

Equality Impact and Needs Analysis (EINA) Template

Directorate:	Education , Children and Cultural Services
Service Area:	Specialist Children Services
Name of service/ function/ policy/ being assessed:	Disabled Children's Service
Officer leading on assessment:	Michelle Williams
Other staff involved:	Becky Powell and Sabiha Kumar

PREPARATION FOR THE EQUALITY IMPACT AND NEEDS ANALYSIS

1. Briefly describe the service/ function/ policy:

The DCS provides advice, information and support to the parents or carers of a child or young person who has a disability following a social work or care assessment of the needs of the child or young person and their families. Services offered include:

- Befriending and domiciliary care which is care for a child at home or out in the community;
- After school and holiday provision;
- Family link which is when a child stays overnight with a carer who assessed under the fostering regulations; and
- Residential overnight short breaks.

These services can be provided directly by the DCS or by external providers. The DCS can resource support within external providers if this needed. Alternatively cash can be given in lieu of the services a child has been assessed as needing. This is known as direct payments.

To access the services, the children or young people must meet the following criteria:

- Live in the London Borough of Richmond upon Thames;
- Are under 18 years old and;
- Have permanent and substantial or profound disabilities which impacts on accessing universal services. This includes children and young people with severe learning disabilities, severe physical disabilities, severe and profound autistic spectrum disorders,

disability arising out of serious or chronic illness and / or hearing impairment.

Background and context to disability in the borough

In 2001, over 21,000 people in Richmond upon Thames self defined themselves as disabled¹ 12.4% of the borough's population. This was the lowest proportion of disabled people of all the London boroughs, with an average of 15.5% for London overall. Richmond also had the fifth lowest percentage of disabled people across England. In 2001, the Census also indicated that the number of people who described their general health as 'not good' was just over 10,000 people and for both limiting long-term illness and self defined poor health, the highest rates were in the wards of Ham, Hampton North and Heathfield.

Children with a disability

The needs of children with physical and learning disabilities are often complex, which can be compounded by the fact that needs often change as the child gets older and makes the transition into adulthood. The 2001 Census indicated that there were 1,107 children living with a limiting long term illness in the borough. This is very different to the number of children on the disability register which at 31 March 2012 was 318.

Such comparisons obviously need to be treated with caution as the former is based on an assessment on the need for local authority support or voluntary services and the latter is reliant on self-assessment and there are problems of definition. It does suggest that there may be a degree of unmet need, although many of these children may be getting extra support through Special Educational Needs.

2. Why is the equality impact and needs analysis being undertaken?

This Equality Impact Needs Analysis is being undertaken to review and evidence that the DCS is meeting its statutory and locally agreed equality requirements.

3. Has this service/ function/ policy undertaken a screening for relevance?

If so, which protected characteristics and parts of the duty were identified as of high or medium relevance and why? Please attach screening for relevance as an appendix to this EINA.

If not, make an assessment of which protected characteristics and parts of the duty are of high or medium relevance and explain why:

The service has been assessed as follows in relation to the protected characteristics:

- Disability and age are of high relevance as the service is for disabled children and children and young people 18 or under. To be able to access the service, the level of disability must be severe and profound so children and young people with a mild/moderate disability do not meet the criteria for the service. The service will therefore signpost children and young people with a mild/ moderate disability to more appropriate services where necessary and we will consult with mainstream services if required;
- Gender is of medium relevance as the service is accessible to all. There is an acknowledgement however that some disabilities are more prevalent in certain genders i.e. autism is more prevalent in males. Autism is a growing group and in line

¹ Using the 2001 Census definition of a limiting long term illness for disability

with this trend we have more male service uses than female;

- Gender reassignment is of low relevance as children and young people in contact with the service are unlikely to have gender reassignment issues;
- Marriage and civil partnership is of low relevance as children and young people in contact with the service are under the age for legal age to get married;
- Pregnancy and maternity is of low relevance as there have been no recorded issues with pregnancy and maternity in relation to the children and young people who access the service;
- Race / ethnicity are of medium relevance as the data shows the accessibility is proportionate to the race/ethnic make up of the borough;
- Religion and belief including non – belief is of medium relevance as the service does not put emphasis on any religious or non religious practice and welcomes and values diversity. This is reflected by the diverse staff group; and
- Sexual orientation is of low relevance as the majority of children who access the service have a learning difficulty and schools lead on the sexual and relationship agenda. We liaise with schools to ensure young people are supported in a consistent way.

4. **What sources of information have been used in the preparation of this equality impact and needs analysis?** For example, this could include equalities monitoring information, performance data, consultation feedback or needs assessment. Please provide the details in the table below:

<i>Information source</i>	<i>Description and outline of the information source</i>
Children Services database	Cases opened to service
Disabled children register	Register of disabled children and young people in the borough who request to be registered.

ANALYSING IMPACT, NEEDS AND EFFECTS

It is important that the analysis addresses each part of the duty assessed as relevant to the area being examined (see further [Guidance on RIO](#)).

5. **Key questions to consider:**

- a. **What does the data tell you about the groups identified as relevant to the area being assessed?**
- b. **What does customer feedback, complaints or discussions with stakeholder groups tell you about the impact of the service/ function/ policy on the protected characteristic groups, where assessed as relevant to area being examined?**

Other questions to consider:

- How well are diverse needs met?
- Have any differences in access to services/functions been identified for any group?
- Has the area identified any disadvantages experienced by groups, which need to be addressed?

- Have there been any complaints about a failure to receive an appropriate and fair service?
- Is there any other evidence of differential impact or different outcomes which needs to be addressed?
- Is there any evidence that participation in areas of public life is disproportionately low for any particular relevant protected characteristic group?
- Have the needs of disabled people been identified and addressed where these are different from the needs of non-disabled people?
- Have you identified any need to tackle prejudice or promote understanding between different relevant protected characteristic groups?

Remember that equality analysis is not simply about identifying and removing negative effects of discrimination but it is also an opportunity to identify ways to advance equality of opportunity and to foster good relations.

<i>Protected Group</i>	<i>Findings</i>
Age	<p><u>Background data</u></p> <p>There are currently approximately 200 cases open to the DCS at any time. Of these:</p> <ul style="list-style-type: none"> • 24% are 0 – 7 year olds; • 47% are 8 – 13 year olds; and • 29% are 14 – 17 year olds. <p><u>Findings</u></p> <p>The service is targeted at children under 18 who have profound disability. The DCS has noted the need for additional support at key transition points and so have appointed an Early Years Worker and a Transition to Adult Services social worker.</p>
Disability	<p><u>Background data</u></p> <p>There are currently approximately 200 cases open to the DCS at any time. The main presenting needs for these cases are:</p> <ul style="list-style-type: none"> • 26%- autistic spectrum disorder; • 23%- learning difficulty; • 11%- mobility; • 5%- communication difficulties; • 5% hearing; • 4%- behavioural difficulties; and • 2%- seizures. <p><u>Findings</u></p> <p>As shown by the data above the DCS provides a service for children and young people with a range of disabilities or illnesses.</p>

	<p>The DCS recognises that there will be children or young people with a disability or illness who do not meet criteria for this service and in these circumstances will work with colleagues in a consultative manner to enable this wider group to access services as needed.</p>
Gender (Sex)	<p><u>Background data</u></p> <p>There are currently approximately 200 cases open to the disabled service at any time. 64% are male and 36% are female.</p> <p><u>Findings</u></p> <p>The DCS is accessible to all genders. However, analysis of the data available shows that there is a higher representation of males accessing the service. This is due to the prevalence of particular types of disability such as autism, which is more commonly associated with males than females.</p>
Gender reassignment	<p>Gender reassignment is considered to be of low relevance to the service. No issues have been recorded in relation to any child or young person currently accessing the service concerning gender reassignment.</p>
*Marriage and civil partnership (*only in relation to first part of the duty: eliminate discrimination and harassment)	<p>Marriage and civil partnership is considered to be of low relevance to the service. No issues have been recorded in relation to any child or young person currently accessing the service concerning marriage and civil partnership.</p>
Pregnancy and maternity	<p>Pregnancy and maternity is considered to be of low relevance to the service. No issues have been recorded in relation to any child or young person currently accessing the service concerning pregnancy and maternity.</p>
Race/ethnicity	<p><u>Background data</u></p> <p>There are currently approximately 200 cases open to the DCS at any time. Of these:</p> <ul style="list-style-type: none"> • 77% are White; • 9% are of African descent; • 9% are of Asian descent; and • 5% are of mixed parentage (Black and White or Asian and White). <p><u>Findings</u></p> <p>The DCS is accessible to all and there are a diverse group of families accessing the service, as shown by the data above.</p> <p>Where cultural differences exist, social workers in the DCS will work with families to ensure these differences are fully understood and will respond and make amendments as required.</p> <p>Furthermore, where language barriers exist, the DCS will use</p>

	interpretation services to ensure families are still enabled to access the service, and will translate assessments into the first language of the families.
Religion and belief including non-belief	The service is accessible to all and the service recognises the need to be aware of different belief systems. The service does not put any emphasis on a particular belief system. No issues have been recorded in relation to any child or young person currently accessing the service concerning religion and belief. Data is not collected relating to the religious beliefs of children and young people accessing the service.
Sexual orientation	Sexual orientation is considered to be of low relevance to the service. No issues have been recorded in relation to any child or young person currently accessing the service concerning sexual orientation. If it was to arise as an issue, staff would be able to support children and young people, and signpost to relevant services available if necessary.

6. Have you identified any data gaps in relation to the relevant protected characteristics and relevant parts of the duty? If so, how will these data gaps be addressed?

<i>Gaps in data</i>	<i>Action to deal with this</i>
The data collected is appropriate- the area for development is the analysis of data. For example, data on types of disability is missing children with a visual impairment as their main presenting need.	As part of management meetings data on those accessing the service will be reviewed. Data relating to children and young people with visual impairments as their main presenting need will be captured.

SUMMARY OF THE KEY FINDINGS

7. Set out the key findings from the equality impact needs analysis of the service/ function/ policy. Key questions to consider when completing this section:

- *Are there findings of unlawful discrimination?*
- *Can you address any identified adverse impact?*
- *Can you mitigate any negative impact?*
- *Please provide rationale if you are unable to address any adverse impact.*
- *Have you identified any ways of advancing equality in this area? For example, meeting diverse needs?*
- *Is there a need for any actions to promote understanding between different protected groups?*

Overall the impact of DCS is positive as it targets a specific group (disabled children / young people) who do not receive equal access to services. There will be continued work around monitoring and reviewing service take up and we will actively encourage and enable inclusion and accessible service provision. The service strives to ensure transparent and fair allocation of resources.

CONSULTATION ON THE KEY FINDINGS

8. What consultation have you undertaken with stakeholders or critical friends about the key findings? What feedback did you receive as part of the consultation?

The initial screening for relevance was discussed and completed in draft by members of the ECCS Equalities Working Group for all services within ECCS.

The draft template was then sent to the Equalities Lead in ECCS for review and amendments were made based on the advice given.

ACTION PLANNING

9. What issues have you identified that require actions? What are these actions, who will be responsible for them and when will they be completed?

Issue identified	Planned action	Lead officer	Completion Date
Lack of data relating to children and young people with visual impairments as their main presenting need	Data will be collected relating to visual impairments and included in the analysis of types of disability	Michelle Williams	September 2013
Further analysis of equality data is needed- this will take the form of managers reviewing the available data to inform service delivery such as type of short breaks on offer and the knowledge base of the social workers in the team.	Build in time for analysis of data- which can then inform team plans service objectives / targets and or goals.	Michelle Williams	September 2013

MONITORING AND REVIEW

10. How will the actions in the action plan be monitored and reviewed? For example, any equality actions identified should be added to business, service or team plans and performance managed.

The EINA will be monitored as part of the work plan for the DCS manager and will be reviewed every three months from the date of sign off.

PUBLISHING THE COMPLETED ANALYSIS

11. When completed, the equality impact and needs analysis should be approved by a member of DMT and published on the Council's website. Please provide details below:

Approved by	ECCS Equalities and Working Group
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Date of approval	September 2013
Date of publication	December 2013

DECISION-MAKING PROCESS

12. Has a copy of this EINA or summary of key findings been provided to key decision-makers to help inform decision making, for example as an appendix to a Cabinet or Committee report?

- If so please provide the details including the name of the report, the audience i.e. Cabinet/ Committee, the date it went, and the report author.**
- Please also outline the outcome from the report and details of any follow up action or monitoring of actions or decision taken:**

N/A.