

Subject / Title	Active Tameside – Active Ashton
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Team	Department	Directorate
Active Tameside	All service areas	Reg Patel

Start Date	Completion Date
July 1 <sup>st</sup> 2023	

Project Lead Officer	Shaun Higgins
Contract / Commissioning Manager	Julian Jackson
Assistant Director/ Director	Ben Middleton

EIA Group (Lead contact first)	Job title	Service
Reg Patel/ Darren Driver	CEO / Area Manager	
Shaun Higgins	Director of health & Social outcomes	
Dan Higgins	Inclusion & Diversity Manger	
Chelsea Mear/Andy Taylor	Live Active Manager	

## PART 1 – INITIAL SCREENING

An Equality Impact Assessment (EIA) is required for all formal decisions that involve changes to service delivery and/or provision. Note: all other changes – whether a formal decision or not – require consideration for an EIA.

The Initial screening is a quick and easy process which aims to identify:

- those projects, proposals and service or contract changes which require a full EIA by looking at the potential impact on, or relevance to, any of the equality groups.
- prioritise when a full EIA should be completed.
- explain and record the reasons why it is deemed a full EIA is not required.

A full EIA should always be undertaken if the project, proposal and service / contract change is likely to have an impact upon, or relevance to, people with a protected characteristic. This should be undertaken irrespective of whether the impact or relevancy is major or minor, or on a large or small group of people. If the initial screening concludes a full EIA is not required, please fully explain the reasons for this at 1e and ensure this form is signed off by the relevant Contract / Commissioning Manager and the Assistant Director / Director.









1a.	What is the project, proposal or service / contract change?	Active Tameside
1b.	What are the main aims of the project, proposal or service /	To offer an opportunity for all Tameside residents to `Live Their Best Life`
	contract change?	Long term sustainability and affordability envelope for Active Tameside

1c. Will the project, proposal or service / contract change have either a direct or indirect impact on, or relevance to, any groups of people with protected equality characteristics? Where there is a direct or indirect impact on, or relevance to, a group of people with protected equality characteristics because of the project, proposal or service / contract change please explain why and how that group of people will be affected.

Protected Characteristic	Direct Impact/Relevance	Indirect Impact/Relevance	Little / No Impact/Relevance	Explanation
Age	Yes -transport link centrally			See section 3
Disability	Yes			See section 3
Ethnicity	Yes -demography of area that it serves			See section 3
Sex			No Impact	See section 3
Religion or Belief	Yes			See section 3
Sexual Orientation			No Impact	See section 3
Gender Reassignment			No Impact	See section 3
Pregnancy & Maternity	Yes			See section 3
Marriage & Civil Partnership			No Impact	See section 3

1 ditticionip					
Other protected groups determined locally by Tameside Commission?					
Group	Direct	Indirect	Little / No	Explanation	
(Please state)	Impact/Relevance	Impact/Relevance	Impact/Relevance		
Mental Health	Yes			Individuals that	
				are not able to	
				access facilities	
				within their	
				local	
				community.	
Carers	Yes			Individuals that	
				are not able to	
				access facilities	
				within their	
				local	
				community.	
Military Veterans	Yes			Individuals that	
				are not able to	
				access facilities	
				within their	
				local	
				community.	









			he project, proposal c	Individuals that are not able to access facilities within their local community.
service/contract change or which it may have relevance to?				
(e.g., vulnerable residents, isolated residents, low-income households, those who are homeless)				
Group	Direct	Indirect	Little / No	Explanation
(Please state)	Impact/Relevance	Impact/Relevance	Impact/Relevance	

Wherever a direct or indirect impact or relevance has been identified you should consider undertaking a full EIA or be able to adequately explain your reasoning for not doing so. Where little / no impact or relevance is anticipated, this can be explored in more detail when undertaking a full EIA.

1d.	Does the project, proposal or service / contract change require	
	a full EIA?	Yes, with the impending closure
1e.	What are your reasons for the decision made at 1d?	The closure of Active Ashton will mean several protected characteristic groups are likely to be impact disproportionately in a negative way.  With the present financial cost of living crisis and the current utility increase across the estate Active Tameside needed to look at the rationale across the full estate which will look at the long-term viability of an aging building to make a balanced budget.  At no point are we looking to reduce provision or opportunity for access to all residents due to other facilities within a 2.5-mile radius.  In parallel with the EIA Active Tameside is currently undertaking a review of concessionary pricing in partnership with TMBC for implementation September 1st, 2023.  The report will ensure that all characteristic groups are catered for at Active Tameside Centres through considered programming.  The following full EIA will document the evidence of the impact and the steps that can be put in place by Active Tameside to mitigate against the impacts.









## If a full EIA is required, please progress to Part 2. PART 2 - FULL EQUALITY IMPACT ASSESSMENT

# 2a. Summary

Active Tameside is currently undergoing a period of sustained financial pressure following the COVID 19 pandemic and recent market forces pressure including the circa 200% rise in utilities and ongoing running costs. During this time, supported by the council Active Tameside has not needed any extra funding from the council above and beyond the management fee that was agreed in 2021. It is also clear that due to the financial challenges faced by TMBC, they are not able to further support Active Tameside financially during this period.

For 23/24 we have budgeted that Active Ashton would cost circa £200,000+ annually to keep open, this is due to the fabric and age of the building which is not fit for purpose to run a modern-day leisure facility. This was highlighted in a council commissioned report where it was recommended that Active Ashton be considered for replacement as noted in the built estate strategy.

The only viable financial option is to proceed with the closure of Active Ashton, this will enable the whole business to continue to deliver a positive impact on the population of Tameside, ensuring Active Tameside remains financially viable and able to deliver services.

This will have many impacts on the local population but with other centres in the vicinity we feel we can mitigate them short term but eventually, this may have a greater impact in terms of Active lives and healthy life expectancy.

The current service that Active deliver at the centre will impact a range of groups.

Additional to this will be the potential loss of users which is mitigated by offering spaces and times for similar activities across the existing estate the effected numbers are listed below.

- 1048 current 4-10 years on learn to swim lessons.
- 16 schools accessing education swimming on site- total 500 young people per week.
- 1534 Gym Members that will have 9 months that will be able to access any other site for this period before changing their home club.
- Live Active service has 2100 active members, from these 155 clients from the OL6 postcode and 94 clients from OL7 postcode are currently active members.
- All other aquatic activity has been relocated including the women's only session on Sunday which will be the same time and day at Active Hyde (3.1 miles)

The approach to the closure in terms of redistribution of services, the various proximities to other centres etc essentially the general mitigation for everyone before we consider specific mitigation, or the various groups as identified below.

Only viable option is to proceed with the closure of Ashton this EIA will help to ensure that the most in need disadvantaged groups are able to access other facilities across the estate. Although for the local community and health and wellbeing benefits leaving Active Ashton open would have a positive impact on the community which it serves.









Travel infrastructure around Active Ashton ensure a large proportion of the user travel in by public transport and although other centres will cover activity some don't have the travel infrastructure that's is comparable to Active Ashton.

This EIA concerns the development of a new approach to Facilities & programming for Active Tameside, and this seeks to redesign and realign budget constraints, utility and cost uplifts & health and care services to provide a joined-up way of working to ensure that all services are accessible for Tameside residents and that Active Tameside continues to be an ongoing concern for the good of the local community.

With this approach Active Tameside will continue to work with key stakeholders and partners to conquer inactivity within the borough.

It is proposed that any future service model will have the following key principles at its heart and link to TMBC strategies for starting well, living well, aging well, and working well.

- Have a universal reach but focus for sections of the community and demographic areas where the needs are greatest, and health is poorest.
- Builds on the assets in communities (Leisure Centres) recognising the contribution they can make to improve health and wellbeing.
- Recognises that many people never access services and plans to provide interventions that are more acceptable and attractive to these people.
- It will be founded in good social marketing intelligence using key data and Tameside Insight.
- Include investment in environmental/ social interventions which will shape the landscape in which people are attempting to change their lifestyles.
- The offer will be tailored to individual's needs and all aspects of health and wellbeing lifestyle support will be available via simple access points.
- The approach will encompass both mental and physical health, social isolation for all Tameside residents.
- It will be linked and aligned to Tameside Neighbourhood Offer to ensure that social economic inequalities which underpin many health inequalities are able to be addressed as part of a holistic approach.
- There will be unification of services wherever possible to free up resources and ensure that local resources are utilised to maximum effect.
- It will have four key elements, a service element, stronger communities' element, mental health and wellbeing and behaviour change programme which will work synergistically to support all activities.

Tameside Adult Activity Levels November 2019-20 | Greater Manchester Moving (gmmoving.co.uk)

Active Tameside can offer a reduced level of services within other facilities but because of the displacement of some of the public programming which will be due to the numbers of people that will be affected.







#### 2b. Issues to Consider

### **Meeting our Equality Duty**

In considering the Equality Act and the wider programme to conquer inactivity in Tameside, Active will lead to a significantly improved offer for Tameside residents with resources being directed at marginalised groups, community groups and integrated services which will provide a single point of contact for residents needing more structured support to be active, change behaviour and live their best life. This will ensure that we have a significant leisure offer across Tameside despite the rationale to reduce facilities.

#### **Finance**

## The offer will predicate on the closure of Active Ashton for reason stated above.

Generic commercial pricing which will ensure long term sustainability across all Active centres.

Generic concessionary pricing scheme aligned to strategic aims of TMBC.

Demographic specific programming and pricing interventions (Asian swimming, women's only, LGBTQ+, Looked after children, veterans)

The approach has been informed and developed by Active Tameside board in association with senior officers to identify a recovery plan to ensure sustainability of Active Tameside.

### Consultation, engagement, and feedback

The approach has been informed and developed by Active Tameside and TMBC in late March 2023. Additionally, to this a consultation was not possible due to time constraints related to the forecasted savings and viability timeframe.

Tameside residents have seen an improvement over the last 10 years in levels of physical activity but also healthy life expectancy due to the work carried out in partnership with our key stakeholder in Tameside due to our diverse offer to all our population through the life course.

Demographics, please see section 3 below









Active Ashton - Floor Appendix F - Active Plans as Existing (G&S Ashton.pdf

Lifecycle - Active Ashton.xlsx

Maintenance Register - Active Ashton.xlsx

#### Section 3 - Impact

### IMPACT- Impact of changes in the provision of programming for Active Tameside

For males in Tameside Life Expectancy is 75.8 and Healthy Life Expectancy is 61.6, compared to 80.5 for Life Expectancy and 58.2 for Healthy Life Expectancy for women.

Nationally these numbers are higher; male Life Expectancy and Healthy Life Expectancy are 78.7 and 63.1 respectively. Female Life Expectancy and Healthy Life Expectancy are 82.8 and 63.9 respectively.

70.3% of adults in Tameside are classified as overweight or obese (higher than the 63.5% national number); 35.95% of children in year 6 are classified as obese (higher than the 32.5% national number); and 32.4% of the population are inactive (again, higher than the 27.2% national number)









Ashton has a higher proportion of residents of Indian and Pakistani ethnic background compared to Tameside and England averages.

Tameside has a slightly older population than average, the highest proportion of residents being between 50-54, (7.19%, 16,604 residents), compared to England where the highest proportion are between 30-34 (7.0%)

## Ashton-under-Lyne Age Statistic

Age Band Proportion

4 & under 7.33%

5 - 9 years 7.23%

10 - 15 years 8.69%

16 - 19 years 4.75%

20 - 24 years 6.54%

25 - 34 years 16.08%

35 - 49 years 20.43%

50 - 64 years 16.7%

65 - 74 years 7.33%

75 - 84 years 3.84%

85 years & over 1.09%

# Ashton-under-Lyne Health Statistic

7.6% Poor Health (Self-Reported) 6th Highest in Tameside, average 7.3%)

22.2% Limiting Long Term Illness or Disability (Tameside Average =20.9%)

135 per 100,000 u75 population Under-75 CVD Mortality Rate (DSR) (9th Highest in Tameside, average = 86.4)

Residents of Ashton have a higher level self-reported poor health and limiting long term illness or disability compared to the Tameside average. Male and female life expectancy within the ward are similar to the Tameside average. Levels of diagnosed CHD and CKD are higher within Ashton Waterloo population. Premature mortality rates for males are substantially elevated within the ward, whereas those for females are lower than average.

Area	VG	G	F	В	VB
St Peter's (Tameside)	44.63%	32.63%	14.89%	5.89%	1.96%
Tameside	45.31%	33.71%	14.37%	5.12%	1.49%
Northwest	47.73%	32.71%	13.36%	4.77%	1.43%
England	48.49%	33.71%	12.65%	3.98%	1.17%

VG = Very Good, G = Good, F = Fair, B = Bad & VB = Very Bad

Source: Census 2021 (Nomis/ONS)



















THE COUNCILS

Health-Deprivation-P IMD-Percentiles ercentiles - Map.png Map.png

Income-Deprivation-Percentiles - Map.pngCOUNCILS SPORT AND LEISURE

Please see above detail that underlines the impact the closures will have on the community, but at this present time we are able to plan mitigation that in the short term it will have minimal impact.

### Age

Older people are actively encouraged to access services and facilities through an engaging programme and pricing model.

The proactive approach to risk stratification should ensure older people, those with long term conditions, will be offered additional service. Some service provided across the portfolio of facilities are defined as being specific to older people.

Age is currently considered within the current concession pricing policy.

- 1048 current 4-10 years on learn to swim lessons.
- 16 schools accessing education swimming on site-total 500 young people per week.
- 1534 Gym Members that will have 9 months that will be able to access any other site for this period before changing their home club.
- 35 Classes with 500 attendance per week -only able to place 6 of the current classes into other centres at the same day and time slots. (Additional options and maximum occupancy will be reviewed)
- Live Active service has 2100 active members, from these 155 clients from the OL6 postcode and 94 clients from OL7 post code are currently active members.

#### Gender

The current services are equally accessible to both male and female users and this is born out by usage data. The service model will enable Active Tameside to identify areas of service provision that need added resources to maximise reach, input and capacity which is more equitable access for men and women.

No impact – membership and service uptake are similar across all active travel sites, there is anticipated to be no difference in gender in the uptake of the redistributed services.

### **Disability**

In the current provision for community health development, there is an objective to engage with hard-toreach groups such as older people; people with disabilities or additional needs; BME communities and in priority neighbourhoods such as deprived communities. People with disabilities accessing these services will be impacted in the same way as other service users. None of the services are specifically defined as being for people with disabilities however services will have suitable resources and materials adapted for people with disabilities. Due to its age and construction method Ashton cannot have key equipment installed such as a pool hoist, unlike every other pool within the estate.

## Ethnicity/Race

The current provision for community services, there is an objective to engage with hard-to-reach groups such as older people; people with disabilities or additional needs; BME communities and in priority neighbourhoods such as deprived communities. The current provision provides specialist services based on





ethnicity provided by Active Tameside at specific centres (Ashton & Hyde) Both the organisation and service users have contributed to the consultation around the new & existing current service offer. This approach to reducing inequalities and focusing on supporting vulnerable groups and priority groups such as BME communities will be a key principle in any new proposals, the new Stronger Communities programme in partnership with TMBC.

#### Sexual orientation.

Currently all wet change facilities are village style with mixed showers and toilets, except for Active Ashton which still has specific shower and toilets facilities in wet changing room due to age of the building, however accessible changing facilities are available at this site for all genders. Sites that currently have unisex toilets include Active Medlock, Copley, Hyde and Tameside Wellness. All sites have accessible toilet and changing facilities that can be accessed by either Sex.

### Marriage or civil partnership

Active Tameside is non-judgmental in terms of this characteristic and no service or activity requires this information and currently we don't ask and will not ask for in the future.

## Religion/belief

Appropriate space in the new wellness centre that can act as a prayer room. We currently make a space available for all clients or staff at relevant times to enable them to follow their religious practices.

Ladies only swimming at Active Ashton will stop and will be relocated at Active Hyde.

Allow individuals to follow religious beliefs when accessing swimming and sauna in terms of dress codes (Find attached normal operating procedures for all sites) This is displayed in several languages at all reception areas.

Adaptation to suit all religions are made across all centres but at no expense to safety to individuals or others.

In terms of access at times of fasting for certain client groups we provided alternative opportunity to access facilities.

### Gender reassignment.

Active Tameside has a range of facility stock that has wide ranging scope in terms of age of designs. In the latest development unisex individual WCs and cubicles have been installed to remove any concerns. Active Ashton centre has a mixture of specific changing and toilet facilities which are aging and in need of constant repair and upkeep. The older stock has accessible toilets at each site and appropriate spaces for all.

## **Pregnancy / Maternity**

Current delivery of products and services ensure open access for all clients, including breastfeeding policy for parents at all public facilities etc.

## Section 4 - Proposals & Mitigation

### **PROPOSALS & MITIGATION**

School swimming will be moved to various sites across Tameside, but schools will need to absorb the additional cost for transport as Active Ashton has a large percentage of walking schools.

Move and play and other early years session including little ducks will be incorporated into programmes across the estate. This could impact new mums/parents that travel on public transport and thus impact on school readiness.









Transport issues – we will have signposting on the website for members who travel to Ashton currently on how they get to other sites.

Socio economic deprivation – review of Active leisure pass that will go live in September 2023

Moving of ladies' swim to Active Hyde on the same day but the impact will be the travel to Hyde which is around 3.1 miles.

Disability - redistribution of Live Active 200+ members which will be impacted by travel across the borough to other centres.

As much as we can mitigate against many of the impact we will recommending to commissioner a strategic built estate review as Ashton has one of the most deprived and ethnically diverse communities in Tameside which would benefit from Active Tameside services in the heart of the community.

We will monitor impact of closure taking into consideration inequalities groups to ensure the closure is not felt more by one group – This will be done through the outcome's framework.

Active Tameside is to provide support to people to live their best life by addressing the factors that influence their health & wellbeing enabling them to be independent and resilient and support both themselves and people around them.

This will run alongside Active Tameside main offer that maximises the three key revenues streams of health & Fitness, swimming, and Gymnastics memberships.

## Below is our strategy (2019, Tameside wellness centre) which will be affected by the closure in the short, medium, and long term.

The key principle is a person centred, not programme focused approach. We also want to develop support based on a community approach, building capacity to live healthy lives by addressing the factors that influence health and wellbeing. We want to provide early intervention services that are based on staff with the skills, knowledge and confidence to support people to change and build long-term relationships with our community and change behaviour to live a more active life.

It is proposed that any future service model will have the following key principles at its heart.

- Have a universal reach but focus on the communities where the needs are greatest, and health is poorest.
- Build on the assets in communities recognising the contribution that local people can make to improve health and wellbeing.
- Recognises that many people never access services and plans to provide interventions that are more acceptable and attractive to these people.
- It will address health inequalities by incentivising service providers to actively seek out and engage with those who find it hardest to change their unhealthy lifestyles.
- It will be founded in good social marketing intelligence using JSNA and Tameside Insight.
- It will include investment in environmental/ social interventions which will shape the landscape in which people are attempting to change their lifestyles.
- The intervention mix will be tailored to individuals needs and all aspects of health and wellbeing lifestyle support will be available via simple access points.









- The approach will encompass both mental and physical health.
- It will be linked and aligned to Tameside Neighbourhood Offer to ensure that socio economic inequalities which underpin many health inequalities are able to be addressed as part of a holistic approach.
- There will be unification of services wherever possible to free up resources and ensure that local resources are utilised to maximum effect.
- Opportunities to engage voluntary sector organisations within the delivery system will be fully exploited wherever the opportunities present themselves with a clear vision to shift more resource and community delivery into the third sector.
- It will have four key elements, a service element, Stronger Communities element, Mental Health and Wellbeing and Behaviour Change programme which will work synergistically to support each other's activities.

We are therefore proposing a service model that is delivered through four commissioned work programmes:

### Integrated Wellness Service giving support with healthy lifestyles.

The Service providing a range of advice, guidance and tailored support delivered in the heart of our communities. Free support will be provided around key lifestyle issues through a single point of access to improve health including:

- Health & Wellbeing
- mental wellbeing
- managing your own health and conditions
- inclusion

## Everybody Can programme -All current programmes will be relocated across the estate.

A range of programmes and services that remove barriers to that ensure everyone is given a chance to reach their potential. -range of services, looking at health & wellbeing, social development and a holistic person-centred approach for young people and adults that enable all to reach their potential.

- Disability Programme Children and young people and adults have access to a range of community and holistic programmes across Active Tameside.
- Developing a pathway from education through to Employment and volunteering opportunities for all people with a disability or additional needs in Tameside through the life course increasing wellbeing resilience.
- Providing Adult day care service that provides a varied programme of both physical activity and social interaction that empowers clients to develop a holistic overview to wellbeing and independence.
- Promotion of the 5 ways to wellbeing amongst the population and targeted groups and settings such as older people and workplaces.

Going forward the aim is to embed wellbeing promotion throughout all services captured within the Offer and ensure people of all ages understand the 5 ways to wellbeing and take up opportunities to take up 5 ways in their daily lives.

#### Live Active - All current programmes will be relocated across the estate.

The service aims to improve health and wellbeing by working with various members of the population with a range of health complaints.

- Consultations and planned approach to improving activity levels.
- Developing a pathway for clients that includes an introduction to activity, low level classes, social interactions and key touch points for clients.
- Providing bespoke memberships offers that make the service accessible for all & empowers clients to develop a holistic overview to wellbeing.
- Promotion of the 5 ways to wellbeing amongst the population and targeted groups and settings such as older people and workplaces.





## Active Education - All current programmes will be relocated across the estate.

The service delivers to over 7000 schools' children on a weekly basis, 13 weeks of high-quality holiday provision across several Active Tameside sites.

Early years –a range of programmes that are structured to ensure young people aged 0-5 years start well and improve school readiness in Tameside.



Safeguarding Children Policy.pdf

## Swimming programmes -All current programmes will be relocated across the estate.

- SEN classes and disability one to one lessons for those with additional needs
- Parent and tot sessions for under 5years old Ducklings/wally walrus session
- Little ducks for children aged 3-5
- Learn to swim for aged 4+
- Swim academy and clubs for those that have progressed through the learn to swim schemes.
- Adult lessons

## Health & Fitness Memberships-All current programmes will be relocated across the estate.

- Different types of membership packages available
- Peak and off-peak packages available
- High risk clientele is given extra support through the Live Active Service
- Variety of different types of classes available throughout the day such as cardio, mind and body, and strength and conditioning.

### Concessions pricing and site-specific programmes

- Continue to honour current Active+ members and concessions.
- Looked after Children offer continue with existing offer to cared for children -700 young people in the borough.



leisure pass 2023.docx

other document related to the impact of the facility closure.











Outcomes Active Education everybody can framework metrics 2Strategy 18-21 (8).dcstrategy new brandi branding.docx Strategy new brand

early years New Health & Wellbeing

## Section 5 - Monitoring

### MONITORING PROGRESS

Julian Jackson – Director of Place – commissioner

This is done via Active Tameside outcomes framework and quarterly reports and performance meetings.







Issue / Action	Lead officer	Timescale
Required	Required	Required
Ensuring equitable access to services		Quarterly
Ensuring positive outcomes are maintained.		Quarterly
Any negative equalities impact of the proposal is continuously identified throughout the procurement and contract period – any negative impacts are identified, and appropriate action is taken to address these.		Ongoing

Signature of Contract / Commissioning Manager	Date
Signature of Assistant Director / Director	Date

Guidance below to be removed from the completed EIA template submitted to Executive Board, Executive Cabinet or Strategic Commissioning Board (SCB)

1c. Will the project, proposal or service / contract change have either a direct or indirect impact on, or relevance to, any groups of people with protected equality characteristics? Where there is a direct or indirect impact on, or relevance to, a group of people with protected equality characteristics because of the project, proposal or service / contract change please explain why and how that group of people will be affected.

Protected Characteristic	Direct Impact/Relevance	Indirect	Little / No Impact/Relevance	Explanation
Age	<b>✓</b>			Ashton has a higher of older people that travel in on public transport to the centre
Disability		✓ 		Some users may be disabled but will have opportunity to attend other centres.
Ethnicity		✓		users come from a range of ethnic backgrounds within the locality.







Sex		<b>✓</b>		Active centres			
Delinian on Delinf		<b>✓</b>		aren't sex specific			
Religion or Belief		•		Ashton has a			
				diverse user group			
				and looking at the			
				local demography			
				this will impact.			
Sexual Orientation			<b>√</b>				
Gender			✓				
Reassignment							
Pregnancy &			✓				
Maternity							
Marriage & Civil			✓				
Partnership							
NHS Tameside & Glossop Clinical Commissioning Group locally determined protected groups?							
Mental Health	$\checkmark$			Physical activity is			
				good for individuals			
				who suffer from			
				mental health			
Carers		✓					
Military Veterans		$\checkmark$					
Breast Feeding		$\checkmark$		provide services to			
				pregnant women			
				and new mothers			
Are there any other groups who you feel may be impacted by the project, proposal or service/contract change or which it may have relevance to?							
	esidents, isolated res			vho are homeless)			
Group	Direct	Indirect	Little / No	Explanation			
•	Impact/Relevance	Impact/Relevance	Impact/Relevance	LAPIANATION			
(Please state)	iiipacureievance	•	iiipacurteievance				
Lone Parents		✓		users may include			
	<u> </u>			lone parents			
Disadvantaged	✓			support the most			
families				disadvantaged			
				families, with an			
				aim to reduce			
				inequalities in child			
				development and			
				school readiness.			



