All Party Parliamentary Group on Children’s Centres

Family Hubs: The Future of Children’s Centres

Strengthening family relationships to improve Life Chances for everyone

July 2016

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Introduction

The All Party Parliamentary Group on Children’s Centres (referred to throughout this report as “the APPG”) decided to undertake an inquiry into the future of Children’s Centres as the centrepiece of its programme of activity for the 2015-16 Parliamentary session. The findings of this inquiry are summarised in this report, and it is hoped that the recommendations made here will be of particular relevance at this moment in time as the Government develops its new Life Chances Strategy.

The focus of this report – Family Hubs: The Future of Children’s Centres – is on the role that Children’s Centres can potentially play as hubs for local services and family support. In recent years, the idea of expanding Children’s Centres’ provision to provide holistic support which joins up services for the whole family is one which has received an increasing amount of attention. In 2014, the Centre for Social Justice proposed a model that they termed “Family Hubs”, which would see Children’s Centres become:

the ‘go to’ place for any parent (including fathers) to access services or information about all family-related matters including: birth registration, antenatal and postnatal services, information on childcare, employment and debt advice, substance misuse services, relationship and parenting support, local activities for families and support for families separating.¹

The APPG believes that there is significant potential in the Family Hub model. Its inquiry therefore set out to examine the benefits and case for Family Hubs, to highlight examples of best practice which already exist to demonstrate how the work of Children’s Centres can be augmented, and to consider the challenges around implementation and how these can be overcome.

The APPG’s inquiry encompassed four evidence sessions, held in Parliament. At each session, a number of witnesses with first-hand experience of working in or with Children’s Centres provided oral testimony to the APPG (full details are summarised in Appendix A). Each evidence session looked at a particular form of support that could be delivered within the Family Hub model, with the topics covered encompassing:

• Health and Development
• Employment Support and Childcare
• Relationship Support
• Supporting Families with Complex Needs

In addition, the Group also issued a call for written evidence to enable stakeholders to feed their views into the inquiry, and received a total of 49 responses (a full list of respondents is shown in Appendix B). The APPG wishes to express its sincere thanks all those who took time to contribute their views through both the evidence sessions and call for evidence.
Chair’s Foreword

Ever since I was first elected as a Member of Parliament six years ago, families have been one of the causes that I have been most passionate about during my time at Westminster. I firmly believe, as do many of my colleagues across Parliament, that strong families are an essential part of a strong society, and that when families do well all of us feel the benefit.

As Chair of the All Party Parliamentary Group on Children’s Centres, I have wanted to explore how we can build on and broaden Children’s Centres’ existing offer to establish Family Hubs – using the term first coined by the Centre for Social Justice. These would be “nerve centres” for families, a one-stop-shop for all manner of statutory or voluntary sector support, as well as signposting to other services, to help strengthen family life, relationships within families and the life chances of children, particularly those from the most deprived backgrounds. They would be somewhere to go, in every community, where someone can help you find answers when you are struggling with family issues – throughout different stages of family life, however old your children.

As well as continuing absolutely vital work with children in the very earliest years of life, we wanted to look at how Family Hubs could potentially deliver a wider set of complementary services, providing a more joined-up support offer for families, not just from 0-5 but from pre-birth to 105, and even occasionally beyond! In some instances this is happening already, as our inquiry has heard about the delivery of services such as employment support and training or relationship support through Children’s Centres. This report provides many more such examples, about which we received encouraging evidence. I believe that these kinds of services should be easily accessible to families across the country whenever they need them, and that a refreshed vision of Children’s Centres as Family Hubs could play a key role in this. Achieving this is, of course, not without its challenges. Through the course of this inquiry we have sought to examine the practical issues that need to be overcome if Family Hubs are to become a reality, and I believe that they have the potential to play a prominent part in the outcome of the Government’s forthcoming Life Chances Strategy.

However, this will involve new ways of thinking and working, in particular with even more integrated working within the voluntary and statutory sectors at both local and national level, as well as across Government departments. It is particularly critical that there is strong leadership at all levels to ensure that whilst it is led by central Government, the Family Hub approach is also understood and supported locally to ensure that its potential to transform family relationships, improve children’s life chances and strengthen local communities is fully realised. In the months ahead, the APPG believes that if this vision is to be achieved it should form a central part of the Government’s Life Chances Strategy. We hope that this report can make a valuable contribution to this debate.

Fiona Bruce MP
A Brief History of Children’s Centres

Children’s Centres have their origins in the Sure Start Local Programmes initiative which was first established in the late 1990s. Between 1999 and 2004, 524 Sure Start Local Programmes were established in selected areas in the 20% most deprived wards in England, and were expected to provide a range of services including outreach and home visiting, support for families and parents, health and development services and support for those with special needs.

Between 2004 and 2010, Sure Start Local Programmes started to be rolled out nationally, becoming Sure Start Children’s Centres. This took place over three Phases. Phase One extended full coverage to the 20% most disadvantaged wards in England; Phase Two expanded this to encompass the 30% most disadvantaged wards; and Phase Three extended coverage of the programme nationwide.

Phase One and Two Centres were largely required to deliver what was termed a “core offer” of services including early education and childcare, child and family health services, family support and links to Jobcentre Plus. A significant focus of Children’s Centres’ work was on supporting the development of children in the earliest years of life, and as a result they became synonymous with the concept of “early intervention”.

After 2010, the “core offer” was replaced by a “core purpose”, which set an overall objective for Children’s Centres of improving outcomes for young children and their families, particularly amongst those from the most disadvantaged backgrounds, in order to reduce inequalities in child development and school readiness.²

The latest figures from the Department for Education indicate that on 31st December 2015 a total of 3,336 Children’s Centre sites were open, encompassing 2,605 main sites and a further 731 additional sites.³

Over the lifetime of the Children’s Centre programme there have been a number of projects which have sought to evaluate Centres’ impact. The latest research has been undertaken as part of the Evaluation of Children’s Centres in England (ECCE) project. One of the most recent reports published as part of this focused on assessing the effects of Children’s Centres in promoting better outcomes for children and families, with the findings suggesting that “Children’s Centres can have positive effects on outcomes, especially on family functioning that affects the quality of parenting, and that Children’s Centres are highly valued by parents”.⁴

Recently, through locally-led initiatives, many individual Children’s Centres have started expanding their offer. This report highlights several good practice examples from around the country, but these are by no means isolated ones and several other areas have adopted key elements of the extended “Family Hub” model. A nationally-led impetus to transform Children’s Centres into Family Hubs would prospectively represent a logical and natural progression of the good work started in so many parts of the country.
Executive Summary

Health and Development
Children’s Centres currently have a key role to play in early intervention, particularly given their established work in the early years when the support has the biggest impact on long-term outcomes.

Supporting the health and development of young children aged 0-5 should remain an important part of Children’s Centres’ work, with services ideally provided on a universal basis where this is feasible.

However, the APPG’s inquiry has also shown that Centres are well placed to provide a wider range of services as Family Hubs, and their offer should be broadened to position them as one-stop-shops for family support in their local communities.

Employment Support and Childcare
Family Hubs can be a particularly effective place to deliver training and employment support, as they represent a friendly, non-threatening environment.

Building parents’ confidence is a crucial element of effective employment support – this can encompass broader provision such as parenting and healthy eating classes which have wider benefits for children’s outcomes.

Links between Family Hubs and both local employers and Jobcentre Plus must be strengthened to build on the good work already being done in this area.

Family Hubs can also play an important role in the provision of early education and childcare, either through direct delivery or by supporting other local providers.

Relationship Support for Family Stability
The quality of the parental relationship can have a significant impact on children’s development.

Family Hubs’ regular contact with parents and links with local partners make them well placed to deliver relationship support. This should encompass couple relationship counselling and courses, already being trialled in some settings, as well as parenting support.

A crucial aspect of providing relationship support through Family Hubs is training staff to have the right kinds of conversations with parents. A relationships approach also needs to be embedded across the local authority.

Voluntary sector organisations with a proven track record of best practice should be based in or prominently signposted from Family Hubs.

Family Hubs can also play a key role in engaging fathers, and their capacity to facilitate collaboration between different services can be very valuable to this kind of work.

Supporting Families with Complex Needs
Supporting families with complex needs involves a wide range of local agencies who will ideally share the same approach.

Children’s Centres have played an important role in supporting families on the brink of needing specialist support. The Family Hub model could offer valuable
benefits, bringing together professionals and helping to embed shared approaches.

Valuable lessons can be learned from the Troubled Families programme, adapting this to support families before crisis point.

**Cross-cutting Issues**

Children’s Centres’ staff are their greatest asset, and will be vital to the success of an extended Family Hub model. Levering in additional charitable and community support (including through the National Citizen Service) will also be crucial to ensuring Hubs have the capacity to effectively support families.

Physical capacity is also an important issue when considering an extended service offer. The APPG’s inquiry has shown that the range and quality of services is of foremost importance, and that they are locally appropriate. Therefore, delivering services through wider community venues should be explored where appropriate, provided such decisions represent the best approach for addressing a particular need.

There is a need to deal with persistent barriers to enhancing collaborative working and address challenges around measuring impact. The Group also remains convinced that birth registration should be rolled out in Family Hubs nationwide.

**Recommendations**

1. The Government should give full consideration to augmenting Children’s Centres into Family Hubs as part of its Life Chances Strategy.

2. Local authority leaders and public health commissioners should position Family Hubs at the heart of their Health and Wellbeing strategies.

3. Emphasis should be placed on how mental health needs can be addressed in Family Hubs.

4. The links between Family Hubs, local employers and Jobcentre Plus should be reviewed and strengthened.

5. Relationship support delivered through Family Hubs should encompass not just parenting support, but also couple relationship counselling, pre-marriage courses, post-separation support and help with parenting teenagers.

6. To support Family Hubs’ work in this area, local authorities should be required to record family breakdown statistics on a statutory basis.

7. Lessons from the successful Troubled Families programme should be learned, but with a focus on helping families before crisis point is reached.

8. Engagement with voluntary, self-help and peer support organisations should be significantly expanded, with a recognition that people who have challenges can often offer solutions.

9. Every National Citizen Service candidate should spend time in a Family Hub, both learning and volunteering, to emphasise that everyone has something to contribute.

10. Online support should also be available, co-branded with Family Hubs.

11. There must be a concerted effort to share best practice across the country, to overcome barriers to information sharing and improve the evidence base around the impact of services.

12. Birth registration should be rolled out in Family Hubs nationwide.
Family Hubs: The Future of Children’s Centres

Over the course of the past year, the Government has made clear that supporting those from the most disadvantaged backgrounds through the development of its Life Chances Strategy is one of its central domestic policy concerns.

As well as placing a major emphasis on the importance of strengthening families, which have been described as “the best anti-poverty measure ever invented”, the Life Chances Strategy will also significantly shape the future direction of Children’s Centres, with Government indicating that policy in this area will be developed as part of the Life Chances framework.

Children’s Centres have become a key part of the support landscape for children and families over the last 20 years. In this report, the APPG has sought to contribute to the debate around the future of Children’s Centres by setting out a vision for how they can be expanded to become Family Hubs and help deliver the Life Chances Strategy.

Building on the exceptional work that Children’s Centres have done over the course of the last two decades, particularly with children in the earliest years of life, the Family Hub model would broaden their remit to encompass a wider range of services and position them as “nerve centres” for all kinds of family support within their communities. To some extent this is already starting to happen, and through the course of the inquiry which informs this report the APPG has heard about a variety of projects that Centres are running in areas such as employment support and relationship support, a number of which are included as case studies. These demonstrate that Family Hubs can deliver a number of key Government priorities, and should be a central part of the Life Chances Strategy.

Recommendation 1: As part of its work on the Life Chances Strategy, the Government should give full consideration to augmenting Children’s Centres into Family Hubs – a “nerve centre” for all types of family support, with a mixture of statutory, voluntary and specialist help both on-site and signposted.

Health and Development

Promoting good health and child development have always been a vital part of the work that Children’s Centres do, and the APPG’s inquiry began by examining this historic area of strength.

Indeed, a common feature across the evidence provided in this stream of the inquiry has been an emphasis on the importance of early intervention, and the key role Children’s Centres have played in this. Seminal policy reviews such as The Foundation Years by Rt Hon Frank Field MP and Early Intervention: The Next Steps by Graham Allen MP have helped to establish that the most effective way of improving children’s long-term outcomes, and narrowing gaps in attainment and wellbeing, is to ensure that support is
provided during the earliest years of life when interventions can have the greatest impact.\textsuperscript{7} Children’s Centres’ expertise in the early years, as well as their capacity to integrate services and bring a range of different professionals together around a child, have made them a key vehicle for providing this kind of support.

Case Study 1 offers a practical example of how providing integrated services through Children’s Centres has been effective in the context of mental health. In Islington, Child and Adolescent Mental Health Services work through the Borough’s Children’s Centres – this has helped to increase the accessibility of mental health services for young children and their parents, as well as enhancing the awareness of Children’s Centres’ staff about the impact of parental mental health on parenting and a child’s wellbeing.

Within an extended Family Hub model, supporting the health and development of young children aged 0-5 would remain a vital part of the work that Hubs do, reflecting the enormous importance of the early years to later life outcomes. Many of those who provided evidence to the APPG also emphasised the significance of maintaining an element of universal service provision – open to all rather than just targeted on the most disadvantaged – wherever possible. Not only do universal services help to prevent support from being stigmatised as something for “failing families”, they are often key to enabling staff to identify parents who are dealing with more complex issues at an early stage (this is particularly the case when dealing with issues such as mental health, where problems do not discriminate on the basis of income or geographic location).

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**Case Study 1**

**Delivering CAMHS services through Children’s Centres in Islington**

Child and Adolescent Mental Health Services (CAMHS) have been working in Children’s Centres in Islington for 15 years. CAMHS professionals work closely with Children’s Centre staff, raising awareness and increasing understanding of the impact of parental mental health on parenting and relationships with children to ensure timely referrals to the right service for families who need them.

CAMHS co-location in Children's Centres has significantly increased both accessibility and attendance rates compared with clinic attendance, and delivery within integrated Children's Centre teams adds value by ensuring families have access to support which meets their needs.

The experience of a young Somali mother supported by Islington’s Children’s Centres helps demonstrate this. She and her son were referred to a CAMHS psychologist in a Children’s Centre by her maternity support worker. The psychologist contacted the Health Visitor and requested that she be offered listening visits as a first line of intervention, supervised by the psychologist. The psychologist then met with the mother for ten treatment sessions in a Children’s Centre and addressed the impact of her own traumatic background. The psychologist referred her to a Somali Bilingual Outreach Worker who supported her to access Baby Massage, Stay and Play, and the Housing Advice clinic in the Children’s Centre.
The APPG’s inquiry has shown, however, that Children’s Centres are currently very well placed to deliver a wider range of services as Family Hubs, building on their established strengths as this report will discuss. The nature of the Centre setting, their strong links with other partners in the community and regular contact with parents mean they are ideally positioned to deliver the likes of employment support and relationship support within a broadened service offer.

The APPG has also heard about examples of where Children’s Centres are operating effectively beyond their traditional 0-5 remit, with Case Study 2 showing how Children’s Centres in County Durham deliver what is termed a “One Point Service” on a 0-19 basis. Within the Family Hub model, the ambition should be to extend even beyond this and provide or signpost to services for the whole family.

Strong leadership will of course be crucial to achieving this. From a health perspective, local authority leaders and public health commissioners should position Family Hubs at the centre of their Health and Wellbeing strategies. Other local partners such as schools will also need to be fully engaged, particularly around issues such as mental health where an integrated approach is most effective.

Recommendation 2: Local authority leaders and public health commissioners should position Family Hubs at the heart of their Health and Wellbeing strategies. There should be strong local authority leadership at both Senior Officer and Council Cabinet level. Accessing support should be normalised, supported by messaging from local leaders.

Recommendation 3: Emphasis should be placed on how mental health needs, and particularly children’s mental health, can be addressed in Family Hubs, including how support available from other partners such as schools can be integrated with Family Hub support.

Case Study 2
Delivering a “One Point Service” in County Durham’s Children’s Centres

Children’s Centres are part of what is termed a “One Point Service” in County Durham. One Point brings staff together from Durham County Council and the NHS and provides support to both 0-5s and 5-19s (extending up to 25 if a child is disabled) meaning that support is available across the entire 0-19 age range in Children’s Centres.

Alongside a core health offer, One Point offers a range of advice and support to children and their families, including support with parenting skills, opportunities for children to learn through play, support with school attendance and support for young people to progress from their education into training or employment. However, a protected space is provided within Children’s Centres for 0-5s.

Building trust and effective relationships between practitioners is crucial to making this kind of model work, with monthly multi-disciplinary meetings ensuring smooth working between agencies, and the strength of these relationships is commented on positively by service users.
Employment Support and Childcare

With all political parties agreeing that work represents a key route out of poverty, Family Hubs can be an important vehicle for delivering employment support, particularly for those parents who may be quite a long way from the job market. Moreover, given the Government’s emphasis on the role of high quality early education and childcare in both enabling parents to return to work and supporting children’s learning and development, it is important to recognise that Family Hubs can play a vital role in this area too, both by delivering childcare places directly and also by supporting other local providers.

In terms of employment support, evidence submitted to the Group has demonstrated that Children’s Centres can be a particularly effective site for delivering this, providing a very strong base for Family Hubs to work from. For those who are quite a long way from the job market, evidence has emphasised that accessing employment and skills support through a Children’s Centre can be a much less intimidating experience than attending a Jobcentre Plus or formal educational institution. This can play a key role in facilitating engagement, particularly amongst more disadvantaged groups.

An example of delivering effective employment support through Children’s Centres was provided by a witness from Derby City Council, who provided oral evidence to the APPG and had extensive experience as a front-line employment adviser working through Children’s Centres. She noted that the contact rates she achieved when running appointments through a Children’s Centre never fell below 81%, while average attendance rates at the local Jobcentre Plus office were usually around 40-50%. Explaining why she felt that better results were achieved through Children’s Centres, she highlighted that they were often perceived as a safe setting and that for some families, including those with more complex needs, a Jobcentre could be a scary place, whereas “being able to go to that building at the end of the road” could make all the difference in terms of successful engagement.8

Furthermore, written evidence submitted by the Department for Business, Innovation and Skills on Children’s Centres’ role in the provision of Family Learning (which aims to build a culture of learning within families, not only giving parents the confidence to develop their own skills but also helping them to engage with their children’s learning and support their development as well)9 reinforces the view that Centres are a particularly valuable site for this kind of support:

Family Learning aims to attract the most disadvantaged families, and Children’s Centres are key to delivering this objective. Many parents lack confidence and can find the FE college environment intimidating, whereas Children’s Centres offer a friendly, non-threatening setting and deliver a wide range of services that support and engage disadvantaged parents and carers.10

A great deal of the evidence provided to the APPG emphasises that building a parent’s confidence is a key part of providing employment support through Children’s Centres, and that for many of those who access these kinds of services simply reaching the point where they can
contemplate attending an interview represents a major achievement. Case Study 3 illustrates how a group of Children’s Centres in Northumberland undertake this kind of work. Importantly, this process of confidence-building not only encompasses support which enhances parents’ skills in areas such as literacy and numeracy, but also much broader forms of support such as parenting and healthy eating classes. This means that as Children’s Centres support their users in their journey towards employment, they also help to enhance parenting skills along the way, ultimately yielding much wider benefits for children and the family as a whole.

The evidence that the APPG received has highlighted some key lessons that can be learned from the experience of delivering employment support through Children’s Centres, which can help enhance the provision within the Family Hub model. The importance of developing strong relationships with local employers so that Hubs are aware of vacancies and also skills gaps in local job markets was stressed during the course of the inquiry. Furthermore, links with Jobcentre Plus are viewed as crucial, but witnesses indicated that a strong mandate for joint working is needed in order for such relationships to be effective and endure over time.

**Recommendation 4:** Evidence provided to the inquiry indicates that Family Hubs can be a particularly effective setting for delivering employment support, particularly for the long-term jobless. To maximise their impact, the links between Family Hubs, local employers and Jobcentre Plus should be reviewed and strengthened.

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**Case Study 3**

**Employability, Skills and Training at Blyth Valley Children’s Centres**

The Blyth Valley Children’s Centre group serves the south east corner of the county of Northumberland, and has a strong track record of developing opportunities for families for whom learning has not been a positive experience. Centre teams understand that learning activity must be enjoyable and fun, manageable in small steps, successful, relevant to daily life and stimulating for further learning.

The Centre group concentrates its programmes of learning around activities that enable more confident parenting and caring, activities that support parent/carer personal interests (in order to develop learning and literacy and numeracy skills) and accredited programmes that secure qualifications that may offer access to employment. All achievement through these programmes is celebrated generously within the Centres creating a culture where learning is the norm and feels good. It creates an aspirational culture in which children and parents enjoy the pleasure of success. Learning programmes raise parental confidence in their role as their child’s carer and first educator, but skilful encouragement by Centre workers leads adults into volunteering schemes and pathways to employment. The experience of one parent, Lisa, is an example of this. After undertaking a “Spring Arts” course (which provided creative development for her and ideas to use with her child) and a Triple P parenting course, Lisa was motivated to sign up for a series of computing courses and now has the skills and confidence to consider employment.
High quality early education and childcare is also recognised as a crucial driver of parental employment, as well as having an important developmental impact for children themselves. Evidence submitted to the APPG agrees that Children’s Centres are currently playing an important role in the provision of early education and childcare places, something that would continue to be the case within the Family Hub model.

The dynamics and capacity of local childcare markets will determine the best way in which Family Hubs could add value in this respect, but there are several ways in which they can contribute to the delivery of high quality care. One is through the direct provision of places. Data indicates that at present, significant numbers of Children’s Centres are involved in childcare provision, with 44.9% of Centre managers surveyed as part of 4Children’s Children’s Centre Census stating that they provide places. Of these 85.3% offer places for 0-2 year olds and 79.0% offer places for 3-4 year olds. A number of responses have highlighted the key role Centres currently play in delivering the free early education entitlement, particularly given their reach amongst more disadvantaged groups, and this would remain an important aspect of their provision as Family Hubs. As the Government extends the 3 and 4 year old entitlement to 30 hours for working parents, it should be conscious of the base of provision that already exists in such settings, and their consequent importance to ensuring the policy can be delivered sustainably.

In addition, Family Hubs can also play a broader role in supporting other local providers to enhance quality and improve practice. 4Children’s three year Early Learning and Community Childcare Hubs project, discussed in Case Study 4, is a prime example of this kind of work, and provides a model of how Family Hubs could bring together local providers and drive up quality across the board.

Case Study 4
Early Learning and Community Childcare Hubs
4Children’s Early Learning and Community Childcare Hubs project was a three year programme which piloted how early years settings can bring together local providers, schools and childminders into a learning network, and provides a model of how Family Hubs could be involved in this sort of work. During its inquiry the APPG heard from one of the settings involved in the programme, Sheringham Nursery School in Newham, which is an exemplar of how this kind of approach can work.

Sheringham’s involvement in the programme helped to drive a marked improvement in quality in the area, with all participating settings now rated “Good” or “Outstanding”. This was achieved by involving settings in the learning network in a number of projects, including initiatives to support children experiencing language delay, to improve the quality and take-up of free entitlement places, and to engage with Area SENCOs to identify support and training needs within settings. Sheringham also led a childminder network, which promoted local childminders and provided them with regular support and training.
**Relationship Support for Family Stability**

Strengthening families and supporting high quality parenting are key strands of the Life Chances Strategy, and are a central part of the Government’s vision for tackling poverty and disadvantage.

It is now widely recognised that there are considerable economic and social costs to family breakdown, with figures from the Relationships Foundation suggesting that the overall cost to the state is around £47.31 billion per year.\(^4\) Furthermore, Government research shows that for every £1 invested in strengthening family relationships, a saving of up to £11.50 on the social costs incurred as a result of family breakdown can be made.\(^5\) Relationship failure has a significant impact on children’s development – the Tavistock Centre for Couple Relationships has highlighted that:

*Research on factors affecting children’s outcomes, in terms of their social, emotional and psychological development overwhelmingly implicates the quality of parental relationships. For example, one extensively studied area – the effects of inter-parental conflict on children – shows clearly that frequent, intense and poorly resolved conflict … is detrimental to children’s development.*\(^6\)

Supporting strong and healthy relationships between couples and within families would be a fundamental part of the work of Family Hubs, and can help prevent a wide variety of other poverty drivers which so often follow family breakdown including addiction, debt, inadequate housing and mental and physical health issues. Ultimately, this support should encompass a wide range of interventions including parenting support, couple relationship counselling, pre-marriage courses, post-separation support and help with parenting teenagers. Some of this support would be structured, and at other times more “light touch” – somewhere for anyone to go for a listening ear and advice.

Evidence provided to the APPG indicates that by building on a number of Children’s Centres’ traditional strengths, Family Hubs would prospectively be well positioned to deliver this sort of comprehensive programme of family relationship support. Children’s Centres’ regular contact with parents means they are ideally situated to identify issues within a relationship at an early stage, to help prevent further fracturing and the costly consequences this entails, while the links that Centres have built up with other agencies through consistent partnership working over a number of years mean that they can facilitate access to wider services where necessary.

Case Studies 5 and 6 help to demonstrate this, providing examples of two projects which are placing Children’s Centres at the heart of supporting strong family relationships in Hartlepool and Hertfordshire. The key to the success in this area, it has been argued, is training and supporting Children’s Centre staff to recognise potential problems and have conversations about relationships in the right way. Arlette Kavanagh, Development Lead at the charity Changing Futures NE which has been developing a network of Family Relationship Centres, explained this in oral evidence she provided to the APPG, saying:
Delivering relationship support through Family Hubs, evidence has made clear, would not be about expecting staff to resolve all of someone’s problems in an instant. Rather, this kind of work is about equipping staff to open up a dialogue, and to help parents to access the wider services they need, whether these are provided directly by a Family Hub or by another service which families can be signposted on to.

In addition, the APPG’s evidence sessions highlighted that in order for a relationships approach to succeed, staff in local authorities and partner agencies also need to buy into it. It was noted that in Hartlepool, where Changing Futures NE had worked closely with the local council to embed their relationships approach, this had necessitated additional changes on the part of the local authority to things like assessment frameworks to make it fully effective. Indeed, in order to support work in this area, the APPG also believes that there is a case for local authorities to be required to record statistics on family breakdown on a statutory basis, which could be shared with Family Hubs to help them identify those who may be in need of support.

Family Hubs should also take full advantage of the extensive expertise that the voluntary sector possesses in providing a wide range of parenting and couple relationship counselling services.

As part of this, three Family Relationships Centres will be established, two of which will be based in local authority Children’s Centres. These will offer specific relationship support services (such as family and couple group work, couples counselling, mediation, relationship focused child and youth programmes) and activities to bring together community members (reducing isolation and combating loneliness).

In addition to the services themselves, the Healthy Relationship Programme and Family Relationship Centres aim to make “thinking and supporting relationships” part of the core practice skills of those who work with children and families in education, early years, Children’s Centres, health, and family support across sectors and across the town.

We are not expecting all the staff to deliver couples therapy or sex therapy, not at all. But what we are looking for is, when a parent walks in off the street, the first person they speak to will be able to support them on some basic level, to have a discussion about any relationship issue. Changing Future NE is currently leading the development of a Healthy Relationships Programme in partnership with Hartlepool Borough Council and voluntary sector groups. This seeks to put relationships at the heart of everything that professionals working with families do, and aims to reduce the demand on children’s social care and other late intervention services by effectively supporting family relationships before problems become entrenched.

The Programme also aims to achieve a culture shift amongst families in Hartlepool to encourage more people to seek help before their relationship breaks down.
Case Study 6

Children’s Centres’ role in Hertfordshire’s Local Family Offer pilot

Hertfordshire is taking part in the Department for Work and Pensions’ Local Family Offer pilot. This aims to strengthen the support given to current and prospective parents in sustaining positive relationships, and enable them to manage and resolve conflict to ensure a safe, stable and nurturing family environment within which children can thrive.

Children’s Centres have an important role to play in this, and are well placed to notice early signs of stress in relationships and offer early interventions. Through conversations, staff can break down the stigma of seeking support for relationship issues. Relationship breakdown can have a greater impact when there are other vulnerabilities in the family. Hertfordshire is seeking to support families holistically – addressing relationship support needs alongside other areas of need. Children’s Centres work with a wide range of cases alongside Hertfordshire’s “Families First” (Early Help) teams and will support the identification of those most at risk of complex issues, as well as providing non-stigmatised pathways to increased support.
Oral evidence given to the APPG on this subject by Ashley Warke, a Family Support worker from Packington Children’s Centre in the London Borough of Islington, helped to illustrate some of the most significant elements of a successful approach to engaging with fathers.22

In particular, it was stressed that it is vital to make engagement with fathers part of what happens “every minute of every day” within a Children’s Centre – even if it is primarily the mother who attends the setting, which is frequently the case. The importance of staff understanding the role of the child’s father in their life was emphasised as being very important, and staff need to be equipped to address these kinds of questions in an appropriate way.

Furthermore, the issues around working with dads who may not live in the family home, and may potentially have wider support needs was also discussed. At Packington Children’s Centre, an inter-disciplinary support group has been organised which brings together a range of different professionals such as Family Support Workers, youth workers, health specialists and employment advisers. This enables the fathers participating in the group to get one-to-one support from an appropriate professional on particular issues they are dealing with, but also to help each other, with peer-to-peer support representing an important aspect of the group’s work.

This illustrates how Children’s Centres’ capacity to facilitate collaboration between different services can be especially valuable to engaging fathers, and that Family Hubs would therefore be very well placed to continue providing this kind of support.

Supporting Families with Complex Needs

Growing up in a family dealing with complex issues such as substance misuse or domestic abuse,23 acute health needs, or where a parent has served or is serving a custodial sentence, can have a significant impact on a child’s development. This final strand of the APPG’s inquiry examined Children’s Centres’ role in supporting those children and families with more intensive needs, and understand how Family Hubs can best contribute to improving their outcomes in the future.

The APPG received oral evidence about approaches taken to supporting families with complex needs from staff in several areas with quite diverse characteristics, including the London Borough of Barking and Dagenham, Cambridgeshire and Liverpool. While the practical challenges faced by each could be quite different, they all highlighted the overwhelming importance of partnership working between a range of different agencies, including Children’s Centres, to address the issues faced by these families. Ensuring that support was delivered as consistently as possible across different services was stressed as being crucial, with the need for a common vision and approach amongst all partners viewed as essential to enabling this.

Witnesses explained the various strategies they adopted in order to achieve this. In Barking and Dagenham, all the Borough’s Children’s Centres share the same core offer, guiding principles and outcomes framework – the latter maps closely on to the Troubled Families programme’s outcomes plan, enabling this to be fully embedded within the local authority’s
Centres. Meanwhile, as explained in Case Study 7, in Cambridgeshire all partners that work with families have adopted what is termed a “Think Family” model, to enable a consistent approach to supporting families to be taken across all agencies. An important aspect of this is the development of a whole family approach to the Common Assessment Framework which Children’s Centres have played a key part in rolling out.

Representatives from Liverpool’s Clinical Commissioning Group (CCG) also outlined an approach that arguably took partnership working to its furthest extent. Recognising that much of the support on offer to those with more complex needs is segregated in nature, a key strand of the CCG’s commissioning strategy involves a “Neighbourhood Collaborative” model, which seeks to bring all partner agencies in a community together and “genericise” certain services so that such families are not treated as special cases to quite the same degree. As the CCG’s Vice Chair Dr Simon Bowers explained:

Some families have very, very acute levels of need, but historically what we’ve done is leave them in that high level of need rather than pick out the bits of their need that can be managed by universal services and make it all feel normal.

This approach, labelled “No Wrong Door”, is examined in more detail in Case Study 8. These various examples highlight that support for those with complex needs works most effectively when responsibility is shared across the full range of different agencies working with the family, all of whom share the same approach. With a wide range of stakeholders invested in supporting such families, it is important to

### Case Study 7

#### The “Think Family” approach in Cambridgeshire

As a large shire county which needs to maximise the impact of available resources, strong integrated partnerships are essential to the success of all Cambridgeshire’s work with families.

In order to facilitate this, Cambridgeshire County Council have adopted what they term a “Think Family” approach across all their services. This aims to improve outcomes for children, young people, adults and families by considering and understanding the needs of all family members and coordinating the support they receive from children’s, young people’s, adult’s and family services in a single family support plan coordinated by a Lead Professional. This kind of cross-partnership model also helps to minimise duplication across services and maximise the effectiveness of budgets.

The “Think Family” approach has been adopted by all agencies working with families in Cambridgeshire including health, Jobcentre Plus, schools and the police, as well as Children’s Centres. It is also at the heart of Cambridgeshire’s Troubled Families programme.

An important aspect of the “Think Family” model has been the development of a whole family approach to the Common Assessment Framework (CAF) process. A new “Family CAF” has been developed which supports all Cambridgeshire’s work with families with complex needs, including through the Troubled Families initiative. Children’s Centres have played a key role in the adoption of Cambridgeshire’s Family CAF approach across services supporting young families.
understand the nature of the role that Children’s Centres currently play, and the opportunities provided by the Family Hub model to enhance the support that the community as a whole provides.

Oral evidence provided to the APPG helped to clarify the sorts of families that Children’s Centres are primarily involved in supporting. As Toby Kinder from the Delivery Unit at the London Borough of Barking and Dagenham explained:

*From an early intervention perspective, these are the families for whom we would say ‘If we don’t do something really quick these families are going to go over the edge’. We wouldn’t say they were in crisis and we wouldn’t say they are chaotic, but routines need to be managed and some things need to be addressed otherwise they will slip over into [needing specialist support].*

While Children’s Centres are not currently dealing with the most complex cases of all, they do play an important part in supporting those families who, without help, could potentially fall into much more serious levels of need.

The Family Hub model could help to enhance the support available to families with more complex needs, as by drawing a wider range of professionals more closely together it can help to embed the shared approaches which evidence presented to the APPG suggests is so important, and would also enable practitioners to share knowledge and information more effectively.

Hubs should also seek to learn lessons from other programmes which provide intensive support to those with complex needs, such as the Troubled Families initiative, although with a focus on avoiding crisis through early intervention.

**Recommendation 7:** Lessons from the successful Troubled Families programme should be learned, but with a focus on helping families before crisis point is reached.

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**Case Study 8**

**The “No Wrong Door” approach in Liverpool**

Liverpool CCG, in partnership with the local authority and provider based colleagues, is developing a city-wide network of neighbourhood-based community care teams for children and their families. These “Family Health and Wellbeing teams” bring together practitioners and clinicians from health, social care and education. This system will therefore integrate Liverpool’s early help services with its social care and health services for children and families. Families, particularly those with complex needs, will have access to co-ordinated early help in accordance with need as soon as it is identified.

A restructured network of Children’s Centres will play an important role in delivering this approach. Greater multi-agency collaboration at a neighbourhood level will maximise the opportunities for stronger service integration, and provide a more effective community model of care to support children and families. Within this system Children’s Centres will provide one point of entry for support, but it will be possible to access services through any number of routes (“No Wrong Door”).
Cross-cutting Issues
Throughout the course of the APPG’s inquiry, a number of cross-cutting issues emerged which were relevant across all four of the inquiry’s core strands – this section examines these, and their implications for the Family Hub model, in greater detail.

One of the most prominent considerations raised during the course of the inquiry concerned the implications that developing Children’s Centres into Family Hubs will have for staff, and how they will be supported to deal with the enhanced workload that comes with an extended service offer.

The APPG is clear that staff represent Children’s Centres’ greatest asset, and that this would undoubtedly remain the case under the Family Hub model. As well as ensuring that staff are able to access appropriate development opportunities, and engage in reflective practice wherever possible (offering them the chance to reflect on the issues and challenges they face in their day-to-day work with peers and experienced professionals, the value of which the APPG is keen to highlight), external partners can also play an important role in supporting staff capacity.

Within the Family Hub model, there is a definite role for levering in additional support from voluntary, community, self-help and peer support organisations in service provision, and their role should be significantly expanded. In particular, it should be recognised that those who have experienced challenges can often be very well placed to offer solutions, and Family Hubs should seek to engage those who have overcome difficulties in their own lives in their services.

Equally, young people engaged through Government programmes such as the National Citizen Service can potentially also add value to Family Hubs’ work, and there is a case for every National Citizen Service candidate to spend time in a Family Hub. This could involve a combination of both volunteering and more structured learning, and opportunities for initiatives such as one-to-one mentoring through Family Hubs could also be explored.

**Recommendation 8:** Engagement with voluntary, community, self-help and peer support organisations should be significantly expanded, with a recognition that people who have challenges can often offer solutions.

**Recommendation 9:** Every National Citizen Service candidate should spend time in a Family Hub, both learning and volunteering, to emphasise that everyone has something to contribute.

The physical capacity of Children’s Centre buildings was another important cross-cutting issue to emerge from the inquiry, and it is important to address the challenges that this poses for implementing an expanded Family Hub offer in circumstances where available space is already limited.

One potential approach to addressing the pressure on Centre buildings was highlighted in a number of written responses, and involves making use of wider venues within the community to deliver Children’s Centre services. As a submission by Action for Children states:

*By thinking outside the box and not just*
delivering services from a Children’s Centre building, local authorities can ensure that programmes and classes are still delivered to families in their area by situating them in various locations across the community.28

A significant theme to come through from the APPG’s evidence sessions is that Children’s Centres should be viewed as services rather than simply as physical buildings. A number of witnesses have emphasised that from the perspective of supporting children and families, the most effective way of addressing a need is to identify the service that is needed to meet it first, and decide which building is most appropriate to deliver from after that.

Within an extended Family Hub, there are undoubtedly certain types of support which are most appropriately delivered on-site, such as early years services and (as has been highlighted in this report) employment and skills support. In addition, where co-location is especially important to improving outcomes by facilitating better dialogue between different professionals, having services based in the same physical building is clearly vital.

However, the Family Hub model should not simply be seen as an effort to locate as many different services in a single building as possible, but rather as a means to better co-ordinate different types of support and deliver these in the most effective way for families. Where this can be achieved most appropriately by using alternative venues this should be considered, providing such decisions ultimately represent the best approach for addressing a particular need.

Outreach is perhaps one example of where this is particularly important. A number of written submissions have stressed the importance of effective outreach, to ensure that support is not restricted for those who cannot easily access a single site. This represents an important consideration in ensuring that Family Hubs can effectively serve their whole community, and a strong outreach service should therefore be recognised as an essential element of their provision.

Furthermore, opportunities for delivering advice and guidance through wider channels, such as online, could also be explored as a way of extending Family Hubs’ reach beyond the physical building. Ideally this would be co-branded with Family Hubs, so that this overall offer becomes increasingly recognised and understood.

**Recommendation 10:** Online support should also be available, co-branded with Family Hubs so that this becomes a highly visible national brand.

More broadly, collaborative working between different services is at the heart of the Family Hub approach, and is historically something that Children’s Centres have been very strong at enabling. However, evidence received by the APPG has highlighted a number of persistent issues on the ground that stand in the way of greater integration and collaboration which need to be overcome to fully realise potential of the Family Hub model.

In particular, it is clear that information sharing between Children’s Centres and other agencies such as health remains an ongoing issue for many of those who provided written evidence to the APPG. The challenges encountered in this area,
especially a time of high staff turnover, have been emphasised in a number of written responses, and the importance of having strong service-level agreements in place has been stressed as a key enabler of better information sharing. A number of other factors have also been highlighted as being vital to enhancing collaborative working, notably the need for properly integrated digital systems and the need for strong shared vision and leadership at senior levels. Evidence submitted to the inquiry indicates a need for continuing action at all levels to address these issues.

In addition, the need for Children’s Centres to build the evidence base about the impact of their interventions is an issue which has arisen during the course of the inquiry’s evidence sessions. This is a complex issue, and it has been stressed in some representations to the APPG that the benefits of early interventions only fully manifest over the long-term, creating challenges for policy-makers and practitioners trying to take decisions now. In order to make Family Hubs as impactful as possible, these are challenges that will need to be overcome.

**Recommendation 11:** There must be a concerted effort to share best practice across the country, to overcome barriers to information sharing and improve the evidence base around the impact of services.

Lastly, this APPG has had a long standing commitment to extending the provision of birth registration services in Children’s Centres. In a previous inquiry into best practice in Children’s Centres, the APPG received evidence from the Department for Education highlighting the positive impact these services can have for Centres’ reach and engagement. The APPG has also taken oral evidence on this subject in the course of this inquiry, and remains convinced of the case for delivering birth registration within Centres, believing that this is a practice which should be rolled out nationwide as part of an extended Family Hub offer.

**Recommendation 12:** Birth registration should be rolled out in Family Hubs nationwide, with a concerted effort to ensure that parents are provided with information at this stage about the wide range of support available throughout the different stages of family life.
Conclusions

Through the course of this report and the inquiry which underpinned it, the APPG has sought to set out a vision for extending Children’s Centres into Family Hubs, and explore how they can help deliver many of the key priorities of the Life Chances Strategy.

It has found that, in addition to Children’s Centres’ existing health and development work, many of their established strengths such as their family-friendly setting, strong local partnerships and reach amongst more disadvantaged families mean that they are very well placed to deliver a wider range of services. The evidence that the APPG has received has highlighted extended Family Hubs can potentially play an important role in the provision of employment support and childcare, relationship support and support for those with more complex needs. They are key to the delivery of programmes led by a number of Government Departments, and the APPG believes that there is a strong case for making Family Hubs central to policy-making around Life Chances.

In addition, the inquiry has also identified some of the challenges involved in implementing the Family Hub model and suggested the sorts of developments that will need to take place to make this a reality. In particular, supporting staff to ensure that they can deal effectively with the demands of an extended service offer, as well as managing the additional pressures that will be placed on the physical capacity of buildings, are two key issues that will need to be addressed for Family Hubs to be successful. In doing so, leveraging in the support of wider voluntary, community, self-help and peer support organisations will be crucial, and their role in provision will be expanded within the Family Hub model. Delivering services through alternative community venues should also be explored where this represents the best approach to addressing a particular need.

Furthermore, concerted action and clear leadership to deal with persistent obstacles to collaborative working between Family Hubs and other services will also be required at both a local and national level, and efforts made to address the complexities around measuring the impact of services.

With all this in mind, the APPG makes twelve recommendations, which aim to provide a base for developing Children’s Centres into Family Hubs. These are shown on the following page, and the APPG urges local and central government to implement them and fully realise Children’s Centres’ potential by transforming them into Family Hubs. If the Government’s Life Chances Strategy is to be successful, it is critical that this vision of Family Hubs is at its heart.
## Recommendations

1. The Government should give full consideration to augmenting Children’s Centres into Family Hubs as part of its Life Chances agenda.

2. Local authority leaders and public health commissioners should position Family Hubs at the heart of their Health and Wellbeing strategies. Accessing support should be normalised, supported by messaging from local leaders.

3. Emphasis should be placed on how mental health needs, and particularly children’s mental health, can be addressed in Family Hubs.

4. The links between Family Hubs, local employers and Jobcentre Plus should be reviewed and strengthened.

5. Relationship support delivered in Family Hubs should encompass parenting support, couple relationship counselling, pre-marriage courses, post-separation support and help with parenting teenagers, at a range of levels from structured to “light touch”.

6. To support Family Hubs’ work, local authorities should be required to record family breakdown statistics on a statutory basis.

7. Lessons from the successful Troubled Families programme should be learned, but with a focus on helping families before crisis point is reached.

8. Engagement with voluntary, community, self-help and peer support organisations should be significantly expanded, with a recognition that people who have challenges can often offer solutions.

9. Every National Citizen Service candidate should spend time in a Family Hub, both learning and volunteering, to emphasise that everyone has something to contribute.

10. Online support should also be available, co-branded with Family Hubs, and promoted as a national, universally-recognisable point at which a wide range of support can be accessed.

11. There must be a concerted effort to share best practice across the country, to overcome barriers to information sharing and improve the evidence base around the impact of services.

12. Birth registration should be rolled out in Family Hubs nationwide, so that everyone is aware of the support on offer as and when they or their family need it in future years.
Appendix A: Inquiry Sessions

Between October 2015 and January 2016, the All Party Parliamentary Group on Children’s Centres held a series of four evidence sessions as part of its inquiry. Witnesses who gave oral evidence at each of these sessions are listed below:

**Meeting 1: Health and Development (October 2015)**
- Hilary Earl (Health Visitor, County Durham and Darlington NHS Foundation Trust)
- Jane Young (Speech and Language Lead, Nottinghamshire Children and Families Partnership)
- Dr Yvonne Millar (Head of Child and Adolescent Mental Health Services, London Borough of Islington)
- Fiona Horrigan (Children’s Centre Lead, London Borough of Islington)
- Jonathan Rallings (Associate Director for Policy and Research, Barnardo’s)

**Meeting 2: Employment Support and Childcare (November 2015)**
- Fiona Colton (Head of Integrated Services, Derby City Council)
- Liz Annetts (Troubled Families Employment Advisor, Derby City Council)
- Vicki Lant (Head of Children’s Centre Development, Barnardo’s)
- Kay Tarry (Head of Operations – South, Barnardo’s)
- Dr Julian Grenier (Headteacher, Sheringham Nursery School)

**Meeting 3: Relationship Support (December 2015)**
- Honor Rhodes OBE (Director of Strategic Development, Tavistock Centre for Couple Relationships)
- Arlette Kavanagh (Development Lead, Changing Futures NE)
- Penny Thompson (Advice and Guidance Hub Manager, Hartlepool Borough Council)
- Ashley Warke (Family Support Worker, Packington Children’s Centre)
- Jenny Andrews (Development Manager – Children’s Services, Hertfordshire County Council)

**Meeting 4: Supporting Families with Complex Needs (January 2016)**
- Toby Kinder (Delivery Unit, London Borough of Barking and Dagenham)
- Jo Sollars (Head of Family Work – Early Help, Cambridgeshire County Council)
- Helen Freeman (Children’s Centre Strategy Manager, Cambridgeshire County Council)
- Dr Simon Bowers (Vice-Chair, Liverpool Clinical Commissioning Group)
- Jane Lunt (Nurse Lead, Liverpool Clinical Commissioning Group)
- Ray Guy MBE (Liverpool Clinical Commissioning Group)
- Geoff Baxter OBE (Managing Director, Restorative Practice)
Appendix B: Call for Evidence Responses

As part of a call for evidence that ran alongside the inquiry’s four evidence sessions, the Group received 49 written responses from the following organisations and individuals:

Action for Children
Banstead Children’s Centre
Barnardo’s
Bath and North East Somerset Council
Birmingham Adult Education Service
Blackpool Council
Bolton Council
Bristol City Council
Cambridgeshire County Council
CSH Surrey
Department for Business, Innovation and Skills
Dr Gwendoline Adshead
Dr Michael Craig Watson
Duke Street Children’s Centre
Durham County Council
Elizabeth Beck
Essex County Council
Family Action
Family Links
Froebel Trust
Gateshead Council
Hale Sure Start Children’s Centre
Hampshire County Council
Healthwatch Northamptonshire
Hertfordshire County Council
Howgill Family Centre
Indigo Children’s Services
Islington Council
Kathy Peto
Liverpool City Council
Mellow Parenting
Middlesbrough Council
National Institute for Adult Continuing Education
Northumberland County Council
OMEP UK
Paradise Park Children’s Centre
Pen Green Research Base
Potters Gate Children’s Centre
Reading Borough Council
Relationships Alliance
South Tyneside Council
Staffordshire County Council
Sue Deedigan
Suffolk County Council
Sunderland City Council
Surrey Early Years and Childcare Service
The Communications Trust
Warwickshire County Council
West Sussex County Council
Appendix C: Endnotes


2 Department for Education (2010) *The “core purpose” of Sure Start Children’s Centres*

3 Sam Gyimah MP, Parliamentary Under-Secretary of State for Childcare and Education, Response to Written Question 38640 by Daniel Zeichner MP (9 June 2016)

4 Department for Education (2015) *The impact of Children’s Centres – studying the effects of Children’s Centres in promoting better outcomes for young children and their families (ECCE, Strand 4)*, p. xxxv

5 Prime Minister’s Office, 10 Downing Street, “Prime Minister’s speech on life chances” (11 January 2016)

6 Lord Nash, Parliamentary Under-Secretary of State for Schools, Response to Written Question HL6408 by Baroness Armstrong of Hill Top (9 March 2016)


8 Oral evidence from Liz Annetts, Troubled Families Employment Advisor, Derby City Council


10 Written evidence from the Department for Business, Innovation and Skills

11 Oral evidence from Vicki Lant, Head of Children’s Centre Development, Barnardo’s and Kay Tarry, Head of Operations – South, Barnardo’s

12 Oral evidence from Fiona Colton, Head of Integrated Services, Derby City Council


17 Oral evidence from Arlette Kavanagh, Development Lead, Changing Futures NE

18 Oral evidence from Penny Thompson, Advice and Guidance Hub Manager, Hartlepool Borough Council

19 For further information see websites including: [www.careforthefamily.org.uk/courses-lets-stick-together](http://www.careforthefamily.org.uk/courses-lets-stick-together); [www.marriagecare.org.uk](http://www.marriagecare.org.uk); [www.mothersunion.org](http://www.mothersunion.org); [www.themarriagecourses.org](http://www.themarriagecourses.org)

20 Written evidence from Family Action


22 Oral evidence from Ashley Warke, Family Support Worker, Packington Children’s Centre


24 Oral evidence from Toby Kinder, Delivery Unit, London Borough of Barking and Dagenham

25 Oral evidence from Helen Freeman, Children’s Centre Strategy Manager, Cambridgeshire County Council

26 Oral evidence from Dr Simon Bowers, Vice Chair, Liverpool Clinical Commissioning Group

27 Oral evidence from Toby Kinder, Delivery Unit, London Borough of Barking and Dagenham

28 Written evidence from Action for Children


30 Oral evidence from Jonathan Rallings, Associate Director for Policy and Research, Barnardo’s