



Subject / Title				Family Hubs and Start for Life Programme		
Team Departme			Department		Directorate	
Early Years, Early Help and Partnerships Early			Early Help and Partnerships		Children's Services	
Start Date				Completion Date		
17/01/2023				01/03/2023		
Project Lead Officer Lorraine Hopkins, Head of Ser			opkins, Head of Service	ce - Early Help, Neighbourhoods and Early Years		
Contract / Commissioning M	anager	Lorraine H	opkins, Head of Service	lead of Service - Early Help, Neighbourhoods and Early Years		
Assistant Director/ Director		Paula Sum	ner, Assistant Director of Early Help and Partnerships			
EIA Group (lead contact first)	Job title	е			Service	
Lorraine Hopkins	Head of	Service - E	arly Help, Neighbourho	ods and Early Years	Children's Services	
Paula Sumner	Assista	nt Director o	of Early Help and Partne	rships	Children's Services	
Roseanna Wain-Basaran	Policy C	Officer			Policy, Performance and Intelligence	
Charlotte Lee	Populat	ion Health F	Programme Manager		Population Health	

#### 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 if and 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.



### **APPENDIX 1**

1a.	What is the project,	
	proposal or service /	Family Hubs Programme and Start for Life Offer
	contract change?	





1b.

Tameside MBC has been awarded £3,295,000 of funding from the Family Hubs and Best Start for Life Fund (a joint venture by the Department for Education and Department for Health and Social Care) for delivery over three years (2022-25) to work with partners to establish Family Hubs across Tameside. A breakdown of spending allocations is shown below.

What are the main aims of the project, proposal or service / contract change?

	Department for Education Funding Allocation							
		2022-23	2023-24		2024-25			
Strand	%		Lower	Upper	Lower	Upper		
Family Hubs Programme	19.4%	161,408	263,064	274,062	221,160	231,442		
Family Hubs Capital	4.9%	40,768	66,444	69,727	55,860	58,475		
Parenting	16%	127,840	207,468	217,719	174,420	182,529		
Home-Learning Environment	8%	71,552	116,616	113,840	98,040	102,598		
Parent-Infant Relationship and Perinatal Mental Health	31%	259,584	423,072	443,976	355,680	372,216		
Infant Feeding	17%	139,776	227,808	239,064	191,520	200,424		
Publishing Start for Life Offer and Parent Carer Panels	3.7%	30,784	50,172	52,651	42,180	44,141		
Totals	100%	831,712	1,354,644	1,411,039	1,138,860	1,191,826		

The range of services delivered through the Family Hubs includes as examples but not exclusive:

- Antenatal and Postnatal Support Midwifery Clinics, Healthy Child Clinics, Baby Social Groups, First Foods Session, Antenatal and Postnatal Parenting Support – Solihull Parenting Courses, Baby Incredible Years. Targeted Antenatal/Postnatal Support. Strengthening Families project. Health Promotion – Safe Sleep, ICON. Infant Feeding Support – UNICEF Gold Accredited, HomeStart.
- Early Help Locality Teams— Part of the multi-agency safeguarding hub (Bridge). Early Help Practitioners allocated as lead professionals. Family Partnership Model Helping Process. Early Help Assessments, Team Around Family, Family Group Conference, Healthy Young Minds.
- **Team Around School** Neighbourhood Co-ordinators, Multi Agency Safeguarding Hub.
- Youth Services 1:1 support. Targeted project work, youth crime, risky behaviours. Universal youth provision,



Characteristic

Relevance

#### **Tameside Council Equality Impact Assessment (EIA) Form**

	youth clubs, YJS, Active Tameside, Parenting Co-ordinators, Groundwork, Tameside Arts.  • Relationship Support – Parental Conflict GM Toolkit Intervention, Bridges, Tameside Women's Centre.  • Parenting Support – Solihull online parenting courses, Incredible Years and Triple P for Teenagers, Riding the Rapids, CABS, The Leap Centre, Infinity Initiatives, Action Together.  • SEND provision - Early Support and Portage, Neurodevelopment Pathway, ISCAN, OKE.  • Adult and Child Mental Health Support – PIMH Pathway, Thrive, TOG Minds.  • Strengthening Families – recurrent care proceedings and vulnerable parents.  • Welfare Rights Service – debt and welfare advice services  Family Hubs will take a hub and spoke model, with hubs being present in each of the four neighbourhoods. Family Hubs will operate over the same footprint as children's centres, providing joined up support to families with children and young people aged 0-19 (up to 25 with special educational needs and disabilities).  The North Family Hub will be located at St Peters Children Centre, serving Ashton Hurst, Ashton Waterloo, Ashton St Michael's and Ashton St Peter's wards. There will be spokes at Oxford Park and Tameside One and Ashton Library.
	The East Family Hub will be located at Ridge Hill Children Centre, serving Mossley, Stalybridge North, Stalybridge South, Dukinfield Stalybridge and Dukinfield. There will be spokes at Staylbridge Civic Hall, Dukinfield Library and Mossley Children Centre.
	The South Family Hub will be located at Hyde Flowery Children Centre, serving Hyde Newton, Hyde Godley, Hyde Werneth and Longendale. There will be spokes at Hattersley Hub & Library and Hyde Town Hall.
	The West Family Hub will be located at Greenside Children Centre, serving Droylsden West, Droylsden East, Audenshaw, Denton West, Denton North East and Denton South. There will be spokes at Wellness Centre and Denton Town Hall.
1c. Will the project, proposal or ser protected equality characteristics?	rvice / contract change have either a direct or indirect impact on, or relevance to, any groups of people with
Where there is a direct or indirect in	mpact on, or relevance to, a group of people with protected equality characteristics as a result of the project,
	ge please explain why and how that group of people will be affected.
Protected Direct Impact / Relevance I	Indirect Impact / Little / No Explanation

Impact/Relevance





<del>)</del>	x		In Tameside, there are 231,063 people in total. The total breakdown bon age is shown below.						
		Census 2021							
		Age Group	% Tameside	% England and Wales					
		0-9	12.3	11.3					
		10-19	11.8	11.6					
		20-29	11.6	12.7					
		30-39	14.0	13.7					
		40-49	12.6	12.7					
		50-59	14.2	13.8					
		60-69	10.8	10.7					
		70-79	8.5	8.6					
		80-89	3.6	4.0					
		90+	0.6	0.8					

eside. nder 15 years.

The age demographics differ by neighbourhood, with the North neighbourhood having the highest proportion of residents aged 0-19 (26%). followed by the South (24.9%), East (23.5%), West (22.6%).

The North and the South Neighbourhoods have the highest percentage of households with children (42.4% and 41.4%, respectively), followed by the East (40.3%) and the West (39.5%). Therefore, there may be an increased demand for services from Family Hubs in the North and South.

The Family Hubs and Start for Life programme is a place based project which offers support to families with children from age 0-19 or up to 25 for those with special educational needs. Therefore, there is a direct impact on those aged 0-25. There will also be a direct impact upon family members who may be any age given that whole family support will be provided as part of the programme.

Data for the ages of carers attending children's centres is recorded therefore this can provide an indication of other age groups which may be accessing





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th ce	est has ted by the 2021 Ced disabled	nsus (2021), the East has ity (20.44%), followed by the considered to be disable their day-to-day activities "li	atest cer disabilit (19.53% ents are	Based on the residents with (20.04%), We Tameside res





		find their day-to-day activities "limited a lot".  14.2% of children in Tameside are identified as having a Special Educational Need or Disability compared to 12.3% of children in England (2021/2022).  2.1% of children have and Education, Health and Care Plan (EHCP) compared to 3.9% of Children in England. Although lower than the national average this figure is rising. 13% of Tameside children have an Education, Health Care Plan due to difficulties arising from their Social, Emotional and Mental Health (2021/2022).  As access to family hubs is extended up to age 25 for children with special educational needs and disabilities, the family hubs and start for life programme will be accessible to families with disabled children until the child reaches 25. Buildings used as Family Hubs and Spokes will be investigated to identify whether they are accessible for disabled residents. Head of Service for Early Help, Neighbourhood and Early Years Service has provided assurances as to the accessibility of Family Hub and spoke locations.
Ethnicity	X	Family Hubs and the Start for Life Programme are aimed at everyone, regardless of ethnicity. However, there are inequalities of outcome for children from minority ethnic groups, therefore it is vital that family hubs are designed to help all families deal with challenges.¹  In terms of neighbourhood demographics at Family Hub locations, the North Neighbourhood has the most ethnic diversity, followed by the South, West and East. Research also suggests that areas with the highest BAME populations in Greater Manchester are often those with the highest child poverty rates.²  In the North Neighbourhood, 71.95% of people identify as White, 21.20% of people identify as Asian, Asian British, or Asian Welsh, 3.26% identify as Black, Black British, Black Welsh, Caribbean or African, 2.15% identify as Mixed or Multiple ethnic groups, 1.44% identify as another ethnic group. The North also had the highest proportion of people identifying as 'White: Other White' (3.96%).

<sup>&</sup>lt;sup>1</sup> Improving the way family support services work for minority ethnic families | Early Intervention Foundation (eif.org.uk)

<sup>&</sup>lt;sup>2</sup> Poverty-monitor-child-poverty-and-ethnicity-table.pdf (gmpovertyaction.org)



#### **APPENDIX 1**

### Tameside Council Equality Impact Assessment (EIA) Form

The North Neighbourhood also has both the highest proportion of resident's who's main language is not English and cannot speak English well (2.97%) and who'd main language is English and cannot speak English (0.63%) in Tameside.

In the South Neighbourhood, 85.89% of people identified as White, 10.05% of residents identified as Asian, Asian British or Asian Welsh, 1.51% identified as Black British, Black Welsh, Caribbean or African, 1.88% as Mixed or Multiple Ethnic Groups, 0.87% identified as another ethnic groups. In the South, 1.28% of people do not have English as their first language and cannot speak English well and 0.27% of residents cannot speak English. In the West Neighbourhood, 89.25% of people identify as White, 4.49% identify as Asian, Asian British, or Asian Welsh, 2.81% identify as Black, Black British, Black Welsh, Caribbean or African, 2.64% identify as mixed or multiple ethnic groups, 0.82% identify as another ethnic group. 0.57% of people within this area cannot speak English well and 0.27% cannot speak English.

In the East Neighbourhood, 92.65% of people identify as White, 3.53% of people identify as Asian, Asian British, or Asian Welsh, 1.51% of people identify as Black British, Black Welsh, Caribbean or African, 1.78% of people identify as mixed or multiple ethnic groups, 0.53% of people identify as another ethnic group. 0.57% cannot speak English well, 0.10% of people cannot speak English at all.

In the North 12.69% of those identifying as Asian identify as Pakistani and 2.52% identify as Bangladeshi, in the South 7.87% identified as Bangladeshi.

Nationally, poverty rates for Bangladeshi and Pakistani ethnic groups are higher than for all other ethnicities. Poverty rates were also significantly higher for Black ethnic groups and people from Other Asian backgrounds than white groups.<sup>3</sup> Therefore, the family hub and Start for Life Offer in each locality will need to ensure that it meets the needs of their demographics, recognising multiple disadvantages faced by particular groups. Recognising that areas with higher levels of ethnic diversity in Tameside tend to have a slightly higher percentage of residents whose main language is not English

<sup>&</sup>lt;sup>3</sup> uk poverty 2023 - the essential guide to understanding poverty in the uk 0 0.pdf (jrf.org.uk)





and cannot speak English well, family hubs in such neighbourhoods will have to take steps to remove barriers to understanding and access e.g.

Ethnicity	Greenside	Ridgehill	Hyde	St Peters
African	80	7	43	131
Bangladeshi	9	7	238	85
Caribbean	6	4	4	7
Chinese	80	660	22	29
Gypsy Roma	0	0	0	1
Indian	18	7	28	132
Mixed white/Black African	12	4	4	13
Mixed white/Black Caribbean	25	10	8	5
Mixed white/Asian	6	8	13	18
Pakistani	55	660	57	628
white British	3438	2688	4452	3021
white Irish	13	11	7	7
white other	57	42	70	225
Any	9	1	2	4
Any other Asian background	57	16	50	96
Any other Black background	25	10	23	19
Any other Ethnic Group	53	27	85	25
Any other Mixed background	25	12	25	39
Any other White background	16	4	11	5
Information not available	94	45	281	240
Information not declared	265	123	374	218
Left Blank	163	105	156	150

through translation services.

Latest available data (2022) for the ethnicity of Children's Centre users is available below:





Sex	X	Family Hubs and the Start for life programme are available to peop
		regardless of sex or gender.
		However, data from Children's Centres shows service users a
		predominantly women. For instance, at St Peter's Children's Centre 360
		women and 1424 men used the centre in 2022. Therefore, women may be
		disproportionately affected by the transformation of Children's Centres in
		Family Hubs and the expansion of services within.
		Some of the programmes will have a direct impact on women, such as the
		investment in infant feeding support services, which are intended by the
		Department for Education to "deliver a blended offer of advice and support
		that will help all mothers to understand the benefits of breastfeeding ar
		meet their infant goals."4
		The Family Hubs and Start for Life programme: local authority guid
		produced by the Department for Education also recognises the benefits
		expanding interventions to include fathers and co-parents. For instance, the
		guidance suggests the expansion of peer support groups to men
		investment in perinatal health services for fathers, staff training on father are
		co-parent inclusive practice in the perinatal period as 'go further' options f
		areas already meeting the minimum expectations for the programme.
		Tameside (13.8%) has a higher percentage of lone parent families than the
		national average (11.1%). The highest proportion of lone parent families
		in the North Neighbourhood (15%) followed by the South (13.8%), We
		(13.6%) and East (13.2%). National data suggests that lone parent mothe
		account for 86% of this family type.5 Lone parent families often fac
		disadvantage, for instance, lone parent families are the most likely of ar
		family type to experience poverty. 6 Therefore, this group may benefit direct
		by some of the increased support on offer through the Family Hubs and Sta
		for Life Programme e.g. welfare and debt advice.
		Children's Centres service user data is available below:

<sup>&</sup>lt;sup>4</sup> Family Hubs and Start for Life Programme Guide (publishing.service.gov.uk), 15.

<sup>&</sup>lt;sup>5</sup> Families and households in the UK - Office for National Statistics (ons.gov.uk)

<sup>&</sup>lt;sup>6</sup> uk poverty 2023 - the essential guide to understanding poverty in the uk 0 0.pdf (jrf.org.uk)





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21 census			ce users wa						
	The 2021 census data for each neighbourhood is available by								
on/Belief ∣			East	South	West				
igion	40.0%	31.5%	49.2%	40.7%	52.4%				
an	50.3%	42.0%	58.7%	43.3%	74.4%				
ist	0.3%	0.2%	0.3%	0.3%	0.4%				
	1.4%	4.0%	0.9%	0.5%	0.8%				
					0.1%				
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i i r	on/Belief igion an iist  Religion Religion nswered  Hubs and ne, regard nme must anticipate dispropo- iion. the 'go-fu ty Guidand offer supp s with SEN punds). The ing space	on/Belief Tameside igion 40.0% an 50.3% an 1.4% an 0.0% an 7.7% an 0.1% Religion 0.4% aswered 4.9%  Hubs and the services are, regardless of sexume must take into accument and the services and the services and the services and the services are anticipated that the Findisproportionate implicion. The 'go-further' option by Guidance, particular offer support to a diversion with SEND, LGBTQ bunds). Therefore, it sing space for all resides	on/Belief Tameside North igion 40.0% 31.5% an 50.3% 42.0% aist 0.3% 0.2%  1.4% 4.0% a 0.0% 17.7% 17.0% a 0.1% 0.2%  Religion 0.4% 0.4% aswered 4.9% 4.7%  Hubs and the services connected the regardless of sexual oriental the regardless of sexual oriental the family Hubs and disproportionate impact on region. the 'go-further' options within the ty Guidance, particular projects soffer support to a diverse range of with SEND, LGBTQI+ families bunds). Therefore, it is intended thing space for all residents.	on/Belief Tameside North East igion 40.0% 31.5% 49.2% an 50.3% 42.0% 58.7% ist 0.3% 0.2% 0.3% 1.4% 4.0% 0.9% 1.4% 4.0% 0.9% 1.4% 17.0% 2.9% 17.0% 2.9% 17.0% 2.9% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0% 17.0%	on/BeliefTamesideNorthEastSouthigion40.0%31.5%49.2%40.7%an50.3%42.0%58.7%43.3%iist0.3%0.2%0.3%0.3%1.4%4.0%0.9%0.5%0.0%0.0%0.0%0.0%n7.7%17.0%2.9%9.2%0.1%0.2%0.1%0.0%Religion0.4%0.4%0.5%0.4%nswered4.9%4.7%5.9%5.0% Hubs and the services connected to the family hub are new regardless of sexual orientation. The implementation and take into account the needs of all families and the anticipated that the Family Hubs and Start for Life Production of the basicion. The 'go-further' options within the Department for Edity Guidance, particular projects such as the Peer Sulpoffer support to a diverse range of parents and carers with SEND, LGBTQI+ families and those from cultivations. Therefore, it is intended that Family Hubs				





		available.		
		Census 2021 (Tamesic	le)	
		Sexual Orientation	Number of Residents	% of Residents
		Straight or Heterosexual	168,142	90.8
		Gay or Lesbian	3,315	1.8
		Bisexual	2,081	1.1
		Pansexual	407	0.2
		Asexual	140	0.1
		Queer	27	0.0
		All other sexual		
		orientations	38	0.0
		Not answered	10.985	5.9
Gender	x		,	family hub are available to
t		implementation of the price families and family types. for Life Programme will his basis.  As per the 'go-further' of Authority Guidance, particularly should offer support to a families with SEND, LG backgrounds). Therefore welcoming space for all right census 2021 (Tamesic Gender Identity  Total: All usual residents aged 16	ogramme must take into It is not anticipated that ave a disproportionate i ptions within the Depar icular projects such as diverse range of parent BTQI+ families and tho e, it is intended that F esidents le) Number	ender reassignment. The procession account the needs of all the Family Hubs and Start impact on residents on this timent for Education Local the Peer Support Groups is and carers (e.g., fathers, is see from culturally diverse family Hubs should be a
		years and over Gender identity the	185,136	100.0
		same as sex registered		
		at birth	175,401	94.7





### **APPENDIX 1**

			Condor	idontitu		T		11
			Gender	identity				
				from sex				
			•	at birth but				
				ic identity	1			
			given		450		0.2	
			Trans wom	an	180		0.1	
			Trans man		157		0.1	
			All othe	r gender				
			identities		167		0.1	
			Not answer	ed	8,781		4.7	
			In Tameside	, a slightly hid	her percentag	e of resider	its identified as	s the same
					ned at birth (9			
			(93%).	J	•	,,		<u> </u>
				entres servic	e user data is a	available be	elow:	
				Greenside	Ridgehill	Hyde	St Peters	]
			Total 4433		3168	5953	5071	1
			Users					
			Female	3275	2486	4348	3604	
			Male	1108	660	1534	1424	
			Unknown	50	22	71	43	
Pregnancy &	X		Family Hubs	will provide s	services for pre	gnant peop	le. The Start f	or life offer
Maternity								
			will include services including maternity; health visiting; breastfeeding; parent-infant relationships and perinatal mental health; SEND and					
			safeguarding, directly. Therefore, there will be a direct impact on this group. The number of live births in Tameside in 2021 was 2,525. <sup>7</sup> The crude birth					
					) was higher			
					has a slightly			
					iverage. Natior			
					expectant mu			
			up 10 21 /0	or riew ariu	expeciant int	unio anu C	overs a wide	range of

<sup>&</sup>lt;sup>7</sup> Live births in England and Wales: birth rates down to local authority areas - Nomis - Official Census and Labour Market Statistics (nomisweb.co.uk)





	1	T		
				conditions.8
				Additionally, as a minimum expectation through the Parent and Carer Panels, it is expected that pregnant women (or the partner of a pregnant woman) should be members of the panel. Therefore, the delivery of the Family Hubs and Start for Life programme will have a direct impact on this group.
				Furthermore, there will be a funded perinatal mental health strand, accessible to parent and carers from pregnancy till the first 2 years of the baby's life, directly impacting residents on the grounds of pregnancy and maternity.
Marriage &			X	27.1% of households in Tameside are married or civil partnered.9
Civil				It is not anticipated that the Family Hub and Start for Life Programme or its
Partnership				implementation will have a disproportionate or direct impact on the basis of
				a resident's marital status. The services within Family Hubs will be
				accessible to residents with children aged 0-19 (or 25 with SEND).
Other protecte		d locally by Tamesic		
Group	Direct	Indirect	Little / No	Explanation
(please state)	Impact/Relevanc	Impact/Relevance	Impact/Relevanc	
	е		е	
Mental Health	X			The Family Hubs programme has a funded perinatal mental health programme delivery strand and therefore there will be a direct benefit to people experiencing mental health issues from pregnancy and during the babies first two years.  6.8% of children in Tameside are known to have a mental health problem (2018) It is estimated that 19.5% of the population aged over 16 years have a common mental disorder, higher than the national average (16.9%) (2017).  11% of children in Tameside are known to have an Eating Disorder (2020)

<sup>&</sup>lt;sup>8</sup> NHS England » Perinatal mental health

<sup>&</sup>lt;sup>9</sup> Nomis - Official Census and Labour Market Statistics - Nomis - Official Census and Labour Market Statistics (nomisweb.co.uk)





			Hospital admissions due to mental health conditions are higher in Tameside than the England average (2020/2021)  Across the Pennine Care Foundation Trust footprint there was an 80% increase in referrals for support/treatment for Eating Disorders in 2021/2022. This reflects the national picture where there was an 81% increase Given than the Family Hubs programme is intended to provide holistic support to families, including through close working with adult and children's mental health services, residents experiencing mental health problems will be directly impacted by the implementation of this programme.
Carers	X		The Family Hubs and Start for Life Offer is directed towards parents and carers, with the primary objective being that services are joined up and enhanced within local authority areas to ensure parents and carers can access support when needed.  Data from the 2021 census shows that 9.5% of residents in Tameside provide some level of unpaid care, with 3.1% providing 50hours or more unpaid care. Given that the programmes and services to be delivered under the Family Hubs and Start For Life Offer are targeted towards those with caring responsibilities for a child aged 0-19(up to 25 with SEND), carers will be directly impacted by the change.
Military Veterans		X	3.6% people in Tameside aged 16 or over previously served in the armed forces, which is slightly lower than the national average (3.8%) for England and Wales. It is not anticipated that the Family Hub and Start for Life Programme or its implementation will have a disproportionate or direct impact on the basis of military veteran status. The services within Family Hubs will be accessible to military veterans with children aged 0-19 (or 25 with SEND) who are residents in Tameside.
Breast Feeding	X		In Tameside, breast-feeding rates are significantly lower than the national average. In Tameside, 53.3% of babies are breastfed as their first feed, significantly lower than the North West and England averages, 62.4% and 67.4% respectively.  Additionally, only 36.6% of babies in Tameside were breastfeeding at 6-

<sup>&</sup>lt;sup>10</sup> Nomis - Official Census and Labour Market Statistics - Nomis - Official Census and Labour Market Statistics (nomisweb.co.uk)





					8weeks, compared to the England average of 49.3%. <sup>11</sup>
					The Family Hubs and Start for Life Programme Guidance set by the
					Department of Education, states the funding for infant feeding support
					should be used to promote breastfeeding and support parents to meet their
					infant feeding goals. Therefore, support and information around breast
					feeding will be delivered through Family Hubs and the Start for Life Offer
					Since December 2022, as part of the programme, there has been an
					increase in the number of breast pumps available (by 30) through the
					community loan scheme, the launch of the #breastfeedvictories campaign
					and increased capacity within the Breastfeeding Peer Support Service. The
					increase in equipment, expansion of support and delivery of campaigns to
					promote breastfeeding through the Family Hubs and Start for Life
					Programme will positively impact breast-feeding mothers and parents in
A wa the area area.		fa al manu ha imma		!4 "	Tameside.
		ou reel may be impai I residents, those wi			proposal or service/contract change or which it may have relevance to?
Group	Direct	Indirect	Little /	No	Explanation
(please state)	Impact/Relevanc	Impact/Relevance	Impact/Releva	anc	
	е		е		
Low or no	x				To meet minimum expectations under the programme, the local authority is
income					required to support disadvantaged families, therefore the implementation of
groups					the programme will directly impact low income groups.
					Tameside is the 37 <sup>th</sup> most income deprived local authority in England, 17.5%
1					Lating nanulation was income denrived in 2014 14 As at Tuly 2022 / 8% at 1
					of the population was income deprived in 2019. <sup>12</sup> As of July 2022, 4.8% of
					people in Tameside were in receipt of benefits, compared to just 3.7% of

<sup>&</sup>lt;sup>11</sup> Public health profiles - OHID (phe.org.uk)

<sup>&</sup>lt;sup>12</sup> Exploring local income deprivation (ons.gov.uk)

<sup>&</sup>lt;sup>13</sup> NOMIS, Official Census and Labour Market Statistics "Labour Market Profile –Tameside, Claimant Count by age", July 2022, <a href="https://www.nomisweb.co.uk/reports/lmp/la/1946157088/report.aspx?town=tameside">https://www.nomisweb.co.uk/reports/lmp/la/1946157088/report.aspx?town=tameside</a>



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national average (12.9%).14Based on LSOA scores from the Index for Multiple Deprivation (2019) St Peter's is the most deprived ward in Tameside followed by Ashton St Michael's and Hyde Godley. Around 1/3rd LSOAs within the North Neighbourhood (32%) are within 10% most deprived in England.  A commonly used indicator for low income is the relative child poverty measure which tells us how many children were living in a household with an income below 60% of the median. In Tameside, 22.3% of children are living in relative poverty, significantly higher than the England average (17.1%).15 The rate of child poverty differs by ward.  According to analysis by Greater Manchester Poverty Action, the rank of relative child poverty by ward in Tameside is as follows:  1. St Peter's (43.3%)  2. Hyde Werneth (30.1%)  3. Longendale (27.7%)  4. Ashton Waterloo (26.6%)  5. Ashton St Michael's (26.4%)  6. Hyde Godley (25.7%)  7. Ashton Hurst (22.6%)  8. Hyde Newton (20.6%)  9. Droylsden West (20.3%)  10.Dukinfield (19.8%)  11. Stalybridge North (19.6%)  12. Denton South (19%)  13. Denton North East (18.7%)  14. Audenshaw (17.2%)
12. Denton South (19%)
· ·
15. Droylsden East (16.9%)
16. Dukinfield Stalybridge (16.6%)
17. Staylbridge South (14.9%)
18. Mossley (13.5%)
19. Denton West (12.4%).

Office for Health Improvement and Disparities, 2019 <a href="https://www.localhealth.org.uk/#c=indicator&i=t1.income\_dep&view=map12">https://www.localhealth.org.uk/#c=indicator&i=t1.income\_dep&view=map12</a>
Public health profiles - OHID (phe.org.uk)





children growing outcomes 16 and than their peers. 1 Based on the at Family Hub will be and therefore mat As per the Depay programme: locate have to be under delivery and rester Programme. A form of guidance as part Environment profamilies and as semiconsider data on The number of mentioned as an indicates a risk fall n Tameside, the 82% of eligible 2 entitlement, sign	bove census data, the North Family Hub and the South be serving the areas with the highest rates of child poverty by be accessed disproportionately by low income families. Family Hubs and Start for Life all authority guide, a joint strategic needs assessment will raken within the first year of the programme to inform the source allocation of the Family Hubs and Start for Life ocus on poverty and deprivation is a requirement under the of the needs assessment. For instance, the Home Learning orgamme is required to be targeted at disadvantaged such the guidance states that the needs assessment must in the location of disadvantaged eligible children. In babies born to mothers living in poverty is explicitly example of relevant data for the needs assessment which factor.  The latest data available for the Spring 2023 term suggests 2 year olds were registered for the 15-hour free childcare inficantly surpassing the national uptake (72%). The Family Hubs programme and Start for Life Offer will
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"Low or no income groups" should be included as a key consideration when assessing the impact of your project, proposal, policy or service/contract change. 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.

<sup>&</sup>lt;sup>16</sup> Health Equity in England: The Marmot Review 10 Years On - The Health Foundation

<sup>&</sup>lt;sup>17</sup> Poorer children's educational attainment: How important are attitudes and behaviour? (jrf.org.uk)

<sup>&</sup>lt;sup>18</sup> Education provision: children under 5 years of age, Reporting Year 2022 – Explore education statistics – GOV.UK (explore-education-statistics.service.gov.uk)



1d.	Does the project, proposal or service / contract change require a full EIA?	Yes No				
	Contract change require a run EIA?	X				
1e.	What are your reasons for the decision made at 1d?	the basis of age, disability, sex, pregnancy /ma income status. Indirect impacts of the delivery of been identified on the basis of ethnicity and religion	and Start for Life Programme have been identified on ternity, mental health, carers, breastfeeding and low the Family Hubs and Start for Life Programme have on.  portionate impacts upon the above grounds, we have			

If a full EIA is required please progress to Part 2.

#### PART 2 - FULL EQUALITY IMPACT ASSESSMENT

#### 2a. Summary

The equality impact assessment was undertaken to assess the effects of implementing the Family Hubs and Start for Life Programme 2022-2025. The programme has expectations which have to be reached within each year of funding, starting from the first half of 2023 within which the family hub locations are expected to be open and be delivering visible change, requiring changes to be carried out at pace.

It is intended that the authority will meet all minimum expectations for delivery in line with Annex E and F: Family Hub Service Expectations, Family Hubs and Start for Life Programme guide.<sup>19</sup>

The Family Hubs and Start for Life Programme Guidance set by the Department of Education, states the funding for Family Hubs and Capital is to develop localised services that are:

- More accessible through clearly branded and communicated hub buildings, virtual offers and outreach.
- Better connected family hubs drive progress on joining up professionals, services and providers (state, private, voluntary) through co-location, data

<sup>&</sup>lt;sup>19</sup> Annex E - Family Hub Model Framework (publishing.service.gov.uk); Family Hub Service Expectations (publishing.service.gov.uk)



sharing, shared outcomes and governance. Moving from services organised for under-fives, to families with children of all ages, reduces fragmentation (even though an emphasis on early years and the 'Start for Life' offer will remain).

• Relationship-centred – practice in a family hub builds on family strengths and looks to improve family relationships to address underlying issues.

There are expectations for the physical family hub and virtual family hub offer relating to:

- Activities for children aged 0-5;
- Birth registration;
- Debt and Welfare advice;
- Domestic abuse support;
- Early Childhood Education and Care (ECEC) and financial support (Tax-Free Childcare, Universal Credit Childcare);
- Health visiting 0-5;
- Housing;
- Intensive targeted family support services, including those funded by the Supporting Families Programme;
- Local authority 0-19 public health services, based on local needs assessments;
- Mental health services (beyond Start for Life parent-infant mental health);
- Midwifery/maternity;
- Nutrition and weight management;
- Oral health improvement;
- Reducing Parental Conflict;
- SEND support and services (inclusive of the Start for Life period);
- Stop smoking support;
- Substance (alcohol/drug) misuse support;
- Support for separating and separated parents;
- Youth Justice Service
- Youth Services universal and targeted.

Minimum expectations will also need to be met when delivering the funded services and activities under the programme, namely:

- Parenting support,
- Parent Infant relationships and perinatal mental health support,
- Early language and the Home Learning Environment,
- infant feeding.
- Parent and Carer Panels,
- Publishing the Start for Life offer.

The agreed model for the Tameside Family Hubs will see the rebranding of the four Children Centres to Family Hub in each neighbourhood. Each Family Hub will have spokes to support delivery in each neighbourhood. This will support accessibility across the Borough for families and utilise key building where

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## Tameside Council Equality Impact Assessment (EIA) Form

families access currently. These will be launched in each area by 1 April 2023. The Family Hub model will build upon the well-established offer within Children's Centres. There are currently four main Children's Centres in Tameside: St Peter's Children's Centre; Hyde Children's Centre; Ridgehill Children's Centre (Stalybridge), Greenside Children's Centre (Droylsden). Children's Centres currently offer a range of services including:

- Universal access Early Years Sessions for Parents and Children ranging from Birth-3years
- Baby Group B-9
- Mini Explorers 9-15mths
- Little Explorers 15mths-2years
- Targeted sessions for children who require support with Speech and Language development and Physical Development
- Baby Babble B-9
- Small Talk 9-18mths
- Toddler Talk 18-30mth
- Move and Play B-9
- Move and Play 9-18
- Move and Play 18-30
- Portage
- Baby Weigh Clinic
- Development Checks
- Enjoy your baby
- Freedom
- Midwife Drop in
- Parenting clinic
- Riding the rapids
- Solihull parenting
- Solihull teens
- Weaning parties
- Family Time / Contact

As part of the Family Hubs and Start for Life Programme, it is required that participating local authorities move beyond 0-5 services, towards a 0-19 (25 with SEND) model, begin co-locating with a wider range of services aligned to the expectations under the programme, agree new partnerships with VCSFE sector, involve partners within the delivery of services to families. This will transform the current offer available at children's centres, moving towards a model with greater involvement from VCSFE sector and a broader shift in focus away from early years specific activities and services towards a better offer spanning 0-19 (25 with SEND).

Direct impacts of the delivery of the Family Hubs and Start for Life Programme have been identified on the basis of age, disability, sex, pregnancy /maternity, mental health, carers, breastfeeding and low income status.

Indirect impacts of the delivery of the Family Hubs and Start for Life Programme have been identified on the basis of ethnicity and religion.





No effect was identified on the basis of sexual orientation, gender reassignment or military veteran status.

The following issues and mitigations were identified:

**Ethnicity** – Limited English Language Skills, concentrated in some geographical locations may cause a barrier for accessing services. Translation services will be accessible to staff within Family Hubs. Literature relating to Family Hubs and Start for Life Offer can be translated into commonly spoken languages at each Family Hub location, reflecting the demographic at that location. Sessions in particular commonly spoken languages, reflecting the demographic within each family hubs location could be looked into.

**Disability** – Access to Family Hubs in localities. Buildings identified as Family Hub or Spoke Sites will be investigated to ensure they are accessible for people with disabilities. Materials and resources in accessible formats e.g. large print, braille, easy-read. Data relating to disability and service users at Children's Centres was not available at time of writing.

**Sexual Orientation/Religion –** Data on these characteristics for children's centre users not recorded. Data relating to these characteristics for Family Hub and Spoke users where there is a lawful basis to do so in accordance with UK GDPR and Data Protection Act 2018 could be recorded.

Low Income – Particular areas within neighbourhoods may require tailored offers to meet needs e.g. additional welfare related support. An in-depth needs assessment will be carried out in 2022-23 to identify these areas and their needs more specifically. The 'Family Hubs and Start for Life programme: Local Authority Guidance' identifies that as a minimum expectation Staff in the family hubs are able to provide guidance about available financial support and are connected to appropriate support within the network including VCS organisations such as Money Helper, Acas, Step Change, Citizens Advice, Christians Against Poverty. Go further options also suggest having co-located services and a Supporting Families Employment Advisor within the Hub.

**Mental Health –** Lack of local data relating to perinatal mental health. Improve access to information locally around perinatal mental health through improved information sharing during the course of the programme.

#### 2b. Issues to Consider

The proposed changes under the Family Hubs and Start for Life Programme's implementation and delivery are in accordance with the requirements of the programme as set out by the Family Hubs and Start for Life programme: local authority guide.

Tameside Family Hub model branding was consulted on via Survey Monkey which was open from 1/12/2022 – 31/01/23. The feedback from the consultation was used to inform the final family hubs branding design. The development of the family hubs model will include engagement, co-production, adaptions and signage so that they are visible in communities, and the Family Hubs Model will be further developed over the funding period.

A multi-agency approach has been taken to the oversight of the delivery of the Family Hubs and Start for Life Programme, through the Family Hubs Steering group, engaging colleagues from health (NHS, ICB), VCSFE Sector, Police, Education, Active Tameside, Children's services, Department for Work and Pensions and Council services. As part of the programme, a Parent Carer Panels will be established to enable parents and carers to work together with local service commissioners to co-design and evaluate services, ensuring that families are at the



heart of service design and delivery.

Furthermore, within the first year of the programme (2022-23) a local population needs assessment will be carried out, considering the needs of parents and families (accounting for factors such as age, deprivation, ethnicity, substance misuse, domestic violence, and other protected characteristics) to inform the family hubs transformation and the funded services delivery.<sup>20</sup>

Consideration of protected characteristics:

**Age –** The number of residents aged 0-19 years old (24.1%) in Tameside and within each neighbourhood was taken into account during our assessment of impact as this age group is intended to directly benefit from the Family Hub and Start for Life Programme. Additionally, this was supported by consideration of the number of households with children in each neighbourhood to ensure this can be reflected in monitoring of capacity and demand at each Family Hub and spoke.

**Ethnicity** – Census data (2021) around the ethnicity of residents living in each of the four localities was reviewed to acknowledge culturally sensitive delivery of the Programme will be required and to highlight additional barriers faced by particular groups relating to their ethnicity. In addition, census data (2021) relating to language was reviewed for each neighbourhood to acknowledge that all residents must be able to access the services on offer through the Family Hub and Start for Life Programme and that for residents whose main language is not English and who may not be able to speak English well or cannot speak English at all this could pose a barrier. It was identified that out of the four neighbourhoods, the neighbourhoods with the highest proportion of residents whose main language is not English and who may not be able to speak English well or cannot speak English at all were the North and South. Therefore, a mitigation to ensure accessibility and to ensure the multiple disadvantaged effecting families at particular locations are responded to is required.

**Disability** – As the Family Hub and Start for Life Programme is accessible to families with children aged 0-25 with special educational needs and disabilities, this group is likely to directly benefit from the programme. Census data was reviewed to identify any trends relating to disability within Tameside as a whole and within each neighbourhood. This identified that a higher proportion of residents in Tameside are disabled than the national average (20%, national average is 17.7%) and that the East neighbourhood has the highest proportion of disabled residents, followed by the North, South and West. Furthermore, data accessed through population health identified that a higher proportion of children in Tameside have a Special Educational Need or Disability than the national average (14.2%, compared with 12.3%) (2021/22). Therefore consideration of measures to ensure disabled residents can access the offer through the Family Hubs and Start for Life Programme both physically and virtually is required. Data relating to disabilities regarding Children's Centres service users was not currently available.

**Sex –** The Family Hubs and the Start for life programme is available to people regardless of sex or gender. However, some of the services under the programme will have a direct impact on women, such as the infant feeding support services which are intended to "help mothers to understand the benefits of breastfeeding and meet their infant goals". Additionally, service user data from children's centres indicates that

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<sup>&</sup>lt;sup>20</sup> Family Hubs and Start for Life Programme Guide (publishing.service.gov.uk),74.



mothers are more likely to use their services, indicating that women may be disproportionately directly affected by the transformation of Children's Centres into Family Hubs and the expansion of services available. As lone parents are predominantly women and are the family group identified as most at risk of poverty, it was identified that this group may also directly benefit from the expansion of services on offer. To acknowledge that men are less likely to use children's centres and therefore may also be less likely to use family hubs, targeted communications may be required.

**Religion / Belief -** Family Hubs and the services connected to the family hub are available to everyone. The implementation of the programme must be culturally sensitive and take into account cultural or religious influences on family dynamics. There are no anticipated disproportionate impacts on the basis of religion or belief.

**Sexual Orientation -** Family Hubs and the services connected to the family hub are available to everyone, regardless of sexual orientation. The implementation of the programme must take into account the needs of all families and family types. It is not anticipated that the Family Hubs and Start for Life Programme will have a disproportionate impact on residents on the basis of sexual orientation. However, it is acknowledged within the programme that an advanced model would include peer support groups for a diverse range of parents and carers including LGBTQI+.

**Gender Reassignment -** Family Hubs and the services connected to the family hub are available to everyone, regardless of gender identity or gender reassignment. The implementation of the programme must take into account the needs of all families and family types. It is not anticipated that the Family Hubs and Start for Life Programme will have a disproportionate impact on residents on this basis.

**Pregnancy and Maternity -** Family Hubs will provide services for pregnant people. The Start for life offer will include services including maternity; health visiting; breastfeeding; parent-infant relationships and perinatal mental health; SEND and safeguarding. Additionally, local authorities will be required to have pregnant women (or their partners) as members of Parent and Carer Panels, directly impacting this group. Furthermore, there through the programme there is a funded perinatal mental health programme which will enhance the offer currently available to people experiencing pregnancy or maternity.

**Marriage & Civil Partnership -** It is not anticipated that the Family Hub and Start for Life Programme or its implementation will have a disproportionate or direct impact on the basis of a resident's marital status.

**Mental health -** Given than the Family Hubs programme is intended to provide holistic support to families, including through close working with adult and children's mental health services, residents experiencing mental health problems will be directly impacted by the implementation of this programme. Furthermore, there through the programme there is a funded perinatal mental health programme which will enhance the offer currently available to people experiencing pregnancy or maternity.

Carers - Given that the programmes and services to be delivered under the Family Hubs and Start For Life Offer are targeted towards those with caring responsibilities for a child aged 0-19(up to 25 with SEND), carers will be directly impacted by the delivery of the programme. As there will be a greater range of services that can be accessed by carers and their families and it is intended that services will be better connected this should positively impact carers. Additionally, as parents and carers will be engaged through Parent and Carer Panels, they will help to co-design the form of the Family Hubs and Start for Life offer in Tameside.

**Breastfeeding -** In Tameside, breastfeeding rates are significantly lower than the national average. In Tameside, 53.3% of babies are breastfed as their first feed, significantly lower than the North West and England averages, 62.4% and 67.4% respectively. Additionally, only



36.6% of babies in Tameside were breastfeeding at 6-8weeks, compared to the England average of 49.3%.<sup>21</sup> The Family Hubs and Start for Life Programme Guidance set by the Department of Education, states the funding for infant feeding support should be used to promote breastfeeding and support parents to meet their infant feeding goals. Therefore, support and information around breast feeding will be delivered through Family Hubs and the Start for Life Offer, meaning that people who breastfeed will likely disproportionately benefit from the additional breast-feeding information and support under the programme, however, non-breastfeeding parents and carers will also benefit from the additional support relating to infant nutrition.

Low income – To meet minimum expectations under the programme, the local authority is required to support disadvantaged families, therefore the implementation of the programme will directly impact low income groups. Tameside is the 37<sup>th</sup> most income deprived local authority in England, 17.5% of the population was income deprived in 2019. <sup>22</sup> In Tameside, 22.3% of children are living in relative poverty, significantly higher than the England average (17.1%).<sup>23</sup> Child poverty is concentrated in particular wards and neighbourhoods and based on this data the North and South Family Hubs will be serving the areas with the highest rates of child poverty. Therefore, the offer within these localities will need to be tailored to meet the needs of disadvantaged families e.g. by improved connection to advice and welfare support as required under the programme guidance. As the Family Hubs have physical locations within each neighbourhood this should reduce the distance families will have to travel to get in-person support, reducing the associated travel costs for families. Low income families are less likely to have access to cars and therefore may be more dependent on public transport such as buses. Census data indicates that 33.40% of households in the North neighbourhood do not have access to cars or van, 24% in the East, 24.2% in the South and 24.19% in the West, overall 26.1% of Tameside households do not have access to cars or vans.<sup>24</sup>

#### 2c. Impact/Relevance

As highlighted in Section A, the delivery of the Family Hubs and Start for Life Programme will have a direct impact on the basis of age, disability, sex, pregnancy /maternity, mental health, carers, breastfeeding and low income status. Indirect impacts of the delivery of the Family Hubs and Start for Life Programme have been identified on the basis of ethnicity and religion. No effect was identified on the basis of sexual orientation, gender reassignment, military veteran status.

<sup>&</sup>lt;sup>21</sup> Public health profiles - OHID (phe.org.uk)

<sup>&</sup>lt;sup>22</sup> Exploring local income deprivation (ons.gov.uk)

<sup>&</sup>lt;sup>23</sup> Public health profiles - OHID (phe.org.uk)

<sup>&</sup>lt;sup>24</sup> Number of cars or vans - Census Maps, ONS



The disproportionate direct effects are in line with the aims under the Programme. This is because, the groups who will be affected will be intended to benefit from the enhanced offer for parents and carers through the Family Hubs and Start for Life Programme.

**Age –** Residents aged 0-19(up to 25 with SEND) will be disproportionately affected by the services offered under the Family Hub and Start for Life Offer. This is because there will be a broader offer to support children and families.

**Disability -** As the Family Hub and Start for Life Programme is accessible to families with children aged 0-25 with special educational needs and disabilities, extending eligibility to services for this cohort, this group is likely to directly benefit from the programme. However, consideration of measures to ensure disabled residents can access the offer through the Family Hubs and Start for Life Programme both physically and virtually is required.

**Sex –** The Family Hubs and the Start for life programme is available to people regardless of sex or gender. However, some of the services under the programme will have a direct impact on women, such as the infant feeding support services which are intended to "help mothers to understand the benefits of breastfeeding and meet their infant goals". It was also identified that women access the already available services at children's centre's more than men. Therefore, women may benefit from the expansion of services through the Family Hubs and the Start for life programme disproportionately.

**Pregnancy and Maternity -** Family Hubs will provide services for pregnant people. The Start for life offer will include services including maternity; health visiting; breastfeeding; parent-infant relationships and perinatal mental health; SEND and safeguarding. Additionally, local authorities will be required to have pregnant women (or their partners) as members of Parent and Carer Panels, directly impacting this group. Furthermore, there through the programme there is a funded perinatal mental health programme which will enhance the offer currently available to people experiencing pregnancy or maternity.

**Mental health -** Given than the Family Hubs programme is intended to provide holistic support to families, including through close working with adult and children's mental health services, residents experiencing mental health problems will be directly impacted by the implementation of this programme. Furthermore, there through the programme there is a funded perinatal mental health programme which will enhance the offer currently available to people experiencing pregnancy or maternity.

Carers - Given that the programmes and services to be delivered under the Family Hubs and Start For Life Offer are targeted towards those with caring responsibilities for a child aged 0-19(up to 25 with SEND), carers will be directly impacted by the delivery of the programme. As there will be a greater range of services that can be accessed by carers and their families and it is intended that services will be better connected this should positively impact carers. Additionally, as parents and carers will be engaged through Parent and Carer Panels, they will help to co-design the form of the Family Hubs and Start for Life offer in Tameside.

**Breastfeeding -** In Tameside, breastfeeding rates are significantly lower than the national average. In Tameside, 53.3% of babies are breastfed as their first feed, significantly lower than the North West and England averages, 62.4% and 67.4% respectively. Additionally, only



36.6% of babies in Tameside were breastfeeding at 6-8weeks, compared to the England average of 49.3%.<sup>25</sup> The Family Hubs and Start for Life Programme Guidance set by the Department of Education, states the funding for infant feeding support should be used to promote breastfeeding and support parents to meet their infant feeding goals. Therefore, support and information around breast feeding will be delivered through Family Hubs and the Start for Life Offer, meaning that people who breastfeed will likely disproportionately benefit from the additional breast-feeding information and support under the programme, however, non-breastfeeding parents and carers will also benefit from the additional support relating to infant nutrition.

Low income groups – To meet minimum expectations under the programme, the local authority is required to support disadvantaged families, therefore the implementation of the programme will directly impact low income groups. For instance, the Home Learning Environment programme is required to be targeted at disadvantaged families and as such the guidance states that the needs assessment must "consider data on the location of disadvantaged eligible children", ensuring low income groups will benefit from the increased support under the programme.

2d. Mitigations (Where yo	2d. Mitigations (Where you have identified an impact/relevance, what can be done to reduce or mitigate it?)				
Ethnicity – Limited English Language Skills, concentrated in some geographical locations may cause a barrier for accessing services	<ul> <li>Translation services will be accessible to staff within Family Hubs</li> <li>Literature translated into commonly spoken languages at each Family Hub location, reflecting the demographic at that location to be considered.</li> <li>Sessions in particular commonly spoken languages, reflecting the demographic within each family hubs location could be considered.</li> </ul>				
Disability – Access to Family Hubs in localities	<ul> <li>Buildings identified as Family Hub or Spoke Sites will be investigated to ensure they are accessible for people with disabilities.</li> <li>Materials and resources in accessible formats e.g. large print, braille, easy-read.</li> </ul>				
Sexual Orientation/Religion/ Disability – Data on these characteristics for children's centre users not recorded	<ul> <li>Record these characteristics for Family Hub and Spoke users where there is a lawful basis to do so in accordance with UK GDPR and Data Protection Act 2018.</li> <li>Ensuring that Family Hubs are welcoming spaces for all parents, children and families.</li> </ul>				
Low Income – Particular areas within neighbourhoods may require additional welfare related support Public health profiles - OHID (p	<ul> <li>An in-depth needs assessment will be carried out in 2022-23 to identify these areas and their needs more specifically</li> <li>The 'Family Hubs and Start for Life programme: Local Authority Guidance' identifies that as a minimum expectation Staff in the family hubs are able to provide guidance about available financial support and are connected to appropriate support within the network including VCS organisations such as Money Helper, Acas, Step Change, Citizens Advice, Christians Against Poverty. Go further options also suggest having</li> </ul>				



	co-located services and a Supporting Families Employment Advisor within the Hub.
Mental Health – lack of local data relating to perinatal mental heath	- Better access to information locally around perinatal mental health through improved information sharing
Sex / Gender Reassignment–Ensuring all residents, regardless of gender are able to access Family Hubs and Start for Life Offer	<ul> <li>Men may be less likely to use Family Hubs so there may be a need to have targeted communications towards this group to promote use of Family Hubs.</li> <li>Ensuring that Family Hubs are welcoming spaces for transgender and non-binary parents, children and families.</li> </ul>

#### 2e. Evidence Sources

Tameside population change, Census 2021 – ONS

Improving the way family support services work for minority ethnic families | Early Intervention Foundation (eif.org.uk)

Poverty-monitor-child-poverty-and-ethnicity-table.pdf (gmpovertyaction.org)

uk poverty 2023 - the essential guide to understanding poverty in the uk 0 0.pdf (jrf.org.uk)

Family Hubs and Start for Life Programme Guide (publishing.service.gov.uk), 15.

Families and households in the UK - Office for National Statistics (ons.gov.uk)

uk poverty 2023 - the essential guide to understanding poverty in the uk 0 0.pdf (jrf.org.uk)

Live births in England and Wales: birth rates down to local authority areas - Nomis - Official Census and Labour Market Statistics (nomisweb.co.uk)

Nomis - Official Census and Labour Market Statistics - Nomis - Official Census and Labour Market Statistics (nomisweb.co.uk)

Mental Health and Wellbeing JSNA - OHID (phe.org.uk)

Nomis - Official Census and Labour Market Statistics - Nomis - Official Census and Labour Market Statistics (nomisweb.co.uk)

Public health profiles - OHID (phe.org.uk)

Exploring local income deprivation (ons.gov.uk)

NOMIS, Official Census and Labour Market Statistics "Labour Market Profile –Tameside, Claimant Count by age", July 2022, <a href="https://www.nomisweb.co.uk/reports/lmp/la/1946157088/report.aspx?town=tameside">https://www.nomisweb.co.uk/reports/lmp/la/1946157088/report.aspx?town=tameside</a>

Office for Health Improvement and Disparities, 2019 <a href="https://www.localhealth.org.uk/#c=indicator&i=t1.income\_dep&view=map12">https://www.localhealth.org.uk/#c=indicator&i=t1.income\_dep&view=map12</a>

Public health profiles - OHID (phe.org.uk)

Health Equity in England: The Marmot Review 10 Years On - The Health Foundation

Poorer children's educational attainment: How important are attitudes and behaviour? (jrf.org.uk)

CYP-JSNA-final-report.pdf (tameside.gov.uk)





2022 Children's Centre Data

Of Manitoring progress					
2f. Monitoring progress Issue / Action	Lead officer	Times	cale		
Monitoring will be carried out through the Family Hubs Steering Group, meeting every 6 weeks.	Paula Sumner/Lorraine Hopkins	Every	six weeks		
Project highlight reports produced for each funded project streams will feed into the steering group, every 6 weeks.	Lorraine Hopkins	Every	six weeks		
There are monthly Keeping In Touch Meetings Paula Sumner/Lorraine			ly		
Early Intervention Foundation meetings to support the delivery of our workforce development plan this will continue until July 2023.  Hopkins  Lorraine Hopkins		Monthly			
We are updating cabinet 6 monthly to update on delivery of the programme.	Paula Sumner /Lorraine Hopkins	Every	six weeks		
Signature of Contract / Commissioning Manager			Date		
BHopkins			7/03/2023		
Signature of Assistant Director / Director			Date		
Musines			02.03.23		