



Cabinet
14 October 2019

**Report from the Strategic Director
Children and Young People**

Development of Family Hubs

Wards Affected:	All
Key or Non-Key Decision:	Key Decision
Open	Open
No. of Appendices:	Appendix 1: Overview of Brent Children's Centres Appendix 2: Suggestions of possible Family Hub sites Appendix 3: Profiles of Children's Centres Appendix 4: Family Hub model options Appendix 5: Consultation Report Appendix 6: Updated Equality Analysis
Background Papers:	Budget and Council Tax 2019/20 and 2020/21 - Cabinet Report (11/02/19)
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1.0 Purpose of the Report

- 1.1 To provide information regarding ongoing work to develop the existing 17 Children's Centres into eight integrated Family Hubs for Brent families with children aged 0-18 years, and to 25 years for those with children with disabilities. The new Family Hubs will build on existing children's centre services and the local authority statutory responsibilities regarding the provision of children's centres. Services for young children and their families will continue to be met.

- 1.2 This Cabinet paper details the potential delivery opportunities and sets out the recommended option. The report requests authority to tender for specific services and to delegate authority for the Strategic Directors of Children and Young People and of Community Wellbeing to award contracts for services relevant to their directorates in consultation with the Cabinet Members for Children’s Safeguarding, Early Help and Social Care and for Public Health, Culture and Leisure.
- 1.3 The report includes profiles of all current Children’s Centres. These profiles inform the selection process below. It also outlines outcomes from the statutory public consultation and feedback from some of the Family Hub engagement activities.
- 1.4 Table A below provides an overview of key work and estimated dates in the process to develop a new family hub model to be effective from September 2020.

Table A	
Work	Date
Cabinet decision	14/10/19
Supplier engagement event	End of Oct 19
Out to tender for specific services	Nov 19 – Feb 20
Tenders evaluated	Feb 20
Award of contract	Mar 20
Implementation	Apr – Sep 20
Family Hubs service goes live	Sep 20

- 1.5 The strategic oversight of consultation has been provided through the Brent Children’s Trust. Various commissioning and management arrangements for the Family Hubs have been explored and discussed at Task and Finish Groups. An options paper has been developed including exploration of Hubs being managed in-house as well as being commissioned. An overview of this can be found in paragraph 6.20 and 6.21 below and in Appendix 4.

2.0 Recommendation(s)

That Cabinet:

- 2.1 Agree to the development into Family Hubs of those sites listed in Table 1 below for the reasons detailed in this report and particular in paragraph 6.10 below.

Table 1

Current Children’s Centre sites proposed to become Family Hubs:

Fawood and Curzon (managed as one Hub)	Preston Park (adjacent to Preston Park primary school)
Alperton (adjacent to Alperton School)	St Raphael’s (centrally located on the Stonebridge estate)
Church Lane (adjacent to Fryent Primary school)	Three Trees (adjacent to Queens Park Community school)
Granville Plus (part of the Granville site)	Willow (predominantly as a SEND hub situated adjacent to Chalk Hill Primary school)

- 2.2 Agree that the sites detailed in Table 2 below will cease Children’s Centre provision, and seek alternative usage options for the reasons detailed in this report and in particular in paragraph 6.10 below.

Table 2

Current sites proposed to end existing Children’s Centre provision from, seeking alternative usage options:

Mount Stewart (based on Mount Stewart school site, possible future use as a full time school nursery)	Welcome Centre and Barham Park Annex (possible future use for Barham Park site as a community resource by a voluntary sector provider)
Treetops(based in King Edward Park possible future use by the onsite private nursery provider full time)	Wykeham (adjacent to Wykeham primary school, possible future use by the school as 2 year olds’ provision or for alternative educational use).
Wembley Primary (Integrated with Wembley primary school, possible future use by the school as additional office and nursery provision)	Harmony (adjacent to Mitchell Brook primary school, possible future use as continuation of school nursery or for alternative educational use).

- 2.3 Approve an approach to manage Family Hubs as set out in this report and in particular in paragraph 6.21 below, with health services being commissioned and the majority of other services being brought in-house.
- 2.4 Delegate authority to the Strategic Director, Community Wellbeing in consultation with the Lead Member for Public Health, Culture and Leisure to tender and award a contract(s) to deliver health services from Family Hubs as detailed in appendix 4.
- 2.5 To approve requests to delegate authority to the Strategic Director, Children and Young People to Tender and Award some specific services to be delivered from Family Hubs as detailed in appendix 4.

3.0 Detail

Background

- 3.1 The All Party Parliamentary Group on Children’s Centres (APPG) led a 2016 inquiry into the future of Children’s Centres. The APPG report focused on the role that Children’s Centres could play as hubs for local services and wider family support. By building on the existing infrastructure of Children’s Centres and extending their offer to include support for parents and all children regardless of age (as well as retaining specific provision for very young children and their (prospective) parents), the APPG concluded that Family Hubs could deliver holistic, early intervention services to families within the wider community. This approach has already been established by many local authorities (e.g. Barnet, Westminster, Bradford, Coventry, Derby, Dudley, Doncaster, Essex, Kirklees, North East Lincolnshire, North Yorkshire, Medway,

Oxfordshire, Portsmouth, Shropshire, Wakefield and Wokingham) and other local authorities have similar models at different stages of development.

- 3.2 Locally, following a wide range of community research and engagement with local residents and stakeholders throughout 2017-2018, Outcome Based Reviews (OBRs) recommended more hub-based service delivery that enables holistic support in addressing the needs of the whole family.
- 3.3 These OBR recommendations fed into aligned budget proposals CWB002 (*Recommission public health 0-19 service with children's centres contract to realise efficiencies*) and CYP008 (*Develop family hubs from children's centres*). Following public consultation these proposals were agreed by Full Council in February 2019.
- 3.4 A Family Hubs task and finish group was established to jointly design a family hub model for Brent to be effective from September 2020, in-line with end dates / extensions for the contracts included in the budget proposals at paragraph 3.3. Membership of the task and finish group included key CYP and CWB officers and senior representatives from Barnardo's, the Fawood Curzon Partnership and Central London Community Healthcare NHS Trust.

4 Design Work

- 4.1 Key pieces of work completed by the Family Hubs task and finish group include developing and agreeing Design Principles to underpin development of the model, which have been approved by the Working with Families Strategic board, reporting to the Children's Trust, chaired by the Strategic Director, CYP.

Family Hub Design Principles:

- **Accessible and Safe:** An easily accessible service in an inclusive, safe and welcoming environment
- **Integrated:** A professional service that is committed to working as a partnership, with truly integrated pathways
- **Whole Family Approach:** A whole family approach is embedded across the service
- **Universal and Targeted Services:** A service that includes a universal offer and targeted provision for those most in need
- **Community Focused:** A service which is shaped by the community voice and builds on and connects with local community assets (including organisations and groups)
- **Early Intervention:** A flexible and collaborative service which responds early to the needs of Brent families

- **Outcome Focused:** A quality service which achieves improved and measurable outcomes for families

4.2 Engagement of key stakeholders based around these design principles was completed between March and May 2019. This work included:

- Group and one to one discussions with approx. 190 current children's centre users across various sites throughout April and May;
- A workshop, held at the Freeman Family Centre on 2 May, targeted at non-children's centre users / parents who would be able to access support in a family hub model;
- A professionals' workshop, held at the Civic Centre on 24 April, attended by 30 core staff and partners, including representatives from CYP, Public Health, Barnardo's, Fawood and Curzon, NHS including Central London Community Healthcare and CCG and Citizens Advice Brent;
- Sessions and meetings from March to July with representatives of community groups and voluntary sector partners, including Young Brent Foundation and CVS Brent;
- A group session with approx. 50 head teachers at the 8 May termly meeting of head teachers and senior council officers.

4.3 In general, stakeholders responded positively to the opportunities presented by the new model. Cross-cutting themes included support for an enhanced offer of services for families with school-aged children, including services offered outside of school hours (including weekends). Additionally, many stakeholders identified the potential for Family Hubs to support closer working between the Local Authority and partner organisations, enabling clients to connect with a wider range of support, services and activities. Stakeholders also put forward a number of new services and activities that they, their families and / or their clients might access if they were available through the model. A selection of these services is included at 6.5 of this report.

4.4 Many children's centre users expressed concerns about potential loss of services at their local centres and also questioned how the use of the space by different age-ranges in future would be managed. Other challenges to emerge included different perceptions about what services and activities are appropriate for delivery at a Family Hub location (including suggestions for youth centre-type activities) and which could be / are already delivered elsewhere and should be linked to via the hubs.

4.5 As a whole, clarity of offer was identified as a challenge across a number of stakeholder groups. This included the need for clearer distinction between Family Hubs and youth centres, as well as between Family Hubs and the existing Brent Community Hubs model (which has been developed from the Harlesden Community Hub pilot). Renaming Family Hubs as something closer to the established Children's Centre brand (i.e. 'Children and Family Centres' or 'Family Centres') was suggested to mitigate this.

4.6 Insights from professionals who currently deliver services in children's centres focused on how integrated services could work in practice, identifying the following key features for ensuring successful integration: shared vision, skills and values, clear pathways, joint governance and clarity of offer.

4.7 Scrutiny Recommendations:

The design work outlined above, including engagement, responded in part to recommendations from the November 2018 Community and Wellbeing Scrutiny committee (which considered a report providing early indications of what Family Hubs in Brent could include, as well as examples of other models in the UK) and the January 2019 Budget Scrutiny Panel.

Community and Wellbeing Scrutiny committee:

1. Greater consideration be given in relation to the way the integrated workforce would be managed in the future / under the proposed family hub model.
2. Greater consideration be given in relation to how the hub model would function taking into account the buildings available.
3. Front line staff and parents be engaged in the consultation process on the family hub model.

Budget Scrutiny Panel:

1. Hubs should have a strong triage service, so anyone dropping into the centre is quickly assessed.
2. Council should pay close attention to public transport routes and geographical areas when choosing potential sites

5 Prototyping

5.1 The outputs from all engagement activity informed prototyping work in July. This included a storyboarding workshop with professionals to understand the requirements of effective triage in a Family Hub setting and a full 'experience prototype' which ran in Curzon Crescent from 8 – 19 July offering a wider range of services outside of traditional Children's Centre opening times (i.e. from 3:30 – 6:00pm) with sessions targeted at families and children of all ages. The prototype included 11 different service offers over 20 different sessions and included council services, commissioned services and services provided by partner organisations. All sessions were advertised as drop-ins, with no appointments required.

5.2 The prototype tested key elements of the approach including service offer, scheduling, promotion, access arrangements, set-up and use of space, partner briefing and coordination, pathways between services and links with local partners. Evaluation included feedback from over 90 stakeholders, including new service users, service providers and other local people using Curzon Crescent during the prototype.

- 5.3 Feedback from stakeholders was overwhelmingly positive. Recurring themes from service users included endorsement of the wider range of services and being able to access them locally, increased awareness of what other services were available, and requests to be able to book appointments in advance. Service users were split regarding access times for the enhanced service offer, with equal requests for scheduling during traditional opening hours (i.e. 9:00am – 3:30pm) as well as the twilight sessions offered during the prototype (3:30 – 6:00pm). A small number of service users and local people found it challenging to understand what some of the new services were offering and whether they would benefit from them.
- 5.4 A key theme across a number of case studies, completed as part of the prototyping, was positive outcomes where service users had been able to access a Family Hub service early in their cycle of need. This included parents receiving information and support from Family Support Workers and School Nurses in relation to their school-age children and leaving the prototype with increased confidence about how to resolve their issues.
- 5.5 Space and activities were the two main themes to emerge from feedback from young people accessing the prototype. They indicated that they would not be put off using a space originally designed for younger children, but that it should be flexible and able to become more 'formal and sophisticated' for their sessions, including posters and general information targeted at them. Suggestions included exploring arrangements for young people to volunteer through the Duke of Edinburgh scheme to help design and make the space more suitable. In terms of activities, 1-to-1 support services were welcomed but only as part of a wider programme of non-stigmatised services/activities to help ensure that young people were not viewed as only accessing family hubs when they had a personal problem or issue.
- 5.6 Recurring themes from service providers included positive feedback of the networking opportunities provided by the model, which facilitated increased awareness of other services and opportunities to connect clients with relevant partner services. A number of partners, including VCS organisations, advised that the spaces allocated to them for the prototype were more suitable than their current arrangements and were an incentive for their involvement with the Family Hub model in future. Service design suggestions from partners included introducing digital solutions for: booking and managing appointments, helping to raise awareness of other local groups and organisations, Front of House (FOH) self-service terminals and supporting access to translation services (in addition to via phone).
- 5.7 Evaluation of all prototyping activity and additional feedback from the Family Hubs task and finish group informed development of the following design recommendations:
- Appointments should be available for Family Hub services in addition to the drop-in offer;
 - A digital appointment booking and management system should be available for Family Hub clients and service providers;
 - Develop frameworks and tools to support integration of services. This should include:
 - Location-specific induction and information-packs that support a localities approach;

- Operational governance arrangements that enable front-line collaboration; and
- Digital solutions that enable early intervention and holistic support across services;
- Develop additional tools and training to support effective triage at front-of-house, including quick access to expert duty officers (e.g. family support workers);
- Continuous engagement of local partners, including VCS organisations, and coordinating, aligning and promoting local services should be a key role of the hubs;
- Clear breaks should be established between use of hubs by different cohorts (e.g. parents of 0-5s and young people), allowing time for reconfiguration of flexible spaces;
- Scheduling of services should be themed to help clients understand and access the services most relevant to them; and
- The service offer at each hub should be publicised through multiple channels well in advance of the new model launching in September 2020. This should include through key local partners and organisations such as schools, GPs and faith groups.

5.8 It is proposed that these recommendations feed into detailed design / service specifications, depending on which delivery model (i.e. single contract, in-house or hybrid) is selected.

6.0 Further considerations

6.1 Brent Children's Trust *Early Help Framework 2018-2020* sets clear objectives to create a substantially greater whole-family approach across services, including Children's Centres. These objectives also form part of commitments made to the Ministry of Housing Communities and Local Government (MHCLG) as part of the Troubled Families (TF) programme.

6.2 The approach being taken is to remodel and re-scope some of the current Children's Centres into eight Family Hubs. Early closure of Hope and Challenge House Children's Centres has already taken place for reasons not connected to this proposal. Appropriate consultation in respect of these 2 Children's Centres has taken place. (Further details at Appendix 1). Consultation in respect of all children's centres took place during July and early August 2019 (Appendix 5).

6.3 The intention is to develop Family Hubs as part of an integrated service with the Public Health 0-19 years' service. The 0-19 service is a universal service with the delivery of the Healthy Child Programme at its heart. Following the transfer of responsibility for commissioning of children's public health services to the local authority under the Health and Social Care Act 2012, the service has been re-designed and re-commissioned. It is currently provided by Central London Community Healthcare NHS Trust in Brent. In addition to the Healthy Child Programme, the service also includes the Maternal Early Childhood Sustained Home visiting (MESCH) model for pregnant women and vulnerable families with children up to the age of 2, breast feeding support, school entry vision and hearing screening, national child measurement programme (NCMP) and weight management services.

- 6.4 From children's centres, some universal early years services will be maintained with increased targeted provision to the most vulnerable children, young people and families. Brent early intervention services will be reviewed and Family Hubs will become a central focus for some of these services. Family Hubs will provide both universal and targeted provision and will meet the particular needs of Brent's children, young people and families. These include very high levels of childhood obesity and dental decay, low immunisation rates, underachievement of some groups of children and young people (e.g. boys of Black Caribbean heritage) all of which are priority areas for action in Brent contained in the 2019 Borough Plan.
- 6.5 Designing a Family Hub model for Brent presents many new opportunities. These include identifying families with multiple needs as early as possible, no matter what service they first come into contact with. The aim is to make sure that any contact with a practitioner will lead to the right intervention at the right time, with greater accountability across all agencies for identifying need earlier. This offers the best route to families understanding and making changes that improve their coping skills and life chances. The Family Hub model provides opportunities to bring together or link more closely with services including (but not limited to) those in the following list. Some will be provided by key commissioned partners or by the Council and some will be arranged and coordinated by the commissioned service if this is the model selected.

0-5 years		
Midwifery services Antenatal classes / clinics Postnatal clinics Dads antenatal Bumps and babies Smoking Cessation	Health visiting services Well baby weighing clinic Breastfeeding support Development reviews Preparation for birth and parenthood Introducing solids	Parenting support Parenting programmes: Triple P, Strengthening Families Strengthening Communities, Solihull approach (using social learning theory)
Family support 1-2-1 Family support Family support drop ins DVIP Support	Transitions Primary School application surgery Transition to Primary School	Family Health Oral health SALT services Perinatal clinic
Early Education NEG Eligibility surgery CFIS Surgery Target sessions for low attainment groups (Boys of Black Caribbean Heritage)		
5-11 years		
Family Support 1-2-1 Family support	Transitions	Out of school services Homework club

Family support drop ins DVIP Support	Secondary School applications surgery Transition to Secondary School	Family nights Family cooking Holiday activities Trips
12-18 years		
YOS Services Parenting programmes Youth outreach programme (addressing issues such as gangs, knife crime, county lines) Mentoring programme Holiday programmes	Family Support 1-2-1 Family support Family support drop ins DVIP Support	'Catch up' immunisation clinics
SEND		
Family support 1-2-1 Family support SEND Parent support drop in	Stay & Play Portage Stay & Play SEN Stay & Play	Specialist services BOAT (Brent Outreach Autism Team) BUSS Group (Brent Under Fives Sensory Support)
Parenting Programmes Stepping Stones Cygnet		
General		
Information Advice and Guidance JCP CAB Benefits surgery NEG Eligibility surgery Employment surgery Housing advice Family law clinic Made of Money	Family and Community learning Brent Start adult education English conversation ESOL Functional skills Family learning / Home learning	Parent partnership / Stakeholder engagement Coffee mornings Volunteer programme / parent champions You say we did sessions
Family Health Healthy living programme / Weight management DOR therapy Mental Health Support Oral health Sexual health	Dads programme Dads stay & play Engagement activities Trips	

- 6.6 In addition, specific activities/sessions can be scheduled at individual Family Hubs depending on local need as suggested as part of OBR engagement. For example, it may be that there is a need for housing appointments to be offered at a Family Hub (sourced from Housing Need). Conversely, a need for supporting parents who find parenting teenage children challenging at a Family Hub may have been identified (and so the Youth Offending Service, for example, may be sourced to deliver the Teen, Strengthening Families Parenting Programme). The final decisions on programming for each Hub will be guided by a local steering group taking into account their knowledge of the local need and priorities.
- 6.7 This approach has already been successfully tested through the Brent Community Hubs model which, at the Harlesden Community Hub, has been developing and coordinating a range of Brent and partner organisation services to respond to local needs since early 2017. Building on this success new 'Brent Community Hubs' with tailored offers are being rolled out in each of the four remaining localities (Kilburn Hub opened in March 2019 and Willesden, Wembley and Kingsbury will all be operational by Spring 2020). Additionally, in-line with the new Borough Plan, the Brent Community Hubs model will support development of a localities approach, including providing spaces to bring together partners to share ideas, local knowledge and facilitate joint-working.
- 6.8 Development of the Family Hub model will progress alongside this Brent Community Hubs work and will maintain close links to ensure the two models are closely aligned and any unintended duplication or overlap is addressed. Ongoing partner engagement work to shape the forthcoming Brent Community Hubs in Willesden, Wembley and Kingsbury has included updating partners on the distinct aims of both models, including the different target cohorts, to help identify the most suitable partner services for each model. The views of key stakeholders regarding the naming / branding of the Family Hubs (and potential confusion with Brent Community Hubs) was captured as part of the engagement work led by the Family Hubs task and finish group.
- 6.9 Children's Centres sites for Family Hubs are best placed for whole-family work as the sites are well known, non-stigmatising, generally of good quality (with work to improve the amenity of Granville Plus taking place as part of another project), already offering a range of services delivered by Brent Council and partners and, uniquely across the Council's estate, are designed to ensure that the youngest children's needs can be met (e.g. bathrooms, window heights, access to outdoor space, security etc.), as well as other key communities of interest such as families with disabilities/additional needs. Some adjustments will be needed to maximise spaces and create, with local young people, spaces suitable for all age groups. Storage will be a priority in order to keep equipment safe when not in use in order to free up space for other activities. Mobile reversible boards could be used to change the focus of the rooms to meet the needs of different age groups as these change over the day as shown on the timetable some dedicated facilities and equipment are desirable for work with adolescents and their families.
- 6.10 The proposed Family Hub sites have been chosen after taking many issues into account, such as the levels of deprivation, target groups, usage, size of the centres and the geographical location. It is also a legal requirement to ensure Children's Centres remain accessible across the borough.

Fawood and Curzon Crescent

Fawood and Curzon Crescent are within an area with the highest level of deprivation in Brent as well as high levels of health concerns and childhood obesity in the borough. (Appendix 2, Figure 7). These centres are also well utilised and collectively they have one of the highest under 5s population within the current reach areas. (Appendix 1, Figure 2). These sites will be managed by the Fawood and Curzon Crescent Federation as it is now. Buildings are spacious with large training rooms that can be divided to suit the needs of the service and users as well as dedicated clinic rooms.

Granville Plus

Granville Plus is within an area containing high levels of deprivation, health concerns and childhood obesity (Appendix 2, Figure 7). Granville will serve a community with high numbers of target children who are not actively accessing services and has a low take up of the free nursery education entitlements. The site has several different rooms that are well used by a range of partners, allowing for multipurpose use. There are also smaller consultation rooms and clinic rooms all of which are well used.

St Raphael's

St Raphael's is a large site within an area of high deprivation with health concerns and childhood obesity (Appendix 2, Figure 7). It is a space valued by the community that is well utilised. The site borders onto Tokyngton ward that is projected to have the fastest growth in population of 0-19s over the next few years, therefore making it important that Family Hub services are accessible to the surrounding area.

Alperton

Alperton is located in the south west of the borough on the site of Alperton Community School with areas of deprivation. The centre is fully self-contained and separate from the school which makes it suitable for the purposes of a Family Hub. The centre is well utilised with various partners delivering services from the site. The site is within the ward of Alperton which alongside Tokyngton has projected to have high population growth in the coming years, therefore making it important that Family Hub services are accessible to the surrounding area (Appendix 2, Figure 7).

Preston Park

Preston Park is located in the north-west of the borough and will serve an area with pockets of high deprivation. This site has also been selected to ensure a good geographical spread and accessibility for the whole borough. Of the three children's centres currently located in this part of the borough, Preston Park has been proposed as the best choice due to its geographic location and the size and layout of the centre (Appendix 1, Figure 1). The centre is fully self-contained, separate from Preston Park Primary which will be suitable for the purpose of a Family Hub. The centre is well utilised with various partners delivering services from the site. (Appendix 3)

Church Lane

Church Lane is located in the north east of the borough on the site of Fryent Primary School and has a pockets of high deprivation (Appendix 2, Figure 7). This site has also been selected to ensure a good geographical spread and accessibility for the whole borough. The take up of services from children within target groups is low in this area,

particularly around the free nursery education entitlements. The centre is fully self-contained, separate from the school which will be suitable for the purposes of a Family Hub. The centre is well utilised with various partners delivering services from the site (Appendix 3).

Three Trees

Three Trees is located in the south east of the borough next to Queen's Park Community School. It will serve an area with high levels of deprivation, health concerns and childhood obesity. There is also a high number of under 5s in the local area (Appendix 1, Figure 2). The centre is fully self-contained, separate from the school which will be suitable for the purposes of a Family Hub. The centre is well utilised with various partners delivering services from the site. (Appendix 3)

Willow

Willow is located in the centre of the borough, there are high levels of deprivation in some of the areas surrounding the site. The centre is well used by different partners and is set over 2 floors and is fully accessible. The nursery at Willow is also managed directly by Brent Council and is one of the specialist nurseries which strengthens the position that this site could become a Family Hub with a Special Educational Needs and Disability (SEND) focus (Appendix 3).

Centres not proposed for Family Hubs

Harmony

Situated adjacent to Mitchell Brook Primary school in Stonebridge Ward. Although this site is in an area of high deprivation and is a large building, to meet the request of a spread across the borough, it was considered to be too close to St Raphael's and Curzon/Fawood. There is currently a school nursery running from part of the building. Possible future uses for Harmony will be to consider alternative educational use and the continuation or expansion of the existing school nursery.

Wykeham

This site is part of the existing Wykeham school building in the Welsh Harp ward. Space is not large enough for the purposes of a Family Hub. Increased caretaking costs would accrue for weekend and evening activity due to the building being part of the school. Possible future uses will be to consider the school expanding its existing nursery provision, or for alternative educational use.

Wembley Primary

Wembley Primary Children's Centre was built in an integrated way with the primary school, therefore there is no separation of the school and children's centre. It does not have a separate entrance for the centre which creates significant practical barriers. The site would incur additional costs in caretaking for weekend and evening activities. Possible future use will be determined by the school, with the Council seeking a commitment to providing services that support children and young people.

Welcome

Welcome is a centre based within the Wembley Centre for Health and Care building with an annexe within Barham Park. It is a linked site with Barham Park, is not council owned, space is limited and shared therefore this does not meet the requirements needed for Family Hubs. The area at Barham Park is too small and has no IT facilities and is not viable as a Family Hub.

Treetops

This site, based in King Edward's Park, Willesden, is currently tendered out to a private nursery provider, with limited services currently being offered from this site. It is not heavily used by the community. It is anticipated that the current nursery provider will continue to operate and potentially expand their operations.

Mount Stewart

This site is located on the Mount Stewart Infant school site and the existing space and location is not conducive for the purposes of a Family Hub. This is not in an area of high deprivation and usage as a Children's Centre has generally been lower than other centres. Possible future use could be as a full time school nursery as the school already use this space in the morning for nursery provision.

Hope and Challenge House Children's Centres

Both of these centres were closed prior to Family Hub development.

- 6.11 None of the existing children's centre sites are particularly large. This means that to fit in the wide range of services planned, and identified as needed, outreach facilities will be identified. Current opening times and days of operation will also increase. Home visiting will continue where this best meets families' needs.
- 6.12 The Draft Digital Strategy (2019 – 2023) and business case, which is also scheduled to be considered by Cabinet (14/10/19), includes developing a digital solution to support Family Hubs in-line with the design work recommendations outlined in this report. The scope of the digital work is dependent on which Family Hubs delivery model is selected and approval of the draft Digital Strategy.
- 6.13 Lessons learned from discussions with other local authorities that have already developed and implemented a Family Hub model include:
- (a) Involving officers / staff and partners as early as possible in the design process is key;
 - (b) Experienced officers / staff and links to Early Years providers can be lost during the transformation process if focus is shifted too much to 5yrs+;
 - (c) Developing Family Hubs is an ongoing process - arrangements will continue to evolve after the launch of the service and transition from a Children's Centre to Family Hub;
 - (d) Offering partners training and space can be a useful incentive to help to bring them on board and become part of the model;
 - (e) Integrated leadership teams / arrangements, that include representatives from local VCS organisations (and do not replace organisational line management), can help to improve partnership working;

- (f) Work to transform traditional Children's Centre buildings into Family Hubs that are attractive environments for 5-18/25 year olds should involve young people to help increase their ownership of the space;
- (g) The Family Hub service offer can be flexible and develop in real-time to respond to local needs;
- (h) Family Hubs can respond to local needs by supporting local VCS organisations to deliver against Family Hub outcomes;
- (i) There are opportunities in a hub and spoke model that promotes and connects to nearby provision as part of a locality approach (e.g. a Family Hub should link closely with existing youth provision in the area);
- (j) The focus of the transformation should be on something new starting rather than something ending;
- (k) There are opportunities to position Family Hubs as assets that encompass much more than traditional council services

6.14 It will be important to protect some space and services within Family Hubs to meet the needs of very young children (e.g. for ante/post-natal services, child and family health services, early education and child development; parenting support) as well as to avoid any capital clawback which occurs on a reducing scale as a percentage of capital spent on the buildings unless similar services for young children and their families are offered. This universal early years provision enables the identification of emerging difficulties at the earliest stage. Until children start formal schooling there is no other universal early years information base of families with young children which greatly reduces the risk of 'unknown' young children and unidentified safeguarding concerns.

6.15 In designing integrated services for those families and communities most likely to benefit from early help to avoid problem escalation and long-term reliance on high cost public services, key considerations in best practice research (brought together by the Early Intervention Foundation) include:

- (a) Clarity of purpose i.e. having a shared vision, culture and values that deliver person/family centred services based on shared outcome frameworks;
- (b) Collaborative leadership at all levels, with expert change management skills and the ability to drive cross sectoral working;
- (c) A culture of learning and knowledge management, that seeks to support the sharing of best practice, improvement and service development across organisational and sectoral boundaries;
- (d) A supportive legislative/policy environment that seeks to create the environment within which integrated services can develop;
- (e) Integrated management structures, incorporating the use of joint appointments, with unified leadership and joint governance arrangements and accountability;
- (f) Trust based interpersonal and inter-professional multidisciplinary relationships across sectors, building on the strengths and unique contribution of each partner;
- (g) Appropriate resource environments and financial models seeking to ensure collaborative financial models, including the need for pooled budgets;
- (h) Comparable IT and information sharing systems that facilitate ease of communication;
- (i) Unified performance management systems and assessment frameworks; and
- (j) Collaborative capabilities and capacities, with all practitioners being skilled in integrated working and management.

- 6.16 Best practice principles from key partners, e.g. Health 0-19 and early help services within CYP will be embedded. For example, practice framework principles including a Signs of Safety approach and embedding emerging practice regarding contextual safeguarding and trauma informed approaches will be important Children and Young People department principles to embed.
- 6.17 A key message therefore is to avoid simply co-locating services with their own approaches to systems, processes and procedures in the hope that more informal models of information-sharing and joint work will be sufficient in realising the objectives of the Family Hubs, when they will not be. Rather, best practice points to:
- (a) All key partners *jointly* contributing to governance, management and resourcing that supports day to day operations/ service delivery from each hub.
 - (b) Shared outcomes and a shared operating model across all early help providers, which is underpinned by better data sharing, a single assessment and planning process across all agencies (using the early help assessment) and closer integration between family work and employment support and opportunities.
- 6.18 Governance arrangements to ensure operational and strategic oversight will be developed when the delivery model is determined but will be ultimately accountable to the Brent Children's Trust. Arrangements will need to promote shared ownership by all key partners and support a significantly more cost effective and sustainable model of resourcing. The latter in some models can come from reorganising existing staff and management resources to work differently. Various governance/management arrangements have been explored and discussed at the Task and Finish Group. The first decision is for the consideration of a commissioned out or an in-house option or a hybrid model with joint arrangements.
- 6.19 The public health 0-19 service is a clinical service. It is currently provided by Central London Community Healthcare NHS Trust and delivered, in the main, by registered health professionals. TUPE would apply and any organisation taking on the staff would need to provide terms and conditions, including access to pensions, equivalent to the NHS. This need not preclude the Council commissioning a third sector organisation to provide Family Hubs with an integrated 0-19 service. For example, the Council currently commissions WDP to provide substance misuse services with the clinical elements being subcontracted to CNWL by WDP. However, to bring clinical services in house would require the Council to establish, and fund, the requisite clinical "infrastructure": for example, CQC registration; clinical supervision and revalidation of clinical staff; medicines management arrangements in accordance with the human medicines regulations; and infection prevention arrangements. Should Cabinet members wish to explore this further, the arrangements could be scoped in more detail and costed. However, it should be noted that NHS providers would typically bear the costs of these arrangements over a wider range of services than are the case here (for example CLCH provides public health and community health services over 12 boroughs). It is therefore unlikely that bringing public health services in house would deliver the planned savings.

- 6.20 A detailed options paper to deliver the overall model has been prepared. The attached Family Hub model options (Appendix 4) provides the pros and cons of the respective models. The three outline models being considered are:
- a) Commissioning to a lead provider
 - b) Fully managed in-house service
 - c) Joint arrangements (hybrid model)
- 6.21 Following consideration of all 3 models, officers recommend option C – Joint arrangements via a hybrid model. This is recommended based on being cost effective, better able to ensure integration and the council has democratic control of culture, values and is able to be flexible with its resources.

To ensure that the hybrid model is resourced sufficiently to deliver the Family Hubs as designed, some administrative and early years worker roles would need to be contracted to a voluntary sector partner. This will provide voluntary sector representation on the operational board and partners will have access to additional funding sources.

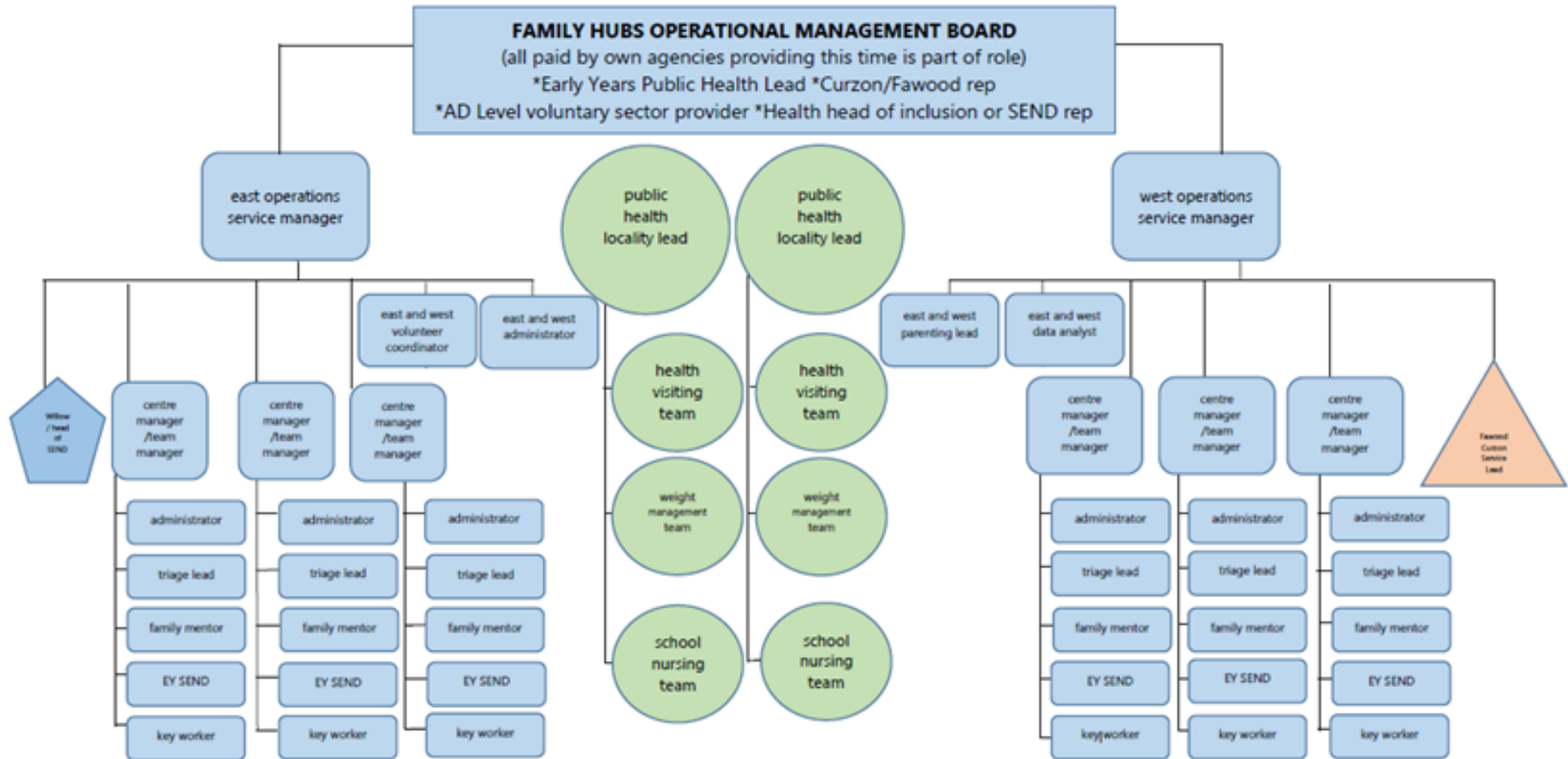
- 6.22 Profiles of current children's centres have been developed and used to support initial exploration of which centres would be most appropriate for becoming Family Hubs (relevant supporting documentation in appendices 1-3.) Statutory consultation for Children's Centre stakeholders has taken place (overview of outcome of the children's centre consultation report attached as Appendix 5). Overall most stakeholders are positive about the development of Family Hubs but concerned regarding the potential impact of stopping delivery of Children's Centre services from some centres.
- 6.23 Hope and Challenge House Centres have already closed for reasons unconnected to Family Hub developments. The sites not selected as Family Hubs will be assessed by the CYP Department regarding their alternative use.

7.0 Management arrangements for Family Hubs

- 7.1 Managements arrangements have been considered for Family Hubs at Task and Finish group meetings. Whilst there would be differences depending on the model chosen, a basic arrangements plan would need to be similar in order to achieve the desired integration and improved outcomes for vulnerable young people and their families. The following draft structure chart is one that could meet these requirements. It should be noted that some staff will be seconded to the service and matrix managed. Some partners will deliver services co-ordinated but not managed by the Hubs. Over time closer alignment of budgets and funding of joint posts will be further explored. The plan is for Hubs to be open for longer hours and at the weekends. Careful planning of services will be needed to deliver within the reduced budget available. Extended opening hours will be introduced over a period of time as take up of services at these times increases.
- 7.2 Potential structure chart (shown on next page)

This is a basic chart that would need to be adapted to meet the selected model.

FAMILY HUBS – DRAFT STAFFING STRUCTURE



8. Financial Implications

- 8.1 There are 2 approved savings actions relating to the development of Family Hubs. The existing CYP General Fund expenditure budget for Children's Centres will be reduced from £3M to £1.5M and so sets a savings target of £1.5M. There is also a recommissioning saving of £0.5M of public health grant spending on 0-19 services, which will not be achieved as contracts would need to be extended should the decision be made not to externally commission the Family Hub service.
- 8.2 It should be noted that £0.75M of Public Health grant was committed as part of a previous savings measure and is already applied in the accounts and budgeted for in the CYP general fund. This commitment must remain in place so that the total available budget for Family Hubs and 0-19 Services will be £6.9M (£1.5M Children Centre budget and £5.4M Public Health). All Public Health funding is subject to grant conditions including reporting and assurance processes. Similarly, any new provision that could potentially be grant funded by taking a public health approach to emerging local need would require such provision to only be for new public health related services.
- 8.3 The CYP General Fund saving on the Children's Centre budget is reported on the latest savings tracker as having an 'amber' RAG status, which reflects the early stage of development of the Family Hubs. There are risks to achieving this saving, notably rising employee and pension costs for suppliers. There is a risk of some capital clawback relating to any Children Centre developments funded by central government which are then identified for closure and will therefore no longer have early years provision. There is also financial risk arising from the possible staffing implications such as TUPE and redundancy.
- 8.4 There are likely to be some capital costs as some initial changes to buildings will be required, as will storage and age appropriate equipment. The direct premises running costs included in the appendices show that premises costs make up roughly 10% of Children's Centre's current expenditure, so halving the number of sites operated will not contribute a high proportion of the intended savings. Achieving the full savings will therefore necessarily depend upon significantly reduced staffing costs for the Family Hubs when compared to the previous Children's Centre model.
- 8.5 Financial scoping indicates that the residual Children's Centre budget of £1.5M, alongside some remodelling of Early Help services would provide the resources for the core staffing establishment required in the hybrid model. The detailed design of the services delivered will need to adjust to fit within the total funding and resource that becomes available. Where the council takes on staff, costings have to include the approximately 40% salary on-costs, which are primarily for pension contributions, but there will also be indirect cost implications in the form of additional management and support costs.
- 8.6 An in-house service model would create demand for central support functions for which the council would have to identify additional budget and resource.

Estimates for providing the necessary ICT and HR support, plus overheads such as insurance, training and travel costs total £0.2M. This does not include any estimate for financial and legal support as additional demand for these support services is believed to be absorbable.

9.0 Legal Implications

- 9.1 There is a range of duties relevant to the recommendation, to include those detailed below.
- 9.2 Section 10 of the Children Act 2004 (“the 2004 Act”) imposes an obligation on the council to make arrangements to promote co-operation between the council, its relevant partners, and any other persons or bodies who exercise functions or are engaged in activities relating to children in the local authority’s area, as the council considers appropriate. These arrangements are to be made with a view to improving the well-being of children in the local authority’s area.
- 9.3 S.11(2) of the 2004 Act provides that the council must make arrangements with partner agencies for ensuring that their functions are discharged “*having regard to the need to safeguard and protect the welfare of children*”. In discharging that duty, they must have regard to any guidance given to them for the purpose by the Secretary of State. The relevant guidance is the “Working Together to Safeguard Children”.
- 9.4 The obligations under the 2004 Act concern children of all ages. The statutory obligations in the Childcare Act 2006 (“the 2006 Act”) concern “*young children*”, which essentially are those aged between 0-5. Section 1 of the 2006 Act imposes on local authorities a general duty in relation to the well-being of young children to:
- (a) improve the well-being of young children in their area, and
 - (b) reduce inequalities between young children in their area in relation to:
 - Physical and mental health and emotional well-being
 - Protection from harm and neglect;
 - Education, training and recreations;
 - The contribution made by them to society; and
 - Their social and economic well-being.
- 9.5 S. 3 of the 2006 Act sets out specific duties the council has in relation to early childhood services which includes early years provision and provides that the council must make arrangements to secure that early childhood services in their area are provided in an integrated manner which is calculated to facilitate access to those services, and maximise the benefit of those services to parents, prospective parents and young children. In discharging its duties, the council must have regard to any guidance given from time to time by the Secretary of State.

9.6 Section 5A of the 2006 Act provides that:

(1) Arrangements made by an English Local Authority under section 3(2) must, so far as is reasonably practicable, include arrangements for sufficient provision of children’s centres to meet local need.

(2) “Local need” is the need of parents, prospective parents and young children in the authority’s area.”

9.7 Given the Recommendations in this report, to include ceasing children centre provision at certain sites, this will require the council to consider and assess three things: the need for children’s centres in its area; what provision would be enough to meet that need; and what number of children’s centres it would be reasonably practicable for the council to provide, taking into account such matters as affordability, and practical considerations such as the availability of appropriate buildings, geographic location, and accessibility. Provided all three of these matters are taken into account, there is no obligation to consider them in any particular order.

9.8 In April 2013 the Government issued the “Sure Start children’s centres statutory guidance” (“the Guidance”) to which the Council is obliged to have regard when carrying out its duties relating to children’s centres under the 2006 Act. In ensuring there are sufficient children centres, the Guidance details there the various things that a local authority should do. These include:

- *ensure that a network of children’s centres is accessible to all families with young children in their area;*
- *ensure that children’s centres and their services are within reasonable reach of all families with young children in urban and rural areas, taking into account distance and availability of transport;*
- *consider how best to ensure that the families who need services can be supported to 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;*
- *not close an existing children’s centre site in any reorganisation of provision 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 therefore be a presumption against the closure of children’s centres.*
- *Take into account the views of local families and communities in deciding what is sufficient children’s centre provision.*

9.9 Section 5D of the 2006 Act provides that the Council must secure that such consultation as they think appropriate is carried out –

.....
(b) before any significant change is made in the services provided through a relevant children’s centre;

(c) before anything is done that would result in a relevant children's centre ceasing to be a children's centre..."

- 9.10 So far as the obligations to consult under s.5D of the 2006 Act are concerned, the Guidance provides that the council must ensure there is consultation before making a significant change to the range and nature of services provided through a children's centre and/or how they are delivered; and the closing a children's centre. In consulting the council should consult everyone who could be affected by the proposed changes, particularly to ensure disadvantaged families and minority groups participate in consultations. The consultation should explain how the council will continue to meet the needs of families with children under 5 as part of any reorganisation of services. It should also be clear how respondents' views can be made known and adequate time should be allowed for those wishing to respond. Decisions following consultation should be announced publicly. This should explain why decisions were taken.
- 9.11 Case law has also confirmed the following principles with regard to consultation:
- Consultation must be at a time when proposals are still at a formative stage.
 - The proposer must give sufficient information for any proposal to permit intelligent consideration and response.
 - Consultation must be for a sufficient time to allow respondents to properly respond.
 - Consultation results must be taken into account by the final decision-maker.
- 9.12 The Guidance also makes clear that the council should ensure that children's centres offer differentiated support to young children and their families according to their needs. To help fulfil their duty to reduce inequalities between young children in the area, the council should consider the role that children's centres can play by, for example, providing inclusive universal services which welcome hard to reach families.
- 9.13 In addition to duties under the 2006 Act, S. 507B of the Education Act 1996 requires that every local authority must, so far as reasonably practicable, secure for qualifying young persons in the authority's area access to sufficient educational and recreational activities (also referred to as positive leisure-time activities) which are for their improvement of their well-being, and sufficient facilities for such activities.
- 9.14 Under s.2B of the National Health Service Act 2006, the council has a duty to take such steps as it considers appropriate for improving the health of the people in its area. Such steps include provision of services or facilities designed to promote healthy living and provision of information and advice. Having integrated and effective early help services for children and families support both of this overarching public health duty.

- 9.15 The *2012 Health and Social Care Act* (“the 2012 Act”) introduced changes by a series of amendments to the *National Health Service Act 2006*. The 2012 Act gives local authorities a duty to take such steps as it considers appropriate to improve the health of the people in its area. In general terms, the 2012 Act confers on local authorities the function of improving public health and gives local authorities considerable scope to determine what actions it will take in pursuit of that general function.
- 9.16 The Healthy Child Programme includes some mandated functions where there is a statutory requirement on the local authority to ensure these are provided.
- 9.17 In addition to its specific duties under the above Acts the Council has a continuing duty under the Equality Act 2010 when exercising its functions to have due regard to the need to (a) eliminate discrimination, harassment and victimisation, and other prohibited conduct (b) advance equality of opportunity and (c) foster good relations. Further information concerning this duty is contained in Section 10.
- 9.18 Plans to make some amendments to the current structure of the Early Help Service, most particularly Brent Family Solutions, will require staff consultation. 14 of 17 Children’s centres are outsourced to a voluntary sector provider, Barnardo’s and the current contract is due to end in September 2020. The remaining 3 are managed by the Fawood/Curzon Partnership governing board.
- 9.19 It is possible the Transfer of Undertakings (Protection of Employment) Regulations 2006 (“TUPE”) will apply to staff currently employed in Children’s Centres and staff may transfer by way of a business transfer or service provision change. TUPE is fact sensitive and it is difficult to determine at this stage to whom TUPE will apply. In the event TUPE applies, the staff will automatically transfer to the new provider along with certain liabilities. If TUPE does not apply, there is a potential for staff redundancies where the elements of section 139 of the Employment Right Act 1996 are met. For those with the requisite qualifying service (2 years) they will be entitled to a redundancy payment. The employer must ensure it undertakes consultation on the proposal and depending on the number of affected staff, the employer must follow strict statutory time limits.
- 9.20 It is accepted that roles within this sector are predominantly filled by women. Consideration will need to be given to potential equality issues that may arise. In addition, as women, in general, retain the majority of child care and caring responsibilities within families, mobility clauses may be an issue if the new hubs are located at distance from their current places of work.
- 9.21 Any procurement of Family Hubs services will involve services falling within Schedule 3 of the Public Contracts Regulations 2015 (PCR 2015). The likely value of such contract(s) over its lifetime is higher than the EU threshold for Schedule 3 services (currently £615,27k) and the procurement of the contract(s) is therefore governed by the PCR 2015. The procurement will also be subject to the Council’s own Standing Orders in respect of High Value Contracts and Financial Regulations, requiring Cabinet approval to tender and

award. To avoid the necessity to bring further reports to Cabinet, delegated authority to procure services is sought.

- 9.22 Any procurement of Family Hubs will also involve the grant of leases and licences to the new contractor of council premises to run concurrently with the contract and to be on terms to be agreed by the Strategic Director of Regeneration and Growth in consultation with the Director of Legal, HR Audit and Investigations. If premises are not in the ownership of the council, it may be necessary for the council to enter into leases for the buildings and then sublease to contractors. Given that premises will be used as Family Hubs, the proposed form of lease/licence will incorporate an obligation that such contractor undertake appropriate checks of persons employed in the exercise of the right granted under the licence or lease including Disclosure and Barring Service checks, and confirmation that the Licensee or Tenant have no criminal convictions or involvement in an offence against vulnerable persons, children, etc.
- 9.23 The Public Services (Social Value) Act 2012 requires commissioners of public services to think about how they can also secure wider social, economic and environmental benefits. Before commencing a procurement process, commissioners should consider how services being procured might improve the economic, social and environmental well-being of its area; how, in conducting the procurement process, the council might act with a view to securing that improvement; and whether the council should undertake consultation.

10.0 Equality Implications

- 10.1 The Council must, in the exercise of its functions, have due regard to the need to:
- (a) eliminate discrimination, harassment and victimisation;
 - (b) advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it; and
 - (c) foster good relations between persons who share a relevant protected characteristic and persons who do not share it,
- pursuant to s149 (1) Equality Act 2010. This is known as the Public Sector Equality Duty.
- 10.2 Having due regard to the need to advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it involves having due regard, in particular, to the need to:
- (a) remove or minimise disadvantages suffered by persons who share a relevant protected characteristic that are connected to that characteristic;
 - (b) 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;

- (c) 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.

- 10.3 The Public Sector Equality Duty covers the following nine protected characteristics: age, disability, marriage and civil partnership, gender reassignment, pregnancy and maternity, race, religion or belief, sex and sexual orientation. Age and pregnancy and maternity are particularly relevant to the Recommendations in this report. The purpose of the duty is to enquire into whether a proposed decision disproportionately affects people with a protected characteristic. In other words, the indirect discriminatory effects of a proposed decision. Due regard is the regard that is appropriate in all the circumstances.
- 10.4 An Equality Analysis (EA) was completed in December 2018 ahead of the Cabinet decision to approve budget proposal CYP008 - *develop family Hubs from children's centres*. The EA was included in the papers published for the 11 February 2019 Cabinet meeting. An updated EA is attached as Appendix 6
- 10.5 The EA identified that families living in areas where children's centres could close may not be able to access support services as easily, as they would need to travel further. To mitigate this risk, families affected will be informed and engaged at all stages of development, including through the statutory consultation on significant changes to children's centres which is scheduled to be considered by Cabinet in October. Accessibility of the sites was one of the key criteria considered when developing proposals for family hub locations. Details of the public transport routes near to proposed family hub locations are included at Appendix 2 of this report. Outreach work will be a key feature of service delivery.
- 10.6 The EA also identified a potential risk of reduced early intervention outcomes for children. This risk will be mitigated through broadening the age range of children and families that will be able to access services through the new model, improving the reach of services and supporting a whole family approach.

11.0 Consultation with Ward Members and Stakeholders

- 11.1 As part of the preparation for Council Budget consultation members were updated regarding Brent's current Children's centre provision and proposals to develop 8 family hubs and close some centres. In February 2019, following the consultation, full council approved proposals CWB002 (re-commission public Health 0 to 19 service with Children's centre contract to realise efficiencies) and CYP008 (Develop Family Hubs from Children's centres.)
- 11.2 Developing Family Hubs is now included as an agreed key priority in Brent's new Borough Plan (2019-23)
- 11.3 The Lead Member for Safeguarding, Early Help and Social Care has visited some Children's Centres and approved an individual Cabinet Member Decision paper agreeing consultation regarding proposed changes to Children's Centres

could start on 1st July 2019. It was also agreed that information regarding proposed sites could be shared.

11.4 The Lead Member has also attended some of the focus groups that were part of the statutory consultation.

11.5 A separate Member meeting was held on 19th August 2019 to report on progress and answer any questions. One further public meeting focusing on Family Hubs was also held on 19th September 2019.

12.0 Human Resources/Property Implications (if appropriate)

12.1 Once the staffing implications are clear, appropriate staff consultation will take place in line with the relevant council policies and procedures. Current providers will also need to consult with their staff. All providers are aware of contracts ending and will keep staff informed of any progress.

12.2 Appendix 3 of this report (Profiles of Brent Children's Centres) has been developed with Property input. More detailed work will commence following the Cabinet decision in October.

Report sign off:

Gail Tolley

Strategic Director of Children and Young People's Department

Report sign off:

Phil Porter

Strategic Director of Community Wellbeing