

# Public Document Pack



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PUBLIC

To: Members of Cabinet

Friday, 19 April 2024

Dear Councillor,

Please attend a meeting of the **Cabinet** to be held at **2.00 pm** on **Monday, 29 April 2024** in Committee Room 1, County Hall, Matlock, the agenda for which is set out below.

Yours faithfully

A handwritten signature in black ink that reads 'Helen E. Barrington'.

**Helen Barrington**  
**Director of Legal and Democratic Services**

## **A G E N D A**

1. To receive apologies for absence
2. To receive declarations of interest (if any)
3. To consider Minority Group Leader questions (if any)

Minority Group Leaders in attendance at the meeting are able to ask a question on a report on the agenda. Any questions should be provided in writing by 12 noon at least 2 working days before the meeting.

4. To approve, as a correct record, the non-exempt minutes of the meeting held on 11 April 2024. (Pages 1 - 4)
5. Residential care and day care for older people (Pages 5 - 24)

6. Proposal to Consult on the Future Sustainability of Adult Social Care Discretionary Grants (Pages 25 - 46)
7. Journal Transfer to enable Public Health funding to support Children's Centres (Pages 47 - 54)
8. Proposal to consult on the cessation of Strategy and Policy discretionary grant funding (Pages 55 - 72)
9. Early Help and Children's Centres in Derbyshire (Pages 73 - 176)
10. Permission to consult on the contribution to care policy (Pages 177 - 182)
11. The Curzon CE (Aided) Primary School - Outcome of consultation of enlargement of Premises (Pages 183 - 188)
12. Children's Services Section 106 Allocations (Pages 189 - 194)
13. Bus Service Improvement Plan Refresh (Pages 195 - 204)
14. Bus Service Improvement Plan - Acceptance of BSIP Phase 3 Funding (Pages 205 - 212)
15. Exclusion of the Public

To move "That under Regulation 4 (2)(b) of the Local Authorities (Executive Arrangements) (Meetings and Access to Information) (England) Regulations 2012, the public be excluded from the meeting for the following items of business on the grounds that in view of the nature of the items of business, that if members of the public were present, exempt information as defined in Paragraph 3 of Part 1 of Schedule 12A to the Local Government Act 1972 would be disclosed to them."

## **PART II - EXEMPT ITEMS**

16. To approve, as a correct record, the exempt minutes of the meeting held on 11 April 2024 (Pages 213 - 214)
17. Bus Real Time Information Systems in Derbyshire (Pages 215 - 222)
18. Urgent Decision taken by the Executive Director Place to Accept the Zero Emissions Bus Regional Area Grant Funding from the Department for Transport (Pages 223 - 256)

PUBLIC

**MINUTES** of a meeting of **CABINET** held on Thursday, 11 April 2024 in Committee Room 1, County Hall, Matlock.

## **PRESENT**

Councillor B Lewis (in the Chair)

Councillors S Spencer, C Cupit, A Dale, C Hart, N Hoy, T King, J Patten and C Renwick.

Officers present: Emma Alexander (Managing Director), Helen Barrington (Director of Legal and Democratic Services), Carol Cammiss (Executive Director - Children's Services), Ellie Houlston (Director of Public Health), Mark Kenyon (Director of Finance), Joe O'Sullivan (Executive Director - Corporate Services and Transformation), Leonardo Tantari (Director of Digital), Claire Brailsford (Director - Environment & Transport), Simon Stevens (Executive Director - Adult Social Care and Health) and Andrea Bond (Democratic Services Manager).

### **61/24 TO RECEIVE DECLARATIONS OF INTEREST (IF ANY)**

None received.

### **62/24 TO CONSIDER MINORITY GROUP LEADER QUESTIONS (IF ANY)**

None received.

### **63/24 TO APPROVE, AS A CORRECT RECORD, THE NON-EXEMPT MINUTES OF THE MEETING HELD ON 14 MARCH 2024**

#### **RESOLVED:**

To approve, as a correct record, the minutes of the meeting held on 14 March 2024.

### **64/24 CLOUD STRATEGY**

Councillor S Spencer introduced a report, which had been circulated in advance of the meeting that provided information in relation to the inherent risks associated with the current ICT infrastructure and applications, and the progress made through initial stabilisation activity.

#### **RESOLVED to:**

- 1) Note the inherent risks relating to the current ICT infrastructure

and applications, and progress already made through initial stabilisation activity;

- 2) Approve the Cloud Strategy 2024 – 2029 attached to the report at Appendix 2 to the report;
- 3) Note the estimated cost profile and fiscal impact described in Appendix 3 to the report and;
- 4) Note alternative options considered.

#### **65/24 ENHANCED FUNDING FOR STOP SMOKING SERVICES**

Councillor C Hart introduced a report, which had been circulated in advance of the meeting in relation to funding for stop smoking services.

##### **RESOLVED to:**

- 1) Agree to accept the additional Government's Stopping the Start funding of £1,083,451 for stop smoking services in Derbyshire in 2024/25;
- 2) Note that the Government is committed to provide the additional Stopping the Start Funding for a five-year period commencing in 2024/25; and
- 3) Agree to delegate authority to the Director of Public Health for the expenditure and use of this funding in line with any grant conditions, Derbyshire County Council Adult Social Care and Health Scheme of Delegation, Derbyshire County Council financial regulations and Public Contract Regulations (2015) and other procedures which may include competitive tendering, necessary to comply with Council requirements.

#### **66/24 SHORT BREAKS AND DAY OPPORTUNITIES FOR PEOPLE WITH A LEARNING DISABILITY AND/OR WHO ARE AUTISTIC**

Councillor N Hoy introduced a report, which had been circulated in advance of the meeting in relation to the proposed consultation with regard to the redesign of short breaks and day opportunities for people with a learning Disability and/or who are Autistic.

It was clarified at the meeting that as part of the decision making the figure quoted at section 4.18 of the report referenced the estimated ongoing maintenance and refurbishment costs for the whole Parkwood site, including, but not solely, the day centre block, for the next 5 years to

maintain it in its current state. Approximately £700,000 of those costs were for the day centre block itself. Whilst these figures had not been counted as part of the potential savings identified in the report at section 1 of appendix 1, it could be assumed that they are additional savings and it is important that Cabinet members recognised this is not the case.

**RESOLVED to:**

- 1) Approve the programme of formal public consultation for a period of 12 weeks on the two proposed options concerning the future of the day opportunities for people with a learning disability and/or who are autistic;
- 2) Approve the programme of formal consultation for a period of 12 weeks on the two proposed options concerning the short break residential units for people with a learning disability and/or who are autistic; and
- 3) Receive a further report following the conclusion of the consultation process, including an updated Equality Impact Analysis.

**67/24      REPURPOSING OF THE GETAWAY AND OUTBACK PROVISION**

This item was withdrawn and deferred to a later date.

**68/24      EXCLUSION OF THE PUBLIC**

**RESOLVED:**

That under Regulation 4(2)(b) of the Local Authorities (Executive Arrangements) (Meetings and Access to Information) (England) Regulations 2012, the public are excluded from the meeting for the remaining business on the grounds that in view of the nature of the items of business, that if members of the public were present, exempt information as defined in Paragraph 3 of Part 1 of Schedule 12A of the Local Government Act 1972 would be disclosed to them.

**69/24      TO APPROVE, AS A CORRECT RECORD, THE EXEMPT MINUTES OF THE MEETING HELD ON 14 MARCH 2024**

**RESOLVED:**

To approve, as a correct record, the exempt minutes of the meeting held on 14 March 2024.

**70/24**     **ACCEPTANCE OF THE NATIONAL BUS FARE CAP GRANT FROM THE DEPARTMENT FOR TRANSPORT**

**RESOLVED:**

To approve the recommendations as detailed in the not for publication report.

**71/24**     **PROPOSED FEE STRUCTURE 2024/2025 - CONCERTUS (DERBYSHIRE) LIMITED**

Councillor S Spencer introduced a report, which had been circulated in advance of the meeting in relation to the Proposed Fee Structure for 2024/2025 for services provided by the Council's joint venture partner, Concertus (Derbyshire) Limited.

**RESOLVED:**

To approve the recommendations as detailed in the not for publication report.

**72/24**     **LONG TERM WASTE MANAGEMENT PROJECT UPDATE**

Councillor S Spencer introduced a report, which had been circulated in advance of the meeting that provided an update in relation to the Long-Term Waste Management Project.

**RESOLVED:**

To approve the recommendations as detailed in the not for publication report.

The meeting finished at 2.35 pm



**FOR PUBLICATION**

**DERBYSHIRE COUNTY COUNCIL**

**CABINET**

**29 April 2024**

**Report of the Executive Director for Adult Social Care and Health**

**Proposed Redesign of Residential Care and Day Opportunities for Older People (Adult Care)**

**1. Divisions Affected**

1.1 County-wide

**2. Key Decision**

2.1 This is a Key Decision because, if the proposed changes are made, it is likely to:

- a) result in the Council incurring expenditure which is, or making savings which are, significant having regard to the budget for the service or function concerned; and
- b) be significant in terms of its effect on communities living or working in an area comprising two or more electoral areas in the County.

**3. Purpose**

3.1 Cabinet is asked to approve the undertaking of a public consultation concerning the future delivery of the Council's residential care homes and day opportunities for older people, including consultation with the current residents and people who attend these services.

## **4. Information and Analysis**

- 4.1 This report outlines two options for public consultation on both the future delivery of residential care and day opportunities directly provided by the Council for older adults.

### Background and context

- 4.2 Derbyshire County Council has ambitious plans to support its residents to live their best life. After conducting a series of engagement exercises, we know that for most people in Derbyshire wherever possible, this means living independently in their own home and communities. Supporting people to live independently in their own homes is a shared priority for health, housing and District and Borough Councils in Derbyshire.
- 4.3 The commissioning work and market analysis set out in Derbyshire's All Age Adults' Housing, Accommodation and Support Strategy 2023 – 2038, clearly demonstrates a declining need for standard residential care as more people choose to stay at home for as long as they can, and a greater need for nursing care and accommodation for people with more complex needs, including dementia, across the county.
- 4.4 Alongside a declining need for standard residential care, we know the number of older people in Derbyshire is increasing and there are increasing numbers of people with dementia. Currently 1 in 11 people in Derbyshire who are over 65 have dementia, which amounts to 15,967 people. This number is expected to increase to 22,260 by 2040 and it is important that there are the right options to support people and their carers now and in the future.
- 4.5 The Council's Carers strategy 2020 – 2025, refreshed in 2022, describes how three in five people will be carers in their lives and that in Derbyshire, collectively, carers represent the largest provider of care and support. In a survey of adult carers undertaken in 21/22, dementia was reported as being the most common reason for a person having caring responsibilities. We know that the majority of carers are over sixty and many have reported feeling stressed at times due to their caring role. In a recent national survey, carers cited the need for a break or respite as one of the top three things they needed. We know that carers are more likely to suffer from a long-term chronic condition than those without caring responsibilities and therefore ensuring there is sufficient respite opportunities across the county is essential to support carers to maintain arrangements for as long as this remains the best and most appropriate option for people.



4.6 Derbyshire, like every other Council up and down the country, is facing significant financial challenges that are outside its control. These include inflationary pressures, staff pay awards agreed nationally but paid locally and continuing increasing demand on our services, particularly in adult care and children's services. Demand for adult social care support has also risen dramatically with the cost of providing care and support accounting for 48% of the Council's overall spending. This means in order to set a balanced budget in 2024/25 as it is legally obliged to do, it is necessary for the Council to review all spending and consider how services may be provided in a different and more efficient way. In order to support the required efficiencies and support the setting of a balanced budget, Adult Social Care Services has put forward a plan to save £5.209M from the budget for the directly provided homes for older people and £1.325M from the day centre provision for older people. To achieve these efficiencies, the proposal is to consolidate the current residential and day services for older people in order to focus on specialist services for people with dementia and their carers.

4.7 The Council is required by law to promote an efficient and effective market, offering variety and high-quality services. It is not required by law to provide any in-house residential care or day centre provision. The Council must therefore review whether providing services directly is the most effective and efficient way of doing things.

#### 4.8 **Current Offer**

##### **Residential care homes and integrated day centres**

The Council owns and runs sixteen residential care homes for older people, which makes it one of the largest local authority providers of residential care in the country. The sixteen homes provide a variety of care and support to people. The detail of the type of care and support provided on each site is set out below and a summary of the different services is provided here:

- Integrated day centres ('IDC') providing support and opportunities for people with significant care needs to socialise while providing respite for carers.
- Residential homes which are situated on the same site as Extra Care units providing continuity and flexibility for people and their loved ones should they require additional care and support as they get older.

- Residential care homes which operate community support beds which are jointly provided by health and social care. These beds are an essential part of the offer in Derbyshire, supporting people who require a short period of assessment and reablement within a residential setting, following hospital admission. These beds are also used to prevent people going into hospital.
- Long term residential care and short breaks

The Council currently operates the following residential care homes, four of which are community care centres:

- Ada Belfield (includes 20 community support beds) – (Amber Valley)
- Bennerley Fields (Erewash)
- Briar Close (Erewash)
- Castle Court (South Derbyshire)
- Florence Shipley (Amber Valley)
- The Grange (North East Derbyshire)
- Lacemaker Court (situated alongside an extra care unit) (Erewash)
- The Leys (Derbyshire Dales)
- Meadow View (includes 16 community support beds) (Derbyshire Dales)
- New Bassett House (Bolsover)
- Oaklands Community Care Centre (includes 16 community support beds and situated alongside an extra care unit) (South Derbyshire)
- Rowthorne (Amber Valley)
- Staveley Centre (includes 16 community support beds) (Chesterfield)
- Thomas Colledge (Bolsover)
- Thomas Fields (includes 10 community support beds and situated alongside an extra care unit) (High Peak)
- Whitestones (High Peak)

The residential homes which include an integrated day centre are;

- Florence Shipley
- Lacemaker Court
- Meadow View
- Oaklands Community Care Centre
- Staveley Centre

#### 4.9 Non-integrated day centres

The Council operates eight day centres for older people which are not situated within a residential care home (referred to in this report as non-integrated).

These services do not provide specialist dementia support and there are other providers in Derbyshire that offer a range of day opportunities to older adults alongside Council operated centres.

The Council currently operates the following day centres;

- Blackwell Day Centre
- Ecclesfold Resource Centre
- Fabrick Day Services
- Hasland Resources Centre
- Jubilee Centre
- Queens Court
- Shirevale Resource Centre
- Valley View Day Centre

#### 4.10 **Proposed redesign**

Given the major budget challenges faced by the Council and the changing needs of the growing elderly population, we are proposing to review our in-house residential and day services offer with a view to developing a revised model with a focus on short-term enablement, specialist dementia care and carer respite for the residents of Derbyshire. This is required to support the Council to meet the current and future demands of local people while ensuring sustainability for adult social care and health so we can continue to support those who need us most.

The community support beds jointly operated with partners in healthcare services support people to return home following a stay in hospital as well as prevent hospital admission. The Council will continue to work with partners to develop this service to support as many Derbyshire residents as possible to remain as independent as possible in accordance with the Best Lives Strategy.

In order to meet current and growing demand for specialist services for people living with dementia and their carers which is described above, our residential and day care offer requires modernisation and consolidation. The proposals set out below would enable us to offer long term specialist residential support and flexible, integrated carer respite within a specialist dementia residential setting. This would include day and night provision for carer short breaks.

This would require consolidation of Council operated residential and day services in order to use the resources available to meet the need

identified for Derbyshire residents as set out in Derbyshire's All Age Adults' Housing, Accommodation and Support Strategy 2023 – 2038 (the Accommodation Strategy).

#### 4.11 **Proposed redesign - Option One**

Retain seven of the residential homes directly provided by the Council to provide a countywide offer consisting of community support beds, specialist dementia residential beds, integrated and flexible specialist dementia day opportunities, respite provision for carers of people living with dementia and integrated dementia residential beds with Extra Care.

To achieve the model set out at paragraph 4.10 we propose to cease to operate standard residential care and focus on high quality, specialist residential and respite dementia services. The non-integrated day centres do not provide for the flexible model we seek to operate in terms of carer respite, for example, day and overnight breaks on the same site is not possible. Therefore, we propose to cease operation of all non-integrated day centres. There are providers currently operating within the private and voluntary sector that are able to offer standard residential and day support.

- 4.12 This option would retain Ada Belfield, Meadow View, Oaklands Community Care Centre, Staveley Centre, Thomas Fields, Florence Shipley and Lacemaker Court. These residential settings have the right requirements to fulfil the model of enablement, specialist dementia care and flexible carer respite including location and integrated day centre facilities.
- 4.13 This option would provide an overall efficiency in the region of £6.6m.
- 4.14 This proposal would involve the Council ceasing to directly operate the following residential homes: Briar Close, Bennerley Fields, Castle Court, The Grange, The Leys, New Bassett House, Rowthorne, Thomas Colledge and Whitestones. Currently there are a total of 135 long term residents in the nine homes.
- 4.15 This option would also involve the Council ceasing to directly operate the non-integrated day centres: Blackwell Day Centre, Ecclesfold Day Centre, Fabrick Day Services, Hasland Resource Centre, Jubilee Centre, Queens Court, Shirevale Resource Centre and Valley View Day Centre. Currently, there are a total of 130 people who attend these day centres.

- 4.16 The residential homes which the Council would cease to operate, would be offered for sale to the open market as a going concern for a set period of time where possible. If these services were not purchased, they would be required to close, and people would be supported throughout to find alternative placements.
- 4.17 Option one would enable the Council to transform and consolidate resources to provide:
- A residential offer specialising in dementia care delivered by the Council across the County, providing dementia specialist care for long term residents and short-term support. These seven residential settings have the right requirements to fulfil the model of enablement through community support beds, specialist dementia care and flexible carer respite.
  - Three care homes with community support beds and dementia specialist residential care beds (Ada Belfield, Meadow View and Staveley Centre).
  - Two care homes with community support beds and dementia specialist residential care beds within Extra Care settings (Oaklands and Thomas Fields).
  - One care home with dementia specialist residential care beds within an Extra Care setting (Lacemaker Court).
  - One care home with specialist dementia residential care beds (Florence Shipley).
  - Five of the seven residential homes have an integrated day centre which would enable a flexible, consistent offer of day and overnight respite for people living at home with dementia and their carers. (Florence Shipley, Lacemaker Court, Meadow View, Oaklands Community Care Centre and Staveley Centre)
- 4.18 Should consultation be approved, and should any services cease to operate following a thorough consultation, the usual Derbyshire County Council procedures would apply to any impacted colleagues and be implemented, as appropriate. Relevant procedures and processes would also be followed as regards to any other stakeholders impacted.

#### 4.19 **Proposed redesign - Option Two**

Retain the five residential homes that currently support the jointly provided community support beds. Alongside the community support beds, this option would allow for specialist dementia residential beds, integrated and flexible specialist dementia respite provision for carers of people living with dementia and some integrated dementia residential beds with Extra Care.

- 4.20 To achieve the model set out at paragraph 4.10 we propose to cease to operate standard residential care and focus on high quality, specialist residential and respite dementia services. The non-integrated day centres do not provide for the flexible model we seek to operate in terms of carer respite, for example, day and overnight breaks on the same site is not possible. Therefore, we propose to cease operation of all non-integrated day services. There are providers currently operating within the private and voluntary sector that are able to offer standard residential and day support.
- 4.21 This option would retain Ada Belfield, Meadow View, Oaklands Community Care Centre, Staveley Centre and Thomas Fields. These residential settings have the right requirements to fulfil the model of enablement, specialist dementia care and flexible carer respite.
- 4.22 This option allows the Council to provide the model set out in paragraph 4.10 whilst making a higher overall efficiency in the region of £7.7m.
- 4.23 This proposal would involve the Council ceasing to directly operate the following residential homes: Briar Close, Bennerley Fields, Castle Court, Florence Shipley, The Grange, Lacemaker Court, The Leys, New Bassett House, Rowthorne, Thomas Colledge and Whitstones. Currently there are a total of 162 long term residents living in the eleven homes.
- 4.24 As with option one, option two would also involve the Council ceasing to directly operate the non-integrated day centres: Blackwell Day Centre, Ecclesfold Day Centre, Fabrick Day Services, Hasland Resource Centre, Jubilee Centre, Queens Court, Shirevale Resource Centre and Valley View Day Centre. Currently there are a total of 130 people attending the day centres.
- 4.25 The residential care homes which the Council would cease to operate, would be offered for sale to the open market as a going concern for a set period of time where possible. If the services were not purchased,

they would be required to close, and people would be supported throughout to find alternative provision.

4.26 Option two would enable the Council to transform and consolidate resources to provide:

- A residential offer specialising in dementia care delivered by the Council across the County, providing dementia specialist care for long term residents and short-term support. These five residential settings have the right requirements to fulfil the model of enablement through community support beds, specialist dementia care and carer respite.
- Three care homes with community support beds and dementia specialist residential care beds (Ada Belfield, Meadow View and Staveley Centre).
- Two care homes with community support beds and dementia specialist residential care beds within Extra Care settings (Oaklands and Thomas Fields).
- Three of the five residential homes with an integrated day centre which would enable a flexible, consistent offer of respite day and overnight to people living at home with dementia and their carers (Meadow View, Oaklands Community Care Centre and Staveley Centre).

4.27 Should consultation be approved, and should any services cease to operate following a thorough consultation, the usual Derbyshire County Council procedures would apply to any impacted colleagues and be implemented, as appropriate. Relevant procedures and processes would also be followed as regards to any other stakeholders impacted.

### **Preferred course of action**

4.28 In light of the above factors, it is proposed that approval is sought to commence consultation on the two options set out above. Both options in this report would include a commitment that everyone impacted would be thoroughly supported throughout the process if cabinet approves consultation. We would seek to communicate regularly and offer support to residents, people who use services and their families and carers. This commitment would include a pledge to carry out person-centred assessments and/or reviews under the Care Act 2014, as well as undertaking updated assessments for any carers affected and providing advocacy for people as appropriate.

- 4.29 Whilst the Council considers the two options set out above to be the most viable options at this stage, it is vital to the process that the views of the residents, people who use the day services, their families and other stakeholders are sought prior to any decision being taken with regard to the proposed redesign. The Council will keep an open mind as to whether these options remain the most viable throughout any approved consultation exercise and will need to evaluate any responses received to such a consultation in order to ascertain whether further viable alternative options have been put forward or give the Council reason to reconsider whether the other options than the two above represent a more suitable alternative. Specific questions in this regard would form part of any approved consultation exercise.
- 4.30 If approved, a full Equality Impact Analysis ('EIA') will also be prepared during the consultation process reflecting issues that are raised during the consultation process. This will be reported in full to Cabinet and a full copy of the EIA made available to Members in order that any adverse impact along with any potential mitigation can be fully assessed. Cabinet members will be reminded at that time of the need to have careful regard to the conclusions of the EIA.
- 4.31 If permission to consult on the options above is given, and if any of the proposals set out in the report, or any other proposal materialising following a thorough consultation, are approved, residents impacted and their families would be supported in accordance with the 'Pledges' at appendix 2. The Council understands how important this would be in providing people with the support needed during any period of change.

## **5. Consultation**

- 5.1 If the recommendations in this report are approved, it is proposed that formal public consultation would commence on 15<sup>th</sup> May 2024 for 12 weeks, ending on 7<sup>th</sup> August 2024. A public consultation would be carried out seeking people's views on the two options being presented.
- 5.2 We would support current residents, people using regular respite and those attending day centres and their carers to understand and engage with the consultation process and the potential implications for them by offering support to participate in the consultation via a one-to-one interview, where requested.
- 5.3 We also propose engaging informally with colleagues working in any impacted service as part of the consultation exercise. Such engagement will encourage all colleagues to participate in the consultation and to



share their experiences and views on the proposals. We will also offer support through the process, engaging more formally with the staff of any home which may eventually cease to operate by the Council.

- 5.4 Adult Social Care's Stakeholder Engagement and Consultation Team (SECT) would arrange and coordinate a series of face-to-face consultation meetings for people using the services and their carers.
- 5.5 The SECT team would arrange and coordinate face to face and virtual sessions. Interested parties and members of the public would be invited to book a place via publicity and communications.
- 5.6 The SECT team would develop a questionnaire for participants to complete. The questionnaire would be reflective of the proposal/s and give opportunity for participants to comment and give feedback on their views. The questionnaire would be placed on DCC's Have Your Say webpage where consultees would be encouraged to visit and complete a questionnaire.
- 5.7 All stakeholders would also be given the opportunity to give their views by sending a letter, via email to: [ASCH.Tell.AdultCare@derbyshire.gov.uk](mailto:ASCH.Tell.AdultCare@derbyshire.gov.uk) or via telephone contact for SECT. Stakeholders would be given the opportunity to either email a message or leave a telephone voice mail requesting a call back from a member of SECT. SECT members would then record any feedback via telephone interviews and/or assist participants to complete an online questionnaire.

## **6. Alternative Options Considered**

- 6.1 To determine the future provision of accommodation for older people in the residential homes and day services for older people listed above without conducting a public consultation exercise. This will not be pursued as a viable option because proposals to make significant changes in service provision require consultation with the public and those directly affected, including service users, staff and carers and relevant stakeholders. This would be unlawful and would expose the council to legitimate legal challenge while at the same time undermining the quality of its decision-making.
- 6.2 To maintain the status quo and continue to operate the current sixteen homes including internal day centres and all eight non-integrated day centres. Given the current budget position and future demand this is not sustainable for the Council and is discounted on the basis that it is

not a viable option.

- 6.3 Consult on more or different potential models or changes. The Local Authority is entitled to consult over its chosen proposed model but should not limit its consideration of alternative models or changes. The consultation exercise will therefore facilitate the ability for responses to be provided in this regard.

## **7. Implications**

- 7.1 Appendix 1 sets out the relevant implications considered in the preparation of the report.

## **8. Background Papers**

- 8.1 Derbyshire All Age Adults' Housing, Accommodation and Support Strategy 2023 – 2038
- 8.2 Adult Social Care Strategy – Best Lives Derbyshire 2022 - 2025
- 8.3 Derbyshire County Council Carers Strategy 2020-2025
- 8.4 Market Position Statement - community and accommodation-based support for older people 2022 to 2023.
- 8.5 Previous consultation – Residential Care for Older People 5 May 2022

## **9. Appendices**

- 9.1 Appendix 1 – Implications
- 9.2 Appendix 2 - Our Pledges to Residents

## **10. Recommendation(s)**

- 10.1 It is recommended that Cabinet:
- a) Approves the programme of formal public consultation for a period of 12 weeks on the two proposed options concerning the future of the eleven residential homes and integrated day opportunities for older people, and all of the non-integrated day opportunities for older people.

- b) Receives a further report following the conclusion of the consultation process, including an Equality Impact Analysis.

## **11. Reasons for Recommendation(s)**

- 11.1 Proposals to make significant changes in service provision require consultation with the public and those directly affected, including people who use the service, staff and carers and relevant stakeholders to ensure that their views can be taken into account when a final decision is made. Consultation for 12 weeks is proposed to ensure the Council complies with its legal obligations.
- 11.2 A further report following the conclusion of a consultation is recommended to ensure that Cabinet is fully informed of the outcome of the consultation and Equality Impact Analysis when it makes a decision on the future of this topic.

## **12. Is it necessary to waive the call-in period?**

- 12.1 No

## Implications

### Financial

- 1.1 The 2024/25 Approved Revenue Budget includes two efficiencies relating to residential homes for older people and day centres for older people. These are £5.209M and £1.325M respectively – to be achieved over financial years 2024-25 to 2026-27. These are on-going cashable efficiencies. The current financial modelling indicates that these efficiencies will be achieved by the options set out in this paper and includes the cost of alternative services for current users with eligible care needs. The landlord cost of the building and sites has also been analysed and based on the latest condition surveys, the financial liability over the next one to five years for sites which may cease to operate, is up to £5.8M for care homes and £3M for day centres.
- 1.2 The cost of the consultation will be met from existing resources.

### Legal

- 2.1 Section 1 Care Act 2014 imposes a general duty on the Council to promote an individual's well-being whenever exercising any function under Part 1 Care Act 2014.
- 2.2 'Well-being' is not defined within the Care Act 2014 and is a broad concept. Section 1(2) lists nine individual aspects of well-being as follows:
- (a) personal dignity (including treatment of the individual with respect);
  - (b) physical and mental health and emotional well-being;
  - (c) protection from abuse and neglect;
  - (d) control by the individual over day-to-day life (including over care and support, or support, provided to the individual and the way in which it is provided);
  - (e) participation in work, education, training or recreation;
  - (f) social and economic well-being;
  - (g) domestic, family and personal relationships;
  - (h) suitability of living accommodation;
  - (i) the individual's contribution to society.

Although the well-being principle applies specifically when the Local Authority makes a decision in relation to an individual, the Care and

Support Statutory Guidance is clear that the principle should also be considered by the Council when it undertakes broader, strategic functions.

- 2.3 The Council must also have regard to the following matters in particular, pursuant to the following subsections of s1(3) Care Act 2014
- (a) the importance of beginning with the assumption that the individual is best-placed to judge the individual's well-being;
  - (b) the individual's views, wishes, feelings and beliefs and;
  - (e) the importance of the individual participating as fully as possible in decisions relating to the exercise of the function concerned and being provided with the information and support necessary to enable the individual to participate;
- 2.4 Whilst the Council is not required by way of statutory duty to provide any in-house residential care or day opportunity provision, s5 Care Act 2014 places a separate duty on the Council to promote an efficient and effective market, with a view to ensuring that any person in its area wishing to access services in the market:
- a) has a variety of providers to choose from who (taken together) provide a variety of services.
  - b) has a variety of high-quality services to choose from; and
  - c) has sufficient information to make an informed decision about how to meet the needs in question.
- 2.5 A needs assessment must be carried out where it appears to the Local Authority that a person may have needs for care and support. The assessment must identify whether the adult has any eligible needs. If there are, the assessment must state what those needs are. (s 9(1), Care Act 2014.) A Local Authority must also assess any carer (current or prospective) where it appears they may have needs for support. (s 10(1) Care Act 2014.
- 2.6 Where a Local Authority is satisfied on the basis of a needs or carer's assessment that an adult or their carer has needs for care and support, it must determine whether any of the needs meet the eligibility criteria (s13 (1) Care Act 2014)
- 2.7 Section 18 Care Act 2014 provides that where an adult is assessed as having eligible needs, the Council is under a duty to meet those needs. The criteria does not specify the types of care and support that a Local Authority must provide to meet eligible needs. Needs may therefore be met in a number of different ways e.g., by attending a day centre, or

should the nature and/or extent of the care and support needed require it, the person care plan would specify a need for residential care. Should an individual be required to move accommodation, or should an individual's current day centre close, alternative arrangements to meet those eligible needs must be made.

- 2.8 Prior to any changes arising, their needs assessment and care and support plan should be reviewed. Where a care plan is to be altered, the Council must have regard to, amongst other things, the outcomes the individual wishes to achieve and the impact on a person's well-being. In offering alternative accommodation the Local Authority should have regard to the Care and Support (Choice of Accommodation) Regulations 2014. This report details steps which would be taken to support individuals who would be affected by the proposals to identify alternative options for their current care and support provision.
- 2.9 Proposals to make significant changes in service provision require consultation with the public and those directly affected, including service users, staff and carers and relevant stakeholders.
- 2.10 Case law has established minimum requirements of consultation, which are:
  - a) Consultation must be at a time when proposals are at a formative stage;
  - b) Sufficient information must be given to permit a person to "give an intelligent consideration and response";
  - c) Adequate time must be given for consideration and response; and
  - d) The results of the consultation must be conscientiously taken into account in finalising any proposal and provided to the decision maker to inform their decision.
- 2.11 The consultation process should also contain a statement setting out the relevant context for the proposals under consideration. Residents should be provided with the true reason for the closure, and for why one home was favoured to remain open rather than another.
- 2.12 Following the consultation set out in the report Members will need to take careful account of the views expressed in arriving at their decision. In addition, any final decisions must also take into account the rights of service users as set out in the Human Rights Act 1998, specifically Article 8, "Right to respect for private and family life".
- 2.13 In assessing these proposals, the Council should also have regard to the Public Sector Equality Duty (PSED) under the Equality Act 2010.

2.14 The PSED requires public authorities to have "due regard" to:

- The need to eliminate discrimination, harassment, victimisation and any other conduct that is prohibited by or under the Equality Act 2010 (section 149(1) (a)).
- The need to advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it (section 149(1) (b)). This involves having due regard to the needs to:
  - remove or minimise disadvantages suffered by persons who share a relevant protected characteristic that are connected to that characteristic.
  - take steps to meet the needs of persons who share a relevant protected characteristic that are different from the needs of persons who do not share it (section 149(4)); and
  - encourage persons who share a relevant protected characteristic to participate in public life or in any other activity in which participation by such persons is disproportionately low.
- The need to foster good relations between persons who share a relevant protected characteristic and those who do not share it (section 149(1)(c)).

2.15 Preliminary consideration has been given to the impact of the proposals on persons with protected characteristics in drawing up these proposals. In particular it is recognised that the methods and content of the consultation will need to be designed so as to fully reflect the needs of the relevant protected groups, in particular older people and disabled people.

2.16 In addition, due regard has been given to the requirement for an Equality Impact Analysis (EIA) which would be carried out in respect of the care pathway redesigns as is referred to in the report at the conclusion of the public consultation, if approved. A full EIA would be completed once the consultation responses have been received and considered. This will be reported in full to Cabinet and a full copy of the EIA made available to Members in order that any adverse impact along with any potential mitigation can be fully assessed. Cabinet members will be reminded at that time of the need to have careful regard and fully consider the conclusions of the EIA.

## **Human Resources**

3.1 Any workforce implications arising from the proposals will be the

subject of further reports on the conclusion of public consultation. Staff will be included in engagement and there will be HR support as part of any consultation exercise.

## **Information Technology**

4.1 None directly arising.

## **Equalities Impact**

5.1 The Council has a duty to recognise and mitigate the impact of any changes it proposes upon people in protected groups. The proposals in this report affect people with accessing residential care and day services who have protected characteristics provided by Derbyshire County Council.

5.2 The Council will take account of the challenges which the people affected by the proposals in this report face, both in terms of participation in the consultation and in ensuring that the impact of any changes is mitigated if they are to be implemented. Family, and carers will be invited to participate in the consultation and advocacy services will be arranged for people who require them.

5.3 A full Equality Impact Analysis will be undertaken and this will be reported to Cabinet on the completion of the consultation on the proposals in this report, should a consultation exercise be approved by Cabinet.

## **Corporate objectives and priorities for change**

6.1 In the Council Plan 2021 – 2025 the Council states that listening to, engaging, and involving local people to ensure services are responsive and take account of what matter most to people, as being a core value.

6.2 The Council commits to work together with its partners and communities to be an enterprising council, delivering value for money and enabling local people and places to thrive, and to spend money wisely making the best use of the resources that it has.

## **Other (for example, Health and Safety, Environmental Sustainability, Property and Asset Management, Risk Management and Safeguarding)**

7.1 As set out in the report.**Report Author:** Jennifer Harper

Contact details: [Jennifer.Harper@derbyshire.gov.uk](mailto:Jennifer.Harper@derbyshire.gov.uk)



### OUR PLEDGES TO RESIDENTS

1. We will treat you with dignity and respect, consulting with you and keeping you informed throughout the process
2. We will ensure relatives and friends chosen by you are informed of the home closure and are able to remain involved in the process too
3. We will name a member of staff from your present care home who knows you well to listen to you, support you and stay in contact with you
4. We will provide an advocate to assist anyone who does not have mental capacity to make decisions about their future arrangements and has no family or friend to do this
5. We will discuss your preferences, and care and support needs with you; addressing any concerns you or your family or friends have about you moving. We will update your assessment if necessary and check you agree with what has been written
6. We will try our best to meet your own personal priorities, for example you may have friends you particularly wish to stay together with when you move
7. We will ensure you have as much choice as possible about the type of care service you choose. We will arrange for you to visit ones you consider may be suitable, or for your family or friends to do this if you are unable to do so
8. We will complete a new 'support plan' and 'life book' with you to make clear your likes, things you want to do or be assisted with, your interests and priorities now and in earlier life. Once you are in agreement with what is in the plan/book this can be used to brief your new service providers and help them prepare for your arrival
9. We will ensure within reason you do not incur any additional costs through moving to a new provider
10. We will carefully plan the day of your move with you to reduce stress or worries. We will take into consideration things like how you travel, who you want to travel with you, and write a list of your personal items
11. Finally, we pledge to visit you and find out how you are doing after the move and check if there is anything else you wish to be done

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Agenda Item

**FOR PUBLICATION**

**DERBYSHIRE COUNTY COUNCIL**

**CABINET MEMBER FOR ADULT CARE**

**29 April 2024**

**Report of the Executive Director - Adult Social Care and Health**

**Proposal to Consult on the Cessation of  
Adult Social Care Discretionary Grant Funding**

**1. Divisions Affected**

Countywide.

**2. Key Decision**

This is a key decision because, if the proposed changes are made, it is likely to:

- a) result in the Council incurring expenditure which is, or the making of savings which are, significant having regard to the budget for the service or function concerned, which is currently defined as £500,000; and
- b) be significant in terms of its effect on communities living or working in an area comprising two or more electoral divisions in the county area.

**3. Purpose**

To seek Cabinet approval to:

- consult on the cessation of the current Adult Social Care allocation of discretionary grants to the services outlined in this report.
- award an interim grant to Bolsover Woodlands Enterprise for the amount of £78,462 for the period 1 November 2024 to 31 March

2025 in order to align their funding timeline with other grant recipients.

#### **4. Information and Analysis**

- 4.1 A report was submitted to Cabinet by the Director of Finance and ICT on 11 January 2024, outlining the financial challenges faced by the Council and proposing budget saving measures for the period 2024-2029.
- 4.2 The Council currently supports the organisations listed in paragraph 4.13 with a discretionary grant. Each organisation has a different model of operation and service delivery, responding to the differing needs of the people who draw on their services. Some people who receive support may have eligible needs under the Care Act 2014 and others may access support which is preventative in nature. There are also other organisations which deliver preventative support in Derbyshire, but do not receive any funding from the Council.
- 4.3 Following a county wide audit of Voluntary and Community Sector 'VCS' grants in 2019, the Council undertook a review of all recurring grants to the VCS. The process included two public consultations. The first took place in 2020 and detailed draft proposals for the future funding model of VCS infrastructure support. In July 2020, Cabinet approved key components of the proposals and the agreed approach was underpinned by:
- District level funding allocations, with providers working together where there are multiple providers within a district.
  - New Service Level Agreements on an organisation/district basis, outlining the funding providers receive and how it is spent, with a commitment from providers to deliver core VCS support through a shared outcomes framework.
  - A comprehensive list of Key Performance Indicators, co-designed with providers, which seek to understand and measure impact and what is being achieved.
- 4.4 The second consultation exercise took place in 2022, detailing two proposals (1) to introduce a specified end date to all grant funding save for exceptional circumstances (2) to introduce a commissioning pathway which would replace the recurring grants and to introduce an assessment criteria to determine whether the organisation should continue on that commissioning pathway or whether the grant would cease altogether.

- 4.5 In July 2022, Cabinet approved the proposals. The introduction of an end date has ensured all organisations in receipt of Council grant funding understand that funding is finite in nature and therefore should not have an expectation that further grant funding would be available following the current award allocation.
- 4.6 Cabinet's approval meant that the Council could commission or decommission activities in the future, where appropriate. However, significant financial pressures, as detailed within the Cabinet Report of 11 January 2024, have prevented officers from implementing any commissioned solutions.
- 4.7 Derbyshire County Council, like every Council up and down the country, is facing significant financial challenges that are outside of its control. These include inflationary pressures, staff pay awards agreed nationally but paid locally; reduced funding from Central Government; high borrowing costs; lack of a financial multi-year settlement which affects planning, and continuing increasing demand on our services, particularly in Adult Care and Children's Services.
- 4.8 In particular, demand for adult social care support has risen dramatically, with the cost of providing care and support accounting for 48% of the Council's overall spending.
- 4.9 In order to set a balanced budget for 2024/25, as it is legally obliged to do, the Council has implemented a series of financial controls, including tight control over non-essential spend. This position has significantly changed the context within which the Council allocates its budget and funding to services.
- 4.10 It is anticipated that there will be further budget challenges in future years and all areas of the Council are required to deliver in year financial savings and propose further areas for budget savings in future years.
- 4.11 The current financial position and requirement to make additional efficiencies and budget savings means that activity which directly contributes to the delivery of the Council's statutory duties must now be prioritised.
- 4.12 The Council does not have a specific statutory duty to offer grant funding to the organisations outlined in this report, therefore this spend has been identified as discretionary. It is however noted that the organisations do offer a preventative service in their local area and some also provide a service to individuals with eligible social care

needs. Both Adult Social Care and Public Health have a wide range of other preventative services through commissioned and directly provided approaches. These are generally available across the whole of the county and are designed to reduce, prevent and delay needs. These include but are not limited to, Home from Hospital, Low level support, sensory services, advocacy, carer support, Warm and Welcoming Spaces, Better Off Derbyshire, Derbyshire Discretionary Fund and Live Life Better Derbyshire.

- 4.13 Considering the above, Officers are proposing to consult on ending the remaining discretionary grants, detailed in the table below:

<b>Grant Recipient(s)</b>	<b>Grant per Annum (£)</b>
Telephone and 1:1 Befriending Activity	0.161
Social Activity Grants	0.091
Luncheon Clubs	0.007
Bolsover Woodlands Enterprise	0.188
Our Vision, Our Future	0.030
ASCH Infrastructure Grants	0.245
<b>Total</b>	<b>0.722</b>

- 4.14 A detailed breakdown of the grants can be found in Appendix 1.

### **Telephone and 1-1 Befriending Activity**

- 4.15 The Council provides discretionary grant funding to eleven voluntary sector organisations across Derbyshire, to provide befriending support. Telephone and 1-1 befriending is prevention activity - decreasing social isolation for those who may be isolated through illness, disability, mental illness, old age or social disadvantage. Volunteer befrienders offer people who are eligible, someone to talk to, someone to share a leisure activity with or someone to attend a group with.
- 4.16 The grant from the Council is currently the sole funding stream for these eleven services with some supplementing this income with charitable donations and some levying a charge to individuals receiving a service. However, the organisations are brought together by South Derbyshire CVS as the 'Derbyshire Befriending Network', which includes other organisations who are not funded by the Council. The network is in the process of establishing itself as a Community Benefit Society, enabling them to seek alternative funding as a joint legal entity.
- 4.17 These grants are due to end on 31 March 2025.

## **Social Activity Grants**

4.18 The Council provides a discretionary grant to seven voluntary sector organisations across Derbyshire to provide social inclusion activity. These grants fund a range of different social activity support, outreach information and advice to increase independent living across Derbyshire including:

- Two social car schemes in South Derbyshire and High Peak, to support assisted shopping.
- Mencap provide a Gateway social club for people with learning disabilities in South Derbyshire.
- Borrowbrook Homelink provide social activities for older people in Erewash.
- Age UK provide a mobile information and advice roadshow to help people stay independent.
- The African Caribbean Community Association provide social activity, befriending and lunch clubs in Chesterfield.
- The Bureau

4.19 These grants are due to end on 31 March 2025.

## **Luncheon Clubs**

4.20 The Council provides small grants which contribute towards supporting 54 small Luncheon Clubs across Derbyshire to support the Council's prevention duty, by helping to reduce social isolation.

4.21 The Luncheon Clubs are led by volunteers and provide an opportunity for members to come together to socialise and have a meal.

4.22 Derbyshire County Council has suspended Luncheon Club grants to any new applications until the proposal to consult is considered and any subsequent consultation is completed.

4.23 These grants are due to end on 31 March 2025.

## **Bolsover Woodlands Enterprise**

4.24 Bolsover Woodlands Enterprise ('BWE') supports up to thirty-six people with learning disabilities to develop and promote their independence and gain practical work-based skills and experience in teamworking,

health and safety, conservation, woodlands management and woodworking.

- 4.25 BWE currently receives a discretionary grant of £0.188m per annum to support its activities. The Council's grant funds the majority of the staff wages and BWE generate additional income from external sources to cover their remaining operational costs.
- 4.26 The existing grant is due to expire on 31 October 2024 and officers are proposing this is extended to 31 March 2025 to align with the other grant funded services outlined in this paper.
- 4.27 The requested extension for the five-month period of 1 November 2024 to 31 March 2025 has a value of £78,462.50, which can be met from the Adult Social Care revenue budget.

### **Our Vision, Our Future**

- 4.28 Our Vision, Our Future ('OVOF') is a user led, independent self-advocacy organisation supporting a maximum of around sixty adults with a learning disability and autism. The group works with the community and other service providers to organise activities, champion self-help, self-advocacy, prevention and promote independence.
- 4.29 OVOF has been operational for over thirty years and is currently supported by the Council through a discretionary grant with an annual value of £30,375. This is the largest amount of funding they receive, but OVOF also charge an attendance fee and generate additional income from external sources to cover their remaining operational costs.
- 4.30 The existing grant is due to end on 31 March 2025.

### **ASCH Infrastructure Grants**

- 4.31 Adult Social Care and Health fund ten Voluntary and Community Sector (VCS) infrastructure organisations to provide the sector with a single front door to offer support as and when needs arise. The VCS infrastructure provides information, support, guidance, training, funding advice for groups, support to recruit and manage volunteers, promote good practice and provide a VCS perspective to the statutory sector at strategic level forums.
- 4.32 These infrastructure organisations can also reach new, small and marginal organisations across the county, and generate feedback and intelligence about the sector.



4.33 These grants are due to end on 31 March 2025.

## **5 Proposed Consultation**

5.1 Consultation is required to enable officers to seek the views of various stakeholders, organisations, the people drawing on the services and the public to understand the full implications of the proposal to end discretionary grant funding as set out within this report.

5.2 If Cabinet were to agree to the proposed consultation exercise and subsequently agreed to make any changes to the grant funding, the Council would need to give funded organisations and the public/service users impacted, three months' notice of any resulting funding changes as outlined in the Derbyshire Compact and Local Authority Best Value Statutory Guidance.

5.3 Officers from the ASCH Commissioning team, with support from the Stakeholder Engagement and Consultation Team, will lead on all but the VCS infrastructure grants consultation. The consultation for the latter grants will be conducted in partnership with colleagues from Corporate Services and Transformation (CST).

5.4 Colleagues from CST are proposing to consult on their own infrastructure grants. It is intended that where possible Adult Social Care and CST will adopt a coordinated and joined up approach to consultation and engagement to ensure that duplication is minimised and that where organisations receive funding from both departments, they are not required to respond to multiple consultations. It will also enable the potential impact of ceasing both the CST and ASCH infrastructure grants to be properly understood and considered before any subsequent decisions are made. A separate Cabinet Report setting out the position in relation to the CST grants and the associated consultation is also due to be considered at the Cabinet meeting on 29 April 2024. In the interests of transparency, seven organisations will be impacted by both this grant proposal and the CST infrastructure grant proposal.

5.5 As outlined in this report, it is recommended that there is a 12-week period of consultation to receive feedback on the impact of proposals as outlined in this report. The consultation process will commence in May 2024 and will close in August 2024

5.6 The purpose of the consultation will be to:

- Gain an understanding of the impact of ceasing discretionary grant funding from relevant consultees.
- Enable stakeholders to outline how the policy will impact residents.
- Enable consultees to offer viable alternatives, within the parameters of the current position, which will be duly considered before the matter is brought back to Cabinet.

5.7 It will include the following elements:

- Identification of people, groups, organisations and other stakeholders who should be informed of and included in the proposed consultation.
- Consultation meetings.
- Online information and survey, including easy read format.
- Information and survey available in hard copy or alternative language / format, on request.
- Equality Impact Assessment.
- Report to Cabinet containing the consultation findings and recommendations.

5.8 The table below outlines who the Council will be consulting with and why:

<b>Who</b>	<b>Why</b>
Current grant recipients	<ul style="list-style-type: none"> <li>• The proposal could impact on grant recipients and the service they deliver.</li> <li>• The need to understand the impact of ceasing discretionary grant funding.</li> </ul>
The wider VCS	<ul style="list-style-type: none"> <li>• Do not currently receive funding from the Council but changes may affect the support they receive.</li> </ul>
Derby and Derbyshire ICB/ICS Tameside & Glossop ICB/ICS	<ul style="list-style-type: none"> <li>• Partner agencies may:               <ul style="list-style-type: none"> <li>- Fund the current grant recipients.</li> <li>- Signpost to the current grant recipients</li> <li>- Rely on the current grant recipients to support their priorities</li> </ul> </li> <li>• To understand the potential impact the proposal could have on partners.</li> </ul>
District and Borough Councils in Derbyshire	
Police and Crime Commissioner	
Colleagues in the Council	

General Public	<ul style="list-style-type: none"> <li>To understand what impact the proposal could have on residents.</li> </ul>
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5.9 The table below describes the expected consultation activities and timeline.

Date	Action
May 2024	<ul style="list-style-type: none"> <li>Work with grant recipients to identify service users who need information and/or the questionnaire in easy-read or alternative format.</li> <li>The consultation will be publicised on the Council's website and various media, with information about the impacted services and invitations to public consultation meetings distributed as necessary.</li> <li>Public consultation meetings planned in all Districts including affected organisations and people who draw on support from the services.</li> <li>Equality Impact Assessment commences.</li> </ul>
May – August 2024	<ul style="list-style-type: none"> <li>Consultation opens for 12 weeks.</li> <li>Online Consultation Survey published, including easy read format. Information and survey available in hard copy or alternative language / format, on request. Those service users/clients who have been identified by the affected grant recipients as requiring alternative formats will receive this without having to make a specific request.</li> <li>Public consultation meetings take place on service and district footprints, plus several online events at various times of the day/evening to promote attendance, there will also be the with the option of 1:1 discussions where requested.</li> <li>Outputs from the consultation collated, reviewed and considered.</li> <li>Equality Impact Assessment updated.</li> <li>Report for Cabinet to be drafted.</li> </ul>
September - October 2024	Analysis and report to be considered by Scrutiny Committee (30 October).
November / December 2024	Report to Cabinet sharing the findings of the consultation (14 Nov or 5 Dec).

January – March 2025	Implementation of Cabinet decisions, if required.
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## 6 Alternative Options Considered

- 6.1 Option 1 - The Council could allow the current grants to end on 31 March 2025 without any consultation. This option is not recommended as it would result in the Council failing to meet its obligations under the Derbyshire Compact and the Local Authority Best Value Statutory Guidance which states that funded organisations and service users should be given three months' notice, should be actively engaged as early as possible, and those affected should get an opportunity to have their say. This option would be unlawful and would leave the Council vulnerable to legal challenge and the potential for reputational damage.
- 6.2 Option 2 - The Council could consider continuing to fund the discretionary grants or otherwise fund the services outlined in this report, thereby not requiring consultation. This option would result in having to identify alternative ASCH funded provision to deliver the necessary efficiencies required to enable the Council to present a balanced budget in future and could impact on the Council's ability to meet its statutory duties.

## 7. Implications

- 7.1 Appendix 1 sets out the relevant implications considered in the preparation of the report.

## 8. Background Papers

- 8.1 Report to Cabinet – Voluntary and Community Sector Review 30 July 2020
- 8.2 Report to Cabinet – Voluntary and Community Sector Review 29 July 2021
- 8.3 Report to Cabinet – Voluntary and Community Sector Review 6 December 2021
- 8.4 Report to Cabinet – Voluntary and Community Sector Review 28 July 2022
- 8.5 Report to Corporate Management Team – Voluntary and Community Sector Grants Review and Infrastructure Provision Update 15 November 2022
- 8.6 Report to Cabinet Member ASCH - Interim Grant for Befriending Services - 7 December 2023

- 8.7 Report to Cabinet Member ASCH - Interim Grant for Social Activity Services - 7 December 2023
- 8.6 Report to Cabinet – Budget Savings Proposals 2024/25 to 2028/29, 11 January 2024
- 8.7 Report to Cabinet Member ASCH – Interim Grant for Our Vision our Future – 29 February 2024
- 8.8 Report to Cabinet – VCS Infrastructure Provision 2024-25 14 March 2024

## **9. Appendices**

- 9.1 Appendix 1 - Implications

## **10. Recommendation(s)**

- 10.1 That Cabinet:

- a) approves the programme of formal public consultation on the cessation of the current Adult Social Care allocation of discretionary grants to the services outlined in this report.
- b) notes that a further report will be received following conclusion of the consultation, including a full Equality Impact Assessment.
- c) approves the award of an interim grant to Bolsover Woodlands Enterprise for the amount of £78,462 for the period 1 November 2024 to 31 March 2025 in order to align their funding timeline with these proposals and the other grant recipients.

## **11. Reasons for Recommendation(s)**

- 11.1 The majority of the discretionary grants outlined in this paper were originally awarded over twenty years ago. Since then, Derbyshire's population has changed and people's aspirations, needs and preferences for support have also changed.
- 11.2 The current financial challenges facing the Council means it's essential that the limited funding available is spent wisely. To do this, budgets must be targeted and distributed equitably, to ensure public money goes to the right places and to those who need it most. The proposed consultation will be a vital part of gathering the information and intelligence needed to inform Cabinet's future decision making.

- 11.3 Formal consultation is also required to understand the full implications of the proposals contained within this report. Consultation for twelve weeks is proposed to ensure the Council has sufficient time to carry out a robust consultation exercise and carefully consider the outcomes of that consultation before any subsequent decisions are made.
- 11.4 A further report will be submitted to Cabinet following the conclusion of the consultation if approved, to ensure that Cabinet is fully informed of the outcomes of the consultation and Equality Impact Assessment, before it makes a decision about the cessation of Adult Care discretionary grant funding.
- 11.5 If Cabinet approve the proposed consultation, it is necessary to extend BWE's discretionary grant for a further five months to the 31 March 2025 to ensure they continue to receive that funding and services are not impacted whilst the proposed consultation process is completed and a further report is brought back to Cabinet

## **12 Is it necessary to waive the call in period?**

12.1 No

Report Phil Wall & Steve Ball  
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**Implications****1. Financial**

- 1.1 The 2024-25 Approved Revenue Budget includes an efficiency of £0.881m over financial years 2024-25 and 2025-26 in relation to a review of discretionary grants as set out in this report. For 2024-25 the efficiency will be partly realised through the release of uncommitted voluntary sector grants budget. For 2025-26 the efficiency is proposed to be achieved following a review of the grants set out in the tables below which have ongoing funding for 2024-25. The cost of the consultation can be met from existing budgets

<b>Total Discretionary Grant Expenditure</b>	<b>Grant per annum (£)</b>
Telephone and 1-1 Befriending Activity	160,652
Social Activity Grants	90,952
Luncheon Clubs	6,557
Bolsover Woodlands Enterprise	188,310
Our Vision, Our Future	30,375
ASCH Infrastructure Grants	245,336
<b>Total</b>	<b>722,182</b>

- 1.2 The total discretionary grant funding by individual service is detailed in the tables below.

<b>Telephone and 1-1 Befriending Activity</b>	<b>Grant per annum (£)</b>
Age Concern (Chesterfield, NED, Bolsover)	10,741
Age UK Derby & Derbyshire (Erewash)	4,500
Age UK Derby & Derbyshire (High Peak and Dales)	48,099
Amber Valley CVS	6,457
Connex Community Support (High Peak and Dales)	3,000
Derbyshire Dales Careline	2,010
Erewash Voluntary Action CVS	3,000
Erewash Voluntary Action CVS (extended service)	31,711
New Mills Volunteer Centre (High Peak)	250
South Derbyshire CVS	33,848

The Volunteer Centre (Chesterfield)	17,036
<b>Sub-total</b>	<b>160,652</b>

<b>Social Activity to prevent Isolation</b>	<b>Grant per annum (£)</b>
African Caribbean Community Association	20,282
Age UK Information for Older People Roadshow	19,547
Borrowbrook Homelink	2,800
Mencap Swadlincote Gateway Club	2,675
The Bureau (Volunteer Centre Glossop)	21,936
Connex Community Support	16,306
South Derbyshire CVS	7,406
<b>Sub-total</b>	<b>90,952</b>

<b>Luncheon Clubs</b>	<b>2023/24 (£)</b>
54 small luncheon clubs across Derbyshire	6,557
<b>Sub-total</b>	<b>6,557</b>

<b>Bolsover Woodlands Enterprise</b>	<b>Grant per annum (£)</b>
Bolsover	188,310
<b>Sub-total</b>	<b>188,310</b>

<b>Our Vision Our Future</b>	<b>Grant per annum (£)</b>
Chesterfield	30,375
<b>Sub-total</b>	<b>30,375</b>

<b>ASCH Infrastructure Grants</b>	<b>Grant per annum (£)</b>
Amber Valley CVS This organisation is also in receipt of a CST infrastructure grant as highlighted at paragraph 5.4	32,518
Bassetlaw CVS (Bolsover District) This organisation is also in receipt of a CST infrastructure grant as highlighted at paragraph 5.4	7,110
Connex Community Support	27,236



Derbyshire Dales CVS This organisation is also in receipt of a CST infrastructure grant as highlighted at paragraph 5.4	21,515
Derbyshire Voluntary Action This organisation is also in receipt of a CST infrastructure grant as highlighted at paragraph 5.4	18,166
Erewash Voluntary Action CVS This organisation is also in receipt of a CST infrastructure grant as highlighted at paragraph 5.4	57,095
High Peak CVS This organisation is also in receipt of a CST infrastructure grant as highlighted at paragraph 5.4	4,124
New Mills Volunteer Centre (High Peak)	21,513
South Derbyshire CVS This organisation is also in receipt of a CST infrastructure grant as highlighted at paragraph 5.4	36,884
The Bureau (Volunteer Centre Glossop)	19,175
<b>Sub-total</b>	<b>245,336</b>

- 1.3 Bolsover Woodlands Enterprise’s annual grant ends on 31 October 2024. In order to align BWE’s funding with other grant recipients it will be necessary to award an additional £78,462 for the period 1 November 2024 to 31 March 2025. If approved, this award would enable officers to consult with people who draw on the service and stakeholders, at the same time as the other grant funded services.

## 2 Legal

- 2.1 The Council has the power to provide grants to voluntary and community sector organisations under the general power of competence set out in section 1 Localism Act 2011, but there is no statutory duty to provide grants to these voluntary organisations. Whilst there is no statutory duty to specifically award these grants, it is noted that the majority of these organisations provide preventative services, and some provide support to individuals with eligible care and support needs. The Care Act 2014 places statutory duties on local authorities in this respect. Section 78 Care Act 2014 provides that a local authority must act under the general guidance of the Secretary of State; the Care and Support Statutory Guidance (‘the Statutory Guidance’). Local authorities must follow this guidance unless they have very strong reasons for not doing so. A departure from the guidance would be unlawful unless there is cogent reason for it, and the greater the departure, the more compelling the reason must be.

- 2.2 Section 1 Care Act 2014 places a general duty on local authorities to promote an individual's well-being whenever it exercises a function under Part 1 Care Act 2014.
- 2.3 Well-being is not defined within statute, but it is a broad concept. Section 1(2) Care Act 2014 lists nine particular aspects of well-being as follows:
- a) personal dignity (including treatment of the individual with respect);
  - b) physical and mental health and emotional well-being;
  - c) protection from abuse and neglect;
  - d) control by the individual over day-to-day life (including over care and support, or support, provided to the individual and the way in which it is provided);
  - e) participation in work, education, training or recreation;
  - f) social and economic well-being;
  - g) domestic, family and personal relationships;
  - h) suitability of living accommodation;
  - i) the individual's contribution to society.
- 2.4 The Care and Support Statutory Guidance states that the well-being principle applies equally to those with eligible social care needs and those who do not have eligible social care needs but come into contact with the system in some other way. It should inform the delivery of services to the community as a whole and should be considered when the local authority undertakes broader, strategic, functions such as this proposal.
- 2.5 In exercising a function under Part 1 Care Act 2014, local authorities must also have regard to (amongst other things) the importance of preventing or delaying the development of needs for care and support or needs for support and the importance of reducing needs of either kind that already exist.
- 2.4 Section 2 Care Act 2014 reiterates this duty and states that local authorities must provide or arrange for the provision of services, facilities or resources, or take other steps, which it considers will:
- a) contribute towards preventing or delaying the development by adults in its area of needs for care and support;
  - b) contribute towards preventing or delaying the development by carers in its area of needs for support;
  - c) reduce the needs for care and support of adults in its area;
  - d) reduce the needs for support of carers in its area.

- 2.6 This preventative duty is owed to all adults, including those who do not currently have any care and support needs, those with eligible needs and carers. The policy aim is to reduce the future burden on local authorities of more substantial support packages.
- 2.7 The Statutory Guidance is very clear that prevention is critical to the vision in the Care Act and that the system should actively promote well-being and independence, not just wait to respond when people reach crisis point. It also advocates the ‘co-production’ of preventative approaches, not just in relation to individual support packages but also when services are designed, commissioned and delivered so as to ensure services reflect what the people who use them want.
- 2.8 There is no single definition for ‘prevention’ but the Statutory Guidance breaks it down into three approaches:
- a) Primary prevention – aimed at individuals who have no current health or care needs but services may help an individual avoid developing needs for care and support. These are generally universal services which may include, but are not limited to, befriending schemes or community activities.
  - b) Secondary prevention – more targeted interventions aimed at individuals who have an increased risk of developing needs and services may help to slow down or reduce further deterioration or prevent other needs from developing. This could include, but is not limited to, telecare services, adaptations to housing and handyman services.
  - c) Tertiary prevention – interventions aimed at minimising the effect of disability or deterioration for people with established or complex health conditions; supporting people to regain skills and manage or reduce need where possible. This could include, but is not limited to, rehabilitation/reablement services and respite.
- 2.9 Section 2(2) Care Act 2014 states that local authorities must have regard to what is already available in the authority’s area and the extent to which the authority could involve or make use of that local resource in performing this duty. These readily available services, facilities and resources may form part of the overall local approach to preventative activity.
- 2.10 The Statutory Guidance states that local authorities should develop a clear, local approach to prevention which sets out how they plan to fulfil this responsibility. Should the proposal to consult be approved, any subsequent decision to cease all grants must take into account the potential impact on the availability of preventative services, facilities and

resources in the local area. It is crucial that local demand and resource and is fully understood to allow consideration to be given to any gaps which remain and what further steps are required to meet this duty. There must be sufficient services, facilities or resources to adequately fulfil the prevention duty.

- 2.11 In addition, section 5 Care Act 2014 places a further duty on local authorities to promote the efficient and effective operation of a market in services for meeting care and support needs with a view to ensuring that any person in its areas wishing to access services:
- a) has a variety of providers to choose from who (taken together) provide a variety of services;
  - b) has a variety of high quality services to choose from;
  - c) has sufficient information to make an informed decision about how to meet the needs in questions.
- 2.12 The Statutory Guidance is clear that the preventative duty under section 2 Care Act 2014 extends to how the authority facilitates and commissions services and how it works with other local organisations to build community capital and make the most of the skills and resources already available in the local area.
- 2.13 This report highlights that some of these organisations may not just be providing a preventative service but may also be meeting the needs of individuals with eligible needs. Section 18 Care Act 2014 provides that where an individual is assessed as having eligible needs, there is a duty to meet those needs. Should the voluntary grants be withdrawn, and an organisation cease to operate or reduce their capacity, the local authority will continue to be under a duty to meet that individual's eligible needs and alternative arrangements must be made. This would need to take into account (amongst other things), the outcomes the individual wishes to achieve and the impact on their well-being.
- 2.14 The proposal triggers the duty to consult with the public and those directly affected including the organisations, service users and relevant stakeholders.
- 2.15 Case law has established the minimum requirements of consultation, which, if not met, usually renders the consultation unlawful and any consequential decision liable to be quashed. When undertaking a consultation exercise, a public authority must:
- a) undertake the consultation when the proposals are at a formative stage;

- b) provide sufficient reasons for the proposal, so as to permit intelligent consideration and response;
  - c) provide adequate time for consideration and response; and
  - d) take the products of consultation conscientiously into account.
- 2.16 Whilst there is a requirement to undertake the consultation when the proposals are at a formative stage, this does not preclude the local authority from consulting on its preferred option, provided the decision maker's mind remains open to change. The proposed consultation will provide an opportunity for consultees to provide wider comments and suggestions, which will be duly considered.
- 2.17 In assessing these proposals, the Council should also have regard to the Public Sector Equality Duty ('PSED') under the Equality Act 2010. The PSED requires public authorities to have "due regard" to the need to:
- eliminate discrimination, harassment, victimisation and any other conduct that is prohibited by or under the Equality Act 2010 (*section 149(1) (a)*).
  - advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it (*section 149(1) (b)*). This involves having due regard to the need to:
  - remove or minimise disadvantages suffered by persons who share a relevant protected characteristic that are connected to that characteristic.
  - take steps to meet the needs of persons who share a relevant protected characteristic that are different from the needs of persons who do not share it (*section 149(4)*); and
  - encourage persons who share a relevant protected characteristic to participate in public life or in any other activity in which participation by such persons is disproportionately low.
  - foster good relations between persons who share a relevant protected characteristic and those who do not share it (*section 149(1)(C)*).
- 2.18 Preliminary consideration has been given to the impact of the proposals on persons with protected characteristics in drawing up these proposals. In particular it is recognised that the methods and content of the consultation will need to be designed so as to fully reflect the needs of the relevant protected groups, in particular older people and disabled people.
- 2.19 In addition, regard has been given to the Equality Impact Analysis (EIA), as referenced within the report. A full EIA will be prepared reflecting issues that are raised during the consultation process. This will be reported in full to Cabinet and a full copy of the EIA made available to

Members in order that any adverse impact along with any potential mitigation can be fully assessed. Cabinet members will be reminded at that time of the need to have careful regard to the conclusions of the EIA.

### **3 Human Resources**

- 3.1 The voluntary and community sector organisations currently funded by the Council as part of this report are independent of the Council and therefore there are no human resources considerations for the Council.

However, there could be human resources impacts on individual organisations affected by the proposed consultation process.

### **4 Information Technology**

- 4.1 None.

### **5 Equalities Impact**

- 5.1 An Equality Impact Assessment will be drafted to inform the consultation process and will be further developed and finalised following receipt of the formal consultation feedback.
- 5.2 The majority of discretionary grants under review are related to activities which involve older people or those with a disability.
- 5.3 Officers will work very closely with the organisations involved to ensure that plans and timeframes are communicated clearly in order to include as many stakeholders as possible in the proposed consultation process.

### **6 Corporate objectives and priorities for change**

- 6.1 The Council has to deliver a balanced budget each year and the cessation of discretionary grants has been identified as a priority for delivering the necessary efficiencies to meet the requirement.
- 6.2 The proposal to review the viability of discretionary grants is expected to require consultation prior to Cabinet approving any future recommendations, based upon the findings of the consultation.

### **7 Other (for example, Health and Safety, Environmental Sustainability, Property and Asset Management, Risk Management and Safeguarding)**

- 7.1 In preparing this report the relevance of the following factors has been considered: human resources, health, environmental, transport, and crime and disorder considerations.

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**FOR PUBLICATION**

**DERBYSHIRE COUNTY COUNCIL**

**CABINET**

**Thursday, 29 April 2024**

**Joint Report of the Director - Public Health and Director of Finance**

**Journal transfer to enable Public Health funding to support Children's Centres**

(Cabinet Member for Health and Communities)

**1. Divisions Affected**

1.1 County-wide

**2. Key Decision**

2.1 This is a key decision because it is likely to result in the Council incurring expenditure which is, or savings which are significant having regard to the budget for the service or function concerned (this is currently defined as £500,000) and it is likely to be significant in terms of its effect on communities living or working in an area comprising two or more electoral areas in the County.

**3. Purpose**

3.1 This report seeks Cabinet approval to:

- a) Transfer £1.000m per annum from Public Health to Children's Services via a journal transfer to continue the Public Health investment into the delivery of preventative support interventions from Children's Centres over a 2 year period between 1 April 2025 till 31 March 2027.
- b) To note that this funding will be provided from the Public Health Grant.

#### **4. Information and Analysis**

- 4.1 On 26 July 2018 Cabinet approved the development of a Section 75 Partnership Agreement between the Council (Public Health and Children's Services) and Derbyshire Community Health Services NHS Foundation Trust for the delivery of the 0-19 Public Health Nursing Service and the transfer of £1.000m to Children's Services to support with the delivery of a preventative offer from Children's Centres to families who had been referred via an Early Help Assessment across Derbyshire.
- 4.2 A Service Level Agreement (SLA) was set up between Public Health and Children's Services for the delivery of interventions in Children's Centres and included:
- Parent Education Programmes – Group-based programmes using the evidence-based Solihull approach for the parent/carers of pre-school aged children to enhance the capabilities of parents to provide a supportive and enriching environment for their children to grow up in.
  - Home Learning Programmes – Targeted group based or one-to-one programmes for the parent/carers of pre-school children to help prepare the children for school and nursery and achieve school readiness.
  - Ensuring Children's Centres were compliant with the UNICEF Baby Friendly Standards and that Children's Centres are audited on a biannual basis to comply with the relevant standards.
  - Having a Public Health Champion in each locality across Derbyshire to champion this work.
- 4.3 The SLA commenced on 1 April 2019 and was for a period of two years and six months. As part of the continued Public Health contribution to the delivery of preventative interventions in Children's Centres, three further 12-month SLAs have been approved. The current SLA with Children's Services is due to expire on 30 September 2024, although on 1 February 2024 Cabinet approved a six month extension to the current funding meaning Public Health funding is committed to Children's Centres until 31 March 2025.
- 4.4 SLAs put in place as part of the extended funding over the past three years following the Covid-19 pandemic have emphasised a blended approach of group based and one-to-one interventions as well as face-to-face and virtual delivery depending on the needs of the families. In many cases, face-to-face delivery is essential for the interventions,

however the learning from the Covid-19 pandemic has shown that modern technologies are also beneficial.

- 4.5 Analysis of monitoring data indicates that during the 2022-23 SLA period (October 2022-September 2023), a total of 264 group based or one-to-one support sessions were delivered to 2,464 individuals (parent/carers or close family members and children). Children's Services are also reporting that cases are of an increasing complexity which requires targeted support. Children's Services have continued to meet key performance indicators in relation to the number of families supported each quarter over the past year. Case studies have also been provided each quarter that demonstrate the complex needs of families accessing the interventions and the positive impact that the interventions delivered as part of this SLA have had on families. Work is also currently ongoing to enable Children's Services to provide more data within the quarterly performance reports on the Public Health outcomes achieved that will be used to help further showcase the impact these interventions have on vulnerable families.
- 4.6 Previous approvals to extend Public Health funding into Children's Services have been for a 12-month period. These extensions in funding have been essential for the continuation of the preventative interventions contained within the SLA. However, these shorter-term extensions have made it difficult to undertake a more detailed review of the current SLA and develop a longer-term approach to utilising the Public Health funding contribution into Children's Services. Therefore, this report seeks approval to commit Public Health funding to Children's Services over a 2 year period to 31 March 2027. Providing Public Health funding over a longer period will enable Public Health and Children's Services to collaborate and work together to support the delivery of Public Health outcomes for Derbyshire families.

## **5. Consultation**

- 5.1 Public Health and Children's Services will work in collaboration to review the existing SLA and determine the best approach to utilise the Public Health investment into Children's Services to achieve positive Public Health outcomes for Derbyshire families. Advice from Legal Services will be sought to determine any consultation requirements prior to determining and implement the intended approach.

## **6. Alternative Options Considered**

6.1 Alternative option 1. Do not extend the funding between Public Health and Children's Services. Failure to provide additional funding will put at risk the delivery of preventative interventions from Children's Centres that contribute towards positive Public Health outcomes, that in turn will have a significant impact on the health outcomes for the most vulnerable families with young children in Derbyshire. More work needs to be undertaken to understand the impact the interventions delivered as part of the existing SLA have on Public Health outcomes for Derbyshire families and to determine the best approach for Public Health to support Children's Services moving forward. A continued financial contribution to Children's Services is required to help vulnerable families in Derbyshire achieve positive Public Health outcomes. It is for this reason that not providing additional funding into Children's Services is not the preferred option.

6.2 Alternative option 2. Seek approval to extend funding from Public Health to Children's Services for a 12-month period. Previous approvals to extend the Public Health financial contribution into Children's Services have been for a 12-month period and have been used to help continue the delivery of the interventions contained within the existing SLA. On 1 February 2024 Cabinet approved a six month extension to the current funding. However, to further collaborate and develop the existing SLA to maximise the impact of Public Health outcomes requires a longer-term commitment to Public Health investment into Children's Services. It is for this reason why extending this funding for 12 months in line with previous approvals is not the preferred option.

## **7. Implications**

7.1 Appendix 1 sets out the relevant implications considered in the preparation of the report.

## **8. Background Papers**

8.1 Cabinet Report - 26 July 2018 – 'A New Approach to Public Health Nursing and Achieving Population Health and Wellbeing Outcomes in 0-19 Year Olds across Derbyshire'

8.2 Cabinet Report – 27 July 2023 – 'Public Health Service Level Agreement with Early Help 2023-24 and mitigating the impact of cost pressures within commissioned Public Health Services delivered by Derbyshire Community Health Services NHS Foundation Trust' (Restricted Report)

8.3 Cabinet Report – 11 January 2024 – ‘Budget savings proposals 2024/25 to 2028/29’

8.4 Cabinet Report – 1 February 2024 – ‘Revenue Budget 2024-25’

## **9. Appendices**

9.1 Appendix 1 – Implications

## **10. Recommendation(s)**

That Cabinet:

- a) Approves the transfer of £1.000m per annum from Public Health to Children’s Services via a journal transfer to continue the Public Health investment into the delivery of preventative support interventions from Children’s Centres over a 2 year period between 1 April 2025 and 31 March 2027
- b) Notes that this funding will be provided out of the Public Health Grant.

## **11. Reasons for Recommendation(s)**

11.1 Cabinet approval is required to provide additional Public Health funding for a 2 year period between 1 April 2025 and 31 March 2027 via a journal transfer to continue the Public Health investment into Children’s Services.

## **12. Is it necessary to waive the call in period?**

12.1 No

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## **Implications**

### **Financial**

- 1.1 Public Health will continue to provide £1.000m per financial year to Children's Services. The total cost of providing this funding via a journal transfer over a 2 year period between 1 April 2025 and 31 March 2027 will equate to £2.000m. This funding will continue to be met out of the Public Health Grant. The first six months of the 2024-25 financial year are covered by a previous SLA that is due to expire on 30 September 2024 and £0.500m investment will be transferred to Children's Services under this arrangement. Additional funding of £0.485m was approved by Cabinet in February 2024 to cover the period 1 October 2024 to 31 March 2025.
- 1.2 The Public Health Grant allocations are confirmed annually, therefore the grant allocations for 2025/26 and 2026/27 have not yet been announced. It is assumed that the grant will remain similar to previous years and this expenditure will therefore be funded from within the grant allocation.

### **Legal**

- 2.1 The Council's Financial regulations state that a journal transfer between departments of more than £100,000 requires the approval of Cabinet following a joint report of the Chief Financial Officer and the Executive Director. That report must specify the proposed expenditure and the source of funding and must explain the implications in the current and future financial years.
- 2.2 Legal Services have been involved in the development of SLAs that have been put in place between Public Health and Children's Services. Legal Services will continue to be consulted on the development of an updated SLA to enable the continued investment from Public Health into Children's Services for the period 1 October 2024 to 31 March 2027.

### **Human Resources**

- 3.1 It is not the responsibility of Public Health to fund services delivered by Children's Services, however the delivery of preventative support interventions in Children's Centres that has been funded via SLAs between Public Health and Children's Services over recent years has contributed towards positive Public Health outcomes for Derbyshire families. Failure to provide continued funding into Children's Services at

this stage would jeopardise the future level of delivery of programmes and interventions within Children's Services that have a positive impact on Public Health outcomes. This in turn may place some of the workforce within Children's Services at risk if without Public Health funding many of the interventions and programmes that contribute towards Public Health outcomes become economically unviable. Extending this funding for a further 2 years will enable more time to consider the effectiveness of the interventions currently delivered within the SLA and determine an appropriate approach moving forward.

## **Information Technology**

4.1 N/A

## **Equalities Impact**

5.1 Preventative, support interventions offered as part of the SLA with Children's Services are targeted at supporting some of the most vulnerable families with young children across the county. Therefore, Public Health's financial support to Children's Services helps contribute towards the reduction of health inequalities of the most vulnerable families of young children in Derbyshire.

## **Corporate objectives and priorities for change**

- 6.1 All Public Health commissioned services set out to meet the outcomes outlined within the Adult Social Care and Health Service Plan, with a particular focus on:
- Resilient, thriving and green communities which share responsibility for improving their lives and supporting each other
  - Happy, safe and healthy people, with solid networks of support, who feel in control of their personal circumstances and aspirations
  - High quality public services that work together and alongside communities to deliver services that meet people's needs

## **Other (for example, Health and Safety, Environmental Sustainability, Property and Asset Management, Risk Management and Safeguarding)**

### 7.1 Risk Management

The Public Health Grant is determined annually and is ring-fenced for the use of Public Health functions. However, this current ring-fence is only guaranteed until the end of the 2024-25 financial year. This uncertainty around the ring-fence and annual grant allocation represents

both a financial and reputational risk to Public Health to commit longer-term funding to Children's Services if either the ring-fence is removed and / or if there is a significant reduction in the Public Health Grant allocation. Over recent years the Public Health Grant allocation has failed to keep up with the rate of inflation. This has created an additional financial risk across Public Health delivered services because cost pressures have been identified to deliver services funded out of the Public Health Grant. Therefore, committing to the longer-term funding of Children's Services will increase this financial risk further as the department manages the best way to utilise the Public Health Grant in light of these challenges.

The demand for Public Health services has increased following the Covid-19 pandemic as both the health needs and vulnerabilities of families have increased. The demand for services aimed at children and young people commissioned within Public Health and delivered by the Council and NHS organisations has increased. Failure to continue funding Children's Services to deliver preventative interventions may increase the vulnerabilities and health needs of those target population groups that Children's Services work with. This in turn may put significant strain on the capacity of the wider workforce aimed at supporting the health needs of vulnerable children and young people.





**FOR PUBLICATION**

**DERBYSHIRE COUNTY COUNCIL**

**CABINET**

**Monday, 29 April 2024**

**Report of the Executive Director - Corporate Services and Transformation**

**Proposal to consult on the cessation of Corporate Services and Transformation discretionary grant funding  
(Cabinet Member for Health and Communities)**

**1. Divisions Affected**

1.1 County-wide

**2. Key Decision**

2.1 This is a key decision because, if the proposed changes are made, they are likely to be significant in terms of their effect on communities living or working in an area comprising two or more electoral areas in the County.

**3. Purpose**

3.1 To seek Cabinet approval to:

- a) Approve consultation on the cessation of discretionary grant funding.
- b) Note that a further report will be submitted to Cabinet following conclusion of the consultation, including a full Equality Impact Assessment

**4. Information and Analysis**

4.1 Twenty VCS grants have been funded from within the CST department for a significant period of time, as part of the Strategy and Policy team within the People and Organisational Change (POC) division. The funding supports the core business of a number of VCS organisations and their activities. These grants are grouped into three main areas of support/activity:

- **Core VCS support infrastructure - £206,892**  
11 VCS infrastructure support grant arrangements are in place across the county. Organisations receive funding to provide information, support, guidance, training, funding advice for groups, support to recruit and manage volunteers, promote good practice and provide a VCS perspective to the statutory sector at strategic level forums.
- **BME community support and consultation - £26,540**  
Five annual grant arrangements are currently in place with BME VCS organisations totalling £13,316. Funding supports organisations to strengthen the capacity of the BME sector. An annual grant, totalling £13,224, is also paid to Links CVS to facilitate a sustainable method of consultation and engagement with BME communities in Derbyshire through the BME Forum.
- **Specialist advice - £100,524**  
The Council currently awards three annual grants for specialist legal and employment advice services to Derbyshire Law Centre and Citizens Advice Mid Mercia, totalling £100,524.

4.2 A detailed breakdown of 2024-25 grant allocations can be found in Appendix 2.

4.3 Following a county wide audit of Voluntary and Community Sector 'VCS' grants in 2019, the Council undertook a review of all recurring grants to the VCS. This process included two public consultations. The first took place in 2020 and set out draft proposals for the future funding model of VCS infrastructure support. In July 2020, Cabinet approved key components of the proposals and the agreed approach was underpinned by:

- District level funding allocations, with providers working together where there are multiple providers within a district.
- New Service Level Agreements on an organisation/district basis, outlining the funding providers receive and how it is spent with a commitment from providers to deliver core VCS support through a shared outcomes framework.

- A comprehensive list of co-designed Key Performance Indicators with providers, which seek to understand and measure impact and what is being achieved.
- 4.4 The VCS Infrastructure provision consultation resulted in the adoption of a shared outcomes framework and an uplift in funding in some areas to ensure more equitable provision across the county. A number of objectives were also approved by Cabinet for further development and officers have worked in partnership with the Integrated Care Board who also fund VCS infrastructure provision, to improve and align the combined infrastructure offer.
- 4.5 The second consultation exercise took place in 2022, detailing two proposals (1) to introduce a specified end date to all grant funding save for exceptional circumstances (2) to introduce a commissioning pathway which would replace the recurring grants and to introduce an assessment criteria to determine whether the organisation should continue on that commissioning pathway or whether the grant would cease altogether.
- 4.6 In July 2022 Cabinet approved the proposals. The introduction of an end date has ensured all organisations in receipt of Council grant funding understand that funding is finite in nature and therefore they should not have expectations that further grant funding would be available or continue, following the current award allocation. This means that the Council could commission or decommission activities in the future where appropriate.
- 4.7 The Council also assessed all the grants it provides to the VCS and identified activity the Council wished to retain through a commissioned process moving forward. Officers have worked with funded organisations and key stakeholders to develop commissioning plans.
- 4.8 All of the grants outlined in this report have been allocated funding for the 2024-25 financial year and current arrangements are due to end on 31 March 2025.

### **Financial Position**

- 4.9 Since the VCS Funding Review was concluded and the new approaches were agreed for implementation, the Council has faced significant financial challenges.
- 4.10 The Council has a legal obligation to deliver a balanced budget and a projected overspend for 2024-25 has led the Council to introduce a

series of financial controls including tight controls over non-essential spend. This position has significantly changed the context within which the Council allocates its budget and funds the provision of services.

- 4.11 It is anticipated that there will be further budget challenges in future years and all areas of the Council are required to deliver in year financial savings and propose further areas for budget savings in future years. The current financial position and requirement to make additional efficiencies and budget savings means that activity which directly contributes to the delivery of the Council's statutory duties, must now be prioritised.
- 4.12 The Council does not have a specific statutory duty to offer grant funding to the organisations outlined in this report, therefore this spend has been identified as discretionary.
- 4.13 It is therefore proposed that the CST VCS discretionary grant funding is ceased.
- 4.14 Cabinet should note that this position also aligns to Adult Social Care's review of discretionary funding and their intention to publicly consult on the current allocation of grants to the voluntary sector which support community based preventative services, including VCS infrastructure grants. In the interests of transparency, seven organisations will be impacted by both this grant proposal and the adult Care infrastructure grant proposal.
- 4.15 Best Value Guidance also states that an Authority should actively engage the affected organisation and service users as early as possible before making a decision on:
- The future of the service.
  - Any resulting effect on assets used to provide this service.
  - The wider impact on the local community.
- 4.16 It is therefore recommended that Cabinet agree to undertake a formal public consultation on the cessation of discretionary grant funding as outlined in this report, to ensure that the implications are fully considered and understood.
- 4.17 Proposed timeline for consultation.

Date	Action
May 2024	<ul style="list-style-type: none"> <li>• Work with grant recipients to identify service users who need the questionnaire in easy-read or alternative format.</li> <li>• Public consultation meetings planned in all Districts including affected organisations and people who draw on support from the services.</li> <li>• Equality Impact Assessment commences.</li> </ul>
May - August 2024	<ul style="list-style-type: none"> <li>• Consultation Opens for 12 weeks.</li> <li>• Online Consultation Survey published on the DCC website including easy read format.</li> <li>• Requests for alternative formats will be received through contact details published on the website.</li> <li>• Funded organisations will be engaged directly and invited to one-to-one meetings.</li> <li>• Public consultation meetings take place (in-person and virtual).</li> <li>• Outputs from the consultation collated, reviewed and considered.</li> <li>• Equality Impact Assessment completed.</li> </ul>
September - October 2024	<ul style="list-style-type: none"> <li>• Analysis and report to be considered by Scrutiny Committee (30 October).</li> </ul>
November / December 2024	<ul style="list-style-type: none"> <li>• Report to Cabinet sharing the findings of the consultation (14 Nov or 5 Dec).</li> </ul>
January – March 2025	<ul style="list-style-type: none"> <li>• Implementation of Cabinet decisions, if required.</li> </ul>

### **Moving forward**

4.18 If following consultation, Cabinet approves the cessation of discretionary grant funding, it is anticipated that the funding areas outlined in this report would not receive grant funding beyond 31 March 2025. This end date is clearly specified in current grant agreements and it is important that organisations plan for this in their own budget setting processes for the 2025-26 financial year.

4.19 The Council will continue to make grant payments as specified for the 2024-25 financial year whilst the decision-making process is undertaken.

### **5. Consultation**

- 5.1 Consultation is required to enable officers to seek the views of various stakeholders, organisations, the people drawing on the services and the public to understand the full implications of the proposal to end discretionary grant funding as set out within this report. The proposal is to carry out a 12-week period of consultation.
- 5.2 If Cabinet were to agree to the proposed consultation exercise and subsequently agreed to make any changes to the grant funding, the Council would need to give funded organisations and the public/service users impacted, three months' notice of any resulting funding changes as outlined in the Derbyshire Compact and Local Authority Best Value Statutory Guidance.
- 5.3 Colleagues from Adult Social Care are proposing to consult on their own infrastructure grants. It is intended that where possible Adult Social Care and CST will adopt a coordinated and joined up approach to consultation and engagement to ensure that duplication is minimised and that where organisations receive funding from both departments, they are not required to respond to multiple consultations. It will also enable the potential impact of ceasing both the CST and ASCH infrastructure grants to be properly understood and considered before any subsequent decisions are made. A separate Cabinet Report setting out the position in relation to those grants and the associated consultation is also due to be considered at the Cabinet meeting on 29 April 2024.
- 5.4 As outlined in this report, in line with the current Derbyshire Compact, it is recommended that there is a 12-week period of consultation to receive feedback on the impact of proposals as outlined in this report. The consultation process will start in June 2024 and will close in August 2024
- 5.5 The purpose of the consultation is to:
- Gain an understanding of the impact of ceasing discretionary grant funding from relevant stakeholders.
  - Enable stakeholders to outline how the policy will impact residents.
  - Enable stakeholders to offer viable alternatives within the parameters of the current position for how impact can be mitigated.
- 5.6 It will include the following elements:

- Identification of people, groups, organisations and other stakeholders who should be informed of and included in the proposed consultation.
- Consultation meetings.
- Online information and survey, including easy read format.
- Information and survey available in hard copy or alternative language / format, on request.
- Equality Impact Assessment.
- Report to Cabinet containing the consultation findings and recommendations.

5.7 The table below outlines who the Council will be consulting with and why:

<b>Who</b>	<b>Why</b>
Current grant recipients	<ul style="list-style-type: none"> <li>• The grant funding these recipients currently receive is impacted by proposals</li> <li>• The need to understand the impact of ceasing discretionary grant funding</li> </ul>
The wider VCS	<ul style="list-style-type: none"> <li>• Do not currently receive funding from the Council but changes may affect the support they receive and their ability to apply for grants in the future</li> </ul>
ICB	<ul style="list-style-type: none"> <li>• Partner agencies may:               <ul style="list-style-type: none"> <li>- Fund the organisations/groups impacted</li> <li>- Signpost to the organisations impacted</li> <li>- Rely on the organisations to support their priorities</li> </ul> </li> </ul>
District and Borough Councils in Derbyshire	
Police and Crime Commissioner	
General Public	<ul style="list-style-type: none"> <li>• To understand what impact (direct/indirect) ceasing discretionary grant funding could have on residents</li> </ul>

5.8 During the proposed consultation period, consultations with current grant recipients, key stakeholders and partners will take place through a range of methods including, as a minimum, one-to-one meetings with current recurring grant recipients and a publicly available online questionnaire.

## **6. Alternative Options Considered**

6.1 Alternative Option 1 Do Nothing – The Council could let current grant arrangements expire in March 2025 and not extend arrangements beyond this time without carrying out consultation. This option is not recommended as it would result in the Council failing to meet its obligations under the Derbyshire Compact and the Local Authority Best Value Statutory Guidance which states that funded organisations and service users should be given three months’ notice, should be actively engaged as early as possible, and those affected should get an opportunity to have their say. Failure to meet these obligations would leave the Council vulnerable to legal challenge and reputational damage.

6.2 Alternative Option 2 Continue to fund discretionary grants annually – Whilst this approach would secure continuity of some community support and activity, alternative efficiencies would need to be identified in order to enable the Council to present a balanced budget in the future.

## **7. Implications**

7.1 Appendix 1 sets out the relevant implications considered in the preparation of the report.

## **8. Background Papers**

8.1 Report to Cabinet – Voluntary and Community Sector Review 30 July 2020

8.2 Report to Cabinet – Voluntary and Community Sector Review 6 December 2021

8.3 Report to Cabinet – Voluntary and Community Sector Review 29 July 2021

8.4 Report to Cabinet – Voluntary and Community Sector Review 28 July 2022

8.5 Report to Cabinet – Budget Savings Proposals 2024/25 to 2028/29 11 January 2024

8.6 Report to Cabinet – VCS Infrastructure Provision 2024-25 14 March 2024



- 8.7 Report to Cabinet Member Health and Communities – Provision of Specialist Advice Services 2024-25 19 February 2024
- 8.8 Report to Cabinet Member Health and Communities – Provision of BME Community Support and Consultation Services 2024-25 19 February 2024

## **9. Appendices**

- 9.1 Appendix 1 – Implications
- 9.2 Appendix 2 – Current CST grant allocations

## **10. Recommendation(s)**

That Cabinet:

- a) Approve consultation on the cessation of discretionary grant funding.
- b) Notes that a further report will be submitted to Cabinet following conclusion of the consultation, including a full Equality Impact Assessment

## **11. Reasons for Recommendation(s)**

- 11.1 To ensure the Council adopts a clear and consistent policy regarding discretionary VCS funding that is aligned to the Council's financial position and supports the delivery a balanced budget.
- 11.2 Formal consultation is required to understand the full implications of the proposals contained within this report. Consultation for twelve weeks is proposed to ensure the Council has sufficient time to carry out a robust consultation exercise and carefully consider the outcome of that consultation before any subsequent decisions are made.
- 11.3 A further report will be submitted to Cabinet following the conclusion of the consultation if approved to ensure that Cabinet is fully informed of the outcomes of the consultation and Equality Impact Assessment, before it makes a decision about the cessation of VCS discretionary grant funding.

## **11. Is it necessary to waive the call in period?**

- 11.3 No

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**Implications****Financial**

- 1.1 The table below summarises the total amount of annual funding and number of discretionary grants from the budget held by the Strategy and Policy Team within the POC division in 2024-25.

**Discretionary VCS Grants**

<b>Grant Area</b>	<b>Number</b>	<b>£'s</b>
VCS infrastructure	11	£206,892
BME Consultation and Support	6	£26,540
Specialist Advice Service	3	£100,524
<b>Total</b>	<b>20</b>	<b>£333,956</b>

- 1.2 The Budget Savings Proposals 2024/25 to 2028/29 report approved by Cabinet in January 2024 sets out the significant budget pressures being faced by the Council and the necessity to deliver a significant programme of savings and efficiencies during 2024/25 and beyond. The proposal to cease discretionary grant funding could result in an additional £0.334m being saved from this budget.
- 1.3 If discretionary grant funding ends there will be specific financial impact on individual organisations which will be ascertained through the consultation and engagement process.

**Legal**

- 2.1 The Council has power to provide grants to voluntary and community sector organisations under the general power of competence set out in section 1 of the Localism Act 2011 but there is no statutory duty to provide grants to these voluntary organisations.
- 1.1 The proposal triggers the duty to consult with the public and those directly affected including the organisations, service users and relevant stakeholders.
- 1.2 Case law has established the minimum requirements of consultation, which, if not met, usually renders the consultation unlawful and any

consequential decision liable to be quashed. When undertaking a consultation exercise, a public authority must:

- a) undertake the consultation when the proposals are at a formative stage;
- b) provide sufficient reasons for the proposal, so as to permit intelligent consideration and response;
- c) provide adequate time for consideration and response; and
- d) take the products of consultation conscientiously into account.

1.3 In assessing these proposals, the Council should also have regard to the Public Sector Equality Duty ('PSED') under the Equality Act 2010.

1.4 The PSED requires public authorities to have "due regard" to the need to:

- eliminate discrimination, harassment, victimisation and any other conduct that is prohibited by or under the Equality Act 2010 (*section 149(1) (a)*).
- advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it (*section 149(1) (b)*). This involves having due regard to the need to:
  - remove or minimise disadvantages suffered by persons who share a relevant protected characteristic that are connected to that characteristic.
  - take steps to meet the needs of persons who share a relevant protected characteristic that are different from the needs of persons who do not share it (*section 149(4)*); and
  - encourage persons who share a relevant protected characteristic to participate in public life or in any other activity in which participation by such persons is disproportionately low.
  - foster good relations between persons who share a relevant protected characteristic and those who do not share it (*section 149(1)(C)*).

1.5 Preliminary consideration has been given to the impact of the proposals on persons with protected characteristics in drawing up these proposals. In particular it is recognised that the methods and content of the consultation will need to be designed so as to fully reflect the needs

of the relevant protected groups, in particular older people and disabled people.

- 1.6 In addition, regard has been given to the Equality Impact Analysis (EIA), as referenced within the report. A full EIA will be prepared during the consultation process and will reflect on issues that are raised during the consultation process. This will be reported in full to Cabinet and a full copy of the EIA made available to Members in order that any adverse impact along with any potential mitigation can be fully assessed. Cabinet members will be reminded at that time of the need to have careful regard to the conclusions of the EIA.

### **Human Resources**

- 3.1 The voluntary and community sector organisations currently funded by the Council as part of this report are independent of the County Council and therefore there are no workforce implications.

### **Information Technology**

- 4.1 None.

### **Equalities Impact**

- 5.1 A draft EIA has been completed prior to any formal feedback, to inform the position to end discretionary grant funding.

### **Corporate objectives and priorities for change**

- 6.1 The Council Plan values commit to spending money wisely, making the best use of the resources that the Council has. The Council Plan outlines the significant budget pressures facing the Council and the need to take additional action to transform the way the Authority operates, make additional budget savings, scrutinise all spending decisions and put in place cost control measures when required. It also highlights the new integrated strategic planning approach that has been used to better align the budget to the Council's priorities and assist in effective resource planning.
- 6.2 The proposals in this report align to this approach and ensure that the identified resources can be used in the most efficient and effective way to support the strategic objectives of the Council.

**Other (for example, Health and Safety, Environmental Sustainability, Property and Asset Management, Risk Management and Safeguarding)**

7.1 None.

## VCS Infrastructure Support Payments

Organisation Name	Brief description of what the grant is provided for/activity it supports, including the type of service	April 2024 – March 2025 (£'s)
Amber Valley CVS This organisation is also in receipt of an ASCH infrastructure grant as highlighted at paragraph 4.14	Provide information, support, guidance, training, funding advice for groups, support to recruit and manage volunteers, promote good practice and provide a VCS perspective to the statutory sector at strategic level forums.	15,378
Bassetlaw CVS (Bolsover District) This organisation is also in receipt of an ASCH infrastructure grant as highlighted at paragraph 4.14	Provide information, support, guidance, training, funding advice for groups, support to recruit and manage volunteers, promote good practice and provide a VCS perspective to the statutory sector at strategic level forums.	34,390
Chesterfield Volunteer Centre	Provide information, support, guidance, training, funding advice for groups, support to recruit and manage volunteers, promote good practice and provide a VCS perspective to the statutory sector at strategic level forums.	23,471
Derbyshire Dales CVS This organisation is also in receipt of an ASCH infrastructure grant as highlighted at paragraph 4.14	Provide information, support, guidance, training, funding advice for groups, support to recruit and manage volunteers, promote good practice and provide a VCS perspective to the statutory sector at strategic level forums.	15,378
Derbyshire Voluntary Action This organisation is also in receipt of an ASCH infrastructure grant as highlighted at paragraph 4.14	Provide information, support, guidance, training, funding advice for groups, support to recruit and manage volunteers, promote good practice and provide a VCS perspective to the statutory sector at strategic level forums.	5,305
Erewash Voluntary Action CVS This organisation is also in receipt of an ASCH infrastructure grant as highlighted at paragraph 4.14	Provide information, support, guidance, training, funding advice for groups, support to recruit and manage volunteers, promote good practice and provide a VCS perspective to the statutory sector at strategic level forums.	15,378

High Peak CVS This organisation is also in receipt of an ASCH infrastructure grant as highlighted at paragraph 4.14	Provide information, support, guidance, training, funding advice for groups, support to recruit and manage volunteers, promote good practice and provide a VCS perspective to the statutory sector at strategic level forums.	15,378
Links CVS	Provide information, support, guidance, training, funding advice for groups, support to recruit and manage volunteers, promote good practice and provide a VCS perspective to the statutory sector at strategic level forums.	36,058
South Derbyshire CVS This organisation is also in receipt of an ASCH infrastructure grant as highlighted at paragraph 4.14	Provide information, support, guidance, training, funding advice for groups, support to recruit and manage volunteers, promote good practice and provide a VCS perspective to the statutory sector at strategic level forums.	15,378
Rural Action Derbyshire	Provide information, support, guidance, training, funding advice for groups, support to recruit and manage volunteers, promote good practice and provide a VCS perspective to the statutory sector at strategic level forums.	15,378
BME Infrastructure	Provide information, support, guidance, training, funding advice for groups, support to recruit and manage volunteers, promote good practice and provide a VCS perspective to the statutory sector at strategic level forums.	15,400
<b>Total</b>		<b>206,892</b>

## Specialist Advice Services

Funded organisation	Brief description of what the grant is provided for/activity it supports, including the type of service	April 2024 – March 2025 (£'s)
Derbyshire Law Centre	Provide specialist legal advice throughout the county	60,524
	Provide specialist employment advice Services to cover Derbyshire Dales, Amber Valley, Erewash and South Derbyshire	29,600
Citizens Advice Mid-Mercia	Provide specialist legal advice in South Derbyshire	10,400
<b>Total</b>		<b>100,524</b>



## BME Consultation and community support

Funded organisation	Brief description of what the grant is provided for/activity it supports, including the type of service	Grant 2024-2025 (£'s)
Asian Association	Strengthen the capacity of the BME sector as a whole within the county of Derbyshire, engage with the Council and participate in the BME forum.	3,744
Chesterfield African Caribbean Community Association	Strengthen the capacity of the BME sector as a whole within the county of Derbyshire, engage with the Council and participate in the BME forum.	3,744
Chesterfield Muslim Association	Strengthen the capacity of the BME sector as a whole within the county of Derbyshire, engage with the Council and participate in the BME forum.	1,821
Derbyshire Chinese Welfare Association	Strengthen the capacity of the BME sector as a whole within the county of Derbyshire, engage with the Council and participate in the BME forum.	2,186
Muslim Welfare Association	Strengthen the capacity of the BME sector as a whole within the county of Derbyshire, engage with the Council and participate in the BME forum.	1,821
Consultation and Engagement (Links CVS)	Facilitation of a sustainable method of consultation and engagement with BME communities in Derbyshire.	13,224
<b>Total</b>		<b>26,540</b>

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**DERBYSHIRE COUNTY COUNCIL**

**CABINET**

**Monday 29 April 2024**

**Report of the Executive Director - Children's Services**

**Early Help and Children's Centres in Derbyshire**  
(Cabinet Member for Children and Families)

**1. Divisions Affected**

1.1 County-wide

**2. Key Decision**

2.1 This is a key decision because it is likely to result in the Council incurring expenditure which is, or savings which are significant having regard to the budget for the service or function concerned (this is currently defined as £500,000) and it is likely to be significant in terms of its effect on communities living or working in an area comprising two or more electoral areas in the County.

**3. Purpose**

3.1 To seek approval to disestablish the current Early Help service including Children's Centres.

3.2 To note that the funding for the Early Help Development Team ends on 31<sup>st</sup> July and that this work with partner agencies will no longer continue.

3.3 To proceed with implementing a new service model for Family Help in Derbyshire, to retain 12 Children's Centre buildings, and to close 10 Children's Centre buildings.

**4. Information and Analysis**

4.1 Working Together to Safeguard Children 2023 defines early help as follows:-

*“Early help is support for children of all ages that improves a family’s resilience and outcomes or reduces the chance of a problem getting worse. It is not an individual service, but a system of support delivered by local authorities and their partners working together and taking collective responsibility to provide the right provision in their area.*

*Some early help is provided through “universal services”, such as education and health services. They are universal services because they are available to all families, regardless of their needs. Other early help services are coordinated by a local authority and/or their partners to address specific concerns within a family and can be described as targeted early help.*

*Examples of these include parenting support, mental health support, youth services, youth offending teams and housing and employment services. Early help may be appropriate for children and families who have several needs, or whose circumstances might make them more vulnerable. It is a voluntary approach, requiring the family’s consent to receive support and services offered. These may be provided before and/or after statutory intervention.”*

4.2 The provision of early help by local authorities is subject to inspection and regulation by Ofsted under the Inspection of Local Authority Children’s Services framework (which was updated in August 2023).

4.3 The Council satisfies its early help responsibilities through the service areas outlined below by providing:

- Parenting assessments – these are needed by the courts
- Family Time – we supervise sessions with parents and their children as directed by the courts
- Family support to address the intensive needs of children and families as set out in the Safeguarding Children Partnership Threshold Document.
- Work to track and school leavers if they do not find a place at college, sixth form or a job with training

4.4 The Ofsted framework states that any focussed visit to Children’s Services may look at how the front door operates and a theme from that could be step-up from and step-down to early help.

- 4.5 In evaluating children and young people’s experiences, inspectors will test thresholds within early help – including early help assessments.
- 4.6 Ofsted’s inspection judgement of overall effectiveness of Children’s Services is cumulative and derived from a number of factors including the experience and progress of children who need early help and protection. The descriptor for the grade of outstanding includes *“The impact of leaders on social work practice with children and families’ is likely to be outstanding if... they innovate and generate creative ideas to sustain the highest-quality services, including early help services, for all children and young people”*.
- 4.7 Working Together to Safeguard Children 2023 also states:
- “Local organisations and agencies should have in place effective ways to identify emerging problems and potential unmet needs of individual children and families. Local authorities should work with organisations and agencies to develop joined-up early help services, which can be delivered through a Family Hub model where they exist, based on a clear understanding of local needs. Local authorities should use the Joint Strategic Needs Assessment (JSNA) to inform their early help offer”*.
- 4.8 Early help and early intervention have been part of Derbyshire Children’s Services offer to families for more than 20 years.
- 4.9 In 2001, the first Sure Start local programmes were established in Derbyshire delivering targeted and universal support to children aged 0-5 and their families.
- 4.10 The success of the Sure Start local programmes lead to a rapid and significant expansion of the model which evolved into Children’s Centres – and in 2010 there were 54 Children’s Centres across Derbyshire.
- 4.11 In 2011 the Multi- Agency Teams (MATs) were established to deliver early help services to children and young people aged 0-19 and their families. The following teams were brought together under a streamlined management structure from different parts of the organisation:
- Children’s Centres
  - Family Support / school-based Family Resource Workers
  - Education Welfare Service
  - Youth Workers

- Connexions / careers guidance

4.12 Over the years, due to the need to balance Council budgets there have been a number of service reviews and redesigns which reduced the resources (including buildings) in Children's Centres and Multi-Agency Teams. The most recent of these was the Early Help Review in 2019 which saw the disestablishment of the Multi-Agency Teams and the establishment of six locality based targeted Early Help Teams.

4.13 The current Early Help Teams and Children's Centres provide support to children, young people and families with an evidenced level of intensive needs (as set out in the Derby and Derbyshire Safeguarding Children Partnership (DDSCP) Threshold Document including the following:

- Support undertaking Early Help Assessments with children, young people and families
- One to one support within the home, and direct work with children and young people
- Parenting assessments
- Family Time (supervised contact)
- Connecting children, young people and families to more sustainable and community-based support
- Lead professionals leading a Team Around the Family
- Parenting groups delivering the Solihull Parenting Approach and Non-Violent Resistance training
- Core offer of groups and activities for children 0-5 and their families focussed on child development, school readiness and parenting
- Targeted support to reduce the risks of children being exploited (CE)
- Missing Return Interviews
- Use of the Graded Care Profile (to support cases of neglect or compromised parenting)
- Street and community based detached work with young people
- Support to address conflict within families
- Support to improve family relationships
- Support to improve school attendance / engagement with education

4.14 A large number of Children's Centre buildings provide vital accommodation for the delivery of court ordered Family Time, and these buildings also provide opportunities for partners and volunteers to support children, young people and families.

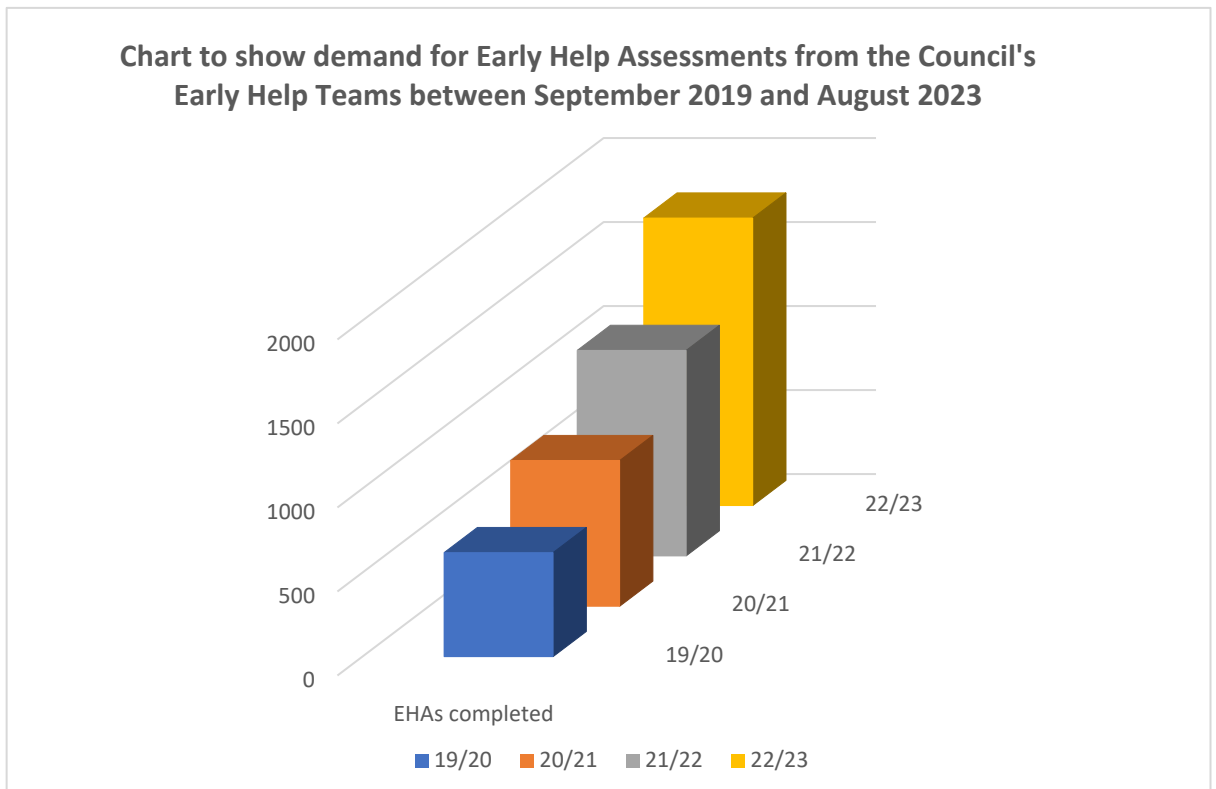
4.15 Children’s Centre staff play an important role around the Keeping Babies Safe agenda and so a pre-birth framework of direct work is delivered one to one with families, or through a targeted antenatal group. The work incorporates the key areas of Keeping Babies Safe, as well as additional important considerations such as practical preparation for birth, coping with a crying baby, play and stimulation.

4.16 The work of both the Early Help Teams and Children’s Centres were commended by the Ofsted inspectors during their recent inspection of Children’s Services (November 2023).

4.17 As at 31 March 2024, there were:-

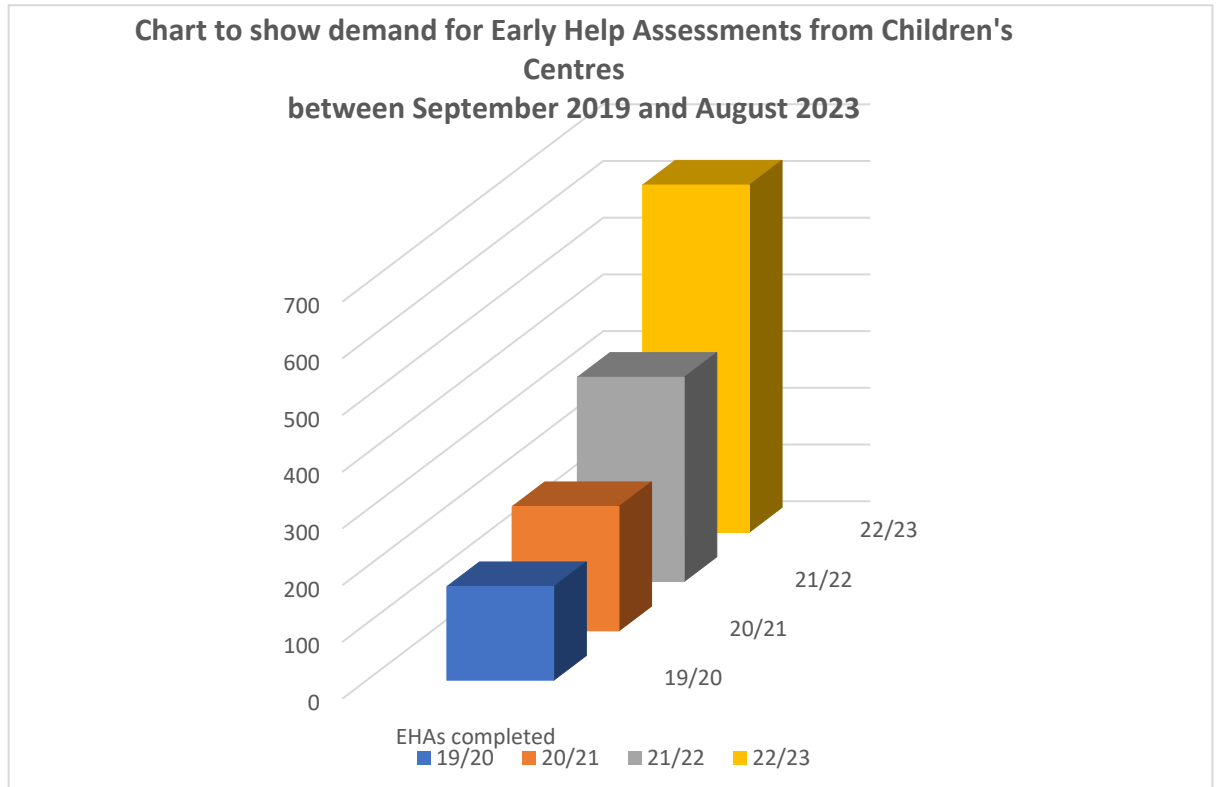
- 1163 children with an allocated worker (one to one, or group)
- 229 Early Help Assessments being undertaken
- 504 Child’s Plans in review (lead by an Early Help Worker as Lead Practitioner)
- 134 Parenting Assessments being undertaken
- 544 group events delivered (since 1 January 2023)

4.18 Since their establishment in 2019, demand for support from the Council’s Early Help Teams has grown year on year:



4.19 Overall, demand for support from the Council's locality targeted Early Help Teams has increased by 176% since September 2019.

4.20 Since September 2019, demand for support from the Children's Centre teams has also grown:-



4.21 Overall, demand for support from the locality targeted Children's Centres has increased by 272% since September 2019.

4.22 It is likely that the rise in demand for both Early Help and Children's Centres relates to the impact of austerity and the loss of services within the public sector and the voluntary, community and independent sector to lend support.

4.23 A report from the Association of Directors of Children's Services (ADCS) "Childhood Matters" from February 2024 highlights a concerning trend of increasing demand for support from children's services since 2017, with a significant rise in initial contacts and children entering care. Young people facing vulnerabilities such as exploitation and homelessness now constitute the fastest-growing cohort in the care system. Challenges persist in addressing risks outside the home, including online exploitation, underscoring the need for more proactive and responsive measures to safeguard children and young people.



- 4.24 The ADCS report suggests that in order to address these systemic challenges, there is an urgent need for a sustainable, multi-year funding settlement that prioritises early help and support services.
- 4.25 Due the significant financial challenges faced by the Council, there is a need to take some incredibly difficult decisions to ensure that any non-statutory services (in this case early help and early intervention services) can be delivered with a much-reduced funding envelope – and this will require a service re-design.
- 4.26 Childrens Services has a current budget of £6.029m which is used to fund the Services for Early Help and Children Centres. Corporate Property also hold a budget of £0.277m for the Children Centre building cost and Public Health provide £1.000m funding in order to meet the Public Health Outcomes Framework for children which also contributes to the Childrens Centre Service. In order to help meet the Childrens Services savings for 24/25 the proposal within this paper outline the changes planned. As a result of reducing the number of Children Centres their will be a saving to Corporate property of £0.083m (as this budget was previously held by Childrens Services this will contribute towards the Childrens Services savings for 24/25) It is also anticipated property could make further savings following closures to budget they already hold for Cleaning & Caretaking details of which are not part of this paper. Childrens Services will also save a further £0.051m linked to building closures, the staffing changes outlined within this paper will save a further £3.515m.
- 4.27 As set out in 4.13 above, within Early Help sits the Parenting Assessment and Family Time Team (PAFTT). This team supports statutory work in Social Care by undertaking parenting assessments with those parents where there are concerns about their ability to care for their child(ren). The team also provides court ordered Family Time (supervised contact) with families where children have been removed from parents' care. It is essential that the PAFTT model is retained in any service redesign due to the statutory nature of the work.
- 4.28 The Early Help Development Team has been in place since September 2019 . This was intended as a temporary service to support partner agencies in developing services to meet their obligations under the safeguarding agenda. The service was initially due to end in September 2022, but was extended as partner agencies wanted that support to continue. Cabinet approved further funding from the Supporting Families programme (previously Troubled Families) reserve to extend the service to 31<sup>st</sup> July 2024. The current annual cost of the team is

around £1.7m and this cannot continue to be provided from the departmental budget

- 4.29 The Early Help Advisors within the team support partners to undertake early help work, to deliver evidenced based interventions, undertake team around the family meetings and to capture the voice of the child.
- 4.30 Early Help Advisors work with schools, Health Visitors, voluntary, community and independent sector, school health, etc. to provide information and guidance on best practice in early help. The team have developed a programme of training and briefing sessions for all partners to access covering areas like how to undertake an Early Help Assessment.
- 4.31 The Early Help Advisors support partners through modelling to convene and act as lead professional in Team Around the Family meetings and offer advice on tools to use to elicit the voice of the child when undertaking direct work, support with understanding and using assessments around children at risk of exploitation, and how to assess neglect or compromised parenting with the Graded Care profile.
- 4.32 The Early Help Development Team are also in place to support the development of sustainable communities. The Youth and Community Engagement Workers support community groups with becoming constituted, accessing funding, undertaking risk assessments etc. The staff have also worked on the development of the Community Directory which partners can use to connect families to the appropriate support at the earliest opportunity without the need for them to refer on to specialist or targeted services.
- 4.33 Within the Early Help Development Team sits the Employment and Education Team. They fulfil Derbyshire's statutory duty to monitor 16-18-year-olds who are not in education, employment or training, or whose educational provision is unknown. The Employment and Education Officers work to connect young people to appropriate post-16 opportunities.
- 4.34 In the revised service model, it is essential that the resources to support the continued monitoring and support of young people aged 16-18 are retained. Under the proposed delivery model, this aspect of the service will be retained and remain part of the Early Help Service.

- 4.35 The workforce across Early Help and Children’s Centres currently consists of 177.5 full time equivalent (FTE) posts. The Early Help Development Team currently consists of 44 FTE posts.
- 4.36 Early Help duties and responsibilities within the revised Working Together guidance (described in 4.6) have not changed, and the Council is able to design a service which is sufficient to meet those expectations. The proposed service redesign aims to achieve that.
- 4.37 The future Early Help service redesign necessitates a different approach to the provision of early help and early intervention to children and families in Derbyshire and within the new arrangements we need to reduce the range and number of job roles to meet the constraints of the funding envelope. This also means that there are a number of services that we either cannot continue to provide to children and families, or that would need to be reduced including:-
- Undertaking early help assessments with children, young people and families
  - One to one support within the home, and direct work with children and young people
  - Connecting children, young people, and families to more sustainable and community-based support
  - Lead professionals leading a Team Around the Family
  - Running parent groups to help them deal with challenging behaviour from their children
  - Targeted support to reduce the risks of children being exploited
  - Carrying out interviews with young people if they have returned home after being reported missing to the Police
  - Helping families where neglect is suspected
  - Street and community-based work with young people
  - Support to address conflict within families
  - Support to improve family relationships
  - Support to improve school attendance
- 4.38 The disestablishment of the job roles within the Early Help Teams and Children’s Centres, along with service re-design carry with it a level of risk which can be summarised below:-
- Cessation of the current early help services to support children, young people and families would result in a detrimental knock-on effect to the most vulnerable children and young people. The number one presenting issue present in the cases referred into early help is mental health and those young people needing help would need to access support from other agencies – and there is

uncertainty over whether there is capacity amongst partner agencies to provide this.

- This proposal is politically unattractive and unpopular with Elected Members
- There is significant opposition from partner agencies and stakeholders (predominantly schools)
- Redundancy costs which would need to be funded from any savings.
- Pension shortfalls which would need to be funded from any savings.
- The proposals potentially serve as a false economy as there will be increased demand on Starting Point (front door) for screening and triaging safeguarding referrals, increased demand for frontline Social Care support as children's and families' needs become more acute, and an increase in the number of children and families being looked after by the Council.
- There is potential for delayed parenting assessments – the current Early Help staff are currently able to reprioritise work to offer additional capacity when demand is high.
- There is potential for reduced support for Family Time – the current Early Help staff are currently able reprioritise work to offer additional capacity when demand is high.
- There are likely to be significant and increased pressures on partner agencies to provide a greater level of early help and early intervention in the absence of support from the locality targeted Early Help Teams.
- There is potential for a detrimental impact on future Ofsted judgements.
- The loss of the family support element of the locality Early Help teams will adversely impact on the Supporting Families Payment by Results programme – the case work of frontline workers in Early Help is used towards the claims target. This would mean the income the department receives from the Department of Levelling Up Communities and Housing would be reduced – funding that is currently used to support early help work within the partnership, and in future will be used to fund the Stronger Families Team (in place to support reductions in the number of children within the care system).

4.39 Furthermore, the National Children's Bureau report "Supporting and strengthening families through the provision of early help" June 2021 states that:

*Emerging evidence shows that increased spending on preventative services (including family support and early help) has a positive impact on:*

- *Ofsted judgements*
- *Numbers of Children in Need; and*
- *Rates of 16–17-year-olds starting periods in care*

4.40 Considering reducing funding for early help services is a significant decision with far-reaching risks and implications. Actual data in the field of early help is always difficult to achieve because of an inability to measure the impact of prevention and the vital roles these services play in identifying and assisting vulnerable children and families.

4.41 Any service reductions could result in delays in providing necessary support, adding strain to already stretched services both within the Council (frontline Social Care Teams) and also in partner agencies (schools, CAMHS, Health Visitors, Midwifery, etc).

4.42 Additionally, research indicates that reductions in early help services may worsen outcomes for children and young people, affecting their well-being and future prospects. It's essential to reflect that reductions in resources now could lead to increased costs down the line, particularly in statutory services as families' needs become more complex and risk management harder to achieve.

4.43 Significant work has gone into the proposed service re-design below and it has altered significantly from the initial iteration taking into account the concerns raised within the public consultation and also the feedback from the partner engagement (more details of this can be found from section 5). The proposed service re-design enables the Council to fulfil its early help obligations as set out below:

- Establishment of 4 Family Help teams to cover the 6 localities.
- Retention of 12 Children's Centre buildings.

4.44 12 Children's centres have been identified to be retained. These are the larger centres that are used to deliver more community based services and also to provide safe venues for court ordered family time. The spread of the buildings ensures a Derbyshire wide service:

- Heanor
- Glossop
- Buxton (Fairfield)
- Brimington

- Birdholme
- North Wingfield (Alice's View)
- Shirebrook
- Creswell
- Eckington
- Ilkeston (Cotmanhay)
- Long Eaton
- Woodville

4.45 10 Children's Centres which are either not as well used, are smaller, or are close to other larger, more well used Centres are proposed to close and in order to enable the further use of these building spaces for children and families, discussions will be had with partner agencies about a transfer:

- Alfreton
- Ironville
- Langley Mill
- Bolsover
- Holme Hall
- Old Whittington
- Hadfield
- Gamesley
- Matlock
- Charnos (Ilkeston)

4.46 Department for Education (DfE) Sure Start Capital funding rules mean that local authorities may have to pay an element of clawback where a Children's Centre building is closed in advance of the expected 25-year lifespan.

4.47 All of the buildings under 4.45 could potentially be subject to clawback if they are closed as part of the proposals to reduce funding. The estimated costs are set out below:

<b>Name of Centre</b>	<b>Clawback estimate £</b>
Alfreton	85,328
Langley Mill Bailey Brook	68,487
Ironville	5,208
Bolsover	31,503
Holme Hall	57,312
Old Whittington	291,124

Gamesley	64,722
Hadfield	106,593
Matlock	117,235
Charnos Family Support Centre	0
<b>Total</b>	<b>827,512</b>

4.48 However, recent discussions with DfE on the proposals to close the buildings in 4.45 suggest that clawback may be avoided if there is evidence that the building can continue to deliver services for young children. Where this isn't the case, it may be possible to transfer the remaining financial liability to another building close by that continues to provide services for young children. This will significantly reduce the potential for large sums of money having to be repaid to DfE.

4.49 A decision would need to be made about the future of each of the buildings. All the ten children's centre buildings listed above for closure are held freehold and, in some cases, they are on school or academy sites and are sub-leased/licenced back in from the academy trusts. In some cases, the school or academy trust may wish to take over the accommodation. Indeed, the headteachers of Alfreton Nursery School and Hadfield Infant and Nursery School have already indicated they are keen to progress discussions to take over the space. Savings on property running costs will only be achieved once the buildings are sold or handed over to a school/academy.

4.50 Public Health have committed the £1.000m of funding to 31 March 2025 to support services for children aged 0-5 and their families, and there are very strong indications that, following a report to Cabinet on 29 April 2024 seeking approval for this, they will also be able to confirm funding to the end of March 2027 (3-year commitment).

4.51 To cover the period to 31 March 2025 and beyond, we would look to establish a specific team of 0-5 Practitioners (managed by a Senior 0-5 Practitioner) who would lead the continued delivery a core offer of early years intervention programmes and activities around child development, school readiness and parenting. The workers would also have a focus on Keeping Babies Safe work ensuring that babies remain safe from abuse, neglect, and harm. There would also be opportunities for the workers to undertake joint work with Social Care supporting families with group or 1:1 work on:-

- Safe sleep
- Attachment
- Safe Handling and Dressing

- Bathing
- Feeding
- Coping with crying/soothing baby
- Safe Space
- Play and stimulation

4.52 The funding from Public Health would fund the following posts:-

- 2 Grade 11 Senior Practitioners (0-5)
- 20 Grade 8 Practitioners (0-5)

4.53 The interventions provided by the workers above would support improvements in the Public Health Outcomes Framework and the Key Performance Indicator (KPI) expectations to meet the funding requirements for the £1m investment.

4.54 All of the above represents 103 FTE posts across Family Help and Children's Centres and is 118.5 FTE fewer posts than in the current Early Help, Children's Centre and Early Help Development teams.

## **5. Consultation**

3.1 A series of three roadshows for staff have been delivered where reasons behind the proposals were shared. Staff were given an opportunity to ask questions during a Q&A session – though many questions related to their individual circumstances which could not be answered at this stage.

3.2 Questions have been collated from the sessions (including those that staff weren't able to ask on the day) and these will be circulated with responses on the staff SharePoint site.

3.3 Additionally, two roadshows for partner agencies were delivered where reasons behind the proposals were shared, and partners were asked to work collectively to look at how the partnership can work collectively to mitigate against the reductions in funding.

3.4 It is important to note that the feedback from partners expressed significant concern for the impact in the reduction of Council early help services for vulnerable families and for increased demand within universal services which are already experiencing significant challenge and strain.

3.5 Formal consultation and engagement with staff will commence when the Cabinet papers go on circulation.



- 3.6 A 6-week period of consultation with all stakeholders was undertaken between 12 February and 24 March 2024 and included the following:-
- Residents of Derbyshire
  - Current and previous users of Early Help and Children's Centre services, including children and young people
  - All staff within Early Help and Children's Centres
  - Trade unions
  - Local Elected Members
  - Members of Parliament
  - Partners including schools, colleges, Public Health Nursing, GPs, Derbyshire Police, Community Safety, post-16 training providers, Midwifery, Derby City and Derbyshire Safeguarding Children Partnership, Social Care, Schools & Learning, Thriving Communities, Youth Justice, CAMHS, and Public Health.
- 3.7 As set out above, concerns raised and feedback from the public consultation, partner engagement and staff roadshows has been used to evolve the initial proposal for the service re-design building in additional roles to provide additional support and services.
- 3.8 The consultation in the form of an online questionnaire, was promoted through a public awareness campaign.
- 3.9 At the end of the consultation period, there were 2,027 responses. This is the single biggest response to a consultation in Children's Services, and one of the biggest responses to a consultation undertaken by the County Council.
- 3.10 A full breakdown and analysis of the consultation responses can be found in Appendix 2, however, the following points summarise the feedback.
- 3.11 For question 1 (To what extent do you agree or disagree with the proposal to keep Children's Centres in these areas?), accumulatively 83% of respondents agree or strongly agree with the proposal to keep Children's Centres in the 12 areas listed within the consultation. 11% of respondents disagree or strongly disagree with this proposal.
- 3.12 For question 2 (in your opinion, what are the top 3 most important services offered by early help and children's centres?), all respondents list the top 3 most important services as:
- Undertaking early help assessments

- Direct work with children and young people
  - Helping families where neglect is suspected
- 3.13 A more in-depth analysis of the data shows that for users of the service and members of the public, the top 3 most important services are:-
- Undertaking early help assessments
  - Direct work with children and young people
  - Running sessions for parents of children aged 0-5
- 3.14 For question 3 (in your opinion, what are the top 3 least important services offered by early help and children’s centres?) analysis shows the respondents list the top 3 least important services as:
- Support to improve school attendance
  - Carrying out interviews with young people after they have been reported as missing
  - Support preparing families for the birth of a child
- 3.15 For question 4 (to what extent do you agree or disagree with the proposal for the council to only provide those services that we are legally required to, and to also provide direct and practical help for families in Derbyshire?) analysis shows that accumulatively 70% of respondents disagree or strongly disagree with the proposal to only provide those services that we are legally required to provide. This increases to 74% when looking at responses from users of the service or members of the public.
- 3.16 However, it is also important to say that 16% of respondents agree or strongly agree with the proposal. When looking at users of the service or members of the public this rises to 18%.
- 3.17 For question 5 (to what extent to you agree or disagree that stopping some of these services could affect the well-being and support available to children and families in Derbyshire?) analysis shows that accumulatively 84% of respondents agree that stopping some of the services could impact the well-being and support available to children and families. 14% of all respondents disagree or strongly disagree that this would be the case – and when looking at users of the service or members of the public, this is 13%.
- 3.18 An analysis of all of the comments received has been undertaken to identify any themes arising from the feedback. Fifteen themes were identified and the top five with the most responses were:-

- **Impact on Vulnerable Children and Families:** Concerns about the disproportionate effect of reducing or eliminating early help services on vulnerable children and families, potentially leading to increased risks of neglect, harm, and family breakdowns. (Overall 44.8% of respondents cited this with percentages for individual varying from 35.9% from member of the public/service users to 51.4% for professionals).
- **Disagreement with Proposed savings:** Overall disagreement with the proposed savings to early help services, expressing shock, dismay, and anger at the potential impact on vulnerable families and children. (Overall 39.4% of all respondents cited this with this percentage varying from 42.4% of members of the public/service users to 38.2% of professionals).
- **Importance of Early Help Services:** Emphasizes the vital role of early help services in supporting families and children, preventing crises, and promoting positive outcomes. (Overall 37.4% of all respondents cited this with the percentage varying from 28.6% from people from the 'other' grouping to 37.9% for professionals).
- **Pressure on Social Care and Other Services:** Worries about the increased pressure that funding reductions to early help services would place on social care teams, schools, health services, and other agencies, given already overstretched resources. (Overall, 27.1% of respondents raised this issue with percentages varying from 17.8% for Members of the public/service users to 34.6% for professionals).
- **Long-Term Consequences and Cost:** Belief that investing in early intervention and prevention saves money in the long run by reducing the need for more intensive interventions later. (Overall, 22.5% of respondents raised this as an issue with percentages varying from 20.1% for Members of the public/service users to 25.7% for professionals).

3.19 The future model of delivery for Family Help and Children's Centres has changed significantly following the public consultation and following feedback from partner agencies and stakeholders.

3.20 The model now includes provision for the delivery of parenting programmes for families of children aged 0-5 from the Children's Centres, provision for the delivery of parenting interventions for families of children aged 6+ from the wider Family Help teams, and the retention of support for partner agencies.

- 3.21 As part of the public consultation exercise, correspondence was received from a number of stakeholders setting out their concerns to the proposals. Full details can be found in Appendix 3.
- 5.12 Mark Fletcher, Member of Parliament for Bolsover stated “... *I have immense concerns about the impact that an alteration to the services being delivered would have on children, families and alternative providers within Bolsover.*”
- 5.13 Child and Adolescent Mental Health Services from Chesterfield Royal Hospital stated “...*Without early help service provision there is a likelihood of missed or delayed referrals to the core CAMHS service as early help often provides support and guidance to young people and their families.*”
- 5.14 Public Health within Derbyshire County Council stated within their response “... *Identified risks include:*
- *children and young people’s needs will not be addressed until they become acute which will have a significant impact on long term outcomes*
  - *upward trend of numbers of children requiring statutory intervention will continue due to lack of capacity in the system to address issues as they occur*
  - *fragmentation of partner relations due to greater burden being placed with no resource to support*
- 5.15 Derbyshire Community Health Services (DCHS) stated in their response “... *There is the potential for children and families to present at the point of crisis, leading to more safeguarding and child protection concerns. Including an increase in advice calls to the Safeguarding Service and an increase in the escalation of cases*”.
- 5.16 Joined Up Care Derbyshire stated the following within their response “...*There is already an increase in children and young people presenting with more complex needs so to address this there needs to be a focus on providing help and support at the earliest opportunity. So, reducing the early help offer will increase the demand for more expensive, specialist service provision and the result of this will be that there will be an increase in spending rather than a reduction*”.
- 5.17 An Equalities Impact Assessment (EIA) has also been undertaken assessing the impact of the service reduction and re-design on protected groups and can be found at Appendix 4.

- 5.18 The proposals to reduce funding in Early Help and Children’s Centres, along with the revised service model were presented to Improvement and Scrutiny – People Committee on 11 April 2024.
- 5.19 The Committee was asked to provide feedback to Cabinet on the proposed review and Members raised a specific area of concern having thoroughly examined the proposals presented by officers, at the meeting, they remained concerned with the increased level of risk to children and families. It was encouraged that officers continued to work with Children’s Services to mitigate risk.

## **6 Alternative Options Considered**

- 6.1 The financial position faced by the Council means few alternative options can be considered.
- 6.2 Option 1 would be for the Council to continue funding the Early Help Service and the Children’s Centres at the same level as currently. This would result in budget savings (equal to £3.90m) not being achieved.
- 6.3 Option 2 would be for the Council to consider ceasing all Early Help activity other than parenting assessments, the delivery of court ordered Family Time, and for the monitoring of young people aged 16-18 who are NEET / have an unknown destination – which are either akin to or are specific statutory services. This would result in closure of the children’s centres and ceasing of all support for vulnerable families meeting the threshold for intensive level of need. In addition, the Council’s duties to meeting Public Health outcomes in respect of children would be severely curtailed.

## **7 Implications**

- 7.1 Appendix 1 sets out the relevant implications considered in the preparation of the report.

## **8 Background Papers**

- 8.1 Working Together to Safeguard Children 2023



Working Together  
2023.pdf

## 8.2 Derby City and Derbyshire Safeguarding Children Partnership Threshold Document



Threshold 2022.pdf

## 8.3 Cabinet report of 1 February



Public consultation -  
Early Help and Childre

## 9 Appendices

### 9.1 Appendix 1 – Implications

### 9.2 Appendix 2 – Analysis of data for the Early Help and Children’s Centres consultation

### 9.3 Appendix 3 - Specific feedback received in response to the public consultation and partner engagement on the proposals to reduce funding in Early Help and Children’s Centres.

### 9.4 Appendix 4 – Equalities Impact Assessment

## 10 Recommendation

That Cabinet:

- a) Approves the disestablishment of the Council’s existing Early Help teams and Children’s Centres
- b) Is satisfied that further funding for the Early Help Development Service should not be provided.
- c) Approves the implementation of a new service model for Family Help in Derbyshire, the retention of 12 Children’s Centre buildings, and the closure of 10 Children’s Centre buildings.

## 11 Reasons for Recommendation

### 11.1 To ensure the Council is able to make savings which help support the setting of a balanced budget.

## 12 Is it necessary to waive the call-in period?

12.1 No

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## Implications

### Financial

- 1.1 Early Help and Children Centres services currently cost £7.306m per annum, funded:
- Childrens Services budget of £6.029m
  - Public Health funding £1.000m
  - Corporate Property budget £0.277m

The staffing changes outlined within this paper would reduce the cost of the service by £3.249m per annum. The revised staff structure has been costed based on staffing pay scales and include appropriate on costs with all rates correct as at March 24. There may be redundancy costs as a result of the reduction in posts and these would be met from Children's Services budget, reducing savings achieved in the first year. This has been reflected in the profiling of the Children's Services 2024-25 savings allocations.

Reducing the number of Children Centres, if the vacated buildings are disposed of, will lead to savings on property running costs. Childrens Services would save £0.051m linked to building closures and Corporate Property budgets would benefit £0.083m from reduced running costs, with potentially further savings on cleaning and caretaking costs.

Supporting Families grant income will be used to fund service costs of £0.517m per annum.

In total the proposal is expected to result in budget savings of £3.900m per annum, contributing to achieving council savings targets.

### Legal

- 2.1 S10 of the Children Act 2004 determines that the Council is obliged to make arrangements to promote co-operation between the local authority and its relevant partners as well as any other persons who exercise functions relating to children in the local area, with a view to improving the well-being of local children. The functions must be discharged having regard to the need to safeguard and protect their welfare (S11 of the Children Act 2004). Under this Act, the duty is a general one, relevant to all children of all ages. Under the Childcare Act 2006 there is a specific duty to "young children", which is defined as those aged between 0-5.



- 2.2 S1 of The Childcare Act 2006 imposes a general duty to “improve the well-being of young children in their area and reduce inequalities between young children in their area”.
- 2.3 The Childcare Act 2006 S3 sets out that the Council must make arrangements to secure services which “facilitate access to those services and maximise the benefit of those services to parents, prospective parents and young children”.
- 2.4 The Council must have regard to the relevant statutory guidance namely the "Working Together to Safeguard Children" guidance updated most recently in December 2023 as referred to earlier on in this report.
- 2.5 The legislation sets out the clear duties upon the Council however, it allows discretion regarding the services to be put in place to meet those requirements.
- 2.6 Under S5A of the Childcare Act 2006 the Council must, so far as is reasonably practicable, include arrangements for sufficient provision of children’s centres to meet local need. This is known as the “sufficiency duty”. The Council must consider and assess three points; the need for children’s centres in the area, what provision would be enough to meet that need and what number of children’s centres it would be reasonably practicable to provide, taking into consideration relevant issues such as affordability and other practical considerations for example, buildings, location and accessibility. The Council must take into account the views of local families and communities in deciding what is sufficient provision.
- 2.7 The Council must have regard to the "*Sure Start children's centres statutory guidance 2013*" when carrying out its duties under the 2006 Act. The Guidance adds further information about the sufficiency duty. The Council should ensure that there is a network of centres accessible to all families with young children in their area; that children's centres and their services are within reasonable reach, taking into account distance and availability of transport; consider how best to ensure that the families can access them; target children's centres services at young children and families in the area who are at risk of poor outcomes through, for example, effective outreach services, based on the analysis of local need and not close an existing children's centre site in any reorganisation unless they can demonstrate that, where they decide to close a children's centre site, the outcomes for children, particularly the most disadvantaged, would not be adversely affected and will not compromise the duty to have sufficient children's centres to meet local need. The starting point should be a presumption against the closure of children's centres.

- 2.8 Under S5D of the Childcare Act 2006 the Council must carry out “such consultation as appropriate “before any significant change is made to services provided by a children’s centre or before any step is taken that would mean a children’s centre would cease to be a children’s centre”.
- 2.9 The Sure Start children's centres statutory guidance 2013 sets out that the Council should consult with “everyone who could be affected by the proposed changes, for example, local families, those who use the centres, children's centre staff, advisory board members and service providers. Particular attention should be given to ensuring disadvantaged families and minority groups participate in consultations”. The consultation should set out how it will continue to meet the needs of families with children under 5. The guidance also states that it should be clear how respondents can make their view known and be given adequate time to respond. The decisions following any such consultation should be announced publicly.
- 2.10 The length of the consultation is not prescribed in statute however Case law has set out that: -
- a) Consultation must be at a time when proposals are at a formative stage.
  - b) Sufficient information is available to enable a person to “give an intelligent consideration and response”.
  - c) there must be “adequate time to respond” and;
  - d) The results of the consultation must be taken into consideration when finalising any proposal and provided to the decision maker to inform their decision.
- 2.11 Guidance suggests ideally an 8-week consultation process and case law is available determining 10 weeks to be fair. Previously in 2018, the Council completed a 6-week consultation for the review of the Early Help Service. Any challenge to the length of consultation would be by way of judicial review.
- 2.12 From time to time, the Council will commence the Public Law Outline process (PLO) or initiate Court proceedings under S31 of The Children Act 1989 to safeguard children. Other applications under the Adoption and Children Act 2002 may also be initiated. The Council is required to comply with any Court directed parenting assessment, whether that be sourced in house or externally. For those children subject to Care Orders, the Council is duty bound to promote family time if it is deemed to be in the best interests of a child. Whilst there is a degree of discretion in how those duties are met, it is likely to be more beneficial to continue to provide those services in house. This is based on the demand for assessments, cost and the ability to retain overall control.

- 2.13 Early Help assessments can be conducted by partner agencies where it is believed that a child may have unmet need. In those circumstances, that agency ought to identify a lead professional to progress the matter. It is not a requirement that this is a professional within the Council. The Council will, however, need to continue to meet its statutory obligations to assess a child meeting the criteria under S17 or S47 of The Children Act 1989.
- 2.14 Under S149(1) of the Equality Act 2010 there is a positive obligation upon the Council to have “due regard to” the need to advance equal opportunities to people who have protected characteristics. Age, pregnancy and maternity are all protected characteristics. Under S149(3) it means having “due regard to the need to: -
- i) Remove or minimise disadvantages suffered by persons who share a relevant protected characteristic that are connected to that characteristic.
  - ii) Take steps to meet the needs of persons who share a relevant protected characteristic that are different from the needs of persons who do not share it; and
  - iii) Encourage persons who share a relevant protected characteristic to participate in public life or in any other activity in which participation by such persons is disproportionately low”.
- 2.15 An Equality Impact Assessment is likely evidence that the duty under the Equality Act has been discharged. Decision makers should give serious consideration to the assessment prepared and annexed to this report.
- 2.16 Pursuant to section 139 of the Employment Rights Act 1996 an employee who is dismissed shall be taken to be dismissed by reason of redundancy if the dismissal is wholly or mainly attributable to the fact that the requirements of that business for employees to carry out work of a particular kind have ceased or diminished or are expected to cease or diminish. The proposal outlined in this report will result in the deletion of posts creating a redundancy situation for the affected employees. The Council must undertake any such steps required pursuant to its Redundancy Policy to ensure that legislative requirements are met, and a fair procedure followed.
- 2.17 If the potential number of dismissals are more than 20 within a period of 90 days or less, there is a legal requirement under s188 of the Trade Union and Labour Relations (Consolidation) Act 1992 to consult with recognised trade unions.

## Human Resources

- 3.1.1 All of the above represents 103 FTE posts across Family Help and Children's Centres and is 118.5 FTE fewer posts than in the current Early Help, Children's Centre and Early Help Development teams.
- 3.2 Any resultant staffing changes will be approved by the Executive Director for Children's Services in conjunction with the Director of People and Organisational Change, Director of Finance & ICT and Director of Legal & Democratic Services. The Council will meet its legal obligation to reduce the number of compulsory redundancies and consider appropriate alternative employment in accordance with statutory requirements. Engagement has taken place with those employees affected and the joint trade unions and formal consultation will be undertaken on the proposals with both these stakeholder groups. This formal consultation will be undertaken in accordance with section 188 of the Trade Union and Labour Relations (Consolidation) Act 1992 and will be covered by the Council's corporate notification to the Secretary of State of potential redundancies under Section 193 of the Act. Formal employee consultation, both group and individual, will be carried out and in order to facilitate this process.
- 3.3 The new roles have been evaluated with the support of the council's Pay and Reward team in line with the Korn Ferry HAY Scheme.
- 3.4 As the employees' roles have been removed from the Council's structure and no longer exist. Any termination of employment will amount to a dismissal by reason of redundancy.
- 3.5 Before dismissing by reason of redundancy, the Council will consider alternatives to dismissal, including identifying any suitable alternative employment.
- 3.6 An indicative timeline for consultation is shown below:

<b>Activity</b>	<b>Date</b>
Informal engagement with employees and TUs	26 February 2024
WGG (Human Resources, Legal and Finance) advice assurance received	17 April 2024
ED approval and sign off	w/c 15 April 2024
Commence formal collective consultation (minimum of 30 calendar days)	25 April 2024
Completion of formal consultation	8 June 2024

<b>Activity</b>	<b>Date</b>
Confirm final proposals following consideration of consultation feedback	w/c 3 June 2024
Selection processes	June 2024
Notice issued	w/c 15 July 2024
New structure implemented	1 July 2024
Date of dismissal	4 October 2024

## **Information Technology**

4.1 No service implications identified.

## **Equalities Impact**

- 5.1 An Equalities Impact Assessment has been undertaken, and can be found at appendix 4, on the impact the proposals would have on the protected characteristic groups.
- 5.2 Overall, the proposals would have a negative impact on the protected characteristics of age, disability, pregnancy & maternity, race & ethnicity, sex or gender, sexual orientation, Human Rights, DCC employees, community and voluntary sector organisations working with protected characteristic groups, and socio-economic / financial inclusion, deprived communities / thriving communities.
- 5.3 The proposed service re-design has taken into account the analysis within the EIA, the concerns raised by from the public consultation, and feedback from the staff roadshows and partner engagement sessions, and a number of revisions have been made allowing for more roles to support children, young people and families.

## **Corporate objectives and priorities for change**

- 6.1 These will meet corporate objectives by contributing to the £3.9m saving. By reducing the workforce, this will contribute to the council's 'Journey to Net Zero Derbyshire' as there will be fewer children and families receiving support from the Council meaning fewer staff required. This will support reductions in CO2 emissions, reduction of: Travel, IT equipment and desks required in buildings.

**Other (for example, Health and Safety, Environmental Sustainability, Property and Asset Management, Risk Management and Safeguarding)**

- 7.1 The property and asset management considerations are detailed in the body of the report.
- 7.2 Further detailed work will be required to establish exit strategies for each of the ten children's centres listed for closure and to undertake the due diligence required before any transfer agreements can be completed.

## Appendix 2

### Analysis of Data for the Early Help and Children’s Centre Consultation

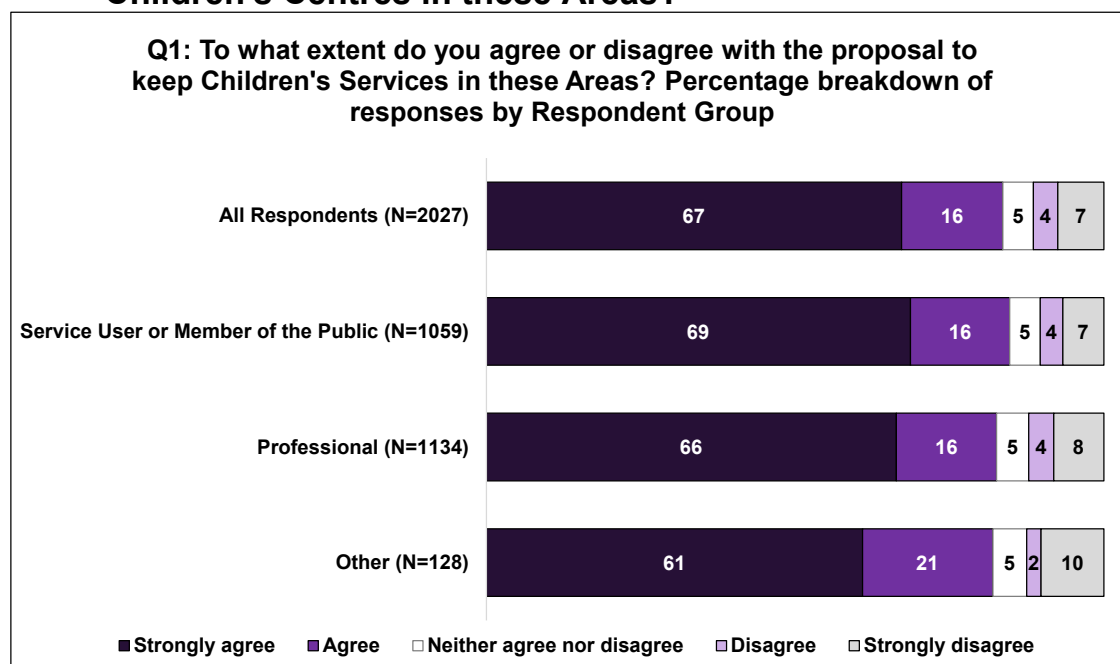
#### A. Introduction

The early help and children’s centre consultation took place between 12<sup>th</sup> February 2024 and 24<sup>th</sup> March 2024. 2027 completed the consultation.

#### B. Analysis of questions 1 to 5 and question 7 by Broad Respondent Groups

Questions 1 to 5 alongside question 7, asked respondents substantive questions about how people feel about the proposed changes to the Early Help Services and Children’s Centres, This section analyses responses to those questions split by whether a person described themselves in question 6 as a member of the public or service user; a professional working for the council or other organisations supporting children as part of their role; or in a broad group called ‘other’ which didn’t fit into the previous two groups

#### Q1: To what extent do you agree or disagree with the proposal to keep Children's Centres in these Areas?



- For answers to question 1, there is a consistent trend for people to say they agree or strongly agree with the proposal to keep children’s Centres in the areas listed on the questionnaire.
- The combined proportion of people saying they agree or strongly agree is slightly lower for people in the ‘Other’ group and for the broad professional group at about 82% compared to about 85% for service users/members of the public.

**Q2: In your opinion, what are the top 3 most important services offered by early help and children’s centres? Data split by whether a respondent was a service user/member of the public, a professional or could be described as other.**

- For the following services at least 20% of respondents in all respondent groups chose these services:
  - Undertaking early help assessments with children, young people and families;
  - Direct work with children and young people;
  - Helping families where neglect is suspected;
  - One to one support within the home;
  - Running parent groups to help them deal with challenging behaviour from their children;
  - Running sessions for parents of children aged 0-5 on child development, school readiness and parenting;
  - Helping families where neglect is suspected.
  
- For all groups except service users or members of the public, the top three most important services are:
  - Undertaking early help assessments with children, young people and families;
  - Direct work with children and young people;
  - Helping families where neglect is suspected.
  
- For service users or member of the public, the third priority was ‘Running sessions for parents of children aged 0-5 on child development, school readiness and parenting rather than ‘Helping families where neglect is suspected’.

**Q2: In your opinion, what are the top 3 most important services offered by early help and children’s centres?**

Answer	All Respondents	Respondent Group		
		Service User or Member of Public	Professional	Other
No reply	0.1%	0.2%	0.0%	0.0%
Undertaking early help assessments with children, young people and families	51.9%	50.2%	53.4%	50.8%
One to one support within the home	20.8%	18.5%	23.0%	15.6%



Direct work with children and young people	35.5%	35.2%	36.2%	35.2%
Parenting assessments, which are often needed by the courts	15.1%	12.5%	16.7%	18.0%
Family time (supervised contact for parents with their children)	16.6%	17.1%	17.6%	15.6%
Connecting children, young people, and families to more sustainable & community-based support	14.9%	17.4%	14.6%	14.1%
Lead professionals leading a Team Around the Family	13.4%	8.8%	17.3%	10.2%
Running parent groups to help them deal with challenging behaviour from their children	24.6%	24.0%	24.2%	23.4%
Targeted support to reduce the risks of children being exploited	16.4%	18.7%	12.9%	17.2%
Carrying out interviews with young people if they have returned home after being reported missing to the Police	1.8%	2.0%	1.8%	0.0%

Helping families where neglect is suspected	31.4%	30.3%	32.7%	38.3%
Street and community-based work with young people	5.5%	6.1%	4.5%	10.9%
Support to address conflict within families	5.2%	4.5%	5.5%	5.5%
Support to improve family relationships	6.5%	5.9%	6.5%	6.3%
Support to improve school attendance	3.6%	2.9%	3.5%	6.3%
Support preparing families for the birth of a child	6.9%	9.5%	4.9%	3.1%
Running sessions for parents of children aged 0-5 on child development, school readiness and parenting	28.6%	34.0%	24.8%	27.3%
<b>Total</b>	<b>2027</b>	<b>1059</b>	<b>1134</b>	<b>128</b>

Note, some respondents said they were professional and members of the public or service users so that if you total up all the individual groupings they will exceed 2027 responses.

**Q3: In your opinion, what are the top 3 least important services offered by early help and children’s centres? Data split by whether a respondent was a service user/member of the public, a professional or could be described as other.**

- For the following services at least 20% of respondents in all respondent groups chose these services:
  - Lead professionals leading a Team Around the Family;
  - Carrying out interviews with young people if they have returned home after being reported missing to the Police;
  - Street and community-based work with young people;
  - Support to improve school attendance;

- Support preparing families for the birth of a child.
- For all groups, the top three services selected as least important were:
  - Carrying out interviews with young people if they have returned home after being reported missing to the Police (between 32.4% and 35.5% of respondents);
  - Support to improve school attendance (between 37.5% and 41.1% of respondents);
  - Support preparing families for the birth of a child (between 29.7% and 32.2% of respondents).

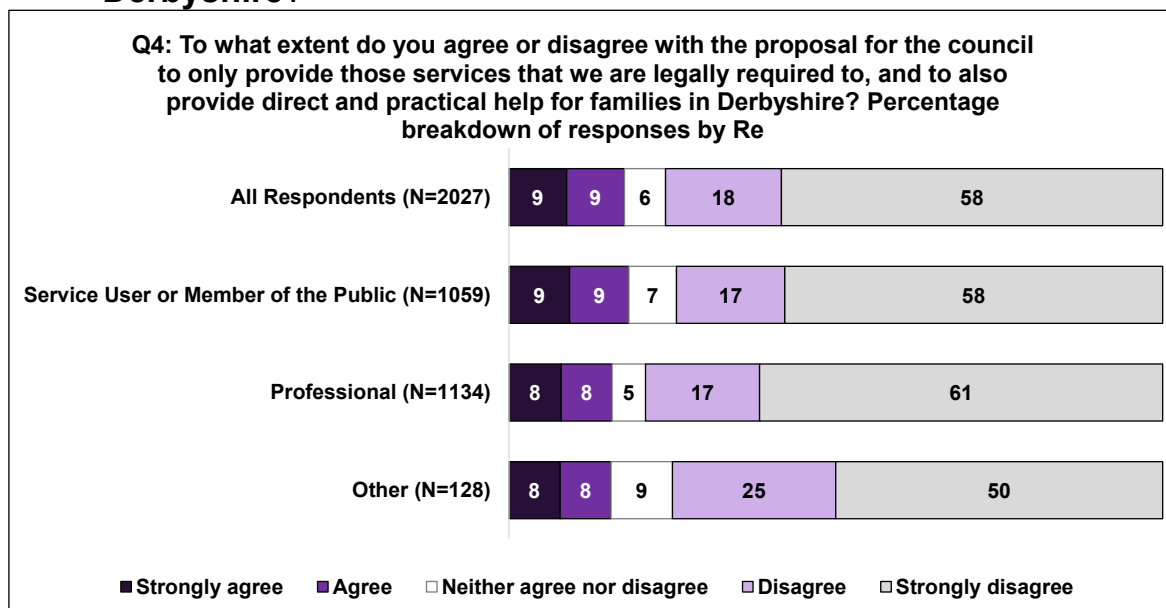
**Q3: In your opinion, what are the top 3 least important services offered by early help and children's centres? Data split by whether a respondent was a service user/member of the public, a professional or could be described as other.**

Answer	Total	Respondent Group		
		Service User or Member of Public	Professional	Other
No reply	0.2%	0.5%	0.2%	1.6%
Undertaking early help assessments with children, young people and families	6.4%	6.5%	5.4%	9.4%
One to one support within the home	11.0%	11.1%	10.9%	8.6%
Direct work with children and young people	5.6%	4.7%	5.6%	8.6%
Parenting assessments, which are often needed by the courts	11.4%	12.4%	10.8%	14.1%
Family time (supervised contact for parents with their children)	11.5%	11.8%	11.8%	10.2%
Connecting children, young people, and families to more sustainable and community-based support	18.7%	17.3%	19.4%	15.6%
Lead professionals leading a Team Around the Family	24.5%	26.9%	21.7%	23.4%
Running parent groups to help them deal with challenging behaviour from their children	9.3%	10.0%	8.6%	7.0%
Targeted support to reduce the risks of children being exploited	5.4%	6.0%	4.7%	4.7%
Carrying out interviews with young people if they have returned home after being reported missing to the Police	34.2%	32.4%	35.5%	33.6%

Helping families where neglect is suspected	3.1%	2.8%	3.2%	1.6%
Street and community-based work with young people	26.9%	26.7%	27.2%	21.1%
Support to address conflict within families	12.8%	11.7%	13.8%	13.3%
Support to improve family relationships	13.9%	13.8%	13.7%	18.8%
Support to improve school attendance	39.2%	41.1%	39.7%	37.5%
Support preparing families for the birth of a child	30.9%	29.7%	32.2%	32.0%
Running sessions for parents of children aged 0-5 on child development, school readiness and parenting	19.3%	18.3%	19.7%	21.1%
<b>Total</b>	<b>2027</b>	<b>1059</b>	<b>1134</b>	<b>128</b>

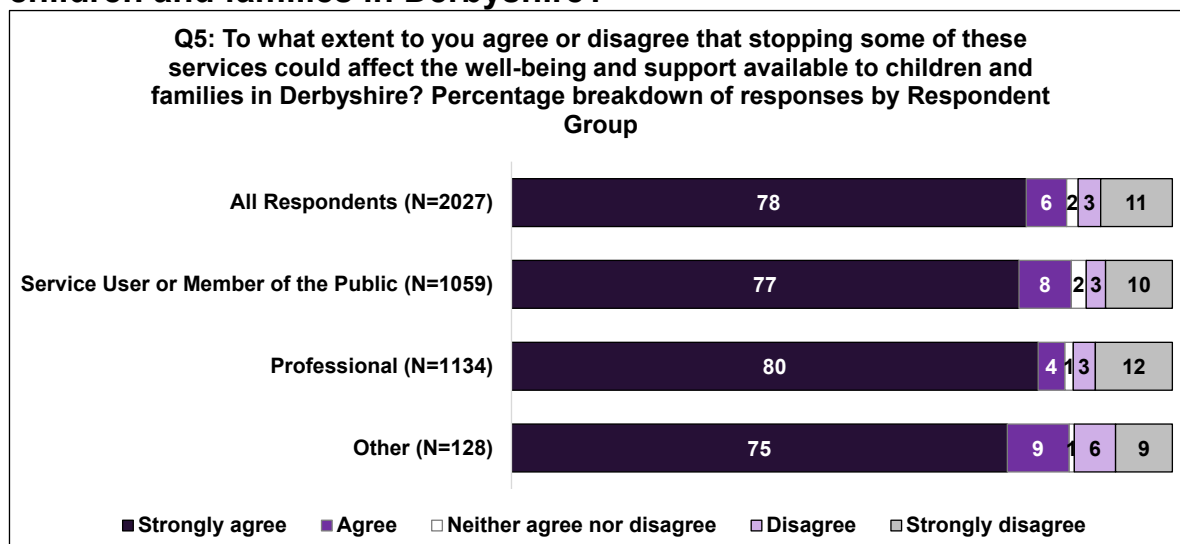
Note, some respondents said they were professional and members of the public or service users so that if you total up all the individual groupings they will exceed 2022 responses.

**Q4: To what extent do you agree or disagree with the proposal for the council to only provide those services that we are legally required to, and to also provide direct and practical help for families in Derbyshire?**



Regardless of grouping the highest proportion of respondents said they disagree or strongly disagree with just providing legally required services (between 75% and 78%).

**Q5: To what extent to you agree or disagree that stopping some of these services could affect the well-being and support available to children and families in Derbyshire?**



Regardless of grouping the highest proportion of respondents (between 75% and 80%) said they strongly agree that stopping some of these services could affect the well-being and support available to children and families in Derbyshire.

**Q7: Please provide any additional comments or suggestions you have regarding the proposed changes to early help including children's centres.**

The table overleaf shows the top 15 themes or issues raised in people comments for question 7. The top 10 comments are highlighted in blue. The top five comments across groups of respondents were:

- **Impact on Vulnerable Children and Families:** Concerns about the disproportionate effect of reducing or eliminating early help services on vulnerable children and families, potentially leading to increased risks of neglect, harm, and family breakdowns. (Overall 44.8% of respondents cited this with percentages for individual varying from 35.9% from member of the public/service users to 51.4% for professionals).
- **Disagreement with Proposed Cuts:** Overall disagreement with the proposed cuts to early help services, expressing shock, dismay, and anger at the potential impact on vulnerable families and children. (Overall 39.4% of all respondents cited this with this percentage varying from 42.4% of members of the public/service users to 38.2% of professionals).
- **Importance of Early Help Services:** Emphasizes the vital role of early help services in supporting families and children, preventing crises, and promoting positive outcomes. (Overall 37.4% of all respondents cited this with the percentage varying from 28.6% from people from the 'other' grouping to 37.9% for professionals).
- **Pressure on Social Care and Other Services:** Worries about the increased pressure that cuts to early help services would place on social care teams, schools, health services, and other agencies, given already overstretched resources. (Overall, 27.1% of respondents raised this issue with percentages varying from 17.8% for Members of the public/service users to 34.6% for professionals).
- **Long-Term Consequences and Cost:** Belief that investing in early intervention and prevention saves money in the long run by reducing the need for more intensive interventions later. (Overall, 22.5% of respondents raised this as an issue with percentages varying from 20.1% for Members of the public/service users to 25.7% for professionals).

**Other key concerns amongst groups**

- A common concern from members of the public/service users was the impact of closure of children's centres on families, and impact on other services, the key impact of 0-5 services, indicating Children's centres and their services were highly valued (23.3% of Members of the public/service users).

- A common concern amongst professionals were worries about the capacity of schools to take on additional responsibilities in the absence of early help services, given their already stretched resources. (10.1% of all respondents and 15.2% of responses from professionals).



**Top 15 issues/ Themes from comments people made when answering Q7:**  
Please provide any additional comments or suggestions you have regarding the proposed changes to early help including children's centres.

Issue or Theme Raised	All Respondents		Member of Public/Service User		Professional		Other	
	No	%	No	%	No	%	No	%
Importance of Early Help Services: Emphasizes the vital role of early help services in supporting families and children, preventing crises, and promoting positive	398	37.4%	180	35.5%	242	37.9%	24	28.6%
Impact on Vulnerable Children and Families: Concerns about the disproportionate effect of reducing or eliminating early help services on vulnerable children and families, potentially leading to increased risks of neglect, harm,	477	44.8%	182	35.9%	328	51.4%	36	42.9%
Pressure on Social Care and Other Services: Worries about the increased pressure that cuts to early help services would place on social care teams, schools, health services, and other agencies, given already	289	27.1%	90	17.8%	221	34.6%	22	26.2%
Long-Term Consequences and Cost: Belief that investing in early intervention and prevention saves money in the long run by reducing the need for more intensive	240	22.5%	102	20.1%	164	25.7%	20	23.8%
Community Impact and Access to Support: Concerns about the impact on communities, particularly in socially disadvantaged areas, where families may struggle to access	155	14.6%	95	18.7%	76	11.9%	13	15.5%
Concerns about School Capacities: Worries about the capacity of schools to take on additional responsibilities in the absence of early help services, given their already	108	10.1%	17	3.4%	97	15.2%	6	7.1%
Support for Multi-Agency Approach: Advocacy for a multi-agency approach involving various professionals and	13	1.2%	<=5	<=1%	10	1.6%	<=5	<=6%
Community Engagement and Utilization: Highlighting the importance of community engagement and utilization of existing resources, such as children's centers, to	53	5.0%	32	6.3%	20	3.1%	6	7.1%
Disagreement with Proposed Cuts: Overall disagreement with the proposed cuts to early help services, expressing shock, dismay, and anger at the potential impact on vulnerable	420	39.4%	215	42.4%	244	38.2%	33	39.3%
Impact of closure of children's centres on families, and impact on other services, key impact of 0-5 services. Children's centres and	187	17.6%	118	23.3%	79	12.4%	18	21.4%
Miscellaneous issues	35	3.3%	19	3.7%	17	2.7%	6	7.1%
Other ways councils could reorganize and streamline services/ Cut other services/senior staff salaries first/Limited money could be used better/ Avoid duplication with other agencies	76	7.1%	45	8.9%	41	6.4%	<=5	<=6%
Suggested alternative improvements to make services more effective	8	0.8%	6	1.2%	<=5	<=0.8%	0	0.0%
More money and resources needed, not less	52	4.9%	22	4.3%	34	5.3%	<=5	<=6%
Valued support for parents with children with	29	2.7%	26	5.1%	<=5	<=0.8%	<=5	<=6%
<b>Total</b>	<b>1065</b>		<b>507</b>		<b>638</b>		<b>84</b>	

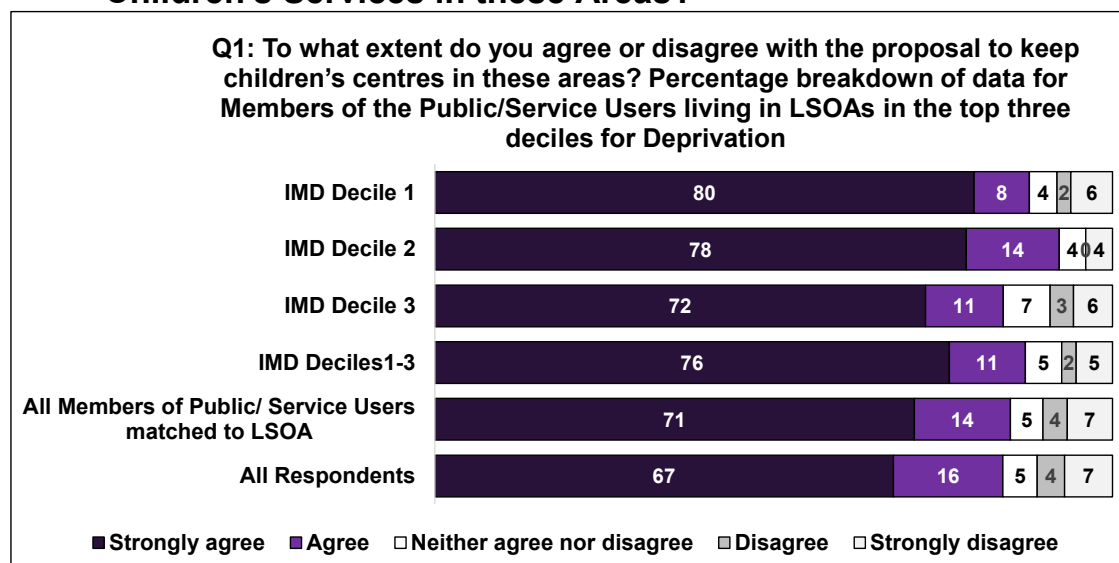
Note, since people could raise more than one issue or concern in answering question 7, percentages will exceed 100%.

### C. Analysis of Questions by the index of multiple deprivation (IMD)

Question 8 asked respondents to provide us with their postcode. Using this data we have matched this to smaller areas called lower super output areas. 51.2% of respondents have been matched in this way.

- Each lower super output area (LSOA) has a score for deprivation and a ranking for deprivation called the Index of Multiple Deprivation (IMD). These scores and rankings give an indication of how deprived in relative terms that area is compared to other areas in England as at 2019 (the most recent year for which we have this data).
- Each area has been split into tenths (deciles). Areas with a deprivation decile of 1 are amongst the top 10% most deprived areas in England, deciles 1 and 2 together show people in the top 20% most deprived area in England, and so on.
- For the people who we have been able to match to these areas, we can provide an analysis of how people's answers may have varied based on the deciles of deprivation for the areas people live in.
- The following sections show how the answers of people who described themselves as either members of the public or service users, varied (or not) based on whether those people live in the top 3 deciles for deprivation in England.

## Q1: To what extent do you agree or disagree with the proposal to keep Children's Services in these Areas?



- The above graph shows that high proportions of all respondents said they strongly agreed or agreed with the proposal to keep Children's Services in the area listed in the consultation (almost 83% for all respondents).
- For all members of the public/services users matched to an LSOA, the percentage choosing strong agreement/agreement with the councils' proposal was slightly higher at 85%, and you as you move through the deciles from 3 to 1 (most deprived) this percentage gradually increases to 92% of respondents in deciles 2 before dipping slightly to 88% for decile 1.

**Q2: In your opinion, what are the top 3 most important services offered by early help and children’s centres? Data for the Members of the Public/Service Users with Deprivation Data for Deciles 1-3**

Answers to Q2	Member of Public/Service Users				All Deciles	All Respondents
	IMD Decile					
	1	2	3	1-3		
Undertaking early help assessments with children, young people and families	51.0%	54.9%	51.7%	52.4%	52.2%	51.9%
One to one support within the home	20.4%	15.7%	17.2%	17.6%	18.9%	20.8%
Direct work with children and young people	34.7%	41.2%	33.3%	35.8%	34.8%	35.5%
Parenting assessments, which are often needed by the courts	16.3%	9.8%	2.3%	8.0%	12.6%	15.1%
Family time (supervised contact for parents with their children)	30.6%	13.7%	14.9%	18.7%	18.3%	16.6%
Connecting children, young people, and families to more sustainable & community-based support	18.4%	13.7%	17.2%	16.6%	17.4%	14.9%
Lead professionals leading a Team Around the Family	6.1%	15.7%	4.6%	8.0%	8.4%	13.4%

Running parent groups to help them deal with challenging behaviour from their children	22.4%	29.4%	29.9%	27.8%	23.0%	24.6%
Targeted support to reduce the risks of children being exploited	24.5%	17.6%	26.4%	23.5%	19.3%	16.4%
Carrying out interviews with young people if they have returned home after being reported missing to the Police	2.0%	3.9%	3.4%	3.2%	2.0%	1.8%
Helping families where neglect is suspected	18.4%	29.4%	31.0%	27.3%	31.6%	31.4%
Street and community-based work with young people	4.1%	3.9%	6.9%	5.3%	6.5%	5.5%
Support to address conflict within families	2.0%	3.9%	5.7%	4.3%	4.6%	5.2%
Support to improve family relationships	2.0%	7.8%	2.3%	3.7%	5.6%	6.5%
Support to improve school attendance	2.0%	2.0%	2.3%	2.1%	2.4%	3.6%

Support preparing families for the birth of a child	4.1%	5.9%	10.3%	7.5%	7.2%	6.9%
Running sessions for parents of children aged 0-5 on child development, school readiness and parenting	36.7%	31.4%	40.2%	36.9%	33.4%	28.6%
<b>Total</b>	<b>49</b>	<b>51</b>	<b>87</b>	<b>187</b>	<b>586</b>	<b>2027</b>

- The above table shows the answers for members of the public/service users in terms of prioritizing the top three services listed changed relatively little in deciles 1 to 3 compared to all members of the public/service users.
- Compared to all respondents, members of the public/service users prioritized 'Running sessions for parents of children aged 0-5 on child development, school readiness and parenting' (between 31.4% and 40.2% depending on the decile group).
- This contrasts with all respondents where the third most popular option was 'Helping families where neglect is suspected.'

**Q3: In your opinion, what are the top 3 least important services offered by early help and children's centres? Data for members of the public/service users in deciles 1-3**

Q3 Answers	Member of Public/Service Users					All Respondents
	IMD Decile				All Deciles	
	1	2	3	Deciles 1 - 3		
Undertaking early help assessments with children, young people and families	10.2%	5.9%	12.6%	10.2%	7.0%	6.4%
One to one support within the home	12.2%	11.8%	14.9%	13.4%	11.8%	11.0%
Direct work with children and young people	8.2%	5.9%	10.3%	8.6%	4.9%	5.6%
Parenting assessments, which	2.0%	7.8%	19.5%	11.8%	13.0%	11.4%

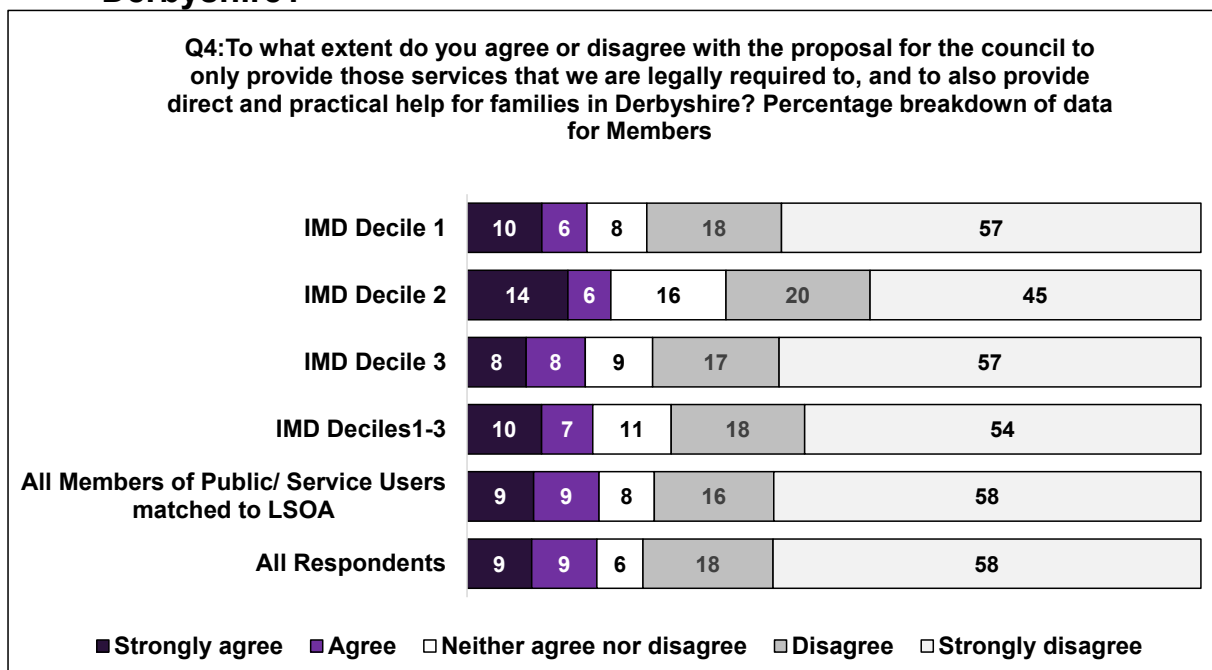
are often needed by the courts						
Family time (supervised contact for parents with their children)	10.2%	15.7%	13.8%	13.4%	13.0%	11.5%
Connecting children, young people, and families to more sustainable and community-based support	10.2%	13.7%	13.8%	12.8%	14.7%	18.7%
Lead professionals leading a Team Around the Family	20.4%	17.6%	27.6%	23.0%	23.2%	24.5%
Running parent groups to help them deal with challenging behaviour from their children	12.2%	5.9%	8.0%	8.6%	9.2%	9.3%
Targeted support to reduce the risks of children being exploited	18.4%	5.9%	4.6%	8.6%	6.7%	5.4%
Carrying out interviews with young people if they have returned home after being reported missing to the Police	18.4%	25.5%	34.5%	27.8%	27.8%	34.2%
Helping families where neglect is suspected	8.2%	5.9%	1.1%	4.3%	2.9%	3.1%
Street and community-based work with young people	32.7%	21.6%	26.4%	26.7%	27.5%	26.9%
Support to address conflict within families	12.2%	15.7%	9.2%	11.8%	11.9%	12.8%
Support to improve family relationships	16.3%	17.6%	14.9%	16.0%	16.0%	13.9%

Support to improve school attendance	44.9%	47.1%	34.5%	40.6%	42.8%	39.2%
Support preparing families for the birth of a child	28.6%	29.4%	24.1%	26.7%	31.7%	30.9%
Running sessions for parents of children aged 0-5 on child development, school readiness and parenting	14.3%	23.5%	14.9%	17.1%	17.9%	19.3%
<b>Total</b>	<b>49</b>	<b>51</b>	<b>87</b>	<b>36</b>	<b>586</b>	<b>2027</b>

- The above table shows there was some variation in the answers for members of the public/service users in deciles 1 – 3 in terms of listing the top three least important services.
- ‘Support to improve school attendance’ (between 39.2% and 47.1%) and ‘Support preparing families for the birth of a child’ (between 24.1% and 31.7%) were deemed least important for most decile groups.
- Carrying out interviews with young people if they have returned home after being reported missing to the Police was also listed as least important for all groups except members of the public/service users in decile 1.
- Street and community-based work with young people was in the top three least important services for decile 1 (32.7%) and the combined deciles 1-3 (26.7%).
- Lead professionals leading a Team Around the Family was listed in the top three least important functions for members of the public/service users in decile 3 (27.6%).

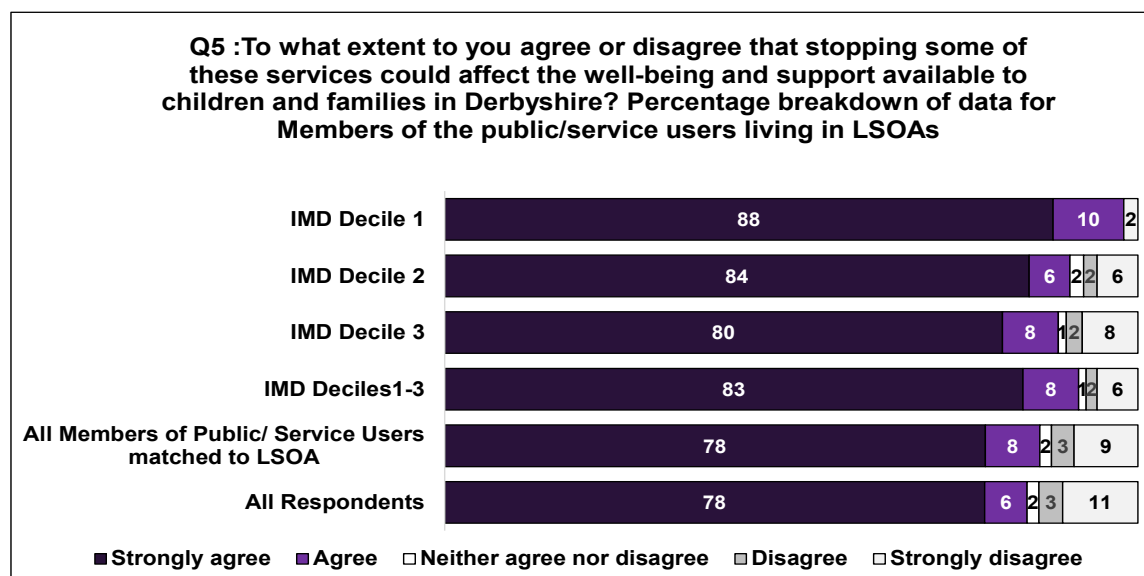


**Q4: To what extent do you agree or disagree with the proposal for the council to only provide those services that we are legally required to, and to also provide direct and practical help for families in Derbyshire?**



- The graph above shows that high proportions of all respondents said they strongly disagreed or disagreed with the proposal for the council to only provide those services they are legally required to, and to also provide direct and practical help for families in Derbyshire (76% for all respondents).
- For all members of the public/services users matched to an LSOA, the percentage was slightly higher at 74%, and you as you move through the deciles from 3 to 1 (most deprived) this percentage gradually increases to 75% of respondents in decile 1.

**Q5: To what extent to you agree or disagree that stopping some of these services could affect the well-being and support available to children and families in Derbyshire?**



- The graph above shows that 84% of all respondents said they strongly agreed or agreed with the proposal that stopping some of these services could affect the well-being and support available to children and families in Derbyshire?
- For all members of the public/services users matched to an LSOA, the percentage was slightly higher at 86%, and you as you move through the deciles from 3 to 1 (most deprived) this percentage tends to rise to a high of 98% of respondents in decile 1.

**D. Information about people completing the consultation.**

**Q6: Are you answering this questionnaire as a (please tick all that apply)**

Answer	No	%
Current or previous user of these services, including a young person	356	17.6%
Member of the public	833	41.1%
Education professional	425	21.0%
Health professional	274	13.5%
Social care professional	234	11.5%
Other professional working with children	254	12.5%
Other	128	6.3%
<b>Total</b>	<b>2027</b>	

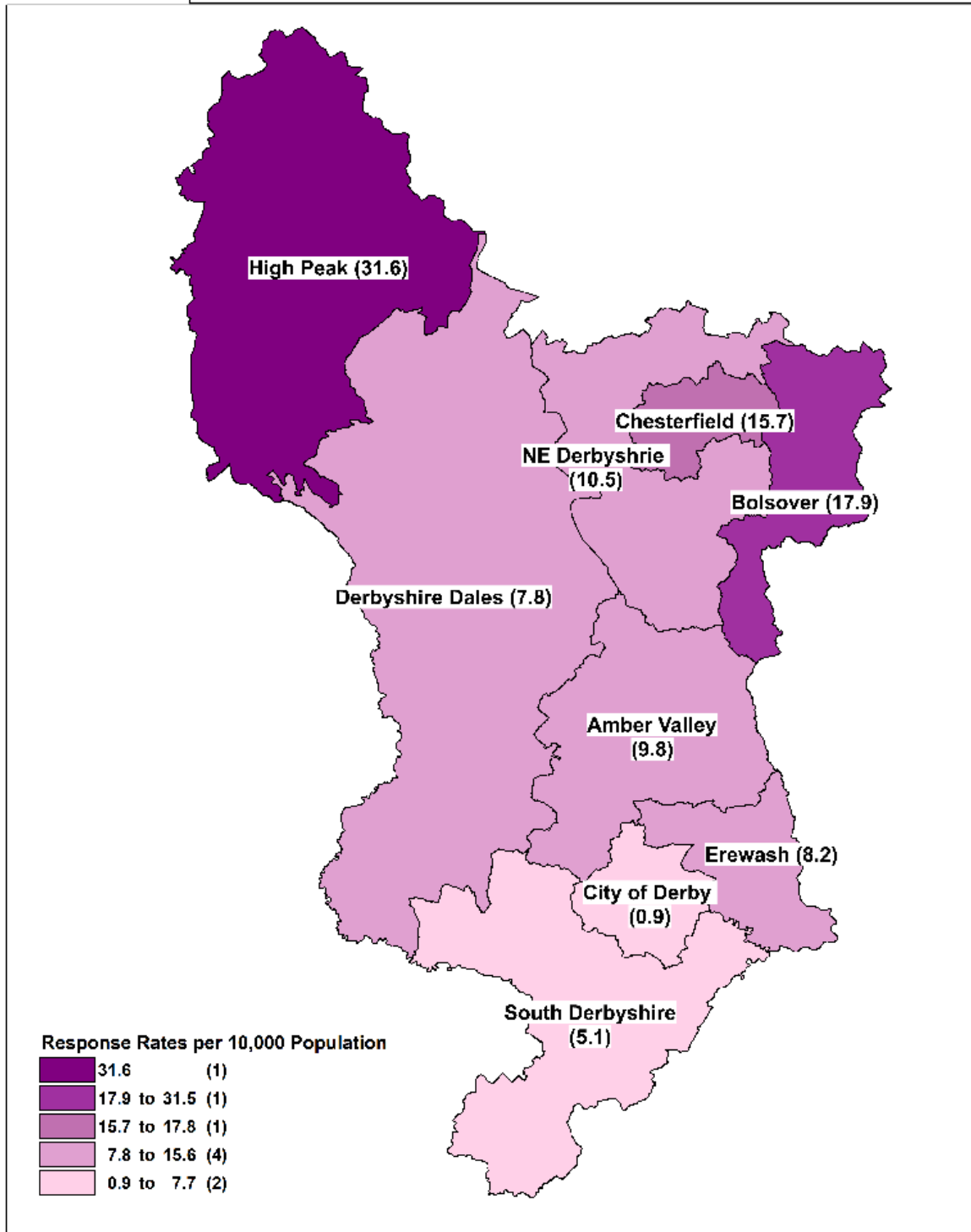
- The largest groups to respond to the survey were members of the public 41.1% and Education professionals 21%.
- Note, if you add up all the answers they will exceed 2027 responses because people could choose more than one category when answering this question.

**Q8: Postcode Data matched to District and City Council areas.**

Question 8 asked people to provide us with a postcode. 52.3% of respondents gave us postcodes enabling us to match them to a Derbyshire District or Derby City Council. The map overleaf shows the rate of responses per 10,000 people in each area. This allows to compare responses within each area whilst making allowances for the fact that base population is different in different districts.

High Peak has the highest response per 10,000 people in the population at 31.6, followed by Bolsover at 17.9 and Chesterfield at 15.7.

**2024 Early Help/Children's Centre Consultation -  
Responses by District Council Area**



**Q9: What is your age group?**

Answer	No	%
No reply	143	7.1%
0 to 16	16	0.8%
17 to 25	90	4.4%
26 to 35	409	20.2%
36 to 50	789	38.9%
51 to 60	395	19.5%
61 to 70	139	6.9%
70 or older	46	2.3%
<b>Total</b>	<b>2027</b>	<b>100.0%</b>

The top three age groups in terms of responses to the consultation were people aged 26 to 35 (20.2%), people aged 36 to 50 (38.9%), and people aged 51 to 60 (19.5%).

**Q10: What is your sex?**

Answer	No	%
No reply	156	7.7%
Male	212	10.5%
Female	1645	81.2%
Other / neither of these	14	0.7%
<b>Total</b>	<b>2027</b>	<b>100.0%</b>

81.2% of respondents were female.

**Q11: Is the gender you identify as the same as your sex registered at birth?**

Answer	No	%
No reply	170	8.4%
Yes	1853	91.4%
No	4	0.2%
<b>Total</b>	<b>2027</b>	<b>100.0%</b>

91.1% answered 'Yes' to this question.

**Q12: A disabled person is someone who has a physical or mental impairment which has a substantial and long-term adverse effect on their ability to carry out normal day-to-day activities. Do you consider yourself disabled?**

Answer	No	%
No reply	186	9.2%
Yes	190	9.4%
No	1651	81.5%
<b>Total</b>	<b>2027</b>	<b>100.0%</b>

9.4% of respondents said they considered themselves disabled.

**Q12a If you do consider yourself disabled, what type of disability do you have? (Please select all that apply)**

Answer	No	%
Disability affecting mobility	111	48.1%
Disability affecting hearing	25	10.8%
Disability affecting vision	8	3.5%
A learning disability	30	13.0%
Other	57	24.7%
<b>Total</b>	<b>231</b>	<b>100.0%</b>

48.1% of people who considered themselves disabled had a disability affecting mobility and 24.7% had some other disability.

**Q13: What is your ethnic group?**

<b>Answer</b>	<b>No</b>	<b>%</b>
No reply	165	8.1%
White English, Welsh, Scottish, Northern Irish or British	1776	87.6%
Other White background	38	1.9%
Mixed or Multiple ethnic groups	21	1.0%
Asian or Asian British	13	0.6%
Black, Black British Caribbean or African	<=10	<=0.5%
Other ethnic group	<=10	<=0.5%
<b>Total</b>	<b>2027</b>	<b>100.0%</b>

**Q13a: If 'Other', please specify**

<b>Answer</b>	<b>No</b>
No reply	<=5
Chinese	<=5
European	<=5
Filipino	<=5
Human	<=5
Latina	<=5

**Q14: Which of the following best describes your sexual orientation?**

<b>Answer</b>	<b>No</b>	<b>%</b>
No reply	234	11.5%
Straight / Heterosexual	1691	83.4%
Gay or Lesbian	35	1.7%
Bisexual	51	2.5%
Any other sexual orientation	16	0.8%
<b>Total</b>	<b>2027</b>	<b>100.0%</b>

### **Appendix 3 - Specific feedback received in response to the public consultation and partner engagement on the proposals to reduce funding in Early Help and Children's Centres.**

#### **Chesterfield Royal Hospital Child Health and North Derbyshire CAMHS response to Derbyshire County Council Children's Services consultation**

CRH provide paediatric outpatient, inpatient, diagnostic and surgical services. This includes a 16-bed ward, 2 specialist high dependency beds and a paediatric assessment unit at the main hospital site.

The Child Development Clinic provide specialist services to Children and Young People across North Derbyshire, requiring input from Children's Services in Derbyshire.

North Derbyshire CAMHS provide specialist mental health care to children and young people across North Derbyshire. CAMHS offer's acute/crisis, intensive home treatment, eating disorder, learning disability mental health services in addition to routine mental health care for young people across North Derbyshire.

Both care units have described the impact on services based on the proposal from Derbyshire County Council.

#### **Impact on Early Help**

Under the proposal there will be a gap in the lead professional for early help. This role is a mandatory role for care and support of young people requiring early help. Specialist Paediatric services such as SLT, Continence and Child development / ND assessments, and CAMHS are not able to increase service provision to cover this gap in service.

There is a risk to young people that without this function it will impact on CAMHS ability to provide effective care to young resulting in an increase in children and young people presenting with urgent or acute mental health needs. This will increase the demand on wider paediatric services, in particular inpatient services in acute crisis from behavioural aspects, neglect and failing to thrive.

Care for young people will be uncoordinated and there an increased risk to family breakdown, identification of safeguarding concerns, identification of physical health requirements and CAMHS ability to deliver therapeutic interventions.

Without a robust wrap around package for early help there will also be an increase in demand on acute/urgent pathways into paediatric and CAMHS services. This will result in an increase in young people presenting to ED and our urgent care team in CAMHS or to their local emergency department.

Without early help service provision there is a likelihood of missed or delayed referrals to the core CAMHS service as early help often provides support and guidance to young people and their families.

#### **Impact on paediatric inpatient services**

Demand on paediatric inpatient services at CRH is incredibly high, with a high proportion of children admitted with complex needs, which require support from Children's services. Failure to maintain



the current level of service will result in longer length of stay for children. This will impact on the health of children in Derbyshire as it will limit the amount of care that CRH is able to provide.

### **Impact on our LD Specialist Support Workers**

Full detail on impact of specialist support worker roles in LD CAMHS Appendix 1

There will be no service offers for hands on work and working intensively with family and young person with challenging behaviour (modelling appropriate interactions, teaching new skills, introducing routines and how to respond to challenging behaviours).

Will incur additional cost as will require to pay qualified clinicians to conduct some of the below (points 3-6) in absence of a Specialist Support Worker.

Limited range and offer of specific packages: sleep hygiene to help reduce challenging behaviour, emotions awareness and labelling to help increase management of strong feelings, understanding diagnosis.

Limited Observations to support formulation and writing of Positive Behaviour Support Plan.

Not able to develop resources to help families with communication, routines and skill development.

Less opportunities to link in with schools and other professionals to share the work undertaken by the team to help reduce challenging behaviours at school and home – so less consistency.

Losing link with Social Care and important multi-disciplinary team members as part of LD CAMHS – see case example below.

### **Impact on LD CAMHS.**

It is proposed that the cuts will involve cuts to short term breaks for our families and additional support. This is really significant.

The majority of our young people open to CAMHS are a CIN or will soon be. (we have approx. 100-120 open at any one time).

The LD CAMHS work closely with Social Care, Short breaks and residential providing consultations, fast responses to crisis, training and close working on individual cases.

Families of YP with LD generally are more at risk of poverty, poor parental MH and neurodiversity. The challenging behaviours impact on the young person, reduce QoL, harm to self, siblings and families and lead to the YP being more isolated, often limiting time at school and as they get older significant strain on the family which is when they then require short term breaks to help keep them living at home. It will significantly reduce life opportunities for the young person.

### If the funding is cut:

- Approx 5-10 families that we work with likely to have a family breakdown requiring the YP be accommodated or tier 4. This is extremely costly and traumatic for the YP, causing even more escalation. We cannot have young people getting stuck in costly, isolated placements away from home. CETRs will become ineffective.

- Approx 30-40 YP will require increase in medication, have a significant reduced quality of life, likely limited social opportunities and less time at school. All this will increase pressure and potential increase of family breakdown. It will significantly reduce quality of life.

Taking away short-term breaks / reducing any additional support goes directly against national and government drivers, e.g.:

- Supporting people with a learning disability and autistic people to get the right care, at the right time, in the right place (Jan 2023): working towards keeping people with ASD / LD out of hospital settings.
- NICE Learning Disabilities and behaviour that challenges (NG93): central is for short break services, joint commissioning for young people that challenge, maximising life opportunities.
- SEND and alternative provision improvement plan: trying to restore young peoples and families frustrating with the system and their battles to access health, social and education.

#### **Impact on Child development Centre.**

There is an increased demand for assessment of children who have challenging and difficult behaviours, of the cause of these are ACE's the withdrawal of the provision of early help to families will further disadvantage this vulnerable group. There is no provision within Health to treat behavioural challenges so limited aspects within Acute services that can positively impact on children.

#### **Impact on Children in care.**

There is increasing numbers of children that are within care, removal of early years support and preventing family breakdown work would further exacerbate this issue and lead to more children being removed from their families and requiring the local authority to become their corporate parent. The Children In care team would need to be additionally resources to meet this need around their health assessments.

#### **Conclusion**

The senior leadership for the Child Health and CAMHS Care units at Chesterfield believe that the proposal does not line up with the NHS long term plan or the ambition within Derbyshire to deliver person/patient centred care.

The removal of the lead professional for early help will result in less collaborative working and an increase in demand on both health and mental health services across North Derbyshire. This is not something that can be absorbed within existing services.

The proposed changes to Children's Service provision will result in a detrimental impact to children and young people's physical and mental health in Derbyshire. This will result in poorer outcomes, further demand and cost to other services which within the full public sector economy will cost substantially more.

## Appendix 1

### FUNCTION OF LD CAMHS, CRH

The team works with young people with moderate and severe learning disabilities who also have challenging behaviours / mental health problems. We work with young people 0-18 years old who live in North Derbyshire.

Assessments of mental health or challenging behaviour are carried out by multi-disciplinary team members in order to understand the function of the behaviour. This then informs one or more interventions. The work usually involves working with the young person, family, school, Social Worker and other key professionals.

*Note about payments of Support Workers: The service was originally commissioned in 2007. At the time monies were given to the North and South. The South chose to have all the monies and employ their own Support Workers. The North (CRH) chose to have the Support Workers employed by Social Care as this offered a better skill set for the work required. The CCG at the time repaid Social Care for the hiring of the Support Workers.*

*This was questioned approximately 8 years ago and at the time Naomi Crompton / Georgina Hill from CCG and Bev Millway from LA looked into it and they found 'a line' that was repaying monies from CCG back to the LA.*

### KEY AREAS OF WORK FOR LD CAMHS

- Accepting **referrals** for clinical assessment, formulation and intervention.
- **Training to professionals** across North Derbyshire – including many Social Work and LA colleagues.
- **Link workers to Residential Care** – including Peak Lodge, Spire: this has included lots of training, consultations, bespoke work with challenging young people. Regular reports/updates are sent through to Richard Jackson.
- **Link Workers to Special Schools** – including regular training, consultations, joint working, psychiatric clinics.
- **Consultations** to all professionals about any cases with LD

### IMPACT /OUTCOMES

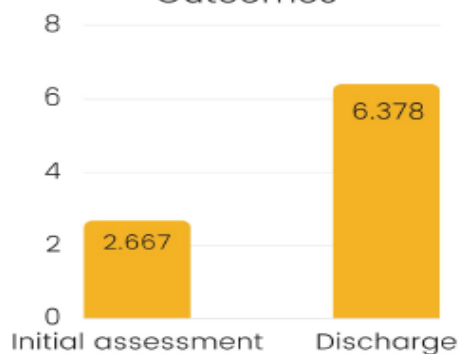
- Low Tier 4 use: in the last 15 years the team has only ever had two young people admitted to tier 4, aside from the impact of keeping young people local and in the community, this will have saved a lot of money.

This rate is significantly much lower than the rest of the country for Learning Disability mental health services.

- Supporting LA in keeping young people living at home and local in North Derbyshire by joint working with Social Care – see specific case example below and how Support Worker contributes to this.
- Statistically significant improvement in goal based outcomes over a two-year period, from family feeling average of 2.6/10 to 6.3/10. See analysis below.

## Analysis

Mean Scores on Goal Based Outcomes



**78**

Goal based outcomes completed



**96.7%**

Goals showed an improvement

### BROAD OVERVIEW of ROLE OF SPECIALIST SUPPORT WORKER

- Work intensively with family and young person with challenging behaviour: modelling appropriate interactions, teaching new skills, introducing routines and how to respond to challenging behaviours.
- Specific packages of work: sleep hygiene to help reduce challenging behaviour, emotions awareness and labelling to help increase management of strong feelings, understanding diagnosis.
- Observations to support formulation and writing of Positive Behaviour Support Plan.
- Development of resources to help families with communication, routines and skill development.
- Linking in with schools and other professionals to share the work.
- Work as a multi-disciplinary team member as part of LD CAMHS – see case example below.

**\*\* please see appendix 1 for more detail.**

#### Case example:

In 2023 one of the Support Workers worked closely with a Clinical Psychologist to support a family that had adopted two young people, both with ASD and Learning Disabilities.

The family wanted to give up one of the siblings. Social Care also worked closely with the family. The case went to scrutiny panel who, rightly so, rejected the case for the child being re-placed again.

The Psychologist worked closely with the family to support attachment and formulation.

The Support Worker worked closely with the family and young person to find best ways to communicate, respond to challenging behaviour and how to have better interactions.

Outcome: significant improved relationships between young person and family, quality of life improved, all talking positively about relationships and reflecting on experience, have skills to support the young person and placement saved. Young person continues to live with the family.

## **IMPACT OF NOT HAVING SPECIALIST SUPPORT WORKERS WITHIN THE TEAM**

1. No service offers for hands on work and working intensively with family and young person with challenging behaviour (modelling appropriate interactions, teaching new skills, introducing routines and how to respond to challenging behaviours).
2. Paying Qualified Clinicians to carry out some of the below (points 3-6) in absence of a Specialist Support Worker.
3. Limited range and offer of specific packages: sleep hygiene to help reduce challenging behaviour, emotions awareness and labelling to help increase management of strong feelings, understanding diagnosis.
4. Limited Observations to support formulation and writing of Positive Behaviour Support Plan.
5. Not able to develop resources to help families with communication, routines and skill development.
6. Less opportunities to link in with schools and other professionals to share the work undertaken by the team to help reduce challenging behaviours at school and home – so less consistency.
7. Losing link with Social Care and important multi-disciplinary team members as part of LD CAMHS – see case example below.

# Specialist Support Worker- Roles & Responsibilities in supporting well-being of CYP

Dimensions of well-being	Interventions by Support Worker
Physical	Sensory interventions Physical health observations Accessing health appts
Emotional & Mental Wellbeing	Puberty sessions Sleep assessments/work Emotions/self-esteem work Independence & growing up work Relaxation & massage Building on key skills
Social	Siblings work Relationships work
Communication	Intensive interaction Creating resources/delivery
	Interventions by Support Worker
Education	Psycho-social education sessions
Lifestyle	Healthy living 1:1 work Supporting access into the community
Safety	Stranger danger Online safety Domestic safety in the home Road safety
Tools used	<ul style="list-style-type: none"> <li>• Observations</li> <li>• Implementing/role modelling routines</li> <li>• Specific assessments e.g. H2H plan, sleep</li> <li>• Assisting with training to other services/providers</li> <li>• Specific interventions e.g. transitions</li> <li>• PBS</li> <li>• Multi-agency working</li> </ul>

## Feedback from Mark Fletcher, Member of Parliament for Bolsover

Dear Early Help and Children's Centres Review Team,

Please note that I have today submitted a response to this consultation.

I note that the box labelled "Please provide any additional comments or suggestions you have regarding the proposed changes to early help including children's centres:" does not allow for my full comments to be submitted.

My full comments, which I would like to be reflected in this section, are as below.

*"While recognising the acute financial strains the Council is currently facing, I have immense concerns about the impact that an alteration to the services being delivered would have on children, families and alternative providers within Bolsover.*

*Following this consultation being published, I have been approached by a variety of stakeholders, including local schools and NHS staff, who have shared their deep concerns about the cutting of the services mentioned in this consultation. On all occasions, these stakeholders have been clear that there is no money, or capacity, for the services currently being offered by the Council to be shifted onto them – something they believe the Council will have no other option but to attempt.*

*I have also sought advice from the House of Commons Library, which was able to give me guidance on the statutory obligations that the Council has regarding children's services. After reading this advice carefully, I am not entirely satisfied that the Council will continue to meet its obligations should all of the services being considered be ended. I am also not entirely satisfied that budgetary strains, alone, are enough of a reason to justify such a large-scale cutback.*

*Regarding the proposed closure of children's services across Derbyshire, I would like to see further details of the current use of children's centres and an impact assessment of the planned closures. Without this, I feel unable to support the plans. "*

I would be very grateful if you could confirm that the above comments will be listed as part of my consultation response.

Yours faithfully,

**Mark Fletcher MP**

*Member of Parliament for Bolsover*  
**Assistant Government Whip**

## Feedback from Derbyshire Public Health

### Early Help and Children's Centres review consultation – Response from Public Health, Derbyshire County Council

As colleagues within Derbyshire County Council, we are aware of, and appreciate, the huge challenges facing a range of services as we all take steps to generate savings to address the severe budget pressures facing the Council and a need to transform public sector service provision so it is sustainable in the longer-term. However, we would appreciate this response being considered as part of the current consultation on the proposals to amend the Children's Centres and Early Help service models delivered by Childrens Services.

#### Comments relating to Children's Centres services

Children's Centres are a critical element of a preventative approach to supporting children and young people and aligns well with a range of public health outcomes. Therefore, discussions are ongoing and will continue to take place as to how Public Health can continue to invest in a targeted, preventative service model delivered from Children's Centres to maximise public health benefit to children, young people and their families in Derbyshire.

The Government's Family Hubs and Start for Life programme vision is to provide families with the integrated support they need to care for their children acknowledging the evidence that identifying risks early and preventing problems from escalating leads to better long term outcomes. Whilst Derbyshire is not in the first tranche of local authorities to receive additional funding for the development of a Family Hub and Start for Life offer there is a clear commitment that this area of work will remain a priority for future governments. Whilst some rationalisation may be appropriate, it is imperative that there are sufficient Children's Centres available to enable this way of working going forward. It is also not clear whether opportunities for co-location or asset transfer to partner organisations have been explored as ways of maintaining provision in areas of need, or how population need based on those Centres to be retained has been determined.

#### Comments relating to Early Help Services

We recognise the importance of a collaborative partnership approach to Early Help, and that all organisations that work with children and their families should provide early help support.

Placing a greater burden on partners to undertake Early Help Assessments has broader implications for the system, all elements of which are facing similar financial challenges to the local authority. Whilst this is potentially challenging it is critical that there is sufficient capacity within the system to provide the support identified within the assessment within a reasonable time for the intervention to be successful and partners to continue to work in this way.

Identified risks include:

- children and young people's needs will not be addressed until they become acute which will have a significant impact on long term outcomes
- upward trend of numbers of children requiring statutory intervention will continue due to lack of capacity in the system to address issues as they occur
- fragmentation of partner relations due to greater burden being placed with no resource to support



We believe that there is an opportunity for a more systemic review to understand how much partners are currently doing, whether there is any duplication and how the offer could be genuinely delivered collaboratively going forward making best use of the systemwide resources available.

More specifically, we do have serious concerns with the proposals which are being consulted on as we believe they will have a significant adverse impact on 0-19 Public Health Nursing Services. The proposals, if implemented, will create an activity and cost shunt and significant additional demand pressures from one part of local authority service provision to another, leading to increasing costs within the service to meet the additional demand.

0-19 Public Health Services are commissioned by Public Health and delivered by Derbyshire Community Health Services under the name of 'Derbyshire Family Health Services'. Derbyshire County Council receives an annual Public Health Grant, and a requirement for receipt of the Grant is provision of 0-19 Public Health Nursing services. This service includes the statutory responsibilities for Local Authorities in relation to Health visiting checks for under 5's and also provides school nursing provision, oral health advice, intensive home visiting and advice and support regarding infant nutrition.

We request that this activity and cost shunt is acknowledged within the consultation feedback to Corporate Management Team and Cabinet for Early Help Services and mitigated wherever possible. The 0-19 Public Health Nursing Services are facing a range of demand and cost pressures due to increasing complexity of cases and increased cost of service delivery, which is being managed through the Section 75 partnership between Derbyshire County Council and DCHS.

Public Health and DCHS are developing options to make service efficiencies within the current service model to ensure that the Council continues to commission a sustainable 0-19 Public Health Nursing service that meets the statutory requirements of service provision, as well as the needs of the Derbyshire population. Therefore, there is very limited scope to pick up additional work if there is a transfer of activity from the Early Help service to the 0-19 Public Health Nursing Service, especially in relation to matters where a member of staff from the 0-19 team would need to become a lead professional.

Colleagues at DCHS have informed us that the 0-19 Public Health Nursing Service, due to its universal nature and being in contact with all families with young children under 5, would be expected under the proposals to pick up the following work as a direct result of the changes.

1. Undertaking early help assessments with children, young people and families.
2. Lead professionals leading a Team Around the Family (TAF).
3. One to one support within the home.
4. Direct work with children and young people.

Picking up the lead professional role would require a range of additional activity which is not currently outlined in the service specification, nor costed for within the delivery model. DCHS have modelled that the direct impact of additional activity would be an estimated 31 WTE Health Visitors, creating a financial risk of up to £1.7m. There is a significant and long-term challenge in recruiting qualified Health Visitors to roles in Derbyshire and therefore this change would place an extreme demand pressure on the service, which could not be resolved in the short, medium or long term. Due to an inability to effectively deliver this offer, we, together with colleagues in DCHS are concerned that there would be an extremely limited preventative offer resulting in more families,

children and young people being referred to safeguarding or formal social care, leading to additional costs for the Council.

DCHS are estimating that a combination of the cost pressures based on potential activity shunt and existing cost pressures within the service, would result in the need to manage a total service budget shortfall of up to £2.6m, which Public Health would need to support through increased funding or significant service redesign.

The 0-19 Public Health Nursing Service is the service with the largest value commissioned from the Public Health Grant, comprising 28% of funding from the 2023/24 grant allocation to Derbyshire. There is an obligation that Public Health continues to ensure the Council fulfils its statutory responsibilities for commissioning the mandated elements of Public Health Nursing Services, and further investment into this service would be to the detriment of other non-statutory preventative services that Public Health commission or provide, therefore leading to an expected increase in demand for statutory elements of Children's and Adult Care services.

As well as highlighting these impacts as part of the response to Cabinet, we would also request that the statutory responsibilities of the Council for the provision of the mandated elements of the 0-19 Public Health Nursing Services are also shared at both Corporate Management Team and Cabinet as part of the discussions as to future Early Help and Children's Centres service models. We would also request that Children's Services colleagues continue dialogue with Public Health to identify opportunities for mitigation of the risks highlighted in this response should the proposals proceed.

**Ellie Houlston, Director of Public Health**

**Iain Little, Assistant Director of Public Health**

**22<sup>nd</sup> March 2024**

## Feedback from Derbyshire Community Health Services

### DCHS response to Derbyshire County Council Children's Services consultation

As Derbyshire's provider of 0-19 Public Health Nursing Services, Derbyshire Community Health Services (DCHS) have closely reviewed the Council's proposed changes to the Early Help offer and children's centre provision, to understand the likely impact the proposed changes will have on the services we deliver.

The below information focusses on the *operational* impact of the proposals, as it is understood that Equality Impact Assessments are also being undertaken for the proposals being made, where the wider impact on health outcomes will be further considered.

We ask that the below outline of anticipated impact on the 0-19 service be taken into consideration as part of the consultation process.

### **Summary of anticipated impact on DCHS provided services:**

Having reviewed the proposals, we expect the following impact on the 0-19 services, should the Council's proposals be enacted:

- Workload equivalent to that of 33 WTE (30.76 Health Visitors, 2.24 WTE admin) passing to the 0-19 service, in the expectation that they will take on Lead Professional responsibilities for 4 areas of the Early Help offer currently delivered by the Council.
  - This will result in an anticipated unmet cost of c. £1.7m which DCHS is unable to absorb. (DCHS is already working to mitigate an existing £900k cost pressure within the 0-19 service)
- Increased requirement for targeted work to support vulnerable families because of the reduction in preventative work.
- Increased demand, and therefore waiting times, for Children's Speech and Language Therapy Services and Children's Continence Services
- Increase in advice calls and escalation of cases within the Safeguarding Service, and less relevant and proportionate information being shared in the best interest of the child.
- Loss of clinic and workspace for Health Visiting teams

### **Changes to Early Help offer:**

Should the Council revert to the provision of their mandated functions only, it is anticipated that the following work will be expected to be picked up by the 0-19 service, as the anticipated Lead Professional for the child:

5. Undertaking early help assessments with children, young people, and families.
6. Lead professionals leading a Team Around the Family (TAF).
7. One to one support within the home.
8. Direct work with children and young people.

Whilst we currently do not collect data around the activity for these contacts, we have looked at the numbers of children and young people who have been referred in for Early Help over the last 12 months by health (not including midwifery and CAMHS) with the rationale that we

would be expected as the universal service to be the lead professional. Most referrals by health are for the under 5s and Health Visitors are seen as the lead professionals for this age group.

There is no clear guidance on the frequency of TAF meetings and/or the length of time children should remain on this pathway. Therefore, our calculations are based on our current understanding of what is being delivered by our partners. We have taken into consideration the arranging of meetings, minute taking and liaison with partners and the family.

As a result, we estimate that taking on the Lead Professional responsibilities for these 4 areas of the Early Help offer, will equate to an additional workload of 33 WTE. We would be grateful if the workforce calculations the Council use for TAF meetings could be included in the Equality Impact Assessment.

DCHS is unable to absorb the costs of this additional workload. A choice would therefore need to be made by the Council to decide how best to prioritise the resources of the 0-19 service currently commissioned. If any decision is made to reduce the current Public Health commissioned offer, this will mean that DCHS will be unable to deliver the Healthy Child Programme, which is a mandated Public Health programme.

#### **Impact on Safeguarding Services:**

The reduction in capacity to provide a Universal Service will impact on the opportunities for early identification of safeguarding concerns. There is the potential for children and families to present at the point of crisis, leading to more safeguarding and child protection concerns. Including an increase in advice calls to the Safeguarding Service and an increase in the escalation of cases.

There is the potential for information sharing between agencies/professionals to reduce as the threshold for child protection is not reached and either consent is not given or is not asked for, resulting in relevant and proportionate information not being shared in the best interest of the child.

There is the potential for other DCHS Services and partner agencies to make Early Help referrals to the 0-19 Children's Services, as the Health Visitor is the lead professional for the under 5 years age group and/or professionals don't know where else to refer, resulting in a further increase of referrals and the processing of referrals that are not for the 0-19 Service.

#### **Impact of overall reduction in Children's Services offer:**

It is anticipated that there will be a rise in the number of vulnerable families in Derbyshire because of the reduction in preventative work as outlined in the proposals. The exact anticipated impact is unknown, but we expect the following to result:

- Increase in demand, and therefore increased waiting times, for children's continence services and Children's Speech and Language Therapy services, due to the reduced School Readiness Offer
- Increased demand on School Nursing Service to support families e.g., missing in education service.

To support these assumptions, we are already seeing an increased demand of circa. 4hrs/month in our School Nursing service to support children in the travelling community since the Traveller Liaison Role has remained vacant.

### **Children's Centre proposals:**

The service currently holds clinics and groups at Children's Centre venues across the county. Where these Children Centres are proposed to close, the service will need to seek alternative locations which will depend on availability and suitability. This could result in increased travel time, reduced productivity of the team, and reduced access to clinics for families in the area. Families bring their children to clinic for several reasons, including but not limited to, weight reviews, infant feeding support, minor skin conditions. Reduced access to clinics may lead to increased pressure on the system, for example increased GP/ Emergency Department attendance. This runs contrary to the national government strategy in relation to community-based care and support.

### **Conclusion:**

The above provides an outline of the anticipated impact on the 0-19 service, should the Council's proposals be approved. Besides the indirect impacts of a reduced prevention offer (e.g., increased waiting times for support services), we are particularly concerned that without additional investment in to the 0-19 service, we will not be able to absorb the impact of these changes while also delivering the mandatory obligations of the 0-19 Public Health Nursing Service.

We therefore have significant concerns regarding the proposals being made, as we do not have the capacity to take on the Lead Professional responsibilities that are assumed in the proposals.

We would be grateful if the Council can share the Equality Impact Assessments relating to these changes to the Early Help offer, once completed. We recognise the difficulty of the decisions the Council is needing to take, and as a key stakeholder, wish to offer our support in the development of any such Equality Impact Assessments relating to these proposals.

## Feedback from Joined Up Care Derbyshire



C/o Derby and Derbyshire Integrated Care Board  
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21 March 2024

Councillor Barry Lewis  
Leader of Derbyshire County Council  
Via email: [Barry.Lewis@derbyshire.gov.uk](mailto:Barry.Lewis@derbyshire.gov.uk)

Emma Alexander,  
Managing Director, Derbyshire County Council  
Via email: [Emma.Alexander@derbyshire.gov.uk](mailto:Emma.Alexander@derbyshire.gov.uk)

Dear Cllr Lewis and Ms Alexander,

### **Re: Derbyshire County Council proposed reductions in funding to Early Help and Children's Centres**

In response to the above the CYP Delivery Board, which is a Strategic Board within Joined Up Care Derbyshire's Integrated Care System have expressed significant concerns with the proposals.

NHS Derby and Derbyshire ICB is one of the organisations represented at Board. Whilst we understand the need for Derbyshire County Council to put measures in place to address the forecast overspend of circa £34m, there are significant concerns about the proposed reductions in the funding of the Early Help Service and the delivery of Children's Centres. There are 5 key areas of concern which are highlighted below:

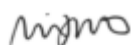
1. **Children, young people and families need to be at the heart of decision making.** Being able to co-produce services and change is key to ensuring they meet the needs of the people who need to use them. Whilst we understand that there is a public consultation there does not appear to be the opportunity for targeted engagement with the children, young people and their families who use the services. In addition to this the timescale to enable the new service to be in place from July 2024 does not provide the opportunity for specific co-production or engagement activities.
2. **The long-term impact of the proposed service changes do not appear to have been considered as part of the service review.** There is an acknowledgement that early help should be everyone's responsibility, but the proposed changes will put additional pressure on other services that are already stretched or have also had their capacity reduced. There is already an increase in children and young people presenting with more complex needs so to address this there needs to be a focus on providing help and support at the earliest opportunity. So, reducing the early help offer will increase the demand for more expensive, specialist service provision and the result of this will be that there will be an increase in spending rather than a reduction.

The Integrated Care Partnership of which Derbyshire County Council are a member, recognise this and have endorsed plans aligned to the Start Well priority.

3. **The proposed service changes do not tackle the underlying issues of placement sufficiency and cost.** It is the increase in cost of care packages and the use of out of area placements that we are advised is driving the financial difficulties Derbyshire County Council face and yet, but no plans have been shared to tackle these issues rather than reduce the early help offer which will lead to a further increase in the cost of care packages and make the position even more challenging in future years.
4. **The proposed service changes will add more pressure to placements/care packages.** Reducing the early help offer will increase demand for care packages which will increase the cost to the Local Authority so the planned savings won't be achieved, additionality acuity of need is likely to be higher as early help and support will not be available, which will put additional unacceptable pressure on Schools, Health and other system partners to meet an increased complexity of need.
5. **The proposed services changes do not support the system's approach to prevention and tackling health inequalities.** The National Children's Commissioner have identified a clear need to focus on prevention and increasing health equality to reduce the demand on specialist provision. Reducing the Early Help offer, and the number of Children's Centres will prevent children, young people and their families from accessing support at the earliest opportunity which will lead to increased escalation to crisis and a reliance on more expensive, specialist services. It will also lead to an inequity in service provision and support as not every child, young person and their family across Derbyshire will have the same access to advice, information and support at the earliest opportunity.

We hope that these issues can be considered and help to inform the future proposals that will be presented to Cabinet. NHS Derby and Derbyshire ICB remain a dedicated partner to Derbyshire County Council to ensure we jointly do the absolute best we can for Children, young people and their families locally.

Yours sincerely,



Nicola Smith  
Assistant Director of Children's Strategic Commissioning and Deputy Chair of CYP Delivery Board  
NHS Derby and Derbyshire Integrated Care Board / Joined Up Care Derbyshire

cc. Carol Camiss, Executive Director of Children's Services.

Consultation Email: [cs.earlyhelppreview@derbyshire.gov.uk](mailto:cs.earlyhelppreview@derbyshire.gov.uk)

## Appendix 4 – Equalities Impact Assessment

### Equality Impact Analysis Record Form 2023 – Derbyshire County Council

#### Introduction and context

Policy/ Service under development/ review		Recommendation to re-design and reshape the current Early Help and Children’s Centres teams due to funding reductions in Children’s Services.			
Department/ Corporate		Children’s Services / Early Help & Safeguarding			
Lead officer		Chris Caley			
EIA Team:		Chris Caley, Matt Drew, Alexandra Mackay, Tracy Genders			
Date analysis commenced:	12 February 2024	Date completed:	16/04/2024	Date approved:	

Page 142

#### Part 1. About the service/ policy or function and the reason for the EIA

<p>What is the purpose of the service, policy or function?</p> <p>The current Early Help Teams and Children’s Centres provide support to children, young people and families with an evidenced level of intensive needs including the following:</p> <ul style="list-style-type: none"> <li>• Support undertaking Early Help Assessments with children, young people and families</li> <li>• One to one support within the home</li> <li>• Direct work with children and young people</li> <li>• Parenting assessments</li> <li>• Family Time (supervised contact)</li> </ul>
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- Connecting children, young people and families to more sustainable and community-based support
- Lead professionals leading a Team Around the Family
- Parenting groups delivering the Solihull Parenting Approach and Non-Violent Resistance training
- Core offer of groups and activities for children 0-5 and their families focussed on child development, school readiness and parenting
- Targeted support to reduce the risks of children being exploited (CE)
- Missing Return Interviews
- Use of the Graded Care Profile (to support cases of neglect or compromised parenting)
- Street and community based detached work with young people
- Support to address conflict within families
- Support to improve family relationships
- Support to improve school attendance / engagement with education

Working Together to Safeguard Children 2023 defines early help as follows:-

*“Early help is support for children of all ages that improves a family’s resilience and outcomes or reduces the chance of a problem getting worse. It is not an individual service, but a system of support delivered by local authorities and their partners working together and taking collective responsibility to provide the right provision in their area.*

*Some early help is provided through “universal services”, such as education and health services. They are universal services because they are available to all families, regardless of their needs. Other early help services are coordinated by a local authority and/or their partners to address specific concerns within a family and can be described as targeted early help.*

*Examples of these include parenting support, mental health support, youth services, youth offending teams and housing and employment services. Early help may be appropriate for children and families who have several needs, or whose circumstances might make them more vulnerable. It is a voluntary approach, requiring the family’s consent to receive support and services offered. These may be provided before and/or after statutory intervention.”*

Early help, early intervention and Children’s Centres have been part of Derbyshire Children’s Services offer to families for more than 20 years.

Derbyshire's network of 22 Children's Centre buildings provides vital accommodation for the delivery of court ordered Family Time, and these buildings also provide opportunities for partners and volunteers to support children, young people and families.

Children's Centre staff play an important role around the Keeping Babies Safe agenda and so a pre-birth framework of direct work is delivered one to one with families, or through a targeted antenatal group. The work incorporates the key areas of Keeping Babies Safe, as well as additional important considerations such as practical preparation for birth, coping with a crying baby, play and stimulation.

The work of both the Early Help Teams and Children's Centres were commended by the Ofsted inspectors during their recent inspection of Children's Services (November 2023).

Are there any proposals to change these?

The council is facing financial pressures that are outside of our control and we are looking at making changes to a range of services.

In order to support the council setting a balanced budget it has been proposed that we need to save around £3.9m from the early help service and children's centre budgets in order to safeguard against reductions in funding for statutory services like frontline social care.

Ideally, services would be retained if additional funding could be sourced, however a reduction in funding of this level will necessitate a service redesign resulting in a different approach to the provision of early help and early intervention in Derbyshire. Within the new arrangements we are seeking to reduce the range and number of job roles to meet the constraints of the funding envelope remaining. This also means that there are a number of services that we cannot continue to provide to children and families including:-

- Undertaking early help assessments with children, young people and families
- One to one support within the home
- Direct work with children and young people
- Connecting children, young people, and families to more sustainable and community-based support

- Lead professionals leading a Team Around the Family
- Running parent groups to help them deal with challenging behaviour from their children
- Targeted support to reduce the risks of children being exploited
- Carrying out interviews with young people if they have returned home after being reported missing to the Police
- Helping families where neglect is suspected
- Street and community-based work with young people
- Support to address conflict within families
- Support to improve family relationships
- Support to improve school attendance
- Support preparing families for the birth of a child
- Running sessions for parents of children aged 0-5 on child development, school readiness and parenting

The disestablishment of the job roles within the Early Help Teams and Children's Centres, along with service re-design carry with it some significant risks which can be summarised below:-

- Cessation of the current early help services to support children, young people and families would result in a detrimental knock-on effect to the most vulnerable children and young people. The number one presenting issue present in the cases referred into early help is mental health and those young people needing help would need to access support from other agencies – and there is uncertainty over whether there is capacity amongst partner agencies to provide this.
- The proposals potentially serves as a false economy as there will be increased demand for frontline Social Care support as children's and families' needs become more acute.
- There is potential for more public law proceedings leading to more children being accommodated by the Council.
- There is potential for delayed parenting assessments – the current Early Help staff are currently able to offer additional capacity when demand is high.
- There is potential for reduced support for Family Time – the current Early Help staff are currently able to offer additional capacity when demand is high.
- There are likely to be significant and increased pressures on partner agencies to provide a greater level of early help and early intervention in the absence of support from the locality targeted Early Help Teams.

The proposed service redesign supports directly or indirectly the delivery of some of the statutory duties the council is legally required to provide, and also responds to the significant feedback received as part of the public consultation, partner engagement or from the staff roadshows:

- Parenting assessments – these are needed as part of proceedings in the family courts
- Family Time – we supervise sessions with parents and their children as directed by the family courts
- Work to track and support school leavers if they do not find a place at college, sixth form or a job with training
- Support for partner agencies in delivering early help interventions
- Direct and practical family help within the home
- Delivery of parenting programmes
- Delivery of specific support for children aged 0-5 and their families

12 Children’s Centres have been identified that we are proposing to retain. These are larger centres that are used to deliver more services (like court ordered family time). The buildings are spread out, as best as possible, across Derbyshire’s localities:-

**High Peak and North Derbyshire Dales**

- Glossop
- Buxton (Fairfield)

**Chesterfield**

- Brimington
- Birdholme

**Bolsover / North East Derbyshire**

- North Wingfield (Alice’s View)
- Shirebrook
- Creswell
- Eckington

**Amber Valley**

- Heanor

**Erewash**

- Ilkeston (Cotmanhay)
- Long Eaton

**South Derbyshire Dales and South Derbyshire**

- Woodville

Retaining 12 Children's Centres will mean the closure of the following 10 Children's Centre which are either not as well used, are smaller, or are close to other larger, more well used Centres. In order to enable the further use of these building spaces for children and families, discussions will be had with partner agencies about a transfer:

**High Peak and North Derbyshire Dales**

- Hadfield
- Gamesley
- Matlock

**Chesterfield**

- Holme Hall
- Old Whittington

**Bolsover / North East Derbyshire**

- Bolsover

**Amber Valley**

- Alfreton
- Ironville
- Langleys Mill

**Erewash**

- Charnos Family Support Centre (Ilkeston)

## Part 2. Supporting evidence about impact

What is presently known about how the current service or policy impacts upon people with a protected characteristic, people from disadvantaged communities, armed forces personnel and other groups outlined in the Council's guidance for EIAs?

The follow presents data from the last year on early help interventions provided to Derbyshire residents in each of Children's Services 6 operational localities, and breaks down, gender, disability, ethnicity and age.

**Abbreviations:-** AV = Amber Valley, CHE = Chesterfield, ERE = Erewash, HPND = High Peak and North Derbyshire Dales, NEB = North East Derbyshire / Bolsover, SDSD = South Derbyshire Dales and South Derbyshire

### 2023

Locality	Total	Gender						Disability			
		Female	Male	Not recorded	Female %	Male %	Not recorded %	Yes	No or not recorded	Yes	No or not recorded
AV	1567	801	751	15	51.1%	47.9%	1.0%	47	1520	3.0%	97.0%
CHE	1292	675	602	15	52.2%	46.6%	1.2%	47	1245	3.6%	96.4%
ERE	1248	689	542	17	55.2%	43.4%	1.4%	58	1190	4.6%	95.4%
HPND	1206	618	573	15	51.2%	47.5%	1.2%	77	1129	6.4%	93.6%
NEB	2043	1037	987	19	50.8%	48.3%	0.9%	77	1966	3.8%	96.2%
SDSD	1066	549	509	8	51.5%	47.7%	0.8%	51	1015	4.8%	95.2%
Total	8422	4369	3964	89	51.9%	47.1%	1.1%	357	8065	4.2%	95.8%

Locality	Asian or Asian British	Black or African or Caribbean or Black British	Mixed or Multiple	Other Ethnic Group	White	Not Stated	Asian or Asian British	Black or African or Caribbean or Black British	Mixed or Multiple	Other Ethnic Group	White	Not Stated
AV	13	9	55	8	1376	106	0.8%	0.6%	3.5%	0.5%	87.8%	6.8%
CHE	17	18	42	12	1121	82	1.3%	1.4%	3.3%	0.9%	86.8%	6.3%
ERE	17	20	61	5	1031	114	1.4%	1.6%	4.9%	0.4%	82.6%	9.1%
HPND	8	8	45	4	1049	92	0.7%	0.7%	3.7%	0.3%	87.0%	7.6%
NEB	12	21	63	17	1801	129	0.6%	1.0%	3.1%	0.8%	88.2%	6.3%
SDSD	33	10	62	17	849	95	3.1%	0.9%	5.8%	1.6%	79.6%	8.9%
Total	100	86	328	63	7227	618	1.2%	1.0%	3.9%	0.7%	85.8%	7.3%

Locality	0-5	6-18	18+	0-5	6-18	18+
AV	371	509	299	31.00%	42.60%	25.00%
CHE	396	414	262	36.40%	38.10%	24.10%
ERE	344	377	272	34.00%	37.20%	26.90%
HPND	244	499	178	26.30%	53.80%	19.20%
NEB	521	842	377	29.60%	47.90%	21.40%
SDSD	232	418	143	29.10%	52.40%	17.90%
<b>Total</b>	<b>2108</b>	<b>3059</b>	<b>1531</b>	<b>31.10%</b>	<b>45.10%</b>	<b>22.60%</b>

The data above shows that overall the service is providing support to more females than males (52% to 47% - 1% not recorded), with higher proportion of females in receipt of support in Erewash (55%).

Overall, 76.2% of people receiving support are aged between 0 and 18.

Overall, 4% of people with a disability recorded are in receipt of support from the service across Derbyshire. However, in Amber Valley this is 3%, and in High Peak and North Dales it is 6.4%.

Overall, of the people in receipt of support from the service, 85.8% of people's ethnicity is recorded as being white, 1.2% recorded as Asian / Asian British, 1% recorded as Black or African or Caribbean or Black British, 0.7% as other and 7.3% have not had their ethnicity recorded.

Deprivation has 10 levels of classification – 1 describes areas with the highest levels of deprivation area, and 10 describes areas with the lowest levels of deprivation area.

**Amber Valley**

Level of deprivation	1	2	3	4	5	6	7	8	9	10
Number of interventions	200	213	203	127	307	104	110	98	83	48
Percentage of Total	13.4%	14.3%	13.6%	8.5%	20.6%	7.0%	7.4%	6.6%	5.6%	3.2%
Top 3 levels of deprivation	41.3%									
Top 5 levels of deprivation	70.3%									

In 2023 in Amber Valley, 74.6% of interventions were delivered 0-18 year olds and 70.3% of interventions were provided in the postcode areas covered by wards with the top 5 levels of deprivation as set out below:-

Postcode	LSOA	Ward	Level of Deprivation	Count
DE5 3	Amber Valley 008F	Ripley & Marehay Ward	1	64
DE55 4	Amber Valley 003D	Somercotes Ward	2	64
DE55 7	Amber Valley 001A	Alfreton Ward	3	58
NG16 5	Amber Valley 003B	Ironville & Riddings Ward	1	55
DE55 7	Amber Valley 003A	Alfreton Ward	2	51
NG16 4	Amber Valley 017D	Codnor, Langley Mill & Aldercar Ward	2	51
DE56 1	Amber Valley 010C	Belper South Ward	5	48
DE55 4	Amber Valley 003B	Ironville & Riddings Ward	1	43
DE55 7	Amber Valley 001B	Alfreton Ward	3	41
NG16 4	Amber Valley 017C	Codnor, Langley Mill & Aldercar Ward	1	38



## Chesterfield

Level of deprivation	1	2	3	4	5	6	7	8	9	10
Number of interventions	298	305	253	139	79	33	60	14	51	12
Percentage of Total	24.0%	24.5%	20.3%	11.2%	6.4%	2.7%	4.8%	1.1%	4.1%	1.0%
Top 3 levels of deprivation	68.8%									
Top 5 levels of deprivation	86.3%									

In 2023 in Chesterfield, 74.5% of interventions were delivered to 0-18 year olds, and 86.3% of interventions were delivered in the postcode areas covered by wards with the top 5 levels of deprivation as set out below:-

Postcode	LSOA	Ward	Level of Deprivation	Count
S40 2	Chesterfield 013A	Rother Ward	1	79
S43 3	Chesterfield 002D	Staveley Central Ward	1	57
S43 3	Chesterfield 002E	Staveley Central Ward	1	46
S40 2	Chesterfield 013D	Rother Ward	1	45
S43 1	Chesterfield 003D	Brimington North Ward	3	37
S43 2	Chesterfield 003A	Staveley North Ward	1	37
S43 1	Chesterfield 005E	Brimington South Ward	3	36
S43 3	Chesterfield 006E	Staveley Central Ward	2	36
S41 8	Chesterfield 004C	Dunston Ward	2	35
S40 2	Chesterfield 010G	Rother Ward	3	32

**Erewash**

Level of deprivation	1	2	3	4	5	6	7	8	9	10
<b>Number of interventions</b>	155	217	274	46	160	70	86	66	57	70
<b>Percentage of Total</b>	<b>12.9%</b>	<b>18.1%</b>	<b>22.8%</b>	<b>3.8%</b>	<b>13.3%</b>	<b>5.8%</b>	<b>7.2%</b>	<b>5.5%</b>	<b>4.7%</b>	<b>5.8%</b>
<b>Top 3 levels of deprivation</b>	<b>53.8%</b>									
<b>Top 5 levels of deprivation</b>	<b>70.9%</b>									

In 2023 in Erewash, 71.2% of interventions were delivered to 0-18 year olds, and 70.9% of interventions were delivered in the postcode areas covered by wards with the top 5 levels of deprivation as set out below:-

Postcode	LSOA	Ward	Level of Deprivation	Count
DE7 8	Erewash 001C	Cotmanhay Ward	1	54
DE7 4	Erewash 006A	Hallam Fields Ward	5	46
NG10 4	Erewash 010C	Derby Road West Ward	1	45
DE7 8	Erewash 003D	Larklands Ward	2	40
DE7 8	Erewash 001D	Cotmanhay Ward	2	38
NG10 3	Erewash 015D	Wilsthorpe Ward	8	37
DE7 8	Erewash 001E	Cotmanhay Ward	3	36
NG10 1	Erewash 012B	Long Eaton Central Ward	3	36
NG10 5	Erewash 008C	Sandiacre Ward	3	32
NG10 1	Erewash 012D	Long Eaton Central Ward	2	30

**High Peak and North Dales**

Level of deprivation	1	2	3	4	5	6	7	8	9	10
Number of interventions	196	28	61	125	164	154	107	143	144	37
Percentage of Total	16.9%	2.4%	5.3%	10.8%	14.2%	13.3%	9.2%	12.3%	12.4%	3.2%
Top 3 levels of deprivation	24.6%									
Top 5 levels of deprivation	49.5%									

In 2023 in High Peak, 80.1% of interventions were delivered to 0-18 year olds, and 49.5% of interventions were delivered in the postcode areas covered by wards with the top 5 levels of deprivation as set out below:-

Postcode	LSOA	Ward	Level of Deprivation	Count
SK17 7	High Peak 011E	Stone Bench Ward	1	75
DE4 3	Derbyshire Dales 006D	Matlock East & Tansley Ward	1	42
SK13 1	High Peak 002C	Hadfield North Ward	4	35
SK17 7	High Peak 011C	Stone Bench Ward	3	35
SK23 0	High Peak 013F	Chapel West Ward	6	35
SK13 0	High Peak 002A	Gamesley Ward	1	33
DE4 2	Derbyshire Dales 004A	Darley Dale Ward	6	31
SK13 1	High Peak 001D	Tintwistle Ward	5	31
SK13 0	High Peak 002B	Gamesley Ward	1	30
SK22 4	High Peak 006C	New Mills East Ward	2	28

**North East Derbyshire and Bolsover**

Level of deprivation	1	2	3	4	5	6	7	8	9	10
Number of interventions	178	420	349	348	246	133	99	67	71	20
Percentage of Total	9.2%	21.8%	18.1%	18.0%	12.7%	6.9%	5.1%	3.5%	3.7%	1.0%
Top 3 levels of deprivation	49.0%									
Top 5 levels of deprivation	79.8%									

In 2023 in North East Derbyshire and Bolsover, 77.5% of interventions were provided to 0-18 year olds, and 79.8% of interventions were delivered in the postcode areas covered by wards with the top 5 levels of deprivation as set out below:-

Postcode	LSOA	Ward	Level of Deprivation	Count
S44 6	Bolsover 004A	Bolsover North & Shuttlewood Ward	2	66
S80 4	Bolsover 003C	Elmton-with-Creswell Ward	2	65
DE55 6	North East Derbyshire 013C	Shirland Ward	3	55
S45 9	North East Derbyshire 012D	Clay Cross South Ward	2	55
S44 6	Bolsover 005B	Bolsover East Ward	2	44
S42 5	North East Derbyshire 009E	North Wingfield Central Ward	1	43
S42 5	North East Derbyshire 009D	Holmewood & Heath Ward	4	42
S42 5	North East Derbyshire 009C	Holmewood & Heath Ward	1	38
NG20 9	Bolsover 007B	Langwith Ward	2	36
S21 1	North East Derbyshire 001G	Killamarsh West Ward	4	36

### South Dales and South Derbyshire

Level of deprivation	1	2	3	4	5	6	7	8	9	10
Number of interventions	0	92	71	70	100	211	72	144	145	102
Percentage of Total	0.0%	9.1%	7.1%	7.0%	9.9%	21.0%	7.1%	14.3%	14.4%	10.1%
Top 3 levels of deprivation	16.2%									
Top 5 levels of deprivation	33.1%									

In 2023 in South Dales and South Derbyshire, 81.5% of interventions were provided to 0-18 year olds, and 33.1% of interventions were delivered in the postcode areas covered by wards with the top 5 levels of deprivation as set out below:-

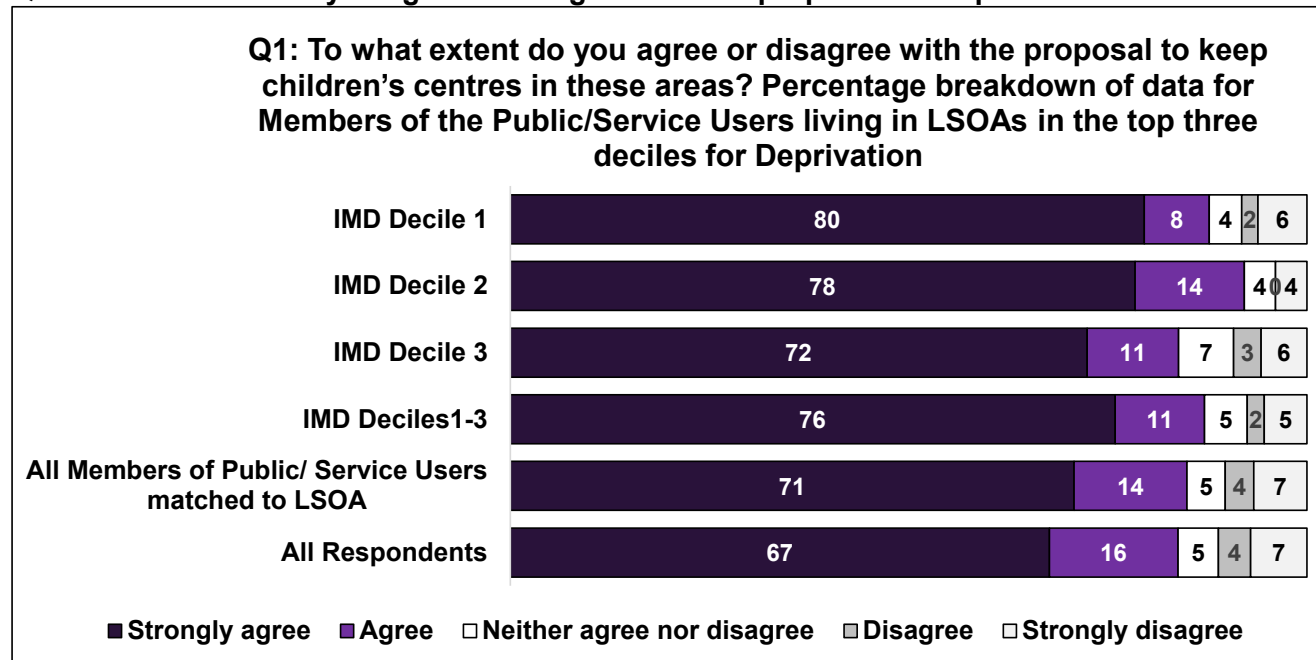
Postcode	LSOA	Ward	Level of Deprivation	Count
DE24 5	South Derbyshire 004D	Aston Ward	9	45
DE11 7	South Derbyshire 013A	Woodville Ward	2	38
DE24 3	South Derbyshire 003A	Stenson Ward	5	27
DE6 1	Derbyshire Dales 009A	Ashbourne North Ward	6	27
DE6 1	Derbyshire Dales 009D	Ashbourne South Ward	6	26
DE23 3	South Derbyshire 003D	Willington and Findern Ward	10	24
DE11 0	South Derbyshire 008D	Newhall and Stanton Ward	2	23
DE11 0	South Derbyshire 007D	Midway Ward	3	21
DE11 7	South Derbyshire 007A	Midway Ward	4	20
DE11 8	South Derbyshire 012D	Woodville Ward	6	20

As part of the public consultation undertaken, Question 8 asked respondents to provide their postcode. Using this data has allowed matching to smaller areas called lower super output areas. 51.2% of respondents have been matched in this way.

Each lower super output area (LSOA) has a score for deprivation and a ranking for deprivation called the Index of Multiple Deprivation (IMD). These scores and rankings give an indication of how deprived in relative terms that area is compared to other areas in England as at 2019 (the most recent year for which we have this data).

- Each area has been split into tenths (deciles). Areas with a deprivation decile of 1 are amongst the top 10% most deprived areas in England, deciles 1 and 2 together show people in the top 20% most deprived area in England, and so on.
- For the people who we have been able to match to these areas, we can provide an analysis of how people’s answers may have varied based on the deciles of deprivation for the areas people live in.
- The following sections show how the answers of people who described themselves as either members of the public or service users, varied (or not) based on whether those people live in the top 3 deciles for deprivation in England.

**Q1: To what extent do you agree or disagree with the proposal to keep Children's Services in these Areas?**



- The above graph shows that high proportions of all respondents said they strongly agreed or agreed with the proposal to keep Children’s Services in the area listed in the consultation (almost 83%% for all respondents).

- For all members of the public/services users matched to an LSOA, the percentage choosing strong agreement/agreement with the councils' proposal was slightly higher at 85%, and you as you move through the deciles from 3 to 1 (most deprived) this percentage gradually increases to 92% of respondents in deciles 2 before dipping slightly to 88% for decile 1.

**Q2: In your opinion, what are the top 3 most important services offered by early help and children's centres? Data for the Members of the Public/Service Users with Deprivation Data for Deciles 1-3**

Answers to Q2	Member of Public/Service Users				All Deciles	All Respondents
	IMD Decile					
	1	2	3	1-3		
Undertaking early help assessments with children, young people and families	51.0%	54.9%	51.7%	52.4%	52.2%	51.9%
One to one support within the home	20.4%	15.7%	17.2%	17.6%	18.9%	20.8%
Direct work with children and young people	34.7%	41.2%	33.3%	35.8%	34.8%	35.5%
Parenting assessments, which are often needed by the courts	16.3%	9.8%	2.3%	8.0%	12.6%	15.1%
Family time (supervised contact for parents with their children)	30.6%	13.7%	14.9%	18.7%	18.3%	16.6%
Connecting children, young people, and families to more sustainable & community-based support	18.4%	13.7%	17.2%	16.6%	17.4%	14.9%
Lead professionals leading a Team Around the Family	6.1%	15.7%	4.6%	8.0%	8.4%	13.4%

Running parent groups to help them deal with challenging behaviour from their children	22.4%	29.4%	29.9%	27.8%	23.0%	24.6%
Targeted support to reduce the risks of children being exploited	24.5%	17.6%	26.4%	23.5%	19.3%	16.4%
Carrying out interviews with young people if they have returned home after being reported missing to the Police	2.0%	3.9%	3.4%	3.2%	2.0%	1.8%
Helping families where neglect is suspected	18.4%	29.4%	31.0%	27.3%	31.6%	31.4%
Street and community-based work with young people	4.1%	3.9%	6.9%	5.3%	6.5%	5.5%
Support to address conflict within families	2.0%	3.9%	5.7%	4.3%	4.6%	5.2%
Support to improve family relationships	2.0%	7.8%	2.3%	3.7%	5.6%	6.5%
Support to improve school attendance	2.0%	2.0%	2.3%	2.1%	2.4%	3.6%
Support preparing families for the birth of a child	4.1%	5.9%	10.3%	7.5%	7.2%	6.9%
Running sessions for parents of children aged 0-5 on child development, school readiness and parenting	36.7%	31.4%	40.2%	36.9%	33.4%	28.6%
<b>Total</b>	<b>49</b>	<b>51</b>	<b>87</b>	<b>187</b>	<b>586</b>	<b>2027</b>

- The above table shows the answers for members of the public/service users in terms of prioritizing the top three services listed changed relatively little in deciles 1 to 3 compared to all members of the public/service users.



- Compared to all respondents, members of the public/service users prioritized 'Running sessions for parents of children aged 0-5 on child development, school readiness and parenting' (between 31.4% and 40.2% depending on the decile group).
- This contrasts with all respondents where the third most popular option was 'Helping families where neglect is suspected.'

**Q3: In your opinion, what are the top 3 least important services offered by early help and children's centres? Data for members of the public/service users in deciles 1-3**

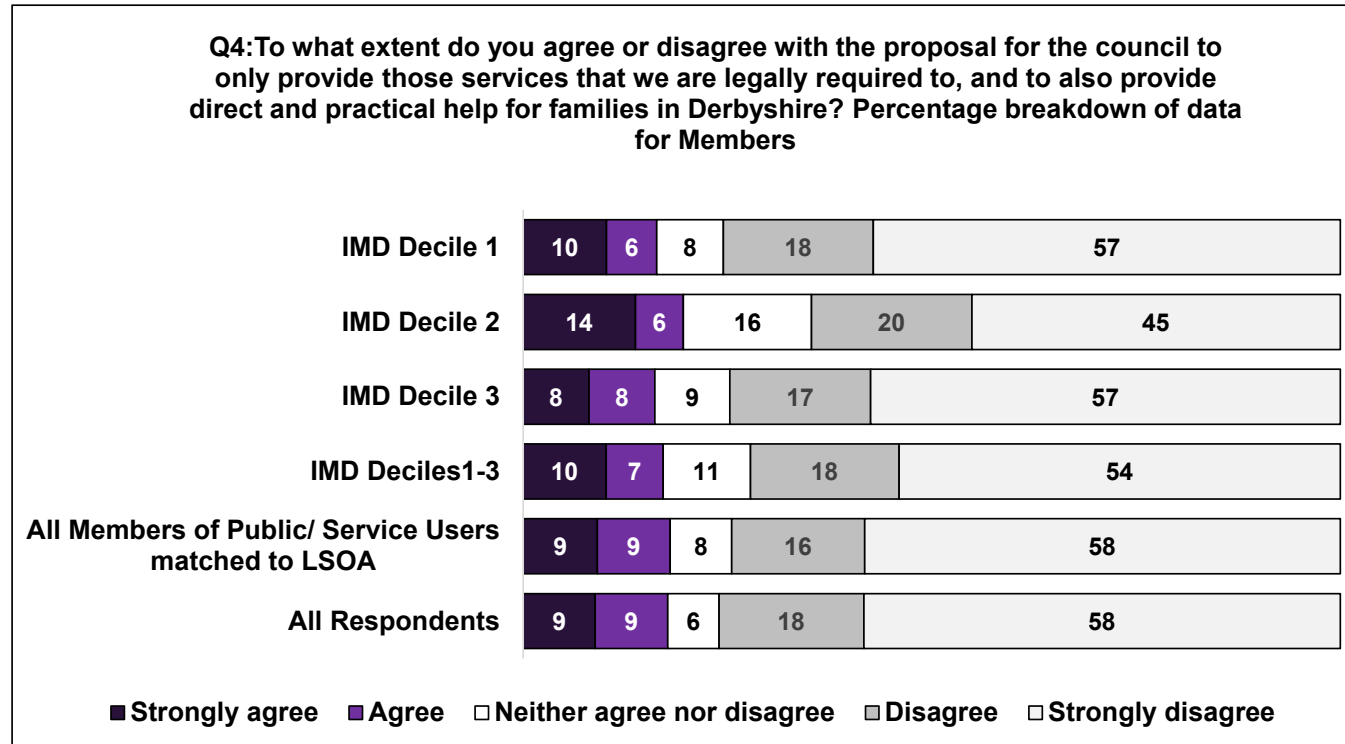
Q3 Answers	Member of Public/Service Users					All Respondents
	IMD Decile				All Deciles	
	1	2	3	Deciles 1 - 3		
Undertaking early help assessments with children, young people and families	10.2%	5.9%	12.6%	10.2%	7.0%	6.4%
One to one support within the home	12.2%	11.8%	14.9%	13.4%	11.8%	11.0%
Direct work with children and young people	8.2%	5.9%	10.3%	8.6%	4.9%	5.6%
Parenting assessments, which are often needed by the courts	2.0%	7.8%	19.5%	11.8%	13.0%	11.4%
Family time (supervised contact for parents with their children)	10.2%	15.7%	13.8%	13.4%	13.0%	11.5%
Connecting children, young people, and families to more sustainable and community-based support	10.2%	13.7%	13.8%	12.8%	14.7%	18.7%
Lead professionals leading a Team Around the Family	20.4%	17.6%	27.6%	23.0%	23.2%	24.5%
Running parent groups to help them deal with challenging behaviour from their children	12.2%	5.9%	8.0%	8.6%	9.2%	9.3%

Targeted support to reduce the risks of children being exploited	18.4%	5.9%	4.6%	8.6%	6.7%	5.4%
Carrying out interviews with young people if they have returned home after being reported missing to the Police	18.4%	25.5%	34.5%	27.8%	27.8%	34.2%
Helping families where neglect is suspected	8.2%	5.9%	1.1%	4.3%	2.9%	3.1%
Street and community-based work with young people	32.7%	21.6%	26.4%	26.7%	27.5%	26.9%
Support to address conflict within families	12.2%	15.7%	9.2%	11.8%	11.9%	12.8%
Support to improve family relationships	16.3%	17.6%	14.9%	16.0%	16.0%	13.9%
Support to improve school attendance	44.9%	47.1%	34.5%	40.6%	42.8%	39.2%
Support preparing families for the birth of a child	28.6%	29.4%	24.1%	26.7%	31.7%	30.9%
Running sessions for parents of children aged 0-5 on child development, school readiness and parenting	14.3%	23.5%	14.9%	17.1%	17.9%	19.3%
<b>Total</b>	<b>49</b>	<b>51</b>	<b>87</b>	<b>36</b>	<b>586</b>	<b>2027</b>

- The above table shows there was some variation in the answers for members of the public/service users in deciles 1 – 3 in terms of listing the top three least important services.
- ‘Support to improve school attendance’ (between 39.2% and 47.1%) and ‘Support preparing families for the birth of a child’ (between 24.1% and 31.7%) were deemed least important for most decile groups.
- Carrying out interviews with young people if they have returned home after being reported missing to the Police was also listed as least important for all groups except members of the public/service users in decile 1.
- Street and community-based work with young people was in the top three least important services for decile 1 (32.7%) and the combined deciles 1-3 (26.7%).

- Lead professionals leading a Team Around the Family was listed in the top three least important functions for members of the public/service users in decile 3 (27.6%).

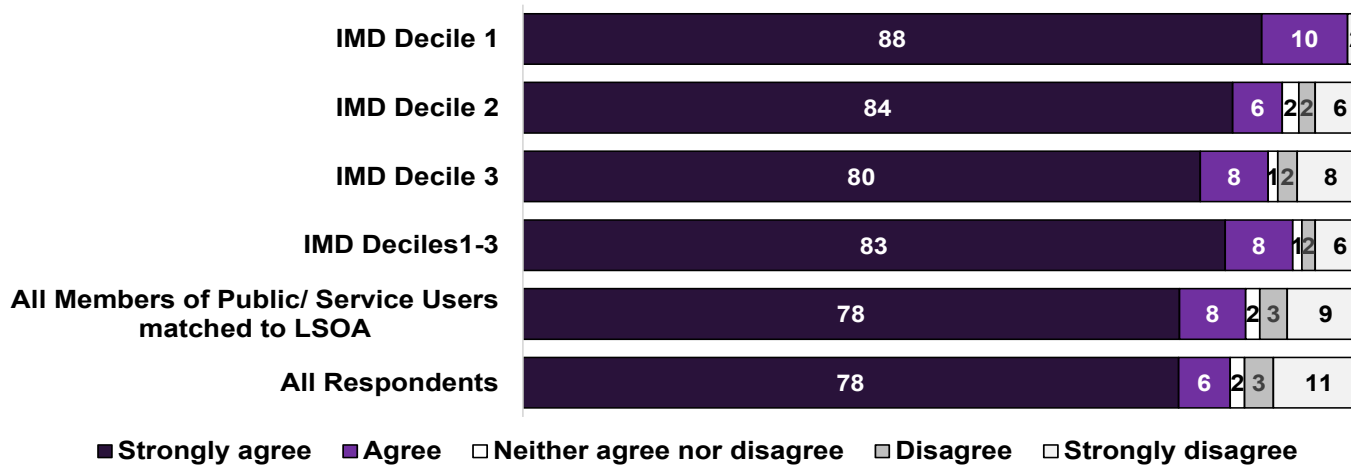
**Q4: To what extent do you agree or disagree with the proposal for the council to only provide those services that we are legally required to, and to also provide direct and practical help for families in Derbyshire?**



- The graph above shows that high proportions of all respondents said they strongly disagreed or disagreed with the proposal for the council to only provide those services they are legally required to, and to also provide direct and practical help for families in Derbyshire (76% for all respondents).
- For all members of the public/services users matched to an LSOA, the percentage was slightly higher at 74%, and you as you move through the deciles from 3 to 1 (most deprived) this percentage gradually increases to 75% of respondents in decile 1.

**Q5: To what extent to you agree or disagree that stopping some of these services could affect the well-being and support available to children and families in Derbyshire?**

**Q5 :To what extent to you agree or disagree that stopping some of these services could affect the well-being and support available to children and families in Derbyshire? Percentage breakdown of data for Members of the public/service users living in LSOAs**



- The graph above shows that 84% of all respondents said they strongly agreed or agreed with the proposal that stopping some of these services could affect the well-being and support available to children and families in Derbyshire?
- For all members of the public/services users matched to an LSOA, the percentage was slightly higher at 86%, and you as you move through the deciles from 3 to 1 (most deprived) this percentage tends to rise to a high of 98% of respondents in decile 1.

Information about people completing the consultation.

**Q6: Are you answering this questionnaire as a (please tick all that apply)**

Answer	No	%
Current or previous user of these services, including a young person	356	17.6%
Member of the public	833	41.1%
Education professional	425	21.0%
Health professional	274	13.5%
Social care professional	234	11.5%
Other professional working with children	254	12.5%
Other	128	6.3%
<b>Total</b>	<b>2027</b>	

- The largest groups to respond to the survey were members of the public 41.1% and Education professionals 21%.
- Note, if you add up all the answers they will exceed 2027 responses because people could choose more than one category when answering this question.

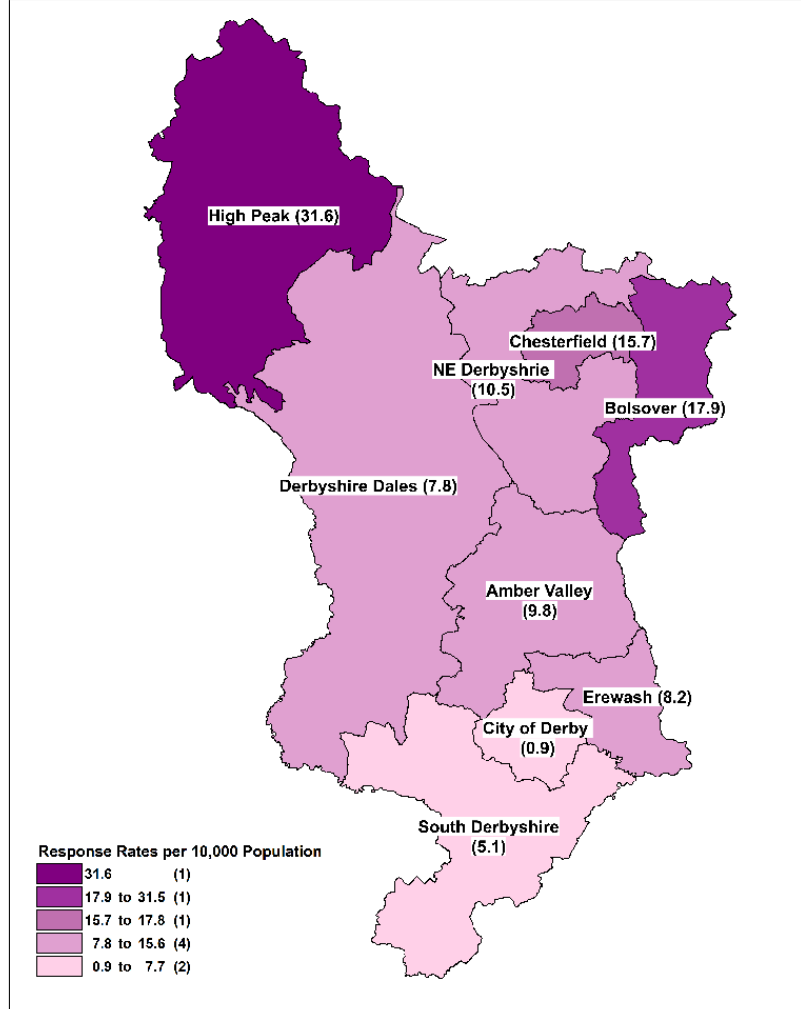
**Q8: Postcode Data matched to District and City Council areas.**

Question 8 asked people to provide us with a postcode. 52.3% of respondents gave us postcodes enabling us to match them to a Derbyshire District or Derby City Council. The map overleaf shows the rate of responses per 10,000 people in each area. This allows to compare responses within each area whilst making allowances for the fact that base population is different in different districts.

High Peak has the highest response per 10,000 people in the population at 31.6, followed by Bolsover at 17.9 and Chesterfield at 15.7.



### 2024 Early Help/Children's Centre Consultation - Responses by District Council Area



Response Rates per 10,000 Population

- 31.6 (1)
- 17.9 to 31.5 (1)
- 15.7 to 17.8 (1)
- 7.8 to 15.6 (4)
- 0.9 to 7.7 (2)

© Derbyshire County Council 2024

Scale 1:388,400

28/03/2024



Please detail the sources for the above information

The information has been sourced from the Mosaic case recording system on interventions provided to children, young people and families across Derbyshire during 2023. Management Information have undertaken an analysis of the responses and feedback from the public consultation.

Is consultation planned/ has consultation take place? If Yes, what is this telling us about the likely impact on the protected characteristic and other communities/ groups etc.?

A 6-week public consultation was launched on 12 February 2024 (ending on 24 March 2024). Partner organisations were also encouraged to contribute to the consultation.

There were 2,027 responses to the consultation – the highest ever for a consultation in Children’s Services.

88% of respondents were female, with 100% responding that their gender was the same as registered at birth.

10% of respondents described themselves as disabled.

95% of respondents described their ethnicity as White British, 2% other white background, 1% mixed or multiple ethnic groups, 1% Asian or Asian British, 0% (though 6 respondents) Black, Black British Caribbean or African, and 1% other.

94% of respondents described themselves as straight / heterosexual, 2% as gay/lesbian, 3% as bisexual and 1% as other.

If there is insufficient information to determine likely impact, what information is needed and how will it be obtained in the future?

**Part 3. Analysing and assessing the impact by equality Protected Characteristic group**

Use the information, customer feedback and other evidence to determine upon whom the policy/ service and any proposed changes will impact upon and how, highlighting where these have a negative, positive or no impact, including where this could constitute unfair treatment, limit access, or result in additional inequality or disadvantage, hardship, or exclusion.

For any identified negative potential impact, you must provide details of any action or options which could mitigate against this, and in serious cases, you should highlight where the Council would be advised not to proceed with a new or changing policy or service, including any proposals which are being considered.

Please use your action plan towards the rear of this document to record the action and the monitoring that will take place to deliver or identify appropriate mitigation.

<b><i>Protected Characteristic or Group</i></b>	<b><i>Positive impact</i></b>	<b><i>Negative impact</i></b>	<b><i>No impact</i></b>
<b>All protected characteristics</b>		Negative impact	
(Please describe)	The proposal to reduce funding for Early Help and Children’s Centres will generally have a negative impact on most of the protected characteristic groups.		
<b>Age</b>		Negative impact.	
(Please describe)	Young people aged 0-18 will be adversely impacted by the proposal to reduce funding for Early Help and Children’s Centre services. The data on page 6 shows that on average 76.2% of		



<b>Protected Characteristic or Group</b>	<b>Positive impact</b>	<b>Negative impact</b>	<b>No impact</b>
	<p>interventions delivered by Early Help and Children's centres have been to children aged 0-18 (the remaining percentage to people over 18 including parents and carers).</p> <p>There were 2,027 responses to the public – the top three age groups in terms of responses to the consultation were people aged 26 to 35 (20.2%), people aged 36 to 50 (38.9%), and people aged 51 to 60 (19.5%).</p>		
<b>Disability</b>		Negative impact.	
(Please describe)	<p>The proportion of people with a disability who have received an intervention from Early Help and Children's Centres in 2023 is 4.2% - this is in the context that the percentage of people classed as disabled in the UK in the 2021 census was 17.8%. However, children with disabilities who also have complex needs are more likely to have their needs met by the Children with Disabilities service.</p> <p>9.4% of 2,027 respondents to the public consultation described themselves as disabled (9.2% did not provide a response).</p>		
<b>Gender re-assignment</b>			No impact
(Please describe)			
<b>Marriage &amp; civil partnership<sup>1</sup></b>			No impact
(Please describe)			
<b>Pregnancy &amp; maternity</b>		Negative impact	

<sup>1</sup> Under EA 2010 – someone in a CP must not be treated less favourably than a married person

<b>Protected Characteristic or Group</b>	<b>Positive impact</b>	<b>Negative impact</b>	<b>No impact</b>
(Please describe)	Children's Centres and Early Help provide targeted family support to pregnant mothers and families with new born children, so there would be a negative impact on this group.		
<b>Race &amp; ethnicity</b>		Negative impact	
(Please describe)	White British children, young people and families will be adversely impacted by the proposals to reduce funding for Early Help and Children's Centres. On average, 85.8% of people who have received an intervention from Early Help and Children's Centres are recorded on the Mosaic case recording system as White British. In relation to ethnicities other than White British, people in Erewash and South Derbyshire will be most adversely impacted by the proposals. 87.6% of respondents to the public consultation described themselves as White British.		
<b>Religion/ belief<sup>2</sup></b>			No impact
(Please describe)			
<b>Sex or gender<sup>3</sup></b>		Negative impact	
(Please describe)	Overall, 51.9% of people received an intervention from Early Help and Children's Centres are female. However, in Erewash this is 55.2% - so female in Erewash will be the most impacted.  81.2% of respondents to the public consultation were female.		
<b>Sexual orientation</b>		Negative impact	
(Please describe)	Whilst we do not capture data around the sexual orientation of the people who are supported by Early Help and Children's Centres, the Early Help Practitioners across Derbyshire provide support to young people around their sexual identity and therefore there would be a negative impact this group.		

<sup>2</sup> Under EA 2010 – must also consider non-religious belief

<sup>3</sup> Sex and gender can be used at different times depending upon whether you are referring to the EA 2010 and the different duties which exist

<b>Protected Characteristic or Group</b>	<b>Positive impact</b>	<b>Negative impact</b>	<b>No impact</b>
<b>Human Rights</b>		Negative impact	
(Please describe)	Article 8 of the Human Rights Act 1998 protects individuals' right to respect for a family life. The reduction in services and support currently provided by Early Help and Children's Centres may adversely impact on this.		
<b>Armed Forces personnel/ households</b>			No impact
(Please describe)			
<b>Users of British Sign Languages</b>			No impact
(Please describe)			
<b>DCC Employees</b>		Negative impact	
(Please describe)	There are likely to be a large number of job losses affecting DCC employees – an EIA relating to this group has been developed for the Executive Director report on staffing.		
<b>Community and Voluntary sector organisations working with protected characteristic groups</b>		Negative impact	
(Please describe)	Community and voluntary sector organisations working with LGBTQI+ young people will be adversely impacted by the proposals to reduce funding in Early Help and Children's Centres as they will potentially need to support more young people.		
<b>Socio-economic/ financial inclusion/</b>		Negative impact	

<b>Protected Characteristic or Group</b>	<b>Positive impact</b>	<b>Negative impact</b>	<b>No impact</b>
<b>deprived communities/ Thriving communities</b>			
(Please describe)	As set out earlier, the great majority of interventions provided by Early Help and Children's Centres are in the most deprived wards in the County.		
<b>Carers (Unpaid and paid)</b>			No impact
(Please describe)			
<b>Other, please state</b>			N/a
(Please describe)			

#### **Part 4. Summary of main findings**

Overall, the proposal to reduce funding for Early Help and Children's Centres will have a negative impact on specific protected characteristics or groups.

Age – young people aged 0-18 will be adversely impacted as the level of service and support available to them would be reduced if the proposals are agreed.

Disability – 4.2% of users of the service (who have received an intervention in the last year) are disabled.

Pregnancy and maternity – proposals to reduce funding for Children's Centres will mean a reduction in the level of support available to support pregnancy and maternity, so this is a negative impact.

Race & ethnicity – there would be a significant negative impact on White British users of the service. Currently just under 86% of users of the service describe themselves as White British.

Deprived communities – as set out earlier, in some localities the level support provided by the teams to areas of deprivation can be as high as 86% (Chesterfield). Only High Peak and South Dales and South Derbyshire provide more support to areas that are not defined as areas of deprivation.

Sex and gender – there would be a negative impact on women and girls as 51% of users of the service are female (rising to 55% in Erewash).

Sexual orientation – there would be a negative impact on young people who identify as LGBTQI+ as the support currently available from the Early Help Practitioners (Youth) and the support from the Youth and Community Engagement Workers (in working with community groups) would no longer be available.

It is important to state that a positive impact of the proposals for persons with protected characteristics is that the proposal to reduce funding for Early Help and Children’s Centres will enable the local authority to continue to provide statutory services and it would be anticipated that some of the recipients of statutory services would be persons with protected characteristics.

#### **Are there any recommendations for changes to proposals?**

Yes, following on from the analysis of the EIA, concerns raised by from the public consultation, and feedback from the staff roadshows and partner engagement sessions, a number of revisions have been made to the service re-design allowing for more roles to support children, young people and families – and partner agencies.

## Part 5. Proposed Equality Action Plan

Please complete this Action Plan to outline any mitigation you intend to take.

Issue identified	Action required to reduce impact/ mitigate	Timescale and responsibility	Monitoring and review arrangements
Fewer resources to support young people.	The service re-design has taken account of the EIA and has now built in additional resources specifically to support young people – there will now be the roles of Youth Engagement Officer and also Family Help Assistant (Youth) – they will work with young people in group situations and will also provide guidance to connect them to appropriate employment, education and training opportunities.	This support has now been built into the proposed service re-design.	It is likely that the service will need to be reviewed within 3 years due to availability of long-term funding.
Fewer resources to support pregnancy and maternity.	The service re-design has taken account of the EIA and has built in additional resources specifically to support pregnancy and maternity needs. The funding available from Public Health will allow for workers to continue to	This support has now been built into the proposed service re-design.	It is likely that the service will need to be reviewed within 3 years due to availability of long term funding. Quarterly meetings will be held with Public Health to review the outcomes achieved on the 0-5 service.

Issue identified	Action required to reduce impact/ mitigate	Timescale and responsibility	Monitoring and review arrangements
	provide child development interventions, as well as being able to continue to work closely with colleagues in Social Care on pre-birth interventions.		

**Date and outcome of any Cabinet/ Cabinet Member or Council Report to which this was attached and their decision:**

## Checklist for EIA

Action/ checks	Date	Name
1 <sup>st</sup> draft agreed by		
Consultation completed and analysed		
2 <sup>nd</sup> draft agreed		
Forwarded to Policy & Research for comments/ advice		
Comments received from Policy & Research		
Forwarded to HR for comments/ advice		
Comments received from HR		
Forwarded to Legal Services for comments/ advice		
Comments received from Legal Services		
EIA revised in light of above (if applicable)		
Signed off by DMT/ Senior Officer/ CMT		
Authorised for Cabinet or another committee		
Uploaded to Derbyshire Democracy site – date of meeting		
Decision noted		



Final copy forwarded to Policy for uploading to website		
Monitoring and review after 6/12 months		

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**FOR PUBLICATION**

**DERBYSHIRE COUNTY COUNCIL**

**CABINET**

**Monday 29 April 2024**

**Report of the Executive Director - Children's Services**

**Permission for consultation for the contribution to care policy**  
(Cabinet Member for Children and Families)

**1. Divisions Affected**

1.1 County-wide

**2. Key Decision**

2.1 This is not a key decision.

**3. Purpose**

3.1. To seek approval to commence public consultation on the introduction of a financial contribution within the care policy under Section 20 of the Children Act 1989.

**4. Information and Analysis**

4.1 The Local Authority has a statutory duty to protect children who are at risk of significant harm and when risks are unmanageable within a home context take the necessary actions under the Children's Act 1989 to remove a child from their parents' care. When a court order is requested and issued the Local Authority will take responsibility for the care of the child and all associated costs.

4.2 In some instances, a family will agree to a child coming into the care of the Local Authority and the parent or parents will have 'parental

responsibility' for their child under S20 of the Childrens Act 1989. The local authority may not seek to share parental responsibility in relation to these children accommodated in accordance with Section 20 Children Act 1989.

- 4.3 Paragraph 21 of Part III of Schedule 2 of the Children Act 1989 states that "Where a local authority is looking after a child (other than under section 21, interim care order or remanded into their care) they shall consider whether they should recover contributions towards the child's maintenance from any person liable to contribute.

An authority may only recover contributions from a contributor if they consider it reasonable to do so.

The persons liable to contribute are:

- (a) where the child is under sixteen, each of his parents.
  - (b) where he has reached the age of sixteen, the child himself.
- A parent is not liable if in receipt of specified tax credits or social security/welfare benefits.

- 4.4 To date Derbyshire County Council has not previously consistently sought a contribution from parents under this legislation. The Council is now experiencing unprecedented financial challenges which are impacting on the Council's ability to meet demands for services. The position is highlighted within the Derbyshire County Council Charging Policy which states, 'The Council is faced with severe financial pressures as funding from more established sources fails to meet the cost of delivering services. As a consequence, maximising alternative sources of income is crucial if Council Tax is to remain at an acceptable level and service reductions are to be minimised.'

- 4.5 Therefore, the implementation of a contribution to care policy which aligns with the immediate risks and needs of a family's circumstances is being considered. The intent is to ensure that parents are encouraged to work with support and services to fulfil their responsibilities and that accommodation is utilised only where this is necessary and proportionate to the risks and needs identified.

## **5 Consultation**

- 5.1 It is proposed to begin an 8-week period of consultation with the public

and staff within children's services as to their views on the policy. This will also include some targeted awareness raising with families currently working with Childrens Services via social workers where it's considered appropriate, so as not to raise unnecessary anxiety or confusion to families. Appropriate partner agencies and voluntary sector organisations will also be made aware of the consultation to ensure they can respond. The public will be invited to comment on the proposed policy and the consultation will be publicly available on the Derbyshire County Council website.

- 5.2 The consultation, including an online questionnaire, will be promoted through a public awareness campaign.

## **6 Alternative Options Considered**

- 6.1 The alternative option would be no public consultation to be undertaken which could lead to potential reputational risk, Judicial Review of the policy if adopted, potential complaints and/or representations. Undertaking consultation provides an opportunity for representations to be gathered from those impacted or affected by the policy and for the policy and decisions relating to this to be informed by this information.

## **7 Implications**

- 7.1 Appendix 1 sets out the relevant implications considered in the preparation of the report.

## **8 Background Papers**

- 8.1 None identified.

## **9 Appendices**

- 9.1 Appendix 1 – Implications

## **10 Recommendation**

That Cabinet:  
Approves the commencement of public consultation, and engagement with relevant staff and families as well as partner agencies for an 8-week period.

## **11 Reasons for Recommendation**

- 11.1 Approving the commencement of the consultation will allow the public and targeted groups to comment on the proposed contribution to care policy and for this information to inform the policy, EIA and decision making.
- 11.2 Once the consultation is completed the comments and feedback will be carefully reviewed and considered in order to determine if any revision is required to the policy. The information will be incorporated into EIA and the proposal for the contribution to care policy under section 20 of the Childrens Act 1989 which will be brought back to cabinet for a decision.

## **12 Is it necessary to waive the call-in period?**

- 12.1 No

Report Author: Amanda Radley      Contact details: Amanda.Radley@derbyshire.gov.uk

On behalf of Alison Noble Director (Early Help and Safeguarding)  
[Alison.Noble@derbyshire.gov.uk](mailto:Alison.Noble@derbyshire.gov.uk)

## **Appendix 1**

### **Implications**

#### **Financial**

- 1.1 There are no financial implications of the consultation as this will be managed within existing resource.
- 1.2 The contribution to care policy has the potential to contribute to reducing costs of care borne by the Council by bringing in financial contributions from parents and encouraging parents to work with support services.

## Legal

2.1 Paragraph 21 of Part III of Schedule 2 of the Children Act 1989 states that “Where a local authority is looking after a child (other than under section 21, interim care order or remanded into their care) they shall consider whether they should recover contributions towards the child’s maintenance from any person liable to contribute.

An authority may only recover contributions from a contributor if they consider it reasonable to do so.

The persons liable to contribute are:

(a) where the child is under sixteen, each of his parents.

(b) where he has reached the age of sixteen, the child himself.

A parent is not liable if in receipt of specified tax credits or social security/welfare benefits.

2.2 In considering the introduction or reintroduction of such a charging policy the Council should consider whether a period of public consultation is necessary. The necessity may be required as a result of statutory requirement for consultation or based on the common law principles of fairness or legitimate expectation. Whilst there is no statutory requirement to consult in relation to the proposed policy there is a common law duty to consult.

2.3 The proposed consultation should follow the Gunning Principles of good practice and should be undertaken at a point in the decision-making process where changes could be made to the proposed policy should this be appropriate having fully considered the responses to the consultation. The proposed plan should be sufficiently clear to enable responders to express a view in relation to the proposals.

2.4 The timescale for the consultation should be sufficient to enable responses and particularly to enable those likely to be affected by the policy to have the opportunity to respond. The proposed timescale is reflective of the fact that the cohort affected by the proposals is relatively small and that the consultation will be targeted to them to enable them to be aware of the proposals and to have an opportunity to respond. The proposed consultation focuses both on those likely to be affected and also agencies and organisations who work alongside the families likely to be impacted.

2.5 The financial pressures being experienced by Children’s Services has resulted in an urgency to their review of services and the timescale proposed for the consultation is reflective both of this and also the measures proposed to ensure engagement within the eight-week period.

2.6 If the proposed consultation is approved then an Equalities Impact Analysis should also be undertaken during this period in order to inform future decision making.

### **Human Resources**

3.1 No relevant implications for this report

### **Information Technology**

4.1 No relevant implications for this report

### **Equalities Impact**

5.1 An equalities impact analysis (“EIA”) will be prepared to assist Cabinet in considering any subsequent request for the introduction of the proposed policy. The EIA will provide evidence and analysis which is designed to help organisations ensure that their policies and decision-making processes are fair and do not present disadvantage to any protected groups.





**FOR PUBLICATION**

**DERBYSHIRE COUNTY COUNCIL**

**CABINET**

**29 April 2024**

**Report of the Executive Director of Children's Services**

**The Curzon CE (Aided) Primary School – Enlargement of Premises**  
Children's Services

**1. Divisions Affected**

1.1 Duffield and Belper South

**2. Key Decision**

2.1 This is not a key decision.

**3. Purpose**

3.1 To report the outcome of the statutory consultation carried out on the enlargement of premises and seek approval to enlarge the premises at The Curzon CE (Aided) Primary School

**3. Information and Analysis**

Following the approval of a planning application for a housing development of 400 dwellings at Kedleston Road, Quarndon, the Local Authority secured Section 106 funding for the potential expansion of The Curzon CE (Aided) Primary School. The purpose of this funding is to provide increased pupil places which would accommodate the additional children from the housing development.

The permanent expansion of premises at The Curzon CE (Aided) Primary requires the Local Authority to follow the statutory process set out in the DfE's Making significant changes ('prescribed alterations') to maintained schools, dated January

2023 The Local Authority is required to publish a statutory proposal which contains sufficient information for consideration of the proposed change. The consultation period must last for 4 weeks from the date of the publication

## **5. Consultation**

- 5.1 A statutory consultation took place from 12<sup>th</sup> February to 15<sup>th</sup> March 2024. There were no responses to the proposal. A copy of the consultation can be found in Appendix 2.

## **6. Alternative Options Considered**

- 6.1 Not to proceed – The school would remain with their existing premises.

## **7. Implications**

- 7.1 Appendix 1 sets out the relevant implications considered in the preparation of the report.

## **8. Background Papers**

- 8.1 These are held on file in the Children's Services Development Section

## **9. Appendices**

- 9.1 Appendix 1- Implications.  
9.2 Appendix 2- Statutory Consultation

## **10. Recommendation(s)**

That Cabinet approves the enlargement of premises at The Curzon CE (Aided) Primary School.

## **11. Reasons for Recommendation(s)**

- 11.1 To increase the capacity of the school from 119 to 175 in response to the Kedleston Road housing development.

## **12. Is it necessary to waive the call in period?**

- 12.1 No

**Report Author: Jenny Webster**

**Contact details: x35808**

### **Implications**

#### **Financial**

1.1 None identified.

#### **Legal**

2.1 This proposal is subject to the School Organisation (Prescribed Alterations to Maintained Schools) (England) Regulations 2013. Where the proposed enlargement is permanent (longer than 3 years) and would increase the capacity of the school by more than 30 pupils and 25% or 200 pupils (whichever is the lesser) the Local Authority is required to follow the statutory process set out in the regulations. The Local Authority is required to publish a statutory proposal which contains sufficient information for interested parties to make a decision on whether to support or challenge the proposed change. Following the close of the consultation the decision on whether to extend the age range must be made within a period of 2 months or the proposals must be referred to the Schools Adjudicator.

2.2 The DfE's Making significant changes ('prescribed alterations') to maintained schools, dated January 2023 sets out that decision makers will need to be satisfied that the appropriate fair and open representation period has been carried out. Decision makers should also consider the quality and diversity of schools in the relevant area and whether the proposal will meet or affect the needs of parents, raise local standards and narrow attainment gaps.

#### **Human Resources**

3.1 None identified.

#### **Information Technology**

4.1 None

#### **Equalities Impact**

5.1 The local authority is required to have 'due regard' to the duties set out in Section 149 of the Equality Act 2010 (the Public Sector Equality Duty, 'PSED') in determining these proposals.

#### **Corporate objectives and priorities for change**

6.1 Not applicable

**Other (for example, Health and Safety, Environmental Sustainability, Property and Asset Management, Risk Management and Safeguarding)**

- 7.1 Derbyshire County Council has a statutory duty to ensure there are sufficient primary and secondary school places and is committed to working in close partnership with schools, academy trusts, the dioceses and key partners to ensure that the supply of school places across Derbyshire is in the right location, is of sufficient size, is viable and of good quality. We know that schools can face challenges in meeting pupils' needs, particularly where pupil numbers are falling, and that in some cases, changes to the pattern of school organisation in an area can help secure the viability of schools, improve opportunities and raise standards.



**The Curzon CE (Aided) Primary School  
Consultation on the Enlargement of Premises to Provide Increased School Places for  
Statutory School Aged Children**

**Context**

Following the approval of a planning application for a housing development of 400 dwellings at Kedleston Road, Quarndon, the Local Authority secured Section 106 funding to expand The Curzon CE (Aided) Primary School. The purpose of this funding is to provide increased pupil places which would accommodate the additional children from the housing development.

The permanent expansion of premises at The Curzon CE (Aided) Primary requires the Local Authority to follow the statutory process set out in the DfE's School Organisation Regulations (Making significant changes 'prescribed alterations' to maintained schools). The Local Authority is required to publish a statutory proposal which contains sufficient information for consideration of the proposed change. The consultation period must last for 4 weeks from the date of the publication.

**Proposal**

The proposal is to approve an expansion project at The Curzon CE (Aided) Primary School. The scheme would provide two additional modular classrooms (including toilets) and internal remodelling to provide a hall extension.

The school feel that the project would provide substantial improvements to the school, involving developing the site to provide improved facilities. Children would have the opportunity to be taught in buildings that are both welcoming and sustainable, creating a 21st century learning environment for them to thrive and prepare for their futures.

This investment into the primary school would support them in driving forwards their ambition for a better future for pupils and the community.

The expansion would increase the school's net capacity from 119 to 175.

**Funding**

The school has received a budget cost to provide the additional accommodation and S106 funding is available to cover the cost of the project.

## Consultation

The consultation on this proposal will be for four weeks from Monday 12 February 2024 until Friday 15 March 2024.

The consultation document is available on the Derbyshire County Council website at [www.derbyshire.gov.uk/council/have-your-say](http://www.derbyshire.gov.uk/council/have-your-say) or by request from Jenny Webster on Tel: 01629 535808 or by e-mail to [jenny.webster@derbyshire.gov.uk](mailto:jenny.webster@derbyshire.gov.uk)

Within four weeks of the publication of this notice, any person may object to or comment on the proposal by writing to the address or by sending an e-mail to the contact details below.

Jenny Webster, Head of Development, Derbyshire County Council, Room 178, County, Matlock, Derbyshire DE4 3AG or [jenny.webster@derbyshire.gov.uk](mailto:jenny.webster@derbyshire.gov.uk)

The deadline for receiving responses is Friday 14 March 2024.



**Carol Cammiss**  
**Executive Director – Children’s Services**



**FOR PUBLICATION**

**DERBYSHIRE COUNTY COUNCIL**

**CABINET**

**29 April 2024**

**Report of the Executive Director - Children's Services**

**Children's Services Section 106 Allocations**  
(Cabinet Member for Education)

**1. Divisions Affected**

1.1 County-wide

**2. Key Decision**

2.1 This is a key decision because it is likely to result in the Council incurring expenditure which is significant having regard to the Council's budget for the service or function concerned. This level is set at £500,000. It is also significant in terms of its effect on communities living or working in an area comprising two or more electoral areas in the County.

**3. Purpose**

3.1 To inform cabinet of the receipt of Section 106 developer contributions and to seek approval for the allocation of those contributions to projects in line with the individual Section 106 agreements.

**4. Information and Analysis**

4.1 Appendix 2 details the S106 contributions that have been received by the Authority. The Appendix details the schools that are to benefit from the investment, together with the planned projects.

## **5. Consultation**

5.1 Not applicable.

## **6. Alternative Options Considered**

6.1 Developer contributions are to be utilised as per the S106 agreements. If we did not allocate these contributions the funding for additional school places related to the growth in housing would have to come from Basic Need.

## **7. Implications**

7.1 Appendix 1 sets out the relevant implications considered in the preparation of the report.

## **8. Background Papers**

8.1 These are held on file in the Children's Services Development Section.

## **9. Appendices**

9.1 Appendix 1 – Implications

9.2 Appendix 2 -Proposed schemes.

## **10. Recommendation(s)**

That Cabinet:

- a) Notes the receipt/availability of S106 funding and approves allocations to the proposed projects outlined in Appendix 2

## **11. Reasons for Recommendation(s)**

11.1 The approval of the S106 allocations will ensure that the funding can be spent in line with the agreement in the allotted time available and ensure there is sufficient capacity at schools in the County.

## **12. Is it necessary to waive the call in period?**

12.1 No

Report Author: Nicola Ward

Contact details: Nicola.Ward@derbyshire.gov.uk



## **Implications**

### **Financial**

- 1.1 The contributions are wholly S106 Developer Contributions. Appendix 2 summarises the funds received. The total S106 to allocate is £2,189,948.97.

### **Legal**

- 2.1 The proposed projects are agreed in line with the individual S106 legal agreements.

### **Human Resources**

- 3.1 None

### **Information Technology**

- 4.1 None

### **Equalities Impact**

- 5.1 No impact.

### **Corporate objectives and priorities for change**

- 6.1 Not applicable.

### **Other (for example, Health and Safety, Environmental Sustainability, Property and Asset Management, Risk Management and Safeguarding)**

- 7.1 Subject to funding approval the design and project delivery will either be procured via Concertus Derbyshire Ltd or via the schools.

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## Appendix 2

<b>School</b>	<b>Development</b>	<b>Funds £</b>	<b>Project</b>
Belper School and Sixth Form Centre	Derwentside, Belper AVA/2017/0374	70,248.12	On 20.07.2017 Cabinet approved S106 funds of £534,444.45 for an expansion project. On 27.04.22 SCA allocation of £139,233 towards the project. The allocation S106 funds of £70,248.12 is to repay SCA 2020-21
Crich Junior School	The Track, Roes Lane, Crich AVA/2016/0464 (78,196.47) Land off Roes Lane, Crich AVA/2014/0281 £168,159.67	245,560.62	To allocate receipts to a scheme to provide a detached outdoor learning/group space and remodelling.
Eureka Primary School	Broomy Farm (phase 4) Hartshorne DMPA/2020/1004	384,617.88	On 27/7/23, Cabinet Approved £1,122,771 for a 3 classroom block project. This scheme is now progressing and identified receipts of £384,617.88 are required to refund basic need allocation 2023-24
Harpur Hill Primary School	Burlow Road, Buxton (Heathfields Nook) HPK/2014/0403 £659,808.60 Trenchard Drive, Buxton HPK/2018/0315 £178,209.16	838,017.76	On 8/12/22, Cabinet Approved £1,425,000 for 2 additional classrooms and remodelling project. This scheme is now progressing and identified receipts of £838,017.76 to be allocated to this project.
Hunloke Park Primary School	Mill Lane, Wingerworth 17/00227/OL	312,504.59	On 09.09.2021 Cabinet approved allocation of £56,995.05 S106 contributions and £968,065 SCA to a scheme to provide a 3

			classroom block. In addition, on 23.08.22 and 08.12.22 further allocations of £125,000 and £311,631 respectively were approved. The receipts of £312,504.59 to be repaid to SCA 2021-22
Tupton Hall School	Mill Lane, Wingerworth 12/00072/OL - £274,073 Clay Lane, Clay Cross 20/00221/FL - £64,927 (actual funds received were £120,622.11 – only allocating £64,927 from this total amount)	339,000	The school have designed and costed a scheme to extend the dining hall and install a canopy. S106 funds to be allocated to this project for works to progress.
<b>Total S106 to allocate to projects</b>		<b>1,422,578.38</b>	
<b>Total S106 to reimburse Basic Need and SCA</b>	2020-21 SCA 2021-22 SCA 2023-24 BN	70,248.12 312,504.59 <u>384,617.88</u> <b><u>767,370.59</u></b>	
<b>Total S106 Received</b>		<b>2,189,948.97</b>	



**FOR PUBLICATION**

**DERBYSHIRE COUNTY COUNCIL**

**CABINET**

**Thursday, 29 April 2024**

**Report of the Executive Director - Place**

**Bus Service Improvement Plan Refresh**

(Cabinet Member for Highways, Assets and Transport)

**1. Divisions Affected**

1.1 County-wide.

**2. Key Decision**

2.1 This is a key decision because it is likely to result in the Council incurring expenditure which is, or savings which are significant having regard to the budget for the service or function concerned (this is currently defined as £500,000) and it is likely to be significant in terms of its effect on communities living or working in an area comprising two or more electoral areas in the County.

**3. Purpose**

3.1 To update Cabinet on the new Bus Service Improvement Plan, the guidance published by the Department for Transport and the work undertaken so far to meet the objectives set down in it.

3.2 To seek Cabinet approval for the various additional measures which are recommended for inclusion in the Council's refreshed Bus Service Improvement Plan for the 2025-26 programme onwards and to grant the Executive Director – Place, in consultation with the Cabinet Member - Highways Assets and Transport, delegated powers to agree the final

wording of the refreshed Bus Service Improvement Plan which must be submitted to the Department for Transport by 12 June 2024.

#### **4. Information and Analysis**

4.1 The Council published its first Bus Service Improvement Plan (BSIP) in October 2021, setting out how the Council aimed to meet the objectives set down in the Government's National Bus Strategy. The development of the BSIP was led by the Enhanced Partnership Board which included the Cabinet Member for Highways, Assets and Transport, the Executive Director Place and representatives from six local bus operators including Stagecoach, Trentbarton and Ashbourne Community Transport. The BSIP contained a variety of proposals to encourage greater use of bus services including measures to:

- Improve bus service reliability and journey times.
- Make bus travel more affordable.
- Improve the quality and quantity of information available to passengers about bus services.
- Enhance the frequency and hours of operation of bus services.
- Improve integration between different bus services and between buses and other forms of transport through the development of transport hubs at important locations across Derbyshire.

4.2 In total, the Council asked for £104.9m in funding over five years from 2022-23 to 2026-27. Following months of detailed discussion, the Department for Transport (DfT) confirmed, in November 2022, that the Council would receive £47m in funding over three years from 2022-23 to 2024-25 to implement a number of the specific proposals set out in the BSIP. This was the second highest amount provided to a non-urban Local Transport Authority (LTA) across England.

4.3 In the last 15 months, the BSIP Project Team, working with the Enhanced Partnership Board, has implemented a series of measures across Derbyshire. These have included:

- Enhancements to 21 different commercial bus routes across the County which has resulted in variety of improvements including increased frequencies, services running earlier and later in the day and the extension of routes to new destinations.
- A £1.50 flat fare on any service across Derbyshire for young people aged 11-19 with a b\_line card (Derbyshire's Young person card).

- 70 additional electronic Real Time Information (RTI) displays installed at bus stops across the County including those in Clowne, Darley Dale, Hilton and Matlock Bath.
- The introduction of a Demand Responsive Transport (DRT) service in the north-east of the County with an App based booking system.
- The development of transport hubs at key interchange sites including Bamford, Hayfield and Heanor.
- The introduction of bus priority measures at a number of traffic signal junctions including Alfreton, Ashbourne and Chesterfield to improve journey time and reliability.
- A variety of marketing and communication activities to support the programme and improve the quality of information provided to existing and potential new passengers.
- Agreement to limit the number of occasions during the year when services can be changed to five set dates.
- Introduction of a Bus Passenger Charter setting out what customers can expect from their bus services.

4.4 The impact of these works has been positive with passenger numbers increasing on the enhanced services and high levels of customer satisfaction being reported in the national Transport Focus passenger surveys.

4.5 On 16 January 2024, the DfT issued new guidance to LTAs across England on BSIPs. This guidance advised LTAs that they would need to publish a refreshed and updated version of their BSIP by 12 June 2024. The guidance also makes it clear that publication of the updated BSIP by this date is a condition of any existing or future DfT BSIP funding being made available to the Council in the 2024-25 financial year. A copy of the new guidance is available in the background papers.

4.6 The key themes set out in the guidance for the 2024 BSIP are:

- **Updating the baseline to 2023-24:** This will involve updating the 2021 BSIP's account of the situation in the area to reflect all the developments which have taken place since 2021, including the evolution of the local bus market post-pandemic and its issues and opportunities. This will include highlighting achievements made since 2021 in delivering improvements to bus services.
- **Setting out the improvement programme for 2024-25:** This will reflect the known funding available from various BSIP phases and all the other funding sources used to pay for delivery, including the LTAs own resources.

- **Getting ready for 2025 and beyond:** Refreshing the plan’s proposals and content to set out a high quality and flexible pipeline of prioritised schemes for the four years from 2025-26 to 2028-29, which are attractive to funders, and ready for delivery as opportunities for funding arise.

4.7 The guidance states that the new BSIPs should be comprehensive and authoritative, whilst also being concise and accessible to the public. Details of the format required by the DfT are summarised in Table 1 below:

**Table 1 BSIP Template**

<b>Section</b>	<b>2021 BSIP template</b>	<b>2024 BSIP template</b>
1	Overview	Our bus vision
2	Current offer to bus passengers	Current offer to bus passengers
3	Headline targets	Improvement programme to 2024-25
4	Delivery	Ambitions and proposals for 2025-2030
5	Reporting	Targets, performance, monitoring and reporting
6	Overview table	DfT format BSIP Overview Table

- 4.8 The guidance makes clear that the 2024 BSIP will not act as a bidding document for future funding as the amount of DfT money available up until the end of 2024-25 has already been made clear. It should, however, set out what schemes have been delivered by the end of 2023-24 and what is programmed for delivery in 2024-25 within the known funding. It should also set future plans and priorities for 2025-26 and beyond subject to funding being made available by Government.
- 4.9 As Derbyshire will be joining the new East Midlands County Combined Authority (EMCCA) in 2024, alongside Derby City, Nottinghamshire and Nottingham City Councils, the 2024 BSIP will also need to set out the pathway the four councils will follow to enable a single BSIP covering the whole area to be published in early 2025. This will require consultation with the other constituent members of EMCCA to ensure there is joint approach to future BSIP development.



- 4.10 Due to the level of work required to produce the updated document and the limited Council officer availability, along with officer's existing commitments to implement various BSIP schemes, the Cabinet Member for Highways, Assets and Transport approved the use of external consultants, SCP, who were already under contract to the Council for the current BSIP, to undertake most of the work related to the BSIP refresh. (Cabinet Member decision D965 refers).

### **Progress to Date**

- 4.11 Work to develop the updated BSIP has been ongoing since February 2024, led by SCP and the Enhanced Partnership Board, with contributions from the existing BSIP programme team.
- 4.12 From this process, it has become clear that the six overarching objectives set out in the original BSIP remain relevant. These objectives are that bus travel should be:
1. The first choice mode for existing and new customers for most journeys across Derbyshire.
  2. Available for more journeys and which grows to meet customer needs.
  3. Affordable to use.
  4. Environmentally sustainable.
  5. Welcoming and friendly for existing and new passengers.
  6. A connected network that helps reduce social isolation.
- 4.13 The programme of improvements set out for 2024-25 and the funding to pay for it has already been agreed with the DfT. This will include:
- Completion of the transport hubs programme which includes the reconstruction of the Alfreton and Swadlincote bus stations, as well as work in a number of other locations including Buxton, Castleton, Chesterfield, Clay Cross, Matlock, Long Eaton, Ripley and Shirebrook.
  - Completion of the bus priority traffic signal programme which includes sites in Belper, Buxton, Chesterfield, Glossop, Ilkeston, South Normanton and Swadlincote.
  - Additional bus service enhancements including routes in Amber Valley, Derbyshire Dales, High Peak and North East Derbyshire.
  - Introduction of a new website which will include Real Time Information on the arrival of bus services at stops across the County.
  - Further marketing and ticketing promotions

4.14 The proposed 2025-26 to 2028-29 programme builds on the results of the public and stakeholder consultation which has been undertaken as part of the refresh process setting out a vision of what Derbyshire is looking for in any future EMCCA BSIP. It also seeks to bring forward those elements of the original BSIP programme which did not receive funding in the original £47m settlement but which both stakeholders, the Enhanced Partnership Board and the Council consider are important to encourage and improve bus travel in the County. These proposed measures include:

- Further bus service enhancements.
- Significant improvements to roadside shelters and other bus stop infrastructure, including whole route upgrades with new arrangements to maintain, repair and clean bus stop infrastructure.
- Introduction of more environmentally friendly buses, particularly for small and medium sized operators that run Council supported bus services which have not benefited from the national Zero Emission Bus Regional Area (Zebra) scheme.
- A significant increase in the number of roadside Real Time Information signs at bus stops across Derbyshire.
- Introduction of more community-based services, potentially including Demand Responsive Transport services.
- Expansion of the b\_line scheme to extend the age range to include young people from 19 to 22.
- The introduction of new ticketing arrangements to make bus travel more affordable and connected across the whole EMCCA area.

4.15 Due to the tight time scales set by the DfT with the submission of the updated BSIP required by 12 June 2024, work to complete the final version of the document will continue until close to the submission date. Ongoing discussions regarding the content will also continue with the Enhanced Partnership Board. Therefore, it is proposed that the final decision on the wording in the BSIP submitted to the DfT is taken by the Executive Director – Place, in consultation with the Cabinet Member - Highways Assets and Transport.

## **5 Consultation**

5.1 As part of this process, a public and stakeholder consultation exercise was undertaken over four weeks between 19 February 2024 and 18 March 2024 with a questionnaire link on the Council's website. This sought to understand what use people make of bus services now, and what improvements they would like to see introduced in the future. Further consultation has also been undertaken with the BSIP Wider Reference Group which consists of a variety of different stakeholders

including bus passenger groups, the NHS, the Jobcentre, further and higher education institutions, business groups, borough and districts councils, bus companies and the Peak District National Park Authority.

## **6 Alternative Options Considered**

- 6.1 **Option 1:** Do nothing and not produce a refresh of the BSIP by 12 June 2024. The DfT has made it clear that the production of the 2024 BSIP refresh is a condition of any future funding being made available in 2024-25. The programme of BSIP schemes to be implemented in 2024-25 is dependent on this funding being available. This option is therefore not recommended.
- 6.2 **Option 2:** Produce the refreshed BSIP by 12 June 2024 but not include a programme for 2025-26 onwards as public transport is anticipated to become the responsibility of EMCCA by that date. Setting out a future year's programme of the schemes, which the Council would look to EMCCA to introduce from 2025-26, will ensure these proposals are taken into consideration during the development of the combined authorities own BSIP which will need to be produced early in 2025. This option is therefore not recommended.
- 6.3 **Option 3:** Produce the refreshed BSIP by 12 June 2024 including a proposed programme for 2025-26 when responsibility for public transport is anticipated to have transferred to EMCCA. This will ensure Derbyshire's priorities are articulated and detailed prior to the development of the new EMCCA collective BSIP. This option is recommended.

## **7 Implications**

- 7.1 Appendix 1 sets out the relevant implications considered in the preparation of the report.

## **8 Background Papers**

- 8.1 DfT – National Bus Strategy 2024 Bus Service Improvement Plan guidance.  
[bus-service-improvement-plans-guidance-to-local-authorities-and-bus-operators-2024.pdf](https://publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/125442/bus-service-improvement-plans-guidance-to-local-authorities-and-bus-operators-2024.pdf) ([publishing.service.gov.uk](https://publishing.service.gov.uk))

## **9 Appendices**

- 9.1 Appendix 1 – Implications.

## **10 Recommendations**

That Cabinet:

- a) Notes the update on the new Bus Service Improvement Plan, the guidance published by the Department for Transport and the work undertaken so far to meet the objectives set down in it.
- b) Approve the various additional measures which are recommended for inclusion in the Council's refreshed BSIP for the 2025-26 programme onwards and grants the Executive Director - Place in consultation with the Cabinet Member - Highways Assets and Transport delegated powers to agree the final wording of the refreshed BSIP which must be submitted to the Department for Transport by 12 June 2024.

## **11 Reason for Recommendations**

- 11.1 Approval of the additional BSIP measures and granting delegated powers allows the Council to submit the refreshed BSIP to the deadline required by the DfT and ensures the release of BSIP Year 3 funding to ensure successful delivery of the BSIP programme.

## **12 Is it necessary to waive the call in period?**

- 12.1 No.

Report Author: Kay McIntyre

Contact details: Kay.Mcintyre@derbyshire.gov.uk

**Implications**

**Financial**

- 1.1 The production and publication of the refreshed BSIP is required to release the Year 3 funding from Phase 1 of the BSIP programme and also additional Network North money (Phase 3) which is the subject of a separate Cabinet report.
- 1.2 The funding will be received in the second quarter of Year 3 of the programme although must be spent in the 2024-25 year (2025-26 extension for contracted bus services).

**Legal**

- 2.1 The refreshed BSIP sign off will include the approval of the Enhanced Partnership Board.
- 2.2 Section 63(1) of the Transport Act 1985 places a duty on the Council to secure the provision of 'such passenger transport services as the Council considers appropriate to meet any public transport requirement within Derbyshire which would not, in its view, be met, apart from any action taken by them for that purpose'.

**Human Resources**

- 3.1 None.

**Information Technology**

- 4.1 The BSIP proposals will include provision for a significant expansion in the number of bus stops with Real Time Information displays. These would be progressed through existing contractual agreements. Other innovative technologies will be explored to support the efficiency of bus services including easier ticketing arrangements and increased journey information through use of the County's Traffic Management Systems.

**Equalities Impact**

- 5.1 Bus services are particularly important to a range of disadvantaged groups, such as young people, older people, women, and those from economically deprived communities, all of which make a higher proportion of their journeys by bus than the population as a whole.

- 5.2 The measures associated with the BSIP will protect and, where funding allows, enhance the quality of bus services available and will contribute towards the wider levelling up agenda across all communities and ambitions for driving 'good growth'.

### **Corporate objectives and priorities for change**

- 6.1 This proposal will help deliver the following Council Plan priorities: Resilient, Healthy and Safe Communities; High Performing, Value for Money and Resident-Focused Services; A Prosperous and Green Derbyshire. Specifically, creation of an Enhanced Partnership will also enable the delivery of Place Directorate priorities around sustainable transport and travel.
- 6.2 The main aim of the BSIP and Enhanced Partnership is to generate additional use of bus services and in turn encourage modal shift away from the private car. If this happens it will have a positive impact on the Council's wider environmental sustainability objectives and support the targets set in the Climate Change Strategy: Achieving Net Zero.

### **Other (for example, Health and Safety, Environmental Sustainability, Property and Asset Management, Risk Management and Safeguarding)**

- 7.1 None.



**FOR PUBLICATION**

**DERBYSHIRE COUNTY COUNCIL**

**CABINET**

**Thursday, 29 April 2024**

**Report of the Executive Director - Place**

**Bus Service Improvement Plan - Acceptance of BSIP Phase 3 Funding**  
(Cabinet Member for Highways, Assets and Transport)

**1. Divisions Affected**

1.1 County-wide.

**2. Key Decision**

2.1 This is a key decision because it is likely to result in the Council incurring expenditure which is, or savings which are significant having regard to the budget for the service or function concerned (this is currently defined as £500,000) and it is likely to be significant in terms of its effect on communities living or working in an area comprising two or more electoral areas in the County.

**3. Purpose**

3.1 To seek Cabinet approval to delegate the decision, in accordance with the Council's Standing Orders, to the Executive Director – Place, in consultation with the Cabinet Member – Highways Assets and Transport and, to accept Phase 3 Bus Services Improvement Plan (BSIP) funding to deliver long-term bus service improvements via the Department for Transport's Network North funding, at an indicative value of £4.519m in 2024-25.

## **4. Information and Analysis**

- 4.1 On 10 March 2022, Cabinet delegated authority to the Cabinet Member – Highways Assets and Transport and the Executive Director - Place, to accept the Bus Service Improvement Plan funding from the Department for Transport (DfT) (Minute No.64/22 refers). On 4 April 2022, the DfT informed the Council of an indicative award of £47.003m BSIP funding, comprising both revenue and capital funding, subject to receipt of further details. The Memorandum of Understanding (MoU) was received from the DfT and signed on 10 November 2022 under these delegated powers. Subsequently, the BSIP Year 1 funding was released to the Council in November 2022.
- 4.2 On 23 October 2023, the Government announced the indicative allocation of a further £150m of 2024-25 funding for Local Transport Authorities (LTAs) to deliver long-term bus service improvements. This was the first instalment of a total of £1 billion, released as part of Network North - the third phase BSIP funding and is redirected funding which has been allocated to regions which were due to benefit from the cancelled HS2 investment.
- 4.3 On 7 December 2023, the Council received notification from the DfT's Deputy Director for Local Transport, of its Phase 3 indicative allocation of up to £4.519m of revenue funding to further support delivery of Derbyshire BSIP in 2024-25. This funding is in addition to the existing Phase 1 BSIP funding allocation of £47.003m (Phase 2 was BSIP + funding which the Council did not receive).
- 4.4 The DfT letter stated that the existing MoU in place for BSIP Phase 1 funding will apply to this additional Phase 3 funding. This letter amended the total funding allocated within the original MOU.
- 4.5 Following the notification of the Phase 3 indicative allocation, the Enhanced Partnership (EP) Board on 20 February 2024, agreed that approval should be sought from the DfT to use the additional funding for further bus service enhancements and in addition, to request to change a proportion of funding (£0.345m) from revenue to capital funding to provide for additional installation of Real Time Information (RTI) infrastructure in the County. RTI remains the single most requested bus service improvement after bus service enhancements from Derbyshire's travelling public. Therefore, a request was formally submitted on this basis to the DfT for approval, as required, by 29 February 2024 deadline. A formal decision is currently awaited.



- 4.6 To avoid additional BSIP Programme delay caused by the anticipated late release of Phase 1 year 3 and Phase 3 funding (not anticipated before July 2024), approval is now sought for delegated approval to be granted to the Executive Director – Place, in consultation with the Cabinet Member - Highways, Assets and Transport to accept the Phase 3 BSIP funding settlement on behalf of the Council.
- 4.7 Subject to approval and following receipt of Phase 3 funding, it will be necessary to make variations to the Enhanced Partnership Plan (EPP) and Enhanced Partnership Scheme (EPS) to confirm the measures to be delivered. These will be considered and approved by the EP Board in line with the Board’s Terms of Reference.
- 4.8 The EP for Derbyshire has been prepared in accordance with Section 138 of the Transport Act 2000, and guidance by the DfT and is jointly run by a board that represents the Local Transport Authority, local bus operators, and other stakeholders, and is led by an independent chairperson. The Executive Director – Place, in consultation with the Cabinet Member – Highways, Assets and Transport, both sit on the EP Board with the delegated powers, Cabinet 10 March 2022, (Minute No. 64/22 refers) to allow them to make changes for and on behalf of the Council.
- 4.9 Alongside this funding, the Council has been informed of the DfT requirement to “refresh” its original BSIP document. This “refresh” process and approval is the subject of a separate Cabinet report to this meeting. Acceptance of the refreshed BSIP by DfT is mandatory and will lead to the release of Phase 1, year 3 original BSIP funding and the indicative Phase 3 BSIP additional funding, however, funding will not be released until after 12 June 2024 (the deadline date of submission of the refreshed BSIP).

## **5. Consultation**

- 5.1 Wider stakeholder consultation was undertaken on the drafting of the original BSIP and associated EPP. A further stakeholder engagement survey was undertaken in February and March 2024. The EP Board will consider when variations proposed to the EPP warrant further consultation either with the Wider Stakeholder Group or more widely.

## **6. Alternative Options Considered**

- 6.1 The alternative to granting delegated powers is to retain decision making with Cabinet. However, this does not meet the timescales set

out in the EPS and it is likely to slow down the work of the Partnership and delivery of the BSIP.

- 6.2 Not delegating approval to accept the final funding allocation from the DfT will jeopardise the grant award and delay the commencement of additional services and benefits for the public. This would have a detrimental impact on the overall programme, which is already challenging as delivery must be concluded by 31 March 2025 with the exception of bus service enhancements which may be contracted until March 2026 to allow for the greatest chance of commerciality to be reached.

## **7. Implications**

- 7.1 Appendix 1 sets out the relevant implications considered in the preparation of the report.

## **8. Background Papers**

- 8.1 Cabinet Report: Approval to Make the Enhanced Partnership for Bus Services in Derbyshire and to Accept Bus Service Improvement Plan Funding: 10 March 2022 (Minute No. 64/22 refers).
- 8.2 Cabinet Member Decision – Highways, Assets and Transport report: Approval to Make the Enhanced Partnership for Bus Services in Derbyshire and to Accept Bus Service Improvement Plan Funding (Cabinet Member for Highways, Assets and Transport) 29 March 2022 (Decision Reference. D449 refers).
- 8.3 Cabinet Report: Approval to Delegated Powers to Agree Variations to the Enhanced Partnership for Bus Services in Derbyshire: 28 July 2022 (Minute No. 142/22 refers).
- 8.4 Department for Transport Letter dated 7 December 2023: Network North: Phase 3 BSIP funding allocation for Derbyshire County Council.
- 8.5 The Enhanced Partnership Plan and Scheme can be viewed on the following links:
- Derbyshire EPP [March](#) 2022 (derbysbus.info)
  - Derbyshire EPS [February](#) 2024 (derbysbus.info)
- 8.6 All background reports and papers are held in the BSIP archive if required for information.

## **9. Appendices**

9.1 Appendix 1 – Implications.

## **10. Recommendation**

That Cabinet:

- a) Approves to delegate the decision, in accordance with the Council's Standing Orders, to the Executive Director – Place, in consultation with the Cabinet Member – Highways Assets and Transport, to accept Phase 3 Bus Services Improvement Plan (BSIP) funding to deliver long-term bus service improvements via the Department for Transport's Network North funding, at an indicative value of £4.519m in 2024-25.

## **11. Reason for Recommendation**

11.1 Granting delegated powers allows the Council to accept the additional funding and respond to Enhanced Partnership operational and delivery matters in a timely fashion and in line with the agreed EPS.

## **12. Is it necessary to waive the call in period?**

12.1 No.

Report Author: Kay McIntyre

Contact details: Kay.McIntyre@derbyshire.gov.uk

## **Implications**

### **Financial**

- 1.1 To implement the measures set out in the BSIP, the Council has committed the Phase 1 funding for the three year BSIP Programme at a total allocation of £47.003m. Plans for use of the further indicative Phase 3 BSIP funding of £4.519m have been agreed by the EP Board and submitted to DfT, as requested, for approval.
- 1.2 As the additional funding will be received in the second quarter of year 3 of the programme, although must be spent in the 2024-25 year (2025-26 for contracted bus services), acceptance of the funding is required by approval of delegated powers in accordance with the Council's Standing Orders, to the Executive Director - Place, in consultation with the Cabinet Member - Highways Assets and Transport.

### **Legal**

- 2.1 The Enhanced Partnership Plan and Scheme, were prepared and "Made" in accordance with the legal requirement of The Transport Act 2000. The Derbyshire Enhanced Partnership Plan and Scheme included the option of Bespoke Variation Arrangements, as permitted under Section 138 E of the Transport Act 2000. This allows changes to be made quicker and more efficiently.
- 2.2 The Transport Act 2000 also provides the Council with further powers to postpone all or parts of the Enhanced Partnership (Section 138 I), make variations (Section 138 K) and powers to revoke the Enhanced Partnership (Section 138 O).

### **Human Resources**

- 3.1 None.

### **Information Technology**

- 4.1 The BSIP proposals include provision for a significant expansion in the number of bus stops with Real Time Information displays. These would be progressed through existing contractual agreements.

## **Equalities Impact**

- 5.1 Bus services are particularly important to a range of disadvantaged groups, such as young people, older people, women and those from economically deprived communities, all of which make a higher proportion of their journeys by bus than the population as a whole.
- 5.2 The ability to vary the EP and the measures associated with the BSIP will protect and, where funding allows, enhance the quality of bus services available and will contribute towards the wider levelling up agenda across all communities and ambitions for driving 'good growth'. The recommendations set out in this report will minimise delays in drawing down funding and delivery of improvements to benefit bus users.

## **Corporate objectives and priorities for change**

- 6.1 This proposal will help deliver the following Council Plan priorities: Resilient, Healthy and Safe Communities; High Performing, Value for Money and Resident-Focused Services; A Prosperous and Green Derbyshire. Specifically, creation of an Enhanced Partnership will also enable the delivery of Place Directorate priorities around sustainable transport and travel.
- 6.2 The main aim of the BSIP and EP is to generate additional use of bus services and in turn encourage modal shift away from the private car. If this happens it will have a positive impact on the Council's wider environmental sustainability objectives and support the targets set in the Climate Change Strategy: Achieving Net Zero.

## **Other (for example, Health and Safety, Environmental Sustainability, Property and Asset Management, Risk Management and Safeguarding)**

- 7.1 None.

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