

Full equalities impact assessment

Directorate: Speech and Language Therapy

Service: Children's speech and language therapy

Piece of work being assessed:

Name of lead person: Lesley Cogher

Other partners/stakeholders involved: Schools/ Local Authority

Date of assessment: July 2008

Single Equality Scheme strand	Baseline data and research – What is available? What does it show? Are there any gaps? Use both quantitative and qualitative research and user data Include consultation with users if available	Is there likely to be a differential impact? If 'yes', is that impact direct or indirect discrimination?
Gender	There are 2.8 males to every female ¹ with specific language impairment.	Yes indirect. Anticipate higher proportion of boys than girls use the service.
Race	There is no agreed or comprehensive and reliable source of information on the prevalence of communication disability, among ethnic groups. ² Prevalence rates for disorders of communication, eating and swallowing in children are largely similar across ethnic groups showing no racial differences. The UK census 2001 indicates that 7.9% of the population is from a minority ethnic background. Sheffield City Council 2005 figures suggest that the number of Pakistani Asians is 3%, Polish and Slovak 2%, whilst other ethnic categories account for less than 1% each of the general population with the total ethnic minority population being about 14%.	Yes Indirect. Suggest that there may be differences in the utilisation of the service.

¹ Robinson, R.J. The causes of language disorder: introduction and overview in *Proceedings of the First International Symposium on Specific Speech and Language Disorders in Children*. Aphasic, 1987

² Mark R.D. Johnson and Mark O. Scase: Seacole Research Paper No. 1. Ethnic Minorities, Mary Seacole Research Centre, De Montfort University December 2000

<p>Disability</p>	<p>All children in the service have a communication disability; many have co- morbidities coping with long-term conditions as well as physical and sensory impairments. There is poor coordination of services across health, social care and education.³ Half of children in some socio-economically disadvantaged populations have speech and language skills that are significantly lower than those of other children of the same age 60% of under 18 years olds passing through young offenders institutions have difficulties with speech, language and communication 7% of five year olds entering school in 2007 in England had significant difficulties with speech, language and communication needs 1% of five year olds entering school in England had severe and complex speech, language and communication needs.</p> <p><u>Pre-school children</u></p> <p>The 2001 Census figures report Sheffield’s population as 522,400 with 2,9232 in the preschool population Speech, language and communication needs may be the most common disability presenting in early childhood⁴. Estimates of need vary (between 2% to 25%) according to different data collection methods and criteria. In areas of deprivation, one study⁵ suggests prevalence as high as 55% of speech, language and communication needs in four year olds.</p> <p>Recent estimates of speech, language and communication needs, both with and without additional disability within Sure Start populations (which are the 25% most deprived areas</p>	<p>Yes</p> <p>Direct</p>
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³ Bercow review of services for children and young people (0-19) with speech, language and communication needs,. DCSF Publications July 2008 www.dfes.gov.uk/bercowreview/docs/7771-DCSF-BERCOW%20Summary.pdf

⁴ Law, J. (Ed) *The Early Identification of Language Impairment in Children Chapman and Hall, 1992*

⁵ Locke, A, Ginsborg, J and Peers, I. Development and disadvantage: implications for the early years and beyond in *International Journal of Language and Communication Disorders*, 2002:37: pp3-15

	<p>across the UK) are as high as 35% new cases being identified each year.</p> <p><u>School-aged children</u></p> <p>10 % of school-aged children have a speech, language and communication disorder which could potentially affect their education attainment⁶</p> <p>5% of children in the UK in year 2 have specific language impairment⁷</p>	
Sexual orientation	Parents of children using the service may be heterosexual, lesbian, gay and bisexual people. The service strives to treat all parents and children with dignity and respect.	Unknown
Age	Services positively discriminate towards age	Yes Direct
Religion /belief	Understanding of need Poor compliance for recording information	Unknown

⁶ The Royal College of Speech and Language Therapists *Communication Quality 3*: RCSLT 's guidance on best practice in service organisation and provision, 2006: p364

⁷ Law, J Boyle, J, Harris, F Harness, A and Nye, C. Prevalence and Natural History of Speech and language delay: findings from a systematic review of the literature in *International Journal of Language and Communication Disorders*, 2000:35(2): pp165-188

Equalities Impact Assessment Action Plan

Strand	Issue	Action required	How will you measure the impact/outcome?	Timescale	Lead
Gender	The service should address the higher prevalence of communication and swallowing disorders amongst boys.	<ul style="list-style-type: none"> Collection of information on relative levels of use of service by boys and girls 	<ul style="list-style-type: none"> Comparison of uptake with prevalence 	November 2008	TP/UE
Race	<p>The service needs to be responsive to the needs of different ethnic groups. Data would suggest that use of the service should mirror the ethnic population of Sheffield, as there is no evidence of any race-related conditions.</p> <p>To ascertain if there are any significant increase in access by specific minority group numbers from eastern European Communities reflecting the change in the local population</p>	<ul style="list-style-type: none"> Collection of ethnographic information Build on existing initiatives Supporting those from ethnic minority to use the service. Continue to respond flexibly to differing community needs for the service. 	<ul style="list-style-type: none"> Monitoring of referrals viewed with census population/ local information/ community profiles Map research findings to local need and uptake of the service 	December 2008 March 2009	TP/UE
Race	Need to have an overview on disorders of communication within non-English Languages	<ul style="list-style-type: none"> Check the need for a clinical leader within the service to focus on this role 	Monitor complaints/ compliments patterns to indicate significant need. Local intelligence from link workers in a variety of communities will be sought.	Sept 2008	LC

			Creation of a clinical leader role if deemed necessary	March 2009	
Disability	Responsiveness to the needs of people with disabilities. Providing timely care for large volume of users and their carers over a long time period.	<ul style="list-style-type: none"> • Anticipating the needs of the range of users groups and individuals • Consider the implication of children with a range of disabilities 	<ul style="list-style-type: none"> • Comparison of uptake with prevalence • Routinely planning interventions according to established prioritisation guidance and bases practices on evidence of effective 'good practice'. 	November 2008 Reviewing December 2008 April 2009 August 2009 September 2008 February 2009	TP/UE Team leaders/ Service leads LC

			Evidence of 'unmet clinical need' feeds service development planning business planning	April 2009	
Sexual orientation	<p>Raising staff awareness.</p> <p>Information is not routinely collected and would not be appropriate for this age of child.</p>	<ul style="list-style-type: none"> • Report back to Education and training department @ PCT • To seek support/ training for staff to feel confident in requesting the info 	<ul style="list-style-type: none"> • Provision of Induction /staff training within the PCT to include being mindful of lesbian, gay, heterosexual and bisexual staff and users <p>PCT to audit information leaflets and promotional materials used by the service represents the population it services. Also ensure that books etc used as teaching materials reflect the diversity of modern family life.</p>	<p>July 2008</p> <p>March 2009</p>	Helen Bunter PCT Diversity Lead

Age	<p>Responsiveness of the need of different age groups</p> <p>Education Authorities and other commissioning service providers such as Sure Start, target specific groups which are age related services</p>	<ul style="list-style-type: none"> Collect information on uptake by age Monitor the provision for older children at secondary school 	Identify evidence of unmet need for older users for business development	March 2009	
Religion	Reluctance of staff to record this information	<ul style="list-style-type: none"> Staff training to include personal and religious beliefs and preferences in relation to diet/ giving choice of appointments times, taking into consideration cultural calendars Staff to ensure they request info on a person's religion or belief 	<ul style="list-style-type: none"> Seek support from PCT Training Department/ Diversity Manager Audit of information recorded by staff on the computer data base 	<p>July 2008</p> <p>Registered with PCT August 2008</p> <p>March 2009</p>	<p>UE</p> <p>LC</p>

Equalities action plan facilitators within Speech and Language Therapy include;

- LC Lesley Cogher
 - TP Tory Paxman
 - UE Ursula Eastwood
- Team leaders/ Service leads (Paediatric Service)

July 2008