



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
8.4B : Early Help Service Reorganisation
<p>What are you analysing?</p> <ul style="list-style-type: none"> <li>• What is the purpose of the policy/project/activity/strategy?</li> <li>• In what context will it operate?</li> <li>• Who is it intended to benefit?</li> <li>• What results are intended?</li> <li>• Why is it needed?</li> </ul>
<p>This report considers the <b>reshaping of Westminster’s early help work</b> (this includes the following teams - the early help advisory team, parenting team, the 3 early help locality teams and the family recovery service) into <b>one new early help service, which will be set within a wider collaborative model of early help</b>. This new model is operational from 1<sup>st</sup> September 2016.</p> <p>The drivers for this re-organisation are to meet financial reductions but to also improve outcomes for the most vulnerable children in Westminster.</p> <p><b>What is the purpose of the policy/project/activity/strategy?</b></p> <p>The <b>priorities, in re-shaping early help</b>, are to:</p> <ul style="list-style-type: none"> <li>• Reduce re-referrals to higher level interventions</li> <li>• Prevent family breakdown that results <i>in</i> children and young people being received into care</li> <li>• Build capacity in universal providers to support children earlier</li> <li>• Promote strong and resilient parents; parenting support will run through all our work</li> <li>• Is asset-based, builds community capacity and resilience by local support systems that can identify and tackle problems earlier</li> <li>• Develop a workforce that is focused on delivering this vision in a consistent way</li> <li>• Better align and integrate our directly provided and commissioned services as a part of a new early help model</li> </ul> <p><b>In what context will it operate?</b></p> <p>The new context, and drivers for change, can be summarised below:</p> <ul style="list-style-type: none"> <li>• <b>Resources are dramatically reducing</b> and yet the demand for specialist services is increasing. If successful early help can empower families to regain control of their circumstances and help transform the lives of vulnerable children without expensive state support. This creates a challenge where it is vital to ensure that early help is positioned to prevent escalation to more costly, long-term interventions.</li> </ul>

- **The public sector reform programme** means supporting people to become independent and self-reliant, thereby reducing demand on public sector services. This includes promoting employment and access to affordable and sustainable housing.
- **The expansion of the Troubled Families programme** is aimed to be a catalyst to service reform for all services working with families.
- **OFSTED thematic inspection of Early Help** 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.
- **Locally, we have re-shaped our CIN work and are changing the nature of social work 'assessments'**, ensuring that assessments are less about gathering information and more about an intervention that can generate change. This gives the opportunity to re-shape the Early help service with its own identity / brand. This also means that the social work assessments will be centralised to the Assessment Team and taken out of early help altogether.

#### **What results (outcomes) are intended?**

We have reduced our area of focus to prioritise improvements / **outcomes for families, children and young people in the following areas:**

- Reduce the number of children who are taken into care
- Reduce re-referrals into social care services
- Increase school attendance
- Create strong and resilient parents, who are able to manage children's behaviour
- Reduce the number of young people engaging in crime

Our work is underpinned by an **aim to increase parent employability** as a vital way of improving outcomes for children in all of the areas above.

#### **Why is it needed?**

To deliver savings in line with the Council's budget setting process and to make some service improvements to ensure we reach those most in need.

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

The aim of re-shaping the service to prevent the escalation of need to a higher statutory level and to prevent young people coming into care.

Families and their children will benefit. The aim being to prevent family breakdown and to keep families together.

Details of the lead person completing the screening/EIA
(i) Full Name: Jayne Vertkin  (ii) Position: Head of Early Help  (iii) Unit: Family Services (Childrens Service)  (iii) Contact Details: <a href="mailto:jvertkin@westminster.gov.uk">jvertkin@westminster.gov.uk</a>
Date sent to <a href="mailto:Equalities@westminster.gov.uk">Equalities@westminster.gov.uk</a>
16 <sup>th</sup> September 2016
Version number and date of update
<i>Version 8: 4 September 2016</i>

## 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 type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Particular ethnic groups	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Men or women (include impacts due to pregnancy/ maternity)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input 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>None</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?			

None/ Minimal	
Significant	
<input checked="" type="checkbox"/>	<input 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.
<b>If the answer is “significant” consider doing a full EIA</b>	
<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>
	<p>The service disproportionately works with children and families with particular ethnicities; this is a reflection of patterns of need and uptake rather than any targeting of the service. The change in the council service provision will have an impact on how residents access support.</p> <p>The service will seek to target resources where they will have the most impact; this will change the threshold at which the service operates, which may impact on the number of families accessing the service. This will be mitigated by the creation of an Early Help Partnership, which will bring together voluntary and community sector organisations to work with families who may have previously been able to access the service.</p>

## EQUALITY IMPACT ASSESSMENT

### SECTION 2: BUILDING AN EVIDENCE BASE

<b>2.1</b>	<p><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></p> <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>
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How many people use the service currently? What is this as a % of Westminster's population?	<p><b>Please note, all calculations based on the population of 0-17 years olds in Westminster.</b></p> <p><b>All service information is for the 2015-16 year.</b></p> <p><b>Age and Gender: Westminster data is based on the 2016 population from the 2015 Round of Demographic Projections - Local authority population projections - SHLAA DCLG-based population projections</b></p> <p><b>Ethnicity: Census 2011 (table DC2101EW)</b></p>																																															
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2.2	<p><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></p>
	<p>The service cohorts of 10 -15 and 16 and 17 year olds is over-represented when compared to the Westminster population.</p> <p>The service cohort of male 0-17 years olds is over-represented when compared to the Westminster population.</p> <p>The service cohort of Other Ethnic Groups and Black / African / Caribbean /Black British ethnicities are over-represented when compared to the Westminster population.</p>
2.3	<p><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></p>
	<p>The service cohorts of those under10 year olds were under represented compared to Westminster population but this data does not include families who get support from the children's centres.</p> <p>The service cohort of female 0-17 year olds is under represented compared to the Westminster population.</p> <p>White and Asian / Asian British / Chinese ethnicities are under represented compared to the Westminster Population.</p>



### 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.

<b>3.1</b>	<p><b>Consultation Information</b> <i>This section should record the consultation activity undertaken in relation to this project, policy or proposal</i></p>
	<p>The Council agreed the Early Help Strategy in 2014 following large scale and well attended, by a range of partners, Early Help workshops in January and June 2014 which were used to develop the vision and assess agreement against the priority outcomes.</p> <p>These events enabled the participation of young people, parent representatives, children protection services, Health, Public Health the Police, Schools, Education, CAMHS, Early Help staff in the Local Authority, Children’s Centre Managers, Education, Commissioning, Housing, Local Parenting Programmes, representatives from the Voluntary Sector, and Community Champions. There has been further consultation with Headteachers, the Voluntary Sector and Early Help frontline staff.</p> <p>Formal staff consultation took place in the spring of 2016 with staff and trade unions.</p>
<b>3.2</b>	<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>Individuals who previously may have accesses council services, may now work with voluntary and community sector organisations. This is likely to change how people access the services and the number of people receiving direct support. Due to the over representation of service users of Other Ethnic Groups and Black / African / Caribbean /Black British ethnicities, there will be a reduction in contact with council services. This reduction will be mitigated by support available from the Early Help Partnership.</p> <p>Those in significant need, will receive increased targeted support from the council as staff will be redirected to work more intensely with those with the highest needs.</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).					
	<p>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.</p> <table border="1" data-bbox="252 734 1509 1973"> <thead> <tr> <th data-bbox="252 734 735 880"> <b>Column A – Issues or barriers, things to take into account</b> </th> <th data-bbox="735 734 1509 880"> <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).           </th> </tr> </thead> <tbody> <tr> <td data-bbox="252 880 735 1973">           Reduced capacity at lower needs levels         </td> <td data-bbox="735 880 1509 1973"> <ol style="list-style-type: none"> <li>1. We are developing a new partnership approach to early help across Westminster that is integrated, through shared processes, with partner agencies to maximise use of all resources.</li> <li>2. The quality and responsiveness of the new teams is improved as we have developed a new operating model based on a ‘whole family approach’ rather than just focusing on a presenting issue within a family. This builds on the Focus on Practice training that staff have attended. A part of this is to have consistent caseload sizes to maximise the number of families that we can work with and to work more intensively with families.</li> <li>3. We have agreed the criteria areas where we can make the most difference and referrals will now be received from the Access to Children’s Services (‘the front door’) only on families meeting these criteria and earlier work is being undertaken with schools to prevent problems escalating.</li> <li>4. The team will now work with families with the highest needs (i.e. likely to escalate to a higher level without an intervention).</li> <li>5. Similarly, the team will now prioritise work with particular communities / groups where there is a potential risk identified to children.</li> </ol> </td> </tr> </tbody> </table>		<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).	Reduced capacity at lower needs levels	<ol style="list-style-type: none"> <li>1. We are developing a new partnership approach to early help across Westminster that is integrated, through shared processes, with partner agencies to maximise use of all resources.</li> <li>2. The quality and responsiveness of the new teams is improved as we have developed a new operating model based on a ‘whole family approach’ rather than just focusing on a presenting issue within a family. This builds on the Focus on Practice training that staff have attended. A part of this is to have consistent caseload sizes to maximise the number of families that we can work with and to work more intensively with families.</li> <li>3. We have agreed the criteria areas where we can make the most difference and referrals will now be received from the Access to Children’s Services (‘the front door’) only on families meeting these criteria and earlier work is being undertaken with schools to prevent problems escalating.</li> <li>4. The team will now work with families with the highest needs (i.e. likely to escalate to a higher level without an intervention).</li> <li>5. Similarly, the team will now prioritise work with particular communities / groups where there is a potential risk identified to children.</li> </ol>
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4.2	<b>Now that you have considered the potential or actual effect on equality, what</b>					

action are you taking?		
<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.
4.3 Please document the reasons for your decision		
<p>The partnership will be a close working network, working alongside the Council which provides a high quality support system with clear referral process into Council services when individual's needs require it.</p> <p>Focussing on those in most need will ensure that they will receive increased support from Council staff.</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*

<p><b>5.1</b></p> <p>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.</p> <p><i>Please include the action required by your team/unit, groups affected, the intended outcome of your action, resources needed, a lead person responsible for undertaking the action (inc. their department and contact details), the completion date for the action, and the relevant RAG rating: R(ed) – action not initiated, A(mber) – action initiated and in progress, G(reen) – action complete.</i></p> <p><b>NB. Add any additional rows, if required.</b></p>								
	<b>Action Required</b>	<b>Equality Groups Targeted</b>	<b>Intended outcome</b>	<b>Resources Needed</b>	<b>Name of Lead, Unit &amp; Contact Details</b>	<b>Completion Date (DD/MM/YY)</b>	<b>RAG</b>	
	<i>Enter additional rows if required</i>							

**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.**

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