Report to Rapid Scrutiny Exercise 15 April 2019: Proposals to Close White Horse Children's Centre

Purpose of this Document

We ask the members of the rapid scrutiny exercise to review the justifications given for the proposed closure of the White Horse Children's Centre in light of the information contained in this report.

As well as considering the results of the council's formal consultation, we also ask that the comments from parents in Westbury and Warminster in Appendix 4 are considered. These explain how children's centres make a real difference to people's lives.

Could the group please formally respond in writing and in good time on each of the 9 key points raised in the Supporting Evidence section before this issue is brought to Cabinet. The whole justification for the proposals put forward to the Children's Select Committee hinges on some key information which is incorrect – this report seeks to rectify this.

We believe if the error is corrected and the policy framework and research relating to children's centres is properly considered, the benefits of the White Horse Children's Centre will be found to clearly outweigh the very small annual cost to run it. For only £22,000 per year Wiltshire Council will then be able to demonstrate to the residents of Westbury that it is meeting a key Business Plan aspiration - to protect the most vulnerable people in its care.

Cllr Gordon King, Westbury Unitary Councillor

Cllr Ian Cunningham, Mayor, Westbury Town Council

Cllr Mike Sutton, Deputy Mayor, Westbury Town Council

Nadine Crook, mother of 2

cc: Children's Select Committee Members
Cllr Laura Mayes, Cabinet Member for Children, Education and Skills
Lucy-Anne Bryant, Lead Commissioner
Helen Jones, Director of Commissioning
Rachel Draper, Spurgeons
Westbury Town Council

Westbury Town Council
Andrew Murrison MP

Nadhim Zahawi MP, Parliamentary Under Secretary of State for Children and Families

Media and social media contacts

Background

Wiltshire Council Business Plan 2017 - 2027:

"At times, we all need support. We will protect the vulnerable by intervening early, where possible, and working with partners and local communities to ensure everyone gets the support they need as soon as possible. For children, this will mean a clear focus on work in the early years." [emphasis added].

"One of Wiltshire Council's 4 key priorities is "Protecting those who are most vulnerable... We want to build communities that enable all residents to have a good start in life, enjoying healthy and fulfilling lives through to a dignified end of life. We will provide people with the opportunities and skills to achieve this by investing in early intervention, prevention and promoting community inclusivity. Where care is needed, health and social care will be delivered seamlessly to the highest standards. For the most vulnerable we will work closely with health and the voluntary sector to provide appropriate, local, cost efficient and good quality care packages, support and facilities." [emphasis added]

"We have robust decision making in place which is:

• Open, transparent and inclusive – based on good consultation and engagement with local communities; good legal and financial advice and scrutiny; and consideration of the impact on local communities and the environment..." iii

Sutton Trust, Stop Start report:

"The major national evaluation of children's centres and their impact (2009-14) found positive effects, especially improvement in family outcomes; these were linked to family engagement with children's centres and service use. Families registered to centres that had experienced reductions in resources (cuts to staff and/or services) were associated with poorer effects on family outcomes, whereas effects were positive for families registered with centres that had increased resources (expanding services and/or staff) between 2011 and 2013. Positive effects were also associated with greater service use by families. The most disadvantaged groups showed stronger positive effects, and were more likely to use services at their registered local children's centre rather than services at other centres or institutions. They might thus be more affected by cuts to provision at their local centre." iv [emphasis added]

"The core purpose of children's centres is to improve outcomes for young children and their families and reduce inequalities between families in greatest need and their peers in:

- · child development and school readiness;
- · parenting aspirations and parenting skills; and
- child and family health and life chances" v

"Life chances" covers wider issues such as parental employment and poverty prevention. The aspiration was that all families could have access to the facilities and expert staff when they needed it, helping to increase social mobility.

Executive Summary

The justification given for the closure of the White Horse Children's Centre to the Children's Select Committee meeting on 5 March 2019 hinges on some key information which is incorrect. This is likely to have led the committee to support a proposal we would hope they would otherwise not have supported and it is contrary to the aims of the Council's Business Plan. We also believe the wider policy context and research has not been considered because of this fundamental error. This research, and experience of the closure of Warminster's children's centre, has shown the proposed model will fail the local community and lead to far worse outcomes for families and children in need in the long run.

The key concerns are as follows, more detail is given in the Supporting Evidence section:

- The report stated "The centres being decommissioned are in the less deprived areas". This is incorrect. 3 of the 6 proposed closures, including the White Horse Children's Centre, are within the 12 most deprived areas in Wiltshire (out of 285 analysis areas in total ¹). The White Horse Children's Centre offers an opportunity to support a high number of families in need due to its location within one of Wiltshire's larger towns
- Meanwhile, some centres which <u>are</u> in areas of very low deprivation are <u>not</u> proposed for closure (e.g. Tidworth and Tisbury) – perhaps because some or all are located in shared community buildings so are not seen as a cost?
- 5 of the 6 centres proposed for closure would be used (rented?) by private nurseries. It is appreciated that the council is in very difficult times and savings must be made where possible. However, renting the White Horse Children's Centre to a private nursery would be to the detriment of supporting one of the most vulnerable sections of society in Wiltshire this is contrary to the council's Business Plan
- The council's Joint Strategic Needs Assessment states that "evidence has highlighted that the most deprived 20% of areas within Wiltshire² have repeatedly poorer outcomes than the least deprived 20%. This is not new understanding but highlights that inequalities in outcomes due to deprivation still exist in Wiltshire and commissioners should continue to consider this when designing services." "I [emphasis added] In the case of Westbury, this consideration cannot have been taken into account as the report said it is not in a deprived area
- Wiltshire Council has pursued a policy to push services and groups out of the children's centres and into the community, though there is evidence that this is not the best model to use particularly in areas of high deprivation. It is then possible to say that the centres are "underused". This could, of course, be reversed and the building could be used more effectively
- The services, information and facilities that the White Horse Children's Centre currently provides (and could provide) cannot be replicated and made as easily accessible to those most in need in other community venues
- The council does not appear to have considered the research cited in the recent paper "Stop Start" by the Sutton Trust. A quote from this is included in the Background section. The report's recommendations say "Children's centres should reconnect with their original purpose. Shifting the balance too far towards referred children and families,

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¹ Indices of Multiple Deprivation, see main report section 1

² i.e. those in decile 2

away from open access... does not seem to fit well under the label of a local 'children's centre'. A good mix of children is important for social mobility and children's social development." vii

- The report makes no reference to council's own Reducing Child Poverty Strategy 2014 2020. This strategy recognises the essential role of the children's centres. It also proposes to enhance the role of the children's centres and states that in order to provide effective support, both children's centres and outreach services are required
- The report proposes the closures as a continuation of its "successful use of wider community venues". The evidence from Warminster, following the closure of the town's children's centre, is that the level of open access provision (and therefore access to the professional staff and the signposting they can do) dropped from all day, 5 days a week to a 1½ hour session once a week. Unless they are "in the system" already, parents in Warminster now find it very difficult or impossible to gain access to the right professionals and preventative help they need. This would be a disaster in an area of high deprivation
- Without open provision at a specific base and groups running in that base, many in need will be missed. Running a support system relying on referrals cannot pick up everyone who needs help and the Council's Business Plan seeks to promote early intervention. Research shows the impact of children's centres is far reaching and seeking to save a relatively small £22,000 per year on the White Horse Children's Centre building is short-termism ³. It will cost the council's social services budget and other government departments far more in the long-run
- The formal consultation cannot tell the whole story of how the local community feels as it
 effectively steers people to give the "correct" answer. It is offering the same service
 model to Westbury that Warminster was offered prior to the closure of its children's
 centre. As mentioned above, there is a virtually no support now available in Warminster
 to those who need it.
- The proposed closure would be contrary to Wiltshire Council's Business Plan. It would not:
 - a. "protect the most vulnerable"
 - b. "ensure everyone gets the support they need as soon as possible"
 - c. "build communities that enable all residents to have a good start in life"
 - d. be "investing in early intervention, prevention and promoting community inclusivity"
- Most of the families the children's centre currently serves in Westbury would not travel to Trowbridge for their next closest children's centre. It would be costly and is difficult with small babies

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³ See Appendix 2

Supporting Evidence

1) The key statements in the report to the Children's Select Committee that none of the proposed closures are in areas of high deprivation are incorrect.

Wiltshire Council's document "English Indices of Deprivation 2015: Wiltshire Report" viii uses the nationally recognised "Indices of Multiple Deprivation". This is a "score" which allows deprivation levels across England to be compared. The country is segmented into many small chunks of population called "Lower Super Output Areas" (LSOAs). Wiltshire has 285 of these.

The report states that "Wiltshire's most deprived LSOA is Trowbridge John of Gaunt - Studley green in Trowbridge. Studley green is not only Wiltshire's most deprived location it is also the only LSOA in Wiltshire to be in the most deprived national decile. Wiltshire also holds 11 LSOAs in decile 2, 10 LSOAs in decile 3 and 17 in decile 4". ix

The maps in Appendix 1 show that the White Horse Children's Centre is located in one of the decile 2 areas, i.e. it is in the top 12 most deprived areas in Wiltshire (out of the total 285 areas). It is also adjacent to a decile 3 area.

The March 2019 report to Wiltshire Council's Children's Select Committee states "The centres being decommissioned are in the less deprived areas" x and again in the conclusion "...while protecting provision in areas of highest deprivation" xi. 3 of the 6 centres proposed for closure (Cricklade, Mere and Pewsey) are all in relatively low areas of deprivation (4th decile or lower). However, as mentioned above the other 3 proposed for closure, Salisbury – City, Trowbridge – Longfield and Westbury – White Horse, are in areas of high deprivation (2nd decile).

Some other children's centres in areas of low deprivation would be retained. For example, Tidworth is in the 4th decile and Tisbury is in the 6th decile. It appears that if a centre is part of a community hub, as is the case in Tisbury, it will be retained - even if it is in an area of very low deprivation. However, if the centre is in a building that could be leased to a private nursery it is proposed for closure – irrespective of the level of deprivation of the area (see point 2 below).

A key aim running right through Wiltshire Council's Business Plan 2017 - 2027 is to protect those who are most vulnerable. The proposal to close the White Horse Children's Centre is clearly contrary to this aim as the proposals do not protect provision in the areas of highest deprivation.

The White Horse Children's Centre should be retained because it is ideally located in one of the most deprived areas of Wiltshire. There is a high population in need its services right on the doorstep that can currently access its facilities and staff easily.

2) The report has made no reference to Wiltshire Council's Reducing Child Poverty Strategy 2014 – 2020

Poverty is one of the factors in the Indices of Multiple Deprivation, therefore the proposed closure should be considered within the framework of Wiltshire's Child Poverty Strategy 2014 – 2020 xii. Some of the objectives are of particular relevance here.

"Objective 4 – Provide locally-focused support based on a thorough understanding of needs...

68. Using the Community Area Needs Assessments and the poverty indicators used in this strategy, produce a thorough multi-layered assessment of poverty for localities where child poverty is key issue. From this, assess the provision of services and support in place and engage with community area boards to discuss, develop and agree a local response. An example of multi-layered assessment can be found in appendix 1" [emphasis added]

The assessment⁴ shows a number of indicators of child poverty by community area. While some of the data is now fairly old, the strategy and therefore actions are current. Of the 10 indicators in the assessment, 8 have been highlighted in red for Westbury – i.e. they are of concern. No other community area has this many red indicators.

Westbury should be a high priority for action on child poverty. One of the key reasons the children's centres were set up was to help tackle child poverty and the report acknowledges their importance in this, as discussed below.

The proposed closure of the White Horse Children's Centre will have a significant negative impact on the objectives in the strategy. The Children's Select Committee report claims the White Horse Children's Centre isn't in an area of high deprivation – this is not demonstrating the required "thorough understanding of needs" of the area. Also, it appears that no formal engagement has been undertaken with the Westbury Area Board by Wiltshire Council to assess the likely impact on the proposed changes on the residents of Westbury.

"Objective 1 – Provide effective support to vulnerable families with 0-5 year olds

53. Further develop the role of the children's centres and other early year settings (including voluntary sector services) and continue to strengthen their links with community health services. Children's Centres need a continued focus on the most vulnerable families and to provide strong outreach services. They need to provide targeted support to ensure good health, appropriate development and successful early education of young children 5. This will include working with the Family and Parenting Commissioning Group to develop the family support role, including supporting the benefits of paid employment. [emphasis added]

The above clearly states in order to provide effective support, both the children's centres and outreach services are required. The strategy acknowledges the need for an open access facility in order to maximise the likelihood those most in need will be picked up.

3) Closing public children's centre buildings to provide private nurseries with accommodation to expand

Under the Childcare Act 2006 the council has a "Childcare sufficiency duty". This is a statutory duty to ensure there is sufficient childcare available in its area. Of the proposed 6 children's centre closures, 5 of them would in future be used for 0-2 year old private nursery provision. The other location is leased, that lease would cease. Westbury costs only £22,000 per year to run the building ⁶.

⁴ See Appendix 2

⁵ See comments from Julie Shenton and links in Appendix 4

⁶ See Appendix 3 meeting notes

The children's centres were built with public money as a public facility for anyone with children between 0 and 5 years. The priority should be making the best use of public buildings rather than seeking to dispose of them wherever possible. The council's duty is to encourage the private sector to provide sufficient childcare – it is not required to provide the buildings to do so.

As 5 of the 6 proposed closures would result in nurseries taking the buildings over, this appears to be the driving force of the proposals rather than catering for the needs of vulnerable residents living in areas of high deprivation. This is contrary to the council's Business Plan.

4) The White Horse Children's Centre building is currently "underused" – due to the council's service delivery model

The council has stated that the children's centre buildings proposed for closure "...have very little service delivery taking place in the buildings." xiii

Rather than bringing a range of services together in one location as a number of other authorities have done, Wiltshire Council has made the deliberate decision, through the tendering process, to greatly reduce the number of groups run in the centres and to push them out into community venues. In taking this course of action it is of course now possible to say that "the buildings are currently underused".

Contrary to the above model, research into the effectiveness of the children's centres has shown that having a centre where families can access many services from one location and where staff work closely together is better for families and children. The greatest gains are for those in the most deprived areas ⁷. Given this evidence, the White Horse Children's Centre building could be used more effectively.

Children's centre events and services have not historically been well advertised. It is very likely that many people do not know what is actually available to them. For example, a Little Learners group that was held at the Lakeside centre in the town park in Warminster closed after only a couple of months due to poor attendance. It was very poorly advertised so no one knew that it was happening.

The statement in the report that the centres to be closed are not well attended is not due to lack of demand in areas such as Westbury. It is as a result of the council's policy of pushing services and groups out of the centres - even if this isn't the best model of delivery.

5) Westbury's Children's Centre is a centre with excellent facilities and adequate room to run groups and courses

The report claims that "rooms are small and services could be offered in the community" xiv. However, the playroom is well used as it:

- has a weekly breastfeeding support group
- has a weekly weigh in clinic
- is booked by the midwives for antenatal classes

⁷ See Sutton Report quote in Background section

 is used by Children's centre staff for courses e.g. new parent/new baby course, parenting courses and domestic abuse courses

Other comments:

- the playroom is ideal for groups of 8-10 people
- people can often feel intimidated in larger groups and are less likely to discuss concerns
- the playroom has a lovely relaxed, welcoming feel
- there are low comfortable chairs arranged around the edge of the room
- play mats and a range of stimulating toys for babies and young children are placed in the middle
- the chairs are perfect for breastfeeding
- the room looks out onto a play area outside
- there is also a small kitchen area for making snacks and tea/ coffee
- currently families can 'stay and play' after a specific group or course
- the room is enclosed enough to keep warm during baby massage courses (which help parents to bond with their children)
- sections of the council use the playroom as it is an appropriate neutral facility, e.g.
- social services use it for family visits when children are in care
- the sensory room is a superb facility which has bubbles tubes, fibre optic lights, and a
 wide range of sensory toys. This can accommodate small groups of parents and
 babies/ toddlers. It can be booked by families
- there is not enough room at the centre to host a Little Learners or messy play type session, but it is well suited to the groups and courses that it currently provides there

The services and facilities that the centre currently provides (and could provide) cannot be replicated and as easily accessible to those most in need (i.e. the local community) in other community venues

6) The council proposes to close the centre to expand its "successful use of wider community venues..." xv

The 2015 Cabinet report about the previous round of children's centre closures stated that in the areas where a centre was to be closed "There will be a minimum of 1 day per week of children's centre sessions/drop in delivered." xvi In the case of Warminster it went on to say "The school [Princecroft] is willing to offer space for children's centre staff if required and some continued use of space for delivery of children's centre services including access to the sensory room" xvii

At the parent consultation meeting when Warminster's children's centre was proposed to be closed, promises were made that groups run by the professionals would continue in the town and that the sensory room would still be available for the public.

What actually happened is as follows:

- the centre was wholly taken over by Princecroft School
- no access was retained to the sensory room
- only 1 group run by staff was set up plus the breastfeeding support group (run by a volunteer). Within a couple of months the town was only left with the breastfeeding support group

When asked about this several months after the centre closed, Rachel Draper of the provider Spurgeons said "There are no plans to run a group such as Little Learners in Warminster due to the good toddler group provision already in existence. However, we have ensured there is open access to any parents who need it on a weekly basis. A staff member will be available to see parents should any parent in Warminster need support with anything. This is going to be at the same time as the weekly Mum2Mum breastfeeding group." 8

A Spurgeons employee does attend the breastfeeding group weekly still. However, the group is often not very well attended. The group is intended for mums to meet other mums. but because not everyone breast feeds many do not think to attend. There may well be a perception that it is mainly to help people when they are having problems. Most people do not know that a professional is available at the group and many would be working on that particular day anyway. This is the extent of open access in Warminster now – 1½ hours per week on 1 day. When the children's centre was open staff were available all day, 5 days a week. While the current level of provision may be felt to be acceptable for Warminster as it is not an area of high deprivation, such a lack of support would be disastrous for many families living near the White Horse Children's Centre.

In terms of the groups available in Warminster now, they are mainly run by untrained volunteers and not held at neutral locations like the children's centre - they are in churches and a private school. These are simply not comparable to groups run by children's centre professionals who are able to pick issues up quickly, provide appropriate support and signpost on those in need. As the Sutton Report quote in the Background section says "Positive effects were also associated with greater service use by families. The most disadvantaged groups showed stronger positive effects, and were more likely to use services at their registered local children's centre rather than services at other centres or institutions. They might thus be more affected by cuts to provision at their local centre."

The evidence from Warminster is that once a children's centre closes, open support for anyone who needs it falls off the radar. It may well be the case in other areas of the county. This is not evidence of a successful model of delivery. It is evidence of abandonment of one of the original aims of the children's centres. There was to be easy to access support for all who needed it, whatever their background. A good mix of children from all backgrounds was felt to help all children's social mobility.

From past experience, it seems highly unlikely children's centre staff will genuinely be running open groups in a variety of communities as the current proposals suggest. Where they do, it may be 1 session a week in a community building - this is nothing compared to what can be offered in an open access children's centre building.

With the closure of Warminster's centre and proposed closure of Mere and Westbury, there will be no base for Children's Centre staff and equipment for the whole of SW Wiltshire (i.e. West of Tisbury and South of Trowbridge) - making it even less likely that open groups will continue in community venues in these areas.

It is appreciated that there is a need to provide focused services on those clearly in need. However, research has shown that some open provision is essential. This provision should include:

- organised groups open to all which have the 'five to thrive' educational focus
- professional staff easily available at a walk in centre

⁸ see Appendix 2

- stay and play
- breast feeding support at any time (i.e. not just a set session at week). Breast feeding of babies up to 2 years old is strongly recommended by the World Health Organisation.
 They cite numerous health benefits for both child and mother. Rates of breastfeeding are higher where support is available
- sensory rooms. These are highly beneficial to early years development 9
- readily available information even something as simple as posters in the children's centre toilets about domestic abuse, how to play with your child, the careers advice service and provision of chlamydia test kits can make a big difference

A base with staff on hand is required in the areas of highest deprivation – this is what the White Horse Children's Centre is there for.

Without open provision, a specific base and groups running in that base, many in need will be missed. Running a system relying on referrals cannot hope to pick up everyone who needs help. The impact of the children's centres can be far reaching. If the children's centre only prevents 1 or 2 families per year breaking down / reduces domestic violence / opens the door for a few parents to get back into work / improves life chances for children so they avoid prison / promotes healthy eating and reduced obesity this will easily save social services, the police, the NHS and other government organisations far more than the £22,000 per year it costs to run the building. This is a tiny sum of money for the savings it can make in the longer term.

7) The Council's consultation questionnaire will not represent the views of the residents of Westbury

The questions in the public consultation are leading. While a consultation has to start from somewhere, the background then questions (particularly "Do you agree with the Council's proposal to invest in staff rather than buildings") give the reader "Hobsons choice" so the responses will largely give the answer the council wants people to give.

Until the publicity due to the opposition to close the centre, many people were not aware of the proposals. For example the breast feeding support group, who use the building, were unaware – the volunteer had not been informed and there were no posters up in the centre asking for comments.

It should also be noted that the area is in the top decile for the "education, skills and training" index (which forms part of the indices of multiple deprivation). This means there will be a higher than normal proportion of people whose reading skills are poor – therefore their opinions are far less likely to represented by a written, online consultation. Education, skills and training are greatly affected by early years' provision – another reason the children's centre is essential in this area.

Additional feedback from members of the public has been included in Appendix 4.

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⁹ See https://www.teachearlyyears.com/learning-and-development/view/sensory-rooms

8) The council does not appear to have considered the recent paper "Stop Start" by the Sutton Trust xviii

The key recommendations of this document are in Appendix 5. The 3rd recommendation states that:

"Children's centres should reconnect with their original purpose. Shifting the balance too
far towards referred children and families, away from open access, and merging
children's centres into preventative teams working with a very much wider age group,
serves a very different function and requires very different skills. It does not seem to fit
well under the label of a local 'children's centre'. A good mix of children is important for
social mobility and children's social development."

The Background section of this scrutiny report also contains a relevant quote.

The council's proposals for the White Horse Children's Centre act against the Sutton Trust's report recommendations, as they:

- almost wholly focus on referred children and families
- remove any open access to the facilities and staff at the centre
- will only allow open access to staff for a specific session a week (e.g. Little Learners assuming this group continues). Many people will not be able to attend at that specific time (e.g. due to work) so will therefore have no access to the staff

9) Priorities for residents in Westbury

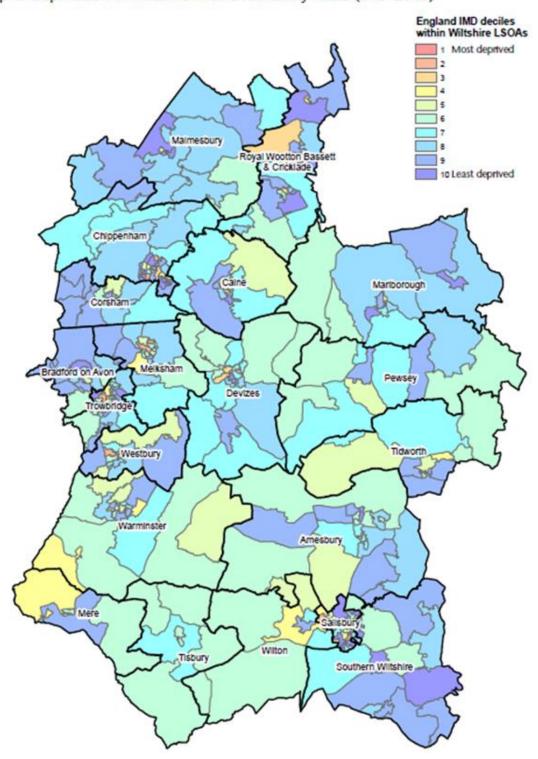
At a community event in Westbury organised by Wiltshire Council, residents voted on which issues were a priority for them. The results of this exercise are in Appendix 6. Items shown in red were deemed to be a priority.

Of the 27 issues deemed to be a priority, the children's centre can help with at least 12 of them in the short to long term. This may be either through advice from the staff or signposting to other professionals so people can get the support they need. These 12 issues are:

- Mental and emotional health
- Child poverty
- Anti-social behavior
- Protecting the vulnerable
- Alcohol and drug abuse
- Involvement in community events
- Employment opportunities
- Mental health
- Healthy lifestyles
- Affordable housing
- Deprivation and poverty
- Community events and activities

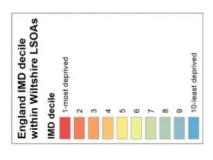
Appendix 1 – Indices of Multiple Deprivation Across Wiltshire

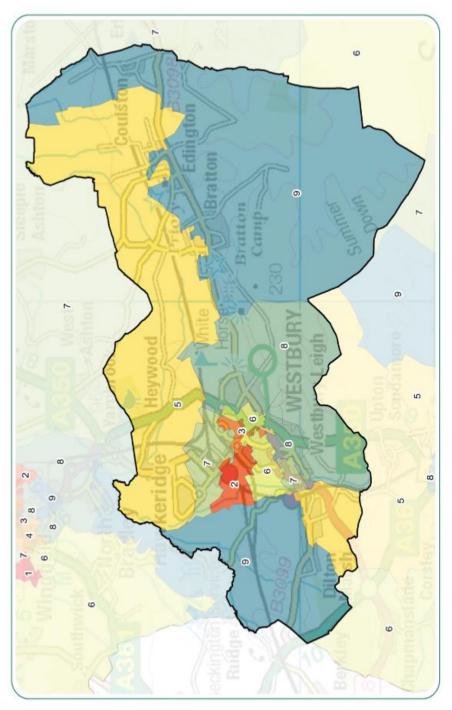
Figure 3: Map of Deprivation in Wiltshire with Community Areas (IMD 2015)



The area around the White Horse Children's Centre in Westbury is in the 2nd decile in terms of deprivation (i.e. top 20% most deprived areas in the country). It is also adjacent to an area in the top 3rd decile. See overleaf for a more detailed map of Westbury.

Source: https://www.wiltshireintelligence.org.uk/wp-content/uploads/2019/03/Wiltshire-IMD-2015-report.pdf





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Source: http://wiltshirejsa.org.uk/wp-content/uploads/2016/11/Westbury-Your-Community-Data-Pack-1.pdf

Appendix 1 – Multi-layered assessment

year 2012/13 and Obesity Overweight reception NCMP conceptions Teenage (2012) ** Attainment gap KS4 34.9 20.1 28.2 25.9 27.8 21.6 30.6 Attainment gap KS2 (2012) ** 11.0 DWP 2011 Indices of Deprivation 2010 Associated issues income deprived children living more than 1km from a primary Number of school 120 140 140 110 250 260 260 140 130 % low income children in large families (4 or more children) 14% 16% 22<mark>%</mark> 14% 16% 13% 15% 17% 13% Wilts data | Wilts data CiN per 1,000 5 to 15 year olds 2 2 2 <u>원</u> 원 13 17 13 15 15 PA per 1,000 5 to 15 year olds 33 40 30 26 40 32 25 32 36 39 are long-term parents with children who dependent % Lone 3.6% 4.1% 3.3% 3.6% 4.0% 3.6% 3.6% sick parents with dependent children who unemployed Census % Lone 5.4% 7.3% 5.6% 5.8% 7.3% 6.5% 6.4% 9.0% are 1,000 5 to 15 entitled to Wilts data year olds Poverty measures FSM per Children 99 69 87 89 89 46 42 88 61 41 42 88 52 41 汉 % of households with dependent in employment 7% 8% children in which there is no adult Census %8 %8 %/ %6 amilies in receipt median income) % Children in of CTC (<60% DWP 2011 or IS/JSA 10.9% 10.5% 8.3% 6.9% 9.2% %6.9 8.8 8.8 8.8 9.0% Royal Wootton Bassett & Cricklade Southern Wiltshire Bradford on Avon Community Area Chippenham Marlborough Malmesbury Trowbridge Warminster Melksham Tidworth Salisbury Corsham Devizes Pewsey Tisbury

Appendix 2 – Reducing Child Poverty Strategy 2014 – 2020

Under the section "Independent Reviews – the case for early intervention" the following is quoted in the council's strategy, again acknowledging the importance of centres in areas of poverty.

45. Frank Field's "The Foundation Years: preventing poor children becoming poor adults" found that "... children's life chances are most heavily predicated on their development in the first five years of life. It is family background, parental education, good parenting and the opportunities for learning and development in those crucial years that together matter more to children than money, in determining whether their potential is realised in adult life. The things that matter most are a healthy pregnancy; good maternal mental health; secure bonding with the child; love and responsiveness of parents along with clear boundaries, as well as opportunities for a child's cognitive, language and social and emotional development. Good services matter too: health services, Children's Centres and high quality childcare." [emphasis added]

Appendix 3 – Correspondence with Wiltshire Council and Spurgeons

1) Rachel Draper e-mail to Nadine Crook re: children's groups in Warminster

18 Apr 2017 at 13:52

Dear Nadine

Thanks for your comments. Just to let you know we are reviewing advertising across all of our areas in Wiltshire and netmums is somewhere that we would be looking to share info. This is currently under way. Posters are due to go up around Warminster shortly and the advert is ready to go, as you are aware, in the Warminster Way.

There are no plans to run a group such as Little Learners in Warminster due to the good toddler group provision already in existence.

However, we have ensured there is open access to any parents who need it on a weekly basis. A staff member will be available to see parents should any parent in Warminster need support with anything. This is going to be at the same time as the weekly Mum2Mum breastfeeding group.

There will also be a variety of different programmes being delivered across the County as we discussed before. In Warminster, we are looking to facilitate a Healthy Eating (HEY) programme over the summer. Parents will be able to book onto this too.

Kind Regards

Rachel Draper

Acting Children's Services Manager-South East West Wiltshire Children's Centres.

Children's Service Lead-South Wiltshire Children's Centres

2) Westbury Children's Centre Consultation Meeting 26 February 2019

Parent session 12 midday – 1:15pm

Present: Lucy-Anne Bryant, Lead Commissioner, Wiltshire Council Emily Wood, Wiltshire Council (minutes) Gill Mills, Regional Manager, Spurgeons Rachel Draper, Children's Services Manager, Spurgeons Nadine Crook and her 8 month son, Warminster resident

NC_ Previously attended Happy Feet in Warminster and has attended the Antenatal group at the White Horse Centre, currently uses Little Learners at the Leigh Park Community Centre, for which she conveyed high praise.

LAB_ Explained that there is a lack of baby and 2-year-old places in Westbury. Little Learners will continue, alongside other support. Telephone contact and online advice will be available. Reality is that footfall at White Horse is limited and we must look at how resources are best used by using community facilities.

- NC_ Explained that toddler groups have a different remit, there is no emphasis on early education. Concern that groups run out of churches alienate atheists and non-Christians. There is a lack of support at these groups. Privately-run group (Court Yard) didn't provide the support that the Children's Centre offer.
- NC_ Concern that services were cut when Warminster Centre closed. Feel abandoned, worry that this will be repeated in Westbury.
- LAB_ Will look at Warminster services with Spurgeons. Explained that the emphasis has shifted to support the more vulnerable parents.
- NC Feels that there was a lack of advertisement about the consultation.
- LAB_ Apologised if this was the case, we were confident that all communication channels had been used (e.g. Early Years Facebook page had over 1,500 engagements).
- LAB_ Looking to use the libraries and leisure centres more than previously better links, remove the silos.
- NC_ These might have a lack of changing facilities/toilets. Suggested a building in the park in Warminster that could be used. (RD noted this down).
- LAB_ We need to place more emphasis on Health Visitors to inform parents of parental support opportunities. We want to promote the 'Five to Thrive' agenda and ensure that all professionals working with parents are briefed on this.
- GM_ We are now in money-strapped times, we're fighting to keep the services going. It's a blunt choice between keeping buildings open or keeping staff.
- LAB_ We understand that the first 1001 days are the most important. Our focus has to be now on those individuals who will not walk into a Centre.
- GM_£22,000 annual costs to run White Horse Centre (doesn't include staffing costs)
- NC_ conveyed frustration that universal services have been cut, sister in Glasgow receives so much more.
- GM_ we agree with NC completely.
- LAB_ Explained the FACT programme, we understand the early intervention agenda. We want to change the culture so that everyone understands the importance of early intervention.
- LAB_ Concluded the meeting and thanked Nadine for taking the time to attend.

Appendix 4 – Public comments

1) Petition

A Change.org petition has been set up. At 7 April 2019 this petition has 279 signatures. A paper petition used at a protest has gained an additional 13 signatures.

Several individual comments have been received, as follows:

Megan Orrell "Children's centres are extremely valuable assets for young families. I started going to my local one in Trowbridge (now closed) shortly after my first child was born: in fact I met most of my mum friends at the under 1's group and we are still in touch now even though our children are now at school. Myself and my children also benefited from the stay and play groups, little learners, and the breastfeeding group. I also was able to access careers advice to prepare for returning to work after a few years off.

Closing these centres which support children and families is a short sighted decision, and

Closing these centres which support children and families is a short sighted decision, and the effects of this such as increased crime, poverty, pressure on health devices and educational underachievement will be felt in the long run."

Kirsty Andrews "I need this centre its [sic] convenient and good for socials with other new mums"

lan Cunningham "The center is in the ideal Icoation close to an area of high deprivation na don the site of an Infrant's a Junior School. Westbury Town Council (of which I am chair/Mayor this year) unamoniously opposed this closure. In other areas where the service became "virtual" this was a prelude to cuts in many areas." [sic]

Amy Morrison "Im signing because we lost our centre in Warminster a couple of years ago and services have been reduced since. We need the westbury centre to give families a centre/hub they can access, it cam be a very lonely time for new mums and having somewhere to go to meet other families i believe is essential" [sic]

Neil Harvey "It must stay open"

2) Charlene Hambly e-mail to Unitary Councillors, MP and press

Dear all,

A friend of mine, Nadine Crook, has asked me to share my experience of using children's centres since becoming a mum in a bid to reverse the decision to close Westbury centre and raise awareness of why these centres are important.

For a little background, my name is Charlene. I am a mum of two children aged 5 and 3 years. I am also a Nurse with the majority of my experience working in Emergency Nursing and more latterly as a Nurse Specialist in health education. My Husband is also in a professional public sector role.

Our first baby was hard. I was advised to have a Caesarean section for medical reasons, which I really didn't want, but for safety, agreed. I had great family support and a fantastic health visitor who regularly visited me at home. With hindsight and experience now, I can recognise that so many home visits are atypical and she identified that I needed support and

was teetering in the verge of post natal depression. I struggled and found it hard to bond with a baby who screamed day and night to the point I could hardly leave the house. I felt alone and isolated as my Husband worked shifts and also struggled with what was happening. Our health visitor referred us to happy feet children's centre in Warminster for baby massage where I could bind with my baby and help manage her reflux by using baby massage. She was 8 weeks old when I first attended and slowly I gained the confidence to attend other groups there. I met other mums, talked to them, made friends. It was a lifeline and I have remained friends with these women. The staff helped me to understand a baby's development, how to interact with a baby and later toddler and child and how to look after my needs and realise that I am still important.

Our family used the sensory room which our daughter loved and it wa something we could do as a family and enjoy time together instead of things being hard, fraught and a struggle. Slowly, things improved as she got older and the reflux improved. I never felt judged there. Feeding her was always a nightmare with top up feeds as breast feeding wasn't enough, as well as having to give medication. Onlookers must have though I was mad how much stuff I needed to feed her but I felt comfortable there and accepted as the staff understood us.

We loved attending the play groups and I learnt so much about crafts and playing with my baby. She loved it too and we had fun. We bonded.

I can't remember who referred me to the counsellor at the children's centre but I can honestly say that having access to a counsellor who was trained in PND in a non judgmental children's centre was truly amazing. The help and support I received there stopped me from getting worse and helped me to come to terms with so much. I never anticipated becoming a mum could be so utterly hard and without the help and support I received from this little centre just round the corner from me, things could have been so much harder.

Sadly our centre closed so my youngest child had little experience of the fantastic services they provided. I was much more confident as a mum and had a good circle of mum friends all of whom I met at groups run at the centre or nearby groups from word of mouth at the centre. A lot of groups have stopped in Warminster now too. New and existing mums need support and in the absence of parent craft classes and just two classes offered by midwives to prepare for baby (labour and breastfeeding 2 hours each) many feel overwhelmed and unsupported. We no longer live in an extended family and so much is expected from women to work and care for children and often at the expense of their own personal happiness and sanity. Professional help guidance and support is essential and should be accessible to all equally to prevent a whole load of problems for the future. Sadly everything comes down to money and targets. Hence reduced access to health visitors and no longer having parent craft lessons like our mums had. We all need education support and help. Anyone can have a baby but raising a baby who is healthy, stimulated and given the best chance in life requires education support and help.

The health of the nation is at crisis point. NHS services can no longer cope with the health and social pressures of the population as it stands today. Finally the government have woken up to the idea of enabling people to take responsibility for their own health and hence their own lives and have focused upon health education in the 10 year plan released this year. This means patients will be provided with greater education and the onus to change their lifestyle to further enhance their own lives will be upon them with the help of professionals. If we want to build upon this and ensure our pregnant mums and children have the best start in life then surely they deserve the same; education help and support. They are the next generation and papers promising change mean nothing if our children's needs aren't met. For change needs to happen pre conception ideally for such big objectives in the 10 year plan to be most successful, but for now, babies and children are the best start in harnessing a change for future generations.

In short, families need help, guidance, support and understanding. They need to learn how to be parents, the best parents that they can be. Trained staff who are passionate about this role are pivotal in shaping future generations to have the best start in life and in turn pass on their good experiences of being parented well to their own children. Our children and grandchildren deserve this.

Thank you for your time in reading this. I hope you consider some of the points raised when making your decision.

Kind regards

Charlene Hambly

3) Sally Lloyd e-mail

I am writing to the members of the children's select committee and the members of the rapid scrutiny exercise because I was shocked and saddened to hear that the White Horse Children's Centre is at risk of closure. I want to share with you how invaluable the Children's Centre has been to me, in many different ways, since becoming a Mum six years ago.

I first used the centre when my twins were only a few weeks old and at this time I used the centre a lot, attending weekly baby groups and using the sensory room. Without it I would not have had the courage, especially in the early days, to get out and about by myself. The staff were always so friendly, helpful and welcoming and gave me the confidence boost I needed to know that I was doing a good job.

The Children's Centre gave me a safe space to go to with young babies, and stopped me being confined to the house all day. It also allowed me to interact with other adults and talk to other parents going through similar things to me. For some this might have been their only opportunity to interact with other adults that day.

I was also fortunate to be able to attend the postnatal groups where I learnt about baby-led weaning, looking after teeth, safety in the home. These sessions were really useful and something, that as a Mum to young children, I might not of otherwise got round to, or had time to research myself. Being able to attend while my babies played made it really easy.

With my third child, it is extremely likely I would not have continued to breastfeed if it hadn't been for the mum2mum breastfeeding support group. At this group I received real first-hand experience from other Mum's that resulted in me succeeding through my initial struggles. After this I continued to attend the group weekly, to allow my daughter and I to socialise but also, I was then able to pass on support and advise to other Mum's.

In my opinion, if someone is struggling they are more likely to seek support/advice from someone in an informal setting, where they can drop in locally, at a time convenient to them rather than booking a formal appointment with a health visitor. The children's centre also provides a relaxed friendly space where parents can open up about problems they might be having.

At the baby and toddler sessions the trained staff were able to provide advice regarding child development, giving me lots of ideas and advice that I could use at home. At traditional toddler groups the staff are not necessarily trained in these areas so cannot provide the same level of advice and support. Baby and toddler groups ran by the Children's centre also allows staff to identify those who may need more specific advice or parents who are struggling that might otherwise be missed or not know where to seek this advice from.

Another problem with traditional toddler groups is that they are often run by volunteers and therefore could cease to run at any time, leaving lots of parents and children without a weekly group to attend.

I really hope that the White Horse Children's Centre can be saved so that many more families can continue to benefit from the support, advice and warm welcome that I have received over the past six years.

Yours faithfully,

Sally Lloyd

4) Julie Shenton, Speech and Language Therapist. Comments to Nadine Crook's Facebook Page

"We also used our children's centre when my kids were young. As a parent in a new town with no family or friends it was vital support for us and I remain friends with many of the mums and dads I met there. Early support shouldn't just be for some but for all. The opportunity for mums to learn important life skills for their own and families futures is something you can't put a price on. As a speech and language therapist sure start centres are the best place to get messages to parents on how to play and interact with their children. So many children have such poor language skills entering school and early vocabulary is the best indicator of later academic success. The government are putting millions into projects to "close the word gap" to enable social mobility but at the same time local authorities' budgets are so tight they are having to close the very centres that would help show parents how to help. It isn't very joined up thinking."

http://www.education.ox.ac.uk/why-closing-the-word-gap-matters-new-research-finds-evidence-of-a-significant-word-gap-in-uk-schools/

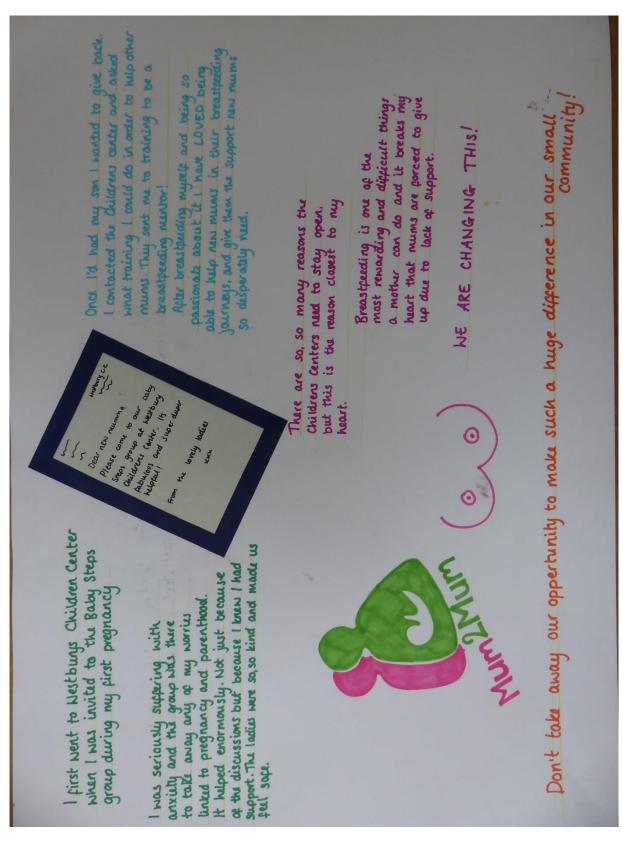
https://www.gov.uk/government/publications/improving-social-mobility-through-education

https://www.eif.org.uk/report/language-as-a-child-wellbeing-indicator/

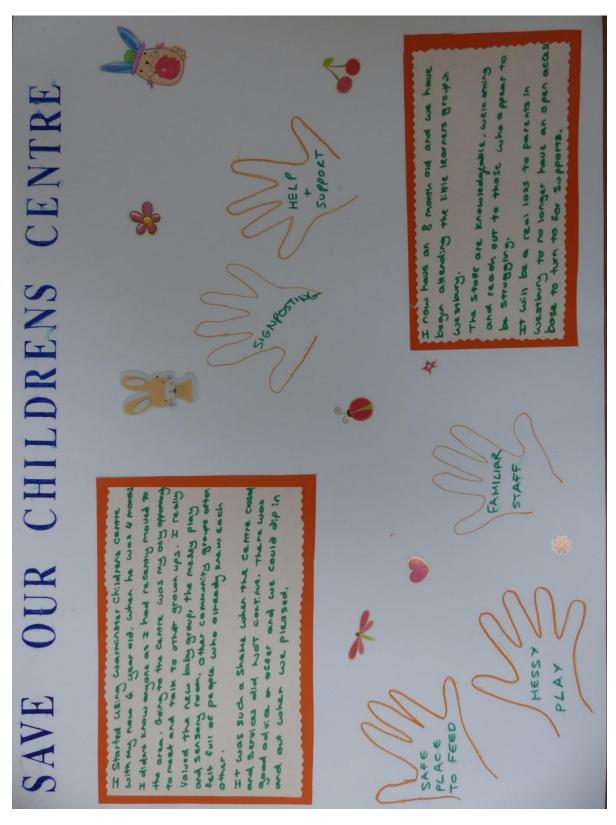
This paper highlights the importance of targeting language in SES families before 18 months. This is very much the remit of children's centres because they are key in supporting families at these earlier stages (if signposted by Health Visitors)

5) Children's Protest Poster Workshop, April 2 2019

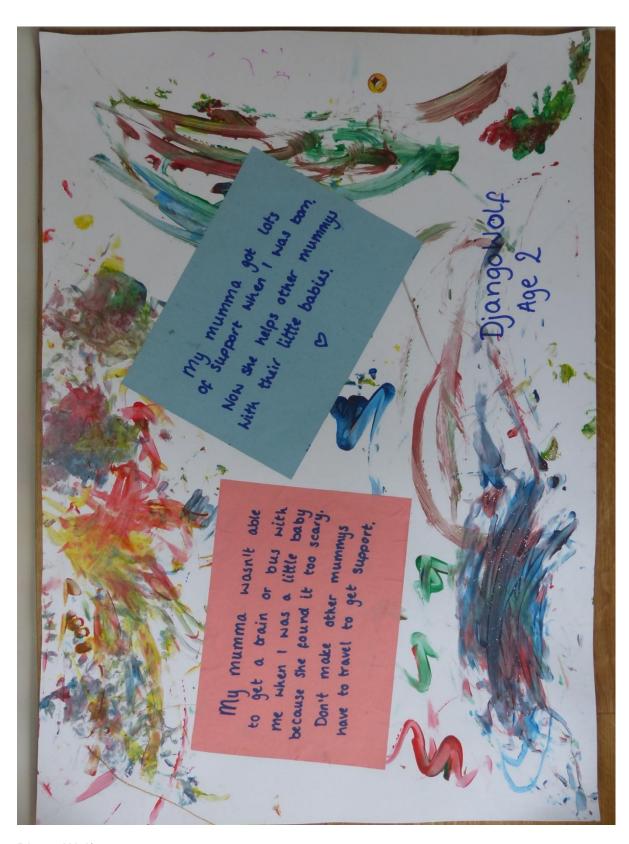
See overleaf



Hebe - 1 son, age 2



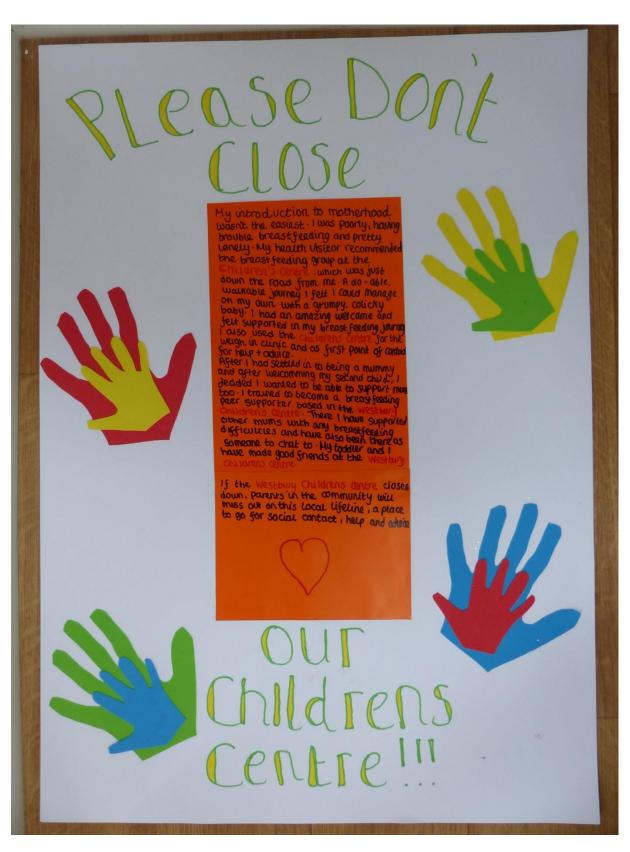
Vicky - 3 children ages 6, 4 and 8 months



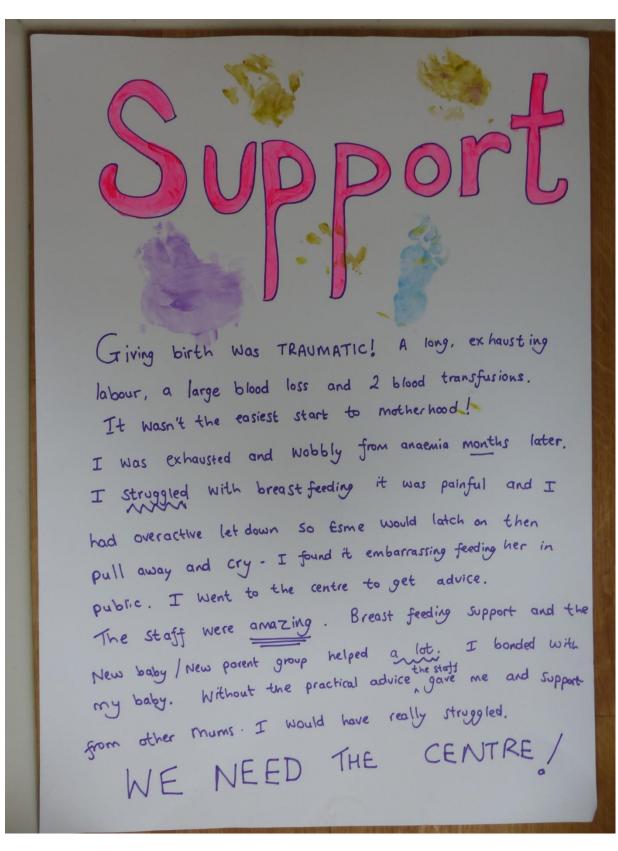
DjangoWolf, age 2



Tom, age 9 months



Carrie - 2 children age 4 and 2



Nadine – 2 children age 3 and 9 months



Shelly – 1 daughter age 4, 1 baby boy due in May





Abbie and Riley - age 10 months



Jessica – age 2



Sian – 1 daugher age 3

Appendix 5 - Sutton Report "Stop Start" Recommendations

Source: https://www.suttontrust.com/research-paper/sure-start-childrens-centres-england/

- The government should complete the long-promised review of the children's centre
 programme to confirm its national importance and overall purpose with national guidelines.
 This could stop the piecemeal local closure of centres which is creating a postcode lottery of
 provision.
- 2. The central purpose of children's centres to promote positive child and family development primarily for the 0-5 age group should be stressed. Focusing on this age group underlines the importance of the early years in child development. Linking children's centres closely to local nursery or primary schools fits closely with this developmental focus for children's centres.
- 3. Children's centres should reconnect with their original purpose. Shifting the balance too far towards referred children and families, away from open access, and merging children's centres into preventative teams working with a very much wider age group, serves a very different function and requires very different skills. It does not seem to fit well under the label of a local 'children's centre'. A good mix of children is important for social mobility and children's social development.
- 4. A national register of children's centres should be maintained which establishes minimum levels of provision for inclusion. Clear criteria of what constitutes a 'children's centre' should be established. Better and more up to date data should be collected and published nationally on all children's centres.
- Once the review is completed, the government should consider re-establishing inspections of a set of core services, to embed children's centres as a national programme, and ensure accountability and quality of service delivery.

Appendix 6

Westbury Community Area - Local Priorities 2017 - 2019

Children and young people		Community Safety		Culture	
Mental and emotional health	%99	Anti-social behaviour 7/	%6/	Affordable access to cultural activities	%09
Positive leisure time activities	22%	Protecting the vulnerable 7/	%02	Involvement in community events	22%
Child poverty	47%	Alcohol and drug abuse 4	40 %	Library use	23%
Educational attainment	43%	Highway safety 3:	38%	Diversity and social inclusion	47%
Childhood obesity	32%	Domestic violence 3	30%	Heritage and history	43%
Special educational needs and disability	78%	Social cohesion 3	30%	Participation in arts	21%
Job prospects	28%	Emergency planning 1.	13%	Venues for cultural activities	21%
Teenage pregnancy	2%				
Economy		Environment		Health and wellbeing	
Employment opportunities	64%	Fly tipping and litter 8	85%	Mental health	20%
Apprenticeships and work experience	%09	iryside	%6/	Physical fitness and activity	23%
New business creation and start ups	23%		23%	Healthy lifestyles	49%
Training and skills	49%	Recycling rates 4	43%	Support for carers	49%
Support for existing businesses	40%		19%	Obesity	47%
Inward investment	17%	Improving rights of way	19%	NHS Health checks and vaccinations	28%
Debt and financial inclusion	17%	River quality	7%	Breast feeding and post natal care	4%
				Skin cancers	%0
-1		1	Γ		
Older People		Iransport		Our Community and housing	
Social isolation and loneliness	81%	Access to public transport 7	20%	Affordable housing	%99
Dementia	21%	Road improvements 4	46 %	Deprivation and poverty	%09
Support for carers	40 %	Highway infrastructure 4	45%	Community events and activities	21%
Safeguarding the vulnerable	32%	Speeding and road safety 4.	43%	Civic pride and participation	47%
Avoiding emergency admissions	30%	Cycling and walking	40%	Volunteering	32%
Independent living	76%	Reducing car use and traffic	19%	Diversity and inclusion	23%
Positive activities	79%	Air quality 1.	17%	Homelessness	15%
Poverty	%6	Street cleaning 1	17%		

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Source: http://wiltshirejsa.org.uk/wp-content/uploads/2017/03/West-priorities.pdf

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