



London Borough of Enfield

Title of Report:	Key Decision to deliver a Mental Health Hub at Park Avenue
Report to:	Cllr Alev Cazimoglu, Cabinet Member for Health & Social Care
Date of Meeting:	Cabinet meeting 13 March 2024
Directors:	Tony Theodoulou – Executive Director People Department Doug Wilson – Director of Health and Adult Social Care
Report Author:	Stephanie van den Broek stephanie.vandenbroek@enfield.gov.uk
Ward(s) affected:	All Wards
Key Decision Number	KD 5590
Classification:	Part 1 & 2
Reason for exemption	Para 3

Purpose of Report

1. Report to approve the delivery of a Mental Health Hub at Park Avenue, the Hub will be bringing together teams currently working across two sites and improve the offer for service users and residents.

Recommendations

1. Agree to create a Mental Health Hub at Park Avenue bringing together teams currently working across two sites and improve the offer to service users and residents.
2. Approve the overall budget of £3.387m to deliver a new Mental Health Hub, (funded by £3.25m Better Care Fund, £60k CCP contribution, £77k Section 106 Grant). The total budget consists of £2.86m Capital and £0.53m Revenue.
3. Approve the addition of £2.86m to the approved Capital programme.
4. Note that £0.2m of this will be used for the relocation of the Resource Centre from Park Avenue to another appropriate site. This project will be managed via Accommodation Board.
5. Note that co-location of these services will also give the Council vacant possession of 58-60 Silver Street, enabling its disposal, letting, redevelopment or re-purposing.
6. Delegated authority to the Director of Property to procure, award and enter into contract with the relevant suppliers to support delivery of the project.

Background and Options

2. This report succeeds KD 5280 'Build the Change Programme (PL 20/114 C)' from 21st April 2021, which tabled a proposal for the principle of the development of a Mental Health Hub, enabling staff from the Integrated Mental Health Service (currently delivering frontline services from 2 separate locations at 58-60 Silver Street and Park Avenue Resource Centre) to be brought together in a single location to deliver a re-provisioned community hub service.
3. In gaining approval to provide a new Mental Health Hub, the Council will ensure an easy point of access for any person who has care and support needs for their mental health, and any person who cares for someone with mental health needs.
4. It is proposed that the Mental Health Hub will provide community-based specialist mental health services, a community café for out of hours crisis support, along with a service helping individuals maintain and improve their long-term health conditions.

5. These additional services will provide low-level step-down support, assist in preventing social isolation and aim to reduce escalation of an individual's mental and physical health conditions. The need to provide support for long term physical health conditions and in-particular for those mental health needs, is a well referenced approach.
6. The importance of supporting independence is embedded within the overarching vision for Adult Social Care: This aims to deliver good quality, safe, joined up and personalised health and social care services, that support independence, choice, and control, and meet the needs of individuals and their carers at the right time and in the best place. The focus is on prevention, but when care and support is needed; strive to provide this in a community setting wherever possible.

Improve opportunities for early intervention through the delivery of Mental Health and Wellbeing Hub.

- Improve access to high quality counselling support services including services for seldom heard populations living in Enfield.
 - Increase community rehabilitation options for people with complex mental health needs.
 - Support people with mental health support needs into training, development, and employment.
 - Work with service users and their families to identify the causes for higher levels of BAME community in MH (Mental Health) and collaboratively identify solutions for mental wellbeing and safety.
7. In line with the Council Plan the proposal is aimed at reducing social isolation and improve mental health by making every contact count, increasing the use of social prescribing and developing inclusive community spaces and services.
 8. The proposal will facilitate the closing of 58-60 Silver Street, which offers poor accommodation for staff and is not large enough to co-locate all services in scope of the hub. The closure of this site will also enable other options for the property such as sale, redevelopment, letting or repurposing.
 9. Three options were considered:
 - Do minimum – backlog maintenance of 58-60 Silver Street and Park Avenue Resource Centre. Now that 58-60 Silver Street will be redeveloped, repurposed, let or disposed of, and Park Avenue completely remodelled these proposals have fallen away.
 - Refurbish Park Avenue – complete refurbishment of Park Avenue location. This is the preferred option; we have scaled down the refurbishments to the minimum requirements to accommodate the Budget.
 - Redevelop new site (Enfield Police Station). It was not possible to acquire this site for development, and so this option has fallen away

10. The consolidated Mental Health Hub at Park Avenue is the option which has been developed.

Preferred Option and Reasons for Preferred Option

11. This option is mainly funded from the better care funds with additional funds from Section 106 and Corporate Condition Programme (CCP) contribution.
12. This option allows the Council to further modernise and streamline its property estate, enabling it to operate from fewer but better equipped buildings which are designed to meet the needs of residents, services, and staff.
13. The consolidation of the Mental Health services at the Park Avenue Hub will facilitate the redevelopment, repurposing, letting or disposal of 58-60 Silver Street.
14. A dependency of this option is that the Resource Centre, that currently occupies Park Avenue ground floor needs to move out before construction can start. Within the budget we set aside £0.2M for this relocation.

Procurement Process

15. The procurement of the Mental Health Hub will be delivered via two Frameworks, one for the design team and one for the works contractor.

For the design team the West Northants Council Framework will be used, and appointments include, Building Surveyor, Mechanical & Electrical, Quantity Surveyor, Contract Administrator, Principal Designer (CDM) and Clerk of Works. LBE has direct access to the Framework which has been approved by Procurement for use and there are no user fees associated with the Framework. It provides fixed percentage fees that are directly connected to the construction cost and are highly competitive in the current market.

The procurement of the contractor will be by competitive process on a Procurement approved Framework. There are several available to use and given the nature of the project, which is a refurbishment, an evaluation of the Framework Lot's scope, suppliers and rates will be undertaken to assure the project of best value.

Relevance to Council Plans and Strategies

16. The re-provision of an improved Mental Health Hub will support Enfield's Joint Health and Wellbeing Strategy, in particular the priority to:
 - Being socially connected – providing opportunities for social interaction and linking people to positive social networks

And links to the Supporting Independence Strategy which sets out to:

- Enabling people to maximise their potential and independence
- Supporting people to make informed choices
- Exploring new ways of working with people in a strength-based way
- Continuing to deliver joined up services which focus on the whole person and family/social networks
- Working with vulnerable people to help them get to where they want to be
- Working with people to develop and deliver the right services in the right place at the right time, when people do need them
- Working with people to help them stay healthier for longer
- Delivering value for money
- Acting on feedback we receive to develop and improve the services available

17. In terms of the Council's aspiration for its corporate estate, the project supports; asset consolidation and transformation and contributes delivery of the Council's aims set out in the Council Plan by:

- Creating a modern Council with fewer but better equipped buildings designed to meet the needs of services and the residents that we serve
- maintaining access to high quality services and an accessible, fit for purpose building within easy reach by public transport in the west of the borough
- Improving security for our employees, customers, and data

18. Therefore, the provision of this hub also supports the aims of the Enfield Council Strategic Asset Management Plan.

Financial Implications

19. It is recommended to approve an overall budget of £3.387m for the delivery of an improved, consolidated Mental Health Hub based at the Park Avenue Resource Centre, funded from the Better Care Fund, section 106 and CCP (Corporate Condition Programme) contribution.

Summary of the budget required and funding sources

	Total
Overall budget required	3,387,000
Capital	2,859,708

Revenue 527,292

Funding in place

Better Care Fund 3,250,000

CCP contribution FY 24/25 60,000

Section 106 FY 23/24 77,000

Total funding 3,387,000

Feasibility Costs Approved 161,000

A breakdown of the Overall Budget required has been included in Confidential Appendix 1.

Revenue budget impact

There is currently income being received by Integrated Learning Disability Service at Park Avenue for Activities, café and Room Hire, this is estimated to be c.£60k per annum. The move is likely to have a direct impact on this income, however it is difficult to quantify at this point, it is assumed at least half of this income will no longer be received on this budget.

It is assumed that the running costs of the Mental Health Hub at Park Avenue will be non-incremental to the current costs (therefore no increase). The Property department have taken external advice on the current Rates exemption and extending the mental health hub into the ground floor should not impact the current exemption.

A Revenue budget of £370k will be required for 2024/25.

The proposal aims to close 58-60 Silver Street, thereby alleviating pressure on the Revenue budget by eliminating running costs.

Capital budget impact

There is no impact on borrowing as the refurbishment is being funded primarily from the Better Care Fund.

CCP (Corporate Condition Programme) are contributing £60k from their 2024/25 Capital Budget towards drainage works.

A capital budget of £489k will be required for the 2024/25 Capital programme from the Pipeline to the main programme.

Risks

As the refurbishment is underway, it may be discovered that additional work is required. This includes, but is not limited to, condition issues identified, unforeseen lift works, asbestos containing materials etc.

A contingency has been included in the budget requirement to minimise this risk – the breakdown of this can be seen in Confidential Appendix 2.

Legal Implications

20. It is the general duty of a local authority, in exercising a function under the Care Act 2014 to promote an individual's well-being. Well-being includes their mental health and emotional well-being.

A local authority must provide or arrange for the provision of services, facilities or resources, or take other steps, which it considers will contribute towards preventing or delaying the development by adults & carers in its area of needs for care and support including the reduction thereof.

Section 123 of the Local Government Act 1972 provides the Council with power to dispose of its land provided that best consideration is obtained and, further, disposals need to be made in accordance with the Council's Property Procedure Rules.

The contracts flowing from the recommendations in this report must be procured in accordance with the Council's Contract Procedure Rules, and, where relevant, the Public Contracts Regulations 2015. The use of a framework is a compliant route to award, provided that the Council can legitimately use the framework and the award process complies with the terms of the framework. The terms of the call-off contract must be consistent with the framework, and in a form approved by Legal Services on behalf of the Director of Law and Governance.

The recommendations set out in this report are within the Council's powers and will contribute towards the fulfilment of the Council's duties.

Equalities Implications

21. The EQIA shows that no mitigation measures are needed. The project does not discriminate against service users, residents, and staff, and in some regards will have a positive impact. For example, by adding an additional accessible toilet. The full EQAI will be added to this paper.

Property Implications

22. Corporate property implications are included throughout this report. This project may facilitate the redevelopment, repurposing, letting or disposal and capital receipt of other locations which aligns to corporate goals. The MHH will allow the joint services to deliver improved and resilient services from one central location. The Operational property team will be leading on the relocation of the Resource Centre.

Procurement Implications

23. Any tenders required in relation to this project, must be undertaken in accordance with the Council's Contract Procedure Rules (CPR's) and the Public Contracts Regulations (2015), this includes the use of the London Tenders Portal, as necessary. Procurements of a value more than the Public Contract Regulations thresholds must be processed through the

Procurement Services Assurance Process. Any call-offs from frameworks to undertake the services or works must be subject to Due Diligence as to their availability and viability for use by Enfield and for this project.

24. At the end of the sourcing process, authority to award any contract will be sought in line with the CPR's and Council's Governance. The Service Area shall ensure this procurement activity takes place via the Council's e-Tendering portal and will be promoted to the Council's Contract Register, and the upload the executed contracts/agreements.
25. All awarded projects must be promoted to Contracts Finder to comply with the Government's transparency requirements. Contact Procurement.support@enfield.gov.uk for any support.
26. For any subsequent contract over £100,000 in value the CPR's state that the contract must have a nominated contract owner in the Council's e-Tendering portal.
27. For any subsequent contract over £500,000 in value, the CPR's state that the contract must have a nominated Contract Manager in the Council's e-Tendering portal and there must be evidence of contract management, including, operations, commercial, financial checks (supplier resilience) and regular risk assessment uploaded into the Council's e-Tendering portal.

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Appendices

1. Overall MHH project budget
2. Capital Budget Approval Detail
3. EQIA -24th January 2024

Background Papers

Council Plan
Joint Health and Wellbeing Strategy
Strategic Asset Management Plan 2019-2024
Joint Health and Wellbeing Strategy 2023-2027

#Departmental reference number: PL2223_014

Appendix 1: Overall MHH project budget

Part 2 Confidential Appendix

Appendix 2: Capital Budget Approval Detail

Part 2 Confidential Appendix

Appendix 3: EQIA

Enfield Equality Impact Assessment (EqIA) Introduction

The purpose of an Equality Impact Assessment (EqIA) is to help Enfield Council make sure it does not discriminate against service users, residents, and staff, and that we promote equality where possible. Completing the assessment is a way to make sure everyone involved in a decision or activity thinks carefully about the likely impact of their work and that we take appropriate action in response to this analysis.

The EqIA provides a way to systematically assess and record the likely equality impact of an activity, policy, strategy, budget change or any other decision.

The assessment helps us to focus on the impact on people who share one of the different nine protected characteristics as defined by the Equality Act 2010 as well as on people who are disadvantaged due to socio-economic factors. The assessment involves anticipating the consequences of the activity or decision on different groups of people and making sure that:

- unlawful discrimination is eliminated.
- opportunities for advancing equal opportunities are maximised.
- opportunities for fostering good relations are maximised.

The EqIA is carried out by completing this form. To complete it you will need to:

- use local or national research which relates to how the activity/ policy/ strategy/ budget change or decision being made may impact on different people in different ways based on their protected characteristic or socio-economic status;
- where possible, analyse any equality data we have on the people in Enfield who will be affected e.g. equality data on service users and/or equality data on the Enfield population;
- refer to the engagement and/ or consultation you have carried out with stakeholders, including the community and/or voluntary and community sector groups you consulted and their views. Consider what this engagement showed us about the impact of the activity/ policy/ strategy/ budget change or decision on different groups.

The results of the EqIA should be used to inform the proposal/ recommended decision and changes should be made to the proposal/ recommended decision because of the assessment where required. Any ongoing/ future mitigating actions required should be set out in the action plan at the end of the assessment.

Section 1 – Equality analysis details

Title of service activity / policy/ strategy/ budget change/ decision that you are assessing	Mental Health Hub 65C Park Ave, Enfield EN1 2HL
Team/ Department	Housing, Regeneration & Development
Executive Director	Tony Theodoulou
Cabinet Member	Cllr Tim Leaver/Cllr Alev Cazimoglu
Author(s) name(s) and contact details	Stephanie van den Broek
Date of EqIA completion	13/09/2023

Date the EqIA was reviewed by the Corporate Strategy Service	July 2023
Name of Head of Service responsible for implementing the EqIA actions (if any)	James Wheeler, Head of CMFM - Construction, Maintenance & Facilities Management, Housing, Regeneration and Development.
Name of Director who has approved the EqIA	Doug Wilson, Director of Health, and Adult Social Care

The completed EqIA should be included as an appendix to relevant EMT/ Delegated Authority/ Cabinet/ Council reports regarding the service activity/ policy/ strategy/ budget change/ decision. Decision-makers should be confident that a robust EqIA has taken place, that any necessary mitigating action has been taken and that there are robust arrangements in place to ensure any necessary ongoing actions are delivered.

Section 2 – Summary of proposal

<p>Please give a summary of the proposed service change / policy/ strategy/ budget change/project plan/ key decision</p> <p>Please summarise briefly: What is the proposed decision or change? What are the reasons for the decision or change? What outcomes are you hoping to achieve from this change? Who will be impacted by the project or change - staff, service users, or the wider community?</p>
<p>Background & reasons for decision / change</p> <p>The need to consolidate existing London Borough of Enfield mental health and wellbeing services into a Mental Health Hub (MHH) was discussed and agreed in KD 5280, on 21st April 2021. The Integrated Mental Health Service is currently located at 58-60 Silver Street (Enfield Town) and 1st Floor Park Avenue.</p> <p>It is proposed to bring the service comprising a multi-disciplinary team of staff (91 FTEs) in a single location to deliver a new re-provisioned community hub. It</p>

is proposed that the Mental Health Hub service will provide community-based specialist mental health services, a Voluntary and Community Sector (VCS) led community café for out of hours crisis support, along with a service helping individuals maintain and improve their long-term health conditions, and other commissioned services such as assisting mental health clients into employment.

These additional services will offer low-level step-down support, help prevent social isolation, and work toward reducing the escalation of individual's mental and physical health conditions. The necessity of offering support for long term physical health conditions, particularly for individual with mental health needs, is a well referenced approach.

In line with the Council Plan the proposal is aimed at reducing social isolation and improving mental health by making every contact count, increasing the use of social prescribing, and developing inclusive community spaces and services. The proposal will facilitate the closing of 58-60 Silver Street, which offers poor accommodation for staff, and is not fit for purpose for service users.

The current locations of Silver Street and Park Avenue, where Clinical Professionals teams are based and do not meet the high standard expected for accommodation. They do not provide a quality user experience for the communities they serve.

This EqlA has been undertaken to review the impacts of the above proposal and identify the possible impacts for staff, service users, partners, and VCS.

Overall, this EqlA identifies that the refurbishment will have an overall positive impact for those with a disability, by ensuring that the service is fully accessible and the provision of facilities for staff, service users, partners, and VCS.

Section 3 – Equality analysis

This section asks you to consider the potential differential impact of the proposed decision or change on different protected characteristics, and what mitigating actions should be taken to avoid or counteract any negative impact.

According to the Equality Act 2010, protected characteristics are aspects of a person's identity that make them who they are. The law defines 9 protected characteristics:

1. Age
2. Disability
3. Gender reassignment.
4. Marriage and civil partnership.
5. Pregnancy and maternity.
6. Race
7. Religion or belief.
8. Sex
9. Sexual orientation.

At Enfield Council, we also consider socio-economic status as an additional characteristic.

“Differential impact” means that people of a particular protected characteristic (e.g. people of a particular age, people with a disability, people of a particular gender, or people from a particular race and religion) will be significantly more affected by the change than other groups. Please consider both potential positive and negative impacts and provide evidence to explain why this group might be particularly affected. If there is no differential impact for that group, briefly explain why this is not applicable.

Please consider how the proposed change will affect staff, service users or members of the wider community who share one of the following protected characteristics.

Detailed information and guidance on how to carry out an Equality Impact Assessment is available [here](#). (Link to guidance document once approved)

Age

This can refer to people of a specific age e.g., 18-year-olds, or age range e.g., 0–18-year-olds.

Will the proposed change to service/policy/budget have a **differential impact [positive or negative]** on people of a specific age or age group (e.g., older, or younger people)?

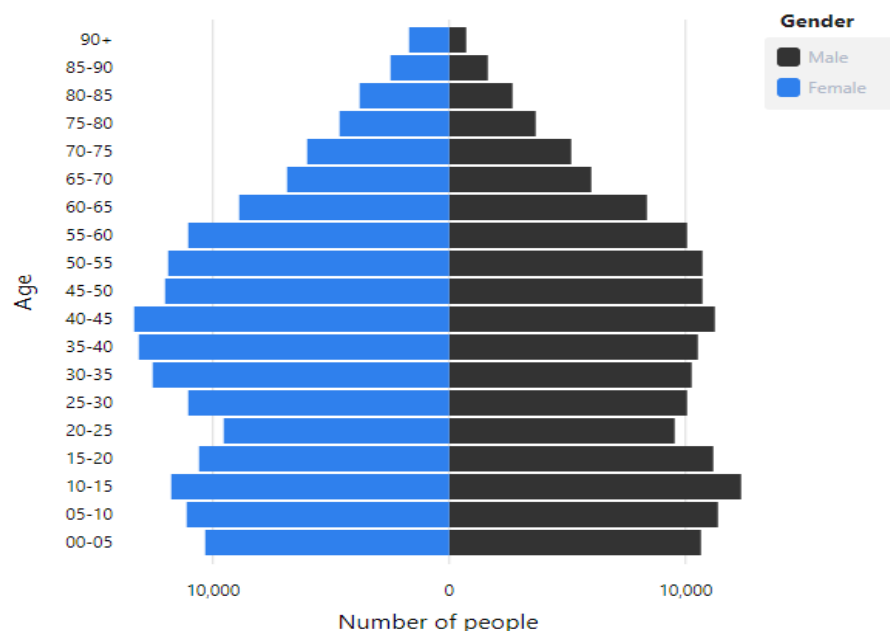
Please provide evidence to explain why this group may be particularly affected.

In England, in the year 2020, the percentage of people aged 18-64 with a common mental health condition disorder was 11.38% of the total population (PANSI 2020).

In Enfield, that figure was slightly higher, at 11.68% (PANSI, 2020), with the total population being '333,587 as of mid-2020' (Enfield Borough Profile, 2021). This means that an estimated 38,978 residents of the Borough will experience a mental health (MH) condition in any given year. It is expected to increase year on year by 2.2% to 2.4%, in line with the population within the Borough. (Source: www.pansi.org.uk)

Statistics indicate that 1 in 4 people will face some form of mental health problem at some point in their life.

Enfield's age pyramid shows how the population is distributed by age and gender. The median average age of someone in Enfield was 37.6 years in 2019.



This table shows service users, known to secondary MH services, who would be using the MH Wellbeing Hub.

Age	Sum of No
18 to 21	4

22 to 49	167
50 to 64	130
65+	60
No Age Recorded	3
Grand Total	364

There will also be MH service users from Voluntary and Community Sector (VCS) and low-level Enablement services utilising this new building.

The reprovion and improvement works across other areas of the site, as part of the BtC works, will have an overall positive impact across all ages of staff, service users, partners, and VCS.

Mitigating actions to be taken

N/A

Disability

A person has a disability if they have a physical or mental impairment which has a substantial and long-term adverse effect on the person's ability to carry out normal day-day activities.

This could include physical impairment, hearing impairment, visual impairment, learning difficulties, long-standing illness or health condition, mental illness, substance abuse or other impairments.

Will the proposed change to service/policy/budget have a **differential impact [positive or negative]** on people with disabilities?

Please provide evidence to explain why this group may be particularly affected.

The [Enfield Borough Profile 2022](#) shows that just under 48,000 Enfield residents (all ages) had a disability in 2011. Part of the service of the new hub will focus on 'Mental Health into Employment,' assisting mental health service users in finding or retaining employment.

The Enfield Borough Profile 2022 data does not break down the figures by disability categories. However, concerning accessibility for individuals with mobility-related issues, the redevelopment of facilities at Park Avenue, along with plans for the BtC works, will enhance access to both public-facing areas and staff areas. Personal evacuation plans will be included in the design. There will be more accessible toilets, this will meet the needs of those with more limited mobility and those who need equipment or assistance for toileting.

Plans for the works will include the provision on the ground floor of a new area for staff to meet with the public. This includes:

- casual seating,
- a café area
- confidential meeting spaces.

Outside of normal office hours Park Avenue is currently utilised by a variety of different charity organisations these include clubs such as the Enfield Deaf Club and Enfield Vision. Along with several Learning Disability groups including CAPE. These groups will move with the Resource centre to their new location.

By providing better access the works will increase the opportunities for members of the public and staff with a range of physical, visual, hearing, and other impairments.

The proposal will have a positive impact for those with a disability.

Mitigating actions to be taken

N/A

Gender Reassignment

This refers to people who are proposing to undergo, are undergoing, or have undergone a process (or part of a process) to reassign their sex by changing physiological or other attributes of sex.

Will this change to service/policy/budget have a **differential impact [positive or negative]** on transgender people?

Please provide evidence to explain why this group may be particularly affected.

In Enfield, statistics show that 1.08% of people's gender identity differs from their sex registered at birth. This figure exceeds both London (0.9 %) and national averages (0.5%) averages. Nationally, individuals who identify as transgender are more likely to face mental health challenges, including depression and thoughts of suicide, leading to higher utilization of mental health services.

A Stonewall Report in February 2021 revealed that half of LGBTIQ (people who have identified themselves as lesbian, gay, bisexual, transgender, intersex, or questioning) had experienced depression, with three in five experiencing anxieties.

Currently, only 0.003% of service users identify as transgender, although gender reassignment is not formally recorded.

It is important to note that this service is designed to support Mental Health service users regardless of their sexual orientation.

There will be a no impact from the work at the new Mental Health Hub.

Mitigating actions to be taken

N/A

Marriage and Civil Partnership

Marriage and civil partnerships are different ways of legally recognising relationships. The formation of a civil partnership must remain secular, whereas a marriage can be conducted through either religious or civil ceremonies. In the U.K both marriages and civil partnerships can be same sex or mixed sex. Civil partners must be treated the same as married couples on a wide range of legal matters.

Will this change to service/policy/budget have a **differential impact [positive or negative]** on people in a marriage or civil partnership?

Please provide evidence to explain why this group may be particularly affected.

Mental Health service users are supported regardless of their marital or civil partnership status.

In recent data has shown us the most individuals will often be single or living alone due to having a severe mental health as it can be difficult in also maintaining a relationship.

Data shows from existing service users, that of those who declared their relationship status 81% were single.

Row Labels	Count of Referral date
Cohabiting with a partner	3
Divorced	10
Married	25
Prefer not to say	82
Separated, but in registered civil partnership	3
Separated, but legally married	3
Single	200
Grand Total	326

Improved facilities and access at the Park Avenue would make the building more welcoming, accessible, and inclusive places where residents can access all the support they need in one place, and our staff feel happy to work.

There is no impact under this protected characteristic from the proposals.

Mitigating actions to be taken

N/A

Pregnancy and maternity

Pregnancy refers to the condition of being pregnant or expecting a baby. Maternity refers to the period after the birth and is linked to maternity leave in the employment context. In the non-work context, protection against maternity discrimination is for 26 weeks after giving birth, and this includes treating a woman unfavourably because she is breastfeeding.

Will this change to service/policy/budget have a **differential impact [positive or negative]** on pregnancy and maternity?

Please provide evidence to explain why this group may be particularly affected.

Mental Health Foundation UK states:

- Approximately 68% of women and 57% of men with mental health problems are parents.¹
- The most common mental health problems experienced during pregnancy and after birth are anxiety, depression, and post-traumatic stress disorder (PTSD).²
- Women experiencing maternal mental health problems:³
 - Postpartum psychosis: 2 per 1,000
 - Serious mental ill health: 2 per 1,000
 - Severe depressive illness: 30 per 1,000
 - Mild-moderate depressive illness and anxiety states: 100-150 per 1,000
 - PTSD: 30 per 1,000
 - Adjustment disorders and distress: 150-300 per 1,000

Overall improvements to the building access and facilities will have no impact for this protected characteristic.

Mitigating actions to be taken

N/A

Race

This refers to a group of people defined by their race, colour, and nationality (including citizenship), ethnic or national origins.

Will this change to service/policy/budget have a **differential impact [positive or negative]** on people of a certain race?

Please provide evidence to explain why this group may be particularly affected.

Below is the demographic census data for both 2011 and 2021 for Enfield:

Classification	Percentage in Enfield 2011	Percentage in Enfield 2021
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Asian, Asian British or Asian Welsh	11.20%	11.50%
Black, Black British, Black Welsh, Caribbean or African	17.20%	18.30%
Mixed or Multiple ethnic groups	5.50%	5.90%
White	61.00%	52.10%
Other ethnic groups	5.10%	12.10%

Source: Office for National Statistics – 2011 Census and Census 2021

Row Labels	Sum of No	%
African	34	9%
Any other Asian background	21	6%
Any other Black background	1	0%
Any other ethnic group	10	3%
Any other mixed background	51	14%
Bangladeshi	2	1%
Black - Caribbean	1	0%
Caribbean	20	5%
Chinese	3	1%
Indian	6	2%
Not Known	10	3%
Other African	1	0%
Other white origin	46	13%
Pakistani	3	1%
Refused	12	3%
White - British	129	35%
White - Irish	9	2%
White - Polish	2	1%
White - Scottish	1	0%
White and Black African	1	0%
White and Black Caribbean	1	0%
(blank)		
Grand Total	364	100%

From the above data, we know that people from Black or White backgrounds are disproportionality represented within those requiring secondary Mental Health services.

The overall improvements to the building access and facilities will have no impact for this protected characteristic.

Mitigating actions to be taken

N/A

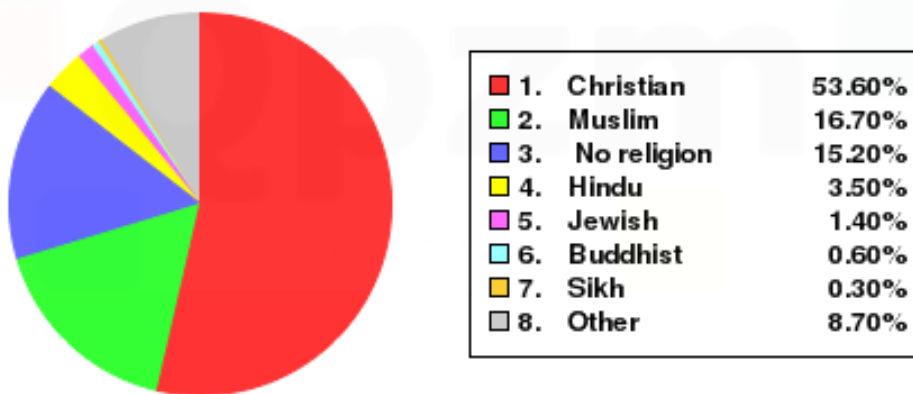
Religion and belief

Religion refers to a person's faith (e.g., Buddhism, Islam, Christianity, Judaism, Sikhism, Hinduism). Belief includes religious and philosophical beliefs including lack of belief (e.g., Atheism). Generally, a belief should affect your life choices or the way you live.

Will this change to service/policy/budget have a **differential impact [positive or negative]** on people who follow a religion or belief, including lack of belief?

Please provide evidence to explain why this group may be particularly affected.

The religious make up of Enfield is 53.6% Christian, 16.7% Muslim, 15.2% No religion, 3.5% Hindu, 1.4% Jewish, 0.6% Buddhist, 0.3% Sikh.



24,195 people did not state a religion. 552 people identified as a Jedi Knight and 15 people said they believe in Heavy Metal.

(Source <http://localstats.co.uk/census-demographics/england/london/enfield>)

From above data, we know that Christian and Muslim are the predominant religion or belief in Enfield area.

Overall, the Mental Health Hub improvements to the building access and facilities will have no impact for this protected characteristic.

Mitigating actions to be taken

N/A

Sex

Sex refers to whether you are a female or male.

Will this change to service/policy/budget have a **differential impact [positive or negative]** on females or males?

Please provide evidence to explain why this group may be particularly affected.

The 2021 census shows that of 329,500 population 172,500 are female and 157,000 are male. The service data show us that more males are known to use the service.

2021 Census	No	%
Male	157,000	48%
Female	172,500	52%
	329,500	100%

Service split by gender.

	Sum of No	%
Female	132	36%
Male	232	64%
Grand Total	364	

It is important to note that this service is designed to support Mental Health service users regardless of their gender.

Overall improvements to the building access and facilities will have no impact for this protected characteristic.

Mitigating actions to be taken

N/A

Sexual Orientation

This refers to whether a person is sexually attracted to people of the same sex or a different sex to themselves. Please consider the impact on people who identify as heterosexual, bisexual, gay, lesbian, non-binary or asexual.

Will this change to service/policy/budget have a **differential impact [positive or negative]** on people with a particular sexual orientation?

Please provide evidence to explain why this group may be particularly affected.

In February 2021, a Stonewall Report stated half of LGBTIQ+ people had experienced depression, and three in five had experienced anxiety.

From the 2021 census Enfield's profile on this characteristic is summarised as follows

- a lower proportion of people identifying as Gay or Lesbian than London and England
- a lower proportion of people identifying as Bisexual, Asexual or Queer than London and England
- a higher proportion of pansexual than England
- a higher % of 'all other sexual orientations' and 'did not answer' than London and England

Further data in terms of comparison with London and England are set out below.

	<u>Enfield No</u>	<u>Enfield %</u>	<u>London %</u>	<u>England %</u>
Straight or Heterosexual	226,705	88.15	86.19	89.37
Gay or Lesbian	2,342	0.91	2.23	1.54
Bisexual	2,073	0.81	1.52	1.29
Pansexual	944	0.37	0.37	0.23
Asexual	74	0.03	0.05	0.06
Queer	35	0.01	0.06	0.03
All other sexual orientations	151	0.06	0.04	0.02
Not answered		9.67	9.54	7.46

¹ <https://www.kingsfund.org.uk/blog/2022/09/acting-evidence-ensuring-nhs-meets-needs-trans-people>

It is important to note that this service is designed to support Mental Health service users regardless of their sexual orientation.

From the above data, Overall improvements to the building access and facilities will have no impact for this protected characteristic.

Mitigating actions to be taken

N/A

Socio-economic deprivation

This refers to people who are disadvantaged due to socio-economic factors e.g., unemployment, low income, low academic qualifications or living in a deprived area, social housing, or unstable housing.

Will this change to service/policy/budget have a **differential impact [positive or negative]** on people who are socio-economically disadvantaged?

Please provide evidence to explain why this group may be particularly affected.

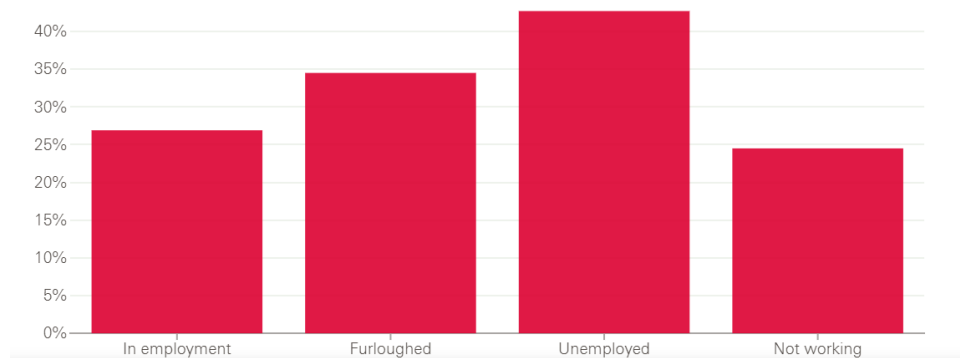
The Health Foundation in a report in April 2021 state.

'The relationship between mental health and unemployment is bi-directional. Good mental health is a key influence on employability, finding a job and remaining in that job. Unemployment causes stress, which ultimately has long-term physiological health effects and can have negative consequences for people's mental health, including depression, anxiety, and lower self-esteem.'

In the same report is shared the bar chart below showing higher increases in poor MH for those individuals unemployed.

Unemployed people were more likely to report poor mental health than those on furlough or in employment

Proportion of working age adults (age 18-65) with poor mental health by economic status: UK, January 2021



The new hub will bring together a range of services that will make a positive impact upon those most vulnerable and most likely to be affected by socio-economic deprivation. Services such as Individual Placement Support (IPS) for mental health will be delivered from the new hub. This service helps support people maintain long-term employment.

This service will be key in supporting those individuals who will be impacted by the Government's new Working Well project that is being rolled out over the next few years

An article written on research by the Welsh Parliament states:

'It is a two-way street. Poverty can be both a cause and a consequence of mental ill health, e.g. where debilitating symptoms and stigma around mental illness have an impact on a person's income and ability to work'.

- In Wales, [20% of adults in the most deprived areas](#) report being treated for a mental health condition, compared to 8% in the least deprived.
- Children from the poorest 20% of households are [four times as likely](#) to have serious mental health difficulties by the age of 11 as those from the wealthiest 20%.
- [Suicide rates are two to three times higher](#) in the most deprived neighbourhoods compared to the most affluent.
- The more [debt](#) people have, the more likely they are to have a mental health problem. One in four people experiencing a mental health problem is in problem debt. People with mental health problems are three times more likely to be in financial difficulty.
- Good quality [employment](#) is one of the most strongly evidenced determinants of mental health. In January 2021, [43% of unemployed people](#) reported poor mental health (compared to 27% of people in employment).

<https://research.senedd.wales/research-articles/poverty-and-mental-health-it-s-a-two-way-street/>

Services operating from the hub will also be able to support or link individuals in with benefits and welfare advice, along with debt management.

From the above data, Overall improvements to the building access and facilities will have a positive impact for this protected characteristic.

Mitigating actions to be taken.

N/A

Section 4 – Monitoring and review

How do you intend to monitor and review the effects of this proposal?

Who will be responsible for assessing the effects of this proposal?

N/A

Section 5 – Action plan for mitigating actions

Any actions that are already completed should be captured in the equality analysis section above. Any actions that will be implemented once the decision has been made should be captured here.

N/A

Identified Issue	Action Required	Lead officer	Timescale/By When	Costs	Review Date/Comments