

Family Hubs Needs Assessment

Introduction

This assessment of need has been conducted specifically for the purpose of the Family Hubs Programme and serves as an appendix to the wider Local Authority Joint Strategic Needs Assessment (JSNA). Further data and information can be found by reading the full JSNA at <https://www.sandwelltrends.info/jsna-2/>

Family Hubs were launched across Sandwell in July 2023, there are currently seven hubs across (one hub based in each town with two covering the West Bromwich area). Work is currently being developed with the aim of developing a hub and spoke model with further spokes being identified across the borough. Sandwell ranks as the 12th most deprived Borough in the Country (English Indices of Deprivation 2019), and deprivation is widespread across the borough. In 2020/21 There were over 20,000 children under sixteen living in absolute low-income families. The proportion of lone parent households (with dependent children) has increased from 9% in 2011 to 9.4% in 2021. Sandwell ranks 15th out of 331 Local Authorities on this indicator. There has also been a large rise in the number of lone parents with non-dependent children (+31.4%), although these only account for 5.5% of households.

The 2021 Census estimates that Sandwell has 341,835 residents. The population structure of Sandwell is much younger when compared with England overall. The population of 0-4-year-olds however has been decreasing since a peak in 2016 and according to the recent census is 22,200. This trend is predicted to reverse, and births increase in the coming years.

Sandwell has an extremely diverse population, with 42.7% of residents not identifying within the 'white' ethnic category. Almost 1 in 4 residents were born outside of the UK. India is the most common country of birth outside of the UK, followed by Pakistan, Poland, and Bangladesh. There have been significant increases in the number of people born in Romania, Italy, Nigeria and other Central and Western African Countries. In 2021 83.6% of Sandwell usual residents had English as their main language and a further 5.2% considered themselves to be proficient in English.

Sandwell worked with WWIESC (now known as Foundations) to complete a needs assessment that would help to identify the locations that the Spokes should be places and identify where services may need to be targeted to meet the needs of specific communities within the Borough. During the process of the needs assessment, it was agreed that town profiles containing relevant information would be developed to use at the Community Network Practice meetings that are to be held in each town.

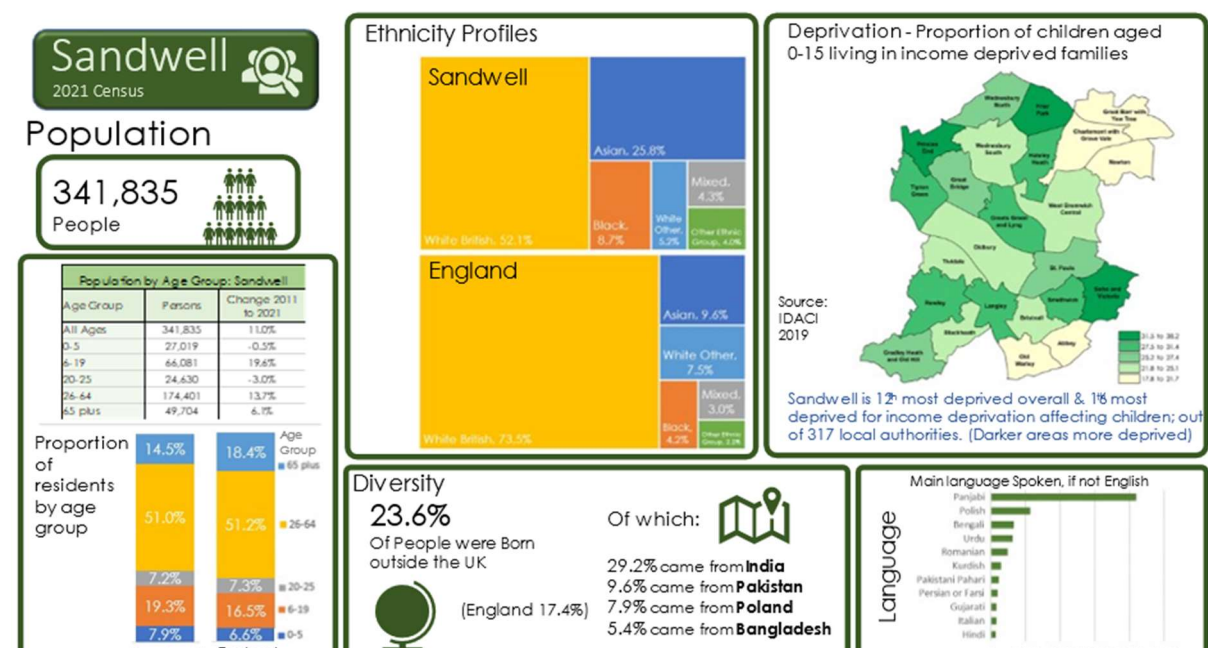
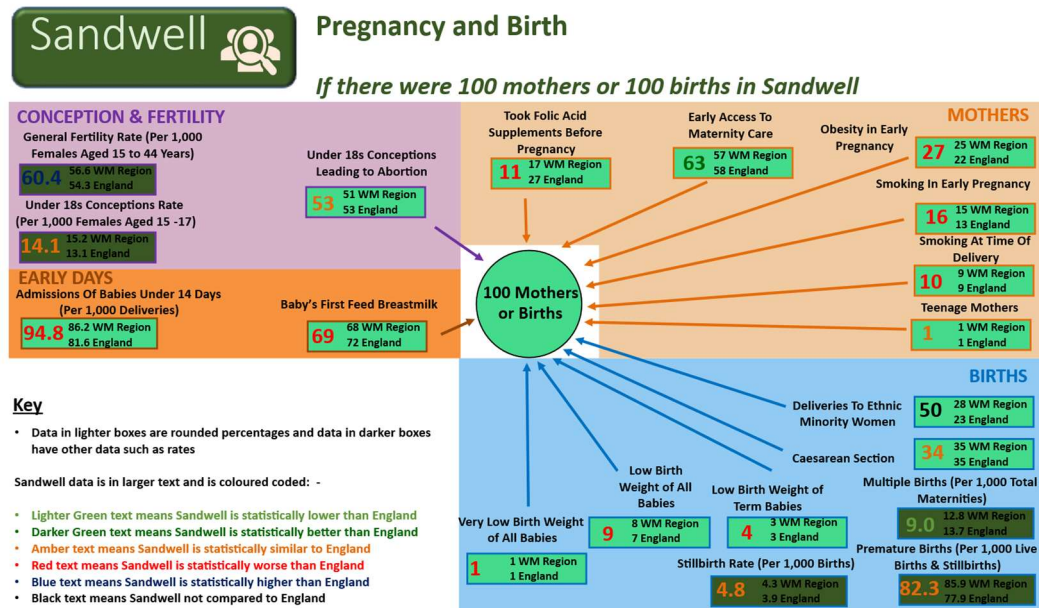


Figure 1 - Sandwell Population Breakdown - Public Health

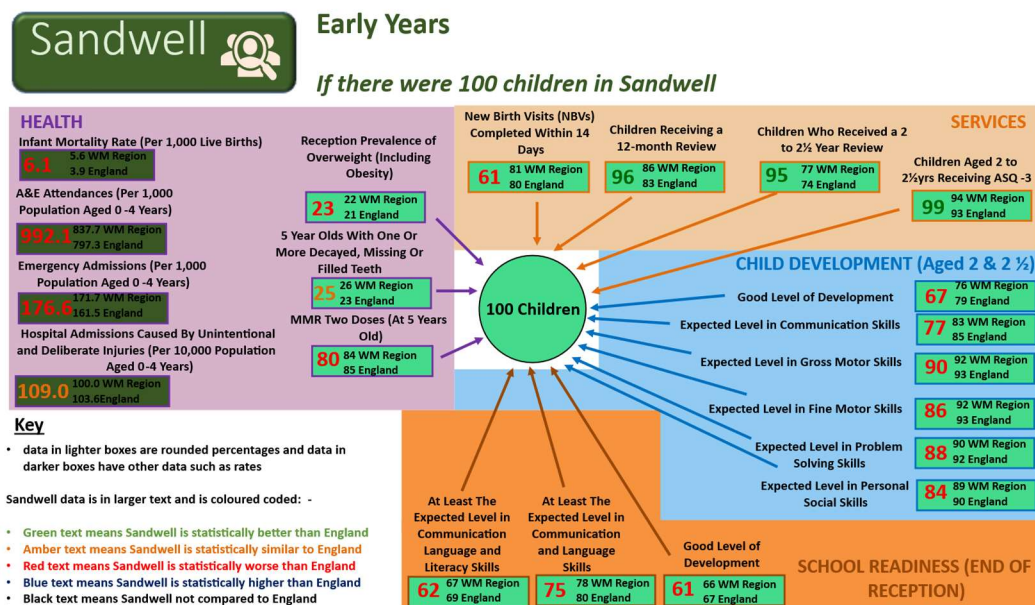
How does Sandwell compare?



Source: [OHID Fingertips](#), [Child and Maternity Health Profile](#), [Pregnancy and Birth Topic](#)

Figure 2- Sandwell comparison slide Pregnancy & Birth - Public Health

Family Hubs will have improved access to services that will support the first 1001 days of a child's life. What happens in the first 1001 days does not determine a child's entire development, but getting things right in pregnancy and the first two years puts children on a positive developmental course, so they can take advantage of other opportunities. The development of the Healthy Pregnancy Pathway in Sandwell will improve prompt access to maternity care, which in turn will hopefully reduce issues such as smoking and obesity in pregnancy and reduce babies born early or with a low birth weight, also the need for the admissions of babies within the first 14 days into hospital. Mothers using the family hubs to register their pregnancies would mean that they had prompt access to a range of support and services that can wrap around their maternity care and prepare them for motherhood.



Source: [OHID Fingertips](#), [Child and Maternity Health Profile](#), [Early Years Topic](#)

Figure 3- Sandwell comparison slide Early Years - Public Health

The accessibility of a service that allows for not only the early identification of issues with child development but for meaningful and continued intervention is imperative in Sandwell. The preceding table shows that in Sandwell children in their early years of life have lower expected levels of good development than in the West Midlands or England despite a higher level of intervention from health services reviewing development during the first two and half years of a child's life. This would suggest that parents/carers and their families need to be better empowered to manage and support their own children's development, understand the importance of it and make the necessary interventions in the home in addition to engaging with services. When parents/carers are able to identify a delay in their child's development they should have quick and easy access to professionals who they can discuss this with and engage in support in a way that is accessible and feels comfortable and welcoming to them.

Family Hub Structure

The Senior Responsible Officer is Sally Giles, Interim Director of Children and Education (DCS), Sandwell Borough Council. There is joint ownership of the programme between the DCS and the Director of Public Health. A core project team comprising two Children and Education and two Public Health staff is currently progressing the Family Hubs workplan, pending recruitment to three dedicated posts – a Family Hubs Strategic Lead, a Family Hubs Project Officer, and a Family Hubs Business Support Officer.

The governance for the Family Hubs Programme comprises a Programme Board and an Implementation Group. These report into the Children and Family Strategic Partnership, chaired by the Director of Children and Education and delivery of the Family Hubs Programme is one of seven key strategic priorities for the Partnership. There is also dual reporting into the Black Country Integrated Care Board through Sandwell's Place Senior Management Team, with the eight strategic priorities for children and young people also having been embedded into the Place SMT's strategy.

The Family Hubs Programme Board and Implementation Group have been established, with their terms of reference signed off by the Children and Family Strategic Partnership and initial meetings held in October 2022. The monthly Implementation Group is responsible for the development and delivery of the Implementation Plan to time to cost and to quality, supported by the Core Project Team. The quarterly Programme Board is responsible for the successful delivery of the overall programme, for sign off key decisions and for unblocking any barriers to delivery.

Members of both groups are responsible for acting as advocates and champions of Family Hubs within their organisations and for communicating key decisions and developments to relevant managers and staff. Decisions are made by the Programme Board on receipt of verbal or written items which have been considered by the Implementation Group. Members of the Implementation Group and Programme Board are available on request.

A risk register has been established and is monitored by the Implementation Group, with key risks and issues escalated to the Programme Board where necessary. If any risks or issues were unable to be resolved here, they would be escalated to Place SMT or the Children and Family Strategic Partnership.

A designated Finance Officer has been identified and a Family Hubs cost centre has been established. It will be the responsibility of the Family Hubs Strategic Lead to monitor the programme finances and to report to the Implementation Group and Programme Board.

The governance arrangements are supported by an underpinning principle of co-production and partnership working, which has been in evidence through the multi-agency workshops which have since the summer, mapped current provision, highlighted gaps, and collectively planned how to fill these gaps through the Family Hubs Programme.

This needs assessment has been agreed at Implementation Group and Programme Board prior to sharing.

Completing the needs assessment

Scope of the needs assessment

All local areas in receipt of the DfE funding were required to conduct a local population needs assessment as part of the Family Hubs programme. This helps to embed evidence-based decision making into planning processes. The aim of any population needs assessment is to understand the needs of different people and communities in the local area. More specifically for Family Hubs the population needs assessment helps us to understand the prevalence of risk factors in the local communities. Sandwell LA had already produced a JSNA <https://www.sandwelltrends.info/jsna-2/> prior to the programme starting, this is updated regularly with the most recent update being 6th December 2023. Therefore, a lot of the data and information was already readily available to apply to Family Hubs. The main purpose of the needs assessment the Family Hubs Team completed was to: -

- Identify areas where the Spokes need to be placed
- Identify communities that do not typically access Family Hubs
- Identify specific risk factors and gaps in services that can be addressed through Family hubs funding.
- Create Town Profiles that can be used by the Family Hub Workforce
- Engage local partners and key stakeholders.

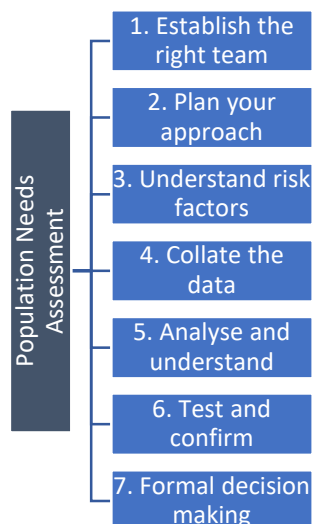
Methodology

We worked closely with WWIESC (now known as foundations) to plan and progress the needs assessment. we held two workshops which were attended by various partners and stakeholders to agree the data that needed to be collated and understand the barriers and gaps in service provision.

**FAMILY HUBS
PLANNING
FRAMEWORK**

**APPLIED
TOOLS**

Taking a step-by-step approach



The Family Hubs Planning Framework

**Thinking about your
local population needs**

**A guide to doing a population
needs assessment for
Family Hubs**

Beta version – for testing & feedback

The Team

The needs assessment data has been collated by the Principal Research Analyst in Public Health and their team with oversight and input from the Family Hubs Programme Officer at Sandwell Council.

Our Approach and engagement with local partners and key stakeholders

Two needs assessment workshops were held, which were attended by various stakeholders across the local authority, children's trust, health, and the voluntary sector. Following this round table discussions with partners e.g., Health, Mental Health, VCS colleagues have been held at regular intervals, this has enabled us to move quickly to embed services within Family hubs and the wider network, providing families with the support they need.

Engagement with Families

- Families participated in the design of the Family Hubs logo.
- 6 Parent Carer panels have been continued and enhanced in each town in Sandwell.
- A new Sandwell wide parent carer panel was formed, that meets quarterly with a rep from each town panel attending along with reps from other parent/carers panels already existing in Sandwell.
- We had parent representation at the needs assessment workshops.

Engagement with Professionals

- There is representation in our workstreams, implementation group and programme board, from local authority services, health, voluntary sector organisations, mental health services and education.
- A wide range of organisations attended our needs assessment workshops and shared experience and data that supported the assessment.
- We have held round table events around health, mental health, and youth to improve engagement and understanding of the Family Hubs agenda.
- Community Network meetings are now happening across the towns for operational staff working with children and families to attend and share information and be updated on Family Hubs, Early Help activity and voluntary sector updates.
- Sandwell place Primary Care and Town Teams workstream

Analysis and Understanding of Risk and Need

Identifying Spokes

- A map was created with all the current Family Hubs, marking a half mile and a one-mile radius around each. The grey areas on the map also represent residential areas where our Sandwell families live. This map clearly showed that there is a large number of families living in Sandwell that do not live within a mile radius of a family hub to access services. Part of the Family Hubs programme is to ensure that Family Hubs are accessible in a variety of ways. One of these ways is that Families should be able to walk into a Family Hub and access the services they need. To do that we need to ensure Family Hub services are at least within a one-mile radius for families to reach by foot or public transport.
- The cars on the map represent our mobile spoke service and lays out an example route of places the mobile spoke could visit. A lot of these sites have already been agreed and the Mobile spoke is already running every week on a Thursday.
- This map has now helped us to identify where our first seven spokes should be placed. Applications for spokes will be prioritised if they are in an area which would bring family hub services within a one-mile radius of our families or if they meet the needs of a specific communities that we are aware are not currently accessing Family Hubs.

Family Hubs, Agreed Family Hub Spokes, (Nov 2023) Specialist Spokes and Mobile Spokes

With Ward and Town Boundaries
and Residential Areas

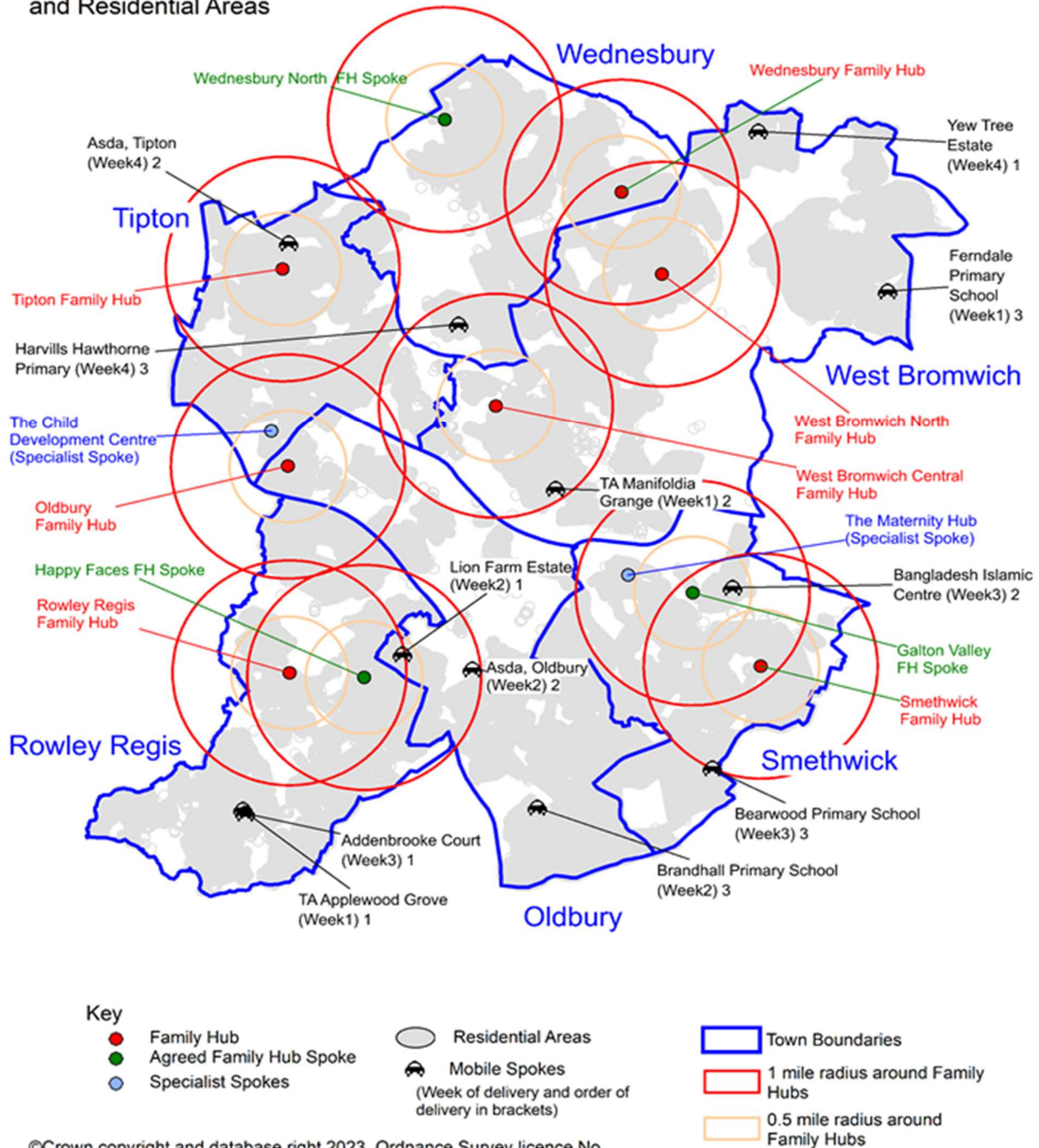


Figure 4- Family Hubs Town Map - Public Health

Identifying risk factors

	Demographics										Risk factors										Birth outcomes		Early years
	0-5 population (%)	15-44 female population (%)	Birth rate (per 1,000)	Fertility rate (per 1,000)	Average age of mothers	Deprivation (IMD 2019)	Mothers under 20 yrs old (%)	Smoking (%)	Lone parent households (%)	Mothers born outside UK (%)	Black % Minority Ethnic mothers (%)	Migration (%)	Stillbirths (%)	Preterm births (%)	Low birthweight (%)	Neonatal deaths (per 1,000)	Children in need (%)	Good level of development (%)					
Sandwell vs England	Higher	Higher	Higher	Higher	Lower	Higher	Higher	Higher	Higher	Higher	Higher	Higher	Higher	Higher	Higher	Higher	Higher	Lower					
Trend in Sandwell: last 5 years	Falling	Falling	Falling	Falling	Rising	Stable	Falling	Falling	Stable	Rising	Rising	Rising	Falling	Falling	Stable	Falling	Falling	Rising					
Wards																							
Princes End	9.2%	39.2%	14.2	72.3	27.3	47.7	37.5	11.4%	12.9%	16.7%	15.0%	0.5%	0.7%	9.0%	9.3%	10.6	11.1%	56.5%					
Greets Green and Lyng	9.0%	40.1%	13.3	67.5	29.9	43.9	12.7	5.4%	9.1%	56.5%	61.5%	1.1%	1.0%	8.3%	9.6%	14.8	2.9%	58.7%					
Soho and Victoria	10.7%	45.6%	17.7	77.8	30.6	42.8	12.2	3.1%	11.7%	67.3%	77.8%	1.7%	0.4%	6.7%	8.4%	9.0	5.1%	52.4%					
Friar Park	8.7%	37.4%	12.0	62.3	28.9	41.7	32.6	5.8%	11.3%	13.1%	13.7%	0.2%	0.4%	9.5%	10.8%	5.2	7.4%	63.0%					
West Bromwich Central	8.7%	40.5%	12.8	64.4	30.0	41.6	17.2	3.6%	8.0%	58.3%	67.0%	1.2%	0.5%	8.9%	11.4%	11.9	4.1%	55.5%					
Smethwick	8.7%	39.0%	15.7	79.8	30.6	41.2	18.4	2.0%	10.2%	55.5%	70.3%	1.6%	0.5%	9.0%	10.7%	12.7	4.1%	55.5%					
Hateley Heath	7.9%	39.3%	11.8	58.9	28.7	40.1	16.0	3.6%	11.2%	38.9%	37.7%	0.8%	0.2%	9.1%	8.9%	9.0	3.6%	52.4%					
Tipton Green	9.0%	39.7%	15.2	76.5	29.0	38.5	24.0	4.0%	9.2%	32.6%	30.5%	0.5%	0.2%	7.5%	8.7%	6.6	5.3%	58.7%					
St Pauls	9.5%	43.2%	15.5	72.2	29.5	38.2	11.8	2.9%	8.3%	61.8%	83.0%	1.6%	0.6%	7.3%	8.8%	13.4	2.6%	56.7%					
Langley	8.5%	37.4%	11.5	61.3	29.2	37.6	22.6	5.8%	11.7%	24.3%	31.8%	0.4%	0.2%	9.9%	11.3%	7.3	5.5%	57.8%					
Wednesbury South	7.1%	36.2%	13.4	73.8	29.9	36.9	18.3	4.7%	8.1%	38.5%	46.2%	1.1%	0.4%	8.7%	9.8%	11.9	4.6%	60.5%					
Great Bridge	8.3%	39.9%	13.3	66.9	28.9	36.5	16.9	6.5%	9.8%	28.9%	33.8%	0.5%	0.7%	9.6%	9.2%	14.8	2.4%	61.9%					
Wednesbury North	8.2%	37.3%	12.5	67.0	28.7	36.1	23.8	4.5%	8.4%	22.4%	27.1%	0.4%	0.4%	10.8%	11.1%	6.0	2.7%	61.9%					
Rowley	8.2%	36.7%	13.3	72.0	29.1	33.9	18.1	5.8%	9.0%	14.1%	16.2%	0.3%	0.4%	8.2%	7.3%	7.1	4.1%	54.1%					
Cradley Heath and Old Hill	7.9%	37.2%	11.5	61.8	28.8	33.5	21.6	4.5%	10.1%	17.3%	24.6%	0.3%	0.3%	8.2%	8.2%	9.5	5.3%	63.1%					
Oldbury	9.4%	42.3%	15.8	75.9	29.8	31.5	18.4	3.3%	8.5%	40.7%	53.5%	1.1%	0.5%	7.6%	7.6%	11.8	3.3%	61.4%					
Blackheath	7.7%	36.2%	11.6	62.7	28.7	30.8	22.6	3.8%	8.3%	16.5%	17.0%	0.3%	0.3%	7.5%	7.3%	7.3	3.4%	58.3%					
Bristnall	7.5%	35.9%	9.1	51.4	29.8	30.8	16.4	2.2%	8.0%	27.2%	49.2%	0.6%	0.3%	7.0%	8.4%	6.0	2.1%	60.4%					
Charlemont with Grove Vale	7.8%	33.9%	12.8	75.7	29.8	27.6	16.5	2.9%	7.8%	29.5%	37.9%	0.6%	0.4%	6.2%	8.5%	5.1	3.8%	64.9%					
Tividale	8.6%	38.8%	13.0	66.2	29.1	27.2	39.6	6.3%	10.5%	18.1%	26.1%	0.5%	0.3%	9.5%	10.4%	9.9	5.3%	64.9%					
Old Warley	7.1%	35.2%	10.7	59.2	31.2	23.5	12.6	2.5%	7.5%	25.8%	45.9%	0.3%	0.3%	5.9%	7.6%	7.5	3.4%	66.9%					
Great Barr with Yew Tree	8.0%	37.9%	12.4	63.6	30.1	22.9	13.7	2.7%	8.5%	22.2%	40.9%	0.4%	0.7%	9.4%	9.5%	9.4	3.4%	61.3%					
Abbey	8.1%	44.1%	12.0	54.2	31.1	22.7	13.5	2.2%	7.9%	40.0%	33.3%	1.1%	0.5%	7.7%	8.9%	9.4	2.9%	50.0%					
Newton	6.9%	35.2%	9.6	53.0	30.8	21.7	9.5	0.7%	8.4%	31.8%	53.9%	0.6%	0.8%	7.5%	7.9%	17.2	1.4%	63.0%					

Figure 5 - Risk Factors for Sandwell 0-5 yr olds - Public Health

This table shows the demographics, risk factors and birth outcomes of our 0-5 population in Sandwell. It is split by the wards that they live in and is ordered by levels of deprivation. Elevated levels of deprivation are seen in wards based in Tipton, West Bromwich, Smethwick, and Wednesbury.

The table shows that Sandwell rates higher than the overall percentage in England for Young Mothers under twenty. Many of these young mothers live in Princes End, Friar Park, and Charlemont with Grove Vale.

We have a high percentage of mothers from an ethnic minority background and born outside of the UK, living in Greets Green & Lyng, Soho & Victoria, West Bromwich Central, Smethwick and St Pauls. Black, Asian and minority ethnic women are at higher risk of dying during pregnancy, childbirth and postnatally and of experiencing premature birth, stillbirth or neonatal death compared with their White counterparts. Discrimination against women from ethnic minorities is known to negatively impact women's ability to speak up, be heard and their experiences of care.

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC9314829/>

Sandwell rates higher for still births, pre-term births, low birth weight and neonatal deaths than England as a whole. Although there are many factors that could lead to these statistics being high in Sandwell the development of a healthy pregnancy pathway and support given to women during pregnancy could identify issues at an earlier stage and reduce these numbers and improve the likelihood of a healthy pregnancy and a healthy baby. Greet Green in West Bromwich Central rates highest for still births. Pre-term births are highest in Wednesbury North and Langley. Low Birth weights in babies are seen across wards in Wednesbury, Oldbury, West Bromwich, and Smethwick. Neo-natal deaths are high in Newton, Great Bridge, Wednesbury South and Greets Green and Lyng. This data shows that risks to pregnancy and newborn babies is across the board in Sandwell in all towns.

									Demographics						Educational needs	Children's trust					Youth justice service	Parental conflict		
	Age of children 0-9 yr % (2020)		Live births (number) 2021		Ethnic minorities by ward % (2021)		Mother under 25 yrs old giving birth % (2021)	Births & Single mothers % (2021)	Average age at first time mom (2021)	Survival third Rank, where 1=most deprived	Proportion of female smoking BRCA support % (2021-23 nap)	Proportion of pupils needing BRCA support % (2021-23 nap)	Children in need per 10,000 (2020)	Children with protection plan per 10,000 (2020)	Children in care per 10,000 (2020)	Care leavers per 10,000 (2020)	Behavioral problems Aggression / Violence per 1,000	Learning and development disorders per 1,000	Mental health issues per 1,000	Children who leave to family or social dysfunction per 1,000	Children experiencing substance misuse per 1,000	Parental conflict rate per 10,000	Painful mental health rate per 10,000	Parental substance misuse rate per 10,000
Sandwell V England	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Trend within Sandwell Wards years)	(Supporting document contains comparison years)	- Decrease -	- slight decrease -	- slight increase +	- slight decrease -	- Decrease -	- Increasing +	- Increasing +	- Decrease -	- Decrease -	- Decrease -	- Increase +	-	-	-	-	-	-	-	-	-	-	-	-
Princes End	Tipton	29.3	171	23.1%	25.7%	32.7%	24.0	1	17.3%	4.0%	111.2	135.6	111.2	38.0	0.8	0.2	0.0	0.8	1.0	5.1	284	15.2		
Greets Green and Lyng	West Bromwich	30.4	182	65.6%	17.0%	13.2%	25.9	2	11.8%	3.2%	56.6	33.4	167.2	38.6	1.3	0.7	1.3	1.3	0.9	5.0	139	5.0		
Soho and Victoria	Smethwick	34.9	280	90.2%	18.9%	19.3%	26.8	3	9.8%	3.2%	48.9	36.7	61.1	7.0	0.9	0.1	0.5	0.9	0.5	4.2	7.5	2.5		
Friar Park	Wednesbury	29.8	141	21.9%	19.9%	28.4%	28.7	4	17.4%	3.4%	97.1	22.8	122.8	14.3	0.6	0.4	0.6	0.8	0.8	5.4	130	3.2		
West Bromwich Central	West Bromwich	26.4	198	73.1%	20.7%	17.2%	25.9	5	10.4%	2.8%	31.2	22.7	90.7	31.2	1.3	0.2	1.3	1.7	1.3	5.5	13.6	4.5		
Smethwick	Smethwick	30.2	208	70.4%	18.8%	17.8%	27.3	6	12.8%	3.4%	47.3	49.6	54.4	11.8	0.7	0.5	0.7	0.5	0.9	6.9	3.6	0.9		
Hatley Heath	West Bromwich	28.1	177	47.8%	24.9%	29.9%	27.1	7	12.5%	3.4%	89.0	33.1	96.6	50.9	0.9	0.5	0.0	0.5	0.5	3.5	18.6	6.2		
Tipton Green	Tipton	27.1	189	44.7%	27.5%	29.1%	31.8	8	12.6%	3.4%	118.2	38.5	71.5	11.0	0.9	0.6	0.2	0.4	1.1	4.6	18.3	6.4		
St Pauls	Smethwick	32.8	277	85.8%	17.3%	16.2%	26.7	9	10.3%	3.1%	78.5	36.1	53.1	12.7	1.1	0.0	0.1	0.8	0.8	2.7	2.7	2.7		
Langley	Oldbury	25.4	192	40.2%	20.3%	26.6%	27.0	10	14.1%	4.2%	97.8	42.7	91.7	24.4	0.0	0.0	0.0	0.0	0.0	0.9	17.8	4.7		
Wednesbury South	Wednesbury	25.2	153	45.3%	17.6%	23.5%	28.3	11	14.1%	3.0%	72.9	19.3	54.6	45.0	1.6	0.0	0.1	1.5	1.3	1.9	11.5	1.3		
Great Bridge	Tipton	26.4	151	39.5%	21.7%	21.7%	27.4	12	13.4%	3.7%	46.5	30.3	78.9	15.2	0.9	0.7	0.7	0.9	0.9	2.0	11.7	2.0		
Wednesbury North	Wednesbury	26.6	126	30.4%	16.7%	14.3%	24.7	13	13.4%	3.4%	71.2	34.0	61.9	27.9	1.8	0.7	1.3	1.8	1.8	2.0	6.0	2.0		
Rowley	Rowley Regis	26.6	173	21.2%	18.5%	24.9%	26.8	14	17.7%	3.4%	103.7	45.9	110.4	23.4	1.0	0.2	0.0	0.5	0.5	6.5	19.6	6.5		
Cradley Heath and Old Hill	Rowley Regis	25.5	164	25.1%	28.0%	26.2%	28.1	15	15.0%	3.9%	122.0	33.5	100.6	42.7	0.9	0.0	0.0	1.1	1.1	6.6	17.8	6.6		
Oldbury	Oldbury	28.3	203	63.2%	21.7%	14.8%	26.4	16	12.7%	4.1%	56.2	30.1	87.8	7.5	1.0	0.0	0.0	0.8	0.8	6.9	9			

This table shows the demographics, risk factors and birth outcomes of our 0-19 population in Sandwell. It is split by the wards that they live in and is ordered by levels of deprivation.

We have a higher proportion of children receiving SEN Support in Sandwell than the England average. The wards with the highest proportion of SEN children are Princes End, Friar Park, and Rowley. We have a lower proportion of children on EHC Plans in Sandwell than the England average. As we have a higher proportion of SEN children this could be interpreted as some of our SEN children are not receiving the correct level of support needed for their special education need. Friar Park and Rowley have relatively small numbers of children on EHC plans although they have the highest proportion of SEN children. Prince's end, Langley and Oldbury have the highest number of children on EHC plans.

Princes end have the highest number of children on Child Protection plans by quite a considerable number, Charlemont with Grove Vale are the next highest ward. We have a higher proportion of children in care than the England Average. Prince's end and Friar Park have the highest number of children in care. Tividale has the highest proportion of parental conflict whilst princes end has the highest number of parents with mental health issues and parental substance misuse.

The table shows that Princes end should be a target area for improving the outcomes for young people 0-19 and that children living in this ward have the most complex families and needs.

Family Hub Funded Workstreams

Infant feeding

We have low breastfeeding rates in Sandwell with under 50% of our Sandwell mothers choosing to breastfeed their babies.

To try and support levels of breastfeeding and support mothers with feeding their infants in general whichever way they choose to feed. Family Hubs funding was used for the following: -

- Enhanced Breastfeeding peer support service
- Healthy pregnancy pathway has been revised with support for pregnant women and their newborn babies received through Family hubs.
- Tongue Tie pathway is being strengthened.
- Breastfeeding equipment will be available for loan in all Family hubs.
- Infant feeding advice and guidance will be available in all our Family Hub Spokes

Parenting

To support the take up of parenting support and parenting programmes in Sandwell the following has been implemented through Family hubs Funding: -

- A consultation has taken place with parents and carers to help us understand parents' perceptions of parenting programmes and what changes we can make to support uptake.
- A parenting strategy is being developed.
- Healthy pregnancy journey links into various parenting programmes that new parents and parents to be can partake in
- Parenting programmes and activities have been enhanced with more programmes and activities on offer to meet need and offer variety.

Early Language and the Home Learning Environment

- We have exceeded the target number of practitioners by 27.5% to receive either Early Talk Boost Training or Making it REAL (Raising Early Achievement in Literacy) training.
- All schools and settings have received a WellComm Screening toolkit along with opportunities for training, information, and roadshow sessions to ensure the consistency of WellComm screening and assessment.
- 3 Practitioner Network Meetings have been held where settings and schools have shared their experiences, challenges, and celebrations from the programmes.
- Parents are given materials to support their understanding of speech, language, and communication development, for example, Sandwell Talking Tips and Parent Friendly WellComm support Cards.
- Parents are provided with opportunities to explore key strands of emergent literacy included in the REAL approach. It is a successful way of working with parents to share professional skills,

knowledge and understanding about early literacy, developing parents' confidence as educators of their own children.

- School Readiness leaflets demonstrating journeys for families with children from 12 months to 2 years and 2 years to 5 years.

Perinatal Mental Health and Parent Infant Relationships

It became clear quite quickly when developing and beginning to implement activities in this workstream that there is a lack of understanding and knowledge amongst the wider workforce around perinatal mental health and parent infant relationships and how the activities already being provided were not being recognised for the contributions they were making to the support of parents mental health and the parent infant relationship. A lot of professionals feel that these issues need to be handled by specialists. There was also no clear governance and oversight across the black country regarding the pathways and support for families who have difficulties in this area.

Using Family Hubs funding the following has been implemented: -

- Development of multi-agency level 1 parent infant relationship training and practitioners trained to deliver.
- Mapping of services to support in this area.
- Development of a pathway to be used by professionals to navigate support for parents.
- New level 3 supervisor in position to support practitioners.
- Triple P Baby trained practitioners
- VIG Trained practitioners
- Acknowledgment from the Black Country CYP Programme Board to include Infants in their TOR and provide governance.

Town Profiles

The Public Health Principal Research Analyst has worked with the Business Insight & Intelligence Manager and the Strategic Intelligence Analyst at Sandwell Children's Trust to develop Family Hub Town Profiles. Due to the sensitive nature of the data the profiles cannot be shared publicly but the profiles will be viewed by professionals in the community network meetings that happen across the six Sandwell Towns to inform decisions about how services are tailored in the town to meet community need.

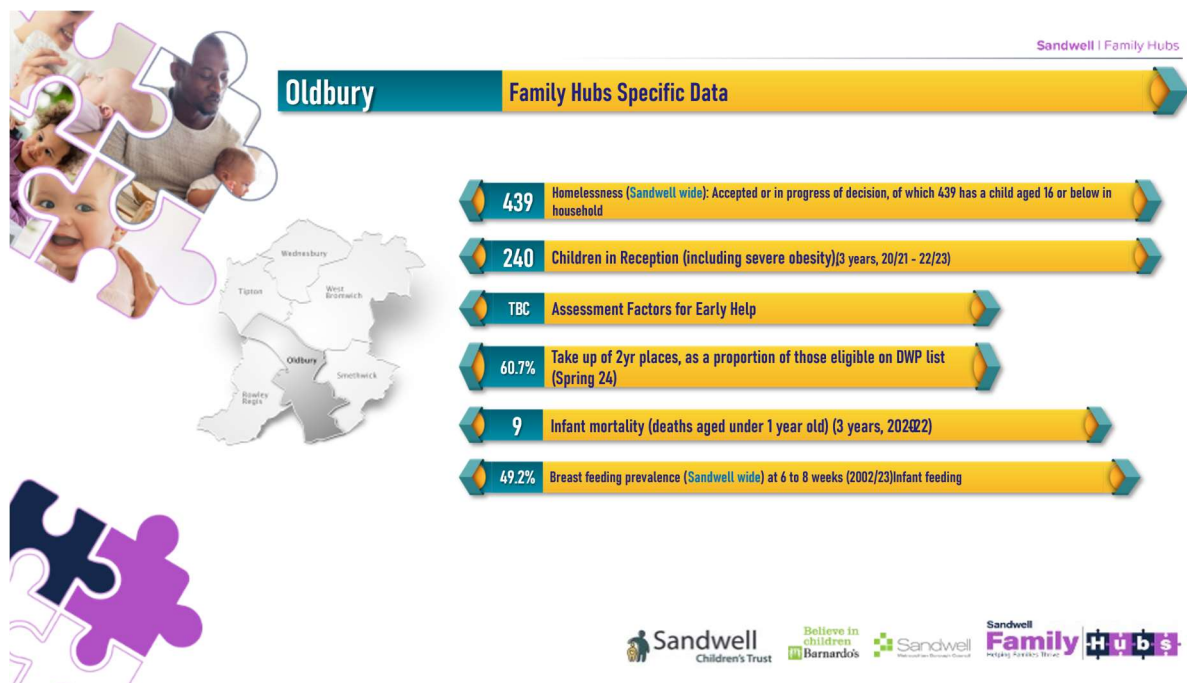


Figure 7 - Example Slide of Oldbury Town Profile - Public Health & Sandwell Children's Trust

References

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