



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 Activity (EQIA Title): | Family hubs – Infant feeding |
| 2. Directorate | Adult social care and health |
| 3. Responsible Service/Division | Public Health |

Accountability and Responsibility

| | |
|---|----------------|
| 4. Officer completing EQIA Note: This should be the name of the officer who will be submitting the EQIA onto the App. | Wendy Jeffreys |
| 5. Head of Service Note: This should be the Head of Service who will be approving your submitted EQIA. | Wendy Jeffreys |
| 6. Director of Service Note: This should be the name of your responsible director. | Dr Anjan Ghosh |

The type of Activity you are undertaking

| 7. What type of activity are you undertaking? | |
|---|--|
| Tick if Yes | Activity Type |
| Yes | Service Change – operational changes in the way we deliver the service to people. |
| Yes | Service Redesign – restructure, new operating model or changes to ways of working |
| Yes | Project/Programme – includes limited delivery of change activity, including partnership projects, external funding projects and capital projects. |
| Yes | Commissioning/Procurement – means commissioning activity which requires commercial judgement. |
| Yes | Strategy /Policy – includes review, refresh or creating a new document |
| | Other – Please add details of any other activity type here. |

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.

Since the inception of EHPS in 2015, Kent County Council (KCC) has been able to maintain a comprehensive Open Access offer, including both universal and targeted provision, delivered through internal staff and settings and commissioned services across 0-19 years.

Open Access services work closely with partners including public health services such as Health Visiting services through co-location. There are also currently two Commissioned Children's Centre in Kent (Millmead and Seashells) and 12 district-based commissioned youth service contracts.

In his budget announcement in October 2021, the then Chancellor, Rishi Sunak, outlined his plans for the roll out of a national Family Hubs programme launching the programme in November 2021. The programme is led by the Department for Education (DfE) in collaboration with the Department of Health and Social Care (DHSc) to ensure there is policy integration at national level to develop an enhanced multiagency partnership. The framework was developed following the Early Years Healthy Development Review published in 2021 (The Best Start for Life, A Vision for the 1001 Critical Days). The in-depth research and engagement was conducted by a review team including parents, carers, sector professionals, volunteers and academics.

KCC is committed to the implementation of Family Hubs in Kent as part of its ambition to deliver the best outcomes for all children, young people, and their families, delivering services identified through the Family Hub guidance.

The DfE launched the national Family Hub Programme Framework in August 2022 alongside an application for 75 Local Authorities to apply for transformation funding to create multiagency community-based provision. Kent was identified as one of the eligible Local Authorities for funding aligned to the Family Hub and Best Start for Life strategy.

The DfE sets out key funded areas as part of the Family Hubs model and transformation within the Start for Life offer. This includes infant feeding.

The analysis from the available evidence suggests that the development and implementation of Family Hubs in Kent and the delivery of an enhanced infant feeding offer of contact for families ante and post natally may have impacts for some protected characteristic groups due to the mixed client base:

- Age
- Disability
- Sex
- Race
- Religion and Beliefs
- Pregnancy and Maternity
- Carer Responsibilities

Section B – Evidence

Note: For questions 9, 10 & 11 at least one of these must be a 'Yes'. You can continue 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 groups of the people impacted by this activity? <i>Answer: Yes/No</i> | yes |
| 10. 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? <i>Answer: Yes/No</i> | no |
| 12. Have you consulted with Stakeholders? <i>Answer: Yes/No</i> <i>Stakeholders are those who have a stake or interest in your project</i> | yes |

which could be residents, service users, staff, members, statutory and other organisations, VCSE partners etc.

13. Who have you involved, consulted and engaged with?
 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.

The service offer is based on programmes taking place in other local authorities. The service provider has consulted with internal staff and commissioners.
 There has not been consultation about this specific aspect of infant feeding support with service users but engagement with mums and mums to be is currently taking place in areas where breastfeeding prevalence is lower to better understand their barriers to breastfeeding.
 Co-creation of an infant feeding strategy has commenced.

14. Has there been a previous equality analysis (EQIA) in the last 3 years? Answer: Yes/No

Yes a family hub consultation

15. Do you have evidence/data that can help you understand the potential impact of your activity? Answer: Yes/No

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.

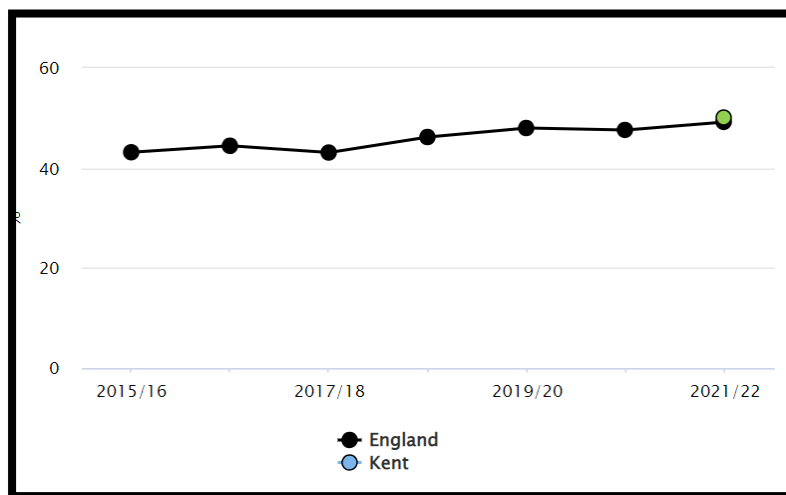
Babies first feed breast milk [proportion], Kent and England, 2020/21

Recent trend: Could not be calculated

| Period | | Kent | | | | South East | England |
|---------|---|-------|-------|----------------|----------------|------------|---------|
| | | Count | Value | 99.8% Lower CI | 99.8% Upper CI | | |
| 2020/21 | ● | 9,420 | 68.1% | 66.9% | 69.3% | 74.4% | 71.7% |

Source: Maternity Services Dataset (MSDS v2.0)

Breastfeeding prevalence 6-8 weeks [current method], 2015/16 – 2021/22



Source: PHE fingertips accessed 11/8/2023

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Section C – Impact

16. Who may be impacted by the activity? *Select all that apply.*

| | | | |
|---|-----|--|--|
| Service users/clients <i>Answer: Yes/No</i> | Yes | Residents/Communities/Citizens <i>Answer: Yes/No</i> | |
| Staff/Volunteers <i>Answer: Yes/No</i> | Yes | | |

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*

Yes

18. Please give details of Positive Impacts

The principles and framework for the Family Hubs model, as set out by central government, are built based on improving user experience by :

1. increasing access to a wider range of services in one place or under one shared umbrella;
2. improving the interface and join-up between services; and
3. having services working within practice that builds on strengths and puts families at the centre of services.

The positive impacts that we anticipate:

Service Users/Clients
Early awareness and subsequent engagement during the ante natal period of the new service offer
Uptake of the new service increasing confidence in mums fully or partially breastfeeding.

Staff and Volunteers
Knowledge and assurance that there is additional support which is available up to the first 12 weeks of life.

Pregnancy and maternity
Reassurance that there is an additional service offer available to them and not necessarily needing them to seek it out.

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 Mitigating actions for Age

| | |
|--|----|
| a) Are there negative impacts for age? <i>Answer: Yes/No (If yes, please also complete sections b, c, and d).</i> | No |
| b) Details of Negative Impacts for Age | |
| c) Mitigating Actions for age | |
| d) Responsible Officer for Mitigating Actions – Age | |

20. Negative Impacts and Mitigating actions for Disability

| | |
|---|-----|
| a) Are there negative impacts for Disability? <i>Answer: Yes/No (If yes, please also complete sections b, c, and</i> | Yes |
|---|-----|

| | |
|---|---|
| d). | |
| b) Details of Negative Impacts for Disability | Communication with neurodivergent individuals. Communication with hearing loss. |
| c) Mitigating Actions for Disability | Ascertaining whether the individual has additional needs at outset of first communication with this new service and recording this information with the clients permission. |
| d) Responsible Officer for Mitigating Actions - Disability | |
| 22. Negative Impacts and Mitigating actions for Gender identity/transgender | |
| a) Are there negative impacts for Sex? Answer: Yes/No (If yes, please also complete sections b, c, and d). | No |
| b) Details of Negative Impacts for Sex | |
| c) Mitigating Actions for Sex | |
| d) Responsible Officer for Mitigating Actions - Sex | |
| 22. Negative Impacts and Mitigating actions for Gender identity/transgender | |
| a) Are there negative impacts for Gender identity/transgender? Answer: Yes/No (If yes, please also complete sections b, c, and d). | No |
| b) Details of Negative Impacts for Gender identity/transgender | |
| c) Mitigating actions for Gender identity/transgender | |
| d) Responsible Officer for Mitigating Actions - Gender identity/transgender | |
| 23. Negative Impacts and Mitigating actions for Race | |
| a) Are there negative impacts for Race? Answer: Yes/No (If yes, please also complete sections b, c, and d). | yes |
| b) Details of Negative Impacts for Race | Recognition that English may not be a spoken language |
| c) Mitigating Actions for Race | Provision for translation or offer of contact in a written digital format. |
| d) Responsible Officer for | |

| | |
|---|----|
| Mitigating Actions - Race | |
| 24. Negative Impacts and Mitigating actions for Religion and belief | |
| a) Are there negative impacts for Religion and Belief? <i>Answer: Yes/No (If yes, please also complete sections b, c, and d).</i> | No |
| b) Details of Negative Impacts for Religion and belief | |
| c) Mitigating Actions for Religion and belief | |
| d) Responsible Officer for Mitigating Actions - Religion and belief | |
| 25. Negative Impacts and Mitigating actions for Sexual Orientation | |
| a) Are there negative impacts for sexual orientation. <i>Answer: Yes/No (If yes, please also complete sections b, c, and d).</i> | No |
| b) Details of Negative Impacts for Sexual Orientation | |
| c) Mitigating Actions for Sexual Orientation | |
| d) Responsible Officer for Mitigating Actions - Sexual Orientation | |
| 26. Negative Impacts and Mitigating actions for Pregnancy and Maternity | |
| a) Are there negative impacts for Pregnancy and Maternity? <i>Answer: Yes/No (If yes, please also complete sections b, c, and d).</i> | No |
| 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. Negative Impacts and Mitigating actions for marriage and civil partnerships | |
| a) Are there negative impacts for Marriage and Civil Partnerships? <i>Answer: Yes/No (If yes, please also complete sections b, c, and d).</i> | 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. Negative Impacts and Mitigating actions for Carer's responsibilities | |

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|--|----|
| a) Are there negative impacts for Carer's responsibilities? <i>Answer: Yes/No (If yes, please also complete sections b, c, and d).</i> | 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 | |
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