

NATIONAL INSTITUTE FOR HEALTH AND CARE EXCELLENCE

HEALTH AND SOCIAL CARE DIRECTORATE

QUALITY STANDARDS PROGRAMME

Social care quality standard topic: The health and wellbeing of looked-after children and young people

Output: Equality analysis form – Topic Expert Group 3 (creation of final quality standard)

Introduction

As outlined in the [Social Care Quality Standards Programme interim process guide for social care topics](#), NICE has as a duty to have due regard to the need to eliminate unlawful discrimination, advance equality of opportunity, and foster good relations between people from different groups. The purpose of this form is to document the consideration of equality issues in each stage of the development process before reaching the final output that will be approved by the NICE Guidance Executive. This equality analysis is designed to support compliance with NICE's obligations under the Equality Act 2010 and Human Rights Act 1998.

Table 1 lists the equality characteristics and other equality factors NICE needs to consider, i.e. not just population groups sharing the 'protected characteristics' defined in the Equality Act but also those affected by health inequalities associated with socioeconomic factors or other forms of disadvantage. The table does not attempt to provide further interpretation of the protected characteristics. This is because it is likely to be simpler, and more efficient, to use the evidence underpinning the quality standard to define population groups within the broad protected characteristic categories rather than to start with possibly unsuitable checklists created for other purposes, such as social surveys or HR monitoring tools.

The form should be used to:

- confirm that equality issues have been considered and identify any relevant to the topic
- ensure that the quality standards outputs do not discriminate against any of the equality groups
- highlight planned action relevant to equality
- highlight areas where quality standards may advance equality of opportunity.

This form is completed by the NICE quality standards internal team at each stage within the development process:

- Topic Expert Group meeting one – Scoping
- Topic Expert Group meeting two – creation of draft quality standard
- Topic Expert Group meeting three – creation of final quality standard.

Table 1

Protected characteristics
Age
Disability
Gender reassignment
Pregnancy and maternity
Race
Religion or belief
Sex
Sexual orientation
Other characteristics
<p>Socio-economic status</p> <p>Depending on policy or other context, this may cover factors such as social exclusion and deprivation associated with geographical areas or inequalities or variations associated with other geographical distinctions (e.g. the North/South divide, urban versus rural).</p>
<p>Other categories</p> <p>Other groups in the population experience poor health because of circumstances often affected by, but going beyond, sharing a protected characteristic or socioeconomic status. Whether such groups are identifiable depends on the guidance topic and the evidence. The following are examples of groups covered in NICE guidance:</p> <ul style="list-style-type: none"> • Refugees and asylum seekers • Migrant workers • Looked after children • Homeless people.

Quality standards equality impact assessment

Stage: Topic Expert Group 3

Topic: Health and wellbeing of looked-after children and young people

1. Have any equality issues impacting upon equality groups been identified during this stage of the development process?

- Please state briefly any relevant issues identified and the plans to tackle them during development.

Equality and diversity considerations raised through the consultation process and fieldwork testing have been taken into account by the topic expert group (TEG) during further development of the quality standard.

Recognising diversity

Although there are some equality and diversity issues common to the population as a whole, the TEG recognises that looked-after children and young people are a heterogeneous group, having individual experiences, needs and preferences that influence care requirements, and accessing a range of services across different settings.

Quality statement 4 on identity and relationships notes the importance of respecting diversity, and to support young people to develop their own identity.

Additional requirements

Some groups of looked-after children and young people may have additional support requirements. For example, [NICE public health guidance PH28/SCIE guide 40](#) recognises that a disproportionate number of looked-after children and young people are from black and minority backgrounds and may have particular needs. Other groups of looked-after children and young people highlighted as potentially having particular needs include:

- Babies and very young children
- Unaccompanied asylum-seeking children and young people
- Children and young people with special educational needs
- Children and young people with learning or physical disabilities
- Children and young people with speech and language communication difficulties
- Children and young people with a hearing or visual impairment
- Young people who are gay or lesbian.

It is intended that the quality statements will promote equality across all groups, as the importance of individual care planning and provision is recognised. Additional needs or considerations are addressed in the equality and diversity consideration sections of the quality standard statements, as set out below:

- Quality statement 3 on stable quality placements addresses the need to ensure looked-after children and young people are supported to have their views heard in the care planning process through a range of communication techniques. [NICE public health guidance PH28/SCIE guide 40](#) recommends that unaccompanied asylum-seeking children and young people, and black and minority ethnic looked-after children and young people should have access to interpreters if their

knowledge of English is limited, so they can explain their situation and make their needs known. This will apply to all children and young people who do not have English as a first language and those with specific communication needs.

- Quality statement 4 on identity and relationships refers to recommendation 25 of the [NICE public health guidance 28/SCIE guide 40](#). This recommends that ongoing discussions to inform life history work should include culture and faith and sexual identity and orientation. It is also noted in this section that certain groups of looked-after children and young people may face additional issues impacting on their sense of identity, for example children and young people from black, minority ethnic and multiple heritage backgrounds, and unaccompanied asylum-seekers.
- Quality statement 5 on access to targeted and specialist services recognises that services should be able to meet the diverse needs of looked after children and young people. [NICE public health guidance 28/SCIE guide 40](#) identifies that unaccompanied asylum-seeking children and young people require access to specialist psychological services (including child and adolescent mental health services), with the necessary capacity, skills and expertise to address their particular and exceptional health and wellbeing needs. Professionals working with unaccompanied children and young people who are looked after should have a good understanding of cultural differences in attitudes to and beliefs about physical and mental health or wellbeing.
- Quality statement 8 on support to become independent highlights that certain groups of young people may require additional support in leaving care.

Specific issues have also been recognised at this stage of development relating to carers:

Quality statement 1 on warm, nurturing care recognises that additional specialist training may be required for carers to meet the needs of some looked-after children and young people, such as babies and very young children. The equality and diversity considerations section for this statement also highlights that individual needs of carers should be considered when training and support is being delivered to ensure it is appropriate and meets their needs, for example it should be culturally sensitive. It recognises that additional support may be needed for:

- Cross-cultural placements,
 - Carers of unaccompanied asylum-seeking children and young people.
 - Carers of looked-after children and young people with other particular needs, such as learning and physical disabilities, special educational needs or speech and language needs.
- [NICE public health guidance PH28](#) / SCIE guide 40 recognises that 'family and friends' carers may face greater strain. Quality statement 1 is intended to address training and support needs of all carers of looked-after children and young people, which includes family and friends carers.

2. Have relevant bodies and stakeholders been consulted, including those with a specific interest in equalities?

- Have comments highlighting potential for discrimination or advancing equality been considered?

To gain multiple perspectives on all aspects of the health and wellbeing of looked-after children and young people, representation within the TEG was sought from a

variety of audiences including health and social care professionals, voluntary and community sector organisations and users of services.

A wide range of stakeholders commented on the quality standard during consultation. Consultation comments have been considered by the TEG in further developing the quality standard.

Field testing has also been carried out with a range of stakeholders, including provider services, and children and young people, to inform the development and delivery of this quality standard.

3. Have any population groups, services or settings been excluded from coverage by the quality standard at this stage in the process? Are these exclusions legal and justified?

- Are the reasons for justifying any exclusion legitimate?

The quality standard will apply to looked-after children and young people from birth to 18 and those covered by leaving care arrangements across all settings, but not those at risk of entering care or those who have been looked after in the past. The quality standard is intended to consider the quality of care provided to those who are currently looked-after and should be used in the context of existing legislation and guidance.

The groups that will not be covered are based on those within the key development source [NICE public health guidance PH28](#) / SCIE guide 40. This national guidance was produced collaboratively by NICE and SCIE and with extensive consultation with a range of stakeholders and looked-after children / young people.

4. If applicable, do any of the quality statements make it impossible or unreasonably difficult in practice for a specific group to access a service or element of a service?

- Does access to a service or element of a service depend on membership of a specific group?
- Does a service or element of the service discriminate unlawfully against a group?
- Do people with disabilities find it impossible or unreasonably difficult to receive a service or element of a service?

The quality standard is intended to promote equality and support quality improvement for all looked-after children and young people. It is not envisaged that any of the quality statements make it impossible or unreasonably difficult in practice for a specific group to access a service or element of a service.

5. If applicable, does the quality standard advance equality?

- Please state if the quality standard, including statements, measures and indicators, as described will advance equality of opportunity, for example by making access more likely for certain groups, by tailoring the service to certain groups, or by making reasonable adjustments for people with disabilities?

It is considered that the quality standard will advance equality for all looked-after children and young people. It recognises the need for individualised care planning to

meet particular needs.