NATIONAL INSTITUTE FOR HEALTH AND CARE EXCELLENCE

NICE guidelines

Equality impact assessment

Looked-after children and young people (update)

The impact on equality has been assessed during guidance development according to the principles of the NICE equality policy.

3.0 Guideline development: before consultation (to be completed by the Developer before consultation on the draft guideline)

3.1 Have the potential equality issues identified during the scoping process been addressed by the Committee, and, if so, how?

The committee considered the potential equality issues identified during the scoping process and addressed these in the draft recommendations.

An overarching recommendation on diversity was made acknowledging that some looked-after children and young people have particular needs. These include those from black, Asian, and other minority ethnic groups and Gypsy, Roma and Traveller communities, as well as other groups such as refugees, asylum seekers and those who identify as LGBTQ+. It was recommended to ensure that these children and young people are not marginalised and that their needs are adequately met, which may require special attention and expertise.

Other issues addressed by the committee included:

Race/ ethnicity

- Recommendations were made to:
 - Provide interpretation services for contact supervisors to support communication. Furthermore, a culturally appropriate, registered interpreter should be offered for physical and mental health and wellbeing assessments, both the initial and subsequent assessments, where language is a barrier to communication.

- 3.1 Have the potential equality issues identified during the scoping process been addressed by the Committee, and, if so, how?
 - Provide tailored training for carers to support specific race, ethnicity and culture needs. For example, supporting dietary preferences and hair and skin care needs.
 - Ensure life story work embraces ethnicity, cultural and religious identity.
 - To support looked-after children and young people to develop their identity, set aside time for outings and activities which may include cultural or religious activities or events.

Disability

- Recommendations were made to:
 - Set aside time to 'check in' on the looked-after person. To support children with learning difficulties in this, engage with the primary caregiver or assess the need for advocacy services.
 - Provide tailored training for carers to support special educational needs and disabilities, for example sensory and communication needs.
 - Highlight the need for a closer working between the virtual school head and the special educational needs (SEN) service
 - Support for permanent carers with strategies to manage more specialist problems such as those with children and young people who have severe behavioural or mental health problems, or special educational needs.
- Ensure life story work embraces personal aspects of identity such as disability.

Sexual orientation/ gender identity/ gender reassignment

- Recommendations were made to:
 - Support mandatory training for all carers which includes encouraging positive relationships and sexual identity (covering issues such as consent, encouraging healthy intimate relationships, "coming out" and

3.1 Have the potential equality issues identified during the scoping process been addressed by the Committee, and, if so, how?

transitioning).

 Ensure life story work embraces personal aspects of identity such as sexual identity.

Recommendations were also made to address the inequalities experienced by unaccompanied asylum seekers and trafficked children. These include:

- Raise awareness and provide tailored support to address the issues affecting this group, including health risks, safeguarding issues, language and culturally sensitive care needs, and the danger of going missing. Practitioners and carers also need to be aware of these issues,
- Assess the safeguarding risk of a looked-after person using data shared across agencies.
- Provide tailored safeguarding support to prevent exploitation.
- Offer unaccompanied asylum seekers tailored initial health assessments that address risks arising from their country of origin and journey to the UK.
- Provide specialist, trauma-informed mental health and emotional wellbeing support for that takes into account, cultural sensitivities and that traumatic symptoms could come to the surface over the long term.
- Ensure that the expertise in the virtual school reflects the needs and profile of the school-aged population it serves and consider increasing specialist education support for unaccompanied asylum seekers.
- Assess unaccompanied asylum seekers' language and communication needs and offer English language lessons

3.2 Have any **other** potential equality issues (in addition to those identified during the scoping process) been identified, and, if so, how has the Committee addressed them?

To provide further clarification on the equality issues experienced by refugees and asylum seekers:

• Young people who arrive in the UK and first become 'looked after' within 13 weeks of their 18th birthday will not qualify for full leaving care services even if they have been provided with support under section 20 of the Children Act 1989 for the weeks leading up to their 18th birthday, as they will not have been 'looked after' for 13 weeks or more and when they turn 18 are not entitled to receive assistance including accommodation; financial support; funding for education or training; and 'staying put' with foster carers.

3.3 Have the Committee's considerations of equality issues been described in the guideline for consultation, and, if so, where?

Yes – in the "committee's discussion of the evidence" section in the evidence reviews and also in the rationale and impact section of the guideline.

3.4 Do the preliminary recommendations make it more difficult in practice for a specific group to access services compared with other groups? If so, what are the barriers to, or difficulties with, access for the specific group?

The committee did not identify anything in the preliminary recommendations to make it more difficult in practice for a specific group to access services compared with other groups.

3.5 Is there potential for the preliminary recommendations to have an adverse impact on people with disabilities because of something that is a consequence of the disability?

No.

3.6 Are there any recommendations or explanations that the Committee could make to remove or alleviate barriers to, or difficulties with, access to services identified in box 3.4, or otherwise fulfil NICE's obligation to advance equality?

None.

Completed by Developer: Susan Spiers

Date 09/04/2021

Approved by NICE quality assurance lead: Simon Ellis

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