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Dear Member

#### SCRUTINY COMMITTEE - THURSDAY, 20 APRIL 2023

I am now able to enclose, for consideration on Thursday 20 April 2023 at the meeting of the Scrutiny Committee, the following reports that were unavailable when the agenda was first published on 12 April 2023.

# Agenda Item NoB1Decision 23/00015 - Family Hub Transformation Funding (Pages 1 - 66)

Yours sincerely

Benjamin Watts General Counsel

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By: Joel Cook – Democratic Services Manager

To: Scrutiny Committee – 20 April 2023

Subject: Call-in of Decision 23/00015 – Family Hub Transformation Funding

## Background

- 1. The proposed decision was discussed at the **Children's and Young People Cabinet Committee on 8 March, 2023** prior to the key decision being taken in March 2023.
- 2. Following the decision being taken, the call-in request was submitted by Mr Brady and Mr Hood, thus meeting the requirement for any call-in to be requested by two Members from different political Groups.
- 3. The reasons of the call-in were duly assessed by the Scrutiny Research Officer team, including a review of the reasons given by those Members calling in the decision and an investigation into whether any issues raised in the call-in were adequately addressed by the decision paperwork, committee reports, responses to written questions or committee debate. The results of this review were considered by the Democratic Services Manager and the call-in was determined to be valid under the call-in arrangements set out in the Constitution. Call-in reasons must be clear, correct and align to one or more of the following criteria under s17.73 of the Constitution:

Members can call-in a decision for one or more of the following reasons:

(a) The decision is not in line with the Council's Policy Framework,
(b) The decision is not in accordance with the Council's Budget,
(c) The decision was not taken in accordance with the principles of decision making set out in 8.5, and/or
(d) The decision was not taken in accordance with the arrangements set out in Section 12.

4. The reasons submitted for this call-in and the response are set out in in paragraph 6 of the Response Report from the Cabinet Member and Corporate Director.

## Process

5. As per the call-in procedure, Democratic Services must consider all call-in requests against the criteria detailed in the constitution, which are themselves based on the legal requirements under the Local Government Act 2000 to have an appropriate mechanism to allow Executive decisions to be scrutinised. In determining the validity of any call-in, no judgement is made by Democratic Services as to whether

the decision itself is flawed, inappropriate or invalid. Similarly, where some individual reasons submitted for an overall valid call-in are not assessed as valid, this does not mean they merit no consideration as part of any subsequent call-in meeting.

- 6. The Cabinet Member and relevant Officers will be attending the Scrutiny Committee meeting to present their response to the call-in and to respond to questions.
- 7. The Scrutiny Committee should consider the reasons set out by the Members calling-in the decision, the documentation already available and the response from the Executive given at the meeting, giving due regard to the information made available during questioning and discussion on this item.
- 8. The decision papers remain available online but are republished in the agenda pack as appendices to the Response Report for ease of reference.

## **Options for the Scrutiny Committee**

- 9. The Scrutiny Committee may:
  - a) make no comments
  - b) express comments but not require reconsideration of the decision
  - c) require implementation of the decision to be postponed pending reconsideration of the matter by the decision-maker in light of the Committee's comments; or
  - d) require implementation of the decision to be postponed pending review or scrutiny of the matter by the full Council.

#### **Background Documents**

#### Children's and Young People Cabinet Committee on 8 March, 2023

#### **Report Author**

Anna Taylor, Scrutiny Research Officer Anna.taylor@kent.gov.uk 03000 416478

From:	Sue Chandler, Cabinet Member for Integrated Children's Services
	Sarah Hammond, Corporate Director for Children, Young People and Education
То:	Scrutiny Committee – 20 April 2023
Subject:	Response to Call-In Request: Decision Number 23/00015 - Family Hub transformation
Classification:	Unrestricted

## Electoral Division: All

**Summary:** This report contains a response to the call-in to Scrutiny.

#### 1. Background

- 1.1 In October 2022 key decision 22/00094 was made to support the framework of the Family Hub model and explore how this could work for Kent.
- 1.2 This key decision agreed to accept the financial envelope and commence work to develop a Family Hub framework model for Kent. This decision was then considered further by CYPE Cabinet Committee and endorsed following Scrutiny Committee discussion on 7 December 2022.
- 1.3 By signing a Memorandum of Understanding (MOU), (attached at Appendix 5a), KCC formally recognised the working relationship with the Department for Education (DfE) and the Department for Health and Social Care (DHSC) who have set out clear expectations and milestones which included the need to develop a Delivery Plan and undertake commitments to deliver the minimum expectations in the programme guide, in order to receive Family Hub Funding.
- 1.4 Working in partnership with Public Health, Health Visitors, Midwifery Services and KCC children's services KCC produced an iterative first draft Delivery Plan which was submitted to the DfE on the 30 December 2022.
- 1.5 During January 2023, at the request of the DfE, the initial draft delivery plan underwent multiple revisions as it represents a managerial tool for engagement and planning with the DfE on potential Family Hub

development. A further version was finally agreed in principle by the DfE in February 2023.

- 1.6 The key elements of the Delivery Plan are summarised in Appendix 3. As previously stated, the underlying Plan is a working document and will be subject to future iterative changes which will be shared with the DfE as the Family Hubs programme evolves over the next 2 years as part of requirements to retain access to the Family Hub Transformation funding.
- 1.7 A further key decision 23/00015 has been sought to confirm the funding arrangements progressed under Decision 22/00094 and to approve relevant activity required to progress the transformation programme through additional co-design and some public facing engagement or pilot activity. Members have previously received details of the allocation criteria but for ease of reference these are included at Appendix 1 with the subsequent report at Appendix 2.

## 2. Family Hub model

- 2.1 The Council is still exploring how Kent can implement the national Family Hubs programme, by transforming non-statutory universal children's services and improving integration with universal health services such as midwifery and health visiting so that together they target the areas of greatest need as well as improve access to services through community outreach and an enhanced digital offer in line with Government guidance set out by the DfE.
- 2.2 Family Hubs aim to incorporate universal and targeted services under one umbrella, to deliver more joined up provision and establish a more integrated workforce and network of providers working with children 0-19 years and 0-25 for children with special educational needs and or disabilities. (SEND).

## 3. DfE timescales.

- 3.1 The timescales set by the DfE for formulation and development of an initial delivery plan were very short meaning that the Council had to work at pace with multiple stakeholders over a short period of time.
- 3.2 KCC open access services have a long history of accessing the user voice to inform decision making, reaching out into communities to hear the voice of parents and utilising this feedback to achieve best practice outcomes. Services are formed around the principles and national and local evidence base of 'what works.' To further improve that interface the DfE require services to be co-designed with service users. Family Hubs will build on our existing and partner interfaces with parents and carers including the introduction of a more integrated approach to parent and carer panels through the 'best start for life' programme.

- 3.3 Following agreement of the Delivery Plan by the DfE in February, in March 23 the DfE formally confirmed the exact allocation for Kent for 2022-23 and issued Grant Determination letters.
- 3.4 The DfE has set further short deadlines which are linked to the successful receipt of future funding. To date these have been met and include the publication of a Start for Life Offer and implementation of a Parent Carer Panel by April 23. There is also an aspiration set by the DfE for Transformation Authorities to commence some Family Hub services in the 2023/24 financial year. As set out in Decisions 22/00094 and 23/00015, implementation of the full Family Hub model across Kent remains subject to future decisions and relevant due process, Member consideration and consultation activity.

## 4. Financial breakdown 22/23

- 4.1 Exact funding allocated to Kent for financial year 22-23 was finalised in March 23, following agreement on the Delivery Plan by the DfE.
- 4.2 It has now been possible to further break down the allocation of this revenue, capital and trailblazer expenditure, following end of year draw down on accounts and budgets.
- 4.3 This is a more detailed and up to date spend profile, which takes into account further revisions to the delivery plan and costings made with the DfE in the week commencing 3 April 2023.
- 4.4 Table 1 below shows a breakdown of the planned expenditure against year 1 of the Family Hubs Grant. Full detail of spend and roll over request against all budget lines in the programme can be found in the DfE Rollover template for Family Hubs which is included at Appendix 4 to this report.
- 4.5 Actual expenditure for the year was £791,122 with the balance of unspent grant to be requested as roll forward.

Expenditure Strand	Planned Expenditure	Spend up to 31st March '23	Balance to Roll into 23- 24
	£	£	£
Family Hubs Transformation Funding - PROGRAMME	549,920	342,913	207,007
Family Hubs Transformation Funding - CAPITAL	138,200	120,145	18,055
Parenting Support	486,140	20,319	465,821
Parent-Infant Relationships and Perinatal Mental Health	701,693	110,338	591,355
Early Language and Home Learning Environment	329,268	73,860	255,408
Infant Feeding	313,500	15,000	298,500
Parent and Carer Panels	19,914	17,127	2,787
Publishing the Start for Life Offer	27,900	0	27,900

Trailblazer	183,000	91,420	91,580
TOTAL	2,749,535	791,122	1,958,413

4.6 Table 2 provides a breakdown of capital expenditure by individual project for year 1.

Breakdown of Capital Expenditure:	Planned Expenditure	Spend up to 31st March '23	Balance to Roll into 23- 24
	£	£	£
Murston Children's Centre - Fit Out Works	138,200	120,145	18,055

4.7 Table 3 shows a detailed breakdown of the Trailblazer funding by individual project. Expenditure of £91,420 against the £183,000 has been achieved by the end of 2022-23 with the remainder £91,580 to be spent in the first quarter of 2023-24.

Breakdown of Trailblazer:	Planned Expenditure	Spend up to 31st March '23	Balance to Roll into 23- 24
	£	£	£
Parenting Support - Triple P Licences	36,500	0	36,500
Parent-Infant Relationships and Perinatal Mental Health Support - To produce bite sized films to raise awareness of low to mod PMH for parents and parents to be, non-health professionals and health professionals	25,000	2,720	22,280
Parent-Infant Relationships and Perinatal Mental Health Support - To procure an organisation to support the recruitment and delivery of training a Peer network with lived experience(Parents First)	16,500	0	16,500
Parent-Infant Relationships and Perinatal Mental Health Support - To procure a tool [accredited by the iHV] which presents mums/dads partners with information on postnatal depression- including potential triggers, measures to improve your wellbeing, how it can affect you.	55,000	44,800	10,200
Infant Feeding Support - To develop responsive feeding animations depicting size of babies stomach for the workforce	35,000	35,000	0
Infant Feeding Support - Promote the newly developed breastfeeding friendly venue toolkit accessible on www.wearebesideyou.co.uk especially in the 20% most deprived districts through the Invicta chamber	3,000	0	3,000

of commerce network. [1200 members].			
Infant Feeding Support - Promotion for businesses and incorporate into KCHFT current order	3,000	0	3,000
Infant Feeding Support - To collaborate and support the process for UNICEF BFI re sustainable accreditation 8-9/2/2023 with KCHFT and KCC	9,000	8,900	100
TOTAL	183,000	91,420	91,580

## 5. Financial roll over 23/24

- 5.1 Due to delayed confirmation timescales from the DfE, adherence to procurement rules and financial year end, it has not been possible to spend the full allocation of the initial funding for the 22/23 financial year and the Trailblazer area award.
- 5.2 The Council has therefore asked the DfE for permission to roll over this funding into financial year 23/24 so that the full funding can be utilised to support Kent families. This has been submitted for consideration by the DfE and we are awaiting confirmation. Such financial negotiations and arrangements regarding the funding for the programme fit within the delegations and authority granted under Decision 22/00094.

## 6. Reason for Call in and Response

#### Reason: Clarity of aims and desired outcomes

*i.* Clarity and detail on allocated funding and expenditure to date and projected spend and activity going forward

#### Further requests:

- ii. Clarification of status of and presentation of Delivery Plans
- iii. Clarity on how and why this decision is not material to Kent Communities Programme and potential children centres closures
- iv. Clarify why the Kent Communities Family Hubs EQIA was provided
- v. Clarity on which parts of co-design arrangements are being progressed via this decision.

## 7. Cabinet Member Response:

*i.* Clarity and detail on allocated funding and expenditure to date and projected spend going forward

Further detail around expenditure to date, against individual workstreams has been included in the main body and section 4, of this report, following the end of the financial year.

The amount and purpose of requested rollover of unspent monies has also been included as Appendix 4 of this document.

The Decision confirmed the continuation and extension of co-design activity and the need to progress with activity required under arrangements with the DfE as part of the Family Hub Transformation Programme. This activity includes roll out of the Parent / Forums, the initial design of Family Hubs and exploration of pilot programmes. Therefore this decision does not seek to approve full implementation of Family Hubs. It builds on the arrangements put in place by Decision 22/00094 in October 2022 and provides an interim update for Members and interested parties as to the progression of the programme, confirms and updates the relevant governance arrangements supporting the important work being undertaken by KCC Staff as they work with partners and stakeholders to design and develop the best possible model of Family Hubs for Kent.

It is important to emphasise that Decision 23/00015 does not determine the Family Hub model, the locations of Family Hubs across Kent or the final scope for which services may feature within an operational Family Hub. The decisions relating to implementation of Family Hub model appropriate to Kent, will be taken following due process as per normal Executive decision-making arrangements.

Following Scrutiny Committee review via the call-in process, further information may be provided alongside the original decision documentation to reflect the above and clarify the approved activity for progression under Decision 23/00015.

*ii.* Clarity on how and why this decision is not material to Kent Communities Programme and potential children centres closures

This decision is not material to the Kent Communities programme and potential Open Access building closures and changes.

Neither this decision nor the Delivery Plan and associated discussions with the DfE confirms Family Hub locations. Members will be sighted on the Kent Communities Programme consultation which is currently reviewing the feedback from the consultation in order to reach a decision about the community estate in due course. Family Hubs are a part of that process, as set out in the consultation document for Kent Communities and because the KCC estate picture post Kent Communities decision will be relevant to Family Hub location planning, but the proposed closures or changes to Children's Centres are not the subject of Decision 23/00015.

This decision will inform how the allocated ring fenced monies can be spent to develop services that may be carried out either virtually, in person or through outreach, to help transform the wider parentship approach to delivering the minimum expectations in the programme guide, in order to receive ongoing Family Hub Funding. The programme has been consistent in its messaging that more work will need to be undertaken to progress the development of more formal proposals around service delivery in collaboration with stakeholder and parents and carers.

The aspiration, subject to consultation and due process, is for Kent to aim to have 52 family hub localities across the county post transformation. Should this number be realised KCC will continue to have a greater number of Family Hubs than any other funded area in the Country. As stated earlier, detailed arrangements for the siting of Family Hubs and the confirmation of which services or types of services will be accessible there remain subject to ongoing work and future key decisions.

#### iii. Clarify why the Family Hubs EqIA was provided

The EqIA supplied with the report provides additional detail on Equality Analysis across locations that *may* become future Family Hub sites, however it is recognised that in the future Family Hub services will be more than just physical localities.

This EqIA was provided as is the most recent equalities assessment that has taken place and is relevant as it will be used to inform Family Hub services and future co-design.

As the location of Family Hub sites cannot be confirmed until a Key Decision is made following the outcome of the Kent Communities consultation, a further EqIA is not possible at this stage as the detail of Family Hubs delivery has not yet been established.

The purpose of Decision 23/00015 is to enable further transformation development and scoping, short of any implementation of a full Family Hub model in Kent, therefore the equality impact or service user impact generally is minimal. However, as set out above, the Kent Communities Family Hub EqIA section was provided for context and evidence of ongoing consideration around potential impact later in the programme.

Further detailed service specific EqIAs will be required and undertaken once a key decision has been made following the outcome of the Kent Communities programme, as part of the next stage in the Family Hub programme governance pathway where a full EqIA will be provided for the model that will be developed for decision.

An EqIA which relates specifically to this decision in attached at Appendix 6

vi. Clarity on which parts of co-design arrangements are being progressed via this decision.

Kent County Council, and its partners, is at the beginning of its journey of developing Family Hub services for Kent in collaboration with Kent families and key stakeholders.

The DfE had stipulated that Parent Carer Panels must be established by April 2023. These are progressing and to achieve this, we continue to engage with existing and established Parent and Carer stakeholder groups and formally commenced the recruitment of a dedicated co-design panel which will continue to evolve and be called upon to inform and shape workstreams as the Family Hub model develops and this activity does not form part of this decision.

- 8. Background Documents included as appendices to this report and as links below
  - Appendix 1 <u>Record of Decision Family Hub 23-00015</u>
  - Appendix 2- <u>Family hub Decision Report 23-00015</u>
  - Appendix 3a Family Hub Programme overview
  - Appendix 3b Programme Outcomes
  - Appendix 4 LA delivery activity 2022-23 DfE Rollover template for Family Hubs (Kent) – submitted April 23 (Not yet agreed by DfE)
- Appendix 5a FH DfE Memorandum Of Understanding
- Appendix 5b FH funding roll over information
- Appendix 6 EqIA (Updated)

## 9. Contact Details

#### **Report Author**

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Relevant Director: Stuart Collins, Director of Integrated Children's Services (West Kent and Early Help and Preventative Services) Telephone: 03000 410519 Email: <u>stuart.collins@kent.gov.uk</u>

## **KENT COUNTY COUNCIL – RECORD OF DECISION**

#### **DECISION TAKEN BY:**

Sue Chandler,

## Cabinet Member for Integrated Children's Services

**DECISION NO:** 

23-00015

**For publication** [Do not include information which is exempt from publication under schedule 12a of the Local Government Act 1972]

#### Key decision: YES / NO

Key decision criteria. The decision will:

- a) result in savings or expenditure which is significant having regard to the budget for the service or function (currently defined by the Council as in excess of £1,000,000); or
- b) be significant in terms of its effects on a significant proportion of the community living or working within two or more electoral divisions which will include those decisions that involve:
  - the adoption or significant amendment of major strategies or frameworks;
  - significant service developments, significant service reductions, or significant changes in the way that services are delivered, whether County-wide or in a particular locality.

#### Subject Matter / Title of Decision Family Hub Transformation Funding

#### Decision:

As Cabinet Member for Integrated Children's Services s, I agree to:

a. commence development and co-design of the Family Hub model for Kent in line with Government Family Hub framework for delivery and associated plans.

b. note and confirm the expenditure, activity and planning for funding already allocated under Key Decision 22/00094, progressed under the delegation to receive and deploy initial funding in accordance with the requirement to develop and explore detailed transformation plans.

c. Note that the implementation of the full range of changes required to transform KCC's existing provision to meet the requirements set out in the Government's Family Hub model plan will be subject to future Executive decision-making.

d. to delegate authority to the Corporate Director of Children, Young People and Education, in consultation with the Cabinet Member for Integrated Children's Services and the Cabinet Member for Adult Social Care and Public Health, to take necessary actions, including but not limited to entering into contracts and other legal agreements, as required to implement the decision.

## Reason(s) for decision:

#### 1. Introduction

1.1 The Council has been exploring how Kent could implement the national Family Hubs programme, in line with Government guidance page best practice and has been appointed a Family

Hub Transformation Authority.

1.2 As a Family Hub Transformation Authority, the Council has been awarded some initial funding for this financial year (2022 – 2023) in order to undertake preliminary work to establish how Kent council implement the national Family Hub Framework.

## 2. Current context

2.1 The Council has been notionally allocated to receive up to £10million over three years as part of the Family Hubs Transformation Funding Programme and on the 9 February 2023, Kent was announced as one of 14 national Family Hub trailblazer areas who will receive transformation funding as set out in this report.

2.2 Trailblazer areas will receive additional support from the Department of Education (DfE) and be expected to work with other transformation authorities to progress Family Hub Transformation work.

2.3 The DfE have specified this funding should be used to develop and scope how Family Hubs could be transformed, incrementally add to existing services, complement existing services and/or offer new services in order to improve services to whole families in Kent, ensuring open access provides a 0-19 years model and children get the 'Best Start to Life'.

2.4 For 2022-23, £2,830,000 Family Hubs funding has been provisionally allocated by the DfE to Kent, with £138,164 of this being capital expenditure. A further £183,000 in revenue funding has also been allocated specifically to begin to undertake preliminary transformation activity during this financial year.

## 3. Financial Implications

3.1 Due to Family Hub Transformation Programme delays and DfE deadlines extending, spending the allocated funding has been delayed and the Council remain in discussions with DfE around expectations and timelines for monies which are committed but not spent at the end of this financial year.

3.2 Initial payments of £1.4m from the total year 1 allocation, have been received by the Council in November 2022 and January 2023, however discussions remain ongoing with the DfE in relation to the remaining funding with further payments anticipated to be received by the Council by the end of the March 2023.

3.3 Of the initial funding received, £1.3m has been forecasted to be spent by the end of March 2023, and the remainder of year 1 allocation committed to be spent in early 23-24, subject to DfE approval.

3.4 To date, a total of £776,200 has been spent/ payments are in progress, with the majority attributable to staffing costs for planning and preparatory work and the purchasing of some equipment to support outreach services, where needed.

3.5 As part of our activities we have engaged with key stakeholders, including initial Parent Carer groups to help plan the detail of the future delivery model and ensure meaningful coproduction, notwithstanding, we are not able to declare which buildings will become Family Hubs until after the Kent Communities consultation concludes.

3.6 As previously noted, the delivery plan is iterative, although Public Health, Midwifery and Integrated Childrens Services will continue to deliver core and statutory services.

## 4. Financial implications

4.1 The Council is facing significant financial challenges and it is critical that any obligations created to deliver the programme are fully funded by the grant.

4.2 This report only covers the grant funding for the current financial year, totalling £2.8m. The latest forecast indicates that only £1.3m of that total will be spent by the end of the financial year. The DFE have not yet confirmed whether it will be possible to utilise unspent year 1 (22-23) grant funding in future years. If that is not the case, year 2 and 3 funding plans will need to be reprioritised to ensure total spending commitments can be fully contained within the grant received.

4.3 The spending plans are prepared in accordance with DFE conditions of grant including the proportion of spend that can be spent on each area of activity. These include:

- Family Hubs Transformation
- Home Learning Environment Services
- Perinatal Mental Health & Parent-Infant Relationships
- Parenting Support
- Infant Feeding Support
- Publishing Start for Life Offers & establishing parent carer panels

## 5. Legal implications

5.1 The Council has entered into a Memorandum of Understanding (MOU) with the Department of Education (DfE) which creates obligations to progress transformation scoping and proposal development activity this financial year.

5.2 Access to the associated funding of up to £10m, depending on the type and level of transformation activity eventually progressed, is conditional on compliance with the terms of the MOU and demonstration of progress toward an effective Family Hub Model.

5.3 The places and spaces where family hubs will be formed will be informed by the outcome of the Community Assets consultation, however the development of the practice model is independent of the outcome of the consultation.

## 6. Equalities implications

6.1 Initial assessment and attached Equalities Impact Assessment (EQIA) has not identified any negative implications. Further EQIAs will need to be developed as part of future decision making in relation to individual aspects of Family Hub delivery once developed.

## 7. Risk and Other Factors

7.1 Currently there is a consultation taking place regarding Community Assets in which some family services are currently being delivered.

7.2 The outcome of this consultation will inform some aspects of further Family Hub proposals, specifically with regards to Community Assets, however the Family Hubs Transformation Programme has other workstreams, such as outreach and digital services which are not impacted and can progress.

- 8. Governance
- 8.1 Cabinet Member decision will provide the strategic policy position of KCC on the development Page 13

of the Family Hub expenditure for 2022-2023 and delegate authority for required activity to support the further progression on design when it is appropriate to do so.

The decision provides clear delegation for the ongoing submission of updates to 8.2 Government on the iterative Delivery Plans and to enter into relevant legal agreement (e.g. MOUs) when these do not create commitments outside the scope of activity approved by this and previous Family Hub decisions.

8.3 Detailed proposals for the Family Hub model in Kent will still be subject to future decisionmaking, with the relevant consultation and governance activity. Risk and Other Factors

Cabinet Committee recommendations and other consultation: The Children's and Young People Cabinet Committee consider the decision on 8 March 2023

## Any alternatives considered and rejected:

Do nothing – additional funding to support the improvement of Family Services in Kent will not be able to be utilised failure to make use of this grant may result in it needing to be repaid unless confirmed otherwise by DfE.

Should funding not be utilised for this financial year it could put any future Family Hubs Transformation Funding for subsequent years at risk of non-receipt.

Progress expenditure - of the limited funding allocated for this financial year and utilise it to further develop and progress further exploration of what Family Hub services could look like, including improving access through community outreach, community engagement, project development and an enhanced digital offer.

Delay – further delivery of Family Hubs Transformation and request for Kent's delivery timeframes to be pushed back. DfE have outlined that they would not be in agreement, and this may impact future funding and outcomes reporting.

There is also, currently an expectation from DfE that as part of this Transformation Programme,

Any interest declared when the decision was taken and any dispensation granted by the **Proper Officer:** None

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signed

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date	••••••		••••••	•••••

From: Sarah Hammond, Corporate Director of Children, Young People and Education

To: Sue Chandler, Cabinet Member for Integrated Children's Services

Subject: 23/00015 - Family Hub Transformation Funding

#### Decision Number - 23/00015

#### Key decision

- It affects more than 2 Electoral Divisions
- It involves expenditure or savings of maximum £1m (Over several phases)

#### Classification: Unrestricted

Past Pathway of report: Decision - 22/00094 - Family Hubs Transformation Children's, Young People and Education Cabinet Committee – 8 March 2023.

#### Future Pathway of report: Cabinet Member Decision

Electoral Division: All

**Summary**: Kent County Council has been successful in receiving Family Hub Transformation Authority status and has therefore received designated Family Hub Transformation Funding.

Further work now needs to commence to begin exploring how the Family Hub model could work in Kent. To align with this, expenditure of funding allocated for financial year 2022 - 2023 needs to take place.

Following key decision 22/00094 which relates to the acknowledgement of status and acceptance of funding as part of the Family Hubs Transformation programme, a further key decision is now required in order to allocate expenditure for financial year 2022 – 2023 and commence development activity for Family Hubs.

The Council must take a formal decision to enable this financial year's funding to be allocated and support the development of further proposals regarding future delivery.

Allocation of this initial expenditure will allow further work to be undertaken to develop more detailed and co-designed proposals for delivery alongside proposed allocation of expenditure for subsequent years, which will be subject to governance through normal Executive Decision making arrangements.

Recommendation(s):	
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The Cabinet Member for Integrated Children's Services is asked to take the proposed decision to:

a. commence development and co-design of the Family Hub model for Kent in line with Government Family Hub framework for delivery and associated plans.

b. note and confirm the expenditure, activity and planning for funding already allocated under Key Decision 22/00094, progressed under the delegation to receive and deploy initial funding in accordance with the requirement to develop and explore detailed transformation plans.

c. Note that the implementation of the full range of changes required to transform KCC's existing provision to meet the requirements set out in the Government's Family Hub model plan will be subject to future Executive decision-making.

d. to delegate authority to the Corporate Director of Children, Young People and Education, in consultation with the Cabinet Member for Integrated Children's Services and the Cabinet Member for Adult Social Care and Public Health, to take necessary actions, including but not limited to entering into contracts and other legal agreements, as required to implement the decision.

## 1. Introduction

- 1.1 The Council has been exploring how Kent could implement the national Family Hubs programme, in line with Government guidance and best practice and has been appointed a Family Hub Transformation Authority.
- 1.2 As a Family Hub Transformation Authority, the Council has been awarded some initial funding for this financial year (2022 – 2023) in order to undertake preliminary work to establish how Kent council implement the national Family Hub Framework.

## 2. Current context

- 2.1 The Council has been notionally allocated to receive up to £10million over three years as part of the Family Hubs Transformation Funding Programme and on the 9 February 2023, Kent was announced as one of 14 national Family Hub trailblazer areas who will receive transformation funding as set out in this report.
- 2.2 Trailblazer areas will receive additional support from the Department of Education (DfE) and be expected to work with other transformation authorities to progress Family Hub Transformation work.
- 2.3 The DfE have specified this funding should be used to develop and scope how Family Hubs could be transformed, incrementally add to existing services, complement existing services and/or offer new services in order to improve services to whole families in Kent, ensuring open access provides a 0-19 years model and children get the 'Best Start to Life'.

2.4 For 2022-23, £2,830,000 Family Hubs funding has been provisionally allocated by the DfE to Kent, with £138,164 of this being capital expenditure. A further £183,000 in revenue funding has also been allocated specifically to begin to undertake preliminary transformation activity during this financial year.

## 3. Activity to date

- 3.1 Due to Family Hub Transformation Programme delays and DfE deadlines extending, spending the allocated funding has been delayed and the Council remain in discussions with DfE around expectations and timelines for monies which are committed but not spent at the end of this financial year.
- 3.2 Initial payments of £1.4m from the total year 1 allocation, have been received by the Council in November 2022 and January 2023, however discussions remain ongoing with the DfE in relation to the remaining funding with further payments anticipated to be received by the Council by the end of the March 2023.
- 3.3 Of the initial funding received, £1.3m has been forecasted to be spent by the end of March 2023, and the remainder of year 1 allocation committed to be spent in early 23-24, subject to DfE approval.
- 3.4 To date, a total of £776,200 has been spent/ payments are in progress, with the majority attributable to staffing costs for planning and preparatory work and the purchasing of some equipment to support outreach services, where needed.
- 3.5 As part of our activities we have engaged with key stakeholders, including initial Parent Carer groups to help plan the detail of the future delivery model and ensure meaningful coproduction, notwithstanding, we are not able to declare which buildings will become Family Hubs until after the Kent Communities consultation concludes.
- 3.6 As previously noted, the delivery plan is iterative, although Public Health, Midwifery and Integrated Childrens Services will continue to deliver core and statutory services.

## 4. Options considered and dismissed and associated risk

4.1 *Do nothing* – additional funding to support the improvement of Family Services in Kent will not be able to be utilised failure to make use of this grant may result in it needing to be repaid unless confirmed otherwise by DfE.

Should funding not be utilised for this financial year it could put any future Family Hubs Transformation Funding for subsequent years at risk of non-receipt.

*Progress expenditure* - of the limited funding allocated for this financial year and utilise it to further develop and progress further exploration of what Family Hub services could look like, including improving access through community outreach, community engagement, project development and an enhanced digital offer.

*Delay* – further delivery of Family Hubs Transformation and request for Kent's delivery timeframes to be pushed back. DfE have outlined that they would not be in agreement, and this may impact future funding and outcomes reporting.

There is also, currently an expectation from DfE that as part of this Transformation Programme, Kent will have opened some Family Hubs by the end of the first half of 2023.

## 5. Financial Implications

- 5.1 The Council is facing significant financial challenges and it is critical that any obligations created to deliver the programme are fully funded by the grant.
- 5.2 This report only covers the grant funding for the current financial year, totalling £2.8m. The latest forecast indicates that only £1.3m of that total will be spent by the end of the financial year. The DFE have not yet confirmed whether it will be possible to utilise unspent year 1 (22-23) grant funding in future years. If that is not the case, year 2 and 3 funding plans will need to be reprioritised to ensure total spending commitments can be fully contained within the grant received.
- 5.3 The spending plans are prepared in accordance with DFE conditions of grant including the proportion of spend that can be spent on each area of activity. These include:
  - Family Hubs Transformation
  - Home Learning Environment Services
  - Perinatal Mental Health & Parent-Infant Relationships
  - Parenting Support
  - Infant Feeding Support
  - Publishing Start for Life Offers & establishing parent carer panels

## 6. Legal implications

- 6.1 The Council has entered into a Memorandum of Understanding (MOU) with the Department of Education (DfE) which creates obligations to progress transformation scoping and proposal development activity this financial year.
- 6.2 Access to the associated funding of up to £10m, depending on the type and level of transformation activity eventually progressed, is conditional on compliance with the terms of the MOU and demonstration of progress toward an effective Family Hub Model.
- 6.3 The places and spaces where family hubs will be formed will be informed by the outcome of the Community Assets consultation, however the development of the practice model is independent of the outcome of the consultation.

## 7. Equalities implications

7.1 Initial assessment and attached Equalities Impact Assessment (EQIA) has not identified any negative implications. Further EQIAs will need to be developed as part of future decision making in relation to individual aspects of Family Hub

delivery once developed.

## 8. Risk and Other Factors

- 8.1 Currently there is a consultation taking place regarding Community Assets in which some family services are currently being delivered.
- 8.2 The outcome of this consultation will inform some aspects of further Family Hub proposals, specifically with regards to Community Assets, however the Family Hubs Transformation Programme has other workstreams, such as outreach and digital services which are not impacted and can progress.

## 9. Governance

- 9.1 Cabinet Member decision will provide the strategic policy position of KCC on the development of the Family Hub expenditure for 2022-2023 and delegate authority for required activity to support the further progression on design when it is appropriate to do so.
- 9.2 The decision provides clear delegation for the ongoing submission of updates to Government on the iterative Delivery Plans and to enter into relevant legal agreement (e.g. MOUs) when these do not create commitments outside the scope of activity approved by this and previous Family Hub decisions.
- 9.3 Detailed proposals for the Family Hub model in Kent will still be subject to future decision-making, with the relevant consultation and governance activity.

## 10. Conclusions

- 10.1 Taking into account the Key Decision already made, with the support of Transformation Funding the Council will be able to continue to explore, design and develop what improved services for families in Kent could look like with service user feedback at the heart of the development.
- 10.2 Failure to be able to spend funding allocated this year may delay this progress and risk not receiving future Transformation Funding from Government.
- **11.**Recommendation(s): The Cabinet Member for Integrated Children's Services is asked to take the proposed decision to:

a. commence development and co-design of the Family Hub model for Kent in line with Government Family Hub framework for delivery and associated plans.

b. note and confirm the expenditure, activity and planning for funding already allocated under Key Decision 22/00094, progressed under the delegation to receive and deploy initial funding in accordance with the requirement to develop and explore detailed transformation plans.

c. Note that the implementation of the full range of changes required to transform KCC's existing provision to meet the requirements set out in the Government's Family Hub model plan will be subject to future Executive decision-making.

d. delegate authority to the Corporate Director of Children, Young People and Education, in consultation with the Cabinet Member for Integrated Children's Services and the Cabinet Member for Adult Social Care and Public Health, to take necessary actions, including but not limited to entering into contracts and other legal agreements, as required to implement the decision.

## 12. Background Documents

- Family Hub Model Framework
- The Best Start for Life: Early Years Healthy Development Review Report

#### 13. Appendices

13.1 Equality Impact Assessment

## 14. Contact details

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## Summary of the Family Hub Transformation Delivery Plan and outline of existing current services which will also form part of the ongoing transformation and development of the Family Hub Model in Kent.

#### Introduction

- 1. This document represents a work in progress outlining initial thinking of how KCC can deliver a Family Hub Model in Kent.
- 2. It reflects certain approaches expected in any Family Hub model delivered by a Local Authority, in line with the Government Policy on Start for Life and Statutory Guidance for relevant children and young people services, along with potential arrangements which may be appropriate as part of any transformation delivered through implementation of a Family Hub Model.
- 3. Government was advised, when the Delivery Plan was submitted, that all implementation of the Family Hub approach and the wider model would be subject to further decision-making by the Council, in accordance with its Executive Decision-making arrangements and related regulations
- 4. In May 2022, the Ofsted ILACS inspection recognised Kent's children's services as Outstanding. Stating that children and their families have access to a good range of early help support services.
- 5. Ofsted highlighted effective communication with other professionals, the use of strengthbased interventions, and having a structured framework of moving forward plans providing our families with guidance and information to continue to help themselves.
- 6. KCC, Police and Kent and Medway ICB are the 3 core partners of Kent's Safeguarding Children's Multiagency Partnership (KSCMP). The KSCMP facilitates and oversees the priority areas of safeguarding practice and policy, particularly to ensure strong join-up between services to safeguard children and young people. The Kent statutory Director of Children's Services (DCS) is the current Chair of the KSCMP.

#### **Current Landscape**

- Kent's Open Access services already provide a strong foundation upon which to develop a Family Hub model. Key partners such as Public Health, Health Visiting and Midwifery services operate many of their statutory functions from KCC children's centres.
- 8. As part of the Family Hub transformation development in Kent, we want to build on this partnership working to develop a culture of integrated working including the development of shared assessments and interventions with health colleagues.
- 9. There is no statutory framework for youth provision, however Kent has maintained a robust funded offer of support which has been developed over a number of years to meet the needs of young people in Kent.
- 10. Youth Services in Kent provide a rich mix of positive activity, support and advice for all young people through open access hubs in every district alongside targeted additional support for young people who require individual interventions.
- 11. The KCC offer has two main elements, 1. An in-house, youth offer, where each district has a KCC-run youth hub, offering a mixture of universal, additional and targeted support for young people with additional support needs. And 2, an externally provided, open access

commissioned youth offer. Youth provision will continue to provide a valuable contribution in the wider development of family hubs.

- 12. KCC also operate a network of children's centres, these are in place to improve outcomes for young children and their families and reduce inequalities, particularly for those families in greatest need of support. The core purpose of a children's centre is to enhance child development and school readiness, to support parenting aspirations and parenting skills; and to promote child and family health and life chances.
- 13. This is achieved by providing early childhood services in an integrated manner to facilitate access and maximize benefits to young children and their parents including early education, training, antenatal classes, baby clinics, support with breastfeeding, support with parenting and speech and language, drop-in sessions for parents and children, services for children with special needs and disabilities.
- 14. KCC's network of children's centres also provide opportunities for families to get involved with volunteering within services.
- 15. The development of Children's Centres and improved joint working and collaboration with NHS Health Services will be key to the transformation to improve outcomes and life chances for all young children; specifically, to close the gap between the outcomes for the most disadvantaged and others, through the development of Family Hubs
- 16. Early Help assessment and whole family intervention for families with multiple or complex needs takes place in Early Help Units (EHU). Kent's EH model is bound by the principles of Working Together 2018 and is well established across the internal and multiagency partnership, including across all health services. The programme ensures an integrated, whole family approach when working with families.
- 17. Midwifery Services are currently delivered through 4 NHS Trusts. Aspects of antenatal care are delivered in existing Children's Centres, and through a digital offer online antenatal courses are offered.
- 18. Kent's Health Visiting Services (HVS) and School Health services are commissioned by Public Health and delivered by Kent Community Health NHS Foundation Trust (KCHFT) through a collaborative partnership, working with children aged 0-19. They work with all families in Kent with children aged 0-5 years to deliver the Healthy Child Programme.
- 19. Kent's HVS are delivered in the community, including delivery in Children Centres, where they operate support sessions/clinics as part of the core offer. HVS use family health needs assessments to identify and respond to need. There are well established referral pathways in place to ICS and other specialist services if required. The HVS have recently developed a website Kent Baby, providing online support for parents and their baby before and after birth right up until their child starts school.

#### **Transformation opportunities**

20. Kent has a wide range of communities including deprived urban and rural coastal communities, seldom heard rural communities and densely populated urban communities. The needs of our communities are often very complex and specific, with local challenges requiring local solutions. The Family Hub will develop a model of co-production with children, families and communities to help ensure that services are in the right place and offer the right support at the right time.

#### Schools and school readiness

21. Schools are often at the heart of Kent's communities, particularly in rural areas, and play a wider role in bringing communities together, Family Hubs will therefore work closely with schools and communities to ensure a joined-up approach to support.

#### Deprivation and child poverty

22. Child poverty is not evenly distributed in Kent, with children from coastal areas more likely to live in poverty. Although some areas in West Kent are predominately affluent, there are small pockets of communities that require additional support from services, the Family Hub model will help to ensure that services are relevant to the communities that they serve through improved levels of outreach into deprived communities.

#### Infant and child health

- 23. Encouraging and supporting women to breast feed is valuable, starting with the infants first feed. Monitoring the proportion who receive a first feed of breast milk, maternal or donor breast milk helps to understand breast feeding support which may be required. Analysis of the most recent figures published suggests that the first feed of breast milk in 2021/22 in Kent and Medway was 62%. Across the four maternity trusts this ranged from 58% 67.7%. We want to ensure that families are offered the support they need to continue to breast feed and that partners feel included in the early weeks whilst feeding is established. Preparing antenatally and learning about what could help and what may inhibit breastfeeding has the potential to support more woman to breastfeed.
- 24. Supporting Infant Feeding is an ongoing priority in Kent and KCC Children's Centres work in partnership with the Kent Health Visiting Service to ensure the implementation of the UNICEF Baby Friendly Initiative across the county and have already been successful in achieving level 3 accreditation with further assessments being undertaken early 2023 as we work to achieve sustainability. The Specialist Infant Feeding Service (SIFS) is delivered by KCHFT as part of the Health Visiting Service and has links across Kent's Midwifery, Health Visiting and Children's Centre services. Breast feeding services form part of the Children's Centre core offer. Professionals can refer directly to the Infant Feeding Service (IFS) for support from specialist IFS leads.

#### Mental health of families

- 25. The mental health and wellbeing of the under 5-year-olds is largely unknown but recent studies indicate a correlation between early infant sleep problems and specific behavioural and emotional health and wellbeing problems at 2 years. For those children (under 18 years) requiring hospital admission for mental health conditions, the numbers from Kent are similar to the England admissions.
- 26. Perinatal mental illness can occur during pregnancy or in the first year following the birth of a child. 10-20% of women experience mental health problems during pregnancy or in the first year after having a baby. 5-10% of fathers are reported to suffer from depression during their partners pregnancy and following birth.

27. Poor mental health can impact a parent's ability to bond with their baby, to develop invaluable attachment and have the capacity to nurture them. This highlights the importance of identifying and meeting the needs of parents and carers, so they are better prepared to support their infant. It is recognised that the ways in which infants develop and build relationships is important for brain development including emotional, social, intellectual and psychological development. Without this development infants can feel insecure and become anxious.

#### Core additional components of a family Hub

- 28. The Department for Education have made a number of stipulations about Family Hubs. While there is inevitable room for national variations based on size, geography and resource, they have outlined a blueprint, which states that
- 29. A Family Hub is a system-wide, multi-agency model, providing high-quality, whole-family, joined up family support services and is centred around 3 key principles:
  - a. Access:
    - i. There is a clear, simple way for families to access help and support through a hub building and spoke approach. This includes an offer across physical and virtual spaces.
    - ii. Connectivity: There are services working together for families with a universal 'front door', shared outcomes and effective governance.
    - iii. There are professionals working together, through co-location, data sharing and a common approach to their work.
    - iv. Families only have to tell their story once, the service is more efficient, and families get more effective support.
    - v. Statutory services, the community, charities, and faith sector partners are working together to get families the help they need.
  - b. Relationships:
    - i. The Family Hub prioritises strengthening relationships and builds on family strengths.
    - ii. Relationships are at the heart of everything that is delivered in Family Hubs.
- 30. Family Hubs should be designed to deliver family support services from pregnancy, through the child's early years and later childhood, adolescence and into early adulthood until they reach the age of 19 (or up to 25 for young people with special educational needs and disabilities).
- 31. KCC has a strong history of working with our partners in the public, private, voluntary and community sector, and this has been strengthened through our response to the Covid pandemic. This has allowed a stronger joint focus on the impact of covid on mental health and support required. The negative impact on different ethnic populations in terms of health outcomes has been an area of focus for the wider health and multiagency network.

#### Building on and developing the Family Hub Opportunities

32. Public health services are already provided through outreach locations throughout Kent and as part of extending the Family Hub network we will build on use of these existing locations. A review of what community venues are working best will inform decision making as part of the Family Hub programme development.

- 33. Kent has a wide range of support for those with mental health and wellbeing needs. This includes regular campaigns to support residents access help, such as Release the Pressure. A comprehensive digital platform, (Kent Resilience Hub) which supports navigation to online resources or services across a range of need.
- 34. Perinatal mental health difficulties can affect prospective parents, new parents/partners/carers. Early identification and support are paramount to support parents and infants develop their relationships. Kent has developed a specialist perinatal mental health community team and the new specialist service, Thrive, the Maternal Mental Health service for those who have experienced birth trauma or perinatal loss.
- 35. We are With You a substance misuse support service for young people aged between 10-18 providing brief interventions, and specialist treatment and adult support services via change Grow Live and Forward Trust
- 36. Kent Resilience Hub is an online resource to enable parents, practitioners, schools and young people to find local support for young people. It includes Youth Voice, the Try Angle Awards and Youth Charter. It also includes extensive training opportunities. Mood Spark is an online website (Moodspark.org.uk) developed by young people in Kent that provides information to young people to support their wider emotional health.
- 37. Kent is also implementing training for the wider workforce to support parents with children with Autism to ensure that at a first contact a parent is offer consistent support and strategies across multiagency partners. Family Hub teams will be an important part of this network to ensure families receive support early on.
- 38. Kent has demonstrated its ability to co-produce service with families through the new parenting support offer for parents with neurodiverse children on the pathway to a diagnosis. Together with parents offers a good example of working with families with lived experience.
- 39. Kent's partners deliver a wide range of evidence-based parenting programmes, which are tailored to meet a continuum of needs between 0-25yrs. Programmes are delivered face to face and virtually and are enhanced by digital information. KCHFT's Health Visiting and Kent School Health Services provide online parenting programmes through Solihull which are free to access to all Kent residents and provide a range of virtual courses. Parenting information and support is also provided through the Health Visiting website and on the Born to Move App. There is a county-wide integrated parenting offer with CC and HVS for introducing solid foods which are co-delivered virtually and in person enhanced by the websites digital offer. The partnership regularly reviews the offer to ensure it meets local needs.
- 40. Kent parenting programmes are supported by bespoke 1:1 parenting support where a programme does not meet the specific needs of a family, or they are struggling to engage in group work.
- 41. Kent is embedding the "Balanced System" approach to speech, language and communication needs. This is a 5-year programme to initiate the implementation of a single Balanced System outcomes-based offer for children and young people in Kent 0-15 years. This will include a universal offer for children and families where they can have easy access to speech, language and communication advice via community venues such as Family Hubs.
- 42. The award-winning Enhanced Family Involvement in Children's Learning (EFICL) programme is being delivered in Kent already and an extended and targeted offer of support will enhance the Home Learning offer from Family Hubs.
- 43. The Health Visiting Service carry out the Healthy Child Programme, Health and Development review of the child aged 2-2 ½ years.

- 44. In line with recommendations from Ofsted and Care Quality Commission, KCC, The Education People and Kent Community Health Foundation Trust (KCHFT) have worked together to develop an 'Integrated Review at Two' process for Kent. The 'Integrated Review at Two' process brings together the Healthy Child Programme Health and Development Review at age two to two and a half and the EYFS Progress Check at age two.
- 45. The integrated review at 2 process was fully implemented, across Kent in March 2021. The Family Hub staff will look to further support those identified in the 2-year review with additional home learning support connecting with Portage where required and offering future outreach support using Portage skills.

#### Steps already taken by KCC to transform towards a family hub mode

- 46. The Lead Member for Integrated Children's Services took a formal Key Decision for KCC to become a Family Hub Authority on the 13 October 2022 <u>Decision 22/00094 Family Hubs</u> <u>Transformation</u>.
- 47. This was endorsed by the Children Young People and Education Cabinet Committee and considered at Scrutiny Committee. The delivery plan will form part of an iterative and continuously developing workstream outlining transformation opportunities, potential areas of focus and options for service redesign with the involvement of key partners and service user feedback.
- 48. The ongoing formal implementation of the Family Hub approach in Kent remains subject to further formal decision-making at Executive Member level.
- 49. Updates will be provided to DfE, in addition to any stages required under the MOU, as this issue progresses through KCC's formal governance process.
- 50. To create a seamless offer across 0-25 years, we are working on the development of a single assessment building upon the midwifery and health visiting pathway.
- 51. 'One front door' approach, working with partners to ensure referrals to children's social care are efficiently and consistently managed to provide the child or family with the right help at the right time.
- 52. Early Co-production discussions have commenced through liaison with existing multi-agency parent/carer panels including those facilitated by the Maternity Voices Partnership, KCHFT Public Health Services 0-19 years Parent and Carer Forum and the well-established Member-led Local Children's Partnership Groups.
- 53. The Health Visiting Service is delivering a one-year pilot offering a Tongue-Tie Co-ordination Service which offers a single point of access for babies requiring a tongue-tie division and offers families pre and post procedure support. The pilot is jointly funded between KCC Public Health and the Kent and Medway Integrated Care Board. We are currently developing a campaign on infant feeding from birth to 18 months.
- 54. KCC are partners in PATH, an EU-funded project on low mild to moderate perinatal mental health. This has led to the development of resources and increased awareness for families and carers of the impacts of poor mental health on families. The PATH and Kent resilience hub websites present a range of resources and advice for families and professionals. KCC have helped develop, and deliver PATH training to health, non-health professionals and families. We have supported the development of parental workplace wellbeing recommendations through local focus groups, and partner workshops. KCC will work with partners to embrace and embed them.
- 55. We are exploring the opportunities to have parenting groups organised by the Disabled Children teams hosted in the Family Hubs, and having increased sensory environments

within our Family Hubs, working closely with SEND and Disabled Children's Services expertise.

- 56. Playground sessions are currently delivered by artists from our libraries, children centres and community venues, They focus on families in general but have also engaged with specific targeted groups. Due to the sensory aspect, we are keen to look how it might support with SEND Needs and if/how we can continue the delivery in Family Hubs.
- 57. We have initiated first meeting with faith communities and service personnel representative for Kent with information sharing principles established. Kent has a strong Interfaith network that will help Family Hubs connect more widely to the diverse faith communities in Kent.
- 58. A literature review of parenting programmes was undertaken by Kent Public Health observatory in 2020, available: https://www.kpho.org.uk .
- 59. Thrive, the new specialist Maternal Mental Health Service (part of the NHS Long Term Plan) which focuses on moderate to severe perinatal mental health difficulties associated with perinatal loss and birth trauma is currently being rolled out across Kent and Medway and will be available in 2023/2024.
- 60. The development of the Family Hub Framework Model will help to ensure that the start for life offer is integrated and consistent across the county with the development of a shared brand, understanding and language between agencies.
- 61. KCC has a wide range of digital platforms and interfaces, however, these are not integrated or joined up across the agencies. The Family Hub Framework Model gives KCC the opportunity to ensure that a coordinated digital strategy is in place to support and enhance the user experience across digital and virtual platforms under a single, Family Hub online offer.
- 62. Post Covid use of buildings has reduced the interconnected working of Open Access services in Early Help Units and Children's Social Work Services where co-location has reduced to create safer building spaces for delivery of services. This has had an impact on seamless whole family working to help sustain positive changes achieved through interventions, connections are now being rebuilt to pre-covid levels, however, some communities are using centres less frequently and have told us that they want a more digital interface and increased outreach opportunities to improve their access to services.
- 63. Family Hub development will work with Kent Digital Transformation team to prioritise development opportunities to support Kent's Family Hubs framework with specialist support to develop a significantly enhanced Digital offer focused on service user accessibility with new features to be embedded into the offer based on service user feedback and need.
- 64. Ofsted recognised Kent's excellent record of co-production and participation into all aspects of Children's Services. Family Hubs will grow those existing opportunities for successful co-production and service user voice. Health Visiting and Midwifery are also committed to co-production with a number of parent carer forums in existence across Kent for particular service areas.
- 65. KCC enjoys a wide range of well-established partnership groups including a joint maternity and health visiting steering group with representatives on from KCC and integrated commissioning groups. There is commitment to the Family Hub offer which is viewed as the next stage in developing an ambitious programme of integrated multiagency working with shared principles already discussed about the service design and requirements.
- 66. KCC is in a formal partnership with KCHFT who deliver health visiting services with a strong track record of delivering transformation.

- 67. Our Children's Centre network are leaders in early years practice, ensuring that Early Years principles are continuously developed. The experience of practitioners enabled the service to develop a Child Development training package for our Children's Social Work and Early Help teams which has subsequently been mandated across Integrated Children's Services.
- 68. In KCC the Open Access Children's Centre and Youth Hub offer forms part of our Integrated Children's Service. All Social Work and Early Help services are integrated, and family support is offered at a community level through the Children's Centre estate and both universal and targeted outreach. KCC's model is underpinned by a whole family 0-25 offer across the continuum of need
- 69. Kent has worked with health partners to develop the Kent and Medway Care Record which brings together health and social care records and is now embedded into Health and Children's systems. The learning from this development will help us further develop our Family Hub data sharing and joint assessment plans.

#### **Goals for Family Hubs**

- 70. Following robust data and IMD deprivation analysis we aim to ensure that Family Hubs deliver the right services in the right places and at the right time.
- 71. Kent's vision is for children, young people and families to have easy and timely access to the right services for their needs and to be able to receive support across a range of services and networks which promote positive changes, improve resilience, and help to achieve healthy and successful futures.

#### Partnership goals

- 72. To know families in Kent have received the support they need to be confident to help themselves and be positive in their parenting
- 73. To have a supported, capable workforce who demonstrate they are confident to listen to and hear the voices of families and help them to know about locally available support.
- 74. To improve access and use of information provision to enable parents, children and young people to develop greater agency and resilience within their communities
- 75. To build a system where a family is met with understanding and empathy when they tell their story and is responded with a coordinated solution that addresses their needs.
- 76. To see significant improvements in the public health outcomes for deprived communities in coastal areas so that they improve faster than the rest of Kent to reduce the gaps.
- 77. To target populations that are seldom engaged by growing neighbourhood and place-based solutions and innovations outside of (but connected to) specialist services.
- 78. To address some of the challenges children and families face at a time of transition by implementing needs led and outcome-based systems.

#### Milestones to be developed

- 79. To improve the Start or Life offer, by joining up our start for life digital services
- 80. To develop Family Hub spaces that are accessible to all families
- 81. To collate our websites and develop a distinct digital offer which brings the information for families into one place is easily accessible and supports the self-efficacy of young people and families
- 82. Increased engagement from the local communities, including the seldom heard, to integrate and be a part of the family hub workforce.

- 83. To ensure Inclusive parenting is promoted by all agencies and fathers are engaged meaningfully from conception and beyond.
- 84. Increase in the proportion of infants having a first feed of breast milk
- 85. Increase in the proportion of infants breastfeeding at the 6-8 week health and wellbeing review
- 86. Increased awareness of the interdependencies between relationships, mental wellbeing and infant feeding
- 87. To improve the public health outcomes for families in deprived communities in coastal areas
- 88. We will focus on raising awareness and helping families, workforces, parents/partners to know and understand more about perinatal mental health and conditions such as perinatal anxiety.
  - a. We will do this because we know that perinatal mental illness can occur during pregnancy or in the first year following the birth of a child and can impact women, fathers and partners.
  - b. We will take the opportunities to access nationally procured tiered training provision (levels 1-3) to support parent infant relationships. Practitioners from Kent will have the opportunity to access training to deliver evidence-based interventions that promote parent–infant relationships. The interventions are likely to include videofeedback and a targeted intervention to promote parent–infant relationships, which could be delivered in a group or one-to one.
  - c. Kent will have the opportunity to access practitioners who will be able to supervise those supporting parent–infant relationships.
- 89. We will have a highly skilled and confident workforce, ensuring the delivery of service and advice provided is accurate, helpful and consistent which is inclusive to volunteers/peer mentors and CVS representatives and delivered in an integrated manner.
  - a. We will achieve this through integrated training opportunities to help maximise the delivery of consistent messaging.
  - b. We will create opportunities for timely support and the space for people to come together.
  - c. We will use our community outreach to reach vulnerable children, young people and families and to improve links to local partnerships.
  - d. Reinforce and strengthen partnership working to improve our presence as a point of access for support across a range of needs and ages, e.g. through co-location
  - e. Work in partnership with Kent families to co-design and develop the Family Hub offer
- 90. How experiences for families will improve:
  - a. Families will see a more joined up offer between agencies
  - b. Families will have the offer of increased access to information through the family hubs, outreach and digital offers.
  - c. Families will not feel uncomfortable or hide that they may be struggling with their mental health and wellbeing during pregnancy or postnatally
  - d. Families will experience being more than a recipient of services but will be a resource and contribute to the needs of others as they engage in group work for example
  - e. Families should feel seen, heard and enabled to ask for help and to feel confident to help themselves.
  - f. Families will feel better prepared for labour, birth and early parenthood
  - g. Fathers will recognise their role in parenting and support available to them.

- 91. Measuring change:
  - a. We have an ambition to commission an academic systematic evaluation across the family hub transformation period.
  - b. Families will report high awareness and communications about family hubs.
  - c. KCC family hubs and KCHFT health visiting will have achieved UNICEF BFI gold accreditation in 2024
- 92. Through delivery of the Family Hub framework, we will:
  - a. Use our community outreach to reach vulnerable children, young people and families and to improve links to local partnerships
  - b. Develop a targeted approach to reduce risk, vulnerability and escalation and provide additionality to cases held within intensive and specialist services
  - c. Reinforce and strengthen partnership working to improve our presence as a point of access for support across a range of needs and ages, e.g. through co-location
  - d. Build a digital offer, which is easily accessible and supports the self-efficacy of young people and families
  - e. Work in partnership with Kent families to co-design and develop the Family Hub offer.
- 93. This will contribute to reaching our long-term goals:
  - a. Help support reduction in inequalities in health and education outcomes for children, young people and families across Kent
  - b. Improved experience for families of navigating services and reduced need for families to "tell their story" more than once
  - c. Increased efficiency for professionals and services due to effective collaboration, leading to improved support for families
  - d. Improve early years foundation stage educational outcomes
  - e. Improved access and use of information provision to enable parents, children and young people to develop greater agency and resilience within their communities
- 94. Strand-specific MI Breastfeeding:
  - a. Increase in the annual breastfeeding prevalence at 6-8 weeks after birth in Kent (compared to baseline 50.1% at 2021/22) in 2023/24 and 2024/25.
  - b. Decrease in the proportion of women [90% baseline 2022] who report that they stopped in the first weeks were not ready to do as collected through the regular audit process in the specialist infant feeding service in Kent 2023 and 2024
  - c. Numbers of mothers and partners accessing infant feeding support services
- 95. Parent & Carer Panels
  - a. Recording whether a Parent and Carer Panel has been established
  - b. Parent and Carer Panel Information- including frequency of meetings, demographics of panel members
- 96. Parent-infant relationships and perinatal mental health
  - a. Pre and post intervention assessments of perinatal mental health and parent-infant relationships by:
  - b. Increased reporting by pregnant and postnatal women that they have had conversations about their mental health as seen in access to PMH family coaches, parent infant relationship groups or 1:1 activity
  - c. Increased reporting by partners to be and postnatal partners that they have engaged in conversations about their mental health as seen in access to PMH family coaches, parent infant relationship groups or 1:1 activity

#### **Programme Delivery Outcomes**

See Appendix A

#### Family Hub Opening Milestone

- 97. Through the family hubs transformation funding, DfE have asked Local Authorities to open family hubs as quickly as possible to support families, within the first half of 2023.
- 98. DfE recognise that we will not necessarily meet all minimum expectations at the point of opening your family hubs, but you will be expected to do so by the end of the three-year programme funding period (end of 2024-25).
- 99. A Family hub site is a physical place a family can visit and speak to a trained staff member, face-to-face, who will provide them with straightforward information or advice on a wide range of family issues spanning the 0-19 (25 with SEND) age range and connect them appropriately to further services across the 0-19 (25 with SEND) age range if they need more targeted or specialist support.
- 100. The Parent and Carer Panels will be established under the Family Hubs Programme, we are currently engaging with all stakeholders and mapping the panels that are already exist. We anticipate the parent carer panels to be set up in February in 2023. This forum will work closely with the programme and local commissioners and the programme steering group to co-design services, and shape and develop our Start for Life offer. To date, we have had some engagement with lead health services that already have existing parent and carer panels (e.g., Maternity Voices Partnership). As these forums already exist and have evidence of working well, health are keen that we work with these.
- 101. We are working with Dads Unlimited to reach Dads and gain feedback from their existing groups. We are also exploring other communities such as military families through our KCC Covenant link. We are planning to link with interfaith forum to increase our reach to BAME and other communities where there is low engagement with services.
- 102. There are 12 Local Children's Partnership Groups (LGCPs) across Kent, one per district, which are member-led. These groups ensure that partnership working and the needs of children are high on the corporate agenda within KCC. The chairs of these groups are all elected members and meet on a quarterly basis to ensure there is a consistent approach to delivering locality-based outcomes across all districts.
- 103. The Family Hub Partnership Board that is to be established will play a key role in strengthening engagement from partners into the programme by sharing and developing opportunities for greater integration and joint working via the existing forums and the Parents and Carer Panel once established.

What	Approx. deadline
Kent Public Health Needs Assessment published Nov 2022.	Nov '22 - completed
First Parent Carer Panel	February 2023
Publish Kent Start for Life Offer and develop a Family Hub online	Before April 2023
presence	
Maximisation of county resources to promote the offer across various	Marketing Strategy in
media including radio, social media networks	place by April 2023.
Completion of assessment of community building use by partners	May 2023

Identify options and develop opportunities for co-location for Family Hubs	Start summer 2023 co-location on all locations completed by 31 <sup>st</sup> Dec 2023
We will work alongside our district council partners to promote awareness of family hubs through their community programmes which will help support early engagement and will explore further opportunities	Target Sept 2023
for delivery of family hub activity such as leisure facilities.	

## Appendices

- Programme Delivery Outcomes – updated February 2023

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## Section 1c – Programme Delivery Outcomes

	An increased number of families are aware of the branding of Kents Family Hubs and have a positive association through annual family surveys. Baseline established by September 2023 and by September 2024 to expect a 50% increase on the baseline.
	Establish a network where 90% of families can reach a physical Family Hubs building/ services within a 5 mile radius by June 2023.
Access Key Criteria 1	Increased uptake in family useage of the of Family Hub social media digital offer. Baseline established by September 2023 and to expect a 10% increase on the baseline by September 2024 through annual family surveys.
	Increase uptake in family useage of the of Family Hub webpages. Baseline established by September 2023 and to expect a 20% increase on the baseline by September 2024 through annual family surveys.
	Establish an outreach network where 30% of families can reach a Family Hub service by June 2023.
	Increase in families receiving a range of multi agency information and advice through physical Family Hubs as measured by family surveys. Baseline established by September 2023 and by September 2024 to expect a 40% increase on the baseline.
	Increase in families receiving a range of multi agency information and advice through the digital Family Hub offer as measured by family surveys. Baseline established by September 2023 and by September 2024 to expect a 30% increase on the baseline.
Connection Key Criteria 2, 3 & 4	Family Hub networks staff and partners are reporting positive outcomes due to integrated partnership working, through Family Hubs staff and partner surveys. Baseline established by December 2023 and to expect a 25% increase on the baseline by December 2024.
	Increase of 10% in the Family Hub volunteering network and their period of retention to a year from baseline established in March 2023.
	The whole Family Hub workforce, incl. the partnership - will be trained in safeguarding, increasing the knowledge across the Family Hubs on intra- and extra familial risks of harm, within 3 months of joining.
	Increase the number of families that receive multi agency support, as measured by the number of shared multi agency support plans. Increase from 0 to 20% of targetted families on the Family Hub caseload by December 2024.
Relationships Key Criteria 5	Increase in offer of whole Family support by the Family Hub workforce by March 2024 as measured through the staff and partner survey. Baseline established by December 2023 and to expect a 25% increase on the baseline by December 2024.

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	Embed family coaches across the Kent Family Hub Network to ensure we have a minimum of 60 family coaches by January 2024.
	75% of the Family Hub workforce including volunteers are trained in whole Family relational working. By December 2024.
	75% of the Family Hub Workforce including volunteers are trained in emotional wellbeing resilience by December 2024.
	The Family Hub Workforce including volunteers are trained in the navigator function to increase the uptake of wider hub joined up services including accessing support for domestic abuse, housing, substance misuse services, debt, money management, financial support and welfare advice. To be measured by family surveys. Baseline established by September 2023 and by September 2024 to expect a 75% increase on the baseline. 10% of birth registrations to take place within the Family Hub network service provision by September 24
Fomily Live Wider Convises	Increase in families receiving a support around key transitions. As measured by family surveys. Baseline established by September 2023 and by September 2024 to expect a 15% increase on the baseline.
Family Hub Wider Services (including 0-2 age range)	Annual incremental 3% Increase in the take up of early years education (Free for Two) entitlement from the baseline of 73.08% (As at Autumn 2022)
	Increase in the number of multi-agency professionals who report they understand early years development and the Start for Life offer to families. Baseline established by December 2023 and by December 2024 to expect an 75% increase on baseline
	Increase in Family Hub workforce understanding of transitions and how best to support families. Baseline established March 2024 and by March 2025 expect an 20% increase on baseline
	Deliver universal parenting support to support parent/child attachment. Increase in participants by 25% in March 2023 to March 2024,
	Offer targeted Parenting Programmes (Triple P) to 30% of the families supported by Children's Social Work teams for identified families with new babies.
Parenting Support	Parents/carers report more confidence in handling their childrens social, emotional and behavioural problems as a result of following the Triple P Parenting Programme, evidenced in parenting programme evaluations from May 2023 to March 2025
	Increase in numbers of the Family Hub workforce delivering evidence based parenting programmes from May 2023 to December 2024 by 15%.

	Family Hub networks staff and partners are reporting an increase in their knowledge and awareness of mild to moderate perinatal mental health and include Reducing Parental Conflict through Family Hubs staff and partner surveys. Baseline established by December 2023 and to expect a 75 % increase on the baseline by December 2024. Increase in families with children under the age of 2 reporting a better
Parent-infant relationships and perinatal mental health support	understanding of services available for perinatal mental health as measured by family surveys. Baseline established by September 2023 and by September 2024 to expect a 30% increase on the baseline.
	Increase in families reporting by partners to be and postnatal partners that they have engaged in conversations about their mental health as measured by family surveys. Baseline established by September 2023 and by September 2024 to expect a 30% increase on the baseline.
	Increased reporting by parents and carers in improved attached and relationship with their new baby. Baseline established by September 2023 and by September 2024 to expect a 75% increase on the baseline.
	Increase in Family Hub volunteer workforce confidence in supporting conversations about perinatal mental health. Baseline established by December 2023 and to expect a 75 % increase on the baseline by December 2024. To be measured by volunteer serveys.
	Trailblazer: 75% of the Family Hub workforce including partners to be offered Path training resources by September 2023
	Increase in targeted families reporting increased access to Speech and Language (Communication) information and advice for 2-3 years olds. Baseline established by September 2023 and by September 2024 to expect a 40% increase on the baseline. To be measured by family surveys.
Early language and the home	Increase families reporting increased access to Speech and Language resources and additional support. Baseline established by September 2023 and by September 2024 to expect a 20% increase on the baseline.
learning environment	Increase families reporting involvement in their child's learning through EFICL resources and principles. Baseline established by September 2023 and by September 2024 to expect a 10% increase on the baseline.
	Increase in Family Hub volunteer workforce reporting increased knowledge to support an increase daily play activities at home via the staff survey. Baseline established by December 2023 and to expect a 75 % increase on the baseline by December 2024
	Increase of 500 additional targeted visits to support increased learning from play at home by Family Hub workers annually from March 2023

	60 family coaches to work alongside peer to peer support network to increase support and information around infant feeding, and report positive experiences through the Family survey. Baseline established by September 2023 and by September 2024 to expect a 10% increase in access to information from the baseline.
	Family Hub workforce to increase access to information, advice and
Infant Feeding Support	guidance to universal and specialist infant feeding support. Baseline established by September 2023 and by September 2024 to expect a 40% increase in access to information from the baseline through the family survey
	Increase in the annual breastfeeding prevalence at 6-8 weeks after birth in Kent (compared to baseline 50.1% at 2021/22) in 2023/24 and 2024/25.
	Reduction in the proportion of women who particpate in the infant feeding specialist service audit in Kent [90% baseline 2022] who report that they stopped breastfeeding in the first weeks but that they were not ready to do so 80% 2023/24-70% in 2024/25.
	Trailblazer: Family Hub workforce inlcuding Health Visiting will have achieved UNICEF BFI gold accreditation in 2024
Parent and Carer Panels	Parent / Carer feedback to be reviewed in bi-monthly panels by representation including 2 members of identified protective characteristics and other seldom heard groups from April 2023 with annual review of membership
	Parent / Carer panels to recruit 24 Parent Ambassdors (2 per Kent Districts) by December 2023.
	Increase of distribution of the Start for Offer publication materials through 250 community partners.
Publishing the Start for Life Offer	An increased number of families are aware of the Start for Life offer and have a positive association through annual family surveys. Baseline established by September 2023 and by September 2024 to expect a 50% increase on the baseline.

#### Local Authority:

<b>Delivery Area</b>		Activity	Revised	Rationale
		Please provide a summary of which activities in	<u>timings</u>	Please give a brief description of the rationale for why the spend has
		your delivery plan cannot be delivered in FY	Please outline	not been possible in FY 2022-23
		2022-23	by what point	
			in FY 2023-24	
			you anticipate being able to	
			deliver these	
			activities	
Family Hub Transformation	Access	TOTAL ROLL-FORWARD REQUEST ~ £188,400		
Transformation		-£70,000: Digital development of SfL website	May-23	Longer timeframe required to include more diverse parent carer
		-£55,000: Digital development of social media	1110 23	voice, due to the size and scale of Kent.
		-£15,000: Outreach resources	Apr-23	Longer than anticipated recruitment. Team in post 3rd April.
-		-£5,000: Outreach storage/room hire		
Page 39				
je (		-£700: Design of new branding	Apr-23	Actual spend delayed slightly due to provider capacity issues. Have
39		-£10,000: Production of SfL flyers/banners		been ordered - awaiting delivery and full print.
		-£14,600: Digital technology for service access	Apr 22	Producement of Digital bardware is in progress
		in hubs	Apr-23	Procurement of Digital hardware is in progress.
		-£18,100: CAPITAL works on named hub sites	Apr-23	Building Consultation has now been completed. Signage in process in preparation for final decision.
	Connection	TOTAL ROLL-FORWARD REQUEST ~ £40,200		
		-£1,200: Outreach hire cost for VCS in Outreach	Apr-23	Longer timeframe required due to Buildings consultation, will be
		hub sites		spent when outreach sites are confirmed.
		-£24,000: Resources for new shared spaces in		
		hubs and outreach for multipurpose use		
		-£7,500: Governance implementation	May-23	Longer timeframe required due to Kent Grant funding confirmation delay and needing to recruit the team.
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		-£5,000: VCS volunteer framework implementation	Apr-23	Payment slightly delayed whilst a new supplier is added to Kent system.
		-£2,500: Estimated cost: IT and systems work to integrate pathways	Apr-23	Delay due to programme team recruitment, who are now in post from 3 <sup>rd</sup> April.
	Relationships	N/A		
	Wider services	N/A		
Funded	Parenting	TOTAL ROLL-FORWARD REQUEST ~ £502,300		
Services	Support	-£36,500: TRAILBLAZER Triple P Licences	Apr-23	Payment slightly delayed whilst a new supplier is added to Kent system.
		-£214,700: Solihull parenting programme	May-23	Delayed due to longer than originally planned timeframe for procurement to ensure compliance with public contract regulations 2015.
Page 40		-£130,000: Triple P parenting team	May-23	Recruitment timeframe longer than originally estimated - Internal staffing to be recruited by May 2023.
0		-£29,700: Updated parenting training incorporating FNP model -£91,400: Roll out parenting plus to deliver more targeted families where there is likely impact on a new baby in the family from behavioural difficulties from older siblings	May-23	Spend delayed due to staff recruitment needing to take place before all can be trained.
	PIR and PMHS	TOTAL ROLL-FORWARD REQUEST ~ £640,300 -£80,000: Procurement and design of a bespoke app to capture and upload daily start for life activity and outputs for use by the start for life workforce	Jun-23	Longer timeframe required to include more diverse parent carer voice, due to the size and scale of Kent.
		-£500: To develop, procure and rollout training for all staff/volunteers working with families on father and co-parent inclusive practice	May-23	Longer timeframe required due to need to comply with public contract regulations 2015.

-£800: To consider, develop, procure and rollout training for all staff/volunteers working with families on attachment training		
-£20,800: Drafting of a strategic framework and plan for delivery of family peer coach model for PMH, PIR and IF -£65,000: To procure an enhanced visual tool with the same information for non-English speaking/low literacy skills for mums/dads/partners	Jun-23	Longer timeframe required due to need to comply with public contract regulations 2015.
-£30,000: Development of and dissemination of guidance [written and visual] for the workforce on using the app to populate the app from conversations and own learning	Jun-23	Longer timeframe required due to need to comply with public contract regulations 2015 and scale and size of Kent FH ambition.
-£52,500: Provision of iPads and smart phones for the workforce with up-to-date resources such we are beside you website and the Kent start for life app	Apr-23	Delayed due to size of order and provider delivery capacity. To be completed imminently.
-£49,700: To explore the feasibility of developing some antenatal classes specifically for men or jointly- to include perinatal mental health info for men	May-23	Feasibility planning commenced with Health Visiting partners.
-£30,000: To engage with service commissioners to identify current access and gaps in provision, clarify MH workforce development needs, costings and contract variations or procurement of additional service capacity	Apr-23	In process of finalising the Grant agreement before payment can be made. Due to be completed shortly.
-£22,300: TRAILBLAZER: To produce bite sized films to raise awareness of low to mod PMH for parents and parents to be, non-health professionals and health professionals	Jun-23	Production of films for parent to be and non-health professionals will be completed with translation to BSL in year 1. We will be undertaking the film for health professionals early in 2023/24 along with translation.

		-£90,000: To develop a targeted social media campaign for perinatal mental health for men and women to sign post to 24-hour helpline or other relevant services building on the current 24 hour text messaging service [SHOUT] and 24 hour mental health service phone line	May-23	Scoping has started however longer timeframe required due to need to comply with public contract regulations 2015.
Рад		-£172,000: To support the Family Hub Network across the system working with parents to be and new parents, we will develop a programme of training. This will be either supported or delivered by an educational psychologist and mental health specialist, or a procured organisation. This training package will enable people to have an increased understanding from level 1 to level 2, giving increased confidence to have conversations and to signpost people to interventions.	May-23	Timescales between agreement to delivery plan and end of FY had not originally allowed for the requirement timeframe for procurement to ensure compliance with public contract regulations 2015.
Page 42		-£16,500: TRAILBLAZER: To procure an organisation to support the recruitment and delivery of training a Peer network with lived experience (Parents First)	May-23	Longer timeframe required to procure an organisation for this activity between agreement to delivery plan and end of year 1 have not allowed for compliance of PCR 2015. This activity links to the strategic frameworks commenced.
		-£10,200: To procure a tool [accredited by the iHV] which presents mums/dads partners with information on postnatal depression- including potential triggers, measures to improve your wellbeing, how it can affect you.	May-23	Translation of the information and presentation for those with low literacy skills/English not a first language is still in progress - will be completed by May in year 2.
	Early Language and HLE	TOTAL ROLL-FORWARD REQUEST ~ £255,400 -£6,400: Workforce training on Schema -£7,000: Workforce training on SALT -£25,000: HLE resources for group work and targeted 1:1 Work to be delivered from Hubs and via outreach, home visiting	May-23	Delayed procurement due to DfE / LA discussions with agreement to amend HLE delivery plan interventions. Additional delay due to Kent grant funding confirmation delay and needing to recruit the team (now in post from 3 <sup>rd</sup> April).

	-£12,000: Resources for ELIM pilot alongside integrated 2 year review -£20,000: Develop new home visit HLE offer for families where communication barriers exist e.g. language, deaf parents/children		
	-£100,000: Use of digital media (QR codes) to provide storytelling to targeted families	May-23	Procurement of Digital hardware is in progress.
	-£35,000: Story pack for targeted families -£20,000: Childminding, nursery training and packs for HLE -£30,000: Increased books and Home Learning resources in Birth Registration hubs	Apr-23	Resources to be purchased. Delay due to programme team recruitment (now in post from 3 <sup>rd</sup> April).
Infant Feeding Support	TOTAL ROLL-FORWARD REQUEST ~ £304,600-£3,100: TRAILBLAZER: Promote the newly developed breastfeeding friendly venue toolkit accessible on www.wearebesideyou.co.uk especially in the 20% most deprived districts through the Invicta chamber of commerce network. [1200 members]. -£28,500: To develop and pilot a survey to be undertaken with ante and postnatal parents/partners	Jun-23	Longer timeframe required due to Kent Grant funding confirmation delay and needing to recruit the team (now in post from 3 <sup>rd</sup> April).
	-£60,000: Support to encourage, increase supply, establish, and maintain breast feeding with the offer of handheld breast pumps [UNICEF friendly] to those requiring infant feeding support and based on need.	Jun-23	Business Case drafted and progressing through governance processes. NHS Supply Framework to be utilised.
	-£50,000: To support the health visiting service in the pilot in three areas and potentially introduce an infant feeding service antenatal visit [Hello baby]	Jun-23	Project is in scoping phase and will form part of a contract variation. Contractual documentation in draft.

		-£3,000: TRAILBLAZER: Promotion for businesses and incorporate into KCHFT current order	Jun-23	Promotional engagement not possible in timeframe but to undertake by June 2023 in year 2.
	-£10,000: To procure an organisation to support the recruitment and delivery of training for family peer/coaches by	Jun-23	Insufficient time between agreement of delivery plan and end of FY to comply with Procurement Contract Regulations 2015.	
		-£50,000: To develop responsive feeding animations depicting size of baby's stomach for general awareness yr. 2 -£10,000: To conduct insight into the factors affecting breast feeding in the 20% most deprived districts in Kent and deliver targeted support based on these insights.	Jun-23	Insufficient time between agreement of delivery plan and end of FY to comply with Procurement Contract Regulations 2015. An RFQ is currently being drafted.
		-£80,000: To develop animated films which can depict positioning of the baby for different stages of growth, maternal size, or following C section	Jun-23	Insufficient time available to complete between agreement of the delivery plan and end of FY. RFQ will be commenced soon.
2		-£10,000: To conduct the survey 6 monthly from October 2023 over a two-week period using a range of methods	Jun-23	Timescales to develop and pilot a survey have been too tight to commence in this financial year.
	Parent Carer Panels	TOTAL ROLL-FORWARD REQUEST ~ £2,800 -£800: Technology development for online feedback mechanism -£2,000: Parent carer ambassadors' expenses	Jun-23 May-23	Longer timeframe required due to Kent Grant funding confirmation and needing to recruit the team (now in post from 3 <sup>rd</sup> April).
	Start for Life Offer	TOTAL ROLL-FORWARD REQUEST ~ £27,900 -£27,400: Print and publish resources for offer	Jun-23	Charge for Early Prints to come through and once there is more parent carer feedback the flyer will be amended and printed in 23-24 and will have localised details following Building consultation. Waiting to recruit the team (now in post from 3 <sup>rd</sup> April).

	-£500: Translation costs for promotional	Jun-23	Longer timeframe required due to Kent Grant funding confirmation
	materials		delay and needing to recruit the team (now in post from 3 <sup>rd</sup> April).

# MEMORANDUM OF UNDERSTANDING

### FAMILY HUBS AND START FOR LIFE PROGRAMME

#### Memorandum of Understanding

The Secretary of State for Education has determined under Section 31 of the Local Government Act 2003 that a grant as listed in the Grant Determinations should be paid to the Grant Recipient. (Grant Determination References: 31/6341 – Revenue, 31/6340 – Capital and 31/6417 – Trailblazer Revenue).

The Treasury has consented to payment of this grant.

#### 1. Purpose of the MOU

The purpose of the Memorandum of Understanding (MOU) is to formalise the working relationship and expectations relating to the payment of the grants from the Secretary of State for Education to the Recipient for the Programme outlined in the Family Hub and Start for Life programme guide and, if the Recipient is selected as a trailblazer, the trailblazer guide (see Annex A for further information on these expectations). The Family Hub and Start for Life programme is jointly funded and overseen by the Department for Education (DfE) and the Department for Health and Social Care (DHSC). DfE will be administering the grant funding on behalf of both departments.

#### 2. Legal Status

- a. This arrangement has no legal status under English Law or any other law and cannot be construed as a contract or grant agreement in the sense of a legally binding agreement between the Secretary of State for Education (the "Secretary of State") and the Recipient, (the "Parties") which is enforceable in the courts. Nevertheless, both Parties intend to comply with its provisions.
- b. Neither Party will be authorised to act in the name of, or on behalf of, or otherwise bind the other Party, save as expressly permitted by the provisions of this arrangement. This MOU is not intended to be legally binding and no legal obligations or legal rights shall arise between the Parties from the provisions of the MOU. The Parties enter into the MOU intending to honour all their obligations.

#### 3. Definitions

- **a.** In this MOU the following terms shall have the following meanings:
  - i. Commencement Date: This MOU takes effect when it is signed on behalf of the Secretary of State.
  - ii. Recipient: The local authority that receives the grant funding and signs this MOU.
  - iii. Eligible Expenditure: subject to paragraph 7, payments made by the Recipient or any person acting on behalf of the Recipient during the Grant Period in carrying out the Programme.
  - iv. Grant: the revenue and capital amounts as listed in the Grant Determination Letters (Grant Determination References: 31/6341

– Revenue, 31/6340 – Capital and 31/6417 – Trailblazer Revenue) sent to the Recipient in accordance with this MOU.

- v. Grant Period: the period for which the Grant is awarded starting on the Commencement Date and ending on 31 March 2025.
- vi. Programme: the Family Hubs and Start for Life Programme as set out in the Programme Guide and as described in Annex A.
- vii. Programme Guide: the document published on 8 August 2022 which sets out the aims and objectives of the Programme and what the Recipient is expected to deliver with the funding.
- viii. Delivery Plan: a plan as described in the Programme Guide and agreed by the Parties setting out how funding will be used to achieve programme outcomes.
- ix. Comptroller and Auditor General: the officer of the House of Commons responsible for supervising the quality of public accounting and financial reporting who leads the National Audit Office.

#### 4. About the Grant

- **a.** The Secretary of State has determined that the Grant be paid based on the understanding that the funding be used to either:
  - i. incrementally add to existing services
  - ii. complement existing services
  - iii. offer new services
- **b.** The Secretary of State will provide the funding as described in the Grant Determination letters to the Recipient on the provisions set out in this MOU.
- **c.** The Secretary of State may require the repayment of the whole or any part of any unspent funds, as may be determined by the Secretary of State and notified in writing to the Recipient. Such sum as has been notified will immediately become repayable to the Secretary of State.
- **d.** The Recipient will not carry out any activities as part of this Programme other than those described in the Programme Guide and Annex A without the prior written approval of the Secretary of State. In addition, the Recipient will use the funding from the Secretary of State solely for the purposes of this Programme.
- e. Notwithstanding and separate of any grant funding awarded to the Recipient under this Memorandum of Understanding, the Recipient must maintain investment in their statutory duty to improve public health through the commissioning of prescribed functions (specific to children's 0-5 services) and non-prescribed functions (children 5 to 19 public health programmes and other children's 0-5 non prescribed services) from the Public Health Grant.

#### 5. Funding arrangements

**a.** The Secretary of State will provide the funding for the Programme to the Recipient in accordance with the Grant Determination Letters and the process described in paragraph 5 b.

**b.** In the financial year 2022-23 the first payment will be made after the Recipient has been signed-up to the Programme and signed this MoU.

The sign-up process involves:

- i. Committing to deliver the minimum expectations in the programme guide.
- ii. Committing to 'going further' across a number of areas, providing a provisional indication of where the Recipient might do this.
- iii. Providing a high-level outline and provisional milestones for how the Recipient intends on utilising the first tranche of funding in the first four months of the programme.
- iv. Confirming Family Hub 'opening' milestones for the first half of 2023.
- v. Providing high-level contextual information on the Recipient's current family support set-up and wider mental health system.
- vi. Confirming the Recipient has the support of senior officials and politicians locally.
- **c.** The second and final payment for 2022-23 will be made later in the financial year, after the Recipient has submitted a satisfactory Delivery Plan.
- **d.** Payments in financial years 2023-24 and 2024-25 will be made twice a year.
- **e.** Funding for 2023-24 and 2024-25 will be made contingent on a review of Programme delivery and the Recipient's expenditure statements for the previous financial year.
- **f.** The Recipient will notify the Secretary of State as soon as is reasonably practicable should an underspend be forecast.

#### 6. Reporting and Evaluation

- **a.** The Recipient will comply with the expectations regarding reporting and evaluation set out in the Programme Guide. The Recipient will work with the Secretary of State to provide the necessary information and data to monitor and evaluate progress against the aims and outcomes of the Programme. This is in addition to the reporting requirements outlined in paragraph 6.b.
- **b.** The Secretary of State will financially monitor the grants provided to the Recipient on a half-yearly basis using a financial reporting template similar to the one supplied at Annex B.
- c. In FY 2022-23 the Recipient shall prepare an Interim Statement of Grant Usage and submit it to the Secretary of State by 13th January 2023. In FY 2023-24 and FY 2024-25, the Recipient shall prepare an interim Statement of Grant Usage on the 21st of the month following the half-year end being reported, or the first working day thereafter (Annex B). The Interim Statement of Grant Usage must provide details of eligible expenditure per funded strand of the Programme. The interim Statement of Grant Usage may be signed by the Recipient's Financial Director or someone with delegated authority.

- **d.** On completion of the financial year, a final Statement of Grant Usage must be submitted to the Secretary of State on the 28<sup>th</sup> of the month following the end of the financial year, or the first working day thereafter. The Statement of Grant Usage will be in a similar format to the interim Statements of Grant Usage and must be certified by the Recipient's Chief Executive that, to the best of his or her knowledge, the amounts shown on the statement are all Eligible Expenditure and that the Grant has been used for the purposes intended.
- e. The Statement of Grant Usage submitted to the Secretary of State must be accompanied by a report from the Recipient's Chief Executive or Chief Finance Officer setting out whether he or she has received an audit opinion from the Recipient's Chief Internal Auditor that he or she can provide reasonable assurance that the Statement of Grant Usage, in all material respects, fairly presents the eligible expenditure in the Grant Period in accordance with the provisions set out in this MOU.

#### 7. Eligible Expenditure

- **a.** Eligible Expenditure means payments made by the Recipient, or any person acting on behalf of the Recipient, during the Grant Period for the purposes of the Programme.
- **b.** If the Recipient incurs any of the following costs, they must be excluded from Eligible Expenditure:
  - i. contributions in kind
  - ii. payments for activities of a political or exclusively religious nature
  - iii. depreciation, amortisation or impairment of fixed assets owned by the authority
  - iv. input VAT reclaimable by the authority from HM Revenue & Customs
  - v. interest payments or service charge payments for finance leases
  - vi. gifts, other than promotional items with a value of no more than  $\pounds 10$  in a year to any one person
  - vii. entertaining (entertaining for this purpose means anything that would be a taxable benefit to the person being entertained, according to current UK tax regulations)
  - viii. statutory fines, criminal fines or penalties
- **c.** The Recipient must not deliberately incur liabilities for Eligible Expenditure before there is an operational need for it to do so.
- **d.** For the purpose of defining the time of payments, a payment is made by the Recipient when money passes out of its control (or out of the control of any person acting on behalf of the Recipient). Money will be assumed to have passed out of such control at the moment when legal tender is passed to a supplier (or, if wages, to an employee), when a letter is posted to a supplier or employee containing a cheque, or an electronic instruction is sent to a bank to make a payment to a supplier or employee by direct credit or bank transfer.

#### 8. Financial Irregularities

If the Recipient has any grounds for suspecting financial irregularity in the use of any Grant paid under this MOU, the Recipient must notify the Secretary of State immediately, explain what steps are being taken to investigate the suspicion, and keep the Secretary of State informed about the progress of the investigation. For these purposes 'financial irregularity' includes fraud or other impropriety, mismanagement, and the use of the grant for purposes other than the purposes of the Programme.

#### 9. Records

- **a.** The Recipient must keep a record of expenditure funded partly or wholly by the Grant and retain all accounting records relating to that expenditure.
- **b.** Accounting records must include purchase orders, original invoices, receipts, accounts and deeds, whether in writing or electronic form.
- **c.** The Recipient must make these available at any reasonable time for inspection by officials from Secretary of State or their representatives or by the Comptroller and Auditor General or his representatives.

#### 10. Breach of MOU Provisions and Recovery of Grant

- **a.** If the Recipient fails to comply with any of the provisions in this MOU, or if any overpayment of Grant monies is made by the Secretary of State or the Recipient, or any amount is paid by the Secretary of State or the Recipient in error, or if any of the events set out in paragraph 10.c occurs, the Secretary of State may reduce, suspend or withhold Grant payments to the Recipient or require the Recipient to repay the whole or any part of the Grant monies paid, as may be determined by the Secretary of State and notified in writing to the Recipient.
- **b.** Such sum as has been notified will immediately become repayable by the Recipient to the Secretary of State.
- **c.** The events referred to in paragraph 10.a. are:
  - i. the Recipient purports to transfer or assign any rights, interests or obligations arising under this Grant without the prior agreement of the Secretary of State;
  - ii. any information provided by the Recipient in any application for Grant monies payable under this Grant, or in any subsequent supporting correspondence is found to be significantly incorrect or incomplete in the opinion of the Secretary of State;
  - iii. it appears to the Secretary of State that other circumstances have arisen or events have occurred that are likely to significantly affect the Recipient's ability to fulfil the expectations

set out in the programme guide and achieve the outputs, activities, milestones and targets set out in the delivery plan;

- iv. the Recipient's Chief Internal Auditor is unable to provide reasonable assurance that the Statement of Grant Usage, in all material respects, fairly presents the Eligible Expenditure in the Grant Period in accordance with the provisions of this MOU.
- v. The Recipient fails to deliver the Programme in line with the programme guide and delivery plan.

#### 11. Termination

The Secretary of State may terminate this MOU and withhold any Grant payments on giving the Recipient three months' written notice should it be required to do so for any reason. In the event that this MOU is terminated in accordance with this paragraph 11, the Secretary of State may require the repayment of the whole or any part of any funds which are unspent at the date of termination, as may be determined by the Secretary of State and notified in writing to the Recipient. Such sum as has been notified will immediately become repayable to the Secretary of State.

#### 12. Amendment of this MOU

Amendments to this MOU may only be made with the written consent of both Parties.

#### 13. Agreement of the MOU

The Recipient agrees to the provisions of this MOU.

#### NAME OF LOCAL AUTHORITY

#### KENT COUNTY COUNCIL

Signed by the LOCAL AUTHORITY (Recipient)

Ze Ce

Authorised Signatory

PRINT NAME:

DATE

POSITION:

ZENA COOKE

14 OCTOBER 2022

CORPORATE DIRECTOR FINANCE (S151 OFFICER)

Signed by DEPARTMENT OF EDUCATION

IC (

Authorised Signatory

PRINT NAME:

DATE

POSITION:

04/11/2022

Marc Rooney

Deputy Director, Family Hubs Early Years & Interventions Division

#### ANNEX A – THE PROGRAMME

# PROGRAMME TITLE: Family Hubs and Start for Life programme 2022-23 to 2024-25

#### Minimum expectations

The Family Hubs and Start for Life Programme guide (and associated annexes) "the Programme Guide" <u>https://www.gov.uk/government/publications/family-hubs-and-start-for-life-programme-local-authority-guide</u> sets out the minimum expectations and wider delivery requirements for each element of the programme.

Local authorities are expected to deliver all minimum expectations and wider delivery requirements set out in the Programme Guide by the end of the three-year funding period (by 31<sup>st</sup> March 2025). Some local authorities will meet minimum expectations sooner depending on their existing service provision and delivery model.

#### Go further options

Local authorities are expected to agree a number of "go further options" (which are ambitions on how they can go above and beyond minimum expectations, depending on their current provision). Local authorities will be asked to demonstrate their 'go further' commitments as part of their delivery plans, and DfE and DHSC will review whether these are sufficiently ambitious as part of the delivery plan reviews. Where ambition is considered to be insufficient, local authorities will be expected to review their proposals and resubmit their delivery plans for a further review.

#### Trailblazers

Local authority areas that are selected as trailblazers will be expected to deliver the additional trailblazer expectations outlined in the trailblazer guide. This includes the expectations outlined under the guide's two trailblazer objectives:

- 1. Lead the way in delivering ambitious, innovative and tangible change to improve family outcomes in the first year of the programme.
- 2. Share delivery experiences and expertise with other local authorities and DfE and DHSC.

# Annex B – Family Hubs and Start for Life Programme – Statement of Grant Usage (Template not for completion)

Please use this form for the Interim and End Year Statements of Grant Usage

Notes for completion:

- 1. The Recipient shall prepare a Certification of Grant Usage for the Period ending [DD/MM/YYYY].
- 2. This comprises two parts:
  - a) Certificate of Grant Usage
  - b) Statement of Expenditure

a) Certificate of Grant Usage

Name of organisation	[Insert Name of Local Authority]
Programme title	Family Hubs and Start for Life programme

- The total Grant amount of [£insert figure] was exclusively used for the purposes set out in the Memorandum of Understanding between the Grant Recipient and the Secretary of State for Education.
- A financial statement detailing the use of the Grant Funding will be provided in section b – Statement of Expenditure. The organisation's financial systems that recorded the income and expenditure of this Grant have provided sufficient internal control for the purposes of this certification.

		Date	
n			
			Postcode
Initialled by Organisation's Chief Financial Officer/ Auditor			
	n Organisa		n

### b) Statement of Expenditure

Name of Local Authority	[Insert Name of Local Authority]	
Name of Project	Family Hubs and Start for Life Programme	
Expenditure Type		(£)
Family Hubs Transformation Funding		
Parenting Support		
Parent-Infant Relationships and Perinatal Mental Health		
Early Language and Home Learning Environment		
Infant Feeding		
Parent and Carer Panels		
Publishing the Start for Life Offer		
Other, e.g. data etc		
TOTAL EXPENDITURE		
Under spend on Grant (if applicable)		

# Please disregard the previous version of the template and use the attached new Statement of Grant Usage template.

For confirmation, the end of April Statement of Grant usage is for the period ending <u>31<sup>st</sup> March 2023.</u>

We will, still require the end of March statement of grant usage by the <u>28<sup>th</sup> April</u> <u>2023</u>

If you have any queries, please get in touch.

Kind regards,

#### DfE Family Hubs and DHSC Start for Life Programme Team

Email: <u>Familyhubs.startforlife@education.gov.uk</u> & <u>familyhubs.startforlife@dhsc.gov.uk</u>

Department for Education

We are writing to you to inform you that we will no longer be asking for you to submit an Interim Statement of Grant Usage for the Family Hubs – Start for Life Programme on 28th February 2023. This is because we recognise that many LAs have only recently received their first tranche of year 1 funding and, some LAs are still finalising delivery plans. We will, however, still require the end of April statement of grant usage by the <u>28<sup>th</sup> April 2023 please see updated template attached.</u>

If you have any queries, please get in touch.

Kind regards,

Family Hubs and Start for Life Programme Team

#### DfE Family Hubs and DHSC Start for Life Programme Team

Email: <u>Familyhubs.startforlife@education.gov.uk</u> & <u>familyhubs.startforlife@dhsc.gov.uk</u>

Department for Education



### **EQIA Submission Draft Working Template**

If required, this template is for use prior to completing your EQIA Submission in the EQIA App. You can use it to understand what information is needed beforehand to complete an EQIA submission online, and also as a way to collaborate with others who may be involved with the EQIA. Note: You can upload this into the App when complete if it contains more detailed information than the App asks for and you wish to retain this detail.

Section A			
1. Name of Ac (EQIA Title):	tivity	Family Hub Key Decision No #23/00015	
2. Directorate		Children, Young People a	and Education
3. Responsible	9	Integrated Children's Ser	núces
Service/Division	on		Vices
Accountabil	ity and R	esponsibility	
<b>4. Officer completing EQIA</b> Note: This should be the name of the officer who will be submitting the EQIA onto the App.		me of the officer who	Jess Morley
<b>5. Head of Service</b> Note: This should be the Head of Service who will be approving your submitted EQIA.			Hema Birdi
6. Director of Service Note: This should be the name of your responsible director.		name of your	Stuart Collins
The type of	Activity y	ou are undertaking	
7. What type of	of activity a	are you undertaking?	
Tick if Yes	Activity Type		
Yes	Service Change – operational changes in the way we deliver the service to people.		
	Service Redesign – restructure, new operating model or changes to ways of working		
Yes	<b>Project/Programme</b> – includes limited delivery of change activity, including partnership projects, external funding projects and capital projects.		
Yes	<b>Commissioning/Procurement</b> – means commissioning activity which requires commercial judgement.		
Yes			efresh or creating a new document
	Other – Please add details of any other activity type here.		
<ul> <li>8. Aims and Objectives and Equality Recommendations — Note: You will be asked to give a brief description of the aims and objectives of your activity in this section of the App, along with the Equality recommendations. You may use this section to also add any context you feel may be required.</li> <li>Section B – Evidence</li> </ul>			
Note: For questions 9, 10 & 11 at least one of these must be a 'Yes'. You can continuing working on the EQIA in the App, but you will not be able to submit it for approval without this information.			
9. Do you have data related to the protected       Yes         groups of the people impacted by this activity?       Yes         Answer: Yes/No       Image: Answer image: Yes i			

<b>10.</b> Is it possible to get the data in a timely and cost effective way? <i>Answer: Yes/No</i>	Yes		
11. Is there national evidence/data that you can use? Answer: Yes/No	Yes		
<b>12. Have you consulted with Stakeholders?</b> Answer: Yes/No Stakeholders are those who have a stake or interest in your project which could be residents, service users, staff, members, statutory and other organisations, VCSE partners etc.	No This is part of the phased approach to the programme development.		
<b>13. Who have you involved, consulted and engaged with?</b> <i>Please give details in the box provided. This may be details of those you have already involved, consulted and engaged with or who you intend to do so with in the future. If the answer to question 12 is 'No', please explain why.</i>			
<b>14.</b> Has there been a previous equality analysis (EQIA) in the last 3 years? <i>Answer: Yes/No</i>	No, this is a new funding stream direct from DfE		
<b>15. Do you have evidence/data that can help you understand the potential impact of your activity?</b> <i>Answer: Yes/No</i>	Yes		
Uploading Evidence/Data/related information into the App Note: At this point, you will be asked to upload the evidence/ data and related information that you feel should sit alongside the EQIA that can help understand the potential impact of your activity. Please ensure that you have this information to upload as the Equality analysis cannot be sent for approval without this.	<ul> <li>16,632 live births for 2021 (ONS)</li> <li>Kent Health Visiting Service - 01 April 2021 – 31 March 2022. <ul> <li>Antenatal visits due – 14417</li> <li>Total number of mandated health and wellbeing reviews carried out 71,827.</li> </ul> </li> <li>Source: Powerbi Open Access Scorecard as at 06/04/23 (excludes Commissioned establishments) <ul> <li>In the last 12 months number of distinct clients who attended at least one session (reach) or client/family intervention excluding focus support: 33,921.</li> <li>In the last 12 months number of client and family Focus Support interventions 16,438</li> </ul> </li> <li>Source: Powerbi Early Help Commissioned Scorecard as at 06/04/23 <ul> <li>In the last 12 months number children reached aged 0-7</li> <li>Seashells: 1,912</li> <li>Millmead: 1,215</li> </ul> </li> </ul>		
Section C – Impact			
	that apply. ents/Communities/Citizens Yes ver: Yes/No		

	ff/Volunteers swer: Yes/No	No			
	17. Are there any positive impacts for all or any of the protected groups as a result of the activity that you are doing? Answer: Yes/No				
1		•	<i>y</i> ,		
Inte	<b>18. Please give details of Positive Impacts</b> Integration of children's early years and youth services, with health visiting and midwifery services for children 0-19and up to 25 with SEN, including co-production with YP&F.				
The	Negative Impacts and Mitigating Actions The questions in this section help to think through positive and negative impacts for people affected by your activity. Please use the Evidence you have referred to in Section B and explain the data as part of your answer.				
19.	Negative Impacts and	I Mitigating actions fo	r Age		
a)	Are there negative in Yes/No		<i>ver:</i> No, this will improve access to universal services for this cohort of children and their families		
b)	Details of Negative I	mpacts for Age			
c)	Mitigating Actions fo	or age			
d)	Responsible Officer f Age	for Mitigating Actions	-		
20.	Negative Impacts and	d Mitigating actions f	pr Disability		
	Are there negative in		No, this will improve access to universal services for this cohort		
	Are there negative in Answer: Yes/No (If ye	npacts for Disability? es, please also comple	No, this will improve access to universal services for this cohort		
a)	Are there negative in Answer: Yes/No (If ye sections b, c, and d).	npacts for Disability? es, please also comple mpacts for Disability	No, this will improve access to universal services for this cohort		
a) b)	Are there negative in Answer: Yes/No (If yo sections b, c, and d). Details of Negative In Mitigating Actions fo	npacts for Disability? es, please also comple mpacts for Disability	No, this will improve access to universal services for this cohort of children and their families		
a) b) c)	Are there negative in Answer: Yes/No (If yo sections b, c, and d). Details of Negative In Mitigating Actions for Responsible Officer f	mpacts for Disability? es, please also comple mpacts for Disability or Disability	No, this will improve access to universal services for this cohort of children and their families		
a) b) c)	Are there negative in Answer: Yes/No (If yes sections b, c, and d). Details of Negative In Mitigating Actions for Responsible Officer for Disability Are there negative in Yes/No (If yes, please also co	mpacts for Disability? es, please also comple mpacts for Disability or Disability	No, this will improve access to universal services for this cohort of children and their families         Image: service of children and their famili		
a) b) c) d)	Are there negative in Answer: Yes/No (If yo sections b, c, and d). Details of Negative In Mitigating Actions for Responsible Officer for Disability Are there negative in Yes/No	mpacts for Disability? es, please also comple mpacts for Disability or Disability for Mitigating Actions mpacts for Sex? Answ mplete sections b, c,a	No, this will improve access to universal services for this cohort of children and their families         Image: service of children and their famili		
a) b) c) d) a)	Are there negative in Answer: Yes/No (If yes sections b, c, and d). Details of Negative In Mitigating Actions for Responsible Officer for Disability Are there negative in Yes/No (If yes, please also co d).	mpacts for Disability? es, please also comple mpacts for Disability or Disability for Mitigating Actions mpacts for Sex? Answ mplete sections b, c,a mpacts for Sex	No, this will improve access to universal services for this cohort of children and their families         Image: service of children and their famili		

22.	22. Negative Impacts and Mitigating actions for Gender identity/transgender			
a)	Are there negative impacts for Gender	No, this will improve access to universal services for this cohort		
	identity/transgender? Answer: Yes/No (If yes,	of children and their families		
	please also complete sections b, c,and d).			
b)	Details of Negative Impacts for Gender			
5,	identity/transgender			
c)	Mitigating actions for Gender			
C)	identity/transgender			
۲۵				
d)	Responsible Officer for Mitigating Actions -			
22	Gender identity/transgender			
•	Negative Impacts and Mitigating actions for Rac			
a)	Are there negative impacts for Race? Answer:	No, this will improve access to universal services for this cohort		
	Yes/No	of children and their families		
	(If yes, please also complete sections b, c,and			
	d).			
b)	Details of Negative Impacts for Race			
c)	Mitigating Actions for Race			
d)	Responsible Officer for Mitigating Actions -			
	Race			
24.	Negative Impacts and Mitigating actions for Reli			
a)	Are there negative impacts for Religion and	No, this will improve access to universal services for this cohort		
	Belief? Answer: Yes/No (If yes, please also	of children and their families		
	complete sections b, c,and d).			
b)	Details of Negative Impacts for Religion and			
	belief			
c)	Mitigating Actions for Religion and belief			
d)	<b>Responsible Officer for Mitigating Actions -</b>			
	Religion and belief			
25.	Negative Impacts and Mitigating actions for Sex			
a)	Are there negative impacts for sexual	No, this will improve access to universal services for this cohort		
	orientation. Answer: Yes/No (If yes, please	of children and their families		
	also complete sections b, c,and d).			
b)	Details of Negative Impacts for Sexual			
	Orientation			
c)	Mitigating Actions for Sexual Orientation			
d)	<b>Responsible Officer for Mitigating Actions -</b>			
	Sexual Orientation			
26.	Negative Impacts and Mitigating actions for Prea	gnancy and Maternity		
a)	Are there negative impacts for Pregnancy and	No, this will improve access to universal services for this cohort		
	Maternity? Answer: Yes/No (If yes, please also	of children and their families		
	complete sections b, c,and d).			
b)	Details of Negative Impacts for Pregnancy and			
	Maternity			
c)	Mitigating Actions for Pregnancy and			
	Maternity			
d)	Responsible Officer for Mitigating Actions -			
	Pregnancy and Maternity			

27.	27. Negative Impacts and Mitigating actions for marriage and civil partnerships			
a)	Are there negative impacts for Marriage and Civil Partnerships? Answer: Yes/No (If yes, please also complete sections b, c, and d).	No		
b)	Details of Negative Impacts for Marriage and Civil Partnerships			
c)	Mitigating Actions for Marriage and Civil Partnerships			
d)	Responsible Officer for Mitigating Actions - Marriage and Civil Partnerships			
28.	28. Negative Impacts and Mitigating actions for Carer's responsibilities			
a)	Are there negative impacts for Carer's responsibilities? Answer: Yes/No (If yes, please also complete sections b, c, and d).	No		
b)	Details of Negative Impacts for Carer's Responsibilities			
c)	Mitigating Actions for Carer's responsibilities			
d)	Responsible Officer for Mitigating Actions - Carer's Responsibilities			