

# OFFICIAL 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 <a href="mailto:CITAdminTeam@ggc.scot.nhs.uk">CITAdminTeam@ggc.scot.nhs.uk</a> 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 x 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 1to 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 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:

Engaging
Collaborating
Communicating
Planning
Flexibility
Assessing
Knowledgeable
Empowering
Evaluating
Respectful

Families were also engaged via written consultation using easy to understand leaflets coordinated via 10 3<sup>rd</sup> 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 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:	Date of Lead Reviewer Training:
Alison Murphy	12/12/2019

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

		Example	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.	A sexual health service collects service user data covering all 9 protected characteristics to enable them to monitor patterns of use.	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.	
		Example	Service Evidence Provided	Possible negative impact and Additional Mitigating Action Required
2.	Please provide details of how data captured has been/will be used to	A physical activity programme for people with long	Research undertaken by Glasgow Families Together Partnership identified that 30% of open cases within the North East, did not require Social	We are aware that to successfully implement the Family Support Strategy at a neighbourhood level,

inform policy content or service design. Your evidence should show which of the 3 parts of the General **Duty have been** considered (tick relevant boxes). 1) Remove discrimination. harassment and victimisation 2) Promote equality of opportunity 3) Foster good relations between protected characteristics. 4) Not applicable

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)

Work intervention, and however did require a form of supportive intervention from the third sector.

Research undertaken in the development of the family support strategy highlighted four key challenges to accessing family support:

Out of Hours Provision – the provision currently

provided does not sufficiently meet the needs of families at crisis point.

Referral Criteria – families are often not able to access services due to restrictions on funding criteria.

Funding – there was concerns surrounding sustainability and long term service provision across the city.

Service Model & Capacity- a wide coverage of services where identified however the services that were required by families have reached capacity.

Research also highlighted the wide ranging components of the support available to families: Income maximisation service and activities Direct access to financial and material supports Health improvement activities Specialist advice and advocacy Employment support and opportunities Structured family play activities. Intensive family support tailored to individual families Parenting skills training/education

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.

In order to deliver against this we are recruiting two data analysts to work on our children services data.

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.

Family mediation/restorative practice Respite

Peer support and befriending Therapeutic support and interventions.

The Family Support Strategy outlines two commissioning frameworks:

Early Intervention Family Support (focuses on prebirth to 12 year olds and their families) Intensive Family Support (focuses on 12+ year olds and their families)

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.

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.

		Example	Service Evidence Provided	Possible negative impact and Additional Mitigating Action Required
3.	How have you applied	Looked after and	Research was undertaken to map out the current	
	learning from research	accommodated care	service provision of family support across the city.	
	evidence about the	services reviewed a	The mapping questionnaire took into account	
	experience of equality	range of research	protected characteristics with specific emphasis on	
	groups to the service or	evidence to help	age, race, disability, and maternity/pregnancy.	
	Policy?	promote a more	Looking at criteria such as funding and how	
		inclusive care	families access services. In addition Third Sector	
	Your evidence should	environment.	Providers were asked to evidence How does your	
	show which of the 3	Research suggested	service promote inclusion?	
	parts of the General	that young LGBT+		
	Duty have been	people had a	The Third Sector Family Support Sub Group	
	considered (tick	disproportionately	engaged with their families throughout the	
	relevant boxes).	difficult time through	development of the strategy. There is a wide range	
	1) Remove	exposure to bullying	of Third Sector Providers within this group with	
	discrimination,	and harassment. As	specialisms in gender based violence, addictions,	
	harassment and	a result staff were	holistic family support, nursery provision, play	
	victimisation $\square$	trained in LGBT+	asylum seeking population, parenting/lone parents,	
	2) Promote equality of	issues and were	intensive family support and disabilities.	
	opportunity x	more confident in	Aberlour, Children 1st, 3D Drumchapel,	
	3) Foster good relations	asking related	Crossreach, Stepping Stones for Families, One	
	between protected	questions to young	Parent Families Scotland, HomeStart Glasgow	
	characteristics	people.	South, HomeStart Glasgow North, Scottish	
		(Due regard to	Childminding Association, Quarriers, Parent	
	4) Not applicable	removing	Network Scotland, Barnardos, Equal Say, Youth	
		discrimination,	Community Support Agency, Task Childcare,	
		harassment and	Scottish Refugee Council, Includem and Action for	
		victimisation and	Children.	
		fostering good		

## relations).

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.

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.

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

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 accessible to

	population, support.  The online period from of 36 comp wide variety Break, Glass (GAMH), an Partnership appendix 6 consensus strengths, a common the consultation families' ne view of colear focus and families strategies we Childhood highlighted strategy shows	consultation was open for a four week 29th May 2019 to 28th June 2019. A total leted responses were captured from a 7 of organisations including Geeza 1900 Association of Mental Health d staff within the Health and Social Care 1 and Education services. Please see 1 2 for a table of results. The general 1 was agreement on the purpose, vision, 1 areas of need and priorities. The 1 emes that emerged from the online 1 included the emphasis to focus on 1 included the 1 in	Possible negative impact and
E	<u>'</u>	dence Provided	Possible negative impact and Additional Mitigating Action

				Required
4.	Can you give details of	A money advice	The Third Sector Family Support Sub Group	HSCP will ensure that the two family
	how you have engaged	service spoke to	engaged with their Research was undertaken to	support commissioning tender
	with equality groups	lone parents	map out the current service provision of family	frameworks will adhere to the protected characteristic promoting
	with regard to the	(predominantly	support across the city. The mapping	equality and transparency.
	service review or policy	women) to better	questionnaire took into account protected	
	development? What did	understand barriers	characteristics with specific emphasis on age,	
	this engagement tell	to accessing the	race, disability, and maternity/pregnancy. Looking	
	you about user	service. Feedback	at criteria such as funding and how families access	
	experience and how	included concerns	services. In addition Third Sector Providers were	
	was this information	about waiting times	asked to evidence How does your service promote	
	used?	at the drop in	inclusion?	
		service, made more		
	Your evidence should	difficult due to child	The Third Sector Family Support Sub Group	
	show which of the 3	care issues. As a	engaged with their families throughout the	
	parts of the General	result the service	development of the strategy. There is a wide range	
	Duty have been	introduced a home	of Third Sector Providers within this group with	
	considered (tick	visit and telephone	specialisms in gender based violence, addictions,	
	relevant boxes).	service which	holistic family support, nursery provision, play	
	1) Remove	significantly	asylum seeking population, parenting/lone parents,	
	discrimination,	increased uptake.	intensive family support and disabilities.	
	harassment and		Aberlour , Children 1st, 3D Drumchapel,	
	victimisation $\square$	(Due regard to	Crossreach, Stepping Stones for Families, One	
	2) Promote equality of	promoting equality	Parent Families Scotland, HomeStart Glasgow	
	opportunity	of opportunity)	South, HomeStart Glasgow North, Scottish	
	3) Foster good relations		Childminding Association, Quarriers, Parent	
	between protected	* The Child Poverty	Network Scotland, Barnardos, Equal Say, Youth	
	characteristics $\square$	(Scotland) Act 2017	Community Support Agency, Task Childcare,	
	_	requires	Scottish Refugee Council, Includem and Action for	
	4) Not applicable	organisations to take	Children.	

actions to reduce
poverty for children
in households at risk
of low incomes.

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.

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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.  Example  Service Evidence Provided  Possible negative impact and
Additional Mitigating Action

		T		
				Required
5.	Is your service physically accessible to everyone? If this is a policy that impacts on movement of service users through areas are there potential barriers that need to be addressed?  Your evidence should show which of the 3 parts of the General Duty have been considered (tick relevant boxes).  1) Remove discrimination, harassment and victimisation  2) Promote equality of opportunity  3) Foster good relations between protected characteristics.	An access audit of an outpatient physiotherapy department found that users were required to negotiate 2 sets of heavy 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).	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 intervention and intensive family support.  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.  Implementing a neighbourhood approach will aid with the accessibility of family support within communities.	
		Example	Service Evidence Provided	Possible negative impact and

				Additional Mitigating Action Required
6.	How will the service change or policy development ensure it does not discriminate in the way it communicates with service users and staff?  Your evidence should show which of the 3 parts of the General Duty have been considered (tick relevant boxes).  1) Remove discrimination, harassment and	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.  Written materials were offered in other languages and formats.	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.  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 interest on how the Strategy will be progressed, implemented and delivered, with particular interest surrounding the commissioning of services.	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.  HSCP will ensure the Family Support Strategy is available in accessible format for all including other languages.
	victimisation  2) Promote equality of opportunity  3) Foster good relations between protected characteristics  4) Not applicable	(Due regard to remove discrimination, harassment and victimisation and promote equality of opportunity).	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.  Several one to one meetings have also taken place with services such as Child Poverty, the Health	

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.

Improvement Team, Carers and Glasgow Life to ensure their views are captured and represented throughout the Strategy.

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.

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

		the consultation facilitated by Third Sector Professionals in 121 or group settings. The Third Sector Providers  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.	
7	Protected Characteristic	Service Evidence Provided	Possible negative impact and Additional Mitigating Action Required
(a)	Age  Could the service design or policy cor have a disproportionate impact on per to differences in age? (Consider any a offs that exist in the service design or content. You will need to objectively j	ple due ge cut- policy  The Strategy covers children from pre-birth to 18 and their families. In relation to our kinship	

		· · · · · · · · · · · · · · · · · · ·	
	the evidence section any segregation on the grounds of age promoted by the policy or included in the service design).  Your evidence should show which of the 3 parts of the General Duty have been	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.	
	considered (tick relevant boxes).  1) Remove discrimination, harassment and victimisation  2) Promote equality of opportunity  3) Foster good relations between protected characteristics.	The two commissioning tender frameworks will provide age specific support: Early Intervention Family Support (focuses on prebirth to 12 year olds and their families) Intensive Family Support (focuses on 12+ year olds and their families)	
	4) Not applicable	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.	
(b)	Disability  Could the service design or policy content have a disproportionate impact on people due to the protected characteristic of disability?	6% of children aged 0-15 years old identify as having a disability in Glasgow this is based on the 2011 census <sup>1</sup> . 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.	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
	Your evidence should show which of the 3 parts of the General Duty have been considered (tick relevant boxes).  1) Remove discrimination, harassment and	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.	strategy.

<sup>&</sup>lt;sup>1</sup> <u>Understanding Glasgow Indicators Project</u>

	victimisation  2) Promote equality of opportunity  3) Foster good relations between protected characteristics.	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.	
	Protected Characteristic	Service Evidence Provided	Possible negative impact and Additional Mitigating Action Required
(c)	Could the service change or policy have a disproportionate impact on people with the protected characteristic of gender identity?  Your evidence should show which of the 3 parts of the General Duty have been considered (tick relevant boxes).  1) Remove discrimination, harassment and victimisation  2) Promote equality of opportunit  3) Foster good relations between protected characteristics	The development of local community based family support services will improve resources and capacity and may improve provision for young people who consider themselves to be transgender.  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.	

	Protected Characteristic	Service Evidence Provided	Possible negative impact and Additional Mitigating Action Required
(d)	Marriage and Civil Partnership  Could the service change or policy have a disproportionate impact on the people with the protected characteristics of Marriage and Civil Partnership?  Your evidence should show which of the 3 parts of the General Duty have been considered (tick relevant boxes).  1) Remove discrimination, harassment and victimisation  2) Promote equality of opportunity  3) Foster good relations between protected characteristics  4) Not applicable	No risk to this protected characteristic.	
(e)	Pregnancy and Maternity  Could the service change or policy have a disproportionate impact on the people with the protected characteristics of Pregnancy and Maternity?  Your evidence should show which of the 3 parts of the General Duty have been	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.	

considered (tick relevant boxes).  1) Remove discrimination, harassment and victimisation  2) Promote equality of opportunity  3) Foster good relations between protected characteristics.		
Protected Characteristic	Service Evidence Provided	Possible negative impact and Additional Mitigating Action Required
Could the service change or policy have a disproportionate impact on people with the protected characteristics of Race?  Your evidence should show which of the 3 parts of the General Duty have been considered (tick relevant boxes).  1) Remove discrimination, harassment and victimisation  2) Promote equality of opportunity  3) Foster good relations between protected characteristics	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 families whereby English is not their first language.  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.	Consultation and engagement with Scottish Refugee Council via the Third Sector Forum will continue.

(g)	Religion and Belief  Could the service change or policy have a disproportionate impact on the people with the protected characteristic of Religion and Belief?	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.	
	Your evidence should show which of the 3 parts of the General Duty have been considered (tick relevant boxes).  1) Remove discrimination, harassment and victimisation		
	2) Promote equality of opportunit  3) Foster good relations between protected characteristics.		
	4) Not applicable		
	Protected Characteristic	Service Evidence Provided	Possible negative impact and Additional Mitigating Action Required
(h)	Sex	We acknowledge the diverse makeup of our families. We will ensure that lone parents are	
	Could the service change or policy have a disproportionate impact on the people with the protected characteristic of Sex?	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.	
	Your evidence should show which of the 3 parts of the General Duty have been	There is a disproportionate impact on women in	
	considered (tick relevant boxes).  1) Remove discrimination, harassment and	relation to gender based violence, women are most likely to carry the caring responsibility. Both	

3) Foste charact	eation note equality of opportunity  er good relations between protected eristics.	aligned commissioning tender frameworks will ensure successful provider will deliver a sensitive trauma informed response to the victims of gender based violence.	
Your ev parts of consider victimis 2) Prom 3) Foster characters	Orientation  the service change or policy have a portionate impact on the people with the ed characteristic of Sexual Orientation?  Tridence should show which of the 3 fethe General Duty have been ered (tick relevant boxes).  To be discrimination, harassment and eation to be equality of opportunity to er good relations between protected eristics.	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.	
Protecto	ed Characteristic	Service Evidence Provided	Possible negative impact and Additional Mitigating Action Required

(j) Socio – Economic Status & Social Class

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?

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.

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 were the** youngest child is under 1 year old and Families where mothers are aged 25 years or younger.

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.

To mitigate the impact of child poverty it is vital that Family Support Services provide income

<sup>&</sup>lt;sup>2</sup> The Glasgow Indicator Project

<sup>&</sup>lt;sup>3</sup> Glasgow Child Poverty Action Plan Report.

maximisation, assistance to reduce living costs, digital inclusion and are able to facilitate/signpost to access affordable housing, child care and employability service.

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.

The Nuffield Study (2014) "Inequalities in child welfare intervention rates: deprivation and identity" 4 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.

In relation to the Fairer Scotland Duty (2018) both aligned commissioning frameworks will seek to reduce socio-economic disadvantage by ensuring

<sup>&</sup>lt;sup>4</sup> Inequalities in Child Welfare intervention rates, deprivation and identity (2014); Nuffield Study.

		OFFICIAL	
		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.	
(k)	Other marginalised groups  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?	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 families whereby English is not their first language.  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	

<sup>&</sup>lt;sup>5</sup> Carefirst Child Projection Figures March 2019.

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.

**Mental Health** 

Mental Health was identified as a key area of focus for the strategy in relation to three strands:

Perinatal Mental Health.

Parental Mental Health.

Child & Adolescent Mental Health.

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.

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

<sup>&</sup>lt;sup>6</sup> Perinatal Mental Health: Needs Assessment & Recommendations (2019) Scottish Government.

	·	OT TOTAL	
		align the family support strategy to the work of National Mental Health Strategy. 7 Child & Adolescent Mental Health in relation to those children and 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.	
8.	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?  Your evidence should show which of the 3 parts of the General Duty have been considered (tick relevant boxes).  1) Remove discrimination, harassment and victimisation  2) Promote equality of opportunity   3) Foster good relations between protected characteristics.	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.	

<sup>&</sup>lt;sup>7</sup> The National Mental Health Strategy; Glasgow Health & Social Care Partnership.

		Service Evidence Provided	Possible negative impact and Additional Mitigating Action Required
9	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 human rights.	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.	

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.

\*

- 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.

	ngs 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)

collecting patient data on sexua	s doing something that 'stands out' as an example al orientation, faith etc please use the box below will help others consider opportunities for develor	to describe the ac	tivity and the benefits thi	
	nitigating action requirements boxes completed actions this service will be taking forward.	Date for completion	Who is responsible?(initial s)	
Ongoing 6 Monthly Review June 2020	please write your 6 monthly EQIA review date:			
Lead Reviewer: EQIA Sign Off:	Name Alison Murphy Job Title Senior Officer, Planning & Change, Signature A Murphy Date 18.12.2019	Children Services		
Quality Assurance Sign Off: Job Title Planning Manager, NH	Name Alastair Low ISGGC Signature			



## 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/Ser	vice Redesign:		
	-		
Please detail activity undertaken with regard to actions hi	ighlighted in the original EQIA for this Service/F	Policy	
•	Complete	Completed	
	Date	Initials	
Action:			
Status:			
Action:			
Status:			
Action:			
Status:			
Action:			
Status:			
Please detail any outstanding activity with regard to requ Service/Policy and reason for non-completion		ocess for th	
	Date	Initials	
Action:			
7 10 110 111			

Action:		
Reason:		
Please detail any new actions required since completing the ori		ompleted by
A attack	Date	Initials
Action:		
Reason:		
Action:		
Reason:		
Action:		
Reason:		
Action:		
Reason:		
Please write your next 6-month review date		
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: <a href="mailto:alastair.low@ggc.scot.nhs.uk">alastair.low@ggc.scot.nhs.uk</a>