



City of Westminster

## EQUALITY IMPACT ASSESSMENT TOOL

The council has a statutory duty to consider the impact of its decisions on age, disability, gender reassignment, pregnancy & maternity, race, religion or belief, sex (gender) and sexual orientation.

The Council also has a duty to foster good relations between different groups of people and to promote equality of opportunity.

Completing an EIA is the simplest way to demonstrate that the Council has considered the equality impacts of its decisions and it reduces the risk of legal challenge. EIAs should be carried out at the earliest stages of policy development or a service review, and then updated as the policy or review develops. EIAs must be undertaken when it is possible for the findings to inform the final decision. Keep all versions of your EIA. An EIA should be finalised once a final decision is taken.

When you should undertake an EIA:

- You are making changes that will affect front-line services
- You are reducing the budget of a service, which will affect front-line services
- You are changing the way services are funded and this may impact the quality of the service and who can access it
- You are making a decision that could have a different impact on different groups of people
- You are making staff redundant or changing their roles (particularly if it impacts on frontline services).
- EIAs also need to be undertaken on how a policy is implemented even if it has been developed by central government (for example cuts to grant funding).

Who should undertake the EIA:

- The person who is making the decision or advising the decision-maker

Guidance and tools for completing EIAs are available on the WIRE:

<https://officesharedservice.sharepoint.com/sites/intranet/wcc-comms/Pages/Equality-Impact-Assessments-.aspx>

An EIA e-learning module is available for all Westminster staff:

[www.learningpool.com/westminster/course/view.php?id=159](http://www.learningpool.com/westminster/course/view.php?id=159)

When you have completed an EIA, please send the final copy to [Equalities@westminster.gov.uk](mailto:Equalities@westminster.gov.uk)

**It is the responsibility of the service to complete an EIA to the required standard and the quality and completeness of EIAs will be monitored by EMT.**

**All EIAs for proposed changes to levels of service arising from budget proposals must be completed by 2 September 2016.**

## Title

**8.4C : Service Proposals for Children’s Centres in Westminster City Council.**

## What are you analysing?

- What is the purpose of the policy/project/activity/strategy?
- In what context will it operate?
- Who is it intended to benefit?
- What results are intended?
- Why is it needed?

**In re-shaping the children’s centres** the aim is to continue to support families in those groups with the greatest needs. We know that many children and families, at different stages in their lives, find themselves faced with challenging situations and require additional support, advice and intervention. In the face of diminishing resources, we need to target children and families with the greatest need and work with partner agencies in an integrated way to achieve the best outcomes from our shared resources.

**What is the purpose of the proposal?**

This assessment covers the changes we have made to existing children’s centre provision. The changes embed children’s centres into a new model for Early Help based on **collaboration between different providers** that consists of the following:

- **The set-up of 3 family hubs** that support families with children across the age spectrum. They will develop from the existing 3 children centre hubs. This development is part of the wider reshaping of early help in Westminster and will gather pace over the next 6 months now that the new model is in place ( 1<sup>st</sup> September 2016)
- **An early help partnership** around each hub consisting of organisations who commit to developing a shared approach through joint sharing of information, assessments and meetings has been established
- **A fortnightly early help partnership meeting** to discuss pre-referral support for families.

The specific changes to children’s centres within this model are as follows:

- We are creating more 2 year early education places in existing children’s centre sites.
- Further integrating with health services particularly within in the 3 hubs so that families with need are systematically identified earlier.
- The hubs are in the areas of greatest deprivation and offer a range of services to families who need extra help (see map in appendices)

The **3 existing children centre hubs will now become the 3 Early Help Family hubs**. The integrated range of children’s centre services will continue but the ‘hub’ will become:

- A **'virtual' network of providers** working with children 0 – 19 years, who share a single approach to working with families across a given area. All providers will be working to a shared purpose and outcomes framework. It is proposed that this network of provision will bring together the Early Help (including Troubled Families) offer from Children's Services, the Health Visiting and Family Nurse Partnership offers from Public Health, the joint Child and Adolescent Mental Health Service (CAMHS) offer from Central London Clinical Commissioning Group (CLCCG) and West London Clinical Commissioning Group (WLCCG) and Public Health, and the offer from General Practitioners (GPs).
- **We will use our existing children's centre hub buildings to strengthen this integration** and partnership working across commissioned and directly delivered services by Children's Services, Public Health, Housing and the CLCCG and WLCCG and bring families into a physical building, a focal point in the community where they can access help and information and from where a range of connected services will be co-ordinated but delivered at venues across the locality.

The aim will be, through this network, to identify families with complex needs as early as possible, no matter what service they first come into contact with. This will make sure that any contact with a practitioner in the network will lead to the right intervention at the right time, with greater accountability across all agencies for identifying need earlier; leading to families understanding and making effective changes that ultimately improve their health and wellbeing.

The only other children's centre site that is still providing a range of children's centre services is **Maida Vale Children's Centre**. This is because this centre can attract clients from the north-east and north-west areas of Westminster and is set within an area of significant deprivation. It is also located on the site of St Augustine's primary and secondary school and supports the provision of a 0-19 service on the campus. This was highlighted in the previous EIA and was also reinforced via out consultation

We are expanding the **2 year early education places** to 3 more children's centre sites –Queensway (located at Hallfield School), Bayswater and Westbourne (located at Edward Wilson School) Children's Centres. This process has begun but will be dependent on the availability of capital funding and negotiations with providers who have expressed an interest.

The children's centre funding, and associated services, have ceased at satellite sites. This includes the stay and play sessions currently provided by the Local Authority which will cease from October 2016. This will impact on parents, carers and children currently using these centres but we will work with the community to facilitate the set-up of stay and plays in community venues by training local parents and linking this provision with the children centres.

We will continue to **integrate with local health services to facilitate the very earliest identification of**

**need.** Support from children's centres goes beyond the actual centre and many families receive help through a programme of home visiting. Through closer worker relationships with health visitors and midwives, and having them based in the children's centre hubs, we are beginning to identify need in families much earlier.

A map showing the 4 children centre sites remaining in relation to deprivation is attached at appendix 1.

### **In what context does this operate?**

The context in which children's centres operate has changed as follows:

- **Resources are reducing** while the demand for specialist services is increasing. Like other councils, Westminster needs to make further savings in response to budget reductions. The earliest possible intervention, through an integrated early years response, if successful can empower families to regain control of their circumstances and help transform the lives of vulnerable children without expensive state support. **It is vital that children's centres (and early help in the widest sense) are positioned to prevent escalation to more costly, long-term interventions.**
- **The OFSTED thematic inspection of Early Help (2014)** suggests that the interface between statutory interventions and early help needs further work to prevent re-referrals. Their work suggests that many cases that they audited still demonstrated that early help hadn't prevented escalation to higher level services.
- **The children's centre buildings were expensive to run.** They cost us £259,000, which was 23% of the total children's centre budget in family services. However, what is more important than the buildings is how successfully children and families with additional needs are identified and collectively offered vital support. The new model allows us to make cost savings in premises and overheads and at the same time promoting a more holistic and integrated service for families with children aged 0-19 within the 3 locality based Early Help Family Hubs .
- **Integration with local health services is improving** and it is this that supports the successful identification of need and the chance to then offer tailored support to families.
- **The introduction of the 2 year early education places has provided a framework for targeting families more effectively** and changed the usage of the children's centre buildings as most children in need will be accessing an early education place by 2. The evaluation of the initial 2 year early education place pilot by the DfE suggested that:
  - Children with any developmental delay catch up quickly with their peers thereby ensuring that they do not enter the universal entitlement with an even greater disadvantage.
  - Children who catch up and perform well at EYFS Profile Stage also do well at Key Stage 1 and the gains remain constant at least till age 11.

- **This means the children’s centres are now mainly ‘reaching’ the 0 – 2 age group** because children who they need to reach should be accessing childcare from 2 years of age. This is evident from current reach data, see attached at Appendix 3.
- **Locally, we have re-shaped our child in need work and changed the nature of social work ‘assessments’,** ensuring that assessments are an intervention that can generate change. This has in turn allowed us the opportunity to re-shape the early help service with its own identity / brand.
- **There is a new commissioning framework,** supports closer alignment of health visiting with children’s centres and therefore greater integration in work practices. This will be reflected in the new service specification and re-commissioning of health visiting services which will support closer alignment of health visiting with children’s centres and therefore greater integration in work practices

#### Who is intended to benefit and how?

The service redesign allows us now to target families and individuals with particular vulnerabilities or who might require additional support. In particular the revised model has prioritised the following groups:

- Children who are likely to not be school ready at 5;
- Children and families with more complex needs;
- Mothers and babies, including pregnant women;
- Parents seeking employment;
- Parents at risk of harm.

Some of these vulnerabilities are statistically more prevalent for individuals with certain protected characteristics.

#### Details of the lead person completing the screening/EIA

(i) Full Names Jayne Vertkin  
(ii) Position: Head of Early Help  
(iii) Unit: Family Services  
(iii) Contact Details: [jvertkin@westminster.gov.uk](mailto:jvertkin@westminster.gov.uk)

#### Date sent to [Equalities@westminster.gov.uk](mailto:Equalities@westminster.gov.uk)

29<sup>th</sup> September 2016

#### Version number and date of update

**Version 1.0 – 29<sup>th</sup> January 2016**  
**Version 2.0 – 29<sup>th</sup> September 2016**

## SECTION 1: Initial screening: Do you need to complete an Equality Impact Assessment (EIA)?

Not all proposals will require an EIA, this initial screening will help you decide if your project or policy requires a full EIA by looking at the potential impact on any equality groups.

1.1 Does the project, policy or proposal have the potential to disproportionately impact on any of the following groups? If so, is the impact positive or negative?				
	None	Positive	Negative	Not sure
Disabled people	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Particular ethnic groups	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Men or women (include impacts due to pregnancy/ maternity)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
People or particular sexual orientation/s	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
People who are proposing to undergo, are undergoing or have undergone a process or part of a process of gender reassignment	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
People on low incomes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
People in particular age groups	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Groups with particular faiths and beliefs	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Are there any other groups that you think may be affected negatively or positively by this project, policy or proposal?	<b>No</b>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>If the answer is “negative” or “unclear” consider doing a full EIA</b>				
1.2 What do you think that the overall NEGATIVE impact on groups and communities will be?				

	<table border="1"> <tr> <th style="text-align: center;">None/ Minimal</th> <th style="text-align: center;">Significant</th> </tr> <tr> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input checked="" type="checkbox"/></td> </tr> <tr> <td>None or minimal impact would be where there is no negative impact identified, or where there will be no change to the services for any groups.</td> <td>Significant impact would be where there is an impact is identified that has substantial impact on any groups.</td> </tr> </table> <p style="text-align: center;"><b>If the answer is “significant” consider doing a full EIA</b></p>	None/ Minimal	Significant	<input type="checkbox"/>	<input checked="" type="checkbox"/>	None or minimal impact would be where there is no negative impact identified, or where there will be no change to the services for any groups.	Significant impact would be where there is an impact is identified that has substantial impact on any groups.
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<b>1.3</b>	<b>Using the screening information in questions 2.1 and 2.2, should a full EIA be carried out on the project, policy or proposal</b>						
	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>						
<b>1.4</b>	<b>How have you come to this decision?</b>						
	Currently the stay and play sessions delivered at children’s centres are available at 10 of the centres and parents state that they provide considerable support in the 1st year of their child’s life, helping them to build social networks and preventing postnatal depression. There is a good network of this provision and a reduction in this provision will impact on both parents but women are the highest users.						

## EQUALITY IMPACT ASSESSMENT

### SECTION 2: BUILDING AN EVIDENCE BASE

<b>2.1</b>	<b>Build up a picture of who uses/will use your service or facility and identify who are likely to be impacted by the proposal</b>		
	<ul style="list-style-type: none"> <li>• <i>If you do not formally collect data about a particular group then use the results of local surveys or consultations, census data, national trends or anecdotal evidence (indicate where this is the case). Please attempt to complete all boxes.</i></li> <li>• <i>A baseline of data is <a href="#">available here</a></i></li> </ul>		
	<table border="1"> <tr> <td style="width: 20%; padding: 5px;">How many people use the service currently? What is this as a % of Westminster’s population?</td> <td style="width: 80%;"></td> </tr> </table>	How many people use the service currently? What is this as a % of Westminster’s population?	
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Reporting period	Data Description	Measure	North West	North East	South
March 2014-15	How many people use the service currently?	All under 5 yr olds in reach	1899/43%	2157/36%	1265/38%
	What is this as a percentage of Westminster's population?	Under 5s in 30% most deprived areas	1609/47%	1147/59%	632/41%
		Under 5s in 10% most deprived areas	1509/47%	795/51%	144/51%

Increasingly, the majority of parents accessing the centres are now under 2 years as after this age many children are accessing the early education free entitlement. It is also in the first 2 years that research suggests early intervention has the greatest impact. If you therefore look at the data for September 2015 and look at reach for the under 1 years in the 10% most deprived areas the reach rises to 87% (NE), 90% (NW) and 82% (S) and in the 30% most deprived areas it is 89% (NE), 87% (NW) and 87% (S).

This needs to be reviewed again once data for 2016-17 is available to see if the service redesign has significantly altered the take up of services in the 3 localities.

Appendix 2 provides further detail on the numbers of children the service currently works with including information on the number of children with a disability, the numbers from a BME background and the number of fathers. In each case the information provides a baseline for numbers present in each of the localities along with the numbers accessing children's centre services and the numbers 'engaged' with the service – defined accessing provision three or more times.

Appendix 3 shows the number of families accessing each of the stay and play sessions between June and November by level of deprivation. It also indicates the number of these children from a BME background. The table shows that over the last six months (June to November 2015) less than half the children attending stay and play sessions came from the most deprived 10% of the community. 36% of attendees were in the 40%



most deprived or below. 63% of the children attending these sessions were from a BME background.

Where stay and play sessions are reduced we are working to ensure these are replaced with the free 2 year early education offer for eligible families to support better targeting and reach of those families, who may not currently access early years services, and to mitigate against the impact of reducing the number of stay and play sessions, as the long term outcomes for children accessing the 2 year entitlement are significant.

This will need to be reviewed in the final quarter of 2016- to assess the impact of the changes we have made

The following tables show that although the average take up of the 2 Year Old Offer placements is consistent with national averages, it does show that Westminster does not achieve well for placements of children from the list of families provided to the Local Authority by the Department for Education (DfE).

CC Area 2 Year Old Take up	Description	Nov -14	Apr -15	Aug -15	Data Source	WCC Take-up % (Ave)	London Take-up % (Ave)	England Take-up % (Ave)
North West	Families on DFE list (Baseline)	364	343	279	DWP List/LA placement and Application	-	-	-
	Families occupying place	143	141	166		-	-	-
	<b>2 year old family take up</b>	<b>39%</b>	<b>41%</b>	<b>59%</b>		<b>58%</b>	<b>51%</b>	<b>62%</b>

	<b>percentage</b>							
	Families occupying a place matched to DFE list	91	111	125		-	-	-
	<i>Families who have submitted applications</i>	44	50	10		-	-	-

The provision of the 2 year free entitlement in children's centres has made a significant contribution to increasing the number of places available to families since the previous changes; children's centres are now offering 71 new places for those eligible for the 2 year free entitlement. In some centres, wrapped around the 2 year offer is an invitation to attend a parenting group. It is this combination of early learning for the child and parenting support for the parents that is vital.

To achieve the focus on those children most at risk of the poorest outcomes, as stated earlier, we are **extending the provision of the 2 year early education places** to the following sites –Queensway (located at Hallfield School), Bayswater and Westbourne (located at Edward Wilson School) Children's Centres. **Using an analysis of the Spring 16 DWP data (658 children) it suggests that targeting places within these children's centres is correct** as the wards with the highest concentration of families eligible for the 2 year offer are as follows;

- Westbourne - 102 (15.5% of total eligible families)
- Church St - 100 (15.2%)
- Queens Park - 88 (13.4%)

Broken down by locality it is:

North West – 240, North West – 286, South – 132

Therefore based on the current supply of places the wards requiring further capacity building to accommodate increasing take up are: Church Street, Maida Vale, Harrow Road, Queens Park, Westbourne and Churchill.

The impact of the changes we have instituted will need to be monitored over time

and we would expect to see an increase in the uptake of the 2 year old entitlement within the target areas outlined above over the next

		6 months as more places become available and those families who require early intervention receive targeted support to ensure they are able to access this and the wider Children Centre offer.
	Age	As above
	Disability	No specific data is available.
	Gender	The majority of users are mothers
	Race	As above
	Religion or belief	We do not collect this data
	Sexual orientation	We do not collect this data
<b>2.2</b>	<b>Are there any equality groups that are overrepresented in the monitoring information relative to their size of the population?</b> <i>If so, this could indicate that the proposal may have a disproportionate impact on this group even if it is a universal service. Information about Westminster's population is on the Equalities page on the WIRE.</i>	
	No	
<b>2.3</b>	<b>Are there any equality groups that are underrepresented in the monitoring information relative to their size of the population?</b> <i>If so, this could indicate that the service may not be accessible to all groups or there may be some form of direct or indirect discrimination occurring.</i>	
	No	

## SECTION 3: ASSESSING THE IMPACT

In order to be able to identify ways to mitigate any potential impact it is essential that we know what those potential impacts might be.

3.1	<b>Consultation Information</b> <i>This section should record the consultation activity undertaken in relation to this project, policy or proposal</i>
	<p>In January 2015, consultation was undertaken with parents and service users around changes to Children’s Centre provision that came into effect from 1 September 2015. At that time, respondents commented that children’s centres were invaluable to all who use them, regardless of their social position and that they helped to build community. Positive comments were made about the quality of provision available at children’s centres and the introduction of fathers’ groups.</p> <p>Parents and centre users reported that the ‘stay and play’ sessions were useful. Some respondents were concerned that the proposed changes would mean that they would have to travel further to access ‘stay and play’ opportunities and that any reduction in the number of sessions would leave the remainder oversubscribed. They also acknowledged that there were other groups in Westminster but they felt the quality provided at the children’s centres was better.</p> <p>Some respondents recognised the value of developing more targeted services but queried whether the new provision, and specifically the introduction of the 2 year old offer in more settings, would necessarily attract those families most in need. Some respondents observed that while there was a lot of provision available for under-fives in the local area, there was not very much that catered for parents and carers with very young children (under 1).</p> <p>On 4<sup>th</sup> January 2016 a consultation started on the current proposed changes to children’s centres and ended on 30<sup>th</sup> January. Parents were given two options for expressing their views:</p> <ul style="list-style-type: none"> <li>• Via an on-line questionnaire on the website.</li> <li>• Via face to face group sessions in the hub children’s centres. We have arranged for three sessions, one in each Locality</li> </ul> <p>The <b>main themes</b> raised by parents in the face to face sessions have been similar to those in January 2015:</p> <ul style="list-style-type: none"> <li>• Parents with ‘low mood’ / postnatal depression need some form of drop-in service. So drop –in important in 1<sup>st</sup> year of a child’s life.</li> <li>• Some parents felt positive about keeping a network of stay and play sessions through a network of parent volunteers but others were more cautious about the loss of professional input and the reliability of volunteers.</li> <li>• Some parents have suggested paying for services whilst others have said that this should never happen.</li> <li>• There has been a positive acceptance of the idea of a children and family hub that can offer services for children of different ages but some initial anxiety that this would impact on children’s centre provision.</li> </ul>

	<p>Concern about buildings and future use of sites and whether one 'hub' is sufficient as parents will need to walk further.</p>
<p><b>3.2</b></p>	<p><b>What might the potential impact on individuals or groups be?</b>  <i>Consider disability, race, gender, sexual orientation, transgender, age, faith or belief and those on low incomes and other excluded individuals or groups</i></p>
	<p><b>Reduced centre based provision across the borough – impacting on women and children and those on low incomes, who are unable to pay for similar services.</b></p> <p>The original EIA identified that the reduction in 'stay and play' sessions and support services provided from some children centres, will impact more on women, whilst acknowledging that some fathers benefit greatly from the provision too.</p> <p>We are committed to facilitating the set-up of community based stay and play sessions led by parents, faith or community based groups either in their existing buildings or in the children's centre satellites on a sessional basis. Examples of such models are developing in Queens Park. We will provide training to parents wanting to run these sessions and will explore how to achieve this over the next 6 months.</p> <p>The expansion of the 2 year old provision is likely to have a positive impact on women, providing them with a time for learning and employment and an early learning experience for the children. Not only is this provision specifically aimed at disadvantaged groups but it also can be shown to significantly improve outcomes for the children, families and carers involved.</p> <p>Despite a reduction in centre based services, we will continue to improve how we identify need earlier by closer working with health colleagues. Our links with health visitors and midwives has developed and we have identified opportunities for co-location in the 3 hubs .We now have joint systems to flag families needing support earlier through effective sharing information. These systems are not dependent on a building and so if a family live in any area, and have need, they will be supported. An example of continued development in this area is new evidence based antenatal support programme – Baby Steps – which was from April 2016. This is currently being reviewed with a view to rolling this out across the city .We are also constantly striving to attract new services for residents through new partnerships, for example the Healthy Relationships, Healthy Babies Programme based at Queens Park Children's Centre and providing support to families experiencing domestic abuse.</p>

## SECTION 4: REDUCING & MITIGATING IMPACT

As a result of what you have learned, what can you do to minimise the impact of the proposed changes on equality groups and other excluded / vulnerable groups, as outlined above?

4.1	<b>Where you have identified an impact, what can be done to reduce or mitigate the impact?</b> (Remember to think about the Council as a whole, another service area may already be providing services which can help to deal with any negative impact).	
	Consider what actions can be put in place to remove or reduce your identified impact(s). Record all potential actions to show you have considered all options. Please note if no mitigating actions have been identified.	
	<b>Column A – Issues or barriers, things to take into account</b>	<b>Column B – what changes can be made to remove or reduce barriers or negative impacts</b> (Remember to think about the Council as a whole, another service area may already be providing services which can help to deal with any negative impact).
	To ensure equality of access to the remodelled provision for families from low income or BME groups or for families where children are at risk of poor outcomes- where they may previously have accessed drop in provision	Communicate with current service users of Stay and Play sessions so that they are aware of other local provision, including, where appropriate, signposting service users to the new ‘hubs’  Encourage and support community and third sector organisations to consider their role in areas where stay and play provision is being reduced As part of the remodelling of Early Help in Westminster we are now able to use the Family Information Service (FIS) to advertise more effectively and as a tool for families and professionals to identify services which could support families in their locality As part of FIS families will have access to high quality information on line reducing their reliance on drop ins to access this
	To encourage those families who are eligible to access 2 year old places	Advertise and maximise outreach for the proposed 2 year old places via the outreach service- this service now targets those in the most need and children who are most vulnerable to poor outcomes FIS will now allow providers to update the availability of free places easily and quickly allowing eligible families to easily see what provision is available in their locality and how to access it. Families will also be able to check their eligibility on line via a link from FIS.
	Lack of parent volunteers to ensure drop in services continue	Ensure that family hubs and locality partnerships alongside early help staff and outreach staff promote and support volunteering as part of their work with parents and support them to access volunteering as a mechanism to reduce social isolation, increase work readiness or as a first step towards accessing education

		and training.												
<b>4.2</b>	<b>Now that you have considered the potential or actual effect on equality, what action are you taking?</b>													
	<table border="1"> <tr> <td><input type="checkbox"/></td> <td>1. No major change (no impacts identified)</td> <td>Your analysis demonstrates that the policy is robust and the evidence shows no potential for discrimination and you have taken all appropriate steps to advance equality &amp; foster good relations between groups.</td> </tr> <tr> <td><input type="checkbox"/></td> <td>2. Adjust the policy</td> <td>You will take steps to remove barriers or to better advance equality.</td> </tr> <tr> <td><input checked="" type="checkbox"/></td> <td>3. Continue the policy (impacts identified)</td> <td>You will adopt your proposal, despite any adverse effect provided you are satisfied that it does not unlawfully discriminate and it is justified.</td> </tr> <tr> <td><input type="checkbox"/></td> <td>4. Stop and remove the policy</td> <td>There are adverse effects that are not justified and cannot be mitigated. The policy is unlawfully discriminating.</td> </tr> </table>	<input type="checkbox"/>	1. No major change (no impacts identified)	Your analysis demonstrates that the policy is robust and the evidence shows no potential for discrimination and you have taken all appropriate steps to advance equality & foster good relations between groups.	<input type="checkbox"/>	2. Adjust the policy	You will take steps to remove barriers or to better advance equality.	<input checked="" type="checkbox"/>	3. Continue the policy (impacts identified)	You will adopt your proposal, despite any adverse effect provided you are satisfied that it does not unlawfully discriminate and it is justified.	<input type="checkbox"/>	4. Stop and remove the policy	There are adverse effects that are not justified and cannot be mitigated. The policy is unlawfully discriminating.	
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<input type="checkbox"/>	4. Stop and remove the policy	There are adverse effects that are not justified and cannot be mitigated. The policy is unlawfully discriminating.												
<b>4.3</b>	<b>Please document the reasons for your decision</b>													
	<p>The Council continues to be committed to the goal of ensuring children in Westminster have the best possible start in life whatever their family circumstances. However like other councils, Westminster City Council has to do this within the context of reduced central government funding. The changes to children's centres puts an emphasis on ensuring that future services are targeted to those most in need and on developing a more collaborative and systematic way of identifying need with partner agencies to ensure that children with additional need get it as soon as is possible.</p> <p>Whilst acknowledging that these proposals will have an impact on the lives of some families, we feel confident that the reduced resources will be targeted to those children at risk of the poorest outcomes and we will work to mitigate the impact for other families by facilitating closer working with universal providers and voluntary and community organisations.</p>													

**SECTION 5: ACTION PLAN**

*This section is for actions related any of the 9 protected characteristic: Age, Disability, Gender, Gender reassignment; Pregnancy & maternity, Race, Sexual Orientation or Religion/Belief*

5.1 Action Plan <i>Complete the action plan if you need to reduce or remove the negative impacts you have identified, take steps to foster good relations or fill data gaps.</i>  <i>NB. Add any additional rows, if required.</i>							
Action Required	Equality Groups Targeted	Intended Outcome	Resources Needed	Name of Lead, Unit & Contact Details	Completion Date (DD/MM/YY)	RAG	
Communicate with current service users of Stay and Play sessions so that they are aware of other local provision, including, where appropriate, signposting service users to the new 'hubs'	Women, Children, BME groups	Families have access to a range of services in Westminster that are delivered by other providers	Information promotion through leaflets and websites.	Jayne Vertkin. Head of Early Help <a href="mailto:jvertkin@westminsster.gov.uk">jvertkin@westminsster.gov.uk</a>  Kate Holmes, Account Director Policy, Performance & Communications Department  <a href="mailto:kholmes@westminster.gov.uk">kholmes@westminster.gov.uk</a> / 020 7641 5713	July 2016	<b>Amber</b>	
Encourage and support	Women, Children, BME groups	Families have access to provision	Time allocation to facilitate meetings	Jayne Vertkin. Head of Early Help <a href="mailto:jvertkin@westminsster.gov.uk">jvertkin@westminsster.gov.uk</a>	July 2016		



	community and third sector organisations to consider their role in areas where stay and play provision is being reduced		within their community, which builds social contacts and infrastructure within communities	Training of volunteers	<a href="http://ter.gov.uk">ter.gov.uk</a>		
	Advertise and maximise outreach for the proposed 2 year old places.	Women, Children, BME groups	Better long term outcomes for children in terms of their attainment.	Buildings Staff Collaboration with schools	Manager of the Early Years Service	On-going	<b>Amber</b>
	Develop the role of the family Information Service as an information tool for parents and between providers	Women, Children and BME groups	Improved access to information	Staff time	Manager of the Early Years Service	In development - operational from October 2016	<b>In progress - Amber</b>

**THIS SECTION TO BE COMPLETED BY THE RELEVANT SERVICE MANAGER**

SIGNATURE: .....

FULL NAME: .....

UNIT: .....

EMAIL & TELEPHONE EXT: .....

DATE (DD/MM/YYYY): .....

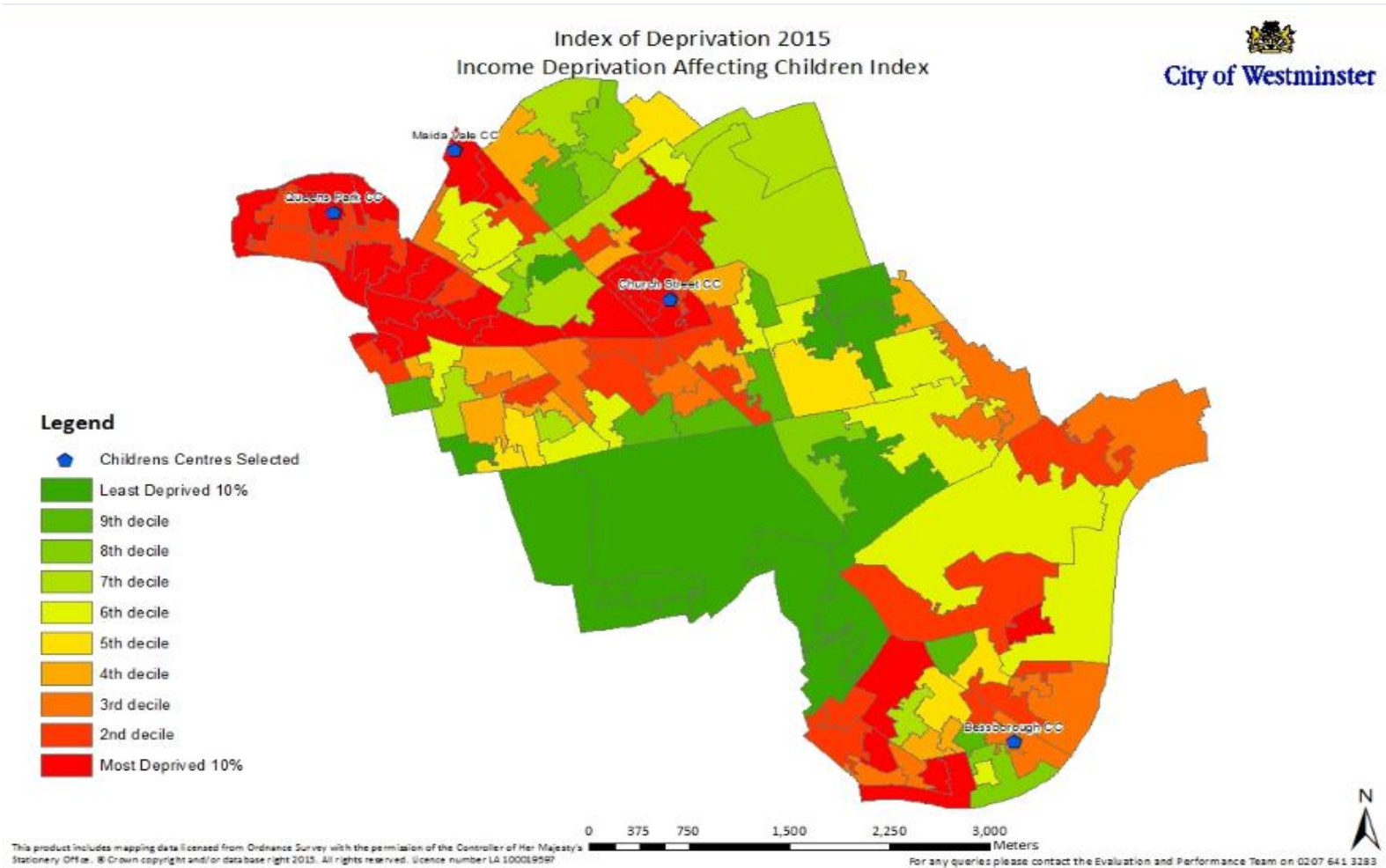
**WHAT NEXT?**

It is the responsibility of the service to complete an EIA to the required standard and the quality and completeness of EIAs will be monitored by EMT.

All EIAs for proposed changes to levels of service arising from budget proposals must be completed by 2 September 2016.

All completed EIAs should be sent to: [Equalities@westminster.gov.uk](mailto:Equalities@westminster.gov.uk)

### Appendix 1 – Location of the hub sites and Maida vale Children’s Cent



## Appendix 2 – Area Profile Data

## North East

Area Profile Data	Measure	2012/13	2013/14	2014/15	Sep-15	Baseline Data Source
All under 5 yr olds in reach	Baseline:	5975	6015			ONS Mid Year Estimates
	Registered:	2725	3634	4535	4321	
	Access:	2361	2199	2157	2063	
	Engaged:	1198	1218	1152	1088	
Children 0-4 yrs old from minority ethnic groups	Baseline:	4212				Census 2011
	Registered:	1537	2637	2803	2787	
	Access:	1401	1465	1468	1397	
	Engaged:	701	791	781	845	
Teenage parents/pregnant	Baseline:	No baseline	No baseline	No baseline	No baseline	No Baseline data
	Registered:		6	6	8	
	Access:	4	11	5	7	
	Engaged:	No report	No report	No report	No report	
Lone Parents families with a 0-4 year child	Baseline:	944				DWP 2012
	Registered:			198	193	
	Access:	106	86	119	122	
	Engaged:	63	62	66	82	
Disabled children 0-4 years old	Baseline:	No baseline	No baseline	No baseline	No baseline	No Baseline data
	Registered:	21	17	20	18	
	Access:	20	20	14	16	
	Engaged:	16	11	10	18	
Disabled carers of Children 0-4 years old	Baseline:	No baseline	No baseline	No baseline	No baseline	No Baseline data
	Registered:				49	
	Access:	37	38	53	57	
	Engaged:	22	26	38	44	
Number of Fathers with a 0-4 yr	Baseline:	3338	0	0	0	Census 2011 -

old	Registered:	0	0	2122	2094	<i>Estimate</i>
	Access:	959	1141	1177	1178	
	Engaged:	418	574	577	563	
0-4 yrs in in workless households	Baseline:		915			<i>DWP 2012 and 2013</i>
	Registered:			1817	1682	
	Access:	1313	1358	929	0	
	Engaged:	No report	No report	No report	No report	
Families with Children living with domestic abuse	Baseline:	<i>No baseline</i>	<i>No baseline</i>	<i>No baseline</i>	<i>No baseline</i>	<i>No Baseline data</i>
	Registered:	0	59	60	63	
	Access:	30	42	34	27	
	Engaged:	22	31	22	27	
Families with Children living with adult mental health	Baseline:	<i>No baseline</i>	<i>No baseline</i>	<i>No baseline</i>	<i>No baseline</i>	<i>No Baseline data</i>
	Registered:	0	27	30	31	
	Access:	10	24	24	18	
	Engaged:	No report	No report	No report	No report	

## North West

<b>Area Profile Data</b>	<b>Measure</b>	<b>2012/13</b>	<b>2013/14</b>	<b>2014/15</b>	<b>Sep-15</b>	<b>Baseline Data Source</b>
All under 5 yr olds in reach	Baseline:	4308	4433			<i>ONS Mid Year Estimates</i>
	Registered:	2179	2936	3730	3691	
	Access:	1986	2054	1899	1869	
	Engaged:	1171	1235	1038	1001	
Children 0-4 yrs old from minority ethnic groups	Baseline:	2974				<i>Census 2011</i>
	Registered:	1196	1983	2099	2084	
	Access:	1102	1186	1153	1102	
	Engaged:	652	733	650	746	
Teenage parents/pregnant	Baseline:	<i>No baseline</i>	<i>No baseline</i>	<i>No baseline</i>	<i>No baseline</i>	<i>No Baseline data</i>
	Registered:		9	8	10	
	Access:	5	9	11	14	

	Engaged:	No report	No report	No report	No report	
Lone Parents families with a 0-4 year child	Baseline:	984				<i>DWP 2012</i>
	Registered:			573	555	
	Access:	266	312	328	322	
	Engaged:	171	202	196	198	
Disabled children 0-4 years old	Baseline:	<i>No baseline</i>	<i>No baseline</i>	<i>No baseline</i>	<i>No baseline</i>	<i>No Baseline data</i>
	Registered:	16	14	16	13	
	Access:	14	9	9	12	
	Engaged:	12	8	5	7	
Disabled carers of Children 0-4 years old	Baseline:	<i>No baseline</i>	<i>No baseline</i>	<i>No baseline</i>	<i>No baseline</i>	<i>No Baseline data</i>
	Registered:				56	
	Access:	42	39	39	40	
	Engaged:	24	24	24	19	
Number of Fathers with a 0-4 yr old	Baseline:	2072	0	0	0	<i>Census 2011 - Estimate</i>
	Registered:	0	0	1973	1966	
	Access:	808	1029	1059	1081	
	Engaged:	441	577	583	556	
0-4 yrs in in workless households	Baseline:		1165			<i>DWP 2012 and 2013</i>
	Registered:			1276	1140	
	Access:	1054	981	736	0	
	Engaged:	No report	No report	No report	No report	
Families with Children living with domestic abuse	Baseline:	<i>No baseline</i>	<i>No baseline</i>	<i>No baseline</i>	<i>No baseline</i>	<i>No Baseline data</i>
	Registered:	0	105	110	117	
	Access:	54	54	51	48	
	Engaged:	34	41	35	21	
Families with Children living with adult mental health	Baseline:	<i>No baseline</i>	<i>No baseline</i>	<i>No baseline</i>	<i>No baseline</i>	<i>No Baseline data</i>
	Registered:	0	21	25	28	
	Access:	4	19	19	19	
	Engaged:	No report	No report	No report	No report	

## South

Area Profile Data	Measure	2012/13	2013/14	2014/15	Sep-15	Baseline Data Source
All under 5 yr olds in reach	Baseline:	3144	3301			ONS Mid Year Estimates
	Registered:	1663	2186	2723	2674	
	Access:	1185	1178	1265	1267	
	Engaged:	560	631	694	695	
Children 0-4 yrs old from minority ethnic groups	Baseline:	1994				Census 2011
	Registered:	950	1458	1588	1562	
	Access:	709	710	781	732	
	Engaged:	332	367	411	482	
Teenage parents/pregnant	Baseline:	No baseline	No baseline	No baseline	No baseline	No Baseline data
	Registered:		3	0	2	
	Access:	4	6	4	4	
	Engaged:	No report	No report	No report	No report	
Lone Parents families with a 0-4 year child	Baseline:	587				DWP 2012
	Registered:			216	203	
	Access:	105	110	120	113	
	Engaged:	66	76	85	75	
Disabled children 0-4 years old	Baseline:	No baseline	No baseline	No baseline	No baseline	No Baseline data
	Registered:	19	18	19	23	
	Access:	14	15	18	16	
	Engaged:	9	13	12	24	
Disabled carers of Children 0-4 years old	Baseline:	No baseline	No baseline	No baseline	No baseline	No Baseline data
	Registered:				42	
	Access:	53	55	53	52	
	Engaged:	29	34	38	34	
Number of Fathers with a 0-4 yr old	Baseline:	1716	0	0	0	Census 2011 - Estimate
	Registered:	0	0	1522	1544	
	Access:	533	649	740	728	

	Engaged:	221	321	383	384	
0-4 yrs in in workless households	Baseline:		575			<i>DWP 2012 and 2013</i>
	Registered:			696	602	
	Access:	408	406	361	0	
	Engaged:	No report	No report	No report	No report	
Families with Children living with domestic abuse	Baseline:	<i>No baseline</i>	<i>No baseline</i>	<i>No baseline</i>	<i>No baseline</i>	<i>No Baseline data</i>
	Registered:	0	82	90	109	
	Access:	37	40	46	39	
	Engaged:	37	37	38	33	
Families with Children living with adult mental health	Baseline:	<i>No baseline</i>	<i>No baseline</i>	<i>No baseline</i>	<i>No baseline</i>	<i>No Baseline data</i>
	Registered:	0	9	19	23	
	Access:	3	10	19	21	
	Engaged:	No report	No report	No report	No report	

**Appendix 3 - Under 5 year olds attending Stay Play Sessions between 01/06/2015 to 30/11/2015 (6 months), Split by Children Centre**

locality	Centre	Level of Deprivation child living in:					BME	Total under 5s attended
		top 10%	10.1-20%	20.1-30%	30.1 -40%	over 40.1%		
North East	Church Street	198	20	9	26	123	269	<b>376</b>
North East	Micky Star	33	3	2	21	51	67	<b>110</b>
North East	Maida Vale	81	24	1	17	165	169	<b>288</b>
North East	Paddington Green	33	2	3	4	30	44	<b>72</b>
North West	Bayswater	78	0	12	27	97	109	<b>214</b>



North West	Harrow Rd	19	12	0	1	23	33	<b>55</b>
North West	Queens Park	440	28	7	11	105	389	<b>591</b>
North West	Queens Way	44	0	15	18	69	90	<b>146</b>
North West	Westbourne	65	4	5	1	8	55	<b>83</b>
South	Churchill Gardens	43	46	39	25	63	131	<b>216</b>
South	Marsham St	6	18	34	16	39	70	<b>113</b>
South	West End	1	0	10	12	67	57	<b>90</b>
<b>TOTAL</b>		<b>1041</b>	<b>157</b>	<b>137</b>	<b>179</b>	<b>840</b>	<b>1483</b>	<b>2,354</b>
% of Total under 5s attended		44%	7%	6%	8%	36%	63%	

*Events on the system selected for reporting: "Drop in/Stay and play" and "Drop in/Stay and Play referred"*

Source: Estart December 2015, IDACI 2010