

1. Topic of assessment

EIA title:	MASH and Early Help Programme
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EIA author:	Rupinder Raikmo and Philip Hall
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2. Approval

	Name	Date approved
Approved by ¹	Ian Vinall, Area Head of Children's Services - (SE Surrey)	14 September 2016

3. Quality control

Version number	0.10	EIA completed	
Date saved	11/10/16	EIA published	

4. EIA team

Name	Job title (if applicable)	Organisation	Role
Rupinder Raikmo	Project Manager	Surrey County Council	Project Manager for the MASH
Phil Hall	Project Manager	Surrey County Council	Project Manager for Early Help Coordination
Megan McGovern	Programme Office Manager	Surrey County Council	Project Manager for People Workstream
Borislava Millard	Project Officer	Surrey County Council, ASC	Project Manager for MASH Adults

¹ Refer to earlier guidance for details on getting approval for your EIA.

5. Explaining the matter being assessed

What policy, function or service is being introduced or reviewed?	<p>The service being reviewed is the ‘front door’ to safeguarding enquiries for children and adults in Surrey, and the coordination of early help for children and families that are referred into this service.</p> <p>Within Surrey there are currently five ‘front doors’ to access safeguarding services for children and multiple access points for adults</p> <p>In Children’s Services these entry points are the four area referral hubs (RAIS) and the MASH within Guildford Police Station which deals with police reports.</p> <p>There are four area-based Early Help Coordination teams for children and families, which are included within the scope of this work.</p> <p>Currently, safeguarding referrals enter Adult Social Care through about 20 routes – 11 locality teams, 5 hospital teams, the current MASH, SCC Contact Centre, older people mental health teams, transition team and the Emergency Duty Team (EDT). This significantly impacts on the ability of the service to ensure a consistent response to new referrals.</p>
What proposals are you assessing?	<p>The aims of the proposals are to make the safeguarding contacts and referrals service more efficient and effective in terms of</p> <ul style="list-style-type: none"> • identifying needs of children, adults and families, • referring people to appropriate support and • coordinating the offer of early help where required. <p>The new MASH will be a true multi-agency service for day to day referral and risk assessment, enabling better integration with specific priority areas such as the Police, health partners, Surrey Fire and Rescue service, missing persons, Childhood Sexual Exploitation and so on.</p> <p>The proposal is to change the system so that safeguarding contacts and referrals both from professionals and the public that are currently taken by the various access points within Children and Adults services will in future be received and processed within the MASH.</p> <p>The expected benefits of this new model are as follows:</p> <ul style="list-style-type: none"> • Improved standard of practice in Safeguarding across all MASH partners • Better understanding between professionals leading to greater confidence in information sharing, more accurate assessment of risk and need • Reduction in repeat referrals • Early intervention appears to impact on the number of cases escalating

	<ul style="list-style-type: none"> • Greater efficiencies in processes and resources <p>Some of the staff based in referral hubs in area offices will move to Guildford Police station, and they will work to a new business process involving contacts and referrals. The remaining staff from the referral hubs will work in the area Early Help Coordination hubs, or in other parts of the service where there are vacant posts.</p> <p>In order to increase the capacity of the Early Help Coordination service, there will be two additional posts per hub (TAF Coordinator).</p> <p>Business support staff will also be required for the new service. As this service is centrally managed, some staff will need to be assigned to work in the MASH and the Early Help Coordination hubs.</p> <p>The range of options available to staff affected by these proposals will be described in the HR consultation document, and the reorganisation will be conducted according to the Council's change management policy, and in consultation with the Union representatives.</p>
Who is affected by the proposals outlined above?	<p>The new MASH service will affect the following groups:</p> <p>1. Individuals including people who use social services</p> <p>In these proposals, there is no change to the range of services on offer and the impact on individuals and people who use social services should overall be positive because the customer journey will be more streamlined, better co-ordinated, proportionate and more efficient.</p> <p>The delivery of Early Help should improve as a result of better decision making within the MASH and improved coordination at the area level by the Early Help Coordination hubs.</p> <p>2. Carers</p> <p>Carers (people who care for friends or relatives) will be affected by the proposed changes in the same way as individuals and people who use services (as described above).</p> <p>3. Staff</p> <p>The impact on staff will be minimal because (a) the overall number of job roles will increase (b) individuals' job roles will not change substantially and (c) any staff moves that require a change of location will be on a voluntary basis.</p> <p>Where job roles have been deleted (roles cannot be mentioned as it affects less than 5 posts and could lead to identification of</p>

individuals), new roles are ring fenced to vulnerable staff where appropriate. It is not anticipated that there will be any redundancies.

4. External organisations & governing bodies

External organisations will be asked to use the MASH as the new single point for safeguarding enquiries.

Surrey Safeguarding Adults Board (SSAB) and Surrey Safeguarding Children Board (SSCB) will need to change their publicity materials and some policies and procedures to reflect the new MASH model and processes.

Staff from external organisations will be affected because the MASH is a multi agency facility, and staff from external organisations will be assigned to it.

The purpose of the Early Help Coordination service is to facilitate more effective interventions by partners in the local area, with additional support to partners provided by Surrey County Council staff.

6. Sources of information

Engagement carried out
<ul style="list-style-type: none">• Extensive consultation with partner agencies - Surrey Police, Children Schools and Families services, Adult Social Care, Health, Surrey Safeguarding Adults Board, Surrey Safeguarding Children Board,• Co design of proposals with nominated people from partner agencies.• Engagement with staff representatives.• Engagement with staff in area referral hubs and early help coordination.• 6 Consultation sessions with affected staff and unions• Use of Surrey Says (survey tool)website to collect feedback from staff
Data used
<p>Analysis of data held on the Children's Services casework recording system (LCS) shows that a proportion of police reports to the MASH do not require any services, but these reports are entered on the system and occupy staff time, reducing the efficiency and effectiveness of services.</p> <p>From the area referral hubs, data analysis shows that a significant number of contacts and referrals from professionals and members of the public result in no action being taken, despite the fact that many of these children and families would benefit from early help services.</p> <p>It is widely accepted that improving access to early help services is better for children and families, and results in fewer referrals to the acute services over time (section 17/47 services under the Children's Act). Children and families who would benefit from early help but do not currently receive this service are more likely to become repeat referrals at the front door and so the improvement in early help delivery will make the new service more efficient and free up funds to be reinvested in services.</p> <p>Research from other authorities that have introduced a similar MASH model shows that the multi-agency assessment of risk with information sharing within a confidential firewalled environment is the most effective and accurate way of assessing risk.</p> <p>Data used in the analysis of Adults MASH (please see Annex I for a detailed breakdown):</p> <p>Surrey – 2015 census data in relation to language Poppi estimates for 2015 PANSI estimates for 2015</p> <p>Analysis was conducted on qualitative feedback received from staff during the consultation both verbally and digitally. This feedback was used to inform any changes</p>

to the proposed model and summarised and issued to staff in the response document
(22 August 2016)

7. Impact of the new/amended policy, service or function

7a. Impact of the proposals on residents and service users with protected characteristics

Protected characteristic ²	Potential positive impacts	Potential negative impacts	Evidence
Age	<ul style="list-style-type: none"> • More accurate and consistent assessment of risk. • Improved access to services, including early help for children and families. • More holistic multiagency approach, less fragmented. 	<ul style="list-style-type: none"> • The new MASH is not anticipated to have a negative impact on the basis of age. • It should be recognised there could be potential risks if someone has specific needs as a result of their age and a comprehensive/personalised approach is not followed, potentially resulting in individuals not getting the right level of support to meet their needs. 	<ul style="list-style-type: none"> • The MASH service is designed for both children and adults, including individuals with care and support needs. • The services delivered by Early Help Coordination hubs are for children and families. • The criteria for safeguarding adults remains as before and is not affected by the new MASH. • The process of ageing however brings increased risks to independence and wellbeing through disease, frailty, sensory impairments and other long term conditions, especially for people over the age of 75. MASH therefore will need to have alternative arrangements in place to meet the specific needs of these people.
Disability	<ul style="list-style-type: none"> • More accurate and consistent assessment of risk. • Improved access to services, including early help for children and families. • More holistic multiagency approach, less fragmented. 	<ul style="list-style-type: none"> • Overall the new MASH is not anticipated to have a negative impact on the basis of disability. • Depending on their needs, some people with a visual impairment and/or hard of hearing may experience difficulty in accessing MASH services as MASH initially will not have alternative accessible contact points for 	<p>The sharing of information among multi agency partners within The MASH enables a more holistic approach to risk assessment and referral to the most appropriate services. This is a particular benefit to people with disabilities because their needs are better met through an improved coordination of services and the whole family approach. However, people with disabilities (both children and adults) are more likely to have safeguarding needs than the general population as a whole, and are more</p>

² More information on the definitions of these groups can be found [here](#).

	<p>people with specific communication support needs – e.g. text line or minicom.</p> <ul style="list-style-type: none"> • People with learning disabilities will need information in easy read format. • It should be recognised there could be potential risks if people with visual impairment and/or hard of hearing would not be able to get the right level of support to meet their needs. 	<p>likely to be receiving services from multiple agencies.</p> <p>Adults who need safeguarding frequently have multiple support needs. Data from 2014-2015 shows 67% of safeguarding enquiries for people over the age of 65 involved people who had physical, sensory and mental health support needs. The proportion is 32% for adults in the lower age groups.</p> <p>Annex I provides detailed information about estimated number of people in Surrey aged 18 and above who have a disability.</p> <p>It is estimated that 125,966 or 13.8% of Surrey's population aged 18+ will have some degree of hearing impairment (moderate, severe or profound).</p> <p>26,194 or 2.9% of Surrey's population aged 18 and above is estimated to have a serious, moderate or severe visual impairment or a registrable eye condition.</p> <p>As required under the Equality Act 2010 (Section 149 the public sector Equality Duty) reasonable adjustments should be made to ensure that disabled people have equal access to services, including information and advice. Reasonable adjustments could include the provision of information in accessible formats or with communication support.</p> <p>This is further reinforced by the Care Act 2014, which makes it mandatory for local authorities to consider the use of specific or alternative contact methods:(1) Arrangement of support from a</p>
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			<p>communication professionals, for example a deafblind manual interpreter, a British Sign Language (BSL) interpreter, or an advocate. The MASH can be accessed via telephone or by email which can be found on the Surrey County Council website, partner websites. Alternatively, contact details of the MASH can be requested from any partner agencies, e.g. schools, colleges, GPs, hospitals etc.</p>
Gender reassignment	<ul style="list-style-type: none"> More accurate and consistent assessment of risk. Improved access to services, including early help for children and families. More holistic multiagency approach, less fragmented. 	<ul style="list-style-type: none"> None identified 	<p>The improved access to early help services such as counselling for people with gender dysphoria would benefit both children and adults with this protected characteristic.</p>
Pregnancy and maternity	<ul style="list-style-type: none"> Improved access to services, including early help for children and families. 	<ul style="list-style-type: none"> None identified 	<p>Improved access to early help services, such as parenting and early years support would be of particular benefit to people with this protected characteristic.</p>
Race	<ul style="list-style-type: none"> More accurate and consistent assessment of risk. Improved access to services, including early help for children and families. More holistic multiagency approach, less fragmented. 	<p>The new MASH is not anticipated to have a negative impact on the basis of race.</p> <p>People for whom English is not first language may find the safeguarding referral process more difficult. Translation support can be sought from: https://www.surreycc.gov.uk/contact-us/translation-advice</p>	<p>The new MASH is not anticipated to adversely affect black and minority ethnic (BME) groups by changing the way safeguarding services are accessed.</p> <p>The improvements in assessment and early help service provision should be a benefit to people with this characteristic</p> <p>However individuals from BME groups including members of the Gypsy, Roma and Traveller (GRT) community may be at greater risk of harm than people from the general population, and are</p>

		<p>It should be recognised there could be potential risks if a comprehensive/personalised referral and assessment process is not followed and individuals do not get the right level of support to meet their needs.</p>	<p>therefore more likely to receive services than people from the general population as a whole.</p> <p>Additionally, according to data published in 2011 Census in Surrey, for nearly 65,000 individuals or 6% of Surrey's population English is not their main language.</p> <p>Nearly 6,500 people cannot speak English well and a further 1,000 cannot speak English at all. Alternative arrangements for people whose main language is not English should be put in place, allowing them to raise safeguarding concerns with the new MASH service and be properly involved in the MASH processes.</p>
Religion and belief	<ul style="list-style-type: none"> • None identified 	<ul style="list-style-type: none"> • None identified 	<p>People with religious beliefs will not be significantly affected by these proposals as the methods of contact, operating hours and out of hours service will not change.</p>
Sex	<ul style="list-style-type: none"> • More accurate and consistent assessment of risk. • Improved access to services, including early help for children and families. • More holistic multiagency approach, less fragmented. 	<ul style="list-style-type: none"> • None identified 	<p>The general approach will be holistic, taking into account the whole family needs and in this sense the service will have a positive impact on both males and females.</p> <p>However, support needs are more likely to be higher for females than males and the service is designed to respond accordingly. For example, compared to males, females are more likely to be single parents caring for children, are more likely to be carers in general of both children and adults, and are more likely to be victims of domestic abuse than males.</p> <p>Females in Surrey also have a higher life expectancy than males therefore they may have increased need for safeguarding services due to greater frailty.</p>

Sexual orientation	<ul style="list-style-type: none"> More accurate and consistent assessment of risk. Improved access to services, including early help for children and families. More holistic multiagency approach, less fragmented. 	<ul style="list-style-type: none"> None identified 	
Marriage and civil partnerships	<ul style="list-style-type: none"> No significant impact. 	<ul style="list-style-type: none"> None identified 	
Carers³	<ul style="list-style-type: none"> More accurate and consistent assessment of risk. Improved access to services, including early help for children and families. More holistic multiagency approach, less fragmented. 	<ul style="list-style-type: none"> None identified 	<p>The majority of carers are female, so this section is linked to Sex (see above)</p> <p>Young carers often have additional support needs which may be addressed through the new early help arrangements.</p>

7b. Impact of the proposals on staff with protected characteristics

Protected characteristic	Potential positive impacts	Potential negative impacts	Evidence
Age	<ul style="list-style-type: none"> None identified 	<ul style="list-style-type: none"> None identified 	<ul style="list-style-type: none"> No significant change to basic working conditions. Each agency will have its own section within the MASH and its own team leader

³ Carers are not a protected characteristic under the Public Sector Equality Duty, however we need to consider the potential impact on this group to ensure that there is no associative discrimination (i.e. discrimination against them because they are associated with people with protected characteristics). The definition of carers developed by Carers UK is that 'carers look after family; partners or friends in need of help because they are ill, frail or have a disability. The care they provide is unpaid. This includes adults looking after other adults, parent carers looking after disabled children and young carers under 18 years of age.'

			<ul style="list-style-type: none"> • Any changes in location will be voluntary. • No net reduction in staff posts.
Disability	<ul style="list-style-type: none"> • None identified 	<ul style="list-style-type: none"> • The MASH will be located on the 6th floor of Guildford Police Station and there are no plans at present to provide a parking facility on site. However, there is parking on site for staff with a physical disability. 	<p>Special requirements for disabilities will be taken into account on an individual basis, between the staff member and their line manager to ensure needs are met. The police station has wheelchair access (a ramp and a lift) and is equipped with Evacuation Chairs.</p> <p>A new Personal Emergency Evacuation Plan will need to be undertaken for staff with disabilities.</p>
Gender reassignment	<ul style="list-style-type: none"> • None identified 	<ul style="list-style-type: none"> • None identified 	<ul style="list-style-type: none"> • No significant change to basic working conditions. • Each agency will have its own section within the MASH and its own team leader • Any changes in location will be voluntary. • No net reduction in staff posts.
Pregnancy and maternity	<ul style="list-style-type: none"> • None identified 	<ul style="list-style-type: none"> • Members of staff who are pregnant or on maternal leave – more difficult for them to participate in the consultation process. 	<ul style="list-style-type: none"> • No significant change to basic working conditions. • Each agency will have its own section within the MASH and its own team leader • Any changes in location will be voluntary. • No net reduction in staff posts. • Keep in contact with staff on maternity leave so that they are informed about the consultation processes. • Where a private room is required to express milk, there are four private rooms that can be booked, however the doors do not lock. Requirements of staff will be discussed on a case by case basis.
Race	<ul style="list-style-type: none"> • None identified 	<ul style="list-style-type: none"> • None identified 	<ul style="list-style-type: none"> • No significant change to basic working conditions. • Each agency will have its own section within the MASH and its own team leader • Any changes in location will be voluntary. • No net reduction in staff posts.

Religion and belief	<ul style="list-style-type: none"> • None identified 	<ul style="list-style-type: none"> • None identified 	<ul style="list-style-type: none"> • No significant change to basic working conditions. • Each agency will have its own section within the MASH and its own team leader • Any changes in location will be voluntary. • No net reduction in staff posts. • There are four private rooms that can be booked and used for prayer
Sex	<ul style="list-style-type: none"> • None identified 	<ul style="list-style-type: none"> • None identified 	<ul style="list-style-type: none"> • No significant change to basic working conditions. • Each agency will have its own section within the MASH and its own team leader • Any changes in location will be voluntary. • No net reduction in staff posts.
Sexual orientation	<ul style="list-style-type: none"> • None identified 	<ul style="list-style-type: none"> • None identified 	<ul style="list-style-type: none"> • No significant change to basic working conditions. • Each agency will have its own section within the MASH and its own team leader • Any changes in location will be voluntary. • No net reduction in staff posts.
Marriage and civil partnerships	<ul style="list-style-type: none"> • None identified 	<ul style="list-style-type: none"> • None identified 	<ul style="list-style-type: none"> • No significant change to basic working conditions. • Each agency will have its own section within the MASH and its own team leader • Any changes in location will be voluntary. • No net reduction in staff posts.
Carers	<ul style="list-style-type: none"> • Opportunity for some staff to relocate, which may be more convenient for people with caring responsibilities. 	<ul style="list-style-type: none"> • Working hours may change - which may make it more difficult for those who they are caring for. 	<ul style="list-style-type: none"> • No significant change to basic working conditions. • Each agency will have its own section within the MASH and its own team leader • Any changes in location will be voluntary. • No net reduction in staff posts. • Preference for working hours considered during the consultation processes.

8. Amendments to the proposals

Change	Reason for change
Minor structural changes to the model	Feedback received during the consultation period

9. Action plan

Potential impact (positive or negative)	Action needed to maximise positive impact or mitigate negative impact	By when	Owner
- Customers of the social care and early help systems receive an excellent service	Ensure that the processes are clear, that vacancies are filled and training to staff delivered	3 October 2016	Dean Woodward (Interim Head of MASH)
- Improved safety and quality of care received by individuals with communication support needs - Improved ability of people with specific communication support needs to refer to the MASH; and to be involved in the assessment of risk and the decision-making about their personal or someone else's health, care and wellbeing	(1) Consider putting alternative arrangements in place to enable people with certain communication support needs make safeguarding referrals and be involved in the MASH processes. (2) In the interim, MASH Adults to consider using existing services of SCC Contact Centre – sms line, text relay and minicom.	(1) January 2017 (2) 03 October	Dean Woodward, (Interim Head of MASH) Vernon Nosal, Head of Safeguarding and QA, ASC

10. Potential negative impacts that cannot be mitigated

Potential negative impact	Protected characteristic(s) that could be affected
Staff are not happy with the new model and / or the location of the Multi Agency Safeguarding Hub.	N/A

The lack of parking at the Multi Agency Safeguarding Hub could impact negatively on staff choosing to move to the MASH	N/A
The location of the Early Help Hubs may require a change in location for staff	N/A

11. Summary of key impacts and actions

Information and engagement underpinning equalities analysis	<ul style="list-style-type: none"> • Extensive consultation with partner agencies • Co design of proposals with nominated people from partner agencies. • Engagement with staff representatives. • Engagement with staff in area referral hubs and early help coordination. • 6 Consultation sessions with affected staff and unions • Use of Surrey Says website to collect feedback from staff and a document to respond to the feedback
Key impacts (positive and/or negative) on people with protected characteristics	<p>Service users:</p> <ul style="list-style-type: none"> • More accurate and consistent assessment of risk. • Improved access to services, including early help for children and families. • More holistic multiagency approach, less fragmented. <p>Staff:</p> <ul style="list-style-type: none"> • Opportunity for some staff to relocate, which may be more convenient for people with caring responsibilities.
Changes you have made to the proposal as a result of the EIA	Not applicable
Key mitigating actions planned to address any outstanding negative impacts	Not applicable
Potential negative impacts that cannot be mitigated	Not applicable