

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

### Looked After Children Community Health 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.

This service specification encompasses the community health service for Looked After Children (LAC) and Care Leavers that will work in partnership with the Community Paediatric Medical Service and the Adult Fostering and Adoption health and medical assessment / screening service.

The overall aim is to provide a comprehensive community health service to children and young people (aged 0 -25 years) who are looked after by Hull City Council (Hull CC) and/or subject to a care order, and those young people leaving care; ultimately improving the health outcomes of children and young people who enter and Care Leavers who exit the LAC system. This includes all children and young people cared for that NHS Hull CCG retains the Responsible Commissioner for (NHSE 2013).

Name & roles of person / people completing the EIA:

Bernie Dawson, Strategic Lead for Children, Young People and Maternity

Date of assessment:

26.07.2019

Who will be affected by this service / who will be the key beneficiaries?

Children who are looked after (age 0 – 25 years), Hull City Council and Carers

What **data sources** do you have about the population, disaggregated by protected characteristic that is relevant to this

**Data sources:**

service specification? (e.g. research, clinical insight, monitoring data, complaints, engagement feedback etc.)

[http://www.hullcc.gov.uk/pls/hullpublichealth/jsna2018\\_s1.html](http://www.hullcc.gov.uk/pls/hullpublichealth/jsna2018_s1.html)  
Hull JSNA 2018

[https://www.bma.org.uk/-/media/Files/PDFs/.../growingupinuk\\_may2013.pdf](https://www.bma.org.uk/-/media/Files/PDFs/.../growingupinuk_may2013.pdf)  
Growing up in the UK: BMA 2013

[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)  
State of Child Health Report RCPCH – 2017

Hull SEND Scorecard/ DfE data (Hull City Council 2019).

Hull Looked After Children Annual Report (2019). NHS Hull CCG

<https://www.rcn.org.uk/professional-development/publications/pub-005844>

Fair care for trans patients  
An RCN guide for nursing and health care professionals Second edition

<https://static1.squarespace.com/static/58dcbb6be3df28ace47ce187/t/593928678419c2c9745a4f62/1496918245819/Trans+Youth+in+Care+-+A+Guide+For+Social+Care+Professionals.pdf>  
Trans Youth In Care - a Toolkit for Social Care Professionals

## 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 is an increasing number of children and young people who are legally defined as 'Looked After' by Hull City Council who 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%

	<p>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.</p>
<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 children and young people who are looked after, irrespective of race.</p>
<b>Disability</b>	<p>There is a higher rate of children and young people who are looked after with Special Educational Needs (SEN) and/or disabilities.</p> <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>
<b>Gender / Sex</b>	<p>There are higher incidences of males who are classified as 'looked after' and/or diagnosed with neurodisability and neurodevelopmental conditions.</p> <p>In Hull 53% of children in care as of 31/3/19 were male and 47% were female which is reflective of the national picture.</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. (see: <a href="https://www.rcn.org.uk/professional-development/publications/pub-005844">https://www.rcn.org.uk/professional-development/publications/pub-005844</a>)</p> <p>Resource: A toolkit for health and caring professionals provided here:</p>

	<p><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>	This service is provided to all looked after children and young people irrespective of sexual orientation.
<b>Religion or belief</b>	This service is provided to all looked after children and young people irrespective of religion or belief.
<b>Age</b>	<p>This service is provided to all looked after children and young people aged 0-18 years.</p> <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>
<b>Pregnancy and maternity</b>	This service is provided to looked after females who are pregnant and require maternity care.
<b>Marriage or civil partnership</b>	This service is provided to all looked after young people who are married or in a civil partnership.
<b>Any other relevant groups</b> (e.g. carers, veterans, asylum seekers and refugees, socio-economic disadvantage)	<p>This service is more likely to provide care and support to looked after children and young people who are asylum seekers and refugees and those who are socio-economic disadvantaged.</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>
<b>How has engagement informed your service specification?</b>	<p>Engagement has taken place with the service provider, Hull City Council and interdependent services such as the Community Paediatric medical service. Feedback from local service users including Looked after young people and foster carers has informed the development of the service specification.</p>

	Any changes to the service specification that impact on other provider services such as the Community Paediatric Medical and Fostering and Adoption assessment and medical services have been in consultation with those service providers.
<b>How has engagement reached out to groups representing a diverse range of protected characteristics?</b>	Engagement has been inclusive and considered the needs of protected groups.
<b>What has been put in place to ensure the accessibility and acceptability of the service design?</b>	<p>This service will be delivered in the most appropriate setting, including residential facilities, the child/carers home, clinics, community facility and/or school. In this way the care is delivered in partnership with the child/young person, carers and professionals involved.</p> <p>Whenever possible, all health assessment activity will be provided outside of the educational timetable and school, ensuring education and learning activity is not disrupted for the child/young person.</p>
<b>How does service design reflect the insight gained through engagement (of different population groups)?</b>	The service design has been in response to engagement with service users and other interdependent services.
<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>	The service specification makes specific reference to meeting the needs of children and young people who are looked after who have health related issues to ensure prioritisation based on clinical need. This includes those who require CAMHS, SEND and other health services. It includes use of interpreter and translation services, advocacy and use of appropriate communication methods personalised to the child/young person's needs.
<b>How will you feedback to the groups you have engaged about service design?</b>	Feedback will be through existing groups including the partnership ILAC Group, the Young Voices in Care Group and Care leavers Group.

## 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	April 2020

	process	
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### Signoff

<b>Signed off by:</b> <b>Name &amp; Role</b>	Mike Napier Associate Director of Corporate Affairs <hr/> 	<b>Date:</b>	08.08.19 <hr/>
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