

Equality Impact Analysis Template

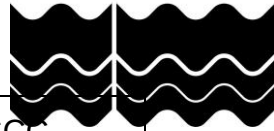
Equality Impact Analysis (EqIA) (or Equality Impact Assessment) aims to make services and public policy better for all service-users and staff and supports value for money by getting council services right first time.

We use EqIAs to enable us to consider all relevant information from an Equality requirements perspective when procuring or restructuring a service, or introducing a new policy or strategy. This analysis of impacts is then reflected in the relevant action plan to get the best outcomes for the Council, its staff and service-users¹.

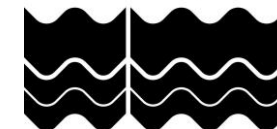
EqIAs are used to analyse and assess how the Council's work might impact differently on different groups of people². EqIAs help the Council to make good decisions for its service-users, staff and residents and provide evidence that those decision conform with the Council's obligations under the Equality Act 2010³.

This template sets out the steps you need to take to complete an EqIA for your project. Guidance for sections is in the end-notes. If you have any questions about your EqIA and/or how to complete this form, please use the contact details at the end of this form.

Title of Project/Service/Policy⁴	Autism All Age Action Plan
Team/Department⁵	Joint Commissioning Team
Directorate	Adult Social Care
Provide a comprehensive description of your Project (Service/Policy, etc.) including its Purpose and Scope⁶	The East Sussex Autism Action Plan is being developed through the East Sussex Autism Partnership Board in response to the most recent National Autism Strategy published in 2021. Members of the East Sussex Autism Partnership Board include: autistic members of the community, family and friend carers, local autism charity representatives, NHS representatives, Sussex Police representatives and East Sussex County Council representatives The development and implementation of the Autism Action Plan will support the overarching desired outcome of the project 'to optimise resources available to improve the lives of autistic people, their families and carers in East Sussex'.



	To inform the development of the East Sussex All Age Action Plan, throughout 2024 ESCC consulted with Autistic people, carers and stakeholders to identify the priorities for the plan. The consultation identified three key priority areas for East Sussex: 1. Improving the health and wellbeing of autistic people 2. Improving autistic children and young people's access to education and supporting positive transitions into adulthood 3. Supporting autistic people into employment and sustaining their employment.
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Initial assessment of whether your project requires an EqIA

When answering these questions, please keep in mind all legally protected equality characteristics (sex/gender, gender reassignment, religion or belief, age, disability, ethnicity/race, sexual orientation, marriage/civil partnership, pregnancy and maternity) of the people actually or potentially receiving and benefiting from the services or the policy.

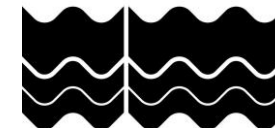
In particular consider whether there are any potential equality related barriers that people may experience when getting to know about, accessing or receiving the service or the policy to be introduced or changed.

Discuss the results of your Equality assessment with the Equality Lead for your department and agree whether improvements or changes need to be made to any aspect of your Project.

	Question	Yes	No	Don't Know
1	Is there evidence of different needs, experiences, issues or priorities on the basis of the equality characteristics (listed below) in relation to the service or policy/strategy area?	X		
2	Are there any proposed changes in the service/policy that may affect how services are run and/or used or the ways the policy will impact different groups?	X		
3	Are there any proposed changes in the service/policy that may affect service-users/staff/residents directly?	X		
4	Is there potential for, or evidence that, the service/policy may adversely affect inclusiveness or harm good relations between different groups of people?		X	
5	Is there any potential for, or evidence that any part of the service/aspects of the policy could have a direct or indirect discriminatory effect on service-users/staff/residents?		X	
6	Is there any stakeholder (Council staff, residents, trade unions, service-users, VCSE organisations) concerned about actual, potential, or perceived discrimination/unequal treatment in the service or the Policy on the basis of the equality characteristics set out above that may lead to taking legal action against the Council?	X		
7	Is there any evidence or indication of higher or lower uptake of the service by, or the impact of the policy on, people who share the equality characteristics set out above?	X		

If you have answered "YES" or "DON'T KNOW" to any of the questions above, then the completion of an EqIA is necessary.

The need for an EqIA will depend on:



- How many questions you have answered “yes”, or “don’t know” to;
- The likelihood of the Council facing legal action in relation to the effects of service or the policy may have on groups sharing protected characteristics; and
- The likelihood of adverse publicity and reputational damage for the Council.

The East Sussex Autism Action Plan is considered to be low risk because the purpose of the plan is to improve outcomes for autistic people, without negatively impacting others.

Update on previous EqlAs and outcomes of previous actions (if applicable)⁷

What actions did you plan last time? (List them from the previous EqlA)	What improved as a result? What outcomes have these actions achieved?	What <u>further</u> actions do you need to take? (add these to the Action Plan below)
Not applicable, this is a new plan		

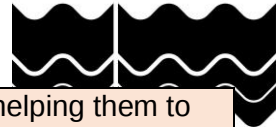
1. Review of information, equality analysis and potential actions

Consider the actual or potential impact of your project (service, or policy) against each of the equality characteristics.

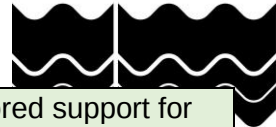
Protected characteristics groups under the Equality Act 2010	What do you know ⁸ ? Summary of data about your service-users and/or staff	What do people tell you ⁹ ? Summary of service-user and/or staff feedback	What does this mean ¹⁰ ? Impacts identified from data and feedback (actual and potential)	What can you do ¹¹ ? All potential actions to: • advance equality of opportunity, • eliminate discrimination, and • foster good relations
Age ¹²	The population of East Sussex is estimated at 545,800. East Sussex has an older age profile than England and the southeast, with 26% of the county's population aged 65 or over, compared to 19% across England and 20% regionally. According to the 2021 Census, the greatest growth occurred in the 70-74 age category, which increased by 46.6% compared to a national average of 36.8%. The proportion of the population of East Sussex aged 65 and over now stands at 26.1%, up from 22.7% in 2011.	The consultation and stakeholder workshops covered all ages. This is reflected in the range of actions identified across education, employment, and health and wellbeing.	Our Autism action plan needs to reflect all ages. Service provision needs to be sufficient to cope with growing demand. Any actions put in place need to be accessible to all, ensuring for those who experience digital exclusion.	Clearly state age range that services and resources are applicable to within signposting information. Ensure there is a range of ways to access information, not just through digital methods. Priority actions identified in the action plan include: • Develop profiling tool for schools to use to understand individual needs and how those needs can be met. • Ensure that appropriate education guidance, information and support is available to autistic



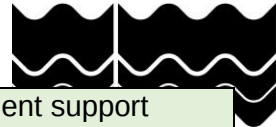
	Sussex Integrated Dataset 2024: The number of people registered with their GP with a recorded diagnosis of Autism in East Sussex is 4350 children and young people and 4160 adults Older people are more likely to face digital exclusion. According to Age UK, three out of ten people aged 65 to 74 and two-thirds of those aged 75 and over are not online. There is also a link to social disadvantage. For example, while only 15 per cent of people aged 65 to 74 in socio-economic group AB do not use the internet, this rises to 45 per cent in group DE.			children & Young People and their families • Promote Autism training to all school staff, including improving understanding of masking, mental and physical health and how a child's environment impacts on their behaviour • Promote curriculums / sharing of information that are inclusive and adaptive to ensure: 'Every school/college sees itself as an education setting that meets the needs of autistic pupils.' • Increase understanding and support for autistic young people in secondary schools. • Improve the experience of transitions (primary to secondary / secondary to college) for autistic children and young people • Develop a programme of work to support young people and their families to consider their future employment choices,
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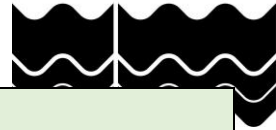
				through helping them to identify their strengths, challenges and learning styles, and develop practical skills such as CV writing and interview techniques.
Disability¹³	An ESCC Public Health 2024 analysis of the prevalence of Autism in East Sussex identified: East Sussex adult autistic population ranged between 4380 and 12660 (actual GP caseloads register 4160). This suggests an under diagnosis for adults in East Sussex. East Sussex CYP population ranged between 680 and 3960 (actual GP caseloads registers 4350) East Sussex data (from the Sussex Integrated Dataset, May 2024) identified that 18% of the known autistic population also have ADHD. However, international research has shown that 40% of autistic people have ADHD, with other studies suggesting that the rate may be closer to 70%.	ESCC Autism consultation survey 2024 results include: • 47% had a condition that was expected to last 12 or more months. Of those, 88% said their condition affects their ability to carry out day-to-day activities. • 81% (259 respondents) said it was hard/very hard for Autistic people to access Autism diagnosis. • 66% (212 respondents) said that it is hard/very hard for Autistic people to access healthcare. • 80% (258 respondents) said that it is hard/very hard for Autistic people to access mental health services. • 55% (177 respondents) said that it is hard/very hard for Autistic people to access hospitals.	It is difficult to get an Autism diagnosis and Autistic people may be under diagnosed. Learning disabilities are more common in autistic people than in people who are not Autistic. Health outcomes are significantly poorer for people with learning disabilities, and there is a higher need for mental health support for this group of people. It is hard for autistic people to access health and care services, particularly mental health services. The purpose of the action plan is to ensure that autistic people have access to support and services to meet their needs to manage daily living	All documents will be written in accessible language, and people will be able to request information in other formats. Neuro-inclusive language to reflect Autism / ADHD Priority actions identified in the action plan include: • Develop and promote accessible information and guidance on the neurodevelopmental diagnosis process and universal help available pre, during and post assessment, including crisis support • Involve autistic people in the design of Integrated Community Teams to ensure services are accessible



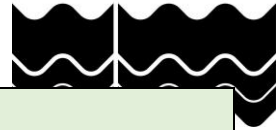
	East Sussex data (from the Sussex Integrated Dataset, May 2024) identified that 15% of the known autistic population also have a learning disability. The ICT data pack Nov 2023 (Learning Disability) identified that health outcomes are significantly poorer for people with a learning disability and on average die 22 years younger than the general population. Individuals with a LD also want more support with their mental health. An estimated 56.6% of autistic adults experience a psychiatric condition (for example, anxiety and depression (Buck et al. 2014)). In the 2021 census, 20.3% of East Sussex residents were living with a long-term physical or mental health condition or impairment that affected their ability to carry out day-to-day activities in 2021, the same proportion as in 2011 (compares to 18% for England & Wales).	• 58% (187 respondents) said that it is hard/very hard for Autistic people to access a dentist. • 65% (208 respondents) said it was hard/very hard for Autistic people to access schools and colleges due to lack of understanding and insufficient training of staff. • 27% (86 respondents) said that it is hard/very hard for Autistic people to find and keep volunteering opportunities due to lack of understanding and training for providers, along with insufficient support. • 44% (140 respondents) said that it is hard/very hard for Autistic people to find and keep a job due to lack of understanding and lack of reasonable adjustments.		• Pilot tailored support for autistic people rather than general signposting • Increase education and improve the knowledge of autism of health and care professionals • Embed autism awareness and understanding into all council departments through training, and guidance on accessible buildings and recruitment. • Promote Autism health and care passports and alert cards • Promote healthcare Digital Flags for reasonable adjustments to autistic people and healthcare professionals • Develop Autism training champions across Health, Social Care and VCSE organisations • Improve clinical environments, particularly diagnostic, to create more friendly and accessible spaces • Implement autism annual health checks • Publish and promote a centralised directory of
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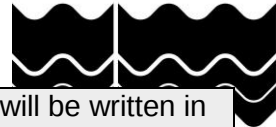
	34.8% of households in East Sussex had at least one member identifying as disabled under the Equality Act in 2021. National employment research tells us: • 21.7% of autistic adults are in employment (ONS, 2020). • 6.25% of autistic adults hold full-time positions (National Autistic Society) • Autistic people face the largest pay gap of all disability groups, receiving 1/3 less than non-disabled people on average (Buckland Review 2024) • Autistic graduates are twice as likely to be unemployed after 15 months as non-disabled graduates, with only 36% finding full time work in this period. (Buckland Review 2024). • 45% of neurodivergent individuals have been forced out or have quit their jobs due to misunderstandings related to their condition (National Autistic Society)			employment support services in East Sussex • Raise awareness and accessibility of resources to help employ more neurodivergent people • Publish and promote guidance for making recruitment processes more accessible for neurodivergent people • Develop initial assessments for employment organisations to help to identify skills, suitable roles and reasonable adjustments • Develop support services that can act as a brokerage/advocate for employed autistic people who may need support to navigate work environment.
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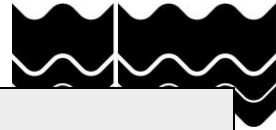
	The Royal College of Psychiatrists state that Autistic people are more likely to have other conditions like: • ADHD • intellectual disabilities • learning difficulties like dyslexia • tics • developmental coordination disorder • epilepsy • joint hypermobility and Ehlers-Danlos syndromes Furthermore, differences in communication styles may also not be understood, in particular, by neurotypical professionals, especially those without appropriate neurodivergent training....Consequently, neurodivergent physical health needs are overlooked causing a worsening of symptoms, exacerbation or prior psychiatric conditions and underlying trauma from not being believed, particularly for those with no diagnosis (Sala et al, 2020)			
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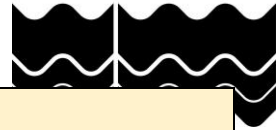
Gender reassignment¹⁴	In 2021, 0.4% of adults in East Sussex reported that they had a gender identity that was different to the sex registered at birth (Census 2021). However, the East Sussex LGBTQ+ Comprehensive Needs Assessment estimates that between 3.1% and 7% of people living in East Sussex are trans and gender diverse. Research indicates that neurodivergent people are more likely to identify as LGBTQ+ than neurotypical people (University of Cambridge, 2021). LGBT people are also known to experience inequalities in health and social care (House of Commons, 2019).	No additional feedback received.	Trans people experience health and social care inequalities. They may fear discrimination in health and social care settings and may be less likely to get the support they need.	Explore targeted engagement to ensure support is available, and how to access it.



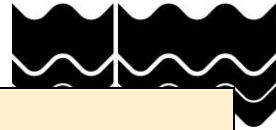
Pregnancy and maternity¹⁵	There are just under 5,000 births per year in East Sussex. Hastings has the highest overall birth rate as well as for women aged 15-19 years. Lewes and then Rother have the highest birth rates for women aged 35-44 years. According to the National Autistic Society, evidence suggests that autistic people experience aspects of pregnancy and childbirth differently to non-autistic people and may face unique challenges, including: • heightened sensory sensitivities during pregnancy • communication and interaction difficulties with healthcare professionals including feeling misunderstood or judged, feeling unable to express themselves or ask questions, finding that information and support does not meet their needs (including information on the birth process)		Autistic people may need specific support during pregnancy and childbirth. It is important that health and social care professionals understand the different experiences of autistic people during pregnancy and childbirth, and how to support Autistic people effectively.	Documents will be written in accessible language, and people will be able to request information in other formats Neuro-inclusive language to reflect Autism / ADHD Priority actions identified in the action plan include: • Increase education and improve the knowledge of autism of health and care professionals • Promote healthcare Digital Flags for reasonable adjustments to autistic people and healthcare professionals
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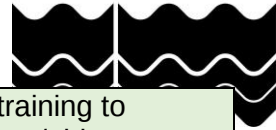
	• concern and/or anxiety around disclosing autism due to potential stigma • differences in experience of pain These differences can impact autistic people in various ways, including: • increased stress and anxiety • increased likelihood of meltdowns or shutdowns as a result of sensory overload • unmet physical or emotional needs due to health professionals failing to accommodate communication differences.			
Race (ethnicity)¹⁶ Including migrants, refugees and asylum seekers	Black and minority ethnic groups including white minority groups (Irish, Gypsy or Irish Traveller, Roma, Other White) make up 11.7% of usual residents in East Sussex, compared to 10.9% of the autistic population.	ESCC Autism consultation survey 2024: • 71% of respondents to consultation survey were White British. The remaining 6% who answered the question were spread across 8 ethnic group.	People from ethnic minorities experience inequality in health and social care. This means it may be harder for autistic people from ethnic minorities to get the support they need.	Documents will be written in accessible language, and people will be able to request information in other formats/ languages. Identify further engagement opportunities to explore more widely autism and intersectionality.



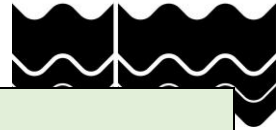
	<u>A report by the National Autistic Society (2014)</u> suggests it is harder for autistic people from ethnic minorities to get the support they need due to: • Challenges getting a diagnosis – either due to lower levels of understanding about autism among community members, or teachers making incorrect assumptions about a student's behaviour or language abilities • Information being unavailable in languages other than English and a lack of translation services • Fear that professionals may be patronising or lack cultural understanding, and negative attitudes towards professionals Ethnicity is also a key determinant of health inequalities in England, including autism services (National Autistic Society, 2016).			
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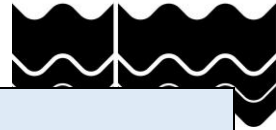
Religion or belief¹⁷	In 2021, 45.9% (250,330) of usual residents of East Sussex identified as Christian, down from 59.9% (315,650) in 2011. The second most common religion in East Sussex after Christianity is Islam. The proportion of the population stating they were Muslim increased from 0.8% of the usual resident population (4,200) in 2011 to 1.1% (6,190) in 2021. While autism stigma exists across all socio-cultural contexts, research suggests there may be higher levels of stigma within some religious communities (National Autistic Society, 2016).	ESCC Autism consultation survey 2024: No religion 48.60% Christian 21.18% Buddhist 0.62% Jewish 0.93% Other 1.87% Philosophical belief 2.80%	Research suggests it may be harder for autistic people within some religious communities to get the support they need.	Identify further engagement opportunities to explore more widely autism and intersectionality.



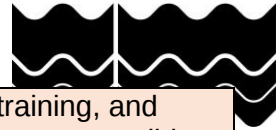
Sex¹⁸	In East Sussex: 52% of the population are women and 48% men. Sussex Integrated Dataset 2024: There is a much higher prevalence of Autism in males than females. Only 29% of diagnosed autistic people in East Sussex are female, compared to 71% male. National Autistic Society: Many autistic women and girls struggle to get a diagnosis, receive a diagnosis later in life or are misdiagnosed with conditions other than autism. Females are more likely to 'mask' autistic traits. Women with learning disabilities, autism or both are three times more likely to experience domestic abuse than their peers. Csecs et al. (2020) highlighted joint hypermobility as 3.52 times more prevalent in autistic and ADHD females, than those with no	ESCC Autism consultation survey 2024: Only 8% of males responded to our consultation survey.	Need to ensure that access to services including diagnosis is equitable and that specific issues affecting Autistic women are understood by health and care professionals.	Awareness training to include women/girls masking, and the impacts of key hormonal changes such as puberty, pregnancy and menopause. Communication articles around masking and how this presents and intersecting articles e.g. domestic abuse, physical health.
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	neurodevelopmental condition, suggesting gender joint hypermobility syndrome prevalence in the population.			
Sexual orientation¹⁹	The 2021 East Sussex LGBTQI+ Comprehensive Needs Assessment estimates that there may be between 17,273 and 39,004 LGB+ people living in East Sussex (between 3.1% and 7% of the population) In adults, the GP patient survey found that mental health condition prevalence was significantly higher in LGB+ people (41%), compared to heterosexual people (11%), especially in bisexual people (56%). According to the 2021 Census 3.3% of East Sussex residents declared themselves as LGB+. JSNA data: there are more LGB+ people in Hastings than the national average. JSNA data: there are more LGB+ people with a disability in Lewes than the national average.	ESCC Autism consultation survey 2024: Over half of respondents 61% identified as heterosexual/straight, while 2% identified as gay or lesbian, and 6% as bi/bisexual (the remainder chose not to complete the question)	Neurodivergent people are more likely to identify as LGBTQ+ than neurotypical people. LGBTQ+ people experience inequalities in health and social care. They may be fearful of discrimination from services and less likely to get the support they need.	Identify further engagement opportunities to explore more widely autism and intersectionality.



	Research indicates that neurodivergent people are more likely to identify as LGBTQ+ than neurotypical people (University of Cambridge, 2021). LGBTQ+ people are also known to experience inequalities in health and social care (House of Commons, 2019).			
Marriage and civil partnership²⁰	Not applicable			
Armed Forces²¹	Not applicable			
Impacts on community cohesion²²		ESCC Autism consultation survey 2024: 67% (215 respondents) said that it is hard/very hard for Autistic people to find out about inclusive social activities in the local community due to few or no options being suitable. 63% (201 respondents) said that it is hard/very	Need to ensure that there is a range of access to inclusive services, and information about these services are easy to find.	Priority actions identified in the action plan include: - Promote examples of services that support autistic people well - Pilot tailored support for autistic people rather than general signposting - Embed autism awareness and understanding into all council departments,

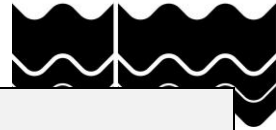


		hard for Autistic people to find out about inclusive wellbeing and leisure activities in the local community due to lack of options and convenience. • 33% (106 respondents) said that they felt either unsafe or very unsafe within their community / neighbourhood due to others attitudes or their own personal anxieties / needs. • 40% (126 respondents) reported that they have experienced anti-social behaviour within the last two years. • 32% (103 respondents) said that it is hard/very hard for Autistic people to access social housing. • 41% (133 respondents) said that public transport is either not often / not at all accessible for Autistic people due to sensory experience or reliability.		through training, and guidance on accessible buildings and recruitment • Increase access to peer support groups for autistic people and their families
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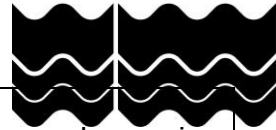
Additional categories

(identified locally as potentially causing / worsening inequality)

Characteristic	What do you know ²³ ?	What do people tell you ²⁴ ?	What does this mean ²⁵ ?	What can you do ²⁶ ?
Rurality²⁷	74% of the population in East Sussex lives in an urban area with the remaining 26% living in a rural area (2021 census).		Some individuals have difficulty accessing services to due rural location	Review current service provision in rural areas Work with VCSE and independent sector to identify opportunities for developing additional support services
Carers	There are over 10,000 persons claiming Carers Allowance in East Sussex. (Source DWP Feb 2020) JSNA data: There are more carers in Eastbourne than the national average.	ESCC Autism consultation survey 2024: We had the most responses from parents and carers of an Autistic person, with that group accounting for 71% of the total. However, survey responses were in relation to the cared for person rather than their own needs as a carer	Ensure the voice of the carer is heard through the implementation of the action plan	Link with existing parent and carer groups including: • East Sussex parent and carers forum • Care for the carers to continue to understand key priorities for carers and to promote carers support available.
Other groups that may be differently affected (including but not only: homeless people, substance users, care leavers – see end note) ²⁸	East Sussex is the fifth most deprived of 26 County Councils. 13% of people aged 60 plus were living in poverty in 2019 (source Joint Strategic Needs Assessment). 10.3% of households were in fuel poverty in 2019 compared to 9.3 % in England.		Intersectionality is a significant consideration for the autism population.	Ensure that all literature is accessible and inclusive, and services & support are available in the most deprived areas of East Sussex

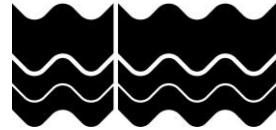


	Sussex Integrated Dataset 2024: There is higher prevalence of autism in those living in deprivation. 20 per 1000 autistic individuals live in the most deprived quintile in East Sussex compared to 9.5 per 1000 individuals that live in the least deprived quintile. Criminal Justice Service – Individuals within the CJS have a higher diagnosis of ADHD and Autism than the general population. Lewes Prison has a special ND unit Sussex Integrated Dataset 2024: There is a much higher expected prevalence of autism in the Looked After Child (LAC) population.			
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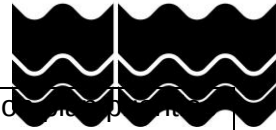
Assessment of overall impacts and any further recommendations²⁹ - include assessment of cumulative impacts (where a change in one service/policy/project may have an impact on another)

The research and consultation we have undertaken to inform the East Sussex Autism Action Plan has enabled us to identify clear priority actions to implement in the next 3 years. Alongside the consultation with autistic residents of East Sussex Adult Social Care has been working closely with the ESCC Education division, Employment and Skills Team, NHS Sussex Neurodevelopmental Pathway Programme and the Supported Employment Forum to ensure alignment with their priorities.

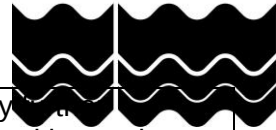


2. List detailed data and/or community feedback that informed your EqIA

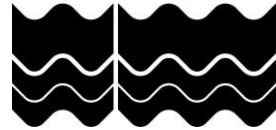
Source and type of data (e.g. research, or direct engagement (interviews), responses to questionnaires, etc.)	Date	Gaps in data	Actions to fill these gaps: who else do you need to engage with? (add these to the Action Plan below, with a timeframe)
Public Health analysis 2024 – Methods of measuring the prevalence of Autism	2024	Other neurodivergent conditions and their co-occurrence with autism	Current trainee Doctor on rotation in Public Health is undertaking further research and analysis to understand prevalence of other neurodivergent conditions. Due March 2025.
Inclusion Advisory Group	23 April 2024	Obtain feedback from LGBTQ groups such as Allsorts or Bourne Out Cafe Obtain feedback from Young Healthwatch	Attempts were made to arrange a focus group with members of Allsorts but this was not achieved. Contact again when action plan has been agreed to try and get involvement in implementation. Focus group was held with Young Healthwatch in May 2024
East Sussex County Council Consultation survey	April-June 2024	Feedback from the consultation informed the agenda and format for the Stakeholder workshops	Implementation of the action plan priorities
East Sussex Focus Groups with Autistic people: • St Nicholas Day Service • Young Health Watch • Roebuck Centre	May-July 2024	Feedback from the focus groups informed the agenda and format for the Stakeholder workshops	Implementation of the action plan priorities



Stakeholder Workshops Employment Education Health & Wellbeing (adults) Health & Wellbeing (children & young people)	September-October 2024	Unclear and difficult to access information regarding services Lack of reasonable adjustments Lack of knowledge and understanding of autism especially within health & social care, employment, education and the community Lack of accessibility to employment opportunities Lack of peer support groups Lack of access to services	Implementation of the action plan
East Sussex Supported Employment Forum	17 September 2024 28 November 2024	Shared autism prevalence information and invited members to the stakeholder workshops Sought agreement of priority actions identified	Additional employment representation obtained at stakeholder workshops Support given to priority actions. Attendance at March 2025 meeting to take forward how some of the employment actions will be implemented.
East Sussex Mental Health Community Transformation Group	07 January 2025	Develop links with the new community mental health teams	Meeting to be arranged to discuss how priority actions can be aligned to emerging teams. Present autism action plan to the East Sussex Mental Health Lived Experience Advisory Group (LEAG) in March 2025



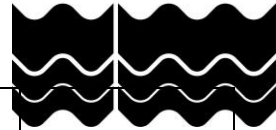
Disability Rights Reference Group (DRRG)	17 January 2025	Feedback from the deaf autistic community Autism training and awareness of DWP staff	Liaise with Surdi to identify engagement opportunities with people who are deaf and autistic Ensure DWP staff are made aware of training opportunities
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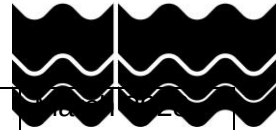
4. Prioritised Action Plan³⁰

NB: These actions must now be transferred to service or business plans and monitored to ensure they achieve the outcomes identified.

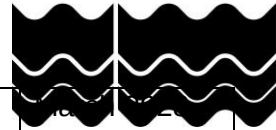
Impact identified and group(s) affected	Action planned	Expected outcome	Measure of success	Timeframe
Age Disability Pregnancy and maternity Race Impacts on Community Cohesion	Ensure there is a range of ways to access information, not just through digital methods.	- Improved online information and documents about services and support for autistic people - Pilot tailored face to face and telephone support for autistic people - Information, both online and in hard copy, use accessible and neuro-inclusive language, and people will be able to request information in other formats.	Autistic people are able to easily find out about inclusive social, wellbeing and leisure activities	April 2025 to March 2028
Age	Clearly state age range that services and resources are applicable to within signposting information	- Search engines enable filters on age - Information leaflets clearly state referral criteria including age	Autistic people are able to easily find out about inclusive social, wellbeing and leisure activities	March 2026
Disability	Work with NHS Sussex to promote accessible information and guidance on the neurodevelopmental diagnosis process and universal help available pre, during and post assessment, including crisis support	- Improved online information and documents about services and support for autistic people - Work with NHS Sussex to promote changes to the Neurodevelopmental Pathway - Work with VCSE and independent sector to identify opportunities for	- Autistic people understand what support is in place, pre and post diagnosis. - Autistic people can access a timely assessment of their neurodevelopmental needs.	March 2028



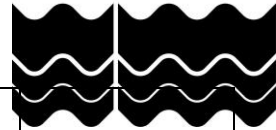
		developing additional support services, in particular crisis support.		
Disability	Involve autistic people in the design of Integrated Community Teams to ensure services are accessible	Integrated Community Teams are developed to be accessible for autistic people	- Autistic people are able to access health care delivered by the right people at the right time - Autistic people feel empowered to ask for reasonable adjustments to support their needs	March 2026
Disability Pregnancy and maternity Sex Impacts on Community Cohesion	Increase education and improve the knowledge of autism of health, care and other professionals	- Promote autism awareness and training available to health, social care, DWP and council departments. - Further understand gaps in training. - Develop autism training champions across health, social care and VCSE organisations. - Awareness training to include women/girls masking, and the impacts of key hormonal changes. - Ensure training addresses intersectionality and additional barriers experienced.	- Autistic people are able to access health care delivered by the right people at the right time - Health and care professionals have the knowledge and skills to successfully support autistic people - Autistic people feel empowered to ask for reasonable adjustments to support their needs	April 2025 to March 2028
Disability	Promote Autism health and care passports and alert cards	Review existing passports and alert cards with autistic people to agree an East Sussex approach	Autistic people feel empowered to ask for reasonable adjustments to support their needs	March 2026



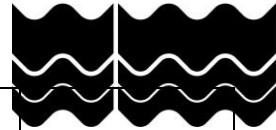
Disability Pregnancy and maternity	Promote healthcare Digital Flags for reasonable adjustments to autistic people and healthcare professionals	- Promote Digital flag already available on primary care system - Explore with health and care partners the potential for digital flags on social care, community and acute systems	Autistic people feel empowered to ask for reasonable adjustments to support their needs	
Disability	Work with NHS Sussex to improve clinical environments, particularly diagnostic, to create more friendly and accessible spaces	Co-produce guidance documents with autistic people	- Autistic people are able to access health care delivered by the right people at the right time - Autistic people feel empowered to ask for reasonable adjustments to support their needs	March 2028
Disability	Work with NHS Sussex to implement autism annual health checks	Learn from Learning Disability annual health check roll out.	Improved health and wellbeing for autistic people	March 2028
Disability Age	Develop profiling tool for schools to use to understand individual needs and how those needs can be met.	Review of existing profiling tools elsewhere Co-produce, pilot and evaluate an East Sussex tool	Improved understanding of autistic peoples needs and reasonable adjustments required	March 2026
Disability Age	Ensure that appropriate education guidance, information and support is available to autistic children & Young People and their families	- Promote the support available (local offer) within the autistic community and parent/carers - Use the Preparation for Adulthood framework to support schools to equip individuals with skills for adulthood - Promote post 16 provision, particularly in areas of deprivation	Autistic children and young people feel supported to develop and achieve their goals.	March 2026



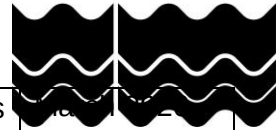
Disability Age	Promote Autism training to all school staff, including improving understanding of masking, mental health and how a child's environment impacts on their behaviour	• Communication, Learning and Autism Support Service (CLASS) to further promote their existing training, which is based on Autism Education Trust (AET) training programme • Support delivered to schools through CLASS Core Offer • Engagement in Autism in Schools and PINS (Promoting the Inclusion of Neurodiversity in Schools) projects to further develop school practice.	School and college staff have the knowledge and skills to successfully support autistic people	
Disability Age	Promote curriculums / sharing of information that are inclusive and adaptive to ensure: 'Every school/college sees itself as an education setting that meets the needs of autistic pupils.'	Promotion to include: • Embedding the Universally Available Provision in schools • Incorporating neuro-affirmative approaches, such as role models • Individuals understanding themselves as well as the importance of others understanding autism • Share best practice between specialist and mainstream schools possibly through ideas such as dual placements • Information sharing to support individuals and the learning needs of Looked After Children • Learn from family support worker pilot to address parents' confidence to develop adjustments (Enhancing inclusive practice project)	Autistic children and young people are supported to develop and achieve their goals School and college staff have the knowledge and skills to successfully support autistic people	March 2028



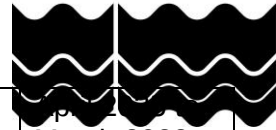
		• Exploration of further use of alternative provision to support children, where appropriate		
Disability Age	Increase understanding and support for autistic young people in secondary schools.	• Use understanding gained from Autism in Schools project to develop the following in secondary schools: ○ Increased and improved communication between parents, children and secondary school staff ○ Shared training and resources between parents and staff ○ Promotion of social inclusion within schools (e.g. breaktime / lunchtime / clubs) ○ Increased availability of self-advocacy in secondary schools Increased knowledge/understanding of neurodiversity for other pupils (peer awareness)	School and college staff have the knowledge and skills to successfully support autistic people	March 2028
Disability Age	Improve the experience of transitions (primary to secondary / secondary to college) for autistic children and young people	• Improve partnership work between primary and secondary schools to support smooth transitions • Explore options to further develop enhanced transition support such as ○ Developing a Transition/Education Programme of engagement to support young people in the period between finishing GCSE's and starting college	School and college staff have the knowledge and skills to successfully support autistic people Autistic children and young people are supported to develop and achieve their goals	March 2028



		○ Working with the National Citizen Service (NCS) to develop and promote a summer transition programme • Feed through information from Education, Health and Care Plan reviews to post-16 to support strategic planning - individual and trends. Ensure EHCP reflects structure of post-16 life. e.g. independent travel, terminology • Align Moving On and other forms across early years and primary. • Establish a child's 'biography' to progress with child (Enhancing inclusive practice project) • Learn from the mental health support tool being trialled for primary/secondary school transition		
Disability	Publish and promote a centralised directory of employment support services in East Sussex	• Review existing information points • Promote information via a single access point	Autistic people have access to clear information and advice about employment support available.	March 2026
Disability	Raise awareness and accessibility of resources to help employ more neurodivergent people	• Review and update existing resources • Publish in a central information point and promote	• More autistic people are employed full or part time, including voluntary • Autistic people feel empowered to ask for reasonable adjustments to support their needs	March 2026



Disability	Publish and promote guidance for making recruitment processes more accessible for neurodivergent people	Review existing guidance and promote via a central information point	- Autistic people have access to clear information and advice about employment support available. - Autistic people feel more able to get a job	
Disability	Develop initial assessments for employment organisations to help to identify skills, suitable roles and reasonable adjustments	Review existing tools and promote via a central information point	- Autistic people feel more able to find and keep a job - Autistic people feel empowered to ask for reasonable adjustments to support their needs	March 2027
Disability Age	Develop a programme of work to support young people and their families to consider their future employment choices, through helping them to identify their strengths, challenges and learning styles, and develop practical skills such as CV writing and interview techniques.	Develop and implement training programme	Autistic children and young people feel positive about their future aspirations.	March 2027
Disability	Develop support services that can act as a brokerage/advocate for employed autistic people who may need support to navigate work environment.	- Review current provision - Work with VCSE and independent sector to identify opportunities for developing additional support services	- Autistic people have access to clear information and advice about employment support available. - Autistic people feel more able to find and keep a job	March 2027
Sex, Disability	Publish communication articles around links with physical health; masking and how this presents and intersecting articles e.g. domestic abuse	Public and professionals are more aware of autism and physical health links, and issues specific to autism and women, including masking and under-diagnosis and misdiagnosis	Autistic people feel empowered to ask for reasonable adjustments to support their needs	March 2026



Impacts on Community Cohesion	Promote examples of services that support autistic people well	Raise awareness of autism and the benefits autistic people bring to the community and workplace	Autistic people are able to access inclusive social, wellbeing and leisure activities Autistic people feel empowered to ask for reasonable adjustments to support their needs	March 2028
Impacts on Community Cohesion	Increase access to peer support groups for autistic people and their families	Review current provision Work with VCSE and independent sector to identify opportunities for developing additional support opportunities	Autistic people are able to access inclusive social, wellbeing and leisure activities	March 2028
Rurality	Ensure accessibility to services in rural areas	Review current service provision in rural areas Work with VCSE and independent sector to identify opportunities for developing additional support services	Autistic people are able to access inclusive social, wellbeing and leisure activities	March 2028
Carers	Link with existing parent and carer groups to continue to understand key priorities for carers and to promote carers support available	Link with - East Sussex parent and carers forum - Care for the carers	Carers feel supported in their role and know how they can access support for themselves	September 2025
Disability Sexual orientation Race	Engage with groups that research suggests are less likely to get the support they need	Identify further engagement opportunities to explore more widely autism and intersectionality	Individuals are informed of the support available to them and able to access care delivered by the right people at the right time.	September 2025

EqIA sign-off: (for the EqIA to be final an email must be sent from the relevant people agreeing it, or this section must be signed)

Staff member completing Equality Impact Analysis: Sarah Crouch

Date: 24/02/25

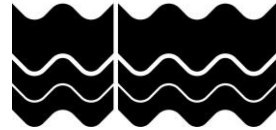
Directorate Management Team rep or Head of Service: Sally Reed

Date: 26/02/25

Equality lead: Froot Radford

Date: 27/02/25

Guidance end-notes



¹ The following principles, drawn from case law, explain what we must do to fulfil our duties under the Equality Act:

- **Knowledge:** everyone working for the Council must be aware of the Council's duties under the Equality Act 2010 and ensure they comply with them appropriately in their daily work.
- **Timeliness:** the duty applies at the time of considering policy options and/or before a final decision is taken – not afterwards.
- **Real Consideration:** the duty must be an integral, rigorous part of your decision-making process and influence the process.
- **Sufficient Information:** you must assess what information you have and what is further needed to give proper consideration.
- **No delegation:** the Council is responsible for ensuring that any contracted services, which are provided on its behalf need also to comply with the same legal obligations under the Equality Act of 2010. You need, therefore, to ensure that the relevant contracts make these obligations clear to the supplier. It is a duty that cannot be delegated.
- **Review:** the equality duty is a continuing duty. It applies when a policy or service is developed/agreed, and when it is implemented and reviewed.
- **Proper Record Keeping:** to prove that the Council has fulfilled its legal obligations under the Equality Act you must keep records of the process you follow and the impacts identified.

NB: Filling out this EqIA in itself does not meet the requirements of the Council's equality duty. All the requirements above must be fulfilled, or the EqIA (and any decision based on it) may be open to challenge. An EqIA therefore can provide evidence that the Council has taken practical steps comply with its equality duty and provide a record that to demonstrate that it has done so.

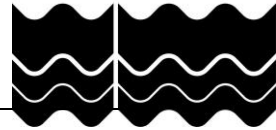
² Our duties in the Equality Act 2010

As a public sector organisation, we have a legal duty (under the Equality Act 2010) to show that we have identified and considered the actual and potential impact of our activities on people who share any of the legally 'protected characteristics' (age, disability, gender reassignment, pregnancy and maternity, race, religion or belief, sex, sexual orientation, and marriage and civil partnership).

This applies to policies, services (including commissioned services), and our employees. The level of detail of this consideration will depend on the nature of your project, who it might affect, those groups' vulnerability, and the seriousness of any potential impacts it might have. We use this EqIA template to gather information and assess the impact of our project in these areas.

The following are the duties in the Act. You must give 'due regard' (pay conscious attention) to the need to:

- **avoid, reduce, minimise or eliminate any negative impact** (if you identify unlawful discrimination, including victimisation and harassment, you must stop the action and take advice immediately).
- **promote equality of opportunity.** This means the need to:



- Remove or minimise disadvantages suffered by equality groups
- Take steps to meet the needs of equality groups
- Encourage equality groups to participate in public life or any other activity where participation is disproportionately low
- Consider if there is a need to treat disabled people differently, including more favourable treatment where necessary
- **foster good relations between people who share a protected characteristic and those who do not.** This means:
 - Tackle prejudice
 - Promote understanding

³ **EqIAs are always proportionate** to:

- The nature of the service, or scope of the policy/strategy
- The resources involved
- The number of people affected
- The size of the likely impact
- The vulnerability of the people affected

The greater the potential adverse impact of the proposed service or policy on a protected group (e.g. disabled people), the more thorough and demanding our process must be so that we comply with the Equality Act of 2010.

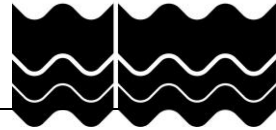
⁴ **Title of EqIA:** This should clearly explain what service / policy / strategy / change you are assessing

⁵ **Team/Department:** Main team responsible for the policy, practice, service or function being assessed

⁶ **Focus of EqIA:** A member of the public should have a good understanding of the policy or service and any proposals after reading this section. Please use plain English and write any acronyms in full first time - eg: 'Equality Impact Analysis (EqIA)'

This section should explain what you are assessing:

- What are the main aims or purpose of the service, policy, strategy, practice, or function?
- Who implements, carries out or delivers the service, policy, strategy, practice, or function? Please state where this is more than one person/team/body and where other organisations deliver under procurement or partnership arrangements.
- How does it fit with other services?



- Who is affected by the service, policy, strategy, practice, or function, or by how it is delivered? Who are the external and internal service-users, groups, or communities?
- What outcomes do you want to achieve, why and for whom? Eg: what do you want to provide, what changes, or improvements, are required and what should the benefits be?
- What do existing or previous reviews of the service, policy, strategy, practice, or function indicate to you?
- What is the reason for the proposal, or change (financial, service scope, legal requirements, etc)? The Equality Act requires us to make these clear.

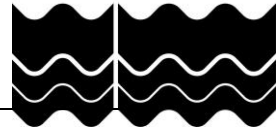
⁷ **Previous actions:** If there is no previous EqIA, or this assessment is for a new service, then simply write 'not applicable'.

⁸ **Data:** Make sure you have enough information to inform your EqIA.

- What data relevant to the impact on protected groups of the policy/decision/service is available?⁸
- What further evidence is needed and how can you get it? (Eg: further research or engagement with the affected groups).
- What do you already know about needs, access and outcomes? Focus on each of the protected characteristics in turn. Eg: who uses the service? Who doesn't and why? Are there differences in outcomes? Why?
- Have there been any important demographic changes or trends locally? What might they mean for the service or function?
- Does data/monitoring show that any policies or practices create particular problems or difficulties for any groups?
- Do any equality objectives already exist? What is current performance like against them?
- Is the service having a positive or negative effect on particular people in the community, or particular groups / communities?

⁹ **Engagement:** You must engage appropriately with those likely to be affected to fulfil the Council's duties under the Equality Act.

- What do people tell you about the services, the policy or the strategy?
- Are there patterns or differences in what people from different groups tell you?
- What information or data will you need from communities?
- How should people be consulted? Consider:
 - (a) consult when proposals are still at a formative stage;
 - (b) explain what is proposed and why, to allow intelligent consideration and response;
 - (c) allow enough time for consultation;
 - (d) make sure what people tell you is properly considered in the final decision.
- Try to consult in ways that ensure all different perspectives can be captured and considered.
- Identify any gaps in who has been consulted and identify ways to address this.



¹⁰ Your EqIA must get to grips fully and properly with actual and potential impacts.

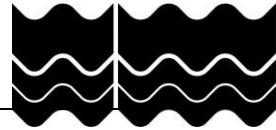
- The Council's obligations under the Equality Act of 2010 do not stop you taking decisions, or introducing well needed changes; however, they require that you take decisions and make changes conscientiously and deliberately confront the anticipated impacts on people.
- Be realistic: don't exaggerate speculative risks and negative impacts.
- Be detailed and specific so decision-makers have a concrete sense of potential effects. Instead of "the policy is likely to disadvantage older women", say how many or what percentage are likely to be affected, how, and to what extent.
- Questions to ask when assessing impacts depend on the context. Examples:
 - Are one or more protected groups affected differently and/or disadvantaged? How, and to what extent?
 - Is there evidence of higher/lower uptake among different groups? Which, and to what extent?
 - If there are likely to be different impacts on different groups, is that consistent with the overall objective?
 - If there is negative differential impact, how can you minimise that while taking into account your overall aims
 - Do the effects amount to unlawful discrimination? If so, the plan must be modified.
 - Does the proposal advance equality of opportunity and/or foster good relations? If not, could it?

¹¹ Consider all three aims of the Act: removing barriers, and also identifying positive actions to be taken.

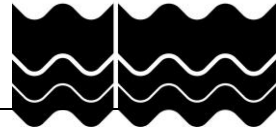
- Where you have identified impacts you must state what actions will be taken to remove, reduce or avoid any negative impacts and maximise any positive impacts or advance equality of opportunity.
- Be specific and detailed and explain how far these actions are expected to address the negative impacts.
- If mitigating measures are contemplated, explain clearly what the measures are, and the extent to which they can be expected to reduce / remove the adverse effects identified.
- An EqIA which has attempted to airbrush the facts is an EqIA that is vulnerable to challenge.

¹² **Age:** People of all ages

¹³ **Disability:** A person is disabled if they have a physical or mental impairment which has a substantial and long-term adverse effect on their ability to carry out normal day-to-day activities. The definition includes: sensory impairments, impairments with fluctuating or recurring effects, progressive, organ specific, developmental, learning difficulties, mental health conditions and mental illnesses, produced by injury to the body or brain. Persons with cancer, multiple sclerosis or HIV infection are all now deemed to be disabled persons from the point of diagnosis. Carers of disabled people are protected within the Act by association.



- ¹⁴ **Gender Reassignment:** In the Act a transgender person is someone who proposes to, starts or has completed a process to change his or her gender. A person does not need to be under medical supervision to be protected
- ¹⁵ **Pregnancy and Maternity:** Protection is during pregnancy and any statutory maternity leave to which the woman is entitled.
- ¹⁶ **Race/Ethnicity:** This includes ethnic or national origins, colour or nationality, and includes refugees and migrants, and Gypsies and Travellers. Refugees and migrants means people whose intention is to stay in the UK for at least twelve months (excluding visitors, short term students or tourists). This definition includes asylum seekers; voluntary and involuntary migrants; people who are undocumented; and the children of migrants, even if they were born in the UK.
- ¹⁷ **Religion and Belief:** Religion includes any religion with a clear structure and belief system. Belief means any religious or philosophical belief. The Act also covers lack of religion or belief.
- ¹⁸ **Sex:** Both men and women are covered under the Act.
- ¹⁹ **Sexual Orientation:** The Act protects bisexual, gay, heterosexual and lesbian people
- ²⁰ **Marriage and Civil Partnership:** Only in relation to due regard to the need to eliminate discrimination.
- ²¹ **Armed Forces:** The Armed Forces Act 2021 aims to help prevent service personnel, veterans and their families being disadvantaged when accessing public services. The new duty applies to certain housing, education or healthcare functions, but it is good practice to ensure consideration of impacts on current or former members of the armed forces, as well as their families.
- ²² **Community Cohesion:** potential impacts on how well people from different communities get on together. The council has a legal duty to foster good relations between groups of people who share different protected characteristics. Some actions or policies may have impacts – or perceived impacts – on how groups see one another or in terms of how the council's resources are seen to be allocated. There may also be opportunities to positively impact on good relations between groups.
- ²³ **Data:** Make sure you have enough information to inform your EqIA.
- What data relevant to the impact on protected groups of the policy/decision/service is available?²³
 - What further evidence is needed and how can you get it? (Eg: further research or engagement with the affected groups).
 - What do you already know about needs, access and outcomes? Focus on each of the protected characteristics in turn. Eg: who uses the service? Who doesn't and why? Are there differences in outcomes? Why?



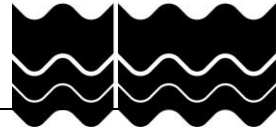
- Have there been any important demographic changes or trends locally? What might they mean for the service or function?
- Does data/monitoring show that any policies or practices create particular problems or difficulties for any groups?
- Do any equality objectives already exist? What is current performance like against them?
- Is the service having a positive or negative effect on particular people in the community, or particular groups or communities?

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 - If there is negative differential impact, how can you minimise that while taking into account your overall aims
 - Do the effects amount to unlawful discrimination? If so the plan must be modified.
 - Does the proposal advance equality of opportunity and/or foster good relations? If not, could it?



²⁶ Consider all three aims of the Act: removing barriers, and also identifying positive actions to be taken.

- Where you have identified impacts you must state what actions will be taken to remove, reduce or avoid any negative impacts and maximise any positive impacts or advance equality of opportunity.
- Be specific and detailed and explain how far these actions are expected to address the negative impacts.
- If mitigating measures are contemplated, explain clearly what the measures are, and the extent to which they can be expected to reduce / remove the adverse effects identified.
- An EqlA which has attempted to airbrush the facts is an EqlA that is vulnerable to challenge.

²⁷ **Rurality:** deprivation is experienced differently between people living in rural and urban areas. In rural areas issues can include isolation, access to services (eg: GPs, pharmacies, libraries, schools), low income / part-time work, infrequent public transport, high transport costs, lack of affordable housing and higher fuel costs. Deprivation can also be more dispersed and less visible.

²⁸ **Other groups that may be differently affected:** this may vary by services, but examples include: homeless people, substance misusers, people experiencing domestic/sexual violence, looked after children or care leavers, current or former armed forces personnel (or their families), people on the Autistic spectrum etc.

²⁹ **Assessment of overall impacts and any further recommendations**

- Make a frank and realistic assessment of the overall extent to which the negative impacts can be reduced or avoided by the mitigating measures. Explain what positive impacts will result from the actions and how you can make the most of these.
- Countervailing considerations: These may include the reasons behind the formulation of the policy, the benefits it is expected to deliver, budget reductions, the need to avert a graver crisis by introducing a policy now and not later, and so on. The weight of these factors in favour of implementing the policy must then be measured against the weight of any evidence as to the potential negative equality impacts of the policy.
- Are there any further recommendations? Is further engagement needed? Is more research or monitoring needed? Does there need to be a change in the proposal itself?

³⁰ **Action Planning:** The Council's obligation under the Equality Act of 2010 is an ongoing duty: policies must be kept under review, continuing to give 'due regard' to the duty. If an assessment of a broad proposal leads to more specific proposals, then further equality assessment and consultation are needed.