



EQUALITY IMPACT ASSESSMENT TOOL

The council has a statutory duty to consider the impact of its decisions on age, disability, gender reassignment, pregnancy & maternity, race, religion or belief, sex (gender) and sexual orientation.

The Council also has a duty to foster good relations between different groups of people and to promote equality of opportunity.

Completing an Equality Impact Assessment (EIA) is the **simplest way** to demonstrate that the Council has considered the equality impacts of its decisions and it reduces the risk of legal challenge. EIAs should be carried out at the **earliest stages** of policy development or a service review, and then updated as the policy or review develops. EIAs must be undertaken when it is possible for the findings to inform the final decision. Keep all versions of your EIA. An EIA should be finalised once a final decision is taken.

When should you undertake an EIA?

- You are making changes that will affect front-line services
- You are reducing the budget of a service, which will affect front-line services
- You are changing the way services are funded and this may impact the quality of the service and who can access it
- You are making a decision that could have a different impact on different groups of people
- You are making internal reorganisations that will result in staff changes including Transfer of Undertakings (TUPE), redundancies, change in job roles or terms and conditions.
- EIAs also need to be undertaken on how a policy is implemented even if it has been developed by central government (for example cuts to grant funding)
- **Section 1 of the EIA Tool: Initial Screening**, will help you decide whether a full EIA is necessary

Who should undertake the EIA?

- The person who is making the decision or advising the decision-maker

Further Guidance

- [Step-by-Step Guidance to the questions](#)
- An EIA e-learning module is available for all Westminster staff: www.learningpool.com/westminster/course/view.php?id=159

Please contact the Equalities lead to inform them when you begin and then complete an EIA: equalities@westminster.gov.uk

SEB will monitor compliance with the requirement to complete EIAs.

Title of Proposal
Service Proposals for Children’s Centres in Westminster City Council.
Lead Officer
<ul style="list-style-type: none"> i. Jayne Vertkin ii. Head of Early Help Services iii. Family Services iv. vertkin@westminster.gov.uk
Has this project, policy or proposal had an EIA carried out on it previously? If yes, please state date of original and append to this document for information.
Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Date of original EIA:
Version number and date of update

SECTION 1: Initial screening: Do you need to complete an Equality Impact Assessment (EIA)?

Not all proposals will require an EIA, this initial screening will help you decide if your project or policy requires a full EIA by looking at the potential impact on any equality groups.

1.1	What are you analysing?
	<p>We know that many children and families, at different stages in their lives, find themselves faced with challenging situations and require additional support, advice and intervention. In the face of diminishing resources, we need to target children and families with the greatest need and work with partner agencies in an integrated way to achieve the best outcomes from our shared resources. In re-shaping the children’s centres the aim is to continue to support families in those groups with the greatest needs.</p> <p>This is a preliminary EIA. The equality impact implications for staff will be considered during the staff consultation process.</p> <p>What is the purpose of the proposal?</p> <p>The proposal covers changes to existing children’s centre provision. The proposals will see children’s centres as an integral part of a new early help model.</p> <p>This new model will be one of networked collaboration that consists of the following:</p> <ul style="list-style-type: none"> ○ The set-up of 3 children and family hubs (or early help hubs) that will support families with children across the age spectrum. These will develop from the existing 3 children centre hubs. ○ An early help partnership around each hub consisting of organisations who commit to developing a shared approach through joint sharing of information,

assessments and meetings.

- **A fortnightly early help partnership action / allocation meeting** to allocate and manage support to families through better co-ordination

Westminster currently has twelve children's centre sites – 3 hubs and 9 satellites. The proposed model will mean a different use of eight of the satellite sites.

The specific changes to children's centres within this model are as follows:

We will go further in targeting services to those families most in need by:

- Creating more 2 year early education places in existing children's centre sites.
- Further integrating with health services so that families with need are systematically identified earlier.
- Ensuring that the hubs are in the areas of greatest deprivation and offer a range of services to families who need extra help.

The **3 existing children centre hubs will become the 3 children and family hubs (or early help hubs, the name is still to be determined)**. The integrated range of children's centre services will continue but the 'hub' will also act as a place for services to be delivered for older children - after school and in the holidays. The children's centre services at the 'hub' will continue to provide the full range of support services for families. The up-coming consultation on this future model will ask families what services they would like to see for their older children in the hub.

The only other site that will continue to provide a range of children's centre services is **Maida Vale Children's Centre**. This is because this centre can attract clients from the north-east and north-west areas of Westminster and is set within an area of significant deprivation. It is also located on the site of St Augustine's primary and secondary school and supports the provision of a 0-19 service on the campus.

We will aim to expand the **2 year early education places** to 4 more children's centre sites – Maida Vale (located at St Augustine's), Queensway (located at Hallfield School), Bayswater and Westbourne (located at Edward Wilson School) Children's Centres.

The children's centre funding, and associated services, will cease at all other satellite sites. This includes the stay and play sessions currently provided by the Local Authority which will cease from October 2016. This will impact on parents, carers and children currently using these centres but we will work with the community to facilitate the set-up of stay and plays in community venues by training local parents and linking this provision with the children centres.

We will continue to **integrate with local health services to facilitate the very earliest identification of need**. Support from children's centres goes beyond the actual centre and many families receive help through a programme of home visiting. Through closer worker relationships with health visitors and midwives, and having them based in the children's

centre hubs, we are beginning to identify need in families much earlier.

A map showing the 4 children centre sites remaining in relation to deprivation is attached at appendix 1.

In what context will it operate?

The context in which children's centres operate is changing as follows:

- **Resources are reducing** while the demand for specialist services is increasing. Like other councils, Westminster needs to make further savings in response to budget reductions. The earliest possible intervention, through an integrated early years response, if successful can empower families to regain control of their circumstances and help transform the lives of vulnerable children without expensive state support. **It is vital that children's centres (and early help in the widest sense) are positioned to prevent escalation to more costly, long-term interventions.**
- **The OFSTED thematic inspection of Early Help (2014)** suggests that the interface between statutory interventions and early help needs further work to prevent re-referrals. Their work suggests that many cases that they audited still demonstrated that early help hadn't prevented escalation to higher level services.
- **The current children's centre buildings are expensive to run.** They cost us £259,000, which is 23% of the total children's centre budget in family services. However, what is more important than the buildings is how successfully children and families with additional needs are identified and collectively offered vital support.
- **Integration with local health services is improving** and it is this that supports the successful identification of need and the chance to then offer tailored support to families.
- **The introduction of the 2 year early education places has provided a framework for targeting families more effectively** and changed the usage of the children's centre buildings as most children in need will be accessing an early education place by 2. The evaluation of the initial 2 year early education place pilot by the DfE suggested that:
 - Children with any developmental delay catch up quickly with their peers thereby ensuring that they do not enter the universal entitlement with an even greater disadvantage.
 - Children who catch up and perform well at EYFS Profile Stage also do well at Key Stage 1 and the gains remain constant at least till age 11.
- **This means the children's centres are now mainly 'reaching' the 0 – 2 age group** because children who they need to reach should be accessing childcare from 2 years of age. This is

evident from current reach data, see attached at Appendix 3.

- **Locally, we will be re-shaping our child in need work and changing the nature of social work ‘assessments’**, ensuring that assessments are an intervention that can generate change. This gives the opportunity to re-shape the early help service with its own identity / brand.
- **There is a new commissioning framework**, which will support closer alignment of health visiting with children’s centres and therefore greater integration in work practices.

Who is intended to benefit and how?

This proposal will target families and individuals with particular vulnerabilities or who might require additional support. In particular the proposed model has prioritised the following groups:

- Children who are likely to not be school ready at 5;
- Children and families with more complex needs;
- Mothers and babies, including pregnant women;
- Parents seeking employment;
- Parents at risk of harm.

Some of these vulnerabilities are statistically more prevalent for individuals with certain protected characteristics.

The introduction of the 2 year early education places has provided a framework for targeting families more effectively and changed the usage of the buildings as most children in need will be accessing an early education place by 2. The evaluation of the initial 2 year early education place pilot by the DfE suggested that:

- Children with any developmental delay catch up quickly with their peers thereby ensuring that they do not enter the universal entitlement with an even greater disadvantage.
- Children who catch up and perform well at EYFS Profile Stage also do well at Key Stage 1 and the gains remain constant at least till age 11.

This means the children’s centres are now mainly ‘reaching’ the 0 – 2 age group unless the 2 year early education places are seen as an integral part of the children’s centre offer.

There is a new commissioning framework, which will support closer alignment of health visiting with children’s centres and therefore greater integration in work practices.

1.2 From a service user and staff perspective, does the project, policy or proposal have the potential to <u>disproportionately</u> impact on any of the following groups? If so, is the impact positive or negative?					
		None	Positive	Negative	Not sure
	Disabled people	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Particular ethnic groups	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Men or women (include impacts due to pregnancy/ maternity)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	People or particular sexual orientation/s	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	People who are proposing to undergo, are undergoing or have undergone a process or part of a process of gender reassignment	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	People on low incomes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	People in particular age groups	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	Groups with particular faiths and beliefs	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Are there any other groups that you think may be affected negatively or positively by this project, policy or proposal?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	Families with older children (5-19 years old)		<input checked="" type="checkbox"/>	<input type="checkbox"/>	

If the answer is “negative” or “unclear” consider doing a full EIA

1.3 What do you think that the overall NEGATIVE impact on groups and communities will be?		None / Minimal	Significant
<p><u>None or minimal impact would be where there is no negative impact identified, or where there will be no change to the services for any groups. Wherever a negative impact has been identified you should consider undertaking a full EIA by completing the rest of the form.</u></p>		<input checked="" type="checkbox"/>	<input type="checkbox"/>

1.4 Using the screening and information in questions 1.2 and 1.3, should a full assessment be carried out on the project, policy or proposal?	
Yes	<input checked="" type="checkbox"/> No <input type="checkbox"/>

1.5 How have you come to this decision?	
<p>Currently the stay and play sessions delivered at children’s centres are available at 10 of the centres and parents state that they provide considerable support in the 1st year of their child’s life, helping them to build social networks and preventing postnatal depression. A reduction in this provision will impact on both parents but women are the highest users.</p>	

SECTION 2: EQUALITY IMPACT ASSESSMENT

Building an Evidence Base: What do you know?

This section will help you build your evidence base and interpret what the likely impact will be of your service. Complete this section if your proposal is service user related. If your proposal only affects staff, go to section 2.2

2.1 *Build up a picture of who uses/will use your service or facility and identify who are likely to be impacted by the proposal*
If you do not formally collect data about a particular group then use the results of local surveys or consultations, census data, national trends or anecdotal evidence (indicate where this is the case). Please attempt to complete all boxes.

	Reporting period	Data Description	Measure	North West	North East	South
How many people use the service currently? What is this as a % of Westminster's population?	March 2014-15	How many people use the service currently? What is this as a percentage of Westminster's population?	All under 5 yr olds in reach	1899/43 %	2157/36 %	1265/38 %
Disabled people			Under 5s in 30% most deprived areas	1609/47 %	1147/59 %	632/41%
Particular ethnic groups			Under 5s in 10% most deprived areas	1509/47 %	795/51%	144/51%
Men or women (include impacts due to pregnancy/maternity)						
People of particular sexual orientations						

Increasingly, the majority of parents accessing the centres are now under 2 years as after this age many children are accessing the early education free entitlement. It is also in the first 2 years that research suggests early intervention has the greatest impact. If you therefore look at the data for September 2015 and look at reach for the under 1 years in the 10% most deprived areas the reach rises to 87% (NE), 90% (NW) and 82% (S) and in the 30% most deprived areas it is 89% (NE), 87% (NW) and 87% (S).

Appendix 2 provides further detail on the numbers of children the service currently works with including information on the number of children with a disability, the numbers from a BME background and the number of fathers. In each case the information provides a baseline for numbers present in each of the localities along with the numbers accessing children's centre services and the numbers 'engaged' with the service – defined accessing provision three or more times.

Appendix 3 shows the number of families accessing each of the stay and play sessions between June and November by level of deprivation. It also indicates the number of these children from a BME background. The table shows that over the last six months (June to November 2015) less than half the children attending

stay and play sessions came from the most deprived 10% of the community. 36% of attendees were in the 40% most deprived or below. 63% of the children attending these sessions were from a BME background.

Where stay and play sessions are reduced we will aim to replace them with the free 2 year early education offer for eligible families to support better targeting and reach of those families, who may not currently access early years services, and to mitigate against the impact of reducing the number of stay and play sessions, as the long term outcomes for children accessing the 2 year entitlement are significant.

The following tables show that although the average take up of the 2 Year Old Offer placements is consistent with national averages, it does show that Westminster does not achieve well for placements of children from the list of families provided to the Local Authority by the Department for Education (DfE).

CC Area 2 Year Old Take up		Nov-14	Apr-15	Aug-15	Data Source	WCC Take-up % (Ave)	London Take-up % (Ave)	England Take-up % (Ave)
North West	Families on DFE list (Baseline)	364	343	279	DWP List/LA placement and Application	-	-	-
	Families occupying place	143	141	166		-	-	-
	2 year old family take up percentage	39%	41%	59%		58%	51%	62%
	Families occupying a place matched to DFE list	91	111	125		-	-	-
	<i>Families who have submitted applications</i>	<i>44</i>	<i>50</i>	<i>10</i>		-	-	-

CC Area - 2 Year Old Take up		Nov-14	Apr-15	Aug-15	Data Source	WCC Take-up % (Ave)	London Take-up % (Ave)	England Take-up % (Ave)
North East	Families on DFE list (Baseline)	260	266	233	<i>DWP list/LA placement and Application</i>	-	-	-
	Families occupying place	83	108	116		-	-	-
	2 year old family take up percentage	32%	41%	50%		58%	51%	62%
	Families occupying a place matched to DFE list	50	84	84		-	-	-
	<i>Families who have submitted applications</i>	27	37	11		-	-	-

CC Area 2 Year Old Take up		Nov-14	Apr-15	Aug-15	Data Source	WCC Take-up % (Ave)	London Take-up % (Ave)	England Take-up % (Ave)
South	Families on DFE list (Baseline)	175	174	123	<i>DWP list/LA placement and Application</i>	-	-	-
	Families occupying place	82	70	76		-	-	-
	2 year old family take up percentage	47%	40%	62%		58%	51%	62%
	Families occupying a place matched to DFE list	47	50	58		-	-	-
	<i>Families who have submitted applications</i>	12	35	14		-	-	-

The provision of the 2 year free entitlement in children's centres has made a significant contribution to increasing the number of places available to families since the previous changes; children's centres are now offering 71 new places for those eligible for the 2 year free entitlement. In some centres, wrapped around the 2 year offer is an invitation to attend a parenting group. It is this combination of early learning for the child and parenting support for the parents that is vital.

To achieve the focus on those children most at risk of the poorest outcomes, as stated earlier, we will propose to **extend the provision of the 2 year early education places** to the following sites – Maida Vale (located at St Augustine’s), Queensway (located at Hallfield School), Bayswater and Westbourne (located at Edward Wilson School) Children’s Centres. **Using an analysis of the Spring 16 DWP data (658 children) it suggests that targeting places within these children’s centres is correct** as the wards with the highest concentration of families eligible for the 2 year offer are as follows;

- Westbourne - 102 (15.5% of total eligible families)
- Church St - 100 (15.2%)
- Queens Park - 88 (13.4%)

Broken down by locality it is:

North West – 240, North West – 286, South – 132

Therefore based on the current supply of places the wards requiring further capacity building to accommodate increasing take up are: Church Street, Maida Vale, Harrow Road, Queens Park, Westbourne and Churchill.

This section should be completed for all proposals that will impact on staff.

2.2 Build up a picture of the makeup of the workforce profile in the service affected.																																																																																																																								
<p>What is the workforce profile of the service? As a percentage, how does this compare to the profile of Westminster City Council workforce?</p> <ul style="list-style-type: none"> • Age • Disability • Gender • Gender Reassignment • Ethnicity • Pregnancy and Maternity • Religion/Belief • Sex • Sexual Orientation 	<p>This data is unavailable. Staff are employed by a range of providers.</p> <table border="1"> <thead> <tr> <th rowspan="2">Group</th> <th colspan="2">Service</th> <th colspan="2">Council</th> </tr> <tr> <th>No</th> <th>%</th> <th>No</th> <th>%</th> </tr> </thead> <tbody> <tr> <td colspan="5">Age</td> </tr> <tr> <td>16-24</td> <td></td> <td></td> <td>35</td> <td>2%</td> </tr> <tr> <td>25-29</td> <td></td> <td></td> <td>148</td> <td>7%</td> </tr> <tr> <td>30-44</td> <td></td> <td></td> <td>893</td> <td>43%</td> </tr> <tr> <td>45-59</td> <td></td> <td></td> <td>854</td> <td>41%</td> </tr> <tr> <td>60-64</td> <td></td> <td></td> <td>115</td> <td>5%</td> </tr> <tr> <td>65 +</td> <td></td> <td></td> <td>33</td> <td>2%</td> </tr> <tr> <td colspan="5">Disability</td> </tr> <tr> <td>Yes</td> <td></td> <td></td> <td>66</td> <td>3%</td> </tr> <tr> <td>No</td> <td></td> <td></td> <td>897</td> <td>43%</td> </tr> <tr> <td>Not Known</td> <td></td> <td></td> <td>1115</td> <td>54%</td> </tr> <tr> <td colspan="5">Ethnicity</td> </tr> <tr> <td>Asian/Asian British</td> <td></td> <td></td> <td>145</td> <td>7%</td> </tr> <tr> <td>Black/Black British</td> <td></td> <td></td> <td>416</td> <td>20%</td> </tr> <tr> <td>Mixed</td> <td></td> <td></td> <td>62</td> <td>3%</td> </tr> <tr> <td>White</td> <td></td> <td></td> <td>1371</td> <td>66%</td> </tr> <tr> <td>Other</td> <td></td> <td></td> <td>42</td> <td>2%</td> </tr> <tr> <td>Unknown</td> <td></td> <td></td> <td>83</td> <td>4%</td> </tr> <tr> <td colspan="5">Gender</td> </tr> <tr> <td>Female</td> <td></td> <td></td> <td>1192</td> <td>57%</td> </tr> <tr> <td>Male</td> <td></td> <td></td> <td>886</td> <td>43%</td> </tr> <tr> <td colspan="5">Pregnancy and Maternity</td> </tr> </tbody> </table>	Group	Service		Council		No	%	No	%	Age					16-24			35	2%	25-29			148	7%	30-44			893	43%	45-59			854	41%	60-64			115	5%	65 +			33	2%	Disability					Yes			66	3%	No			897	43%	Not Known			1115	54%	Ethnicity					Asian/Asian British			145	7%	Black/Black British			416	20%	Mixed			62	3%	White			1371	66%	Other			42	2%	Unknown			83	4%	Gender					Female			1192	57%	Male			886	43%	Pregnancy and Maternity				
Group	Service		Council																																																																																																																					
	No	%	No	%																																																																																																																				
Age																																																																																																																								
16-24			35	2%																																																																																																																				
25-29			148	7%																																																																																																																				
30-44			893	43%																																																																																																																				
45-59			854	41%																																																																																																																				
60-64			115	5%																																																																																																																				
65 +			33	2%																																																																																																																				
Disability																																																																																																																								
Yes			66	3%																																																																																																																				
No			897	43%																																																																																																																				
Not Known			1115	54%																																																																																																																				
Ethnicity																																																																																																																								
Asian/Asian British			145	7%																																																																																																																				
Black/Black British			416	20%																																																																																																																				
Mixed			62	3%																																																																																																																				
White			1371	66%																																																																																																																				
Other			42	2%																																																																																																																				
Unknown			83	4%																																																																																																																				
Gender																																																																																																																								
Female			1192	57%																																																																																																																				
Male			886	43%																																																																																																																				
Pregnancy and Maternity																																																																																																																								

		<ul style="list-style-type: none"> • Are any staff pregnant or on maternity • How are they affected by this change
		Religion & Belief
		There is insufficient data to make an assessment on this characteristic. Any issues identified as part of the consultation process will be included
		Sexual Orientation
		There is insufficient data to make an assessment on this characteristic. Any issues identified as part of the consultation process will be included
		Gender Reassignment
		Data on Gender Reassignment is currently not available but it is unlikely that this proposal will impact either positively or negatively on the protected characteristic of gender reassignment. The consultation process should identify any issues that need to be considered with regards to this protected characteristic.
	Using the information above, are any groups of staff disproportionately represented compared to the Council workforce?	Breakdown of staff data unavailable from HR
	Does TUPE apply to this proposal?	Breakdown of staff data unavailable from HR
	Will the reorganisation/restructure result in an increase or decrease in staff numbers? If so, approximately how many?	Breakdown of staff data unavailable from HR
	Will the reorganisation/restructure result in changes in job roles or terms and conditions for staff? If so, what changes are proposed?	Breakdown of staff data unavailable from HR

2.3 Summary (to be completed following analysis of the evidence above)				
	None	Positive	Negative	Not sure
Does the project, policy or proposal have the potential to have a <u>disproportionate</u> impact on any of the following groups? If so, is the impact positive or negative?				
Disabled people	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Particular ethnic groups	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Men or women (include impacts due to pregnancy/maternity)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
People of particular sexual orientations	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

People who are proposing to undergo, are undergoing or have undergone a process or part of a process of gender reassignment	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
People on low incomes	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
People in particular age groups	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Groups with particular faiths and beliefs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Are there any other groups that you think this proposal may affect negatively or positively?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

SECTION 3: Assessing Impact

In order to be able to identify ways to mitigate any potential impact it is essential that we know what those potential impacts might be.

Consultation Information

This section should record the consultation activity undertaken in relation to this project, policy or proposal

In January 2015, consultation was undertaken with parents and service users around changes to Children's Centre provision that came into effect from 1 September 2015. At that time, respondents commented that children's centres were invaluable to all who use them, regardless of their social position and that they helped to build community. Positive comments were made about the quality of provision available at children's centres and the introduction of fathers' groups.

Parents and centre users reported that the 'stay and play' sessions were useful. Some respondents were concerned that the proposed changes would mean that they would have to travel further to access 'stay and play' opportunities and that any reduction in the number of sessions would leave the remainder oversubscribed. They also acknowledged that there were other groups in Westminster but they felt the quality provided at the children's centres was better.

Some respondents recognised the value of developing more targeted services but queried whether the new provision, and specifically the introduction of the 2 year old offer in more settings, would necessarily attract those families most in need. Some respondents observed that while there was a lot of provision available for under-fives in the local area, there was not very much that catered for parents and carers with very young children (under 1).

In January 2016 a consultation started on the current proposed changes to children's centres. This on Monday 4th January and will end on 30th January. Parents were given two options for expressing their views:

- Via an on-line questionnaire on the website.
- Via face to face group sessions in the hub children's centres. We have arranged for three sessions, one in each Locality

The **main themes** raised by parents in the face to face sessions have been similar to those in

January 2015:

- Parents with 'low mood' / postnatal depression need some form of drop-in service. So drop-in important in 1st year of a child's life.
- Some parents felt positive about keeping a network of stay and play sessions through a network of parent volunteers but others were more cautious about the loss of professional input and the reliability of volunteers.
- Some parents have suggested paying for services whilst others have said that this should never happen.
- There has been a positive acceptance of the idea of a children and family hub that can offer services for children of different ages but some initial anxiety that this would impact on children's centre provision.
- Concern about buildings and future use of sites and whether one 'hub' is sufficient as parents will need to walk further.

SECTION 4: Reducing & Mitigating Impact

As a result of what you have learned, what can you do to minimise the impact of the proposed changes on equality groups and other excluded / vulnerable groups, as outlined above?

4.1	Where you have identified an impact, what can be done to reduce or mitigate the impact? <i>(Remember to think about the Council as a whole, another service area may already be providing services which can help to deal with any negative impact).</i>
	<p>Impact 1: Reduced centre based provision across the borough – impacting on women and children and those on low incomes, who are unable to pay for similar services.</p> <p>This EIA has identified that the reduction in ‘stay and play’ sessions provided from some children centres, will impact more on women, whilst acknowledging that some fathers benefit greatly from the provision too.</p> <p>We are committed to facilitating the set-up of community based stay and play sessions led by parents, faith or community based groups either in their existing buildings or in the children’s centre satellites on a sessional basis. Examples of such models are developing in Queens Park. We will provide training to parents wanting to run these sessions and will explore how to achieve this over the next 6 months. Parents are already volunteering to be part of this network. Each stay and play would be linked to a children’s centre.</p> <p>The expansion of the 2 year old provision is likely to have a positive impact on women, providing them with a time for learning and employment and an early learning experience for the children. Not only is this provision specifically aimed at disadvantaged groups but it also can be shown to significantly improve outcomes for the children, families and carers involved.</p> <p>Despite a reduction in centre based services, we will continue to improve how we identify need earlier by close working with health colleagues. Our links with health visitors and midwives is continuing to develop and we now have joint systems to flag families needing support earlier through effective sharing information. These systems are not dependent on a building and so if a family live in any area, and have need, they will be supported. An example of continued development in this area is new evidence based antenatal support programme – Baby Steps – which will be piloted from April 2016. We are also constantly striving to attract new services for residents through new partnerships, for example the Healthy Relationships, Healthy Babies Programme based at Queens Park Children’s Centre and providing support to families experiencing domestic abuse.</p>

4.2	Now that you have considered the potential or actual effect on equality, what action are you taking?
	No major change (no impacts identified) <input type="checkbox"/>
	Adjust the policy/proposal <input type="checkbox"/>
	Continue the policy/proposal (impacts identified) <input checked="" type="checkbox"/>
	Stop and remove the policy/proposal <input type="checkbox"/>
4.3	Please document the reasons for your decision
	<p>In line with the Early Help Strategy, these proposals aim to ensure that a range of services for children and young people are effectively targeted to those who require the most assistance and support. With reduced resources, this will ensure that services are able to have the maximum impact and will be better able to identify issues, tailor their response and thereby intervene so that problems can be resolved before issues escalate.</p> <p>This more targeted approach will mean that certain elements of service provision, currently provided on a universal basis, may be reduced or removed. This will impact upon the people currently accessing the services, and the EIA has considered what mitigation might be required or what further information is needed. In particular, the reduction in 'stay and play' sessions provided from some children centres, will impact more on women, as the highest users, but mitigation is planned to reduce the impact of this reduction.</p>
4.4	How will the impact of the project, policy or proposal and any changes made to reduce the impact be monitored?
	<p>Children's centre staff, and organisations, delivering services out of children's centres will be required to monitor the attendance of all the activities</p> <p>To measure the impact of the proposals, staff will monitor the numbers and groups of parents who attend each session and record these on a database This data is reviewed regularly by a Management Board to ensure the services are reaching the appropriate children and families as specified in the core purpose for children's centres as specified by the Government and required in the OFSTED framework.</p>
4.5	Conclusion
	<i>This section should record the overall impact, who will be impacted upon and the steps being taken to reduce/mitigate impact</i>
	<p>The Council continue to be committed to the goal that children in Westminster have the best possible start in life whatever the family's circumstances. However like other councils, Westminster City Council can only achieve this goal by making changes to its services to meet significant budget reductions.</p> <p>In line with the Government's children centres core purpose, Ofsted's measures on reaching the most vulnerable families, and the Council's Early Help Strategy, the proposals for children's centres aim to ensure that a range of services for children and young people are effectively targeted to those who require the most assistance and support.</p> <p>Whilst acknowledging that these proposals will have an impact on the lives of some families, we feel confident that the reduced resources will be targeted to those children at risk of the poorest outcomes and we will work to mitigate the impact for other families by facilitating a network of parent led stay and play sessions.</p>

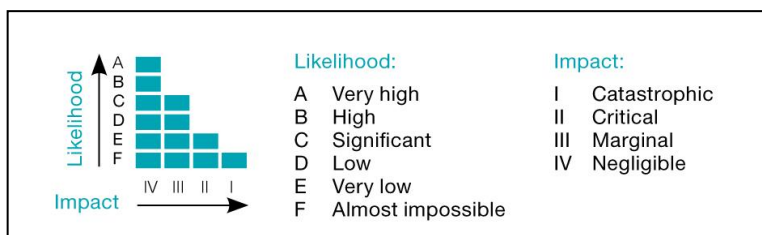
SECTION 5: Next Steps

5.1	Action Plan <i>Complete the action plan if you need to reduce or remove the negative impacts you have identified, take steps to foster good relations or fill data gaps.</i> <i>NB. Add any additional rows, if required.</i>						
	Action Required	Equality Groups Targeted	Intended Outcome	Resources Needed	Name of Lead, Unit & Contact Details	Completion Date (DD/MM/YY)	RAG
	Communicate with current service users of Stay and Play sessions so that they are aware of other local provision, including, where appropriate, signposting service users to the new 'hubs'	Women, Children, BME groups	Families have access to a range of services in Westminster that are delivered by other providers	Information promotion through leaflets and websites.	Jayne Vertkin. Head of Early Help jvertkin@westminster.gov.uk Kaye Holmes, Account Director Policy, Performance & Communications Department kholmes@westminster.gov.uk / 020 7641 5713	July 2016	
	Encourage and support community and third sector organisations to consider their role in areas where stay	Women, Children, BME groups	Families have access to provision within their community, which builds social contacts and infrastructure	Time allocation to facilitate meetings Training of volunteers	Jayne Vertkin. Head of Early Help jvertkin@westminster.gov.uk	July 2016	

	and play provision is being reduced		within communities				
	Advertise and maximise outreach for the proposed 2 year old places.	Women, Children, BME groups	Better long term outcomes for children in terms of their attainment.	Buildings Staff Collaboration with schools	Phil Tomsett, Manager of the early Years Advisory Team ptomsett@westminster.gov.uk 0207641 7303	On-going	

5.2 Risk Table

Ref	Risk	Impact	Actions in place to mitigate the risk	Current risk score	Further actions to be developed
R1.1	Inability to recruit parent volunteers	Unable to mitigate against the impact for some parents	Discussing this with parents and will start the recruitment of parent volunteers early. Interest already expressed by some parents.	D	



THIS SECTION TO BE COMPLETED BY THE RELEVANT SERVICE MANAGER

Signature:

Full Name:Jayne Vertkin.....

Unit:Family Services.....

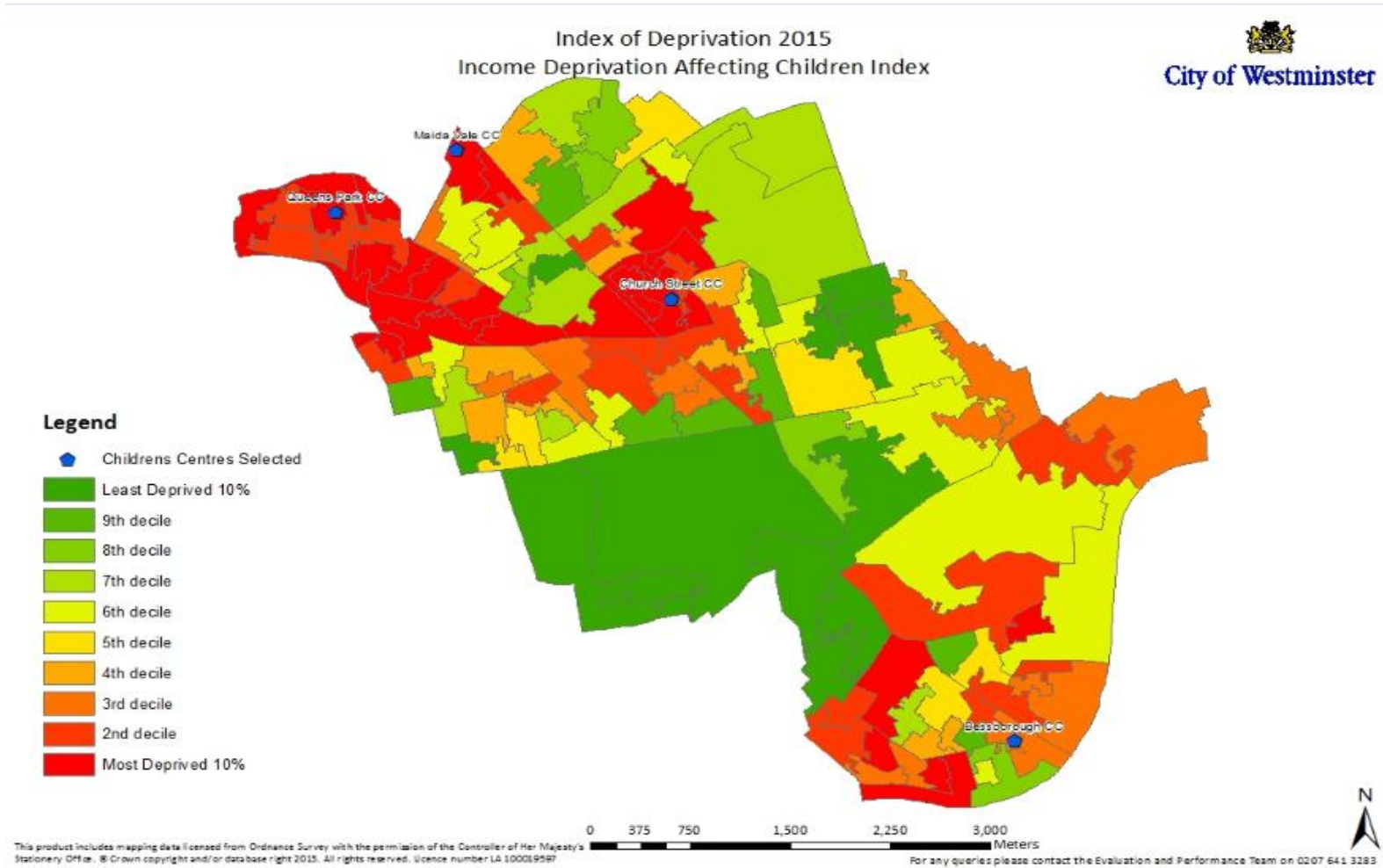
Email & Telephone Ext:5745.....

Date of Completion (DD/MM/YY):27th ...January 2016.....

WHAT NEXT?

Please email your completed EIA to the Equalities Lead: equalities@westminster.gov.uk

Appendix 1 – Location of the hub sites and Maida vale Children’s Cent



Appendix 2 – Area Profile Data

North East

Area Profile Data	Measure	2012/13	2013/14	2014/15	Sep-15	Baseline Data Source
All under 5 yr olds in reach	Baseline:	5975	6015			ONS Mid Year Estimates
	Registered:	2725	3634	4535	4321	
	Access:	2361	2199	2157	2063	
	Engaged:	1198	1218	1152	1088	
Children 0-4 yrs old from minority ethnic groups	Baseline:	4212				Census 2011
	Registered:	1537	2637	2803	2787	
	Access:	1401	1465	1468	1397	
	Engaged:	701	791	781	845	
Teenage parents/pregnant	Baseline:	No baseline	No baseline	No baseline	No baseline	No Baseline data
	Registered:		6	6	8	
	Access:	4	11	5	7	
	Engaged:	No report	No report	No report	No report	
Lone Parents families with a 0-4 year child	Baseline:	944				DWP 2012
	Registered:			198	193	
	Access:	106	86	119	122	
	Engaged:	63	62	66	82	
Disabled children 0-4 years old	Baseline:	No baseline	No baseline	No baseline	No baseline	No Baseline data
	Registered:	21	17	20	18	
	Access:	20	20	14	16	
	Engaged:	16	11	10	18	
Disabled carers of Children 0-4 years old	Baseline:	No baseline	No baseline	No baseline	No baseline	No Baseline data
	Registered:				49	
	Access:	37	38	53	57	
	Engaged:	22	26	38	44	
Number of Fathers with a 0-4 yr	Baseline:	3338	0	0	0	Census 2011 -

old	Registered:	0	0	2122	2094	<i>Estimate</i>
	Access:	959	1141	1177	1178	
	Engaged:	418	574	577	563	
0-4 yrs in in workless households	Baseline:		915			<i>DWP 2012 and 2013</i>
	Registered:			1817	1682	
	Access:	1313	1358	929	0	
	Engaged:	No report	No report	No report	No report	
Families with Children living with domestic abuse	Baseline:	<i>No baseline</i>	<i>No baseline</i>	<i>No baseline</i>	<i>No baseline</i>	<i>No Baseline data</i>
	Registered:	0	59	60	63	
	Access:	30	42	34	27	
	Engaged:	22	31	22	27	
Families with Children living with adult mental health	Baseline:	<i>No baseline</i>	<i>No baseline</i>	<i>No baseline</i>	<i>No baseline</i>	<i>No Baseline data</i>
	Registered:	0	27	30	31	
	Access:	10	24	24	18	
	Engaged:	No report	No report	No report	No report	

North West

Area Profile Data	Measure	2012/13	2013/14	2014/15	Sep-15	Baseline Data Source
All under 5 yr olds in reach	Baseline:	4308	4433			<i>ONS Mid Year Estimates</i>
	Registered:	2179	2936	3730	3691	
	Access:	1986	2054	1899	1869	
	Engaged:	1171	1235	1038	1001	
Children 0-4 yrs old from minority ethnic groups	Baseline:	2974				<i>Census 2011</i>
	Registered:	1196	1983	2099	2084	
	Access:	1102	1186	1153	1102	
	Engaged:	652	733	650	746	
Teenage parents/pregnant	Baseline:	<i>No baseline</i>	<i>No baseline</i>	<i>No baseline</i>	<i>No baseline</i>	<i>No Baseline data</i>
	Registered:		9	8	10	
	Access:	5	9	11	14	

	Engaged:	No report	No report	No report	No report	
Lone Parents families with a 0-4 year child	Baseline:	984				<i>DWP 2012</i>
	Registered:			573	555	
	Access:	266	312	328	322	
	Engaged:	171	202	196	198	
Disabled children 0-4 years old	Baseline:	<i>No baseline</i>	<i>No baseline</i>	<i>No baseline</i>	<i>No baseline</i>	<i>No Baseline data</i>
	Registered:	16	14	16	13	
	Access:	14	9	9	12	
	Engaged:	12	8	5	7	
Disabled carers of Children 0-4 years old	Baseline:	<i>No baseline</i>	<i>No baseline</i>	<i>No baseline</i>	<i>No baseline</i>	<i>No Baseline data</i>
	Registered:				56	
	Access:	42	39	39	40	
	Engaged:	24	24	24	19	
Number of Fathers with a 0-4 yr old	Baseline:	2072	0	0	0	<i>Census 2011 - Estimate</i>
	Registered:	0	0	1973	1966	
	Access:	808	1029	1059	1081	
	Engaged:	441	577	583	556	
0-4 yrs in in workless households	Baseline:		1165			<i>DWP 2012 and 2013</i>
	Registered:			1276	1140	
	Access:	1054	981	736	0	
	Engaged:	No report	No report	No report	No report	
Families with Children living with domestic abuse	Baseline:	<i>No baseline</i>	<i>No baseline</i>	<i>No baseline</i>	<i>No baseline</i>	<i>No Baseline data</i>
	Registered:	0	105	110	117	
	Access:	54	54	51	48	
	Engaged:	34	41	35	21	
Families with Children living with adult mental health	Baseline:	<i>No baseline</i>	<i>No baseline</i>	<i>No baseline</i>	<i>No baseline</i>	<i>No Baseline data</i>
	Registered:	0	21	25	28	
	Access:	4	19	19	19	
	Engaged:	No report	No report	No report	No report	

South

Area Profile Data	Measure	2012/13	2013/14	2014/15	Sep-15	Baseline Data Source
All under 5 yr olds in reach	Baseline:	3144	3301			<i>ONS Mid Year Estimates</i>
	Registered:	1663	2186	2723	2674	
	Access:	1185	1178	1265	1267	
	Engaged:	560	631	694	695	
Children 0-4 yrs old from minority ethnic groups	Baseline:	1994				<i>Census 2011</i>
	Registered:	950	1458	1588	1562	
	Access:	709	710	781	732	
	Engaged:	332	367	411	482	
Teenage parents/pregnant	Baseline:	<i>No baseline</i>	<i>No baseline</i>	<i>No baseline</i>	<i>No baseline</i>	<i>No Baseline data</i>
	Registered:		3	0	2	
	Access:	4	6	4	4	
	Engaged:	No report	No report	No report	No report	
Lone Parents families with a 0-4 year child	Baseline:	587				<i>DWP 2012</i>
	Registered:			216	203	
	Access:	105	110	120	113	
	Engaged:	66	76	85	75	
Disabled children 0-4 years old	Baseline:	<i>No baseline</i>	<i>No baseline</i>	<i>No baseline</i>	<i>No baseline</i>	<i>No Baseline data</i>
	Registered:	19	18	19	23	
	Access:	14	15	18	16	
	Engaged:	9	13	12	24	
Disabled carers of Children 0-4 years old	Baseline:	<i>No baseline</i>	<i>No baseline</i>	<i>No baseline</i>	<i>No baseline</i>	<i>No Baseline data</i>
	Registered:				42	
	Access:	53	55	53	52	
	Engaged:	29	34	38	34	
Number of Fathers with a 0-4 yr old	Baseline:	1716	0	0	0	<i>Census 2011 - Estimate</i>
	Registered:	0	0	1522	1544	
	Access:	533	649	740	728	

	Engaged:	221	321	383	384	
0-4 yrs in in workless households	Baseline:		575			<i>DWP 2012 and 2013</i>
	Registered:			696	602	
	Access:	408	406	361	0	
	Engaged:	No report	No report	No report	No report	
Families with Children living with domestic abuse	Baseline:	<i>No baseline</i>	<i>No baseline</i>	<i>No baseline</i>	<i>No baseline</i>	<i>No Baseline data</i>
	Registered:	0	82	90	109	
	Access:	37	40	46	39	
	Engaged:	37	37	38	33	
Families with Children living with adult mental health	Baseline:	<i>No baseline</i>	<i>No baseline</i>	<i>No baseline</i>	<i>No baseline</i>	<i>No Baseline data</i>
	Registered:	0	9	19	23	
	Access:	3	10	19	21	
	Engaged:	No report	No report	No report	No report	

Appendix 3 - Under 5 year olds attending Stay Play Sessions between 01/06/2015 to 30/11/2015 (6 months), Split by Children Centre

locality	Centre	Level of Deprivation child living in:					BME	Total under 5s attended
		top 10%	10.1-20%	20.1-30%	30.1 -40%	over 40.1%		
North East	Church Street	198	20	9	26	123	269	376
North East	Micky Star	33	3	2	21	51	67	110
North East	Maida Vale	81	24	1	17	165	169	288
North East	Paddington Green	33	2	3	4	30	44	72
North West	Bayswater	78	0	12	27	97	109	214

North West	Harrow Rd	19	12	0	1	23	33	55
North West	Queens Park	440	28	7	11	105	389	591
North West	Queens Way	44	0	15	18	69	90	146
North West	Westbourne	65	4	5	1	8	55	83
South	Churchill Gardens	43	46	39	25	63	131	216
South	Marsham St	6	18	34	16	39	70	113
South	West End	1	0	10	12	67	57	90
TOTAL		1041	157	137	179	840	1483	2,354
% of Total under 5s attended		44%	7%	6%	8%	36%	63%	

Events on the system selected for reporting: "Drop in/Stay and play" and "Drop in/Stay and Play referred"

Source: Estart December 2015, IDACI 2010