Frequently Asked Questions: Changes to Haringey's children's centres

1) What is the difference between a children’s centre and a “Community Access Point”? 

Children’s centres that close will be supported to become part of a network of ‘Community Access Points’. Although community access points will continue to provide some services to families, such as ‘stay and play’ sessions, health appointments, information and advice to parents, and in some cases childcare - they are different to children’s centres. Community access spaces will not be inspected by Ofsted in the same way that children’s centres are, they will not provide all the services that children’s centres offer, and they will be open for approximately 15 hours per week.

2) Who will run the community access points? 

Services provided at ‘Community Access Points’ will be coordinated by a nearby children’s centre and may be delivered by children’s centre staff, partners, or parents themselves.

3) How can you claim to be increasing access to children’s centres when you are reducing the number of them? 

Although the number of children’s centres will reduce, the range of people who will be able to access support from remaining centres will vastly increase. Currently only families with children up to five years old are eligible for the support offered at children’s centres. Under these new proposals this will increase to families with children up to 19, or 25 in the case of those with special educational needs or disabilities.

At the same time we’re also proposing to improve the way that children’s centres deliver support and services to people in their own communities, whether that’s at schools, libraries, GP practices or elsewhere. We believe this approach will provide children’s centre services to many people without them physically having to visit the centres themselves. We also think it will enable children’s centres to help more people who may need, but do not currently seek out, support.

4) How was the decision made to close some centres? 

In order to plan where children’s centres are most required we have analysed the need for early year’s support across Haringey. Using the same model which schools in Haringey use, we have divided the borough into five areas and ensured that each area has at least one children’s centres. In determining the number of centres in each planning area, and which centres to keep open, we considered the location of buildings alongside how people travel, transport links and the size of the locality. We also considered the building size and facilities, and whether they fit with our future vision for children’s centres.

The council has worked closely with parents, children’s centre staff, schools representatives and others to design these proposals.
5) **What are your proposals for childcare?**
There are no immediate changes planned the way childcare is delivered in Haringey. Where centres that are proposed for closure currently deliver childcare they will continue to do so. We will continue to plan and prepare for any childcare policy changes from central government.

6) **Why can other councils keep more centres afloat yet Haringey is proposing closures?**
The children’s centre service in Haringey as it is currently structured is not sustainable in the longer term within the current budget available. This is why we need to adopt a different model of delivery so that we can use the budget most effectively, getting the right range of services where we need them in the right way.

We believe our proposals are better aligned to the needs of all Haringey residents and will help us to continue to give every child the best start in life, as we deliver the savings from the budget over the next three years.

7) **Will I have to pay for services?**
At the moment it is not anticipated that there will be charges for activities that are a part of the core service offer.

8) **Are you looking to outsource children’s centres to private providers?**
No, this is not the current intention. The management of children’s centres will not change – where centres are managed by a school, they will continue to be managed by a school. Where centres are managed by the Local Authority, they will continue to be managed by the Local Authority.

9) **My centre is proposed for closure. Where will I be able to access alternative services?**
Locations, and details on the closest centre to those that are closing are contained within the consultation document. You can also discuss any concerns with staff at your current children’s centre.

10) **What will happen to the staff in the centres proposed for closure?**
It should be stressed that this is NOT a consultation regarding staffing structures. We will not be formalising structures and roles until we know the results of this consultation. A separate staff consultation will launch towards the end of September 2015.

If proposals are accepted, there will be a reduction in the number of management posts and an increase in the number of roles undertaking outreach and delivering early help intervention. Overall there will be a reduction in the number of children’s centre staff.
We want to work with children’s centre staff to ensure that they are supported through these times of change and uncertainty.

11) **How will older children access services at the same place as children aged 0-5?**
We are proposing to extend the services children’s centres provide, to families with children aged up to 19 (or 25 in the case of those with special educational needs). This is designed to make it easier for parents with children of different ages to access the support they need. The services that parents need may be delivered at the children’s centre, or they may be delivered elsewhere – what is important is that if a children’s centre is the first place a parent goes, they are able to get all the information that they need in one place.

12) **Who will be accountable for safeguarding at the Community Access Points?**
We will work with children’s centres and community access points to ensure that there are clear arrangements and agreements in place that promote safe practice.