



Equality Analysis

Next Steps for Nursery Milk

Introduction

The general equality duty that is set out in the Equality Act 2010 requires public authorities, in the exercise of their functions, to have due regard to the need to:

- Eliminate unlawful discrimination, harassment and victimisation and other conduct prohibited by the Act.
- Advance equality of opportunity between people who share a protected characteristic and those who do not.
- Foster good relations between people who share a protected characteristic and those who do not.

The general equality duty does not specify how public authorities should analyse the effect of their existing and new policies and practices on equality, but doing so is an important part of complying with the general equality duty. It is up to each organisation to choose the most effective approach for them. This standard template is designed to help Department of Health staff members to comply with the general duty.

Please complete the template by following the instructions in each box. Should you have any queries or suggestions on this template, please contact the Equality and Inclusion Team on 020 7972 5936 or aie@dh.gsi.gov.uk

Equality analysis

Title: Next Steps for Nursery Milk

Relevant line in [DH Business Plan 2011-2015](#):

What are the intended outcomes of this work? *Include outline of objectives and function aims*

To modernise the Nursery Milk Scheme to contain costs and improve value for money, while:

- ensuring that no parent, child or childcare provider is disadvantaged and all children under five in childcare settings continue to receive free milk
- keeping burdens on claimants as low as possible.

The options for change are to cap the maximum price that can be claimed for milk, issue e-vouchers with or without economy incentives, which childcare providers can use to purchase milk, or for DH to contract for the direct supply of milk to be delivered to all childcare providers.

Who will be affected? *e.g. staff, patients, service users etc*

Children from birth to five years old and their parents, childcare providers, and producers, suppliers, distributors and retailers of milk.

Evidence *The Government's commitment to transparency requires public bodies to be open about the information on which they base their decisions and the results. You must understand your responsibilities under the transparency agenda before completing this section of the assessment. For more information, see the current [DH Transparency Plan](#).*

What evidence have you considered? *List the main sources of data, research and other sources of evidence (including full references) reviewed to determine impact on each equality group (protected characteristic). This can include national research, surveys, reports, research interviews, focus groups, pilot activity evaluations etc. If there are gaps in evidence, state what you will do to close them in the Action Plan on the last page of this template.*

The annual **Health Survey for England**: data on the health status of children;

The **National Diet and Nutrition Survey**: data on the diet, nutrient intake and nutritional status of children;

Defra's annual **Family Food Survey Family Food**: data on food and drink purchases by households in the United Kingdom, including trends in expenditure and purchases by type of food. This allows estimates to be made of average household energy and nutrient intakes.

Each of the above surveys also includes data on demographic characteristics of respondents.

ONS data on the **trends in the retail price of milk**.

Disability *Consider and detail (including the source of any evidence) on attitudinal, physical and social barriers.*

The scheme is available to children under five years old attending a childcare setting for more than two hours per day. Childcare settings include childminders and creches, as well as

private and local authority run nurseries and primary school reception classes across Great Britain. This includes specialist schools and nurseries for children with disabilities and special needs of all kinds. A parallel scheme is run in Northern Ireland.

We are aware that all three of the options for change have the potential to reduce the flexibility childcare providers currently have in choosing how they purchase milk. For example, some children with special needs may have a very strong preference for single serve packaging or even for a particular familiar brand of milk. To fully explore these issues, we will, in parallel with the public consultation, be asking all childcare providers currently registered with the scheme to complete a simple survey about how the scheme works for them now and how potential changes might affect them and the children they care for. We will specifically encourage responses from special schools and nurseries to both the public consultation and the survey of childcare providers. The results of this survey will inform further detailed development of the options.

None of the options for change will impact on disability issues for childcare providers or producers, suppliers, distributors and retailers of milk. If option 4 is implemented, DH will ensure, through the procurement process, that any third parties contracted to directly supply milk to childcare providers fully comply with the equality duty.

Sex *Consider and detail (including the source of any evidence) on men and women (potential to link to carers below).*

No impact. Neither the scheme itself, nor any of the proposed options for changing it, impacts differentially on gender

Race *Consider and detail (including the source of any evidence) on difference ethnic groups, nationalities, Roma gypsies, Irish travellers, language barriers.*

We do not believe that any of the proposed options for changing the scheme reduce the ability of children from specific ethnic groups to access or benefit from the free milk supplied. However we will further explore this through the public consultation and the survey of childcare providers.

Age *Consider and detail (including the source of any evidence) across age ranges on old and younger people. This can include safeguarding, consent and child welfare.*

No impact. None of the proposed options for changing the scheme impact on the age range of the children who may legally benefit from it (birth to fifth birthday). For older children whose parents want them to have school milk, the EU School Milk Scheme provides subsidised milk in participating primary and secondary schools, for parents to purchase.

Cows milk is not suitable as a drink for infants under one year old, therefore for the under ones, milk supplied under the scheme is given as infant formula. This will continue under all options, to avoid disadvantaging infants whose parents choose not to exclusively breastfeed.

There is no impact on milk producers, suppliers, distributors and retailers on the basis of age.

Gender reassignment (including transgender) *Consider and detail (including the source of any evidence) on transgender and transsexual people. This can include issues such as privacy of data and harassment.*

No impact. Neither the scheme itself, nor any of the proposed options for changing it, impacts

on the ability of childcare providers to operate the scheme or for children to benefit from it, whatever the gender or transgender status of parents, carers or children.

There is no impact on milk producers, suppliers, distributors and retailers on the basis of gender reassignment.

Sexual orientation *Consider and detail (including the source of any evidence) on heterosexual people as well as lesbian, gay and bi-sexual people.*

No impact. None of the proposed options for changing the scheme impact on the ability of childcare providers to access the scheme, or children to benefit from it, on grounds of sexual orientation.

There is no impact on milk producers, suppliers, distributors and retailers on the basis of sexual orientation.

Religion or belief *Consider and detail (including the source of any evidence) on people with different religions, beliefs or no belief.*

Under current arrangements, childcare providers are able to purchase special milks such as Kosher milk. This may be more difficult under option 2 (capping) and option 3 (e-vouchers) if these milks cost significantly more than the normal market price for milk.

To fully explore these issues, we will, in parallel with the public consultation, be asking all childcare providers currently registered with the scheme to complete a simple survey about how the scheme works for them now and how potential changes might affect them and the children they care for. We will specifically encourage responses from the Jewish community, to both the public consultation and the survey of childcare providers. The response to this survey will provide a greater understanding of this, and other similar issues of which we may not yet be aware, and inform further policy development. For example, if option 4 is chosen, this understanding would then be reflected in the development of the invitation to tender for the direct supply of milk, ensuring that the needs of different groups are taken into account.

None of the proposed options for change impact on milk producers, suppliers, distributors and retailers on the basis of religion or belief.

Pregnancy and maternity *Consider and detail (including the source of any evidence) on working arrangements, part-time working, infant caring responsibilities.*

Under current arrangements, infants under one whose parents choose to exclusively breastfeed and who do not want to use infant formula would of course not need to make a claim from the scheme. None of the proposed options will change this.

None of the proposed options for change impact on milk producers, suppliers, distributors and retailers on the basis of pregnancy and maternity.

Carers *Consider and detail (including the source of any evidence) on part-time working, shift-patterns, general caring responsibilities.*

The scheme is not restricted to children who attend a childcare setting full-time but includes all who attend for two or more hours per day. This means that parents and carers who work, and

use childcare, on a part-time basis are not disadvantaged.

None of the proposed options for change impact on milk producers, suppliers, distributors and retailers on the basis of part-time working, shift patterns or general caring responsibilities.

Other identified groups *Consider and detail and include the source of any evidence on different socio-economic groups, area inequality, income, resident status (migrants) and other groups experiencing disadvantage and barriers to access.*

Those who currently supply milk under the scheme at above the normal market rate may lose some business under option 2 and 3 and childcare providers seek out milk priced within the cap or e-voucher value. This may include some small “corner shop” retailers. Under option 4, all those who did not wish to become part of the direct supply and delivery arrangements, or who were unsuccessful in winning the opportunity to be involved, would lose some business.

Engagement and involvement

Was this work subject to the requirements of the cross-government [Code of Practice on Consultation](#)? (Y/N)

How have you engaged stakeholders in gathering evidence or testing the evidence available?

We will be running a full public consultation, meeting with representatives of the dairy industry, and writing to all childcare providers registered with the scheme, both to encourage them to respond to the questionnaire, and to draw it to the attention of parents and to ask them to respond to a survey, exploring in some detail the way they interact with the scheme now and how potential changes would affect them.

How have you engaged stakeholders in testing the policy or programme proposals?

We have met with some of the milk suppliers currently involved in the scheme and also their trade association. Whilst we were not able to share material we were in discussion with Ministers about, we were able to ask for their views about how we could improve value for money in general and indeed sought ideas on this.

For each engagement activity, please state who was involved, how and when they were engaged, and the key outputs:

DH officials met with key staff from two specialist milk suppliers as well as Dairy UK.

Summary of Analysis *Considering the evidence and engagement activity you listed above, please summarise the impact of your work. Consider whether the evidence shows potential for differential impact, if so state whether adverse or positive and for which groups. How you will mitigate any negative impacts. How you will include certain protected groups in services or expand their participation in public life.*

Now consider and detail below how the proposals impact on elimination of discrimination, harassment and victimisation, advance the equality of opportunity and promote good relations between groups.

Eliminate discrimination, harassment and victimisation *Where there is evidence, address each protected characteristic (age, disability, gender, gender reassignment, pregnancy and maternity, race, religion or belief, sexual orientation).*

The response to the public consultation and survey of childcare providers will inform further development of the options for change to ensure that children aged under 5 in childcare settings continue to benefit from free milk.

Advance equality of opportunity *Where there is evidence, address each protected characteristic (age, disability, gender, gender reassignment, pregnancy and maternity, race, religion or belief, sexual orientation).*

See above

Promote good relations between groups *Where there is evidence, address each protected characteristic (age, disability, gender, gender reassignment, pregnancy and maternity, race, religion or belief, sexual orientation).*

See above

What is the overall impact? *Consider whether there are different levels of access experienced, needs or experiences, whether there are barriers to engagement, are there regional variations and what is the combined impact?*

The proposed options for change impact on the flexibility childcare providers have in purchasing milk and potentially on their ability to meet the individual needs of the children they care for.

Addressing the impact on equalities *Please give an outline of what broad action you or any other bodies are taking to address any inequalities identified through the evidence.*

Through the public consultation and the survey of childcare providers we hope to explore both the extent of these issues and the potential to adapt the proposed options to mitigate them.

Action planning for improvement *Please give an outline of the key actions based on any gaps, challenges and opportunities you have identified. Actions to improve the policy/programmes need to be summarised (An action plan template is appended for specific action planning). Include here any general action to address specific equality issues and data gaps that need to be addressed through consultation or further research.*

Please give an outline of your next steps based on the challenges and opportunities you have identified. *Include here any or all of the following, based on your assessment*

- *Plans already under way or in development to address the **challenges** and **priorities** identified.*
 - *Arrangements for continued engagement of stakeholders.*
 - *Arrangements for continued monitoring and evaluating the policy for its impact on different groups as the policy is implemented (or pilot activity progresses)*
 - *Arrangements for embedding findings of the assessment within the wider system, OGDs, other agencies, local service providers and regulatory bodies*
 - *Arrangements for publishing the assessment and ensuring relevant colleagues are informed of the results*
 - *Arrangements for making information accessible to staff, patients, service users and the public*
 - *Arrangements to make sure the assessment contributes to reviews of DH strategic equality objectives.*
- Full public consultation

- Survey of all childcare providers registered with the nursery milk scheme
- Meeting with representative bodies of childcare providers
- Meeting with dairy industry representatives
- Meeting with specialist milk suppliers (agents).

For the record

Name of person who carried out this assessment:

Jessamine Matheson

Date assessment completed:

24 November 2011

Name of responsible Director/Director General:

Liz Woodeson / David Harper

Date assessment was signed:

29 November 2011

Action plan template

Category	Actions	Target date	Person responsible and their Directorate
Involvement and consultation	<ul style="list-style-type: none"> • Full public consultation • Writing to all childcare providers currently registered with the scheme • Meeting with representative bodies of childcare providers • Meeting with dairy industry representatives • Meeting with specialist milk suppliers (agents) 	June 2012 to September 2012	Jessamine Matheson Health & Wellbeing
Data collection and evidencing	<ul style="list-style-type: none"> • Survey of all childcare providers currently registered with the scheme 	June 2012 to July 2012	Jessamine Matheson Health & Wellbeing
Analysis of evidence and assessment	<ul style="list-style-type: none"> • Analysis of responses to consultation and survey • Consider how best to ensure that the interests and needs of equality groups are represented within the modernised Nursery Milk Scheme 	July 2012 to November 2012	Peter Dick Health Improvement Jessamine Matheson Health & Wellbeing
Implementation	<ul style="list-style-type: none"> • Ensure that business partners within the scheme fulfil their obligations to provide equal application of the scheme to different population groups 	Ongoing	Jessamine Matheson Health & Wellbeing
Monitoring, evaluating and reviewing	<ul style="list-style-type: none"> • Ensure development of Public Health England's function around provision and analysis of information and intelligence in relation to children's nutrition includes consideration of evidence regarding equality groups 	Ongoing	Geoff Dessent Health & Wellbeing
Transparency (including publication)	<ul style="list-style-type: none"> • Publish consultation stage equality analysis • Publish updated equality analysis 	June 2012 November 2012	Jessamine Matheson Health & Wellbeing

