

Equality Impact Assessment - Service Review / Evaluation

For more information about the equality impact assessment process in commissioning, please see: [EIA Overview and Navigation](#).

Service Review Equality Analysis	
What service is being reviewed?	Hull City Council Edge of Care Project - Therapeutic Care
What is the purpose for the service review? (If this is described in another document please add cross reference link)	<p>Hull City Council 'Edge of Care' project involves the identification of children who are considered to be on the verge of being taken into the care system (or, in some cases, who are already in care but where there is considered to be the potential for the child to return home). The service aims to support these children in staying with their families and avoiding statutory services, through activities such as family counselling and targeted educational support. Hull's pilot Edge of Care scheme, inspired by North Yorkshire County Council's 'No Wrong Door' (NWD) initiative, has been active since April 2018.</p> <p>NHS Hull has agreed to commission from Humber Teaching NHS FT the specialist Clinical Psychology and Speech Language Therapy input required to support the delivery and ensure improved patient outcomes as part of the Hull City Council Edge of Care Project.</p>
Date of review:	June 2019
Health Needs	<p>What data sources do you have about the population, disaggregated by protected characteristic?</p> <p>Data sources:</p> <ul style="list-style-type: none"> • Hull City Council – Edge of Care Business Case • JSNA 2018: http://www.hullcc.gov.uk/pls/hullpublichealth/jsna2018_s1.html#c5

<p>Do you have any information about people who share protected characteristics that is relevant and applicable to this service review?</p>	<p>Race</p>	<p>As at 6 September 2019 - 791 looked After children</p> <p>424 Males (54%)</p> <p>367 Females (46%)</p> <p>White 89% Mixed 4% Asian or Asian British 2% Black or black British 1% Other ethnic group 0% Not stated 0% Not recorded 0%</p> <p>14% have a disability</p> <p>Population data: From the 2011 Census Hull remained 94.1% White, with 89.7% of Hull residents White British, 0.2% White Irish and 0.1% White Gypsy or Irish Traveller. A further 1.3% of residents were from Mixed BME groups, 2.4% were Asian or Asian British (including 0.8% Chinese), 1.2% were Black or Black British, 0.4% were Arabs and 0.4% were from other ethnic groups. Hull's BME population is diverse with relatively small numbers of people from a wide range of different BME groups.</p>
	<p>Disability</p>	<p>The service will provide equitable access to both young boys and girls regardless of disability There are currently: 791 looked After children</p>

	<p>424 Males (54%)</p> <p>367 Females (46%)</p> <p>White 89%</p> <p>Mixed 4%</p> <p>Asian or Asian British 2%</p> <p>Black or black British 1%</p> <p>Other ethnic group 0%</p> <p>Not stated 0%</p> <p>Not recorded 0%</p> <p>14% have a disability</p>
Gender / Sex	<p>The service will provide equitable access to both young boys and girls and will be sensitive to any cultural or religious beliefs. There are currently</p> <p>424 Males (54%)</p> <p>367 Females (46%)</p>
Gender identity (gender reassignment)	<p>The service will provide equitable access to both young boys and girls and will respond to any specific gender identity issues which arise in partnership with the specialist gender identity team</p>
Sexual orientation	<p>The service will provide equitable access to both young boys and girls and will respond to any specific sexual orientation issues in an inclusive way.</p>
Religion or belief	<p>The service will provide equitable access to both young boys and girls and will be sensitive to any cultural or religious beliefs.</p>
Age	<p>Children under the age of 18</p>

	Pregnancy and maternity	Not Applicable
	Marriage or civil partnership	Not Applicable
	Socio-economic disadvantage	Responsive to the individual, with consideration of age, disability, ethnicity, gender, religion, sexual orientation and socio-economic status
Current service review	How does the current service promote equality? (Are there examples of good practice or have you identified any gaps?)	<p>The current position outlined in Hull City Council – Edge of Care Business Case:</p> <ul style="list-style-type: none"> • In 2017, Hull had double the rate of LAC per 10,000 compared to the English average, and its rate was slowly rising. In addition to the growing rate of looked after children as a proportion of the 0-17 population, there is an increasing number of children starting to be looked after. • Hull has a higher proportion of 1-4 year olds being taken into care compared to the English average, which may support the increased presence of abuse/neglect and family dysfunction as categories of need. • Hull has a higher proportion of 1-4 year olds leaving care – likely related to the higher commencements within that age group. • Hull has a higher rate of children in need (CIN) than comparators – in 2017, it was almost double the English rate. • This could be linked to the fact that Hull has a higher proportion of children who return home after a period of being looked after. In 2017, Hull returned children home at a rate 13 percentage points above its statistical neighbours and 12 percentage points above the England average. • Hull has a considerably lower proportion of CIN cases that are closed within six months of the child protection plan ending (14% lower than national average), suggesting that issues may be more entrenched or difficult to resolve, or that practice in respect of CIN cases is less intensive. • Hull (and its statistical neighbours) tend to categorise children as in need for a longer period than the English average. • In particular, there are many fewer cases ceasing in under 3 months compared to the English average and a slightly higher proportion of cases that

	<p>are 1-2 years in duration. This could suggest more light-touch or longer-term practice approaches.</p> <ul style="list-style-type: none"> • It is also possible that the longer term CIN cases may also be linked to decision-making and the quality of intervention. <p>In summary, Hull has a profile of high numbers of children entering care and those children, where they return home, not returning home as quickly as children in other authorities. Being in care is associated with poor outcomes and also carries a high cost to agencies involved, the local authority in particular.</p> <p>The Edge of Care service will be designed to:</p> <ul style="list-style-type: none"> • Be equitable • Preventing young people coming into care and supporting and working with agencies in rehabilitating young people back to their families. • Reduce high risk behaviour • Empower young people to build and restore relationships • Maximise opportunity for planned transitions • Support achievement • Develop self-esteem, self-worth resilience • Ensure young people in crisis receive well organised and appropriate support • will align to the wider Hull City CAMHS service so that as part of assessment children can access wider CAMHS support services as needed.
<p>Outcomes and demand</p> <p>How does the current service evidence improved health outcomes for different groups of people? (e.g. by age, gender disability, ethnicity, sexual orientation, religion or belief, pregnancy & maternity)</p>	<p>This service will support health and wellbeing overall of children at risk of – or already – within social services care.</p> <p>Overall Aim of the Edge of Care Project</p> <p><i>The ‘Edge of Care’ project involves the identification of children who are considered to be on the verge of being taken into the care system (or, in some cases, who are already in care but where there is considered to be the potential for the child to return home).</i></p> <p><i>To support at risk children in staying with their families and avoiding statutory</i></p>

services, through activities such as therapy, family counselling and targeted educational support.

- *Preventing young people coming into care and supporting and working with agencies in rehabilitating young people back to their families.*
- *Reduce high risk behaviour*
- *Empower young people to build and restore relationships*
- *Maximise opportunity for planned transitions*
- *Support achievement*
- *Develop self-esteem, self-worth resilience*
- *Ensure young people in crisis receive well organised and appropriate support*

NHS Hull has agreed to commission from Humber Teaching NHS FT the specialist Clinical Psychology and Speech Language Therapy input required to support the delivery and ensure improved patient outcomes as part of the Hull City Council Edge of Care Project.

What can you tell about the demand for the service by different groups? Is there an over or under-representation of particular groups, relative to the population?

791 looked After children

424 Males (54%)

367 Females (46%)

White 89%

Mixed 4%

Asian or Asian British 2%

Black or black British 1%

Other ethnic group 0%

Not stated 0%

Not recorded 0%

14% have a disability

The highest in the region

Benchmark

How does the service compare to other comparable services with respect to evidencing improved outcomes across different groups?

Hull has the highest number of LAC in the region

	numbers		rates per 10,000	
	2017	2018	2017	2018
Yorkshire and The Humber	7,720	8,190	67	71
Barnsley	291	310	58	62
Bradford	926	986	66	70
Calderdale	316	297	69	64
Doncaster	514	569	78	86
East Riding of Yorkshire	287	312	46	50
Kingston Upon Hull, City of	694	753	124	133
Kirklees	699	674	71	68
Leeds	1,252	1,271	76	76
North East Lincolnshire	297	354	87	103
North Lincolnshire	226	227	64	64
North Yorkshire	424	437	36	37
Rotherham	485	619	86	109
Sheffield	585	628	50	54
Wakefield	520	562	74	78
York	205	195	56	53
England	72,590	75,420	62	64

		At present the existing service model does not adequately meet the level of demand.
Communication and Engagement	How are you going to engage with different groups and communities and show that their feedback informs your service review?	NHS Hull CCG Hull City Council – Children’s Directorate Hull City Council – Social Workers in Children care Humber Teaching NHS FT Criminal Justice – police, probation, youth justice
	Is information provided to your target market appropriate and accessible?	Hull City Council Humber Teaching NHS FT NHS Hull CCG
Options appraisal	Does your options appraisal clearly show any differential impact on protected characteristics groups for each option?	All patient groups are included in this EQIA
	Is further engagement needed?	EQIA will be reviewed as part of future engagement, so that any additional issues / insight can be included in the evaluation of the service

Follow up actions

Action required	By whom?	By when?
Review EQIA as part of future engagement, so that any additional issues / insight can be included in the evaluation of the service	Melanie Bradbury	March 2020

Signoff

<p>Signed off by:</p> <p>Name & Role</p>	 <hr style="border: 1px solid red; margin-top: 10px;"/> <p>Mike Napier, Associate Director of Corporate Affairs</p>	<p>Date:</p>	<p>13.09.19</p>
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