

Full Equality Impact Assessment (EqIA) Template

In order to carry out this assessment, it is important that you have completed the EqIA E-learning Module and read the Corporate Guidelines on EqIAs. Please refer to these to assist you in completing this form and assessment.

What are the proposals being assessed? (Note: ‘proposal’ includes a policy, service, function, strategy, project, procedure, restructure)	Children’s Centre proposals to ensure a sustainable future
Which Directorate / Service has the responsibility for this?	Catherine Doran, Corporate Director, Children’s Services
Name and job title of lead officer	Assessment completed by Sita Mistry, Service Performance Team on behalf of Wendy Beeton, Divisional Director, Integrated Early Years and Community Services
Name & contact details of the other person(s) involved in the EqIA:	David Harrington david.harrington@harrow.gov.uk 020 8420 9248 Sita Mistry sita.mistry@harrow.gov.uk
Date of assessment:	31 st October 2011

Stage 1: Overview

<p>1. What are the aims, objectives, and desired outcomes of your proposals?</p> <p>(Also explain proposals e.g. reduction / removal of service, deletion of posts, changing criteria etc)</p>	<p>The aims of the proposals are to ensure sustainability of Harrow’s Children’s Centres to ensure that valuable services for families with young children can continue whilst delivering significant budget savings.</p> <p>There are a number of drivers for change;</p> <ul style="list-style-type: none"> • Historically both the capital set up costs and the on going revenue expenditure for all 16 centres was funded from ring fenced Surestart grant. From 2011/12 the Surestart Grant was amalgamated into a reduced Early Intervention Grant. To address the reduction in funding and to deliver budget efficiencies a full review of the operating model has been undertaken. The proposals detailed in the report generate savings totaling £1.2m, which represents 35% reduction in Harrow’s children’s centres’ budgets. • The need to ensure that the Council’s Children’s Centres have the flexibility to be sustainable in the future, with viable funding sources, and able to meet increasing pressures e.g.; <ul style="list-style-type: none"> ○ Unavoidable pressures arising from Government Policy Changes
---	--

- Demographic changes including the increase in child population and an increase in ethnic groups statistically more likely to be over-represented in the care population
- Higher levels of deprivation and increase in numbers of children eligible for Free School Meals
- Increase in Special Educational Needs and children with disabilities
- The need to raise standards of provision to meet Ofsted criteria of 'good'. Two of the current 13 Children's Centres in Harrow have been inspected and both were rated satisfactory – below the expected result.

A number of possible alternative options for the Council's Children's Services were considered during the information gathering and research stage:

Option 1 - Retain current service and deliver limited budget reductions where possible.

This option was rejected as it does not deliver the necessary savings to meet the reduced funding available, neither does it provide an operational framework that will support service improvement and sustainability.

Summary Equality impact of Option 1: This option is likely have an adverse impact on families and staffing unless it was implemented very fairly and if services to vulnerable groups were maintained. However it would be difficult to maintain and improve services for all and also reduce budgets. Children's centres services need to be continuously improved and sustained for groups such as underprivileged families and needs of the local communities and this model would not allow for this so certain groups would be adversely affected. Also it does not deliver the necessary savings so could not be a viable option.

Option 2 - Closure of some of the Council's Children's Centres. Although this would deliver significant savings it would leave areas of the borough without provision. This would negatively impact on the ability of the Council's Children's Centres to deliver on the key corporate priorities. Also if centres were to close the costs of closure would have to be taken into account, including redundancy costs and the potential clawback of Surestart capital grant. All the Council's Children's Centres were funded using £4.3m of Surestart capital grant. The grant conditions state this if they cease to be used as Children's Centres then the DfE retain the right to claw back the funding, totalling £4.3m. Initial indications are that the DfE would not look to waive these clawback rules.

Summary Equality impact of Option 2: This option would have an adverse impact on many families and therefore a range of protected characteristics. All Children's centres have been placed strategically in order to meet the diverse needs of local communities. Closing any centre would therefore adversely impact all families living in the local area centre and thereby also have an adverse effect on the protected characteristics.

All staffing changes would have to be carried out in a fair and equal manner with no discrimination based on the 9 protected characteristics. There would also be a significant adverse effect in terms of redundancy costs.

Option 3 – Implementation of a 'Hub and Spoke' model

This option proposes a new operating model centred around 4 main children centre hubs, each with 3 smaller satellite delivery points. This model delivers savings from management and overhead costs but enables all the centres to retain some provision.

	<p>Summary Equality impact of Option 3: If this is implemented fairly and services are continuously improved and sustained for groups such as underprivileged families and meet needs of the local communities then there should be limited equality impact on families as they would still be able to access their local centres and activities. All staffing changes would have to be carried out in a fair and equal manner with no discrimination based on the 9 protected characteristics. There would also be a significant adverse effect in terms of redundancy costs.</p> <p>Option Recommended</p> <p>On the basis of the consultation and the work done over the years to develop Harrow's Children's Centres as early intervention delivery points for children's services and partners the Hub and Spoke model is being proposed. The key components of this model are:</p> <ul style="list-style-type: none"> • 4 main children's centre hubs with linked delivery points • The appointment of 4 Hub managers with a focus on service quality, outcomes and strong links to the Commissioning Division • The temporary recruitment of a commercial manager to maximize income generating opportunities across all the centres • Standardised Job Descriptions across the grades to provide structure and clear career progression for early years and childcare practitioners <p>The remainder of this EQIA will primarily focus on Option 3</p> <p>Please note that if Cabinet approval is given, a consultation on the proposed model will be carried out early in 2012 to ensure that the views of all stakeholders are considered. The consultation will take into account statutory guidance. This requires a local authority to carry out appropriate consultation, before making any arrangements for the provision of a children's centre, any significant changes to services provided through a children's centre or closing a children's centre.</p>
<p>2. What factors / forces could prevent you from achieving these aims, objectives and outcomes?</p>	<ul style="list-style-type: none"> - Workforce does not support organisational changes - Insufficient resources and capacity to deliver the change safely - Partner engagement is not sufficient - Relocation difficulties
<p>3. How does this contribute to your Directorates Service Plan?</p>	<p>Improvement at Early Years Foundation Stage is a priority area for Harrow. Better outcomes for children supported by the Council's Children's Centres will contribute to this improved performance at the end of Early Years Foundation Stage, particularly for children in vulnerable groups.</p> <p>Harrow Council's Children's Centres are key to the Council's Children's Services' new operating model and deliver the Council's agreed priorities for Children's Services of Health Prevention, Safeguarding, Narrowing the Gap and in particularly Early</p>

	<p>Intervention. Intervening early in the event of difficulties to meet additional needs at the earliest point aims to prevent the escalation of need for more complex and costly interventions.</p> <p>The Council's Children's Services have identified the need to improve standards in Harrow's Children's Centres to "good" (Ofsted rating) in order to meet LBH thresholds for inspection performance as part of the Annual Performance Assessment of its Children's Services. The new Council's Children's Services operating model will commission only those services that evidence good outcomes, within an evidenced based approach.</p>
<p>4. Who are the customers? Who will be affected by this proposal? For example who are the external/internal customers, communities, partners, stakeholders, the workforce etc.</p>	<p>Children, young people & families</p> <p>Staff</p> <p>Schools (many schools have centres based on their sites)</p> <p>Partners (NHS/PCT, Partners who deliver services through Children's Centres)</p>
<p>5. Is the responsibility shared with another department, authority or organisation? If so:</p> <ul style="list-style-type: none"> • Who are the partners? • Who has the overall responsibility? 	<p>Children's Services are primarily responsible for implementing the proposed new operating structure ; however the delivery of the new model is dependent on other teams co-operating with the proposed changes (such as schools, NHS/PCT, partners who deliver services through Children's Centres)</p>
<p>5A. How are/will they be involved in this assessment?</p>	<p>Children's Services already has and will continue to work with partners in health, schools and the third sector to consider options for the sustainability and improvement of the centres.</p>
<p>Stage 2: Monitoring / Collecting Evidence / Data</p>	
<p>6. What information is available to assess the impact of your proposals (<i>include the actual data, statistics and evidence</i>)? List the main sources of data, research and other sources of evidence (including full references) reviewed to determine impact on each equality group (protected characteristic). This can include results from consultations and the involvement tracker, customer satisfaction surveys, focus groups, research interviews, staff surveys, workforce profiles, service users profiles, local and national research, evaluations etc</p> <p>(Where possible include data on the nine protected characteristics. Where you have gaps, you may need to include this as an action to address in the action plan)</p>	
<p><u>Data on 9 protected characteristics is included in the information below where relevant</u></p>	
<p><u>Summary information from Consultation carried out from May 17th 2011 to August 27th 2011</u></p> <p>Harrow Council's Children's Services has been working closely with partners in health, schools and the third sector since February 2011 to consider options for the sustainability and improvement of the centres. This included a wide ranging consultation which ran from May 17th 2011 to August 27th 2011. Details of the consultation responses were</p>	

reported to Cabinet in October and a summary is set out in the main Cabinet paper, included as Appendix 1.

The outcome of the London Borough of Harrow consultation on the value and benefits of the Children's Centres, reported in August 2011, is the identification of very high community support for Children's Centres and the benefits provided by them. The report provides the evidence for the need for the continuation and sustainability of Children's Centres, and provides suggestions for future effectiveness and efficiency.

The Children's Centre consultation had over 500 responses. The responses strongly support the sustainability of the Children's Centres with users, staff, partners all proposing:

- developing the use of the children's centres,
- increasing their use by those who most need the services
- exploring options for income generation
- exploring a model of retaining staff expertise

Work has also been taking place with visits to other centres and consideration of developed and best practice from around the country.

The Harrow Council Children's Centre survey report, September 2011, focused on what the users valued and wanted from the Centres. The proposed new operating model has taken note of the findings. If Cabinet approval is given, a consultation on the proposed model will be carried out early in 2012 to ensure that the views of all stakeholders are considered. The consultation will take into account statutory guidance. This requires a local authority to carry out appropriate consultation, before making any arrangements for the provision of a children's centre, any significant changes to services provided through a children's centre or closing a children's centre.

Key findings of consultation based relating to Equality:

Majority of parents/carers questioned from each of the Ethnic groups and Carer group (such as Lone Parents etc) stated that they feel that using the services offered at Harrow's children's centres has had a positive effect on their quality of life as parent/guardian/carers.

Question: To what extent, if at all, do you support or oppose the following ideas for keeping our children's centres running: Charging for some services

For those individuals that responded to this question (as some were left blank) the outcome is as follows:

Percentage of those that strongly or tend to oppose charging for services:

Asian/Asian British: 60% oppose

Black/ Black British: 73% oppose

Mixed Ethnicity: 55% oppose

White UK: 47% oppose

White Other: 65% oppose

Implementation of charging families to use may adversely impact usage of centres by many of the minority ethnic groups, in particular Black families. We have been informed that the charge will be minimal (yearly one off membership fee) and that any families on income support should not be charged.

57% of Lone Parents opposed charging for services. In the UK around 90% of single parent households are headed by women.

Question: To what extent, if at all, do you support or oppose the following ideas for keeping our children's centres running: Parents and carers getting involved in helping run the service

For those individuals that responded to this question (as some were left blank) the outcome is as follows:

Percentage of those that strongly or tend to support getting involved:

Asian/Asian British: 74% support

Black/ Black British: 75% support

Mixed Ethnicity: 77% support

White UK: 62% support

White Other: 66% support

65% of Lone Parents support Parental involvement in helping run the service.

Harrow data:

Children's Centres are primarily there to serve families with children in the Early Years age group: that is children aged from 0-5.

Based on Child Benefit Data from August 2010 there are:

- 30,305 families in Harrow
- 53, 800 children (Age 0 – 18) in Harrow
- 14,685 children (Age 0-5) in Harrow

Based on the most recent HMRC data from August 2008:

- 35% of all families claiming Tax Credits (18,500 families in total) are Lone Parent families (6,595 families)

Data from PCT/other partners have indicated the following:

- 205 children (age 0-5) with disabilities in Harrow
- 5,330 children (Age 0-5) live in the 30% most deprived areas of Harrow (based on the Index of Deprivation affecting Children)

Key figures showing Ethnicity Breakdown of Harrow pupils (based on January Schools Census 2011) (Available full population census is from 2001 so the 2011 Schools Census data provides a more recent picture of the ethnic breakdown of Harrow):

- White UK pupils make up 19.8% of all of Harrow School's population. This has steadily decreased since 2004 when White UK students made up 31.8%.
- Asian Indian pupils make up 19.7% of all of Harrow School's population. This has slightly decreased since 2004 when Asian Indian pupils made up 21.1%.

- Asian Other pupils (includes Sri Lankan) make up 18.9% of all of Harrow School's population. This has steadily increased since 2004 when Asian Other pupils made up 10.7%.
- Any other White (including Eastern European) make up 6.8% of all of Harrow School's population. This has steadily increased since 2004 when Any other White pupils made up 3.7%.
- Black African pupils make up 8.6% of all of Harrow School's population. This has slightly increased since 2004 when Black African pupils made up 7%.

Children's centre data (taken from eStart database)

As at 1st November 2011:

There were 11,007 families registered at Harrow's Children's centres

Reach data: From 1st January 2010 up to 31st December 2010:

- 10,957 individuals accessed Children's Centre services at least once.

Carers/parents

- 5,692 carers/parents accessed Children's Centre services at least once.
- 4,738 Female Carers accessed Children's Centre services at least once.
- 905 Male carers accessed Children's Centre services at least once
- 37 carers/parents seen with disabilities/special needs
- 905 Fathers accessed Children's Centre services at least once.
- 353 Lone Parents accessed Children's Centre services at least once
- 49 Teenage parents accessed Children's Centre services at least once

Children

- 4,414 children under 5 accessed Children's Centre services at least once.
- 901 children aged 5-18 accessed Children's Centre services at least once
- 3,331 children seen were from BME groups (where Ethnicity was provided by the family)
- 105 children seen with disabilities/special needs

From 2010 to 2011 there has been increased take-up by families in all Harrow Council's Children's Centres. The total volume of individuals using the centres was 16,998, up 32.8% over the last 4 months and up 41.8% compared to March 2010. All centres saw an increase in overall volumes compared to 4 months and 8 months ago.

- The majority of centres saw an increase in volumes from a year ago.
- There was an overall increase compared to 4 months ago in all event/group categories, with the biggest increases being in Carer & Toddler Groups which was up by 45.3% and Health Services which was up by 54.3%.

The Harrow Council Children's Centres make a significant contribution to the life chances of minority community groups. 18.9% of Centre users were of Asian Indian Origin, with

the next largest ethnic groups of users being White UK at 13% and Asian Sri Lankan at 6.6%.

The Harrow Council Children's Centres target vulnerable groups in the community. Current records show services are accessed by known lone parents (6.1%), teenage parents (0.8%), carers with known disabilities or special needs (0.3%), children with known disabilities or special needs (2%). There is work to do to increase accessibility and to identify and record service users from the relevant groups.

Staffing data

There are 39 permanent staff working at Harrow's Children's Centres. The equality statistics breakdown is below:
 48% staff are of White British origin, 33% are of Asian origin (includes Indian & Pakistani), 5% are of Black origin, 5% of Mixed ethnicity and 5% of White Other.
 3% of staff are recorded as having a disability.

7. Do you need to collect any additional data to be able to monitor the impact on different groups?	Children's Centres do not currently collect data about families on the following characteristics: Gender reassignment, Religion, Civil Partnership or Sexual Orientation. This has not been a requirement for Children's centre data collection to date. The collection of data on religion, civil partnership and sexual orientation will be considered for future monitoring.
8. Are there any other local/regional/national data sources that can inform this assessment if you have insufficient data on any of the groups?	Children's centres work closely with Performance Team to obtain the most up to date available data. Some census data from 2001 is no longer relevant as communities have changed since this date and Centres will be provided new information relevant to their communities resulting from the recent 2011 census once the results from this census are published.

9. Have you undertaken any consultation on your proposals? (this may include consultation with staff, members, unions, community / voluntary groups, stakeholders, residents and service users)	Yes	X	No	
--	------------	----------	-----------	--

Who was consulted?	What consultation methods were used?	What did you learn from your consultation?	What do the results show about the impact on different equality groups (protected characteristics)?
Research took place between 17 th May and 23 rd August 2011. Three focus groups were conducted with service providers and staff, and face-to face interviews were conducted with	Focus groups, interviews, paper and online questionnaires.	The outcome of the consultation is the identification of very high community support for Children's Centres and the benefits provided by them. The report provides the evidence for the need for the continuation and sustainability of	Please refer to section above on Monitoring/Collecting Evidence & Data for some more detail on this. Responses to the consultation were received

parents in five different Children's Centres.
 In addition a further 26 groups were targeted by Children's centre staff to ensure those attending knew about the consultation, had opportunity to complete a questionnaire or have their views captured in it.

Paper questionnaires were distributed to all Children's centres. They were completed by 501 parents/guardians/carers, 30 partners and 39 staff.

Additionally, 26 parents completed the questionnaire online, totalling 596 responses overall

Children's centres, and provides suggestions for future effectiveness and efficiency.

The responses during the consultation indicate strong support the sustainability of the Children's Centres with users, staff, partners all proposing:

- developing the use of the children's centres,
- increasing their use by those who most need the services
- exploring options for income generation
- exploring a model of retaining staff expertise

The Harrow Council Children's Centre survey report, September 2011, focused on what the users valued and wanted from the Centres. The proposed new operating model has taken note of the findings. If Cabinet approval is given, a consultation on the proposed model will be carried out early in 2012 to ensure that the views of all stakeholders are considered. The consultation will take into account statutory guidance. This requires a local authority to carry out appropriate consultation, before making any arrangements for the provision of a children's centre, any significant changes to services provided through a children's centre or closing a children's centre.

from parents in a number of different equality groups as listed below – these questions have been taken from the Consultation report:

QA. Are you responding to the consultation as a:

Parent	81%
Lone parent	9%
Carer	5%
Younger person and service user	2%
Legal guardian	1%
Other	3%
<i>Base: All those who express an opinion</i>	485

QB. Are you...

Female	93%
Male	7%
<i>Base: All those who express an opinion</i>	465

QC. Which of the following age groups do you fall into?

Under 18	1%
18 to 24	6%
25 to 34	53%
35 to 44	31%
45 to 54	5%
55 to 64	2%
65+	2%
<i>Base: All those who express an opinion</i>	496

QD. If you are a parent, how many

children do you have?

1	51%
2	34%
3	10%
4	3%
5+	2%
<i>Base: All those who express an opinion</i>	453

QE. How old is your child/are your children?

0-3	69%
4-7	31%
8-11	11%
12-15	7%
16+	6%
I am expecting a baby	8%
<i>Base: All those who express an opinion</i>	472

QF. What is your household income before tax?

Up to £5,199 per year (less than £99 per week)	7%
£5,200 - £10,399 (£100 - £199 per week)	7%
£10,400 - £15,599 (£200-£299 per week)	7%
£15,600 - 20,799 (£300-£399 per week)	8%
£20,800 - £25,999 (£400-£499 per week)	7%
£26,000 - £31,199 (£500-	7%

£599 per week)	
£31,200-£51,999 (£600-£699 per week)	17%
£52,000 or more (£1000 or more per week)	19%
Don't know	22%
<i>Base: All those who express an opinion</i>	429

QG. How would you describe your ethnic group?

Asian or Asian British	49%
White (British)	28%
White (other)	9%
Black or Black British	6%
Mixed ethnic group	5%
Other ethnic group	3%
Arab	1%
Chinese	1%
<i>Base: All those who express an opinion</i>	487

NOTE: If you have not undertaken any consultation as yet, you need to consider if you need to carry out any consultation. For example, if you have insufficient data/information for any equality group and you are **unable** to assess the potential impact, you may want to consult with them on your proposals as how they will affect them. Any proposed consultation needs to be **completed before** progressing with the rest of the EqIA.

Guidance on consultation/community involvement toolkit can be accessed via the link below

http://harrowhub/info/200195/consultation/169/community_involvement_toolkit

10. If you have not undertaken any consultation, explain why?	Initial consultation has been carried out. If Cabinet approval is given, a consultation on the proposed model will be carried out early in 2012 to ensure that the views of all stakeholders are considered. The consultation will take into account statutory guidance.
---	--

Stage 3: Assessing Impact and Analysis

11. What does your information tell you about the impact on different groups? Consider whether the evidence shows potential for differential impact, if so state whether this is an adverse or positive impact? How likely is this to happen? How you will mitigate/remove any adverse impact? How likely is this to happen? How will you mitigate/remove any adverse impact?

Summary Impact

Option 1 - Retain current service and deliver limited budget reductions where possible.

This option was rejected as it does not deliver the necessary savings to meet the reduced funding available, neither does it provide an operational framework that will support service improvement and sustainability. This option is likely have an adverse impact on families and staffing unless it was implemented very fairly and if services to vulnerable groups were maintained. However it would be difficult to maintain and improve services for all and also reduce budgets. It is likely that certain groups would be adversely affected. Also it does not deliver the necessary savings so could not be a viable option.

Option 2 – Closure of some centres

Children’s centres have been placed strategically in order to meet the diverse needs of local communities. Closing any centre would therefore adversely impact all local families and thereby also have a disproportionate effect on those with protected characteristics.

Option 3 – If this is implemented fairly and services are continuously improved in line with community needs this option should have positive equality impact on families..

It may have an adverse effect in terms of redundancy costs. All staffing changes would have to be carried out in a fair and equal manner with no discrimination based on the 9 protected characteristics. It should have a positive impact if staff expertise is retained as the Hub model would allow for monitoring of centres by a central Hub manager who would be able to provide expertise to all centres. These managers would have a good overview of which services were required and successful at which centres – as currently each centre is run independently and so learning and experience from each of the centres is not systematically shared.

The remainder of this section will primarily focus on Option 3

Protected Characteristic	Positive	Adverse	Explain what this impact is, how likely it is to happen and the extent of impact if it was to occur.	What measures can you take to eliminate or reduce the adverse impact(s)? E.g. consultation, research, implement equality monitoring etc (Also Include these in the Improvement Action Plan at Stage 5)
Age (including carers of young/older people)			<p>Harrow Families If Option 3 is implemented there should not be an adverse effect on any particular age groups. There could be a positive effect as a centralised Management and Admin operating model should ensure consistency of approach across all centres, increased knowledge sharing between centres and regular monitoring on any impacts to protected</p>	Monthly/quarterly tracking of Centres usage with a focus on target groups (BME families, Lone Parents, Children/Carers with Disabilities, Families from deprived areas, age of children accessing services)

			<p>characteristics.</p> <p>Staff The process for changing the staffing structure should be done fairly without any age discrimination. Any required staffing changes (redundancy or recruitment) would have to be carried out in a fair manner with no discrimination based on the 9 protected characteristics</p>	
Disability (including carers of disabled people)			<p>Harrow Families Children centre services are open to all individuals. Some centres provide particular services targeted towards children or carers with disabilities or special needs. The requirements for the local communities are monitored and responded to. A centralised Management and Admin operating model should ensure consistency of approach across all centres, increased knowledge sharing between centres and regular monitoring on any impacts to protected characteristics.</p> <p>Staff Children centre roles/jobs are open to all individuals regardless of disability. . Any required staffing changes (redundancy or recruitment) would have to be carried out in a fair and equal manner with no discrimination based on the 9 protected characteristics. Although some changes in location may be needed, travel needs and disability will be taken into account in order to minimise any adverse impact.</p>	
Gender Reassignment			<p>Harrow Families Children’s centre services are open to all individuals regardless of gender reassignment. A centralised Management and Admin operating model should ensure consistency of approach across all centres, increased knowledge sharing between centres and regular monitoring on any impacts to protected characteristics.</p> <p>Staff Children centre roles/jobs should be open to all individuals regardless of gender reassignment. Any required staffing</p>	

			changes (redundancy or recruitment) would have to be carried out in a fair and equal manner with no discrimination based on the 9 protected characteristics	
Marriage and Civil Partnership			<p>Harrow Families Children centre services are open to all individuals regardless of marriage and civil partnership status. A centralised Management and Admin operating model should ensure consistency of approach across all centres, increased knowledge sharing between centres and regular monitoring on any impacts to protected characteristics.</p> <p>Staff Any required staffing changes (redundancy or recruitment) would have to be carried out in a fair and equal manner with no discrimination based on the 9 protected characteristics</p>	
Pregnancy and Maternity			<p>Harrow Families Children centre services are open to all individuals. Centres offer many services for pregnant women and new mothers. As long as all antenatal/maternity services were retained and sustained to meet the community's needs then this group should not be adversely affected. A centralised Management and Admin operating model should ensure consistency of approach across all centres, increased knowledge sharing between centres and regular monitoring on any impacts to protected characteristics.</p> <p>Staff Any required staffing changes (redundancy or recruitment) would have to be carried out in a fair and equal manner with no discrimination based on the 9 protected characteristics. There are individuals who work at Children's Centres who are pregnant or on maternity leave so they should be treated fairly in the new model. Although some staff may have to change location, the impact in terms of travel, childcare responsibilities etc will be considered and minimized.</p>	
Race			Harrow Families	

			<p>Children centre services are open to all individuals. Data shows that families from all ethnic backgrounds access Centre services and Centres continue to understand needs of ethnic groups within their communities. A centralised Management and Admin operating model should ensure consistency of approach across all centres, increased knowledge sharing between centres and regular monitoring on any impacts to protected characteristics.</p> <p>Staff Children centre roles/jobs are open to all individuals regardless of ethnicity. Any required staffing changes (redundancy or recruitment) would have to be carried out in a fair and equal manner with no discrimination based on the 9 protected characteristics.</p>	
Religion or Belief			<p>Harrow Families Children centre services are open to all individuals. A centralised Management and Admin operating model should ensure consistency of approach across all centres, increased knowledge sharing between centres and regular monitoring on any impacts to protected characteristics.</p> <p>Staff Children centre roles/jobs are open to all individuals regardless of religion or belief. Any required staffing changes (redundancy or recruitment) would have to be carried out in a fair and equal manner with no discrimination based on the 9 protected characteristics.</p>	
Sex			<p>Harrow Families Children centre services are open to all individuals. The majority of parents who access services at centres are women but there is an ongoing initiative to encourage more fathers to access Children's centres and numbers of fathers accessing Centres have increased. A centralised Management and Admin operating model should ensure consistency of approach across all centres, increased knowledge sharing between centres and regular monitoring on any impacts to protected characteristics</p> <p>Staff</p>	

			Children centre roles/jobs are open to all individuals regardless of sex. Majority of Children’s centre workforce are women. Any required staffing changes (redundancy or recruitment) would have to be carried out in a fair and equal manner with no discrimination based on the 9 protected characteristics.	
Sexual Orientation			<p>Narrow Families Children centre services are open to all individuals. A centralised Management and Admin operating model should ensure consistency of approach across all centres, increased knowledge sharing between centres and regular monitoring on any impacts to protected characteristics</p> <p>Staff Children centre roles/jobs are open to all individuals regardless of sexual orientation. Any required staffing changes (redundancy or recruitment) would have to be carried out in a fair and equal manner with no discrimination based on the 9 protected characteristics.</p>	
<p>12. Cumulative impact – Are you aware of any cumulative impact? For example, when conducting a major review of services. This would mean ensuring that you have sufficient relevant information to understand the cumulative effect of all of the decisions.</p> <p>Example: A local authority is making changes to four different policies. These are funding and delivering social care, day care, respite for carers and community transport. Small changes in each of these policies may disadvantage disabled people, but the cumulative effect of changes to these areas could have a significant effect on disabled people’s participation in public life. The actual and potential effect on equality of all these proposals, and appropriate mitigating measures, will need to be considered to ensure that inequalities between different equality groups, particularly in this instance for disabled people, have been identified and do not continue or widen. This may include making a decision to spread the effects of the policy elsewhere to lessen the concentration in any one area.</p>			<p>Not aware of any cumulative impact but will continue to improve out monitoring framework to assess any potential impacts to any particular groups.</p>	
<p>13. How do your proposals contribute towards the requirements of the Public Sector Equality Duty (PSED), which requires the Council to have due</p>				

regard to eliminate discrimination, harassment and victimisation, advance equality of opportunity and promote good relations between different groups.

(Include all the positive actions of your proposals, for example literature will be available in large print, Braille and community languages, flexible working hours for parents/carers, IT equipment will be DDA compliant etc)

Equality Group	Eliminate unlawful discrimination, harassment and victimisation and other conduct prohibited by the Equality Act 2010	Advance equality of opportunity between people from different groups	Foster good relations between people from different groups	What actions can you take to meet these requirements? (Also include these in the Improvement Action Plan at Stage 5)
Age (including carers of young/older people)	Children's centres currently operate within these requirements and should ensure they continue to do so under the proposed new operating model. They will continue to implement positive actions to meet these requirements and these should be recorded and monitored.			
Disability (including carers of disabled people)				
Gender Reassignment				
Marriage and Civil Partnership				
Pregnancy and Maternity				
Race				
Religion or Belief				
Sex				
Sexual Orientation				

14. Is there any evidence or concern that **direct or indirect discrimination** may occur with reference to anti discrimination legislation?

Direct discrimination - occurs when a person is treated less favourably than others on the grounds of their age, disability, gender, race, religion or belief, or sexual orientation. Refer to main guidelines and toolkit for examples of direct discrimination.

Indirect discrimination - occurs when a rule, condition or requirement, which applies equally to everyone, has a disproportionately adverse effect on people from a particular equalities group when there is no objective justification for the rule. Refer to main guidelines and toolkit for examples of indirect discrimination.

		Age (including carers)	Disability (including carers)	Gender Reassignment	Marriage and Civil Partnership	Pregnancy and Maternity	Race	Religion and Belief	Sex	Sexual Orientation
Direct	Yes									
	No	X	X	X	X	X	X	X	X	X
Indirect	Yes									
	No	X	X	X	X	X	X	X	X	X

If you have answered 'yes' to any of the above you need to stop and rethink and should not proceed with your proposals. **(You are also encouraged to seek Legal Advice)**

Stage 4: Decision

15. Please indicate which of the following statements best describes the outcome of your EqlA (✓ tick one box only)

Outcome 1 – No change required: when the EqlA has not identified any potential for discrimination or adverse impact and all opportunities to promote equality are being addressed.	X
Outcome 2 – Adjustments to remove adverse impact identified by the EqlA or to better promote equality. List the actions you propose to take to address this in the Improvement Action Plan at Stage 5	
Outcome 3 – Continue with proposals despite having identified some potential for adverse impact or missed opportunities to promote equality. In this case, the justification needs to be included in the EqlA and should be in line with the PSED to have 'due regard'. In some cases, compelling reasons will be needed. You should also consider whether there are sufficient plans to reduce the negative impact and/or plans to monitor the impact. (explain this in 15A below)	
Outcome 4 – Stop and rethink: when your EqlA shows actual or potential unlawful discrimination. (You are also encouraged to seek Legal Advice)	

15A. If your EqlA is assessed as **outcome 3**, explain your justification with full reasoning to continue with your proposals?

Stage 5: Making Adjustments (Improvement Action Plan)

16. List below any actions you plan to take as a result of this impact assessment. This should include any actions identified throughout the EqIA.

Area of potential adverse impact e.g. Race, Disability	Action proposed	Desired Outcome	Target Date	Lead Officer	Progress
All: Underprivileged Families (doesn't fit into one particular characteristic). The consultation carried out suggested that families may be asked to pay a membership fee for using Centres in the new model.	Do not charge families who live in most deprived areas or are on income support	Underprivileged Families continue to access Children's Centres	The implementation of the new operating structure is a major change programme over 2-3 years.	Wendy Beeton	Ongoing monitoring of centre services and usage to ensure the families that require services are using them.
All: Staff Changes Any staff changes required would have to be done in a fair and non discriminatory manner and in line with legal requirements.	Fair recruitment and redundancy process. There will be on-going support for staff through the transition to the new operating structure.	Any staff changes are implemented fairly without discrimination.	The implementation of the new operating structure is a major change programme over 2-3 years.	Wendy Beeton	Fair recruitment and redundancy process. Staff involvement and input into any changes proposed. Monitoring of equality groups to track trends.
All: New operating model should continue to ensure all equality groups can access Centre services	As new operating model emerges, close monitoring of groups accessing services will continue and will be developed to meet requirements.	Families accessing services are representative of local population	The implementation of the new operating structure is a major change programme over 2-3 years.	Wendy Beeton	Ongoing monitoring of centre services and usage to ensure the families that require services are using them.

Stage 6 - Monitoring

The full impact of the decision may only be known after the proposals have been implemented, it is therefore important to ensure effective monitoring measures are in place to assess the impact.

17. How will you monitor the impact of the proposals once they have been implemented? How often will you do this?

- Monthly tracking of Centres usage with a focus on target groups (BME families, Lone Parents, Children/Carers with Disabilities, Families from deprived areas)
- Annual compilation of comparative data sets to determine any trends or particular issues that require attention/ intervention or communication by Harrow Council

<p>18. What monitoring measures need to be introduced to ensure effective monitoring of the policy? (Also Include in Improvement Action Plan at Stage 5)</p>	<p>- Annual compilation of comparative data sets to determine any trends or particular issues that require attention/ intervention or communication by Harrow Council</p>
<p>19. How will the results of any monitoring be analysed, reported and publicised?</p>	<p>- Analysed by performance team and reported to Children’s centres management and Early Years management on a regular basis.</p>
<p>20. Have you received any complaints or compliments about the policy, service, function, project or decision being assessed? If so, provide details.</p>	<p>None known</p>

Stage 7 – Reporting outcomes
The completed EqlA must be attached to all committee reports and a summary of the key findings included in the relevant section within them.

EqlA’s will also be published on the Council’s website and made available to members of the public on request.

<p>21. Summary of the assessment</p> <p>NOTE: This section can also be used in your Cabinet reports etc but you must ALSO attach the full EqlA to the report</p> <ul style="list-style-type: none"> ➤ What are the key impacts – both adverse and positive? ➤ What course of action are you advising as a result of this EqlA? ➤ Are there any particular groups affected more than others? ➤ Do you suggest to proceeding with your proposals although an adverse impact has been identified? 	<p>If the preferred Option 3 is implemented then there should be positive impact in terms of service delivery to Harrow’s communities. In terms of staff, there should be no adverse impact as long as the process for implementing the change is carried out in a fair and non-discriminatory manner .</p>
--	---

<p>22. How will the impact assessment be publicised? E.g. Council website, intranet, forums, groups etc</p>	<p>Council website</p>
--	------------------------

Stage 8 - Organisational sign Off (to be completed by Chair of Departmental Equalities Task Group)
The completed EqlA needs to be sent to the chair of your Departmental Equalities Task Group (DETG) to be signed off.

23. Which group or committee considered, reviewed and agreed the EqIA and the Improvement Action Plan?	<i>To be reviewed at Cabinet December 2011.</i>		
Signed: (Lead officer completing EqIA)	Sita Mistry, on behalf of Wendy Beeton	Signed: (Chair of DETG)	Joy Shakespeare
Date:	18 November 2011	Date:	16 November 2011