

Family Centres and Mentoring Recommission

Did you use the EIA Screening Tool?

Yes

1. Explaining the matter being assessed

Is this a:

- Change to a service or function
- A new service or function

Summarise the strategy, policy, service(s), or function(s) being assessed. Describe current status followed by any changes that stakeholders would experience.

Mentoring and Family Centres contracts and Service Level Agreements are due to end on the 31 March 2024 therefore to ensure continuity of provision new arrangements will need to be in place by 01 April 2024. The recommission provides an opportunity to enhance the strengths of the system while addressing any challenges.

The current commissioned provision in scope of the equality impact assessment (EIA) report:

- The county wide mentoring scheme commissioned offer is available Surrey wide and includes two voluntary sector lead providers who work in partnership with two additional voluntary sector partners to offer mentoring support to families that have children between 0-19yrs. These services can be self-referred into and do not require a referral from Surrey County Council's (SCC) Children's Single Point of Access (C-SPA). SCC currently have 11 contracts with providers to deliver this mentoring provision which are due to end on the 31 March 2024. Early Help mentoring providers have consistently supported more than the minimum numbers of families as set out in their contracts. Between 01 April 2022- 31 March 2023 mentoring services worked with 2,051 families. Case studies and service user feedback demonstrate the positive impact mentoring provision is having on Surrey's families. Between 01 April 2022- 31 March 2023, the most popular outcome families wanted to see an improvement in was "Your wellbeing", a total of 1,161 families identified this area with 980 reporting an improvement (84%).
- In Surrey there are 21 Family Centres and 9 satellite sites that work with families that have children aged between 0-11 years. This service provides one-to-one family support and group activities. Between 01 April 2022- 31 March 2023, Family Centres worked with 3,575 children and young people and on average 65% reported that their 'family needs (were) met'.

This EIA has been developed based on the recommended Early Help recommissioning model. The high-level key principles are:

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- There will be a 10% reduction in the overall budget for Family Centres and Early Help mentoring contracts equating to approximately £728,000.
- Taking a localised approach to recommissioning that helps to join up local services, resources and assets (such as buildings) in a partnership model co-ordinated within a District and Borough (D&B) area. Therefore, SCC will be aligning contracts to Surrey's 11 D&B geographical areas. There will be a lead provider working closely with and co-ordinating provision with D&B representatives, subcontracted providers and local services to deliver whole family one-to-one provision.
- To have a longer contract term to allow the new way of working to embed and to provide security to partners.
- Ensure resources are joined up in the most effective way to support children, young people and families. Closer working with D&Bs and sharing resources would be beneficial to residents as this would mean services are joined up to support family's needs. Through partnership working SCC want to collectively identify buildings in each of the D&Bs that could be used for multiple purposes. There will also be a drive to support partners to co-locate services wherever possible. This would help provide families with a joined up holistic approach between different types of Early Help provision. It would also support closer working between partners and provide the opportunity to share learning and expertise. Wider integration with existing provision will also take place to ensure families receive a more holistic offer.
- Whilst the utilisation of buildings to support families in their local area is important, SCC recognises the significance of retaining the outreach model for families so that support can be provided within the home.
- SCC wants to have an improved digital offer which builds on the Family Information Service and provides a more interactive self-serve functionality with resources for both professionals and families. Additionally, there is a drive to develop a greater social media presence. There will be an expectation for all commissioned partners to ensure their offer is clearly noted online so that young people and families can understand the services that are being delivered in their local area.
- SCC will review referral pathways to ensure they are streamlined and, in the future, will allow young people and families to self-refer into Early Help services. Currently some Early Help provision can only be accessed via a referral from SCC's C-SPA.
- The recommission will focus on whole family working that is underpinned by [The National Supporting Families Outcome Framework](#). This would mean that all recommissioned services would be aligned to the framework and have the 10 Supporting Families Outcomes:
 - Getting a good education
 - Good early years development
 - Improved mental and physical health
 - Promoting recovery and reducing harm from substance use
 - Improved family relationships
 - Children safe from abuse and exploitation

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- Crime prevention and tackling crime
 - Safe from domestic abuse
 - Secure housing
 - Financial stability
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- SCC and providers will capture and measure the impact of the newly commissioned services (from 01 April 2024) by using the DfE's 10 Supporting Families Outcomes, in conjunction with the use of Outcome Stars (My Star and Family Star Plus) across the commissioned services. Outcome Star is an evidence-based tool that measures progress in 10 areas of family life and is already used widely across the County. The use of this tool would enable services to measure the impact of their work and the progress families make.
 - Clear reporting requirements will also be developed so that a consistent reporting approach is taken across the county. There will be an expectation that providers regularly collect feedback including the voice of the child and families and demonstrate how learning is shaping the continuous improvement of services. This requirement will be part of ongoing contract management arrangements.
 - The removal of age criteria from services and instead services will work with the whole family 0-18yrs (up to 25yrs for people with additional needs). This approach will help services to wrap around families to meet their needs.
 - To develop with partners a recognised Early Help branding/quality standard that partners can sign up to. This will highlight to families that this is a safe space to access information, advice, services and provide assurance about a standardised and consistent offer. SCC heard throughout engagement activities that Early Help services need to be more visible therefore developing this approach would provide children, young people and families the opportunity to access information and support from a number of different settings such as schools and libraries etc.
 - Continue with a prototyping approach so that Surrey's Early Help System can respond to children, young people and family's needs.
 - Equality, Inclusion and Diversity principles will be a key feature throughout the recommissioning process and ongoing contract management to ensure services are accessible for all Surrey's residents.

An EIA is required as residents could be impacted by changes outlined in the new recommissioning approach. There is likely to be a difference in how residents are affected based on their protected characteristics, especially their age, sex, and if they are disabled.

The proposed changes are likely to impact the following stakeholders:

- The Early Help System including incumbent providers.
- Early Years Settings
- Targeted Youth Support
- Family Support Programme
- Children's Safeguarding teams
- Domestic Abuse services
- Corporate Parenting Commissioning

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- Fostering
- Health visitors
- Surrey's 11 Districts and Boroughs
- Libraries
- Land and Property
- Children's Community Health Services
- Emotional Wellbeing and Mental Health services
- Schools
- Charities and community groups across Surrey
- Police – Early Help services
- Adolescent Services

Changes are likely to impact the following residents:

- Residents with a child between 0-18 years (up to 25yrs for people with additional needs)
- Residents who are pregnant, or are considering having a child
- Residents who are 0-18 years old (or up to 25 if they have additional needs)
- Residents who support with the childcare of a young person aged between 0-18 year olds
- Residents who deliver Early Help provision
- Residents who are part of a charity or community group delivering Early Help provision
- Residents who provide Foster Care

The following evidence has been collected on the potential impact:

- 2021 Census Data
- Population projections
- Demographic data of current service users of the commissioned Early Help Offer
- Engagement and co-production events with children, young people, families and current providers
- Early Help and Family Resilience Needs Assessment 2023
- Children and young people with additional needs and disabilities Sufficiency Plan (2022 - 2030)
- Crime Survey in England and Wales 2022
- Children's Single Point of Access data
- Surrey Police Domestic Abuse Reporting
- Domestic Abuse Specialist Services data
- Ideas Alliance interviews and engagement with families

How does your service proposal support the outcomes in the Community Vision for Surrey 2030?

Specify which of the ten Vision outcomes this work is linked to.

- Children and young people are safe and feel safe and confident.
- Everyone benefits from education, skills and employment opportunities that help them succeed in life.
- Everyone lives healthy, active and fulfilling lives, and makes good choices about their wellbeing.
- Everyone gets the health and social care support and information they need at the right time and place.

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- Communities are welcoming and supportive, especially of those most in need, and people feel able to contribute to community life.

Are there any specific geographies in Surrey where this will make an impact?

- County-wide

2. Service Users / Residents

Who may be affected by this activity?

There are 9 protected characteristics (Equality Act 2010) to consider in your proposal. These are:

1. Age including younger and older people (school avoidance)
2. Disability
3. Gender reassignment
4. Pregnancy and maternity
5. Race including ethnic or national origins, colour or nationality
6. Religion or belief including lack of belief
7. Sex
8. Sexual orientation
9. Marriage/civil partnerships

Though not included in the Equality Act 2010, Surrey County Council recognises that there are other vulnerable groups which significantly contribute to inequality across the county and therefore they should also be considered within EIAs. If relevant, you will need to include information on the following vulnerable groups (Please **refer to the EIA guidance** if you are unclear as to what this is).

- Members/Ex members of armed forces
- Adult and young carers*
- Those experiencing digital exclusion*
- Those experiencing domestic abuse*
- Those with education/training (literacy) needs
- Those experiencing homelessness*
- Looked after children/Care leavers*
- Those living in rural/urban areas
- Those experiencing socioeconomic disadvantage*
- Out of work young people)*
- Adults with learning disabilities and/or autism*
- People with drug or alcohol use issues*
- People on probation
- People in prison
- Migrants, refugees, asylum seekers
- Sex workers
- Children with Special educational needs and disabilities*
- Adults with long term health conditions, disabilities (including SMI) and/or sensory impairment(s)*
- Older People in care homes*
- Gypsy, Roma and Traveller communities*
- Other (describe below)

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(*as identified in the Surrey COVID Community Impact Assessment and the Surrey Health and Well-being Strategy)

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Age

Describe here the considerations and concerns in relation to the programme/policy for the selected group.

The age group that is most likely to be affected by any changes are children and young people aged 0-18yrs (or 25 years old where they have additional needs).

The following data has been collected on the impact on this age group:

1. Census data
2. Population projections
3. Provider data on service users
4. Early Help and Family Resilience Needs Assessment

Findings from the 2021 Census data

Surrey has experienced a population decrease for children aged 4 and under (-8.0%), those aged 35-49 (-3.1%), and amongst those aged 60-64 (-0.7%) but an increase in all other age groups. Large percentage increases were seen in older populations: 34% growth in those aged 70-74, 18.2% growth in those aged 75-79, and 14.5% growth in those aged 80 and above.

Regarding Surrey's 0-25yrs population the following findings consist of:

- Children and adolescents saw modest increases although children aged 4 and under saw an 8% decrease to 65,600 people.
- Children aged 5-9yrs increased by 12.5% to 74,100
- Children aged 10-14 year olds increased by 13.2% to 76,500
- 15-19 year olds increased by 3.1% to 69,800
- 19-24 year olds increased by 3.2% to 63,500
- 5-9 and 10-14 year olds are the largest two cohorts for those under 25 and are also the age groups most likely to be accessing Early Help services.

Population projections

Figure 1 show's Surrey's population projections from 2020-2030. The key expected changes are:

- The number of 0–4-year-olds is anticipated to continue to decrease to 61,797 in 2030.
- The 5-9 age group is projected to decrease by an even larger amount falling to 66,359 in 2030.
- The number of 10–14-year-olds is predicted to increase to 80,000 in 2023 at which point will plateau and then begin to decline by 2025.
- In percentage terms this means by 2030 the population of 0–4-year-olds would have fallen by 9.1% compared to 2020, the population of 5–9-year-olds by 14.3% and 10–14-year-olds would have fallen by 4.6%. While the 15–19-year-old age group will have risen by 15.1% by 2030.

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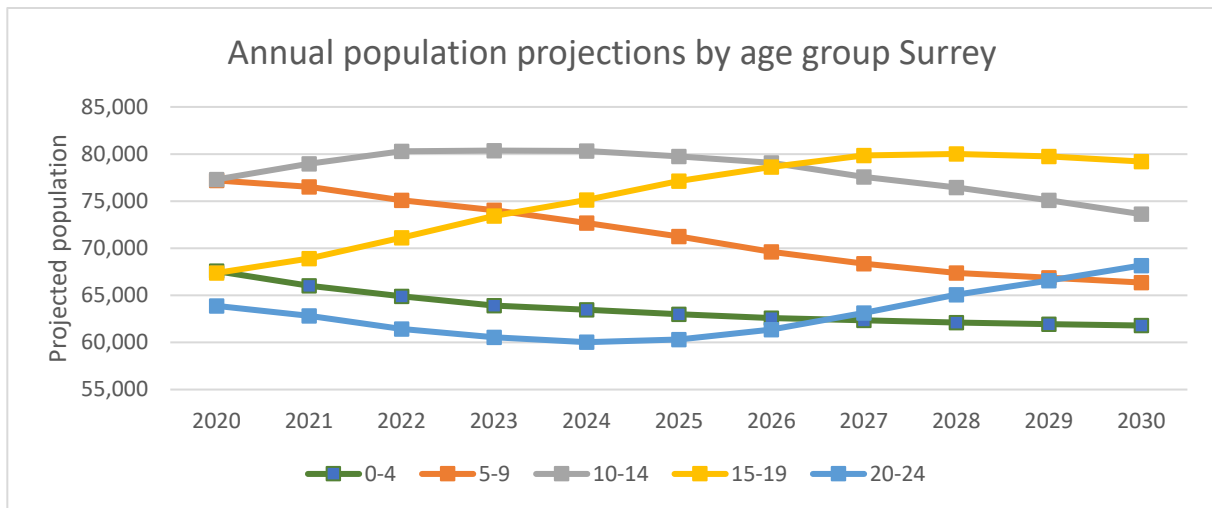


Figure 1 Surrey's population projections from 2020-2030

Provider data

Between January 2022 and December 2022, 3,694 children and young people aged 0-19 were supported by Early Help mentoring and Family Centres. 1,349 of these children and young people were aged 0-4, 1,589 were aged 5-10, and 756 were aged 11-19.

Provider data indicates that children aged 5-10yrs are less likely to access Early Help mentoring provision (14.7%) compared to 0-4yrs (35.6%) and 11-19yrs (49.6%). Between September 2021 and September 2022, 49% of children and young people supported by Family Centres were aged between 5-10 yrs., 35% between 0-4 yrs., 14% were aged 11-19 yrs., and under 1% were unborn. These findings suggest the 5-10yrs age group are not being identified as early as other age groups and their needs are escalating to Family Centre support. This could indicate that the current offer is not reaching the 5-10 years cohort of children.

In summary the age groups that are most likely to be impacted currently are children and young people aged 5-9 and 10-14 who are the largest cohorts of under 25s in Surrey and the main age ranges currently accessing Early Help services. The forecasted demographic changes anticipated to happen by 2030 suggest that this will shift with the age groups most effected by 2030 being 10-14 and 15-19, while 0-4 and 5-9 age cohorts in Surrey will be declining.

Data is not collected on the age of parents, carers, or the extended families working with services therefore the numbers on specific older age cohorts impacted by changes to the services are unknown.

Impact

It is anticipated that the negative impacts of the recommission for children and young people aged 0-18years (or 25 years old where they have additional needs) and for parents will consist of:

1. The possible reduction of mentoring services could result in some children and young people either waiting for provision or not being able to access this support. This could result in the needs of some families escalating due to limited access to lower levels of support.

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2. The possible reduction of mentoring provision could negatively impact other services such as Family Centres and the Family Support Programme which are typically at or near capacity most of the time.
3. The possible reduction in mentoring will also negatively impact the ability to step down children, young people and families from more intensive interventions and could result in families being worked with for a longer period. This could impact negatively on Family Centres, Family Support Programme and Targeted Youth Support capacity. Between January 2022 and December 2022, 250 young people were stepped down into mentoring services from Family Centres and the Family Support Programme.
4. If families are being held for longer by services as there is a reduction in step down provision this could result in families having to wait longer to access provision.
5. Family Centres could see their staffing levels reduced and this could result in a reduction in the level of support they provide for example, families receiving fewer visits and a reduction in hours of support. The group work part of the Family Centre offer could also be affected with a reduction in the length and number of sessions available. The exact numbers of families these changes could impact are unknown as data is not currently collected on the number of children and families accessing group work.
6. Family Centres and mentoring services were previously commissioned to support 0-19 years (up to 25 years for those who have additional needs) however services will now be commissioned to support 0-18 years (up to 25 years for those that have additional needs). This change is taking place as the legal definition of a young person in the UK is anyone under 18 and a child is anyone who has not yet reached the official minimum school leaving age.
7. Below are several positive impacts which are expected to take place through the simplification of services, delivery of services in community venues, and the development of shared Early Help branding. However, there is a risk with the reduction in budget and therefore capacity in the Early Help System of diminishing the positive impact these changes could bring about.

It is anticipated that the positive impacts of the recommission for children and young people aged 0-18yrs (up to 25 years for people with additional needs) and for parents will be:

1. A whole family one-to-one 0-18 years (up to 25 years for people with additional needs) offer enables early identification and support for the whole family. It will also help to encourage greater access to services for children aged 5–10years which is a gap identified in the current service. The Lead Providers will be responsible for all commissioned Family Centre and Family Resilience provision within a D&B area and ensuring children, young people and family's needs are met when accessing their provision.
2. Families that have multiple children across different age ranges are currently not consistently able to access a service which can work with the whole family. The proposed model will ensure families can routinely access support for the whole family and draw in partners with expertise to ensure a more holistic approach to supporting Surrey's families.
3. There will be a drive to support partners to co-locate services wherever possible which will ensure that children, young people and families can access provision in welcoming environments in their local communities. Co-location opportunities with partners such as libraries and health services could deliver provision in more versatile settings to help reduce the stigma people may feel when accessing support. The co-location of services may also help with supporting the early identification of children, young people and families who may require some extra support.

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4. The creation of the branding/quality standard will ensure that young people and families can easily identify safe spaces to access support.

Describe here suggested mitigations to inform the actions needed to reduce inequalities.

There are four actions which will maximise the positive impact of these changes:

1. The voice of the child, young people and families will continue to be captured throughout the life of the recommissioned contracts. This will take place via clear reporting requirements where there will be an expectation that providers regularly collect feedback including the voice of the child and families and demonstrate how learning is shaping the continuous improvement of services. This requirement will be part of ongoing contract management arrangements.
2. The development of co-location and whole family working will make it easier for families to access the right support at the right time. It will help reduce the need for families to retell their stories and help with the early identification of families that may need extra help.
3. Development of the branding/quality standard will highlight to families that this is a safe space to access information, advice, services and provide assurance about a standardised and consistent offer. SCC heard throughout engagement activities that Early Help services need to be more visible therefore developing this approach would provide children, young people and families the opportunity to access information and support from a number of different settings such as schools and libraries etc.
4. To be responsive to local needs and demands SCC will be regularly reviewing quantitative and qualitative data with partners to establish if children, young people and family's needs are being met. Contracts will allow for flexibility to meet local need, for instance the anticipated increase in adolescents may result in the need to provide additional support for this cohort.

There are four actions required to mitigate the negative impacts:

1. Providers will be expected to utilise Social Value and funding opportunities outside of contractual arrangements in addition to carrying out fundraising activities to help generate additional income to support and enhance service delivery.
2. Providers will also be expected to explore co-delivery opportunities with other services so that the costs of running group sessions for instance can be shared across partners.
3. Providers will be asked to explore the development of volunteering models as a cost-effective way of supporting children, young people and families.
4. It is anticipated that these mitigating actions will help however will not be sufficient to fully alleviate the negative impact of reducing the financial envelope for these services.

What other changes is the council planning/already in place that may affect the same groups of residents? Are there any dependencies decision makers need to be aware of?

The Parenting Programme which provides additional Early Help support for families in Spelthorne, Runnymede, Woking, Waverley, Guildford, Epsom and Ewell ended on 30th June 2023. This offer was for families that have children up to the age of 11 years who are considered: vulnerable (this would include those experiencing Domestic Abuse, addiction, or poor mental health), families that have a child(ren) in the first 1000 days or families that have a child(ren) with additional needs or disabilities. Families were supported either with 1-1 support, group work or through courses, depending on the family's needs. From September 2020 to end

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of March 2023, this provision has supported 1,044 families which is an average of 522 families a year.

Surrey County Council, Surrey Heartlands Integrated Care Board (ICB), Frimley ICB and NHS England are working together to recommission Children Community Health Services. This contract is also being recommissioned at the same time as the Family Centres and Family Resilience Contracts. The aim is to secure a model of care for Children's Community Health services across Surrey focused on preventing ill health, advising on children development, providing specialist medical support, nursing, immunisation and therapy services if required. This ties in closely with the early intervention principles outlined in Early Help.

Additionally, there is also the Transformation of Children's Health and Social Care which will be commencing soon. There is real ambition across the system to challenge the status quo and deliver better care and health services to more of Surrey's children and young people, and support for their families through revised models of service delivery into which commissioners may be prepared to invest. The programme is therefore intended to drive a more innovative approaches to children's care and health services, with a focus on genuine transformation to deliver services differently in ways that enable services to reach more children and young people sooner in the presentation of any problem and to lead to avoidance of the need to use acute / specialist / upper tier / higher tariff services.

Any negative impacts that cannot be mitigated?

Identify negative impacts that can't be mitigated and explain why, together with evidence.

None.

Disability

Describe here the considerations and concerns in relation to the programme/policy for the selected group.

Changes to Early Help services are anticipated to have a positive impact on children and young people with additional needs. The largest groups of those with a disability effected are anticipated to be children and young people who are Autistic, require Social Emotional Mental Health (SEMH) support, have special communication needs, speech and language needs or have a learning disability.

The following data has been used to assess the impact on those with a disability.

1. Children and Young People with additional needs and disabilities sufficiency plan (2022-30)
2. Provider data
3. Early Help and Family Resilience Needs Assessment 2023

Children and young people with additional needs and disabilities Sufficiency Plan (2022 - 2030)

As noted in the Sufficiency Plan, in March 2022 there were 196,697 children in Surrey Schools of which 27,241 had special educational support needs, and 12,015 who had an Education, Health, and Care Plan (EHCPs). There has been an increase across all

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categories of additional needs although young people with Autism support needs has increased the greatest and is the most common type of support needed.

Key data on EHCPs:

- On average, Surrey's EHCP growth has been 11% since 2016 – nearly one percentage point lower on average than its statistical neighbours.
- The east of Surrey has a greater proportion of EHCPs than the West
- Primary need distribution is relatively even; however, the Southeast and Southwest have a higher prevalence of Speech Language and Communication Needs
- The Northwest has a higher proportion of Autism plans
- The Southeast has a high proportion of plans for 20–25-year-olds (though across all ages the Southeast has generally higher proportions than other areas)
- The age range with the highest number of EHCPs in 2022 was 5-10 year olds with 4,181 EHCPs, followed by 11-15 year olds with 4,123 EHCPs, 16-19 year olds with 2,261 EHCPs, 20-25 year olds with 681 EHCPs and 0-4 with 501 EHCPs.
- The biggest percentage increase in EHCPs since 2016 was for young people aged 16-19 which saw a 56% increase, then 0-4 years with a 42% increase, 5-10 years with a 10% increase and 11-15 years with a 4% increase. A percentage increase can not be calculated for the 20-25 years cohort as there were 0 EHCPs for this age group in 2016.

Provider data on service users

Family Centres collect and report on the number of children and young people they work with who have a disability. However, they do not record the type of disability. Early Help mentoring services do not have reportable data on the number of families they support with a disability. It is important to note that none of the commissioned Early Help services collect reportable data on any disabilities that parents or carers have.

Out of 2,932 children and young people supported by Family Centres 258 (9%) had a disability between January 2022 and December 2022. Anecdotally, in quarterly and annual performance conversations providers have highlighted that the main disabilities young people present with are learning disabilities, Autism, and poor mental health.

Impact

It is anticipated that the negative impacts of the recommission for those with a disability will be:

1. Early Help mentoring services work with schools and support Team Around the Family Meetings which help ensure children and young people with additional needs can receive the support they need both at home and at school. A reduction in funding could impact providers capacity to support these meetings and may lead to lower school attendance rates, needs escalating, a possible increase of EHCPs, children moving schools or an increase of children and young people becoming electively home educated. The exact number of children and young people who have a disability that would be negatively impacted is unknown as data is not currently collected across Early Help commissioned services in a reportable format.
2. Family Centres could see their staffing levels reduced and this could result in a reduction in the level of support they provide for example, families receiving fewer visits and a reduction in hours of support. The group work part of the Family Centre offer could also be affected with a reduction in the length and number of sessions available. The exact numbers of families these changes could impact are unknown as data is not currently

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collected on the number of children and families accessing group work. Children with additional needs are more likely to need extra help and therefore could be disproportionately affected by these changes.

3. The Family Centres capacity to offer group work sessions could also be negatively impacted and may lead to the reduction in the length and frequency of sessions available. Group work sessions are provided for families that have children with Additional Needs and Disabilities these sessions include: play sessions, drop-in sessions offered by the National Autistic Society, and peer support for parents of children with additional needs. The exact numbers this would impact are not known as data is not currently collected on the number of children or families accessing group work.
4. Below are several positive impacts which are expected to take place through the simplification of services, delivery of services in community venues, and the development of shared Early Help branding. However, there is a risk with the reduction in budget and therefore capacity in the Early Help System of diminishing the positive impacts these changes could bring about.

The planned changes are expected to have a positive impact on those with a disability in the following ways:

1. The creation of a single Early Help lead provider for each D&B will help make services simpler to navigate especially for families who have multiple children with additional needs.
2. The development of co-delivery with a focus on greater co-location of services including health and universal provision will support with the early identification of disabilities. This will help to ensure the right support is provided as soon as possible.
3. Co-location will also make it easier and simpler for families to access services by reducing the need to travel to different locations for different services their child(ren) might need. This will be especially true for large families or those families with children with additional needs who are receiving support from different partners.
4. The development of community delivery and the use of a wide range of venues will ensure that those with disabilities are able to access in-person provision. The impact of this will depend on the availability of different community venues, what kind of venues are available, and providers making links with partners who can offer space within those venues.
5. A focus on 'in-person' delivery at community venues could have a negative impact on those who find it harder to travel, or who are not able to access buildings. This negative impact will be mitigated through the retention of an outreach model where families will have the option to meet Family Support Workers in their home, school or other appropriate location local to them. There could also be an online offer including virtual courses for those who are unable to attend in-person sessions. Some Family Centres already provide online services however this is not a consistently delivered offer across Surrey.

Describe here suggested mitigations to inform the actions needed to reduce inequalities.

How will you maximise positive/minimise negative impacts (actions to mitigate or enhance impacts)? When will this be implemented by? Who is responsible for this? Include additional details in the "Actions & Decisions Tracker" (Section 5) and refer to the relevant item here.

1. Lead providers will work with local services and community groups to set up delivery in community venues including libraries, community centres and other appropriate locations. They will be responsible for engaging with local families to ensure that community venues are appropriate to meet the needs of their families including those

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with disabilities. The Family Resilience Commissioning Team and Operational Team will be responsible for monitoring this through performance management meetings with providers.

2. Providers will be expected to utilise Social Value and funding opportunities outside of contractual arrangements in addition to carrying out fundraising activities to help generate additional income to support and enhance service delivery.
3. Providers will also be expected to explore co-delivery opportunities with other services so that the costs of running group sessions can be shared across partners.
4. Providers will be asked to explore the development of volunteering models as a cost-effective way of supporting children, young people and families.
5. It is anticipated that these mitigating actions will help however will not be sufficient to fully alleviate the negative impact of reducing the financial envelope for these services.

What other changes is the council planning/already in place that may affect the same groups of residents? Are there any dependencies decision makers need to be aware of?

If so, please detail your awareness of whether this will exacerbate impacts for those with protected characteristics and the mitigating actions that will be taken to limit the cumulative impacts of these changes.

The Parenting Programme which provides additional Early Help support for families in Spelthorne, Runnymede, Woking, Waverley, Guildford, Epsom and Ewell ended on 30th June 2023. This offer was for families that have children up to the age of 11 years who are considered: vulnerable (this would include those experiencing Domestic Abuse, addiction, or poor mental health), families that have a child(ren) in the first 1000 days or families that have a child(ren) with additional needs or disabilities. Families were supported either with 1-1 support, group work or through courses, depending on the family's needs. From September 2020 to end of March 2023, this provision has supported 1,044 families which is an average of 522 families a year.

Surrey County Council, Surrey Heartlands Integrated Care Board (ICB), Frimley ICB and NHS England are working together to recommission Children Community Health Services. This contract is also being recommissioned at the same time as the Family Centres and Family Resilience Contracts. The aim is to secure a model of care for Children's Community Health services across Surrey focused on preventing ill health, advising on children development, providing specialist medical support, nursing, immunisation and therapy services if required. This ties in closely with the early intervention principles outlined in Early Help.

Additionally, there is also the Transformation of Children's Health and Social Care which will be commencing soon. There is real ambition across the system to challenge the status quo and deliver better care and health services to more of Surrey's children and young people, and support for their families through revised models of service delivery into which commissioners may be prepared to invest. The programme is therefore intended to drive a more innovative approaches to children's care and health services, with a focus on genuine transformation to deliver services differently in ways that enable services to reach more children and young people sooner in the presentation of any problem and to lead to avoidance of the need to use acute / specialist / upper tier / higher tariff services.

Any negative impacts that cannot be mitigated?

Identify negative impacts that can't be mitigated and explain why, together with evidence.

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None.

Pregnancy and Maternity

Describe here the considerations and concerns in relation to the programme/policy for the selected group.

The following data has been used to assess the impact on pregnancy and maternity.

1. 2021 Census Data
2. Provider data on service users

Census data

The 2021 census provides data on the age of individuals in households in 5 year age cohorts such as 0-4, 5-10. This cannot be used to determine the number of pregnant people or person in the maternity period in Surrey, however it is possible to see the birth rate trends which in turn indicates the number of people with this protected characteristic.

In Surrey there has been an 8% decrease in 0-4 year olds since 2011. However, those aged 5-9 have increased by 12.5% since 2011 which suggests this decrease in the 0-4 years took place four years before the 2021 census.

Provider data

While data is not collected in a reportable way for parents/carers accessing Family Centres it is possible to run reports on the number of children supported who were unborn, or under 1 years old. The mothers of these children will have the protected characteristic of maternity or pregnancy. The number of children unborn or under 1 years old will not be an exact match to the number of mothers with this protected characteristic as some mothers working with the service will have more than 1 child who is unborn or under 1 years old. The number of children as such will be higher than of mothers who are pregnant or in the maternity period.

Early Help services records children's ages in cohorts and therefore it is not possible to calculate the exact number of children that were unborn or under the age of 1 years old. However, between January 2022 and December 2022 Family Centres supported 279 children who were unborn or under 1 years old.

Impact

It is anticipated that the negative impacts of the recommission for those who are pregnant or in the maternity period will be:

1. Engagement with families showed that connection and peer support were considered important especially to new or expectant mothers as a way of feeling connected with others going through similar experiences. The reduced Early Help commissioned capacity could negatively impact on service delivery and facilitating connections and peer groups for those who are pregnant or in the maternity period.
2. The group work part of the Family Centre offer also is likely to be negatively affected with a reduction in the length and number of sessions available. The exact number of people this would impact are unknown as data is not currently collected on the number of

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children or families accessing group work. Several group sessions are aimed at those who are pregnant or new parents, this includes sessions run by Health Services in Family Centre buildings. There is likely to be an impact specifically on new parents and those who are pregnant if these group sessions are reduced or are no longer facilitated at Family Centres.

3. Below are several positive impacts which are expected to take place through the simplification of services, delivery of services in community venues, and the development of shared Early Help branding. However, there is a risk with the reduction in budget and therefore capacity in the Early Help System of diminishing the positive impact these changes could bring about.

Greater co-delivery and co-location with Health Services such as Midwifery and Health Visiting teams will have a number of positive impacts:

- Families who are identified by Health Visiting teams who would benefit from extra support can be provided with warm handovers to Early Help services in the same building which will reduce parental anxiety related to engaging with Early Help services.
- There will be a wider variety of venues offering services such as baby weighing in family friendly environments making it easier for new parents to access these services..

Describe here suggested mitigations to inform the actions needed to reduce inequalities.

How will you maximise positive/minimise negative impacts (actions to mitigate or enhance impacts)? When will this be implemented by? Who is responsible for this? Include additional details in the “Actions & Decisions Tracker” (Section 5) and refer to the relevant item here.

1. Positive impacts will be reliant on the Lead Providers in each D&B area building relationships with local teams and arranging co-delivery of services. Their progress in achieving these actions will be supported and monitored by the Family Resilience Commissioning Team and Operational Team through quarterly performance management meetings.
2. Providers will be expected to utilise Social Value and funding opportunities outside of contractual arrangements in addition to carrying out fundraising activities to help generate additional income to support and enhance service delivery.
3. Providers will also be expected to explore co-delivery opportunities with other services so that the costs of running group sessions can be shared across partners.
4. Providers will be asked to explore and develop volunteering models as a cost-effective way of supporting children, young people and families.
5. It is anticipated that these mitigating actions will help however will not be sufficient to fully alleviate the negative impact of reducing the financial envelope for these services.

What other changes is the council planning/already in place that may affect the same groups of residents? Are there any dependencies decision makers need to be aware of?

If so, please detail your awareness of whether this will exacerbate impacts for those with protected characteristics and the mitigating actions that will be taken to limit the cumulative impacts of these changes.

The Parenting Programme which provides additional Early Help support for families in Spelthorne, Runnymede, Woking, Waverley, Guildford, Epsom and Ewell ended on 30th June 2023. This offer was for families that have children up to the age of 11 years who are

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considered: vulnerable (this would include those experiencing Domestic Abuse, addiction, or poor mental health), families that have a child(ren) in the first 1000 days or families that have a child(ren) with additional needs or disabilities. Families were supported either with 1-1 support, group work or through courses, depending on the family's needs. From September 2020 to end of March 2023, this provision has supported 1,044 families which is an average of 522 families a year.

Any negative impacts that cannot be mitigated?

Identify negative impacts that can't be mitigated and explain why, together with evidence.

None

Those Experiencing Domestic Abuse

Describe here the considerations and concerns in relation to the programme/policy for the selected group.

The following data has been used to assess the impact on those experiencing Domestic Abuse:

1. Crime Survey in England and Wales 2022
2. Children's Single Point of Access
3. Surrey Police Domestic Abuse Reporting
4. Domestic Abuse Specialist Services data

Crime Survey in England and Wales 2022

The Crime Survey for England and Wales stopped asking about Domestic Abuse (DA) during covid and restarted in the final six months of the year ending March 2022. When comparing this survey's findings with the previous year's survey ending March 2020 it showed no significant change in the prevalence of DA. The estimated prevalence of DA in England and Wales for 2022 was 5% of adults over 16 years (2.4 million) had experience DA in the last year. This is approximately 5 in 100 adults, if this applies to Surrey this would represent 53,000 adults a year.

Children's Single Point of Access

Between January 2022 and December 2022 there were 4,224 requests for support where DA was identified.

Surrey Police Domestic Abuse Reporting

Surrey Police compile and share data on the number of recorded DA incidents and DA crimes. Between January 2022 and December 2022 there were 2,654 DA incidents which was slightly higher than the previous two years. In the same period there were 8,135 DA crimes reported which was slightly lower than the previous 2 years.

Domestic Abuse Specialist Services Data

Specialist services in Surrey report on the number of contacts to the countywide helpline and online webchat; there were 4,541 of these contacts between January 2022 and December 2022.

Impact

It is anticipated that the negative impacts of the recommission on survivors of Domestic Abuse will be:

1. Survivors of Domestic Abuse and their children often have long term trauma and support needs even after the abuse has stopped. This longer-term support is often provided by Early Help provision such as mentoring services who can provide longer term lower-level support through the appropriate and considerate matching of volunteers.
2. Survivors of Domestic Abuse are often supported by Family Centres through both group and one-to-one work. A reduction in this offer could see DA survivors (adults and their children) experience longer periods of time before accessing services, a reduction in the

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length and frequency of sessions and support available. DA survivors require highly flexible provision and in some instances may require a separate worker to be involved where the perpetrator also has parental responsibility for their child(ren) to ensure that the survivor and their children remain safe. Possible reductions in staffing could make it harder for survivors and their children to access and receive support.

3. Below are several positive impacts which are expected to take place through the simplification of services, delivery of services in community venues, and the development of shared Early Help branding. However, there is a risk with the reduction in budget and therefore capacity in the Early Help System of diminishing the positive impact these changes could bring about.

The impact for survivors of DA is anticipated to be positive in the following ways:

1. Specialist DA workers will sit in the Children's Single Point of Access (C-SPA) and within teams across the Early Help System to help ensure survivors accessing Early Help are identified earlier and able to receive the support they need.
2. Specialist DA workers will support teams in how to capture the voice of the child who are victims of DA to ensure they get the support they need.

Describe here suggested mitigations to inform the actions needed to reduce inequalities.

How will you maximise positive/minimise negative impacts (actions to mitigate or enhance impacts)? When will this be implemented by? Who is responsible for this? Include additional details in the "Actions & Decisions Tracker" (Section 5) and refer to the relevant item here.

1. The Domestic Abuse recommission will include a requirement for some DA workers to co-locate with Early Help services to ensure that the positive impacts described above are achieved.
2. Providers will be expected to utilise Social Value and funding opportunities outside of contractual arrangements in addition to carrying out fundraising activities to help generate additional income to support and enhance service delivery.
3. Providers will also be expected to explore co-delivery opportunities with other services so that the costs of running group sessions can be shared across partners.
4. Providers will be asked to explore the development of volunteering models as a cost-effective way of supporting children, young people and families.
5. It is anticipated that these mitigating actions will help however will not be sufficient to fully alleviate the negative impact of reducing the financial envelope for these services.

What other changes is the council planning/already in place that may affect the same groups of residents? Are there any dependencies decision makers need to be aware of?

If so, please detail your awareness of whether this will exacerbate impacts for those with protected characteristics and the mitigating actions that will be taken to limit the cumulative impacts of these changes.

Domestic Abuse Services are being recommissioned at the same time as the Family Centre and Family Resilience Services, and this will provide an opportunity to align these contracts. Greater synergy of these contract should have a positive impact for survivors of DA and their children.

The Parenting Programme which provides additional Early Help support for families in Spelthorne, Runnymede, Woking, Waverley, Guildford, Epsom and Ewell ended on 30th June 2023. This offer was for families that have children up to the age of 11 years who are considered: vulnerable (this would include those experiencing Domestic Abuse, addiction, or

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poor mental health), families that have a child(ren) in the first 1000 days or families that have a child(ren) with additional needs or disabilities. Families were supported either with 1-1 support, group work or through courses, depending on the family's needs. From September 2020 to end of March 2023, this provision has supported 1,044 families which is an average of 522 families a year.

Any negative impacts that cannot be mitigated?

Identify negative impacts that can't be mitigated and explain why, together with evidence.

None

Ethnicity and National Origins

Describe here the considerations and concerns in relation to the programme/policy for the selected group.

The following data has been used to assess the impact on race, ethnicity and nationality.

1. 2021 Census Data
2. Family Centre Referral data
3. Surrey County Council Research Data
4. Early Help and Family Resilience Needs Assessment 2023

2021 Census Data

Census records between 2011 and 2021 show that Surrey is becoming more ethnically diverse. Between 2011 and 2021 the Asian population increased from 5.6% to 7.7%, the black population increased from 1.1% to 1.7% and residents with mixed or multiple ethnicities increased by 1.3%. 76.6% of people identified as White British, 8.9% as White Other, 7.7% as Asian, 3.4% as Mixed or Multiple, and 1.7% as Black. Since 2011 all ethnic groups other than White British have increased.

In 2021, 17.9% of Surrey residents were born outside of the UK. This is a 26% increase since 2011. The most prevalent countries of birth outside the UK for residents in Surrey include India, South Africa and Poland. Every 9 in 10 Surrey residents reported their national identity as UK-based with over half specifying that their national identity is British. Nonetheless, 8.5% of Surrey residents conform to a non-UK identity and a further 2.5% report another identity alongside a UK-based identity.

Early Help and Family Resilience Needs Assessment 2023

- Data on protected characteristics such as ethnicity or gender is not consistently recorded throughout Early Help Mentoring and Family Centre services.
- In 2020/21 the national average percentage of deliveries to mothers from ethnic backgrounds was higher than the rate in Surrey. However, Surrey does have a higher rate than the regional average which is 14.7% compared to Surrey's 15.8%.
- There is a need for greater collection of demographical information to better understand gaps and inform understanding of the impact and success of Early Help services for different ethnic group backgrounds.

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- The Early Intervention Foundation conducted research on the experience of minority ethnic families accessing early help services which has four key recommendations.

These were:

- All services working with children and families must embed effective approaches to eradicate racist and discriminatory practices.
- Local areas must make the idea of 'no wrong door' a reality for minority ethnic children and families who reach out for help.
- Family support services must be designed to better respond to the needs of minority ethnic families.
- Workforce planning in relation to Early Help and Family Support services must include a focus on the skills needed to build trusting relationships with minority ethnic families.
- According to UNICEF a good start to life is pivotal for all children as it has a monumental impact on their future development, growth, and health. Those children most at risk include children from low socio-economic backgrounds, children with additional needs, looked after children and children from some black and minority ethnic groups.

Surrey County Council Research Data

Data has indicated that the ethnicity of children, young people and families working with Family Centres and the Family Support Programme could impact on their outcomes. For example, data suggests that children and young people aged 11 to 19 from African, Caribbean, mixed or black backgrounds have a 25% chance of stepping up into Children Services when accessing Family Centres or the Family Support Programme. This is disproportionately higher than the county average of 14% for this age group.

Family Centres

Family Centre data indicates that over 71% of children, young people and families accessing services in Surrey are from a white background. According to data from Family Centres between January 2022- December 2022:

- There were 236 referrals for children and young people from a mixed or multiple ethnic background. This number is larger than the number of referrals for any other minoritised ethnicity.
- The next most common groups referred to Family Centres are children and young people with Asian or Asian British heritage (182 referrals).
- 83 children and young people recorded their ethnicity as Black, Black British, Caribbean or African.

There is a prominent gap in Family Centres data regarding ethnicity as the statistics show an inconsistent recording or delayed reporting which means that the numbers mentioned above could be higher. For example, 70 of the referrals did not have their ethnicity recorded and 197 referrals were categorised under 'information yet not obtained'.

Impact

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It is anticipated that the negative impacts of the recommission on those from ethnically diverse backgrounds will be:

1. The reduction of mentoring services could result in children, young people and families from minoritised backgrounds who have lower levels of need either waiting for provision or not being able to access this support. This could result in the needs of some families escalating due to limited access to mentoring support.
2. Family Centres could see their staffing levels reduced and this could result in a reduction in the level of support they provide for example, families receiving fewer visits and a reduction in hours of support. The group work part of the Family Centre offer could also be affected with a reduction in the length and number of sessions available. The exact numbers of families these changes could impact are unknown as data is not currently collected on the number of children and families accessing group work.
3. Below are several positive impacts which are expected to take place through the simplification of services, delivery of services in community venues, and the development of shared Early Help branding. However, there is a risk with the reduction in budget and therefore capacity in the Early Help System of diminishing the positive impact these changes could bring about.

The positive impact on those from ethnically diverse backgrounds is anticipated to be:

1. SCC will place an enhanced focus on providers recording data relating to ethnic and national backgrounds.
2. There will be the utilisation of community assets where residents and families from all ethnicities including minority communities will be able to access services to meet their specific needs.
3. Providers will be expected to provide inclusive services that can support children, young people and families from different ethnic backgrounds.
4. Providers will be asked to work with partners within the community to identify buildings that could be used to reach remote communities or groups e.g. Gypsy, Roma and Traveller (GRT) communities.
5. A localised approach will provide an opportunity to have a unique offer catering to the specific blend of communities in each D&B.
6. Equality, Diversity and Inclusion training and policies will be expected from providers to address any prejudice or professional bias.

Describe here suggested mitigations to inform the actions needed to reduce inequalities.

1. Race and ethnicity data is not consistently recorded and this needs to improve as it can be difficult to establish if minority ethnic groups are engaging with services and what their experiences of these services are. To rectify this problem there will be a renewed effort to ensure providers record race and ethnicity. Data recording will be routinely reviewed and discussed with providers through quarterly contract management meetings.
2. A key theme that was highlighted throughout SCC's engagement activities with children, young people, families and partners was the importance of trust and meeting families where they are comfortable. It is important that partners develop good relationships with families including those from ethnic minority communities. Providers should be trained and confident in working with families from a diverse range of backgrounds. There could be greater engagement if providers worked in partnership with representatives from different community groups.

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3. The place-based approach and commitment to utilising buildings across the county identified by a lead provider in each borough would also help reach ethnic minority communities that are located away from Family Centres or council run buildings. Increasing the opportunity of engaging with remote communities through the utilisation of community assets like mosques, gurdwaras and churches could help encourage families to access support. Additionally, communities might feel more comfortable meeting in more familiar surroundings.
4. Providers will be expected to utilise Social Value and funding opportunities outside of contractual arrangements in addition to carrying out fundraising activities to help generate additional income to support and enhance service delivery.
5. Providers will be asked to explore the development of volunteering models as a cost-effective way of supporting children, young people and families.
6. Providers will also be expected to explore co-delivery opportunities with other services so that the costs of running group sessions for instance can be shared across partners.
7. It is anticipated that these mitigating actions will help however will not be sufficient to fully alleviate the negative impact of reducing the financial envelope for these services.

What other changes is the council planning/already in place that may affect the same groups of residents? Are there any dependencies decision makers need to be aware of?

The Parenting Programme which provides additional Early Help support for families in Spelthorne, Runnymede, Woking, Waverley, Guildford, Epsom and Ewell ended on 30th June 2023. This offer was for families that have children up to the age of 11 years who are considered: vulnerable (this would include those experiencing Domestic Abuse, addiction, or poor mental health), families that have a child(ren) in the first 1000 days or families that have a child(ren) with additional needs or disabilities. Families were supported either with 1-1 support, group work or through courses, depending on the family's needs. From September 2020 to end of March 2023, this provision has supported 1,044 families which is an average of 522 families a year.

Any negative impacts that cannot be mitigated?

Identify negative impacts that can't be mitigated and explain why, together with evidence.

None

Religion or Belief

Describe here the considerations and concerns in relation to the programme/policy for the selected group.

The 2021 Census Data has been used to assess the impact on religion or beliefs.

2021 Census Data

In Surrey the largest religious group was Christianity comprising of 50.2% of the population in 2021. This is a decrease since the 2011 census which recorded that 62.8% of Surrey's population was Christian. A possible reason for this reduction could have been driven by the

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number of people who reported having 'no religion'. This group increased from 24.8% of the population in 2011 to 36.3% in 2021 accounting for 440,069 residents.

Surrey is home to many non-Christian religious groups. The main ones include Muslims (38,138 residents), Hindus (23,742), Sikhs (7,144), Buddhists (6,990) and Jews (3,099). This means Muslims represent 3.2% of Surrey residents, Hindus represent 2%, and the other non-Christian religious groups are all under 1%.

Impact

It is anticipated that the positive impacts of the recommission on those with different religions and beliefs will be:

1. Faith-based buildings like mosques and churches could be utilised for work with local communities increasing the awareness and access to Early Help services.

Describe here suggested mitigations to inform the actions needed to reduce inequalities.

1. There is a data gap in reporting the religion of children, young people and families. It is important that this is rectified as religious principles and cultural practices can impact on an individual's decision making and behaviour. To rectify this problem there will be a renewed effort to ensure providers record children, young people and family's religion. Data recording will be routinely reviewed and discussed with providers through quarterly contract management meetings.
2. Another action which will help people from various religious backgrounds is the emphasis on the place-based approach. Utilising religious buildings and institutions will be a key step to help ensure services are visibly available for all communities.
3. Providers will be expected to utilise Social Value and funding opportunities outside of contractual arrangements in addition to carrying out fundraising activities to help generate additional income to support and enhance service delivery.
4. Providers will also be expected to explore co-delivery opportunities with other services so that the costs of running group sessions for instance can be shared across partners.
5. Providers will be asked to explore the development of volunteering models as a cost-effective way of supporting children, young people and families.
6. It is anticipated that these mitigating actions will help however will not be sufficient to fully alleviate the negative impact of reducing the financial envelope for these services.

What other changes is the council planning/already in place that may affect the same groups of residents? Are there any dependencies decision makers need to be aware of?

The Parenting Programme which provides additional Early Help support for families in Spelthorne, Runnymede, Woking, Waverley, Guildford, Epsom and Ewell ended on 30th June 2023. This offer was for families that have children up to the age of 11 years who are considered: vulnerable (this would include those experiencing Domestic Abuse, addiction, or poor mental health), families that have a child(ren) in the first 1000 days or families that have a child(ren) with additional needs or disabilities. Families were supported either with 1-1 support, group work or through courses, depending on the family's needs. From September 2020 to end of March 2023, this provision has supported 1,044 families which is an average of 522 families a year.

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Any negative impacts that cannot be mitigated?

Identify negative impacts that can't be mitigated and explain why, together with evidence.

None

Sex and Gender

Describe here the considerations and concerns in relation to the programme/policy for the selected group.

The following data has been used to assess the impact on sex and gender.

1. 2021 census data
2. Early Help Mentoring and Family Centres data
3. Office for National Statistics

2021 Census

Out of the total residents in Surrey 94.42% indicated that their gender identity was the same as their sex registered at birth. However, 0.37% or 3,628 residents stated their gender identity was not the same as their sex registered at birth. Within Surrey, 731 residents identify as a trans man, 756 identify as a trans woman and 495 identify as non-binary.

Office for National Statistics (ONS)

The [Office for National Statistics](#) provides an insight into the amount of childcare and household work carried out by different genders. The statistics showcase a clear discrepancy as women spend more time taking care of children. For example, in March 2022, employed women with dependent children spent more time on unpaid childcare (an average of 85 minutes per day) and household work (an average of 167 minutes per day) than employed men with dependent children (56 and 102 minutes per day, respectively). Based on ONS data this suggests that women more so than men who typically spend more time caring for children could be impacted by changes to services. However, the specific impact for individuals will be the same whether they are men or women.

Mentoring and Family Centres

Mentoring services do not report on the sex or gender of those they work with. Family Centres routinely report the sex of children and young people accessing their services, however there is no data collection on the parents/carers. This is due to technical limitations of the current case management system which does not allow reports to be run on parents. Data is also not collected on the gender identified of young people or parents and as such it is not known how many young people identify as being trans, non-binary, cis, or other gender identities. Between January 2022 and December 2022 Family Centres supported 2,932 children and young people, 45% were female and 55% were male. It shows a relatively even split between the sex of children and young people, with slightly more being male than female.

Office for National Statistics

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The office for national statistics provides an insight into the amount of childcare and household work carried out by different genders. The statistics showcase a clear discrepancy as women spend more time taking care of children. For example, in March 2022, employed women with dependent children spent more time on unpaid childcare (an average of 85 minutes per day) and household work (an average of 167 minutes per day) than employed men with dependent children (56 and 102 minutes per day, respectively). This suggests that more women than men will be impacted by changes to Early Help services although the specific impact for individuals will be the same whether they are men or women.

Impact

It is anticipated that the negative impacts of the recommission will be:

1. The reduction of mentoring services could result in children, young people and families that have lower levels of need either waiting for provision or not being able to access this support. This could result in the needs of some families escalating due to limited access to mentoring support. Furthermore, it is expected that more women than men will be impacted as women are more likely to be the main care giver to their children.
2. Family Centres could see their staffing levels reduced and this could result in a reduction in the level of support they provide for example, families receiving fewer visits and a reduction in hours of support. The group work part of the Family Centre offer could also be affected with a reduction in the length and number of sessions available. The exact numbers of families these changes could impact are unknown as data is not currently collected on the number of children and families accessing group work. Changes are expected to impact more women than men as women are more likely to be the main care giver to their children.
3. Below are several positive impacts which are expected to take place through the simplification of services, delivery of services in community venues, and the development of shared Early Help branding. However, there is a risk with the reduction in budget and therefore capacity in the Early Help System of diminishing the positive impact these changes could bring about.

It is anticipated that the positive impacts of recommission will be:

1. The Early Help offer will simplify the process for accessing services which will support parents accessing the offer.
2. The place-based approach can also help with identifying key individuals with greater knowledge of what can be done to enhance the offer for minority genders.
3. Utilising community assets will make services more accessible for working parents or guardians that may not have time to travel long distances to access provision.

Describe here suggested mitigations to inform the actions needed to reduce inequalities.

1. There is a gap in data recording relating to gender and sexes of the parents or carers of children and young people. This data is not consistently recorded by Family Centres or mentoring services. It is difficult to establish whether parents or carers from trans or non-binary identities engage with services. As part of the recommission there will be a drive in the reporting requirements to collect information relating to protected characteristics. This will help identify if there are any communities not receiving Early Help services. Adding this data reporting requirement would help ensure that this is a focus on providing a welcoming and inclusive offer for all communities including minoritised genders.

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2. Providers will be expected to deliver inclusive services accessible to children, young people and parents from trans, non-binary and other gender identities differing from the sex they were assigned at birth.
3. Providers will be expected to utilise Social Value and funding opportunities outside of contractual arrangements in addition to carrying out fundraising activities to help generate additional income to support and enhance service delivery.
4. Providers will also be expected to explore co-delivery opportunities with other services so that the costs of running group sessions for instance can be shared across partners.
5. Providers will be asked to explore the development of volunteering models as a cost-effective way of supporting children, young people and families.
6. It is anticipated that these mitigating actions will help however will not be sufficient to fully alleviate the negative impact of reducing the financial envelope for these services.

What other changes is the council planning/already in place that may affect the same groups of residents? Are there any dependencies decision makers need to be aware of?

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3. Staff

The table below notes the following protected characteristics that have been considered as part of this EIA on the possible impact changes could have on staff. It is important to note that SCC does not hold, capture or ask providers to share information on their workforce or on their protected characteristics.

Eight of the Family Centres in Surrey are run by Surrey maintained schools, with one of those Family Centres being brought in-house currently due to the school becoming an academy. Staff across these eight family centres are included as SCC staff and as such are considered within the assessment.

SCC will be collecting confidential TUPE information as part of the recommissioning process and SCC will then know the exact number of people and their age that could be impacted. However, most of the information collected as part of TUPE will not consist of the protected characteristics information noted in the below table.

Sex and Gender	<p>It is believed that the majority of staff working in these settings are women and as such while the impact is expected to be the same across all members of staff it will likely impact a higher number of women than men. The gender of workers will be collected via TUPE.</p> <p>SCC does not hold information on staff or providers workforce regarding their gender identity and whether it is the same as their sex registered at birth. Therefore, SCC are unable to quantify the number of people the changes in service provision could impact.</p>
Age	<p>The age of workers will be collected via TUPE. When fully staffed Family Centres have 44 full time equivalent members of staff therefore, these changes are likely to impact at least 44 people.</p>
Disability	<p>Staff have a choice on whether they disclose their disability and information relating to the number of SCC staff and providers workforce that have a disability are unknown. 2021 Census data states: "In 2021, across both England and Wales, the proportion of disabled people was 17.8% (10.4 million)." Therefore, it is likely that some disabled staff could be impacted by changes.</p>
Pregnancy and Maternity	<p>Information relating to the number of SCC staff and providers workforce on people that are pregnant or in the maternity period has not been collected. However, it is believed that the majority of staff working in these services are women and therefore the changes could impact pregnant people.</p>
Those Experiencing Domestic Abuse (DA)	<p>ONS stated: "The Crime Survey for England and Wales (CSEW) estimated 2.4 million adults aged 16 years and over experienced domestic abuse in the year ending March 2022. This is a prevalence rate of approximately 5 in 100 adults". Therefore, it is likely that some staff</p>

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	delivering services could be experiencing DA and therefore would be impacted by the proposed changes.
Ethnicity and National Origins	Staff have a choice on whether they disclose their ethnicity and national origins and information relating to the number of SCC staff and providers workforce is unknown. If it is assumed that the majority of staff working in these services are based in Surrey and 2021 Census data shows that Surrey is becoming more ethnically diverse, it is likely that changes with impact on people from a range of different ethnicities and national origins.
Religion or Beliefs	<p>Staff have a choice on whether they disclose their religion or beliefs and information relating to the number of SCC staff and providers workforce is unknown. The 2021 Census notes in Surrey, the largest religious group was Christianity comprising of 50.2% of the population and 24.8% recorded that they had 'no religion' accounting for 440,069 residents. Surrey is home to many non-Christian religious groups. The main ones include Muslims (38,138 residents), Hindus (23,742), Sikhs (7,144), Buddhists (6,990) and Jews (3,099). This means Muslims represent 3.2% of Surrey residents, Hindus represent 2%, and the other non-Christian religious groups are all under 1%.</p> <p>If it is assumed that the majority of staff working in these services are based in Surrey, it is likely that changes could impact on people from a range of different religions and beliefs.</p>

Describe here the considerations and concerns in relation to the programme/policy for the selected group.

There will be a 10% reduction in the overall budget for mentoring and Family Centres contracts therefore this could result in redundancies. However, it is currently unknown how Lead Providers will use their budgets to utilise staffing structures therefore redundancies are not necessarily inevitable.

Describe here suggested mitigations to inform the actions needed to reduce inequalities.

Possible negative impacts are being mitigated in the following ways:

- SCC co-designed sessions with current providers, their staff, children, young people and families obtaining their views on how services should be delivered in the future. Therefore, the views of SCC staff and providers workforces have been incorporated into the recommissioning model.
- TUPE information will be collected on all staff working in mentoring and Family Centres services to maintain employee's terms and conditions of employment.
- All providers should have in place equality, diversity and inclusion policies and procedures to ensure staff with protected characteristics are supported.
- SCC will ensure that providers of the new commissioned provision will have in place equality, diversity and inclusion policies and procedures.

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- SCC has facilitated Market Engagement Events to keep providers and their workforce up to date with the recommissioning process to help reduce anxiety and uncertainty.

What other changes is the council planning/already in place that may affect the same groups of residents? Are there any dependencies decision makers need to be aware of?

If so, please detail your awareness of whether this will exacerbate impacts for those with protected characteristics and the mitigating actions that will be taken to limit the cumulative impacts of these changes.

Any negative impacts that cannot be mitigated?

None

4. Recommendation

Based your assessment, please indicate which course of action you are recommending to decision makers. You should explain your recommendation below.

- **Outcome One: No major change to the policy/service/function required.** This EIA has not identified any potential for discrimination or negative impact, and all opportunities to promote equality have been undertaken
- **Outcome Two: Adjust the policy/service/function** to remove barriers identified by the EIA or better advance equality. Are you satisfied that the proposed adjustments will remove the barriers you identified?
- **Outcome Three: Continue the policy/service/function** despite potential for negative impact or missed opportunities to advance equality identified. You will need to make sure the EIA clearly sets out the justifications for continuing with it. You need to consider whether there are:
 - Sufficient plans to stop or minimise the negative impact
 - Mitigating actions for any remaining negative impacts plans to monitor the actual impact.
- **Outcome Four: Stop and rethink the policy** when the EIA shows actual or potential unlawful discrimination. (For guidance on what is unlawful discrimination, refer to the [Equality and Human Rights Commission's guidance and Codes of Practice on the Equality Act](#) concerning employment, goods and services and equal pay).

Recommended outcome:

Recommendation Three: Continue the policy/service/function

Explanation:

The 10% reduction in the financial envelope for mentoring and Family Centres could have a negative impact on children, young people and families across Surrey seeking this intervention. Potential negative impacts could include: the possible reduction of staff, a decline in services for families that have lower levels of need, increased wait times, a reduction in the length and frequency of support required. This could impact children, young people and families in different

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ways depending on their protected characteristics as noted in the document above. Mitigating actions such as: providers being expected to utilise funding and Social Value opportunities, carryout fundraising activities and develop cost saving models could help to mitigate the possible negative impact of reducing the financial envelope.

The budget reduction could also have a negative impact on Surrey staff and incumbent providers workforce. It is believed that the majority of staff working in these settings are women therefore if redundancies were to take place women would more like be negatively impacted than men. However, the exact number of staff that would be impacted by redundancies is currently unknown and dependent on Lead Providers workforce arrangements.

There are a number of positive impacts for children, young people, families and staff which could be achieved through the new contracts that will be put in place from 01 April 2024. Changes that will be facilitated through the recommission include: the simplification of services, co-location of staff, enhancement of community delivery, improved recording of protected characteristics and the development of a recognised Early Help branding/quality standard. However, these positive impacts may not be fully realised or take longer to achieve with the 10% reduction in the financial envelope.

The cost-of-living crisis and inflation increases would have already placed additional pressures on providers. However, a 10% reduction in the financial envelope will need to take place as approved by Cabinet (February 2023) so that additional pressures will not be passed onto other services in the Directorate in 2024/25.

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5. Action plan and monitoring arrangements

Insert your action plan here, based on the mitigations recommended.

Involve you Assessment Team in monitoring progress against the actions above.

Item	Initiation Date	Action/Item	Person Actioning	Target Completion Date	Update/Notes	Open/Closed
1	December 2023	Development of co-location and co-delivery with key partners	The 11 successful Lead Providers will be responsible for this within their District and Borough area. The Family Resilience Commissioning Team and Operational Team will be responsible for monitoring and supporting this action.	This will be continually monitored throughout the contract period therefore an end date has not been noted.		Open
2	December 2023	Providers begin to identify where they can deliver services from community venues such as libraries, community centres, and other appropriate venues in preparation for 01 April 2024 go live date.	The 11 successful Lead Providers will be responsible for this action within their District and Borough area. The Family Resilience Commissioning Team and Operational Team will be responsible for monitoring and supporting this action.	This will be continually monitored throughout the contract period therefore an end date has not been noted.		Open
3	Dec 2023 – April 2024	Data recording requirements (including data on protected characteristics) will be finalised and agreed	The Family Resilience Commissioning Team and Operational Team will work with the 11 successful Lead Providers.	April 2024	Mobilisation meetings are due to commence December 2023. These meetings	Open

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Item	Initiation Date	Action/Item	Person Actioning	Target Completion Date	Update/Notes	Open/Closed
		with partners during the mobilisation phase.			will include data recording requirements.	
4	December 2023	Develop ways of collecting information to understand how families experience these services and how their outcomes may differ based on their protected characteristics.	The 11 successful Lead Providers will be responsible for gathering this information within their District and Borough area. The Family Resilience Commissioning Team and Operational Team will be responsible for monitoring and supporting this action.	This will be continually monitored throughout the contract period therefore an end date has not been noted.		Open
5	December 2023	The successful 11 Lead Providers support and contribute to the development of Surrey's Early Help branding/quality standard.	Operational Team & The Family Resilience Commissioning	April 2024		Open
6	April 2024	Domestic Abuse contracts to include requirements to co-locate with Early Help services	Domestic Abuse Commissioning Team	April 2024		Open
7	June 2023	A recommissioning website to be developed for providers and their workforce to access all updates,	Family Resilience Commissioning Team	June 2023	SCC co-designed sessions with current providers and their	Open

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Item	Initiation Date	Action/Item	Person Actioning	Target Completion Date	Update/Notes	Open/Closed
		information and communications regarding the recommission.			workforce to obtain their views on how services should be delivered in the future. The views of SCC staff and providers workforces have been incorporated into the recommissioning model. All information has been uploaded onto a website and will be updated as the recommission progresses to help ease staff anxiety.	
8	April 2024	<ul style="list-style-type: none"> Providers will be expected to utilise Social Value and funding opportunities outside of contractual arrangements in 	The 11 successful Lead Providers will be responsible for these actions within their District and Borough area. The Family Resilience Commissioning Team and Operational Team will be	This will be continually monitored throughout the contract therefore an end date has not been noted.		Open

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Item	Initiation Date	Action/Item	Person Actioning	Target Completion Date	Update/Notes	Open/Closed
		<p>addition to carrying out fundraising activities to help generate additional income to support and enhance service delivery.</p> <ul style="list-style-type: none"> • Providers will be asked to explore the development of volunteering models as a cost-effective way of supporting children, young people and families. <p>These actions will be monitored through quarterly performance management meetings.</p>	responsible for monitoring and supporting this action.			

6a. Version control

Version Number	Purpose/Change	Author	Date
0.1	Initial working draft of EIA	Joseph Jenkinson and Mohammed Malik	1 st April 2023

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Version Number	Purpose/Change	Author	Date
0.2	Update of EIA to consider the impact of a 10% reduction in the Early Help Budget	Joseph Jenkinson and Mohammed Malik	19 th April 2023
1	Updated for sign-off	Emma Atkins	19 th July 2023

The above provides historical data about each update made to the Equality Impact Assessment.


Please include the name of the author, date and notes about changes made – so that you can refer to what changes have been made throughout this iterative process.

For further information, please see the EIA Guidance document on version control.

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6b. Approval

Secure approval from the appropriate level of management based on nature of issue and scale of change being assessed.

Approved by	Date approved
Head of Service	 Matt Ansell 05/07/2023
Executive Director	Rachael Wardell 19/07/23
Cabinet Member	
Directorate Equality Group	

Publish:

It is recommended that all EIAs are published on Surrey County Council's website.

Please send approved EIAs to: **INSERT SHARED EMAIL ACCOUNT ADDRESS**

EIA author:

6c. EIA Team

Name	Job Title	Organisation	Team Role
Joseph Jenkinson	Commissioning Officer	SCC	Author
Mohammed Malik	Commissioning Officer	SCC	Author
Debbie Watson	Commissioning Officer	SCC	Author
Emma Atkins	Senior Commissioning Manager	SCC	Author/ Reviewing editor
Jo Millward	Service Manager	SCC	Author/ Reviewing editor

If you would like this information in large print, Braille, on CD or in another language please contact us on:

Equality Impact Assessment

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