

## EQIA Submission Draft Working Template

If required, this template is for use prior to completing your EQIA Submission in the EQIA App.

You can use it to understand what information is needed beforehand to complete an EQIA submission online, and also as a way to collaborate with others who may be involved with the EQIA.

Note: You can upload this into the App when complete if it contains more detailed information than the App asks for and you wish to retain this detail.

### Section A

<b>1. Name of Activity (EQIA Title):</b>	Kent Communities Programme (Community Assets)
<b>2. Directorate</b>	DCED
<b>3. Responsible Service/Division</b>	INF

### Accountability and Responsibility

<b>4. Officer completing EQIA</b> Note: This should be the name of the officer who will be submitting the EQIA onto the App.	Ben Sherreard
<b>5. Head of Service</b> Note: This should be the Head of Service who will be approving your submitted EQIA.	Rebecca Spore
<b>6. Director of Service</b> Note: This should be the name of your responsible director.	Rebecca Spore

### The type of Activity you are undertaking

7. What type of activity are you undertaking?	
Tick if Yes	Activity Type
Yes	<b>Service Change</b> – operational changes in the way we deliver the service to people.
Yes	<b>Service Redesign</b> – restructure, new operating model or changes to ways of working
Yes	<b>Project/Programme</b> – includes limited delivery of change activity, including partnership projects, external funding projects and capital projects.
	<b>Commissioning/Procurement</b> – means commissioning activity which requires commercial judgement.
	<b>Strategy /Policy</b> – includes review, refresh or creating a new document
	<b>Other</b>

**8. Aims and Objectives and Equality Recommendations** – Note: You will be asked to give a brief description of the aims and objectives of your activity in this section of the App, along with the Equality recommendations. You may use this section to also add any context you feel may be required.

#### Equality Impact Assessment

This EQIA is intended to assess the potential impact of our decisions on persons with different protected characteristics. In particular, this EQIA has been prepared to help us to have regard to the need to: (i) eliminate discrimination; (ii) advance the equality of opportunity; and (iii) foster good relations between persons who share a relevant protected characteristic and those who do not, in the exercise of our public functions. These issues are relevant considerations to be taken into account whenever a new policy, function, or system change is being proposed

in the exercise of our public functions. This EQIA is also intended to evidence that these considerations have in fact been taken into account, and the weight given to them as part of our decision-making process.

**The services in scope have developed their own EqlAs which assess the impact of the Kent Communities Proposals as they relate to their specific service areas. This EqlA refers to and summarises the analysis provided within the individual service EqlAs and summarises the mitigations and justifications outlined by the services.**

### **The Case for Change - Kent Communities Programme**

The Council is facing very significant financial pressures, for a number of reasons set out in 'Securing Kent's Future' (August 2023 and October 2023). That document sets out the urgent steps needed to return the Council to financial sustainability, by reducing overspend in its budget to avoid further need to use limited reserves to fund revenue overspends, which would weaken the financial resilience of the authority and limit the scope for the use of reserves to invest in transformation necessary to address the structural deficit.

The financial challenges faced by the Council cannot be ignored. Two particularly significant factors, are the Council's statutory 'best value' duty to deliver a balanced budget, provide statutory services, including adult social care and children's services, and secure value for money in all spending decisions; and the Council's other statutory duties.

The Kent Communities Programme seeks to rationalise our physical estate and propose a greater mix of alternative methods of service delivery across the County, informed by a clear and data-driven understanding of service need. Delivery of this programme has become more important in the light of the increased financial pressures faced by the Council. The programme does include elements of improvement to service delivery: for example benefits offered by co-location of services.

However, the Council must acknowledge that the impact of closures and reductions in services on residents can be significant. The approach set out in these proposals is therefore based on a relative needs assessment. Mitigating measures are set out, which are intended to minimise as far as possible the impact of the proposals on Kent residents.

A detailed and extensive public consultation ([www.kent.gov.uk/communityservicesconsultation](http://www.kent.gov.uk/communityservicesconsultation)) allowed consultees the opportunity to give their views on the proposals. These responses have been analysed and carefully considered. A range of options have been developed, informed by the consultation responses. This EQIA has been updated following feedback from that consultation and is also based on data and evidence about Kent's communities and our service users.

### **The Consultation**

The Kent Communities proposal has been subject to a public consultation. The consultation launched on 17<sup>th</sup> January 2023 and lasted for ten weeks, closing on 26 March 2023. The consultation set out the rationale for the proposals, the methodology which was used to produce the draft proposal and the details of the Kent Communities model (i.e. which buildings we were proposing to close and which we were proposing to retain). These proposals have now moved on following the consultation and the options are detailed below.

#### *Rationale*

The rationale for the KCP is clear. The Programme contributes to meeting the revenue savings as set out in the Medium-Term Financial Plan (MTFP). To reduce risks across our corporate estate and capital programme, the KCP reduces the Council's capital liability to the maintenance costs of such a large physical estate.

#### *Methodology*

The consultation explained the methodology underpinning the Kent Communities proposal, including how we used the Needs Framework as a starting point. The Need Framework used a wide range of data and indicators that when combined profile the different level of need for services within our communities. The data included service-held metrics, such as user figures for each service.

In developing the alternative range of options for member consideration the impact on equalities has been taken into account. As explained above options 3 and 4 have been developed acknowledging the difficulties that accessing alternative locations via public transport network would pose for residents, including those for which protected characteristics would make that a greater challenge.

### **Consultation Response**

Whilst the consultation response indicated a majority of respondents did not support a reduction in buildings, there was very little constructive challenge to the methodology. The consultation set out alternative methods for reviewing the estate and why they had been discounted. However, many respondents did outline concerns relating to the accessibility of public transport within their feedback. As such, the accessibility of public transport has been reviewed and has been the driving factor in developing the additional options for member consideration.

50% of consultees answering use Children's Centres. 46% of consultees answering indicated other household members currently use Children's Centres. The majority of both groups use services in person at a building (92% and 93% respectively).

16% of consultees answering use Youth Hubs. 15% of consultees answering indicated other household members currently use Youth Hubs. The majority of both groups use services in person at a building (83% and 86% respectively).

41% of consultees answering use the Health Visiting Service. 35% of consultees answering indicated other household members currently use the Health Visiting Service. The majority of both groups use services in person at a building (82% and 82% respectively).

11% of consultees answering use the Children and Young People's Counselling Service. 12% of consultees answering indicated other household members currently use the Children and Young People's Counselling Service. The majority of both groups use services in person at a building (65% and 68% respectively) but a significant proportion use both in person and online services (22% and 27% respectively).

10% of consultees answering use Community Services for Adults with Learning Disabilities. 9% of consultees answering indicated other household members currently use Community Services for Adults with Learning Disabilities. The majority of both groups use services in person at a building (65% and 71% respectively) but a significant proportion use both in person and online services (18% and 25% respectively).

17% of consultees answering use Adult Education services. 13% of consultees answering indicated other household members currently use Community Services for Adults with Learning Disabilities. The majority of both groups use services in person at a building (72% and 72% respectively) but a significant proportion use both in person and online services (18% and 23% respectively).

20% of consultees answering use Gateways. 17% of consultees answering indicated other household members currently use Gateways. The majority of both groups use services in person at a building (66% and 65% respectively) but a significant proportion reported that they use both in person and online services (21% and 24% respectively).

64% of all residents taking part in the consultation and answering indicated they use at least one of the services under consultation.

Consultees were also given the opportunity to provide feedback on the equality analysis conducted in their own words. For the purpose of reporting, we have reviewed respondents' comments and have grouped common responses

together into themes. These are reported in the table below. It should be noted that 18% of consultees provided a comment at this question.

Of those answering, the most common considerations put forward are ensuring the services are accessible / walking distance / access via suitable public transport (24%).

Those commenting raise concerns for how the proposals will affect specific groups of residents who are disabled / have learning difficulties / SEN (15%), young people / children / families (15%) and low-income households (11%).

### **Summary of Options**

Option 1 in the table above represents a model that involves a greater reduction in the physical estate than was consulted on.

Option 2 is the consultation model.

Options 3 and 4 are amended versions of Option 2, which respond to differing degrees to the consultation feedback. In seeking to respond appropriately to the consultation feedback a more detailed review of the public transport network has informed the options set out in the paper. In the consultation modelling was provided to assess the accessibility of the revised building network on public transport considering a 30-minute travel time. Greater analysis of timetable data was used to develop the post-consultation options that respond to feedback from residents. This analysis considered both an extended travel time of 35 minutes and the regularity of the service by applying a criteria that there should be at least one service per hour over the nine-hour period 8am to 5pm which reflects the general service offering timeframe. It is appreciated that regularity of service is an important additional factor for residents above merely the journey time itself.

Option 3 rules out the closure of 2 buildings where the journey on public transport to the nearest alternative is over 35 minutes and there is less than one service per hour when averaged over a 9-hour period.

Option 4 represents a model which goes further in the response to the consultation feedback and brings 10 buildings back into the model (the 2 buildings from option 3 and another 8). This option rules out the closure of a buildings where there is less than one service per hour when averaged over a 9-hour period, regardless of the journey time.

Option 5 is a 'Do Nothing' option and retains the current building network and service delivery model.

### **Impact**

Within the consultation a significant majority of responses were received by women (81%) compared to men (18%). This is particularly relevant to the Family Hub Model proposal and there is a likely cross over here with any impacts on age. The EqIA relating to the Family Hub Model sets out the consideration of equality impacts on age. However, it is acknowledged that women may bear the responsibility for childcare more commonly and as such the characteristics of sex and age require careful consideration.

Option 1 in the proposals would carry greater impacts for these characteristics as women and children would be required to travel further, likely on public transport which may be difficult with children, pushchairs and additional equipment.

Options 2, 3 and 4 would present different levels of impact, the significance decreasing between options 2 and 3 and then decreasing further between options 3 and 4 as more of the existing locations are retained. This would reduce the impact on women and children required to travel further to access services.

Option 5 is a Do Nothing option and as such would not impact the equalities of these groups.

14% of respondents answered that they consider themselves disabled. In particular the Gateway service, Adult Education Service and Community Day Services for Adults with Learning Disabilities service consider this characteristic in their EqlAs. There is a similar overlap with age within these considerations as well, given the higher likelihood of residents over the age of 60 to experience disabilities.

Option 1 in the proposals would carry greater impacts for these characteristics the elderly and disabled would be required to travel further, likely on public transport which may be difficult for them.

Options 2, 3 and 4 would present different levels of impact, the significance decreasing between options 2 and 3 and then decreasing further between options 3 and 4 as more of the existing locations are retained. This would reduce the impact on the elderly and disabled required to travel further to access services.

Option 5 is a Do Nothing option and as such would not impact the equalities of these groups.

7.4% of respondents might use English as a second language, which would likely indicate there could be impacts based on race, ethnicity or religious belief. This is a consideration particularly for service users requiring the Family Hub service, our Gateway service and our Adult Education Service. These residents may struggle more to understand and navigate the relocation of services from one place to another.

Option 1 in the proposals would carry greater impacts for these characteristics as there would likely be a greater number of site closures, requiring residents to access services from different locations.

Options 2, 3 and 4 would present different levels of impact, the significance decreasing between options 2 and 3 and then decreasing further between options 3 and 4 as more of the existing locations are retained. This would reduce the impact on the residents who use English as a second language as the number of instances of closures decreases between each option.

Option 5 is a Do Nothing option and as such would not impact the equalities of these groups.

Generally during the consultation the main theme of feedback emerging was the inaccessibility of some services, particularly using the public transport network, and the impact that has on the health and wellbeing of residents, including their mental health. The options set out for decision respond to this feedback by retaining identified centres depending on whether greater weight is given to the analysis of public transport accessibility.

Proposed closure of Children's Centres may adversely affect children with disabilities living within these catchment areas or children with parents with a disability, where they are required to travel further away to access services. Families with disabilities may find it harder to travel beyond immediate home locality due to having no transport and a greater reliance on public transport. Even where public transport links do exist, those with disabilities may still find it harder to access via public transport. This may be for mobility reasons, in the case of a physical disability where the requirement to travel by public transport is more challenging. Additionally, children with SEND may find increased journey times distressing.

Where accessing a Family Hub is more difficult families may access support less frequently or not at all, potentially having an impact on both the parent and the child's wellbeing. The health visiting mandated check are an exception to this where the frequency will not be impacted by accessibility of services. For this reason, we have detailed the nearest alternative provision and the relevant transport implications.

Given that educational, employment, and wellbeing outcomes are all generally lower for those with disabilities, ([Outcomes for disabled people in the UK – Office for National Statistics \(ons.gov.uk\)](https://www.ons.gov.uk/peoplepopulationandcommunity/disabilitiesandlongtermhealth/briefingsandreports/articles/2019-07-18-outcomes-for-disabled-people-in-the-uk)) this existing inequality may be compounded by increased difficulty accessing services, resulting in a disproportionate impact.

Service users with physical disabilities may have different needs from the physical environment such as for accessible toilets, hearing loops, ramps and other accessible features. We have conducted analysis across the alternative Family Hub sites and in particular have identified that Temple Hill Library does not currently have an accessible toilet unlike current provision. This may prevent those with physical disabilities and their carers feeling comfortable to access services at this venue. They may need to travel further or access a toilet within the local community. Service users with SEND or sensory conditions may also have differing needs. Cranbrook Children’s Centre currently has a sensory room which is not replicated in any other centre within the district. The removal of this provision may have a negative impact on families who find it particularly soothing and helps them to engage in the other services available at Children’s Centres.

As service users of the two Youth Hubs proposed for closure have already been able to access services from the proposed alternative locations, we do not anticipate that 11–19-year-olds with a disability will be impacted by the changes.

The most common concern expressed in the consultation response regarding the general co-location of services (not specific to any one service) were:

Users being able to get there / travel there / can’t walk to alternatives / need close location of services	51%
Public transport availability / cost of / reduction in service	33%
Practicality of co-located services (e.g. children's centre in same space as library)	22%
Impact on users unable to access the service / impact on vulnerable / mental health / taking away a lifeline / hub of community	21%
Suitability of building / fit for purpose / the space	19%
Maintaining service levels / impact on service levels	14%

Women were far more likely to oppose co-location of services than men and respondents with children under 10 were far more likely to disagree with co-location that those without:

Male resident	26%
Female resident	49%
Resident with no children	22%
Resident with children aged 0-1 years old (250)	61%
Resident with children aged 2-5 years old (243)	68%
Resident with children aged 6-10 years old (142)	54%

Similarly, women were far more likely to oppose the proposal to have fewer buildings than men and respondents with children under 10 were far more likely to disagree with reducing the number of buildings than residents without children:

Male resident (161)	34%
Female resident (760)	62%
Resident with children / expecting children (653)	67%
Resident with no children (173)	30%
Resident with children aged 0-1 years old (250)	83%
Resident with children aged 2-5 years old (243)	82%
Resident with children aged 6-10 years old (142)	70%

There is a similar difference in the level of disagreement with proposals to have fewer buildings based on age with residents aged 25-24 most likely to disagree:

Resident aged 25-34 (220)	81%
Resident aged 35-49 (301)	66%
Resident aged 50-64 (210)	41%
Resident aged 65 & over (152)	27%

When read alongside the fact that (as shown above) levels of objection rise for those residents with children compared to those without, it is a reasonable assumption to make that this increased level of objection is reflects the fact that the majority of reduction is being across the Children’s Centre network.

**Justification**

We consider that the different options for member consideration will have differing levels of impact on groups with protected characteristics. Whilst there will be some positive impacts, particularly relating to the expansion of Gateway services, the co-location of services and the Family Hubs model (subject to a separate EqlA), it is important to address the negative impacts on groups with protected characteristics and how the impacts are mitigated between the options presented for decision.

Broadly, the mitigations against the impacts on women and young children (outlined above) include the retention of more Children Centre locations within options 3 and 4 as well as a more expansive outreach offer (details to be co-designed with partners) that will (in part) focus on providing services to areas that are not necessarily covered by the Family Hub network – for instance those in more rural areas. The Family Hub Model itself brings together a wider range of services for families and as such while some service users may be required to travel further, they may now only need to make a single journey to access a range of required provision.

The mitigations against the impacts considered for those experiencing disabilities and/or the elderly (across Gateways, Adult Education and Community Day Services for Adults with Learning Disabilities) include the relocation of services to alternative locations only short distances away, or that are equally accessible by public transport due to the centralised location of the alternative locations.

Users with English as a second language may find the co-location of services relocation of service provision more difficult to navigate. Service teams will be supported in communicating changes early and effectively to these users, and teams within new locations will receive guidance in helping signpost and support these residents effectively.

All of these mitigation activities do need to be balanced against our Best Value Duty set out in securing Kent's Future and considered alongside the reality that the fewer buildings we close within this programme, the greater pressure is put on the rest of the Council finances, which will inevitably impact statutory service provision.

Across the programme the impacts are considered to be limited through the mitigation outlined and justified given the wider policy and financial context within which the Council currently operates.

## Section B – Evidence

*Note: For questions 9, 10 & 11 at least one of these must be a 'Yes'. You can continue working on the EQIA in the App, but you will not be able to submit it for approval without this information.*

### 9. Do you have data related to the protected groups of the people impacted by this activity?

Answer: Yes/No

Yes, an analysis of the protected characteristics of the respondents to the consultation is as follows:

#### Gender

Male 18%  
 Female 81.3%  
 Prefer not to say 0.7%

#### Same Gender as birth

Yes 99%  
 Prefer not to say 1%

#### Pregnant

Yes – 28 out of 870 responses

#### Religion

Christian 90.2%  
 Buddhist 0.3%  
 Hindu 0.7%  
 Jewish 0.7%  
 Muslim 0.7%  
 Prefer not to say 2.6%  
 Other 4.9%  
 Sikh 0%

#### Disability

Yes 14.3 %  
 No 83.5%  
 Prefer not to say 2.2%

#### Sexual Orientation

Heterosexual/Straight 89.7%  
 Bi/Bisexual 2%  
 Gay man 0.4%  
 Gay woman/Lesbian 1.3%  
 Prefer not to say 6%



Other 0.6%

**Ethnicity**

White English 87.6%  
White Scottish 1.1%  
White Welsh 0.5%  
White Northern Irish 0.2%  
White Irish 0.7%  
White Gipsy/Roma 0.1%  
Asian or Asian British Indian 0.4%  
Asian or Asian British Bangladeshi 0.1%  
Mixed White and Black Caribbean 0.1%  
Mixed White and Black African 0.1%  
Mixed White and Asian 0.4%  
Black or Black British Caribbean 0.2%  
Black or Black British African 0.1%  
I prefer not to say 2.2%  
Other 6%  
White Irish Traveller 0%  
Asian or Asian British Pakistani 0%  
Arab 0%  
Chinese 0%

**10. Is it possible to get the data in a timely and cost effective way?** *Answer: No*

**11. Is there national evidence/data that you can use?**  
*Answer: Yes*

Yes

**12. Have you consulted with Stakeholders?**  
*Answer: Yes/No*  
*Stakeholders are those who have a stake or interest in your project which could be residents, service users, staff, members, statutory and other organisations, VCSE partners etc.*

Yes

**13. Who have you involved, consulted and engaged with?**  
*Please give details in the box provided. This may be details of those you have already involved, consulted and engaged with or who you intend to do so with in the future. If the answer to question 12 is 'No', please explain why.*

Engagement in a general context took place with stakeholders prior to the launch of the public consultation including:

- KCC members and senior officers
- Service delivery team members and property team members as part of the design process
- District authorities
- External partners including NHS and Kent Fire and Rescue

A full 10-week consultation process was carried out between 17 January 2023 and 26 March 2023, this gave an opportunity to residents, community groups and all interested parties to give feedback on the proposed changes to service delivery across the county. During this consultation there were face to face sessions held, and over 150 hours of proactive engagement with residents, service users (including groups of users in locations proposed for closure), partners, staff, unions and members.

Of the 1,776 consultees who took part, 18% of consultees provided a response to our specific question about the equality analyses we had conducted prior to, and published together with, our consultation. A more detailed breakdown of the responses within the consultation and the equalities considerations is given above.

**14. Has there been a previous equality analysis (EQIA) in the last 3 years?** *Answer: Yes/No*

Yes – pre-consultation EqlAs from each service area.

**15. Do you have evidence/data that can help you understand the potential impact of your activity?**  
*Answer: Yes/No*

Yes.

**Uploading Evidence/Data/related information into the App**

*Note: At this point, you will be asked to upload the evidence/ data and related information that you feel should sit alongside the EQIA that can help understand the potential impact of your activity. Please ensure that you have this information to upload as the Equality analysis cannot be sent for approval without this.*

Demographic data that informed the need framework.  
Consultation report with stats on feedback received.

### Section C – Impact

**16. Who may be impacted by the activity?** *Select all that apply.*

Service users/clients  
*Answer: Yes/No*

Yes

Residents/Communities/Citizens  
*Answer: Yes/No*

Yes

Staff/Volunteers  
*Answer: Yes/No*

Yes

**17. Are there any positive impacts for all or any of the protected groups as a result of the activity that you are doing?** *Answer: Yes/No*

Yes

**18. Please give details of Positive Impacts**

The principles of the Kent Communities Programme are built on the ambition to provide a more cohesive range of community services to residents so that different needs can be met in the most accessible and efficient way possible.

By increasing the Gateways service overall (albeit with part-time provision at new locations), and co-locating with other services, we will be able to present a more coordinated overall service offer to our communities increasing access to complimentary KCC services for our users.

The co-location of services for Adults with Learning Disabilities proposed will help to advance the equality of opportunity between those individuals who share a relevant protected characteristic and those that do not. It will also help to foster good relations between those individuals who share a relevant protected characteristic and those that do not. Both of these factors are in line with the second and third considerations of s149 (1) of the Equality Act (2010).

The Family Hub Model provides positive impacts for residents by drawing closer together professionals from complimentary organisations to deliver a more well-rounded range of services in one place for residents. The approach to co-designing outreach with partners means that there will be a greater level of understanding of the challenges facing particular communities, including residents with one or more protected characteristic. This could result in services being delivered to communities that are currently unserved by delivering outreach provision to residents within these areas.

The proposed changes to the Adult Education service will result in services being delivered from a building in much better condition, resulting in a more pleasant and conducive learning environment.

Proposals for co-location with Libraries, Community Learning and Skills, Adult Social Care and Family Hub services. By co-locating with a mix or range of these services within the same buildings, we are presenting a more unified service offer to the resident, so it is easier for them to access a broader range of services from a single location.

We will also be able to offer space for a range of partners to deliver services from this location and benefit from a range of services under one roof. For example, it is anticipated that our Meet and Greet staff will also have knowledge of services available from the local Borough council as well as third sector partners, to enable effective sign posting. Similarly, the link between Birth Registrations and Family Hub services is strengthened by co-locating Libraries and Family Hubs together.

Residents with some protected characteristics (sex, age, disability and race) are likely to be impacted more by the proposed building closures. These same groups are likely to also benefit from co-location of services, mindful of specific mitigations such as continued DDA compliance of co-location sites and the provision of private/confidential areas. Residents in these groups will be able to utilise these services will benefit from a reduced number of journeys by having KCC services located nearby/ together. It is also possible that there will be benefits for residents from different races as co-location will help those whose first language is not English, as they will not need to navigate multiple locations.

## Negative Impacts and Mitigating Actions

The questions in this section help to think through positive and negative impacts for people affected by your activity. Please use the Evidence you have referred to in Section B and explain the data as part of your answer.

### 19. Negative Impacts and Mitigating actions for Age

<p><b>a) Are there negative impacts for age?</b>  <i>Answer: Yes/No</i>  <i>(If yes, please also complete sections b, c, and d).</i></p>	<p>Yes</p>
<p><b>b) Details of Negative Impacts for Age</b></p>	<p>As set out above, the consultation response across the whole scope of proposals demonstrates a much greater level of opposition to both reductions in buildings and co-locations in the 25-24 age bracket. 81% of respondents in that age bracket oppose the proposals to have fewer buildings. This is likely due to the fact that residents in this age bracket have a higher chance of having children between the ages of 0-5 years old, and the majority of the reduction in buildings is across the Children’s Centre estate (83% of respondents with children under 1 year old oppose the proposals to have fewer buildings).</p> <p>The proposals within Options 1, 2, 3 and 4 would require individual within this age bracket to travel further, likely on public transport which may be difficult with children, pushchairs, and additional equipment. The crossover with other protected characteristics, including sex, disability, pregnancy and those with carers responsibilities needs considering as the impact on these protected characteristics combined would be greater.</p> <p>By virtue of the fact that the number of building closures <i>decreases</i> progressively between option 1 and 2, further between</p>

option 2 and 3, and then again between option 3 and 4, it is clear that the significance of the impacts across the County would lower depending on which option is chosen.

63% of residents between the age of 25 and 34 disagree with the proposals to co-locate services together. Again, this is supported by the comments within the response that this opposition is likely due to the proposals to co-locate Children Centre services and accessibility is raised as a point of concern. This suggests that the impact on residents in this age bracket, particularly when combined with other protected characteristics like sex, disability, pregnancy and carer responsibilities, would be more significant.

Again, considering that the number of building closures *decreases* progressively between option 1 and 2, further between option 2 and 3, and then again between option 3 and 4, it is clear that the significance of the impacts across the County would lower depending on which option is chosen.

Option 5 is the 'Do Nothing' option and as such, if Members decided to proceed with Option 5, there would be no change in equalities impacts.

The EqIA for Community Day Services for Adults with Learning Disabilities set out that there is greater impact of changes to their service on residents aged 35-49. This is due to the demographic make up of their service user base. The impact on these residents is, similar to above, the requirement to travel further to access services that move as a result of the changes set out in Options 2, 3 and 4 (same changes proposed across these options for this service). It is noted that the service users in this age bracket are also more likely to experience disabilities or mobility issues themselves and so there is a link between age and disability to be considered when assessing the impacts of the changes to this service. More detail is provided in the EqIA from the service.

The Adult Education service EqIA identifies that the relocation of their service proposed may disproportionately impact older residents who may find a relocation to an alternative location more confusing. As above, there is a crossover to be considered in that the impact is likely to be more significant for older residents that also experience disability of mobility issues. More detail is provided in the EqIA from the service.

The Gateway service EqIA sets out that many of their residents are elderly and therefore proposals to relocate their service within Options 2, 3 and 4 (same changes proposed across these options for this service) will have a disproportionate impact on the age characteristic. The reason being that residents will be required to travel to alternative locations in Gravesend, Tonbridge and Dover which may be more difficult for the elderly that also experience mobility issues. More detail is provided in the service EqIA.

The Family Hub Model EqIA details negative impacts on age given that young children and parents (most likely aged between 25 and 39) may need to travel to new locations. Travel costs and arrangement, particularly with pushchairs and children will likely be more difficult. The EqIA also considers the impact of increased travel times on young parents, elderly parents and carers. It also sets out that co-location of services may change the look and feel of buildings which will have a negative impact on young children, particularly those with SEND requirements. More detail is provided within the service EqIA.

**c) Mitigating Actions for age**

Across the options presented for Member decision the impact of change on all protected characteristics, including age, are mitigated to different degrees by retaining progressively more buildings in Options 3 and 4 compared to the consultation model presented in Option 2. In Options 3 and 4, the Needs Framework has been amended to give progressively greater weight to the analysis of the public transport network. Therefore, in Options 3 and 4 progressively fewer buildings are proposed for closure, which reduces the requirement for residents to use public transport to access services in alternative locations. Option 5 does not make any changes and so there are no equalities impacts to mitigate.

The Community Day Services for Adults with Learning Disabilities EqIA sets out mitigations including the fact that the alternative locations proposed are close to the existing locations it is possible to mitigate the changes through clear communication and engagement with service users. Any co-locations will be supported by providing guidance to staff in new locations to adequately signpost new service users that may find new locations more difficult to navigate. More detail is provided within the service EqIA.

The Adult Education EqIA sets out that staff within the new location will be able to provide signposting and support to residents navigating the co-location site. The design and construction work to facilitate the co-location will consider DDA and accessibility regulations. More detail is provided within the service EqIA.

The Gateway service EqIA sets out mitigating actions for negative impacts on age including clear communication and engagement with service users to raise awareness of the changes and any accessible transportation options to the new location. All proposed co-locations are within a mile of the existing locations and are equally accessible on public transport. More detail is provided within the service EqIA.

The Family Hub EqIA sets out that impacts on age will be mitigated by consulting users on barriers to accessing services, co-designing

	<p>elements of the model where possible to foster a sense of ownership and timetabling to support activities for different age groups. More detail is provided within the service EqIA.</p> <p>The Family Hub outreach offer, proposed to be co-designed with partners within each district locality, allows services to be delivered within communities that would negate the need for residents to travel to reach services. It will also lead to service delivery to currently underserved communities that may miss out on service provision due to the historic nature of the Council's building footprint.</p>
<p><b>d) Responsible Officer for Mitigating Actions – Age</b></p>	<p>Ben Sherreard</p>
<p><b>20. Negative Impacts and Mitigating actions for Disability</b></p>	
<p><b>a) Are there negative impacts for Disability?</b> <i>Answer: Yes/No (If yes, please also complete sections b, c, and d).</i></p>	<p>Yes</p>
<p><b>b) Details of Negative Impacts for Disability</b></p>	<p>14% of consultation respondents indicated that they experience a disability and 61% of all respondents disagree with the proposals to have fewer buildings. The negative impacts on residents experiencing a disability do interplay with other protected characteristics as already outlined, particularly between age.</p> <p>The proposals within Options 1, 2, 3 and 4 would require individuals experiencing a disability to travel further, likely on public transport which may be difficult given their disability. Equally, navigating new locations and co-location sites may be more challenging as spaces are unfamiliar.</p> <p>By virtue of the fact that the number of building closures <i>decreases</i> progressively between option 1 and 2, further between option 2 and 3, and then again between option 3 and 4, it is clear that the significance of the impacts across the County would lower depending on which option is chosen.</p> <p>48% of respondents disagree with the proposals to co-locate services together. The comments within the response suggest that this opposition is likely due to concerns around accessibility of services within co-located sites. This suggests that the impact on residents experiencing a disability would be more significant.</p> <p>Again, considering that the number of building closures <i>decreases</i> progressively between option 1 and 2, further between option 2 and 3, and then again between option 3 and 4, it is clear that the significance of the impacts across the County would lower depending on which option is chosen.</p> <p>Option 5 is the 'Do Nothing' option and as such, if Members decided to proceed with Option 5, there would be no change in equalities impacts.</p>

The EqIA for Community Day Services for Adults with Learning Disabilities sets out that due to the nature of their service, all of their users experience a disability. The impact on these residents is, similar to above, the requirement to travel further to access services that move as a result of the changes set out in Options 2, 3 and 4 (same changes proposed across these options for this service). Equally, co-location of services may present unfamiliar or overwhelming situations for service users that experience a disability. More detail is provided in the EqIA from the service.

The Adult Education service EqIA identifies that increased walking distance (shorter distance for some users) to the proposed new location of their service in Broadstairs may present a challenge for individuals that experience a disability. Equally, the relocation of their service proposed may disproportionately impact service users that experience a disability as they may find a relocation to an alternative location more confusing and difficult to navigate. More detail is provided in the EqIA from the service.

The Gateway service EqIA sets out that many of their service users will be required to make more than one trip to access KCC and partner services now, whereas previously these were provided from the single Gateway location. This will more significantly impact those that experience a disability. It also sets out that the proposed locations may not have the relevant facilities such as changing spaces or accessible toilets. More detail is provided in the service EqIA.

The Family Hub Model EqIA details negative impacts on parents/carers with a physical disability and children with SEND requirements or that experience a disability. Again, changes to the locations of buildings, and layout of buildings that are used to access services will disproportionately impact these groups given the increased difficulties that travelling further presents. More detail is provided within the service EqIA.

**c) Mitigating Actions for Disability**

Across the options presented for Member decision the impact of change on all protected characteristics, including disability, are mitigated to different degrees by retaining progressively more buildings in Options 3 and 4 compared to the consultation model presented in Option 2. In Options 3 and 4, the Needs Framework has been amended to give progressively greater weight to the analysis of the public transport network. Therefore, in Options 3 and 4 progressively fewer buildings are proposed for closure, which reduces the requirement for residents to use public transport to access services in alternative locations. Option 5 does not make any changes and so there are no equalities impacts to mitigate.

The co-location sites will be brought forward with the assistance of professional design and construction partners that will consider DDA compliance and regulations as part of the design work and

implementation of changes that facilitate the co-location. This will include provision of accessible facilities, DDA compliant buildings and relevant wayfinding provision.

The Community Day Services for Adults with Learning Disabilities EqIA sets out mitigations including the fact that the alternative locations proposed are close to the existing locations it is possible to mitigate the changes through clear communication and engagement with service users. Any co-locations will be supported by providing guidance to staff in new locations to adequately signpost new service users that may find new locations more difficult to navigate. More detail is provided within the service EqIA.

The Adult Education EqIA sets out that staff within the new location will be able to provide signposting and support to residents navigating the co-location site. The design and construction work to facilitate the co-location will consider DDA and accessibility regulations. It is also true that the alternative locations suggested are relatively close to the existing facilities and in some instances are already known locations to the service users. More detail is provided within the service EqIA.

The Gateway service EqIA sets out mitigating actions for negative impacts on disability including clear communication and engagement with service users to raise awareness of the changes and any accessible transportation options to the new location. All proposed co-locations are within a mile of the existing locations and are equally accessible on public transport. The service will take additional mitigation action such as considering alternative disabled parking provision and exploring the use of facilities at co-location sites to help residents access a wider range of services digitally. More detail is provided within the service EqIA.

The Family Hub EqIA sets out that impacts those experiencing a disability will be mitigated by consulting users on barriers to accessing services, co-designing elements of the model where possible to foster a sense of ownership and reviewing proposed building co-locations to ensure accessibility and DDAA compliance. More detail is provided within the service EqIA.

The Family Hub outreach offer, proposed to be co-designed with partners within each district locality, allows services to be delivered within communities that would negate the need for residents to travel to reach services which has been acknowledged as more challenging for residents that experience a disability.

Ben Sherreard

**21. Negative Impacts and Mitigating actions for Sex**

Yes

(If yes, please also complete sections b, c, and d).



<p><b>b) Details of Negative Impacts for Sex</b></p>	<p>As is seen in the response to the consultation, 62% of female respondents oppose the proposal to have fewer buildings compared to 34% of male respondents. Equally 69% of female respondents oppose the co-location of services, compared to 26% of male respondents. This is likely due to the fact that women are more likely to take on greater responsibilities for childcare and the majority of the reduction in buildings is across the Children’s Centre estate (83% of respondents with children under 1 year old oppose the proposals to have fewer buildings).</p> <p>The proposals within Options 1, 2, 3 and 4 would require individuals to travel further, likely on public transport which may be difficult with children, pushchairs, and additional equipment. The crossover with other protected characteristics, including age, disability, pregnancy and those with carers responsibilities needs considering as the impact on these protected characteristics combined would be greater.</p> <p>By virtue of the fact that the number of building closures <i>decreases</i> progressively between option 1 and 2, further between option 2 and 3, and then again between option 3 and 4, it is clear that the significance of the impacts across the County would lower depending on which option is chosen.</p> <p>Option 5 is the ‘Do Nothing’ option and as such, if Members decided to proceed with Option 5, there would be no change in equalities impacts.</p> <p>The Adult Education service EqIA identifies that 80% of its service user base is female and 61% of respondents objected to the proposals to relocate the CLS service in Broadstairs. Therefore, it could be argued that the impact of the move will disproportionately impact women. More detail is provided in the EqIA from the service.</p> <p>The Family Hub Model EqIA demonstrates that women are most likely to access their current service offer and so will be most impacted by the proposed changes. Again, changes to the locations of buildings, and layout of buildings that are used to access services will disproportionately impact these groups given the increased difficulties that travelling further presents. More detail is provided within the service EqIA.</p>
<p><b>c) Mitigating Actions for Sex</b></p>	<p>Across the options presented for Member decision the impact of change on all protected characteristics, including sex, are mitigated to different degrees by retaining progressively more buildings in Options 3 and 4 compared to the consultation model presented in Option 2. In Options 3 and 4, the Needs Framework has been amended to give progressively greater weight to the analysis of the public transport network. Therefore, in Options 3 and 4 progressively fewer buildings are proposed for closure,</p>

	<p>which reduces the requirement for residents to use public transport to access services in alternative locations. Option 5 does not make any changes and so there are no equalities impacts to mitigate.</p> <p>The Adult Education service EqIA sets out that the proposed move to a new location in Broadstairs is less than a couple of minutes' walk away from the existing location and therefore the impact on sex is considered low.</p> <p>The Family Hub EqIA sets out mitigation measures including co-design and parent carer panels to develop safe and inclusive delivery spaces – this will be important in co-located sites where the impact of accessing services alongside residents accessing other services will need to be considered.</p>
<b>d) Responsible Officer for Mitigating Actions - Sex</b>	Ben Sherreard
<b>22. Negative Impacts and Mitigating actions for Gender identity/transgender</b>	
<b>a) Are there negative impacts for Gender identity/transgender?</b> <i>Answer: Yes/No (If yes, please also complete sections b, c, and d).</i>	Yes
<b>b) Details of Negative Impacts for Gender identity/transgender</b>	<p>4% of respondents to the consultation raised the issue of effects on disadvantage ethnic minorities / English as a second language / refugees / travellers / LGBTQ.</p> <p>Young people within the gender identity/transgender characteristic may be impacted by the requirement to share youth centre space with an early years (0-5) setting. Feedback from the consultation demonstrates that young people that access youth centres are not in favour of this as they may feel unable to use the centre to highlight issues related to gender identity, sexual health and LGBTQ issues.</p>
<b>c) Mitigating actions for Gender identity/transgender</b>	<p>Youth services will be protected by timetabling activity within the new Family Hub model and through design within spaces to provide separate and dedicated areas/settings for youth provision, including space for confidential conversations.</p> <p>We have examples of being able to do this successfully within our current estate and service models.</p>
<b>d) Responsible Officer for Mitigating Actions - Gender identity/transgender</b>	Ben Sherreard
<b>23. Negative Impacts and Mitigating actions for Race</b>	
<b>a) Are there negative impacts for Race?</b> <i>Answer: Yes/No (If yes, please also complete sections b, c, and d).</i>	Yes.
<b>b) Details of Negative Impacts for Race</b>	Residents that use English as a second language may find changes to service locations more difficult to accommodate. They may also find travel to alternative locations and navigating unfamiliar

	<p>settings more challenging than native English speakers. This covers the entire extent of the Kent Communities Programme as the reduction in buildings means that residents will need to access services in alternative locations or in different ways (for example online).</p> <p>The Gateway service EqlA sets out that there may be confusion for service users within Tonbridge and Gravesham where a change of location is proposed due to language barriers as a high proportion of Gateway users have English as a second language. More detail is provided in the EqlA from the service.</p> <p>The Family Hub EqlA also recognises that services may be more difficult to access for residents for whom English is not their primary language as they may rely on local access points more as alternative provision (for example online services) may not fully cater to their requirements.</p>
<p><b>c) Mitigating Actions for Race</b></p>	<p>Across the options presented for Member decision the impact of change on all protected characteristics, including race, are mitigated to different degrees by retaining progressively more buildings in Options 3 and 4 compared to the consultation model presented in Option 2. In Options 3 and 4, the Needs Framework has been amended to give progressively greater weight to the analysis of the public transport network. Therefore, in Options 3 and 4 progressively fewer buildings are proposed for closure, which reduces the requirement for residents to use public transport to access services in alternative locations or to navigate unfamiliar settings away from their current local access points. Option 5 does not make any changes and so there are no equalities impacts to mitigate.</p> <p>The Gateway EqlA explains that mitigation will be provided by clear communication to existing service users to raise awareness of changes to service locations. More detail is provided within the service EqlA.</p> <p>The Family Hub EqlA sets out that the Family Hub team will work alongside partners, community and faith organisations to provide access for diverse ethnic communities. More detail is provided within the service EqlA.</p>
<p><b>d) Responsible Officer for Mitigating Actions - Race</b></p>	<p>Ben Sherreard</p>
<p><b>24. Negative Impacts and Mitigating actions for Religion and belief</b></p>	
<p><b>a) Are there negative impacts for Religion and Belief?</b> <i>Answer: Yes/No (If yes, please also complete sections b, c, and d).</i></p>	<p>Yes</p>
<p><b>b) Details of Negative Impacts for Religion and belief</b></p>	<p>As detailed above, the Gateway service EqlA explains that there may be confusion for service users within Tonbridge and Gravesham where a change of location is proposed due to language barriers as a high proportion of Gateway users have English as a second language.</p>

<b>c) Mitigating Actions for Religion and belief</b>	The co-location of services has been carefully planned and service staff will be able to support service users in new situations and other service staff can be provided guidance to better signpost and support individuals that are accessing different services that use English as a second language.
<b>d) Responsible Officer for Mitigating Actions – Religion and belief</b>	Ben Sherreard
<b>25. Negative Impacts and Mitigating actions for Sexual Orientation</b>	
<b>a) Are there negative impacts for sexual orientation. Answer: Yes/No (If yes, please also complete sections b, c, and d).</b>	Yes
<b>b) Details of Negative Impacts for Sexual Orientation</b>	<p>4% of respondents to the consultation raised the issue of effects on disadvantage ethnic minorities / English as a second language / refugees / travellers / LGBTQ.</p> <p>Young people within the gender identity/transgender characteristic may be impacted by the requirement to share youth centre space with an early years (0-5) setting. Feedback from the consultation demonstrates that young people that access youth centres are not in favour of this as they may feel unable to use the centre to highlight issues related to gender identity, sexual health and LGBTQ issues.</p>
<b>c) Mitigating Actions for Sexual Orientation</b>	<p>Youth services will be protected by timetabling activity within the new Family Hub model and through design within spaces to provide separate and dedicated areas/settings for youth provision, including space for confidential conversations.</p> <p>We have examples of being able to do this successfully within our current estate and service models.</p>
<b>d) Responsible Officer for Mitigating Actions – Sexual Orientation</b>	Ben Sherreard
<b>26. Negative Impacts and Mitigating actions for Pregnancy and Maternity</b>	
<b>a) Are there negative impacts for Pregnancy and Maternity? Answer: Yes/No (If yes, please also complete sections b, c, and d).</b>	Yes
<b>b) Details of Negative Impacts for Pregnancy and Maternity</b>	<p>As is seen in the response to the consultation, 62% of female respondents oppose the proposal to have fewer buildings compared to 34% of male respondents. Equally 69% of female respondents oppose the co-location of services, compared to 26% of male respondents. This is likely due to the fact that women are more likely to take on greater responsibilities for childcare and the majority of the reduction in buildings is across the Children's Centre estate (83% of respondents with children under 1 year old oppose the proposals to have fewer buildings). 3% of respondents to the consultation indicated that they were pregnant.</p> <p>The proposals within Options 1, 2, 3 and 4 would require individuals to travel further, likely on public transport which may</p>

be difficult for pregnant women or those with children, pushchairs, and additional equipment. The crossover with other protected characteristics, including age, disability, sex and those with carers responsibilities needs considering as the impact on these protected characteristics combined would be greater.

By virtue of the fact that the number of building closures *decreases* progressively between option 1 and 2, further between option 2 and 3, and then again between option 3 and 4, it is clear that the significance of the impacts across the County would lower depending on which option is chosen.

Option 5 is the 'Do Nothing' option and as such, if Members decided to proceed with Option 5, there would be no change in equalities impacts.

The Gateway service EqIA explains that pregnant women or those with young children will be required to travel to more than one site to access services from multiple agencies whereas currently in Tonbridge, Dover and Gravesend they are able to access multiple agencies within the existing Gateway location. This additional travel will more significantly impact the pregnancy and maternity protected characteristic.

Within the Family Hub EqIA the service accepts that expectant mothers will be required to travel to alternative locations to access the services they require under the Kent Communities Programme proposals. Costs of travel and difficulties using public transport and travelling greater distances will more significantly impact pregnant women. More detail is provided within the service EqIA.

**c) Mitigating Actions for Pregnancy and Maternity**

Across the options presented for Member decision the impact of change on all protected characteristics, including pregnancy and maternity, are mitigated to different degrees by retaining progressively more buildings in Options 3 and 4 compared to the consultation model presented in Option 2. In Options 3 and 4, the Needs Framework has been amended to give progressively greater weight to the analysis of the public transport network. Therefore, in Options 3 and 4 progressively fewer buildings are proposed for closure, which reduces the requirement for residents to use public transport to access services in alternative locations. Option 5 does not make any changes and so there are no equalities impacts to mitigate.

The Gateway EqIA sets out mitigation measures including clear communication to service users of accessible transport options and the use of facilities within co-location sites to support access to a wider range of partner services (i.e. computers within libraries).

	The Family Hub EqIA sets out that they will continue to consult on barriers to service access throughout the implementation of the new model.
<b>d) Responsible Officer for Mitigating Actions – Pregnancy and Maternity</b>	Ben Sherreard
<b>27. Negative Impacts and Mitigating actions for marriage and civil partnerships</b>	
<b>a) Are there negative impacts for Marriage and Civil Partnerships? Answer: Yes/No (If yes, please also complete sections b, c, and d).</b>	No.
<b>b) Details of Negative Impacts for Marriage and Civil Partnerships</b>	
<b>c) Mitigating Actions for Marriage and Civil Partnerships</b>	
<b>d) Responsible Officer for Mitigating Actions - Marriage and Civil Partnerships</b>	
<b>28. Negative Impacts and Mitigating actions for Carer’s responsibilities</b>	
<b>a) Are there negative impacts for Carer’s responsibilities? Answer: Yes/No (If yes, please also complete sections b, c, and d).</b>	Yes
<b>b) Details of Negative Impacts for Carer’s Responsibilities</b>	<p>It has been set out above that the protected characteristics of age and sex experience more significant negative impacts resulting from the changes outlined in the Ken Communities Programme proposals. It has been highlighted that there is an interplay between these protected characteristics and the protected characteristic of those with carer’s responsibilities.</p> <p>The proposals within Options 1, 2, 3 and 4 would require individuals to travel further, likely on public transport which may be difficult with children, pushchairs, and additional equipment to support those for whom individuals’ care.</p> <p>By virtue of the fact that the number of building closures <i>decreases</i> progressively between option 1 and 2, further between option 2 and 3, and then again between option 3 and 4, it is clear that the significance of the impacts across the County would lower depending on which option is chosen.</p> <p>Option 5 is the ‘Do Nothing’ option and as such, if Members decided to proceed with Option 5, there would be no change in equalities impacts.</p> <p>The Community Day Services for Adults with Learning Disabilities service EqIA picks up this issue specifically in relation to their service users and the carers that support them. More detail is provided within the service EqIA.</p> <p>The Adult Education Service EqIA sets out that service users with carer responsibilities may find accessing the service in a new location more challenging in that they will be required to navigate the service setting in a location with other services on offer. More detail is provided within the service EqIA.</p>

	<p>The Gateway service EqIA includes the consideration that due to the proposed changes, carers will be required to travel to more than one location to access a range of services currently on offer in a single location. More detail is provided within the service EqIA.</p>
<p><b>c) Mitigating Actions for Carer's responsibilities</b></p>	<p>Across the options presented for Member decision the impact of change on all protected characteristics, including those with carer's responsibilities, are mitigated to different degrees by retaining progressively more buildings in Options 3 and 4 compared to the consultation model presented in Option 2. In Options 3 and 4, the Needs Framework has been amended to give progressively greater weight to the analysis of the public transport network. Therefore, in Options 3 and 4 progressively fewer buildings are proposed for closure, which reduces the requirement for residents to use public transport to access services in alternative locations. Option 5 does not make any changes and so there are no equalities impacts to mitigate.</p> <p>The Community Day Services for Adults with Learning Disabilities service EqIA details mitigation for each of the three locations where changes are proposed. The mitigations primarily focus on the fact that alternative locations as proposed are all close to the existing service centres and as such are not overly burdensome to access. More detail is provided within the service EqIA.</p> <p>The Adult Education Service EqIA sets out that mitigation is provided that the proposed co-location delivers additional teaching space in an accessible way and will be provided in line with accessibility regulations. More detail is provided within the service EqIA.</p> <p>The Gateway service EqIA sets out that mitigation will be provided by raising awareness of accessible transport options to the new locations and that facilities will be used in co-location sites to assist users accessing a wider range of services. More detail is provided within the service EqIA.</p>
<p><b>d) Responsible Officer for Mitigating Actions - Carer's Responsibilities</b></p>	<p>Ben Sherreard</p>

## EQIA Submission Draft Working Template

If required, this template is for use prior to completing your EQIA Submission in the EQIA App.

You can use it to understand what information is needed beforehand to complete an EQIA submission online, and also as a way to collaborate with others who may be involved with the EQIA.

Note: You can upload this into the App when complete if it contains more detailed information than the App asks for and you wish to retain this detail.

### Section A

<b>1. Name of Activity (EQIA Title):</b>	Kent Communities Programme – Gateway
<b>2. Directorate</b>	ST
<b>3. Responsible Service/Division</b>	Marketing and Resident Experience – Deputy Chief Executive's Office

### Accountability and Responsibility

<b>4. Officer completing EQIA</b> Note: This should be the name of the officer who will be submitting the EQIA onto the App.	Pascale Blackburn-Clarke
<b>5. Head of Service</b> Note: This should be the Head of Service who will be approving your submitted EQIA.	Christina Starte
<b>6. Director of Service</b> Note: This should be the name of your responsible director.	Amanda Beer – Interim Chief Executive

### The type of Activity you are undertaking

7. What type of activity are you undertaking?	
Tick if Yes	Activity Type
Yes	<b>Service Change</b> – operational changes in the way we deliver the service to people.
Yes	<b>Service Redesign</b> – restructure, new operating model or changes to ways of working
	<b>Project/Programme</b> – includes limited delivery of change activity, including partnership projects, external funding projects and capital projects.
	<b>Commissioning/Procurement</b> – means commissioning activity which requires commercial judgement.
	<b>Strategy /Policy</b> – includes review, refresh or creating a new document
Yes	<b>Other</b> – Introduction of new Gateway provision in Maidstone, some proposed location moves

**8. Aims and Objectives and Equality Recommendations** – Note: You will be asked to give a brief description of the aims and objectives of your activity in this section of the App, along with the Equality recommendations. You may use this section to also add any context you feel may be required.

#### Equality Impact Assessment

This EQIA is intended to assess the potential impact of our decisions on persons with different protected characteristics. In particular, this EQIA has been prepared to help us to have regard to the need to: (i) eliminate discrimination; (ii) advance equality of opportunity; and (iii) foster good relations between persons who share a relevant protected characteristic and those who do not, in the exercise of our public functions. These issues are relevant considerations to be taken into account whenever a new policy, function, or system change is being proposed in the exercise of our public functions. This EQIA is also



intended to evidence that these considerations have in fact been taken into account, and the weight given to them as part of our decision-making process.

### **The Case for Change - Kent Communities Programme**

The Council is facing very significant financial pressures, for a number of reasons set out in 'Securing Kent's Future' (August 2023 and October 2023). That document sets out the urgent steps needed to return the Council to financial sustainability, by reducing overspend in its budget to avoid further need to use limited reserves to fund revenue overspends, which would weaken the financial resilience of the authority and limit the scope for the use of reserves to invest in transformation necessary to address the structural deficit.

The financial challenges faced by the Council cannot be ignored. Two particularly significant factors, are the Council's statutory 'best value' duty to deliver a balanced budget, provide statutory services, including adult social care and children's services, and secure value for money in all spending decisions; and the Council's other statutory duties.

The Kent Communities Programme seeks to rationalise our physical estate and propose a greater mix of alternative methods of service delivery across the County, informed by a clear and data-driven understanding of service need. Delivery of this programme has become more important in the light of the increased financial pressures faced by the Council. The programme also seeks to reduce the Council's carbon footprint, in line with our Net Zero 2030 approach, although this is a secondary factor given the overarching financial context. The programme does include elements of improvement to service delivery: for example benefits offered by co-location of services.

However, the Council must acknowledge that the impact of closures and reductions in services on residents can be significant. The approach set out in these proposals is therefore based on a relative needs assessment. Mitigating measures are set out, which are intended to minimise as far as possible the impact of the proposals on Kent residents.

A detailed and extensive public consultation ([www.kent.gov.uk/communityservicesconsultation](http://www.kent.gov.uk/communityservicesconsultation)) allowed consultees the opportunity to give their views on the proposals. These responses have been analysed and carefully considered. A range of options have been developed, informed by the consultation responses. This EQIA has been updated following feedback from that consultation and is also based on data and evidence about Kent's communities and our service users.

### **Summary of Proposals**

Five separate options are being presented for Member consideration and decision.

Within four of the five option the changes are the same for the Gateway service and these are detailed below.

- Relocation of existing Dover Gateway into Dover Discovery Centre as part of a wider co-location (The DDC co-location is an existing separate project, and the KCP proposal is to add Gateway into the co-location arrangement).
- Relocation of existing KCC services at Gravesend Gateway into Gravesend Library in December 2025.
- New part-time Gateway provision at KHLC (Maidstone) in a co-location with the library.
- Relocation of existing KCC services provided at Tonbridge Gateway into Tonbridge Library.

This EqlA considers the impacts on residents of the service moving location in four of the five options and the impact of the co-location with the library service. It takes into account the relevant feedback from the consultation in relation to the Gateway service and the general equalities approach.

Where we are proposing to move the Gateway service, there will be a KCC service provision, however the number of hours and the opening times offered have not yet been defined. It is likely that should a Gateway member of staff not be available full time in any location, that queries be dealt with by alternative KCC staff on site, i.e. receptionists or Library officers.

However, in order to access partner services that were offered alongside the KCC service, the users may be required to make more than one trip as the co-locations proposed are with other KCC services and not necessarily with external partners.

The fifth option is a 'Do Nothing' option and therefore no changes to the Gateway service are proposed under that scenario.

## Gateway

Gateway is a hub, which allows for services from a range of different partners to co-locate and collaborate under one roof. This can include services from Kent County Council, Local District/Borough Councils and community/third sector partners and is designed to match and meet community needs. Gateway offers a conduit to a range of other services and providers to deliver services, with a meet and greet function that is designed to triage enquiries and assist customers to access services. This could be by promoting self-help, assisting with applications, making direct referrals or signposting depending on the customer need and capability.

In developing our proposals, we have considered the main data and evidence about Kent's communities. This is because the ethos of Gateway is to be placed in town centre locations where our customers may already be visiting to carry out other transactions in the area, such as shopping, accessing other services (e.g. job centres), and where there are good transport links.

Gateway is a physical service designed to help those who may not be able to navigate Kent County Council's or other partners' services that may assist them in their day to day lives. This includes helping some of our vulnerable residents accessing services such as Blue Badge assessment appointments.

As part of the programme, we have looked to utilise the buildings already owned by Kent County Council and expand the Gateway offer further to ensure that those with extra support needs can be supported in accessing KCC services, as well as those provided by third sector and other public sector bodies where appropriate. Wherever possible, we propose to use buildings located as close as possible to where a higher need is identified, and in locations where customers may already be undertaking other transactions.

Gateways already work successfully in a number of co-locations such as Ashford and Sheerness, where customers can access a range of services under one roof.

The proposal for Gateway services set out in the consultation was to retain all of our existing 9 locations throughout Kent, but with some moved to another location close by. Those proposed locations and changes were as follows:

District	Current Buildings	Proposal	Nearest Alternative	Distance (Miles from current building)
Ashford	Ashford Gateway Plus	Remain		
	Tenterden Gateway	Remain		
Dover	Dover Gateway	Leave	Moving to Dover Discovery Centre	0.1
Gravesham	Gravesham Gateway	Leave	Moving to Gravesend Library	0.9
Sevenoaks	The Eden Centre	Remain		
	Swanley Link	Remain		
Swale	Sheppey Gateway	Remain		
Thanet	Thanet Gateway Plus	Remain		
Tonbridge and Malling	Tonbridge Castle Gateway	Leave	Moving to Tonbridge Library	0.6

In the consultation we also proposed to extend our Gateway service to the new locations listed below, which would have been co-located in spaces where it is intended that other Kent County Council services would also be provided:

District	Proposed Community Hub Location	Co-located Services
Ashford	Stanhope Library	Library and Family Hub, Gateway
Dartford	Temple Hill Library	Gateway, Family Hub and Library
Maidstone	Kent History and Library Centre	Gateway and Library
Thanet	Ramsgate Library	Gateway, Library and Family Hub
	Cliftonville Library	Gateway, Adults and Library

Since the consultation, the Gateway Management Team have confirmed their funding envelope and without additional financial resource cannot support the inclusion of Gateway provision across all of the co-locations suggested in the consultation. As such the proposals no longer include a Gateway provision as part of a co-location of services at Stanhope Library, Temple Hill Library or Cliftonville Library. There is no additional removal of Gateway locations compared to the proposals outlined in the consultation model and there were no comments received specific to the proposed co-locations at Stanhope, Temple Hill or Cliftonville. On 30<sup>th</sup> March the Strategic Reset Programme Board agreed that all options presented must be financially viable. To retain the additional locations consulted on would result in pressure on the service funding envelope which, if met, would require corresponding cuts to other service areas.

As such an alternative provision has been drawn up for delivery:

District	Current Buildings	Proposal	Notes	Distance (Miles from current building)
Ashford	Ashford Gateway Plus	Remain		
	Tenterden Gateway	Remain		
Dover	Dover Gateway	Leave	Move to Dover Discovery Centre	0.1
Gravesham	Gravesham Gateway	Leave	Move to Gravesend Library – part time provision	0.9
Sevenoaks	The Eden Centre	Remain		
	Swanley Link	Remain		
Swale	Sheppey Gateway	Remain		
Thanet	Thanet Gateway Plus	Remain		
	Ramsgate	New	Part time provision	
Tonbridge and Malling	Tonbridge Castle Gateway	Leave	Move to Tonbridge Library - part time provision	0.6
Maidstone	Kent Library and History Centre	New	Part time provision	

Part time provision would mean a Gateway member of staff would not be on site five days a week. Where we are proposing to move the Gateway service, there will be a Gateway KCC service provision, however the number of hours and the opening times offered have not yet been defined. It is likely that should a Gateway member of staff not be available that queries be

dealt with by alternative KCC staff, i.e. receptionists or Library officers in their absence. We would seek the views of partners who may wish to deliver services out of the new sites as to when that provision is best delivered.

We would therefore not be providing provision at the following locations as originally proposed by the consultation;

District	Proposed Community Hub Location	Co-located Services	Notes
Ashford	Stanhope Library	Library and Family Hub	Family hub and Library would be offering support for residents in a small space. There would be limited space for partners.
Dartford	Temple Hill Library	Family Hub and Library	Family hub and Library would be offering provision in a small space. There would be limited space for partners.
Thanet	Cliftonville Library & Ramsgate Library	Adults and Library	Additional provision at the existing Gateway in Margate (Thanet Gateway Plus) will offer better value for money and a richer service in a higher footfall area. Adults and Libraries services at Cliftonville and Libraries at Ramsgate will be able to assist customers by signposting residents to required services where needed. At Cliftonville, there is limited space for partners.

The precise location for all Gateway services will be subject to the continued availability of the properties concerned. The above proposals are based on leases currently in place and what we currently know about the relevant properties.

### Consultation

20% of consultees answering use Gateways. 17% of consultees answering indicated other household members currently use Gateways. The majority of both groups use services in person at a building (66% and 65% respectively) but a significant proportion reported that they use both in person and online services (21% and 24% respectively). Although Gateway does not have an online provision, we have assumed that they have meant Council websites.

There were 7 comments received regarding the proposal to relocate the existing Dover Gateway into the Dover Discovery Centre which did not specifically raise equalities concerns.

There were 8 comments received regarding the proposal to relocate the existing Gravesend Gateway into Gravesend Library. One person raised that Women's Support services for example Domestic Abuse, should not be offered in a hub, due to safety concerns for those impacted.

There were 15 comments received regarding the proposal to relocate the existing Tonbridge Gateway into Tonbridge Library. There were concerns raised regarding access to toilets and parking at the library, however this was not clear as to whether this was due to an equalities issue.

The majority of comments were in support of retaining Gateway style services, allowing people to access them in more locations and retaining existing provisions. Some raised the issue of needing to potentially access two locations to see different Councils, i.e. local and district/borough services.

More generally feedback was received re confidentiality in hubs and also for those who are Neurodiverse, the hubs may be overwhelming in terms of sound and space.

The most common concern expressed in the consultation response regarding the general co-location of services (not specific to the Gateway co-location proposals) were:

Users being able to get there / travel there / can't walk to alternatives / need close location of services	51%
Public transport availability / cost of / reduction in service	33%
Practicality of co-located services (e.g. children's centre in same space as library)	22%
Impact on users unable to access the service / impact on vulnerable / mental health / taking away a lifeline / hub of community	21%
Suitability of building / fit for purpose / the space	19%
Maintaining service levels / impact on service levels	14%

The feedback around impact on accessibility and mental health should be considered in equalities terms and is addressed in the relevant section below.

### Impact

We consider that the impact of our proposals in relation to the Gateways service are likely to be positive overall, as the service will be co-locating with other services and we intend to introduce provision in Maidstone as set out in the tables above.

People with protected characteristics that are mostly likely to benefit from our proposals to increase provision are those with disabilities, including hidden disabilities, carers, and older people who may need greater assistance to access our services online such as Blue Badges. Further, we expect that people whose first language is not English and may therefore need additional assistance, and some groups for whom there may be a stigma or perception of inequality in accessing our services (e.g. Gypsy, Roma and Irish Travellers) to also benefit from our proposals. It is important however to acknowledge that, as set out above, the increase in provision is not as great as was initially suggested at consultation and so the positive impacts are less than would have been.

Whilst no comments on the proposals raised specific equalities concerns, it is important to acknowledge that in relocating the sites in Dover, Gravesend and Tonbridge there may be a negative impact on residents with disabilities, residents who are older (noting that residents over 60 are statistically more likely to also experience a disability or may have other difficulties accessing alternative locations not directly linked to disability, such as a greater reliance on public transport), or other residents with accessibility or mobility difficulties (such as pregnant women or women with young children), that may need to make alternative travel arrangements or will be required to walk further to access the relocated service. Similar impacts may result from the potential need for service users to make multiple trips where Gateways that we are proposing to leave are co-located with other non-Gateway and/or non-KCC services. However, all relocations are less than a mile away from the existing location and are in centrally located buildings which meet accessibility requirements and are well served by public transport access.

### Justification

The impacts outlined above are considered to be proportionate when considered against the positive impacts, mitigations and the overall policy and financial context within which the Council operates. Therefore, any impacts are considered to be both limited and justifiable.

## Section B – Evidence

*Note: For questions 9, 10 & 11 at least one of these must be a 'Yes'. You can continue working on the EQIA in the App, but you will not be able to submit it for approval without this information.*

**9. Do you have data related to the protected groups of the people impacted by this activity?** Answer: Yes/No

No

However, an analysis of the protected characteristics of the respondents to the consultation is as follows:

**Gender**

Male 18%

Female 81.3%

Prefer not to say 0.7%

**Same Gender as birth**

Yes 99%

Prefer not to say 1%

**Pregnant**

Yes – 28 out of 870 responses

**Religion**

Christian 90.2%

Buddhist 0.3%

Hindu 0.7%

Jewish 0.7%

Muslim 0.7%

Prefer not to say 2.6%

Other 4.9%

Sikh 0%

**Disability**

Yes 14.3 %

No 83.5%

Prefer not to say 2.2%

**Sexual Orientation**

Heterosexual/Straight 89.7%

Bi/Bisexual 2%

Gay man 0.4%

Gay woman/Lesbian 1.3%

Prefer not to say 6%

Other 0.6%

**Ethnicity**

White English 87.6%

White Scottish 1.1%

White Welsh 0.5%

White Northern Irish 0.2%

	<p>White Irish 0.7%  White Gipsy/Roma 0.1%  Asian or Asian British Indian 0.4%  Asian or Asian British Bangladeshi 0.1%  Mixed White and Black Caribbean 0.1%  Mixed White and Black African 0.1%  Mixed White and Asian 0.4%  Black or Black British Caribbean 0.2%  Black or Black British African 0.1%  I prefer not to say 2.2%  Other 6%  White Irish Traveller 0%  Asian or Asian British Pakistani 0%  Arab 0%  Chinese 0%</p>
<p><b>10. Is it possible to get the data in a timely and cost effective way?</b> <i>Answer: No</i></p>	<p>Yes</p>
<p><b>11. Is there national evidence/data that you can use?</b> <i>Answer: Yes</i></p>	<p>Yes</p>
<p><b>12. Have you consulted with Stakeholders?</b>  <i>Answer: Yes/No</i>  <i>Stakeholders are those who have a stake or interest in your project which could be residents, service users, staff, members, statutory and other organisations, VCSE partners etc.</i></p>	<p>Yes</p>
<p><b>13. Who have you involved, consulted and engaged with?</b>  <i>Please give details in the box provided. This may be details of those you have already involved, consulted and engaged with or who you intend to do so with in the future. If the answer to question 12 is 'No', please explain why.</i></p>	
<p>Engagement regarding the consultation in a general context had already taken place with stakeholders prior to the launch of the consultation including:</p> <ul style="list-style-type: none"> <li>- KCC members and senior officers</li> <li>- Service delivery team members as part of the design process</li> <li>- District authorities</li> <li>- External partners including NHS and Kent Fire and Rescue</li> </ul> <p>A full 10-week consultation process was carried out between 17 January 2023 and 26 March 2023, this gave an opportunity to residents, community groups and all interested parties to give feedback on the proposed changes to service delivery across the county. During this consultation there were face to face sessions some of which were held in Gateways, to gauge the views of the public on the proposals.</p> <p>The Gateway team raised awareness with its customers and partners that a consultation was taking place and asked them to take the opportunity to share their views and to ask any of their customers to take part too. This included all locations including those where there were no proposed changes.</p> <p>Of the 1,776 consultees who took part, 20% of consultees stated that they use Gateways. 17% of consultees answering indicated other household members currently use Gateways.</p>	

The following partners have and/or are operating from the Gateways listed. Please note however that these change from time to time to reflect changes in customer needs and the partner requests.

**Ashford Gateway** - Ashford Borough Council, Libraries, Registration and Archives, Community Learning and Skills, Adult Services, Food with Friends café, Occupational Therapy, We are with You (counselling), Kent Supported Employment, Hearbase, Hi Kent, Kent Pathways, Child Health Clinic, Job Club, Blue Badge Assessments, Blue Badge Appointments

**Tenterden** – Ashford Borough Council, Libraries, Registration and Archives, Post Office, Hi Kent, Inspiring Lives, Blue Badge Appointments

**Dover** - Dover District Council, Citizens Advice Bureau, ONE You, Hi Kent, Occupational Therapy, Kent Supported Employment, Blue Badge Assessments, Blue Badge Appointments

**Gravesham** - Gravesham Borough Council, Kent Police, Kent Supported Employment, KCC Blue Badge Appts, KCC Blue Badge Assessments, Shaw Trust, Royal British Legion,

**Eden Centre** – Libraries, Registration & Archives, West Kent Extra, Citizen’s Advice Bureau, Baptist Union Corp

**Swanley Link** - Swanley Town Council, West Kent Housing, Post Office, Libraries, Registrations and Archives, Day Services, Café, Community Warden, Carers First, Specsavers, Pathways to Work, One You, Porchlight,

**Sheppey Gateway** - Swale Borough Council, Community Learning and Skills, Libraries, Registrations and Archives, Children's Services, Occupational Therapy, We are with You (counselling), Porchlight, Kent Supported Employment, Barclays, Live Well Kent, Blue Badge Appointments

**Thanet** - Thanet District Council, Kent Support Employment, KCC Blue Badge Appts, KCC Blue Badge Assessments,

**Tonbridge and Malling** - Tonbridge & Malling Council, Kent Supported Employment, Citizen’s Advice Bureau, KCC Blue Badge Appointments, KCC Blue Badge Assessments, Post Office, Change Grow Live.

**14. Has there been a previous equality analysis (EQIA) in the last 3 years?** *Answer: Yes/No*

One has been carried out for Dover Gateway as part of the Dover Discovery Centre refurbishment. And one prior to the launch of the consultation regarding Kent Communities proposals.

**15. Do you have evidence/data that can help you understand the potential impact of your activity?** *Answer: Yes/No*

Yes.

**Uploading Evidence/Data/related information into the App**  
*Note: At this point, you will be asked to upload the evidence/ data and related information that you feel should sit alongside the EQIA that can help understand the potential impact of your activity. Please ensure that you have this information to upload as the Equality analysis cannot be sent for approval without this.*

Demographic data from the consultation demographic questionnaire is available for some of the protected characteristics. This has been used where appropriate to inform the Equality Impact Assessment as set out above.

Data is not currently collected from service users about any protected characteristics they may have. A proactive effort was made during the consultation to encourage service users to tell us any potential impacts they see to any of those listed protected groups. The data included above sets out the protected characteristics of respondents.

We do currently collect some data about footfall into the buildings, but this is not perfect data and cannot be



relied upon as an accurate reflection of the customers who access services. This data is also not broken down by protected groups.

## Section C – Impact

**16. Who may be impacted by the activity? Select all that apply.**

Service users/clients <i>Answer: Yes/No</i>	Yes	Residents/Communities/Citizens <i>Answer: Yes/No</i>	Yes
Staff/Volunteers <i>Answer: Yes/No</i>	Yes		

**17. Are there any positive impacts for all or any of the protected groups as a result of the activity that you are doing? Answer: Yes/No** Yes

**18. Please give details of Positive Impacts**

The principles of the Kent Communities Programme are built on the ambition to provide a more cohesive range of community services to residents so that different needs can be met in the most accessible and efficient way possible.

By co-locating with other KCC services, we will be able to present a more coordinated overall service offer to our communities. This includes:

- Proposals for co-location with other KCC services. By co-locating with a mix or range of these services within the same buildings, we are presenting a more unified service offer to the resident, so it is easier for them to access a broader range of services from a single location.
- We will also be able to offer space for a range of partners to deliver services from this location and benefit from a range of services under one roof. It is anticipated that Meet and Greet staff will also have knowledge of services available from the local Borough council as well as third sector partners, to enable effective sign posting.
- We hope that by co-locating with other services, we will be able to offer a more holistic service offer, including sign posting, triaging, and assisting customers to carry out tasks such as Blue Badge applications.
- The proposed co-locations means that in the majority of cases it is possible that customers with protected characteristics particularly those who are older, those who are disabled and their carers who utilise these services will benefit from a reduced number of journeys by having KCC services located nearby/ together. It is also possible that it will help those whose first language is not English, as they will not need to navigate multiple locations.
- It is possible by operating all services from one central and convenient location; it will avoid the need for multiple visits to different sites for KCC services.

The proposals for the Gateway service in four of the five options include additional provision at Maidstone. If members choose to proceed with the 'Do Nothing' option it could be argued that this will negatively impact those residents that would have used the new service provision. This would represent a missed opportunity for a positive impact delivered by the other four options.

## Negative Impacts and Mitigating Actions

The questions in this section help to think through positive and negative impacts for people affected by your activity. Please use the Evidence you have referred to in Section B and explain the data as part of your answer.

**19. Negative Impacts and Mitigating actions for Age**

<p><b>e) Are there negative impacts for age?</b> <i>Answer: Yes/No (If yes, please also complete sections b, c, and d).</i></p>	<p>Yes</p>
<p><b>f) Details of Negative Impacts for Age</b></p>	<p>In Gravesham, Dover and Tonbridge we are proposing to move from locations shared with District and Borough Council services. Service users may therefore need to make two trips if they want to also see our district and borough colleagues or access those services. It is possible that those who are older with mobility constraints may find it more difficult to navigate two different locations.</p> <p>We don't currently have a breakdown of those accessing services within Gateway. However, given that we anticipate a high proportion of users of Gravesend Gateway are over 65 given the current mix of services on offer there, for example Blue Badge assessments, a high proportion of those affected will be elderly.</p> <p>The requirement to make more than one trip, or to travel further may lead to an impact on more elderly residents that are more likely to struggle walking further or accessing public transport. They are also more likely to become confused at a change in location.</p> <p>In Dover, Tonbridge and Gravesham Districts there are over 65k people who are over 65 years old. (ONS data 2020 mid-year population estimates)</p> <p>Wider feedback received in the consultation raised that the proposed co-location sites may be more difficult to navigate for the elderly if they are in unfamiliar locations.</p>
<p><b>g) Mitigating Actions for age</b></p>	<p>The proposed relocations of services in Gravesham and Tonbridge are all within 1 mile.</p> <p>Some comments were received with regards to those locations we anticipate leaving from but moving to an alternative locally, these concerns covered being able to still access services and having to travel between two locations to access different services as well as parking.</p> <p>We are proposing to take action to mitigate the impact of the change in location, including:</p> <ul style="list-style-type: none"> <li>• We will engage with Gravesham, Dover and Tonbridge &amp; Malling Borough Councils and partners to understand any impact on the move to the Libraries on their service users. Including offering space should they wish to use it for their services.</li> </ul>

	<ul style="list-style-type: none"> <li>• We will raise awareness of accessible transport routes to alternative locations and district and borough council services. As well as highlighting available parking in the area.</li> <li>• We will explore utilising the facilities at the community hubs to help these service users to use digital services and/or to access services virtually with support from staff.</li> </ul> <p><b>Co-location</b> The co-location of services has been carefully planned and feasibility studies have assessed the appropriateness of co-location from a service and accessibility compliance perspective. Further design work will continue to develop the co-location proposals.</p> <p>Service staff will be able to support service users in new situations and other service staff can be provided guidance to better signpost and support individuals that are accessing different services within the location.</p> <p>Given the overall policy and financial context in which KCC is currently operating, the impacts outlined above, with the mitigations detailed are considered to be justified.</p>
<p><b>h) Responsible Officer for Mitigating Actions – Age</b></p>	<p>Pascale Blackburn-Clarke</p>
<p><b>20. Negative Impacts and Mitigating actions for Disability</b></p>	
<p><b>e) Are there negative impacts for Disability?</b> <i>Answer: Yes/No (If yes, please also complete sections b, c, and d).</i></p>	<p>Yes</p>
<p><b>f) Details of Negative Impacts for Disability</b></p>	<p>Within Gravesham, Dover and Tonbridge where we are proposing to relocate away from our District and Borough Councils, those with disabilities may need to make two trips or travel further to see both council’s services which may be particularly difficult for individuals with this protected characteristic.</p> <p>As part of the responses to the Consultation some responses have mentioned the inconvenience of accessing two locations for services, however none specifically linked this to a concern around accessing services with a disability. There were mentions of access to parking generally.</p> <p>In the proposed new locations there are no Changing place facilities in Dover or Gravesham and there are no accessible toilets in Tonbridge for customers to use.</p>

	<p>Both Tonbridge and Gravesend Libraries already have a hearing loop to assist those customers with hearing impairments.</p> <p>In Dover, Tonbridge and Gravesham Districts there are over 8k people claiming disability allowance at all ages. (Department of Work and Pensions data Feb 2020)</p> <p>Wider feedback received in the consultation raised that the hubs may be overwhelming for those who are neurodiverse in terms of sound and space as well as for those that may find navigating unfamiliar locations difficult if they have a disability.</p>
<p><b>g) Mitigating Actions for Disability</b></p>	<p>As both services are being relocated within a mile, we think the impact of this proposal on those with a disability is low.</p> <p>To mitigate any potential impact we will:</p> <ul style="list-style-type: none"> <li>• Ensure all locations are accessible both internally and externally. A feasibility study will be undertaken to understand the accessibility requirements of each building.</li> <li>• Look at the feasibility of introducing hearing loops, changing places and accessible toilets to proposed locations that do not already have these.</li> <li>• Consideration for ramped access and automatic doors for those locations that do not already have them.</li> <li>• We will engage with Gravesham and Tonbridge &amp; Malling Borough Councils and partners to understand any impact on the move to the Libraries on this group. Consider offering space to these services to allow services to continue to be delivered under one roof.</li> <li>• Raise awareness of accessible transport routes to alternative locations</li> <li>• Consideration of disabled parking at alternative locations for Gravesend which is centrally located in the middle of town (Tonbridge already has parking, Dover is close by to original location)</li> </ul>

	<ul style="list-style-type: none"> <li>• Explore utilising the facilities at the community hubs to help these service users to access services virtually with support from staff.</li> <li>• Explore the possibility of confidential and quieter spaces for those who may be overwhelmed in noisy and large spaces.</li> </ul> <p>The impact of needing to make multiple trips to now access partner agency services is difficult to mitigate. It is balanced by the ability to access a wider range of KCC services. The opportunity to invite partner agencies into the new co-location sites – even if part time – can be explored with other organisations including district councils to mitigate this impact.</p> <p><b>Co-location</b></p> <p>The co-location of services has been carefully planned and feasibility studies have assessed the appropriateness of co-location from a service and DDA compliance perspective. Further design work will continue to develop the co-location proposals.</p> <p>Service staff will be able to support service users in new situations and other service staff can be provided guidance to better signpost and support individuals that are accessing different services within the location.</p> <p>Given the overall policy and financial context in which KCC is currently operating, the impacts outlined above, with the mitigations detailed are considered to be justified.</p>
<p><b>h) Responsible Officer for Mitigating Actions - Disability</b></p>	<p>Pascale Blackburn-Clarke</p>
<p><b>21. Negative Impacts and Mitigating actions for Sex</b></p>	
<p><b>e) Are there negative impacts for Sex?</b> <i>Answer: Yes/No (If yes, please also complete sections b, c, and d).</i></p>	<p>No</p> <p>Currently there are no perceived impacts for Sex as there is no proposed reduction of KCC service provision, it will be delivered in another location close by in Dover, Tonbridge and Gravesend.</p> <p>No other potential impacts were raised as part of the consultation.</p> <p>Since significantly more women (81%) than men (18%) responded to the consultation it could be argued that the changes proposed disproportionately impact women. However, none of the responses in relation to Gateways received at consultation specifically raised concerns regarding sex.</p>

f) <b>Details of Negative Impacts for Sex</b>	One comment was raised in relation to offering Women's support services within hubs to support with domestic abuse and the safety of those accessing the service, we will work with partners to ensure any safety considerations are taken into account, if a partner wishes to deliver in a Gateway location.
g) <b>Mitigating Actions for Sex</b>	
h) <b>Responsible Officer for Mitigating Actions - Sex</b>	
<b>22. Negative Impacts and Mitigating actions for Gender identity/transgender</b>	
e) <b>Are there negative impacts for Gender identity/transgender?</b> <i>Answer: Yes/No (If yes, please also complete sections b, c, and d).</i>	No, currently there are no perceived impacts for gender identity / transgender as there is no proposed reduction of KCC service provision, it will be delivered in another location close by in Dover, Tonbridge and Gravesend.  99% of consultation respondents indicated that they consider themselves to be the same gender as assigned at birth. No potential impacts were raised as part of the consultation.
f) <b>Details of Negative Impacts for Gender identity/transgender</b>	
g) <b>Mitigating actions for Gender identity/transgender</b>	
h) <b>Responsible Officer for Mitigating Actions - Gender identity/transgender</b>	Pascale Blackburn-Clarke
<b>23. Negative Impacts and Mitigating actions for Race</b>	
e) <b>Are there negative impacts for Race?</b> <i>Answer: Yes/No (If yes, please also complete sections b, c, and d).</i>	Yes
f) <b>Details of Negative Impacts for Race</b>	Potential confusion for service users where a change of location is proposed due to language barriers as it is possible that Gateway users will have English as a second language.  According to the latest school census data (2021-2022), Gravesham has the highest proportion for Asian / British Asian families (particularly Indian families) and the second highest proportion of Black / Black British families and White Eastern European families in Kent. This is also evident in the language profiles where Gravesend has the highest proportion of children in schools in Kent who speak Polish, Lithuanian, Romanian, Panjabi, and Yoruba. A breakdown of ethnicities within the overall consultation response is included above.  As the latest available census data at this level is 2011, the school census has been used as a proxy for languages spoken in the wider community and households.

	<p>Whilst we have identified groups that are more likely to be impacted by these changes, there are no statistical evidence of a higher proportion of these groups identified within Tonbridge and Malling. It is however possible that Ukrainians who are here as part of the Homes for Ukraine scheme may be using our services.</p> <p>Users with English as a second language may find co-location of services more difficult as signposting may be more of a challenge for them in a new environment.</p> <p>No additional impacts were raised as part of the consultation.</p>
<p><b>g) Mitigating Actions for Race</b></p>	<p>Effective communications to be deployed before any changes made to locations. Consideration of information being made available in alternative languages or through local community groups.</p> <p><b>Co-location</b> The co-location of services has been carefully planned and service staff will be able to support service users in new situations and other service staff can be provided guidance to better signpost and support individuals that are accessing different services that use English as a second language.</p> <p>Given the overall policy and financial context in which KCC is currently operating, the impacts outlined above, with the mitigations detailed are considered to be justified.</p>
<p><b>h) Responsible Officer for Mitigating Actions - Race</b></p>	<p>Pascale Blackburn-Clarke</p>
<p><b>24. Negative Impacts and Mitigating actions for Religion and belief</b></p>	
<p><b>e) Are there negative impacts for Religion and Belief? Answer: Yes/No (If yes, please also complete sections b, c, and d).</b></p>	<p>Yes</p> <p>However, no potential impacts were raised as part of the consultation carried out from January to March 2023.</p>
<p><b>f) Details of Negative Impacts for Religion and belief</b></p>	<p>Potential confusion for service users where a change of location is proposed due to language barriers as Gateway users may have English as a second language. There is likely to be a relationship between use of English as a second language and religion, for certain religious groups.</p>
<p><b>g) Mitigating Actions for Religion and belief</b></p>	<p>The co-location of services has been carefully planned and service staff will be able to support service users in new situations and other service staff can be provided guidance to better signpost and support individuals that</p>

	<p>are accessing different services that use English as a second language.</p> <p>Given the overall policy and financial context in which KCC is currently operating, the impacts outlined above, with the mitigations detailed are considered to be justified.</p>
<p><b>h) Responsible Officer for Mitigating Actions – Religion and belief</b></p>	<p>Pascale Blackburn-Clarke</p>
<p><b>25. Negative Impacts and Mitigating actions for Sexual Orientation</b></p>	
<p><b>e) Are there negative impacts for sexual orientation. Answer: Yes/No (If yes, please also complete sections b, c, and d).</b></p>	<p>No</p>
<p><b>f) Details of Negative Impacts for Sexual Orientation</b></p>	<p>We currently don't have a breakdown of those accessing services within Gateway. There is no proposed removal of service provision, it will be delivered in another location close by in Dover, Tonbridge and Gravesend.</p> <p>The general response to the consultation when broken down by Sexual Orientation was as follows:</p> <p><b>Sexual Orientation</b>  Heterosexual/Straight 89.7%  Bi/Bisexual 2%  Gay man 0.4%  Gay woman/Lesbian 1.3%  Prefer not to say 6%  Other 0.6%</p> <p>No impacts were raised as part of the consultation responses received.</p>
<p><b>g) Mitigating Actions for Sexual Orientation</b></p>	
<p><b>h) Responsible Officer for Mitigating Actions – Sexual Orientation</b></p>	<p>Pascale Blackburn-Clarke</p>
<p><b>26. Negative Impacts and Mitigating actions for Pregnancy and Maternity</b></p>	
<p><b>e) Are there negative impacts for Pregnancy and Maternity? Answer: Yes/No (If yes, please also complete sections b, c, and d).</b></p>	<p>Yes</p>
<p><b>f) Details of Negative Impacts for Pregnancy and Maternity</b></p>	<p>At the time of consultation 3% of respondents indicated that they were pregnant.</p> <p>Within Gravesham, Dover and Tonbridge where we are proposing to relocate away from our District and Borough Councils partners, those experiencing pregnancy and/or maternity may find it more challenging to visit two locations to access both council's services and may find longer walking distances more difficult.</p>



<b>g) Mitigating Actions for Pregnancy and Maternity</b>	<p>The proposed relocations of services in Dover, Gravesham and Tonbridge are all within 1 mile.</p> <p>We will raise awareness of transport routes to alternative locations and district and borough council services.</p> <p>Explore utilising the facilities at the community hubs to help these service users to access services virtually with support from staff.</p> <p>No additional impacts were raised during or as a result of the consultation carried out from January to March 2023</p>
<b>h) Responsible Officer for Mitigating Actions – Pregnancy and Maternity</b>	Pascale Blackburn-Clarke
<b>27. Negative Impacts and Mitigating actions for marriage and civil partnerships</b>	
<b>e) Are there negative impacts for Marriage and Civil Partnerships? Answer: Yes/No (If yes, please also complete sections b, c, and d).</b>	<p>No. Currently there are no perceived impacts for marriage and civil partnership as there is no proposed removal of service provision, it will be delivered in another location close by in Dover, Tonbridge and Gravesend.</p> <p>No additional impacts were raised during or as a result of the consultation carried out from January to March 2023</p>
<b>f) Details of Negative Impacts for Marriage and Civil Partnerships</b>	
<b>g) Mitigating Actions for Marriage and Civil Partnerships</b>	
<b>h) Responsible Officer for Mitigating Actions - Marriage and Civil Partnerships</b>	Pascale Blackburn-Clarke
<b>28. Negative Impacts and Mitigating actions for Carer's responsibilities</b>	
<b>e) Are there negative impacts for Carer's responsibilities? Answer: Yes/No (If yes, please also complete sections b, c, and d).</b>	Yes
<b>f) Details of Negative Impacts for Carer's Responsibilities</b>	Carers may need to carry out two trips to request support from District and Borough partners. As part of the responses to the Consultation some responses have mentioned the inconvenience of accessing two locations for services.
<b>g) Mitigating Actions for Carer's responsibilities</b>	We will raise awareness of transport routes to alternative locations and district and borough council services.

	Explore utilising the facilities at the community hubs to help these service users to access services virtually with support from staff.
<b>h) Responsible Officer for Mitigating Actions - Carer's Responsibilities</b>	Pascale Blackburn-Clarke



## EQIA Submission Draft Working Template V2

If required, this template is for use prior to completing your EQIA Submission in the EQIA App.

You can use it to understand what information is needed beforehand to complete an EQIA submission online, and also as a way to collaborate with others who may be involved with the EQIA.

Note: You can upload this into the App when complete if it contains more detailed information than the App asks for and you wish to retain this detail.

### Section A

<b>1. Name of Activity (EQIA Title):</b>	Kent Community Programme- AHDCLDMH – <i>Kent Community Services for Adults with Learning Disabilities</i>
<b>2. Directorate</b>	ASCH
<b>3. Responsible Service/Division</b>	AHDCLDMH

### Accountability and Responsibility

<b>4. Officer completing EQIA</b> Note: This should be the name of the officer who will be submitting the EQIA onto the App.	Tracy Haith
<b>5. Head of Service</b> Note: This should be the Head of Service who will be approving your submitted EQIA.	Barbara Rickman
<b>6. Director of Service</b> Note: This should be the name of your responsible director.	Jim Beale

### The type of Activity you are undertaking

#### 7. What type of activity are you undertaking?

Tick if Yes	Activity Type
Yes	<b>Service Change</b> – <i>operational changes in the way we deliver the service to people.</i>
Yes	<b>Service Redesign</b> – <i>restructure, new operating model or changes to ways of working</i>
No TBC	<b>Project/Programme</b> – <i>includes limited delivery of change activity, including partnership projects, external funding projects and capital projects.</i>
No	<b>Commissioning/Procurement</b> – <i>means commissioning activity which requires commercial judgement.</i>
No	<b>Strategy /Policy</b> – <i>includes review, refresh or creating a new document</i>
	<b>Other</b> – Please add details of any other activity type here.

**8. Aims and Objectives and Equality Recommendations** – Note: You will be asked to give a brief description of the aims and objectives of your activity in this section of the App, along with the Equality recommendations. You may use this section to also add any context you feel may be required.

#### Equality Impact Assessment (EQIA)

This EQIA is intended to assess the potential impact of our decisions on persons with different protected characteristics. In particular, this EQIA has been prepared to help us to have regard to the need to: (i) eliminate discrimination; (ii) advance equality of opportunity; and (iii) foster good relations between persons who share a relevant protected characteristic and those who do not, in the exercise of our public functions. These issues are relevant considerations to be taken into account whenever a new policy, function, or system change is being proposed in the exercise of our public functions. This EQIA is also intended to evidence that these considerations have in fact been taken into account, and the weight given to them as part of our decision-making process.

## The Case for Change - Kent Communities Programme

The Council is facing very significant financial pressures, for a number of reasons set out in 'Securing Kent's Future' (August 2023 and October 2023). That document sets out the urgent steps needed to return the Council to financial sustainability, by reducing overspend in its budget to avoid further need to use limited reserves to fund revenue overspends, which would weaken the financial resilience of the authority and limit the scope for the use of reserves to invest in transformation necessary to address the structural deficit.

The financial challenges faced by the Council cannot be ignored. Two particularly significant factors, are the Council's statutory 'best value' duty to deliver a balanced budget, provide statutory services, including adult social care and children's services, and secure value for money in all spending decisions; and the Council's other statutory duties.

The Kent Communities Programme seeks to rationalise our physical estate and propose a greater mix of alternative methods of service delivery across the County, informed by a clear and data-driven understanding of service need. Delivery of this programme has become more important in the light of the increased financial pressures faced by the Council. The programme also seeks to reduce the Council's carbon footprint, in line with our Net Zero 2030 approach, although this is a secondary factor given the overarching financial context. The programme does include elements of improvement to service delivery: for example, benefits offered by co-location of services.

However, the Council must acknowledge that the impact of closures and reductions in services on residents can be significant. The approach set out in the proposals is therefore based on a relative needs assessment. Mitigating measures are set out, which are intended to minimise as far as possible the impact of the proposals on Kent residents.

A detailed and extensive public consultation ([www.kent.gov.uk/communityservicesconsultation](http://www.kent.gov.uk/communityservicesconsultation)) allowed consultees the opportunity to give their views on the proposals. These responses have been analysed and carefully considered. A range of options have been developed, informed by the consultation responses.

Our Equality Impact Assessment is based on data and evidence about Kent's communities and our service users. We have further developed our assessment based on feedback from the public consultation as this is an important means by which we can test our understanding. Feedback received directly into the consultation was proportionately lower than for the other services. However direct action was taken to engage specifically with users at sites proposed for closure. Service representatives had conversations directly with users at Northgate Hub and at Folkestone Sports Centre to discuss the proposals and get their feedback.

### Summary of Proposals

The table below sets out the extent of proposals with notes provided to explain changes that have impacted the proposals since the consultation.

The changes proposed are common across four of the five options, with the fifth being the 'Do Nothing' option.

District	Current Buildings	Number of Service Users (Rounded to Nearest 5)	Proposal	Nearest Alternative	Distance Miles
Ashford	Ashford Gateway Plus		Remain		

Canterbury	Swalecliffe Day Opportunities Centre	45	Remain		
	Northgate Hub*	30	Remain		
	Thanington Hub		Remain		
Dartford	TRACS, Essex Road (not as accessible as local alternatives)	30 across Dartford	Leave as part of business-as-usual activity	Yew Tree Centre	1.5
	Yew Tree Centre		Remain		
	The Dartford Bridge Learning and Resource Campus		Leave as part of business-as-usual activity	Dartford Library, Central Park Gardens (existing co-location)	3.0
Dover	Walmer Centre	40	Leave as part of business-as-usual activity	Relocation to Dover Discovery Centre (new co-location)	8.0
Folkestone & Hythe	Bridge Resource Centre	50	Remain		
	Phase II		Remain		
	Folkestone Sports Centre		Leave	Broadmeadow** Phase II	1 14
Gravesham	Milton Haig (including Freeways cookery skills setting)	45 (15 within cookery skills)	Remain		
Maidstone	Maidstone House	25	Remain		
Sevenoaks	Eden Centre	5	Remain		
	Sevenoaks Leisure Centre	15	Leave	Relocate to Sevenoaks Library* (new co-location)	0.1
	Swanley Link	10	Remain		
Swale	Crawford House	30	Remain		
	Faversham Library	10	Remain		
Thanet	Minnis Day Centre	45	Remain		
	Hartsdown Leisure Centre		Leave	Minnis Day Centre Cliftonville library (new co-location)	3.4 2.7 3.5

<b>Tonbridge &amp; Malling</b>	<b>Tonbridge Community Service</b>	<b>25</b>	<b>Remain</b>		
<b>Tunbridge Wells</b>	<b>Tonbridge Community Service. (There are no permanent buildings in this district so services users access services in Tonbridge)</b>	<b>15</b>	<b>See above</b>	<b>Outreach from Cranbrook Library (KCP has sought to identify opportunities for access to a wider network of KCC locations for outreach activity particularly in locations where there is no current provision)</b>	

\* Within the consultation document it was proposed that the Community Day Services for Adults with Learning Disabilities service would vacate Northgate Hub & the Prince of Wales Centre in Canterbury and consolidate their offer at Thanington. However, the landlord has been clear that they will not allow additional space within the Thanington location that would be required to facilitate the consolidation. Therefore, the plans to come out of the Northgate Hub are not achievable from a practical perspective. As such the removal of the service from the Northgate Hub is not a part of any option.

\*\* Another proposal in the consultation was to remove the Community Day Services for Adults with Learning Disabilities service from the Folkestone Sports Centre and use alternative provision at the Phase 2 Centre (14 miles away). Since the consultation the service has been offered space in another location (Broadmeadow) which is an Adult Short Stay centre within the Adults service. This centre is 1 mile away from the Folkestone Sports Centre and so represents a far better alternative option for service users. They will still have the option to utilise space at Phase 2, however they will have increased choice by also having access to space at Broadmeadow. This does not impact the financial position of the Programme.

\*\*\*Under Business As Usual (BAU) provision, a change detailed in the consultation model has already been enacted regarding the Community Day Services for Adults with Learning Disabilities. In the consultation we proposed moving the service out of the Sevenoaks Leisure Centre and into the Sevenoaks Library (across the car park). Shortly after the close of the consultation the management company of the Sevenoaks Leisure Centre went into administration and so to protect the service delivery, the service moved to the library. This is considered a BAU move. The consultation document explained that some changes may need to be made on a BAU basis, for example as a result of the expiry of a lease or a health and safety issue arising.

### **Service**

Community Services currently provide opportunities throughout the day Monday- Friday, across the twelve districts in Kent. The service supports around 400 adults with a learning disability with varying complexities of assessed support needs, including personal care, to ensure that it meets the needs of the people who use our services, and their parents/carers in Kent. The number of adults supported by the service is subject to change based on demand and capacity within the external market.

Our current service provision consists of both building based and community outreach support designed around meeting the wellbeing and socialisation needs of people we support as well as meeting their carers needs for time away from their caring responsibilities.

Some of the buildings are currently rented and some are Council owned. Through our proposals we are seeking to close some building-based services and to broaden our outreach offer by co-locating into existing Council owned properties wherever possible, reducing our carbon footprint and maximising opportunities for the people we support to be present within their local communities and community buildings. As well as potentially enabling us to increase the outreach activities on offer by making more informal use of a wider network of KCC buildings (responding to the specific needs of our service users), it has the potential to also bring them closer to those that need them, reducing travel and transport time and costs for individuals and carers.

The service is available to all persons who meet the criteria for inclusion which includes a referral from a social work practitioner.

The Services complete a dependency score for everyone. This will highlight support required for each activity ensuring outcomes are achievable. Everyone accessing our services will have a bespoke individual outcome focused support plan – (their “About Me “document).

Our services work with multi partnership agencies to prevent, delay, reduce the need for referral into these more costly services, supporting people to live in their family units for longer and thriving as citizens of their local environments supported by those that know them best.

Physical fitness and fresh air are important for everyone and can have a positive impact on psychological as well as physical well-being. Across the County we therefore actively seek and provide opportunities to maintain and increase physical fitness tailoring the sessions to meet peoples assessed needs and current levels of fitness. Examples include Walking groups, cycling, swimming, sailing, gardening, bowling, boxing subject to local community resources available Other activities provided typically include:

- Art and craft sessions, including painting, clay modelling, sewing, flower pressing.
- Cooking, for developing life skills and just for fun.
- Community outings utilising local services such as cinemas, cafes, pubs, shops. Libraries, church groups.

#### **Current service users:**

Below is a summary of what we know about our current service users compared to the latest census data available (2021) where appropriate unless otherwise stated.

Age (from 2020 Mid-Year Population Estimates)

Age	Percentage	Kent Average
0-24	0%	28.6%
25-34	16%	12.2%
35-49	33%	18.9%
50-59	28%	14.1%
60-64	11%	5.9%
65-74	9%	10.8%
75-84	4%	6.9%
85+	0%	2.7%

Young people are not represented by the adults service, they remain supported by children’s services which are unaffected by this proposal. Older people are also slightly underrepresented. It is well known that health outcomes

and life expectancy is significantly lower for people with a learning disability. A significant majority of individuals that benefit from our services are 25-59 years.

Disability – As the service is targeted at those with a disability, 100% of our service users have a disability.

Sex– We have an equal split of male and female service users, this is in line with the Kent average

Ethnicity –92% of our service users are from a white background, this is roughly in line with the Kent average of 89%

Marital Status – 93% of service users are single, this group is overrepresented as only 31% in the general Kent population are single with 49% being married and 20% being separated married or divorced.

Religion – No religion (45%), not stated (26%), Christian (19%), Other (10%). This also shows a difference to Kent averages with 60% of the population identifying as Christian and only 28% identifying as not having a religion.

Sexual Orientation Heterosexual / Straight (29%), Not Known (71%).

Pregnancy / Maternity – No data available

Gender identity/transgender – No data is available

We work to the six 'C's' model of inclusion coherence, commitment, consciousness, courage, connectedness, and co-production – to ensure we advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not ,promoting fairness for all Our services foster good relations with others promoting inclusion for those who have protected characteristics and the proposed changes will continue to support us in eliminating discrimination by enabling us to continue working in a person centred way

## **Consultation**

10% of consultees answering use Community Services for Adults with Learning Disabilities. 9% of consultees answering indicated other household members currently use Community Services for Adults with Learning Disabilities. The majority of both groups use services in person at a building (65% and 71% respectively) but a significant proportion use both in person and online services (18% and 25% respectively).

8 comments were received relating to the consultation proposal to close services at Northgate Hub. As detailed above this is no longer part of these proposals.

10 comments were received regarding the proposed removal of the service from Folkestone Sports Centre which focused on the impact on users that losing the service would have and the difficulties in travelling the distance to an alternative location. These same concerns were expressed by service users engaged directly by service reps during the consultation.

10 comments were received regarding the proposal to move the service from Sevenoaks Leisure Centre to Sevenoaks Library. Responses referred to the current ease of access to the leisure centre and the facilities offered at the centre for disabled people in terms of fitness and socialisation with others, which some service users rely on. Some consultees noted that moving to the library would not be a problem as service users are already familiar with the library building. The Sevenoaks Library location is less than 400 metres from the current Leisure Centre and is equally accessible via public transport and served by the same large car park.

10 comments were received regarding the proposal to remove service from Hartsdown Leisure Centre. These included comments about the benefit of the facilities on offer at Hartsdown, including free parking, and comments disagreeing



with the proposal to access services at a co-located site as accessing different sites with different resources can make for good variation and a good day for service users.

The most common concern expressed in the consultation response regarding the general co-location of services (not specific to the proposals to co-locate this service) were:

Users being able to get there / travel there / can't walk to alternatives / need close location of services	51%
Public transport availability / cost of / reduction in service	33%
Practicality of co-located services (e.g. children's centre in same space as library)	22%
Impact on users unable to access the service / impact on vulnerable / mental health / taking away a lifeline / hub of community	21%
Suitability of building / fit for purpose / the space	19%
Maintaining service levels / impact on service levels	14%

The feedback around impact on mental health should be considered in equalities terms and is addressed in the relevant section below.

Consultees were also given the opportunity to provide feedback on the equality analysis undertaken prior to consultation. 18% of consultees provided feedback in answer to the question in the consultation about equalities, although not all of these consultees will have considered the EqIA for community day services. 15% of consultees who answered the question about equalities referred to the effect on the disabled, those with learning difficulties or special educational needs. 10% of consultees raised concerns about whether buildings would be inclusive and accessible (including for the disabled). 5% raised concerns about the effect of the proposal on the vulnerable. In comments in answer to the question on equalities, which were mostly not comments specifically about this service, consultees raised concerns including about the accessibility of services, the potential impacts on mental and overall health on isolation from or difficult in accessing services, and difficulties in accessing digital services (including for some disabled people).

### Justification

The impacts outlined above are considered to be proportionate when considered against the positive impacts, mitigations and the overall policy and financial context within which the Council operates. Therefore any impacts are considered to be both limited and justifiable.

## Section B – Evidence

*Note: For questions 9, 10 & 11 at least one of these must be a 'Yes'. You can continue working on the EQIA in the App, but you will not be able to submit it for approval without this information.*

<b>9. Do you have data related to the protected groups of the people impacted by this activity? Answer: Yes/No</b>	Yes
<b>10. Is it possible to get the data in a timely and cost-effective way? Answer: Yes/No</b>	Yes
<b>11. Is there national evidence/data that you can use? Answer: Yes/No</b>	Yes
<b>12. Have you consulted with Stakeholders? Answer: Yes/No</b> <i>Stakeholders are those who have a stake or interest in your project which could be residents, service users,</i>	Yes

<i>staff, members, statutory and other organisations, VCSE partners etc.</i>	
<b>13. Who have you involved, consulted and engaged with?</b> <i>Please give details in the box provided. This may be details of those you have already involved, consulted and engaged with or who you intend to do so with in the future. If the answer to question 12 is 'No', please explain why.</i>	
<p>Engagement took place prior to consultation with stakeholders including:</p> <ul style="list-style-type: none"> <li>- KCC members and senior officers</li> <li>- Service delivery team members as part of the design process</li> <li>- District authorities</li> <li>- External partners including NHS and Kent Fire and Rescue</li> <li>- Adult Day Services Senior Management Team</li> <li>- Other services in the Kent Community Programme</li> </ul> <p>A full 10-week consultation process provided residents, community groups and all interested parties with an opportunity to give feedback on the proposed changes to service delivery across the county. During this consultation period there was over 150 hours of pro-active engagement continuing with public sector and other partners.</p> <p>These key stakeholders were identified to include in the consultation:</p> <ul style="list-style-type: none"> <li>- Community day service staff</li> <li>- Community day service users</li> <li>- Community day service Parents &amp; Carers</li> <li>- Other Councils who have placed people in our services</li> </ul> <p>There was initially a low response rate to the consultation in relation to this service and so, as detailed in the consultation Report, additional engagement was undertaken where possible with service users. This engagement was led by the service team at Folkestone Sports Centre by discussing the proposals with users of the 'Front Room' at Folkestone Sports Centre.</p>	
<b>14. Has there been a previous equality analysis (EQIA) in the last 3 years?</b> <i>Answer: Yes/No</i>	No
<b>15. Do you have evidence/data that can help you understand the potential impact of your activity?</b> <i>Answer: Yes/No</i>	Yes
<b>Uploading Evidence/Data/related information into the App</b> <i>Note: At this point, you will be asked to upload the evidence/ data and related information that you feel should sit alongside the EQIA that can help understand the potential impact of your activity. Please ensure that you have this information to upload as the Equality analysis cannot be sent for approval without this.</i>	<p>The Learning Disabilities (a learning disability) Mortality review- Annual Report for 2018: HQIP (2019):  <a href="https://www.hqip.org.uk/resource/the-learning-disabilities-mortality-review-annual-report-2018/">https://www.hqip.org.uk/resource/the-learning-disabilities-mortality-review-annual-report-2018/</a>  <a href="https://nationalautistictaskforce.org.uk/the-autism-dividend-reaping-the-rewards-of-better-investment/">https://nationalautistictaskforce.org.uk/the-autism-dividend-reaping-the-rewards-of-better-investment/</a>          Access to primary and community health-care services for people 16 years and over with intellectual disabilities: a mapping and targeted systematic review  <a href="https://www.ncbi.nlm.nih.gov/books/NBK553283/">https://www.ncbi.nlm.nih.gov/books/NBK553283/</a>          Framing Kents Future  <a href="#">Appendix A - Framing Kents Future.pdf</a></p>

NICE Guidance Arranging services for people with a learning disability and behaviour that challenges

<https://www.nice.org.uk/guidance/ng93>

Data Intelligence Report Kent Learning Disabilities

[Microsoft Word - Data Intelligence Final Report \(kentcht.nhs.uk\)](#)

Valuing People Now 2001

[Microsoft Word - VPN SUMMARY REPORT FINAL 3.12.10 v7.doc \(publishing.service.gov.uk\)](#)

Valuing People Now 2 2009

[Improving outcomes for people with learning disabilities - GOV.UK \(www.gov.uk\)](#)

The Carer's Strategy

[2022-01-06 Kent Adult Carers Strategy 2022 to 2027.docx \(sharepoint.com\)](#)

PANSI Report (includes the number of residents in each District with a disability).

<https://proceduresonline.com/trixcms2/media/16810/lgbtqplus-support-toolkit.pdf>

## Section C – Impact

**16. Who may be impacted by the activity?** *Select all that apply.*

Service users/clients <i>Answer: Yes/No</i>	Yes	Residents/Communities/Citizens <i>Answer: Yes/No</i>	Yes
Staff/Volunteers <i>Answer: Yes/No</i>	Yes		

**17. Are there any positive impacts for all or any of the protected groups as a result of the activity that you are doing?** *Answer: Yes/No* Yes

**18. Please give details of Positive Impacts**

### Sevenoaks

In Sevenoaks, as other residents also use the Library, we will be expanding the potential for those with protected characteristics due to disability to be working alongside those without as well as having dedicated space that can be developed and adapted to offer further facilities enabling us to broaden our activity offer in Sevenoaks.

Co-locating into Sevenoaks library means the service would benefit from greater accessibility to all the activities and resources the library has to offer as they will access the location with the support of our service staff whilst still enabling people to continue to use the Leisure Centre for physical fitness activities as any other local citizen might do.

In relation to Swanley, following the recent closures due to the recent COVID pandemic we have seen a decrease in service users returning to this facility, therefore opening possible bookable space to the general public will allow the council to reach a wider audience, whilst continuing to foster good relationships and work alongside those with protected characteristics related to disability.

### Thanet and Tunbridge Wells

Further bookable outreach spaces in Thanet will enable greater flexibility when planning community outings and activities. As other community citizens also use the libraries, we will be expanding the potential for those with protected characteristics due to disability to be working alongside those without as well as having dedicated space that can be developed and adapted to offer further facilities enabling us to broaden our activity offer in Thanet.

The ability to book outreach space will provide a positive benefit for service users, particularly to relieve service pressure in Tunbridge Wells where, based on the PANSI report, we have a need in Tunbridge Wells with around 7% of the population identified as an adult with a learning disability and this is reflected in Kent County Councils database, MOSAIC, with around 7% of adults using the community services for adults with a learning disability residing in this area. This lack of physical space may have contributed to a decline in use of our services in this area over the past 3 years and may mean that people with an assessed need and their carers are not receiving the support that they are entitled to. The ability to book flexible outreach space across KCC buildings is an opportunity for our service as it will continue to foster good relationships and encourage working alongside those with protected characteristics related to disability.

By continuing to increase our co-locations with other services at Sevenoaks Library and Cliftonville Library and exploring opportunities to use a wider network of outreach locations, will be expanding the potential for good relationships with those with protected characteristics due to disability and to be working alongside those without.

## Negative Impacts and Mitigating Actions

The questions in this section help to think through positive and negative impacts for people affected by your activity. Please use the Evidence you have referred to in Section B and explain the data as part of your answer.

### 19. Negative Impacts and Mitigating actions for Age

<p>i) <b>Are there negative impacts for age?</b> <i>Answer: Yes/No</i>  <i>(If yes, please also complete sections b, c, and d).</i></p>	<p>Yes</p>
<p>j) <b>Details of Negative Impacts for Age</b></p>	<p>As explained above, the demographic breakdown of our service users is predominantly those aged 25 – 64 with the largest cohort being 35-49. Changes to our service therefore disproportionately impact those within these age groups.</p> <p>The proposed exit from or closure of some buildings including those in <b>Folkestone and Hythe, Sevenoaks and Thanet</b> may create travel and transport issues for existing people who use our services and their parents/carers as well as for our social work practitioners where travel forms part of an assessed need, increasing both travel time and cost which may lead to a decrease in attendance and our ability to provide services. This would potentially affect our older generation of users whose parents/carers would be that much older themselves and more likely to have mobility/health issues that prevent them being able to transport the people that use our services independently leading to unmet assessed needs of those with age related protected characteristics.</p> <p>‘Age’ specifically was not raised within the consultation feedback. However, the disproportionate impact on those in the age brackets set out above has been considered.</p>

**k) Mitigating Actions for age**

**Across all proposed exit from or closure of buildings**

We will seek to mitigate any negative impacts by providing wider opportunities through development of our outreach offer keeping people well informed of proposed changes and enable real involvement in managing the change using positive risk management assessments and techniques to support people through each step of the proposed change where this need is identified additionally. This means making the most of emerging opportunities to provide support within flexible outreach spaces across the rest of the KCC community estate.

**Folkestone and Hythe**

We will seek to continue to use Folkestone Sports centre for ad hoc community activities (as opposed to a service centre) through development of our outreach offer, increasing service led physical activity opportunities where demand requires.

Having agreed that we can have space in Broadmeadow Registered Care Centre means we are only 1 mile away from our current location and mitigates the need for travel to the Bridge Resource Centre or Phase 2 where age would impact more on people's ability to travel. Given the short distance the impact is not considered significant in regards to age.

**Sevenoaks**

By collocating into Sevenoaks library, from the leisure Centre which is on the same site, people will already be familiar with this site reducing potential anxieties regarding change and it will also not affect travel plans for the people who use the service or their carers with age related protected characteristics. Due to circumstances beyond our control (the leisure centre going into liquidation) these changes have already been introduced to enable our services to have a building base to operate from. People that attend our service in Sevenoaks, their families and carers were advised of this and opportunities to feedback on the proposals given.

Being able to book outreach space at Swanley Gateway may enable us to provide a meet and greet service as well as a drop in space for when accessing community resources in the local area, bringing the service back to this rural location where there are few or no external providers.

**Thanet**

During the Covid pandemic and on reopening we moved into new premises at Minnis Bay as our main building hub so people and their families, carers are already familiar with

	<p>travel to and attendance at this site. Hartsdown Leisure Centre is currently used for Outreach work only and we will be able to continue to use the Sports centre for community activities as members of the public.</p> <p>As the nearest alternative is 3 miles away, we recognise that the travel implications related to Thanet may be higher, although these must be balanced against the overall policy and financial context within which the Council currently operates. We acknowledge that this travel distance may have greater adverse impacts for older users of this service.</p> <p><b>Co-location</b> The co-location of services has been carefully planned and feasibility studies have assessed the appropriateness of co-location from a service and accessibility perspective. Further design work will continue to develop the co-location proposals.</p> <p>Service staff will be able to support service users in new situations and other service staff can be provided guidance to better signpost and support individuals that are accessing different services within the location.</p> <p>Given the overall policy and financial context in which KCC is currently operating, the impacts outlined above, with the mitigation detailed, are considered to be justified.</p>
<p><b>l) Responsible Officer for Mitigating Actions - Age</b></p>	<p>Barbara Rickman - Assistant Director, Service Provision</p>
<p><b>20. Negative Impacts and Mitigating actions for Disability</b></p>	
<p><b>i) Are there negative impacts for Disability?</b> <i>Answer: Yes/No (If yes, please also complete sections b, c, and d).</i></p>	<p>Yes</p>
<p><b>j) Details of Negative Impacts for Disability</b></p>	<p>As explained above, the nature of our service means that all of our service users have the protected characteristic of disability. Those service users will therefore be impacted more by our proposed changes, than people who do not have that protected characteristic.</p> <p>All consultation feedback concerning this service is therefore relevant to this protected characteristic.</p> <p>The proposed exit from or closure of some buildings including those in <b>Folkestone and Hythe, Sevenoaks and Thanet</b> may cause distress for individuals who have become familiar with the site and may suffer increased anxiety, a decrease in mental health and wellbeing and some may find that behaviours alter to include physical and verbal aggression where previously there were none. Travel to</p>

alternative locations may be difficult for service users as a result of their particular disabilities (and may also be more difficult for parents/carers with disabilities) given accessibility of public transport services and other challenges resulting from having to travel further, for example in wheelchairs. This is likely to be most challenging in Thanet where the nearest alternative permanent location is 3 miles away.

#### **Folkestone and Hythe**

Folkestone Sports Centre currently provides a dedicated 'drop in' space where people using the sports facilities can break for refreshment and lunch breaks. Service users are currently able to access many of the sports facilities including use of the toning tables and sensory environment we may find exiting this site has cost implications for the service if wishing to continue to use the facilities, as well as an impact on people's physical fitness, health and wellbeing.

#### **Sevenoaks**

The people who currently access Sevenoaks Leisure Centre all benefit from using the dedicated training kitchen and being supported to cook their lunch daily. The library does not currently offer this provision. Service users are currently able to access many of the sports facilities and exiting this site may have cost implications for the service if wishing to continue to use the facilities, as well as an impact on people's physical fitness, health and wellbeing.

The allocated space in the library has not been designed to meet the needs of people with a learning disability and as such has limited resources to meet the needs of the people who currently use this service.

#### **Thanet**

Hartsdown Leisure Centre currently provides a dedicated space where local people can meet prior to undertaking community activities elsewhere, including using the on-site sports facilities, as well as break for refreshment and lunch times. Where an individual is responsible for travelling independently and funding their own transport this may have cost implications for them which may lead to a decrease in attendance numbers and further to unmet care and support needs.

#### **Co-locations**

Co-location as a principle may provide some difficulties for service users as they will be required to access service

	<p>support from new, unfamiliar locations in settings that include people accessing a range of different services. This could provide an overwhelming atmosphere.</p>
<p><b>k) Mitigating Actions for Disability</b></p>	<p><b>Across all proposed exit from or closure of buildings</b></p> <p>We seek to mitigate any negative impacts by providing wider opportunities through development of our outreach offer keeping people well informed of proposed changes and enable real involvement in managing the change using positive risk management assessments and techniques to support people through each step of the proposed change where this need is identified additionally. This means making the most of emerging opportunities to provide support within flexible outreach spaces across the rest of the KCC community estate in order to foster good relationships and encourage working alongside those with protected characteristics related to disability.</p> <p><b>Folkestone and Hythe</b></p> <p>We will seek to continue to use Folkestone Sports centre for ad hoc community activities (as opposed to a service centre) through development of our outreach offer, increasing service led physical activity opportunities where demand requires.</p> <p>Use of dedicated space in Broadmeadow Adult short stay service as an alternative service centre will also provide new opportunities for the people we support in a Kent County Council owned property thereby meeting the objectives of the Project and enabling those with protected characteristics by disability to engage and work alongside the people being supported in the adult short stay centre promoting inclusion and wider opportunities for friendships to form.</p> <p><b>Sevenoaks</b></p> <p>By collocating into Sevenoaks library from the Leisure Centre which is on the same site people will already be familiar with this site reducing potential anxieties regarding change and it will also not affect travel plans for the people who use the service or their careers.</p> <p>The area dedicated for our service is however due to be upgraded to provide a kitchen and changing place as part of the co-location proposal with the Library service.</p> <p>The consultation feedback included comments that supported the co-location at Sevenoaks Library given it is a familiar location for many service users.</p> <p>Being able to book outreach space at Swanley Gateway may enable us to provide a meet and greet service as well as a</p>



	<p>drop in space for when accessing community resources in the local area, bringing the service back to this rural location where there are few or no external providers</p> <p><b>Thanet</b></p> <p>During the Covid pandemic and on reopening we moved into new premises at Minnis Bay as our main building hub so people and their families, carers are already familiar with travel to and attendance at this site. Hartsdown Leisure Centre is currently used for Outreach work only and we will be able to continue to use the Sports centre for community activities on an outreach basis as members of the public.</p> <p>We will seek to continue to use the Sports centre for community activities as ad hoc activities (as opposed to a service centre), particularly to promote physical fitness and mental wellbeing.</p> <p>We will provide wider opportunities through development of our outreach offer increasing service led physical activity opportunities where demand requires. This will mean utilising flexible outreach space across the rest of the KCC community estate to make the most of opportunities to foster good relationships and encourage working alongside those with protected characteristics related to disability.</p> <p><b>Co-location</b></p> <p>The co-location of services has been carefully planned and feasibility studies have assessed the appropriateness of co-location from a service and accessibility perspective. Further design work will continue to develop the co-location proposals.</p> <p>Service staff will be able to support service users in new situations and other service staff can be provided guidance to better signpost and support individuals that are accessing different services within the location.</p> <p>Given the overall policy and financial context in which KCC is currently operating, the impacts outlined above, with the mitigations detailed, are considered to be justified.</p>
<p><b>l) Responsible Officer for Mitigating Actions - Disability</b></p>	<p>Barbara Rickman - Assistant Director, Service Provision</p>
<p><b>21. Negative Impacts and Mitigating actions for Sex</b></p>	
<p><b>i) Are there negative impacts for Sex? Answer: Yes/No</b> <i>(If yes, please also complete sections b, c, and d).</i></p>	<p>No impacts have been identified.</p> <p>As explained above, the demographic breakdown shows that our current service users are equally split between male and female. We therefore do not currently have any</p>

	reason to suspect that either group would be disproportionately affected by the changes as a result of their sex.
<b>j) Details of Negative Impacts for Sex</b>	
<b>k) Mitigating Actions for Sex</b>	
<b>l) Responsible Officer for Mitigating Actions - Sex</b>	
<b>22. Negative Impacts and Mitigating actions for Gender identity/transgender</b>	
<b>i) Are there negative impacts for Gender identity/transgender? Answer: Yes/No (If yes, please also complete sections b, c, and d).</b>	<p>No impacts have been identified.</p> <p>Information relating to Gender identity/ Transgender is identified within individual referrals, support plans and discussed within reviews, this supports the services in generating the necessary support.</p>
<b>j) Details of Negative Impacts for Gender identity/transgender</b>	
<b>k) Mitigating actions for Gender identity/transgender</b>	
<b>l) Responsible Officer for Mitigating Actions - Gender identity/transgender</b>	
<b>23. Negative Impacts and Mitigating actions for Race</b>	
<b>i) Are there negative impacts for Race? Answer: Yes/No (If yes, please also complete sections b, c, and d).</b>	<p>No impacts have been identified. The data above sets out that users of the Community Day service are slightly less likely to be self-declared BME than non-users. However, no comments from the consultation raised any concerns around impacts based on race.</p> <p>Information relating to Race is identified within individual referrals, support plans and discussed within reviews, this supports the services in generating the necessary support.</p>
<b>j) Details of Negative Impacts for Race</b>	
<b>k) Mitigating Actions for Race</b>	
<b>l) Responsible Officer for Mitigating Actions - Race</b>	
<b>24. Negative Impacts and Mitigating actions for Religion and belief</b>	
<b>i) Are there negative impacts for Religion and Belief? Answer: Yes/No (If yes, please also complete sections b, c, and d).</b>	<p>No impacts have been identified. The data above sets out that users of the Community Day service are slightly less likely to identify as Christian than non-users. However, no comments from the consultation raised any concerns around impacts based on religion or belief.</p> <p>Information relating to Religion and Belief is identified within individual referrals, support plans and discussed within reviews, this supports the services in generating the necessary support.</p>
<b>j) Details of Negative Impacts for Religion and belief</b>	
<b>k) Mitigating Actions for Religion and belief</b>	
<b>l) Responsible Officer for Mitigating Actions - Religion and belief</b>	
<b>25. Negative Impacts and Mitigating actions for Sexual Orientation</b>	

<p><b>i) Are there negative impacts for sexual orientation.</b>  <i>Answer: Yes/No (If yes, please also complete sections b, c, and d).</i></p>	<p>No impacts have been identified.</p> <p>Information relating to Sexual Orientation is identified within individual referrals, support plans and discussed within reviews, this supports the services in generating the necessary support.</p>
<p><b>j) Details of Negative Impacts for Sexual Orientation</b></p>	
<p><b>k) Mitigating Actions for Sexual Orientation</b></p>	
<p><b>l) Responsible Officer for Mitigating Actions - Sexual Orientation</b></p>	
<p><b>26. Negative Impacts and Mitigating actions for Pregnancy and Maternity</b></p>	
<p><b>i) Are there negative impacts for Pregnancy and Maternity?</b> <i>Answer: Yes/No (If yes, please also complete sections b, c, and d).</i></p>	<p>No impacts have been identified.</p>
<p><b>j) Details of Negative Impacts for Pregnancy and Maternity</b></p>	
<p><b>k) Mitigating Actions for Pregnancy and Maternity</b></p>	
<p><b>l) Responsible Officer for Mitigating Actions - Pregnancy and Maternity</b></p>	
<p><b>27. Negative Impacts and Mitigating actions for marriage and civil partnerships</b></p>	
<p><b>i) Are there negative impacts for Marriage and Civil Partnerships?</b> <i>Answer: Yes/No (If yes, please also complete sections b, c, and d).</i></p>	<p>No impacts have been identified. Information relating to Marriage and Civil Partnerships is identified within individual referrals, support plans and discussed within reviews, this supports the services in generating the necessary support.</p>
<p><b>j) Details of Negative Impacts for Marriage and Civil Partnerships</b></p>	
<p><b>k) Mitigating Actions for Marriage and Civil Partnerships</b></p>	
<p><b>l) Responsible Officer for Mitigating Actions - Marriage and Civil Partnerships</b></p>	
<p><b>28. Negative Impacts and Mitigating actions for Carer's responsibilities</b></p>	
<p><b>i) Are there negative impacts for Carer's responsibilities?</b> <i>Answer: Yes/No (If yes, please also complete sections b, c, and d).</i></p>	<p>Yes</p>
<p><b>j) Details of Negative Impacts for Carer's Responsibilities</b></p>	<p>The proposed exit from or closure of buildings in <b>Folkestone and Hythe, Sevenoaks and Thanet</b> may create travel and transport issues for the parents/carers of people who use our services as well as for our social work practitioners where travel forms part of an assessed need, increasing both travel time and cost which may lead to a decrease in attendance and our ability to provide services. This would potentially affect our older generation of users whose parents/carers would be much that much older themselves and have mobility/health issues that prevent them being able to transport the people that use our services independently leading to unmet assessed needs of those with carer related protected characteristics. It is also likely that parents/carers are more likely to be women and so this should also be considered carefully in relation to parents/carers.</p>
<p><b>k) Mitigating Actions for Carer's responsibilities</b></p>	<p><b>Folkestone and Hythe</b></p>

People who use our services will still be able to access the Sports Centre as members of the public.  
Use of dedicated space in Broadmeadow Adult short stay service will enable us to continue with our outreach offer in the local vicinity, where caring responsibilities would impact on people's ability to support travel requirements thus reducing or preventing the need for travel to the Bridge Resource Centre or Phase 2, which are further away.

**Sevenoaks**

By collocating into Sevenoaks library, from the leisure Centre which is on the same site, people will already be familiar with this site reducing potential anxieties regarding change and it will also not affect travel requirements for people with carers responsibilities as the site is equally accessible via public transport and service by the same car par as the Library is approximately 400 metres away from the Leisure Centre.

Being able to book outreach space at Swanley Gateway may enable us to provide a meet and greet service as well as a drop in space for when accessing community resources in the local area, bringing the service back to this rural location where there are few or no external providers

**Thanet**

During the Covid pandemic and on reopening we moved into new premises at Minnis Bay as our main building hub so people and their families, carers are already familiar with travel to and attendance at this site. Hartsdown Leisure Centre is currently used for Outreach work only and we will be able to continue to use the Sports centre for community activities on an outreach basis as members of the public.

As the nearest alternative is 3 miles away, we recognise that the travel implications related to Thanet may be higher, although these must be balanced against the overall policy and financial context within which the Council currently operates.

**I) Responsible Officer for Mitigating Actions - Carer's Responsibilities**

Barbara Rickman - Assistant Director, Service Provision

## EQIA Submission Draft Working Template

If required, this template is for use prior to completing your EQIA Submission in the EQIA App.

You can use it to understand what information is needed beforehand to complete an EQIA submission online, and also as a way to collaborate with others who may be involved with the EQIA.

Note: You can upload this into the App when complete if it contains more detailed information than the App asks for and you wish to retain this detail.

### Section A

#### 1. Name of Activity (EQIA Title):

Kent Communities Programme - Community Learning and Skills (CLS)/Adult Education

#### 2. Directorate

Children Young People and Education (CYPE)

#### 3. Responsible Service/Division

Community Learning and Skills

### Accountability and Responsibility

#### 4. Officer completing EQIA

Note: This should be the name of the officer who will be submitting the EQIA onto the App.

Mark Easton

#### 5. Head of Service

Note: This should be the Head of Service who will be approving your submitted EQIA.

Jude Farrell

#### 6. Director of Service

Note: This should be the name of your responsible director.

CYPE Director – Christine McInnes

### The type of Activity you are undertaking

#### 7. What type of activity are you undertaking?

**Service Change** – operational changes in the way we deliver the service to people. Answer Yes/No

Yes

**Service Redesign** – restructure, new operating model or changes to ways of working. Answer Yes/No

No

**Project/Programme** – includes limited delivery of change activity, including partnership projects, external funding projects and capital projects. Answer Yes/No

Yes

**Commissioning/Procurement** – means commissioning activity which requires commercial judgement. Answer Yes/No

No

**Strategy /Policy** – includes review, refresh or creating a new document. Answer Yes/No

No

**Other** – Please add details of any other activity type here.

N/A

**8. Aims and Objectives and Equality Recommendations** – Note: You will be asked to give a brief description of the aims and objectives of your activity in this section of the App, along with the Equality recommendations. You may use this section to also add any context you feel may be required.

**Equality Impact Assessment (EQIA)**

This EQIA is intended to assess the potential impact of our decisions on persons with different protected characteristics. In particular, this EQIA has been prepared to help us to have regard to the need to: (i) eliminate discrimination; (ii) advance equality of opportunity; and (iii) foster good relations between persons who share a relevant protected characteristic and those who do not, in the exercise of our public functions. These issues are relevant considerations to be taken into account whenever a new policy, function, or system change is being proposed in the exercise of our public functions. This EQIA is also intended to evidence that these considerations have in fact been taken into account, and the weight given to them as part of our decision-making process.

**The Case for Change - Kent Communities Programme**

The Council is facing very significant financial pressures, for a number of reasons set out in 'Securing Kent's Future' (August 2023 and October 2023). That document sets out the urgent steps needed to return the Council to financial sustainability, by reducing overspend in its budget to avoid further need to use limited reserves to fund revenue overspends, which would weaken the financial resilience of the authority and limit the scope for the use of reserves to invest in transformation necessary to address the structural deficit.

The financial challenges faced by the Council cannot be ignored. Two particularly significant factors, are the Council's statutory 'best value' duty to deliver a balanced budget, provide statutory services, including adult social care and children's services, and secure value for money in all spending decisions; and the Council's other statutory duties.

The Kent Communities Programme seeks to rationalise our physical estate and propose a greater mix of alternative methods of service delivery across the County, informed by a clear and data-driven understanding of service need. Delivery of this programme has become more important in the light of the increased financial pressures faced by the Council. The programme also seeks to reduce the Council's carbon footprint, in line with our Net Zero 2030 approach, although this is a secondary factor given the overarching financial context. The programme does include elements of improvement to service delivery: for example benefits offered by co-location of services.

However, the Council must acknowledge that the impact of closures and reductions in services on residents can be significant. The approach set out in these proposals is therefore based on a relative needs assessment. Mitigating measures are set out, which are intended to minimise as far as possible the impact of the proposals on Kent residents.

A detailed and extensive public consultation ([www.kent.gov.uk/communityservicesconsultation](http://www.kent.gov.uk/communityservicesconsultation)) allowed consultees the opportunity to give their views on the proposals. These responses have been analysed and carefully considered. A range of options have been developed, informed by the consultation responses.

**Summary of Proposals**

Five separate options are being presented for Member consideration and decision.

Within four of the five options there is only one change relevant to CLS. Whilst all KCC freehold or leasehold properties that CLS occupy have been considered under this consultation, Broadstairs Memorial Hall & Pottery is the only venue that we are proposing to close, the proposal is to move services to Broadstairs Library as part of a co-location with the Library service and Adult Day Services (Adult Day Services as outreach provision only). The fifth option is a 'Do Nothing' option and therefore does not propose any closures or changes to the CLS service at all.

This EqlA considers the impacts on residents of the service moving location in four of the five options and the impact of the co-location with the library service. It takes into account the relevant feedback from the consultation in relation to the CLS service and the general equalities-related consultation feedback.

### Community Learning and Skills

Community Learning and Skills (CLS) is one of the services included in this programme. CLS delivers Education and Training opportunities to residents age 16+ in all 12 districts across Kent.

CLS service priorities are:

- Maximise access to community learning for adults, bringing new opportunities and improving lives, whatever people's circumstances
- Promote social renewal by bringing local communities together to experience the joy of learning and the pride that comes with achievement
- Maximise the impact of adult and community learning on the social and economic well-being of individuals, families, and communities
- Focus public funding on people who are disadvantaged and least likely to participate, including in rural areas and people on low incomes with low skills
- Collect fee income from people who can afford to pay and use where possible to extend provision to those who cannot
- Widen participation and transform people's destinies by supporting progression relevant to personal circumstances

Over the past 5 years CLS has realised 5554 enrolments (data from Management Information System and represents course enrolments, not unique individuals) at Broadstairs Adult Education, of which:

**Gender:** 80% of service users are female.

Gender	%
Female	80%
Male	20%

(The population of Thanet by gender is 51.9% are female and 49% are male – data is publicly available and published nationally or available via Thanet District Council)

**Gender by Age:** Most service users are 60+ years, of which most are female

Age	Gender	
	Female	Male
0-19	0.00%	0.05%
20-39	5.87%	2.30%
40-59	18.10%	3.96%
60+	56.14%	13.58%

**Gender by Disability:** 4% of service users with a self-declared disability are female

Gender	Disability		
	Not Disabled	Disabled	Not Known
Female	19%	4%	57%
Male	4%	1%	15%

**Age:** 69.7% of service users are 60+ in age

Age	%
0-19	0.1%
20-39	8.2%
40-59	22.1%
60+	69.7%

(20.1% of the population of Thanet are aged 0 – 17

23.7% of the population of Thanet are aged 18 - 64

56.2% of the population of Thanet are aged 65+)

**Age by Disability:** 3.29% of service users aged 60+ have a self-declared disability

Age	Disability		
	Not Disabled	Disabled	Not Known
0-19	0.00%	0.00%	0.05%
20-39	0.40%	0.38%	7.40%
40-59	3.20%	1.08%	17.77%
60+	19.84	3.29%	46.58%

**Age by Ethnicity:** 5.22% of service users are 60+ in age with self-declared BME status

Age	Ethnicity		
	BME	Non BME	Not Known
0-19	0.02%	0.04%	0.00%
20-39	1.15%	6.90%	0.13%
40-59	2.90%	18.96%	0.20%
60+	5.22%	64.33%	0.16%



**Disability:** 5% of service users have self-declared a disability

Disability	%
Not Disabled	23%
Disabled	5%
Not Known	72%

(23.4% residents in Thanet have a health problem or disability which limits their day-to-day activities - data is publicly available and published nationally or available via Thanet District Council)

**Disability by Ethnicity:** 0.54% of self-declared BME service users are self-declared disabled

Ethnicity	Disability		
	Not Disabled	Disabled	Not Known
BME	1.42%	0.54%	7.33%
Non BME	21.9%	4.20%	64.08%
Not Known	0.07%	0.02%	0.40%

**Ethnicity:** 9.3% of service users are self-declared BME, which is above the BME population of Kent (6.33%), but broadly in line with the proportion of those in Thanet who are BME (see below)

Ethnicity	%
BME	9.3%
Non BME	90.2%
Not Known	0.5%

(Ethnicity data for Thanet: 9.6% of the population of Thanet are BME - data is publicly available and published nationally or available via Thanet District Council)

Source Data:

- <https://www.kent.gov.uk/about-the-council/information-and-data/facts-and-figures-about-Kent/equality-and-diversity-data#tab-3,4>
- CLS Management Information Unit-E.

### Affected local groups

No local groups have been identified as being affected by this proposal.

## Consultation

17% of consultees answering use Adult Education services. 13% of consultees answering indicated other household members currently use Community Services for Adults with Learning Disabilities. The majority of both groups use services in person at a building (65% and 72% respectively) but a significant proportion use both in person and online services (18% and 25% respectively).

In terms of the response to the move from Broadstairs Memorial Hall and Pottery, 51 comments were received during the consultation. The breakdown of responses is included here:

	Number of consultee answering	% of consultees answering
Alternative venue not suitable - size/capacity / storage, i.e., pottery, fitness/exercise classes in a library?	31	61%
Use frequently / essential / needed / lifeline / do not close / lost without it / loss of access to services	17	33%
Detrimental impact of mental health / socialisation / development / counselling service much needed	13	25%
Current building in walking distance / accessible / won't be able to walk/access alternatives	8	16%
Services would suffer if moved elsewhere /insufficient provision / oversubscribed / would current services be available	8	16%
Detrimental effect on community / much needed by community	7	14%
Current building provides good facilities / parking / nice environment / not available at alternatives	3	6%

In considering these responses it is clear that concerns relating to suitability (31) and accessibility (17, 8, 8, 3) of the alternative location are common themes. There are specific equalities considerations raised by the responses on mental health and wellbeing (13) and in terms of disabilities and age when considering the comments on additional walking distance (8). A further theme which was apparent from consultees' comments was concern about the suitability of the library building for providing all of the services which are currently available at the Broadstairs site. Some of these classes may be attended by service users for reasons connected with a protected characteristic. These factors are considered in the following sections.

The most common concern expressed in the consultation response regarding the general co-location of services (not specific to the Broadstairs Library proposals) were:

Users being able to get there / travel there / can't walk to alternatives / need close location of services	51%
Public transport availability / cost of / reduction in service	33%
Practicality of co-located services (e.g. children's centre in same space as library)	22%
Impact on users unable to access the service / impact on vulnerable / mental health / taking away a lifeline / hub of community	21%
Suitability of building / fit for purpose / the space	19%

Maintaining service levels / impact on service levels

14%

The feedback around impact on accessibility and mental health should be considered in equalities terms and is addressed in the relevant section below.

### Impacts

Given that the only proposed site closure within four of the five options for CLS (Broadstairs Adult Education Centre) will relocate to a venue 0.1 mile (2-minute walking) from the existing venue, no significant impacts have been identified in terms of service access. The assessment is because there will be no change to existing access, public transport infrastructure, personal travel arrangements, parking, geography/topography as set out in section 18 of this document.

### Justification

It is considered that the impacts summarised above and detailed in the sections below are justified when considered alongside the suggested mitigations and the overall policy and financial framework within which the Council currently operates.

## Section B – Evidence

*Note: For questions 9, 10 & 11 at least one of these must be a 'Yes'. You can continue working on the EQIA in the App, but you will not be able to submit it for approval without this information.*

**9. Do you have data related to the protected groups of the people impacted by this activity? Answer: Yes/No**

Yes – see above.

**10. Is it possible to get the data in a timely and cost-effective way? Answer: Yes/No**

Yes

**11. Is there national evidence/data that you can use? Answer: Yes/No**

Where available, statistical data for Thanet has been used to compare service user statistics.

For protected characteristics data that is not collected by CLS, publicly available statistics have been used for this EqIA:

**Pregnancy/maternity Leave:** In 2020, 1,383 births were registered in Thanet.

**Gender reassignment:** No publicly available for Thanet could be identified.

**Sexual Orientation:** An estimated 3.1% of the UK population aged 16 years and over identified as lesbian, gay or bisexual (LGB) in 2020, an increase from 2.7% in 2019 and almost double the percentage from 2014 (1.6%).

**Married or in a civil partnership:** No publicly available for Thanet could be identified. However, in 2020, there were 7,566 opposite-sex civil partnerships formed in England and Wales, of which 7,208 were registered in England and 358 were registered in Wales; this is the first year that civil partnerships between opposite-sex couples have been reported. There were 785 civil partnerships formed between same-sex couples in England and Wales in 2020, of which 745 were registered in England and 40 were registered in Wales; this is the lowest number recorded for England since the introduction of civil partnerships in 2005.

#### Religion or belief:

UK		Thanet
All categories:		
Christian	59.38%	61.44%
Buddhist	0.45%	0.37%
Hindu	1.52%	0.48%
Jewish	0.49%	0.20%
Muslim	5.02%	0.92%
Sikh	0.79%	0.07%
Other religion	0.43%	0.51%
No religion	24.74%	28.60%

Religion not stated	7.18%	7.41%
<b>12. Have you consulted with Stakeholders?</b> <i>Answer: Yes/No</i> <i>Stakeholders are those who have a stake or interest in your project which could be residents, service users, staff, members, statutory and other organisations, VCSE partners etc.</i>		
Yes		
<b>13. Who have you involved, consulted and engaged with?</b> <i>Please give details in the box provided. This may be details of those you have already involved, consulted and engaged with or who you intend to do so with in the future. If the answer to question 12 is 'No', please explain why.</i>		
Engagement took place prior to consultation with stakeholders including: <ul style="list-style-type: none"> <li>- KCC members and senior officers</li> <li>- Service delivery team members as part of the design process</li> <li>- District authorities</li> <li>- External partners including NHS and Kent Fire and Rescue</li> <li>- Community Learning and Skills Senior Management Team</li> <li>- Other services in the Kent Community Programme</li> </ul> <p>A full 10-week consultation process provided residents, community groups and all interested parties with an opportunity to give feedback on the proposed changes to service delivery across the county. During this consultation period there was over 150 hours of pro-active engagement continuing with public sector and other partners.</p> <p>These key stakeholders have been identified to include in the consultation:</p> <ul style="list-style-type: none"> <li>- Community Learning and Skills staff members</li> <li>- Community Learning and Skills customers</li> <li>- General public as part of wider KCC consultation</li> <li>- Other users of proposed building(s) identified for co-location</li> </ul>		
<b>14. Has there been a previous equality analysis (EQIA) in the last 3 years?</b> <i>Answer: Yes/No</i>		
Yes – pre-consultation version of this EqIA.		
<b>15. Do you have evidence/data that can help you understand the potential impact of your activity?</b> <i>Answer: Yes/No</i>		
Yes		
<b>Uploading Evidence/Data/related information into the App</b> <i>Note: At this point, you will be asked to upload the evidence/ data and related information that you feel should sit alongside the EQIA that can help understand the potential impact of your activity. Please ensure that you have this information to upload as the Equality analysis cannot be sent for approval without this.</i>		
<b>Section C – Impact</b>		
<b>16. Who may be impacted by the activity?</b> <i>Select all that apply.</i>		
Service users/clients - <i>Answer: Yes/No</i>		
Yes		
Residents/Communities/Citizens - <i>Answer: Yes/No</i>		
Yes		
Staff/Volunteers - <i>Answer: Yes/No</i>		
Yes		

**17. Are there any positive impacts for all or any of the protected groups as a result of the activity that you are doing?**

*Answer: Yes/No*

No

**18. Please give details of Positive Impacts**

In four of the five options the proposal is to move services out of Broadstairs Memorial Hall and Pottery and relocate to a co-located site at Broadstairs Library. The current building from which Community Learning and Skills deliver services in Broadstairs and which is proposed to be closed is in a poor state of repair, which does not provide a quality working or learning environment or experience. The proposed relocation from Broadstairs Adult Education Centre, 14 St Peter's Rd, Broadstairs CT10 2JW to Broadstairs Library, The Broadway, Broadstairs CT10 2BS, will in that sense provide more appropriate working and learning environments for all protected characteristics given the building condition of the current service location. Whilst there were comments received from consultees around the suitability of the proposed co-location, not all of these raised equalities impacts. Where CLS has previously co-located with other services (KCC or other) e.g., Tonbridge Wells (Amelia Scott), Ashford Gateway, Sheppey Gateway, co-location has been a positive experience as customers can access multiple services in the same location.

The proximity of the proposed relocation site to the existing site is approximately 0.1 mile (2-minute walking distance), therefore, there will be no significant impact on access to the services on offer for any protected characteristic groups given the following:

- Access to services via public transport will remain unchanged
- Personal transport (car, walking, cycling etc) will remain unchanged
- Parking facilities will remain unchanged
- No increase to personal financial expenditure will be incurred
- Access to the site will remain unchanged as there is no change to topography and geographic location

**Negative Impacts and Mitigating Actions**

The questions in this section help to think through positive and negative impacts for people affected by your activity. Please use the Evidence you have referred to in Section B and explain the data as part of your answer.

**19. Negative Impacts and Mitigating actions for Age**

**m) Are there negative impacts for Age?** *Answer: Yes/No*

*(If yes, please also complete sections b, c, and d).*

Yes.

**n) Details of Negative Impacts for Age**

Potential for co-location to provide a confusing environment for more elderly users. The service specific data for Broadstairs demonstrates a high percentage of over 60's access Adult Education classes who may be particularly affected by this. It is important to note that residents over 60 are also more likely to experience accessibility issues/overlap with disabilities which was raised as a specific comment within our consultation response and is considered in the relevant section below. We also recognise that the service offer may not be identical at the new site and that it is possible that not every class will be possible to accommodate in the way it is currently.

It is considered that with the mitigating action listed below, that the impact is justified when balanced against the potential benefits to service users and the overall requirement to reduce costs given the financial and policy context set out in Securing Kent's Future.

**o) Mitigating Actions for Age**

Part of the co-location model enables staff to support users across service areas and increase signposting to the correct service area, whilst also potentially identifying additional needs that could be met. At Broadstairs Library this will mean ensuring that Library staff are empowered to answer questions and provide support to signpost service users that require it.

The lead in time for changes being made to facilitate service users within the Broadstairs Library allows for plenty of time to orient users to the new location.

To enable the proposed co-location at Broadstairs Library a feasibility study was undertaken which demonstrated that the required floorspace and facilities are available so that the service can be safely and appropriately accommodated within the Library building. The creation of additional class space is proposed and this is contained within the implementation plans for the Programme subject to the decision.

The accessibility of the library building is considered to be good from a disability standpoint, given that it is a KCC public building with universal access to all residents.

**p) Responsible Officer for Mitigating Actions - Age**

Mark Easton – Head of Resource

**20. Negative Impacts and Mitigating actions for Disability**

**m) Are there negative impacts for Disability? Answer: Yes/No**  
*(If yes, please also complete sections b, c, and d).*

Yes.

**n) Details of Negative Impacts for Disability**

Service users with disabilities may find it difficult to move around buildings that contain more than one service. Users with mobility issues may find tight spaces difficult to navigate in a building containing multiple services and equipment to support other service delivery. As above, the service specific data for Broadstairs demonstrates the highest percentage of people with disabilities that access CLS services are also over 60's.

The consultation response particularly raised walking distance and accessibility of the new location as well as the suitability of the library building site for the classes which are offered at the current site, some of which may be attended by some service users because of particular characteristics, including disability.

It is considered that with the mitigating action listed below, that the impact is justified when balanced against the potential benefits to service users and the overall requirement to reduce costs given the financial and policy context set out in Securing Kent's Future.

**o) Mitigating Actions for Disability**

To enable the proposed co-location at Broadstairs Library a feasibility study was undertaken which demonstrated that the required floorspace and facilities are available so that the service can be safely and appropriately accommodated within the Library building. The creation of additional class space is proposed and this is contained within the implementation plans for the Programme subject to the decision.

Further design stages will incorporate detailed accessibility analysis of spaces and facilities required to safely accommodate customers with accessibility requirements. It is likely that additional classroom space will be provided on the ground floor, but these will be subject to standard accessibility requirements.

Given the walking distance is 2 minutes between venues this is not considered a significant impact when balanced against the requirement for the Council to reduce costs.

**p) Responsible Officer for Mitigating Actions - Disability**

Mark Easton – Head of Resource

**21. Negative Impacts and Mitigating actions for Sex**

**m) Are there negative impacts for Sex? Answer: Yes/No**  
*(If yes, please also complete sections b, c, and d).*

Yes

**n) Details of Negative Impacts for Sex**

It should be acknowledged that given 80% of service users are female and 61% of consultee responses raised concerns about the new location (granted only a small number of these concerns referenced equalities considerations). It can therefore be argued that the changes will disproportionately impact women.

**o) Mitigating Actions for Sex**

Despite the above it is not considered that the proposed move of service, or proposed co-location of the service will have a significant negative impact on women, particularly when balanced against the overall financial and policy context within which the Council currently operates.

**p) Responsible Officer for Mitigating Actions - Sex**

Mark Easton – Head of Resource

**22. Negative Impacts and Mitigating actions for Gender identity/transgender**

**a) Are there negative impacts for Gender identity/transgender? Answer: Yes/No**

*(If yes, please also complete sections b, c, and d).*

No

**b) Details of Negative Impacts for Gender identity/transgender**

Not applicable (as above in section 18)

**c) Mitigating actions for Gender identity/transgender**

Not applicable (as above in section 18)

**d) Responsible Officer for Mitigating Actions - Gender identity/transgender**

Not applicable (as above in section 18)

**23. Negative Impacts and Mitigating actions for Race**

**m) Are there negative impacts for Race? Answer: Yes/No**

*(If yes, please also complete sections b, c, and d).*

No

**n) Details of Negative Impacts for Race**

Not applicable (as above in section 18)

**o) Mitigating Actions for Race**

Not applicable (as above in section 18)

**p) Responsible Officer for Mitigating Actions – Race**

Not applicable (as above in section 18)

**24. Negative Impacts and Mitigating actions for Religion and belief**

**a) Are there negative impacts for Religion and Belief? Answer: Yes/No**

*(If yes, please also complete sections b, c, and d).*

No

**b) Details of Negative Impacts for Religion and belief**

Not applicable (as above in section 18)

**c) Mitigating Actions for Religion and belief**

Not applicable (as above in section 18)

**d) Responsible Officer for Mitigating Actions - Religion and belief**

Not applicable (as above in section 18)

**25. Negative Impacts and Mitigating actions for Sexual Orientation**

**a) Are there negative impacts for sexual orientation.** *Answer:*

*Yes/No (If yes, please also complete sections b, c, and d).*

No

**b) Details of Negative Impacts for Sexual Orientation**

Not applicable (as above in section 18)

**c) Mitigating Actions for Sexual Orientation**

Not applicable (as above in section 18)

**d) Responsible Officer for Mitigating Actions - Sexual Orientation**

Not applicable (as above in section 18)

**26. Negative Impacts and Mitigating actions for Pregnancy and Maternity**

**a) Are there negative impacts for Pregnancy and Maternity?** *Answer: Yes/No*

*(If yes, please also complete sections b, c, and d).*

Yes

**b) Details of Negative Impacts for Pregnancy and Maternity**

Service users who are pregnant or who are accompanied by young children may find it difficult to move around buildings that contain more than one service. Users may find tight spaces difficult to navigate in a building containing multiple services and equipment to support other service delivery.

It is also possible that pregnant woman or users with young children may be disproportionately impacted by any additional walking distance (although others may have a shorter walking distance) to the new location.

**c) Mitigating Actions for Pregnancy and Maternity**

To enable the proposed co-location at Broadstairs Library a feasibility study was undertaken which demonstrate that the required floorspace and facilities are available so that the service can be safely and appropriately accommodated within the Library building for all users. The creation of additional class space on the ground floor is proposed, and this is contained within the implementation plans for the Programme subject to the decision.

Given the walking distance is 2 minutes between venues this is not considered a significant impact when balanced against the requirement for the Council to reduce costs.

**d) Responsible Officer for Mitigating Actions - Pregnancy and Maternity**

Mark Easton – Head of Resource

**27. Negative Impacts and Mitigating actions for marriage and civil partnerships**

**a) Are there negative impacts for Marriage and Civil Partnerships?** *Answer: Yes/No*

*(If yes, please also complete sections b, c, and d).*

No

**b) Details of Negative Impacts for Marriage and Civil Partnerships**

Not applicable (as above in section 18)

**c) Mitigating Actions for Marriage and Civil Partnerships**

Not applicable (as above in section 18)

**d) Responsible Officer for Mitigating Actions - Marriage and Civil Partnerships**

Not applicable (as above in section 18)

**28. Negative Impacts and Mitigating actions for Carer's responsibilities**

**a) Are there negative impacts for Carer's responsibilities?** *Answer: Yes/No*



*(If yes, please also complete sections b, c, and d).*

Yes

**b) Details of Negative Impacts for Carer's Responsibilities**

Service users that are with carer's responsibilities may find it difficult to move around buildings that contain more than one service. Users may find tight spaces difficult to navigate in a building containing multiple services and equipment to support other service delivery.

It is also possible that pregnant woman may be disproportionately impacted by any additional walking distance (although others may have a shorter walking distance) to the new location.

**c) Mitigating Actions for Carer's responsibilities**

To enable the proposed co-location at Broadstairs Library a feasibility study was undertaken which demonstrate that the required floorspace and facilities are available so that the service can be safely and appropriately accommodated within the Library building for all users. The creation of additional class space on the ground floor is proposed, and this is contained within the implementation plans for the Programme subject to the decision.

Given the walking distance is 2 minutes between venues this is not considered a significant impact when balanced against the requirement for the Council to reduce costs.

**d) Responsible Officer for Mitigating Actions - Carer's Responsibilities**

Mark Easton – Head of Resource

## EQIA Submission Draft Working Template

If required, this template is for use prior to completing your EQIA Submission in the EQIA App. You can use it to understand what information is needed beforehand to complete an EQIA submission online, and also as a way to collaborate with others who may be involved with the EQIA.

Note: You can upload this into the App when complete if it contains more detailed information than the App asks for and you wish to retain this detail.

### Section A

<b>1. Name of Activity (EQIA Title):</b>	Family Hubs
<b>2. Directorate</b>	Children, Young People and Education
<b>3. Responsible Service/Division</b>	Integrated Children's Services

### Accountability and Responsibility

<b>4. Officer completing EQIA</b> Note: This should be the name of the officer who will be submitting the EQIA onto the App.	Danielle Day Programme Manager – Family Hubs
<b>5. Head of Service</b> Note: This should be the Head of Service who will be approving your submitted EQIA.	Carolann James Director of Operational Integrated Children's Services
<b>6. Director of Service</b> Note: This should be the name of your responsible director.	Carolann James Director of Operational Integrated Children's Services

### The type of Activity you are undertaking

7. What type of activity are you undertaking?	
Tick if Yes	Activity Type
Yes	<b>Service Change</b> – operational changes in the way we deliver the service to people.
Yes	<b>Service Redesign</b> – restructure, new operating model or changes to ways of working
Yes	<b>Project/Programme</b> – includes limited delivery of change activity, including partnership projects, external funding projects and capital projects.
Yes	<b>Commissioning/Procurement</b> – means commissioning activity which requires commercial judgement.
Yes	<b>Strategy /Policy</b> – includes review, refresh or creating a new document
	<b>Other</b> – Please add details of any other activity type here.

**8. Aims and Objectives and Equality Recommendations** – Note: You will be asked to give a brief description of the aims and objectives of your activity in this section of the App, along with the Equality recommendations. You may use this section to also add any context you feel may be required.

#### Equality Impact Assessment (EQIA)

This EQIA is intended to assess the potential impact of our decisions on persons with different protected characteristics. In particular, this EQIA has been prepared to help us to have regard to the need to: (i) eliminate discrimination; (ii) advance equality of opportunity; and (iii) foster good relations between persons who share a relevant protected characteristic and those who do not, in the exercise of our public functions. These issues are relevant considerations to be taken into account whenever a new policy, function, or system change is being proposed in the exercise of our public functions. This EQIA is also intended to evidence that these considerations have in fact been taken into account, and the weight given to them as part of our decision-making process.

### **Case for change – Family Hub programme**

The Department for Education (DfE) has selected Kent County Council (KCC) as a Family Hub and Start for Life Transformation Authority. Family Hubs are about bringing together and integrating support services for children, young people, and families so that they are easier for people to access. These will include, but not be limited to, KCC services:

Children's Centres

Youth Hubs and community youth provision

Health Visiting Services

And partnerships, including:

Community-based midwifery care

Community organisations

### **The Case for Change - Kent Communities Programme**

The Council is facing very significant financial pressures, for a number of reasons set out in 'Securing Kent's Future' (August 2023 and October 2023). That document sets out the urgent steps needed to return the Council to financial sustainability, by reducing overspend in its budget to avoid further need to use limited reserves to fund revenue overspends, which would weaken the financial resilience of the authority and limit the scope for the use of reserves to invest in transformation necessary to address the structural deficit.

The financial challenges faced by the Council cannot be ignored. Two particularly significant factors, are the Council's statutory 'best value' duty to deliver a balanced budget, provide statutory services, including adult social care and children's services, and secure value for money in all spending decisions; and the Council's other statutory duties.

The Kent Communities Programme seeks to rationalise our physical estate and propose a greater mix of alternative methods of service delivery across the County, informed by a clear and data-driven understanding of service need. Delivery of this programme has become more important in the light of the increased financial pressures faced by the Council. The programme does include elements of improvement to service delivery: for example benefits offered by co-location of services.

However, the Council must acknowledge that the impact of closures and reductions in services on residents can be significant. The approach set out in these proposals is therefore based on a relative needs assessment. Mitigating measures are set out, which are intended to minimise as far as possible the impact of the proposals on Kent residents.

A detailed and extensive public consultation ([www.kent.gov.uk/communityservicesconsultation](http://www.kent.gov.uk/communityservicesconsultation)) allowed consultees the opportunity to give their views on the proposals. These responses have been analysed and carefully considered. A range of options have been developed, informed by the consultation responses. This EQIA has been updated following feedback from that consultation and is also based on data and evidence about Kent's communities and our service users.

### **The Consultation**

The Kent Communities proposal has been subject to a public consultation. The consultation launched on 17<sup>th</sup> January 2023 and lasted for ten weeks, closing on 26 March 2023. The consultation set out the rationale for the proposals, the methodology which was used to produce the draft proposal and the details of the Kent Communities model (i.e. which buildings we were proposing to close and which we were proposing to retain). These proposals have now moved on following the consultation and the options are detailed below.

#### *Rationale*

The rationale for the KCP is clear. The Programme contributes to meeting the revenue savings as set out in the Medium-Term Financial Plan (MTFP). To reduce risks across our corporate estate and capital programme, the KCP reduces the Council's capital liability to the maintenance costs of such a large physical estate.

### *Methodology*

The consultation explained the methodology underpinning the Kent Communities proposal, including how we used the Needs Framework as a starting point. The Need Framework used a wide range of data and indicators that when combined profile the different level of need for services within our communities. The data included service-held metrics, such as user figures for each service.

In developing the alternative range of options for member consideration the impact on equalities has been taken into account. As explained above options 3 and 4 have been developed acknowledging the difficulties that accessing alternative locations via public transport network would pose for residents, including those for which protected characteristics would make that a greater challenge.

### **Consultation Response**

Whilst the consultation response indicated a majority of respondents did not support a reduction in buildings, there was very little constructive challenge to the methodology. The consultation set out alternative methods for reviewing the estate and why they had been discounted. However, many respondents did outline concerns relating to the accessibility of public transport within their feedback. As such, the accessibility of public transport has been reviewed and has been the driving factor in developing the additional options for member consideration.

50% of consultees answering use Children's Centres. 46% of consultees answering indicated other household members currently use Children's Centres. The majority of both groups use services in person at a building (92% and 93% respectively).

16% of consultees answering use Youth Hubs. 15% of consultees answering indicated other household members currently use Youth Hubs. The majority of both groups use services in person at a building (83% and 86% respectively).

41% of consultees answering use the Health Visiting Service. 35% of consultees answering indicated other household members currently use the Health Visiting Service. The majority of both groups use services in person at a building (82% and 82% respectively).

11% of consultees answering use the Children and Young People's Counselling Service. 12% of consultees answering indicated other household members currently use the Children and Young People's Counselling Service. The majority of both groups use services in person at a building (65% and 68% respectively) but a significant proportion use both in person and online services (22% and 27% respectively).

10% of consultees answering use Community Services for Adults with Learning Disabilities. 9% of consultees answering indicated other household members currently use Community Services for Adults with Learning Disabilities. The majority of both groups use services in person at a building (65% and 71% respectively) but a significant proportion use both in person and online services (18% and 25% respectively).

17% of consultees answering use Adult Education services. 13% of consultees answering indicated other household members currently use Community Services for Adults with Learning Disabilities. The majority of both groups use services in person at a building (72% and 72% respectively) but a significant proportion use both in person and online services (18% and 23% respectively).

20% of consultees answering use Gateways. 17% of consultees answering indicated other household members currently use Gateways. The majority of both groups use services in person at a building (66% and 65% respectively) but a significant proportion reported that they use both in person and online services (21% and 24% respectively).

64% of all residents taking part in the consultation and answering indicated they use at least one of the services under consultation.

Consultees were also given the opportunity to provide feedback on the equality analysis conducted in their own words. For the purpose of reporting, we have reviewed respondents' comments and have grouped common responses together into themes. These are reported in the table below. It should be noted that 18% of consultees provided a comment at this question.

Of those answering, the most common considerations put forward are ensuring the services are accessible / walking distance / access via suitable public transport (24%).

Those commenting raise concerns for how the proposals will affect specific groups of residents who are disabled / have learning difficulties / SEN (15%), young people / children / families (15%) and low-income households (11%).

### **Summary of KCP Options**

Option 1 in the table above represents a model that involves a greater reduction in the physical estate than was consulted on.

Option 2 is the consultation model.

Options 3 and 4 are amended versions of Option 2, which respond to differing degrees to the consultation feedback. In seeking to respond appropriately to the consultation feedback a more detailed review of the public transport network has informed the options set out in the paper. In the consultation modelling was provided to assess the accessibility of the revised building network on public transport considering a 30-minute travel time. Greater analysis of timetable data was used to develop the post-consultation options that respond to feedback from residents. This analysis considered both an extended travel time of 35 minutes and the regularity of the service by applying a criteria that there should be at least one service per hour over the nine-hour period 8am to 5pm which reflects the general service offering timeframe. It is appreciated that regularity of service is an important additional factor for residents above merely the journey time itself.

Option 3 rules out the closure of 2 buildings where the journey on public transport to the nearest alternative is over 35 minutes and there is less than one service per hour when averaged over a 9-hour period.

Option 4 represents a model which goes further in the response to the consultation feedback and brings 10 buildings back into the model (the 2 buildings from option 3 and another 8). This option rules out the closure of a buildings where there is less than one service per hour when averaged over a 9-hour period, regardless of the journey time.

Option 5 is a 'Do Nothing' option and retains the current building network and service delivery model.

### **Impact**

Within the consultation a significant majority of responses were received by women (81%) compared to men (18%). This is particularly relevant to the Family Hub Model proposal and there is a likely cross over here with any impacts on age. The EqIA relating to the Family Hub Model sets out the consideration of equality impacts on age. However, it is acknowledged that women may bear the responsibility for childcare more commonly and as such the characteristics of sex and age require careful consideration.

Option 1 in the proposals would carry greater impacts for these characteristics as women and children would be required to travel further, likely on public transport which may be difficult with children, pushchairs and additional equipment.

Options 2, 3 and 4 would present different levels of impact, the significance decreasing between options 2 and 3 and then decreasing further between options 3 and 4 as more of the existing locations are retained. This would reduce the impact on women and children required to travel further to access services.

Option 5 is a Do Nothing option and as such would not impact the equalities of these groups.

14% of respondents answered that they consider themselves disabled. In particular the Gateway service, Adult Education Service and Community Day Services for Adults with Learning Disabilities service consider this characteristic in their EqlAs. There is a similar overlap with age within these considerations as well, given the higher likelihood of residents over the age of 60 to experience disabilities.

Option 1 in the proposals would carry greater impacts for these characteristics the elderly and disabled would be required to travel further, likely on public transport which may be difficult for them.

Options 2, 3 and 4 would present different levels of impact, the significance decreasing between options 2 and 3 and then decreasing further between options 3 and 4 as more of the existing locations are retained. This would reduce the impact on the elderly and disabled required to travel further to access services.

Option 5 is a Do Nothing option and as such would not impact the equalities of these groups.

7.4% of respondents might use English as a second language, which would likely indicate there could be impacts based on race, ethnicity or religious belief. This is a consideration particularly for service users requiring the Family Hub service, our Gateway service and our Adult Education Service. These residents may struggle more to understand and navigate the relocation of services from one place to another.

Option 1 in the proposals would carry greater impacts for these characteristics as there would likely be a greater number of site closures, requiring residents to access services from different locations.

Options 2, 3 and 4 would present different levels of impact, the significance decreasing between options 2 and 3 and then decreasing further between options 3 and 4 as more of the existing locations are retained. This would reduce the impact on the residents who use English as a second language as the number of instances of closures decreases between each option. Option 5 is a Do Nothing option and as such would not impact the equalities of these groups.

Generally during the consultation the main theme of feedback emerging was the inaccessibility of some services, particularly using the public transport network, and the impact that has on the health and wellbeing of residents, including their mental health. The options set out for decision respond to this feedback by retaining identified centres depending on whether greater weight is given to the analysis of public transport accessibility.

The consultation response focused on the impact that the proposed changes might have particularly on children with learning difficulties/SEN (15% of respondents), young people, children and families (15%) mental health issues/isolation (10%), discrimination based on age/gender (6%), effect on the elderly (5%), ethnic minorities/English as a second language/LGBTQ (4%).

The most common concern expressed in the consultation response regarding the general co-location of services (not specific to any one service) were:

Users being able to get there / travel there / can't walk to alternatives / need close location of services	51%
Public transport availability / cost of / reduction in service	33%
Practicality of co-located services (e.g. children's centre in same space as library)	22%
Impact on users unable to access the service / impact on vulnerable / mental health / taking away a lifeline / hub of community	21%
Suitability of building / fit for purpose / the space	19%
Maintaining service levels / impact on service levels	14%

Women were far more likely to oppose co-location of services than men and respondents with children under 10 were far more likely to disagree with co-location than those without:

Male resident	26%
Female resident	49%
Resident with no children	22%
Resident with children aged 0-1 years old (250)	61%
Resident with children aged 2-5 years old (243)	68%
Resident with children aged 6-10 years old (142)	54%

Similarly, women were far more likely to oppose the proposal to have fewer buildings than men and respondents with children under 10 were far more likely to disagree with reducing the number of buildings than residents without children:

Male resident (161)	34%
Female resident (760)	62%
Resident with children / expecting children (653)	67%
Resident with no children (173)	30%
Resident with children aged 0-1 years old (250)	83%
Resident with children aged 2-5 years old (243)	82%
Resident with children aged 6-10 years old (142)	70%

There is a similar difference in the level of disagreement with proposals to have fewer buildings based on age with residents aged 25-24 most likely to disagree:

Resident aged 25-34 (220)	81%
Resident aged 35-49 (301)	66%
Resident aged 50-64 (210)	41%
Resident aged 65 & over (152)	27%

When read alongside the fact that (as shown above) levels of objection rise for those residents with children compared to those without, it is a reasonable assumption to make that this increased level of objection is reflects the fact that the majority of reduction is being across the Children's Centre network.

### **Summary of Family Hub proposals**

Since the inception of Early Help and Preventative Services (EHPS) in 2015, Kent County Council (KCC) has been able to maintain a comprehensive Open Access offer, including both universal and targeted provision, delivered through both KCC staff and settings and commissioned services across the 0-19 years age group.

In September 2020, a DfE and DHSC review of outcomes for babies and the first 1001 days of a child's life, led by Andrea Leadsom MP, developed a framework for local authorities to work with health partners and develop a Start for Life concept within a 0-19 years (25 years with Special Educational Needs and Disabilities [SEND]) Family Hub model.

Existing Open Access services work closely with partners including Public Health services such as Health Visiting provision through co-location. This close working partnership provides a strong foundation for Kent to deliver to the ambitions of the national review and develop a whole family approach to services as set out in the proposals for the Family Hub model.

We know that reducing health inequalities and improving health and wellbeing requires organisations to closely work together. Through the Family Hub programme KCC seeks to deliver the best outcomes through a hybrid of universal and targeted support for children, young people, and their families, delivering services identified through the Family Hub guidance.

Our goals for the Family Hub model are to:

Offer support to all parents and carers: from the early stages of preparing to become a parent, and throughout the child's first two years

Reduce inequalities in health, wellbeing, and education

Create a supported, capable workforce who work in partnership with families

Ensure families are listened to

Provide targeted, timely and accessible support to those in greatest need

Support teenagers as they move into adulthood

Provide services based on evidence and need

The model proposes some changes to the existing Open Access services and those available from Public Health:

Services to families with children up to the age of 8yrs to support the physical, social, and emotional development, communication, and language development in young children.

Support to young people aged 8-19 (25 for young people with SEND) around emotional health and wellbeing, educational and social development and pathways into adulthood.

Support for parents with parenting, emotional wellbeing, understanding child development and managing family conflict.

Online support for new parents

Increased parenting support from antenatal to 2 years

Perinatal Mental Health services for parents

Infant feeding support

Home learning support

The DfE Family Hub model must fit with the new KCC's 'Securing Kent's Future – Budget Recovery Strategy'. The model of delivery must proactively evidence the best value for money in decision making. Sustainability and best value is at the core of all decisions and the design of the Family Hub model to ensure services can be delivered beyond the life of the Family Hub grant and elements will work within KCC's new budgetary requirements.

This EQIA relates to the policy change for Kent, to rebase our existing Open Access & Youth inhouse services to deliver provision with the Family Hub model for children and families 0 to 19 (25 with SEND).

Family Hub services will be delivered through a number of different avenues. This will include face-to-face, a digital offer and community outreach. Our Family Hubs will offer a one stop shop for advice and information for children and their families.

The Family Hub approach delivers joined up whole family services across each district. This model will be used to strengthen our arrangements with co-located partners and ensure a consistent model for Start for Life partnership across the county.

The model will strengthen the arrangements with Health Visiting and community midwifery to ensure through co-location and system arrangements, we work towards a family only needing to tell their story once.

Every Family Hub provision will be managed across a district, and staff will continue to work across the range of Family Hub sites ensuring that each location is appropriate for the services at that site. For example, appropriate spaces for adolescents, ensuring that services on school sites maintain safeguarding requirements, and ensuring support services to families, such as debt and welfare advice or parental conflict are delivered in an appropriate space maintaining privacy of participants.



Family Hub sites in each district will deliver a range of Start for Life and partnership services and work with the voluntary and community sector to provide access to a wide range of services. There will be services for 0-19 years in Family Hub sites for example, this may include activities for older children after school in a building that currently offers mainly 0-11 years services.

The increase of community outreach may mean more services within community settings where there are needs identified. The outreach offer will be developed in partnership with district and community partners and will vary according to the local partnerships and buildings available.

There will be more peer to peer community support and the introduction of Family coaches to offer additional community support.

According to the available data of our 2019 visitors of Children's Centres, including children, the following characteristics are made compared to the Kent Average data. We have used 2019 data as we don't have a full data set of post pandemic usage data.

Sex	%	Kent Average (2020 Mid-Year Population Estimates)
Female	69.1%	50.9%
Male	30.9%	49.1%

Ethnicity (where known)	All Children's Centres Service Users 2019 - %	Kent Average (2021-2022 School Census Data)
White	89.6%	83.3%
Black, Asian, Mixed and Other	10.4%	16.7%

Age Range	%	Kent Average (2020 Mid-Year Population Estimates)
0-4	43.9%	5.9%
5-9	5.1%	6.7%
10-14	1.3%	6.6%
15-19	1.1%	5.7%
20-24	4.9%	4.7%
25-29	11.7%	5.6%
30-34	15.8%	5.9%
35-39	10.7%	6.0%
40-44	3.6%	6.1%
45-49	0.9%	6.7%
50-54	0.4%	7.6%
55-59	0.3%	7.1%
60-64	0.2%	5.6%
65-69	0.1%	5.0%
70-74	0.1%	5.6%
75+	0.0%	9.1%

SEND Status (Children's Centres and Youth Hubs)	%	Kent School Pupils with SEN Support or and EHCP (2019/2020 Academic Year) *
SEND	3.4%	14%
No SEND	96.6%	86%

\*[https://www.kelsi.org.uk/\\_data/assets/pdf\\_file/0006/136482/Facts-and-Figures-2022.pdf](https://www.kelsi.org.uk/_data/assets/pdf_file/0006/136482/Facts-and-Figures-2022.pdf)

### Summary of Options for Consideration

Following the public consultation and review of the responses received, a range of options have been put forward for consideration, they are detailed below with a summary of the main equality impacts:

#### Option 1: Do not implement the Family Hub model.

This would mean the Local Authority would not meet the minimum expectations set by the DfE in accordance with the Memorandum of Understanding, with the associated risk of losing c£11m of additional funding. If this were to occur, we would not be able to offer any additionality to our existing services.

If option 1 is chosen then there will be no change to the service that KCC already delivers, therefore there will be no impact on persons with different protected characteristics.

#### Option 2: Deliver the mandatory enhanced services set out by the DfE.

We will continue to deliver a 0-19 (25 SEND) Family Hub model offering enhanced services only in the DfE mandated areas set out in the following Key Decisions taken by the Cabinet Members for Integrated Children's Services and Adult Social Care and Public Health;

Infant Feeding 23/00076

Parenting Support - 23/00081

Home Learning Environment - 23/00082

Perinatal Mental Health - 23/00075

Families will still have access to Family Hub staff members who will be able to offer them assistance in finding the help that they need to access local services through signposting only.

If option 2 is chosen then there will be a positive impact to under twos and their parents, as well as pregnancy and maternity services, as we will be enhancing the existing service as outlined above, however there will be a negative impact on persons with different protected characteristics aged over 2 as these services will focus solely on the first 1001 days.

#### Option 3: Wider Family Hub offer

We will continue to deliver a 0-19 (25 SEND) Family Hub model offering enhanced services in the DfE mandated areas set out in the following Key Decisions taken by the Cabinet Members for Integrated Children's Services and Adult Social Care and Public Health.

Infant Feeding 23/00076

Parenting Support - 23/00081

Home Learning Environment - 23/00082

Perinatal Mental Health - 23/00075

In addition, we will offer the 7 services we consulted on below that service users felt they might most use. These will be delivered by Family Hub practitioners, through enhanced and additional modes of delivery, in each district throughout the county. We have used the consultation data and the design of the Family Hub model to allow residents to access services in a way that suits their preferences and fits in with their lifestyle wherever possible; for example, some consultees clearly prefer face to face groups and appointments, however some consultees stated they find it easier to access information online and

talk to experts virtually. Young people had a very clear voice in our consultation and had a clear preference for face to face delivery which we have taken into account.

Education for parents on child development

Activities for children aged 0-5

Activities for older children and young people

Information, advice and guidance about support services for children and young people with Special Education Needs and Disabilities (SEND)

Information and signposting to mental health services (children and adults)

Support for parents/carers of adolescents (teenagers)

Online safety for children and young people

**Option 4: Deliver a Family Hub model through a developed Family Hub Network. Our preferred option.**

KCC will continue to deliver a 0-19 (25 SEND) Family Hub Model offering enhanced services in the DfE mandated areas set out in Key Decisions taken by the Cabinet Members for Integrated Children's Services and Adult Social Care and Public Health;

Infant Feeding 23/00076

Parenting Support - 23/00081

Home Learning Environment - 23/00082

Perinatal Mental Health - 23/00075

As outlined in option 3, the following services will be delivered by Family Hub practitioners

Education for parents on child development

Activities for children aged 0-5

Activities for older children and young people

Information, advice and guidance about support services for children and young people with Special Education Needs and Disabilities (SEND)

Information and signposting to mental health services (children and adults)

Support for parents/carers of adolescents (teenagers)

Online safety for children and young people

In addition to these, we will also ensure that the remaining 4 services (which are outlined below) are accessible through the Family Hub model. The additional specialist services in option 4 will be delivered through partnership working with the VCS and partners (the Family Hub Network).

Support for young people with substance misuse (alcohol/drugs)

Domestic abuse support

Debt and welfare advice

Signposting to information to support separating and separated parents

Option 4 is our preferred option because we recognise the importance of all 11 services following feedback from the consultation and within our Family Hub model, we are in a position to offer, in an innovative and consistent way across the county, to deliver joined up services to meet the need of children, young people and families.

If option 3 or 4 is chosen there will be positive impacts generally in terms of additional services including digital and outreach offers. The negative impacts to persons with different protected characteristics as the services outlined in option 3 and 4 are identified in further detail in this equalities impact assessment.

**Summary and justification**

We consider that the different options for member consideration will have differing levels of impact on groups with protected characteristics. Whilst there will be some positive impacts, particularly relating to the enhancement of services, the co-location of services and the Family Hub model, it is important to address the negative impacts on groups with

protected characteristics and how the impacts are mitigated, within our options for implementation presented in the separate Family Hub paper.

Broadly, the mitigations against the impacts on women and young children (outlined above) include the retention of more Children Centre locations within options 3 and 4 as well as a more expansive outreach offer (details to be co-designed with partners) that will (in part) focus on providing services to areas that are not necessarily covered by the Family Hub network – for instance those in more rural areas. The Family Hub Model itself brings together a wider range of services for families and as such while some service users may be required to travel further, they may now only need to make a single journey to access a range of required provision. The Family Hub model will enable parents to have improved information and access to services antenatally with an increasing focus on developing services for fathers-to-be. Feedback from fathers has already identified suggestions such as an improved digital offer with more information on support such as finances and learning more about child development.

Within the umbrella of the Family Hub model there is a collation of a wider range of services for families to improve knowledge and access to them. Although some service users may be required to travel further, the model proposes that families may should be able to access a wider range of required service from sites where services are delivered.

Children and young people with SEND needs should be able to navigate through services and local support through the collation of services in the model. There may be some differences in location of services. Some services may move to co-located spaces and outreach services are reliant on local community buildings therefore physical access to some services may be impacted by community building limitations.

Users with English as a second language may find the proposal for co-location of services which will require re-location of provision more difficult to navigate initially, therefore service teams will be supported in communicating changes early and effectively to these users. Teams will receive guidance in helping signpost and support these residents effectively.

The consultation did not have enough responses from some service user groups with protected characteristics. We recognise this as an area of continued development and will ensure within our future work to proactively reach groups to engage the service user voice from these seldom heard groups and those with protected characteristics. These include, gender identity, religion and belief, wider family carers, and sexual orientation and those with differing ethnicities.

The Family Hub model seeks to reduce inequalities and increase engagement of seldom heard groups through ongoing participation activity such as Parent Carer panels. We are committed to ensuring services are developed to reach such communities therefore we will have targeted participation activity to develop the Family Hub model of services.

The Family Hub model will be developing more peer to peer groups with those with lived experience, for example SEND peer group support and fathers groups. This will be supported by staff to help set up and support through use of spaces within the Family Hub sites.

All of these mitigation activities do need to be balanced against our Best Value Duty set out in securing Kent's Future and considered alongside the reality that the fewer buildings we close within this programme, the greater pressure is put on the rest of the Council finances, which will inevitably impact statutory service provision.

Across the programme the impacts are considered to be limited through the mitigation outlined and justified given the wider policy and financial context within which the Council currently operates.

## Section B – Evidence

*Note: For questions 9, 10 & 11 at least one of these must be a 'Yes'. You can continuing working on the EQIA in the App, but you will not be able to submit it for approval without this information.*

**9. Do you have data related to the protected groups of the**

Yes

<p><b>people impacted by this activity?</b> <i>Answer: Yes/No</i></p>	
<p><b>10. Is it possible to get the data in a timely and cost effective way?</b> <i>Answer: Yes/No</i></p>	Yes
<p><b>11. Is there national evidence/data that you can use?</b> <i>Answer: Yes/No</i></p>	<p>Yes</p> <p><a href="#">Planning Early Childhood Services in 2020: Learning from Practice and Research in Children’s Centres and Family Hubs</a>  <a href="#">Family Hubs Network Limited – Written Evidence (PSC0052)</a>  <a href="#">Family Hubs Network Knowledge Base</a>  <a href="#">The Best Start for Life: Early Years Healthy Development Review Report</a>  <a href="#">Westminster Family Hubs (Local Gov Article)</a></p>
<p><b>12. Have you consulted with Stakeholders?</b> <i>Answer: Yes/No</i> <i>Stakeholders are those who have a stake or interest in your project which could be residents, service users, staff, members, statutory and other organisations, VCSE partners etc.</i></p>	Yes
<p><b>13. Who have you involved, consulted and engaged with?</b> <i>Please give details in the box provided. This may be details of those you have already involved, consulted and engaged with or who you intend to do so with in the future. If the answer to question 12 is ‘No’, please explain why.</i></p>	
<p><b>Kent Communities Programme</b>  Engagement in a general context took place with stakeholders prior to the launch of the public consultation including:  KCC members and senior officers  Service delivery team members and property team members as part of the design process  District authorities  External partners including NHS and Kent Fire and Rescue</p> <p>A full 10-week consultation process was carried out between 17 January 2023 and 26 March 2023, this gave an opportunity to residents, community groups and all interested parties to give feedback on the proposed changes to service delivery across the county. During this consultation there were face to face sessions held, and over 150 hours of proactive engagement with residents, service users (including groups of users in locations proposed for closure), partners, staff, unions and members.</p> <p>Of the 1,776 consultees who took part, 18% of consultees provided a response to our specific question about the equality analyses we had conducted prior to, and published together with, our consultation. A more detailed breakdown of the responses within the consultation and the equalities considerations is given above.</p> <p><b>Family Hub Model</b>  Initial informal engagement took place between January and August 2022 with staff, service users and partners to explore the themes and aims of a Family Hub model in Kent, to inform the proposals and the application for the Family Hub Grant Funding in August 2022. Colleagues from across Integrated Children’s Services have spoken with KCC staff, health visitor and midwifery colleagues, other public health colleagues, commissioners and the Voluntary and Community Sector (VCS).</p> <p>Work to develop the involvement of parent/carers started in March 2023 and includes feedback on the branding for Kent Family Hubs, Fathers’ feedback on Start for Life services and feedback on the Service user Journey in the two test sites. Further consultation and engagement has taken place and will continue with internal and external stakeholders as well as children, young people, and parent/carer representatives throughout the duration of this programme of transformation.</p>	

The Family Hub services consultation launched on 19 July 2023 and closed on the on 13 September. The consultation aimed to gather the views of the community about the proposed changes to Children’s Centre services, youth provision, Health Visiting and community-based midwifery care. Families were able to complete an online or physical form, send emails, written communication and young people also sent videos, voice notes and flip charts from youth sessions. The feedback from the consultation has informed the equalities impact analysis and modelling.

### Family Hub Consultation feedback

The table below shows the profile of consultees responding to the consultation questionnaire only, we do not have the profile data for those who responded through alternative methods. The proportion who left this question blank or indicated they did not want to disclose this information has been included.

RESPONDING AS...	Number of consultees answering	% of consultees answering
As a Kent resident	849	94%
On behalf of a friend or relative	24	3%
A resident from somewhere else	14	2%
Other	6	1%
Prefer not to answer / left blank	15	2%

Our consultation data shows women were the majority of consultees and are far more likely to be impacted by the implementation of the Family Hub model as they form the majority of parent/carer service users as supported by our user reach data.

GENDER	Number of consultees answering	% of consultees answering
Male	97	11%
Female	597	66%
Prefer not to answer / left blank	214	24%

The consultation shows that those most consultees were between the age of 25 - 49 and that supports our KCC user data for those that utilise our services with 67% having children and 4% expecting a child. 22% of consultee’s left this question blank.

As outlined below we have recognised Age as an impacted group.

AGE	Number of consultees answering	% of consultees answering
0-15	14	2%
16-24	28	3%
25-34	198	22%
35-49	315	35%
50-59	62	7%

60-64	23	3%
65-74	23	2%
75-84	15	2%
85 & over	3	0.3%
Prefer not to answer / left blank	227	25%

<b>PRESENCE OF CHILDREN</b>	<b>Number of consultees answering</b>	<b>% of consultees answering</b>
I/we have children	612	67%
I am / we are expecting a child	40	4%
I/we do not have children	54	6%
Prefer not to answer / left blank	202	22%

<b>AGES OF CHILDREN</b>	<b>Number of consultees answering</b>	<b>% of consultees answering</b>
0-1 year old	194	21%
2-5 years old	240	26%
6-10 years olds	196	22%
11-19 years old	238	26%
I/we do not have children	54	6%
Do not have children / prefer not to answer / left blank	255	28%

#### **Profile of professionals / organisation consultees responding**

263 consultees took part in the consultation questionnaire specifically responding as professionals/organisations.

The KCC team also received feedback via email / letters. All emails / letters / videos received were passed to Lake Market Research to review and include comments in this report accordingly.

The table below shows the profile of consultees responding specifically to the consultation questionnaire. The proportion who left this question blank or indicated they did not want to disclose this information has been included. The main responses that were identified came from KCC staff, charities and the voluntary/community sector and educational establishments.

<b>RESPONDING AS...</b>	<b>Number of consultees answering</b>	<b>% of consultees answering</b>
Kent County Council staff	77	29%
Community-based midwifery staff	2	1%
Health Visiting staff	17	6%

Staff from another health-related organisation	11	4%
As a representative of a local community group or residents' association	2	1%
On behalf of an educational establishment, such as a school, college or early years setting	40	15%
On behalf of a Parish / Town / Borough / District Council in an official capacity	15	6%
As a Parish / Town / Borough / District / County Councillor	16	6%
As a Kent business owner or representative	2	1%
On behalf of a charity, voluntary or community sector organisation (VCS)	53	20%
On behalf of a faith group	2	1%
Other	26	20%

**14. Has there been a previous equality analysis (EQIA) in the last 3 years?** *Answer: Yes/No*

Yes - Our Community Services consultation set out how equality, diversity and inclusion was first considered using data for many characteristics that are provided by Equality Law.

This included data on

- Where young people lived
- Transport connectivity
- Percentage of households that are able to access services in a building within 30 minutes on public transport
- Transport mapping to understand the accessibility of building as know that older parents and carer, young people and those with a disability are more likely to be reliant on public transport

The Community Services consultation Equality Impact Assessments (EqIA) are available to read online via [Community Services Consultation \(Let's Talk Kent.gov.uk\)](https://www.kent.gov.uk/letstalk)

**15. Do you have evidence/data that can help you understand the potential impact of your activity?** *Answer: Yes/No*

Yes

**Uploading Evidence/Data/related information into the App**  
*Note: At this point, you will be asked to upload the evidence/data and related information that you feel should sit alongside the EQIA that can help understand the potential impact of your activity. Please ensure that you have this information to upload as the Equality analysis cannot be sent for approval without this.*

- [Link to the Community Services Consultation](#)
- [Link to equality and diversity data](#)
- [Link to the Health Needs Assessment 0-4 year olds in Kent](#)
- [Link to 2021 Mid-year population estimates: Age and sex profile](#)
- [Link to NHS Kent and Medway Perinatal equity and equality report](#)
- [Link to House of Commons Gypsies and Travellers briefing paper](#)
- [Link to Department for Education research brief on the lives of young carers in England](#)
- [Link to Family Hubs and Start for Life programme: local authority guide](#)
- [Link to Emotional health and wellbeing after birth information](#)
- [Link to Kent Family Hub Consultation](#)

**Section C – Impact**



**16. Who may be impacted by the activity? Select all that apply.**

Service users/clients <i>Answer: Yes/No</i>	Yes	Residents/Communities/Citizens <i>Answer: Yes/No</i>	Yes
Staff/Volunteers <i>Answer: Yes/No</i>	Yes		

**17. Are there any positive impacts for all or any of the protected groups as a result of the activity that you are doing? Answer: Yes/No**

Yes

**18. Please give details of Positive Impacts**

The principles and framework for the Family Hub model, as set out by central government, are built based on improving user experience by:

1. increasing access to a wider range of services in one place or under one shared umbrella;
2. improving the interface and join-up between services; and
3. having services working within practice that builds on strengths and puts children, young people and their families at the centre of services.

**Protected Characteristics**

**Pregnancy and Maternity**

Women who are pregnant or who have had a baby are most likely users of some services. During 2020 there were 15,940 live births in Kent, with some districts having a higher percentage of births e.g., Gravesham, Maidstone, Dartford, and Tonbridge & Malling. In Dartford, the births make up a higher percentage of the total population in that district highlighting the importance of equity in service provision (see 0-4 needs assessment). The Start for Life Offer will focus on perinatal mental health and infant feeding which is likely to benefit females through pregnancy and maternity as well as babies and infants. The Start for Life offer will be able to be accessed digitally which will be helpful for women who may struggle to travel.

In addition, our parenting education programmes will also provide new families with the information that they need to support them at this critical time.

Work around Reducing Parental Conflict and targeted support around domestic violence where needed will support (where applicable) relationship stability and the family environment/safeguarding.

Co-location of services will make the physical experience accessing services easier and should reduce the number of times that stories need to be re-told. There will also be an increased awareness of other potential sources of support.

In addition, the Family Hub and Start for Life model provides us with the opportunity to engage with people at an earlier point through maternity services building those key relationships at a critical time.

**Sex**

Population data from the 2021 Census shows that there are slightly more female residents than male in Kent (51.3% female vs 48.7% male). However, females only outnumber males from aged 25 years; prior to this, males outnumbered females in children and young people. Services are available for all parents, regardless of gender, however, the majority of parents currently accessing services are women.

To encourage men to access services, there will be a targeted community offer and digital resources.

As we develop our community-based offering there will be an increase of opportunities for volunteers and Family Coaches. We will actively encourage men to participate and engage in these opportunities.

The DfE ambition is for 50% of parent / carer panels to be Fathers / male partners and we will actively promote involvement and engagement through the Family Hub networks and digital offer.

We will also work with all service users to ensure that activities take place in safe spaces.

### **Age**

There are 369,600 children and young people (ages 0-19) living in Kent (Census 2021). The spread of ages is uneven across Kent; 5.5% of total population are 0-4 year olds, 6.0% are 5-9 years old, 6.2% are 10-14 years old and 5.6% are 15-19 year olds.

The majority of Children Centre services are accessed by parents / carers aged 25-39, babies and children aged 0-8.

Young people (aged 8-19) will benefit from community-led social and developmental activity available for all, whilst those at most risk of missing out where community resources do not meet the need will be prioritised if needed.

Needs assessments will support targeted interventions for young adults such as: teenage mothers, those who are at risk of homelessness, young carers, sexual or criminal exploitation or grooming and those Not in Education, Employment or Training (NEET), those at risk of going missing and those at risk of drug and alcohol misuse.

Families will experience smoother transition points as this is 0-19 year old (25 for children with SEND) service so will be able to access services under the Family Hub model and network.

Age related specific services will continue.

Following national policy, recognising the importance of the first 1,001 days, and implementing services to ensure the best start in life for babies will improve outcomes.

### **Disability**

Kent has a higher proportion of people aged under 16 (5.8%) claiming a disability benefit than both the regional (4.5%) and national average (4.6%). It is unknown how many children with SEN, or a disability, use current services, as this information is not routinely collected.

The Family Hub offer will benefit those with SEND through additional parenting education and improved access to information on support for children and young people. We currently know those with SEN are underrepresented in our service, a more targeted approach should ensure more equal access for children with SEND with the help of outreach and digital provision.

Some community-based provision may take place in environments they are more familiar with e.g., home or school, reducing anxiety and behaviours that challenge and for some, our digital offer will improve the opportunity to access information, advice and guidance and online support.

Accessibility of venues will be a consideration across the Family Hub network, including outreach venues.

Through taking a whole family approach, and the co-location of services, parents, and carers of children with disabilities will not have to tell their story more than once.

Feedback suggests parents of children with SEND prefer online and email communication options, so they would benefit from an enhanced digital offer. They may also benefit from virtual delivery that can be done at a time and place to suits them, increasing flexibility around caring needs.

The Census and the Council do not routinely collect data on the number of parents with a disability living in Kent, so it is difficult to assess the impact of the service change without a baseline.

Through more integrated working, parents and carers, including those experiencing baby loss, should be better supported to seek and receive help for their mental health. Focused support will be available for those who are suffering from perinatal mental health issues.

Through enhancing the existing emotional wellbeing support in place, children and young people and their families will be able to get the emotional wellbeing and health support they need when facing difficult situations. This includes the provision of face-to-face support, outreach and digital information, advice, and guidance.

### **Religion**

There is currently no direct data which measures religion of children and young people or parents of children and young people living in Kent. The only data collected is related to the overall population and based on the 2021 Census data. The Council provides services to children, young people, and their families, irrespective of their religion or beliefs.

However, as we develop a community-based offer, we would work with religious organisations to provide support to develop provision in a safe and supportive way, helping them stay linked to the Family Hub network to seek advice. Our data driven approach will allow us to engage with those who do not normally engage with services. We also have the opportunity to engage with people at an earlier point through maternity services and can build a rapport with communities earlier.

Through the wider Family Hub network and the outreach offer we have the opportunity to engage with new spaces and places that are accessed by families who are from ethnic minority backgrounds or have English as a second language. This could include links to faith groups for example. We aim to build our relationships with communities and encourage further access and tailoring of services accordingly.

### **Race**

Ethnicity varies across the districts in Kent. Gravesham and Dartford have the highest proportion of ethnically diverse profiles. Approximately a third of 0–4 year-olds in Gravesham and a quarter of Dartford district are non-white British. This highlights the importance of acknowledging the increased likelihood of inequalities, and likely barriers to accessing health services in these areas. A recent report on Equity and Equality in the Kent and Medway Local Maternity and Neonatal system suggests that Kent mirrors the national picture with regards to Black and Asian women having a higher risk of dying in pregnancy, maternal mortality rates, neonatal mortality rate and stillbirths per 1,000 total births. The report also highlighted differences in early access to antenatal care with Black and Asian women less likely get early access to antenatal care.

According to the 2021 Census, there are a total of 7,660 people living in Kent from one of the Gypsy, Roma or Traveller communities. There is likely to be under-recording as people may be reluctant to self-identify for fear of discrimination and mistrust of organisations and authorities. Gypsy, Roma, Traveller communities have higher rates of mortality, morbidity and long-term health conditions, low child immunisation and a higher prevalence of anxiety and depression compared with the general population.

Given that parent and infant health outcomes are already worse for Black and Asian families, as well as those from white minority backgrounds such as Gypsy, Roma, Traveller communities, co-ordinated interventions will be targeted at these groups across services to reduce health inequalities.

Through the wider Family Hub Network and the outreach offer, we have the opportunity to engage with new spaces and places that are accessed by families who are from ethnic minority backgrounds or have English as a second language. This could include links to faith groups for example. We aim to build our relationships with communities and encourage further access and tailoring of services accordingly.

Taking a data driven approach will allow us to target communities who do not feel that existing services are “for them” and we will use outreach opportunities through the Family Hub partnership to improve engagement and participation.

### **Carers**

According to 2021 Census, there are 10,855 young carers aged 0-24 in Kent. Nationally there is a trend in under identification as young people often do not report that they have caring responsibilities at home. We estimate that there could be up to four times more young carers in Kent.

Young carers or adults with caring responsibilities may find it hard to access in person services due to their caring responsibilities and may particularly benefit from enhanced digital and virtual opportunities, as well as services in locations they already visit such as schools.

Co-located services will also play a part in making this experience easier, reducing the need for carers to have to re-tell their story.

Whole family working will assist in capturing the wider challenges of caring and the impact this has on whole family wellbeing.

Young carers will continue to be offered support through targeted supportive groups.

### **Sexual orientation/ Gender identity/ Transgender**

Our services are open to all individuals, but we recognise that accessing services can be challenging.

Some LGBTQ+ individuals who are concerned about accessing face to face services may benefit from our online digital and virtual offer. Our workforce development across the Family Hub network will support inclusive practice and whole family working with a commitment to equality. Our outreach offer will give individuals the opportunity to access support in places they are already comfortable. LGBTQ+ young people will be actively encouraged to participate in service design opportunities.

### **Low income**

Relative low income is defined as a family in low income before housing costs in the reference year. In 2020/21 in Kent, 17.3% of all children aged 0-4 years were living in relative low-income families (nationally its 18.1%). However, some districts have a higher proportion of children (aged 0-4) living in relative low-income families including Thanet (23.6%), Folkestone and Hythe (21.3%), Gravesham (21.1%), Dover (21.1%) and Swale (20%). The council provides services to children, young people, and their families, irrespective of family circumstances (income level). However, evidence from the Local Maternity and Neonatal System equity report suggests that women living areas of deprivation in Kent are likely to seek antenatal care later compared to women in other groups likely leading to differences in health outcomes. (Perinatal equity and equality: NHS Kent and Medway ([icb.nhs.uk](http://icb.nhs.uk)))

The Family Hub emphasis on providing targeted support for families in areas of 20% most deprived in Kent will aim to redress this inequity in access.

**Wider impact**

KCC is receiving a grant of approximately £11m to transform our services. This is an exciting opportunity to improve our services to benefit the residents of Kent. The grant is in place to support system transformation through service integration, workforce development, and co-designed new services as directed by the DfE.

This significant investment and an improved integrated model across Children’s Centres, youth provision, Health Visiting, community-based Midwifery care, with other key community services have positive wider impact for the wider population.

In addition, service users will benefit from better access to services, signposting, information, advice, and guidance as well as greater availability and visibility of services within the community. They may access this independently, through digital channels, or through outreach such as through community networks or in physical buildings.

Children and parents/carers will continue to receive support targeted at different age groupings so the support they receive is appropriate and tailored to their development stage.

Parent carer panels and peer support networks will ensure those from minority groups are able to be heard and shape our services. We think this will particularly benefit those from ethnically diverse communities whose views may currently be underrepresented, same sex parents (LGBTQ), those with SEND, carers, and fathers. Virtual support networks may be particularly effective where parents are in a very small minority in their community. Enhanced digital support will enable service users to engage with services at a time that works for them.

The co-location of staff in buildings will make services easier to access and reduce the need for service users to tell their story more than once.

The integrated working model would ensure that staff working under the Family Hub umbrella would all adopt the whole family model and have access to workforce development opportunities. This means that families would receive a more consistent style and quality of service.

The new model also includes partnerships with local community and voluntary services as a key part of the Family Hub network. We will seek to offer increased access to partners to deliver their services for families within Hubs and jointly in outreach where there are joint opportunities and needs are identified. This will enable improved access to a wider range of services for children, young people and parents/carers.

**Negative Impacts and Mitigating Actions**

The questions in this section help to think through positive and negative impacts for people affected by your activity. Please use the Evidence you have referred to in Section B and explain the data as part of your answer.

**19.Negative Impacts and Mitigating actions for Age**

<p><b>Are there negative impacts for age?</b> Answer: Yes/No (If yes, please also complete sections b, c, and d).</p>	<p>Yes</p>
<p><b>Details of Negative Impacts for Age</b></p>	<p><b>Consultation Response</b>  57% of all consultees were between 25-49 with 67% having children and only 4% expecting a child. The most common activity used is activities for children 0-5 at 70% of consultees answering, followed by activities for older children and young people at 48%.</p>

Around a third of consultees answering indicated they use education for parents on child development (35%), information, advice and guidance about support services for children and young people with Special Education Needs and Disabilities (SEND) (31%) and information and signposting to mental health services (children and adults) (31%).

There are significant differences in the current use of activities by demographic:

- A higher proportion of consultees aged 25-34 and 35-49 use activities for children aged 0-5 (86% and 79% respectively).
- A higher proportion of consultees aged 50-64 and 65 & over, use activities for older children and young people (67% and 62% respectively), information and signposting to mental health services (children and adults) (45% and 41% respectively), support and information for parents/carers of adolescents (teenagers) (35% and 34% respectively) and online safety for children and young people (21% and 38% respectively)

It can be surmised that those in the 25-49 category typically have children belonging to 0-5 whilst parents of older children and young people are 50+.

Just under a third of consultees answering (32%) indicated the future Family Hub model should include a place specifically for teenagers / activities for teenagers / support for teenagers / youth activities.

As Family Hub services are targeted at improving outcomes for children **0-19**, they will be disproportionately impacted by the changes proposed.

### **Children**

The closure of Children's Centres could disproportionately impact those **0-5** receiving support through Open Access towards their development milestones associated with health, education, and parent bonding. They will be reliant on their parent / carers being able to access another centre, who may have to travel further to access groups and support, alternatively they may access provision less frequently where it is delivered via outreach. As many of the impacts relate to access and transport connections to alternative provision, we have included an appendix of the travel options from buildings proposed to close.

The closure of Children's Centres where Health Visiting Services are currently co-located could also mean families have to travel further to access healthy child clinics and developmental reviews, breastfeeding support and general advice and support on health care, infant feeding, and physical and emotional development. As Health and Wellbeing reviews are mandated the frequency of these will not be affected.

Data in the period 2017-19 for reach at the Children's Centres sites proposed for closure showed reach highest for babies 0 -1 year. There is decline in reach at 1 year old and again at 2-year-olds with further decline at 3 years +. This suggested the greatest impact would be on children under 1-year-old.

There may also be an impact for children aged **5-10** who may currently be accessing the Children's Centre to participate in after school clubs. School aged children are likely to be reliant on a parents/carer to transport them to and from after school activities. The transport implications for parents/carers are discussed later but is likely to impact on this age group. If their parent / carer is unable to take them to the nearest alternative

Family Hub, they may need to access alternative provision in the community or may stop accessing after school activities. This could have an impact on their social, physical, or educational development.

### **Parent/Carers – 25-39 Year Olds.**

We recognise that parents (most likely to be aged between 25 and 39) may need to access services differently, may need to travel to alternative locations and may receive a different type of service than previously offered. Travel costs could become a barrier to access and, if this is the case, this could affect their ability to access the support required when needed.

Additionally, as Family Hubs adopt a 0-19 (25 for SEND) whole family approach. The look and feel of buildings may change and individuals from different age groups will have to share space. This may affect how individuals feel about space that was previously designed for their age range and could impact on feelings of safety and belonging.

### **Youth**

We know that young people were concerned about this as part of their feedback on the Family Hub services consultation. 12% of consultees answering indicated there should be more youth services offered / more activities for young people / not less / separate spaces should be provided for them. In addition, promotional education/information material for young people that is displayed in buildings may not be suitable for different age ranges.

### **15–19-Year-Old Parents**

Health outcomes for the babies of teenage parents are well acknowledged to be worse than their counter parts, so access to Family Hub services for these parents and their children will be especially important to support good outcomes for their babies and/or children. The impact of further journey times may have a greater impact on this cohort as they are less likely to hold driver's licence and will be more reliant on family and friends or public transport and walking to travel to access services. As teenage parents are likely to be more reliant on the services on offer from Family Hubs, there is likely to be a larger impact on them and their children if they are unable to access a centre, exacerbating existing inequality of outcomes.

### **Elderly Parents / Carers (65+)**

Older parents / carers may be disparately affected as they may have increased mobility needs and experience greater difficulty travelling to alternative provision. They may also face more difficulty engaging with our digital offer making them more reliant on our outreach provision.

### **Co-location**

Additionally, parents (most likely to be aged between 25 and 39) may also experience some negative impacts as a result of these changes to the look and feel of buildings, and the co-location of a wider range of services at Family Hubs. Parents of younger children may feel uncomfortable sharing spaces with teenagers, as the messaging around information, guidance and support literature is very different, also they may feel uncomfortable approaching a building with lots of young people gathered outside.

63% of residents between the age of 25 and 34 disagree with the proposals to co-locate services together. Again, this is supported by the comments within the response that this opposition is likely due to the proposals to co-locate Children Centre services and

	<p>accessibility is raised as a point of concern. This suggests that the impact on residents in this age bracket, particularly when combined with other protected characteristics like sex, disability, pregnancy and carer responsibilities, would be more significant.</p> <p>Again, considering that the number of building closures <i>decreases</i> progressively between option 1 and 2, further between option 2 and 3, and then again between option 3 and 4, it is clear that the significance of the impacts across the County would lower depending on which option is chosen.</p>
<p><b>Mitigating Actions for age</b></p>	<p>Across the options presented for Member decision the impact of change on all protected characteristics, including age, are mitigated to different degrees by retaining progressively more buildings in Options 3 and 4 compared to the consultation model presented in Option 2. In Options 3 and 4, the Needs Framework has been amended to give progressively greater weight to the analysis of the public transport network.</p> <p>Therefore, in Options 3 and 4 progressively fewer buildings are proposed for closure, which reduces the requirement for residents to use public transport to access services in alternative locations. Option 5 does not make any changes and so there are no equalities impacts to mitigate.</p> <p>We will address recognised barriers to accessing services, and how outreach and digital options of support could assist. In some cases, where required home visits or support through other community provision could be provided. Leaflets and posters will be displayed with consideration for the different service user groups in a Family Hub site to ensure the materials are age appropriate.</p> <p>As part of the co-design element of the model, users will be involved in the development of shared spaces to create a sense of ownership and belonging.</p> <p>We will ensure that timetabling and scheduling considers when children, young people and families are available based on their age range. Promotional material will also need to be age appropriate in delivery spaces.</p> <p>Parent Carer Panels will seek to engage and include a wide range of parents and carers at the different end of the age range to ensure inclusivity.</p> <p>The Family Hub outreach offer, proposed to be co-designed with partners within each district locality, allows services to be delivered within communities that would negate the need for residents to travel to reach services. It will also lead to service delivery to currently underserved communities that may miss out on service provision due to the historic nature of the Council’s building footprint. In addition, as part of our Family Hub outreach offer, we will improve access to Public Health services specifically for families of young people, targeting where there is greatest need.</p> <p>To reduce the impact on vulnerable young people, we propose that any future commissioning would be aligned to education services that support children with SEND.</p>
<p><b>Responsible Officer for Mitigating Actions – Age</b></p>	<p>Danielle Day Programme Manager – Family Hubs</p>
<p><b>20. Negative Impacts and Mitigating actions for Disability</b></p>	
<p><b>Are there negative impacts for Disability?</b></p>	<p>Yes</p>



Answer: Yes/No (If yes, please also complete sections b, c, and d).

**Details of Negative Impacts for Disability**

**Consultation Response**

According to the most recent service user data, there were around 700 services users with Special Educational Needs accessing children’s centres in 2019 (between 01/01/2019 up to and including 07/10/2019) who may be more adversely affected by the proposals than those without disabilities.

14% of consultation respondents indicated that they experience a disability and 61% of all respondents disagree with the proposals to have fewer buildings. The negative impacts on residents experiencing a disability do interplay with other protected characteristics as already outlined, particularly between age.

The consultation asked a variety of questions on how the potential services being proposed and the delivery model may affect people in terms of access as well as what services should be offered, assess needs for delivery including face to face vs virtual. In relation to our service offer for SEND including both direct service delivery and advice and guidance some key highlights from the consultation include:

- A higher proportion of consultees aged 50-64 use information, advice and guidance about support services for children and young people with Special Education Needs and Disabilities (SEND) (54%).
- Around two thirds of consultees answering indicated they might use information and signposting to mental health services (69%), activities for children aged 0-5 (65%) and information, advice and guidance about support services for children and young people with Special Education Needs and Disabilities (SEND) (62%).
- 5% of consultees highlighted the need for more support for SEN and SEND or to be be mindful of SEND when developing the Family Hub service delivery model and services.
- 17% consultees indicated that our demographic of those with SEN/SEND/Autism/ND would be impacted by the proposals not being considered adequately. Highlighting the need to ensure that equalities impact remain at the core of the proposed model.

In terms of the suitability of virtual delivery vs face to face:

- The vast majority of consultees answering (93%) consider face to face (in person) access to be suitable for information, advice and guidance about support services for children and young people with Special Education Needs and Disabilities (SEND).
- Three quarters of consultees answering consider online services (75%) suitable for this service and 67% consider virtual services suitable.
- Only 6% of consultees thought virtual service delivery was appropriate for Services for SEN / SEND / ND

**Physical Disabilities**

Proposed closure of Children’s Centres may adversely affect children with disabilities living within these catchment areas or children with parents with a disability, where

they are required to travel further away to access services. Families with disabilities may find it harder to travel beyond immediate home locality due to having no transport and a greater reliance on public transport. Even where public transport links do exist, those with disabilities may still find it harder to access via public transport. This may be for mobility reasons, in the case of a physical disability where the requirement to travel by public transport is more challenging. Additionally, children with SEND may find increased journey times distressing.

Where accessing a Family Hub is more difficult families may access support less frequently or not at all, potentially having an impact on both the parent and the child's wellbeing. The health visiting mandated check are an exception to this where the frequency will not be impacted by accessibility of services. For this reason, we have detailed the nearest alternative provision and the relevant transport implications.

Given that educational, employment, and wellbeing outcomes are all generally lower for those with disabilities, ([Outcomes for disabled people in the UK – Office for National Statistics \(ons.gov.uk\)](https://www.ons.gov.uk/people-in-work/population/disabled-people)) this existing inequality may be compounded by increased difficulty accessing services, resulting in a disproportionate impact.

Service users with physical disabilities may have different needs from the physical environment such as for accessible toilets, hearing loops, ramps and other accessible features. We have conducted analysis across the alternative Family Hub sites and in particular have identified that Temple Hill Library does not currently have an accessible toilet unlike current provision. This may prevent those with physical disabilities and their carers feeling comfortable to access services at this venue. They may need to travel further or access a toilet within the local community. Service users with SEND or sensory conditions may also have differing needs. Cranbrook Children's Centre currently has a sensory room which is not replicated in any other centre within the district. The removal of this provision may have a negative impact on families who find it particularly soothing and helps them to engage in the other services available at Children's Centres. As service users of the two Youth Hubs proposed for closure have already been able to access services from the proposed alternative locations, we do not anticipate that 11–19-year-olds with a disability will be impacted by the changes.

By virtue of the fact that the number of building closures *decreases* progressively between option 1 and 2, further between option 2 and 3, and then again between option 3 and 4, it is clear that the significance of the impacts across the County would lower depending on which option is chosen.

### **Mental Illness / Anxiety Disorders**

Our proposal to close 3 centres which are currently used by the Children and Young Person's Counselling Service may adversely impact those with mental illness. They may be more sensitive to change and be more distressed than their counterparts by the need to access services from a different location.

Similarly, families with higher levels of anxiety may also find the need to access alternative provision more distressing. If not managed well, it is possible that some families will stop accessing our services, potentially exacerbating existing conditions.

### **Digital Delivery**

Parents/carers and children with disabilities may be unable to access information digitally. ONS research suggests that half of internet non-users in 2017 has a disability and are disproportionately affected by digital exclusion. [Exploring the UK's digital divide – Office for National Statistics \(ons.gov.uk\)](#). As such they may be more reliant on face-to-face services and impacted more heavily by the need to travel further as they may not be able to access the digital offer. The Consultation response demonstrated that 10% of respondents highlighted accessing services online would be difficult for them and 9% did not feel confident using technology. 16% believe online access to services isn't an inclusive approach and cited the elderly, those with access issues and those unable to use online services as examples to illustrate their views. 11% commented that online delivery needs to be appropriate for the service in question.

### **Co-location**

48% of respondents disagree with the proposals to co-locate services together. The comments within the response suggest that this opposition is likely due to concerns around accessibility of services within co-located sites. This suggests that the impact on residents experiencing a disability would be more significant. Our plans to co-locate with other services may have a disparate impact on children or their parents and carers with SEND. They may be more likely to experience sensory overload resultant from busier, noisier environments. Co-location may also affect families with physical disabilities as they may need more space to comfortably travel around a building. If the environment is not conducive to a positive experience for families, they may stop accessing services, or access them less frequently. Adolescents with SEND are likely to be accessing services in the evenings and are unlikely to be impacted by increased footfall.

Again, considering that the number of building closures *decreases* progressively between option 1 and 2, further between option 2 and 3, and then again between option 3 and 4, it is clear that the significance of the impacts across the County would lower depending on which option is chosen.

Option 5 is the 'Do Nothing' option and as such, if Members decided to proceed with Option 5, there would be no change in equalities impacts.

Face to face services are not changing but they may be delivered from a different location, however some children and young people with disabilities could be more digitally excluded. For example, an enhanced digital offer may have limited applicability for children, young people, and adults with SEND, who are hard of hearing, or have visual impairment or dyslexia who may struggle to engage with virtual activities.

Changes to buildings, staffing, timings, and the addition of co-located staff may be a challenge for some children, young people and adults who struggle with change by the nature of their disability. New environments and the level of activity in those environments (as a result of co-location and integration of services) could also adversely affect those groups.

Outreach support will be in community buildings and this may impact accessibility dependant on physical building limitations.

	<p>We recognise that individuals with disabilities may need to access services differently, may need to travel to alternative locations and may receive a different type of service than previously offered. Travel could become a barrier to access and, if this is the case, this could affect their ability to access the support required when needed.</p>
<p><b>Mitigating Actions for Disability</b></p>	<p>Across the options presented for Member decision the impact of change on all protected characteristics, including disability, are mitigated to different degrees by retaining progressively more buildings in Options 3 and 4 compared to the consultation model presented in Option 2. In Options 3 and 4, the Needs Framework has been amended to give progressively greater weight to the analysis of the public transport network. Therefore, in Options 3 and 4 progressively fewer buildings are proposed for closure, which reduces the requirement for residents to use public transport to access services in alternative locations. Option 5 does not make any changes and so there are no equalities impacts to mitigate.</p> <p>The co-location sites will be brought forward with the assistance of professional design and construction partners that will consider accessibility compliance and regulations as part of the design work and implementation of changes that facilitate the co-location. This will include provision of accessible facilities, DDA compliant buildings and relevant wayfinding provision.</p> <p>We will undertake co-production of digital content to ensure it is functional and accessible for individuals with disabilities.</p> <p>Our peer-to-peer support through Family Coaches and volunteers may assist individuals who feel that services don't understand the challenges they face. This should assist with greater engagement and the opportunity to offer support.</p> <p>We will also undertake digital accessibility testing of web content to ensure accessibility across a wider spectrum of need e.g., sensory needs, deaf or hard of hearing, blind/poor vision, dyslexic, physical, neurodivergence, and mental health difficulties.</p> <p>Venues will be checked for accessibility and advice will be given to partners and volunteers delivering services as part of the wider network on inclusive practice.</p> <p>Family Hubs, by working as part of the SEND Transformation programme, will be able to improve and develop on our inclusion practice.</p> <p>Our data driven approach, outreach offer and work through the Family Hub network will assist us able to identify the greatest need and respond appropriately.</p> <p>Outreach work in the community within the Family Hub model will be delivered across both urban and rural localities informed by need/data. The Family Hub outreach offer, proposed to be co-designed with partners within each district locality, allows services to be delivered within communities that would negate the need for residents to travel to reach services which has been acknowledged as more challenging for residents that experience a disability.</p> <p>Outreach is community-based provision, delivered in non-Family Hub sites such as libraries, community centres and may take place in family homes (for example Health Visitors attending a family home).</p>

	We will engage on barriers to accessing services, and how outreach and digital options of support could assist.
<b>Responsible Officer for Mitigating Actions - Disability</b>	Danielle Day Programme Manager – Family Hubs
<b>Are there negative impacts for Sex?</b> Answer: Yes/No (If yes, please also complete sections b, c, and d).	Yes
<b>Details of Negative Impacts for Sex</b>	<p><b>Consultation Response</b></p> <p>As is seen in the response to the consultation, 62% of female respondents oppose the proposal to have fewer buildings compared to 34% of male respondents. Equally 69% of female respondents oppose the co-location of services, compared to 26% of male respondents. This is likely due to the fact that women are more likely to take on greater responsibilities for childcare and the majority of the reduction in buildings is across the Children’s Centre estate (83% of respondents with children under 1 year old oppose the proposals to have fewer buildings).</p> <p>The proposals within Options 1, 2, 3 and 4 would require individuals to travel further, likely on public transport which may be difficult with children, pushchairs, and additional equipment. The crossover with other protected characteristics, including age, disability, pregnancy and those with carers responsibilities needs considering as the impact on these protected characteristics combined would be greater.</p> <p>By virtue of the fact that the number of building closures <i>decreases</i> progressively between option 1 and 2, further between option 2 and 3, and then again between option 3 and 4, it is clear that the significance of the impacts across the County would lower depending on which option is chosen.</p> <p>Option 5 is the ‘Do Nothing’ option and as such, if Members decided to proceed with Option 5, there would be no change in equalities impacts.</p> <p>Given that females may be disproportionately affected as they are most likely to access our services currently, we need to recognise that women may be negatively impacted by the co-location of services. This is likely to be subjective to individuals lived experience and circumstance. For example, women mainly attend groups for support around domestic violence and may struggle to enter buildings where men are sharing the space.</p> <p>Conversely, some fathers or male carers may be put off attending spaces that are mostly occupied by women.</p>
<b>Mitigating Actions for Sex</b>	<p>Across the options presented for Member decision the impact of change on all protected characteristics, including sex, are mitigated to different degrees by retaining progressively more buildings in Options 3 and 4 compared to the consultation model presented in Option 2. In Options 3 and 4, the Needs Framework has been amended to give progressively greater weight to the analysis of the public transport network.</p> <p>Therefore, in Options 3 and 4 progressively fewer buildings are proposed for closure, which reduces the requirement for residents to use public transport to access services in alternative locations. Option 5 does not make any changes and so there are no equalities impacts to mitigate.</p>

	<p>Our workforce development programme will include training on inclusive practice, and we will work with the wider Family Hub network to consider how groups and services are scheduled and promoted appropriately.</p> <p>Our digital offer will allow us to target information, signposting, and online content suitable for the needs of service users based on their sex, and individual needs.</p> <p>Our parent carer panels, and co-design opportunities will also assist us in improving accessibility. We will seek feedback from all service users to improve and develop inclusive and safe delivery spaces that acknowledge how circumstances and lived experience can affect men and women's view on space sharing.</p> <p>We will continue to work with partners to develop and improve our offer to fathers and male carers and ensure feedback from fathers and male carers is used to develop relevant and engaging services to support them in their parenting roles.</p>
<b>Responsible Officer for Mitigating Actions - Sex</b>	Danielle Day Programme Manager – Family Hubs
<b>22. Negative Impacts and Mitigating actions for Gender identity/transgender</b>	
<b>Are there negative impacts for Gender identity/transgender?</b> <i>Answer: Yes/No (If yes, please also complete sections b, c, and d).</i>	Yes
<b>Details of Negative Impacts for Gender identity/transgender</b>	<p>The pre-consultation EqIA did not identify any negative impacts for Gender identity/transgender. However, 19% of responders to the consultation commented on the Equality Analysis and 4% of respondents (6 responders) felt that LGBTQIA+ were adversely affected and not considered adequately.</p> <p>Young people within the gender identity/transgender characteristic may be impacted by the requirement to share youth centre space with an early years (0-5) setting. Feedback from the consultation demonstrates that young people that access youth centres are not in favour of this as they may feel unable to use the centre to highlight issues related to gender identity, sexual health and LGBTQ issues.</p> <p>We recognise that some Transgender individuals (including adults) may not feel that the services are available to cater for their specific identity needs.</p> <p>Some Transgender parents may feel concerned about attending events due to current tensions around environments not feeling fully inclusive.</p>
<b>Mitigating actions for Gender identity/transgender</b>	<p>Youth services will be protected by timetabling activity within the new Family Hub model and through design within spaces to provide separate and dedicated areas/settings for youth provision, including space for confidential conversations. We have examples of being able to do this successfully within our current estate and service models.</p> <p>We will work with all service users to ensure that activities take place in safe spaces. Our digital and outreach offer will be developed and co-designed to support all service users.</p> <p>KCC will continue to provide an in-house youth provision which will remain a mixture of centre based and outreach activity. We will also undertake targeted work through local</p>

community groups to continue support for transgender and young people who are not cisgender in a safe environment where required.

Our digital content and our Family Hub network will be able to provide information, advice, and support for a range of issues concerning gender identify.

We will work with local community organisations to ensure provision (based on local need) includes targeted services or is well sighted on how to make groups more inclusive.

Our workforce development programme will also include a focus on inclusive practice and an ongoing commitment to equalities.

We will work with and co-produce services with all service users to ensure that activities take place in safe spaces.

**Responsible Officer for Mitigating Actions - Gender identity/transgender**  
 Danielle Day  
 Programme Manager – Family Hubs

**23. Negative Impacts and Mitigating actions for Race**

**Are there negative impacts for Race?** Answer: Yes/No  
 (If yes, please also complete sections b, c, and d).  
 Yes

**Details of Negative Impacts for Race**

**Existing Racial Inequality in Maternity and Child Outcomes**  
 We are aware that people from ethnic minority groups are likely to be disadvantaged by poorer health. Black, Asian and other ethnic minority women are overrepresented in the groups that experience the worst outcomes in maternity and perinatal care. (Ref 308 Inequalities Sprint Audit Report 2021\_FINAL.pdf (maternityaudit.org.uk). Given these minority groups experience worse outcomes changes to Health Visiting services which are targeted at maternity, any negative impacts may deepen existing inequality.

This health inequality can also lead to educational inequality. An inability to access Open Access services which impact on child and parent’s health, education and employment outcomes may further entrench this disadvantage. Gypsy, Roma, Traveller populations also are known to have poorer health outcomes compared to other ethnic groups and may also be more significantly impacted by an inability to access Family Hub services.

**Centres with Higher Levels of users from Different Ethnic Populations**  
 Whilst any family from a minority ethnic population may be impacted in the ways described above, we’re particularly mindful of centres where there is a particularly large number of users or a notably higher proportion of those from different ethnicities within a particular centre.

Gravesham and Dartford districts both have a higher number of ethnic communities than the Kent Average:

District	Asian, Asian British or Asian Welsh	Black, Black British, Black Welsh, Caribbean or African	Mixed or Multiple ethnic groups	Other ethnic group	White
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Dartford	9.9%	10.5%	3.1%	2.0%	74.5%
Gravesham	11.2%	6.5%	2.6%	3.0%	76.6%
Kent Average	4.6%	2.7%	2.3%	1.3%	89.1%

Further data from the service relating to 2019 service users highlights particular locations. We've identified that the closure of the following Children's Centres may be particularly impact on those from different ethnic populations and looked more closely at how we may mitigate against this in these communities.

Temple Hill Children's Centre. 650 users (31% of total users compared to 25% in Dartford at a district level)

Brent (YMCA) Children's Centre. 480 users (30% of service users compared to 25% in Dartford at a district level).

Ray Allen Children's Centre. 255 users (9% of total service users in line with Ashford's average)

Riverside Children's Centre (Canterbury). 215 users. (14% of service users compared with 8% in Canterbury at a district level) with the majority identified as White Other (11%).

West Kingsdown Children's Centre, 195 users (18% of total service users compared with 10% of Sevenoaks at a district level)

Hawkinge & Rural Children's Centre. 75 services (30% of total service users compared to 24% in Folkestone and Hythe as a district average)

The Sunflower Children's Centre, 25 service users (18% of total service users compared to 10% in Dover as a district average)

Eastborough Children's Centre, 20 service users (16% of total service users compared to 11% in Maidstone as a district average).

Within these districts the co-production work to develop the access to services will ensure that feedback is representative of the communities living within the districts to help shape how we support communities.

#### **Access**

Residents that use English as a second language may find changes to service locations more difficult to accommodate. They may also find travel to alternative locations and navigating unfamiliar settings more challenging than native English speakers. This covers the entire extent of the Kent Communities Programme as the reduction in buildings means that residents will need to access services in alternative locations or in different ways (for example online).

Ability to travel to other Children's Centre sites may be prohibitive for different ethnic populations community. There are number of factors that contribute to this such as access to cars, language barriers, cost implications, caring responsibilities and different working patters. Gov.uk publications evidence that those from black, Asian, Mixed and other ethnic populations are significantly less likely to have a full driver's license making them more reliant on public transport. Driving licences – GOV.UK Ethnicity facts and figures ([ethnicity-facts-figures.service.gov.uk](https://ethnicity-facts-figures.service.gov.uk)). They may be particularly affected where



	<p>centres are not within 30 minutes on public transport. The socio-economic status of minority ethnic families is also an area of deprivation that may make increased costs associated with travelling to different sites unaffordable. Given this potential impact analysis on the transport and travel connections has been conducted for each of these sites.</p> <p><b>Co-location</b>  With more services in buildings, it may be more difficult for people with limited English language and literacy to navigate the various services. This could lead to people with little English may feel overwhelmed and not able to find where they need to go very easily.</p> <p>The co-locations at Stanhope Library and Temple Hill Library are likely to be accessed by a large number of people from different ethnic populations. There may be high demand for services which may result in waiting lists for spaces on particular groups, particularly affecting those from different ethnic populations given the high number currently accessing services proposed to relocate to these co-located sites. Whilst we endeavour to provide enough activities to meet demand, space may be prohibitive of additional groups, highlighting the importance of creating new opportunities through local community groups.</p> <p><b>Digital</b>  People whose first language is not English are more likely to be digitally excluded and may not be able to access an enhanced digital offer. They may also not access traditional marketing activity for face to face, understand the changes being proposed or understand how to access or apply for support in the future. They may be more reliant on local access points. We also recognise that some ethnic minority families may not feel that the services are available to cater for their specific cultural needs.</p>
<p><b>Mitigating Actions for Race</b></p>	<p>Across the options presented for Member decision the impact of change on all protected characteristics, including race, are mitigated to different degrees by retaining progressively more buildings in Options 3 and 4 compared to the consultation model presented in Option 2. In Options 3 and 4, the Needs Framework has been amended to give progressively greater weight to the analysis of the public transport network.</p> <p>Therefore, in Options 3 and 4 progressively fewer buildings are proposed for closure, which reduces the requirement for residents to use public transport to access services in alternative locations or to navigate unfamiliar settings way from their current local access points. Option 5 does not make any changes and so there are no equalities impacts to mitigate.</p> <p>Co-production of digital content will be developed to be inclusive focusing on simple language that is either available to translate or is compatible with common translation software.</p> <p>Targeted provision will be informed by a range of data including the number of children whose main language is not English, and the number of students from ethnically diverse backgrounds. Ongoing analysis will be required to ensure that Family Hub services are targeted at more “hidden” communities or ethnic groups.</p> <p>Family Hubs will work alongside partner agencies, community groups and faith organisations to identify ethnic minority children, families, and communities in the local</p>

	<p>area to provide local solutions to service provision e.g., specifically designed groups and interventions to improve outcomes for diverse ethnic communities.</p> <p>Enhanced community working and support from volunteer and peer support networks should increase awareness of services and access routes. Universal health services within the Start for Life offer may use interpretation services to support services for one-to-one support. In areas of higher need (e.g., in Dartford and Gravesham 15% of children don't have English as their main language) promotional materials should be available in alternative languages where possible e.g., for targeted campaigns.</p> <p>Family Coaches and volunteers may assist individuals who feel that services don't understand the challenges they face. This should assist with greater engagement and the opportunity to offer support. The Family Coaches, volunteers and any peer to peer groups much reflect the ethnic diversity of local populations. In Dartford and Gravesham there will be proactive engagement of community groups to engage a diverse group of Family Coaches.</p> <p>The Family Hubs Model expectation is that information for families meets the Accessible Information Requirement and is made available in local languages. Analysis of the sites with the greatest impact suggests that the following language are most widely spoken in the catchment areas of these impacted centres: Nepali, Polish, Romanian, Urdu, Tamil, Yoruba and French.</p>
<b>Responsible Officer for Mitigating Actions - Race</b>	Danielle Day Programme Manager – Family Hubs
<b>24. Negative Impacts and Mitigating actions for Religion and belief</b>	
<b>Are there negative impacts for Religion and Belief?</b> <i>Answer: Yes/No (If yes, please also complete sections b, c, and d).</i>	No
<b>Details of Negative Impacts for Religion and belief</b>	<p>There is currently no direct data which measures religion of children and young people or parents of children and young people living in Kent. The only data collected is related to the overall population and based on the 2021 Census data. The Council provides services to children, young people, and their families, irrespective of their religion or beliefs.</p> <p>We recognise this as an area of development, and will ensure within our future work to develop the model we will proactively reach community and faith groups to engage the service user voice from these seldom heard groups and those with protected characteristics.</p>
<b>Mitigating Actions for Religion and belief</b>	N/A
<b>Responsible Officer for Mitigating Actions - Religion and belief</b>	N/A
<b>25. Negative Impacts and Mitigating actions for Sexual Orientation</b>	
<b>Are there negative impacts for sexual orientation.</b> <i>Answer: Yes/No (If yes, please also complete sections b, c, and d).</i>	Yes
<b>Details of Negative Impacts for Sexual Orientation</b>	The pre-consultation EqIA did not identify any negative impacts for Gender identity/transgender. However, 19% of responders to the consultation commented on

	<p>the Equality Analysis and 4% of respondents (6 responders) felt that LGBTQIA+ were adversely affected and not considered adequately.</p> <p>Young people within the sexual orientation characteristic may be impacted by the requirement to share youth centre space with an early years (0-5) setting. Feedback from the consultation demonstrates that young people that access youth centres are not in favour of this as they may feel unable to use the centre to highlight issues related to gender identity, sexual health and LGBTQ issues.</p> <p>Our services are open to all individuals, but we recognise that accessing services can be challenging. Some LGBTQ+ individuals who are concerned about accessing face to face services may benefit from our online digital and virtual offer.</p> <p>There are areas within service user groups with protected characteristics that we don't have data from the consultation or from across the service. We recognise this as an area of development, and will ensure within our future work to develop the model we will proactively reach groups to engage the service user voice from these seldom heard groups and those with protected characteristics.</p>
<p><b>Mitigating Actions for Sexual Orientation</b></p>	<p>KCC will continue to provide an in-house youth provision which will remain a mixture of centre based and outreach activity. We will also undertake targeted work through local community groups to continue support for LGBTQ+ youth and allies in a safe environment where required.</p> <p>Our digital content and our Family Hub network will be able to provide information, advice, and support for a range of issues concerning sexual orientation.</p> <p>We will work with local community organisations to ensure provision (based on local need) includes targeted services for LGBTQ+ individuals or are well sighted on how to make groups more inclusive.</p> <p>Our workforce development programme will also include a focus on inclusive practice. We will work with and co-produce services with all service users to ensure that activities take place in safe spaces.</p>
<p><b>Responsible Officer for Mitigating Actions - Sexual Orientation</b></p>	<p>Danielle Day Programme Manager – Family Hubs</p>
<p><b>26. Negative Impacts and Mitigating actions for Pregnancy and Maternity</b></p>	
<p><b>Are there negative impacts for Pregnancy and Maternity?</b> <i>Answer: Yes/No (If yes, please also complete sections b, c, and d).</i></p>	<p>Yes</p>
<p><b>Details of Negative Impacts for Pregnancy and Maternity</b></p>	<p><b>Consultation Response</b> As is seen in the response to the consultation, 62% of female respondents oppose the proposal to have fewer buildings compared to 34% of male respondents. Equally 69% of female respondents oppose the co-location of services, compared to 26% of male respondents. This is likely due to the fact that women are more likely to take on greater responsibilities for childcare and the majority of the reduction in buildings is across the Children's Centre estate (83% of respondents with children under 1 year old oppose the proposals to have fewer buildings). 4% of respondents to the consultation indicated that they were pregnant.</p>

	<p>The proposals within Options 1, 2, 3 and 4 would require individuals to travel further, likely on public transport which may be difficult for pregnant women or those with children, pushchairs, and additional equipment. The crossover with other protected characteristics, including age, disability, sex and those with carers responsibilities needs considering as the impact on these protected characteristics combined would be greater.</p> <p>By virtue of the fact that the number of building closures <i>decreases</i> progressively between option 1 and 2, further between option 2 and 3, and then again between option 3 and 4, it is clear that the significance of the impacts across the County would lower depending on which option is chosen.</p> <p>Option 5 is the 'Do Nothing' option and as such, if Members decided to proceed with Option 5, there would be no change in equalities impacts.</p> <p><b>Access</b> Family Hubs bring together Midwifery and Health Visiting offering services to pregnant women and parents. This includes clinics, sleep and introducing solids workshops, ante-natal and post-natal support.</p> <p>Parents-to-be and new parents (up to 28 weeks) are likely to be impacted by the proposal as some of the services involved are designed specifically for them. The Health Visiting Service includes contact and offers of support following the birth of a baby, and in the first 6-8 weeks, as well as offering breast feeding support, healthy child clinics and developmental review clinics. The majority of children access existing Children's Centre are under 1 year old – whilst we don't have a breakdown of how many of these have children under 28 weeks, it is likely they will be accessing services to support early developmental child outcomes, as well as emotional and practical support as a new parent.</p> <p>We recognise that expectant mothers may need to access services differently, may need to travel to alternative locations and may receive a different type of service than previously offered. Travel costs and accessibility could become a barrier to access and, if this is the case, this could affect their ability to access the support required when needed.</p> <p>The Family Hub model includes midwifery and Health Visiting support which includes home visiting services, this will not change with any of the Family Hub implementation options.</p> <p><b>Perinatal mental health</b> Local research <a href="https://www.kpho.org.uk/perinatal-mental-health-needs-assessment.pdf">Perinatal-Mental-Health-Needs-Assessment.pdf (kpho.org.uk)</a> and learning from the pandemic has shown us that some new parents faced increased feelings of isolation, which can be a contributing factor to poor perinatal mental health.</p> <p><b>Co-location</b> Our co-located spaces it may be busier at certain times or have a greater proportion of men and those who haven't experienced pregnancy which may be intimidating or distressing for pregnant women or very new parents.</p>
<p><b>Mitigating Actions for Pregnancy and Maternity</b></p>	<p>Across the options presented for Member decision the impact of change on all protected characteristics, including pregnancy and maternity, are mitigated to different</p>

degrees by retaining progressively more buildings in Options 3 and 4 compared to the consultation model presented in Option 2. In Options 3 and 4, the Needs Framework has been amended to give progressively greater weight to the analysis of the public transport network. Therefore, in Options 3 and 4 progressively fewer buildings are proposed for closure, which reduces the requirement for residents to use public transport to access services in alternative locations. Option 5 does not make any changes and so there are no equalities impacts to mitigate.

Family Hubs will increase access to perinatal mental health, infant feeding and infant relationship support across the county. The Family Hub network will include a range of providers who will be able to signpost individuals to support, advice and guidance and existing networks that can be accessed including community-based provision where available.

Where there are barriers to access, staff will be able to assess need to determine if direct support from a Family Hub is appropriate.

In terms of the ability to develop friendships and supportive relationships, our proposed Peer to Peer support offer will play some part in mitigating against the potential loss of informal networks.

The workforce development opportunities for the Family Hub network will ensure that a wide range of providers, including front of house staff, are able to understand key issues and provide information related to early parenthood.

The Family Hub model includes the outreach offer and work through the Family Hub network will assist us able to identify the greatest need and respond appropriately.

Outreach work in the community within the Family Hub model will be delivered across both urban and rural localities informed by need/data.

Outreach is community-based provision, delivered in non-Family Hub sites such as libraries, community centres and may take place in family homes (for example health visitors attending a family home).

It will not be possible to have a Family Hub site in all localities, particularly in rural areas with low population density as outlined within the Kent Communities programme. Outreach delivery will improve reach to isolated and/or vulnerable communities through its flexibility/agility in responding to need and not being tied to a physical Family Hub site location.

Our enhanced digital offer will include signposting to digital apps and may include virtual delivery options.

### **Co-location**

During feasibility work for co-location we have sought to provide private spaces either within separate rooms or via screening to allow for privacy for expectant or new parents. This will continue to inform the design of co-location spaces as they develop. We will continue existing practice of considering the timings of groups and appointment to create a welcoming inclusive environment for everyone in collaboration with other services.

### **Perinatal Mental Health**

	We will continue to use our buildings, outreach spaces and technology to support new parents to foster good relationships to combat feelings of isolation. Consistently accessing services through a Family Hub should support pregnant women and new mothers to maintain connection to a community.
<b>Responsible Officer for Mitigating Actions - Pregnancy and Maternity</b>	Danielle Day Programme Manager – Family Hubs
<b>27. Negative Impacts and Mitigating actions for marriage and civil partnerships</b>	
<b>Are there negative impacts for Marriage and Civil Partnerships?</b> <i>Answer: Yes/No (If yes, please also complete sections b, c, and d).</i>	No
<b>Details of Negative Impacts for Marriage and Civil Partnerships</b>	N/A
<b>Mitigating Actions for Marriage and Civil Partnerships</b>	N/A
<b>Responsible Officer for Mitigating Actions - Marriage and Civil Partnerships</b>	N/A
<b>28. Negative Impacts and Mitigating actions for Carer’s responsibilities</b>	
<b>Are there negative impacts for Carer’s responsibilities?</b> <i>Answer: Yes/No (If yes, please also complete sections b, c, and d).</i>	Yes
<b>Details of Negative Impacts for Carer’s Responsibilities</b>	<p>67% (612) of the responders had children and therefore caring responsibilities. Proposed closure of Children’s Centres could carers and their ability to access provision. For parents caring for a disabled child, this is likely to mirror the impacts identified for disability.</p> <p>It is possible that Young Carers (those under 18) are also accessing our youth provision and the young person’s counselling services independently, despite not having a disability, illness, or substance misuse issue themselves. They may also be supporting younger siblings to access Family Hub services.</p> <p>Carers living within the catchment areas of the Children’s Centre sites proposed for closure, could be adversely impacted as alternative sites might be prohibitive for those with caring responsibilities in terms of location and their ability to be able to independently travel there, travel costs, regularity of public transport. This is particularly pertinent for young carers who may have very limited travel options that are typical of their age but compounded by their caring responsibility, particularly if their household doesn’t have a member with a driver’s license.</p> <p>We recognise that carers may need to factor in more additional time to manage transport and accessibility issues, and any changes may be a barrier for some. Changes of timing, location or offer may be a barrier for young carers.</p>
<b>Mitigating Actions for Carer’s responsibilities</b>	<p>Where there are barriers to access, staff will be able to assess need to determine if direct support from a Family Hub is appropriate.</p> <p>We will signpost individuals to alternative provisions where appropriate, for example, to Carers Support Services where other respite may be available. Our data driven approach and working through the Family Hub network will help us target young carers and provide support accordingly.</p>

	<p>Working with other partners such as community and voluntary groups there will be wider information to local groups and other support; we propose to facilitate opportunities through co-design for parents to create their own groups and develop more peer-to-peer support.</p> <p>We will develop more community support were there are requests for support to set up a group with provision of our expertise to support new group development.</p> <p>We will ensure our digital offer is co-produced with carers and young carers to best meet their needs and that information is up to date and easy to access.</p> <p>We will encourage participation and engagement in our Parent-Carer Panels to enable meaningful co-design of services to suit the needs of carers.</p> <p>Young carers will be encouraged to take the opportunity to co-design services suitable for their needs.</p> <p>Kinship carers will be provided with information, advice, and support to access appropriate services.</p>
<p><b>Responsible Officer for Mitigating Actions - Carer's Responsibilities</b></p>	<p>Danielle Day Programme Manager – Family Hubs</p>

## EQIA Submission Draft Working Template

If required, this template is for use prior to completing your EQIA Submission in the EQIA App.

You can use it to understand what information is needed beforehand to complete an EQIA submission online, and also as a way to collaborate with others who may be involved with the EQIA.

Note: You can upload this into the App when complete if it contains more detailed information than the App asks for and you wish to retain this detail.

### Section A

<b>1. Name of Activity (EQIA Title):</b>	Kent Communities Programme (Community Assets) – Principle of Co-Location Proposals
<b>2. Directorate</b>	DCED/GET
<b>3. Responsible Service/Division</b>	INF/LRA

### Accountability and Responsibility

<b>4. Officer completing EQIA</b> Note: This should be the name of the officer who will be submitting the EQIA onto the App.	Ben Sherreard / Jackie Taylor-Smith
<b>5. Head of Service</b> Note: This should be the Head of Service who will be approving your submitted EQIA.	Rebecca Spore / James Pearson
<b>6. Director of Service</b> Note: This should be the name of your responsible director.	Rebecca Spore / Stephanie Holt-Castle

### The type of Activity you are undertaking

#### 7. What type of activity are you undertaking?

Tick if Yes	Activity Type
Yes	<b>Service Change</b> – operational changes in the way we deliver the service to people.
	<b>Service Redesign</b> – restructure, new operating model or changes to ways of working
Yes	<b>Project/Programme</b> – includes limited delivery of change activity, including partnership projects, external funding projects and capital projects.
	<b>Commissioning/Procurement</b> – means commissioning activity which requires commercial judgement.
	<b>Strategy /Policy</b> – includes review, refresh or creating a new document
	<b>Other</b>

**8. Aims and Objectives and Equality Recommendations** – Note: You will be asked to give a brief description of the aims and objectives of your activity in this section of the App, along with the Equality recommendations. You may use this section to also add any context you feel may be required.

#### Equality Impact Assessment

This EQIA is intended to assess the potential impact of our decisions on persons with different protected characteristics. In particular, this EQIA has been prepared to help us to have regard to the need to: (i) eliminate discrimination; (ii) advance the equality of opportunity; and (iii) foster good relations between persons who share a relevant protected characteristic and those who do not, in the exercise of our public functions. These issues are relevant considerations to be taken into account whenever a new policy, function, or system change is being proposed



in the exercise of our public functions. This EQIA is also intended to evidence that these considerations have in fact been taken into account, and the weight given to them as part of our decision-making process.

**This EqIA refers the proposals to co-locate services and the impact that the co-locations will have on users of the library service. The services in scope have developed their own EqIAs which assess the impact of the Kent Communities Proposals as they relate to their specific service areas. Equally the overall Programme impact is considered in a separate EqIA – ‘Kent Communities Programme EqIA’. As the co-location proposals progress through the next stages of design, site specific Equalities impact Assessments will be undertaken for each individual site based on the final design for the co-location.**

### **The Case for Change - Kent Communities Programme**

The Council is facing very significant financial pressures, for a number of reasons set out in 'Securing Kent's Future' (August 2023 and October 2023). That document sets out the urgent steps needed to return the Council to financial sustainability, by reducing overspend in its budget to avoid further need to use limited reserves to fund revenue overspends, which would weaken the financial resilience of the authority and limit the scope for the use of reserves to invest in transformation necessary to address the structural deficit.

The financial challenges faced by the Council cannot be ignored. Two particularly significant factors, are the Council's statutory 'best value' duty to deliver a balanced budget, provide statutory services, including adult social care and children's services, and secure value for money in all spending decisions; and the Council's other statutory duties.

The Kent Communities Programme seeks to rationalise our physical estate and propose a greater mix of alternative methods of service delivery across the County, informed by a clear and data-driven understanding of service need. Delivery of this programme has become more important in the light of the increased financial pressures faced by the Council. The programme also seeks to reduce the Council's carbon footprint, in line with our Net Zero 2030 approach, although this is a secondary factor given the overarching financial context. The programme does include elements of improvement to service delivery: for example benefits offered by co-location of services.

However, the Council must acknowledge that the impact of closures and reductions in services on residents can be significant. The approach set out in these proposals is therefore based on a relative needs assessment. Mitigating measures are set out, which are intended to minimise as far as possible the impact of the proposals on Kent residents.

A detailed and extensive public consultation ([www.kent.gov.uk/communityservicesconsultation](http://www.kent.gov.uk/communityservicesconsultation)) allowed consultees the opportunity to give their views on the proposals. These responses have been analysed and carefully considered. A range of options have been developed, informed by the consultation responses. This EQIA has been updated following feedback from that consultation and is also based on data and evidence about Kent's communities and our service users.

### **The Consultation**

The Kent Communities proposal has been subject to a public consultation. The consultation launched on 17<sup>th</sup> January 2023 and lasted for ten weeks, closing on 26 March 2023. The consultation set out the rationale for the proposals, the methodology which was used to produce the draft proposal and the details of the Kent Communities model (i.e. which buildings we were proposing to close and which we were proposing to retain). These proposals have now moved on following the consultation and the options are detailed below.

#### *Rationale*

The rationale for the KCP is clear. The Programme contributes to meeting the revenue savings as set out in the Medium-Term Financial Plan (MTFP). To reduce risks across our corporate estate and capital programme, the KCP reduces the Council's capital liability to the maintenance costs of such a large physical estate.

#### *Methodology*

The consultation explained the methodology underpinning the Kent Communities proposal, including how we used the Needs Framework as a starting point. The Need Framework used a wide range of data and indicators that when combined profile the different level of need for services within our communities. The data included service-held metrics, such as user figures for each service.

In developing the alternative range of options for member consideration the impact on equalities has been taken into account. The impact on the current library service users is taken into account within this EqlA.

### Consultation Response

Overall, 48% (of 1,583 responses) of respondents disagree with the proposals to co-locate services together. Whilst there were some comments in support of the proposals, many raised concerns about the suitability of alternative locations for co-location of services and the accessibility of these sites for users. This will be acknowledged and considered in the site-specific EqlAs once designs are developed further.

Women were far more likely to oppose co-location of services than men and respondents with children under 10 were far more likely to disagree with co-location than those without:

Male resident	26%
Female resident	49%
Resident with no children	22%
Resident with children aged 0-1 years old (250)	61%
Resident with children aged 2-5 years old (243)	68%
Resident with children aged 6-10 years old (142)	54%

This suggests that the co-location proposals that impact women and children – where co-location between a library and a Family Hub is proposed – will require particular consideration.

The most common concern expressed in the consultation response regarding the general co-location of services (not specific to any one service) were:

Users being able to get there / travel there / can't walk to alternatives / need close location of services	51%
Public transport availability / cost of / reduction in service	33%
Practicality of co-located services (e.g. children's centre in same space as library)	22%
Impact on users unable to access the service / impact on vulnerable / mental health / taking away a lifeline / hub of community	21%
Suitability of building / fit for purpose / the space	19%
Maintaining service levels / impact on service levels	14%

### Summary of Options

Within option 1, 2, 3 and 4 the proposals include co-location of services within Library buildings as follows:

<b>Building</b>	<b>Proposed service to co-locate</b>
Stanhope Library	Library and Family Hub
Temple Hill Library	Library and Family Hub
Gravesend Library	Library and Gateway
Kent History and Library Centre	Library and Gateway
Sevenoaks Library	Library and Community Day Services for Adults with Learning Disabilities
Queenborough Library	Library and Family Hub
Sittingbourne Library	Library and Family Hub
Ramsgate Library	Library and Family Hub
Cliftonville Library	Library and Community Day Services for Adults with Learning Disabilities
Tonbridge Gateway	Library and Gateway
Cranbrook Library	Library and Family Hub

Option 5 is our 'Do Nothing' option, in which case the proposed co-location of services in the table above would not proceed.

### **Justification**

The co-location proposals are the same across Options 1, 2, 3 and 4 and so the equalities impacts will be common between these options. Option 5 would not see any change and therefore there would not be any impact on equalities. Whilst there will be some positive impacts in that service users accessing their primary service would be able to access a range of other KCC services, it is important to assess the impacts of co-location proposals on the existing users of the library service.

Broadly, the mitigations against the impacts will include careful design of co-located spaces, with the considered input of service leads, expert in the requirement of their existing user base. It is very important to acknowledge that the Council already successfully operates co-locations across the County, including every specific mix proposed within the Kent Communities Proposal.

Across the programme the impacts are considered to be adequately mitigated and justified given the wider policy and financial context within which the Council currently operates. As set out above, the impacts for each site will be acknowledged and considered in the site-specific EqlAs once designs are developed further.

## **Section B – Evidence**

*Note: For questions 9, 10 & 11 at least one of these must be a 'Yes'. You can continue working on the EQIA in the App, but you will not be able to submit it for approval without this information.*

**9. Do you have data related to the protected groups of the people impacted by this activity? Answer: Yes/No**

Yes, an analysis of the protected characteristics of the respondents to the consultation is as follows:

**Gender**

Male 18%  
 Female 81.3%  
 Prefer not to say 0.7%

**Same Gender as birth**

Yes 99%  
 Prefer not to say 1%

**Pregnant**

	<p>Yes – 28 out of 870 responses</p> <p><b>Religion</b>  Christian 90.2%  Buddhist 0.3%  Hindu 0.7%  Jewish 0.7%  Muslim 0.7%  Prefer not to say 2.6%  Other 4.9%  Sikh 0%</p> <p><b>Disability</b>  Yes 14.3 %  No 83.5%  Prefer not to say 2.2%</p> <p><b>Sexual Orientation</b>  Heterosexual/Straight 89.7%  Bi/Bisexual 2%  Gay man 0.4%  Gay woman/Lesbian 1.3%  Prefer not to say 6%  Other 0.6%</p> <p><b>Ethnicity</b>  White English 87.6%  White Scottish 1.1%  White Welsh 0.5%  White Northern Irish 0.2%  White Irish 0.7%  White Gipsy/Roma 0.1%  Asian or Asian British Indian 0.4%  Asian or Asian British Bangladeshi 0.1%  Mixed White and Black Caribbean 0.1%  Mixed White and Black African 0.1%  Mixed White and Asian 0.4%  Black or Black British Caribbean 0.2%  Black or Black British African 0.1%  I prefer not to say 2.2%  Other 6%  White Irish Traveller 0%  Asian or Asian British Pakistani 0%  Arab 0%  Chinese 0%</p>
<p><b>10. Is it possible to get the data in a timely and cost effective way?</b> <i>Answer: No</i></p>	<p>Will be identified during next phase local demography</p>
<p><b>11. Is there national evidence/data that you can use?</b> <i>Answer: Yes</i></p>	<p>Yes -</p>
<p><b>12. Have you consulted with Stakeholders?</b></p>	<p>Yes</p>

<p><i>Answer: Yes/No</i>  <i>Stakeholders are those who have a stake or interest in your project which could be residents, service users, staff, members, statutory and other organisations, VCSE partners etc.</i></p>	
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**13. Who have you involved, consulted and engaged with?**  
*Please give details in the box provided. This may be details of those you have already involved, consulted and engaged with or who you intend to do so with in the future. If the answer to question 12 is 'No', please explain why.*

Engagement in a general context took place with stakeholders prior to the launch of the public consultation including:

- KCC members and senior officers
- Service delivery team members and property team members as part of the design process
- District authorities
- External partners including NHS and Kent Fire and Rescue

A full 10-week consultation process was carried out between 17 January 2023 and 26 March 2023, this gave an opportunity to residents, community groups and all interested parties to give feedback on the proposed changes to service delivery across the county. During this consultation there were face to face sessions held, and over 150 hours of proactive engagement with residents, service users (including groups of users in locations proposed for closure), partners, staff, unions and members.

Of the 1,776 consultees who took part, 18% of consultees provided a response to our specific question about the equality analyses we had conducted prior to, and published together with, our consultation. A more detailed breakdown of the responses within the consultation and the equalities considerations is given above.

<b>14. Has there been a previous equality analysis (EQIA) in the last 3 years?</b> <i>Answer: Yes/No</i>	Yes – pre-consultation EqIA
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<b>15. Do you have evidence/data that can help you understand the potential impact of your activity?</b> <i>Answer: Yes/No</i>	Yes.
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<p><b>Uploading Evidence/Data/related information into the App</b>  <i>Note: At this point, you will be asked to upload the evidence/ data and related information that you feel should sit alongside the EQIA that can help understand the potential impact of your activity. Please ensure that you have this information to upload as the Equality analysis cannot be sent for approval without this.</i></p>	Demographic data that informed the need framework. Consultation report with stats on feedback received.
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**Section C – Impact**

**16. Who may be impacted by the activity?** *Select all that apply.*

Service users/clients <i>Answer: Yes/No</i>	Yes	Residents/Communities/Citizens <i>Answer: Yes/No</i>	Yes
Staff/Volunteers <i>Answer: Yes/No</i>	Yes		

<b>17. Are there any positive impacts for all or any of the protected groups as a result of the activity that you are doing?</b> <i>Answer: Yes/No</i>	Yes
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**18. Please give details of Positive Impacts**

The principles of the Kent Communities Programme are built on the ambition to provide a more cohesive range of community services to residents so that different needs can be met in the most accessible and efficient way possible.

By increasing the Gateways service overall (albeit with part-time provision at new locations), and co-locating with other services, we will be able to present a more coordinated overall service offer to our communities increasing access to complimentary KCC services for our users.

The co-location of services for Adults with Learning Disabilities proposed will help to advance the equality of opportunity between those individuals who share a relevant protected characteristic and those that do not. It will also help to foster good relations between those individuals who share a relevant protected characteristic and those that do not. Both of these factors are in line with the second and third considerations of s149 (1) of the Equality Act (2010).

The proposed changes to the Adult Education service will result in services being delivered from a building in much better condition, resulting in a more pleasant and conducive learning environment.

Proposals for co-location with Libraries, Community Learning and Skills, Adult Social Care and Family Hub services. By co-locating with a mix or range of these services within the same buildings, we are presenting a more unified service offer to the resident, so it is easier for them to access a broader range of services from a single location.

We will also be able to offer space for a range of partners to deliver services from this location and benefit from a range of services under one roof. For example, it is anticipated that our Meet and Greet staff will also have knowledge of services available from the local Borough council as well as third sector partners, to enable effective sign posting. Similarly, the link between Birth Registrations and Family Hub services is strengthened by co-locating Libraries and Family Hubs together.

Residents with some protected characteristics (sex, age, disability and race) are likely to be impacted more by the proposed building closures. These same groups are likely to also benefit from co-location of services, mindful of specific mitigations such as continued accessibility compliance of co-location sites and the provision of private/confidential areas. Residents in these groups will be able to utilise these services will benefit from a reduced number of journeys by having KCC services located nearby/ together. It is also possible that there will be benefits for residents from different races as co-location will help those whose first language is not English, as they will not need to navigate multiple locations.

## Negative Impacts and Mitigating Actions

The questions in this section help to think through positive and negative impacts for people affected by your activity. Please use the Evidence you have referred to in Section B and explain the data as part of your answer.

### 19. Negative Impacts and Mitigating actions for Age

<p><b>u) Are there negative impacts for age?</b> <i>Answer: Yes/No (If yes, please also complete sections b, c, and d).</i></p>	<p>Yes</p>
<p><b>v) Details of Negative Impacts for Age</b></p>	<p>As set out above, the consultation response across the whole scope of proposals demonstrates a much greater level of opposition to both reductions in buildings and co-locations in the 25-24 age bracket. 81% of respondents in that age bracket oppose the proposals to have fewer buildings. This is likely due to the fact that residents in this age bracket have a higher chance of having children between the ages of 0-5 years old, and the majority of the reduction in buildings is across the Children's Centre estate (83% of respondents with children under 1 year old oppose the proposals to have</p>

	<p>fewer buildings). As age increases, the opposition to co-locations decreases.</p> <p>The impact of co-location on young parents and children is addressed in separate EqlAs.</p> <p>The impact of co-location of other services into library settings on elderly library users does require consideration. These users may find it more difficult, or overwhelming to access the library service with which they are familiar with other services being delivered – particularly if they are noisier sessions as part of the Family Hub offer. If elderly residents also experience a disability or mobility issues, then the impact of these changes will be more significant. It is worth acknowledging that the current library service already delivers activities that would be considered busier and ‘noisier’.</p>
<p><b>w) Mitigating Actions for age</b></p>	<p>It is very important to acknowledge that the Council already successfully operates co-locations across the County, including every specific mix proposed within the Kent Communities Proposal.</p> <p>Regardless of this, mitigations against the impacts on age will include careful design of co-located spaces, with the considered input of service leads, expert in the requirement of their existing user base.</p> <p>Staff in co-located sites will be provided with guidance to support and signpost elderly residents and ensure that any scheduled sessions that may be overwhelming are well advertised.</p>
<p><b>x) Responsible Officer for Mitigating Actions – Age</b></p>	<p>Ben Sherreard / Jackie Taylor-Smith / Local Manager</p>
<p><b>20. Negative Impacts and Mitigating actions for Disability</b></p>	
<p><b>u) Are there negative impacts for Disability?</b> <i>Answer: Yes/No (If yes, please also complete sections b, c, and d).</i></p>	<p>Yes</p>
<p><b>v) Details of Negative Impacts for Disability</b></p>	<p>14% of consultation respondents indicated that they experience a disability and 48% of all respondents disagree with the proposals to co-locate services. The negative impacts on residents experiencing a disability do interplay with other protected characteristics as already outlined, particularly between age.</p> <p>Co-location of services into Library buildings may cause distress for library users that suffer from disabilities as they may be required to navigate around buildings in a</p>

	different way if the layout changes to accommodate the mix of services.
<b>w) Mitigating Actions for Disability</b>	<p>It is very important to acknowledge that the Council already successfully operates co-locations across the County, including every specific mix proposed within the Kent Communities Proposal.</p> <p>The co-location sites will be brought forward with the assistance of professional design and construction partners and the considered input of library service representatives. They will consider both the needs of the existing user base and accessibility compliance and regulations as part of the design work and implementation of changes that facilitate the co-location. This will include provision of accessible facilities, accessibility compliant buildings and relevant wayfinding provision.</p> <p>Staff in co-located sites will be provided with guidance to support and signpost residents that experience a disability of mobility issues and ensure that any scheduled sessions that may be overwhelming are well advertised.</p>
<b>x) Responsible Officer for Mitigating Actions - Disability</b>	Ben Sherreard / Jackie Taylor-Smith / Local Manager
<b>21. Negative Impacts and Mitigating actions for Sex</b>	
<b>u) Are there negative impacts for Sex? Answer: Yes/No (If yes, please also complete sections b, c, and d).</b>	Yes
<b>v) Details of Negative Impacts for Sex</b>	<p>69% of female respondents oppose the co-location of services, compared to 26% of male respondents. This is likely due to the fact that women are more likely to take on greater responsibilities for childcare and the majority of the reduction in buildings is across the Children's Centre estate (83% of respondents with children under 1 year old oppose the proposals to have fewer buildings).</p> <p>Where we are proposing to co-location with other services, there may be a higher proportion of men in the building than at present. Both male and female service users may feel uncomfortable by this, particularly where they may be breast feeding.</p>
<b>w) Mitigating Actions for Sex</b>	It is very important to acknowledge that the Council already successfully operates co-locations across the County, including every specific mix proposed within the Kent Communities Proposal.



	The co-location sites will be brought forward with the assistance of professional design and construction partners and the considered input of library service representatives. They will consider the necessary provision of baby change, breastfeeding and toilet facilities as well as confidential/private spaces so that existing users are not subject to overhearing conversations they may find distressing.
<b>x) Responsible Officer for Mitigating Actions - Sex</b>	Ben Sherreard / Jackie Taylor-Smith / Local Manager
<b>22. Negative Impacts and Mitigating actions for Gender identity/transgender</b>	
<b>q) Are there negative impacts for Gender identity/transgender? Answer: Yes/No (If yes, please also complete sections b, c, and d).</b>	Yes
<b>r) Details of Negative Impacts for Gender identity/transgender</b>	<p>4% of respondents to the consultation raised the issue of effects on disadvantage ethnic minorities / English as a second language / refugees / travellers / LGBTQ.</p> <p>Young people may be impacted by the requirement to share youth centre space with existing library service users. People that access youth centres raise concerns with this as they may feel unable to use the centre to highlight issues related to gender identity, sexual health and LGBTQ issues.</p>
<b>s) Mitigating actions for Gender identity/transgender</b>	<p>Existing library users (as well as youth service users) will be protected by timetabling activity within the new Family Hub model and through design within spaces to provide separate time of use and where possible dedicated areas/settings for youth provision, including space for confidential conversations.</p> <p>We have examples of being able to do this successfully within our current estate and service models.</p>
<b>t) Responsible Officer for Mitigating Actions - Gender identity/transgender</b>	Ben Sherreard / Jackie Taylor-Smith / Local Manager
<b>23. Negative Impacts and Mitigating actions for Race</b>	
<b>u) Are there negative impacts for Race? Answer: Yes/No (If yes, please also complete sections b, c, and d).</b>	Yes.
<b>v) Details of Negative Impacts for Race</b>	<p>With more services in buildings, it may be more difficult for library users with limited English language and literacy to navigate the various services. This could lead to people feeling overwhelmed and not able to find where they need to go very easily.</p> <p>The co-locations at Stanhope Library and Temple Hill Library are likely to be accessed by a large number of people from different ethnic populations. There may be high demand for services which may result in waiting lists</p>

	<p>for spaces on particular groups, particularly affecting those from different ethnic populations given the high number currently accessing services proposed to relocate to these co-located sites.</p> <p>Whilst we endeavour to provide enough activities to meet demand, space may be prohibitive of additional groups, highlighting the importance of creating new opportunities through local community groups.</p>
<b>w) Mitigating Actions for Race</b>	<p>It is very important to acknowledge that the Council already successfully operates co-locations across the County, including every specific mix proposed within the Kent Communities Proposal.</p> <p>Staff in co-located sites will be provided with guidance to support and signpost residents that do not use English as their first language.</p> <p>We will look to introduce a meet and greet service in new community hubs to support people to find the right service.</p> <p>We will work with other services to ensure a welcoming environment for all service users.</p>
<b>x) Responsible Officer for Mitigating Actions - Race</b>	Ben Sherreard / Jackie Taylor-Smith / Local Manager
<b>24. Negative Impacts and Mitigating actions for Religion and belief</b>	
<b>q) Are there negative impacts for Religion and Belief?</b> <i>Answer: Yes/No (If yes, please also complete sections b, c, and d).</i>	No.
<b>r) Details of Negative Impacts for Religion and belief</b>	
<b>s) Mitigating Actions for Religion and belief</b>	
<b>t) Responsible Officer for Mitigating Actions – Religion and belief</b>	
<b>25. Negative Impacts and Mitigating actions for Sexual Orientation</b>	
<b>q) Are there negative impacts for sexual orientation.</b> <i>Answer: Yes/No (If yes, please also complete sections b, c, and d).</i>	Yes
<b>r) Details of Negative Impacts for Sexual Orientation</b>	<p>4% of respondents to the consultation raised the issue of effects on disadvantage ethnic minorities / English as a second language / refugees / travellers / LGBTQ.</p> <p>Young people may be impacted by the requirement to share youth centre space with existing library service users. People that access youth centres raise concerns with this as they may feel unable to use the centre to</p>

	highlight issues related to gender identity, sexual health and LGBTQ issues.
<b>s) Mitigating Actions for Sexual Orientation</b>	<p>Existing library users (as well as youth service users) will be protected by timetabling activity within the new Family Hub model and through design within spaces to provide separate time of use and where possible dedicated areas/settings for youth provision, including space for confidential conversations.</p> <p>We have examples of being able to do this successfully within our current estate and service models.</p>
<b>t) Responsible Officer for Mitigating Actions – Sexual Orientation</b>	Ben Sherreard / Jackie Taylor-Smith / Local Manager
<b>26. Negative Impacts and Mitigating actions for Pregnancy and Maternity</b>	
<b>o) Are there negative impacts for Pregnancy and Maternity? Answer: Yes/No (If yes, please also complete sections b, c, and d).</b>	Yes
<b>p) Details of Negative Impacts for Pregnancy and Maternity</b>	<p>Within the consultation response it is evident that those with children under 5 years oppose the co-location of services.</p> <p>Our co-located spaces it may be busier at certain times or have a greater proportion of men and those who haven't experienced pregnancy.</p> <p>The impact on pregnant women, or new parents accessing the library service also requires consideration. The introduction of new services into a library building may mean library services are more difficult to access or the building itself is more difficult to navigate for expectant mother and new parents.</p>
<b>q) Mitigating Actions for Pregnancy and Maternity</b>	<p>It is very important to acknowledge that the Council already successfully operates co-locations across the County, including every specific mix proposed within the Kent Communities Proposal.</p> <p>During feasibility we endeavour to find a private room for delivery of health visiting services as well as more private/confidential conversations.</p> <p>Library staff will be provided guidance to help signpost and support pregnant women and new parents accessing the library service within co-location sites.</p> <p>We will continue existing practice of considering the timings of groups and appointment to create a</p>

	<p>welcoming inclusive environment for everyone in collaboration with other services.</p> <p>The co-location between Family Hubs and Library services will strengthen the link between the two service areas relating to Birth Registrations.</p>
<b>r) Responsible Officer for Mitigating Actions – Pregnancy and Maternity</b>	Ben Sherreard / Jackie Taylor-Smith / Local Manager
<b>27. Negative Impacts and Mitigating actions for marriage and civil partnerships</b>	
<b>q) Are there negative impacts for Marriage and Civil Partnerships? Answer: Yes/No (If yes, please also complete sections b, c, and d).</b>	No.
<b>r) Details of Negative Impacts for Marriage and Civil Partnerships</b>	
<b>s) Mitigating Actions for Marriage and Civil Partnerships</b>	
<b>t) Responsible Officer for Mitigating Actions - Marriage and Civil Partnerships</b>	
<b>28. Negative Impacts and Mitigating actions for Carer’s responsibilities</b>	
<b>q) Are there negative impacts for Carer’s responsibilities? Answer: Yes/No (If yes, please also complete sections b, c, and d).</b>	Yes
<b>r) Details of Negative Impacts for Carer’s Responsibilities</b>	<p>The negative impacts on residents with carer’s responsibilities do interplay with other protected characteristics as already outlined, particularly between age and disability.</p> <p>Co-location of services into Library buildings may cause uncertainty for library users that have carer’s responsibilities as they may be required to navigate around buildings in a different way if the layout changes to accommodate the mix of services. The impact of additional uses and therefore additional service users may also negatively impact residents with carer’s responsibilities by leading to a minor overwhelming atmosphere within the library building.</p>
<b>s) Mitigating Actions for Carer’s responsibilities</b>	<p>It is very important to acknowledge that the Council already successfully operates co-locations across the County, including every specific mix proposed within the Kent Communities Proposal.</p> <p>The co-location sites will be brought forward with the assistance of professional design and construction partners and the considered input of library service representatives. They will consider both the needs of the existing user base and DDA compliance and regulations as part of the design work and implementation of changes that facilitate the co-location. This will include provision of accessible facilities, DDA compliant buildings and relevant wayfinding provision.</p>

	Staff in co-located sites will be provided with guidance to support and signpost residents with carer's responsibilities and ensure that any scheduled sessions that may be overwhelming are well advertised.
<b>t) Responsible Officer for Mitigating Actions - Carer's Responsibilities</b>	Ben Sherreard / Jackie Taylor-Smith / Local Manager