

New Romney Children's Centre (Shepway)

level of district planning, some peripatetic delivery staff and more strategic planning were all recognised and supported. Individual comments raised concerns of dilutions, confidentiality, and transport.

Service and Access Points

Participants identified a significant list of community venues already being used to deliver services, and identified a significant additional list, particularly libraries, where there was potential scope for service delivery or access to information. However, there was a concern that the parents we are trying to help the most do not often use libraries.

Issues around changing the approach to using community venues were discussed in the previous exercise, with a general view that district level planning allowed for a more strategic and systematic approach to targeting disadvantaged communities, planned on a much wider catchment area, which would determine where venues and services should be delivered.

In individual comments, which were extensive and detailed, it was noted that venues needed to be of appropriate quality, and availability was mixed. For information and access, a much wider range of venues could be considered – supermarkets etc.

Bob Allen & David Wallis

Appendix 2

<p>Conclusions from consultation evidence by protected characteristic</p>	<p>General: The vast majority of those electing to respond to the consultation disagree to some extent with reducing the number of Children’s Centres (87%, 5,098 individuals/professionals.). Of these 5,098 individuals/professionals, 462 indicated that their objection related to the proposed closure of New Romney (with 148 of these 462 objecting to the proposed closures of other named Centres <u>as well as</u> New Romney).</p> <p>98% of the users of New Romney responding to the consultation disagree with reducing the number of children’s centres and just 1% agree. This compares with 89% and 5% respectively of all responses to the consultation countywide from users of Children’s Centres, and so represents a <u>higher</u> level of disagreement with the proposal.</p> <p>Amongst those members of the public who objected to the closure of New Romney, 38% (157 individuals) indicate that they will not use Children’s Centres at all as a result (which is a <u>much higher</u> proportion than the 26% of all members of the public objecting to the proposed closures countywide).</p>
	<p>Age: <u>Parents 0-4</u> 67% of those objecting to the proposed closure of New Romney are parents of 0-4s, which is <u>much lower</u> than the 85% of all those members of the public objecting to the proposed closures countywide. <u>Parents aged 25 or under</u> 13% of those objecting to the proposed closure of New Romney are parents of 0-4s aged 25 or under, which is the same as the 13% of all those members of the public objecting to the proposed closures countywide. <u>Teenage mothers</u> 1% of those objecting to the proposed closure of New Romney are teenage mothers (with 0-4s), which is similar to the 2% of all those members of the public objecting to the proposed closures countywide. <u>Pregnant teenagers</u> Less than 0.5% of those objecting to the proposed closure of New Romney are pregnant teenagers, which is the same as the proportion observed across all those members of the public objecting to the proposed closures countywide.</p>
	<p>Disability: <u>Disabled parents</u> 3% of those objecting to the proposed closure of New Romney are disabled parents of 0-4s, which is similar to the 2% of all</p>

	<p>those members of the public objecting to the proposed closures countywide.</p>
	<p>Gender: 84% of those objecting to the proposed closure of New Romney are female, which is similar to the 88% of all those members of the public objecting to the proposed closures countywide.</p> <p><u>Mothers</u> 58% of those objecting to the proposed closure of New Romney are mothers of 0-4's, which is <i>much lower</i> than the 76% of all those members of the public objecting to the proposed closures countywide.</p> <p><u>Fathers</u> 7% of those objecting to the proposed closure of New Romney are fathers of 0-4's, which is the same as the 7% of all those members of the public objecting to the proposed closures countywide.</p>
	<p>Gender identity: Less than 0.5% of those objecting to the proposed closure of New Romney identified themselves as being parents of 0-4's having a gender different to that of their birth, which is the same as the proportion observed across all those members of the public objecting to the proposed closures countywide.</p>
	<p>Race:</p> <p><u>Parents from minority ethnic groups</u> 4% of those objecting to the proposed closure of New Romney are parents of 0-4s from ethnic minority groups, which is <i>lower</i> than the 9% of all those members of the public objecting to the proposed closures countywide.</p> <p><u>Gypsy, Roma and traveller parents</u> Less than 0.5% of those objecting to the proposed closure of New Romney are Gypsy/Roma and traveller parents of 0-4's, which is the same as the proportion observed across all those members of the public objecting to the proposed closures countywide.</p> <p><u>Parents with English as an additional language</u> 1% of those objecting to the proposed closure of New Romney are parents of 0-4s with English as an additional language, which is <i>slightly lower</i> than the 5% of all those members of the public objecting to the proposed closures countywide.</p>
	<p>Religion or belief</p> <p><u>Christian parents</u> 29% of those objecting to the proposed closure of New Romney are Christian parents of 0-4's, which is <i>much lower</i> than the</p>

	<p>39% of all those members of the public objecting to the proposed closures countywide.</p> <p><u>Buddhist parents</u> None of those objecting to the proposed closure of New Romney are Buddhist parents of 0-4's, which is in line with the <0.5% of all those members of the public objecting to the proposed closures countywide.</p> <p><u>Hindu parents</u> None of those objecting to the proposed closure of New Romney are Hindu parents of 0-4's, which is in line with the <0.5% of all those members of the public objecting to the proposed closures countywide.</p> <p><u>Jewish parents</u> None of those objecting to the proposed closure of New Romney are Jewish parents of 0-4's, which is in line with the <0.5% of all those members of the public objecting to the proposed closures countywide.</p> <p><u>Muslim parents</u> Less than 0.5% of those objecting to the proposed closure of New Romney are Muslim parents of 0-4's, which is similar to the 1% observed across all those members of the public objecting to the proposed closures countywide.</p> <p><u>Sikh parents</u> None of those objecting to the proposed closure of New Romney are Sikh parents of 0-4's, which is in line with the <0.5% of all those members of the public objecting to the proposed closures countywide.</p> <p><u>Parents of any other religion</u> 2% of those objecting to the proposed closure of New Romney are parents of 0-4's with an 'other' religion, which the same as the 2% of all those members of the public objecting to the proposed closures countywide.</p> <p><u>Parents of no stated religion</u> 29% of those objecting to the proposed closure of New Romney are parents of 0-4's indicated that they have no religion, which is <u>lower</u> than the 35% of all those members of the public objecting to the proposed closures countywide.</p>
	<p>Sexual orientation:</p> <p><u>Lesbian, Gay and transgender parents</u> Less than 0.5% of those objecting to the proposed closure of New Romney are Lesbian, Gay or transgender parents of 0-4's, which is similar to the 1% of all those members of the public objecting to the proposed closures countywide.</p>
	<p>Pregnancy and maternity:</p> <p><u>Will be a parent soon</u> 10% of those objecting to the proposed closure of New Romney indicated that they would be a 'parent/carer soon', which is <u>higher</u> than the 4% of all those members of the public objecting to the proposed closures countywide.</p>

	<p>Marriage and Civil Partnerships:</p> <p><u>Lone parents</u> 11% of those objecting to the proposed closure of New Romney are lone parents of 0-4's, which is similar to the 13% of all those members of the public objecting to the proposed closures countywide.</p> <p><u>Parents in a civil partnership</u> None of those objecting to the proposed closure of New Romney are parents of 0-4's in a civil partnership, which is in line with the <0.5% of all those members of the public objecting to the proposed closures countywide.</p>
	<p>Carers responsibilities: Carer data was not gathered as part of the consultation activity</p>

Appendix 3

Table 1 General profile of public objectors to the closure of New Romney

Protected characteristic	Objectors to the closure of New Romney (percentages relate to all objectors)
Age	Nearly half (44%) of objectors were aged 26-35, 23% were aged 36-45 and 14% were aged 20-25. Teenage mothers and pregnant teenagers comprised 1% of objectors.
Disability	The majority (78%) of objectors did not consider themselves to have a disability; just 7% considered that their day-to-day activities were 'limited a lot' because of a health problem or disability. Parents with a disability made up 3% of objectors.
Gender	The majority (84%) of objectors were female with over half of the objections from mothers of children under 5 years. Fathers of children aged 5 or under made up 7% of objectors.
Gender identity	A small number (<0.5%) of objector's gender identity was not the same as at birth.
Marriage and civil partnerships	Most (71%) objectors were either married, in a civil partnership or cohabiting and 11% of objections were from lone parents of under 5's.
Pregnancy and maternity	Those who would be a parent soon made up 10% of objectors. Two-thirds (67%) of objectors were parents / carers of children under age 5; one-third were parents / carers of children aged 5-11; and 15% were parents / carers of children aged 12-18.
Race	Most objectors (89%) were White British. Other ethnic groups made up 5% of objectors and 2% had English as an additional language.
Religion or belief	Those who were Christian made up 45% of objectors and those who had no religion 39%. Those of other religions made up 4% of objectors. The remainder of objectors did not respond to the question.
Sexual orientation	Most objectors (84%) were heterosexual (with 15% not responding to the question).
Carer's responsibilities	Not collected.

Table 2 Responses to the consultation

General responses of objectors
Data on objectors
<ul style="list-style-type: none"> • There were 462 objections to the closure of New Romney which represented approximately 9% of all objections (including objections from professionals). • Of the 462 that objected to the changes with respect to New Romney Children's Centre, 87% strongly disagreed and 13% disagreed. • Of the 462 objections to the closure of centres including New Romney, 314 objected to changes to New Romney only. • Of the 462 objections, 408 were from the public and 54 were from professionals. • Of the 408 objections to closure of centres including New Romney from the public, 295 objected to the closure of New Romney Children's Centre only. • There were 263 users of New Romney that responded to the consultation and of these 98% objected. • There were 240 objections to the closure of New Romney specifically from all

<p>users of New Romney and of these 150 were from users who only accessed New Romney.</p> <ul style="list-style-type: none"> • Of the 54 objections to closure of centres including New Romney from the professionals, 19 only objected to the changes with respect to New Romney. • Nearly a third of all objections from professionals were from Children’s Centre staff.
<p>Impact on the public</p> <ul style="list-style-type: none"> • A small proportion of respondents whose objection included changes to New Romney (6%), said that the proposals would have no impact on them; by implication there would be an impact on the majority of respondents. • About a third of objectors said that they would use Children’s Centres less often. • Over a third (38%) said they would not use a Children’s Centre at all. • The most popular reason given for using centres less often or not at all were because it would make travel to centres more difficult or alternative centres were too distant. • Objectors also commented that Children’s Centres were formed a local community hub with a chance to meet people. • 28% of users and 21% of sole users said that they would use children’s centres less often if New Romney closed. • 51% of users and 59% of sole users of New Romney Children’s Centre said that if the centre closed they would not use a centre at all. • Only 2% of all users and 2% of sole users said that they would attend a different children’s centre if New Romney closed.
<p>Example verbatim comments from the public</p> <p><i>I use New Romney for the most amount of services on offer all in one place. The staff are amazing and very helpful, my daughter loves coming into the groups and I enjoy the courses and have studied an NVQ which has helped me to find employment.</i></p> <p><i>New Romney is easier for me to get too as I can share with my partner I'm not always guaranteed to have the car, also bus prices are too expensive.</i></p> <p><i>I have only just discovered these centres having only just had my baby but already find them invaluable and know the closures will affect those close to me.</i></p>
<p>Professionals view of impacts</p> <p>Of the 48 professionals who responded with comments on their objections to centre closures including New Romney:</p> <ul style="list-style-type: none"> • A third considered that children and families will miss out. • A quarter felt that it would make travel to centres more difficult / alternative centres too distant. • Nearly a quarter (23%) said that people who needed to be supported would be the most disadvantaged. • 21% considered children’s centres to be a necessary and important resource. • 21% felt that it would reduce access to services <p>Of the 16 professionals who responded only with objections to the closure of New Romney (and leaving a comment):</p> <ul style="list-style-type: none"> • Half considered that children and families would miss out. • Five mentioned that it would make travel to centres more difficult or alternative centres were too distant.

Example verbatim comments from professionals

There is a large population in Greatstone, Littlestone and New Romney that need access to a Children's Centre. New Romney has the only secondary school on Romney Marsh and many parents drop children at school plus have younger children. Also with a lot of retired people many look after their grandchildren.

New Romney is a deprived area, to take away the Children's Centre would mean an increase of lonely parents, carers and children who are unable to attend a local place for guidance, support and child friendly groups. Our families cannot afford to spend £6 on a return bus ticket and would therefore not attend any centre. To take away this support to families is only creating a bigger problem for the future...

The number of families accessing services would significantly reduce. Services would have to be cut in New Romney as there are no other local venues equipped to deal with the 36 services running from the centre. We know that parents are reluctant to travel to other centres and public transport is limited and costly and the families needing the support most will not be able to afford this. The Marsh is a very rural area and transport is a real issue...

Closing New Romney would have a massive impact on the Romney Marsh area and would disengage local residents further. The users wouldn't travel to other facilities meaning less people would feel the benefit of the Children Centre.

October 2013

**KENT COUNTY COUNCIL
EQUALITY ANALYSIS / IMPACT ASSESSMENT (EqIA)**

**This document is available in other formats, Please contact
cc.commissioning@Kent.gov.uk or telephone on 01622 696678**

Please read the EqIA GUIDANCE and the EqIA flow chart available on KNet.

Directorate: Families and Social Care

Name of policy, procedure, project or service

Dover District Children's Centres Future Service Options Programme – Option C

What is being assessed?

Closure of the North Deal Primrose Children's Centre in Dover.

The catchment area for the centre would merge with Blossom Children's Centre. This will enable greater emphasis on services rather than buildings and enable outreach to be increased equitably.

Responsible Owner/ Senior Officer

Mairead MacNeil/ Karen Mills

Date of Initial Screening

2nd July 2013

Date of Full EqIA :

August – November 2013

Version	Author	Date	Comment
1.0	Karen Roberts	Apr 2013	
2.0	Chris Barker	21.06.13	Update to reflect North Deal Primrose Children's Centre only
3.0	Equality and Diversity Team	01.07.13	Comments on version 2
4.0	Chris Barker	02.07.13	Updated to reflect comments raised in version 3
5.0	Chris Barker	13.08.13	Overall proportionality (pg 12) amended from medium to high potential impact.
6.0	Chris Barker	25.11.13	Full EqIA using consultation responses
7.0	Matthew Mallett/Alister	27.11.13	Revised Full EqIA incorporating Equality and Diversity Comments

October 2013

	McClure		
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Screening Grid

Characteristic	Could this policy, procedure, project or service, or any proposed changes to it, affect this group less favourably than others in Kent? YES/NO If yes how?	Assessment of potential impact HIGH/MEDIUM LOW/NONE UNKNOWN		Provide details: a) Is internal action required? If yes what? b) Is further assessment required? If yes, why?	Could this policy, procedure, project or service promote equal opportunities for this group? YES/NO - Explain how good practice can promote equal opportunities
		Positive	Negative	Internal action must be included in Action Plan	If yes you must provide detail
Age	<p>Yes. Children's Centres core purpose is to improve outcomes for young children and their families through reducing inequalities. Young children are classified as pre-birth to age 5.</p> <p>In 2011 there were 111,700 residents in the Dover district¹, 6,200 of these (5.55%) were 0 to 5 years old².</p> <p>In the Dover district 4,358 children have been recorded as using a centre at least once between October 2011 and September 2012. This represents 70.3% of the 0-5 population. 15% were less than a year old, 17% were 1 years old, 17% were 2 years old, 21% were 3 years old, 20% were 4 years old and</p>	Medium	Medium	<p>a) Yes –sustain current outreach services and promote the hub and link model. Better link children's centre services provided. Maximise the use of resources including staffing to continue to improve outcomes for children and their families.</p> <p>Ensure measures are in place to enable vulnerable families (identified via CAF) to access current services.</p> <p>Provide information to current children's centre users to promote understanding of how the changes could affect them and how to identify any support available within the hub and link model. (All children 0-5 will remain entitled to access all Children's Centres in the County).</p> <p>Children's Centres will continue to signpost to age appropriate provision for children over 5.</p> <p>Close partnership working with the</p>	<p>Using Dover Town Centre as a Hub centre. This option could enable greater emphasis on services rather than buildings and enable outreach to be increased equitably. By working as a hub and link centre model (with one catchment area) centres may be able to increase the proportion of 0-5 registered at Children's Centres. This could support the identification of families' needs and enable services to be more targeted at 0-5 year olds who are most in need of intervention.</p> <p>Through operating a hub and link model all families should continue to be offered appropriate services. Services will address locally identified need.</p> <p>It is likely that there will be an increase in the numbers of children attending Blossom Children's Centres, particularly in the 1 and 2 year old age brackets. In order to</p>

¹ 2011 Kent Census Date, ONS

² Mid year population estimates, KCC

	<p>10% were 5 years old.</p> <p>Of the 4,358 Children using a centre in Dover at least once between October 2011 and September 2012, 16.5% (717 children) attended the North Deal Primrose Children’s Centre. 13% were less than a year old, 19% were 1 year olds, 18% 2 years old, 19% were 3 years old, 21% were 4 years old and 9% were 5 years old. This represents a larger than average proportion (Kent Children’s Centre average) of 3, 4 and 5 year olds. The proportion of 0-1 and 1 year olds accessing services is far less than the county average.</p> <p>Of these 717 children, 541 also attended another Children’s Centre in Dover and 176 only attended North Deal Primrose. Others centres accessed included Blossom, The Sunflower, The Daisy, Buckland and Whitfield and Buttercup.</p> <p>Needs analysis (volume) for the North Deal Primrose Children’s Centre identifies</p>			<p>commissioned centre to ensure that services are planned appropriately across the district.</p> <p>b) Yes - Full Public Consultation to be held. Identify any mitigating actions that can be put in place to ensure number of 3, 4 and 5 year old users does not decrease, and actions to attempt to address the lower levels of 0-1 and 1 year olds attending centres in the locality.</p> <p>Ensure that any moves to CCG operating models do not disadvantage any age groups within the South Kent Coast CCG area. Teenage Parent Services which are currently delivered across the locality must continue to be promoted and signposted across CCG boundaries.</p>	<p>prioritise early intervention and prevention especially as many 3 and 4 year olds access early Years settings than 1 and two year olds. Even with the increase in 2 year old funding through free for two to almost 50% this is still far greater than the approximate 94% of children aged 3 and 4 years in funded places.</p> <p>Based on local knowledge, teenage parent services are currently delivered at two centres in Dover district. The hub and link model should increase signposting to teenage parent services i.e. Young Active Parents groups. The hub and link model may also increase the likelihood of teenage parents meeting and building peer support networks. A greater emphasis on services rather than buildings should support an increase in Teenage Parent registrations.</p>
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	that the North Deal Primrose catchment has a lower level of need than the Kent average in terms of teenage pregnancy.				
Disability	<p>9.3% of the population in the Dover district are claiming a disability benefit.³</p> <p>Between October 2011 and September 2012 less than 5 users at North Deale Primrose were recorded as having a disability.</p> <p>Needs analysis for the North Deal Primrose Children’s Centre identifies that the North Deal Primrose catchment has a lower level of need than the Kent average in terms of working aged permanently sick/ disabled (volume).</p>	Low	Low	<p>a) Yes - Ensure that disabled children and carers are offered the opportunity to access services, including prospective disabled children and prospective carers.</p> <p>Ensure that parents and carers are asked about disabilities at registration. Work closely with HVs and Early Years settings to share information gained from developmental assessments.</p> <p>Offer parents the opportunity to amend database to include a ‘do not wish to answer’ category and a ‘no’ category for disability</p> <p>Ensure that parents and carers can access required information if they have print impairments, learning disabilities, are Deaf or hard-of-hearing, or would struggle to access standard print/ standard English information in any other way because of their protected characteristics.</p> <p>Although the risk is proportionately low due to small numbers of disabled</p>	<p>Yes – Services will continue to address identified needs on an individual basis. Through a hub and link model centres will continue be able to share resources including best practice and specialist knowledge.</p> <p>Through the hub and link centre model (management) signposting to specialist services may increase.</p> <p>A greater emphasis on local services rather than buildings will enable outreach to be increased appropriately and equitably and therefore disabled children’s registrations should increase. Through increased targeted work obtained through better data collection, services could be more targeted. Sharing information may lead to speedier intervention by specialist services.</p> <p>Children’s Centres will not discriminate directly or indirectly against any person because of their disability. We will ensure that front-line staff are diversity aware.</p>

³ Kent Business Intelligence Statistics

				<p>children, the impact on individuals could be significant unless there is a transition plan for these children. District Managers and Integrated Family Service Managers should be aware of these.</p> <p>b) Yes - Targeted consultation - A large number of disability records have either not been completed or users have not wished to disclose information and therefore it is difficult to measure impact. However a child's disability may not be apparent at registration so work closely with HVs and Early Years settings to share information gained from developmental assessments. Offer parents the opportunity to amend database to include a 'do not wish to answer' category and a 'no' category for disability. Consider an annual re-registration system across the County.</p> <p>Close partnership working with the commissioned centre to ensure that services are planned appropriately across the district.</p> <p>Ensure that alterations in district boundaries do not directly impact on the services disabled families and children are able to access.</p>	<p>With the comparatively high levels of disability in Dover district, Children's Centres will continue to be a key community venue as required by Sure Start Children's Centre statutory guidance. Centres will promote equality regardless of disabilities and promote access to services.</p>
Gender	Yes – In the Dover district 49% of the population are male and 51% are female.	Low	Medium	a) Yes – services will continue to address need identified regardless of gender. Continue to deliver 'dad's groups' and	No - It is likely that Children's Centres will continue to support slightly more male 0-5 year olds. It is also likely that

	<p>In 2012, 94% of attendances at Children’s Centres in Dover were made by a female parent or carer. Therefore, any changes are likely to have a greater negative impact on females.</p> <p>48% of children who used North Deal Primrose between October 2011 and September 2012 were male and 52% were female. This is broadly consistent with the County population for this age group, and in line with the district demographic.</p>			<p>interventions targeted at male carers to increase engagement.</p> <p>b) No</p>	<p>Children’s Centres will continue to support more female carers than males.</p> <p>Yes - Currently some centres run targeted interventions for male carers on behalf of the centres in their area. Through the hub and link centre model (management) signposting to these services would continue.</p> <p>Children’s Centres will not discriminate directly or indirectly against any person because of their gender. We will ensure that front-line staff are diversity aware.</p>
Gender identity	<p>Unknown - No impact has been identified at this stage due to a lack of information.</p>	Unknow n	Unknow n	<p>a) Yes – In line with KCC’s Equality Strategy, KCC will seek to identify gender identity of Kent’s residents.</p> <p>b) This impact assessment will be updated when such information is available.</p>	<p>Yes - There may be an opportunity to promote and provide more diverse services using a hub and link centre model.</p> <p>The hub and link centres could provide increased opportunity for specific services if needed.</p> <p>Children’s Centres will not discriminate directly or indirectly against any person because of their gender identity. We will ensure that front-line staff are diversity aware.</p>
	<p>This could impact Black or</p>	Medium	Medium	<p>a) Yes –Encourage disclosure of language and</p>	<p>Yes – Services will continue to address</p>

<p>Race</p>	<p>Minority Ethnic (BME) less favourably as a larger proportion of registered Children’s Centres users are BME compared to County populations.</p> <p>In the Dover district 96.7% of the population are White British, 3.3% are BME.</p> <p>Of the children who attended a Dover Children’s Centre between October 2011 and September 2012, 71% were White British, 2% were White-Gypsy Roma, 3% were White-Any Other White, 1% were Asian or Asian British-Indian, 1% were Asian or Asian British- Any other Asian, 1% were Mixed Dual-White and Asian, 1 % were Mixed/Dual- Any other Mixed, 1 % were Any other Ethnic Group, and 19% choose not to record their ethnicity.</p> <p>76% of users at North Deal Primrose were recorded as White British, 2% were Any Other White, 1% were Asian or Asian British- Indian, 1% were Mixed/Dual White and Asian, 1% were Mixed/Dual-Any other mixed, and 18% choose not to record their</p>			<p>ethnicity information for all families at registration. Provide information on the benefits of disclosing this information.</p> <p>Ensure that parents and carers can access required information if English is a second language, or they would struggle to access standard print/ standard English information in any other way because of their protected characteristics.</p> <p>b) Yes - Targeted consultation - A large number of language records have either not been completed or users have not wished to disclose information and therefore it is difficult to measure impact.</p> <p>Promote greater awareness and understanding of diversity within the communities.</p> <p>Statistics illustrate that although comparatively low, there is an extremely diverse community accessing services at North Deal Primrose Children’s Centre, and all other Dover Children’s Centres. There are also extremely high levels of White British currently accessing services. All races should be encouraged to participate in the targeted consultation.</p>	<p>identified needs on an individual basis. Through a hub and link model centres will be able to share resources including best practice and specialist knowledge e.g. opportunity to access courses such as English as an additional language.</p> <p>Given the minimal numbers registered, a hub and link model may also increase the likelihood of families with English as an additional language meeting and building peer support networks.</p> <p>Through the hub and link centre model (management) signposting to specialist services should increase.</p> <p>A greater emphasis on services rather than buildings will enable outreach to be increased equitably including to Gypsy/ Roma communities, families with English as an additional language and White British to reflect local populations. Services provided will also ensure that they are accessible to all racial groupings.</p> <p>Children’s Centres will not discriminate directly or indirectly against any person because of their race. We will ensure that front-line staff are diversity aware.</p> <p>Hub and linked centres can work together to further develop opportunities for social cohesion, understanding and tolerance of</p>
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	<p>ethnicity. There is therefore likely to be a greater impact on the white population.</p> <p>Language information has not been obtained for 81% of families using Children’s Centres in Kent.⁴ Where information is available, English has been recorded as the first language for 18% of users. Polish has been recorded as the second largest proportion with less than 1%.</p> <p>Language information is not recorded for 72% of users at North Deal Primrose. 28% are recorded as English.</p> <p>MOSAIC classifications of families attending North Deal Primrose between June 2011 and June 2012 DOES NOT identify an overrepresentation amongst young professionals with children, many living in ethnically diverse neighbourhoods.</p>				<p>difference.</p> <p>The hub and link centres could provide increased opportunity for specific services if needed.</p> <p>Ensure that Dover Children’s Centres continue to work with young parents in ethnically diverse neighbourhoods, especially those from White British Backgrounds.</p>
Religion or	In the Dover 2011 census 64.1% of the population have	Unknow n	Unknow n	a) Yes –Encourage religion or belief information is obtained for all families at registration.	Children’s Centres will not discriminate directly or indirectly against any person

⁴ As at 1st October 2012

<p>belief</p>	<p>recorded their religion as Christian, 0.5% as Buddhist, 0.6% as Hindu, 0.1% as Jewish, 0.5% as Muslim, 0% as Sikh and 0.5% as other religion. 26% have stated no religion and 7.6% have not stated if a religion or not. Religion of Children's Centre users is unknown.</p>			<p>Provide information on the benefits of disclosing this information b) This impact assessment will be updated when such information is available.</p>	<p>because of their religion or belief. We will ensure that front-line staff are diversity aware.</p> <p>Targeted services have previously been run in some communities to increase knowledge of all religions. This work will continue.</p> <p>The hub and link centres could provide increased opportunity for specific services if needed.</p>
<p>Sexual orientation</p>	<p>Sexual Orientation data is collected for parents and carers.</p> <p>Sexual orientation is deemed not applicable for under 5 age group.</p>	<p>Unknown</p>	<p>Unknown</p>	<p>a) Yes – Continue to encourage parents to provide information on sexual orientation and discuss individual needs. Provide information on the benefits of disclosing this information b) This impact assessment will be updated when sexual orientation information is available.</p>	<p>Children's Centres will not discriminate directly or indirectly against any person because of their sexual orientation. We will ensure that front-line staff are diversity aware.</p> <p>The hub and link centres could provide increased opportunity for specific services if needed.</p>
<p>Pregnancy and maternity</p>	<p>Children's Centres core purpose is to improve outcomes for young children and their families through reducing inequalities. Children's Centres offer a range of pre-birth and maternity services.</p> <p>North Deal Primrose Children's Centre provide a number of services, including breastfeeding</p>	<p>Low</p>	<p>High</p>	<p>a) Review current services to ensure they are in the right location. Work with Health partners to ensure provision continues at proposed part time link centres, link centres and Hubs. b) Yes – Further engagement with Health colleagues required to identify changes to services and associated impact. EqIA to be updated accordingly.</p> <p>Ensure all those who attend a pregnancy and maternity course at North Deale Primrose Children's Centre are encouraged to</p>	<p>Level of provision will not be affected and provision will be increased accordingly at hub and link centres. This will not affect universal access to Health services or Health Visitor home visits. Moving to a hub and link model will also promote health services across a joined up catchment area.</p> <p>The changes in the catchment area may better suit health teams in the Dover District.</p>

	peer support, antenatal advice and other baby services. These services would be relocated to Blossom Children’s Centre.			participate in the targeted consultation.	
Marriage and Civil Partnerships	<p>This is not applicable for under 5 age group.</p> <p>In the Dover area 48.3% of the population 16 years and over are married, 0.3% are in same sex civil partnerships, 29.5% are single, 3% are separated, 10.7% are divorced, 8.3% are widowed.</p> <p>This information is not available for Children’s Centre users but MOSAIC classifications of families attending North Deal Primrose Children’s Centre between June 2011 and June 2012 identified an underrepresentation amongst users for the following group;</p> <ul style="list-style-type: none"> • Lone parents with young children, living in high crime areas on large social housing estates • Singles and lone parents on low incomes, renting terraces in town centres • Young singles and couples in small privately 	Low	Medium	<p>a) Yes – Investigate feasibility of collecting marriage and civil partnership information at registration.</p> <p>b) This impact assessment will be updated when marriage and civil partnership information is available.</p>	<p>Yes – Services will continue to address identified needs on an individual basis. Lone Parent will remain a target group for Children’s Centres in line with Ofsted requirements and will therefore seek to reduce inequalities in outcomes for lone parents and their children.</p> <p>Through the hub and link model we may be able to offer increased Adult Education and other education or training opportunities (due to increased participants)</p> <p>Through the hub and link we may be able to offer longer opportunities to access information on benefits, debt reduction and housing.</p> <p>Children’s Centres in the Dover area must continue to work with families who require help, and to assist in providing early intervention and preventative services, limiting the number of families requiring specialist services in the district and locality.</p>

	<p>rented flats and terraces on moderate incomes</p> <p>Therefore there is the potential for there to be a minimal adverse impact on married couples. Impact may also be apparent as lone parents are a target group, and therefore couples and those married may be negatively impacted. However, this may be justified if based on need.</p>				
Carer's responsibilities	<p>88.7% of the population in Dover district provide no unpaid care a week. 7.1% provide up to 19 hours, 1.4% provide between 20 and 49 hours, 2.85% provide over 50 hours. This is in line with the county average of 10.4%.</p>	Unknow n	Unknow n	<p>a) Yes - increased awareness of carers responsibilities and support for families most in need of intervention.</p> <p>b) No</p>	<p>Yes – increased awareness of carers responsibilities and support for families most in need of intervention.</p>

INITIAL SCREENING

Proportionality - Based on the answers in the above screening grid what weighting would you ascribe to this function – see Risk Matrix

Low	Medium	High
Low relevance or Insufficient information/evidence to make a judgement.	Medium relevance or Insufficient information/evidence to make a Judgement.	High relevance to equality, /likely to have adverse impact on protected groups

High - This proposal has been rated as potentially having a high impact on racial and pregnancy and maternity protected characteristics. There are also likely to be impacts on gender, and marriage and civil partnership characteristics. There may be a minimal impact on age and those with a disability.

Context

Kent's Children's Centre programme has been rolled out across the county over the last seven years in three phases, each within tight timescales and different financial constraints. Kent currently has 97 Children's Centres in operation. All centres are slightly different depending on local need, their level of funding and the range of services they provide.

North Deal Primrose is a Round 3 Centre, operating from Sandown Primary School in the Deal area of Dover district. North Deal Primrose is currently managed alongside Blossom and The Sunflower Children's Centre. Users currently accessing North Deal Primrose also access Blossom, The Sunflower, The Daisy, Buckland and Whitfield and The Buttercup.

Parents play a key role in influencing services that are provided.

Children's Centres are places where all children under five years old and their families can receive services and information. These services vary according to centre but may include:

- Integrated early education and childcare
- Support for families – including advice on parenting, local childcare options and access to specialist services for families
- Child and family health services – including health screening, health promotion, health visitor and midwifery services, and the healthy child programme.
- Helping parents into work – with links to Jobcentre Plus and training.

There have been recent reductions in government funding for children's centres as well as changes to government policies about how Children's Centres should work. This proposal seeks to align with;

- A revised core offer for Children's centre
- Revised Children's Centre Statutory Guidance

- Revised Ofsted Inspection Framework (April 2013)
Reductions in Early Intervention Grant

Aims and Objectives

In line with KCC's medium-term plan, Bold Steps for Kent, we need to change the way we work so we can continue to meet the needs of our children and their families with reduced budgets. Kent aims to achieve this by;

- ensuring we deliver better, earlier support to those children and families who need it
- ensuring we continue to provide Children's Centre services to improve health, education and social care outcomes
- strengthening the working relationship between Children's Centres, early years settings, schools and health services

Beneficiaries

The community of Kent but in particular families with children between 0 – 5 years, including those families and young children who are the most vulnerable.

For example:

- Lone parents, young parents and pregnant teenagers and mothers with post-natal depression.
- Children in need or with a child protection plan
- Children of offenders and/or those in custody
- Fathers particularly those with any other identified need, for example teenage fathers and those in custody
- Those with protected characteristics as defined by the Equality Act 2010
- Looked after children
- Children who are being cared for by members of their extended family such as a grandparent, aunt or older sibling
- Families identified by the LA as 'troubled families' who have children under five; any other vulnerable groups identified as at risk of harm by other services
- Families who move in and out of the area relatively quickly (transient families), such as those seeking employment or seasonal work
- Parents with a learning difficulty or disability, or parents who have a child with a learning difficulty or disability
- Migrant families or families where English is an additional language
- Families with complex needs or where there is mental illness
- Families who suffer from domestic violence or where there is substance or alcohol abuse
- Families living in poverty and poor housing

The Local Authority (LA) will benefit. Schools, Health Services, childcare providers and voluntary sector providers could benefit.

ASSESSMENT

Involvement and Engagement

Consultation: Shaping the future of Children's Centres in Kent

The consultation "Shaping the future of Children's Centres in Kent" began on Thursday 4th July and ended on Friday 4th October. Information on the consultation was shared with County Councillors and notification of the consultation launch was sent to approximately 35,000 stakeholder email addresses (including Borough/District and Parish Councillors, service delivery partners and registered Children's Centre users. Articles were posted on Knet, Kent.gov.uk and in Kmail and a promotional tab advertising the consultation remained on the front page of Kent.gov.uk throughout the duration of the consultation. The KCC Twitter account was also used to publicise the consultation on 4th July. Leaflets and posters were produced and distributed to advertise and promote the consultation.

A paper version of the consultation document was produced outlining the proposal for Kent Children's Centres and providing information on the Children's Centres proposed for closure or reduced operating hours as well as proposed future operating arrangements. The document contained a hard copy response form to the consultation for those unable to access the internet and Children's Centre staff assisted vulnerable users in completing the questionnaire.

Consultation findings related to Primrose Children's Centre

All Objecting to the Closure of...Primrose Children's Centre

A total of 121 members of the public and 13 professionals objected to the closure of Primrose Children's Centre. Of these 121 members of the public, 37 objected only to the closure of Primrose, with the majority objecting to other Centre closures as well.

Those members of the public who did object to the closure of Primrose appear to be more likely to be lone parents, parents of children from low incomes and/or younger parents (aged 25 or under).

Amongst this group, 16% (19 individuals) indicate that they will not use Children's Centres at all as a result of the proposed closure (which is far lower than the average across all objectors, of 26%).

A total of 36 users of Primrose (and 14 sole users) responded to the consultation, representing only around 5% of all users of the Centre. The overwhelming majority (94%) disagree to some extent with this proposal. Of the 13 sole users of Primrose objecting to the proposal, 6 indicated that they 'will not use Children's Centres at all' as a result of the proposed closure.

Consultation responses categorised by protected characteristic indicated that those under the Age (Parents aged 25 or under) and Marriage and Civil Partnerships (Lone Parents) were more likely to disagree with proposals to reduce the number of centres and reduce the opening hours at some centres than county average responses.

Responses from other protected characteristic groups, such as those of Disability⁵, Gender, Gender Identity, Race, Religion or Belief, Sexual Orientation, Pregnancy and Maternity were broadly the same as the county average.

Users of Primrose

A total of 36 users of Primrose (and 14 sole users) responded to the consultation, representing only around 5% of all users of the Centre⁶. The chart below shows the extent to which these Primrose users agree or disagree with the proposal to reduce the number of Children's Centres in Kent.

The overwhelming majority (94%) disagree to some extent with this proposal, with 75% indicating that they strongly disagree.

Of the users disagreeing with the proposal:

- 85% objected to the closure of Primrose (all 13 of the sole users)
- 6% indicated that their objection didn't relate to any particular Centre

Of the 13 sole users of Primrose responding to the consultation, 6 indicated that they 'will not use Children's Centres at all' as a result of the proposed closure.

Information and Data

Data used in Initial Screening can be found at Appendix 1

Data for Full Impact Assessment see Appendix 2 and 3

See also: post-consultation report for further details

Potential Impact

Adverse Impact:

The initial screening identified the potential for there to be some adverse impacts on the following group;

⁵ Disabled/disability: For the purposes of the consultation "disabled" or "disability" always refers to respondents who indicated that "their day-to-day activities are limited a lot because of a health problem or disability which has lasted, or is expected to last, at least 12 months"

⁶ Based on activity-based usage figures for the period October 2012 – September 2013.

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- 0 – 5 year olds
- Teenage parents
- A number of racial groupings
- Married Couples
- Female parents/ carers
- Pregnancy and Maternity
- Those with a disability
- Impact is unknown for gender identity, carer's responsibilities religion or belief and sexual orientation.

Post-consultation

The result of the consultation identifies that the closure of Primrose Children's Centre could potentially adversely impact the following groups;

- Parents aged 25 or under
- Lone parents

It did not identify an adverse impact on the following groups;

- 0 – 5 year olds
- Teenage parents
- A number of racial groupings
- Married Couples
- Female parents/ carers
- Pregnancy and Maternity
- Those with a disability
- Impact is unknown for gender identity, carer's responsibilities religion or belief and sexual orientation

Positive Impact:

The initial screening identified the potential for there to be a positive impact on some vulnerable groups using the centres, particularly 0-5 year olds, male parents/ carers, white British, disabled children, teenage parents and lone parents.

For example through:

- Hub centre be closer and more accessible to families,
- Increased targeting of provision to those most in need.
- Reinvesting resources from areas of less need to areas of high need
- Possible increase in outreach services and therefore in registrations and need assessments – identifying a families needs earlier.
- Building on strong local partnerships and integrated working approaches currently in place. Better information sharing.
- Improved signposting across hub and Link
- Continued shared knowledge, expertise and best practice across hub and link
- Improving access by under represented groups

October 2013

- Improving data collection for categories of data related to gender identity, religion and sexual orientation. However this is not dependant on a model more on staffing model and training.
- Alignment with CCG areas to provide health services in a more coordinated way

Impact is unknown for gender identity, religion or belief and sexual orientation.

Post-consultation

The consultation did not identify that any protected characteristic grouping would be more positively impacted than another. The proportion of responses received agreeing with the consultation were from professionals from whom the highest group of responses agreeing with the proposals were received.

JUDGEMENT

Option 1 – Screening Sufficient No

Justification: There is the potential for there to be an adverse impact on a large number of racial groups and pregnancy and maternity protected characteristics.

Option 2 – Internal Action Required Yes

There is potential for adverse impact on particular groups and we have found scope to improve the proposal. Please see action plan.

Option 3 – Full Impact Assessment Yes

A full impact assessment to be conducted on the overall programme during and after consultation on individual proposals.

Post-consultation

The results of the consultation find that the proposal to close Primrose Children's Centre has the potential to adversely impact the following protected characteristics;

- Parents aged 25 or under
- Lone parents

Across all characteristics there are concerns about continued accessibility of services, the costs and difficulties of travelling to alternative locations and the reduction in opening hours and possible unsuitable hours. The response from families on a low income (as classified by MOSAIC analysis) show a similar level of objection to county responses. However, in this group, those respondents stating that they will use Children's Centre less often or will no longer use a Children's Centre because of the proposals the most popular reasons cited were;

- Will make travel to centres more difficult / alternative centres too distant
- Children's centres form a local community hub / chance to meet people
- Very happy with my local centre / prefer it to others / we enjoy going there / only use this one
- Centre is close by/accessible
- Bad for people without cars/non-drivers
- Closures will make remaining centres/our local centre busier/under more strain

Low income in Kent, is not restricted to one particular equality group. Similar reasons for no longer using centres are cited across characteristics with respondents stating they value universal services that are local and provide access to a range of services from different providers.

There are also 'known unknowns' that could impact either positively or negatively on different protected characteristic groups and the development of the hub and link model. These include:

- Budget allocations for 2014/2015.
- Service plans for 2014/2015
- Staffing levels
- Availability and costs of accessible venues to run services from.
- Impacts of proposed changes on partnership working
- Services to be commissioned

Generally, from the consultation there are clear messages about the value centre users place on centres in terms of the services provided and support received from core and other services. They are seen as community hubs, serving a wide range of parent/carer and children's needs. Centre users are concerned about the loss of these services locally, and the implications for easy access in terms of transport, costs and time.

As a result of the consultation responses this full Equality Impact Assessment recommends that the closure of Primrose Children's Centre goes ahead.

Based on engagement with local management and local workshops with stakeholders, a number of alternative venues have been sourced for services which are currently delivered at Primrose Children's Centre. There are currently 16 services delivered by Primrose Children's Centre. 6 of these services are delivered at the Children's Centre and 10 at community outreach locations. 3 health services are currently delivered at Primrose Children's Centre, 2 of which are delivered at the Centre.

The following community venues have been identified as future service delivery locations (all are subject to negotiations);

- North Deal Community Centre
- Sandown School

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- St George's Hall
- Deal Library
- Local area

It is anticipated that moving services to community venues will not negatively impact those groups who were identified as being adversely impacted by the proposals.

In addition to the equality implications stated here the Council has re-evaluated its original proposals by:

- Reconsidering need (population based) and re-analysing usage patterns
- Identifying the impact on users (as identified by consultation respondents), and particularly sole users.
- Assessing suitable alternative venues within 1 mile of a proposed closure to enable services to continue to be delivered within the community.
- Identifying property implications including potential future (community) usage of accommodation and the likelihood of DfE clawback of capital monies.

Action Plan

It is proposed that the following actions are taken:

- Relocate services to community venues by April 1st 2014.
- Update the budget allocation formula from which Children's Centre are allocated funding. This new model will ensure areas with the highest levels of deprivation are allocated funding appropriately.
- Collect data on all protected characteristics at the time of registration at Centres.

Further detail can be found in the action plan at page 22

Monitoring and Review

It is recommended the following review actions are undertaken on a quarterly basis from April 2014:

- Monitor registration levels at Centre.
- Monitor attendance levels to ensure numbers of services users with protected characteristics accessing services are maintained and improved.
- Monitor and quality assure equality data capture on Children's Centre database.

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- Monitor those groups with protected characteristics who were identified as being negatively affected following the consultation, and ensure that the levels of services accessed does not decline

Equality and Diversity Team Comments

Several potential impacts, both positive and negative were identified at the screening stage; the service sought consultation feedback to test out f the service assumptions about impact and to identify any gaps/issues that may need to be addressed and a full impact assessment was. The equality impact assessment did not identify any issues significant enough to change the proposal to close the centre and actions to minimise negative impacts have been identified.

Sign Off

I have noted the content of the equality impact assessment and agree the actions to mitigate the adverse impact(s) that have been identified.

Senior Officer



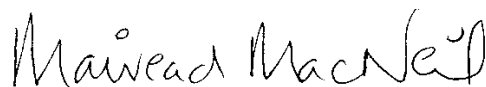
Signed:

Name: Karen Mills

Job Title: Commissioning Manager

Date: November 2013

DMT Member



Signed:

Name: Mairead MacNeil

Job Title: Director of Specialist Children's Services Date: November 2013

Equality Impact Assessment Action Plan

Protected Characteristic	Issues identified	Action to be taken	Expected outcomes	Owner	Timescale	Cost implications
All	Monitor equality information	Ensure that data is collected from those registering at centres on all protected characteristics (in particular disability, sexual orientation, gender identity, religion or belief, to provide improved information for targeting services.	Improved data on those	Strategic Commissioning / operational managers / eStart user group	January 2014 onwards	TBC
All	Impact on high numbers of sole users	Relocate services to appropriate and accessible community venues	Service users remain able to access services within their local communities	Strategic Commissioning	January 2014 – June 2014	TBC
All	Impact on users on lower incomes	Reallocate budget model based on deprivation	Budget distributed more proportionately to those areas most deprived	Strategic Commissioning	October 2013 – March 2014	TBC
All	Inability to access services due to transportation difficulties if Centres close	Sustain and invest in development of outreach services and locate suitable alternative venues in the local	Continued access to services in local communities and increased level of outreach services targeted at those in	Strategic commissioning / Operational Managers	March 2014	TBC

October 2013

		community from which to deliver services should a centre be closed.	greatest need.			
Parents aged 25 and under	Reduced access to services and inability to access services	Ensure that locations from which services are delivered are accessible for young parents	Levels of service users from this protected characteristic does not decline	Strategic Commissioning / Operational Managers / Health partner organisations	October 2013 – June 2014	TBC
Lone parents	Reduced access to services and inability to access services	Ensure that locations from which services are delivered are accessible for lone parents	Levels of service users from this protected characteristic does not decline	Strategic Commissioning / Operational Managers / Health partner organisations	October 2013 – June 2014	TBC

Appendix 1- Initial screening Appendix

See following page

North Deal Primrose (Dover)

Note: Data for appendices A & B is based on e-start usage between 1.10.11 to 30.9.12

Appendix A – Centre Profile

Gender

Male		Female		Total	
Number	%	Number	%	Number	%
342	48%	374	52%	717	100%

Age

0		1		2		3		4		5		Total	
Number	%	Number	%	Number	%	Number	%	Number	%	Number	%	Number	%
94	13%	136	19%	132	18%	138	19%	149	21%	68	9%	717	100%

Ethnicity

WBRI White - British		WIRI White - Irish		WIRT White - Traveller of Irish Heritage		WROM White - Gypsy / Roma		WOTH White - Any Other White	
Number	%	Number	%	Number	%	Number	%	Number	%
545	76%		0%		0%		0%	13	2%

ABAN Asian or Asian British - Bangladeshi		AIND Asian or Asian British - Indian		APKN Asian or Asian British - Pakistani		AOTH Asian or Asian British - Any Other Asian		BAFR Black or Black British - African		BCRB Black or Black British - Caribbean		BOTH Black or Black British - Any Other Black	
Number	%	Number	%	Number	%	Number	%	Number	%	Number	%	Number	%
<5		<5			0%		0%		0%		0%		0%

North Deal Primrose (Dover)

CHNE Chinese		MWAS Mixed / Dual - White and Asian		MWBA Mixed / Dual - White and Black African		MWBC Mixed / Dual - White and Black Caribbean		MOTH Mixed / Dual - Any Other Mixed		OOTH Any Other Ethnic Group	
Number	%	Number	%	Number	%	Number	%	Number	%	Number	%
	0%	9	1%	<5		<5		8	1%	<5	

NOBT Information Not Yet Obtained		REFU Refused		Record blank		Total	
Number	%	Number	%	Number	%	Number	%
<5			0%	130	18%	717	100%

Language

English		Other (non-English) language		Record blank		Total	
Number	%	Number	%	Number	%	Number	%
198	28%	<5		517	72%	717	100%

Disability

Yes	(Blank)	Total
Number	Number	Number
%	%	%
<5	716	
	100%	

North Deal Primrose (Dover)

Mosaic (K & M Group)

A		B		C		D		E		F		G		H	
Number	%	Number	%	Number	%	Number	%	Number	%	Number	%	Number	%	Number	%
30	4%	20	3%	46	6%	120	17%	59	8%	75	10%	84	12%	27	4%

I		J		K		L		M		Unknown		Total	
Number	%	Number	%	Number	%	Number	%	Number	%	Number	%	Number	%
<5		158	22%	30	4%	37	5%	24	3%	<5		717	100%

North Deal Primrose (Dover)

Appendix B – District Profile

Gender

Male		Female		Total	
Number	%	Number	%	Number	%
2183	50%	2174	50%	4358	100%

Age

0		1		2		3		4		5		Total	
Number	%	Number	%	Number	%	Number	%	Number	%	Number	%	Number	%
653	15%	723	17%	759	17%	896	21%	885	20%	442	10%	4358	100%

Ethnicity

WBRI White - British		WIRI White - Irish		WIRT White - Traveller of Irish Heritage		WROM White - Gypsy / Roma		WOTH White - Any Other White	
Number	%	Number	%	Number	%	Number	%	Number	%
3109	71%	<5		1	0%	72	2%	135	3%

ABAN Asian or Asian British - Bangladeshi		AIND Asian or Asian British - Indian		APKN Asian or Asian British - Pakistani		AOTH Asian or Asian British - Any Other Asian		BAFR Black or Black British - African		BCRB Black or Black British - Caribbean		BOTH Black or Black British - Any Other Black	
Number	%	Number	%	Number	%	Number	%	Number	%	Number	%	Number	%
7	0%	23	1%	<5		36	1%	<5			0%		0%

North Deal Primrose (Dover)

CHNE Chinese		MWAS Mixed / Dual - White and Asian		MWBA Mixed / Dual - White and Black African		MWBC Mixed / Dual - White and Black Caribbean		MOTH Mixed / Dual - Any Other Mixed		OOTH Any Other Ethnic Group	
Number	%	Number	%	Number	%	Number	%	Number	%	Number	%
9	0%	24	1%	11	0%	12	0%	45	1%	31	1%

NOBT Information Not Yet Obtained		REFU Refused		Record blank		Total	
Number	%	Number	%	Number	%	Number	%
9	0%	7	0%	819	19%	4358	100%

Language

English		Other (non-English) language		Record blank		Total	
Number	%	Number	%	Number	%	Number	%
1170	27%	36	1%	3152	72%	4358	100%

Disability

Yes	(Blank)	Total
Number	%	Number
<5	4355	4358
	100%	100%

North Deal Primrose (Dover)

Mosaic (K & M Group)

A		B		C		D		E		F		G		H	
Number	%	Number	%	Number	%	Number	%	Number	%	Number	%	Number	%	Number	%
134	3%	93	2%	186	4%	462	11%	262	6%	208	5%	414	9%	182	4%

I		J		K		L		M		Unknown		Total	
Number	%	Number	%	Number	%	Number	%	Number	%	Number	%	Number	%
116	3%	802	18%	539	12%	763	18%	167	4%	30	1%	4358	100%

North Deal Primrose (Dover)

Appendix C – District Profile (2011 Census)

Appendix C – 2011 Census Data

Gender

Table 1: 2011 Census Total Population for Kent Local Authorities

Local Authority	Total Persons	Males		Females		Area of local authority (Hectares)	Density (persons per hectare)
		No.	%	No.	%		
Ashford	117,958	57,232	48.5%	60,724	51.5%	58,062	2.03
Canterbury	151,145	72,838	48.1%	78,507	51.9%	30,885	4.89
Dartford	97,385	48,061	49.4%	49,304	50.6%	7,277	13.38
Dover	111,674	54,765	49.0%	56,909	51.0%	31,484	3.55
Gravesham	101,720	50,139	49.3%	51,581	50.7%	9,902	10.27
Maidstone	155,143	76,492	49.3%	78,651	50.7%	39,333	3.94
Sevenoaks	114,893	55,743	48.5%	59,150	51.5%	37,034	3.10
Shepway	107,969	53,135	49.2%	54,834	50.8%	35,670	3.03
Swale	135,835	67,152	49.4%	68,683	50.6%	37,341	3.64
Thanet	134,186	64,555	48.1%	69,631	51.9%	10,330	12.99
Tonbridge & Malling	120,805	59,207	49.0%	61,598	51.0%	24,014	5.03
Tunbridge Wells	115,049	56,494	49.1%	58,555	50.9%	33,133	3.47
KCC Area	1,463,740	715,613	48.9%	748,127	51.1%	354,464	4.13
Medway	263,925	130,825	49.6%	133,100	50.4%	19,203	13.74
Kent	1,727,665	846,438	49.0%	881,227	51.0%	373,667	4.62

Source: 2011 Census Table PP04 (unrounded data) released 24 September 2012. Office for National Statistics (ONS), © Crown Copyright

Age

Standard 5-year age group profile - Total persons			
	All ages	0-4	5-9
KCC area	1,466,500	89,300	84,500
Ashford Borough	118,400	7,700	7,400
Canterbury City	150,600	7,500	7,600
Dartford Borough	97,600	6,800	6,000
Dover District	111,700	6,200	5,900
Gravesham Borough	101,800	6,700	6,300
Maidstone Borough	155,800	9,700	8,800
Sevenoaks District	115,400	7,000	6,900
Shepway District	108,200	6,000	5,600
Swale Borough	136,300	8,800	8,000
Thanet District	134,400	8,100	7,300
Tonbridge & Malling Borough	121,100	7,500	7,700
Tunbridge Wells Borough	115,200	7,300	7,000
Medway Unitary Authority	264,900	17,300	16,100
Kent (KCC + Medway)	1,731,400	106,600	100,600
South East Region	8,652,800	536,000	490,800
England	53,107,200	3,328,700	2,990,100

Ethnicity

Table 2: 2011 Census: Population by broad ethnic group in Kent districts, the South East and England

	All usual residents	White		Mixed/ multiple ethnic groups:		Asian/ Asian British:		Black/ African/ Caribbean/ Black British		Other ethnic group:	
		Number	%	Number	%	Number	%	Number	%	Number	%
England	53,012,456	45,281,142	85.4%	1,192,879	2.3%	4,143,403	7.8%	1,846,614	3.5%	548,418	1.0%
South East	8,634,750	7,827,820	90.7%	167,764	1.9%	452,042	5.2%	136,013	1.6%	51,111	0.6%
Kent	1,463,740	1,371,102	93.7%	22,107	1.5%	47,614	3.3%	16,216	1.1%	6,701	0.5%
Ashford	117,956	110,520	93.7%	1,682	1.4%	3,991	3.4%	1,375	1.2%	388	0.3%
Canterbury	151,145	140,620	93.0%	2,551	1.7%	5,135	3.4%	1,937	1.3%	902	0.6%
Dartford	97,365	85,070	87.4%	2,161	2.2%	5,799	6.0%	3,578	3.7%	757	0.8%
Dover	111,674	107,966	96.7%	1,029	0.9%	2,031	1.8%	386	0.3%	262	0.2%
Gravesham	101,720	84,226	82.8%	2,066	2.0%	10,604	10.4%	2,885	2.8%	1,939	1.9%
Maidstone	155,143	145,996	94.1%	2,345	1.5%	4,943	3.2%	1,380	0.9%	479	0.3%
Sevenoaks	114,893	110,029	95.8%	1,675	1.5%	2,085	1.8%	853	0.7%	251	0.2%
Shepway	107,969	102,215	94.7%	1,267	1.2%	3,699	3.4%	458	0.4%	330	0.3%
Swale	135,835	131,155	96.6%	1,575	1.2%	1,489	1.1%	1,395	1.0%	221	0.2%
Thanet	134,186	128,194	95.5%	2,186	1.6%	2,504	1.9%	910	0.7%	392	0.3%
Tonbridge & Malling	120,805	115,872	95.9%	1,677	1.4%	2,431	2.0%	421	0.3%	404	0.3%
Tunbridge Wells	115,049	109,239	94.9%	1,893	1.6%	2,903	2.5%	638	0.6%	376	0.3%
Medway Unitary Authority	263,925	236,579	89.6%	5,176	2.0%	13,615	5.2%	6,663	2.5%	1,892	0.7%
Kent & Medway	1,727,665	1,607,681	93.1%	27,283	1.6%	61,229	3.5%	22,879	1.3%	8,593	0.5%

Source: 2011 Census: Key Statistics Table 201, Office for National Statistics (ONS) © Crown Copyright
Presented by Business Intelligence, Research & Evaluation, Kent County Council

Religion

Table 8: Religion in Kent districts, the South East and England in 2011

Table population : All usual residents

	All People	Christian		Buddhist		Hindu		Jewish		Muslim		Sikh		Other religion		No religion		Religion not dated	
		Number	%	Number	%	Number	%	Number	%	Number	%	Number	%	Number	%	Number	%	Number	%
England	53,012,456	31,479,876	60.4%	238,626	0.6%	806,199	1.6%	261,282	0.6%	2,660,116	6.0%	420,196	0.8%	227,825	0.4%	13,114,232	24.7%	3,804,104	7.2%
South East	8,634,750	5,160,128	60.0%	43,946	0.6%	92,499	1.1%	17,761	0.2%	201,651	2.3%	54,941	0.6%	39,672	0.6%	2,388,286	27.7%	635,866	7.4%
Kent	1,463,740	915,200	62.6%	6,802	0.6%	10,943	0.7%	1,777	0.1%	13,932	1.0%	10,545	0.7%	6,145	0.4%	391,591	26.8%	106,805	7.3%
Ashford	117,956	74,253	62.9%	803	0.7%	1,282	1.1%	116	0.1%	1,019	0.9%	95	0.1%	432	0.4%	30,984	26.3%	8,972	7.6%
Canterbury	151,145	91,122	60.3%	880	0.6%	1,055	0.7%	267	0.2%	1,838	1.2%	245	0.2%	760	0.6%	43,117	28.6%	11,861	7.8%
Dartford	97,365	59,045	60.6%	382	0.4%	1,547	1.6%	86	0.1%	1,566	1.6%	1,543	1.6%	319	0.3%	26,486	27.2%	6,391	6.6%
Dover	111,674	71,541	64.1%	523	0.6%	682	0.6%	97	0.1%	521	0.6%	50	0.0%	525	0.6%	29,047	26.0%	8,688	7.8%
Gravesham	101,720	61,891	60.8%	333	0.3%	942	0.9%	54	0.1%	1,894	1.9%	7,743	7.6%	606	0.6%	21,862	21.6%	6,395	6.3%
Maldstone	155,143	97,578	62.9%	901	0.6%	1,492	1.0%	163	0.1%	1,685	1.1%	176	0.1%	612	0.4%	41,493	26.7%	11,043	7.1%
Sevenoaks	114,893	75,169	66.4%	367	0.3%	385	0.3%	196	0.2%	600	0.6%	180	0.2%	348	0.3%	28,939	26.2%	8,709	7.6%
Shepway	107,969	67,296	62.3%	962	0.9%	1,551	1.4%	78	0.1%	796	0.7%	34	0.0%	506	0.6%	28,575	26.6%	8,171	7.6%
Swale	135,835	85,535	63.0%	275	0.2%	368	0.3%	93	0.1%	792	0.6%	158	0.1%	499	0.4%	39,087	28.8%	9,028	6.6%
Thanet	134,186	82,447	61.4%	491	0.4%	639	0.6%	273	0.2%	1,230	0.9%	94	0.1%	690	0.6%	38,383	28.6%	9,939	7.4%
Tonbridge & Malling	120,805	76,920	63.7%	441	0.4%	539	0.4%	122	0.1%	750	0.6%	169	0.1%	412	0.3%	32,996	27.3%	8,456	7.0%
Tunbridge Wells	115,049	72,403	62.9%	444	0.4%	461	0.4%	232	0.2%	1,241	1.1%	58	0.1%	436	0.4%	30,622	26.6%	9,152	8.0%
Medway	263,925	152,637	67.0%	937	0.4%	2,756	1.0%	208	0.1%	5,169	2.0%	3,846	1.6%	1,392	0.6%	78,995	29.9%	17,985	6.8%
Kent & Medway	1,727,665	1,067,837	61.8%	7,739	0.4%	13,699	0.8%	1,985	0.1%	19,101	1.1%	14,391	0.8%	7,537	0.4%	470,586	27.2%	124,790	7.2%

Source: 2011 Census: Key Statistics Table 209, Office for National Statistics (ONS) © Crown Copyright

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Disability and Carer's Responsibilities

All usual residents

	Kent	Ashford	Canterbury	Dartford	Dover	Gravesham	Maidstone	Sevenoaks	Shepway	Swale	Thanet	Tonbridge & Malling	Tunbridge Wells
All people	1,463,740	117,956	151,145	97,365	111,674	101,720	155,143	114,893	107,969	135,835	134,186	120,805	115,049
Day-to-day activities limited a lot	116,407	8,416	12,427	6,621	10,853	7,796	10,660	7,219	10,753	11,742	15,369	7,579	6,972
Day-to-day activities limited a little	140,631	10,669	14,891	8,114	12,404	9,546	13,845	9,872	11,965	13,580	15,979	10,367	9,399
Day-to-day activities not limited	1,206,702	98,871	123,827	82,630	88,417	84,378	130,638	97,802	85,251	110,513	102,838	102,859	98,678
Very good health	683,205	56,128	70,764	47,273	48,433	47,298	74,636	58,796	45,577	60,198	54,640	60,306	59,156
Good health	510,399	41,385	52,338	33,941	39,477	35,572	54,384	38,344	38,999	48,719	47,109	41,475	38,656
Fair health	194,931	15,027	20,211	11,837	16,745	13,629	19,291	13,180	16,465	19,118	22,377	14,263	12,788
Bad health	58,536	4,163	6,133	3,314	5,538	4,104	5,323	3,569	5,321	6,008	7,785	3,728	3,550
Very bad health	16,669	1,253	1,699	1,000	1,481	1,117	1,509	1,004	1,607	1,792	2,275	1,033	899
Provides no unpaid care	1,311,963	106,137	135,562	88,146	99,020	91,410	139,582	102,948	95,663	121,577	118,684	108,724	104,510
Provides 1 to 19 hours unpaid care a week	97,464	7,686	10,089	5,927	7,892	6,371	10,472	8,501	7,465	8,351	8,925	8,258	7,527
Provides 20 to 49 hours unpaid care a week	18,432	1,428	1,815	1,126	1,579	1,383	1,728	1,190	1,663	1,897	2,190	1,321	1,112
Provides 50 or more hours unpaid care a week	35,881	2,705	3,679	2,166	3,183	2,556	3,361	2,254	3,178	4,010	4,387	2,502	1,900

	Kent	Ashford	Canterbury	Dartford	Dover	Gravesham	Maidstone	Sevenoaks	Shepway	Swale	Thanet	Tonbridge & Malling	Tunbridge Wells
All people aged 16 to 64*	917,880	73,443	97,526	63,390	68,865	64,674	98,962	70,814	66,345	85,916	80,143	75,394	72,408
Day-to-day activities limited a lot: Age 16 to 64	47,613	3,489	4,762	2,718	4,473	3,418	4,182	2,564	4,517	5,357	6,459	2,948	2,726
Day-to-day activities limited a little: Age 16 to 64	65,065	5,107	6,612	3,955	5,815	4,521	6,457	4,182	5,458	6,728	7,325	4,607	4,298
Day-to-day activities not limited: Age 16 to 64	805,202	64,847	86,152	56,717	58,577	56,735	88,323	64,068	56,370	73,831	66,359	67,839	65,384

2011 Census Table KS301: Health and provision of unpaid care

Source: 2011 Census: Office for National Statistics (ONS) © Crown Copyright

Presented by Business Intelligence, Research & Evaluation,
Kent County Council

Table population: All usual residents
(PERCENTAGES)

All usual residents

	Kent	Ashford	Canterbury	Dartford	Dover	Gravesham	Maidstone	Sevenoaks	Shepway	Swale	Thanet	Tonbridge & Malling	Tunbridge Wells	Medway	Kent & Medway
All people	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
Day-to-day activities limited a lot	8.0%	7.1%	8.2%	6.8%	9.7%	7.7%	6.9%	6.3%	10.0%	8.6%	11.5%	6.3%	6.1%	7.5%	7.9%
Day-to-day activities limited a little	9.6%	9.0%	9.9%	8.3%	11.1%	9.4%	8.9%	8.6%	11.1%	10.0%	11.9%	8.6%	8.2%	8.9%	9.5%
Day-to-day activities not limited	82.4%	83.8%	81.9%	84.9%	79.2%	83.0%	84.2%	85.1%	79.0%	81.4%	76.6%	85.1%	85.8%	83.6%	82.6%
Very good health	46.7%	47.6%	46.8%	48.6%	43.4%	46.5%	48.1%	51.2%	42.2%	44.3%	40.7%	49.9%	51.4%	45.7%	46.5%
Good health	34.9%	35.1%	34.6%	34.9%	35.4%	35.0%	35.1%	33.4%	36.1%	35.9%	35.1%	34.3%	33.6%	36.3%	35.1%
Fair health	13.3%	12.7%	13.4%	12.2%	15.0%	13.4%	12.4%	11.5%	15.2%	14.1%	16.7%	11.8%	11.1%	13.0%	13.3%
Bad health	4.0%	3.5%	4.1%	3.4%	5.0%	4.0%	3.4%	3.1%	4.9%	4.4%	5.8%	3.1%	3.1%	3.9%	4.0%
Very bad health	1.1%	1.1%	1.1%	1.0%	1.3%	1.1%	1.0%	0.9%	1.5%	1.3%	1.7%	0.9%	0.8%	1.1%	1.1%
Provides no unpaid care	89.6%	90.0%	89.7%	90.5%	88.7%	89.9%	90.0%	89.6%	88.6%	89.5%	88.4%	90.0%	90.8%	90.5%	89.8%
Provides 1 to 19 hours unpaid care a week	6.7%	6.5%	6.7%	6.1%	7.1%	6.3%	6.7%	7.4%	6.9%	6.1%	6.7%	6.8%	6.5%	5.7%	6.5%
Provides 20 to 49 hours unpaid care a week	1.3%	1.2%	1.2%	1.2%	1.4%	1.4%	1.1%	1.0%	1.5%	1.4%	1.6%	1.1%	1.0%	1.3%	1.3%
Provides 50 or more hours unpaid care a week	2.5%	2.3%	2.4%	2.2%	2.9%	2.5%	2.2%	2.0%	2.9%	3.0%	3.3%	2.1%	1.7%	2.5%	2.5%

* Total for all people aged 16 to 64 taken from table KS102 - Age structure

	Kent	Ashford	Canterbury	Dartford	Dover	Gravesham	Maidstone	Sevenoaks	Shepway	Swale	Thanet	Tonbridge & Malling	Tunbridge Wells	Medway	Kent & Medway
All people aged 16 to 64*	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
Day-to-day activities limited a lot: Age 16 to 64	5.2%	4.8%	4.9%	4.3%	6.5%	5.3%	4.2%	3.6%	6.8%	6.2%	8.1%	3.9%	3.8%	5.3%	5.2%
Day-to-day activities limited a little: Age 16 to 64	7.1%	7.0%	6.8%	6.2%	8.4%	7.0%	6.5%	5.9%	8.2%	7.8%	9.1%	6.1%	5.9%	7.1%	7.1%
Day-to-day activities not limited: Age 16 to 64	87.7%	88.3%	88.3%	89.5%	85.1%	87.7%	89.2%	90.5%	85.0%	85.9%	82.8%	90.0%	90.3%	87.5%	87.7%

Marriage and Civil Partnerships

2011 Census Key Statistics Table 103: Marital and civil partnership status

Presented by Business Intelligence, Research & Evaluation, Kent County Council

Table population: All usual residents aged 16 and over

	All people aged 16 and over	Single (never married or never registered a same-sex civil partnership)		Married		In a registered same-sex civil partnership		Separated (but still legally married or still legally in a same-sex civil partnership)		Divorced or formerly in a same-sex civil partnership which is now legally dissolved		Widowed or surviving partner from a same-sex civil partnership	
		Number	%	Number	%	Number	%	Number	%	Number	%	Number	%
Kent	1,180,186	369,334	31.3%	576,067	48.8%	2,388	0.2%	32,802	2.8%	112,916	9.6%	86,679	7.3%
Ashford	93,411	27,080	29.0%	48,288	51.7%	199	0.2%	2,611	2.8%	8,853	9.5%	6,380	6.8%
Canterbury	125,971	48,662	38.6%	54,131	43.0%	310	0.2%	2,863	2.3%	10,602	8.4%	9,403	7.5%
Dartford	77,342	26,741	34.6%	36,439	47.1%	140	0.2%	2,248	2.9%	6,785	8.8%	4,989	6.5%
Dover	91,382	26,924	29.5%	44,096	48.3%	242	0.3%	2,710	3.0%	9,820	10.7%	7,590	8.3%
Gravesham	80,964	26,202	32.4%	39,473	48.8%	111	0.1%	2,345	2.9%	7,008	8.7%	5,825	7.2%
Maidstone	125,476	37,567	29.9%	64,344	51.3%	206	0.2%	3,367	2.7%	11,458	9.1%	8,534	6.8%
Sevenoaks	92,481	25,276	27.3%	50,388	54.5%	175	0.2%	2,082	2.3%	7,773	8.4%	6,787	7.3%
Shepway	88,760	27,300	30.8%	41,591	46.9%	240	0.3%	2,713	3.1%	9,673	10.9%	7,243	8.2%
Swale	108,539	33,978	31.3%	52,439	48.3%	197	0.2%	3,500	3.2%	10,835	10.0%	7,590	7.0%
Thanet	108,556	34,051	31.4%	47,911	44.1%	270	0.2%	3,591	3.3%	12,873	11.9%	9,860	9.1%
Tonbridge & Malling	95,821	26,932	28.1%	51,132	53.4%	166	0.2%	2,408	2.5%	8,869	9.3%	6,314	6.6%
Tunbridge Wells	91,483	28,621	31.3%	45,835	50.1%	132	0.1%	2,364	2.6%	8,367	9.1%	6,164	6.7%

North Deal Primrose (Dover)

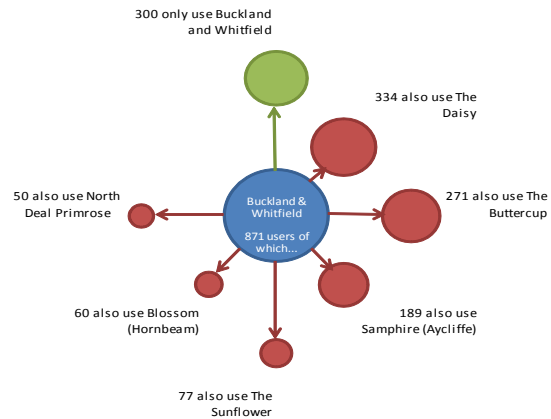
Appendix D – Centre Usage & Needs Analysis

Children's Centre Review - Summary Evidence (Dover)

Centre Usage

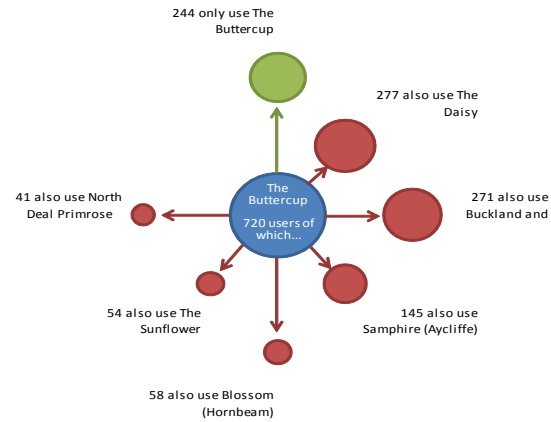
Buckland and Whitfield Children's Centre

Round: R1



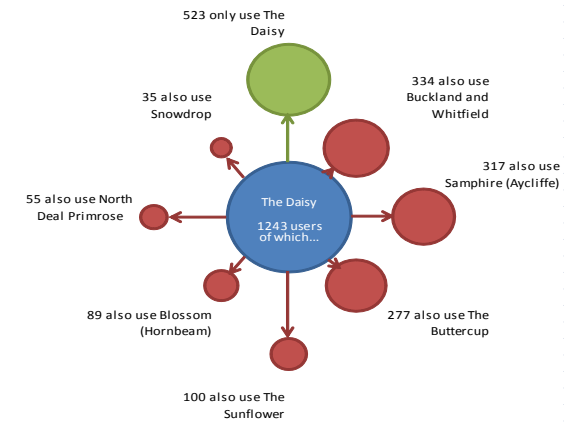
The Buttercup Children's Centre

Round: Ex SSLP



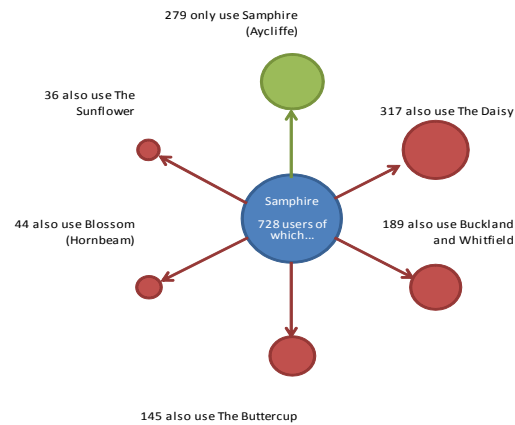
The Daisy Children's Centre

Round: R1



Samphire Children's Centre (Aycliffe)

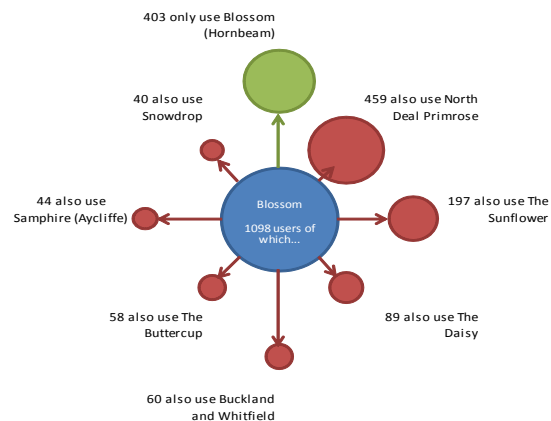
Round: R2



Centre Usage - Continued

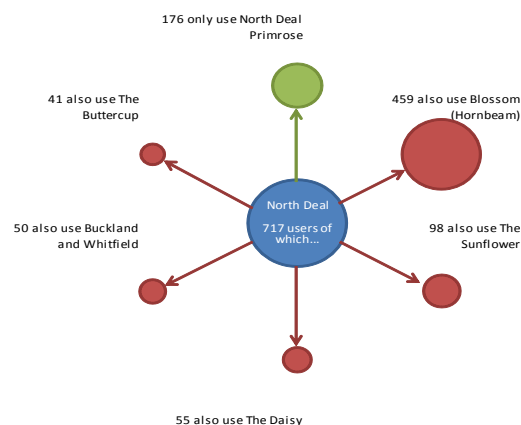
Blossom Children's Centre (Hornbeam)

Round: R2



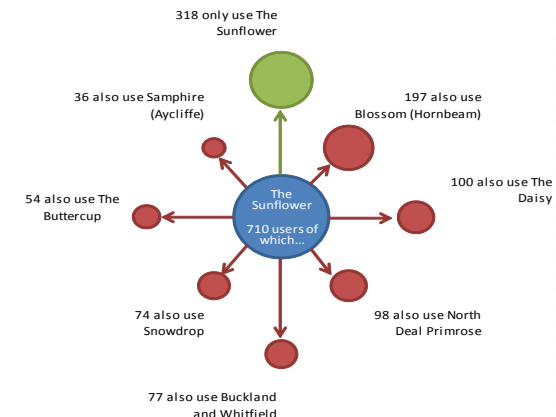
North Deal Primrose Children's Centre

Round: R3



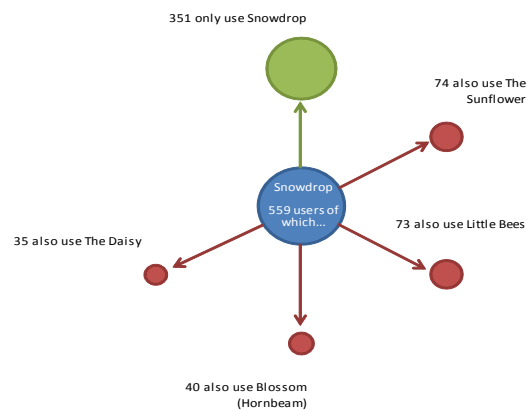
The Sunflower Children's Centre

Round: R2



Snowdrop Children's Centre

Round: R1



Technical Notes:

Based on an analysis of activity data taken from Estart, covering 1st October 2011 to 30th September 2012

Usage bubble chart shows other centres used. In most cases, other centres used by >30 children are shown, up to a maximum of 7 other centres

This analysis is child-based (counting each child only once against each centre they have attended, regardless of frequency), and covers attendees from both within and outside of the registered area (although anonymous attendees are not included).

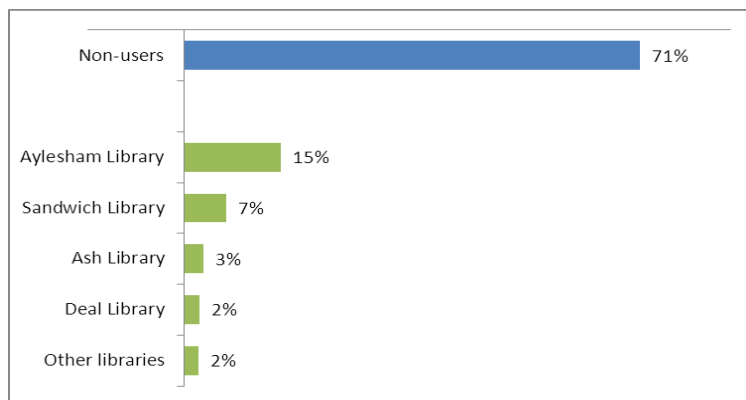


Library Usage Amongst Children's Centre Users

Snowdrop Children's Centre

Round: R1

Library Usage Amongst Families Using Snowdrop Children's Centre



This analysis has not been conducted for any other centres in Dover

Library data relates to users either borrowing or renewing an item between April 2011 and March 2012

Children's centre data based on activity data taken from Estart, covering 1st October 2011 to 30th September 2012

Analysis has been conducted for a list of libraries identified by the library service.

Usage Summary

	Buckland and Whitfield	The Buttercup	The Daisy	Samphire (Aycliffe)	Blossom (Horn-beam)	North Deal Primrose	The Sunflower	Snowdrop	Kent Average
Total number of children seen (reach)	871	720	1243	728	1098	717	710	559	615
% of children who <u>only</u> went to this Centre over the period	34%	34%	42%	38%	37%	25%	45%	63%	49%
Attendance frequency									
<i>Just once</i>	28%	30%	25%	46%	26%	40%	25%	29%	35%
<i>Less than once a month (2-11 times)</i>	40%	36%	45%	33%	37%	35%	34%	56%	47%
<i>1-2 times a month (12-24 times)</i>	7%	8%	15%	7%	9%	12%	16%	10%	10%
<i>At least fortnightly (25-49 times)</i>	22%	25%	14%	13%	25%	11%	20%	4%	6%
<i>At least weekly (50+ times)</i>	2%	1%	1%	1%	2%	1%	5%	1%	2%
Frequent users	35%	36%	31%	23%	40%	27%	43%	22%	24%
Average visits per child	12.7	12.0	9.7	8.0	14.8	8.7	13.8	6.3	8.3
Age (at 1st Oct 2012)									
Under 1	16%	13%	12%	16%	14%	13%	13%	20%	21%
1	21%	20%	17%	15%	17%	19%	17%	20%	26%
2	19%	17%	19%	18%	17%	18%	20%	18%	21%
3	20%	23%	20%	23%	21%	19%	22%	19%	16%
4	18%	19%	20%	20%	22%	21%	20%	17%	11%
5	6%	7%	12%	9%	9%	9%	6%	7%	4%

Catchment Analysis

Need level - based on volume (Numbers)	Average	Average	Average	Average	Average	Low	Average	Average	
Need level - based on penetration (%)	High	High	High	Average	Low	Average	High	Average	
Population projection for 0-5s (provisional)	Up	Up	Up	Up	Similar	Up	Up	Up	Similar

Technical Notes:

Usage statistics based on an analysis of activity data taken from Estart, covering 1st October 2011 to 30th September 2012

Frequent users: Are defined as children recorded as having used the centre 12+ times over the year, with an adjustment made for under 1's

Catchments: Needs are assessed based on the population (with 0-11 year olds) living within the calculated 'actual/natural' catchment for each centre. In this analysis catchments are built at LSOA-level, with each LSOA in Kent allocated to a centre on the basis of the centre that has the most current users living in that LSOA area.

Need Statistics: Levels of need are calculated both in terms of the total volume of need (i.e. numbers of children/households of a range of 11 need types) and in terms of the penetration of the need (i.e. the % of children/households of each of a range of 11 need types)

Population projections: Based on Ward-level projections for 2026, produced by Research & Intelligence, Kent County Council.

Green font indicates the centre is upper quartile on this measure

Red font indicates the centre is lower quartile on this measure

North Deal Primrose (Dover)

Appendix E – District Workshop (4th Feb 2013) Feedback Report

Kent Children's Centre Programme - 'Local Solutions' District Workshops

Select a District: **Dover**

This document provides an analysis of the feedback forms completed by attendees to the 'Local Solutions' District workshops, held during February 2013. A total of 331 completed forms were received and analysed across all 12 Districts, although it should be noted that at District levels totals are fairly small.

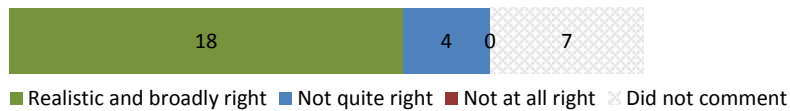
1. The Future Service Options Review aims to look at:

WHAT services are delivered,

WHERE they are accessed or delivered from, and

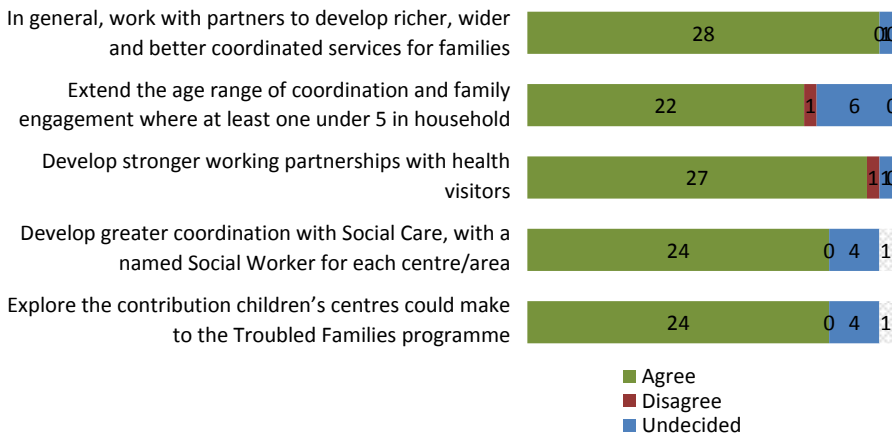
HOW the service is structured to plan and deliver within its financial constraints?

Do you think these aims are the right ones?



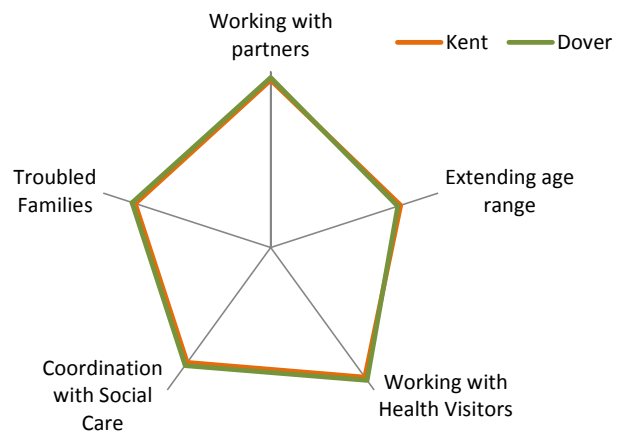
The majority of the attendees to the Dover workshop who responded feel that the Review aims are realistic and broadly right.

2. Service Development: Exercise 1a - No Wrong Front Door



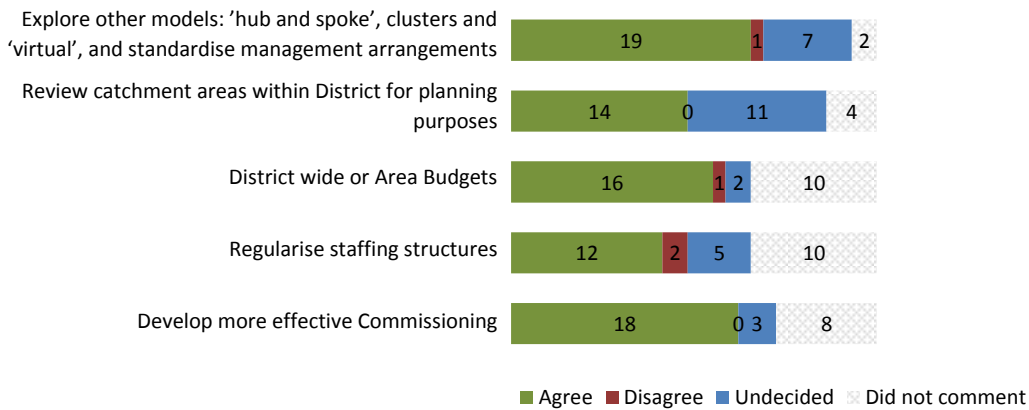
There are high levels of agreement with all areas. However, there is particularly strong agreement that we should, in general, seek to work with partners to develop richer, wider and better coordinated services for families, and that we should seek to develop stronger working relationships with health visitors.

Agreement Levels - Comparison With County Average



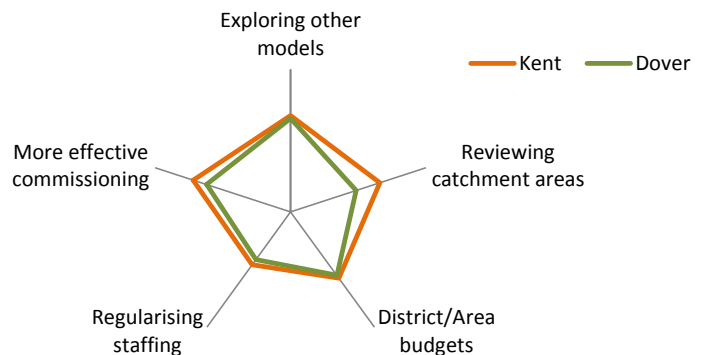
The pattern of responses in Dover is very similar to that for the County overall, with levels of support highest for working with partners, and for developing stronger working relationships with health visitors.

2. Service Development: Exercise 1b - District Planning



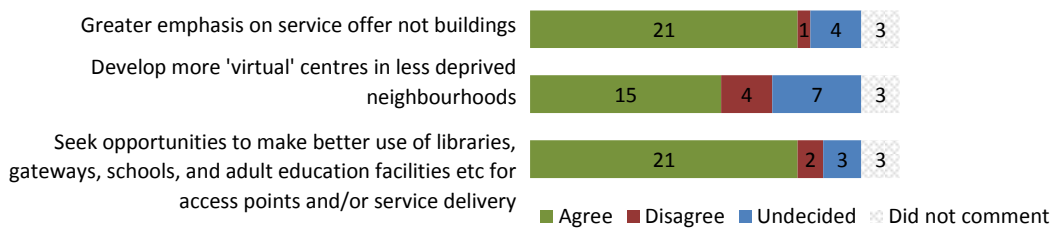
Exploring other models and developing effective commissioning have the highest levels of support in Dover. Less than half of participants agree with reviewing the catchment areas, or regularising staff structures.

Agreement Levels - Comparison With County Average



The pattern of responses in Dover is similar to that for the County overall, with the exception of reviewing of the catchment areas. There appears to be less support for this in Dover, although it should be borne in mind that this result is based on the opinions of 29 individuals.

2. Service Development: Exercise 2 - Scoping Service Delivery and Access Points



Placing a greater emphasis on the service offer and not buildings, and seeking opportunities to make better use of existing facilities have the most support in Dover. Only around half agree with the development of more 'virtual' centres (although the majority of the remainder either indicated being undecided or did not provide an opinion).

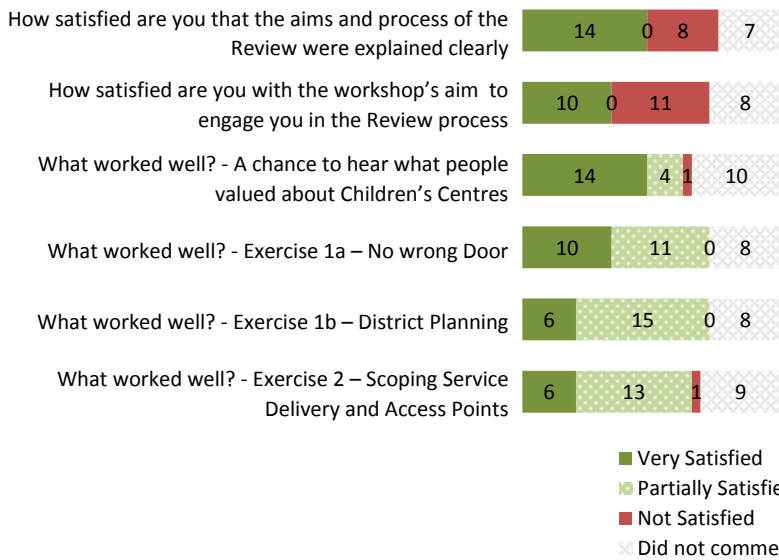
Agreement Levels - Comparison With County Average



The pattern of responses in Dover is similar to that for the County overall, with the exception of placing a greater emphasis on the service offer and not buildings. There appears to be more support for this in Dover, although this does not seem to translate into greater support for more 'virtual' centres, or for the use of other community facilities. (It should also be borne in mind that this result is based on the opinions of 29 individuals.)

3. This workshop was part of the process to engage you in the Future Service Options Review

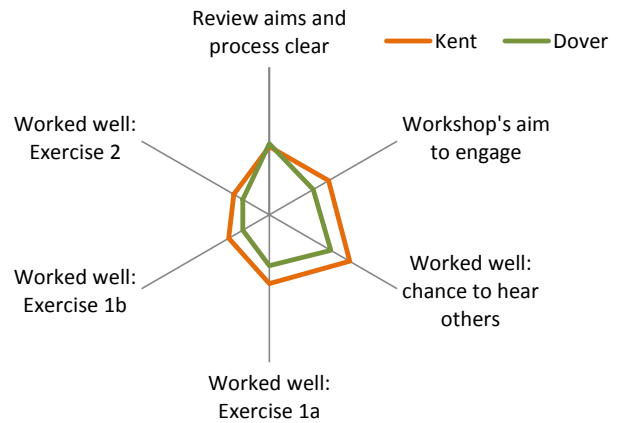
4. What worked particularly well in the workshop?



Opinions were divided in Dover in respect of the aims and process of the Review having been explained clearly, and with the workshop's aim to engage them in the Review process, with a significant number of participants expressing dissatisfaction. There is evidence to suggest that satisfaction with the exercises decreased slightly as the workshop went on, so that by Exercise 2 only 6 participants indicated that they were very satisfied, compared with 10 at Exercise 1a.

Satisfaction Levels ('Very Satisfied') - Comparison With County Average

The pattern of responses in Dover is not dissimilar to that for the County overall, with satisfaction levels with the exercises dropping as the workshop went on. There is some evidence to suggest that levels of participants feeling 'very satisfied' are generally slightly lower in Dover than for the County overall, with the exception of satisfaction that the aims and process of the Review having been explained clearly.



Summary

In terms of levels of agreement, the following garnered the support of more than 80% of participants at the Dover workshop:

- In general, work with partners to develop richer, wider and better coordinated services for families
- Develop stronger working partnerships with health visitors
- Develop greater coordination with Social Care, with a named Social Worker for each centre/area
- Explore the contribution children's centres could make to the Troubled Families programme

North Deal Primrose (Dover)

Appendix F – District Workshop (4th Feb 2013) Independent Report

CHILDREN'S CENTRES FUTURE SERVICE OPTIONS REVIEW WORKSHOP: DOVER

The Dover workshop was one of a series of workshops held in every Kent District, engaging children's centre leaders, partners and other stakeholders, in a Future Service Options Review of the children's centres programme in Kent. The Review aims to explore:

- **What** services were delivered, in particular looking at the effectiveness of partnerships and the targeting of resources to those who could benefit most;
- **Where** the services are delivered from, and the scope for changes to delivery and access points could improve access and cost effectiveness;
- **How** the services are structured, and whether changes could deliver more consistency where appropriate, better targeting of expenditure, and cost savings;

A summary of contributions is given below, and detailed records of all the written contributions follow.

Aims of the Future Service Options Review

In individual feedback forms, there was consensus that "what, where and how" were the right areas for the review. Individual comments suggested building on the current methods of service delivery and to undertake further analysis of community needs. Participants have indicated a range of options about children's centre models and catchments areas, all of which require further assessment. The focus is on supporting the specific needs of the migrant community whilst also considering services available in rural areas.

Icebreaker

The ice breaker established the qualities of Dover's children's centres and their staff, and their place in the lives of families and communities. They are valued because of their welcoming environment and professional staff. They are recognised as being an important community resource and a place to deliver both universal and targeted services.

"No Wrong Door" – improving partnership effectiveness

In general, there is recognition that closer partnership working with education, health and social care colleagues is essential to achieving a successful early intervention service. Employability services offered by JCP, Adult Education and others could be further developed, new methods of supporting the employability agenda have been identified via Gateway Taktix, G4S and Avanta. To develop the role of parents in the delivery of services to enable professional staff to focus more on those most in need by expanding the current volunteering and buddying schemes.

The voluntary sector have much to offer – local knowledge and experience, and a number of existing groups where further links can be developed to support families in need.

North Deal Primrose (Dover)

The partnership with health is dependent on developing links and commissioning arrangements with health visitors (0-4 years), school nurses (school age), midwifery clinics, CAMHS and SALT. It was suggested that there is increased potential for children's centres to support the delivery of the Child Health Programme via health professionals being based in children's centres, receiving new birth data, joint records, shared data bases, links with school nurses, the delivery of drop in clinics and joint groups. District level planning would continue to help drive this agenda forward.

The links between Dover's schools and children's centres varied enormously. There are a number of references to the challenges that arise when engaging with academies and primary schools which are not co-located with children's centres.

Dover's children's centres already receive referrals from primary schools, recognise the sibling agenda and are keen to continue to develop partnership working which includes a seamless transition. Support for the 0-11 agenda to be achieved by a multi-agency joined up approach with shared outcomes and targets. A shared approach to family support might better co-ordinate the support to identified families, and make better use of the overall resources.

Though current arrangement between Dover's children's centres and social care worked well for some families, it was suggested confidence building, early help and identification would improve partnership working. More children's centre engagement and sharing of knowledge re clients with social care will lead to greater consistency, and better co-ordinated service to families in high levels of need. The District highlighted issues about the role of CAF/ pre CAF processes, joint data bases and to share information to support the needs of targeted families.

Participants were keen to involve children's centres and their partners in the Troubled Families Initiative; this programme is at an early stage with information on the families and lead professionals to be clarified.

In individual feedback forms, the "no wrong door" principle was overwhelmingly supported.

District Level Planning

Participants supported district level resourcing (which is currently in place), and saw opportunities there to plan and deliver more responsive services by building on the existing model (working well), unrestricted by outdated catchment areas, and potentially pool or share resources with other partners and generate income. Staffing structures need to recognise the value of experienced staff and role of outreach workers, more peripatetic staff and admin functions could be centralised.

Participants listed a range of buildings and catchment areas that could be reviewed based on further analysis these included; - bring Snowdrop into a district offer (services), North Deal could be 'reduced', consider one centre in Dover, North and South divide is a potential for two areas and relocate to larger centres in town at a central location for ease of access and rural hubs with local satellites.

New methods of service delivery were suggested these included ; - 'One front desk' creating a single standard for Kent residents by whichever way families choose to contact Kent,

North Deal Primrose (Dover)

partnerships with other community delivery agents, building partnership working based on need and a centralised reception 'Hot Line'.

In individual feedback forms, more district level planning is supported as long as it planned sensitively in line with local knowledge and community need.

Service and Access Points

Key services point's opportunities to be investigated in Dover include the Gateways, the Discovery Centre, health/NHS premises and co-location of services and the hiring and cost of community facilities. The children's centre buildings could be used by other organisations.

In individual feedback forms, the majority of participants supported the principle of a premises review. Comments stressed the emphasis in Dover District has always been on service delivery not buildings.

Bob Allen & David Wallis

Appendix 2

<p>Conclusions from consultation evidence by protected characteristic</p>	<p>General: The vast majority of those electing to respond to the consultation disagree to some extent with reducing the number of Children’s Centres (87%, 5,098 individuals/professionals.). Of these 5,098 individuals/professionals, 134 indicated that their objection related to the proposed closure of Primrose (with 94 of these 134 objecting to the proposed closures of other named Centres <u>as well as</u> Primrose).</p> <p>94% of the users of Primrose responding to the consultation disagree with reducing the number of children’s centres and just 3% agree. This compares with 89% and 5% respectively of all responses to the consultation countywide from users of Children’s Centres, and so represents a <u>higher</u> level of disagreement with the proposal.</p> <p>Amongst those members of the public who objected to the closure of Primrose, 16% (19 individuals) indicate that they will not use Children’s Centres at all as a result (which is a <u>much lower</u> proportion than the 26% of all members of the public objecting to the proposed closures countywide).</p>
	<p>Age:</p> <p><u>Parents 0-4</u> 83% of those objecting to the proposed closure of Primrose are parents of 0-4s, which is similar to the 85% of all those members of the public objecting to the proposed closures countywide.</p> <p><u>Parents aged 25 or under</u> 20% of those objecting to the proposed closure of Primrose are parents of 0-4s aged 25 or under, which is <u>higher</u> than the 13% of all those members of the public objecting to the proposed closures countywide.</p> <p><u>Teenage mothers</u>⁷ 2% of those objecting to the proposed closure of Primrose are teenage mothers (with 0-4s), which is the same as the 2% of all those members of the public objecting to the proposed closures countywide.</p> <p><u>Pregnant teenagers</u> Less than 0.5% of those objecting to the proposed closure of Primrose are pregnant teenagers, which is the same as the proportion observed across all those members of the public objecting to the proposed closures countywide.</p>
	<p>Disability:</p>

⁷ Mothers: For the purposes of the consultation “mothers” always refers to women with children aged 0-4 years old

	<p><u>Disabled parents</u> 3% of those objecting to the proposed closure of Primrose are disabled parents of 0-4s, which is similar to the 2% of all those members of the public objecting to the proposed closures countywide.</p>
	<p>Gender: 86% of those objecting to the proposed closure of Primrose are female, which is similar to the 88% of all those members of the public objecting to the proposed closures countywide.</p> <p><u>Mothers</u> 74% of those objecting to the proposed closure of Primrose are mothers of 0-4's, which is similar to the 76% of all those members of the public objecting to the proposed closures countywide.</p> <p><u>Fathers⁸</u> 6% of those objecting to the proposed closure of Primrose are fathers of 0-4's, which is similar to the 7% of all those members of the public objecting to the proposed closures countywide.</p>
	<p>Gender identity: Less than 0.5% of those objecting to the proposed closure of Primrose identified themselves as being parents of 0-4's having a gender different to that of their birth, which is the same as the proportion observed across all those members of the public objecting to the proposed closures countywide.</p>
	<p>Race:</p> <p><u>Parents from minority ethnic groups</u> 7% of those objecting to the proposed closure of Primrose are parents of 0-4s from ethnic minority groups, which is similar to the 9% of all those members of the public objecting to the proposed closures countywide.</p> <p><u>Gypsy, Roma and traveller parents</u> 1% of those objecting to the proposed closure of Primrose are Gypsy/Roma and traveller parents of 0-4's, which is in line with the <0.5% of all members of the public objecting to the proposed closures countywide.</p> <p><u>Parents with English as an additional language</u> 3% of those objecting to the proposed closure of Primrose are parents of 0-4s with English as an additional language, which is similar to the 5% of all those members of the public objecting to the proposed closures countywide.</p>

⁸ Fathers: For the purposes of the consultation "fathers" always refers to men with children aged 0-4 years old

	<p>Religion or belief</p> <p><u>Christian parents</u> 36% of those objecting to the proposed closure of Primrose are Christian parents of 0-4's, which is similar to the 39% of all those members of the public objecting to the proposed closures countywide.</p> <p><u>Buddist parents</u> None of those objecting to the proposed closure of Primrose are Buddhist parents of 0-4's, which is in line with the <0.5% of all those members of the public objecting to the proposed closures countywide.</p> <p><u>Hindu parents</u> None of those objecting to the proposed closure of Primrose are Hindu parents of 0-4's, which is in line with the <0.5% of all those members of the public objecting to the proposed closures countywide.</p> <p><u>Jewish parents</u> None of those objecting to the proposed closure of Primrose are Jewish parents of 0-4's, which is in line with the <0.5% of all those members of the public objecting to the proposed closures countywide.</p> <p><u>Muslim parents</u> 1% of those objecting to the proposed closure of Primrose are Muslim parents of 0-4's, which is the same as the 1% of all those members of the public objecting to the proposed closures countywide.</p> <p><u>Sikh parents</u> None of those objecting to the proposed closure of Primrose are Sikh parents of 0-4's, which is in line with the <0.5% of all those members of the public objecting to the proposed closures countywide.</p> <p><u>Parents of any other religion</u> 2% of those objecting to the proposed closure of Primrose are parents of 0-4's with an 'other' religion, which is the same as the 2% of all those members of the public objecting to the proposed closures countywide.</p> <p><u>Parents of no stated religion</u> 38% of those objecting to the proposed closure of Primrose are parents of 0-4's indicated that they have no religion, which is similar to the 35% of all those members of the public objecting to the proposed closures countywide.</p> <p>Sexual orientation:</p> <p><u>Lesbian, Gay and transgender parents</u> None of those objecting to the proposed closure of Primrose are Lesbian, Gay or transgender parents of 0-4's, which is in line with the <0.5% of all those members of the public objecting to the proposed closures countywide.</p>
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	<p>Pregnancy and maternity: <u>Will be a parent soon</u> 5% of those objecting to the proposed closure of Primrose indicated that they would be a 'parent/carer soon', which is similar to the 4% of all those members of the public objecting to the proposed closures countywide.</p>
	<p>Marriage and Civil Partnerships: <u>Lone parents</u> 19% of those objecting to the proposed closure of Primrose are lone parents of 0-4's, which is <i>higher</i> than the 13% of all those members of the public objecting to the proposed closures countywide. <u>Parents in a civil partnership</u> None of those objecting to the proposed closure of Primrose are parents of 0-4's in a civil partnership, which is in line with the <0.5% of all those members of the public objecting to the proposed closures countywide.</p>
	<p>Carers responsibilities: Carer data was not gathered as part of the consultation activity</p>

Appendix 3

Table 1 General profile of public objectors to the closure of Primrose

Protected characteristic	Objectors to the closure of Primrose (percentages relate to all objectors)
Age	Most (62%) of objectors were aged between 20 and 35. A further 16% were aged 36-40. Teenage mothers comprised 2% of objectors.
Disability	The majority (81%) of objectors did not consider themselves to have a disability; just 4% considered that their day-to-day activities were 'limited a lot' because of a health problem or disability. Parents with a disability made up 3% of objectors.
Gender	The majority (86%) of objectors were female with around three-quarters of the objections from mothers of children under 5 years. Fathers of children aged 5 or under made up 6% of objectors.
Gender identity	No objector's gender identity was different to that at birth.
Marriage and civil partnerships	Two-thirds (69%) of objectors were either married, in a civil partnership or cohabiting and 19% of objections were from lone parents of under 5's.
Pregnancy and maternity	Those who would be a parent soon made up 5% of objectors. Most (83%) objectors were parents / carers of children under age 5; just under one-quarter were parents / carers of children aged 5-11; and 8% were parents / carers of children aged 12-18.
Race	Most objectors (85%) were White British, with the second largest (2%) group of objectors being White Other, and 3% had English as an additional language.
Religion or belief	Objectors were fairly evenly split between those who were Christian and those who had no religion (45% and 42% respectively). Those of other religions made up 3% of objectors. The remainder of objectors did not respond to the question.
Sexual orientation	Most objectors (87%) were heterosexual (with 12% not responding to the question).
Carer's responsibilities	Covered by other parent categories.

Table 2 Responses to the consultation

General responses of objectors
Data on objectors
<ul style="list-style-type: none"> • There were 134 objections to the closure of Primrose which represented approximately 3% of all objections (including objections from professionals). • Of the 134 that objected to the changes with respect to Primrose CC, 84% strongly disagreed and 16% disagreed. • Of the 134 objections to closure of centres including Primrose, 40 only objected to changes to Primrose. • Of the 134 objections, 121 were from the public and 13 were from professionals. • Of the 121 objections to closure of centres including Primrose from the public, 37 only objected to the changes with respect to Primrose. • There were 36 users of Primrose that responded to the consultation and of these 94% objected. • There were 29 objections to the closure of Primrose specifically from all users of Primrose and of these 13 were from users who only accessed Primrose.

- Of the 13 objections to closure of centres including Primrose from the professionals, 3 only objected to the changes with respect to Primrose.
- Just 3 of the 13 objections from professionals were from Children's Centre staff, with 2 of these only objecting to the closure of Primrose.

Impact on the public

- A small number of respondents, whose objection included changes to Primrose (15%), said that the proposals would have no impact; by implication there would be an impact on the majority of respondents.
- 42% of objectors said that they would use children's centres less often
- 16% said they would not use a children's centre at all.
- The most popular reason given for using centres less often or not at all were because it would make travel to centres more difficult or alternative centres were too distant.
- Objectors also commented that children's centres formed a local community hub with a chance to meet people.
- 44% of all users and 5 of the 13 sole users of Primrose Children's Centre said that if the centre closed they would use a centre less often.
- 35% of all users and 6 of the 13 sole users of Primrose Children's Centre said that if the centre closed they would not use a centre at all.
- 26% of all users and 2 of the sole users of Primrose Children's Centre said that if the centre closed they would attend alternative (non-children's centre) facilities.

Example verbatim comments from the public

As a single mother reducing Children's Centres in this area will make it more difficult for me to get to.

The reason I will use the centre less or not at all is due to the distance of the next closest centre, which is an hour's walk.

Professionals view of impacts

Of the 10 professionals who responded with comments on their objections to centre closures including Primrose:

- 6 considered that children and families will miss out.

Example verbatim comments from professionals

For a town the size of Deal the total loss of the Children's Centre provision would be keenly felt - particularly by those families and carers of children on limited budgets.

If the Primrose centre closes, more families could come to Blossom instead, making it over crowded and families may not receive the support they need....