



Community & Children's Services Committee

Date: THURSDAY, 3 NOVEMBER 2022
Time: 2.30 pm
Venue: COMMITTEE ROOMS, WEST WING, GUILDHALL

Members:

Ruby Sayed (Chairman)	Florence Keelson-Anfu
Helen Fentimen (Deputy Chairman)	Alderman and Sheriff Alastair King DL
Joanna Tufuo Abeyie	Frances Leach
Deputy John Absalom	Deputy Natasha Maria Cabrera Lloyd-Owen
Caroline Addy	Alderman Ian David Luder
Munsur Ali	Alderman Christopher Makin
Jamel Banda	Alderman Bronek Masojada
Matthew Bell	Timothy James McNally
James Bromiley-Davis	Benjamin Murphy
Anne Corbett	Matt Piper
Aaron Anthony Jose Hasan D'Souza	Henrika Priest
Mary Durcan	Jason Pritchard
Sophie Anne Fernandes	Naresh Hari Sonpar
Deputy John Fletcher	Ceri Wilkins
Deputy Marianne Fredericks	Deputy Philip Woodhouse
Steve Goodman OBE	
John Griffiths	
Laura Jørgensen	

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https://youtu.be/_ynxVYOi9vU

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John Barradell
Town Clerk and Chief Executive

AGENDA

Part 1 - Public Reports

1. **APOLOGIES**

2. **MEMBERS' DECLARATIONS UNDER THE CODE OF CONDUCT IN RESPECT OF ITEMS ON THE AGENDA**

3. **MINUTES**

To agree the public minutes and non-public summary of the meeting held on 22nd September 2022.

For Decision
(Pages 7 - 14)

4. **OUTSTANDING ACTIONS - TO FOLLOW**

Members are asked to note the outstanding actions list.

For Information

5. **ANNUAL REVIEW OF TERMS OF REFERENCE**

Report of the Town Clerk.

For Decision
(Pages 15 - 18)

6. **UPDATE FROM SUB COMMITTEES AND PORTFOLIOS**

The Chairs of the various Sub Committees and Portfolio Holders to be heard.

For Information

7. **TO APPOINT A MEMBER TO (A) THE EDUCATION BOARD; AND (B) THE SAFEGUARDING SUB COMMITTEE**

Town Clerk to be heard.

For Decision

8. **CITY & HACKNEY HEALTH AND CARE PLACE BASED PARTNERSHIP TERMS OF REFERENCE**

Report of the Executive Director, Community and Children's Services.

For Decision
(Pages 19 - 64)

9. **CITY OF LONDON PRIMARY ACADEMY ISLINGTON (COLPAI) AND ISLEDEN HOUSE - LOCAL LETTINGS PLAN**
Report of the Executive Director, Community and Children's Services.
For Decision
(Pages 65 - 98)
10. **CHILDREN AND YOUNG PEOPLE'S PLAN 2022-25**
Report of the Executive Director, Community and Children's Services.
For Decision
(Pages 99 - 134)
11. **QUESTIONS ON MATTERS RELATING TO THE WORK OF THE COMMITTEE**
12. **ANY OTHER BUSINESS THAT THE CHAIRMAN CONSIDERS URGENT**
13. **EXCLUSION OF THE PUBLIC**
MOTION - That under Section 100A(4) of the Local Government Act 1972, the public be excluded from the meeting for the following items of business on the grounds that they involve the likely disclosure of exempt information as defined in Paragraph 3 of Part I of Schedule 12A of the Local Government Act.
For Decision

Part 2 - Non-Public Reports

14. **NON-PUBLIC MINUTES**
To agree the non-public minutes of the meeting held on 22nd September 2022.
For Decision
(Pages 135 - 140)
15. **NON-PUBLIC OUTSTANDING ACTIONS – TO FOLLOW**
Members are asked to note the non-public outstanding actions list.
For Information
16. **TUDOR ROSE COURT**
Report of the Comptroller and City Solicitor.
For Decision
(Pages 141 - 146)
17. **REPORT OF ACTION TAKEN**
Report of the Town Clerk.
For Information
(Pages 147 - 150)

18. **QUESTIONS ON MATTERS RELATING TO THE WORK OF THE COMMITTEE**

19. **ANY OTHER BUSINESS THAT THE CHAIRMAN CONSIDERS URGENT AND WHICH THE COMMITTEE AGREE SHOULD BE CONSIDERED WHILST THE PUBLIC ARE EXCLUDED**

COMMUNITY & CHILDREN'S SERVICES COMMITTEE

Thursday, 22 September 2022

Minutes of the meeting held at Guildhall at 2.30 pm

Present

Members:

Helen Fentimen (Deputy Chairman – *in the Chair*)
Anne Corbett
Mary Durcan
Deputy John Fletcher
Deputy Marianne Fredericks
John Griffiths
Florence Keelson-Anfu

Natasha Maria Cabrera Lloyd-Owen
Alderman Ian David Luder
Alderman Bronek Masojada
Deputy Susan Pearson
Jason Pritchard
Ceri Wilkins

Officers:

Andrew Carter	-	Director of Community and Children's Services
Simon Cribbens	-	Community and Children's Services
Paul Murtagh	-	Community and Children's Services
Chris Pelham	-	Community and Children's Services
Jason Hayes	-	Community and Children's Services
Barbara Hamilton	-	Community and Children's Services
Rachel Levy	-	Community and Children's Services
Ellie Ward	-	Community and Children's Services
Dr Sandra Husbands	-	Director of Public Health, London Borough of Hackney
Mark Jarvis	-	Chamberlain's Department
Julie Mayer	-	Town Clerk's – Governance Officer
Chandni Tanna	-	Town Clerk's - Communications
Ellie Ward	-	Community and Children's Services Department
Nicholas Welland	-	City Surveyor's Department
Richard Chamberlain	-	City Surveyor's Department

1. APOLOGIES

Apologies were received from : Naresh Sonpar, Ruby Sayed, Henrika Priest, Ben Murphy, Tim McNally, Frances Leach, Alderman Alastair King, Alderman Gregory Jones, Jamel Banda, Coraline Addy, John Absalom, Steve Goodman, Sophie Fernandes, Joanne Abeyie, Philip Woodhouse, Matthew Bell, Aaron D'Souza, Munsur Ali, Jamel Banda and James Bromiley-Davis.

2. MEMBERS' DECLARATIONS UNDER THE CODE OF CONDUCT IN RESPECT OF ITEMS ON THE AGENDA

- John Fletcher declared a general non-pecuniary interest in respect of agenda item 5, as his wife works for the Adult Skills and Community Learning Department.

- Susan Pearson declared a general non-pecuniary interest in respect of agenda item 7, as she might be indirectly affected by the proposals for winter measures.

Before commencing the business on the agenda, the Deputy Chair advised that the Chair had asked for updates from the Chairs of the various Sub Committees and Lead Members to be a standing item on future agendas. The first of these updates would take place on today's agenda, under (10) - items of urgent business.

3. **MINUTES**

RESOLVED, that – the minutes of the meeting held on 20th July 2022 be agreed as a correct record, subject to noting that John Griffin was in attendance

Matters arising

- The Head of Housing Management was arranging a number of walkabouts and informal meetings to both the City and out-of-City Estates. Once finalised, the dates would be shared with Members of the Grand and Sub Committees.
- The Director had met with the Tudor Court's Residents' Association, ahead of a legal planning meeting to consider whether Counsel's advice would be required. Members would receive a non-public update at the next meeting of the Committee.
- The Housing Revenue Account (HRA) Review was being led by Chamberlains, who had engaged Saville's to review its delivery in terms of the 5-year budget forecast. Members would receive an update at the next Committee.

4. **OUTSTANDING ACTIONS**

Members asked if the actions list could include allocated officers and target dates.

In terms of the food poverty actions, the Director reminded Members they had agreed to this be progressed through an overarching approach to poverty , and this appeared later on the agenda (item 6).

5. **ADULT SKILLS AND COMMUNITY LEARNING: OFSTED INSPECTION REPORT - JUNE 2022**

The Committee received a report of the Director of Community and Children's Services in respect of the full Ofsted Inspection of the City of London Corporation's Adult and Community Learning Service, which had taken place in June 2022.

Members congratulated the team on the outcome. Officers advised that they were working with the GLA to reduce the number of sub-contractors and to deliver as many in-house services as possible. Minor issues were being

resolved, and Members were invited to help steer the team in their community work.

RESOLVED, that – the overall rating of good be noted.

6. RESPONDING TO POVERTY AND COST OF LIVING PRESSURES

The Committee considered a report of the Director of Community and Children's Services, which set out actions and proposed activities in response to cost of living pressures. It also sought approval for an amendment to the Stronger Communities Grant Programme.

Members commended a good report and practical suggestions. During the discussion and questions, the following points were noted:

- a) Officers accepted that 'warm spaces' might not work for everyone, but would increase opportunity, and vulnerable residents would continue to be referred to Social Services.
- b) A Member reported difficulty in accessing the Emergency Support Service webpage. The officer agreed to ask the Benefits Team in Chamberlains to investigate. Members were informed that the London Borough of Lambeth administers the fund for the City Corporation.
- c) The Housing Support Fund targets residents known to their services and need of support, and those in receipt of welfare benefits
- d) The Multi Officer Steering Group has only just been established and is yet to agree its Terms of Reference.
- e) Some actions are being taken forward by partners. The Department is not able to identify leads for all actions given limited resources, but the action plan will help to identify gaps.
- f) It was suggested that there could be conflicting messages in respect of the 'Warm Winter Welcome' and 'Destination City' communications. The officer agreed to raise this with the Communications Director.
- g) It was suggested that warm space opportunities for workers should be promoted, as it may be cheaper to travel into the City than work from home during the winter months.
- h) St Luke's is a highly valued community facility providing food support and warm space and should be promoted.
- i) It was suggested that public access computers were provided at the Community Centres.
- j) The availability of warm spaces grants may open up facilities and provide more opportunities to run events on the estates. The Stronger Communities Grants are available for amounts above £2,000; the

application process is simple and grants can run concurrently or successively.

RESOLVED, that :

1. The Action Plan be strengthened to include timings and officer accountability.
2. An amendment to the Stronger Communities Grant criteria be approved, to allow a 6-month 'warm spaces' criteria, to fund activities and spaces over the winter period.

7. **HOUSING SPECIFIC WINTER MEASURES**

The Committee considered a report of the Director of Community and Children's Services which sought Members views and approval, if appropriate, to a suite of housing specific thermal winter measures to homes on its social housing estates, where residents will have at least one more winter with poorly performing single-glazed windows.

During the discussion and questions, the following points were noted:

- a) Officers had taken advice since the agenda had been circulated and Members noted that it would be illegal to fund the rent credit via the HRA. It would also be illegal to offer HRA services to leaseholders.
- b) There was adequate funding within the existing budget but, as the proposals represent a change of scope, they would need formal approval via the City Corporation's Project Gateway Process.
- c) The cost will be around £600 per property but not all homes would need them. The thermal curtains cost £90 per window.
- d) Once the recommendations had been agreed, works would start immediately and October and November generally see milder temperatures.
- e) Officers will work with colleagues in Chamberlains, to make the process as streamlined as possible, and present a timetable to the next Committee.
- f) Officers work closely with the Climate Action Team and would give consideration to the use of Energy Doctors, which have been successful in the London Borough of Islington. Energy Doctors are also able to carry out 'fall assessments', which are a particular danger to older residents during cold spells.
- g) Some residents are reluctant to let contractors into their properties as they have concerns about disruption and unfinished works. Members sought assurance of open and constructive communications and consultation.

- h) The City Corporation offers services to leaseholders for electrical testing and gas servicing, and encourages them to join schemes, where they will benefit from economies of scale. Quick wins could be achieved in terms of jackets for water tanks, for example.
- i) Temporary glazing is a cheaper option than secondary or double glazing and will be considered.

RESOLVED, that:

1. Having considered the suite of housing specific thermal winter measures proposed for homes on the City of London Corporation's social housing estates, where residents will have at least one more winter with poorly performing single-glazed windows, officers be asked to consider Members' views and suggestions, as set out above.
2. All of the housing specific thermal winter measures set out in the report be approved, together with Members' further suggestions set out above.
3. All of the housing specific thermal winter measures be offered and rechargeable to leaseholders on the social housing estates in question.

8. CITY & HACKNEY HEALTH AND CARE PLACE BASED PARTNERSHIP - DRAFT TERMS OF REFERENCE

The Committee considered a report of the Director of Community and Children's Services in respect of the draft Terms of Reference for the bodies that, as a whole, represent the City and Hackney 'Place Based Partnership'. The report sought a delegated authority, to enable timely decision making, in the event of the next City and Hackney Health and Care Board falling before this Committee's next meeting.

During the discussion on this item, the following points were noted:

- a) Officers explained that the Terms of Reference would allow specific parties to agree Section 75 arrangements – which allow pooling of local authority and health funding.
- b) The Terms of Reference need to be refreshed as the Clinical Commissioning Group (CCG) no longer exists. The Sub Committee will still be appointed by the Community and Children's Services Committee and make decisions with Hackney Members.
- c) Members requested a flow chart/organigram to illustrate the various structures.
- d) In response to a question about community and voluntary sector representation, it was noted that Hackney Council for Voluntary Service (HCVS) works close with City organisations and helps represent their views alongside partners such as City Healthwatch and City Connections. The Director of Public Health advised that HCVS is

seeking to expand its City based community and non-profit organisations and is considering rebranding to reflect this.

- e) Strategies such as the Joint Health and Wellbeing Strategy and Better Care Fund will continue to provide strategic direction alongside links to the City's Health and Wellbeing Boards.

RESOLVED, that:

1. The draft Terms of Reference be noted.
2. Authority be delegated to the Town Clerk, in consultation with the Chairman and Deputy Chairman, to approve the terms of reference for the City and Hackney place based partnership arrangements.

9. **QUESTIONS ON MATTERS RELATING TO THE WORK OF THE COMMITTEE**

There were no questions.

At 4.20pm, Members agreed to suspend standing orders in order to finish the business on the agenda.

10. **ANY OTHER BUSINESS THAT THE CHAIRMAN CONSIDERS URGENT**

Updates from the Chairs of the Sub Committees and Lead Members:

Further to the discussion earlier on the agenda in respect of the **Placed Based Care Partnership**, Members noted that the first meeting had taken place and future meetings would be alternated with development sessions. From January 2023 onwards, the dates would not clash with Court of Common Council days.

Florence Keelson-Anfu had been working with officers in respect of a City Corporation UN Accreditation for **Young People** and welcomed input from Members in terms of work, study and recreation. Anne Corbett was thanked for her contributions in respect of carers. The Lead Member had also been working with fellow Ward Members in Farringdon, in terms of quick wins in play areas, as some places simply required better signage.

Anne Corbett advised that the number of carers had increased, with 600 self-identified in the City, and the Census data was expected at the end of October. Whilst the **Carers' Group** valued City Connections, they welcomed the Tower Hamlets pilot appointment at the end of October. The Group have ongoing concerns about the cost of living and are pleased that face-to-face meetings have resumed.

The new High Support Hostel was expected to open in November 2022, and the Chair would arrange a visit for Members in due course. The next meeting of the **Homelessness and Rough Sleeping Sub Committee** was scheduled for 3rd October 2022. There was a report on this non-public agenda about the Assessment Centre and a request for a delegated authority.

The Chair and Deputy Chair of the **Housing Management and Almshouses Sub Committee** had been visiting the City's Housing Estates during the summer, including those outside the City. Some quick wins had been achieved and the Chair and Deputy Chair felt that they had made good connections with residents, particularly at Sydenham Hill. All Members were invited to provide input to the new Customer Services and Care Review.

There has been a temporary remedy to the problems with static electricity on play equipment and officers were looking for a permanent solution.

The **Safeguarding Sub Committee** had not met since the last Committee and was due to meet again on 10th October 2022.

Complaint issue following a leak

A Member raised an issue arising from a recent complaint about a leak, where calls went unanswered, were picked up by answering machines and not returned, and/or the wrong advice was given by contractors. The leak had persisted for several days with no updates to residents. The Assistant Director had visited the tenants and investigated the issue. Whilst accepting that there would always be a risk of leaks, Members felt strongly about the service failures in this case and stressed that a resolution must not wait until the completion of the Customer Service Review.

The Director advised that he would carry out a full investigation and provide all Members of the Housing Sub Committee with a response. The Director also advised that the Housing Sub and Grand Committees would receive a report on repairs and maintenance at their next meetings, specifically in terms of repairing leaks, and presenting a timeframe. The Director also stressed the importance of Member feed-back on the Communications and Customer Service Review and advised that there had been a consultation session with residents last week.

In closing the meeting, the Committee thanked Executive Director of Community and Children's Services for this excellent service over the past 5 years and wished him well in the future.

11. EXCLUSION OF THE PUBLIC

RESOLVED, that - under Section 100A(4) of the Local Government Act 1972, the public be excluded from the meeting for the following items of business on the grounds that they involve the likely disclosure of exempt information as defined in Paragraph 3 of Part I of Schedule 12A of the Local Government Act.

Item no(s)	Para No(s)
12-18	3

12. NON-PUBLIC MINUTES

The minutes of the meeting held on 20TH July 2022 were approved.

13. **NON PUBLIC ACTIONS**

The Committee received the non-public action list.

14. **ARTIZAN STREET LIBRARY**

The Committee considered and approved a report of the Director of Community and Children's Services.

15. **HOUSING REVENUE ACCOUNT (HRA) COMMERCIAL TENANTS UPDATE**

The Committee considered and approved a report of the Director of Community and Children's Services and the City Surveyor.

16. **ASSESSMENT CENTRE FOR ROUGH SLEEPERS - GW4/5 - REQUEST FOR A DELEGATED AUTHORITY**

The Committee considered and approved a report of the Director of Community and Children's Services

17. **QUESTIONS ON MATTERS RELATING TO THE WORK OF THE COMMITTEE**

There were no questions whilst the public were excluded.

18. **ANY OTHER BUSINESS THAT THE CHAIRMAN CONSIDERS URGENT AND WHICH THE COMMITTEE AGREE SHOULD BE CONSIDERED WHILST THE PUBLIC ARE EXCLUDED**

The Chair agreed to accept an item of urgent business in respect the Rough Sleeping Assessment Centre project. The Committee considered an approved a report of the Director of Community and Children's Services

The meeting ended at 5pm

Chairman

Contact Officer: julie.mayer@cityoflondon.gov.uk

Agenda Item 5

Committee(s): Community and Children's Services Committee	Dated: 3 rd November 2021
Subject: Annual Review of the Committee's Terms of Reference	Public
Which outcomes in the City Corporation's Corporate Plan does this proposal aim to impact directly?	3, 8, 10
Does this proposal require extra revenue and/or capital spending?	N/A
If so, how much?	
What is the source of Funding?	
Has this Funding Source been agreed with the Chamberlain's Department?	
Report of: Town Clerk	
Report author: Committee and Member Services Officer	For Decision

Summary

The Annual Review of the Committee's Terms of Reference enables any proposed changes to be considered in time for the annual reappointment of Committees by the Court of Common Council. The Terms of Reference for the Community and Children's Services Committee are attached at Appendix 1.

Recommendations:

1. The terms of reference of the Committee (**set out at Appendix 1**) be approved, subject to any comments, for submission to the Court in April 2023; and,
2. Members consider whether any change is required to the frequency of the Committee's meetings.

Contact: julie.mayer@cityoflondon.gov.uk

COMMUNITY AND CHILDREN'S SERVICES COMMITTEE TERMS OF REFERENCE

Constitution

A Ward Committee consisting of:

- two Aldermen nominated by the Court of Aldermen.
- up to 34 Commoners representing each Ward (two representatives for the Wards with six or more Members regardless of whether the Ward has sides), those Wards having 200 or more residents (based on the Ward List) being able to nominate a maximum of two representatives.
- a limited number of Members co-opted by the Committee (e.g. the two parent governors required by law)

Quorum

The quorum consists of any nine Members. [N.B. - the co-opted Members only count as part of the quorum for matters relating to the Education Function]

Terms of Reference

To be responsible for:-

- (a) the appointment of the Executive Director of Community & Children's Services;
- (b) the following functions of the City of London Corporation (other than in respect of powers expressly delegated to another committee, sub-committee, board or panel):-
 - i. **Children's Services**
 - ii. **Adults' Services**
 - iii. **Education** - to include the nomination/appointment of Local Authority Governors; as appropriate.
 - iv. **Libraries** - in so far as the library services affects our communities (*NB - the budget for the Library Service falls within the remit of the Culture, Heritage and Libraries Committee but the Head of the Libraries Service reports to the Director of Community and Children's Services*)

v. Social Services

- vi. **Social Housing** - (i.e. the management of the property owned by the City of London Corporation under the Housing Revenue Account and the City Fund in accordance with the requirements of all relevant legislation and the disposal of interests in the City of London Corporation's Housing Estates (pursuant to such policies as are from time to time laid down by the Court of Common Council).
- vii. **Public Health** - (within the meaning of the Health and Social Care Act 2012), liaison with health services and health scrutiny.
- viii. **Safer Communities** - in order to reflect a multi-agency approach to public protection, the Chairman or Deputy Chairman of Community & Children's Services Committee be elected Chair of Safer City Strategic Partnership Group (SCSPG), with a Member of the Police Authority Board acting as Deputy Chairman.
- ix. **Sport/Leisure Activities.**
- x. **Management of the City of London Almshouses** (registered charity no 1005857) - in accordance with the charity's governing instruments.
- xi. **Marriage Licensing and the Registration Service.**

and the preparation of all statutory plans relating to those functions and consulting as appropriate on the exercise of those functions;

- (c) appointing Statutory Panels, Boards and Sub-Committees as are considered necessary for the better performance of its duties including the following areas:-
 - Housing Management and Almshouses Sub-Committee
 - Safeguarding Sub-Committee
 - Integrated Commissioning Sub-Committee
 - Homelessness and Rough Sleepers Sub-Committee
- (d) the management of The City of London Corporation Combined Relief of Poverty Charity (registered charity no. 1073660);
making recommendations to the Education Board on the policy to be adopted for
- (e) the application of charitable funds from The City of London Corporation Combined Education Charity (registered charity no. 312836) and the City Educational Trust Fund (registered charity no. 290840); and to make appointments to the Sub-Committee established by the Education Board for the purpose of managing those charities.
- (f) the management of the Aldgate Pavilion.

Agenda Item 8

Committee: Community and Children's Services	Dated: 03/11/2022
Subject: City & Hackney Health and Care Place Based Partnership Terms of Reference	Public
Which outcomes in the City Corporation's Corporate Plan does this proposal aim to impact directly?	2
Does this proposal require extra revenue and/or capital spending?	N
If so, how much?	£
What is the source of Funding?	
Has this Funding Source been agreed with the Chamberlain's Department?	n/a
Report of: Andrew Carter, Executive Director of Community and Children's Services	For Decision
Report author: Ellie Ward, Head of Strategy and Performance, Community and Children's Services	

Summary

This report shares with Members the final terms of reference for the bodies that, as a whole, represent the City and Hackney place-based partnership – The Health and Care Board – and the newly named Section 75 Board (previously the City and Hackney Integrated Commissioning Board), for their approval.

The draft Terms of Reference were shared with Members at their meeting on 22 September 2022 and, since then, comments and revisions have been taken on board. The final version of the Terms of Reference for the two Boards are now presented for approval.

Recommendation

Members are asked to:

- Approve the Terms of Reference for the Health and Care Board and the Section 75 Board.

Main Report

Background

1. In September 2022, Members were presented with a report on changes in governance around health and care. It presented draft Terms of Reference for the City and Hackney Health and Care Board and the Section 75 Board which was formerly known as the City and Hackney Integrated Commissioning Board (ICB).

2. Since then, amendments have been made and the final Terms of Reference are now attached here for approval (see Appendix 2).

Current Position

3. The Health and Care Act 2022 (the 2022 Act) which received Royal Assent on 28 April 2022, makes significant changes to the previous legislation governing the delivery of health services.¹ It aims to reform the delivery of health services and promote integration between health and care in England. The 2022 Act also introduces changes to formalise integrated care systems (ICSs) which are partnerships that bring providers and commissioners of NHS services across a geographical area together with local authorities and local partners to collectively plan health and care services to meet the needs of their local population.
4. A number of partnership and delivery structures will operate within an ICS at system and place level. These structures are summarised below but are also set out in visual form in Appendix 1.
5. A key legislative enabler of placed based functions is Section 75 of the National Health Service Act 2006 and the NHS Bodies and Local Authorities Partnership Arrangements Regulations 2000. These enable local authorities and NHS bodies to enter into partnership arrangements to provide a more streamlined service and to pool resources.
6. Prior to the recent Act, Section 75 arrangements were agreed between the relevant local authorities (City Corporation and Hackney) and the City and Hackney CCG.
7. Under the new Act, these arrangements will be agreed between the relevant local authority and a sub-committee of the North East London (NEL) ICB (the Place ICB Committee in the Terms of Reference document). The Terms of Reference for this sub-committee are subject to NHS governance and set out in Section 2b of Appendix 2. They invite a representative of each local authority to sit on the sub-committee. No local authority functions are delegated to this sub-committee. These Terms of Reference will be agreed at NEL level.
8. Section 75 arrangements can only be agreed between the sub-committee of the NEL ICB and City and Hackney Council as the relevant local authorities. A separate group, which is now referred to as the Section 75 Board (previously the City and Hackney ICB) – is established for this function. The draft Terms of Reference for this group are set out in Section 2a of Appendix 2.
9. The expectation is that many of the discussions that will inform the statutory partners' decisions under these arrangements will take place within place-based partnerships. For City and Hackney this will happen through aligned meetings between the local authority sub-committees, which comprise the Section 75 Board (made up of the City Corporation sub-committee, Hackney sub-committee and the NHS NEL sub-committee) and the City and Hackney Health and Care

¹ National Health Services Act 2006 and the Health and Social Care Act 2012

Board, with decisions being taken as appropriate by each statutory committee on matters within the committee's authority. The Health and Care Board is a non-statutory body and does not have the authority to take decisions.

10. The draft Terms of Reference for the City and Hackney Health and Care Board are set out in Section 1 of Appendix 2.
11. The Terms of Reference set out in Section 1 and Section 2a are subject to the approval of the City Corporation. They continue the principle of the approach agreed by Members in 2017, but are updated to reflect the changes of the 2022 Act.
12. The Comptroller and City Solicitor's Department has reviewed the draft Terms of Reference and commented accordingly. Legal comments are included below.
13. The Section 75 Board will function through the attendance and decision-making of a sub-committee (the current ICS Sub-committee) of this Committee, and therefore are subject to this Committee's approval.

Corporate & Strategic Implications

Strategic implications

14. The work of the City and Hackney Health and Care Board delivers to priorities of the Corporate Plan, Joint Health and Wellbeing Strategy and Children and Young People's Plan.

Financial implications

15. None

Resource implications

16. None

Legal implications

17. The Health and Care Board and the Section 75 Board are external committees with membership from the City Corporation, London Borough of Hackney and other local partners. The Terms of Reference for the two external Boards require Members to act in accordance with the City Corporation's code of conduct on representing the City's interests on outside bodies, including an external committee, specifically in relation to managing conflicts of interests and decision-making.
18. The Terms of Reference for both Boards have been reviewed in consultation with solicitors at Browne Jacobson (appointed by London Borough of Hackney) and are in line with the City Corporation's constitution.

Risk implications

19. None

Equalities implications

20. Tackling health and wider inequalities is a priority objective of the City and Hackney Health and Care Board and will support the City in meeting its commitments and Public Sector Equalities Duty.

Climate implications

21. None

Security implications

22. None

Conclusion

23. The revised Terms of Reference presented, and the practice of the City and Hackney Health and Care Board, reflect the principle of approaches agreed previously by Members. Their revision responds to the changes of the Health and Social Care Act 2022.

Appendices

- Appendix 1 – North East London Integrated Care System Diagram
- Appendix 2 – City and Hackney place-based partnership Terms of Reference

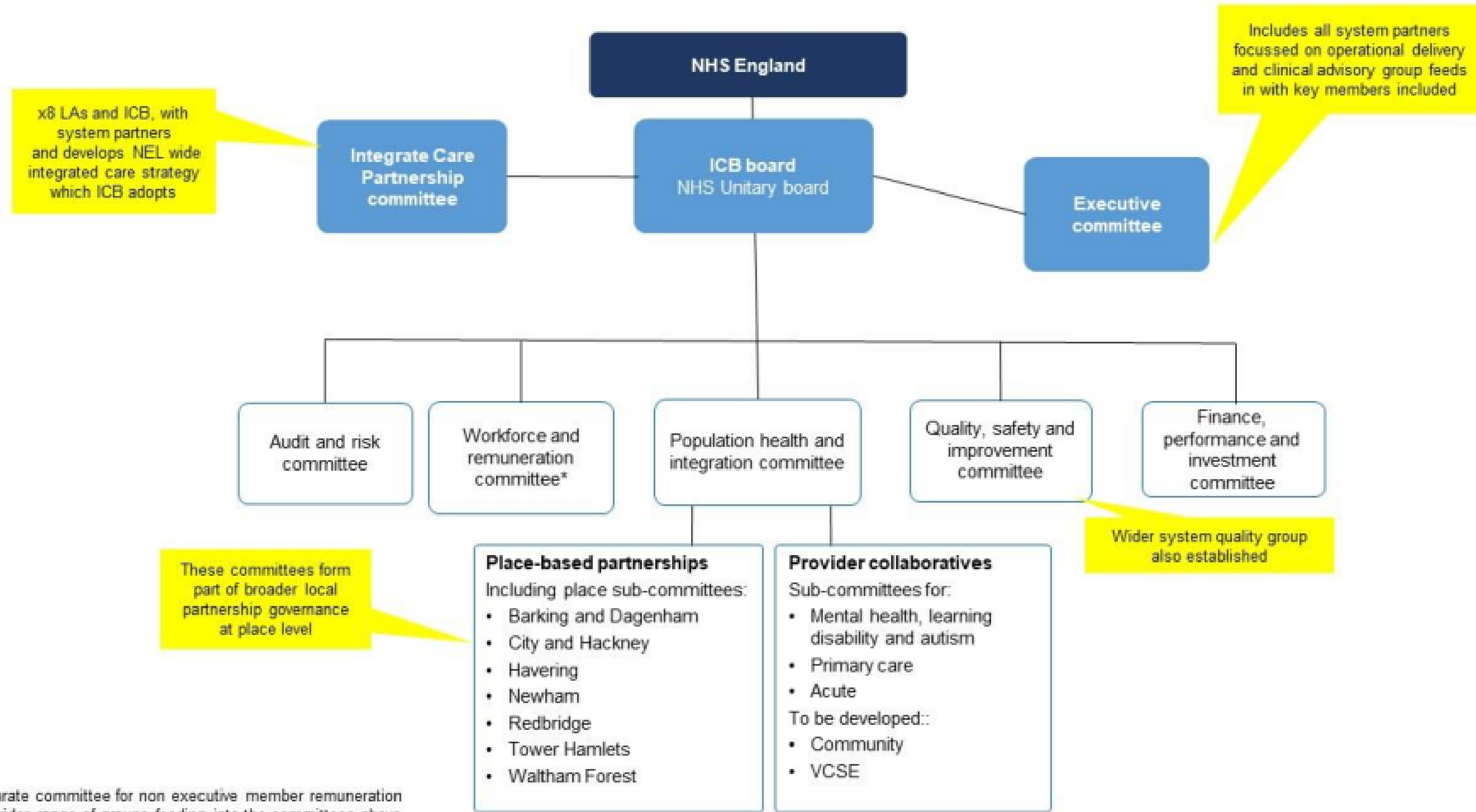
Background Papers

- 22 September CCS committee – report on City and Hackney Place-Based Partnership Draft Terms of Reference –
<https://democracy.cityoflondon.gov.uk/documents/s174713/2022.09%20CH%20HCB%20ToR.pdf>

Ellie Ward

Head of Strategy and Performance
Community and Children's Services

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CITY & HACKNEY

PLACE-BASED PARTNERSHIP

TERMS OF REFERENCE

Contents

Introduction

Section 1: Terms of reference for the City & Hackney Health and Care Board ('the Health and Care Board')

Section 2:

Part A: Terms of Reference for the City & Hackney Section 75 Board

Part B: Terms of reference for the City & Hackney Sub-Committee of the North East London Integrated Care Board (the '**Place ICB Sub-Committee**').

Annex 1: Functions which the North East London Integrated Care Board has delegated to the Place ICB Sub-Committee.

Annex 2: A summary of the objectives and priorities of the City & Hackney Place-Based Partnership.

Annex 3: The North East London Integrated Care Board's deliverables 2022/2023

Annex 4: Strategic priorities and operating principles of the North East London Integrated Care System

Annex 5: Key statutory duties of the Integrated Care Board under the National Health Service Act 2006

INTRODUCTION

1. The following health and care partner organisations, which are part of the North East London Integrated Care System ('**ICS**') have come together as a Place-Based Partnership ('**PBP**') to enable the improvement of health, wellbeing and equity in the City & Hackney area ('**Place**'):
 - (a) The NHS North East London Integrated Care Board (the '**ICB**')
 - (b) London Borough of Hackney ('**LBH**')
 - (c) City of London Corporation ('**COLC**')
 - (d) East London NHS Foundation Trust ('**ELFT**')
 - (e) Homerton Healthcare NHS Foundation Trust ('**Homerton FT**')
 - (f) Hackney Council for Voluntary Service
 - (g) City of London Healthwatch
 - (h) Healthwatch Hackney
 - (i) City & Hackney GP Federation
 - (j) City & Hackney's Primary Care Networks ('**PCNs**')
2. 'Place' for the purpose of these terms of reference means the geographical area which is coterminous with the administrative boundaries of LBH and COLC.
3. These terms of reference for the PBP incorporate:
 - (a) As **Section 1**, terms of reference for the City & Hackney Health and Care Board (the '**Health and Care Board**'), which is the collective governance vehicle established by the partner organisations to collaborate on strategic policy matters relevant to Place, and oversee joint programmes of work relevant to Place.
 - (b) As **Section 2**, terms of reference for any committees/sub-committees or other governance structures established by the partner organisations at Place for the purposes of enabling statutory decision-making. Section 2 currently includes terms of reference for:
 - The City & Hackney Section 75 Board, which brings together the Place ICB Sub-Committee referred below and a sub-committee of each of the local authorities in order to enable aligned commissioning decisions at Place in relation to partnership arrangements made under section 75 of the National Health Service Act 2006.
 - The City & Hackney Sub-Committee of the North East London Integrated Care Board (the '**Place ICB Sub-Committee**'), which is a sub-Committee of the ICB's Population Health & Integration Committee ('**PH&I Committee**').

4. As far as possible, the partner organisations will aim to exercise their relevant statutory functions within the PBP governance structure, including as part of meetings of the Health and Care Board. This will be enabled (i) through delegations by the partner organisations to specific individuals or (ii) through specific committees/sub-committees established by the partner organisations meeting as part of, or in parallel with, the Health and Care Board.
5. Section 2 contains arrangements that apply where a formal decision needs to be taken solely by a partner organisation acting in its statutory capacity. Where a committee/sub-committee has been established by a partner organisation to take such statutory decisions at Place, the terms of reference for that statutory structure will be contained in Section 2 below. Any such structure will have been granted delegated authority by the partner organisation which established it, in order to make binding decisions at Place on the partner organisation's behalf. The Place ICB Sub-Committee is one such structure and, as described in Section 2, it has delegated authority to exercise certain ICB functions at Place.
6. There is overlap in the membership of the Health and Care Board and the governance structures described in Section 2. In the case of the Health and Care Board and the Place ICB Sub-Committee, the overlap is significant because each structure is striving to operate in an integrated way and hold meetings in tandem.
7. Where a member of the Health and Care Board is not also a member of a structure described in Section 2, it is expected that the Health and Care Board member will receive a standing invitation to meetings of those structures (which may be held in tandem with Health and Care Board meetings) and, where appropriate, will be permitted to contribute to discussions at such meetings to help inform decision-making. This is, however, subject to any specific legal restrictions applying to the functions or partner organisations and subject to conflict of interest management.
8. All members of the Health and Care Board or a structure whose terms of reference are contained at Section 2 shall follow the Seven Principles of Public Life (also commonly referred to as the Nolan Principles), which are: selflessness, integrity, objectivity, accountability, openness, honesty and leadership.

Section 1

Terms of reference for the City & Hackney Health and Care Board

Status of the Health and Care Board	<ol style="list-style-type: none">1. The City & Hackney Health and Care Board ('the Health and Care Board') is a non-statutory partnership forum, which commenced its operation on 1 July 2022. It brings together representatives from across Place, who have the necessary authority from the partner organisation they represent to consider strategic policy matters and oversee joint programmes of work relevant to Place.2. Where applicable, the Health and Care Board may also make recommendations on matters a partner organisation asks the Health and Care Board to consider on its behalf.
Geographical coverage	<ol style="list-style-type: none">3. The geographical area covered will be Place, which for the purpose of these terms of reference is the area which is coterminous with the administrative boundaries of the London Borough of Hackney and the City of London Corporation.
Role of the Health and Care Board	<ol style="list-style-type: none">4. The purpose of the Health and Care Board is to consider the best interests of service users and residents in City & Hackney, when taken as a health and care system as a whole, rather than representing the individual interests of any of the partner organisations over those of another. Health and Care Board members participate in the Health and Care Board to - as far as possible - promote the greater collective endeavour.5. The Health and Care Board has the following core responsibilities:<ol style="list-style-type: none">(a) To set a local system vision and strategy, reflecting the priorities determined by local residents and communities at Place, the contribution of Place to the ICS, and relevant system plans including:<ul style="list-style-type: none">• the Integrated Care Strategy produced by the NEL Integrated Care Partnership ('ICP');• the 'Joint Forward Plan' prepared by the ICB and its NHS Trust and Foundation Trust partners;• the joint local health and wellbeing strategies produced by the City of London and Hackney Health and Wellbeing Boards ('HWBs'), together with the needs assessments for the area.(b) To develop a Place-based Partnership Plan ('PBP Plan'), which shall be:<ul style="list-style-type: none">• aimed at ensuring delivery of relevant system plans, especially those listed above.

- developed in conjunction with the governance structures in Section 2 (e.g. the Place ICB Sub-Committee and wider Section 75 Board).
 - agreed with the Board of the ICB and the partner organisations.
 - developed by drawing on population health management tools and in co-production with service users and residents of City & Hackney.
- (c) As part of the development of the PBP Plan, to develop the Place objectives and priorities and an associated outcomes framework for Place. A summary of these priorities and objectives is contained at **Annex 2**.
- (d) To oversee delivery and performance at Place against:
- national targets.
 - targets and priorities set by the ICB or the ICP, or other commitments set at North East London level, including commitments to the NHS Long Term Plan.
 - the PBP Plan, the Place objectives and priorities and the associated outcomes framework.
- (e) To provide a forum at which the partner organisations operating across Place can routinely share insight and intelligence into local quality matters, identify opportunities for improvement and identify concerns and risk to quality, escalating such matters to the NEL ICS System Quality Group as appropriate. Meetings of the Health and Care Board will give Place and local leaders an opportunity to gain:
- understanding of quality issues at Place level, and the objectives and priorities needed to improve the quality of care for local people.
 - timely insight into quality concerns/issues that need to be addressed, responded to and escalated within each partner organisation through appropriate governance structures or individuals, or to the System Quality Group.
 - positive assurance that risks and issues have been effectively addressed.
 - confidence about maintaining and continually improving both the equity, delivery and quality of their respective services, and the health and care system as a whole across Place.

Statutory decision-making

Making recommendations

- (f) To oversee the use of resources and promote financial transparency;
- (g) To make recommendations about the exercise of any functions that a partner organisation asks the Health and Care Board to consider on its behalf;
- (h) To ensure that co-production is embedded across all areas of operation, consistent with the City & Hackney co-production charter;
- (i) To support the ICS with the achievement of the 'four core purposes' of Integrated Care Systems, namely to:
 - improve outcomes in population health and healthcare;
 - tackle inequalities in outcomes, experience and access;
 - enhance productivity and value for money;
 - help the NHS support broader social and economic development.
- (j) To support the ICS to deliver against the strategic priorities of the ICS and the ICS operating principles set out in **Annex 4**.

6. In situations where any decision(s) needs to be taken which requires the exercise of statutory functions which have been delegated by a partner organisation to a governance structure in Section 2, then these shall be made by that governance structure in accordance with its terms of reference, and are not matters to be decided upon by the Health and Care Board.

7. However, ordinarily, in accordance with their specific governance arrangements set out in Section 2, a decision made by a committee or other structure (for example a decision taken by the Place ICB Sub-Committee on behalf of the ICB) will be with Health and Care Board members in attendance and, where appropriate, contributing to the discussion to inform the statutory decision-making process. This is, however, subject to any specific legal restrictions applying to the functions of a partner organisation and subject to conflict of interest management.

8. Where appropriate in light of the expertise of the Health and Care Board, it may also be asked to consider matters and make recommendations to a partner organisation or a governance structure set out in Section 2, in order to inform their decision-making.

9. Note that where the Health and Care Board is asked to consider matters on behalf of a partner organisation, that organisation will remain responsible for the exercise of its statutory functions and nothing that the Health and Care Board does shall restrict or undermine that responsibility. However, when considering and

Collaborative working

making recommendations in relation to such functions, the Health and Care Board will ensure that it has regard to the statutory duties which apply to the partner organisation.

10. Where a partner organisation needs to take a decision related to a statutory function, it shall do so in accordance with its terms of reference set out in Section 2, or the other applicable governance arrangements which the partner organisation has established in relation to that function.

11. The Health and Care Board and any governance structure set out in Section 2 shall work together collaboratively. It may also work with other governance structures established by the partner organisations or wider partners within the ICS. This may include, where appropriate, aligning meetings or establishing joint working groups.

12. The Health and Care Board may establish working groups or task and finish groups, to inform its work. Any working group established by the Health and Care Board will report directly to it and shall operate in accordance with terms of reference which have been approved by the Health and Care Board.

Collaboration with the City & Hackney HWBs

13. The Health and Care Board will work in close partnership with the HWBs and shall ensure that the PBP Plan is appropriately aligned with the joint local health and wellbeing strategies produced by the HWBs and the associated needs assessments, as well as the overarching Integrated Care Strategy produced by the ICP.

Collaboration with Safeguarding Adults/Children's Board

14. The Health and Care Board will also work in close partnership with the City & Hackney Safeguarding Children Partnership and the City & Hackney Safeguarding Adults Board.

Principles of collaboration and good governance

15. The members of the Health and Care Board set out below at paragraph 22 and the partner organisations they represent agree to:

- Encourage cooperative behaviour between constituent members of the ICS, including the partner organisations, and engender a culture of "Best for Service" including no fault, no blame and no disputes where practically possible.
- Ensure that sufficient resources are available, including appropriately qualified staff who are authorised to fulfil the responsibilities as allocated.
- Assume joint responsibility for the achievement of outcomes within their control.
- Commit to the principle of collective responsibility for the functioning of the Health and Care Board and to share the risks and rewards associated with the performance of the

Chairing and partnership lead arrangements

objectives and priorities for Place, and the associated outcomes framework, set out in the PBP Plan.

- Adhere to statutory requirements and best practice by complying with applicable laws and standards including procurement and competition rules, data protection and freedom of information legislation.
- Work together on a transparent basis (for example, open book accounting where possible) subject to compliance with all applicable laws, particularly competition law, and agreed information sharing protocols and ethical walls.
- Commit to evolving these partnership arrangements as national policy and legislation aimed at health and social care integration develops.

16. In addition to the Seven Principles of Public Life, members of the Health and Care Board will endeavour to make good two-way connections between the Health and Care Board and the partner organisation they represent, modelling a partnership approach to working as well as listening to the voices of patients and the general public.

17. The Health and Care Board will adopt a rotating arrangement in relation to its Chair, with responsibility being shared between the chairs of the two local authority sub-committees which form part of the City & Hackney Section 75 Board, namely:

- (a) The Deputy Chairman of the Community and Children's Services Committee (Chair of the COLC Sub-Committee);
- (b) Cabinet Member for Health, Adult Social Care, Voluntary Sector and Culture (Chair of the LBH Sub-Committee).

18. For the first twelve months following the Health and Care Board's formal approval of these terms of reference, the Chair of the COLC Sub-Committee shall be the Chair; following which the Chair of the LBH Sub-Committee shall chair for a period of twelve months. Thereafter the role of Chair shall swap every twelve months.

19. The member mentioned at paragraph 17 above who is not the Chair for the time-being will be the Deputy Chair of the Health and Care Board.

20. If for any reason the Chair and Deputy Chair are absent for some or all of a meeting, the members shall together select a person to chair the meeting.

21. The Chief Executive of the Homerton will be the Place Partnership Lead.

Membership

22. There will be a total of **26** members of the Health and Care Board, as follows:

ICB:

- (a) Delivery Director for City & Hackney
- (b) Clinical Care Director for City & Hackney
- (c) Director of Finance or their nominated representative
- (d) Director of Nursing/Quality or their nominated representative

Local authority officers:

- (e) Director of Community and Children's Services (COLC)
- (f) Group Director for Adults, Health and Integration (LBH)
- (g) Group Director for Children and Education (LBH)
- (h) Director of Public Health for City & Hackney

Local authority elected members:

- (i) The Chairman of the Community and Children's Services Committee (COLC)
- (j) The Deputy Chairman of the Community and Children's Services Committee (COLC) (**Chair, rotating**)
- (k) The Chairman of the Health and Wellbeing Board (COLC)
- (l) Cabinet Member for Health, Adult Social Care, Voluntary Sector and Culture (LBH) (**Chair, rotating**)
- (m) Cabinet Member for Education, Young People and Children's Social Care (LBH)
- (n) Cabinet Member for Finance, Insourcing and Customer Service (LBH)

NHS Trusts/Foundation Trusts:

- (o) Chief Executive (Homerton) (**Place Partnership lead**)
- (p) Non-Executive Director of Homerton
- (q) Director of ELFT
- (r) Non-Executive Director ELFT

Primary Care:

	<ul style="list-style-type: none"> (s) Place-Based Partnership Primary Care Development Clinical Lead (t) Chief Executive, City & Hackney GP Federation (u) Chair, City & Hackney GP Federation (v) PCN clinical director (w) PCN clinical director <p><i>Voluntary sector</i></p> <ul style="list-style-type: none"> (x) Chief Executive Officer, Hackney Council for Voluntary Service <p><i>Healthwatch</i></p> <ul style="list-style-type: none"> (y) [Chief Executive], City of London Healthwatch (z) [Chief Executive], Healthwatch Hackney <p>23. With the permission of the Chair of the Health and Care Board, the members, set out above, may nominate a deputy to attend a meeting of the Health and Care Board that they are unable to attend. However, members will be expected not to miss more than two consecutive meetings. The deputy may speak and vote on their behalf. The decision of the Chair regarding authorisation of nominated deputies is final. Each member should have one named nominee to ensure consistency in group attendance. Where possible, members should notify the Chair of any apologies before papers are circulated.</p>
Participants	<p>24. The Health and Care Board may invite others to attend meetings, where this would assist it in its role and in the discharge of its duties. This shall include other colleagues from the partner organisations or across the ICS, professional advisors or others as appropriate at the discretion of the Chair of the Health and Care Board.</p>
Meetings	<p>25. The Health and Care Board will operate in accordance with the evolving ICS governance framework, including any policies, procedures and joint-working protocols that have been agreed by the partner organisations, except as otherwise provided below:</p> <p><i>Scheduling meetings</i></p> <p>26. It is expected that the Health and Care Board will meet on a bi-monthly basis (subject to a minimum of four¹ occasions each year) and that such meetings will be held in tandem with the Place ICB Sub-Committee and the broader Section 75 Board.</p>

¹ In the first financial year of operation the Place ICB Sub-Committee is only expected to meet on three occasions.

27. However, the expectation for such bi-monthly meetings to be held in tandem will not preclude the Health and Care Board from holding its own more regular or additional meetings.
28. Changes to meeting dates or calling of additional meetings will be convened as required in negotiation with the Chair.

Quoracy

29. For a meeting of the Health and Care Board to be quorate, six members will be present and must include:
- (a) Two of the members from the ICB;
 - (b) At least one member from each local authority;
 - (c) One of the members from an NHS Trust or Foundation Trust;
 - (d) One primary care member.
30. If any member of the Health and Care Board has been disqualified from participating on an item in the agenda, by reason of a declaration of conflicts of interest, then that individual shall no longer count towards the quorum.
31. If the quorum has not been reached, then the meeting may proceed if those attending agree, but no recommendations may be made.

Papers and notice

32. A minimum of seven clear working days' notice is required. Notice of all meetings shall comprise venue, time and date of the meeting, together with an agenda of items to be discussed. Supporting papers must be distributed at least five clear working days ahead of the meeting.
33. On occasion it may be necessary to arrange urgent meetings at shorter notice. In these circumstances the Chair will give as much notice as possible to members. Urgent papers shall be permitted in exceptional circumstances at the discretion of the Chair.

Virtual attendance

34. It is for the Chair to decide whether or not the Health and Care Board will meet virtually by means of telephone, video or other electronic means. Where a meeting is not held virtually, the Chair may nevertheless agree that individual members may attend virtually. Participation in a meeting in this manner shall be deemed to constitute presence in person at such meeting. How a person has attended a meeting shall be specified in the meeting minutes.

Admission of the public

35. Where the Health and Care Board meets jointly with the Place ICB Sub-Committee or wider Section 75 Board in accordance with

paragraph 26 above, its meetings shall be held consistently with paragraphs 48 to 53 of the Place ICB Sub-Committee's terms of reference and paragraph 33 of the Section 75 Board terms of reference. Otherwise, whether a meeting of the Health and Care Board is to be held in public or private is a matter for the Chair.

Recordings of meetings

36. Except with the permission of the Chair, no person admitted to a meeting of the Health and Care Board shall be permitted to record the proceedings in any manner whatsoever, other than in writing.

Meeting minutes

37. The minutes of a meeting will be formally taken and a draft copy circulated to the members of the Health and Care Board together with the action log as soon after the meeting as practicable. The minutes shall be submitted for agreement at the next meeting where they shall be signed by the Chair. Verbatim minutes of the meeting will not be held, instead key points of debate, actions and decisions will be captured.
38. Where it would promote efficient administration meeting minutes and action logs may be combined with those of the Place ICB Sub-Committee and/or the Section 75 Board.

Governance support

39. Governance support will be provided to the Health and Care Board by the ICB's governance team.

Confidential information

40. Where confidential information is presented to the Health and Care Board, all those present will ensure that they treat that information appropriately in light of any confidentiality requirements and information governance principles.

Decision-making

41. The Health and Care Board is the primary forum within the PBP for bringing a wide range of partners across Place together for the purposes of determining and taking forward matters relating to the improvement of health, wellbeing and equity across Place. It brings together representatives from across Place, who have the necessary authority from the partner organisation they represent to consider strategic policy matters and oversee joint programmes of work relevant to Place.
42. The Health and Care Board does not hold delegated functions from the partner organisations. However, each member shall have appropriate delegated responsibility from the partner organisation they represent to make decisions on behalf of their organisation as relevant to the Health and Care Board's remit or, at least, will have sufficient responsibility to discuss matters on behalf of their organisation and be ready to move programmes of work forwards by

holding discussions in their own organisation and escalating matters of importance.

43. Members of the Health and Care Board have a collective responsibility for its operation. They will participate in discussion, review evidence and provide objective expert input to the best of their knowledge and ability, and endeavour to reach a collective view and reach agreement by consensus. Externally, members will be expected to represent the Health and Care Board's views and act as ambassadors for its work.

44. In the event that the Health and Care Board is unable to agree a consensus position on a matter it is considering, this will not prevent any or all of the statutory committees/sub-committees in Section 2 taking any applicable decisions they are required to take. To the extent permitted by their individual terms of reference, statutory committees/sub-committees may utilise voting on matters they are required to take decisions on.

Conflicts of Interest

45. Conflicts of interests will be managed in accordance with relevant policies, procedures and joint protocols developed by the ICS, and consistently with the partner organisations' respective statutory duties, their own policies on conflict management² and applicable national guidance. As a minimum, this shall include ensuring that:

- (a) a register of the members interests is maintained;
- (b) any actual or potential conflicts are declared at the earliest possible opportunity;
- (c) all declarations and discussions relating to them are minuted.

Accountability and Reporting

46. The Health and Care Board shall comply with any reporting requirements that are specifically required by a partner organisation for the purposes of its constitutional or other internal governance arrangements. The Health and Care Board will also report to the ICP.

47. Members of the Health and Care Board shall disseminate information back to their respective organisations as appropriate, and feed back to the group as needed.

48. The Health and Care Board and the HWBs will provide reports to each other, as appropriate, so as to inform their respective work. The reports the Health and Care Board receives from the HWBs will include the HWBs' recommendations to the Health and Care Board on matters concerning delivery of the Place objectives and priorities (see Annex 2) and delivery of the associated outcomes framework. The HWBs will continue to have statutory responsibility for the joint strategic needs assessments and joint local health and wellbeing strategies.

² For the City of London Corporation the key guidance includes [].

**Monitoring
Effectiveness and
Compliance with
Terms of
Reference**

49. Given its purposes at paragraph 5(e) above, the Health and Care Board will regularly report upon, and comply with any request of the System Quality Group for information or updates on, matters relating to quality which effect the ICS and bear on the System Quality Group's remit.

50. The Health and Care Board will carry out an annual review of its effectiveness and provide an annual report to the ICP and to the partner organisations. This report will outline and evaluate the Health and Care Board's work in discharging its responsibilities, delivering its objectives and complying with its terms of reference. As part of this, the Health and Care Board will review its terms of reference and agree any changes it considers necessary.

DRAFT

Section 2 (Part A)

The City & Hackney Section 75 Board

Introduction

1. The arrangements for the City & Hackney Section 75 Board set out in these terms of reference enable aligned decision-making between the following statutory partners who have established integrated commissioning arrangements under powers conferred by section 75 of the National Health Service Act 2006 (**'Section 75'**) and associated secondary legislation:
 - (a) The City of London Corporation (**'COLC'**)
 - (b) The London Borough of Hackney (**'LBH'**)
 - (c) The North East London Integrated Care Board (**'ICB'**)
2. The expectation is that many of the discussions that will inform the statutory partners decisions under these arrangements will take place within overall City & Hackney Place-Based Partnership (**'PBP'**). This will happen through aligned meetings between the sub-committees which comprise the Section 75 Board, and also the City & Hackney Health and Care Board, with decisions being taken as appropriate by each statutory sub-committee on matters within the sub-committee's authority.

Composition and authority

3. The Section 75 Board brings together the following sub-committees of the statutory partner organisations:
 - (a) COLC's Integrated Commissioning Sub-Committee, which is established as a sub-committee under the COLC's Community and Children's Services Committee (**'the COLC Sub-Committee'**);
 - (b) LBH's Integrated Commissioning Sub-Committee, which is established as a sub-committee reporting to the LBH Cabinet (**'the LBH Sub-Committee'**); and
 - (c) the City & Hackney Sub-Committee of the ICB, which is established as a sub-committee reporting to the ICB's Population Health and Integration Committee (**'the Place ICB Sub-Committee'**).
4. The COLC Sub-Committee has authority to make decisions on behalf of COLC, which shall be binding on COLC, in accordance with the terms of reference set out here and the scheme of delegation and reservation for the integrated commissioning arrangements.
5. The LBH Sub-Committee has authority to make decisions on behalf of LBH, which shall be binding on LBH, in accordance with these terms of reference and the scheme of delegation and reservation for the integrated commissioning arrangements.
6. The Place ICB Sub-Committee has authority to exercise the functions delegated to it by the ICB and to make decisions on matters relating to

Section 75 pooled fund arrangements

these delegated functions, in accordance with its terms of reference and the associated ICB governance framework.

7. Where section 75 pooled fund arrangements have been established, the following arrangements will apply:
 - (a) Members of the COLC Sub-Committee and the Place ICB Sub-Committee will manage the pooled funds for which they have been assigned authority in accordance with a section 75 agreement in place between COLC and the ICB ("**City Pooled Funds**");
 - (b) Members of the LBH Sub-Committee and the Place ICB Sub-Committee will manage the pooled funds for which they have been assigned authority in accordance with a section 75 agreement in place between LBH and the ICB ("**Hackney Pooled Funds**").
8. The LBH Sub-Committee shall have no authority in respect of City Pooled Funds and vice versa.
9. For services where no pooled fund arrangement is in place, the Section 75 Board arrangements may be used to make recommendations to the Place ICB Sub-Committee, COLC Community and Children's Services Committee or LBH Cabinet as appropriate and in accordance with the relevant section 75 agreement. Recommendations about services may also be made through the City & Hackney Health and Care Board.

Objectives

10. The Section 75 Board will support the development of the City & Hackney Place-Based Partnership, through:
 - (a) taking commissioning decisions in relation to the services which fall within the scope of the section 75 arrangements referred above (including in relation to, for example, service re-design, contracting and performance, planning and oversight);
 - (b) supporting the City & Hackney Health and Care Board to develop the plans for the Place, achieve its priorities and objectives, and to fulfil its responsibilities as set out in its terms of reference;
 - (c) developing and scrutinising commissioning intentions, including the monitoring, review, commissioning and decommissioning of activities;
 - (d) approving clinical and social care guidelines, pathways, service specifications, and new models of care;
 - (e) ensuring its decisions are made in a timely manner, with full consideration to:
 - statutory duties of the relevant organisation(s);

Accountability and reporting

- relevant in term and longer term Place, system and national plans, policy, priorities and guidance (as appropriate);
- the City & Hackney Co-Production Charter;
- best practice and benchmarked performance;
- relevant financial considerations.

11. The Section 75 Board will report to the relevant forum as determined by the ICB, LBH and COLC. The matters on which, and the arrangements through which, the Section 75 Board is required to report shall be determined by the ICB, LBH and COLC (and shall include requirements in respect of Better Care Fund budgets).
12. The Section 75 Board will present for approval by the ICB, LBH and COLC as appropriate proposals on matters in respect of which authority is reserved to the ICB and/or COLC and/or LBH (including in respect of aligned fund services).
13. The Section 75 Board will receive reports from the statutory partners on decisions made by those bodies where authority for those decisions is retained by them, but the matters are relevant to the work of the Section 75 Board. Discussions about such matters will be facilitated through the aligned meetings with the City & Hackney Health and Care Board.
14. The Section 75 Board will provide reports to the Health and Wellbeing Boards, the ICB Board or the NEL Integrated Care Partnership and other committees as required. The City & Hackney Health and Care Board may provide such reports on behalf of the Section 75 Board as part of its wider reporting arrangements.
15. The Section 75 Board functions through the scheme of delegation and financial framework agreed by the ICB, COLC and LBH respectively, who remain responsible for their statutory functions and for ensuring that these are met and that the Section 75 Board is operating within all relevant requirements.

Chairing Arrangements

16. The chairing arrangements set out in the City & Hackney Health and Care Board's terms of reference shall apply equally to the Section 75 Board, meaning that the Chair of the City & Hackney Health and Care Board shall also be the Chair of the Section 75 Board.

Membership

17. The membership of the sub-committees which the Section 75 Board brings together is as follows:
18. COLC Sub-Committee:
 - (a) The Deputy Chairman of the Community and Children's Services Committee (**Chair of the COLC Sub-Committee**);
 - (b) The Chairman of the Community and Children's Services Committee;

- (c) The Chairman of the Health and Wellbeing Board.

19. LBH Committee:

- (a) Cabinet Member for Health, Adult Social Care, Voluntary Sector and Culture (**Chair of the LBH Sub-Committee**);
- (b) Cabinet Member for Education, Young People and Children's Social Care;
- (c) Cabinet Member for finance, Insourcing and customer Service.

20. The membership of the Place ICB Sub-Committee is set out in its terms of reference.

Nominated deputies

- 21. Any member of the LBH Sub-Committee may appoint a deputy who is a Cabinet Member.
- 22. The COLC Community and Children's Services Committee may appoint up to three of its members who are members of the Court of Common Council to deputise for any member of the COLC Sub-Committee.
- 23. The Place ICB Sub-Committee's terms of reference set out its provision for nominating deputies.
- 24. Notwithstanding the above, any member appointing a deputy for a particular meeting of the Section 75 Board must give prior notification of this to the Chair.

Participants

25. As the three sub-committees shall meet in common, the members of each sub-committee shall be in attendance at the meetings of the other two sub-committees. It is also expected that meetings of the Section 75 Board will largely take place within the PBP structure and, therefore, subject to conflict of interest management and ensuring compliance with each component part of the Section 75 Board's governance requirements, members of the City & Hackney Health and Care Board and its participants (as specified in the City & Hackney Health and Care Board's terms of reference) may be in attendance at meetings of the Section 75 Board.

26. The following will be expected to attend the meetings of the Section 75 Board, contribute to all discussion and debate, but will not participate in decision-making:

- (a) The Director of Community and Children's services (Authorised Officer for COLC);
- (b) The City of London Corporation Chamberlain;
- (c) LBH Group Director – Finance and Corporate Resources;
- (d) LBH Group Director for Adults, Health and Integration;

	<p>(e) LBH Group Director for Children and Education</p> <p>27. Others may be invited to attend the Section 75 Board's meetings in a non-decision-making capacity. This shall include other colleagues from the partner organisations or across the ICS, professional advisors or others as appropriate at the discretion of the Chair.</p>
<p>Quorum</p>	<p>28. Quoracy requirements are as follows:</p> <p>(a) For the COLC Sub-Committee the quorum will be all three members (or deputies duly authorised in accordance with these terms of reference).</p> <p>(b) For the LBH Sub-Committee the quorum will be two of the three Council Members (or deputies duly authorised in accordance with these terms of reference).</p> <p>(c) For the Place ICB Sub-Committee the quorum will be as set out in its Terms of Reference.</p>
<p>Voting</p>	<p>29. Each of the COLC, LBH and ICB sub-committees must reach its own decision on any matter under consideration and will do so by consensus of its members where possible. If consensus within a sub-committee is impossible, that sub-committee may take its decision by simple majority, and the Chair's casting vote if necessary. The COLC Sub-Committee, the LBH Sub-Committee and Place ICB Sub-Committee will each aim to reach compatible decisions.</p> <p>30. Matters for consideration by the three sub-committees meeting in common as the Section 75 Board may be identified in meeting papers as requiring positive approval from all three sub-committees in order to proceed. Any matter identified as such may not proceed without positive approval from all of the COLC Sub-Committee, the LBH Sub-Committee and the Place ICB Sub-Committee.</p>
<p>Meetings and administration</p>	<p>31. The Section 75 Board's members will be given no less than seven clear working days' notice of its meetings. Notice of all meetings shall comprise venue, time and date of the meeting, together with an agenda of items to be discussed. Supporting papers must be distributed at least five clear working days ahead of the meeting. In urgent circumstances these timescales may be truncated.</p> <p>32. The Section 75 Board shall meet whenever COLC, LBH and the ICB consider it appropriate that it should do so but the three sub-committees meeting as the Section 75 Board would usually meet bi-monthly and at least four times a year, noting that the City & Hackney Health and Care Board may meet more frequently (i.e. monthly).</p> <p>33. Meetings of the Section 75 Board shall be held in accordance with Access to Information procedures for COLC, LBH and the ICB, rules and other relevant constitutional requirements. The dates of the meetings will be published by the ICB, LBH and COLC. The meetings of the Section 75 Board will be held in public, subject to any exemption provided by law or any matters that are confidential or commercially sensitive. This should</p>

only occur in exceptional circumstances and is in accordance with the open and accountable local government guidance (August 2014).

34. Governance support will be provided to the Section 75 Board and minutes shall be taken of all of its meetings. These may be incorporated into the minutes of the City & Hackney Health and Care Board. The ICB, COLC and LBH shall agree between them the format of the joint minutes of the Section 75 Board which will separately record the membership and the decisions taken by the Place ICB Sub-Committee, the COLC Sub-Committee and the LBH Sub-Committee. Agenda, decisions and minutes shall be published in accordance with partners' Access to Information procedures rules.

35. Decisions made by the COLC Sub-Committee may be subject to referral to the Court of Common Council in accordance with COLC's constitution. Cabinet decisions made by the LBH Sub-Committee may be subject to call-in by members of the Council in accordance with LBH's constitution. Decisions made by the Place ICB Sub-Committee may be subject to review by the ICB's board or its Population Health & Integration Committee, or as further set out in the Place ICB Sub-Committee's terms of reference or the wider governance arrangements. However, the ICB, LBH and COLC will manage the business of the Section 75 Board, including consultation with relevant forum and/or officers within those organisations, such that the incidence of decisions being reviewed or referred is minimised.

Conflicts of interest

36. The partner organisations represented in the Section 75 Board are committed to conducting business and delivering services in a fair, transparent, accountable and impartial manner. Section 75 Board members will comply with the arrangements established by the organisations that they represent or the ICS as a whole, and any national statutory guidance applicable to the organisation. As a minimum, this shall include ensuring that:

- (a) a register of the members interests is maintained;
- (b) any actual or potential conflicts are declared at the earliest possible opportunity;
- (c) all declarations and discussions relating to them are minuted.

37. In respect of the COLC Sub-Committee and the LBH Sub-Committee, it is for the members to declare any conflicts of interests which exist (taking into account any guidance from the Chair) and, if so, to adopt any arrangements which they consider to be appropriate. Members of the Place ICB Sub-Committee shall act in accordance with the sub-committee's terms of reference and the ICB's conflicts of interest policy and procedures.

Review

38. The terms of reference will be reviewed at least annually, to coincide with reviews of the section 75 agreements.

Section 2 (Part B)

Terms of reference for the City & Hackney Sub-Committee of the North East London Integrated Care Board

Status of the Sub-Committee	<ol style="list-style-type: none"> 1. The City & Hackney Sub-Committee of the North East London Integrated Care Board ('the Place ICB Sub-Committee') is established by the Population Health & Integration Committee (the 'PH&I Committee') as a Sub-Committee of the PH&I Committee. 2. These terms of reference set out the membership, remit, responsibilities and reporting arrangements of the Sub-Committee and may only be changed with the approval of the Board of the ICB ('the Board'). Additionally, the membership of the Sub-Committee must be approved by the Chair of the Board. 3. The Sub-Committee and all of its members are bound by the ICB's Constitution, Standing Orders, Standing Financial Instructions, policies and procedures of the ICB. 4. These terms of reference should be read as part of the suite of terms of reference for the City & Hackney Place-Based Partnership ('PBP'), including the terms of reference for the City & Hackney Health and Care Board ('the Health and Care Board') in Section 1, which define a number of the terms used in these Place ICB Sub-Committee terms of reference.
Geographical coverage	<ol style="list-style-type: none"> 5. The geographical area covered will be Place, as defined in the Health and Care Board's terms of reference in Section 1.
Purpose	<ol style="list-style-type: none"> 6. The Place ICB Sub-Committee has been established in order to: <ol style="list-style-type: none"> (a) Enable the ICB to exercise the Delegated Functions at Place in a lawful, simple and efficient way, to the extent permitted by the ICB's Constitution and as part of the wider collaborative arrangements which form the PBP. (b) Support the development of collaborative arrangements at Place, in particular the development of the PBP. 7. The Delegated Functions which the Place ICB Sub-Committee will exercise are set out at Annex 1. 8. The Place ICB Sub-Committee, through its members, is authorised by the ICB to take decisions in relation to the Delegated Functions. 9. Further functions may be delegated to the Place ICB Sub-Committee over time, in which case Annex 1 will be updated with the approval of the Board, on the recommendation of the PH&I Committee. 10. The Delegated Functions shall be exercised with particular regard to the Place objectives and priorities, described in the plan for Place ('the PBP Plan'), which has been agreed with the PH&I Committee and the partner

organisations represented on the Health and Care Board. A summary of the PBP's priorities and objectives is contained at **Annex 2**.

11. In addition, the Place ICB Sub-Committee will support the wider ICB to achieve its agreed deliverables, as set out in **Annex 3**, and to achieve the aims and the ambitions of:

- (a) The Joint Forward Plan;
- (b) The Joint Capital Resource Use Plan;
- (c) The Integrated Care Strategy prepared by the NEL Integrated Care Partnership;
- (d) The HWBs' joint local health and wellbeing strategies with the HWBs' needs assessments for the area;
- (e) The PBP Plan.

12. The Place ICB Sub-Committee will also prioritise delivery against the strategic priorities of the ICS and the ICS operating principles set out in **Annex 4**.

13. In supporting the ICB to discharge its statutory functions and deliver the strategic priorities of the ICS at Place, the Place ICB Sub-Committee will, in turn, be supporting the ICS with the achievement of the 'four core purposes' of Integrated Care Systems, namely to:

- (a) Improve outcomes in population health and healthcare;
- (b) Tackle inequalities in outcomes, experience and access;
- (c) Enhance productivity and value for money;
- (d) Help the NHS support broader social and economic development.

14. The Place ICB Sub-Committee is a key component of the ICS, enabling it to meet the 'triple aim' of better health for everyone, better care for all and efficient use of NHS resources.

Key duties relating to the exercise of the Delegated Functions

15. When exercising any Delegated Functions, the Place ICB Sub-Committee will ensure that it acts in accordance with, and that its decisions are informed by, the guidance, policies and procedures of the ICB or which apply to the ICB.

16. The Sub-Committee must have particular regard to the statutory obligations that the ICB is subject to, including, but not limited to, the statutory duties set out in the National Health Service Act 2006 and listed in **Annex 5**. In particular, the Place ICB Sub-Committee will also have due regard to the public sector equality duty under section 149 of the Equality Act 2010.

Collaborative working

17. In exercising its responsibilities, the Place ICB Sub-Committee may work with other Place ICB Sub-Committees, provider collaboratives, joint committees, committees, or sub-committees which have been established by the ICB or wider partners of the ICS. This may include, where appropriate, aligning meetings or establishing joint working groups.

Collaboratives

18. In particular, in addition to an expectation that the Place ICB Sub-Committee and Health and Care Board shall collaborate with each other as part of the PBP, the Place ICB Sub-Committee will, as appropriate, work with the following provider collaborative governance structures within the area of the ICS:

- (a) The North East London Mental Health, Learning Disability & Autism Collaborative;
- (b) The Combined Primary Care Provider Collaborative;
- (c) The North East London Acute Provider Collaborative;
- (d) The North East London Community Collaborative.

19. Some members of the Place ICB Sub-Committee may simultaneously be members of the above collaborative structures, to further support collaboration across the system.

Health & Wellbeing Boards and Safeguarding

20. The Place ICB Sub-Committee will also work in close partnership with:

- (a) The HWBs and shall ensure that plans agreed by the Place ICB Sub-Committee are appropriately aligned with, and have regard to, the joint local health and wellbeing strategies and the assessments of needs, together with the NEL Integrated Care Strategy as applies to Place; and
- (b) the Safeguarding Adults Board for the Place established by the local authority under section 43 of the Care Act 2014; and
- (c) the Safeguarding Children's Partnership established by the local authority, ICB and Chief Officer of Police, under section 16E of the Children Act 2004.

Establishing working groups

21. The Place ICB Sub-Committee does not have the authority to delegate any functions delegated to it by the ICB. However, the Place ICB Sub-Committee may establish working groups or task and finish groups. These do not have any decision-making powers but may inform the work of the Place ICB Sub-Committee and the PBP. Such groups must operate under the ICB's procedures and policies and have due regard to the statutory duties which apply to the ICB.

Chairing and partnership lead arrangements

22. The Place ICB Sub-Committee will be chaired by the Chair of the City & Hackney Health and Care Board who is appointed on account of their specific knowledge, skills and experiences making them suitable to chair the Sub-Committee.
23. The Chair will be responsible for agreeing the agenda and ensuring matters discussed meet the objectives as set out in these terms of reference.
24. The Deputy Chair of the Place ICB Sub-Committee is the Deputy Chair of the Health and Care Board.
25. If the Chair has a conflict of interest then the Deputy Chair or, if necessary, another member will be responsible for deciding the appropriate course of action.
26. The Chief Executive of the Homerton will be the Place Partnership Lead.

Membership

27. The Place ICB Sub-Committee members will be appointed by the Board in accordance with the ICB Constitution and the Chair of the ICB will approve the membership of the Sub-Committee.
28. The Place ICB Sub-Committee has a broad membership, including those from organisations other than the ICB. This is permitted by the ICB's Constitution and amendments made to the National Health Service Act 2006 by the Health and Care Act 2022.
29. The membership of the Place ICB Sub-Committee includes members drawn from the following partner organisations which operate at Place:
 - (a) The NHS North East London Integrated Care Board (the 'ICB')
 - (b) London Borough of Hackney ('LBH')
 - (c) City of London Corporation ('COLC')
 - (d) East London NHS Foundation Trust ('ELFT')
 - (e) Homerton Healthcare NHS Foundation Trust ('Homerton FT')
 - (f) [Hackney Council for Voluntary Service]
 - (g) [City of London Healthwatch]
 - (h) [Healthwatch Hackney]
 - (i) City & Hackney GP Federation
 - (j) City & Hackney's Primary Care Networks ('PCNs')
30. There will be a total of [17] members of the Place ICB Sub-Committee, as follows:

ICB:

- (a) Delivery Director for City & Hackney
- (b) Clinical Care Director for City & Hackney
- (c) Director of Finance or their nominated representative
- (d) Director of Nursing/Quality or their nominated representative

Local authority officers:

- (e) Director of Community and Children's Services (COLC)
- (f) Group Director for Adults, Health and Integration (LBH)
- (g) Group Director for Children and Education (LBH)
- (h) Director of Public Health for City & Hackney

Local authority elected members:

- (i) The Deputy Chairman of the Community and Children's Services Committee (COLC)
- (j) Cabinet Member for Health, Adult Social Care, Voluntary Sector and Culture (LBH)

NHS Trusts/Foundation Trusts:

- (k) Chief Executive (Homerton) (**Place Partnership Lead**)
- (l) Director of ELFT

Primary Care:

- (m) Place-Based Partnership Primary Care Development Clinical Lead
- (n) PCN clinical director

Voluntary sector

- (o) [Chief Executive Officer, Hackney Council for Voluntary Service]

Healthwatch

- (p) [Chief Executive], City of London Healthwatch
- (q) [Chief Executive], Healthwatch Hackney

31. With the permission of the Chair of the Place ICB Sub-Committee, the members, set out above, may nominate a deputy to attend a meeting of the Place ICB Sub-Committee that they are unable to attend. However, members will be expected not to miss more than two consecutive meetings. The deputy may speak and vote on their behalf. The decision of the Chair regarding authorisation of nominated deputies is final.

Participants

32. When determining the membership of the Sub-Committee, active consideration will be made to diversity and equality.
33. Only members of the Sub-Committee have the right to attend Sub-Committee meetings, but the Chair may invite relevant staff to the meeting as necessary in accordance with the business of the Sub-Committee.
34. Meetings of the Sub-Committee may also be attended by the following for all or part of a meeting as and when appropriate:
- (a) Any members or attendees of the Health and Care Board (i.e. in Section 1)
 - (b) Any members or attendees of the City & Hackney Section 75 Board (i.e. in Section 2: Part A)
35. The Chair may ask any or all of those who normally attend but who are not members to withdraw to facilitate open and frank discussion on particular matters.

Resource and financial management

36. The ICB has made arrangements to support the Place ICB Sub-Committee in its exercise of the Delegated Functions. Financial responsibilities of the Place ICB Sub-Committee are contained in the list of Delegated Functions in Annex 1, and further information about resource allocation within the ICB is contained in the ICB's Standing Financial Instructions and associated policies and procedures.

Meetings, Quoracy and Decisions

37. The Place ICB Sub-Committee will operate in accordance with the ICB's governance framework, as set out in its Constitution and Governance Handbook and wider ICB policies and procedures, except as otherwise provided below:

Scheduling meetings

38. The Place ICB Sub-Committee will aim to meet on a bi-monthly basis and, as a minimum, shall meet on four occasions each year.³ Additional meetings may be convened on an exceptional basis at the discretion of the Chair.
39. The Place ICB Sub-Committee will usually hold its meetings together with the Health and Care Board and other sub-committees which comprise the City & Hackney Section 75 Board, as part of an aligned meeting of the PBP. Although the Place ICB Sub-Committee may meet on its own at the discretion of its Chair, it is expected that such circumstances would be rare.
40. The Place ICB Sub-Committee acknowledges that the Health and Care Board and other sub-committees which comprise the City & Hackney Section 75 Board may convene their own more regular meetings, for

³ In the first financial year of operation the Place ICB Sub-Committee is only expected to meet on three occasions.

instance where agenda items do not require a statutory decision of the Place ICB Sub-Committee.

41. The Board, Chair of the ICB or Chief Executive may ask the Sub-Committee to convene further meetings to discuss particular issues on which they want the Sub-Committee's advice.

Quoracy

42. The quoracy for the Place ICB Sub-Committee will be six and must include the following of which one must be a care or clinical professional:
 - (a) Two of the members from the ICB;
 - (b) At least one member from each local authority;
 - (c) One of the members from an NHS Trust or Foundation Trust;
 - (d) One primary care member.
43. If any member of the Sub-Committee has been disqualified from participating on an item in the agenda, by reason of a declaration of conflicts of interest, then that individual shall no longer count towards the quorum.
44. If the quorum has not been reached, then the meeting may proceed if those attending agree, but no decisions may be taken.

Voting

45. Decisions will be taken in accordance with the Standing Orders. The Sub-Committee will ordinarily reach conclusions by consensus. When this is not possible, the Chair may call a vote. Only members of the Sub-Committee may vote. Each member is allowed one vote and a simple majority will be conclusive on any matter. Where there is a split vote, with no clear majority, the Chair of the Sub-Committee will hold the casting vote. The result of the vote will be recorded in the minutes.

Papers and notice

46. A minimum of seven clear working days' notice is required. Notice of all meetings shall comprise venue, time and date of the meeting, together with an agenda of items to be discussed. Supporting papers must be distributed at least five clear working days ahead of the meeting.
47. On occasion it may be necessary to arrange urgent meetings at shorter notice. In these circumstances the Chair will give as much notice as possible to members. Urgent papers shall be permitted in exceptional circumstances at the discretion of the Chair.

Virtual attendance

48. It is for the Chair to decide whether or not the Place ICB Sub-Committee will meet virtually by means of telephone, video or other electronic means. Where a meeting is not held virtually, the Chair may nevertheless

agree that individual members may attend virtually. Participation in a meeting in this manner shall be deemed to constitute presence in person at such meeting. How a person has attended a meeting shall be specified in the meeting minutes.

Admission of the public

49. Meetings at which public functions of the ICB are exercised will usually be open to the public, unless the Chair determines, at his or her discretion, that it would be prejudicial to the public interest by reason of the confidential nature of the business to be transacted or for some other good reason.
50. The Chair shall give such directions as he/she thinks fit with regard to the arrangements for meetings and accommodation of the public and representatives of the press such as to ensure that the business shall be conducted without interruption and disruption.
51. A person may be invited by the Chair to contribute their views on a particular item or to ask questions in relation to agenda items. However, attendance shall not confer a right to speak at the meeting.
52. Matters to be dealt with by a meeting following the exclusion of representatives of the press and other members of the public shall be confidential to the members of the Place ICB Sub-Committee and others in attendance.
53. There shall be a section on the agenda for public questions to the Sub-Committee, which shall be in line with the ICB's agreed procedure [\[insert link\]](#).⁴

Recordings of meetings

54. Except with the permission of the Chair, no person admitted to a meeting of the Place ICB Sub-Committee shall be permitted to record the proceedings in any manner whatsoever, other than in writing.

Confidential information

55. Where confidential information is presented to the Place ICB Sub-Committee, all those who are present will ensure that they treat that information appropriately in light of any confidentiality requirements and information governance principles.

Meeting Minutes

56. The minutes of a meeting will be formally taken in the form of key points of debate, actions and decisions and a draft copy circulated to the members of the Place ICB Sub-Committee, together with the action log as soon after the meeting as practicable. The minutes shall be submitted for agreement at the next meeting where they shall be signed by the Chair.

⁴ To be provided by ICB Governance Team in due course.

57. Where it would promote efficient administration meeting minutes and action logs may be combined with those of the Health and Care Board and/or Section 75 Board.

Legal or professional advice

58. Where outside legal or other independent professional advice is required, it shall be secured by or with the approval of the Director who is responsible for governance within the ICB.

Governance support

59. Governance support to the Place ICB Sub-Committee will be provided by the ICB's governance team.

Conflicts of Interest

60. Conflicts of interest will be managed in accordance with the policies and procedures of the ICB and those contained in the Handbook and shall be consistent with the statutory duties contained in the National Health Service Act 2006 and any statutory guidance issued by NHS England.

Behaviours and Conduct

61. Members will be expected to behave and conduct business in accordance with:

- (a) The ICB's policies and procedures including its Constitution, Standing Orders and Standards of Business Conduct Policy which includes the Code of Conduct which sets out the expected behaviours that all members of the Board and its committees will uphold whilst undertaking ICB business.
- (b) The NHS Constitution;
- (c) The Nolan Principles.

62. Members must demonstrably consider equality diversity and inclusion implications of the decisions they make.

Disputes

63. Where there is any uncertainty about whether a matter relating to a Delegated Function is within the remit of the Place ICB Sub-Committee in its capacity as a decision-making body within the ICB's governance structure, including uncertainty about whether the matter relates to:

- (a) a matter for wider determination within the ICS; or
- (b) determination by another placed-based committee of the ICB or other forum, such as a provider collaborative,

then the matter will be referred to the Director who is responsible for governance within the ICB for consideration about where the matter should be determined.

Referral to the PH&I Committee

64. Where any decision before the Place ICB Sub-Committee is 'novel, contentious or repercussive' across the ICB area and/or is a decision which would have an impact across the ICB area, then the Place ICB Sub-Committee shall give due consideration to whether the decision should be referred to the PH&I Committee.
65. With regard to determining whether a decision falling within the paragraph above shall be referred to the PH&I Committee for consideration then the following applies:
- (a) The Chair of the Place ICB Sub-Committee, at his or her discretion, may determine that such a referral should be made.
 - (b) Two or more members of the Place ICB Sub-Committee, acting together, may request that a matter for determination should be considered by the PH&I Committee.
66. Where a matter is referred to the PH&I Committee under paragraph 64, the PH&I Committee (at an appropriate meeting) shall consider and determine whether to accept the referral and make a decision on the matter. Alternatively, the PH&I Committee may decide to refer the matter to the Board of the ICB or to another of the Board's committees/subcommittees for determination.
67. In addition to the Place ICB Sub-Committee's ability to refer a matter to the PH&I Committee as set out in paragraph 64:
- (a) The PH&I Committee, or its Chair and Deputy Chair (acting together), may determine that any decision falling with paragraph 64 should be referred to the PH&I Committee for determination; or
 - (b) The Board of the ICB, or its Chair and the Chief Executive (acting together), may require a decision related to any of the ICB's delegated functions to be referred to the Board.

Accountability and Reporting

68. The Place ICB Sub-Committee shall be directly accountable to the PH&I Committee of the ICB, and ultimately the Board of the ICB.
69. The Place ICB Sub-Committee will report to:
- (a) **The PH&I Committee**, following each meeting of the Place ICB Sub-Committee. A copy of the meeting minutes along with a summary report shall be shared with the PH&I Committee for information and assurance. The report shall set out matters discussed and pertinent issues, together with any recommendations and any matters which require disclosure, escalation, action or approval.

And will report matters of relevance to the following:

- (b) **Finance, Performance and Investment Committee**. Such formal reporting into the ICB's Finance, Performance and Investment Committee will be on an exception basis. Other

reporting will take place via Finance and via NEL wide financial management reports.

- (c) **Quality, Safety and Improvement Committee.** Reports will be made to the Quality Safety and Improvement Committee in respect of matters which are relevant to that Committee and in relation to the exercise of the quality functions set out at Annex 2 below.

70. In the event that the Chair of the ICB, its Chief Executive, the Board of the ICB or the PH&I Committee requests information from the Place ICB Sub-Committee, the Place ICB Sub-Committee will ensure that it responds promptly to such a request.

Shared learning and raising concerns

71. Where the Place ICB Sub-Committee considers an issue, or its learning from or experience of a matter, to be of importance or value to the North East London health and care system as a whole, or part of it, it may bring that matter to the attention of the Director who is responsible for governance within the ICB for onward referral to the PH&I Committee, the Chair or Chief Executive of the ICB, the Board, the Integrated Care Partnership or to one or more of ICB's committees or subcommittees, as appropriate.

Review

72. The Place ICB Sub-Committee will review its effectiveness at least annually.

73. These terms of reference will be reviewed at least annually and more frequently if required. Any proposed amendments to the terms of reference will be submitted to the Board for approval.

Date of approval: [] 2022

Version: []

Date of review: []

Annex 1 - ICB Delegated Functions

[Section to be completed following conclusion and decision by partner-wide system executive leadership team of 'transformation cycle' work on functions]

Commissioning functions

The Place ICB Sub-Committee will have delegated responsibility for exercising the ICB's commissioning functions at Place in relation to the following specified services (the '**Specified Services**'), in line with ICB policy:

- []
- []
- []
- []
- []
- []

Health and care needs planning

The Place ICB Sub-Committee will undertake the following specific activities in relation to health and care needs planning, through embedding population health management:

1. Making recommendations to the PH&I Committee in relation to, and contributing to, the Joint Forward Plan and other system plans, in so far as relates to the exercise of the ICB's functions at Place.
2. Overseeing, and providing assurance to the PH&I Committee regarding, the implementation and delivery at Place of the Joint Forward Plan, the Integrated Care Strategy and other system plans, in so far as they require the exercise of ICB functions.
3. Overseeing the development of service specification standards at Place for the Specified Services, in line with ICB policy.
4. Working with the Health and Care Board on behalf of the ICB, to develop the PBP Plan including the Place objectives and priorities and a Place outcomes framework.

The PBP Plan shall be developed by drawing on data and intelligence, and in coproduction with service users and residents of City & Hackney. It is aimed at ensuring delivery of the Joint Forward Plan, the Integrated Care Strategy, each HWBs' joint local health and wellbeing strategies and associated needs assessments, and other system plans.

In particular, this shall include developing the Place priorities and objectives set out in the PBP Plan, and summarised in Annex 2, and an associated outcomes framework developed by the PBP.

The PBP Plan shall be tailored to meet local needs, whilst maintaining ICB-wide operational, quality and financial performance standards.

5. Overseeing, and providing assurance to the PH&I Committee regarding, the implementation and delivery of the PBP Plan, in so far as the plan requires the exercise of ICB functions.
6. Overseeing, and providing assurance to the PH&I Committee regarding, the implementation and delivery of the Place objectives and priorities, contained within the PBP Plan and summarised at Annex 2, in so far as they require the exercise of ICB functions.
7. Overseeing the implementation and delivery of each HWB's joint local health and wellbeing strategy, in so far as the strategy requires the exercise of ICB functions.

Market management, planning and delivery

The Place ICB Sub-Committee will undertake the following specific activities in relation to market management, planning and delivery:

1. Making recommendations to the Board of the ICB / PH&I Committee in relation to health service change decisions (whether these involve commissioning or de-commissioning).
2. Approving commissioning policies in relation to the Specified Services, in line with ICB policy.
3. Approving demographic, service use and workforce modelling and planning, where these relate to ICB commissioning functions being exercised at Place.

Finance

The Place ICB Sub-Committee will undertake the following specific activities in relation to financial control and contracting:

1. Plan and monitor the budgets delegated to the Place ICB Sub-Committee and take action to ensure they are delivered within the financial envelope.
2. The Sub-Committee will take shared responsibility, along with partners, for the health outcomes of their population, and will work with those partners to develop a shared plan for improving health outcomes and maintaining collective financial control.
3. Review and understand any variations to plan within the delegated budget and take appropriate action to mitigate these.
4. Oversee any required recovery plans in order to ensure financial balance is achieved at Place.
5. Ensure financial plans are triangulated with performance and quality.
6. Ensure any known financial risks are escalated to the ICB's Finance, Performance and Investment Committee and the ICS Executive, as appropriate.
7. Review performance of the contracts within Place, [in relation to the Specified Services,] to ensure services and activity are being delivered in line with contractual arrangements.
8. Review and understand the financial implications of new investments and transformation schemes.

9. Oversee implementation of investments/transformation schemes, ensuring financial activity, Key Performance Indicators and required outcomes are delivered.
10. Review and agree any procurement decisions in relation to the Specified Services, as appropriate, in line with the ICB's Standing Financial Instructions and Procurement Policy.
11. Ensure financial decisions are taken in line with the ICB's Standing Financial Instructions.
12. In relation to financial risk share arrangements (including but not limited to section 75, 76 and section 256 agreements), the Place ICB Sub-Committee shall:
 - Review any current in year arrangements applicable to Place, ensuring that funding is spent appropriately in line with contractual agreements;
 - Review the risks and benefits of the allocation of funding and approve spend on pooled budgets based on recommendations from those leading the work and where all parties are in agreement;
 - Receive reports on the schemes funded through this mechanism to ensure it is delivering the expected outcomes and benefits;
 - Review the funding and arrangements for the subsequent financial year and ensure there are adequate governance and arrangements in Place that are consistent with other places across the ICB's area;
 - Review and make recommendations in relation to proposals for the ICB to enter into new agreements under section 75 of the National Health Service Act 2006 with the local authority at Place. In accordance with the Constitution, any such arrangements must be authorised by the Board of the ICB.

Quality

The Place ICB Sub-Committee will undertake the following specific activities in relation to quality:

1. Providing assurance that health outcomes, access to healthcare services and continuous quality improvement are being delivered at Place, and escalate specific issues to the Population Health & Integration Committee, the Quality Safety and Improvement Committee and/or other governance structures across the ICS as appropriate.
2. Complying with statutory reporting requirements relating to the Specified Services, in particular as relates to quality and improvement of those services.
3. In addition, the Place ICB Sub-Committee will have the following responsibilities on behalf of the ICB at Place, in relation to quality:
 - Gain timely evidence of provider and place-based quality performance, in relation to the Specified Services;
 - Ensure the delivery of quality objectives by providers and partners within Place, including ICS programmes that relate to the place portfolio.
 - Identify, manage and escalate where necessary, risks that materially threaten the delivery of the ICB's objectives at Place and any local objectives and priorities for Place.

- Identify themes in local triangulated intelligence that require local improvement plans for immediate or future delivery.
 - Gain evidence that staff have the right skills and capacity to effectively deliver their role, creating succession plans for any key roles within the services.
 - Hold system partners to account for performance and the creation and delivery of remedial action/improvement plans where necessary.
 - Share good practice and learning with providers and across neighbourhoods.
4. Ensure key objectives and updates are shared consistently within the ICB, and more widely with ICS and senior leaders via the ICS System Quality Group and other established governance structures.

Primary Care

The Place ICB Sub-Committee will undertake the following specific activities in relation to primary care:

1. [TBD]

Communication and engagement with stakeholders

The Place ICB Sub-Committee will undertake the following specific activities in relation to communications and engagement:

1. Overseeing and approving any stakeholder involvement exercises proposed specifically in Place, consistent with the ICB's statutory duties in this context and the ICB's relevant policies and procedures. Such stakeholder engagement shall include political engagement, clinical and professional engagement, strategic partnership management and public and community engagement.
2. Overseeing the development and delivery of patient and public involvement activities, as part of any service change process occurring specifically at Place.

Population health management

The Place ICB Sub-Committee will undertake the following specific activities in relation to population health management:

1. Ensuring there are appropriate arrangements at Place to support the ICB to carry out predictive modelling and trend analysis.

Emergency planning and resilience

The Place ICB Sub-Committee will undertake the following specific activities in relation to emergency planning:

1. At the request of the any of the PH&I Committee or the Board, in relation to a local or national emergency, prepare or contribute to an emergency response plan for implementation at Place, coordinating with local partners as necessary.

Annex 2 - Place objectives and priorities (per PBP Plan)

[Examples]

1. [Develop and integrate pathways to improve health outcomes in people with severe multiple disadvantage, incorporating homelessness]
2. [Integrate care leaver support programmes and define required outcomes]

DRAFT

Annex 3 – ICB deliverables 2022/3

[Examples. NEL deliverables to be added once available]

1.	[Implement population health management across all PCNs, proactively using data and intelligence to tackle inequalities in access and outcomes.
2.	Use data to address unwarranted variation and to manage demand.
3.	Develop and implement IAPT pathways, integrating talking therapy pathways within community and secondary care pathways.
4.	Contribute to planned care recovery through design and implementation of pathways, demand management, advice and guidance and health optimisation in line with ICS developed pathways.
5.	Consistently support urgent care flows through long-term condition management, community crisis response, timely discharge from hospital and integrated support for people to remain at home if possible.
6.	Contribute to COVID-19 recovery, in line with national, local and regional priorities.
7.	Participate in the community services review and implement the core care model to meet local population needs.
8.	Lead and coordinate the development of PCNs (neighbourhoods), implementing national requirements within the PCNs.

Annex 4 - Strategic priorities of the ICS 2022/23 & ICS operating principles

ICS strategic priorities

1	Employment and workforce: To work together to create meaningful work opportunities for people in North East London
2	Children and Young People: To make North East London the best place to grow up
3	Long term conditions: To support everyone living with a long term condition in North East London to live a longer, healthier life
4	Mental Health: To improve the mental health and well-being of the people of North East London

ICS operating principles

1	Improving quality and outcomes – Individually and together, we will continuously improve access, experience and outcomes for and with our residents, with a specific focus on delivering integrated care in the neighbourhoods where our residents live and work. We will seek to learn together and from international best practice to continuously improve quality, to re-invent our ways of working and better secure our outcomes.
2	Securing greater equity – We will resolutely tackle inequality in outcomes and experience for our residents and staff, harnessing the diversity of our NEL experience to create better and more responsive solutions and utilising our combined resources to tackle the causes of inequality. We embrace the right of our residents to meaningfully participate, as an equal part of our team, benefiting from the strengths that they bring as individuals and communities.
3	Creating value – We will transparently work with our residents and staff to secure the maximum, sustainable benefit from our physical, digital and financial resources, re-purposing what we have, reducing waste and taking care of our environment. Critically we will support and enable our most important resource, our staff, to reach their potential, enjoy work and be able to effectively contribute to our vision.
4	Deepening collaboration – We will work in meaningful partnership towards shared goals, holding each other to account for the commitments we have made to each other and to our residents. We will set resident interest and the common good as our defining success measure and we will support our staff to lead and deliver across organizational boundaries. Our key collaboration will be with our residents, who will drive and co-deliver and evaluate the outcomes of our partnership.

Annex 5 – Key statutory duties under the National Health Service Act 2006

- Section 14Z32 – Duty to promote the NHS Constitution
- Section 14Z33 – Duty to exercise functions effectively, efficiently and economically
- Section 14Z34 – Duty as to improvement in quality of services
- Section 14Z35 – Duty as to reducing inequalities (and the separate legal duty under section 149 of the Equality Act 2010, the Public Sector Equality Duty)
- Section 14Z36 – Duty to promote involvement of each patient
- Section 14Z37 – Duty as to patient choice
- Section 14Z38 – Duty to obtain appropriate advice
- Section 14Z39 – Duty to promote innovation
- Section 14Z40 – Duty in respect of research
- Section 14Z41 – Duty to promote education and training
- Section 14Z41 – Duty to promote integration
- Section 14Z43 – Duty to have regard to the wider effect of decisions
- Section 14Z44 – Duties as to climate change etc
- Section 14Z45 – Public involvement and consultation (and the related duty under section 244 and the associated Regulations to consult relevant local authorities)
- Section 14Z30 – Registers of interests and management of conflicts of interest
- Section 223GB – Financial requirements on the ICB [where set by NHS England]
- Section 223GC – Financial duties of the ICB: expenditure
- Section 223L – Joint financial objectives for the ICB [where set by NHS England]
- Section 223M – Financial duties of the ICB: use of resources
- Section 223N – Financial duties of the ICB: additional controls on resource use
- Section 223LA – Financial duties of the ICB: expenditure limits

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Committees: Community and Children’s Services Committee – For Decision Housing Management and Almshouses Sub-Committee – For Information	Dated: 03/11/2022
Subject: Local Lettings Policies – CoLPAI and Isleden House	Public
Which outcomes in the City Corporation’s Corporate Plan does this proposal aim to impact directly?	1, 2 & 4
Does this proposal require extra revenue and/or capital spending?	N
If so, how much?	£
What is the source of Funding?	
Has this Funding Source been agreed with the Chamberlain’s Department?	N/A
Report of: Executive Director of Community & Children’s Sevices	For Decision
Report authors: Liam Gillespie, Head of Housing Management	

Summary

This report seeks approval from Members to implement Local Lettings Policies in respect of two housing developments which will provide a total of 69 new homes for social rent, at Isleden House (three homes) and the City of London Primary Academy Islington (CoLPAI) development (66 homes). The draft Policies, which are enabled by the City Corporation’s main Housing Allocations Scheme, set out how the homes will be allocated and provide for direct offers to be made to existing Housing Register applicants with a specified local connection to the two new housing schemes.

The policies will maximise the benefit of the new homes to local applicants with high assessed needs, while ensuring that homes within the City Corporation’s current stock are freed up for allocation to Housing Register applicants.

Recommendation

Members are asked to:

- Approve the draft Local Lettings Policies for the 66 homes at the CoLPAI development and the three new homes at Isleden House

Main Report

Background

1. The City Corporation operates a Housing Allocations Scheme (“the Scheme”) in accordance with its obligations under the Housing Act, 1996. The Scheme describes how the City Corporation’s Housing Register will be managed and vacant homes allocated to applicants. The Housing Register is maintained by the Housing Needs Team within the Housing Division of DCCS.
2. In normal circumstances, vacant homes are advertised on the Choice Based Lettings system, through which eligible applicants on the Housing Register may bid for each property. The highest-placed applicant (according to the number of points given to their application) will then be allocated the property.
3. The Scheme provides that Local Lettings Policies may be adopted by the City Corporation in certain circumstances, including the allocation of homes in new developments. Local Lettings Policies take the vacant homes outside the usual Choice Based Lettings system and allow the Housing Needs Team to make direct offers to eligible applicants, to meet local needs more easily and make targeted offers to households with the highest needs.
4. Once direct offers are exhausted, any vacant homes will be allocated in the usual way, including through Choice Based Lettings.
5. Some Members may recall that a Local Lettings Policy was adopted in 2014 to manage the letting of 43 new homes at Horace Jones House in Southwark, which proved successful in enabling the City Corporation to meet the needs of many local housing applicants from its own Housing Register and in managing nominations from the London Borough of Southwark.

Current Position

6. Local Lettings Policies are proposed for:
 - the 66 new homes to be provided as part of the City of London Primary Academy Islington (“CoLPAI”) development, adjacent to Golden Lane Estate
 - three new homes which are being provided as part of the Isleden House in-fill project in Islington
7. The nomination rights for the CoLPAI development are split 50/50 between the City Corporation and the London Borough of Islington, where the City Corporation will let 33 homes. At Isleden House, Islington will nominate an applicant for one property, with the remaining two being allocated by the City Corporation.

Proposals

8. Local Lettings Policies are intended to maximise the benefit of new housing developments for local residents. The use of direct offers ensures that homes are

allocated to those with the highest needs, without relying on applicants to place bids through the Choice Based Lettings system.

9. The proposed policies will benefit people currently living locally to the developments at Golden Lane Estate and Isleden House, by providing homes that better meet their needs (for example, families living in overcrowded accommodation who wish to remain in the area in which they currently live).
10. By making direct allocations in the first instance to current tenants requiring a transfer, a significant number of existing homes at Isleden House and Golden Lane Estate will be made available to people on the City's Housing Register. The policies, therefore, have the potential to help more than just the 35 households who will be allocated a new home by the City Corporation at CoLPAI and Isleden House.
11. Direct offers will be made to current tenants requiring a transfer and with at least twelve months' residence at either Isleden House or the Golden Lane Estate. The offers will be made to those applicants assessed as being in greatest need according to the Housing Allocations Scheme's points-based system. Where two applicants have the same assessed points, the date of registration will be used to determine priority.
12. Any homes remaining after the initial offers are made will be allocated as normal in accordance with the Housing Allocations Scheme. This may include making direct offers to Housing Register applicants with high priority living on other City Corporation estates, or non-resident applicants with high assessed needs.
13. The Local Lettings Policies will support the following aims:
 - Making the best use of new and existing housing stock, to maximise benefit to Housing Register applicants
 - Enabling local residents to share in the benefits of new developments and in-fill schemes
 - Supporting community cohesion by allowing tenants to remain in the local area in which they are settled
 - Ensuring that applicants with specific needs are offered a new home locally which meets those needs (e.g., those requiring an adaptable home)
14. The primary group of applicants that will benefit from this approach will be families living in overcrowded conditions, however some other important needs will also be met through the provision of homes to applicants requiring an accessible flat.
15. The policies will free up a significant number of smaller homes, which will be made available to single applicants and couples on the Housing Register.
16. Applicants with higher assessed priority are likely to have a medical or welfare need (or multiple needs), and the suggested approach will therefore support the City Corporation's aims of supporting the most vulnerable in our local communities through the allocation of settled accommodation, with a Secure tenancy, at social rent.

17. The Local Lettings Policies will lapse after twelve months, which will give time for all affected properties to be completed and let.

Corporate & Strategic Implications

Legal implications

18. Local Lettings Policies are permitted in accordance with the Housing Act, 1996 s.166A (6). This provision enables housing authorities to allocate particular accommodation to 'persons of a particular description', whether or not they fall within the reasonable preference categories listed at s.166A (3). Such policies may be employed to meet a wide variety of policy aims and housing management objectives.

Equalities implications

19. The proposed Policies have been subjected to a full Equality Analysis (EA). The EA has not identified any negative equalities impacts of the proposed policies. Several positive impacts have been identified, for instance in relation to disabled applicants, who will have greater access to suitable housing accommodation. The allocation of larger housing units to families currently living in overcrowded accommodation will also free up a significant number of smaller homes, which will be allocated to single, working-age applicants. Low-income workers with a City connection make up a significant percentage of the current Housing Register.

Conclusion

20. Members are asked to approve the implementation of two Local Lettings Policies to govern the allocation of the 69 new homes being delivered at the CoLPAI development and the Isleden House in-fill project. The draft Policies, which are enabled by the City Corporation's main Housing Allocations Scheme, set out how the homes will be allocated and provide for direct offers to be made to existing Housing Register applicants with a specified local connection to the two new housing schemes.

21. The policies will maximise the benefit of the new homes to local applicants with high assessed needs, while ensuring that homes within the City Corporation's current stock are freed up for allocation to Housing Register applicants.

Appendices

- Appendix One: Draft Local Lettings Policies – CoLPAI and Isleden House
- Appendix Two: Equalities Impact Assessment

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Local Lettings Policy

For the 66 Homes at City of London Primary Academy Islington (CoLPAI)

Introduction

1. A development of 66 new homes is being provided by the City of London Corporation (the "City Corporation") as part of the redevelopment of the former Richard Cloudesley School site on Golden Lane, EC1Y (the City of London Primary Academy Islington or "CoLPAI" scheme). The site is within the boundary of the London Borough of Islington ("Islington").
2. These new homes will be let under Secure (Housing Act 1985) tenancies, at social rent levels. The scheme consists of:
 - 35 one-bedroom flats
 - 26 two-bedroom flats
 - 5 three-bedroom flats.
3. The new homes are being delivered as part of the City Corporation's wider strategic commitment to increase the supply of homes for social rent. The letting of these homes will be subject to this Local Lettings Policy ("LLP").

Purpose of the Local Lettings Policy

4. This LLP sets how these properties will be let and which households will be prioritised for allocation of a home in the new building.
5. The LLP allows the allocation of new homes to be managed outside the usual Choice Based Lettings process, via the use of direct offers to those on the Housing Register. This enables officers to allocate homes to those most in need and ensure best use of the new properties to meet the needs of housing applicants.

Basis of the Local Lettings Policy

6. The City Corporation operates a Housing Allocations Scheme pursuant to the Housing Act 1996, s.166A (1). This describes how the City Corporation will manage its Housing Register and the allocation of homes under its management.
7. Part 14 of the City Corporation's Housing Allocations Scheme provides that the City Corporation may operate Local Lettings Policies or plans in certain circumstances, with the aim of meeting various legitimate aims.

The legal basis for Local Lettings Policies is s.166A(6) of the Housing Act 1996 and s.21 of the Housing Act 1985.

Objectives of the Local Lettings Policy

8. The LLP for CoLPAI will support several legitimate policy objectives:
- The homes at CoLPAI will increase the City's stock of social rented homes through the provision of homes increasing the choice available to, and opportunities for, those on low and medium incomes.
 - The scheme will give priority to existing social tenants in the City of London on the Golden Lane Estate, and on the City's housing estates in other Boroughs, in order to meet their aspirations and housing needs, and generate additional lettings within our stock for the benefit of other households in housing need
 - The Policy will support the creation or maintenance of a sustainable community by ensuring stable lettings that benefit local residents living close to the CoLPAI development, enabling current households to benefit from the new homes
 - The LLP will enable the City Corporation to meet the housing needs of many households in priority need and encourage better management of our stock by giving priority to overcrowded and under occupying households.

Local Lettings Policy for CoLPAI

9. There is an agreed 50/50 split in the number of homes to be let to applicants from the City of London and Islington.

Type of flat	No of Flats	City nomination	LBI nomination
One bedroom	35	26	9
Two bedroom	26	6	20
Three bedroom	5	1	4
Total number	66	33 (50%)	33 (50%)

10. 50% of properties will be subject to nominations by Islington. Households nominated by Islington will be either existing tenants of that local

authority, or other applicants who qualify for the housing register of that authority.

11. In the first instance homes at CoLPAI qualifying for a City nomination will be let to households that currently live in the City of London on the Golden Lane Estate and have done so for a minimum of twelve months.
12. If there are insufficient households for the available flats, Secure tenants on other City Corporation estates will be made an offer as described below.
13. Priority will be given to existing social tenants on the City Corporation's Housing Register. Within this group, those who are overcrowded, under occupying or who have a severe medical or welfare need will be prioritised in line with the approach and definitions of the City's Housing Allocations Scheme.
14. In the event of several households meeting these criteria and where households have the same level of need, households will then be prioritised in priority date order from when they joined the Housing Register.
15. Thereafter other applicants on the Housing Register will be prioritised based on their level of housing needs and their date of application to the Housing Register.
16. Applications from existing social tenants will be excluded where there is a history of rent arrears, antisocial behaviour, or other significant breaches of tenancy conditions, per the provisions of the Housing Allocations Scheme.

Tenancy type

17. Where homes in CoLPAI are allocated to existing social tenants (whether a tenant of the City or of another social landlord) who already hold a lifetime tenancy, a lifetime secure tenancy will be granted. For new tenants this will be subject to the completion of an Introductory period. For more details, please refer to our Introductory Tenancies Policy.

Duration

18. This LLP will be valid for twelve from the date of its approval. At which point it must either be renewed or replaced, or the allocation of homes will be governed by the City's Allocation Policy.

Equalities

19. This LLP has been assessed through an Equalities Impact Assessment.

Local Lettings Policy

For the Three New Homes at Isleden House, N1

Introduction

20. Three new homes are being provided by the City of London Corporation (the "City Corporation") at the existing Isleden House complex in Prebend Street, Islington. The three homes will all be 3-bed, family homes.
21. These new homes will be let under Secure (Housing Act 1985) tenancies, at social rent levels.
22. The new homes are being delivered as part of the City Corporation's wider strategic commitment to increase the supply of homes for social rent. The letting of these homes will be subject to this Local Lettings Policy ("LLP").

Purpose of the Local Lettings Policy

23. This LLP sets how these properties will be let and which households will be prioritised for allocation of a home in the new building.
24. The LLP allows the allocation of new homes to be managed outside the usual Choice Based Lettings process, via the use of direct offers to those on the Housing Register. This enables officers to allocate homes to those most in need and ensure best use of the new properties to meet the needs of housing applicants.

Basis of the Local Lettings Policy

25. The City Corporation operates a Housing Allocations Scheme pursuant to the Housing Act 1996, s.166A (1). This describes how the City Corporation will manage its Housing Register and the allocation of homes under its management.
26. Part 14 of the City Corporation's Housing Allocations Scheme provides that the City Corporation may operate Local Lettings Policies or plans in certain circumstances, with the aim of meeting various legitimate aims. The legal basis for Local Lettings Policies is s.166A(6) of the Housing Act 1996 and s.21 of the Housing Act 1985.

Objectives of the Local Lettings Policy

27. The LLP for Isleden House will support several legitimate policy objectives:

- The three new homes at will increase the City's stock of social rented homes through the provision of homes increasing the choice available to, and opportunities for, those on low and medium incomes.
- The scheme will give priority to existing social tenants living at Isleden House, in order to meet their aspirations and housing needs, and generate additional lettings within our stock for the benefit of other households in housing need
- The Policy will support the creation or maintenance of a sustainable community by ensuring stable lettings that benefit local residents living at Isleden House, enabling current residents to benefit from the new homes
- The LLP will enable the City Corporation to meet the housing needs of local households in priority need and encourage better management of our stock by giving priority to overcrowded and under occupying households.

Local Lettings Policy for Isleden House

28. There is an agreed split in the number of homes to be let to applicants from the City of London and Islington; the City Corporation will nominate two households and the London Borough of Islington will nominate applicants for one property.
29. Households nominated by the City Corporation will be current Housing Register applicants living at Isleden House.
30. Households nominated by Islington will be either existing tenants of that local authority, or other applicants who qualify for the housing register of that authority.
31. In the first instance the homes at Isleden House qualifying for a City nomination will be let to households that currently live at Isleden House and have done so for a minimum of twelve months.
32. If there are insufficient households for the available flats, Secure tenants on other City Corporation estates will be made an offer as described below.
33. Priority will be given to existing social tenants on the City Corporation's Housing Register. Within this group, those who are overcrowded, under occupying or who have a severe medical or welfare need will be prioritised in line with the approach and definitions of the City's Housing Allocations Scheme.

34. In the event of several households meeting these criteria and where households have the same level of need, households will then be prioritised in priority date order from when they joined the Housing Register.
35. Thereafter other applicants on the Housing Register will be prioritised based on their level of housing needs and their date of application to the Housing Register.
36. Applications from existing social tenants will be excluded where there is a history of rent arrears, antisocial behaviour, or other significant breaches of tenancy conditions, per the provisions of the Housing Allocations Scheme.

Tenancy type

37. Where homes at Isleden House are allocated to existing social tenants (whether a tenant of the City or of another social landlord) who already hold a lifetime tenancy, a lifetime secure tenancy will be granted. For new tenants this will be subject to the completion of an Introductory period. For more details, please refer to our Introductory Tenancies Policy.

Duration

38. This LLP will be valid for twelve months from the date of its approval. At which point it must either be renewed or replaced, or the allocation of homes will be governed by the City's Allocation Policy.

Equalities

39. This LLP has been assessed through an Equalities Impact Assessment.

EQUALITY ANALYSIS (EA) TEMPLATE

Decision *COLPAI and Isleden House Local Letting Policies*

Date

November 2022



What is the Public Sector Equality Duty (PSED)?

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<p>The Public Sector Equality Duty (PSED) is set out in the Equality Act 2010 (s.149). This requires public authorities, in the exercise of their functions, to have ‘due regard’ to the need to:</p> <ul style="list-style-type: none"> • Eliminate discrimination, harassment and victimisation • Advance equality of opportunity between people who share a protected characteristic and those who do not, and Foster good relations between people who share a protected characteristic and those who do not <p>The characteristics protected by the Equality Act 2010 are:</p> <ul style="list-style-type: none"> • Age • Disability • Gender reassignment • Marriage and civil partnership • Pregnancy and maternity • Race • Religion or belief • Sex (gender) • Sexual orientation <p>What is due regard?</p> <ul style="list-style-type: none"> • It involves considering the aims of the duty in a way that is proportionate to the issue at hand • Ensuring real consideration is given to the aims and the impact of policies with rigour and with an open mind in such a way that influences the final decision 	<p>The general equality duty does not specify how public authorities should analyse the effect of their business activities on different groups of people. However, case law has established that equality analysis is an important way public authorities can demonstrate that they are meeting the requirements.</p> <p>Case law has established the following principles apply to the PSED:</p> <ul style="list-style-type: none"> • Knowledge – the need to be aware of the requirements of the Equality Duty with a conscious approach and state of mind. • Sufficient Information – must be made available to the decision maker. • Timeliness – the Duty must be complied with before and at the time that a particular policy is under consideration or decision is taken not after it has been taken. • Real consideration – consideration must form an integral part of the decision-making process. It is not a matter of box-ticking; it must be exercised in substance, with rigour and with an open mind in such a way that it influences the final decision. • Sufficient information – the decision maker must consider what information he or she has and what further information may be needed in order to give proper consideration to the Equality Duty. • No delegation – public bodies are responsible for ensuring that any third parties which exercise functions on their behalf are capable of complying with the Equality Duty, are required to comply with it, and that they do so in practice. It is a duty that cannot be delegated. • Review – the duty is not only applied when a policy is developed and decided upon, but also when it is implemented and reviewed.
<ul style="list-style-type: none"> • Due regard should be given before and during policy formation and when a decision is taken including cross cutting ones as the impact can be cumulative. 	

What is an Equality Analysis (EA)?

An equality analysis is a risk assessment tool that examines whether different groups of people are, or could be, disadvantaged by service provision and decisions made. It involves using quality information, and the results of any engagement or consultation with particular reference to the protected characteristics to understand the actual effect or the potential impact of policy and decision making decisions taken.

The equality analysis should be conducted at the outset of a project and should inform policy formulation/proposals. It cannot be left until the end of the process.

The purpose of the equality analysis process is to:

- Identify unintended consequences and mitigate against them as far as possible, and
- Actively consider ways to advance equality and foster good relations.

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The objectives of the equality analysis are to:

- Identify opportunities for action to be taken to advance quality of opportunity in the widest sense;
- Try and anticipate the requirements of all service users potentially impacted;
- Find out whether or not proposals can or do have any negative impact on any particular group or community and to find ways to avoid or minimise them;
- Integrate equality diversity and inclusion considerations into the everyday business and enhance service planning;
- Improve the reputation of the City Corporation as an organisation that listens to all of its communities;
- Encourage greater openness and public involvement.

However, there is no requirement to:

- Produce an equality analysis or an equality impact assessment
- Indiscriminately collect diversity data where equalities issues are not significant
- Publish lengthy documents to show compliance
- Treat everyone the same. Rather, it requires public bodies to think about people's different needs and how these can be met
- Make service homogenous or to try to remove or ignore differences between people.

An equality analysis should indicate improvements in the way policy and services are formulated. Even modest changes that lead to service improvements are important. In it is not possible to mitigate against any identified negative impact, then clear justification should be provided for this.

By undertaking an equality analysis officers will be able to:

- Explore the potential impact of proposals before implementation and improve them by eliminating any adverse effects and increasing the positive effects for equality groups
- Contribute to community cohesion by identifying opportunities to foster good relations between different groups
- Target resource more effectively
- Identify direct or indirect discrimination in current policies and services and improve them by removing or reducing barriers to equality

How to demonstrate compliance

The Key point about demonstrating compliance with the duty are to:

- Collate sufficient evidence to determine whether changes being considered will have a potential impact on different groups.
- Ensure decision makers are aware of the analysis that has been undertaken and what conclusions have been reached on the possible implications.
- Keep adequate records of the full decision making process.

In addition to the protected groups, it may be relevant to consider the impact of a policy, decision or service on other disadvantaged groups that do not readily fall within the protected characteristics, such as children in care, people who are affected by socio-economic disadvantage or who experience significant exclusion or isolation because of poverty or income, education, locality, social class or poor health, ex-offenders, asylum seekers, people who are unemployed, homeless or on a low income.

Complying with the Equality Duty may involve treating some people better than others, as far as this is allowed by discrimination law. For example, it may involve making use of an exception or the positive action provisions in order to provide a service in a way which is appropriate for people who share a protected characteristic – such as providing computer training to older people to help them access information and services.

Page 18 Making account of disabled people's disabilities

The Equality Duty also explicitly recognises that disabled people's needs may be different from those of non-disabled people. Public bodies should therefore take account of disabled people's impairments when making decisions about policies or services. This might mean making reasonable adjustments or treating disabled people better than non-disabled people in order to meet their needs.

Deciding what needs to be assessed

The following questions can help determine relevance to equality:

- Does the policy affect service users, employees or the wider community, including City businesses?
- How many people are affected and how significant is the impact on them?
- Is it likely to affect people with particular protected characteristics differently?
- Is it a major policy, significantly affecting how functions are delivered?
- Will the policy have a significant impact on how other organisations operate in terms of equality?
- Does the policy relate to functions that engagement has identified as being important to people with particular protected characteristics?
- Does the policy relate to an area with known inequalities?
- Does the policy relate to any equality objectives that have been set?

Consider:

- How the aims of the policy relate to equality.
- Which aspects of the policy are most relevant to equality?
- Aims of the general equality duty and which protected characteristics the policy is most relevant to.

If it is not clear if a policy or decision needs to be assessed through an equality analysis, a Test of Relevance screening tool has been designed to assist officers in determining whether or not a policy or decision will benefit from a full equality analysis.

Completing the Test of Relevance screening also provides a formal record of decision making and reasoning. It should be noted that the PSED continues up to and after the final decision is taken and so any Test of Relevance and/or full Equality Analysis should be reviewed and evidenced again if there is a change in strategy or decision.

Role of the assessor

An assessor's role is to make sure that an appropriate analysis is undertaken. This can be achieved by making sure that the analysis is documented by focussing on identifying the real impact of the decision and set out any mitigation or improvements that can be delivered where necessary.

Who else is involved?

Chief Officers are responsible for overseeing the equality analysis proves within departments to ensure that equality analysis exercises are conducted according to the agreed format and to a consistent standard. Departmental equality representatives are key people to consult when undertaking an equality analysis.

Depending on the subject it may be helpful and easier to involve others. Input from another service area or from a related area might bring a fresh perspective and challenge aspects differently.

In addition, those working in the customer facing roles will have a particularly helpful perspective. Some proposals will be cross-departmental and need a joint approach to the equality analysis.

How to carry out an Equality Analysis (EA)

There are five stages to completing an Equality Analysis, which are outlined in detail in the Equality Analysis toolkit and flowchart:

2.1 Completing the information gathering and research stage – gather as much relevant equality-related information, data or research as possible in relation to the policy or proposal, including any engagement or consultation with those affected;

2.2 Analyse the evidence – make and assessment of the impact or effect on different equality groups;

2.3 – Developing an action plan – set out the action you will take to improve the positive impact and / or the mitigation action needed to eliminate or reduce any adverse impact that you have identified;

2.4 Director approval and sign off of the equality analysis – include the findings from the EA in your report or add as an appendix including the action plan;

2.5 Monitor and review – monitor the delivery of the action plan and ensure that changes arising from the assessment are implemented.

The Proposal

Assessor Name:	Scott Myers, Strategy & Projects Officer, Department of Community & Children's Services	Contact Details:	Scott.Myers@cityoflondon.gov.uk
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1. What is the Proposal

The City of London Corporation has developed local lettings policies for two new build schemes currently being developed at City of London Primary Academy Islington (COLPAI) and Isleden House in Islington.

The scheme includes 66 new flats at COLPAI and 3 new flats at Isleden House, where the City Corporation has a 50% split for allocations with London Borough Islington for COLPAI, and 66% at Isleden House. These new properties will be let at social rent levels. The proposed policies determine the allocation of these properties.

At Isleden House there is a new development of three, 3-bedroom flats, and at COLPAI the scheme consists of thirty-five 1-bedroom flats, twenty-six 2-bedroom flats and five 3-bedroom flats.

The Local Lettings Policies for these new build properties take priority over the City Corporation's Allocations policy for the period set out in the policy. Upon expiration, the City Corporation's Allocations policy will set out any future prioritisation and method of allocation of these properties for social rent.

These new homes are delivered as part of the City Corporation's wider strategic commitment to increase the supply of social housing.

A single Equality Impact Assessment has been created for both schemes due to the similarity of the details set out.

2. What are the recommendations?

To maximise housing stock and opportunities for rehousing these two new developments create, we are seeking agreement from Members to authorise the Local Lettings Policy for both schemes. These policies will allow priority to be given to existing City of London secure tenants who are already registered for a housing transfer.

This will have a positive impact on relieving overcrowding by giving more opportunity for under occupying households to downsize to a smaller property.

This will then create additional property voids ready to be allocated to other City of London social housing applicants.

Overall, this will help us meeting our housing need and encourage better management of our housing stock by giving priority to overcrowded and under occupying households.

Who is affected by the Proposal?

Tenants of social housing owned the City of London Corporation, and of other social landlords within the City of London boundary; housing waiting list applicants; and homeless applicants.

As the London Borough of Islington also have nomination rights, it will also affect their tenants, waiting list applicants and homeless households. These individuals are not covered by the City Corporation's Local Lettings policies and will have their own process for allocating properties for those properties they have nomination rights for.

Age

Check this box if NOT applicable

Age - Additional Equalities Data (Service Level or Corporate) *Include data analysis of the impact of the proposals*

Type of Property	Totals (waiting + transfers)	Waiting list	Transfer

Studio	320	320	
One bed	119	74	45
Two bed	200	134	66
Three bed	117	61	56
Four Bed	23	12	11
Total	779	601	178

The above table shows the amount of people currently registered on the City of London

Housing Register. This includes people waiting for different types of property, as well as those waiting for a transfer to either a smaller or larger properties.

Most people waiting for Studio properties are single, working aged people, with the majority being low-income City workers (e.g. those working in hospitality or service industry). One bed property applicants are single people with parental responsibilities for children who do not live with them, couples or people wishing to transfer from a studio property.

All the people who have registered for a transfer to a two-bed property have at least one dependent child. All three bed transfers are people who have at least two children and four bed transfers have at least three children.

Those waiting for on the transfer list as of October 2022, 23 are downsizing to smaller properties of all sizes, 36 currently live in a studio property and have registered for a 1-bed property, and 110 households are facing overcrowding (of which 15 are experiencing severe overcrowding of lacking 2 bedrooms or more).

The data above shows that there are significant numbers waiting for larger properties (particularly two-bed properties) and therefore households in larger properties wanting to downsize will positively impact those who live in overcrowding conditions and require a larger property.

What is the proposal's impact on the equalities aim?

Older people

The proposed policies aim to have a positive impact on this protected characteristic. The newly developed properties allocated through the Local Lettings Policy will be let at social rent, and therefore will be more affordable for low to medium-income households. This will be a positive for households including low to medium-income pensioners. These groups of households may also benefit from voids created by the scheme.

The proposals will also have a positive impact on economic, health and social factors relating to this group. This includes a reducing social care burden if in more appropriate housing, a reduction in potential loneliness and social isolation by being able to stay within the community and for those who can move to a more appropriate sized property, a potential reduction in the cost of heating the property and improvements to health and wellbeing.

Elderly people are more likely to under-occupy and households in this circumstance are given priority within this policy as well as the overall housing allocation scheme.

The policies also give priority to existing social housing tenants on the relevant estate. This will positively impact older residents as they are more likely to have been living on these estates for a longer period, according to national research (there is no local data to support this).

According to the Office of National Statistics in 2021, the proportion of people living alone in England has increased by 8.3% in the past 10 years, with 26% of people in London living in one-person households. Elderly people make up a large part of this increase and the overall number of people living alone and therefore the scheme provides one-bedroom properties which would positively impact single household pensioners who have applied to transfer to a smaller property.

Households with dependents (children and young people)

The proposed policies aim to have a positive impact on households who contain children as dependents. The schemes provide family sized units, and as these policies prioritise households facing overcrowding, will have a positive impact on helping to

What actions can be taken to avoid or mitigate any negative impact or to better advance equality and foster good relations?

Most social housing tenants living on City Corporation estates are working age adults, with a sizeable minority of households containing a child dependency or older residents. With the approval of this policy, the negative impact of residents living in overcrowded properties, or properties that have become too big for them will be reduced as priority will be given to local households in the greatest need. This will create additional voids for new social housing tenants or transfers for existing tenants, who may or may not fall into this protected characteristic. By following these policies and the existing Housing Allocation Policy, households in greatest need will be prioritised, which provides a positive impact for this group.

<p>alleviate overcrowding, whilst creating voids within the existing housing stock to further meet need.</p> <p>Furthermore, the proposals will have a positive social and health impact on households with child dependents. Due to the greater number of properties available for transfer and the prioritisation of existing tenants, households facing overcrowding if they are able to move into more appropriate housing will have less of a burden on social care and will have a positive impact on their health and wellbeing. There is also evidence about the negative impact of overcrowding on the educational attainment of children and young people.</p>	
<p>Key borough statistics:</p> <p>The City has proportionately more people aged between 25 and 69 living in the Square Mile than Greater London. Conversely there are fewer young people. Approximately 955 children and young people under the age of 18 years live in the City. This is 11.8% of the total population in the area. Summaries of the City of London age profiles from the 2011 Census can be found on our website.</p>	<p>A number of demographics and projections for Demographics can be found on the Greater London Authority website in the London DataStore. The site details statistics for the City of London and other London authorities at a ward level:</p> <ul style="list-style-type: none"> • Population projections <p>NB: These statistics provide general data for these protected characteristics. You need to ensure you have sufficient data about those affected by the proposal.</p>

Disability

Disability - Additional Equalities Data (Service Level or Corporate)

Information about people with disabilities on the Housing Register is not routinely collected, but it is not anticipated that disabled people will be impacted negatively by the policies. Relatively few people qualify for medical or welfare priority and those that do are rehoused quickly due to the high degree of need.

What is the proposal's impact on the equalities aim?

The impact on the Disability protected characteristic is neutral. Both policies prioritise those with severe medical or welfare need and are prioritised in line with the approach and definitions of the City Corporation's Housing Allocation scheme. However, data about people with disabilities is not routinely collected, but it is not anticipated that disabled people will be impacted negatively by the policies.

Key borough statistics:

Day-to-day activities can be limited by disability or long term illness – In the City of London as a whole, 89% of the residents feel they have no limitations in their activities – this is higher than both in England and Wales (82%) and Greater London (86%). In the areas outside the main housing estates, around 95% of the residents responded that their activities were not limited. Additional information on Disability and Mobility data, London, can be found on the [London Datastore](#).

What actions can be taken to avoid or mitigate any negative impact or to better advance equality and foster good relations?

In the event of several households meeting the same criteria of severe medical need or welfare need, households will be prioritised in priority date order from when they joined the Housing Register, as set out in the policies. Those with the greatest medical or welfare need will be prioritised, although the number of eligible people who qualify on this ground is low.

To further improve the analysis on the impact of this protected characteristic, improvements in the collection of relevant data of applicants with a disability should be considered. This would allow for greater analysis on the number of individuals impacted in relation to other protected groups.

The 2011 Census identified that for the City of London's population:

- 4.4% (328) had a disability that limited their day-to-day activities a lot
 - 7.1% (520) had a disability that limited their day-to-day activities a little
- Source: 2011 Census: [Long-term health problem or disability, local authorities in England and Wales](#)

NB: These statistics provide general data for these protected characteristics. You need to ensure you have sufficient data about those affected by the proposal.

Check this box if NOT applicable

Gender Reassignment

Check this box if NOT applicable

Gender Reassignment - Additional Equalities Data (Service Level or Corporate)

Information about gender reassignment in relation to those on the Housing Register is not routinely collected.

What is the proposal's impact on the equalities aim?

The policies do not take into consideration a person's gender assignment as part of the prioritisation of housing transfers or allocation and therefore no impact has been identified.

Key borough statistics:

- [Gender Identity update 2009 - ONS](#)

What actions can be taken to avoid or mitigate any negative impact or to better advance equality and foster good relations?

This group is not monitored but it is not anticipated that issues related to gender reassignment will be impacted negatively by these policies.

NB: These statistics provide general data for these protected characteristics. You need to ensure you have sufficient data about those affected by the proposal.

Pregnancy and Maternity

Check this box if NOT applicable

Pregnancy and Maternity - Additional Equalities Data (Service Level or Corporate)

What is the proposal's impact on the equalities aim?

The impact on this protected characteristic is positive. Homelessness legislation provides specific protections for this group, whilst existing tenants are prioritised based on need for transfers to more suitable accommodation. This includes those who are pregnant or have a new born baby if they are currently living in unsuitable accommodation.

The prioritisation covered under this protected characteristic may diminish the opportunities for homeless households, but they retain their reasonable preference in the allocation of social housing overall.

Key borough statistics:

Under the theme of population, the [ONS website](#) has a large number of data collections grouped under:

- [Contraception and Fertility Rates](#)
- [Live Births](#)

What actions can be taken to avoid or mitigate any negative impact or to better advance equality and foster good relations?

Prioritising existing tenants will create further housing opportunities at social rent for these needs' groups through newly created voids.

NB: These statistics provide general data for these protected characteristics. You need to ensure you have sufficient data about those affected by the proposal.

Check this box if NOT applicable

Race - Additional Equalities Data (Service Level or Corporate)

Information about race in relation to those on the Housing Register is not routinely collected.

What is the proposal's impact on the equalities aim?

The overall impact on this protected characteristic is neutral. Residents from an Asian, Black or Mixed Heritage background are overrepresented within statutory homelessness applications. By maximising the allocation of our housing stock by creating more opportunity for applicants to be allocated a property for social will have a positive impact on those waiting on the housing register. However, there is no mechanism in place to ensure that people from a diverse background are being allocated a fair share of properties in relation to the number of the housing waiting list.

What actions can be taken to avoid or mitigate any negative impact or to better advance equality and foster good relations?

The Prioritisation of existing tenants will create further housing opportunities at social rent for this group and will help to alleviate overcrowding and open up housing opportunities for those facing hardship whilst waiting for housing allocation.



Check this box if NOT applicable

The policies allow us to better manage our housing stock and increase the opportunities for rehousing. This will have a positive impact on this protected characteristic as this group are overrepresented in those on low-income or receiving state benefits and therefore at greater risk of experienced deprivation.

National data from the Office of National Statistics notes that households from an Asian, Black or Mixed Heritage background are more likely to be a larger family unit than other groups. Therefore, there is a greater risk of overcrowding in these households, particularly those who are multi-generational. Measures put forward within these policies create extra opportunity for overcrowded households to be allocated more appropriate housing and therefore will help alleviate some of these issues.

One prioritisation covered under this protected characteristic may diminish the opportunities for homeless households, but they retain their reasonable preference in the allocation of social housing overall.

Key borough statistics:

Our resident population is predominantly white. The largest minority ethnic groups of children and young people in the area are Asian/Bangladeshi and Mixed – Asian and White. The City has a relatively small Black population, less than London and England and Wales. Children and young people from minority ethnic groups account for 41.71% of all children living in the area, compared with 21.11% nationally. White British residents comprise 57.5% of the total population, followed by White-Other at 19%.

The second largest ethnic group in the resident population is Asian, which totals 12.7% - this group is fairly evenly divided between Asian/Indian at 2.9%; Asian/Bangladeshi at 3.1%; Asian/Chinese at 3.6% and Asian/Other at 2.9%. The City of London has the highest percentage of Chinese people of any local authority in London and the second highest in England and Wales. The City of London has a relatively small Black population comprising 2.6% of residents. This is considerably lower than the Greater London wide percentage of 13.3% and also smaller than the percentage for England and Wales of 3.3%.

See [ONS Census information](#) or [Greater London Authority projections](#).

NB: These statistics provide general data for these protected characteristics. You need to ensure you have sufficient data about those affected by the proposal.

Religion or Belief

Religion or Belief - Additional Equalities Data (Service Level or Corporate)

Information about religion or belief in relation to those on the Housing Register is not routinely collected.

What is the proposal's impact on the equalities aim?

Religion and belief are not taken into consideration as part of the housing allocation process and therefore there are no anticipated impact on this protected characteristic.

Key borough statistics – sources include:

The ONS website has a number of data collections on [religion and belief](#), grouped under the theme of religion and identity.

[Religion in England and Wales provides a summary of the Census 2011 by ward level](#)

What actions can be taken to avoid or mitigate any negative impact or to better advance equality and foster good relations?

This group is not monitored but it is not anticipated that faith groups will be impacted negatively by these policies.

NB: These statistics provide general data for these protected characteristics. You need to ensure you have sufficient data about those affected by the proposal.

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Sex

Check this box if NOT applicable

Sex - Additional Equalities Data (Service Level or Corporate)

What is the proposal's impact on the equalities aim?

The sex of an individual or family members are not taken into consideration as part of the housing allocation process and therefore there are no anticipated impact on this protected characteristic.

What actions can be taken to avoid or mitigate any negative impact or to better advance equality and foster good relations?

It is not anticipated that this group will be impacted negatively by these policies.

Check this box if NOT applicable

Key borough statistics:

At the time of the [2011 Census the usual resident population of the City of London](#) could be broken up into:

- 4,091 males (55.5%)
- 3,284 females (44.5%)

A number of demographics and projections for demographics can be found on the [Greater London Authority website in the London DataStore](#). The site details statistics for the City of London and other London authorities at a ward level:

- [Population projections](#)

NB: These statistics provide general data for these protected characteristics. You need to ensure you have sufficient data about those affected by the proposal.



Check this box if NOT applicable

Sexual Orientation

Sexual Orientation - Additional Equalities Data (Service Level or Corporate)

Information about sexual orientation in relation to those on the Housing Register is not routinely collected.

<p>What is the proposal’s impact on the equalities aim?</p> <p>Sexual orientation is not taken into consideration as part of the housing allocation process or asked for during the application process and therefore there are no anticipated impact on this protected characteristic.</p>	<p>What actions can be taken to avoid or mitigate any negative impact or to better advance equality and foster good relations?</p> <p>This group is not monitored, but it is not anticipated that this group will be impacted negatively by these policies.</p>
<p>Key borough statistics:</p> <ul style="list-style-type: none"> • Sexual Identity in the UK – ONS 2014 • Measuring Sexual Identity - ONS 	<p>NB: These statistics provide general data for these protected characteristics. You need to ensure you have sufficient data about those affected by the proposal.</p>

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Check this box if NOT applicable

Marriage and Civil Partnership

Check this box if NOT applicable

Marriage and Civil Partnership - Additional Equalities Data (Service Level or Corporate)

What is the proposal's impact on the equalities aim?

The number of families that include a couple in a legally registered partnership in the UK has increased by 4% in the past 10-years, to 12.7 million; by comparison, the number of cohabiting couple families saw an increase of 23% over the same period, to 3.6 million.

Although most households are in a legally registered partnership, this is not taken into account as part of the Local Lettings Policies, and therefore there are no anticipated impacts on this protected characteristic.

Key borough statistics – sources include:

- [The 2011 Census contain data broken up by local authority on marital and civil partnership status](#)

What actions can be taken to avoid or mitigate any negative impact or to better advance equality and foster good relations?

It is not anticipated that couples married or in a civil partnership will be negatively impacted by these policies.

NB: These statistics provide general data for these protected characteristics. You need to ensure you have sufficient data about those affected by the proposal.



Check this box if NOT applicable

Additional Impacts on Advancing Equality and Fostering Good Relations

Additional Equalities Data (Service Level or Corporate)

Are there any additional benefits or risks of the proposals on advancing equality and fostering good relations not considered above? The policies will ensure that newly created housing stock is allocated on a priority basis that creates the maximum amount of housing opportunities within our current housing stock by creating voids. The City Corporation’s Housing Allocations Policy will continue to govern our overall approach to housing allocations, and the application of these policies to the new build properties will not alter this. This will have a positive impact on all protected characteristics as set out in the Equality Act 2010.

What actions can be taken to avoid or mitigate any negative impact on advancing equality or fostering good relations not considered above?

It is not anticipated that these policies will have a negative impact on the advancing of equality or fostering good relations.

This section seeks to identify what additional steps can be taken to promote these aims or to mitigate any adverse impact. Analysis should be based on the data you have collected above for the protected characteristics covered by these aims.

In addition to the sources of the information highlighted above – you may also want to consider using:

- Equality monitoring data in relation to take-up and satisfaction of the service
- Equality related employment data where relevant
- Generic or targeted consultation results or research that is available locally, London-wide or nationally
- Complaints and feedback from different groups.

Check this box if NOT applicable

Additional Impacts on Social Mobility

Additional Social Mobility Data (Service level or Corporate)

Are there any additional benefits or risks of the proposals on advancing Social Mobility?

The policies will promote equality of opportunity and prevents unlawful discrimination that would have an adverse impact on the advancement of social mobility.

What actions can be taken to avoid or mitigate any negative impact on advancing Social Mobility not considered above?

It is not anticipated that these policies will have a negative impact on the advancing of social mobility.

This section seeks to identify what additional steps can be taken to promote the aims or to mitigate any adverse impact on social mobility. This is a voluntary requirement (agreed as policy by the Corporation) and does not have the statutory obligation relating to protected characteristics contained in the Equalities Act 2010. Analysis should be based on the data you have available on social mobility and the access of all groups to employment and other opportunities. In addition to the sources of information highlighted above – you may also want to consider using:

- Social Mobility employment data
- Generic or targeted social mobility consultation results or research that is available locally, London-wide or nationally
- Information arising from the Social Mobility Strategy/Action Plan and the Corporation's annual submissions to the Social Mobility Ind

Conclusion and Reporting Guidance

Set out your conclusions below using the EA of the protected characteristics and submit to your Director for approval.

If you have identified any negative impacts, please attach your action plan to the EA which addresses any negative impacts identified when submitting for approval.

If you have identified any positive impacts for any equality groups, please explain how these are in line with the equality aims.

Review your EA and action plan as necessary through the development and at the end of your proposal/project and beyond.

Retain your EA as it may be requested by Members or as an FOI request. As a minimum, refer to any completed EA in background papers on reports, but also include any appropriate references to the EA in the body of the report or as an appendix.

This analysis has concluded that ...

There are no identified negative impacts because of this policy. The application of these policies will have a positive impact alleviating the housing need of some of our most vulnerable residents by allocating properties based on need, whilst creating the maximum number of new voids for residents waiting on our Housing Register or those currently living in unsuitable accommodation.

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Outcome of analysis – check the one that applies

Outcome 1

No change required where the assessment has not identified any potential for discrimination or adverse impact and all opportunities to advance equality have been taken.

Outcome 2

Adjustments to remove barriers identified by the assessment or to better advance equality. Are you satisfied that the proposed adjustment will remove the barriers identified.

Outcome 3

Continue despite having identified some potential adverse impacts or missed opportunities to advance equality. In this case, the justification should be included in the assessment and should be in line with the duty to have 'due regard'. For the most important relevant policies, compelling reasons will be needed. You should consider whether there are sufficient plans to reduce the negative impact and/or plans to monitor the actual impact.

Outcome 4

Stop and rethink when an assessment shows actual or potential unlawful discrimination.

Signed off by
Director:

Click or tap here to enter text.

Name: *Scott Myers*

Date *14/10/2022*

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Committees: Community and Children’s Services Committee – For Decision Education Board – For Information Culture, Heritage, and Libraries – For Information	Dated: 03/11/2022 02/12/2022 14/11/2022
Subject: Children and Young People’s Plan 2022–25	Public
Which outcomes in the City Corporation’s Corporate Plan does this proposal aim to impact directly?	1,2,3,4
Does this proposal require extra revenue and/or capital spending?	N
If so, how much?	N/A
What is the source of Funding?	N/A
Has this Funding Source been agreed with the Chamberlain’s Department?	N/A
Report of: Andrew Carter, Director – Community and Children’s Services	For Decision – CCS For Information – CHL & EB
Report author: Scott Myers, Strategy & Projects Officer, Department of Community and Children’s Services	

Summary

The Children and Young People’s Plan 2022–25 (CYPP) sets the strategic priorities for the City Corporation to ensure that children and young people who live or study in the Square Mile, or access our services, live the best life that they can.

This paper sets out the final version of the plan for Members’ approval. This final version was developed in response to feedback from a 12-week public consultation.

Recommendation

Members are asked to:

- Approve the Children and Young People’s Plan 2022–25

Main Report

Background

1. CYPP’s were introduced by the Children Act 2004 which asked local authorities to write a single, strategic, overarching plan for all services provided for children and young people. Statutory regulations were revoked in October 2012, and local authorities are no longer required to prepare a plan. However, it is still seen as best practice to develop a plan that focuses on several shared strategic priorities that drive the continued improvement in outcomes for children and young people.
2. The draft CYPP for 2022–25 put forward to public consultation five key outcomes, each with four areas of focus. These outcomes were as follows:

- a. Children and young people are and feel safe
 - b. Children and young people are happy, healthy and enjoy good mental health and wellbeing
 - c. Children and young people have the resources to develop independence and empowerment over their services
 - d. Children and young people have the tools to fulfil their potential and are prepared for success in adulthood
 - e. Children and young people grow up with a sense of belonging.
3. The plan was updated following consultation, and a copy of the final plan for approval can be found in Appendix 1. Details of the changes can be found in the section below.
 4. The development of a dedicated action plan will be undertaken after the approval of this Plan. Actions will be developed by using the feedback from the public consultation, other engagement work recently completed, as well as further discussions with our key partners.
 5. The action plan will show how we are going to tackle the identified outcomes and focus areas and will be measured by stating what success would look like in delivering each action.
 6. The CYPP and future action plan will be overseen and monitored by the City of London's Children's Partnership Board.
 7. Details of the public consultation, as well as a summary of the initial engagement activity during the start of the development of the strategy has been set out in Appendix 3.
 8. The design of this Plan represents a change to previously developed strategies within the Department of Community and Children's Services. The design of this Plan aims to be more relevant and engaging to children and young people by being more concise, visually appealing through use of graphics and being outcome focused.

Current Position

Response to consultation feedback

9. As a result of the consultation feedback received, through either response to the consultation, responses to other related surveys, and verbal feedback from residents, elected Members of the City Corporation and City Corporation staff, the following changes to the proposed Plan have been made. Other than these changes, the rest of the proposed Plan remains the same.

Outcomes and focus areas

10. Feedback received tended to highlight some confusion regarding one of the five outcomes listed as part of the Plan – ‘Children and young people have the resources to develop independence and empowerment over their services’.
11. Some feedback received noted confusion regarding the wording of this outcome, and what it is attempting to achieve.
12. Therefore, because of this feedback, this outcome has been removed and the priorities related to it will be merged with the four outstanding outcomes.
13. Consultation feedback also raised internet safety and protection from online harms as being a priority for children and young people. To address this, an online harm focus area has been added to Outcome 1.

Data

14. All data shown within the Plan has also been updated to the latest figures as of August 2022.

Action Plan

15. Consultation feedback strongly noted the need for meaningful actions to achieve the proposed outcomes and focus areas, with clear identification of which agency is responsible, how and when this will be delivered, and what success will look like.
16. An action plan will be developed to sit alongside this Plan after approval by Members. This is to ensure that both consultation feedback, other recently undertaken engagement work with the City’s young people, and further conversations with key partners result in actions that are evidence-based, using feedback from children, young people and families, as well as other residents and service professionals.

Design

17. The design of the Children and Young People’s Plan has been developed with accessibility at the forefront, and therefore it meets the required accessibility standards.
18. In response to feedback received relating to the design and layout of the Plan as part of the consultation, accessibility has been rechecked to ensure that standards have been met.
19. To improve accessibility further, an easy-read version of the Plan will be developed based on feedback received.

UNICEF Child Friendly Cities Initiative

20. During the consultation phase of the Plan, some City Corporation Members raised the prospect of the City Corporation working towards becoming a UNICEF Child Friendly City.
21. The UNICEF Child Friendly Cities Initiative is a wide-ranging programme that requires a significant multi-year commitment.
22. Many of the requirements to become a recognised Child Friendly City align with the outcomes and focus areas of the Children and Young People’s Plan, and therefore signing up to the initiative could be seen as repeating work already underway.
23. It is therefore proposed to use the Children and Young People’s Plan and future action plan to match some the requirements, rather than pursuing the initiative formally, to drive progress much more quickly than through signing up to the initiative.

Corporate & Strategic Implications

Strategic implications

24. This Plan’s outcomes are designed to contribute to the delivery of the Corporate Plan 2018–2023 by aligning to these four outcomes:

Outcome 1: People are safe and feel safe

Outcome 2: People enjoy good health and wellbeing

Outcome 3: People have equal opportunities to enrich their lives and reach their full potential

Outcome 4: Communities are cohesive and have the facilities they need.

25. The Plan also sits below the Department of Community and Children’s Services business plan by contributing to its delivery by mirroring its priorities and applying them to the needs of our children and young people.
26. The Plan also supports, and is supported by, several other strategies and documents, such as:
 - Joint Health and Wellbeing Strategy
 - Barbican and Community Libraries Strategy
 - City & Hackney Emotional Health and Wellbeing Strategy
 - City of London Safer City Partnership Strategic Plan
 - City & Hackney Joint Mental Health Strategy
 - City of London Early Help Strategy
 - City of London Early Years Strategy
 - City of London SEND Strategy

Financial implications

27. None identified

Resource implications

28. None identified

Legal implications

29. None identified

Risk implications

30. None identified

Equalities implications

31. Developing a dedicated Children and Young People's Plan with a strong action plan will work towards tackling inequality across the Square Mile. A dedicated Equality Impact Assessment has been developed to demonstrate this, as inequality disproportionately impacts on those with protected characteristics. A copy of the Equality Impact Assessment can be found in Appendix 2

Climate implications

32. None identified

Security implications

33. None identified

Conclusion

34. The proposed Children and Young People's Plan 2022–25 is the overarching strategic document that guides services and activity related to children, young people and their families in the City of London. The outcomes and focus areas it sets out will guide our work and vision for children and young people over the years set out in the Plan. This Plan is a partnership document that allows us to deliver our services and activities in synergy with our key partners to improve the lives of children and young people in the City of London.

Appendices

- Appendix 1 – Children and Young People's Plan 2022–25
- Appendix 2 – Children and Young People's Plan 2022–25 Equality Impact Assessment
- Appendix 3 – Children and Young People's Plan 2022–25 Consultation Responses

Scott Myers

Strategy & Projects Officer
Department of Community and Children's Services

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CITY OF LONDON CHILDREN AND YOUNG PEOPLE'S PLAN 2022-25



OUR VISION

The City of London is a place where children and young people feel safe, have good mental health and wellbeing, fulfil their potential and are ready for adulthood whilst growing up with a sense of belonging.

A PICTURE OF THE

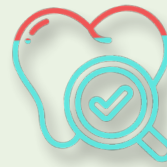
CITY OF LONDON

THE CHILDREN AND YOUNG PEOPLE WHO LIVE IN THE CITY OF LONDON

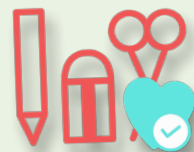
2940 children and young people (0-25) live in City of London



92% dental checks were up to date for looked after children



709 children from ethnic minority backgrounds



19 children with an Educational Health and Care Plan (October 2022)

56 Care Leavers (August 2022)



23 children in need (August 2022)



92% of annual health checks were up to date for looked after children



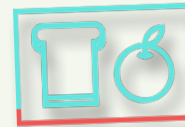
12 looked after children (August 2022)

WHAT WOULD AN AVERAGE YEAR GROUP LOOK LIKE?

If all school-aged City of London children attended one school, what would the average year group of 281 children look like?

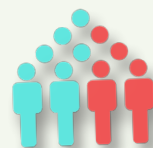


41% would be from ethnic minority backgrounds



11% would receive free school meals

47% female
53% male



59% would speak a first language other than English



Our Challenges

- Many of our young people attend school and access services outside of the local authority boundary and must travel to reach them
- Some of our children and young people live in more deprived households where issues such as poverty and overcrowding impact on their wellbeing
- The majority of our Looked After Children are Unaccompanied Asylum-Seeking Children who can have specific complex needs
- The small size of our resident population presents a challenge to our strategic planning
- The Covid-19 pandemic has increased demand for child and adolescent mental health and speech and language services, as well as impacting on children's personal, social, and emotional development

Safe

Are and feel safe at home and in their communities

Successful

Have the tools to fulfil their potential and are prepared for success in adulthood

Our outcomes for Children and Young People...

Healthy

Are happy, healthy and enjoy good mental health and wellbeing

Connected

Grow up with a sense of belonging in their communities

Our Strengths

- Fifth least deprived area in Greater London, but also with pockets of deprivation
- Children's Services and one maintained state school are rated 'Outstanding' by Ofsted
- An extensive Early Years offer provided by the City Child and Family Centre and COLTALE programme, as well as other local early years providers
- Embedded within a mature health and care system locally and well connected to neighbouring London Boroughs
- Children and young people have access to local sporting facilities, opportunities for learning and an excellent cultural offer through the City Corporation's Cultural Plan

THE VOICE OF THE CHILD

We want children and young people to work with us to help make the City of London a better place for children, young people, and their families.

City of London children and young people can have their say and participate in the service they receive.

This includes the following:

OPPORTUNITIES FOR CHILDREN AND YOUNG PEOPLE TO GET INVOLVED

- City of London Youth Forum
- City of London Children in Care Council and activities
- Special Educational Needs and Disabilities Short Breaks
- City of London Talks and Listens Enthusiastically (COLTALE) programme
- City of London Member and Deputy Member of Youth Parliament (MYP)
- City Parent Carers Forum
- City of London Corporation Focus Groups

WHAT CHILDREN AND YOUNG PEOPLE AND THEIR FAMILIES HAVE TOLD US

- They would like to see more psychological and therapeutic support for parents and children
- They would like to see more local Short Breaks for carers
- They prefer face to face meetings with their social worker and at Children in Care Council meetings, rather than being held virtually.
- Many young people have ambitions to attend university or college or take up an apprenticeship
- Young people rank having safe and secure accommodation as being a top priority
- Young people want to be protected against serious violence, knife crime and gangs

YOU SAID, WE DID

Young people and their families have made it clear to us that they would like to see what action has been taken as result of what they have told us. We will continue to produce a 'you said, we did' update to show what has been done based on the feedback that children, young people, and their families have given us.

WHERE THE PLAN SITS

City of London
Corporate Plan 2018-23

Children and Young People's Plan 2022-25

Linked with Joint Health and Wellbeing Strategy, Carers Strategy and Safer City Partnership Strategic Plan

Corporate Parenting Strategy

SEND Strategy

Early Help Strategy

Sufficiency Strategy

Early Years Strategy

Threshold of Needs

OUTCOME	OUR FOCUS IS TO	HOW WE WILL ACHIEVE THIS	HOW WE WILL MEASURE THIS
Children and young people are and feel safe	Protect children and young people from all types of abuse and neglect		
	Prevent an increase in youth offending		
	Secure policies and services that deliver excellent outcomes for our children and young people leaving care		
	Safeguard children and young people from gangs, serious violence, drug abuse and exploitation		
	Ensure children and young people are and feel safe		
Children and young people are happy, healthy and enjoy good mental health and wellbeing	Improve our Special Educational Needs and Disabilities offer		
	Improve Emotional Health and Wellbeing as we recover from the pandemic		
	To make sure children and young people grow up healthy and have the best start in life by promoting healthy choices		
	Encourage children and young people to be physically active		
	Improve children and young people's access to information in a way that suits them best		
Children and Young People have the tools to fulfil their potential and are prepared for success in adulthood	Improve youth services, education, and work experience for all		
	Support children, young people, and their families to make sure they are prepared for school		
	Encourage families with early years children to make the right decisions		
	Helping children and their families become more resilient through prevention and Early Help		
	Support children and young people to thrive and contribute to society in a positive way		
Children and Young People grow up with a sense of belonging	Make the most out of our fantastic community assets		
	Use the Neighbourhoods model to improve local services for children and young people		
	Insist that children and young people are at the heart of everything we do		
	Promote opportunities for young people to volunteer within their local communities		
	Promote excellent participation, co-production and engagement with our children and young people		

Action Plan under development!

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EQUALITY ANALYSIS (EA) TEMPLATE

Decision

Children and Young People's Plan 2022-25

Date

November 2022



What is the Public Sector Equality Duty (PSED)?

The Public Sector Equality Duty (PSED) is set out in the Equality Act 2010 (s.149). This requires public authorities, in the exercise of their functions, to have 'due regard' to the need to:

- Eliminate discrimination, harassment and victimisation
- Advance equality of opportunity between people who share a protected characteristic and those who do not, and Foster good relations between people who share a protected characteristic and those who do not

The characteristics protected by the Equality Act 2010 are:

- Age
- Disability
- Gender reassignment
- Marriage and civil partnership
- Pregnancy and maternity
- Race
- Religion or belief
- Sex (gender)
- Sexual orientation

What is due regard?

- It involves considering the aims of the duty in a way that is proportionate to the issue at hand
- Ensuring real consideration is given to the aims and the impact of policies with rigour and with an open mind in such a way that influences the final decision

The general equality duty does not specify how public authorities should analyse the effect of their business activities on different groups of people. However, case law has established that equality analysis is an important way public authorities can demonstrate that they are meeting the requirements.

Case law has established the following principles apply to the PSED:

- **Knowledge** – the need to be aware of the requirements of the Equality Duty with a conscious approach and state of mind.
- **Sufficient Information** – must be made available to the decision maker.
- **Timeliness** – the Duty must be complied with before and at the time that a particular policy is under consideration or decision is taken not after it has been taken.
- **Real consideration** – consideration must form an integral part of the decision-making process. It is not a matter of box-ticking; it must be exercised in substance, with rigour and with an open mind in such a way that it influences the final decision.
- **Sufficient information** – the decision maker must consider what information he or she has and what further information may be needed in order to give proper consideration to the Equality Duty.
- **No delegation** – public bodies are responsible for ensuring that any third parties which exercise functions on their behalf are capable of complying with the Equality Duty, are required to comply with it, and that they do so in practice. It is a duty that cannot be delegated.
- **Review** – the duty is not only applied when a policy is developed and decided upon, but also when it is implemented and reviewed.

- Due regard should be given before and during policy formation and when a decision is taken including cross cutting ones as the impact can be cumulative.

What is an Equality Analysis (EA)?

An equality analysis is a risk assessment tool that examines whether different groups of people are, or could be, disadvantaged by service provision and decisions made. It involves using quality information, and the results of any engagement or consultation with particular reference to the protected characteristics to understand the actual effect or the potential impact of policy and decision making decisions taken.

The equality analysis should be conducted at the outset of a project and should inform policy formulation/proposals. It cannot be left until the end of the process.

The purpose of the equality analysis process is to:

- Identify unintended consequences and mitigate against them as far as possible, and
- Actively consider ways to advance equality and foster good relations.

The objectives of the equality analysis are to:

- Identify opportunities for action to be taken to advance quality of opportunity in the widest sense;
- Try and anticipate the requirements of all service users potentially impacted;
- Find out whether or not proposals can or do have any negative impact on any particular group or community and to find ways to avoid or minimise them;
- Integrate equality diversity and inclusion considerations into the everyday business and enhance service planning;
- Improve the reputation of the City Corporation as an organisation that listens to all of its communities;

However, there is no requirement to:

- Produce an equality analysis or an equality impact assessment
- Indiscriminately collect diversity data where equalities issues are not significant
- Publish lengthy documents to show compliance
- Treat everyone the same. Rather, it requires public bodies to think about people's different needs and how these can be met
- Make service homogenous or to try to remove or ignore differences between people.

An equality analysis should indicate improvements in the way policy and services are formulated. Even modest changes that lead to service improvements are important. In it is not possible to mitigate against any identified negative impact, then clear justification should be provided for this.

By undertaking an equality analysis officers will be able to:

- Explore the potential impact of proposals before implementation and improve them by eliminating any adverse effects and increasing the positive effects for equality groups
- Contribute to community cohesion by identifying opportunities to foster good relations between different groups
- Target resource more effectively
- Identify direct or indirect discrimination in current policies and services and improve them by removing or reducing barriers to equality

- Encourage greater openness and public involvement.

How to demonstrate compliance

The Key point about demonstrating compliance with the duty are to:

- Collate sufficient evidence to determine whether changes being considered will have a potential impact on different groups.
- Ensure decision makers are aware of the analysis that has been undertaken and what conclusions have been reached on the possible implications.
- Keep adequate records of the full decision making process.

In addition to the protected groups, it may be relevant to consider the impact of a policy, decision or service on other disadvantaged groups that do not readily fall within the protected characteristics, such as children in care, people who are affected by socio-economic disadvantage or who experience significant exclusion or isolation because of poverty or income, education, locality, social class or poor health, ex-offenders, asylum seekers, people who are unemployed, homeless or on a low income.

Complying with the Equality Duty may involve treating some people better than others, as far as this is allowed by discrimination law. For example, it may involve making use of an exception or the positive action provisions in order to provide a service in a way which is appropriate for people who share a protected characteristic – such as providing computer training to older people to help them access information and services.

Taking account of disabled people's disabilities

The Equality Duty also explicitly recognises that disabled people's needs may be different from those of non-disabled people. Public bodies should therefore take account of disabled people's impairments when making decisions about policies or services. This might mean making reasonable adjustments or treating disabled people better than non-disabled people in order to meet their needs.

Deciding what needs to be assessed

The following questions can help determine relevance to equality:

- Does the policy affect service users, employees or the wider community, including City businesses?
- How many people are affected and how significant is the impact on them?
- Is it likely to affect people with particular protected characteristics differently?
- Is it a major policy, significantly affecting how functions are delivered?
- Will the policy have a significant impact on how other organisations operate in terms of equality?
- Does the policy relate to functions that engagement has identified as being important to people with particular protected characteristics?
- Does the policy relate to an area with known inequalities?
- Does the policy relate to any equality objectives that have been set?

Consider:

- How the aims of the policy relate to equality.
- Which aspects of the policy are most relevant to equality?
- Aims of the general equality duty and which protected characteristics the policy is most relevant to.

If it is not clear if a policy or decision needs to be assessed through an equality analysis, a Test of Relevance screening tool has been designed to assist officers in determining whether or not a policy or decision will benefit from a full equality analysis.

Completing the Test of Relevance screening also provides a formal record of decision making and reasoning. It should be noted that the PSED continues up to and after the final decision is taken and so any Test of Relevance and/or full Equality Analysis should be reviewed and evidenced again if there is a change in strategy or decision.

Role of the assessor

An assessor's role is to make sure that an appropriate analysis is undertaken. This can be achieved by making sure that the analysis is documented by focussing on identifying the real impact of the decision and set out any mitigation or improvements that can be delivered where necessary.

Who else is involved?

Chief Officers are responsible for overseeing the equality analysis process within departments to ensure that equality analysis exercises are conducted according to the agreed format and to a consistent standard. Departmental equality representatives are key people to consult when undertaking an equality analysis.

Depending on the subject it may be helpful and easier to involve others. Input from another service area or from a related area might bring a fresh perspective and challenge aspects differently.

In addition, those working in the customer facing roles will have a particularly helpful perspective. Some proposals will be cross-departmental and need a joint approach to the equality analysis.

How to carry out an Equality Analysis (EA)

There are five stages to completing an Equality Analysis, which are outlined in detail in the Equality Analysis toolkit and flowchart:

2.1 Completing the information gathering and research stage – gather as much relevant equality-related information, data or research as possible in relation to the policy or proposal, including any engagement or consultation with those affected;

2.3 – Developing an action plan – set out the action you will take to improve the positive impact and / or the mitigation action needed to eliminate or reduce any adverse impact that you have identified;

2.4 Director approval and sign off of the equality analysis – include the findings from the EA in your report or add as an appendix including the action plan;

2.2 Analyse the evidence – make and assessment of the impact or effect on different equality groups;

2.5 Monitor and review – monitor the delivery of the action plan and ensure that changes arising from the assessment are implemented.

The Proposal

Assessor Name:	Scott Myers, Strategy Officer, Department of Community & Children's Services	Contact Details:	Scott.Myers@cityoflondon.gov.uk
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1. What is the Proposal

Children & Young People's Plan 2022-25

2. What are the recommendations?

The Children and Young People's Plan (CYPP) sets the strategic priorities and direction for services that affect Children and Young People and their families in the Square Mile, covering the period of 2022-25. The Plan has been developed with integration with key services in mind, and sets out priorities and challenges for young people, how we will improve outcomes and measure success.

The CYPP sets out four main outcomes that will translate into tangible improvements for children and young people in the City of London, with the aim to work collectively with our partners and young people themselves to deliver these improvements. These four outcomes are:

1. City Children and Young People are and feel safe at home and in their communities
2. City Children and Young People are happy, healthy and enjoy good mental health and wellbeing
3. Children and Young People in the City have the tools to fulfil their potential and are prepared for success in adulthood
4. City Children and Young people grow up with a sense of belonging in their communities

The proposed Plan does not attempt or reflect a change to policy, processes, or practice within the Department of Community & Children's Services. The plan is expected to enhance the educational, health and wellbeing outcomes and provide all children and young people with positive opportunities to develop.

An action plan will be developed to sit alongside this Plan after further engagement and using the results of the public consultation. This action plan will fully consider equalities issues and this equality impact assessment will be updated as this work progresses.

3. Who is affected by the Proposal?

The Plan will aim to have a positive impact on all children, young people and their families who live and work in the City of London, access our services, and those who the City Corporation is a Corporate Parent for.

Data shows that the City of London is an affluent area, with pockets of deprivation, especially in the East of the City.

The City of London has around 8,600 residents (ONS Census 2021), of which 2900 are aged 0-25 according to the ONS mid-year population estimates for 2021.

Age

Check this box if NOT applicable

Age - Additional Equalities Data (Service Level or Corporate)

What is the proposal's impact on the equalities aim?

As the Children & Young People's Plan specifically focuses upon children and young people, there is likely to be an overall positive impact on this protected characteristic due to its focus on improving outcomes for this age group.

The plan aims to improve outcomes for children and young people aged from conception to 18 years and up to 25 years for care leavers and young people with special educational needs and disabilities.

According to the Office for National Statistics in 2021, the City of London has the lowest proportion of children aged under 16 in England in relative low-income families at 4.4% of children, and the lowest in England in absolute poverty at 3.7%.

5% of children in the City of London are between the ages of 0-5. Young people aged between 18-25 make up 14% of the population.

The number of referrals for specialist NHS mental health care has recently reached a record high in England by the end of 2021 (according to the Royal College of Psychiatrists). The data shows that there were 4.3 million referrals for conditions such as anxiety and depression. Just under a quarter of these – 1.025 million – were for children or adolescents. This reflects a 77% rise in the number of children and young people who were referred to the NHS in England for specialist mental health care in 2021. Referrals related to the City of London have also been increasing in line with national statistics and has become a huge challenge to service capacity.

What actions can be taken to avoid or mitigate any negative impact or to better advance equality and foster good relations?

The plan is underpinned and supported by a series of other departmental strategies that all have a direct impact on this protected characteristic. These include (but are not limited to):

- Community & Children Services Business Plan
- Corporate Parenting Strategy
- Early Help Strategy
- Early Years Strategy
- SEND Strategy
- Youth Justice Strategy

The CYPP outcomes and focus areas have been designed to align with some of the requirements of UNICEF's 'Child Friendly City' initiative, without formally signing up to the programme. This will increase equality of opportunity for our children and young people due to the scope and ambition of the initiative.

All proposed outcomes include a range of priorities that will have a positive impact on improving equality, inclusion, and opportunities to further children and young people's aspirations and achievements.

The Plan has a strong emphasis on improving outcomes related to mental health and wellbeing for children and young people. During the engagement process, mental health and wellbeing was the most raised theme, and has also been reflected within responses to the public consultation. Therefore, it is reflected as one of the five key outcomes and has priorities linked across the other four

<p>The development of a specific action plan alongside the CYPP will positively affect this protected characteristic as it will be based on evidence of need and concerns raised by young people themselves.</p>	<p>outcomes, which will help to better advance the negatives raised by poor mental health and wellbeing on young people.</p> <p>Despite not being a statutory strategy, the Children and Young People’s Plan will give the Corporation a strategic pathway to follow in continuing to improve the lives of children and young people, and therefore the plan’s aims will have a strong positive effect on this characteristic.</p>
<p>Key borough statistics:</p> <p>The City has proportionately more people aged between 25 and 69 living in the Square Mile than Greater London. Conversely there are fewer young people. Approximately 955 children and young people under the age of 18 years live in the City. This is 11.8% of the total population in the area. Summaries of the City of London age profiles from the 2011 Census can be found on our website.</p>	<p>A number of demographics and projections for Demographics can be found on the Greater London Authority website in the London DataStore. The site details statistics for the City of London and other London authorities at a ward level:</p> <ul style="list-style-type: none"> • Population projections <p>NB: These statistics provide general data for these protected characteristics. You need to ensure you have sufficient data about those affected by the proposal.</p>

Disability

Check this box if NOT applicable

Disability - Additional Equalities Data (Service Level or Corporate)	
<p>What is the proposal’s impact on the equalities aim?</p> <p>The CYPP will have a positive impact on this protected characteristic due to the strong focus on disadvantaged children and young people with a disability reflected within the Plan’s focus areas. The development of a dedicated action plan will also further this through targeted measures to support individuals within this group.</p> <p>The plan has a strong focus on the priorities and barriers faced by children and young people with special educational needs and disabilities, and the need for specialist provision for this cohort to support their development and keep them safe.</p> <p>Disabled children and young people are some of our most vulnerable residents. If not supported correctly, their outcomes could be considerably worse than those who are non-disabled due to the difficulties they experience in everyday life.</p> <p>The Children & Young People’s Plan aims to improve the voice of disabled children and young people through highlighting key focus areas related to the group as well</p>	<p>What actions can be taken to avoid or mitigate any negative impact or to better advance equality and foster good relations?</p> <p>The Children & Young People’s Plan has a strong focus on the priorities and barriers faced by children and young people with special educational needs and disabilities, and the need for specialist provision for this cohort to support their development and keep them safe. The priorities identified in this plan will have a positive effect in advancing equality of opportunity for young people with disabilities, and the support provided to their families.</p> <p>The Children and Young People’s Plan is also underpinned by the Special Educational Needs and Disabilities strategy. Once developed, the action plan of the Children and Young People’s Plan will have specific actions to advance equality amongst the SEND cohort in conjunction with the SEND strategy.</p> <p>The Children and Young People’s Plan has a focus on improving how children and young people take part in participation as a key priority. This will have a positive impact upon the participation that disabled young people can take part in. Young</p>

<p>as setting out how we will improve engagement with young people as part of a forthcoming action plan. National research from the council for disabled children has stated that there are significant barriers to participation for disabled children and young people. These barriers are that young people are not always aware that they have a right to participate or underestimate the value of their voice. Disabled young people are also more likely to suffer from anxiety or a lack of self-confidence and unable to share their views.</p> <p>The City of London has 19 children and young people with an Education, Health and Care Plan as of October 2022.</p> <p>10% of children attending schools in the City of London (City maintained and non-maintained, which include City and non-City of London residents) require SEND support</p> <p>10% of Looked After Children have an EHCP and 16% of Early Help cases have an EHCP.</p>	<p>people should be made aware that it is their right to participate and be included and encourage young people to be involved from an early age. If confidence is an issue for young people, then it is necessary for professionals to build a positive trust relationship with young people to improve this. Young people have also told us more broadly that one of the barriers to participation is how meetings are conducted after the Covid-19 pandemic. Young people have told us that they dislike formal virtual meetings, and therefore every effort should be put in to finding the right venue, medium and the right time for young people to have their say.</p>
<p>Key borough statistics:</p> <p>Day-to-day activities can be limited by disability or long term illness – In the City of London as a whole, 89% of the residents feel they have no limitations in their activities – this is higher than both in England and Wales (82%) and Greater London (86%). In the areas outside the main housing estates, around 95% of the residents responded that their activities were not limited. Additional information on Disability and Mobility data, London, can be found on the London Datastore.</p>	<p>The 2011 Census identified that for the City of London’s population:</p> <ul style="list-style-type: none"> • 4.4% (328) had a disability that limited their day-to-day activities a lot • 7.1% (520) had a disability that limited their day-to-day activities a little <p>Source: 2011 Census: Long-term health problem or disability, local authorities in England and Wales</p> <p>NB: These statistics provide general data for these protected characteristics. You need to ensure you have sufficient data about those affected by the proposal.</p>

Pregnancy and Maternity

Check this box if NOT applicable

Pregnancy and Maternity - Additional Equalities Data (Service Level or Corporate)

What is the proposal’s impact on the equalities aim?

The CYPP will have a positive impact on this characteristic by promoting the integration of services and highlighting the importance of a healthy pregnancy for the development of a baby.

What actions can be taken to avoid or mitigate any negative impact or to better advance equality and foster good relations?

Significant emphasis has been placed on improving pathways with health services, health visiting and the services that local authorities provide within the identified

<p>10 to 20% of mothers in England develop a mental health illness during pregnancy or the first year after having a baby (Public Health England, 2019). Health and development outcomes for children are impacted during pregnancy, and a positive well supported pregnancy will improve these outcomes.</p> <p>National statistics for the UK suggest that the birth rate is falling and will continue to fall within the next five years, having an impact on demand for maternity services.</p>	<p>priorities in relation to maternity and preparing for parenthood. This will also be strengthened within the Neighbourhoods model, which aims to further integrate health and social care within a local level.</p> <p>Although the City of London historically and currently has very low rates of adolescent pregnancy, the action plan will consider how pathways can be used and improved should the need arise for young people to be supported in this way.</p> <p>A key focus of the Plan is on mental health. Many of the priorities that focus on mental health as part of the action plan will have both a direct and in-direct impact on the mental health of pregnant women and new parents. The CYPP puts a strong focus on the integration of health services and will look to inform the development of mental health services for pregnant women to meet the required need. This will be delivered through a specific multi-agency action within the CYPP's action plan when published.</p>
<p>Key borough statistics: Under the theme of population, the ONS website has a large number of data collections grouped under:</p> <ul style="list-style-type: none"> • Contraception and Fertility Rates • Live Births 	<p>NB: These statistics provide general data for these protected characteristics. You need to ensure you have sufficient data about those affected by the proposal.</p>

Page 11
Race

Check this box if NOT applicable

Race - Additional Equalities Data (Service Level or Corporate)

<p>What is the proposal's impact on the equalities aim?</p> <p>The CYPP will have a positive impact on this protected characteristic by fostering equal opportunity for children and young people throughout its outcomes and focus areas, regardless of their racial background.</p> <p>In the City of London, 41% of children and young people are from an ethnic minority background</p> <p>The City of London has a notable Bangladeshi community, living particularly in the East of the City. 41% of children living in Bangladeshi households were living in low</p>	<p>What actions can be taken to avoid or mitigate any negative impact or to better advance equality and foster good relations?</p> <p>The Plan considers the barriers to engaging with our communities and improving engagement with all young people. The plan also promotes inclusivity throughout and will have a positive impact on people with this protected characteristic by fostering good relations through advancing equality of opportunity.</p> <p>The CYPP has an outcome to reflect the importance of children and young people feeling connected and growing up with a sense of belonging within their communities. This outcome will help tackle inequality by highlighting the</p>
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<p>income, which is 21% higher than the national average. Children in Bangladeshi households were the most likely to live in low income and material deprivation out of all ethnic groups. Statistics from the ONS suggest that pupils who are eligible for free school meals make less educational progress between the ages of 11 to 16 than those who are not eligible for free school meals. However, educational outcomes for Bangladeshi children does not follow this trend, and Bangladeshi children receiving free school meals had higher progress 8 scores than the national average.</p> <p>Both mixed and black ethnic groups have a higher percentage of children and young people living in low-income families compared to the national average, which could lead to poorer educational outcomes than their peers.</p>	<p>importance of local services for young people to get involved in, in a way that suits them best, enhancing equal opportunity.</p> <p>The Plan and future action plan will align with a range of services and offers that help address issues of poverty and discrimination.</p>
<p>Key borough statistics:</p> <p>Our resident population is predominantly white. The largest minority ethnic groups of children and young people in the area are Asian/Bangladeshi and Mixed – Asian and White. The City has a relatively small Black population, less than London and England and Wales. Children and young people from minority ethnic groups account for 41.71% of all children living in the area, compared with 21.11% nationally. White British residents comprise 57.5% of the total population, followed by White-Other at 19%.</p>	<p>The second largest ethnic group in the resident population is Asian, which totals 12.7% - this group is fairly evenly divided between Asian/Indian at 2.9%; Asian/Bangladeshi at 3.1%; Asian/Chinese at 3.6% and Asian/Other at 2.9%. The City of London has the highest percentage of Chinese people of any local authority in London and the second highest in England and Wales. The City of London has a relatively small Black population comprising 2.6% of residents. This is considerably lower than the Greater London wide percentage of 13.3% and also smaller than the percentage for England and Wales of 3.3%.</p> <p>See ONS Census information or Greater London Authority projections.</p> <p>NB: These statistics provide general data for these protected characteristics. You need to ensure you have sufficient data about those affected by the proposal.</p>

Religion or Belief

Check this box if NOT applicable

Religion or Belief - Additional Equalities Data (Service Level or Corporate)

<p>What is the proposal's impact on the equalities aim?</p> <p>The CYPP does not consider a child or young person's religion or belief. It is expected that the focus on proving equality of opportunity for all children and young people will have an in-direct positive impact upon this protected group.</p>	<p>What actions can be taken to avoid or mitigate any negative impact or to better advance equality and foster good relations?</p> <p>The plan promotes equality of opportunity for children, young people, and their families irrespective of faith or religion.</p>
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Key borough statistics – sources include:

The ONS website has a number of data collections on [religion and belief](#), grouped under the theme of religion and identity.

[Religion in England and Wales provides a summary of the Census 2011 by ward level](#)

NB: These statistics provide general data for these protected characteristics. You need to ensure you have sufficient data about those affected by the proposal.

Sex

Check this box if NOT applicable

Sex - Additional Equalities Data (Service Level or Corporate)

What is the proposal’s impact on the equalities aim?

National research from the National Education Union has said that 37% of girls at mixed-sex schools have been sexually harassed and 24% have suffered unwanted touching of a sexual nature at school. The research also found that 34% of primary school teachers said they have witnessed gender stereotyping every week.

Research by the NSPCC has shown that girls are much more likely to be affected by child sexual exploitation both online and offline. This includes being exploited within gangs, where sexual assault is used as a weapon in conflict.

Exam data suggests that girls do much better in school than boys, especially when it comes to GCSE and A-level results. 5.2% of girls received at least one Grade 9, whilst for boys it was 3.7%. 13.1% of girls received a Grade 8, compared to 9.4% of boys.

Boys make up the vast majority (over 90%) of Unaccompanied Asylum-Seeking Children and Children in Care.

What actions can be taken to avoid or mitigate any negative impact or to better advance equality and foster good relations?

The Children and Young People’s Plan has a focus on young people being safe and feeling safe in all aspects of the Corporation’s work, as identified in Outcome 1 of the Plan. This includes, but not limited to, priorities on tackling exploitation and supporting young people from being exploited by gangs and protecting those who we are Corporate Parents for, regardless of their gender. However, particular focus is placed upon actions that tackle inequalities between the sexes.

The Plan has a focus on improving educational outcomes for all and closing the education attainment gap between boys and girls in a positive way, as set out in Outcome 3 of the Plan.

The Plan will attempt to mitigate the greater likelihood of girls being much more affected by online and offline sexual exploitation with a relevant focus area on tackling online harms, which has been added based on consultation and partner feedback.

Key borough statistics:

At the time of the [2011 Census the usual resident population of the City of London](#) could be broken up into:

- 4,091 males (55.5%)
- 3,284 females (44.5%)

A number of demographics and projections for demographics can be found on the [Greater London Authority website in the London DataStore](#). The site details statistics for the City of London and other London authorities at a ward level:

- [Population projections](#)

NB: These statistics provide general data for these protected characteristics. You need to ensure you have sufficient data about those affected by the proposal.

Sexual Orientation and Gender Reassignment

Check this box if NOT applicable

Sexual Orientation and Gender Reassignment - Additional Equalities Data (Service Level or Corporate)

What is the proposal's impact on the equalities aim?

Although there is no specific targeted focus on this protected characteristic, it is anticipated that there will be a positive indirect impact. This is because of the promotion of equality of opportunity for children and young people regardless of their background.

Coming out as lesbian, gay, bisexual, or transgender was the top concern for LGBTQ+ young people contacting Childline about sexual and gender identity in 2021/22. Many young people are worried about how their family may react, or whether they could fully be themselves. Others felt that their family did not understand the impact on their mental health, religious barriers and being bullied.

Key borough statistics:

- [Sexual Identity in the UK – ONS 2014](#)
- [Measuring Sexual Identity - ONS](#)

What actions can be taken to avoid or mitigate any negative impact or to better advance equality and foster good relations?

The Plan promotes equality of opportunity for children, young people, and their families irrespective of whether they are the same gender they were at birth or not. Transgender young people are at greater risk of mental health issues. There is a lack of data available locally in relation to this group, and therefore national research was used to determine any impacts. Therefore, some of the related needs and risks may be missed or unknown. It is likely that young transgender people and those who identify as LGBTQ+ will benefit from the universal actions outlined in this Plan.

Further engagement into targeted actions will be explored during the development of the dedicated action plan of the CYPP in relation to this protected characteristic. This will be to ensure that work to address any inequalities is taken into consideration.

NB: These statistics provide general data for these protected characteristics. You need to ensure you have sufficient data about those affected by the proposal.

Marriage and Civil Partnership

Check this box if NOT applicable

Marriage and Civil Partnership - Additional Equalities Data (Service Level or Corporate)

What is the proposal's impact on the equalities aim?

What actions can be taken to avoid or mitigate any negative impact or to better advance equality and foster good relations?

<p>The CYPP takes into consideration the importance of a stable family unit as a positive for a child’s development and supporting families to make the right decisions for their child. This is regardless of whether individuals are married or in a civil partnership. Therefore, the CYPP does not target this group individually but are not anticipated to be negatively affecting by this Plan.</p>	<p>It is not anticipated that individuals in this group will be negatively impacted by this Plan and will indirectly benefit from the focus on supporting families to make positive, healthy decisions in relation to their children.</p>
<p>Key borough statistics – sources include:</p> <ul style="list-style-type: none"> • The 2011 Census contain data broken up by local authority on marital and civil partnership status 	<p>NB: These statistics provide general data for these protected characteristics. You need to ensure you have sufficient data about those affected by the proposal.</p>

Additional Impacts on Advancing Equality and Fostering Good Relations Check this box if NOT applicable

<p>Additional Equalities Data (Service Level or Corporate) None identified.</p>
<p>Are there any additional benefits or risks of the proposals on advancing equality and fostering good relations not considered above?</p> <p>The Children and Young People’s Plan has been developed after engagement with service professionals who work closely with children and young people in the City of London. It also considered the results from other recent consultation with young people to better inform the outcomes and focus areas to mitigate any potential risks, and to develop a document that is evidence based and developed in conjunction with our partners.</p>
<p>What actions can be taken to avoid or mitigate any negative impact on advancing equality or fostering good relations not considered above? Provide details of how effective the mitigation will be and how it will be monitored.</p> <p>To further mitigate any negative impact, engagement will be carried out with children and young people during the development of the dedicated action plan, as well as further engagement with service professionals to deliver an action plan that is jointly deliverable with our partners.</p>
<p>This section seeks to identify what additional steps can be taken to promote these aims or to mitigate any adverse impact. Analysis should be based on the data you have collected above for the protected characteristics covered by these aims.</p> <p>In addition to the sources of the information highlighted above – you may also want to consider using:</p> <ul style="list-style-type: none"> • Equality monitoring data in relation to take-up and satisfaction of the service • Equality related employment data where relevant • Generic or targeted consultation results or research that is available locally, London-wide or nationally • Complaints and feedback from different groups.

Additional Impacts on Social Mobility

Check this box if NOT applicable

Additional Social Mobility Data (Service level or Corporate)

None identified.

Are there any additional benefits or risks of the proposals on advancing Social Mobility?

The Children and Young People's Plan puts equality of opportunity and supporting children and young people to achieve their full potential at the heart of its aims. This will have a positive impact on advancing social mobility by supporting those who are disadvantaged and focusing on increasing the voice of children and young people when developing services that affect them.

What actions can be taken to avoid or mitigate any negative impact on advancing Social Mobility not considered above?

The Children and Young People's Plan will have a dedicated action plan that will take into consideration ways that social mobility can be advanced further. This action plan will be developed after further engagement with service professionals and those who work with children and young people.

This section seeks to identify what additional steps can be taken to promote the aims or to mitigate any adverse impact on social mobility. This is a voluntary requirement (agreed as policy by the Corporation) and does not have the statutory obligation relating to protected characteristics contained in the Equalities Act 2010. Analysis should be based on the data you have available on social mobility and the access of all groups to employment and other opportunities. In addition to the sources of information highlighted above – you may also want to consider using:

- Social Mobility employment data
- Generic or targeted social mobility consultation results or research that is available locally, London-wide or nationally
- Information arising from the Social Mobility Strategy/Action Plan and the Corporation's annual submissions to the Social Mobility Ind

Conclusion and Reporting Guidance

Set out your conclusions below using the EA of the protected characteristics and submit to your Director for approval.

If you have identified any negative impacts, please attach your action plan to the EA which addresses any negative impacts identified when submitting for approval.

If you have identified any positive impacts for any equality groups, please explain how these are in line with the equality aims.

Review your EA and action plan as necessary through the development and at the end of your proposal/project and beyond.

Retain your EA as it may be requested by Members or as an FOI request. As a minimum, refer to any completed EA in background papers on reports, but also include any appropriate references to the EA in the body of the report or as an appendix.

This analysis has concluded that ...

The Impact Assessment process alongside engagement with service professionals has identified that the City of London Corporation's Children and Young People's Plan 2022-25 has no negative impacts on the protected characteristics as set out in the Equality Act 2010. The Children and Young People's Plan, where identified, will have a positive impact on the protected characteristics and advance equality of opportunity and inclusion amongst Children and Young People in the City.

Equality analysis will be continued and built upon during the development of the action plan to minimise any impacts on the protected characteristics and support those who are disadvantaged.

Outcome of analysis – check the one that applies

Outcome 1

No change required where the assessment has not identified any potential for discrimination or adverse impact and all opportunities to advance equality have been taken.

Outcome 2

Adjustments to remove barriers identified by the assessment or to better advance equality. Are you satisfied that the proposed adjustment will remove the barriers identified.

Outcome 3

Continue despite having identified some potential adverse impacts or missed opportunities to advance equality. In this case, the justification should be included in the assessment and should be in line with the duty to have 'due regard'. For the most important relevant policies, compelling reasons will be needed. You should consider whether there are sufficient plans to reduce the negative impact and/or plans to monitor the actual impact.

Outcome 4

Stop and rethink when an assessment shows actual or potential unlawful discrimination.

Signed off by Director:	Click or tap here to enter text.	Name:	Click or tap here to enter text.	Date	
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Introduction

1. This paper sets out the engagement process followed at the start of the development of the strategy, as well as details on the 12-week public consultation, including how it was promoted, data on who responded and details of the feedback received.
2. As part of the consultation, a series of questions were asked about various aspects of the plan, and whether respondents agreed with the identified outcomes and priorities.

Strategy Development Engagement

3. To identify the outcomes and focus areas of the Plan, a series of one-to-one engagement sessions were held with key service professionals, both internal and external to the City Corporation, as well as attendance at team staff meetings to gauge a wider opinion. Recently published service area reports were also used to gather information on priorities as well as using one-to-one meetings.
4. Engagement was carried out with professionals from the following service areas
 - Children’s Social Care & Early Help
 - Education
 - SEND
 - Early Years
 - Commissioning
 - City & Hackney Public Health
 - Health Visiting Service
 - City of London Virtual School
 - Northeast London Integrated Care Partnership
 - Northeast London Clinical Commissioning Group
 - Homerton University Hospital Foundation Trust
 - East London NHS Foundation Trust
 - Barbican & Community Libraries
 - London Borough of Hackney
5. As most of the engagement work was completed during the Covid-19 pandemic, it was not possible to conduct direct engagement with our children and young people. Attempts to mitigate this were used such as including published national research, recently conducted engagement work with our young people, such as the Action for Children Survey and engagement work by the City of London’s Youth Service provider, SocietyLinks.
6. Engagement questions put to service professionals on a one-to-one basis was also framed in a way that put the views and priorities of young people at the forefront of their response. This was achieved by asking service professionals to

answer on behalf of young people through their knowledge and experience of working with them on a day-to-day basis.

Public consultation

7. Following the development of the strategy, a twelve-week public consultation period was undertaken to gather feedback from children and young people, parents, Members, City of London residents and service professionals on the design of the Plan and the identified outcomes and priorities.
8. The consultation was hosted on the City of London website and was open for a period of twelve weeks (22 June 2022 – 14 September 2022).
9. Translations of the consultation were made available in different languages upon request by a member of the public.
10. The consultation was promoted to various individuals and groups to provide the widest range of feedback. These included:
 - a. The Aldgate School & Children’s Centre
 - b. City of London Corporation staff
 - c. City & Hackney Public Health
 - d. Community & Children’s Services Departmental Leadership Team
 - e. Barbican & Community Libraries
 - f. City of London Children’s Partnership Board
 - g. City of London Parent and Carers Forum
 - h. City of London Family Information Service
 - i. Partnership for Young London
 - j. City of London Police
 - k. Community Safety Partners
 - l. City & Hackney Emotional Health & Wellbeing Partnership
 - m. City & Hackney Families Sub-Group
 - n. City of London Early Help Sub-Group
 - o. City & Hackney Substance Misuse Service
 - p. City of London Health Visiting Service
 - q. London Borough of Hackney
 - r. City of London Virtual School
 - s. Northeast London Integrated Care Partnership
 - t. Northeast London Clinical Commissioning Group
 - u. Homerton University Hospital Foundation Trust
 - v. East London NHS Foundation Trust
11. As well as promoting the consultation to individual groups, other forms of advertising the consultation was conducted. This included:
 - a. Resident & estate newsletters
 - b. Full page advertisement in print copies of City Matters
 - c. Social media posts
 - d. Advertisements on the City of London Family Information Service website

12. In addition to feedback from the consultation itself, feedback from recently conducted consultation work has also been considered as part of the feedback. This includes recently completed engagement work by SocietyLinks, the City Corporation’s commissioned youth provider, and Action for Children’s survey with Looked After Children and Care Leavers.

Consultation response data

13. Over the course of the consultation period, page visits and the bounce rate of the consultation page were monitored on a weekly basis to provide analysis of the amount of people attempting to complete the survey. This provided evidence that promotion of the survey was having an impact on the number of people completing the survey, and if necessary, adjustments to the level of promotion could be made.

14. Page visits and engagement with the consultation remained high throughout the consultation period. At the end of the consultation period, over 300 unique hits to the consultation web page were registered, with an average user time of 12 minutes being spent on the page.

15. Over the 12-week consultation period, a total of 32 responses were received. Of these...

- a. 9.4% (3) were from children under the age of 18 and live in the City of London
- b. 6.3% (2) were from young people aged 19-25 and live in the City of London
- c. 21.9% (7) were from a parent or carer who live in the City of London
- d. 9.4% (3) were from other interested residents who live in the City of London
- e. 12.5% (4) were from professionals working in the health sector
- f. 3.1% (1) were from professionals working in the education sector
- g. 3.1% (1) were from professionals working in social care
- h. 9.4% (3) were from professionals working in the commissioning of services
- i. 21.9% (7) were from Officers of the City of London Corporation
- j. 3.1% (1) were from an Officer of another local authority
- k. 3.1% (1) were from a City of London tenant in Southwark
- l. 3.1% (1) were from a City of London based teacher
- m. 3.1% (1) were from a PhD student

16. In total, 46% (15) of responses were from individuals who live inside the boundary of the Square Mile, with 53% (17) stating that they live outside the boundary of the Square Mile.

17. Of those who stated that they live in the Square Mile...

- a. 15% (5) live in the Barbican Estate

Appendix 3 – Children and Young People’s Plan 2022-25 Consultation Responses

- b. 6.3% (2) live in the Portsoken Estate
- c. 6.3% (2) live in the Golden Lane Estate
- d. 18.8% (6) live in another area of the City of London

18. Due to the discrepancy between page hits, the average time spent on the web page and the lower number of submitted responses, it can be assumed that most individuals who engaged with the proposed plan had no further comment to make and can be taken as a positive response to the consultation.

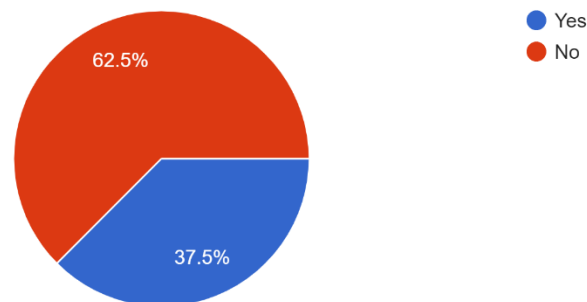
Consultation response

19. The below sets out the questions asked during the consultation, as well as responses to each of the questions.

20. Question 1: Did you know anything about the Children & Young People’s Plan (CYPP) before this consultation?

Did you know anything about the Children and Young People’s Plan (CYPP) before this consultation?

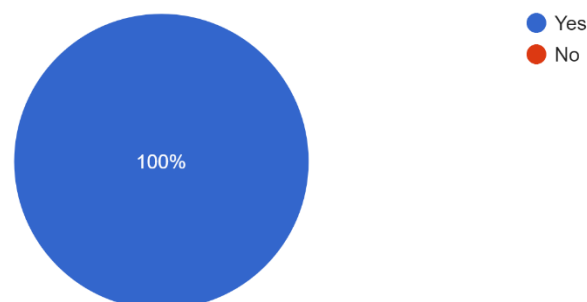
32 responses



21. Question 2: Is the language used in the Children & Young People’s Plan easy to understand?

Is the language used in the Children & Young People’s Plan easy to understand?

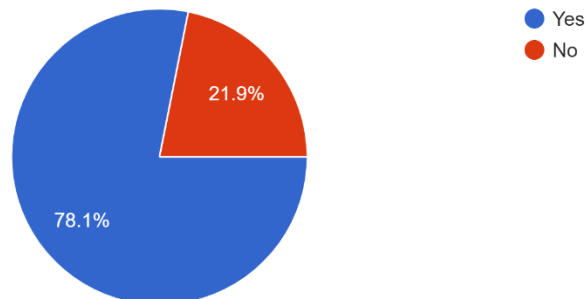
32 responses



22. Question 3: Do you like the design of the Children & Young People’s Plan?

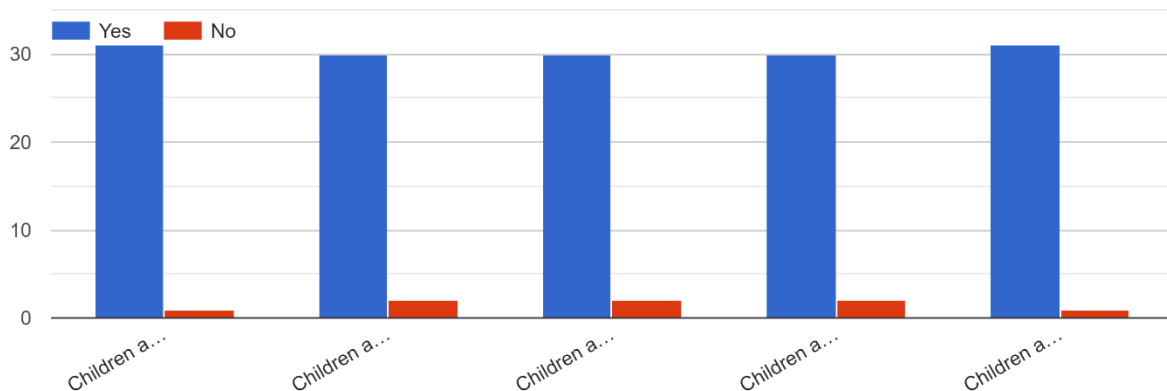
Do you like the design of the Children & Young People’s Plan?

32 responses



23. Question 4: Do you agree with our proposed outcomes and their associated focus areas? (see page 3 of the Plan)

Do you agree with our proposed outcomes and their associated focus areas? (see page 3 of the Plan)



24. Question 5: What do you think is the biggest issue facing children and young people in the City of London?

- a. Having good mental health – 31% (10)
- b. Having somewhere safe to play – 18% (6)
- c. Being successful at school – 9% (3)
- d. Having somewhere safe to live – 9% (3)
- e. Being happy and able to make good friends – 9% (3)
- f. Being protected from online harm – 6% (2)
- g. Exploitation and gangs – 6% (2)
- h. Feeling safe whilst walking the streets at night – 3% (1)
- i. Access to a range of development opportunities within the Square Mile – 3% (1)
- j. Not being an after thought in decision making – 3% (1)

25. Question 6: What would you like to see more of in the City of London
(respondents selected their top three)

- a. Measures to support the mental health and wellbeing of children and young people – 62% (20)
- b. Opportunities for young people to be physically active – 47% (15)
- c. Youth services and activities for young people to get involved with – 40% (13)
- d. Measures to protect young people from gangs and exploitation – 32% (10)
- e. Signposting on how to access services and information – 25% (8)
- f. Careers and job support for young people – 19% (6)
- g. Working with children and young people and their families when designing services? – 19% (6)
- h. Green space and better sporting facilities – 6% (2)
- i. A dedicated state secondary school in the City of London – 3% (1)
- j. Looking at the causes of the problems identifies – 3% (1)

26. Question 7: Anything else you would like to tell us about your thoughts on the Children and Young People’s Plan? (this section summarises all additional comments received to the consultation)

- a. Support for young people doing the career they want to do. I would like to be a vet and I want to have the opportunity to have work experience.
- b. I think the design of the plan is very clear, easy concise. I feel like this would relate to a young person.
- c. Specific work around domestic abuse and what a healthy relationship looks like would be beneficial
- d. How would SEND support work if the child goes to school outside say city of London primary Islington. Double so for secondly schools since there are no state maintained schools in the city.
- e. The plan is fine but how its achieved isn't clear and prevention of the causes is never addressed.
- f. With regards to the question about the design of the plan - it is not so much that I don't like it, but more think that it combines two slightly different approaches, one user (particularly child) focused, and one public facing in a strategic sense. Whilst I can understand the desire to make the plan engaging for the different public audiences that are served by the plan, I do think that some of the colour and font choices could actually cause disengagement with the very important content of the document itself.
- g. The format is clear and easy to access. It's important that children's earliest years are fully taken into account in the plan.
- h. Themes in the plan are repetitive and include meaningless tautology. What does “Improve youth services, education, and work experience for all” mean? What does “Support children, young people, and their families to make sure they are prepared for school”? What does “Encourage families with early years children to make the right decisions” mean? I have a 6.5 year old daughter, never received any support or encouragement. These appear empty statements with little substance. What we would like to see is: “the City will create more green spaces and playground facilities for children.” Or “the City will consider

local intake into City run schools”. We need concrete actions, not some blue sky slogans that are frankly hollow. The demographics have changed significantly over the past few years which ought to be reflected in all City plans and endeavours. In addition, the plan should also address concerns of families from less disadvantaged backgrounds in general.

- i. No mention of crafts and arts or team sports. Language was too generic and could apply to ANY place, doesn't take into account the issues in city of London, ie not great access to state secondary schools, competition when it comes to good access to good schools.
- j. There is simply not enough consideration of how to ensure children can live, learn and play safely in the city. Education and access to quality after school care facilities is very much a postcode lottery and there is little being done to ensure children can gradually and safely learn how to become independent. Basic health needs are not being met including accessing GP or a dentist. Provision of holiday/ half term clubs is poor. There is not enough sport activities that children can access.
- k. The design of the Plan is awful. If it's a serious document it should be set out accordingly. A plus cannot be the fifth least deprived borough in London for children. There should be no deprivation. Whilst there is access to pre-school child care, the removal of funding to the Golden Lane Camus Children’s Centre was callous. Whatever Ofsted may say, the fact that City Corporation spends millions on its Independent Schools and academies and nothing on its one state school over and above government grant is shameful. And are there really newly 3,000 under 25s in the City?
- l. The design is good and the graphics are very well done, particularly the blue to red ratios in the statistics. The yellow textboxes make the appearance quite overcrowded and it can be labour some to read all the information because one is darting between various sections of the file.
- m. A healthy sense of belonging and pride in your area is so important and needs to be encouraged. The strategy objectives are solid.
- n. I think that building positive relationships with parents, teachers and peers is extremely important as young people often feel isolated in an increasingly online world. An increase in community involvement and identity would create a better support network, therefore creating a sense of belonging.
- o. To make sure information gets to parents and young people. Often things get organised but we don't know about it.
- p. This is a magnificent poster, something that I myself have been longing to see ever since I was a kid... someone/anyone that genuinely cares about the children and young people. This poster and its initiatives certainly represent that. All I would like to say is that it is apparent that this is not a quick fix/solution to tackle all the challenges but certainly what you have captured is a very good basis to work with. As they are problems I identified when I was a kid and still feel that way (regarding challenges as a C&YP) now that I am older... so it is reassuring to know that you have actively listened and captured their thoughts. It is hard to get C&YP to engage with materials in general but the quality of what you have got... I am confident that if overtime they are actioned it will

certainly spark a change in the lives of C&YP and encourage them to speak out and engage with their peers and elders a lot more... why? because they feel like they are being listened to and more importantly they get a sense of belonging knowing that people do care about them and are not just saying xyz for the sake of good PR. Hope this helps :)... GOOD LUCK!

- q. I believe a safe playground and space to play for children is very important and lacking in the City. If these facilities exist, they should be clearly signposted so others can access. I understand from consultations regarding the public spaces of the Barbican podium restoration that “natural play features” will be built. If this is designed to be a play space for children this should be clearly signposted so that non Barbican residents are aware also. Being up on the Barbican podium would be a safe place for children in the City, with play features this would be excellent to have somewhere safe to play.
- r. Design - I think this is refreshing and vibrant. A lot different from the usual faceless strategies that we see elsewhere. It is eye catching and encourages people to look further into it. It does draw people in. However, would be good to have it more interactive eventually - perhaps clicking on a topic to get more info on a particular topic. Challenges. I am not an expert, but the challenges facing young people in London per se are many. I feel young people get very little central education for living across the board and I worry schools do not prepare them for the wider challenges of life. Expectation for young people is high and this can lead to unhealthy choices on leaving education, there feels like there is a lack of pathway and opportunity especially for more vulnerable children. As experts in many areas of society I think council departments can get involved a little more.
- s. Like the plan- succinct, colourful, engaging, better than a report. The Youth Forum isn't currently meeting the needs of successfully engaging with City young people
- t. Engaging and concise. May not be accessible for all groups, such as people with learning difficulties or English as a second language.

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By virtue of paragraph(s) 3, 5 of Part 1 of Schedule 12A of the Local Government Act 1972.

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