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Baby Steps Review of staffing structure

Date: 25.06.2021

Report of: Liz Kirkman-Bielby, Early Start Manager

Report to: Sal Tariq, Director of Children's services

Will the decision be open for call in? □Yes ☑No

Does the report contain confidential or exempt information? □Yes ☒No

What is this report about? Including how it contributes to the city's and council's ambitions

- To seek approval from the Director of Children and Families to implement a revised staffing structure for the Baby-Steps Team.
- The proposal contributes to the City Best Council Plan in supporting families to give their children the best start in life, to maintain capacity to support vulnerable families, improve quality, effectiveness and value for money.

Recommendations

That the DOCS approve the establishment of a new staffing structure for the Baby Steps Programme / service so that the relevant practitioners can be recruited, temporary posts can be made permanent and some posts deleted.

Why is the proposal being put forward?

The Baby Steps programme is funded in a number of ways.

The Learning for Life Service is commissioned by LCC Public Health to lead and manage the Baby Steps Service.

- 1.1 Learning for Life provide one PO4 leadership post funded by Children's Centre family services
- 1.2 Leeds Teaching Hospitals Trust provide a part time midwife on secondment to the programme
- 1.3 The 0-19 service provide a 30 hour clinical lead on secondment to the service
- 1.4 Public health part fund the programme with a contribution of £162,500
- 1.5 In addition to the core Public Health funding, enhanced funding was secured for a short period and this was used to fund two additional posts.
- 1.6 The enhanced Public Health funding has now come to an end.
- 1.7 The current staffing profile is no longer compatible with the delivery needs and exceeds the reduced budget.
- 1.8 For this reason, the service needs to;
- 1.8.1 Convert 2 temporary contracts to permanent contracts,
- 1.8.2 Recruit to one Health Practitioner -Midwife Post and one administrative post which are currently vacant due to staff turnover.
- 1.8.3 The administrative post is currently being supported by the service, but the service cannot sustain this.
- 1.8.4 Delete one Family and Parenting Support Practitioner Post and one Family Practitioner / Social Worker formerly part funded by the enhanced programme because these are no longer affordable. The service had been unable to recruit to the social worker post which was a Leeds initiative and since this was not a contractual requirement of the programme the decision was made by the Baby Steps Steering group to delete this post. The remaining family practitioner post is unaffordable.
- 1.9 The new staffing proposal will remove the posts part funded by the enhanced funding and align the staff costs with the budget allocation for 2021/22.
- 1.10 Making the temporary posts permanent will save on recruitment and training costs in the long term and reduce staff turnover and meet our contractual obligations.
- 1.11 The programme has proved value for money over the 4 years of delivery and the Service and Public Health are both clear that the service should continue.

What impact will this proposal have?

Wards Affected: All		
Have ward members been consulted?	□Yes	⊠No

Delivery will not be reduced unless we are unable to recruit to the vacant posts

What consultation and engagement has taken place?

Conversations have taken place with the staff members on temporary contracts; both would like to secure permanent contracts.

Discussion has taken place with Public Health who have agreed the proposed staffing structure meets the commissioning requirements.

Finance colleagues were consulted about the financial implications of the changes in January 2021; they agreed the new proposal needed to be made as there was insufficient funding to continue with the current structure.

HR Officers have been consulted and was happy with the proposal.

This plan will be shared with the trade unions at a Learning for Life Trade Union update meeting once signed off.

What are the resource implications?

Existing assets will be used to house the realigned team

The changes will realign the staffing costs with the current budget allocation

The new structure will enable the continuation of the Baby Steps programme

The staffing structure and financial implications are below

Job Title	Grade	Contract Type	Current budget cost to service	Proposed change	Proposed cost to service
Family and Parenting Support Practitioner.	SO2 37hrs	Permanent	£40,644.99	None	£40,644.99
50452016					
Family and Parenting Support Practitioner. 50473614	SO2 37hrs	Temporary	£40,644.99	Make contract permanent	£40,644.99
Family and Parenting Support Practitioner. 50473613	S02 37hrs	Vacant	£40,644.99	Delete Post	£0
Family Practitioner- Social Worker 50463407	P03 37hrs	Vacant	£49,277.82	Delete Post	£0
Health Practitioner – Midwife 50473615	PO3 37hrs	Vacant	£49,277.82	Make contract permanent	£24,638.
Health Practitioner – Midwife 50473616	PO3 30hrs	Vacant	£36,610.99	Make contract permanent	£36,610.99
Administrator 50452017	B1 18.5hrs	Vacant	£12,192.90	None	£12,192.90
		Current Cost	£269,294.50	Proposed Cost	£154,731.87

NB the SLA funding for 2021/22 is £162,500

What are the legal implications?

This proposal will be delivered within the terms of the Baby Steps commissioning agreement

The posts which are being deleted were temporary and are not currently occupied.

The service will be open to challenge if temporary contracts continue to be extended.

What are the key risks and how are they being managed?

If the positions are not filled then the funding would need to be returned to Public Health. Seeking permission to fill the vacancies mitigates this risk

Making the temporary posts permanent avoids the risk of breaching the employments rights of the temporary staff.

Not aligning the structure and recruiting would mean that the programme would no longer be delivered in line with the licence

Does this proposal support the council's 3 Key Pillars?

⊠Inclusive Growth

This is a service for the parents who have additional vulnerabilities.

The service supports a best start for children and families

Options, timescales and measuring success

a) What other options were considered?

The service considered continuing the enhanced service and funding it from the children's centre programme but budgets were not available to do so.

The other option was to stop delivering the programme but the current success of the programme has meant that this would disadvantage our most vulnerable families

b) How will success be measured?

The service will be able to deliver the Baby Steps Programme according to the License, Service level agreement and within budget.

This service is overseen and monitored by a multi-disciplinary steering group who support and challenge the service.

c) What is the timetable for implementation?

The realignment should be achieved by the second week of October.