

Equality Impact Assessment

Purpose of assessment

The Public Sector Equality Duty which is set out in the Equality Act 2010 requires public authorities to have due regard to the need to:

- Eliminate unlawful discrimination, harassment and victimisation.
- Advance equality of opportunity between people who share a protected characteristic and those who do not.
- Foster good relations between people who share a protected characteristic and those who do not.

Protected characteristics are: age, disability, gender reassignment, pregnancy and maternity, race (this includes ethnic or national origins, colour or nationality), religion or belief (this includes lack of belief), gender and sexual orientation.

The purpose of carrying out an Equality Impact Assessment is to assess the impact of a change to services or policy on people with protected characteristics and to demonstrate that the Council has considered the aims of the Equality Duty. The Equality Duty must be complied with before and at the time that a change to services or particular policy is under consideration or decision is taken. A public body cannot satisfy the Equality Duty by justifying a decision after it has been taken

Note: Please write in Plain English as this document, once approved, will be published on the Council's website.

Title Children, Young People and Families Plan 2014-16		
Date January 2	014	
Lead Officer for this	Derek Higton, Service Director Youth Families and Culture,	
assessment	Children, Families and Cultural Services	
List of other	Maggie Pape, Executive Officer, Children, Families and	
officers/organisations	Cultural Services	
involved in the		
assessment	Children's Trust Board.	
	This is the children's commissioning sub-group of the Health and Wellbeing Board for Nottinghamshire. It is a partnership of organisations that commission or provide services to children, young people and families. It is chaired by the Corporate Director, Children, Families and Cultural Services, and membership includes senior managers from partner organisations. Terms of Reference and a membership list are at: http://www.nottinghamshire.gov.uk/caring/childrenstrust/about-the-childrens-trust/childrenstrustboard/	

1a What is being considered and why? Explain rationale behind proposed changes and other options considered, if applicable.

The Nottinghamshire Children, Young People and Families (CYPF) Plan 2014-16 is the joint strategic plan of Nottinghamshire Children's Trust, and will replace the equivalent plan for 2011-14.

Nottinghamshire Children's Trust is a partnership of organisations that commission or provide services to children, young people and families in Nottinghamshire. The County Council is the lead partner with statutory responsibility to make arrangements to promote co-operation to improve children's well-being (Children Act 2004). The Children's Trust Board is the children's commissioning sub-group of the Health and Wellbeing Board for Nottinghamshire.

Although Children's Trusts are no longer required to produce a joint strategic plan, Nottinghamshire Children's Trust has taken the view that a plan is needed to provide clarity about responsibilities, to oversee integrated commissioning and to manage performance improvement. This is increasingly important as commissioning for health and wellbeing is being delivered in a more integrated way across partner organisations.

The CYPF Plan sets out the direction of work of Nottinghamshire Children's Trust over the next two years from 2014-16, but will be reviewed and updated annually. It does not detail all the services of the agencies within the Children's Trust but focuses on the work areas where integrated commissioning or coordinated partnership action is likely to improve outcomes for children and young people.

The CYPF Plan is structured around five priorities for children and young people. These are to:

- Work together to keep children and young people safe
- Improve children and young people's health outcomes through the integrated commissioning of services
- Close the gap in educational attainment between disadvantaged children and young people and their peers, and so enable all to achieve their potential.
- Provide children and young people with the early help support that they need
- Deliver integrated services for children and young people with complex needs or disabilities.

Each priority has an associated action plan for the next two years. The CYPF Plan document will be supplemented by annual delivery plans which will identify in more detail specific actions to be undertaken. T

The Children's Trust Board identified its priorities and action plans through a series of meetings between June 2013 and January 2014, using the Joint Strategic Needs Assessment (JSNA) as its primary source of evidence of need. Further information is provided in detailed needs assessments for specific work areas. Needs assessments are based on a shared analysis of data held by partner agencies.

Needs assessments and performance data suggest that, within Nottinghamshire, the localities where there are higher numbers of families on low incomes are often those localities where children and young people are less healthy, do less well at school and are more likely to need the support of children's social care. Across the County, children and young people who are eligible for free school meals have lower educational attainment, on average, than their peers. Some other children and young people may face particular disadvantages and so need more support. This includes disabled children and children in local authority care.

The Children's Trust is fully committed to the promotion of equality and diversity through the CYPF Plan. This plan explicitly states that its priorities are aimed at reducing inequalities in health and wellbeing across the County. Actions associated with each priority will include targeting activities in particular localities, or targeting groups of children and young people who are known to be more likely to be disadvantaged.

The CYPF Plan will be aligned with the Health and Wellbeing Strategy for Nottinghamshire, and its priorities and actions will be included in Health and Wellbeing Strategy. The first draft of the CYPF priorities was included in the Health and Wellbeing Strategy public consultation that took place between June and September 2013. Public feedback, by correspondence and at consultation meetings, was taken into account when developing the final version of the CYPF Plan. The views of children, young people and families have been included in the JSNA, where possible, and they have contributed to the needs assessments and strategies for specific work areas.

The priorities within the CYPF Plan are supported by detailed strategies and needs assessments for specific areas of work (e.g. Nottinghamshire's Pathway to Provision, Early Help Development Plan, Closing the Gap Strategy, Integrated commissioning strategy: disabled children and SEN, Integrated Commissioning Strategy for Teenage Pregnancy). These strategies also have associated needs assessments and Equality Impact Assessments, where appropriate.

What is the demographic profile of the community you are serving?
What is the profile of your services users by protected characteristics, where information is available?

The community served is the entire population of children, young people and families in Nottinghamhire. As the CYPF Plan is an over-arching plan covering integrated working across a range of partner services, the profile of service users equates to the demographic profile of the County.

Age, gender and contextual information

- There are 180,700 children and young people aged 0-19 in the county, a reduction of 0.5% since the 2001 census. In comparison, the England and Wales 0-19 population increased by 3%, due to both migration and birth rate. The 0-19 population is set to increase by 3.5% on average across the county by 2021 (lower than the national forecast of 7.9%), with the largest growth in the 5-9 population (+17%).
- The current life expectancy of a child is 78.5 years (male) and 82.3 years (female), but this also varies considerably across districts according to deprivation a male in Ashfield will on average live 3.6 years less than a male in Rushcliffe, and a female 2.4 years less.
- 2% of the 0-15 population in Nottinghamshire have caring responsibilities for another person (Census 2001). A small survey of 19 of the county's young carers found that the average number of hours worked per day was 3.9 (weekdays), and 11.1 hours per weekend.
- In 2011, around one in seven 0-15 year olds in Nottinghamshire lived in households where nobody worked.
- 15.1% of Nottinghamshire school pupils are eligible for free school meals (as at January 2013). The highest numbers are in Ashfield and Mansfield.
- 27,950 children and young people aged 0-19 have been identified as living in poverty across Nottinghamshire in 2010, which equates to 17.1% of the 0-19 population. There are fewer children in poverty in Nottinghamshire than in England (20.6%) and the East Midlands (18.7%) but the spread of child poverty across the county is not equal, with greater levels in central and northern districts. However, all districts have wards with over 10% of children living in poverty. There are 42 wards in Nottinghamshire identified as 'target wards', where child poverty levels exceed the national figure of 20.6%. Ravensdale Ward in Mansfield has the highest level of child poverty in the county 47.2% of children aged 0-19 were in poverty in 2010.

Disability (physical, sensory or learning disabilities including effects on carers):

• There are estimated to be between 5,000 and 12,000 disabled young people (aged 0-19) in the county. There has been a 70% increase in 0-17 year old claimants of Disability Living Allowance in Nottinghamshire over the last decade. More than one in six Nottinghamshire pupils have some kind of special educational need (SEN) and 1.1% have a Statement of SEN. Districts with the highest percentages of children with SEN are Mansfield (20.4%), Ashfield (19.1%) and Gedling (18.0%).

Pregnancy and maternity

- The number of live births in Nottinghamshire increased by 18.4% between 2000 and 2011, slightly below the national rise of 19.8%. Over half of live births (53.7%) in Nottinghamshire in 2011 took place outside marriage or civil partnership, above the national average of 46.6% and the East Midlands average of 51.1%. In terms of the age of mothers having babies, there is variation across districts according to levels of affluence the proportion of mothers having children at a later age is noticeably higher in the three conurbation boroughs of Broxtowe, Gedling and Rushcliffe.
- The numbers of lone parents increased by 19% between 2001 and 2011, with the highest increase in Ashfield (31%).

Race

 According to the 2011 Census, Nottinghamshire has a population of around 13,000 black and minority ethnic (BME) 0-19 year olds, which equates to 7.2% of the total 0-19 population. The highest numbers of BME children and young people live in the conurbation areas of Broxtowe, Gedling and Rushcliffe. 4.9% of Nottinghamshire school pupils speak English as an additional language, up from

Religion or belief:

• According to the 2011 Census, the majority of children and young people in the county are registered as Christian (89,788). This represents a drop from 122,414 in 2001. The second largest group are those of no religion (72,084), which has increased from 38,816 in 2001. The religion with the next highest number of children and young people is the Muslim faith, which has 2,553 followers aged 0-19 compared to 1,349 in 2001. Numbers of children and young people registered as Muslim, Sikh and Hindu are highest in the conurbation areas of Gedling, Broxtowe and Rushcliffe.

Sexual orientation and gender identity

There is limited demographic information in relation to either sexual orientation, or gender identity, as this is not routinely collected for children and young people. Recent national estimates of the proportion of the population identifying as lesbian, gay, bisexual or transgender (LGBT) have varied from 1.5% (National Household Survey) to 6% of the population (Treasury estimate). If this percentage is applied to the estimated population of 180,700 children and young people in Nottinghamshire, it suggests that between 2,710 and 10,840 of these might identify as LGBT as they grow into adulthood.

1c What will be the effect on service users?

It is anticipated that the CYPF Plan will have a number of positive effects for children, young people and families. The purpose of the plan is to identify need and for partner services to work together to address this, by working within available resources and commissioning or re-commissioning services as required The priorities for action within the plan are in work areas where there are identifiable improvements that can be made and where coordinated action by partner services can deliver these improvements. The needs assessment which informed the choice of priorities included an analysis of the needs of those with protected characteristics.

All of the priorities for action identify how the Children's Trust will work with children who face disadvantages, to improve their health and wellbeing. There is a specific priority for action in relation to disabled children, and a priority which focuses on closing the gap between the educational achievements of disadvantaged children and young people and their peers. Other priorities include actions to address inequalities.

It is not anticipated that the CYPF Plan will have any negative impact on people with protected characteristics. The plan identifies additional co-ordinated action to address disadvantage. If all of the plan's priorities are achieved in full, there will be a significant positive impact. If, due to any unforeseen problems encountered, any of the plan's priorities are not achieved, or not achieved in full, this will result in a reduced positive impact and should not have any negative impact.

The CYPF Plan has been developed in the context of reduced budgets across all public sector organisations. The integrated action identified within the plan may mitigate any potential impact of reduced budgets within partner organisations on those with protected characteristics. It identifies how partners will work together in an integrated way to make best use of our available resources and continue to provide quality services.

1d Even if the proposals apply to everyone equally, could they have a disproportionate/adverse or negative impact on people with the following protected characteristics, if so how?

Age:

No adverse or negative impact on different age groups is anticipated. Services and interventions may be delivered to specific age groups, and all children and young people's services are delivered to children and young people under the age of 18 (or 25 in some circumstances) but this plan does not identify any reduction in services.

Disability (physical, sensory or learning disabilities including effects on carers):

No adverse or negative impact is anticipated for people with a disability or people who are associated with someone who has a disability.

Gender (Sex):

No adverse or negative impact is anticipated

Gender Reassignment:

No adverse or negative impact is anticipated. There is no direct evidence related to gender reassignment or gender identity, in terms of numbers within the County. The Children's Trust supports Nottinghamshire multiagency Pathway to Provision, which identifies support services and a shared approach to assessment of needs of children and young people. This includes assessment around a child or young person's sense of identity and about whether they are subject to any bullying, including because of any perceived 'difference' from others.

Pregnancy and Maternity:

No adverse or negative impact is anticipated

Race:

No adverse or negative impact is anticipated

Religion or belief:

No adverse or negative impact is anticipated. The needs analysis within the JSNA identified some demographic evidence related to religion and belief, including identification of family religion/belief through Census data. This has not been identified as a factor linked to the health and wellbeing of children and young people in Nottinghamshire.

Sexual orientation:

No adverse or negative impact is anticipated.

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Will your proposal have any positive impacts on people with the above protected characteristics to advance equality of opportunity or foster good relations?

Age:

Services for children and families are by definition aimed at particular age groups and some services have age-related eligibility criteria. Some targeted action in the CYPF Plan may focus on particular age groups where higher need levels have been identified, for example early intervention and prevention services may work with expectant mothers and young children and their families, as research has shown this can be particularly effective.

Disability:

The CYPF Plan has a specific priority to deliver more integrated services for children and young people with complex needs or disabilities. This will be done through integrated commissioning for health services and through the development of a shared assessment and planning approach for children with complex needs, across health, social care and education services.

Gender

Our needs analysis considered outcomes for children and young people in relation to gender. Where it is appropriate, targeted or early intervention work will include work to reduce gender-related disadvantage. For example, some of our early intervention work is aimed at young mothers. The details of any targeted work will be identified in the more detailed strategies and plans for specific areas of work.

Race:

Our needs analysis included demographic analyses by ethnic group, and the strategic plans underlying our priorities consider the impact of race on outcomes for children and young people, and may target resources in response. For example, work towards improving educational attainment will work with schools to address differing performance across ethnic groups, including children from Black and Minority Ethnic backgrounds.

may have on a protected group, what steps (if any) could be taken to reduce that impact for each group identified. Attach a separate action plan if necessary. Not applicable

2b If ways of reducing the impact have been identified but are not possible, please explain why they are not possible.

3 **Evidence Sources**

- (i) Give details of any data or research that has led to your reasoning above, in particular, the sources used for establishing the demographics of service
- (ii) Give details of how you have engaged with service users on the proposals and steps to avoid any disproportionate impact on a protected group and how you have used any feedback to influence your decision.
- The main source of evidence is a complete refresh of the children and young people's chapter of (i) the Joint Strategic Needs Assessment (JSNA) for Nottinghamshire. The aim of this needs assessment is to identify current and projected need and new or emerging issues. It is a comprehensive and wide-ranging document (with chapters including a demographic analysis, and in-depth analyses of need) http://www.nottinghamshire.gov.uk/thecouncil/plans/strategydevelopment/joint-strategic-needs-
- (ii) Engagement with service users

assessment/

The views of children, young people and families have been included in the JSNA where possible, and they have contributed to the needs assessments and strategies for specific work areas. As the CYPF Plan priorities/actions will also be part of the Health and Wellbeing Strategy for Nottinghamshire, they were included in the public consultation on this strategy that ran from June-September 2014. As no adverse or negative impact has been identified for any group, there has been no consultation specifically related to this.

(Complete this section where staff are directly affected:)

- What is the profile of your current staff by age group, disability, gender, race and ethnicity, religion or belief, sexual orientation? Give details of how the proposed service changes (if applicable) will affect 4b staff? Will staff of any particular protected equality characteristic be affected more than any other? In terms of any disproportionate/negative/adverse impact that the proposal 4c may have on a protected staff group, what steps (if any) could be taken to reduce that impact for each group identified. 4d If ways of reducing the impact have been identified but are not possible, please explain why they are not possible.
- 5 Decision Log – (detail how Elected Members and Senior Managers have been

involved in the decision process (give dates of key meetings and decisions made)

Meeting or Activity	Date	Key individuals involved	Decision Made
Children's Trust Board meeting	15 April 2013	Members of Children's Trust Board	Confirmed process and timeline for the production of the CYPF Plan Reviewed key messages from the Joint Strategic Needs Assessment (JSNA) and evidence about health inequalities
Discussions and correspondence between members of the Children's Trust Board, and its integrated commissioning sub-groups to identify a set of draft priorities and actions for the CYPF Plan and to form part of the HWB Strategy consultation	June 2013	Members of Children's Trust Board, including Chairs of Integrated Commissioning Sub- groups	Identification of draft priorities and actions to form part of HWB Strategy consultation
Health and Wellbeing Board / Integrated Commissioning Groups Workshop	10 June 2013	Members of Health and Wellbeing Board and Chairs of Integrated Commissioning Groups	Discussion and confirmation of draft priorities and actions for the Health and Wellbeing Board Strategy (including CYPF Plan priorities and key actions)
Nottinghamshire Health and Wellbeing Board Stakeholder Network event	27 June 2013	Attendance from a wide range of organisations, including those representing service users, members of the Children's Trust Board and Health and Wellbeing Board, including elected Members and senior managers of Nottinghamshire County Council	The session explored the links between children's services including education and health. In doing so, considered how a multiagency, integrated approach to supporting communities can influence both education and health outcomes, and build social capital. The public consultation on
Public consultation on Health and Wellbeing Strategy, including draft priorities and actions for CYPF Plan	27 June – 26 September	Feedback provided on all priorities in the Health and Wellbeing Strategy - used to inform next iteration of the CYPF priorities and actions	the new HWB Strategy was launched. Public response to feedback questionnaire (on line or by post)
			A series of public consultation events across the County, chaired by members of the Health and Wellbeing Board

Children's Trust Planning workshop	18 July 2013	 attended by: Nottinghamshire Children's Trust Board Representatives of Nottinghamshire Safeguarding Children Board Nottinghamshire County Council Children, Families and Cultural Services Senior Leadership Team Councillor Foale Councillor Plant (councillor Peck was unable to attend) 	Review of draft priorities and actions for the CYPF Plan, using evidence from the Joint Strategic Needs Assessment (JSNA)
Children's Trust Board meetings	5 September 2013 3 October 2013 8 November 2013 5 December 2013	Children's Trust Board members	Considered and revised successive versions of the priorities, key actions and outcomes of the CYPF Plan. Identified that the plan should include action to address inequalities in Nottinghamshire
Children's Trust Board meeting and subsequent correspondence	10 Jan 2014	Children's Trust Board members	Approved final draft of CYPF Plan
Meeting with Councillors	20 Jan 2014	Councillor Peck Councillor Foale Councillor Plant	Discussion and approval of final draft of CYPF Plan
Nottinghamshire County Council Children Families and Cultural Services Senior Leadership Team	22 Jan 2014	Final sign-off of CYPF Plan	Final draft of plan, including Equality Impact Assessment approved
CYPF Plan to be approved b February and March prior to		Young People's Committee and F	Policy Committee during

6a	refreshing the priorities and action plans. The Equality Impact Assessment will not be changed during this review, unless any significant change to the needs of service users is identified.
6b	If review is not required, explain why.
	The CYPF Plan is current for two years and will be completely reviewed and updated in 2016. As there is no negative impact on service users, it is not considered necessary to review the Equality Impact Assessment before that date.

7a	Approved by: Derek Higton	
7 b	Approval date: January 2014	
Rese	Please return the approved EqIA to the Equality Officers, Policy Performance and Research Team, County Hall, Nottingham NG2 7QP. The EqIA will be published on the Equality pages of the internet.	