

For more information about the equality impact assessment process in commissioning, please see the EIA Guidance located in **Y:\HULLCCG\Corporate Templates and Forms\Equality and Diversity Information** before completing your EIA.

## Equality Impact Assessment (EIA) - Service Specification

Please briefly describe the service

### **Adult Fostering and Adoption and Medical Assessment / Screening Service**

The purpose of this service is to assist NHS Hull CCG in discharging its duties under Section 11 of the Children Act 2004 (updated by Health and Social Care Act 2012) to safeguard and promote the welfare of children and to cooperate with other organisations and agencies to achieve this.

The aim of the service is to undertake health and medical assessments and screening of prospective and active foster carers and adoptive parents, providing high quality and timely information on the findings of those assessments to Hull City Council (Hull CC) Fostering and Adoption Service to ensure looked after children and those with a care plan of adoption are placed with carers who are safe and able to meet their needs. This will contribute to the improvement in health outcomes for children with a looked after status and ensure the legislative requirements are fulfilled.

This service forms an integrated part of a wider network of health and multi-agency child and family services. It will ensure that those providing foster care and prospective adoptive parents have optimum health status and medically able to fulfil their responsibilities.

This service specification covers the overarching health and medical assessment and screening requirements for those

	providing foster care and prospective adoptive parents.
<b>Name &amp; roles of person / people completing the EIA:</b>	Bernie Dawson, Strategic Lead for Children, Young People and Maternity
<b>Date of assessment:</b>	26.07.2019
<b>Who will be affected by this service / who will be the key beneficiaries?</b>	Prospective and active foster carers and adoptive parents, children who are looked after and/or placed for adoption, Hull City Council.
What <b>data sources</b> do you have about the population, disaggregated by protected characteristic that is relevant to this service specification? (e.g. research, clinical insight, monitoring data, complaints, engagement feedback etc.)	<p><b>Data sources:</b></p> <p><a href="http://www.hullcc.gov.uk/pls/hullpublichealth/jsna2018_s1.html">http://www.hullcc.gov.uk/pls/hullpublichealth/jsna2018_s1.html</a> Hull JSNA 2018</p> <p><a href="https://www.bma.org.uk/-/media/Files/PDFs/.../growingupinuk_may2013.pdf">https://www.bma.org.uk/-/media/Files/PDFs/.../growingupinuk_may2013.pdf</a> Growing up in the UK: BMA 2013</p> <p><a href="https://www.rcpch.ac.uk/sites/default/files/2018-04/state_of_child_health_2017_-_full_report.pdf">https://www.rcpch.ac.uk/sites/default/files/2018-04/state_of_child_health_2017_-_full_report.pdf</a> State of Child Health Report RCPCH – 2017</p> <p>Hull SEND Scorecard/ DfE data (Hull City Council 2019).</p> <p>Hull Looked After Children Annual Report (2019). NHS Hull CCG Adult Fostering and Adoption and Medical Assessment / Screening Service - Performance data 2019</p> <p><a href="https://www.rcn.org.uk/professional-development/publications/pub-005844">https://www.rcn.org.uk/professional-development/publications/pub-005844</a> Fair care for trans patients An RCN guide for nursing and health care professionals Second edition</p> <p><a href="https://static1.squarespace.com/static/58dccb6be3df28ace47ce187/t/593928678419c2c9745a4f62/1496918245819/Trans+Youth+in+Care+-+A+Guide+For+Social+Care+Professionals.pdf">https://static1.squarespace.com/static/58dccb6be3df28ace47ce187/t/593928678419c2c9745a4f62/1496918245819/Trans+Youth+in+Care+-+A+Guide+For+Social+Care+Professionals.pdf</a> Trans Youth In Care - a Toolkit for Social Care Professionals</p>

## Needs and issues

What does this data tell you about the needs or issues affecting people from different protected characteristic groups, relevant to this service?

### General issues

There are an increasing number of children and young people who are legally defined as 'Looked After' by Hull City Council thus increasing demand for foster care and adoptive placements.

It is critical that carers and adoptive parents are in good health in order to fulfil their caring/parenting duties, supporting those vulnerable children and young people to whom they provide care to reach their potential and prevent breakdown of foster care/adoption placements.

Looked after children are more likely to present with ongoing health needs including mental health and long term conditions, complex needs, developmental disorders or disability. The highest number of looked after children are 10-15 years and more likely to have increased vulnerabilities and require health and care support services.

At 31/3/19 there were 797 children looked after by Hull local authority an increase of 39 children from the previous year. Unaccompanied asylum seeking children accounted for 3.3% of the total number of LAC. The reasons for children entering care reflected the national picture recorded for 2017-2018. In the year 1/4/18 – 31/3/19 269 started to be looked after and 231 ceased to be looked after.

In Hull, in 2018/19, the placement type reflected the national picture with 74.8% of children living in foster care placements. There is an increasing number of new and review medicals each year in response to the increased number of children and young people who are becoming looked after. The table below outlines the number of assessments and medicals undertaken in 2018/19.

<b>Number or Assessments/Reports Completed 2018/19</b>	<b>TOTAL</b>
<b>Initial Fostering - Including Medical</b>	81
<b>Initial Fostering -no Medical</b>	8

	<table border="1"> <tr> <td><b>Review Fostering- Including Medical</b></td> <td>155</td> </tr> <tr> <td><b>Review Fostering - No Medical required</b></td> <td>0</td> </tr> <tr> <td><b>Initial Adoption – No medical required</b></td> <td>55</td> </tr> <tr> <td><b>Review Adoption – No medical required</b></td> <td>4</td> </tr> <tr> <td><b>Supported Lodgings - No Medical</b></td> <td>0</td> </tr> <tr> <td><b>Supported Lodgings - including Medical</b></td> <td>8</td> </tr> <tr> <td><b>Kinship Care including Medical</b></td> <td>80</td> </tr> <tr> <td><b>Kinship Care No Medical</b></td> <td>9</td> </tr> <tr> <td><b>Special Guardianship including medical</b></td> <td>27</td> </tr> <tr> <td><b>Special Guardianship No medical</b></td> <td>2</td> </tr> </table>	<b>Review Fostering- Including Medical</b>	155	<b>Review Fostering - No Medical required</b>	0	<b>Initial Adoption – No medical required</b>	55	<b>Review Adoption – No medical required</b>	4	<b>Supported Lodgings - No Medical</b>	0	<b>Supported Lodgings - including Medical</b>	8	<b>Kinship Care including Medical</b>	80	<b>Kinship Care No Medical</b>	9	<b>Special Guardianship including medical</b>	27	<b>Special Guardianship No medical</b>	2	
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<b>Race &amp; nationality</b>	<p>From the 2011 Census Hull remained at 94.1% white with 89.7% of Hull residents White British. Hull’s BME population is diverse with relatively small numbers of people from a wide range of different BME groups. The child health profile (2016) evidences 17.3% of school aged children are of a minority ethnic group.</p> <p>This service is provided to prospective and active foster carers and adoptive parents, irrespective of race.</p>																					
<b>Disability</b>	<p>In Hull 30% of children who are looked after are recorded as having special educational needs and/or disability, and of 539 school age looked after children (5-16years) in the Hull care system 89 pupils (16.5%) are identified as having an Educational, Health and Care Plan (EHCP) as of 31/3/19.</p> <p>There has been a steady and significant increase in the number of children subject to child protection plans since 2012/13 from 330 to 553 in 2018/19. The number of children looked after has continued to rise steadily for 3 years following a period of relative stability, from 695 (March 2017) to 795 (March 2019). Looked after children often enter care with a worse level of health than their peers. They are more likely to have mental health issues, emotional disorders, hyperactivity conditions and autistic spectrum disorders (Mooney et al 2009).</p> <p>This service is provided to prospective and active foster carers and adoptive parents irrespective of disability.</p>																					
<b>Gender / Sex</b>	<p>In Hull 53% of children in care as of 31/3/19 were male and 47% were female which is</p>																					

	<p>reflective of the national picture.</p> <p>This service is provided to all prospective and active foster carers and adoptive parents irrespective of gender/sex.</p>
<b>Gender reassignment</b>	<p>This service is provided to all children and young people irrespective of gender identity, in accordance with the principles of the RCN's guidance about nursing care for gender variant children and young people.</p> <p>There are very limited resources / information available for parents fostering trans / gender variant young people. The National Association of Foster Providers, gives the following advice:  <a href="https://www.nafp.co.uk/blog/fostering-trans-young-people">https://www.nafp.co.uk/blog/fostering-trans-young-people</a></p> <p>With a toolkit for health and caring professionals provided here:  <a href="https://static1.squarespace.com/static/58dcbb6be3df28ace47ce187/t/593928678419c2c9745a4f62/1496918245819/Trans+Youth+in+Care+-+A+Guide+For+Social+Care+Professionals.pdf">https://static1.squarespace.com/static/58dcbb6be3df28ace47ce187/t/593928678419c2c9745a4f62/1496918245819/Trans+Youth+in+Care+-+A+Guide+For+Social+Care+Professionals.pdf</a></p>
<b>Sexual orientation</b>	<p>This service is provided to all prospective and active foster carers and adoptive parents irrespective of sexual orientation.</p>
<b>Religion or belief</b>	<p>This service is provided to all prospective and active foster carers and adoptive parents irrespective of religion or belief.</p>
<b>Age</b>	<p>The population of Hull is 260,240 of which 62,875 (24%) are aged 0-19 years (ONCS 2016). It is estimated there will be a rise of 4.4% of the 0-19 age population by 2025. The NHS Hull CCG GP population is circa 288,000. There are circa 3,500 births each year.</p> <p>The largest numbers of LAC in Hull were within the 10 – 15yr age range.</p> <p>This service is provided to all prospective and active foster carers and adoptive parents aged 18 years and over (legal age for parental responsibility).</p>
<b>Pregnancy and maternity</b>	<p>This service is provided to all female prospective and active foster carers and adoptive parents who are pregnant and require maternity care.</p>
<b>Marriage or civil partnership</b>	<p>This service is provided to all prospective and active foster carers and adoptive parents who are married or in a civil partnership.</p>
<b>Any other relevant groups</b> (e.g. carers,	<p>This service is more likely to provide care and support to looked after children and young</p>

<p>veterans, asylum seekers and refugees, socio-economic disadvantage)</p>	<p>people who are asylum seekers and refugees and those who are socio-economic disadvantaged and prospective and active foster carers and adoptive parents need to responsive to the needs of these groups.</p> <p>Using the Index of Multiple Deprivation (IMD) 2015 score, Hull is the 3rd most deprived local authority out of 326. NHS Hull CCG is ranked as having the 5th most deprived population out of the 209 CCGs.</p> <p>Child poverty (children living in households where income is less than 60% the median household income before housing costs) is high in Hull. Three in ten (31%) of dependent children aged 0-19 years live in relative poverty compared to 19.9% across England (Public Health Outcomes Framework. Data for child poverty 2014).</p> <p>Unaccompanied asylum seeking children accounted for 3.3% of the total number of LAC.</p>
<p><b>How has engagement informed your service specification?</b></p>	<p>Engagement has taken place with the service provider, Hull City Council and interdependent services such as the Community Paediatric medical and Looked After Children Community Health services. Feedback from local service users including Looked after young people and foster carers has informed the development of the service specification.</p>
<p><b>How has engagement reached out to groups representing a diverse range of protected characteristics?</b></p>	<p>Engagement has been inclusive and considered the needs of protected groups.</p>
<p><b>What has been put in place to ensure the accessibility and acceptability of the service design?</b></p>	<p>This service will be delivered predominantly within a clinical / GP setting with flexibility to meet the prospective and active foster carers and adoptive parents needs for example, weekend and evening clinical sessions.</p>
<p><b>How does service design reflect the insight gained through engagement (of different population groups)?</b></p>	<p>The service design has been in response to engagement with service users and other interdependent services.</p>
<p><b>Has your equality analysis identified any specific outcomes that need to be incorporated into the service specification (beyond what is required in the standard contract)?</b></p>	<p>The service specification makes specific reference to meeting the needs of prospective and active foster carers and adoptive parents of children and young people who are looked after. It includes use of interpreter and translation services, advocacy and use of appropriate communication methods personalised to the service user needs.</p>
<p><b>How will you feedback to the groups you have</b></p>	<p>Feedback will be through existing groups including the partnership ILAC</p>

**engaged about service design?**

Group, Corporate Parenting Board and through Foster Carer training and prospective adoption recruitment and training processes.

### Follow up actions

Action required	By whom?	By when?
Review this EqIA in line with provider monitoring and service user feedback	NHS Hull CCG through contracting and performance process	April 2020


## Signoff

Signed off by:

Name & Role

Mike Napier, Associate  
Director of Corporate  
Affairs

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Date:

08.08.19

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