

Equality & Health Impact Assessment (EHIA)

Document control

Title of activity:	Havering Corporate Parenting Strategy 2025 - 2028
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Approved by:	Tara Geere, Director of Starting Well
Version Number	V0.1
Date and Key Changes Made	September 2025
Scheduled date for next review:	2028

Did you seek advice from the Corporate Policy Team & Legal?	Yes
Did you seek advice from the Public Health team?	Yes
Does the EHIA contain any confidential or exempt information that would prevent you publishing it on the Council's website? See Publishing Checklist.	No

1. Equality Health Impact Assessment Checklist

Please complete the following checklist to determine whether you will need to complete an EHIA and ensure you keep this section for your audit trail. If you have any questions, please contact READI@havering.gov.uk for advice from either the Corporate Diversity or Public Health teams. Please refer to [this Guidance](#) on how to complete this form.

About your activity

1	Title of activity	Havering Corporate Parenting Strategy 2025 - 2028		
2	Type of activity	Strategy		
3	Scope of activity	The Havering Corporate Parenting Strategy 2025 - 2028 aims to enhance the support and services provided to children in care and care experienced young people. The strategy is guided by the WISH principles, ensuring that every child is Well, Inspired, Safe, Heard, and Treated Fairly. It aligns with the Havering Visions and the Integrated Starting Well Plan.		
4a	Are you changing, introducing a new, or removing a service, policy, strategy or function?	Yes	If the answer to <u>either</u> of these questions is 'YES' Continue to question 5.	
4b	Does this activity have the potential to impact (either positively or negatively) upon people from different backgrounds?	Yes		
4c	Does the activity have the potential to impact (either positively or negatively) upon any factors which determine people's health and wellbeing?	Yes	Use the Screening tool before you answer this question.	If you answer 'YES' Continue to question 5.
5	If you answered YES:	Please complete the EHIA in Section 2 of this document. Please see Appendix 1 for Guidance.		
6	If you answered NO:	N/A		

Completed by:	Jannine Layhe, Head of Service for Corporate Parenting, People, Starting Well
Date:	22/09/2025

2. The EHIA – How will the strategy, policy, plan, procedure and/or service impact on people?

Background / Context:
The Equality & Health Impact Assessment (EHIA) for the Havering Corporate Parenting Strategy 2025–2028 has been produced to ensure that the council's approach to supporting children in care and care experienced young people is fair, inclusive, and responsive to their diverse needs. The strategy is built on the WISH principles, Well, Inspired, Safe, Heard, and Treated Fairly and aims to address the challenges faced by these young people, who often experience disadvantages in areas such as education, health, and employment compared to their peers.

Who will be affected by the activity?
The Corporate Parenting Strategy directly affects the 273 children currently in our care and the 354 care experienced young people we support (July 2025). While it does not propose immediate service changes, it sets out clear priorities and actions aimed at improving their lives and life chances. Children in care and care experienced young people continue to experience poorer outcomes in education, health, and employment compared to their peers; a pattern seen nationally and one that highlights the persistent inequalities faced by this group. To address these, the strategy will be delivered collaboratively by the Corporate Parenting Panel and partners, which includes representatives from across council services and partner agencies such as health, education, housing, and community organisations. These stakeholders will work together to ensure timely access to services, promote mental health awareness, strengthen pathways to education and employment, and support transitions into adulthood. The strategy is shaped by the voices of young people and carers, and its delivery will be monitored annually through performance indicators and qualitative feedback.

Protected Characteristic - Age: Consider the full range of age groups If there is an impact on under 18s, how have you / will you ensure their views are gained to inform decision making?		
<i>Please tick (ü) the relevant box:</i>		Overall impact: Our data shows a significant percentage of children in care aged 15–18, representing nearly half of the cohort. This has several implications: - A large proportion of young people are approaching the age of leaving care, requiring robust support for independence, housing, education, and employment. - Services must be age-appropriate, with differentiated approaches for early years, middle childhood, and adolescence. - The spread of care leavers who continue to receive support across the 18–24 age range highlights the need for sustained support beyond statutory thresholds.
Positive	☒	
Neutral	☐	
Negative	☐	

		Impact on Under 18s With over 53% of children in care under the age of 15, and a further 47% aged 15–18, the strategy must ensure that: • Younger children receive nurturing, stable placements and early intervention. • Adolescents are supported with life skills, mental health services, and educational continuity. To ensure that under 18s influence the decisions that affect them: Current Mechanisms: • Participation in Children in Care Councils. • Access to advocacy services and independent reviewing officers. • Feedback through surveys and consultation events. Future Commitments: • Embedding co-design principles in service development. • Expanding digital platforms for feedback and engagement. • Ensuring representation in strategic boards and panels. These efforts align with the Corporate Parenting Strategy's commitment to being child-centred, inclusive, and responsive to lived experience.
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Evidence: Age Distribution Summary

Age Band	Children in Care (%)	Care Leavers (%)
0–4 years	12.09%	–
5–9 years	19.05%	–
10–14 years	21.98%	–
15–18 years	46.89%	–
18–20 years	–	31.65%
21–22 years	–	32.66%
23–24 years	–	35.69%

Sources used: Havering Council Starting Well Case Management System Data

Protected Characteristic - Disability: Consider the full range of disabilities; including physical, mental, sensory, progressive conditions and learning difficulties. Also consider neurodivergent conditions e.g. dyslexia and autism.

Please tick (ü) the relevant box:		Overall impact: There are a relatively small number of children and young people who have been identified as having a disability within our care experienced cohort; however it is likely there are some children and young adults with unidentified or unreported needs. One of the priorities in the strategy is to ensure that all children and young people are 'well' which includes ensuring health needs are met and mental wellbeing is supported. Therefore, it is anticipated that the strategy will have a positive impact upon children and young people with disabilities and / or additional needs.
Positive	x	
Neutral		
Negative		

Evidence: 11% (31/273) of our children in care are recorded on our case management system as having a disability. Research tells us that children and young adults in the care system are more likely than their peers to have additional learning needs, as well as social, emotional and mental health needs due to adverse childhood experiences (ACEs). There is also a likelihood that there are some young people with unidentified or undiagnosed needs as those who moved schools or neighbourhoods in their early years are less likely to be diagnosed with SEN, as well as those who experienced childhood trauma.

Sources used: Havering Council Starting Well Case Management System Data

committees.parliament.uk/writtenevidence/132253/pdf/

Protected Characteristic – Sex / gender: Consider both men and women

<i>Please tick the relevant box:</i>		Overall impact: The Corporate Parenting Strategy is expected to have a positive impact on gender equality. Our data tells us; - Of the 273 children in care, 143 are male and 130 are female - Among the 354 care leavers, 213 are male, 138 are female, with 2 identifying as non-binary and 1 as transgender. This distribution shows a relatively balanced representation of male and female young people, with emerging visibility of gender-diverse identities. The strategy's commitment to being child centred, inclusive, and responsive to lived experience provides a strong foundation for addressing gender specific needs. For Girls and Young Women: The strategy supports access to mental health services, education, and safe housing, areas where girls in care may face distinct vulnerabilities, especially around exploitation and emotional wellbeing. For Boys and Young Men: The emphasis on life skills, employment pathways, and mental health awareness is particularly relevant given national trends showing lower educational attainment and higher risk behaviours among care experienced males. For Gender Diverse Young People: While the strategy does not detail specific actions for transgender or non-binary individuals, the presence of these identities in the data highlights the need for inclusive language, staff training, and tailored support services.
Positive	☒	
Neutral	☐	
Negative	☐	

Evidence:			
	Gender	CIC	Care Leavers
	Female	130	138
	Male	143	213
	Non-Binary	0	2
	Transgender	0	1
Sources used: Havering Council Starting Well Case Management System Data			

Protected Characteristic – Ethnicity / race / nationalities: Consider the impact on different minority ethnic groups and nationalities		
Please tick the relevant box:		Overall impact: The strategy will mainly impact upon White British children and young people as these make up the majority representation within the care experienced cohort. Meanwhile young people from global ethnic majorities make up the majority cohort within our care experienced young adults. Within our corporate parenting strategy there is a commitment to ensure that all children and young people are ‘heard’ regardless of ethnicity or nationality, and there is commitment to ensuring that participation is accessible to all, which may mean use of interpreters or information being produced in multiple languages. There is also a commitment within the strategy to ensure that children and young people are ‘Treated Fairly’ which includes challenging any discrimination or unconscious bias being displayed, ensuring practice is inclusive, and equitable access to resources and support. It is therefore likely that the Corporate Parenting Strategy will have a positive impact for those children from different minority ethnic groups and backgrounds.
Positive	x	
Neutral		
Negative		
Evidence: Most of our children in care are White British 53% and just over a third (32%) are from a mixed ethnic background. A further 12% are from a Black ethnic background with the remaining 3% from other ethnic groups or where information has not been obtained. Just under half of our care leavers are White British (42%), 21% are from a black ethnic background, 12% are from an Asian background and 8% are from a mixed ethnic background. The remainder are from other ethnic groups or where information has not been obtained.		
Sources used: Havering Council Starting Well Case Management System Data		

Protected Characteristic – Religion / faith: Consider people from different religions or beliefs, including those with no religion or belief		
<i>Please tick the relevant box:</i>		Overall impact: Information available to us regarding the religious beliefs of our children in care and care experienced young adults shows that most of our cohort are either Christian (or follow denominations of Christianity), are atheist or have no religion. A significant proportion of both our children in care (14%) and care leavers (22%) are Muslim. There are gaps in our information, for children in care where 38% of children do not have information regarding religion recorded on their file. Bearing this in mind, we consider the impact on religion be neutral as further information needs to be gathered to better understand the demographics of the cohort. The Corporate Parenting
Positive	☐	
Neutral	☒	
Negative	☐	

		Strategy promotes inclusive practice under the 'Treated Fairly' section and includes a commitment to recognise and celebrate a diverse range of cultural and religious events.
Evidence: 38% of our children in care have No Religion or Atheism recorded on our case management system under religion. A further 23% have no information recorded in this category. 26% identify as Christian, or follow denominations of Christianity, and 14% are Muslim. 35% of our care leavers have their religion recorded as Christian, or denominations of Christianity. 29% identify as atheist or no religion and 22% are Muslim. There are 10% of our care leavers who do not have a religion recorded on our system.		
Sources used: Havering Council Starting Well Case Management System Data		

Protected Characteristic - Sexual orientation: Consider people who are heterosexual, lesbian, gay or bisexual		
Please tick the relevant box:		Overall impact: The Corporate Parenting Strategy promotes inclusion and anti-discriminatory practice, and contains a commitment to challenging discrimination wherever it arises. There are gaps in the information recorded on our case management system, and implementation of the actions needed to deliver the vision of the Corporate Parenting Strategy should help enable children and young people to feel confident and safe to express their sexual identity / orientation. There is also a commitment to working with community safety partners to address concerns about public spaces and transport and feelings of unsafety on public transport. It is anticipated that there will be a positive impact on the protected characteristic of sexual orientation as a result of the strategy's implementation.
Positive	x	
Neutral		
Negative		
Evidence: Sexual orientation is not routinely recorded for children under 18 on our case management system. For care experienced young adults aged 18+, 46% are recorded as being heterosexual, 6% are recorded as being gay, lesbian or bi-sexual and 2% are recorded as 'other' or 'refused'. It should be acknowledged that for 46% of our care experienced young people information regarding sexual orientation is not recorded on our case management system, therefore it is not possible to fully understand the demographics of the cohort in relation to sexual orientation.		
Sources used: Havering Council Starting Well Case Management System Data		

Protected Characteristic - Gender reassignment: Consider people who are seeking, undergoing or have received gender reassignment surgery, as well as people whose gender identity is different from their gender at birth		
<i>Please tick (ü) the relevant box:</i>		Overall impact: The vision within the Corporate Parenting Strategy is for every care experienced young person to feel supported, included and inspired to be their best. Whilst there is only a small cohort currently identified with this characteristic, the work undertaken as part of delivering the Strategy aims to help more young people feel confident and secure in their identities and feel
Positive	x	
Neutral		

Negative		safe to express this. Therefore, we anticipate the impact on this characteristic to be positive.
Evidence: Our local data only evidences a very small proportion of young people who identify as non-binary or transgender, and we cannot be certain from the data whether any of these young people are seeking or have received gender reassignment surgery.		
Sources used: Havering Council Starting Well Case Management System Data		

Protected Characteristic – Marriage / civil partnership: Consider people in a marriage or civil partnership		
<i>Please tick (ü) the relevant box:</i>		Overall impact: N/A - this information is not recorded for children in care as these are all under 18s. This information is also not routinely captured for care experienced adults although anecdotal evidence suggests it is rare for anyone in this cohort (age 18 to 25) to be legally married or in a civil partnership. Therefore, the impact on this characteristic is neutral.
Positive		
Neutral	x	
Negative		
Evidence: N/A		
Sources used: N/A		

Protected Characteristic - Pregnancy, maternity and paternity: Consider those who are pregnant and those who are taking maternity or paternity leave		
<i>Please tick (ü) the relevant box:</i>		Overall impact: We know that there are 52 of our care experienced young people who are parents which equates to 15% of the overall cohort. 36 of these are female and 13 are male. 6.5% of our care experienced cohort are not in education, employment or training due to parenting. The Corporate Parenting Strategy is committed to ensuring that care experienced young adults are 'Inspired' which includes promoting access to education,
Positive	x	
Neutral		

Negative		employment and training such as apprenticeships. The 'Well' priority also commits to delivering life skills programmes, a sub-section of which will support those young people who are parents. It is anticipated that the impact of the strategy on this characteristic will be positive.
Evidence: 52 of our care experienced young people who are parents which equates to 15% of the overall cohort. 36 of these are female and 13 are male. 6.5% of our care experienced cohort are not in education, employment or training due to parenting. Pregnancy status is not captured in a reportable field on the case management system, though this information would be recorded within free text fields where known.		
Sources used: Havering Council Starting Well Case Management System Data		

Socio-economic status: Consider those who are from low income or financially excluded backgrounds		
<i>Please tick the relevant box:</i>		Overall impact: The third priority in the corporate parenting strategy is for all children to be safe, including in the places they live. Alongside this is the commitment to ensuring all children are 'Well' by ensuring that all children have equitable opportunities to access services and resources that support them to thrive. It is assessed that the actions to deliver the vision within the Corporate Parenting Strategy will have a positive impact upon this characteristic.
Positive	☒	
Neutral	☐	
Negative	☐	
Evidence: We do not routinely record information on socio-economic status on our case management system in a way that is extractable in a report. Research undertaken by the Office of National Statistics (ONS) published in 2022 shows that around 8 in 10 children (81%) who went into care for the first time after the 2011 census were living in a household that was deprived in at least one dimension, compared with 50% among those who did not go into care.		
Sources used: Who are the children entering care in England? - Office for National Statistics		

Health & Wellbeing Impact: Please use the Health and Wellbeing Impact Tool on the next page to help you answer this question. Consider both short and long-term impacts of the activity on a person's physical and mental health, particularly for disadvantaged, vulnerable or at-risk groups. Can health and wellbeing be positively promoted through this activity?	
<i>Please tick (ü) all the relevant</i>	

<i>boxes that apply:</i>		Overall impact: One of the priorities within the Corporate Parenting Strategy is for children and young people in our care to be well. This includes ensuring timely access to physical and mental health services, delivering life skills programmes covering budgeting, cooking, and managing finances and promoting mental health awareness through inclusive events and campaigns. In terms of the wider determinants of health, education and housing needs are also addressed within the strategies priorities, and action to ensure that young people are heard and treated fairly would be expected to have a positive impact on overall wellbeing. Do you consider that a more in-depth HIA is required as a result of this brief assessment? Please tick (ü) the relevant box Yes 0 No x
Positive	x	
Neutral		
Negative		

Evidence: Data on the general health status of children in care and care experienced young adults is not collected on our case management system in a way that is extractable in a report; however there are a number of key performance indicators that are relevant, all of which are monitored monthly. As of March 2025:

- 2% of 17-18 year olds and 13% of 19-21 year olds were not in education, employment or training (NEET) due to illness or disability
- 82.5% of 4-to-17-year-olds in care had a Strengths and Difficulties Questionnaire completed in the last 12 months
- 58.5% had their teeth checked by a dentist
- 77% were up to date with their immunisations
- 85.8% had an up to date medical
- 6% had been identified as having a substance misuse problem

Sources used: Havering Council Starting Well Case Management System Data

3. Health & Wellbeing Screening Tool

Will the activity / service / policy / procedure affect any of the following characteristics? Please tick/check the boxes below

The following are a range of considerations that might help you to complete the assessment.

Lifestyle YES ☒ ☐ ☐ Diet ☐ Exercise and physical activity ☐ Smoking ☐ Exposure to passive smoking ☐ Alcohol intake ☐ Dependency on prescription drugs ☐ Illicit drug and substance use ☐ Risky Sexual behaviour ☐ Other health-related behaviours, such as tooth-brushing, bathing, and wound care	Personal circumstances YES ☐ ☐ Structure and cohesion of family unit ☐ Parenting ☐ Childhood development ☐ Life skills ☐ Personal safety ☐ Employment status ☐ Working conditions ☐ Level of income, including benefits ☐ Level of disposable income ☐ Housing tenure ☐ Housing conditions ☐ Educational attainment ☐ Skills levels including literacy and numeracy	Access to services/facilities/amenities YES ☐ ☐ to Employment opportunities ☐ to Workplaces ☐ to Housing ☐ to Shops (to supply basic needs) ☐ to Community facilities ☐ to Public transport ☐ to Education ☐ to Training and skills development ☐ to Healthcare ☐ to Social services ☐ to Childcare ☐ to Respite care ☐ to Leisure and recreation services and facilities
Social Factors YES ☐ ☐ Social contact ☐ Social support ☐ Neighbourliness ☐ Participation in the community ☐ Membership of community groups ☐ Reputation of community/area ☐ Participation in public affairs ☐ Level of crime and disorder ☐ Fear of crime and disorder ☐ Level of antisocial behaviour ☐ Fear of antisocial behaviour ☐ Discrimination ☐ Fear of discrimination ☐ Public safety measures ☐ Road safety measures	Economic Factors YES ☐ ☐ ☐ Creation of wealth ☐ Distribution of wealth ☐ Retention of wealth in local area/economy ☐ Distribution of income ☐ Business activity ☐ Job creation ☐ Availability of employment opportunities ☐ Quality of employment opportunities ☐ Availability of education opportunities ☐ Quality of education opportunities ☐ Availability of training and skills development opportunities ☐ Quality of training and skills development opportunities ☐ Technological development ☐ Amount of traffic congestion	Environmental Factors NO ☐ ☐ Air quality ☐ Water quality ☐ Soil quality/Level of contamination/Odour ☐ Noise levels ☐ Vibration ☐ Hazards ☐ Land use ☐ Natural habitats ☐ Biodiversity ☐ Landscape, including green and open spaces ☐ Townscape, including civic areas and public realm ☐ Use/consumption of natural resources ☐ Energy use: CO2/other greenhouse gas emissions ☐ Solid waste management ☐ Public transport infrastructure

4. Outcome of the Assessment

The EHIA assessment is intended to be used as an improvement tool to make sure the activity maximises the positive impacts and eliminates or minimises the negative impacts. The possible outcomes of the assessment are listed below and what the next steps to take are:

Please tick (✓) what the overall outcome of your assessment was:

	1. The initial screening exercise showed a strong indication that there will be no impacts on people and need to carry out an EHIA. 2. The EHIA identified <u>no significant concerns</u> OR the identified <u>negative concerns</u> have already been <u>addressed</u>		Proceed with implementation of your activity
	3. The EHIA identified some <u>negative impact</u> which still needs <u>to be addressed</u>		COMPLETE SECTION 5: Complete action plan with measures to mitigate the and finalise the EHIA
	4. The EHIA identified some <u>major concerns</u> and showed that it is <u>impossible to diminish negative impacts</u> from the activity to an acceptable or even lawful level		Stop and remove the activity or revise the activity thoroughly. Complete an EHIA on the revised proposal.

5. Action Plan

The real value of completing an EHIA comes from identifying the actions that can be taken to eliminate/minimise **negative** impacts and enhance/optimize positive impacts. In this section you should list the specific actions that set out how you will mitigate or reduce any **negative** equality and/or health & wellbeing impacts, identified in this assessment. Please ensure that your action plan is: more than just a list of proposals and good intentions; if required, will amend the scope and direction of the change; sets ambitious yet achievable outcomes and timescales; and is clear about resource implications.

Protected characteristic / health & wellbeing impact	Identified Negative or Positive impact	Recommended actions to mitigate Negative impact* or further promote Positive impact	Outcomes and monitoring**	Timescale	Lead officer

Add further rows as necessary

* You should include details of any future consultations and any actions to be undertaken to mitigate negative impacts.

** Monitoring: You should state how the impact (positive or negative) will be monitored; what outcome measures will be used; the known (or likely) data source for outcome measurements; how regularly it will be monitored; and who will be monitoring it (if this is different from the lead officer).

6. Review

In this section you should identify how frequently the EHIA will be reviewed; the date for next review; and who will be reviewing it.

Review: 2028

Scheduled date of review:

Lead Officer conducting the review:

**Expand box as required*

Please submit the completed form via e-mail to READI@haverling.gov.uk
Thank you.