

EQUALITY IMPACT ASSESSMENT

The **Equality Act 2010** places a '**General Duty**' on all public bodies to have '**due regard**' to the need to:

- Eliminating discrimination, harassment and victimisation and any other conduct prohibited under the Act;
- Advancing equality of opportunity between those with a 'relevant protected characteristic' and those without one;
- Fostering good relations between those with a 'relevant protected characteristic' and those without one.

In addition, the Council complies with the Marriage (same sex couples) Act 2013.

Stage 1 – Screening

Please complete the equalities screening form. If screening identifies that your proposal is likely to impact on protected characteristics, please proceed to stage 2 and complete a full Equality Impact Assessment (EqIA).

Stage 2 – Full Equality Impact Assessment

An EqIA provides evidence for meeting the Council's commitment to equality and the responsibilities under the Public Sector Equality Duty.

When an EqIA has been undertaken, it should be submitted as an attachment/appendix to the final decision making report. This is so the decision maker (e.g. Cabinet, Committee, senior leader) can use the EqIA to help inform their final decision. The EqIA once submitted will become a public document, published alongside the minutes and record of the decision.

Please read the Council's Equality Impact Assessment Guidance before beginning the EqIA process.

1. Responsibility for the Equality Impact Assessment

| | |
|---|-------------------------------|
| Name of proposal | Positive Families Partnership |
| Service area | Early Help |
| Officer completing assessment | Meeta Mahtani |
| Equalities/ HR Advisor | Hugh Smith |
| Cabinet meeting date (if applicable) | N/A |
| Director/Assistant Director | Ann Graham |

2. Summary of the proposal

Please outline in no more than 3 paragraphs

- *The proposal which is being assessed*
- *The key stakeholders who may be affected by the policy or proposal*
- *The decision-making route being taken*

Summary of the proposal:

The Positive Families Partnership (PFP) consortium is led by the social investor Bridges Fund Management and Social Finance, and deliverers are the charity Family Action, Family Psychology Mutual; and South West London and St George's Mental Health Trust

PfP offers 3-5 month interventions using either Multi-Systemic or Family Functional Therapy interventions with the following target cohort, with an aim to keep children out of care:

- Aged 11-16 years (10 and 17 years considered by exception)
- Deemed to be at risk of entry into care.
- Displaying Challenging, anti-social or offending behaviours, have drug and alcohol or school related problems or are going missing
- Must live at home or with a main caregiver or be in a short term care placement with a clear reunification plan (3 weeks or less) to return home.
- Young people at risk of care with primary needs: Family in acute stress; Family dysfunction; or Socially unacceptable behaviour

There is an opportunity for Haringey Council to enter the partnership with the referral period continuing up to the end of 2020 and a further 2-year run-off tracking period.

The programme of support is designed to improve outcomes for children and young people by enabling them to remain at home with their family.

<https://www.positivefamiliespartnership.com/>

The proposal is funded by a social impact model, where PfP is paid a weekly fee for every week a young person is proven to have been kept out of care.

3. What data will you use to inform your assessment of the impact of the proposal on protected groups of service users and/or staff?

Identify the main sources of evidence, both quantitative and qualitative, that supports your analysis. Please include any gaps and how you will address these

This could include, for example, data on the Council's workforce, equalities profile of service users, recent surveys, research, results of relevant consultations, Haringey Borough Profile, Haringey Joint Strategic Needs Assessment and any other sources of relevant information, local, regional or national. For restructures, please complete the restructure EqIA which is

available on the HR pages.

| Protected group | Service users | Staff |
|-----------------------------------|---|-------------------------|
| Sex | <i>Source: MOSAIC case record data, used to inform scoping exercise.</i> | N/A – External referral |
| Gender Reassignment | <i>Source: MOSAIC case record data, used to inform scoping exercise for Children, Young People and their parents, where recorded and available.</i> | N/A – External referral |
| Age | <i>Source: MOSAIC case record data on Children, Young People and their parents, used to inform scoping exercise.</i> | N/A – External referral |
| Disability | <i>Source: MOSAIC case record data, used to inform scoping exercise for Children, Young People and their parents.</i> | N/A – External referral |
| Race & Ethnicity | <i>Source: MOSAIC case record data, used to inform scoping exercise for Children, Young People and their parents.</i> | N/A – External referral |
| Sexual Orientation | <i>Source: MOSAIC case record data, used to inform scoping exercise for Children, Young People and their parents, where recorded and available.</i> | N/A – External referral |
| Religion or Belief (or No Belief) | <i>Source: MOSAIC case record data, used to inform scoping exercise for Children, Young People and their parents, where recorded and available.</i> | N/A – External referral |
| Pregnancy & Maternity | <i>No information found.</i> | N/A – External referral |
| Marriage and Civil Partnership | <i>N/A. No information found.</i> | N/A – External referral |

Outline the key findings of your data analysis. Which groups are disproportionately affected by the proposal? How does this compare with the impact on wider service users and/or the borough’s demographic profile? Have any inequalities been identified?

Explain how you will overcome this within the proposal.

Further information on how to do data analysis can be found in the guidance.

In order to consider the potential client referral cohort, it is useful to consider the protected characteristics of Haringey Looked After Children as this indicates the likely protected characteristics of children who are at risk of going into care, who may be referred to Positive Families Partnership. For completeness, Children with a Protection Plan data is also considered.

In Haringey Looked After Children (LAC) have the following characteristics where data has been identified as of December 2019:

Sex:

Of the 401 Looked After Children in Haringey as of 09/12/2019, 62% were identified as male and 38% female.

Similarly, of 175 Children with a Protection Plan, 56% were identified as male, 42% female and 2% unborn as of 03/12/2019.

Women and girls constitute 50.5% of Haringey's population. Male children are therefore overrepresented among LAC and children with a protection plan relative to the population of the borough as a whole.

Age:

71% of Looked After Children are older children aged 11-18 as of 09/12/19

Looked After Children (09/12/2019)

| Age | Number |
|-------|--------|
| 0-4 | 60 |
| 5-10 | 58 |
| 11-16 | 206 |
| 17-18 | 77 |

Similarly, in the case of Children with a Protection Plan (at risk of going into care with a protection plan), the numbers as spread across all age ranges. However, it is also clear that older children are more likely to escalate and become Looked After Children, hence are the key focus for PfP referrals.

Children with a Protection Plan (03/12/2019)

| Age | Number |
|-------|--------|
| 0-4 | 68 |
| 5-10 | 42 |
| 11-16 | 63 |
| 17-18 | 2 |

Ethnic Background:

Haringey is a highly diverse borough, within which 186 languages are spoken. People of White and White Other ethnic background are the largest group overall (66.9%), Black (14.4%), Mixed/Other (11.9%) and Asian (6.8%). However, there is significant variation by ward, with the East of the Brough having higher levels of ethnic diversity and in addition material deprivation (Borough Plan EQIA 2019).

The racial profile of Looked After Children is highly diverse, with 73% from a BAME background.

Ethnic Background of Looked After Children (09/12/2019)

| Ethnicity | Count |
|---|-------|
| Black / African / Caribbean / Black British | 196 |
| White | 107 |
| Mixed / multiple | 66 |
| Other Ethnic Group | 19 |
| Asian / Asian British | 13 |

Grand Total

401

PfP will be working with Children on the Edge of Care, therefore it is useful to examine the ethnic background of the 175 Children with a Protection Plan. Again, a similar proportion (67%) are from a Black or Minority Ethnic Background. This increases to 70% for children aged over 11 (most likely to become Looked After Children).

| Ethnic Background | Number |
|---|---------------|
| Black / African / Caribbean / Black British | 65 |
| White Other | 37 |
| Mixed | 21 |
| White British | 20 |
| Asian / Asian British | 18 |
| Other | 13 |
| No Data | 1 |

It is therefore apparent that BAME children are overrepresented among LAC and children with a protection plan.

Disability:

8% (32 of 401) Looked After Children had a declared disability. Of Children with a Protection Plan (on the edge of care), 9 of 175 (5%) had a declared disability in November 2019.

Census 2011 data indicates that 4% of the under-24 population in Haringey have their day-to-day activities limited a little or a lot due to a disability or long-term health condition. Children with disabilities are therefore overrepresented among LAC and children with a protection plan.

Gender Reassignment

A surveillance study examining the incidence and clinical presentation of Gender Dysphoria in children and adolescents aged 4 to 15 years suggests an incidence of 1.6 per 100,000 in the UK. A significant limitation of this surveillance study is that it only captured data for those presenting between their 4th and 16th birthdays - meaning that it is not possible to comment on the incidence of gender dysphoria among 16 and 17 year olds, which referral trends to the service suggest have significantly increased the overall incidence rate. This figure only reflects those who presented to NHS paediatric or psychological services and not those who have chosen not to, or who have been unable to access this care. The figure does not reflect the total number who may have accessed their GP regarding their gender dysphoria, or include those who have elected to seek private support.

Religion or Belief

Census 2011 data indicates that 42% of 8-19 year-olds in Haringey are Christian, 23% are Muslim, 4% are Jewish, 1% are Buddhist, 1% are Hindu, fewer than 1% are Sikh, and 19% have no religion. Data is not available for LAC or children with a protection plan but we will ensure that any inequalities and discrimination experienced on the basis of this protected characteristic are considered.

Sexual Orientation

We do not hold ward-level or borough-level data on sexual orientation, and it is not collected

nationally through the census. However, the ONS estimates that 3.7% of Haringey's population are lesbian, gay or bisexual (LGB), which is the 15th largest LGB community in the country. We will need to ensure that the inequalities and discrimination experienced by LGB people are considered throughout this EqIA.

Pregnancy and Maternity

ONS data on under 18 conception rates in the year to September show an under-18 conception rate in Haringey 2016 of 20.3 per 1000 compared to the rate for London (17.9 per 1000) and for England and Wales (19.3 per 1000).

Marriage and Civil Partnerships

We do not hold data on this protected group's representation among parents of children at risk. We do not envisage discrimination, harassment or victimisation based upon this protected group.

4. a) How will consultation and/or engagement inform your assessment of the impact of the proposal on protected groups of residents, service users and/or staff?

Please outline which groups you may target and how you will have targeted them

Further information on consultation is contained within accompanying EqIA guidance

No external stakeholder consultation was undertaken before the service was agreed, although positive feedback from other London authorities using PfP was received (e.g. London Borough of Sutton).

Where a referral is proposed consultation with the young person and written consent is of course required. of the young person will be sought for information sharing purposes prior to going to Resources Panel to agree to seek a referral to PfP and to share personal information (as per DPIA). Should PfP then accept the referral a further informed consent form will be signed.

4. b) Outline the key findings of your consultation / engagement activities once completed, particularly in terms of how this relates to groups that share the protected characteristics

Explain how will the consultation's findings will shape and inform your proposal and the decision-making process, and any modifications made?

1:2:1 consultation will influence whether or not an individual referral is processed.

5. What is the likely impact of the proposal on groups of service users and/or staff that share the protected characteristics?

Please explain the likely differential impact on each of the 9 equality strands, whether

positive or negative. Where it is anticipated there will be no impact from the proposal, please outline the evidence that supports this conclusion.

Further information on assessing impact on different groups is contained within accompanying EqIA guidance

1. Sex (Please outline a summary of the impact the proposal will have on this protected characteristic and cross the box below on your assessment of the overall impact of this proposal on this protected characteristic)

The project will focus on supporting adolescents on the edge of care aged 11-16. This is in line with the Edge of Care cohorts, who are predominately older children.

The proposals are likely to disproportionately include young males age 11-16, as this group are disproportionately more likely on the edge of care and otherwise become Children Looked After.

| | | | | | | | |
|----------|---|----------|--|----------------|--|----------------|--|
| Positive | X | Negative | | Neutral impact | | Unknown Impact | |
|----------|---|----------|--|----------------|--|----------------|--|

2. Gender reassignment (Please outline a summary of the impact the proposal will have on this protected characteristic and cross the box below on your assessment of the overall impact of this proposal on this protected characteristic)

We do not have local data regarding this children and young people with gender dysphoria. We do not think there will be specific impacts for this protected group. If any inequity is identified, we will take steps to rectify this.

| | | | | | | | |
|----------|--|----------|--|----------------|--|----------------|---|
| Positive | | Negative | | Neutral impact | | Unknown Impact | X |
|----------|--|----------|--|----------------|--|----------------|---|

3. Age (Please outline a summary of the impact the proposal will have on this protected characteristic and cross the box below on your assessment of the overall impact of this proposal on this protected characteristic)

The proposals are likely to disproportionately include children aged 11-16, as this group are disproportionately more likely on the edge of care and otherwise become Children Looked After. The proposals can be expected to have a positive impact on this age group by enabling them to remain with their family.

| | | | | | | | |
|----------|---|----------|--|----------------|--|----------------|--|
| Positive | X | Negative | | Neutral impact | | Unknown Impact | |
|----------|---|----------|--|----------------|--|----------------|--|

4. Disability (Please outline a summary of the impact the proposal will have on this protected characteristic and cross the box below on your assessment of the overall impact of this proposal on this protected characteristic)

Our data analysis indicates that children with disabilities are more likely than average to be

LAC or have a protection plan. It is therefore reasonable to expect that this group will be disproportionately impacted by the proposal and benefit from being able to remain within family settings.

PfP will accept referrals from children with all kinds of disabilities, except very occasional and unlikely circumstances where the individual has an extreme mental health issue (such as psychosis or suicidal or homicidal behaviours), and/or severe Autism Spectrum Disorder affect social interaction. In such instances, admission will still be considered on a case-by-case basis, alongside other referrals and support to the person.

There is limited evidence available as to whether this would affect referrals to PfP but will be dealt with on a case-by-case basis. It is also important to note PfP is the delivery partner for an existing Pan-London project and that the London Borough of Haringey has recently this partnership which has pre-agreed evidence-based eligibility criteria which cannot be changed for Haringey alone.

Prior to being referred, all cases are screened for suitability through a Clinical Consultation with a trained therapist, following which any suitable referrals must be approved by the Assistant Director for Safeguarding at the Resources Panel. This secondary check ensures a robust review, to ensure that this is the right intervention for the family.

| | | | | | | | |
|----------|---|----------|--|----------------|--|----------------|--|
| Positive | X | Negative | | Neutral impact | | Unknown Impact | |
|----------|---|----------|--|----------------|--|----------------|--|

5. Race and ethnicity *(Please outline a summary of the impact the proposal will have on this protected characteristic and cross the box below on your assessment of the overall impact of this proposal on this protected characteristic)*

As Children on Edge of Care may come disproportionately from Black and Minority Ethnic Backgrounds, it is likely the referrals may be more likely to come from Black and Minority Ethnic Backgrounds.

However, in practice referrals will be small in number and on a presenting needs basis, Referrals will be made and PfP will work with young people regardless of race or ethnicity. We will ensure that this group will not be subjected to discrimination, harassment and victimisation due to their protected characteristic.

Prior to being referred, all cases are screened for suitability through a Clinical Consultation with a trained therapist, following which any suitable referrals must be approved by the Assistant Director for Safeguarding at the Resources Panel. This secondary check ensures a robust review, to ensure that this is the right intervention for the family.

With regard to Haringey’s linguistic diversity, this will be monitored during initial contacts and where need arises interpretation support will be sought.

| | | | | | | | |
|----------|---|----------|--|----------------|--|----------------|--|
| Positive | X | Negative | | Neutral impact | | Unknown Impact | |
|----------|---|----------|--|----------------|--|----------------|--|

6. Sexual orientation *(Please outline a summary of the impact the proposal will have on*

this protected characteristic and cross the box below on your assessment of the overall impact of this proposal on this protected characteristic)

We do not think there will be specific impacts for this group. We will ensure that this group will not be subjected to discrimination, harassment and victimisation due to their protected characteristic as described above.

| | | | | | | | |
|----------|--|----------|--|----------------|---|----------------|--|
| Positive | | Negative | | Neutral impact | X | Unknown Impact | |
|----------|--|----------|--|----------------|---|----------------|--|

7. Religion or belief (or no belief) *(Please outline a summary of the impact the proposal will have on this protected characteristic and cross the box below on your assessment of the overall impact of this proposal on this protected characteristic)*

We do not think there will be specific impacts for this group We will ensure that this group will not be subjected to discrimination, harassment and victimisation due to their protected characteristic as described above.

| | | | | | | | |
|----------|--|----------|--|----------------|---|----------------|--|
| Positive | | Negative | | Neutral impact | X | Unknown Impact | |
|----------|--|----------|--|----------------|---|----------------|--|

8. Pregnancy and maternity *(Please outline a summary of the impact the proposal will have on this protected characteristic and cross the box below on your assessment of the overall impact of this proposal on this protected characteristic)*

We do not think there will be specific impacts for this group. We will ensure that this group will not be subjected to discrimination, harassment and victimisation due to their protected characteristic.

| | | | | | | | |
|----------|--|----------|--|----------------|---|----------------|--|
| Positive | | Negative | | Neutral impact | X | Unknown Impact | |
|----------|--|----------|--|----------------|---|----------------|--|

9. Marriage and Civil Partnership *(Consideration is only needed to ensure there is no discrimination between people in a marriage and people in a civil partnership)*

People who are in a civil partnership will be treated the same as people who are married

| | | | | | | | |
|----------|--|----------|--|----------------|---|----------------|--|
| Positive | | Negative | | Neutral impact | X | Unknown Impact | |
|----------|--|----------|--|----------------|---|----------------|--|

10. Groups that cross two or more equality strands e.g. young black women

The proposals are likely to disproportionately positively affect young males age 11-16 from Black and/or Minority Backgrounds, as they are more likely to become Looked After Children.

Outline the overall impact of the policy for the Public Sector Equality Duty:

- **Could the proposal result in any direct/indirect discrimination for any group**

that shares the relevant protected characteristics?

- Will the proposal help to advance equality of opportunity between groups who share a relevant protected characteristic and those who do not?

This includes:

- a) Remove or minimise disadvantage suffered by persons protected under the Equality Act
 - b) Take steps to meet the needs of persons protected under the Equality Act that are different from the needs of other groups
 - c) Encourage persons protected under the Equality Act to participate in public life or in any other activity in which participation by such persons is disproportionately low
- Will the proposal help to foster good relations between groups who share a relevant protected characteristic and those who do not?

The proposal will not result in any direct/indirect discrimination for any group that shares the relevant protected characteristics.

It will provide positive support to certain groups at higher risk of becoming Looked After Children, aged 11-16 who are more likely (but not exclusively) to be male and from a black or minority ethnic background, and thereby advance equality of opportunity for these groups.

6. a) What changes if any do you plan to make to your proposal as a result of the Equality Impact Assessment?

Further information on responding to identified impacts is contained within accompanying EqIA guidance

| Outcome | Y/N |
|--|-----|
| No major change to the proposal: the EqIA demonstrates the proposal is robust and there is no potential for discrimination or adverse impact. All opportunities to promote equality have been taken. <u>If you have found any inequalities or negative impacts that you are unable to mitigate, please provide a compelling reason below why you are unable to mitigate them.</u> | Y |
| Adjust the proposal: the EqIA identifies potential problems or missed opportunities. Adjust the proposal to remove barriers or better promote equality. Clearly <u>set out below</u> the key adjustments you plan to make to the policy. If there are any adverse impacts you cannot mitigate, please provide a compelling reason below | |
| Stop and remove the proposal: the proposal shows actual or potential avoidable adverse impacts on different protected characteristics. The decision maker must not make this decision. | |

6 b) Summarise the specific actions you plan to take to remove or mitigate any actual or potential negative impact and to further the aims of the Equality Duty

| Impact and which relevant protected characteristics are impacted? | Action | Lead officer | Timescale |
|--|--|---------------------|---------------------------------|
| Should a person with severe mental health of LD not be referred to or accepted by PfP. | Key Social Worker and Resources Panel will consider provision of alternative support services. | Key Social Worker | Immediately after not accepted. |

Please outline any areas you have identified where negative impacts will happen as a result of the proposal but it is not possible to mitigate them. Please provide a complete and honest justification on why it is not possible to mitigate them.

As detailed by the methodology and data provided, no negative impact is anticipated. However, it will be monitored to quarterly to continue to analyse the characteristics of both staff and service users.

6 c) Summarise the measures you intend to put in place to monitor the equalities impact of the proposal as it is implemented:

Quarterly performance report will continue to analyse the characteristics of both service users referred and accepted by PfP.

The Early Help service have also developed a tracker to follow which cases are accepted/rejected by PfP. As data arises equalities information will be examined as part of this.

7. Authorisation

| | |
|--|------------------|
| EqlA approved by: Bev Hendricks (Assistant Director) | Date: 16/12/2019 |
|--|------------------|

8. Publication
Please ensure the completed EqlA is published in accordance with the Council's policy.

Please contact the Policy & Strategy Team for any feedback on the EqlA process.