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NHS Greater Glasgow and Clyde
Equality Impact Assessment Tool

Equality Impact Assessment is a legal requirement as set out in the Equality Act (2010) and the Equality Act 2010 (Specific Duties)(Scotland) regulations 2012 and may be used as evidence for cases referred for further investigation for compliance issues. Please refer to the EQIA Guidance Document while completing this form. Please note that prior to starting an EQIA all Lead Reviewers are required to attend a Lead Reviewer training session or arrange to meet with a member of the Equality and Human Rights Team to discuss the process. Please contact CITAdminTeam@ggc.scot.nhs.uk for further details or call 0141 2014560.

Name of Policy/Service Review/Service Development/Service Redesign/New Service:

Glasgow's Family Support Strategy 2020-2023

Is this a: Current Service Service Development Service Redesign New Service New Policy Policy Review

Description of the service & rationale for selection for EQIA: (Please state if this is part of a Board-wide service or is locally driven).

What does the service or policy do/aim to achieve? Please give as much information as you can, remembering that this document will be published in the public domain and should promote transparency.

Glasgow's Family Support Strategy 2020-2023 sets out a vision for family support delivered against four key priority areas:

- All family support activity delivered by the Children Service's Partnership and external partners will be aligned across the city by year 2
- All funding of family support services by the Children Service's Partnership and external funders will be strategically aligned by year 3
- Our Children Service's Partnership will invest with universal, early intervention and intensive family support services, citywide by Year 1 to strengthen the family support infrastructure,
- Establish a neighbourhood approach to family support, citywide by year 3

The strategy details the aims, priorities, and action required, who is responsible for delivering and the timescale to be delivered against. The strategy articulates a proposed change in the way family support services are delivered across Glasgow City, including a review of where formal support from GCHSCP engages with families.

HSCP currently have 12,000+ open cases to statutory social work (Carefirst CLA December 2019), we are aware not all of these families require statutory support intervention therefore this strategy details how we intend to shift the balance of care from statutory services to a strong family support infrastructure provided by the Third Sector. This shift will ensure families have the right support at the right time whether that be via universal services, family support, intensive family support or statutory support, it will look to deliver support unique to family's needs. Previous research tells us currently there may be about 30% of cases that have the potential to shift over, provided there are appropriate support services in place. This strategy demonstrates our belief that the best mechanism to deliver family support is via a robust neighbourhood approach. HSCP will continue to invest within universal services. We plan to commission two family support frameworks covering Early Intervention and Prevention and Intensive Family Support Services. These initiatives will assist in delivering the four key priorities outlined within this strategy and provide a platform to strengthen the family support provision citywide and secure better outcomes for our families, parents, carers and above all our children and young people. Working in partnership with families, professionals and funders throughout the implementation of the family support strategy to ensure we get it right for every child and

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family in delivering family support services.

As part of this process, The Children's Services Partnership undertook a mapping exercise and identified 80 third sector organisations that provide 94 distinct services delivering early intervention and prevention services to families. The majority of identified organisations had a focus on working with families with pre-school age children. Building on this the Partnership held focus groups with professionals to better understand the challenges, strengths and gaps in current service provision. This exercise highlighted 6 key areas of need within Glasgow – **Neglect, Gender Based Violence, Poverty, Mental Health, Children affected by disabilities and/or with additional support needs and asylum seeking populations.**

Following this stage, the Partnership undertook an exercise to engage with families via the 3rd Sector Family Support Group to ask 'what good family support looked like to them'. Feedback articulated a need to offer flexible support and that a 'one size fits all' model would not work in relation to commissioning services. Respondents were clear that any support package must be family centred and focus on needs to make families feel safe, listened to and not judged. There was an emphasis on building confidence and trust in relationships as part of a family support package. This question was also asked of statutory and 3rd sector professionals with similar feedback provided, centred on the need to provide non-judgemental services that empowered families to stay together and thrive. Respondents stated that staff involved in delivering family support should be knowledgeable, highly trained and have the ability to deliver a holistic assessment of need that could make connections within the Children Services Partnership to address need.

In summary, consultation delivered 10 guiding principles of family support:

1. Engaging
2. Collaborating
3. Communicating
4. Planning
5. Flexibility
6. Assessing
7. Knowledgeable
8. Empowering
9. Evaluating
10. Respectful

Families were also engaged via written consultation using easy to understand leaflets coordinated via 10 3rd sector organisations. The 21 responses returned from the organisations captured the views of 140 individuals.

Why was this service or policy selected for EQIA? Where does it link to organisational priorities? (If no link, please provide evidence of proportionality, relevance, potential legal risk etc.)

Glasgow's Family Support Strategy represents a change in the way family support services are delivered in Glasgow City. As with any major service change, GHSCP is

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determined to understand and respond positively to any possible unintended detriment the proposed strategy and subsequent service models may create.

Who is the lead reviewer and when did they attend Lead reviewer Training? (Please note the lead reviewer must be someone in a position to authorise any actions identified as a result of the EQIA)

Name: Mike Burns Assistant Chief Officer, Children Services	Date of Lead Reviewer Training: December 2019
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Please list the staff involved in carrying out this EQIA

(Where non-NHS staff are involved e.g. third sector reps or patients, please record their organisation or reason for inclusion):

Alison Murphy Family Support Planning Group Third Sector Forum Family Support Sub Group

	<i>Example</i>	Service Evidence Provided	Possible negative impact and Additional Mitigating Action Required
1. What equalities information is routinely collected from people currently using the service or affected by the policy? If this is a new service proposal what data do you have on proposed service user groups. Please note any barriers to collecting this data in your submitted evidence and an explanation for any protected characteristic data omitted.	<i>A sexual health service collects service user data covering all 9 protected characteristics to enable them to monitor patterns of use.</i>	HSCP Children Services capture protected characteristics within the Carefirst and EMIS systems, to allow us to monitor the uptake of health and social care services. This also allows us to deliver services to specific groups and /or minority groups. We currently have 12,000+ open cases known to social work within Glasgow, we capture protected characteristics for these individuals. Going forward any services delivery models designed/commissioned will capture equality information on service users to ensure analysis of service uptake aligned to the priority groups and wider care user groups.	
	<i>Example</i>	Service Evidence Provided	Possible negative impact and Additional Mitigating Action Required

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<p>2.</p>	<p>Please provide details of how data captured has been/will be used to inform policy content or service design.</p> <p>Your evidence should show which of the 3 parts of the General Duty have been considered (tick relevant boxes).</p> <p>1) Remove discrimination, harassment and victimisation <input type="checkbox"/></p> <p>2) Promote equality of opportunity <input checked="" type="checkbox"/></p> <p>3) Foster good relations between protected characteristics <input type="checkbox"/></p> <p>4) Not applicable <input type="checkbox"/></p>	<p><i>A physical activity programme for people with long term conditions reviewed service user data and found very low uptake by BME (Black and Minority Ethnic) people. Engagement activity found promotional material for the interventions was not representative. As a result an adapted range of materials were introduced with ongoing monitoring of uptake. (Due regard promoting equality of opportunity)</i></p>	<p>Research undertaken by Glasgow Families Together Partnership identified that 30% of open cases within the North East, did not require Social Work intervention, and however did require a form of supportive intervention from the third sector.</p> <p>Research undertaken in the development of the family support strategy highlighted four key challenges to accessing family support:</p> <ol style="list-style-type: none"> 1. Out of Hours Provision – the provision currently provided does not sufficiently meet the needs of families at crisis point. 2. Referral Criteria – families are often not able to access services due to restrictions on funding criteria. 3. Funding – there was concerns surrounding sustainability and long term service provision across the city. 4. Service Model & Capacity- a wide coverage of services where identified however the services that were required by families have reached capacity. <p>Research also highlighted the wide ranging components of the support available to families:</p> <ol style="list-style-type: none"> 1. Income maximisation service and activities 2. Direct access to financial and material supports 3. Health improvement activities 4. Specialist advice and advocacy 5. Employment support and opportunities 6. Structured family play activities. 7. Intensive family support tailored to individual families 8. Parenting skills training/education 9. Family mediation/restorative practice 10. Respite 11. Peer support and befriending 12. Therapeutic support and interventions. <p>The Family Support Strategy outlines two commissioning frameworks:</p>	<p>We are aware that to successfully implement the Family Support Strategy at a neighbourhood level, we require to use our data most effectively using a variety of sources to map out each of the 56 neighbourhoods in Glasgow in terms of service provision, funding arrangements to effectively invest in services within those areas.</p> <p>In order to deliver against this we are recruiting two data analysts to work on our children services data.</p> <p>We want to ensure that services are delivered that are faith and culturally sensitive. We want services to be marketed and provided in a method that encourages groups to use them and feel fully supported.</p>
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			<ul style="list-style-type: none"> • Early Intervention Family Support (focuses on pre-birth to 12 year olds and their families) • Intensive Family Support (focuses on 12+ year olds and their families) <p>Both frameworks will take into account all protected characteristics within the tendering and commissioning phases of the frameworks. The Frameworks will also take into account key challenge and component of support identified. HSCP Commissioning will ensure that Third Sector Providers successful in the tendering process adhere to NHSGG&C and GCC Equality Policies when delivering and reporting on services.</p> <p>Due to the research conducted in the development in the strategy, HSCP have invested an additional £1.98m in the family support infrastructure citywide for 2019/20. This was to mitigate the identified gaps and challenges whilst the Commissioning Frameworks were being developed.</p>	
	<i>Example</i>	Service Evidence Provided	Possible negative impact and Additional Mitigating Action Required	
3.	<p>How have you applied learning from research evidence about the experience of equality groups to the service or Policy?</p> <p>Your evidence should show which of the 3 parts of the General Duty have been considered (tick relevant</p>	<p><i>Looked after and accommodated care services reviewed a range of research evidence to help promote a more inclusive care environment. Research suggested that young LGBT+ people had a disproportionately difficult time through</i></p>	<p>Research was undertaken to map out the current service provision of family support across the city. The mapping questionnaire took into account protected characteristics with specific emphasis on age, race, disability, and maternity/pregnancy. Looking at criteria such as funding and how families access services. In addition Third Sector Providers were asked to evidence How does your service promote inclusion?</p> <p>The Third Sector Family Support Sub Group engaged with their families throughout the development of the strategy. There is a</p>	

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<p>boxes).</p> <p>1) Remove discrimination, harassment and victimisation <input type="checkbox"/></p> <p>2) Promote equality of opportunity <input checked="" type="checkbox"/></p> <p>3) Foster good relations between protected characteristics <input type="checkbox"/></p> <p>4) Not applicable <input type="checkbox"/></p>	<p><i>exposure to bullying and harassment. As a result staff were trained in LGBT+ issues and were more confident in asking related questions to young people. (Due regard to removing discrimination, harassment and victimisation and fostering good relations).</i></p>	<p>wide range of Third Sector Providers within this group with specialisms in gender based violence, addictions, holistic family support, nursery provision, play asylum seeking population, parenting/lone parents, intensive family support and disabilities. Aberlour , Children 1st, 3D Drumchapel, Crossreach, Stepping Stones for Families, One Parent Families Scotland, HomeStart Glasgow South, HomeStart Glasgow North, Scottish Childminding Association, Quarriers, Parent Network Scotland, Barnardos, Equal Say, Youth Community Support Agency, Task Childcare, Scottish Refugee Council, Includem and Action for Children.</p> <p>From the research and engagement with families; six areas of needs were identified: Neglect, Gender Based Violence, Poverty, Mental Health, Children affected by disabilities and/or with additional support needs and Asylum seeking population.</p> <p>Family Support Principles were developed in conjunction with families and third sector, this details how family support should be delivered, protected characteristics should also be taken into account. Both aligned commissioning tender frameworks will ensure Protected characteristics and principles are adhered to in service design, delivery and improvement.</p> <p>Consultation with families was carried out by the Third Sector Forum on the Family Support Strategy a leaflet was created and the consultation facilitated by Third Sector Professionals in 121 or group settings. The Third Sector Providers</p> <p>There were 21 responses received from 10 Third Sector Agencies, these 21 responses reached a total of 140 individuals who gave their views on the family support strategy. These individuals were a mixture of teenagers, families, parents and carers, with their views captured in either a group or one to one setting. There was a positive response to the strategy however, there was an emphasis on how to make the strategy more</p>	
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			<p>accessible to access. The Third Sector Agencies that facilitated this consultation offered a wide perspective on families with specialism in gender based violence, family support, lone parents, and asylum seeking population, disabilities and intensive family support.</p> <p>The online consultation was open for a four week period from 29th May 2019 to 28th June 2019. A total of 36 completed responses were captured from a wide variety of organisations including Geeza Break, Glasgow Association of Mental Health (GAMH), and staff within the Health and Social Care Partnership and Education services. Please see appendix 6.2 for a table of results. The general consensus was agreement on the purpose, vision, strengths, areas of need and priorities. The common themes that emerged from the online consultation included the emphasis to focus on families' needs as a holistic approach, a positive view of co-production with the third sector and a clear focus on how to improve lives for children and families. Alignment of funding, activities and strategies were also felt to be important. Adverse Childhood Experiences and Addictions were both highlighted as areas of need within the city that the strategy should make reference too.</p> <p>.</p>	
	Example	Service Evidence Provided	Possible negative impact and Additional Mitigating Action Required	
4.	<p>Can you give details of how you have engaged with equality groups with regard to the service review or policy development? What did this engagement tell you about user experience and how was this information</p>	<p><i>A money advice service spoke to lone parents (predominantly women) to better understand barriers to accessing the service. Feedback included concerns about waiting times at the drop</i></p>	<p>The Third Sector Family Support Sub Group engaged with their Research was undertaken to map out the current service provision of family support across the city. The mapping questionnaire took into account protected characteristics with specific emphasis on age, race, disability, and maternity/pregnancy. Looking at criteria such as funding and how families access services. In addition Third Sector Providers were asked to evidence How does your service promote</p>	<p>HSCP will ensure that the two family support commissioning tender frameworks will adhere to the protected characteristic promoting equality and transparency.</p>

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<p>used?</p> <p>Your evidence should show which of the 3 parts of the General Duty have been considered (tick relevant boxes).</p> <p>1) Remove discrimination, harassment and victimisation <input type="checkbox"/></p> <p>2) Promote equality of opportunity <input type="checkbox"/></p> <p>3) Foster good relations between protected characteristics <input type="checkbox"/></p> <p>4) Not applicable <input type="checkbox"/></p>	<p><i>in service, made more difficult due to child care issues. As a result the service introduced a home visit and telephone service which significantly increased uptake.</i></p> <p><i>(Due regard to promoting equality of opportunity)</i></p> <p><i>* The Child Poverty (Scotland) Act 2017 requires organisations to take actions to reduce poverty for children in households at risk of low incomes.</i></p>	<p>inclusion?</p> <p>The Third Sector Family Support Sub Group engaged with their families throughout the development of the strategy. There is a wide range of Third Sector Providers within this group with specialisms in gender based violence, addictions, holistic family support, nursery provision, play asylum seeking population, parenting/lone parents, intensive family support and disabilities. Aberlour , Children 1st, 3D Drumchapel, Crossreach, Stepping Stones for Families, One Parent Families Scotland, HomeStart Glasgow South, HomeStart Glasgow North, Scottish Childminding Association, Quarriers, Parent Network Scotland, Barnardos, Equal Say, Youth Community Support Agency, Task Childcare, Scottish Refugee Council, Includem and Action for Children.</p> <p>From the research and engagement with families; six areas of needs were identified: Neglect, Gender Based Violence, Poverty, Mental Health, Children affected by disabilities and/or with additional support needs and Asylum seeking population.</p> <p>Family Support Principles were developed in conjunction with families and third sector, this details how family support should be delivered, protected characteristics should also be taken into account. Both aligned commissioning tender frameworks will ensure Protected characteristics and principles are adhered to in service design, delivery and improvement.</p> <p>Consultation with families was carried out by the Third Sector Forum on the Family Support Strategy a leaflet was created and the consultation facilitated by Third Sector Professionals in 121 or group settings. The Third Sector Providers</p> <p>There were 21 responses received from 10 Third Sector Agencies, these 21 responses reached a total of 140 individuals who gave their views on the family support strategy. These</p>	
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			<p>individuals were a mixture of teenagers, families, parents and carers, with their views captured in either a group or one to one setting. There was a positive response to strategy however, there was an emphasis on how to make the strategy more accessible to access. The Third Sector Agencies that facilitated this consultation offered a wide perspective on families with specialism in gender based violence, family support, lone parents, and asylum seeking population, disabilities and intensive family support.</p> <p>The online consultation was open for a four week period from 29th May 2019 to 28th June 2019. A total of 36 completed responses were captured from a wide variety of organisations including Geeza Break, Glasgow Association of Mental Health (GAMH), and staff within the Health and Social Care Partnership and Education services. Please see appendix 6.2 for a table of results. The general consensus was agreement on the purpose, vision, strengths, areas of need and priorities. The common themes that emerged from the online consultation included the emphasis to focus on families' needs as a holistic approach, a positive view of co-production with the third sector and a clear focus on how to improve lives for children and families. Alignment of funding, activities and strategies were also felt to be important. Adverse Childhood Experiences and Addictions were both highlighted as areas of need within the city that the strategy should make reference too.</p>	
		Example	Service Evidence Provided	Possible negative impact and Additional Mitigating Action Required
5.	Is your service physically accessible to everyone? If this is a policy that impacts on movement of service users through areas are	<i>An access audit of an outpatient physiotherapy department found that users were required to negotiate 2 sets of heavy</i>	The Family Support Strategy covers all universal, early intervention and intensive family support services. We recognise that a one size fits all approach will not work within family support therefore a wide range of services will be provided via universal services (health visiting and education), early	

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	<p>there potential barriers that need to be addressed?</p> <p>Your evidence should show which of the 3 parts of the General Duty have been considered (tick relevant boxes).</p> <p>1) Remove discrimination, harassment and victimisation <input type="checkbox"/></p> <p>2) Promote equality of opportunity <input type="checkbox"/></p> <p>3) Foster good relations between protected characteristics. <input type="checkbox"/></p> <p>4) Not applicable <input type="checkbox"/></p>	<p><i>manual pull doors to access the service. A request was placed to have the doors retained by magnets that could deactivate in the event of a fire. (Due regard to remove discrimination, harassment and victimisation).</i></p>	<p>intervention and intensive family support.</p> <p>The two commissioning frameworks, which will focus on early intervention and intensive family support will ensure that services are physically accessible to all and then any barriers to accessing these services such as transport costs be minimised.</p> <p>Implementing a neighbourhood approach will aid with the accessibility of family support within communities.</p>	
	<p><i>Example</i></p>	<p>Service Evidence Provided</p>	<p>Possible negative impact and Additional Mitigating Action Required</p>	
<p>6.</p>	<p>How will the service change or policy development ensure it does not discriminate in the way it communicates with service users and staff?</p> <p>Your evidence should show which of the 3 parts of the General Duty have been considered (tick relevant</p>	<p><i>Following a service review, an information video to explain new procedures was hosted on the organisation's YouTube site. This was accompanied by a BSL signer to explain service changes to Deaf service users.</i></p>	<p>There has been continual engagement within partners including Third Sector, Education, Glasgow Life and HSCP in the development of the draft strategy. Forty families engaged with the development of the draft Strategy in relation to their thoughts on what good family support looks like.</p> <p>Engagement has been undertaken with each of the Children's Services Locality Planning Groups and North East Directory launch, to provide an overview of the Strategy and to encourage the completion of the online consultation. The views within the locality planning groups have been largely positive with a keen</p>	<p>Continued engagement of the Family Support Strategy is planned with the third sector and families. The strategy details to requirement of families to be actively involved in the design, delivery and improvement of family support services.</p> <p>HSCP will ensure the Family Support Strategy is available in accessible format for all including other</p>

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<p>boxes).</p> <p>1) Remove discrimination, harassment and victimisation <input type="checkbox"/></p> <p>2) Promote equality of opportunity <input type="checkbox"/></p> <p>3) Foster good relations between protected characteristics <input type="checkbox"/></p> <p>4) Not applicable <input type="checkbox"/></p> <p>The British Sign Language (Scotland) Act 2017 aims to raise awareness of British Sign Language and improve access to services for those using the language. Specific attention should be paid in your evidence to show how the service review or policy has taken note of this.</p>	<p><i>Written materials were offered in other languages and formats.</i></p> <p><i>(Due regard to remove discrimination, harassment and victimisation and promote equality of opportunity).</i></p>	<p>interest on how the Strategy will be progressed, implemented and delivered, with particular interest surrounding the commissioning of services.</p> <p>An event on the Family Support Strategy was hosted by the Citywide Forum to allow third sector providers to hear about the Strategy's development, the content of the draft document and to help shape and inform the Strategy's development via their feedback and comments.</p> <p>Several one to one meetings have also taken place with services such as Child Poverty, the Health Improvement Team, Carers and Glasgow Life to ensure their views are captured and represented throughout the Strategy.</p> <p>The online consultation was open for a four week period from 29th May 2019 to 28th June 2019. A total of 36 completed responses were captured from a wide variety of organisations including Geeza Break, Glasgow Association of Mental Health (GAMH), and staff within the Health and Social Care Partnership and Education services. Please see appendix 6.2 for a table of results. The general consensus was agreement on the purpose, vision, strengths, areas of need and priorities. The common themes that emerged from the online consultation included the emphasis to focus on families' needs as a holistic approach, a positive view of co-production with the third sector and a clear focus on how to improve lives for children and families. Alignment of funding, activities and strategies were also felt to be important. Adverse Childhood Experiences and Addictions were both highlighted as areas of need within the city that the strategy should make reference too.</p> <p>The Third Sector Forum Family Support Sub Group played a fundamental role in the engagement and consultation of families. Consultation with families was carried out by the Third Sector Forum on the Family Support Strategy a leaflet was created and</p>	<p>languages.</p>
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		<p>the consultation facilitated by Third Sector Professionals in 121 or group settings. The Third Sector Providers</p> <p>There were 21 responses received from 10 Third Sector Agencies, these 21 responses reached a total of 140 individuals who gave their views on the family support strategy. These individuals were a mixture of teenagers, families, parents and carers, with their views captured in either a group or one to one setting. There was a positive response to strategy however, there was an emphasis on how to make the strategy more accessible to access. The Third Sector Agencies that facilitated this consultation offered a wide perspective on families with specialism in gender based violence, family support, lone parents, and asylum seeking population, disabilities and intensive family support.</p>	
7	Protected Characteristic	Service Evidence Provided	Possible negative impact and Additional Mitigating Action Required
(a)	<p>Age</p> <p>Could the service design or policy content have a disproportionate impact on people due to differences in age? (Consider any age cut-offs that exist in the service design or policy content. You will need to objectively justify in the evidence section any segregation on the grounds of age promoted by the policy or included in the service design).</p> <p>Your evidence should show which of the 3 parts of the General Duty have been considered (tick relevant boxes).</p> <p>1) Remove discrimination, harassment and victimisation <input type="checkbox"/></p>	<p>We would define “family” as being children, young people, lone parent, parents, carers or any other relatives (providing a caring role).</p> <p>The Strategy covers children from pre-birth to 18 and their families. In relation to our kinship population the strategy covers universal, early intervention and intensive family support services that Kinship Carers can access. In addition to this we also have a separate commissioning tender framework with Third Sector providers delivering family support for kinship carers across the city.</p> <p>The two commissioning tender frameworks will provide age specific support:</p> <ul style="list-style-type: none"> • Early Intervention Family Support (focuses on pre-birth to 12 year olds and their families) 	

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	<p>2) Promote equality of opportunity <input type="checkbox"/></p> <p>3) Foster good relations between protected characteristics. <input type="checkbox"/></p> <p>4) Not applicable <input type="checkbox"/></p>	<ul style="list-style-type: none"> Intensive Family Support (focuses on 12+ year olds and their families) <p>The Strategy details our commitment to involved families within the design, neighbourhood service delivery and improvement of services. Children and young people impacted by disabilities, mental health and social economic factors will receive more targeted support.</p>	
(b)	<p>Disability</p> <p>Could the service design or policy content have a disproportionate impact on people due to the protected characteristic of disability?</p> <p>Your evidence should show which of the 3 parts of the General Duty have been considered (tick relevant boxes).</p> <p>1) Remove discrimination, harassment and victimisation <input type="checkbox"/></p> <p>2) Promote equality of opportunity <input type="checkbox"/></p> <p>3) Foster good relations between protected characteristics. <input type="checkbox"/></p> <p>4) Not applicable <input type="checkbox"/></p>	<p>6% of children aged 0-15 years old identify as having a disability in Glasgow this is based on the 2011 census¹. A lack of support for children, young people and families affected by disability was identified as a key service gap. A service model that delivers respite to families and wrap around support to families. Staff who are trained and knowledgeable in health conditions, disabilities and additional support needs are crucial to meeting this demand.</p> <p>Our engagement with families, third sector and statutory sector identified 6 areas of need: Neglect, Gender Based Violence, Poverty, Mental Health, Children affected by disabilities and/or with additional support needs and Asylum seeking population.</p> <p>Both Early Intervention and Intensive Family Support Frameworks will address disabilities and additional support needs within their tender framework. Embedding inclusive and flexible practice that offers a wraparound support aimed at empowering disabled children and young people. Whilst providing a supportive and enabling environment for their families.</p>	<p>The Third Sector Forum facilitated the engagement and consultation with families, in doing so they made reasonable adjustments to ensure children and young people with disabilities and their families could contribute to development of strategy.</p>
	<p>Protected Characteristic</p>	<p>Service Evidence Provided</p>	<p>Possible negative impact and Additional Mitigating Action Required</p>
(c)	<p>Gender Identity</p>	<p>The development of local community based family support services will improve resources and capacity and may improve</p>	

¹ [Understanding Glasgow Indicators Project](#)

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	<p>Could the service change or policy have a disproportionate impact on people with the protected characteristic of gender identity?</p> <p>Your evidence should show which of the 3 parts of the General Duty have been considered (tick relevant boxes).</p> <p>1) Remove discrimination, harassment and victimisation <input type="checkbox"/></p> <p>2) Promote equality of opportunity <input type="checkbox"/></p> <p>3) Foster good relations between protected characteristics <input type="checkbox"/></p> <p>4) Not applicable <input type="checkbox"/></p>	<p>provision for young people who consider themselves to be transgender.</p> <p>Both aligned commissioning tender frameworks will ensure that there is an understanding that young people who identify as trans gender or who are undergoing gender reassignment are supported along with their families.</p>	
	<p>Protected Characteristic</p>	<p>Service Evidence Provided</p>	<p>Possible negative impact and Additional Mitigating Action Required</p>
<p>(d)</p>	<p>Marriage and Civil Partnership</p> <p>Could the service change or policy have a disproportionate impact on the people with the protected characteristics of Marriage and Civil Partnership?</p> <p>Your evidence should show which of the 3 parts of the General Duty have been considered (tick relevant boxes).</p> <p>1) Remove discrimination, harassment and</p>	<p>No risk to this protected characteristic.</p>	



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	<p>victimisation</p> <p>2) Promote equality of opportunity <input type="checkbox"/></p> <p>3) Foster good relations between protected characteristics <input type="checkbox"/></p> <p>4) Not applicable <input type="checkbox"/></p>		
(e)	<p>Pregnancy and Maternity</p> <p>Could the service change or policy have a disproportionate impact on the people with the protected characteristics of Pregnancy and Maternity?</p> <p>Your evidence should show which of the 3 parts of the General Duty have been considered (tick relevant boxes).</p> <p>1) Remove discrimination, harassment and victimisation <input type="checkbox"/></p> <p>2) Promote equality of opportunity <input type="checkbox"/></p> <p>3) Foster good relations between protected characteristics. <input type="checkbox"/></p> <p>4) Not applicable <input type="checkbox"/></p>	<p>The Family Support Strategy covers from pre-birth to 18 years old, the delivery of services within local neighbourhoods, will improve resources and capacity. The strategy also highlights perinatal mental health as an area of need within the city, HSCP will ensure to work collaboratively with other funders to ensure services are put in place to address this need.</p>	
	<p>Protected Characteristic</p>	<p>Service Evidence Provided</p>	<p>Possible negative impact and Additional Mitigating Action Required</p>
(f)	<p>Race</p> <p>Could the service change or policy have a</p>	<p>Glasgow currently has a significant and growing asylum seeking population, settling into the city. Some of these children, young people and their families will have experienced trauma. In addition poverty will</p>	<p>Consultation and engagement with Scottish Refugee Council via the Third Sector Forum will continue.</p>

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	<p>disproportionate impact on people with the protected characteristics of Race?</p> <p>Your evidence should show which of the 3 parts of the General Duty have been considered (tick relevant boxes).</p> <p>1) Remove discrimination, harassment and victimisation <input type="checkbox"/></p> <p>2) Promote equality of opportunity <input type="checkbox"/></p> <p>3) Foster good relations between protected characteristics <input type="checkbox"/></p> <p>4) Not applicable <input type="checkbox"/></p>	<p>present a significant challenge to these families who have no recourse to public funds and unable to access employment opportunities. Further work is required in relation to fully exploring the needs and experiences of asylum seeking children, young people and families. A holistic approach to identifying need which is child/family centred would maximise outcomes for children, young people and their families. We also need to make sure services are accessible for families whereby English is not their first language.</p> <p>Both aligned commissioning frame works will ensure families are support via the use of translation services and support services that understand their culture and beliefs.</p>	
(g)	<p>Religion and Belief</p> <p>Could the service change or policy have a disproportionate impact on the people with the protected characteristic of Religion and Belief?</p> <p>Your evidence should show which of the 3 parts of the General Duty have been considered (tick relevant boxes).</p> <p>1) Remove discrimination, harassment and victimisation <input type="checkbox"/></p> <p>2) Promote equality of opportunity <input type="checkbox"/></p> <p>3) Foster good relations between protected characteristics. <input type="checkbox"/></p> <p>4) Not applicable <input type="checkbox"/></p>	<p>There is no direct link between religion and belief with the Family Support Strategy. However given our family centred delivery, we will ensure that people's individual beliefs are respecting delivering family support services.</p>	

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	Protected Characteristic	Service Evidence Provided	Possible negative impact and Additional Mitigating Action Required
(h)	<p>Sex</p> <p>Could the service change or policy have a disproportionate impact on the people with the protected characteristic of Sex?</p> <p>Your evidence should show which of the 3 parts of the General Duty have been considered (tick relevant boxes).</p> <p>1) Remove discrimination, harassment and victimisation <input type="checkbox"/></p> <p>2) Promote equality of opportunity <input type="checkbox"/></p> <p>3) Foster good relations between protected characteristics. <input type="checkbox"/></p> <p>4) Not applicable <input type="checkbox"/></p>	<p>We acknowledge the diverse makeup of our families. We will ensure that lone parents are targeted in the aligned commissioning tender framework providing support to this group. This group have also been defined as a target area within the child poverty action report.</p> <p>There is a disproportionate impact on women in relation to gender based violence, women are most likely to carry the caring responsibility. Both aligned commissioning tender frameworks will ensure successful provider will deliver a sensitive trauma informed response to the victims of gender based violence.</p>	
(i)	<p>Sexual Orientation</p> <p>Could the service change or policy have a disproportionate impact on the people with the protected characteristic of Sexual Orientation?</p> <p>Your evidence should show which of the 3 parts of the General Duty have been considered (tick relevant boxes).</p>	<p>Both of the aligned commissioning tender frameworks will take into account the protected characteristic of sexual orientation when commissioning services to work with families that may include same sex partners or young people who have the sexual orientation as a protected characteristic.</p>	

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	<p>1) Remove discrimination, harassment and victimisation <input type="checkbox"/></p> <p>2) Promote equality of opportunity <input type="checkbox"/></p> <p>3) Foster good relations between protected characteristics. <input type="checkbox"/></p> <p>4) Not applicable <input type="checkbox"/></p>		
	<p>Protected Characteristic</p>	<p>Service Evidence Provided</p>	<p>Possible negative impact and Additional Mitigating Action Required</p>
<p>(j)</p>	<p>Socio – Economic Status & Social Class</p> <p>Could the proposed service change or policy have a disproportionate impact on the people because of their social class or experience of poverty and what mitigating action have you taken/planned?</p> <p>The Fairer Scotland Duty (2018) places a duty on public bodies in Scotland to actively consider how they can reduce inequalities of outcome caused by socioeconomic disadvantage in strategic planning. You should evidence here steps taken to assess and mitigate risk of exacerbating inequality on the ground of socio-economic status.</p>	<p>High levels of deprivation and welfare reform have significantly increased the levels of child poverty in Glasgow, with some areas having 47% of their children living in poverty², with some wards experiencing nearly 60% of child poverty. The Local Child Poverty Report (LCAPR) was compiled as a response from Glasgow to the duty placed by the Child Poverty (Scotland) Act 2017. The LCAPR details the work undertaken by partners in order to mitigate child poverty within Glasgow. There are six areas the LCAPR focuses on in relation to poverty: Lone Parents, Families where a members of the household is disabled, Larger Families, Ethnic Minority Families, and Families where the youngest child is under 1 year old and Families where mothers are aged 25 years or younger.</p> <p>These six areas align to what was coming through within the focus groups for the development of the family support strategy. These groups are particular prevalent in Glasgow with 40% of households being lone parents and 23% of Households reporting a longer term health condition or disability. It is anticipate that by 2021 50,000 children Glasgow with live in Poverty³.</p> <p>To mitigate the impact of child poverty it is vital that Family Support</p>	

² [The Glasgow Indicator Project](#)

³ Glasgow Child Poverty Action Plan Report.

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		<p>Services provide income maximisation, assistance to reduce living costs, digital inclusion and are able to facilitate/signpost to access affordable housing, child care and employability service.</p> <p>The Family Support Strategy looks to strengthen the provision of third sector services, invest within neighbourhood services, and divert families away from statutory social work.</p> <p><u>The Nuffield Study (2014) “Inequalities in child welfare intervention rates: deprivation and identity”⁴</u> highlighted Glasgow’s care experienced children and young people population as having a significantly higher rate than other comparable cities. The study also reinforced the relationship between poverty, inequalities and children and young people population having a care experience. Therefore it is vital that Glasgow focuses on addressing poverty and inequalities when delivering family support. Profiling 56 neighbourhoods in Glasgow in terms of investment, service and funding and the level of need. This will inform what services are required within each neighbourhood.</p> <p>In relation to the Fairer Scotland Duty (2018) both aligned commissioning frameworks will seek to reduce socio-economic disadvantage by ensuring that income maximisation, employability and development opportunities are available to families. Whilst linking with the current offer of family learning from both Education Services and Glasgow Life.</p>	
(k)	<p>Other marginalised groups</p> <p>How have you considered the specific impact on other groups including homeless people, prisoners and ex-offenders, ex-service personnel, people with addictions, people involved in prostitution, asylum seekers & refugees and travellers?</p>	<p>Glasgow currently has a significant and growing asylum seeking population, settling into the city. Some of these children, young people and their families will have experienced trauma. In addition poverty will present a significant challenge to these families who have no recourse to public funds and unable to access employment opportunities. Further work is required in relation to fully exploring the needs and experiences of asylum seeking children, young people and families. A holistic approach to identifying need which is child/family centred would maximise outcomes for children, young people and their families. We also need to make sure services are accessible for</p>	

⁴ Inequalities in Child Welfare intervention rates, deprivation and identity (2014); Nuffield Study.

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		<p>families whereby English is not their first language.</p> <p>Gender Based Violence 33% of Child Protection Registration in Glasgow are due to gender based violence ⁵ throughout the focus groups it was felt that there was a shortage of services that supported the children and young people who experienced gender based violence within their homes due to waiting times and funding of services. Improving accessing to family support services who focus on gender based violence and the support they can provide to the family, children and young people.</p> <p>Mental Health Mental Health was identified as a key area of focus for the strategy in relation to three strands:</p> <ul style="list-style-type: none">• Perinatal Mental Health.• Parental Mental Health.• Child & Adolescent Mental Health. <p>Perinatal Mental Health looking to support the mental health of expectant mother throughout their pregnancy and new families within the first year was identified as an area where services could provide support. This aligns to work undertaken by the Scottish Government in relation perinatal mental health⁶.</p> <p>Parental Mental Health related to how we can best support parents suffering from mental health conditions in order to mitigate the impact of their mental health can have on their children. It is therefore important that we work with families and the teams around these families such as mental health services to support them. It is also vital we align the family support strategy to the work of National Mental Health Strategy.⁷</p> <p>Child & Adolescent Mental Health in relation to those children and</p>	
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⁵ Carefirst Child Projection Figures March 2019.

⁶ [Perinatal Mental Health: Needs Assessment & Recommendations \(2019\) Scottish Government.](#)

⁷ The National Mental Health Strategy; Glasgow Health & Social Care Partnership.

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		<p>adolescent that are not able to receive a service from Child and Adolescent Mental Health Service (CAMHS), as they do not fulfil criteria, however would benefit from some form of mental health support. An accessible and flexible service for children and young people unable to access CAMHS who are experiencing mental ill health was viewed as a priority.</p>	
<p>8.</p>	<p>Does the service change or policy development include an element of cost savings? How have you managed this in a way that will not disproportionately impact on protected characteristic groups?</p> <p>Your evidence should show which of the 3 parts of the General Duty have been considered (tick relevant boxes).</p> <p>1) Remove discrimination, harassment and victimisation <input type="checkbox"/></p> <p>2) Promote equality of opportunity <input type="checkbox"/></p> <p>3) Foster good relations between protected characteristics. <input type="checkbox"/></p> <p>4) Not applicable <input type="checkbox"/></p>	<p>The Strategy aims to divert families away from statutory social work services and strengthen the third sector infrastructure. In doing so it is anticipated that there will be a reduction in admissions into care and also a rise in children returning to their families from the care environment. This is anticipated to have a financial cost saving which HSCP anticipate will be reinvested within the family support commissioning frameworks.</p>	
		<p>Service Evidence Provided</p>	<p>Possible negative impact and Additional Mitigating Action Required</p>
<p>9.</p>	<p>What investment in learning has been made to prevent discrimination, promote equality of opportunity and foster good relations between protected characteristic groups? As a minimum include recorded completion rates of statutory and mandatory learning programmes (or local equivalent) covering equality, diversity and</p>	<p>Both aligned commissioning frameworks will ensure successful providers recruit staff who are confident and competent when working with diverse need as per each protected characteristic group.</p>	

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	human rights.		
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10. In addition to understanding and responding to legal responsibilities set out in Equality Act (2010), services must pay due regard to ensure a person's human rights are protected in all aspects of health and social care provision. This may be more obvious in some areas than others. For instance, mental health inpatient care or older people's residential care may be considered higher risk in terms of potential human rights breach due to potential removal of liberty, seclusion or application of restraint. However risk may also involve fundamental gaps like not providing access to communication support, not involving patients/service users in decisions relating to their care, making decisions that infringe the rights of carers to participate in society or not respecting someone's right to dignity or privacy.

The Human Rights Act sets out rights in a series of articles – right to Life, right to freedom from torture and inhumane and degrading treatment, freedom from slavery and forced labour, right to liberty and security, right to a fair trial, no punishment without law, right to respect for private and family life, right to freedom of thought, belief and religion, right to freedom of expression, right to freedom of assembly and association, right to marry, right to protection from discrimination.

Please explain in the field below if any risks in relation to the service design or policy were identified which could impact on the human rights of patients, service users or staff.

The Family Support Strategy includes references to the Human Rights Act, Equalities Act and the European Convention of the Rights of the Child. This strategy will uphold the right to respect for private and family life and the right to protection from discrimination.

Please explain in the field below any human rights based approaches undertaken to better understand rights and responsibilities resulting from the service or policy development and what measures have been taken as a result e.g. applying the PANEL Principles to maximise Participation, Accountability, Non-discrimination and Equality, Empowerment and Legality or FAIR* .

The Family Support Strategy has been founded on the principles of participation, accountability, non-discrimination, equity, empowerment and legality. Throughout the development of the city-wide strategy, a focus on engagement has shaped the content and principles of services that empower families to make the right choices at the right time have been reiterated throughout.

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*

- **Facts:** What is the experience of the individuals involved and what are the important facts to understand?
- **Analyse rights:** Develop an analysis of the human rights at stake
- **Identify responsibilities:** Identify what needs to be done and who is responsible for doing it
- **Review actions:** Make recommendations for action and later recall and evaluate what has happened as a result.

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Having completed the EQIA template, please tick which option you (Lead Reviewer) perceive best reflects the findings of the assessment. This can be cross-checked via the Quality Assurance process:

- Option 1: No major change (where no impact or potential for improvement is found, no action is required)
- X Option 2: Adjust (where a potential or actual negative impact or potential for a more positive impact is found, make changes to mitigate risks or make improvements)
- Option 3: Continue (where a potential or actual negative impact or potential for a more positive impact is found but a decision not to make a change can be objectively justified, continue without making changes)
- Option 4: Stop and remove (where a serious risk of negative impact is found, the plans, policies etc. being assessed should be halted until these issues can be addressed)

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11. If you believe your service is doing something that 'stands out' as an example of good practice - for instance you are routinely collecting patient data on sexual orientation, faith etc. - please use the box below to describe the activity and the benefits this has brought to the service. This information will help others consider opportunities for developments in their own services.

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Actions – from the additional mitigating action requirements boxes completed above, please summarise the actions this service will be taking forward.

Date for completion	Who is responsible?(initials)
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Ongoing 6 Monthly Review please write your 6 monthly EQIA review date:

June 2020

Lead Reviewer:

Name Alison Murphy

EQIA Sign Off:

Job Title Senior Officer, Planning & Change, Children Services

Signature A Murphy

Date 18.12.2019

Quality Assurance Sign Off:

Name Alastair Low

Job Title Planning Manager, NHSGGC

Signature

Date 27th Feb 2020

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**NHS GREATER GLASGOW AND CLYDE EQUALITY IMPACT ASSESSMENT TOOL
MEETING THE NEEDS OF DIVERSE COMMUNITIES
6 MONTHLY REVIEW SHEET**

Name of Policy/Current Service/Service Development/Service Redesign:

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Please detail activity undertaken with regard to actions highlighted in the original EQIA for this Service/Policy

		Completed	
		Date	Initials
Action:			
Status:			
Action:			
Status:			
Action:			
Status:			
Action:			
Status:			

Please detail any outstanding activity with regard to required actions highlighted in the original EQIA process for this Service/Policy and reason for non-completion

		To be Completed by	
		Date	Initials
Action:			
Reason:			
Action:			
Reason:			

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Please detail any new actions required since completing the original EQIA and reasons:

		To be completed by	
		Date	Initials
Action:			
Reason:			
Action:			
Reason:			

Please detail any discontinued actions that were originally planned and reasons:

Action:	
Reason:	
Action:	
Reason:	

Please write your next 6-month review date

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Name of completing officer:

Date submitted:

If you would like to have your 6 month report reviewed by a Quality Assuror please e-mail to: alastair.low@ggc.scot.nhs.uk

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