

**Equality Impact Assessment Tool: Policy, Strategy and Plans**  
(Please follow the EQIA guidance in completing this form)



**1. Name of Strategy, Policy or Plan**

Transformational Change Programme – Children’s Services 2018-21

This is a : **Current;#Current Policy**

**2. Brief Description - Purpose of the policy, Changes and outcomes, services or activities affected**

Following a robust review of our current services the Transformational Change Programme for children’s services has been set to reform services. The changes are closely aligned to the aims of the Getting It Right For Every Child national objectives and outcomes. The key initiatives to deliver this reform programme are: • Reduce the number of young people in high cost residential care placements as there is limited evidence that these achieve good outcomes for young people • Savings from the high cost placements will be reinvested into building a community based prevention infrastructure. • Redesign the role, purpose and function of directly provided residential units to meet the needs of a more complex population of young people • Reform the current provided and purchased foster care service to maximise the number of carers within and closer to Glasgow • Increase the number of (and improve support to) Kinship Carers through the Family Group Conferencing and Family Finding initiatives. • Develop an Intensive Outreach Family Support service to prevent older young people on the “edge of care” from becoming looked after. • Family Support Framework Tender to invest spend in the third sector to promote a sustainable family support strategy to help families to help themselves. • Continue to implement self-directed support to enable more children with a disability to live at home with their families and in their communities. This Equality Impact Assessment was undertaken to formally capture contextual information relating to children services for different protected characteristic groups and will be used to inform final strategy development, subsequent service change proposals and the raft of service level equality impact assessments that will be undertaken to ensure any service change is compliant with the HSCP, Glasgow City Council and Health Board’s legal duties in respect of their Public Sector Duty. This Equality Impact Assessment will be re-visited once the final strategy is complete and will be used to provide a baseline for final strategy assessment. The transformational strategy will be required to explicitly reference the equality Act (2010) and articulate how any proposed changes in service provision will meet the requirement to eliminate unlawful discrimination, advance equality of opportunity promote good relations.

**3. Lead Reviewer**

Gary Dover

**4. Please list all participants in carrying out this EQIA:**

Gary Dover (Head of Planning and Performance); Margaret Walker - Hartfield Clinic (Planning and Service Improvement Manager); Liz Founa (Senior Officer, Policy and Planning)

**5. Impact Assessment**

**A. Does the policy explicitly promote equality of opportunity and anti-discrimination and refer to legislative and policy drivers in relation to Equality**

The Transforming of Children’s Services Programme has been developed based on a robust review of current services and how they are delivered. Based on this review it was proposed to radically change the services to improve and obtain positive outcomes for children, young people and their families. Through the Transformation Programme there will be a robust community infrastructure to assist and support children, young people and families living with and in various situations, which do not require a statutory intervention, but need assistance to alleviate their problems and prevent the situation becoming more problematic and detrimental to the development and wellbeing of the child. The focus of this work will promote equal opportunities and anti-discrimination, for example: • Families living in poverty • ethnic minority families • Support Parents and carers with a disability • Promote more independence and choice for children and young people with a disability • Support Parents with drug or alcohol related misuse • Families in or on the verge of homelessness • Early identification of young carers • Early identification of older carers who need support • Children and young people who would describe themselves as being LGBTI • Strengthen families and local communities through collaborative working across a number of agencies • prevent children and young people from becoming looked after • Young people with the most complex needs will have improved access to specialist services, such as, Child and Adolescent Mental Health Services (CAMHS) • Closer links with Adult Services: Addiction, Mental Health Services, etc.

will help to identify children and families who need assistance earlier.

**B. What is known about the issues for people with protected characteristics in relation to the services or activities affected by the policy?**

		Source
<b>All</b>	This Transformation Programme for children's services is wide ranging and will have an impact on various groups as described in A above. The vision for A Fairer Scotland underpins what we are trying to achieve by this programme. "What we really want to do is change deep seated, multi-generational, deprivation, poverty and inequalities. One of the key ways we will do this is through eradicating child poverty." A socially just country would have very low levels of poverty. As our economy prospered, the proceeds of growth would be shared widely and fairly. Decent affordable housing would be in place for everyone who wanted it. All our communities would feel empowered to take action on the priorities that matter most to them. The welfare system would be available to anyone who needed it and that safety net would be valued by all of us. Our public services would be of the highest quality, always treating people with dignity and respect. We would have narrowed health, justice and educational inequalities significantly. Digital technologies would be being used actively by everyone, with scarce resources being focused where they were most needed. And we would, through our collective action, we have progressed equality for all and protected and enhanced human rights.	Angela Constance MSP Cabinet Secretary For Communities, Social Security And Equalities
<b>Sex</b>	Generally, slightly more boys are taken into local authority care than girls (when we published our integrated children's services plan 52% of children being looked after and accommodated were boys and this gender split is similar at a national level). This programme of change has been designed to meet the needs of all children, young people and their families. However, no one will be refused access to assistance or support based on their gender. The Transformation Programme includes a review of intensive services for vulnerable girls/young women to ensure that they continue to meet the specific needs of the service users and maximise positive outcomes.	
<b>Gender Reassignment</b>	Transgender people are one of the most marginalised protected characteristic groups in the UK. Trans people are likely to experience bused at various point throughout their lives. In a study by Scottish Transgender Alliance (2008) 25% of respondents said they had to move from a family home due to family responses. This often results in homelessness, 46% had experienced transphobic abuse in relationships and 62% had experienced transphobic abuse from strangers in public places.	Scottish Transgender Alliance – Transgender experiences in Scotland 2008.
<b>Race</b>	This programme of change is based on providing services within local communities; these services will be developed based on local need. For example, in the Govanhill area of Glasgow there is a large Roma population local services have been enhanced to meet the needs of this population. We also have responsibility for young unaccompanied asylum seekers who arrive in Glasgow under their own steam or as part of national dispersal programmes. Our transformation programme will consider how best to provide accommodation and support for these young people.	
<b>Disability</b>	Disabled people are among the very poorest people in Scotland. We have borne the brunt of welfare cuts with over half of all those made by the last Government falling on disabled people and their families. Many of us do not get anything like the social care support we need. According to the latest research, almost a half of all those living in poverty live with disabled people or are disabled people themselves. Families with disabled children are particularly likely to experience child poverty. Our employment rate is persistently around about a half that experienced by non-disabled people. Young disabled people are more likely than their non-disabled peers not to be in education, employment or training. Although disabled people make up 11.6% of all 16-24 year olds, in 2015/16 only 3.9% of Modern Apprenticeships went to disabled people – and that's an improvement on the shockingly low 0.4% of places in 2014/15. Disabled people too often	Dr Sally Witcher OBE, Chief Executive Officer, Inclusion Scotland

	experience discrimination, social isolation and negative attitudes, including hate crime. As part of the transformation programme detailed consideration will be given by managers to how the care and support of young people with complex needs (such as physical disabilities, learning disabilities and mental health problems) who are in residential accommodation can be improved.	
<b>Sexual Orientation</b>	In 2015, 1.8% of Scottish adults (aged 25 to 75+) and 3.7% young people (aged 16 to 24) identified their sexual orientation as LGBTI. Children's Services is working with the Health Improvement Teams to work towards the LGBT Youth Charter in a number of settings/services.	Scottish Surveys Core Questions 2015
<b>Religion and Belief</b>	This programme of change has been designed to meet the needs of all children, young people and their families, regardless of faith and belief.	
<b>Age</b>	Numbers of children and young people by age range living in Glasgow City 34,877 aged 0 to 4 31,283 aged 5 to 9 26,651 aged 10 to 14 33,129 aged 15 to 19 56,000 aged 20 to 24 The changes to children's services will affect children and young people age 0 to 18 and for care experienced young people in continuing care up to their 26th birthday. Services will also be developed around the needs of parents and carers.	National Records of Scotland Mid-year estimate 2016
<b>Pregnancy and Maternity</b>	Many women in Britain experience some form of pregnancy and maternity discrimination every year. Many women report having been dismissed or made compulsorily redundant where others in their workplaces were not, or treated so poorly they felt they had to leave their jobs. Women are presenting at the Special Needs In Pregnancy services (SNIPs): <ul style="list-style-type: none"> <li>• Alcohol and/or drug misuse in woman and/or partner in last 12 months (including any substitute prescribing)</li> <li>• Gender based violence and/or abuse associated with child protection issues</li> <li>• Significant or current mental health issues (such as bipolar disorder or schizophrenia) impacting on their ability to parent a child and that may lead to child protection issues</li> <li>• Vulnerable adult for example an adult with learning disabilities that may lead to a difficulty associated with ability to parent a child and child protection issues</li> <li>• Women who have been trafficked into UK</li> <li>• Women who have been victims of torture/imprisonment</li> <li>• Involvement in sex trade/forced prostitution</li> <li>• Disclosure of female genital mutilation (FGM)</li> <li>• Failed or destitute asylum seekers or illegal entrants</li> <li>• Unaccompanied asylum seeking children</li> </ul> Specific workstreams included in, and related to, our transformation programme will aim to improve services for vulnerable parents: Family support strategy will cover pre-birth period; review of Vulnerable Pregnancy Protocol and roll out of new universal child health pathway. Through this work we are improving connections and joint working with maternity services for the benefit of pregnant women and their families.	Equality and Human Rights Commission research to investigate the prevalence and nature of pregnancy discrimination and Princess Royal Maternity
<b>Marriage and Civil Partnership</b>	There were 2,556 Marriages in Glasgow in 2016, of these 2,406 were opposite sex, 150 were same sex marriages and there were 15 civil partnerships (6 male and 9 female). A family support strategy will aim to intervene early to promote stable families.	National Records of Scotland 2016
<b>Social and Economic Status</b>	Glasgow had the highest number of births in Scotland, 6,833 (3,505 male and 3,328 female) in 2016. There were 49 still births this is the highest number of still births across all Local Authority areas. The next highest still birth rate was North Lanarkshire with 21. In comparison with all of Scotland still births 236, Glasgow had 21% of all still birth. Source: National Records of Scotland 2016 Over 34% of children in Glasgow were living in poverty in 2017. This is the highest among Scotland's major cities. Source: Understanding Glasgow We know there are many children living in poverty and we want to break the cycle of poverty and poor outcomes by tackling a range of social economic issues. The policy will build on the work of the Poverty Leadership Panel on reducing the number of families experiencing poverty. The Healthier, Wealthier Children approach undertaken by maternity and community child health services, is another good example of helping families to maximise their income, resolve housing tenancy issues, refer to employment services, obtain childcare, and manage debt repayments in order to overcome poverty and increase life chances of children and young people.	Sources in text

<p><b>Other marginalised groups (homeless, addictions, asylum seekers/refugees, travellers, ex-offenders)</b></p>	<p>When we published our integrated children's services plan for 2017-18 Addiction services were working with 6,118 service users who were known to have responsibility for children under the age of 16. Glasgow has the highest number of unaccompanied asylum seeking children in Scotland and, at the time we published the integrated children's services plan for 2017-20, the Unaccompanied Asylum Seekers Team was working with 164 young people. Source: 2016 Scottish Household Survey Just over three in ten adults (31 per cent) in the 10 per cent most deprived areas of Scotland rated their neighbourhood as a very good place to live in 2016, compared to almost eight in ten (78 per cent) of those living in the 10 per cent least deprived areas. We know that there are areas of Scotland where people face multiple, complex challenges; many have borne the brunt of welfare reforms and increasing pressure on public expenditure. Through our work, we see the everyday impact of a whole range of issues including poverty, drug and alcohol misuse and social isolation. These undermine people's opportunities, aspirations and hope and rob our society of their potential contribution. Source: Fiona Duncan, Chief Executive Lloyds TSB Foundation Scotland – At the heart of funding Scotland's charities Our proposals to modernise continuing care and aftercare support for young people who have experienced care will focus on improving outcomes for these young people so that they move into positive destinations, such as employment, training or tertiary education and prevent them becoming homeless, address their addiction issues and promote their inclusion in wider society.</p>	<p>Sources in text</p>	
<p><b>C. Do you expect the policy to have any positive impact on people with protected characteristics?</b></p>			
	<p><b>Highly Likely</b></p>	<p><b>Probable</b></p>	<p><b>Possible</b></p>
<p><b>General</b></p>	<p>The development of local community based universal services offers support according to need to strengthen families. Changes to the care system are to achieve better outcomes for some of our most vulnerable young people.</p>		
<p><b>Sex</b></p>	<p>The proposed changes are for all children and young people irrespective of gender. Some of the changes to services for vulnerable young people. The review of the Young Women's Centre is part of the workstream to improve intensive services for young people on the edge of care.</p>		
<p><b>Gender Reassignment</b></p>		<p>The development of local community based family support services will improve resources and capacity may improve provision for young people who consider themselves to be Transgender.</p>	
<p><b>Race</b></p>		<p>The development of local community based family support services will improve resources and capacity may improve provision for local ethnic communities.</p>	
<p><b>Disability</b></p>	<p>Improvement to self-directed support will have more independence and choice of the type of support they want. The development of local community based family support services will improve resources and capacity may improve provision for local ethnic communities.</p>		

<b>Sexual Orientation</b>		The development of local community based family support services will improve resources and capacity may improve provision for young people who consider themselves to be LGBTI.	
<b>Religion and Belief</b>		The development of local community based family support services will improve resources and capacity may improve provision for local faith-based groups.	
<b>Age</b>	Children and young people who would otherwise experience poor outcomes, such as: young children where the family issues would affect the development and wellbeing of the child, disabled children, care experienced children and young people, etc. will experience more targeted interventions and support.		
<b>Marriage and Civil Partnership</b>		The development of local community based family support services will improve resources and capacity may improve provision for all.	
<b>Pregnancy and Maternity</b>	Better supports and identifying families that need support earlier will be the key to our prevention strategy. The development of local community based family support services will improve resources and capacity may improve provision for all.		
<b>Social and Economic Status</b>	Key to the transformation programme is to strengthen families living in the most vulnerable neighbourhoods. The changes are focused on delivering better outcomes for all children and young people. This agenda has been driven by the deprivation that exists in the City.		
<b>Other marginalised groups (homeless, addictions, asylum seekers/refugees, travellers, ex-offenders)</b>	The development of local community based family support services will improve resources and capacity may improve provision for all. Our proposals to modernise continuing care and aftercare support for young people who have experienced care will focus on improving outcomes for these young people so that they more into positive destinations, such as employment, training or tertiary education and prevent them becoming homeless, address their addiction issues and promote their inclusion in wider society.		
<b>D. Do you expect the policy to have any negative impact on people with protected characteristics?</b>			
	<b>Highly Likely</b>	<b>Probable</b>	<b>Possible</b>

<b>General</b>			No
<b>Sex</b>			No
<b>Gender Reassignment</b>			No
<b>Race</b>			No disproportionate impact.
<b>Disability</b>			A simpler and less bureaucratic process should help disabled children, young people and their parents/carers. As part of the transformation programme detailed consideration will be given by managers to how the care and support of young people with complex needs (such as physical disabilities, learning disabilities and mental health problems) who may have to remain in residential accommodation can be improved.
<b>Sexual Orientation</b>			No negative impact perceived.
<b>Religion and Belief</b>			No. Services and support being proposed is for all children and young people irrespective of faith or belief.
<b>Age</b>			NO
<b>Marriage and Civil Partnership</b>			No
<b>Pregnancy and Maternity</b>			No
<b>Social and Economic Status</b>			No. Social deprivation is a key factor in the move to providing more local based services.
<b>Other marginalised groups (homeless, addictions, asylum seekers/refugees,</b>			No

travellers, ex-offenders			
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