

Equality Impact Assessment [version 2.10]



Title: GAPCE3 Children's Homes	
<input checked="" type="checkbox"/> Budget Proposal	<input type="checkbox"/> New <input checked="" type="checkbox"/> Already exists / review <input type="checkbox"/> Changing
Directorate: Children and Education	Lead Officer name: Gail Rogers
Service Area: Children and Families	Lead Officer role: Head of Service Childrens Commissioning

Step 1: What do we want to do?

The purpose of an Equality Impact Assessment is to assist decision makers in understanding the impact of proposals as part of their duties under the Equality Act 2010. Detailed guidance to support completion can be found here [Equality Impact Assessments \(EqIA\) \(sharepoint.com\)](#).

This assessment should be started at the beginning of the process by someone with a good knowledge of the proposal and service area, and sufficient influence over the proposal. It is good practice to take a team approach to completing the equality impact assessment. Please contact the [Equality and Inclusion Team](#) early for advice and feedback.

1.1 What are the aims and objectives/purpose of this proposal?

Briefly explain the purpose of the proposal and why it is needed. Describe who it is aimed at and the intended aims / outcomes. Where known also summarise the key actions you plan to undertake. Please use [plain English](#), avoiding jargon and acronyms. Equality Impact Assessments are viewed by a wide range of people including decision-makers and the wider public.

Budget context

Every year, the council must agree an annual budget which balances the money we spend with the money we are expecting to receive. Councils across the country are facing financial challenges and based on our current forecasts, we face a funding gap over the next five years (to 2027/28) of up to £87.6 million dependent on the severity of factors such as rising costs of fuel, energy and inflation. This is in addition to the £34.3 million of savings and efficiencies proposals for 2022-2027 outlined in the 2022/23 budget.

The Council has defined statutory responsibilities, but deliver against a far broader agenda, providing universal services benefiting the whole community, and targeted services aimed at individuals, communities with particular needs, and businesses – administered by our workforce, city partners, stakeholder organisations and commissioned services.

To address these challenges we must look again across all of our services to find where we can do things differently to reduce costs, be more efficient in how we do things and, in some cases, stop doing some things entirely.

This Proposal

Bristol City Council published a sufficiency strategy in September 2022 which outlines plan to grow the number of places available in Bristol for children requiring residential care. In January 2023, Cabinet endorsed proposals to tender for a Strategic partner to run these homes as well as some fostering and 16+ provision. Within this paper, we included a proposal to open two solo homes which would be acquired through our strategic housing partner, Goram Homes.

The two homes will be co-designed internally with children in care and will be supported by Health and Education colleagues to ensure the children living there will have the best possible chance of continuing with existing education, help and support services. It is important to offer solo homes for children with high levels of psycho-social difficulty because past experiences has often led to attachment difficulty and a poor sense of self value and understanding of social dynamics.

We currently have 77 children in external residential provision outside of Bristol. For children with high levels of distress, it can be extremely difficult to find a registered home that will work with them, and these children can sometimes remain in hospital following admissions around their emotional and mental health.

The project is part of the wider work the Council is undertaking to deliver greater sufficiency in or close to Bristol. More children in care will be able to remain living locally, enabling them to maintain family, health and education links.

The mental health home is very specific to a small cohort of young people specifically for females with a diagnosis of autism. So, the addition of this home will meet those equality needs. The children will be allocated based on need. We will commission a strategic partner to run the homes, and Bristol City Council will have responsibility for working in partnership with the Provider to ensure that we are meeting the needs of the children and young people. The services have been co-designed with Health, Education and Social Care and we will ensure the contractual arrangements in place are flexible to meet any changing demographic of children and young people's needs.

As part of the process, providers will be required to demonstrate a good understanding of Equality Act 2010 requirements and the public sector equality duty; including that equality of opportunity is central to internal processes / workforce; and services will be regularly tailored and reviewed to meet the diverse needs of Bristol citizens.

1.2 Who will the proposal have the potential to affect?

<input type="checkbox"/> Bristol City Council workforce	<input checked="" type="checkbox"/> Service users	<input checked="" type="checkbox"/> The wider community
<input checked="" type="checkbox"/> Commissioned services	<input checked="" type="checkbox"/> City partners / Stakeholder organisations	
Additional comments:		

1.3 Will the proposal have an equality impact?

<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	[please select]
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Could the proposal affect access levels of representation or participation in a service, or does it have the potential to change e.g. quality of life: health, education, or standard of living etc.?

If 'No' explain why you are sure there will be no equality impact, then skip steps 2-4 and request review by Equality and Inclusion Team.

If 'Yes' complete the rest of this assessment, or if you plan to complete the assessment at a later stage please state this clearly here and request review by the Equality and Inclusion Team.

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Step 2: What information do we have?

2.1 What data or evidence is there which tells us who is, or could be affected?

Please use this section to demonstrate an understanding of who could be affected by the proposal. Include general population data where appropriate, and information about people who will be affected with particular reference to protected and other relevant characteristics: [How we measure equality and diversity \(bristol.gov.uk\)](https://www.bristol.gov.uk/what-we-do/equality-and-diversity)

Use one row for each evidence source and say which characteristic(s) it relates to. You can include a mix of qualitative and quantitative data e.g. from national or local research, available data or previous consultations and engagement activities.

Outline whether there is any over or under representation of equality groups within relevant services - don't forget to benchmark to the local population where appropriate. Links to available data and reports are here [Data, statistics and intelligence \(sharepoint.com\)](https://www.bristol.gov.uk/what-we-do/data-statistics-intelligence). See also: [Bristol Open Data \(Quality of Life, Census etc.\)](https://www.bristol.gov.uk/what-we-do/open-data); [Joint Strategic Needs Assessment \(JSNA\)](https://www.bristol.gov.uk/what-we-do/joint-strategic-needs-assessment); [Ward Statistical Profiles](https://www.bristol.gov.uk/what-we-do/ward-statistical-profiles).

For workforce / management of change proposals you will need to look at the diversity of the affected teams using available evidence such as [HR Analytics: Power BI Reports \(sharepoint.com\)](https://www.bristol.gov.uk/what-we-do/hr-analytics) which shows the diversity profile of council teams and service areas. Identify any over or under-representation compared with Bristol economically active citizens for different characteristics. Additional sources of useful workforce evidence include the [Employee Staff Survey Report](https://www.bristol.gov.uk/what-we-do/employee-survey-report) and [Stress Risk Assessment Form](https://www.bristol.gov.uk/what-we-do/stress-risk-assessment-form)

Data / Evidence Source [Include a reference where known]	Summary of what this tells us
Census 2021	The Census details the demographic profile of Bristol.
The population of Bristol	Updated annually. The report brings together statistics on the current estimated population of Bristol, recent trends in population, future projections and looks at the key characteristics of the people living in Bristol.
Bristol Key Facts 2022	Population Profiles for Equalities Groups bring together detailed analysis looking at equalities groups and how they differ in relation to age, health, employment, education and housing, and maps the distribution of equalities groups across the city.
Ward profile data (bristol.gov.uk)	The Ward Profiles provide a range of datasets, including population, life expectancy, health and education disparities etc. for each of Bristol's electoral wards.
Bristol Quality of Life Survey 2021-22	The Quality of Life (QoL) survey is an annual randomised sample survey of the Bristol population, mailed to 33,000 households (with online & paper options), and some additional targeting to boost numbers from low responding groups. In brief, the most recent QoL survey indicated that inequality and deprivation continue to affect people's experience in almost every element measured by the survey.

The [Quality of Life 2021/22 data dashboard](#) highlights those indicators, wards and equality and demographic groups which are better or worse than the Bristol average.

For example, there are significant disparities based on people's characteristics and circumstances in the extent to which they find it difficult to manage financially:

Quality of Life Indicator	% who find it difficult to manage financially
16 to 24 years	12.5
50 years and older	6.7
65 years and older	3.2
Female	8.6
Male	8.5
Disabled	21.6
Asian /Asian British	9.9
Black/Black British	19.8
Mixed/Multiple Ethnicity	16.3
White British	7.8
White Minority Ethnic	8.4
Lesbian Gay or Bisexual	12.7
No Religion or Faith	8.0
Christian Religion	8.3
Other Religions	18.2
Carer	10.7
Full Time Carer	14.0
Part Time Carer	9.7
Single Parent	28.6
Two Parent	9.6
Parent (all)	12.0
No Qualifications	10.0
Non-Degree Qualified	12.9
Degree Qualified	6.7
Rented (Council)	20.3
Rented (HA)	20.6
Rented (Private)	14.6
Owner Occupier	4.6
Most Deprived 10%	18.8
Bristol Average	8.7

<p><u>Joint Strategic Needs Assessment (JSNA)</u></p>	<p>The Joint Strategic Needs Assessment reports on the health and wellbeing needs of the people of Bristol. It brings together detailed information on local health and wellbeing needs and looks ahead at emerging challenges and projected future needs. The JSNA is used to provide a comprehensive picture of the health and wellbeing needs of Bristol (now and in the future); to inform decisions about how we design, commission and deliver services, and also about how the urban environment is planned and managed; to improve and protect health and wellbeing outcomes across the city while reducing health inequalities; and to provide partner organisations with information on the changing health and wellbeing needs of Bristol, at a local level, to support better service delivery.</p> <p>Based on national studies estimated number of children and young people in Bristol who are likely to be experiencing mental illness at any one time is:</p> <ul style="list-style-type: none"> • 920 children aged 2-4 (1 in 18 or 5.5%). • 9,600 children and young people aged 5-16 (1 in 6 or 16%). This has increased from 1 in 9 or 10.8% among this age group in 2019, reflecting the impact of COVID 19 and related policy on the children and young people population. • 9,900 young people aged 17-22 (1 in 5 or 20%) <p>Nationally, rates of emotional disorder among 5–19-year-olds are higher among females (10%) than males (6.2%).</p>
<p>BCC Insight, Performance and Intelligence (2021). The Population of Bristol September 2021</p>	<p>The mid-2020 population of Bristol is estimated to be 465,900 with children making up 85,700 of this total (18.4% of the total population).</p> <p>This means almost 1 in every five people living in Bristol is under the age of 16, with the age profile by ward varying significantly. There are 167,035 children and young people aged 0-25 in Bristol. Based on the figures above, this is over a third of the total Bristol population.</p>
<p>Office for National Statistics (ONS) 2018: based population projections</p>	<p>Between 2010 and 2020 the number of children living in Bristol increased by 8,900 (11.6%), higher than the England and Wales increase of 8.6%. The increase has been largely amongst primary school aged children, with the number of 5 - 11-year-olds increasing by 25% over the decade. The trends reflect the substantial increase in numbers of births in Bristol in recent years, although the number of births is now falling. The proposal will specifically support children between the ages of 10-19 which is estimated to be 62,900 currently.</p>
<p>Children in Care Data [internal link only]</p>	<p>There are currently 727 children in care, 57% are male and 43% female (compared to 51% and 49% of the overall child population). 9% have a disability (compared to 6.1% of the total Bristol child population) and the majority (73%) are aged 10-17.</p> <p>Ethnicity:</p>

	<p>60% White (compared to 72% across the total Bristol child population) 16% Mixed Race 12% Other Ethnicity 9% Black British 3% Asian/Asian British</p> <p>It is not possible to add other comparative data for the Bristol average child population due to the size and format of data sets.</p>
Deprivation in Bristol 2019	<p>Bristol continues to have deprivation ‘hot spots’ that are amongst some of the most deprived areas in the country yet are adjacent to some of the least deprived areas in the country. 15% of Bristol’s population live in the most deprived 10% of areas in England in 2019 (16% in 2015) including 18,900 children. More than a quarter of ‘children in need’ (37%) are from the ‘most deprived 10%’ areas of Bristol, whilst 71% are from the ‘most deprived 30%’ areas of Bristol.</p>

2.2 Do you currently monitor relevant activity by the following protected characteristics?

<input checked="" type="checkbox"/> Age	<input checked="" type="checkbox"/> Disability	<input type="checkbox"/> Gender Reassignment
<input type="checkbox"/> Marriage and Civil Partnership	<input type="checkbox"/> Pregnancy/Maternity	<input checked="" type="checkbox"/> Race
<input type="checkbox"/> Religion or Belief	<input checked="" type="checkbox"/> Sex	<input type="checkbox"/> Sexual Orientation

2.3 Are there any gaps in the evidence base?

Where there are gaps in the evidence, or you don’t have enough information about some equality groups, include an equality action to find out in section 4.2 below. This doesn’t mean that you can’t complete the assessment without the information, but you need to follow up the action and if necessary, review the assessment later. If you are unable to fill in the gaps, then state this clearly with a justification.

For workforce related proposals all relevant characteristics may not be included in HR diversity reporting (e.g. pregnancy/maternity). For smaller teams diversity data may be redacted. A high proportion of not known/not disclosed may require an action to address under-reporting.

Although our approach is to collect diversity monitoring for all relevant characteristics, there are gaps in the available local diversity data for some characteristics, especially where this has not always historically been included in census and statutory reporting e.g. for sexual orientation.

There are potentially gaps on our understanding of Disability for children with very complex needs. A recent reverse mapping exercise for children who had been held in an acute hospital setting due to no registered placement coming forwards for them showed that 6 of 8 children had a diagnosis or were pending diagnosis for autism and/or neurodiversity disorders. With this compelling evidence, the new Children’s Homes will ensure that staff are trained in evidence-based interventions for working with autism.

In addition, we do not monitor by gender re-assignment or religion and belief. We will capture religion and belief in our monitoring for the Homes and prevalence of gender re-assignment.

2.4 How have you involved communities and groups that could be affected?

You will nearly always need to involve and consult with internal and external stakeholders during your assessment. The extent of the engagement will depend on the nature of the proposal or change. This should usually include individuals and groups representing different relevant protected characteristics. Please include details of any completed engagement and consultation and how representative this had been of Bristol’s diverse communities.

Include the main findings of any engagement and consultation in Section 2.1 above.

If you are managing a workforce change process or restructure please refer to [Managing change or restructure \(sharepoint.com\)](#) for advice on consulting with employees etc. Relevant stakeholders for engagement about workforce changes may include e.g. staff-led groups and trades unions as well as affected staff.

We launched a public consultation on our budget proposals between 09th November 2023 and 21st December 2024. This consultation set out all the savings proposals we had identified to produce a balanced budget in the context of reduced available funding and increasing financial pressures. The consultation was made accessible through online, paper including an Easy Read version. Furthermore, the public were offered alternative formats such as Braille, large print, British Sign Language, or in another language.

2.5 How will engagement with stakeholders continue?

Explain how you will continue to engage with stakeholders throughout the course of planning and delivery. Please describe where more engagement and consultation is required and set out how you intend to undertake it. Include any targeted work to seek the views of under-represented groups. If you do not intend to undertake it, please set out your justification. You can ask the Equality and Inclusion Team for help in targeting particular groups.

All responses to the Budget Consultation will be analysed and included in the Council's Budget report that will be published on the Bristol City Council website in early 2024. We will take Budget consultation responses into account when developing this and other final proposals to put to the Cabinet and a meeting of the Full Council for approval. The final decision will be taken by Full Council at its budget setting meeting in February / March 2024.

Following the setting of the overall budget envelope there will be extensive engagement, consultation and co-design with affected communities on particular proposals which will inform future decision making prior to implementation. Our approach to public engagement and consultation will proactively target under-represented respondents to increase the participation of people from equality groups and their local representative organisations. This will help to ensure that our services and actions are informed by the views and needs of all our citizens.

Children in care will be engaged in how the properties should be furnished and decorated to best suit their needs via the Children in Care Council. If available, we will also engage with the Barnados engagement groups for marginalised and vulnerable young people.

There is an expectation that the successful provider will engage the children and young people living in the service on an ongoing basis around service development and delivery. This will include personalisation of spaces and feeding into delivery of care. Previous consultation has been undertaken as part of Children's Homes Sufficiency strategy.

There will be an expectation that the successful provider for these homes engages children in the property throughout the life of the contract to ensure that the service is child led. This will be monitored as part of contract management.

Step 3: Who might the proposal impact?

Analysis of impacts must be rigorous. Please demonstrate your analysis of any impacts of the proposal in this section, referring to evidence you have gathered above, and the characteristics protected by the Equality Act 2010. Also include details of existing issues for particular groups that you are aware of and are seeking to address or mitigate through this proposal. See detailed guidance documents for advice on identifying potential impacts etc. [Equality Impact Assessments \(EqIA\) \(sharepoint.com\)](#)

3.1 Does the proposal have any potentially adverse impacts on people based on their protected or other relevant characteristics?

Consider sub-categories (different kinds of disability, ethnic background etc.) and how people with combined characteristics (e.g. young women) might have particular needs or experience particular kinds of disadvantage.

Where mitigations indicate a follow-on action, include this in the 'Action Plan' Section 4.2 below.

GENERAL COMMENTS (highlight any potential issues that might impact all or many groups)	
<p>Even when we plan to consult in more detail on specific service delivery proposals at a later time, we must ensure that any budget setting decisions that are likely to affect future services are informed by sufficient consultation and proper analysis. This is so that decision makers can have due regard to any likely disproportionate or negative impact on the basis of their protected and other relevant characteristics at the time the budget is approved – not afterwards¹.</p> <p>Decision makers will have the ability to make changes to the individual spending plans following further consultation as appropriate and detailed evaluation of the impact of specific proposals. Within the proposed budget envelope there will be financial mitigation put aside for any non-delivery or amendments to proposals which may occur due to future consideration of equalities issues or other factors.</p> <p>As well as identifying whether budget changes will have a disproportionate impact on particular groups (e.g., because they are over-represented in a particular cohort), we need to pay particular attention to the risk of indirect discrimination: when an apparently neutral decision puts members of a given group at a particular disadvantage compared with other people because of their different needs and circumstances.</p> <p>We are also aware of existing structural inequalities and particular considerations, issues, and disparities for people in Bristol based on their characteristics, which we will take into account.</p>	
PROTECTED CHARACTERISTICS	
Age: Young People	Does your analysis indicate a disproportionate impact? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Potential impacts:	<ul style="list-style-type: none"> • Children and young people in Bristol are considerably more ethnically diverse than the overall population of Bristol. • Children and young people from the most deprived areas of Bristol have the poorest outcomes in health and education in terms of health, education and future employment etc. • Young people in Bristol are more likely to: <ul style="list-style-type: none"> ○ have poor emotional health and wellbeing ○ find inaccessible public transport prevents them from leaving their home when they want to ○ 6.8% of 16–17-year-olds (2020/21) were “not in education, employment or training” (NEET), worse than the national average (5.5%) • The entire cohort of service users is children and young people so they will be overrepresented on that basis. The homes are for children aged 0-18.
Mitigations:	<p>We anticipate that the new procurement arrangements will lead to an overall improvement to the service so demand for local placements can be met.</p> <p>We anticipate that the new homes will improve provision for a small subsection of children whose needs have been hard to meet.</p>

	As part of wider sufficiency programme, we have another 3-bed home proposed and is currently being renovated, so should be ready for more young people/children in approximately 12 months
Age: Older People	Does your analysis indicate a disproportionate impact? Yes No <input checked="" type="checkbox"/>
Potential impacts:	NA
Mitigations:	NA
Disability	Does your analysis indicate a disproportionate impact? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Potential impacts:	<ul style="list-style-type: none"> • Disability increases with age: 4.1% of all children, for the working age population it increases to 12.3% and for people aged 65 and over it increases to 55.9%. • Disabled people should be empowered to make independent living choices and have a say in access to service provision. • 9.1% of children in care have a disability compared to 6.1% of the child population. 6 of 8 children eligible for this service have been found to have autism or an investigation for autism underway. • Disabled children in care could face barriers if proper adjustments are not made to fit their needs. Some children with neurodiversity find change confusing and are facing trauma through inconsistent care. • Many of our complex children in care suffer some form of severe psycho-social health issues.
Mitigations:	<p>The purpose of these two homes is for our most complex children, many of whom will suffer some form of severe psycho-social health issues. These homes will have access to health interventions and are adapted to provide a safe environment for this need.</p> <p>These homes will have health intervention and designed with considerations around anti ligature furniture and fittings. The children may require access to the intensive outreach service for mental health urgent access by developing healthy ways to cope with stress, trauma, depression, anxiety, and other mental and physical health conditions by regulating their emotions and improving their relationships with others.</p> <p>Communications with children through the Children in Care Council and sub-groups will explore how to best meet differing needs and ensure the environment is accessible and effective for service-users.</p> <p>There is an expectation that the successful provider providing support to the children/young people in the homes will engage the children/young people living in the service on an ongoing basis around service development and delivery. This will include personalisation of spaces and feeding into delivery of care.</p>
Sex	Does your analysis indicate a disproportionate impact? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Potential impacts:	<ul style="list-style-type: none"> • There are currently 727 children in care, 57% are male and 43% female (compared to 51% and 49% of the overall child population). • Bristol female preventable mortality rates are significantly higher than the England rates • Men and boy's health is in general poorer than that of women and girl's • A higher proportion of boys have physical impairments and more boys than girls have diagnosed mental health disorders and learning difficulties. Whereas young females are more adversely impacted by acute mental health presentation including disordered eating or self-harm and these young people are admitted to hospital more frequently than males with concerning mental health presentation

	<ul style="list-style-type: none"> Men are three times more likely than women to take their own lives.
Mitigations:	<p>The two homes will offer provision on the basis of need rather than gender.</p> <p>Ensure that we hear the voices of both boys and females when designing the homes and understand the different needs in terms of staffing and types of intervention.</p> <p>Within our wider children's homes sufficiency programme one of the homes being set up is specifically for males to take account of their over representation in the care population.</p>
Sexual orientation	Does your analysis indicate a disproportionate impact? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Potential impacts:	
Mitigations:	See general comments above
Pregnancy / Maternity	Does your analysis indicate a disproportionate impact? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Potential impacts:	
Mitigations:	See general comments above
Gender reassignment	Does your analysis indicate a disproportionate impact? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Potential impacts:	
Mitigations:	See general comments above
Race	Does your analysis indicate a disproportionate impact? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Potential impacts:	<ul style="list-style-type: none"> Ethnic minorities in Bristol experience greater disadvantage than in England and Wales as a whole in education and employment and this is particularly so for Black African people². The top three countries of birth outside UK for Bristol residents are Poland, Somalia and India. Bangladeshi, Pakistani, and Black ethnic groups are more likely to live in deprived neighbourhoods; and the same groups and Chinese ethnicities are about twice as likely to live on a low income and experience child poverty compared to White groups Black African young people are disadvantaged in education compared to their White peers⁸. A disproportionately high percentage of Bristol school pupils from Black, Asian and minority ethnic backgrounds are excluded from school and In Bristol pupils with the lowest 'Attainment 8' scores are from Black ethnic background (highest from Chinese ethnic background.) Organisations providing support to our children in homes may lack cultural competence because minoritised ethnic staff are under- represented. Need analysis demonstrates an over-representation of non- 'White British' population 40% of the child in care population, compared to 32% of children in Bristol.
Mitigations:	Through our tendering processes and contract management we will ensure providers of these homes are culturally competent and able to foster an environment that is sensitive to, and inclusive of ethnic diversity.
Religion or Belief	Does your analysis indicate a disproportionate impact? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>

Potential impacts:	Homes needing to cater to the differing religious or belief needs of children/young people.
Mitigations:	Consideration of staffing and scheduling in the Homes to adapt to meet the particular religious or belief needs of children being cared for. For example, that they could be supported to attend a place of worship, to access literature or resources related to a belief of their choice and supported to feel confident in expressing their held beliefs.
Marriage & civil partnership	Does your analysis indicate a disproportionate impact? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Potential impacts:	NA
Mitigations:	
OTHER RELEVANT CHARACTERISTICS	
Socio-Economic (deprivation)	Does your analysis indicate a disproportionate impact? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Potential impacts:	NA
Mitigations:	See general comments above
Carers	Does your analysis indicate a disproportionate impact? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Potential impacts:	NA
Mitigations:	See general comments above
Other groups [Please add additional rows below to detail the impact for other relevant groups as appropriate e.g. Asylums and Refugees; Looked after Children / Care Leavers; Homelessness]	
Potential impacts:	
Mitigations:	

3.2 Does the proposal create any benefits for people based on their protected or other relevant characteristics?

Outline any potential benefits of the proposal and how they can be maximised. Identify how the proposal will support our [Public Sector Equality Duty](#) to:

- ✓ Eliminate unlawful discrimination for a protected group
- ✓ Advance equality of opportunity between people who share a protected characteristic and those who don't
- ✓ Foster good relations between people who share a protected characteristic and those who don't

The scale of the potential gap in our core funding means that there is very limited opportunity to bring genuine additional benefit to equalities groups in the circumstances. However, we have considered as far as possible the need to: eliminate discrimination, harassment, victimisation and any other conduct prohibited under the Equality Act 2010; advance equality of opportunity between people from different groups; and foster good relations between people from different groups.

Our budget savings proposals are aligned to our Corporate Strategy and although we have limited resources our future focus will be on achieving those priorities, we have identified including tackling poverty and intergenerational inequality.

The project is part of the wider work the Council is undertaking to deliver greater sufficiency in or close to Bristol. More children in care will be able to remain living locally, enabling them to maintain family, health and education links.

Step 4: Impact

4.1 How has the equality impact assessment informed or changed the proposal?

What are the main conclusions of this assessment? Use this section to provide an overview of your findings. This summary can be included in decision pathway reports etc.

If you have identified any significant negative impacts which cannot be mitigated, provide a justification showing how the proposal is proportionate, necessary, and appropriate despite this.

Summary of significant negative impacts and how they can be mitigated or justified:
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None

Summary of positive impacts / opportunities to promote the Public Sector Equality Duty:
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- | |
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| <ul style="list-style-type: none">• Local high-quality, placement provision for children in care• More children in care will be able to remain living locally, enabling them to maintain family, health and education links.• Social care to enable discharge and/or to prevent hospital admission and re-admission• Support children with mental health needs to live in the community through a collaborative model of delivery with Health, Education and Social Care. |
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4.2 Action Plan

Use this section to set out any actions you have identified to improve data, mitigate issues, or maximise opportunities etc. If an action is to meet the needs of a particular protected group, please specify this.

Improvement / action required	Responsible Officer	Timescale
All relevant EqIAs will be published on the Council's website https://www.bristol.gov.uk/council-spending-performance/council-budgets and continue to be updated as appropriate.	Gail Rogers	Ongoing
Inclusion of equalities question in tender to ensure provider will be inclusive and work from an equalities perspective	Hannah Gillet	Autumn 24
Ongoing monitoring of the service with inclusion of voice of young people	Hannah Gillet	Ongoing

4.3 How will the impact of your proposal and actions be measured?


How will you know if you have been successful? Once the activity has been implemented this equality impact assessment should be periodically reviewed to make sure your changes have been effective your approach is still appropriate.

Our Equality and Inclusion Annual Progress Reports show what we have done to achieve the aims of our Equality and Inclusion policy and strategy, and the progress we have made including reporting on all relevant KPIs and workforce diversity Equalities policy - bristol.gov.uk
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There will be regular monitoring meetings with the successful provider of these homes. These meetings will focus on outcomes achieved and the quality of the provision.

The Equality and Inclusion Team need at least five working days to comment and feedback on your EqIA. EqIAs should only be marked as reviewed when they provide sufficient information for decision-makers on the equalities

impact of the proposal. Please seek feedback and review from the [Equality and Inclusion Team](#) before requesting sign off from your Director¹.

Equality and Inclusion Team Review: The Equality and Inclusion Team	Director Sign-Off:  Vanessa Wilson Director of Children and Education Transformation
Date: 19/12/2023	19/12/2023

¹ Review by the Equality and Inclusion Team confirms there is sufficient analysis for decision makers to consider the likely equality impacts at this stage. This is not an endorsement or approval of the proposal.