

Appendix C: Shropshire Council Equality and Social Inclusion Impact Assessment (ESIIA)

Name of service change: Phase 2 Early Help Family Hubs – final approval

A. Contextual Notes 2016

The What and the Why:

The Shropshire Council Equality and Social Inclusion Impact Assessment (ESIIA) approach helps to identify whether or not any new or significant changes to services, including policies, procedures, functions or projects, may have an adverse impact on a particular group of people, and whether the human rights of individuals may be affected.

This assessment encompasses consideration of social inclusion. This is so that we are thinking as carefully and completely as possible about all Shropshire groups and communities, including people in rural areas and people we may describe as vulnerable, for example due to low income or to safeguarding concerns, as well as people in what are described as the nine 'protected characteristics' of groups of people in our population, e.g. Age. We demonstrate equal treatment to people who are in these groups and to people who are not, through having what is termed 'due regard' to their needs and views when developing and implementing policy and strategy and when commissioning, procuring, arranging or delivering services.

It is a legal requirement for local authorities to assess the equality and human rights impact of changes proposed or made to services. Carrying out ESIIAs helps us as a public authority to ensure that, as far as possible, we are taking actions to meet the general equality duty placed on us by the Equality Act 2010, and to thus demonstrate that the three equality aims are integral to our decision making processes. These are: eliminating discrimination, harassment and victimisation; advancing equality of opportunity; and fostering good relations.

The How:

The guidance and the evidence template are combined into one document for ease of access and usage, including questions that set out to act as useful prompts to service areas at each stage. The assessment comprises two parts: a screening part, and a full report part.

Screening (Part One) enables energies to be focussed on the service changes for which there are potentially important equalities and human rights implications. If screening indicates that the impact is likely to be positive overall, or is likely to have a medium or low negative or positive impact on certain groups of people, a full report is not required. Energies should instead focus on review and monitoring and ongoing

evidence collection, enabling incremental improvements and adjustments that will lead to overall positive impacts for all groups in Shropshire.

A **full report (Part Two)** needs to be carried out where screening indicates that there are considered to be or likely to be significant negative impacts for certain groups of people, and/or where there are human rights implications. Where there is some uncertainty as to what decision to reach based on the evidence available, a full report is recommended, as it enables more evidence to be collected that will help the service area to reach an informed opinion.

B. Shropshire Council Part 1 ESIIA: initial screening and assessment

Please note: prompt questions and guidance within boxes are in italics. You are welcome to type over them when completing this form. Please extend the boxes if you need more space for your commentary.

Name of service change

Phase 2 Early Help Family Hubs – final approval

Aims of the service change and description
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Purpose and detail of the assessment:

<p>This assessment has been undertaken in order to understand the impact on different groups of people in Shropshire of the proposal to create Early Help Family Hubs and for Cabinet to approve the location of each, and close 20 children's centre buildings no longer required – which will facilitate efficiencies and savings of £875,000.</p>
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<p>In the past, children's centres have been clustered with three or four sites. One children's centre in the cluster being designated with the Department of Education as the main site. For Shropshire this means that there are currently 12 designated children's centre clusters, including 26 buildings. In the proposal that Shropshire council engaged the public on - we required 6 of those designated.</p>

<p>However the Council cannot afford to maintain and fund the rest of the 20 buildings, and these will either be used to deliver the expanding 2/3/4 child care offer, or used by schools who will support the delivery of early childhood services. Shropshire Council is keen to further explore and support where appropriate how these venues could be used by the community, voluntary groups or charities who have a particular interest or focus on delivering stay and play/mother and toddler type of activities.</p>
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Intended audiences and target groups for the service change
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Parents and carers Young people and children Partner agencies including health, housing, police and fire service The voluntary, community and independent sector Schools – including pre-schools, primaries and secondary's Staff Other Council services supporting children and young people

Evidence used for screening of the service change
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<p>Throughout the journey to get to this point ie final approval of hub bases - analysis of data has been significant to understand the needs of vulnerable families, identify local needs, based on levels of deprivation, given where the majority of families with complex needs live. This evidence of need has been used to propose where the likely sites for Family Hubs are required and how outreach services will be delivered.</p>

<p>The phase 2 consultation with the public highlighted the need to include a 7th Early Help Family Hub in Market Drayton, based on the strength of public views on the levels of need in this area. The Early Help team undertook further analysis of the current referrals and demand for Early Help Services mapped against contacts and referrals to children's social care and concurred with the feedback received. Therefore, Market Drayton will require an Early Help Family base, as well as Whitchurch, taking the number of Early Help bases to 7. The Early Help Team alongside the Corporate Landlord have identified Raven House in Market Drayton as a base. At present there isn't a suitable venue/base to house the Early Help Team in Whitchurch. The team will continue to offer targeted home visits to those families in greatest need and all other lower level Early Help services already in place will continue to be delivered in the Whitchurch area.</p>

<p>During the consultation it was noted that the Corporate Landlord had been undertaking a separate piece of work through the One Public estate strategy to ensure buildings are fit for purpose and have a viable economic/financial future. This identified that the proposed Early Help Hub at Richmond House in Shrewsbury is not financially viable, due to the current yearly maintenance costs related to poor condition and the ongoing deterioration of the fabric of the building, given the age of the building. It is therefore recommended that Sunflower House, which is also in Shrewsbury, would be a good alternative because it is already an Early Help base, is a newer building with less costs, and is walking distance from Richmond House.</p>
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<p>It is proposed that the following will now accommodate the hubs: The Centre - Oswestry, Sunflower House - Shrewsbury, Crowmore Centre - Shrewsbury,</p>
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Rockspring Centre – Ludlow, a building in Whitchurch yet to be determined and The Youth Centre in Bridgnorth. The Whitchurch area will have a focus as part of the One Public Estate Strategy Plan.

Specific consultation and engagement undertaken with intended audiences and target groups, to help shape future arrangements

Consultation feedback – summary of key themes

Following Cabinets approval in May 2018 the second stage of consultation took place May to July 2018 for six weeks. It comprised an online and paper questionnaire and 24 drop in sessions and workshops held across the county which explored proposed sites for six Early Help Family Hubs and the removal of children's centre services from 20 existing sites.

461 people took part in the consultation (including service users, representatives of organisations and young people): 269 respondents completed a questionnaire, 158 people attended one of 19 drop in sessions and 35 young people attended 5 workshops (10 also completed a questionnaire)

Hub location and service provision feedback

Overall, respondents were more positive than negative about the proposed 6 family hub sites; averaging 40% in agreement as opposed to 31% who disagreed with the proposed sites.

Support was highest for the Oswestry venue where 46% of respondents were in agreement. Where people objected, 26%, one in four objectors were from the Market Drayton Children's Centre area.

40% of respondents agreed with Whitchurch as an area for a proposed hub, however 36% disagreed – over half of these were from the Market Drayton Children's Centre area.

In Shrewsbury 37% of respondents agreed to the proposed family hub site at Richmond House, 36% disagreed. 39% of respondents agreed with the Crowmoor Centre and 33% disagreed. In the main, objectors were from the Shropshire Hills and Market Drayton Children's Centre areas.

The highest number of respondents to the consultation, 27%, were from the Market Drayton area.

It could be analysed that respondents from Market Drayton objected to other venues being Early Help Hubs – because there wasn't a hub proposed for their area and this was reflected in the face to face consultations.

In the south of the county 40% of respondents agreed with the Rockspring Centre as the proposed hub in Ludlow, with 28% in disagreement. 39% of respondents were in agreement with Bridgnorth, with 28% disagreeing with the proposal.

Parents, particularly women with young children, expressed concern that the proposals would impact negatively on some universal services – notably universal

stay and play. This reinforced the feedback received in the first round of consultation. However, parents and carers also suggested that they would be willing to pay to attend a stay and play should it be provided and on average parents and carers considered £2.39 to be reasonable.

Respondents also cited the difficulty of having to travel to hubs to receive a service – poor public transport was cited as an obstacle but also the distance, time and cost involved.

Access to advice and information feedback

Almost three quarters (74%) of respondents said they would be quite or very likely to use facebook to look or ask for information about early help. Also popular sources of information are the health visitor, Family Information Service web pages and Early Help web pages. Young people said they would most likely use facebook or twitter for information about Early Help Services.

Response to the key issues raised

Summarised below are our responses to the key concerns raised.

Those members of the public who strongly disagreed with Whitchurch as a hub were from the Market Drayton area, given that there wasn't a hub proposed in the Market Drayton area. As highlighted in section 3.4 of this report it is now proposed to add a 7th hub to support those families in greatest need in this area, as well as Whitchurch.

Given the current condition of Richmond House, Shrewsbury, (detailed in section 3.5 of this report), it is proposed to use an alternative, more cost-effective venue. This would be Sunflower House, which is an Early Help base already and is within walking distance of the above.

All areas of the county will be able to access services coordinated by the Hub. No individual family will be expected to travel to a hub to receive targeted early help services. Many services are currently delivered in a range of locations and this will continue. Targeted Early Help services will in the main be provided in the family's home or in a community or other venue of their choice which is locally based and for their convenience. Families can continue to receive and access Early Help services and support being delivered across all levels of need, including universal provision e.g. mental health support, the healthy child programme delivered as part of the 0–25 public health nursing contract, and midwifery services also delivered in families' homes or in venues provided by these services e.g. health centres. Facebook sites, Early Help and Family Information Service web pages can be easily accessed by families who want to find out what, when and how to access the full range of Early Help services available, and we will be reviewing this range of digital media to ensure it is family and user friendly.

There is a range of quality child care providers who offer universal parent/carer and toddler sessions that families will be able to access and we will explore the

possibility of additional provision in areas where there is a need. There is a range of local organisations in local communities that already deliver stay and play sessions for parents and toddler groups. Where parents expressed concern or who expressed their willingness to engage in volunteering, we will use data, i.e. the current usage of stay and play sessions, and work in partnership with local parents, and local and national organisations e.g. day providers, schools, Pre-School Learning Alliance, who deliver this type of provision, to explore, encourage and support the viability of future stay and play provision.

The full consultation feedback report is available at Appendix B.

Potential impact on Protected Characteristic groups and on social inclusion

Using the results of evidence gathering and specific consultation and engagement, please consider how the service change as proposed may affect people within the nine Protected Characteristic groups and people at risk of social exclusion.

1. Have the intended audiences and target groups been consulted about:
 - their current needs and aspirations and what is important to them;
 - the potential impact of this service change on them, whether positive or negative, intended or unintended;
 - the potential barriers they may face.
2. If the intended audience and target groups have not been consulted directly, have their representatives or people with specialist knowledge been consulted, or has research been explored?
3. Have other stakeholder groups and secondary groups, for example carers of service users, been explored in terms of potential unintended impacts?
4. Are there systems set up to:
 - monitor the impact, positive or negative, intended or intended, for different groups;
 - enable open feedback and suggestions from a variety of audiences through a variety of methods.
5. Are there any Human Rights implications? For example, is there a breach of one or more of the human rights of an individual or group?
6. Will the service change as proposed have a positive or negative impact on:
 - Fostering good relations? Social inclusion?

Initial assessment for each group:

Protected Characteristic groups and other groups in Shropshire	High negative impact <i>Part Two ESIIA required</i>	High positive impact <i>Part One ESIIA required</i>	Medium positive or negative impact <i>Part One ESIIA required</i>	Low positive or negative impact <i>Part One ESIIA required</i>
<p>Age (please include children, young people, people of working age, older people. Some people may belong to more than one group eg child for whom there are safeguarding concerns eg older person with disability)</p> <p>The change in the age range of children that the new delivery model will engage with means that parents and carers may perceive that services are spread thinner and resources diluted, reducing the opportunity for their concerns to be identified early.</p>			✓	
<p>Disability (please include: mental health conditions and syndromes including autism; physical disabilities or impairments; learning disabilities; Multiple Sclerosis; cancer; HIV)</p> <p>Families where there are disabled parents and or disabled children may find travelling further to access support not viable and more expensive</p>			✓	
<p>Gender re-assignment (please include associated aspects: safety, caring responsibility, potential for bullying and harassment)</p>				✓
<p>Marriage and Civil Partnership (please include associated aspects: caring responsibility, potential for bullying and harassment)</p>				✓

Pregnancy & Maternity (please include associated aspects: safety, caring responsibility, potential for bullying and harassment) Reduced access to support for pregnant women and new mothers could increase the prevalence of mental health concerns			✓	
Race (please include: ethnicity, nationality, culture, language, gypsy, traveller) Families from non-British national or ethnic origins may not feel comfortable accessing an Early Help service. This could lead to a lack of social cohesion and increased isolation.				✓
Religion and belief (please include: Buddhism, Christianity, Hinduism, Islam, Judaism, Non conformists; Rastafarianism; Sikhism, Shinto, Taoism, Zoroastrianism, and any others) The use of religious buildings to provide services could isolate people of different religions or with no beliefs who may not be able to access certain religious buildings, leading to a lack of social cohesion and increased isolation				✓
Sex (please include associated aspects: safety, caring responsibility, potential for bullying and harassment)			✓	
Sexual Orientation (please include associated aspects: safety; caring responsibility; potential for bullying and harassment)				✓
Other: Social Inclusion (please include families and friends with caring responsibilities; people with health inequalities; households in poverty; refugees and asylum seekers; rural communities; people for whom there are safeguarding concerns; people you consider to be vulnerable)			✓	
Impact on rural communities			✓	

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C. Guidance on what a negative impact might look like

High Negative	Significant potential impact, risk of exposure, history of complaints, no mitigating measures in place or no evidence available: urgent need for consultation with customers, general public, workforce
Medium Negative	Some potential impact, some mitigating measures in place but no evidence available how effective they are: would be beneficial to consult with customers, general public, workforce
Low Negative	Almost bordering on non-relevance to the ESIIA process (heavily legislation led, very little discretion can be exercised, limited public facing aspect, national policy affecting degree of local impact possible)

D. Decision, review and monitoring

Decision	Yes	No
Part One ESIIA Only?	✓	
Proceed to Part Two Full Report?		✓

Actions to mitigate negative impact or enhance positive impact of the service change

Early Help Family Hubs – working for families report is attached to the Cabinet report at appendix B, and highlights how Early Help Family hubs will be of benefit to vulnerable families but also the wider community by delivering both universal and targeted provision.

An Early Help Family Hub is a place where children, young people and their families can access help and support in times of need.

There will be a range of services available co ordinated via the hubs. Some will be available only to those in greatest need but there also be services available to any family, child or young person who needs them (for example, parenting groups, sessions to support young people's mental health, and employment advice)

Our delivery model includes a continuum of Early Help provided by a range of

services and organisations at all levels of need.

These Early Help services and this type of activity are already delivered in a range of facilities across Shropshire, including families' homes, health centres and community centres. In the future our Early Help hubs will bring together family support services including children's centres, targeted youth and parenting support, as well as commissioned services, health and voluntary sector partners and our local schools. They will work across community clusters and work with other local partners and the community, to offer services for children and young people aged 0 – 19 (25 SEND) and their families. Our family hubs will be inclusive for all, which includes support for children with additional needs. Working in locality bases will promote better information sharing networks, ensuring children and families no longer go missing between services, making the most of the financial resources available.

Actions to review and monitor the impact of the service change

Performance reviewed via Early Help Partnership Board which reports to the Children's Trust.

Scrutiny at Part One screening stage:

People involved	Signatures	Date
<i>Lead officer carrying out the screening</i> <i>Fran Doyle Head of Early Help, Partnerships and Commissioning</i>		
<i>Any internal support*</i>		
<i>Any external support**</i> <i>Lois Dale – rural and equalities specialist</i>		
<i>Head of service</i> Fran Doyle Head of Early Help, Partnerships and Commissioning		

Sign off at Part One screening stage:

Name	Signatures	Date
<i>Lead officer's name</i>		
<i>Head of service's name</i> Fran Doyle Head of Early Help, Partnerships and Commissioning		

Shropshire Council Part 2 ESIIA: full report

Guidance notes on how to carry out the full report

The decision that you are seeking to make, as a result of carrying out this full report, will take one of four routes:

1. To make changes to satisfy any concerns raised through the specific consultation and engagement process and through your further analysis of the evidence to hand;
2. To make changes that will remove or reduce the potential of the service change to adversely affect any of the Protected Characteristic groups and those who may be at risk of social exclusion;
3. To adopt the service change as it stands, with evidence to justify your decision even though it could adversely affect some groups;
4. To find alternative means to achieve the aims of the service change.

Evaluation Decision: Proceed

1. No barriers identified, therefore activity will proceed.

Will this EIA be published: Yes

Date completed: 23/08/2018

Review date (if applicable): N/A