

Local Government Reorganisation Proposal (LGR) Equality Analysis Summary

Overview

1. Devolution and Local Government Reorganisation (DLGR) represent the single biggest change to local government services in Surrey in a generation. This change has the aim of reducing duplication, providing more joined-up services and better value for money.
2. Any change in how public services are delivered will have the biggest impact on those most reliant on them, who are often among the most vulnerable groups in society. In Surrey, we know this includes disabled people, women, carers, older people, care experienced young people, people from some ethnic backgrounds and sanctuary seeking populations. Across all these groups, being socio-economically deprived significantly increases the inequalities people experience in Surrey as well as their reliance on many of the key services provided by local councils.
3. DLGR has the potential to bring significant benefit to these populations if their needs and aspirations are built in at the outset to the development of the new authorities. However, it could also exacerbate the inequalities many in our communities experience if we do not have a nuanced understanding of the ways in which change may affect the most vulnerable.

Understanding inequalities in Surrey

4. We are developing a good understanding of geographical inequality within Surrey, through our work on [key neighbourhoods](#). We have also developed an [Evidence Base for Understanding Inequality in Surrey](#) to support better understanding of the ways in which inequality is experienced by groups in our communities based on things like sex, ethnicity, disability and age.
5. This equality analysis sets out the headline issues that all partners to DLGR need to be aware of as we move into the planning phase for this work. As we do not yet know what decision the government will take on the form unitary local government will take in Surrey, much of this analysis is provisional and general in nature. There are also some protected characteristics (including religion, marital status, gender reassignment and sexual orientation) which we have less data for, which limits our ability to predict impact on groups who share these.
6. However, there are important themes emerging at this stage, based on what we do know about our communities, the potential geographies for new unitary councils in Surrey, and the impact DLGR may have on residents. These themes are summarised below, and a more detailed analysis of the impacts of DLGR by protected characteristic are set out in the full Equality Impact Assessment which follows.
7. Alongside the changes for our communities, DLGR will involve the wholesale reorganisation of the entire staff bodies of all the upper and lower tier authorities in Surrey. While detailed analysis of impacts of this on staff will not be possible until implementation plans for the new authorities are developed, we also set out here key

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considerations that will need to be kept in mind to avoid unequal impacts on different groups of employees.

Potential negative impacts on residents

8. **Geographical changes to services and organisations.** Lack of access to and accessibility of transport is as a key driver of inequality given Surrey's geography. As services are disaggregated and/or aggregated, we need to consider the potential impact of them becoming less accessible, or the opportunities to make them more localised. Most affected groups could include: socio-economically vulnerable groups, sanctuary seekers, younger people, older people, disabled people and carers.
9. **Disruption to services during reorganisation.** Residents who are most dependent on services face falling between the gaps; many already report difficulty navigating complex support pathways which may be exacerbated as services are reorganised. There is also potential for different standards or thresholds for support to be developed across new authorities, or loss of economies of scale for specialist services both of which could affect people's ability to access support. Potentially most affected groups include: older people, disabled people, care-experienced young people, carers, some ethnically diverse groups, sanctuary seekers and those who are socio-economically vulnerable.
10. **Coordination and cross border cooperation.** As new geographies are developed, there is an increased risk of friction and lack of joined up working on key strategic issues including safeguarding, public health, highways, infrastructure. Potentially most affected groups include: older people, disabled people, care-experienced young people and carers.
11. **Communication of change.** Keeping residents informed of changes and impacts on them will be key to ensuring everyone has equal opportunity to engage with DLGR, including those who have accessibility needs, may be digitally excluded or have a language barrier. Potentially most affected groups include: sanctuary seekers, older people and disabled people.
12. **Potential for creating further geographical inequality.** All areas in Surrey have an aging population and increasing dependency ratios – the proportion of younger and older people who are unable to work relative to the working-age population -, both of which pose challenges for the service users requiring care as well as the potential care givers who may be affected by poor employment practice and exploitation. If DLGR leads to greater need and higher dependency ratios in an area, these risks will be exacerbated. Unequal division of need and resources between new authorities could also lead to higher tax burdens and fewer resources in more geographically deprived areas of the county. Potentially most affected groups include: older people, disabled people, carers, some ethnically diverse groups and socio-economically vulnerable groups.
13. **Council tax harmonisation.** As part of the LGR process, current council tax bands for the combined district and borough and county council will need to be harmonised to a single set of charges for each unitary within seven years of vesting day. Given the acute financial challenges facing local authorities, it is being proposed to harmonise council tax as quickly as possible. While this is a decision for the new unitary authorities, a larger

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increase in bills across some parts of Surrey may disproportionately impact residents on lower incomes who may be less able to absorb cost increases as well as other residents with greater financial resilience.

14. We will refine our assessment of impacts as implementation plans are developed.

General mitigation principles are likely to include:

- Being sure to follow the statutory requirements on consultation with residents, as well as ensuring we explore more detailed and nuanced opportunities for additional engagement and insight.
- Ensure clear arrangements are in place to deal with the transition with no/ minimal impacts on service delivery.
- Ensuring that approaches to service reforms and alterations to policies or eligibility criteria set locally are evidence led and backed by a robust catalogue of supporting data.
- As part of the implementation process and development of internal policies, services can ensure that equality considerations are embedded from day one as well.

Potential positive impacts on residents

15. **Localisation.** The ability for new authorities to adapt and respond more specifically to the needs of a smaller geographical area than currently covered by SCC could lead to services being geographically closer to areas of most need, and closer collaboration with local support systems (e.g. community groups and towns and parishes, and local faith groups).

16. **Service reform.** Through unitarisation there is the potential to better align services currently delivered at different tiers of local government, such as housing and social care. If needs of vulnerable groups are used to shape this service redesign, they can become more inclusive, provide better support to those who need them and reduce pressure on other public services.

17. **Practice improvement.** DLGR can be used as a catalyst to improve practice around inclusion and accessibility as new services are set up and developed. This can include building in positives such as cultural awareness, trauma informed approaches, and specialised support for vulnerable service users.

18. **Opportunities of devolution.** As more powers are localised through devolution, there is the opportunity for the Mayoral Strategic Authority to shape key services such as transport, skills, and infrastructure to address the specific needs of Surrey's communities. In addition, budgets that are currently held by central government or split across different funding pots will be consolidated and devolved to the Strategic Authority, enabling the needs of local residents to better shape the use of this funding, possibly leading to better services.

Potential negative impacts on staff

19. **Some groups are underrepresented** in SCC's workforce (such as ethnically diverse, disabled and younger people), particularly at more senior levels within the authority. While women are significantly over represented in the workforce, they are still far more likely to be in frontline roles and we have a growing gender pay gap, reflecting the fact

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that men are still more likely to reach leadership positions in the Council. Barriers to progression of these groups, such as unconscious bias in recruitment processes, could exacerbate this underrepresentation through workforce changes as the new authorities are created.

20. **Changing of work base** through DLGR could have greater impacts on people who have caring responsibilities, younger people, disabled people, women, and socio-economically vulnerable groups. This may be due to issues such as potential increased travel distances, impacting people's caring routines or the higher costs of travel.
21. **Changes to work conditions, practices and adaptations.** Disabled staff may have workplace adjustments to physical environments or working processes that enable them to carry out their roles.
22. **Potential loss of specialist support services.** SCC provides a range of support to underrepresented or disadvantaged groups in the workplace through employee wellbeing offers and staff networks. Changes to these through DLGR could affect how included these groups feel.
23. **Differential impacts of reorganisation and potential redundancies.** Older workers, women on maternity leave, and socio-economically disadvantaged groups could be more affected by changes to pay structures and/or redundancies associated with DLGR.
24. **Impact of change on staff.** Stress and uncertainty associated with change may have more impact on some groups of staff, including those who may feel more vulnerable to change as outlined above. Mental health and wellbeing of the workforce will be a key area of support as DLGR progresses.
25. We will refine our assessment of impacts as implementation plans are developed. General mitigation principles are likely to include:
 - Clear and regular engagement with staff to help offset any anxiety around job security or fears around significant changes to working patterns and practices. This includes ensuring we follow any statutory requirements to consult and we are mindful of the potential implication on specific changes to employment law that could come into force throughout the process of LGR.
 - Taking general steps, where appropriate, to involve staff in planning and decision-making through consultation, working groups, and staff networks.
 - Ensure clear arrangement are in place to deal with the transition, both in terms of policy and practice.
 - Ensuring that approaches to reforms, restructures changes and alterations to policies are evidence led and backed by a robust catalogue of supporting data.
 - Actively addressing data quality issues to help develop our understanding of the scale of the impacts of internal changes. For example, work is underway to improve our collection of data on staff demographics through the Prefer not to Say campaign. If this is successful, it will mean we have more meaningful understanding of the makeup of our staff and will be better able to track impacts of future restructures.
 - We have also been developing our understanding of the makeup of senior leadership positions and have found that women, staff from ethnic minority

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backgrounds and staff with disabilities are less represented in these senior roles. As we work to develop plans for the structures of the new organisations, we will simultaneously work to break down potential barriers to these groups.

Potential positive impacts on staff

26. **Potential for designing in inclusive recruitment processes.** Better understanding of the inequalities of outcome for underrepresented groups can be used to design inclusive recruitment processes for the new authorities to address barriers to progression. This could help improve equality of opportunity and redressing workforce imbalances in the new authorities.
27. **Being accessible and inclusive by design.** There is the opportunity to set up buildings and services in the new authorities that have accessibility built in from the outset, both in terms of physical spaces but also inclusive policies and procedures.
28. **Carrying forward best practice.** Where good practice in workforce processes exist, these can be carried forward to the new authorities to ensure no drop in standards for staff. This could include support for inclusive staff networks, action plans based on staff feedback, and policies such as family friendly, disability confident, and carer confident.

Local Government Reorganisation (LGR) Proposal Equality Impact Assessment

1. Explaining the matter being assessed

Following the release of the English Devolution White Paper on 16th December 2024, local authorities were invited to submit proposals to be part of the fast-track programme of local government reorganisation (LGR). The current two-tier system is seen as a barrier to improved efficiency and service delivery by the government, and restructuring would allow resources to be directed towards improving services rather than maintaining multiple organisations. Moving to unitary local government would also enable further devolution, allowing a Mayoral Strategic Authority to unlock additional powers, funding, and streamlined public services across the county.

The council's approach to reorganisation has looked at a range of options for unitarisation including options for two or three unitary authorities with a range of different potential boundaries. The option preferred by the council is a East/West two unitary model, which balances efficiency with localised service delivery and meets the government's population criteria. Once the government has made a decision on the preferred option for unitary local government in Surrey in autumn 2025, work to start the transition process to the new councils will begin, aiming to minimise service disruption, focusing on integrating and optimising resources from the current 12 councils, and ensuring services are safe and legal from the first day of operation. Engagement with stakeholders, including businesses, public sector organisations and residents, will continue to shape the final proposals and the implementation of the new authorities

This Equality Impact Assessment sets out at a high level the equality implications of local government reorganisation in Surrey if the government selects Surrey County Council's proposal for two unitary councils as their preferred option. As more detailed delivery plans are developed, further EIAs will be produced to ensure Members and officers continue paying due regard to equality and inclusion issues as the LGR transition progresses.

LGR for Surrey aims to implement a single tier of local government for the county that will improve outcomes for residents and lead to better value for money. Integrating the services of the county, district and borough councils will support more effective coordination and integration of services, leading to a better experience for residents and more effective use of limited resources to make the greatest impact.

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The proposed makeup of the unitary authorities is:

East	West
Elmbridge	Guildford
Epsom and Ewell	Runnymede
Mole Valley	Spelthorne
Reigate and Banstead	Surrey Heath
Tandridge	Waverley
	Woking
Population*: 545,798	Population: 657,309

Table 1: Proposed areas covered by the new unitary authorities. Population data from Census 2021

Where available, service data will be used to assess the scale of the impact of disaggregating services. Where this is not possible, due to certain information not being available at the local level, demographic data, largely sourced from the 2021 Census, will be used.

This initial assessment was developed the Corporate Strategy and Policy and the Equality, Diversity and Inclusion (EDI) teams within the Resources Directorate.

As LGR implementation plans are developed, more detailed work will be done to further understand the impacts on the residents and staff affected.

Evidence is underpinned by local level data we have on services users (at either county or other locality levels), information we have on the electorate broken down by district and borough area, as well as information on key neighbourhoods, population groups and parts of the county based on data from the 2021 Census, work that has gone into the Joint Strategic Needs Assessment (JSNA), and elsewhere.

Throughout the LGR process, residents and partners will be engaged for their views and we will continue to engage as many impacted stakeholders as possible to further our understanding of equality issues and develop the right mitigations for any adverse impacts.

2. Service Users / Residents

AGE

According to the latest data from the 2021 Census, the largest 5-year cohort in Surrey is those aged 50-54 years, with a population of 87,327. However, the fastest growing cohort compared to the previous 2011 census is the 75-79, which has seen an increase of 34% from 2011 to a total 43,566.

This data, combined with the latest mid-2023 population estimates produced by the population insights team seems to point to the fact that we have an increasingly aging population, and that the main age ranges where there are potential population imbalances are aged 50 and over and 19 and under.

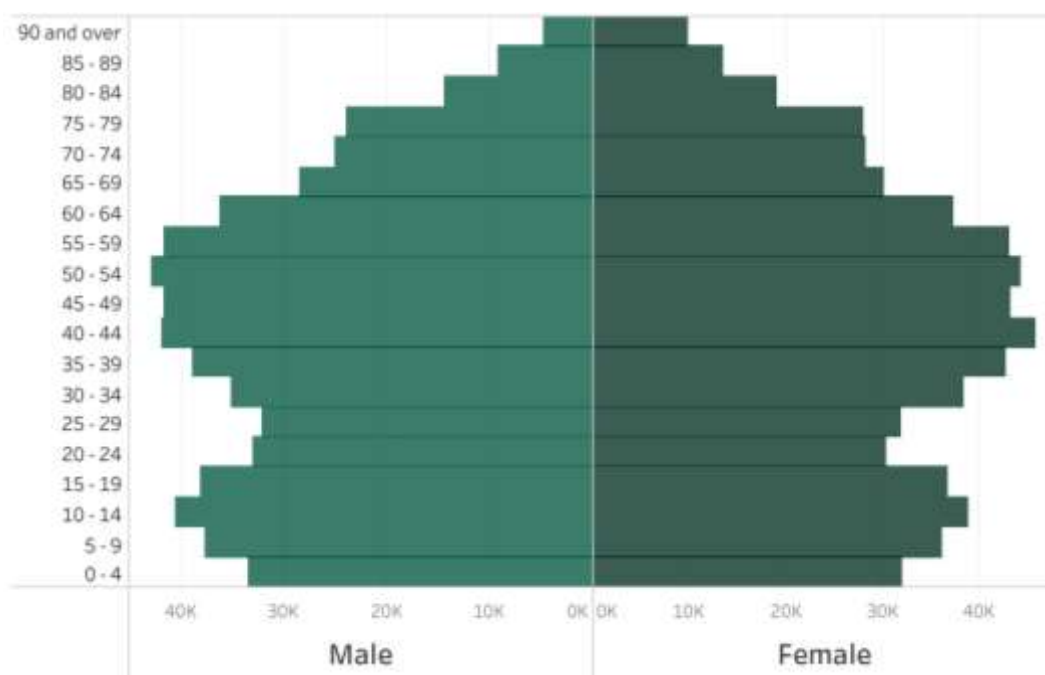


Figure 1: Summary table of Surrey population by age, population estimates for England and Wales mid-2023

In terms of how this data is distributed across the proposed geography for unitarisation, we can see from Figure 2, that not only does the West have a higher overall population, it also has a higher proportion of those populations most likely to require the targeted services Surrey County Council provides (namely those aged 0-15 years old, and those aged 65 and over). Using the data in Table 2, we can also work out the [dependency ratios](#) for each area. By dependency ratio we mean is a measure used to indicate the proportion of dependents (people who are either too young or too old to work) to the working-age population. It is typically expressed as a percentage or a ratio.

The formula is: $\text{Number of dependents} / \text{working-age population} \times 100$. The dependency ratio for the East is 65.2, and the ratio for the West is 59.1, meaning that for every 100 people working, the East is supporting around 6 more dependents than the West, which could translate to higher demands on council services, and more people who are not in the workforce than those who are working, potentially constraining growth in the local economy.

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2023 MYE		
Area	East	West
All Ages	556,149	672,522
Aged 0 to 15	110,594	124,322
Aged 0 to 15 perc	19.9%	18.5%
(Working age) Aged 16 to 64	336,606	422,535
(Working age) Aged 16 to 64 perc	60.5%	62.8%
Aged 65+	108,949	125,665
Aged 65+ perc	19.6%	18.7%

Figure 2: Age distribution of 2023 mid-year estimates broken down into proposed unitary geographies, population estimates for England and Wales mid-2023.

Adult Social Care:

- The information below shows a break down of the Adult Social Care case cohort by both age group and each district and borough area.
- As can be seen from the data, the caseload for age groups over 75 are the highest across all areas. We can also see that most district and borough areas in the west have a higher level of demand.

District and borough area	Under 18	18 to 24	25 to 34	35 to 44	45 to 54	55 to 64	65 to 74	75 to 84	85+	Grand Total
Elmbridge	21	131	123	124	203	334	279	436	514	2,165
Epsom and Ewell	17	76	102	107	130	222	194	286	279	1,413
Guildford	26	174	199	203	267	318	312	370	442	2,311
Mole Valley	12	82	118	115	162	240	228	368	389	1,714
Reigate and Banstead	22	148	273	235	318	387	359	452	465	2,659
Runnymede	17	71	108	79	133	266	217	300	333	1,524
Spelthorne	24	106	137	161	220	307	245	413	433	2,046
Surrey Heath	13	89	144	156	198	322	249	444	457	2,072
Tandridge	12	96	137	103	139	230	215	345	365	1,642
Waverley	27	120	192	154	237	410	338	572	674	2,724
Woking	26	119	161	186	235	310	286	326	360	2,009

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Primary address not recorded or confidential	4	25	45	36	37	21	16	11	6	201
Outside of Surrey	14	74	172	172	185	236	136	140	129	1,258
Grand Total	235	1,311	1,911	1,831	2,464	3,603	3,074	4,463	4,846	23,738

Table 2: Adult social care case cohort by age group for each Surrey district and borough, data provided by ASC service

Children's Social Care:

- As shown by the table below, the West has a higher population of children; the East has almost 20,000 fewer.
- The West also has a higher level of child safeguarding activity, and similar rates of children subject to Education, Health and Care Plans.

	Population aged 17 and under -MYE 2023	Children in Need Dec 2024	Children in Need Dec 2024 %	Social Care caseloads	Social Care caseloads %	Children with EHCP	Children with EHCP %
Tandridge	19,681	300	1.5%	295	1.5%	1,182	6.0%
Reigate and Banstead	35,258	678	1.9%	676	1.9%	2,189	6.2%
Mole Valley	17,329	263	1.5%	244	1.4%	1,108	6.4%
Epsom and Ewell	18,921	286	1.5%	283	1.5%	1,032	5.5%
Elmbridge	33,692	558	1.7%	530	1.6%	1,703	5.1%
East total	124,881	2,085	1.7%	2,028	1.6%	7,214	5.8%

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	Population aged 17 and under -MYE 2023	Children in Need Dec 2024	Children in Need Dec 2024 %	Social Care caseloads	Social Care caseloads %	Children with EHCP	Children with EHCP %
Waverley	29,263	391	1.3%	404	1.4%	1,705	5.8%
Guildford	28,732	507	1.8%	522	1.8%	1,828	6.4%
Woking	23,399	486	2.1%	501	2.1%	1,473	6.3%
Surrey Heath	19,258	363	1.9%	362	1.9%	1,053	5.5%
Runnymede	17,666	381	2.2%	396	2.2%	1,156	6.5%
Spelthorne	22,473	559	2.5%	578	2.6%	1,577	7.0%
West total	140,791	2,687	1.9%	2,763	2.0%	8,792	6.3%

Table 3: Service demand for Children's Services across proposed geography for unitarisation, population estimates for England and Wales mid-2023 and CFLT service data

Potential impacts:

As more work is done to disaggregate services, further analysis will be carried out on the potential implications. There are some general risks posed by service disaggregation on groups of older adults and children who receive social care support.

Negative:

- Older adults often rely on stable, long-term care relationships. Disaggregation might lead to reassignment of cases, new care teams, or delays in services during the transition. Likewise, children and families might experience disruption if their caseworker changes or if a transition between authorities results in administrative delays.
- As the new unitary authorities establish themselves, they may decide over time to adopt different eligibility criteria, service models, or care quality standards. Additionally, each authority might offer different early help services, family support models, or access to mental health programs. This could lead to disparities depending on which area the residents live.

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- Some older adults may receive services from providers based in another authority area. This may lead to more complex care coordination arrangements across the two unitary authorities, which may create uncertainty for the residents affected.
- Staffing costs and shortages caused by increased competition for qualified carers could become an issue as the new unitary authorities bid for the same pool of staff. Additionally, there might be an unequal distribution of experienced staff, funding, and infrastructure between the two authorities. This could leave one area under-resourced, affecting the timeliness and quality of care.
- Disaggregation could fragment critical services like safeguarding boards, referral pathways, and multi-agency cooperation, potentially leaving vulnerable children and adults at greater risk.
- If fostering and residential care placements are split between authorities, managing and funding out-of-area placements might become more complicated, potentially affecting the stability of care arrangements.
- As noted in the evidence base above, as the East has a higher dependency ratio, there are risks associated with potentially higher (and increasing) levels of demand on council services falling disproportionately on one of the proposed unitary authorities.

Positive:

- More localised services can be better tailored to meet the specific needs of local communities, whether supporting aging populations or children in need. Two unitaries may also better facilitate the design of care pathways that reflect local demographics and priorities.
- A tighter geographic focus can strengthen partnerships with schools, GP practices, care providers, police and community organisations.
- With more local control, services may become more responsive, reducing delays in assessments and support delivery.

Feedback from further consultation and engagement activities will help inform mitigating activity against potential negative impacts and wider service design. These more detailed analyses will also take more in-depth looks at less targeted, more universal services, for any potential disproportionate/ disparate implications for services users.

DISABILITY

Just under a quarter of Surrey residents (21.3%) were classified as having a disability under the Equality Act or had a long term physical or mental health condition (but day-to-day activities were not limited). One in 20 residents were classified as disabled under the Equality Act where their day-to-day activities were limited 'a lot' and represented 61,835 individuals. Over 100,000 residents were classified as disabled under the Equality Act (8.7%) whereby their day-to-day activities were limited 'a little'. The Census also collected information from people who had a long term physical or mental health condition and whose day-to-day activities were not limited. 7.4% of Surrey residents (89,595) fell into this category.

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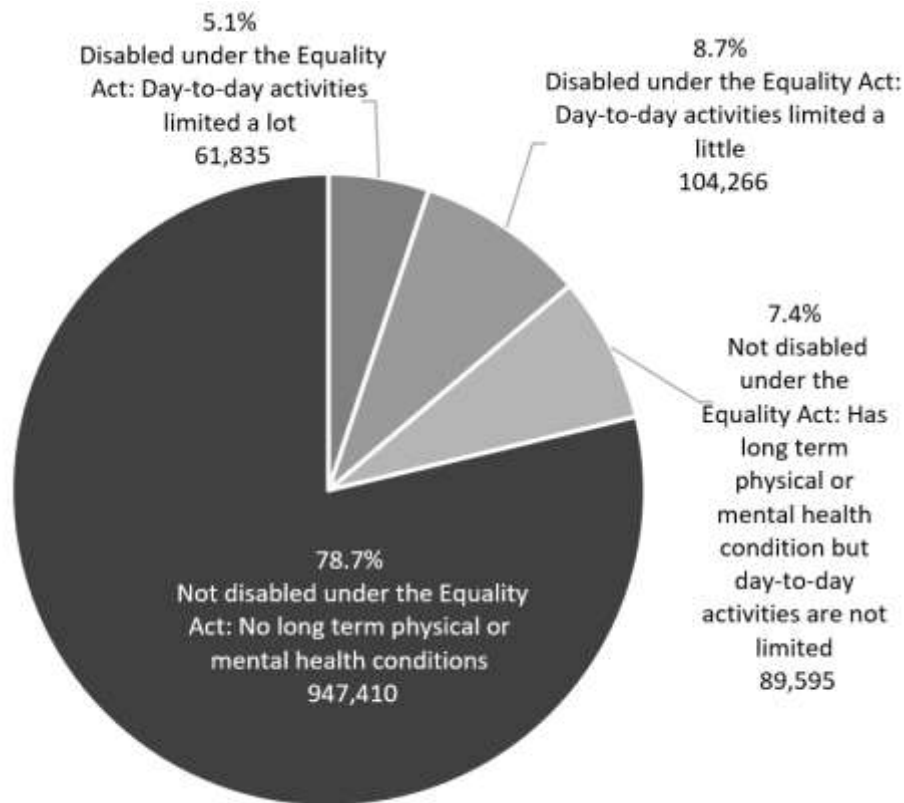


Figure 3: The non-age-standardised proportion of Surrey residents with a disability, Census 2021

Given the targeted nature of many services provided to severely disabled residents by Surrey County Council, any potential disruptions to delivery of these services as a result of LGR could have significant implications for Surrey's most vulnerable residents. As implementation planning progresses, analyses of impacts and further mitigating activity will be defined and acted on.

As shown in Figure 4, there is a significant variation in the spread of disability and long-term health conditions across the county, with the West having a slightly higher proportion of residents identifying as disabled.

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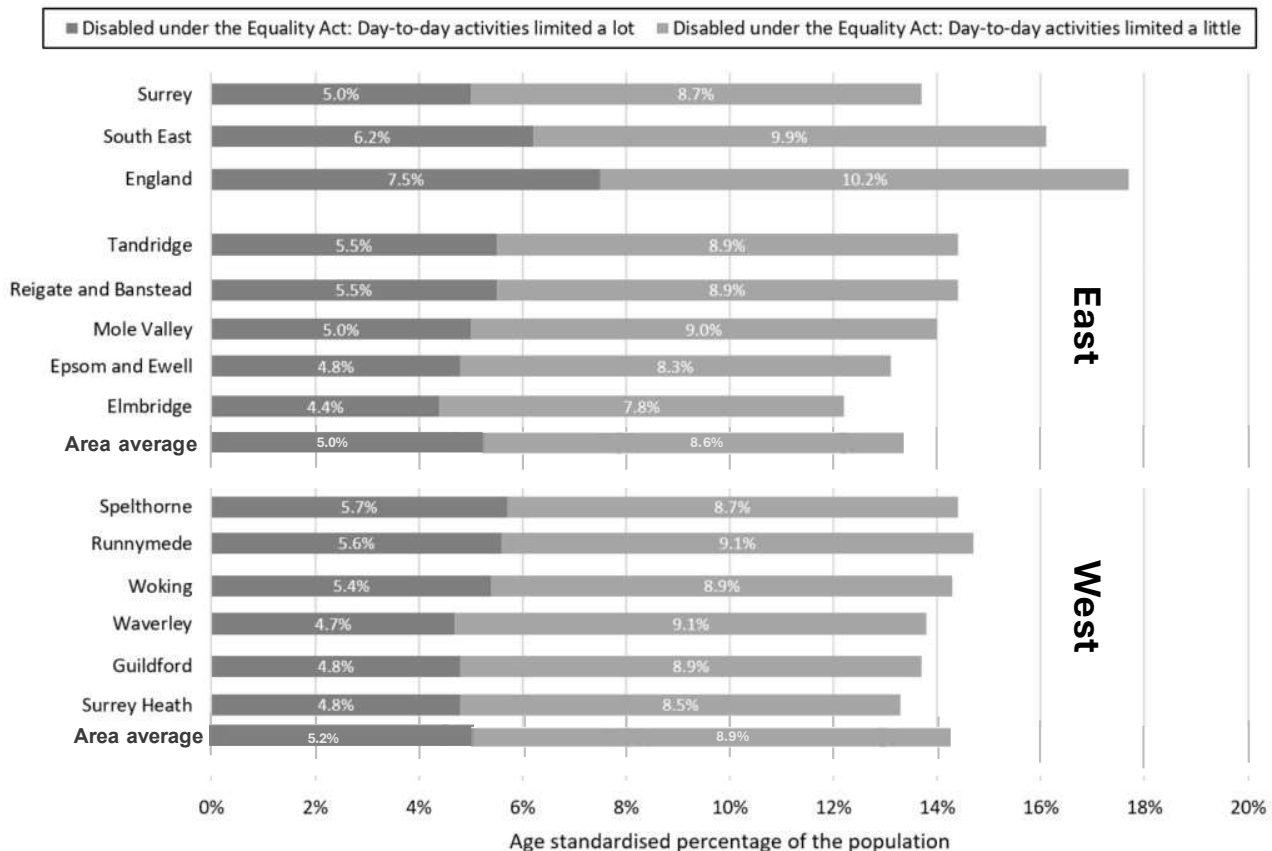


Figure 4: The age-standardised proportion of Surrey residents with a disability, Census 2021

Further development of the evidence base is ongoing, with the Joint Strategic Needs Assessment chapter updates on neurodiversity and physical disabilities and sensory impairment expected in due course.

More detailed analyses will also be carried out within the broader programme of disaggregation to assess the impact on any potential changes to specific services.

Potential impacts:

Based on the evidence base outlined above, there are some general risks posed by the disaggregation of services on residents with disabilities.

Negative:

- The initial process of unitarisation may temporarily interrupt services due to staffing changes, IT issues, or the need to reconfigure contracts and delivery models.
- Each new authority may adopt different policies, eligibility criteria, or funding levels, as well as potential impacts on capacity.
- For specialist services that require specific support for different disability groups, economies of scale may be lost when breaking up county-wide contracts or shared services, which could mean either disruptions in the service some residents receive or an overall reduction in quality as a result of cost-cutting to mitigate increased prices..

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- Functions like public health, safeguarding, highways, or emergency planning may suffer from a lack of joined up working across new boundaries. With new boundaries being created, opportunities to learn and share best practice on how best to design services that meet specific needs might be lost, or harder to share. This could mean residents miss out on potential improvements to care or new options for support/ treatment adopted elsewhere.

Positive:

- Services covering a smaller area may be more responsive to local needs, preferences, and priorities, which may also mean they could be more adaptable to specific needs and requirements of residents with disabilities.

GENDER REASSIGNMENT

Under the Equality Act (2010), an individual is perceived to have the gender reassignment characteristic if they have undergone or will undergo a process for the purpose of reassigning their sex. While there is little data on the number of people who come under this protected characteristic in Surrey, Census 2021 had a voluntary question that allowed people to state if they identified with a gender different to that of their sex recorded at birth.

Across Surrey, there were responses from 921,833 residents (94.79% of the population aged 16 years and over).

A total of 918,205 residents (94.42%) answered “Yes”, indicating that their gender identity was the same as their sex registered at birth.

A total of 3,628 residents (0.37%) answered “No”, indicating that their gender identity was different from their sex registered at birth.

Within this group:

- 1,361 (0.14%) answered “No” but did not provide a write-in response
- 731 (0.08%) identified as a trans man
- 756 (0.08%) identified as a trans woman
- 495 (0.05%) identified as non-binary
- 287 (0.03%) wrote in a different gender identity

In terms of how these statistics are distributed across Surrey, as shown in Figure 5, there is a great variance across the county:

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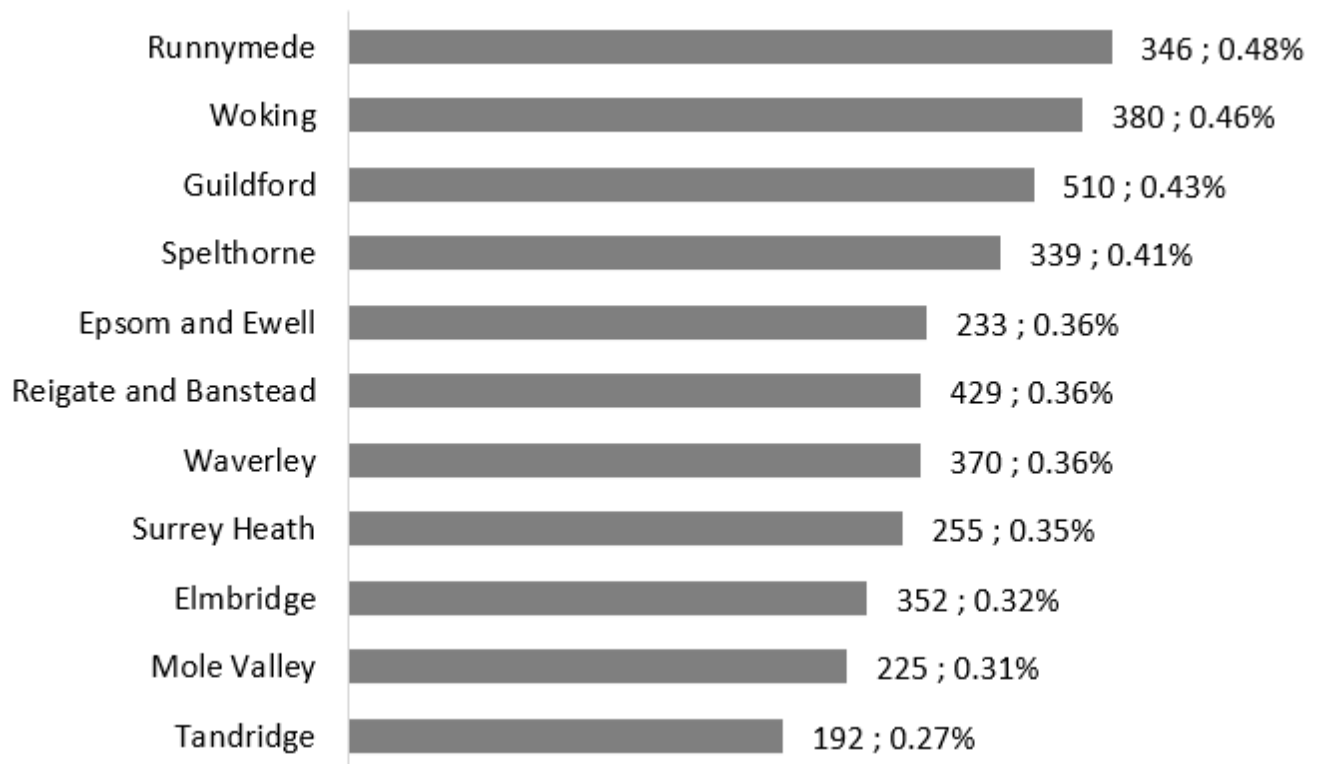


Figure 5: The percentage of Surrey residents aged 16 and over who reported that their gender identity was different from their sex registered at birth, Census 2021

The three areas with the highest prevalence of residents stating their identity was not the same as the sex registered at birth are all in the western unitary area.

Potential impacts:

Whilst specific impacts on gender reassignment may be harder to identify for the different services, there are some general risks, largely linked to the initial implementation and data migration that need to be considered.

Negative:

- As data is migrated across, there are increased risks that data on a residents pre-transition information may be used, leaked or information related to their transition may be lost.
- If there are specific support services offered to members of the public linked to transitioning, there could be a risk of disruption to services.

Positive:

- A more localised service could mean more personalised, inclusive support and access to gender identity services tailored to community needs.

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PREGNANCY AND MATERNITY

The crude birth rate (the number of births per 1,000 people of all ages, not adjusted for age or sex) for Surrey is significantly lower than England, although both have been declining. Crude rates are affected by the demographic make-up of a region. Surrey's relatively older population means it has proportionally less women of childbearing age than England, which may explain its lower crude birth rate.

The general fertility rate (GFR) (the number of live births per 1,000 female population aged 15 to 44, which adjusts for women of childbearing age in an area) for Surrey is slightly higher than England at 52.9 per 1,000 females aged 15 to 44 years; slightly higher than the England average of 51.9. A higher general fertility rate (GFR) means that, on average, more children are being born to women of reproductive age (typically defined as 15-49 years old) in Surrey.

Additionally, looking at data from the [ONS in 2023](#) (listed below), there is also a relatively high proportion of children born in Surrey to one or more parents from outside the UK:

Area	Live births where either one or both parents are born outside of the UK Percentage of all live births 2023
Surrey	36.3
Elmbridge	37.7
Epsom and Ewell	41.9
Guildford	36.0
Mole Valley	31.3
Reigate and Banstead	34.9
Runnymede	33.6
Spelthorne	45.4
Surrey Heath	33.6
Tandridge	22.8
Waverley	27.5
Woking	50.3

Table 4: Live births where either one or both parents are born outside the UK 2023 by Surrey district and borough

The table shows there is a great disparity between the rates across the county. This has implications for how demand is spread on new maternity and early years support services across the new authorities.

Potential impacts:

Negative:

- During the initial process of unitarisation, service disaggregation could cause gaps in care, especially in the transition from pregnancy to postnatal services. This disruption in care could also impact joined up working with the NHS, impacting the quality of care some residents may receive.
- There is also the risk of variations in maternity support policies, childcare funding, or access to parenting programmes across the two authorities.

Positive:

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- The new local authorities may strengthen links between social care, health visitors, and maternity services at a community level, improving wraparound support.
- As services become slightly more localised, it could mean easier access to parent-focused services (e.g. family hubs, early years care) if organised more locally.

RACE (INCLUDING ETHNICITY)

Three quarters of Surrey residents reported that they identified as White British in 2021, alongside 8.9% who reported that they were 'White Other' and 14.5% who reported that they identified as ethnicities which were not White.

The residents who identified as Asian made up the largest percentage of the non-White Surrey population and represented 7.7% of all Surrey residents in 2021. Those who identified as Mixed or of Multiple ethnicity represented 3.4% of the overall Surrey population and residents who identified as Black represented 1.7%.

In terms of what the racial and ethnic makeup of Surrey as a county looks like when broken down by area, it is clear there are some variances, as shown in Figure 6:

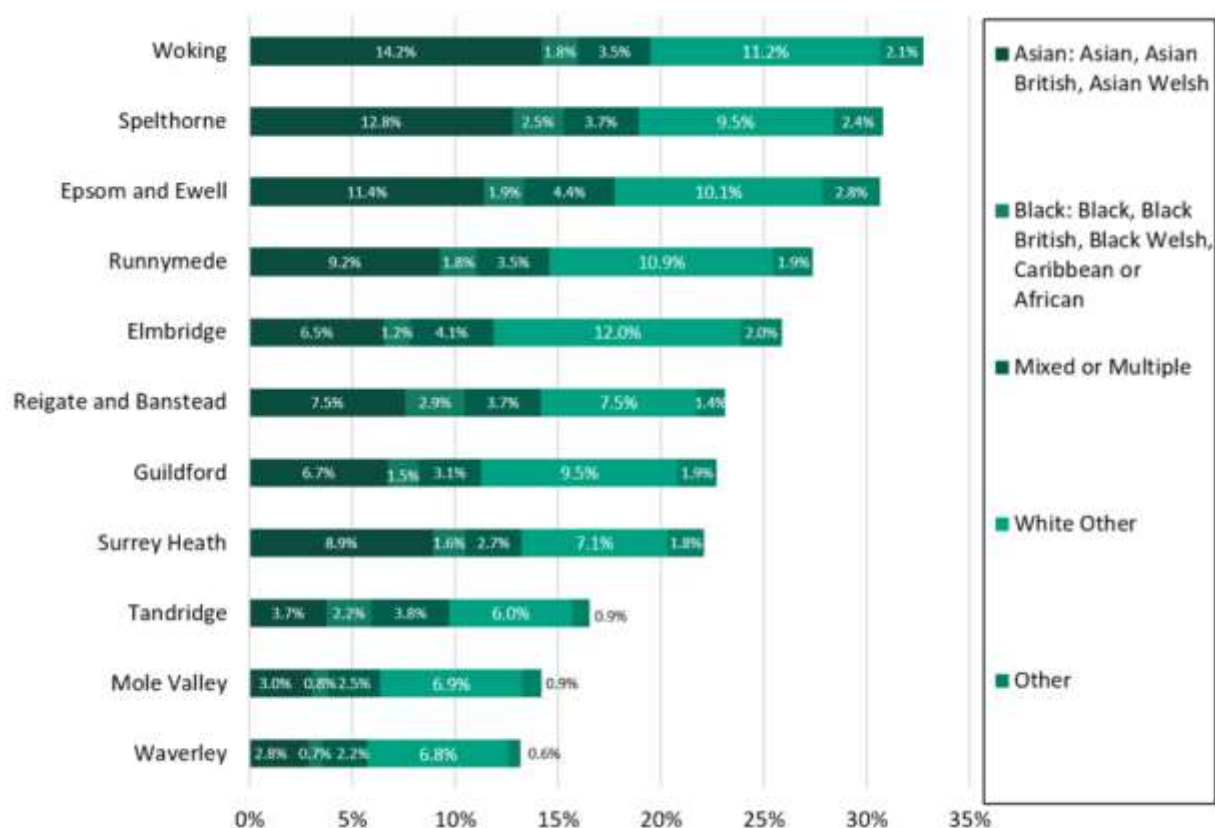


Figure 6: Representation of non-White British ethnic groups within Surrey, Census 2021

We are also aware of growing disparities in outcomes for certain racial and ethnic groups in Surrey such as for Gypsy, Roma and Irish traveller communities. We know through [census and other sources of data](#) that these groups are already at risk of discrimination and require additional support, with a growing number becoming eligible for specific support – particularly in schools – such growing eligibility for free school meals, and a growing gap in educational

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attainment outcomes. We also know from the [latest 2025 dataset](#), that other groups such as Bangladeshi and Black Caribbean boys have lower levels of educational attainment, in particular in levels of expected reading comprehension.

Potential impacts:

There are some general risks and potential impacts related to disaggregation of services that we should be mindful of. Most of which could also more generally be seen in any changes to the way services are delivered.

Negative:

- In cases where English is not the first language in the household, there is a risk of unequal access to interpreting, translation, or culturally appropriate services if not prioritised in both authorities.
- There are also potential issues linked to the loss of any centralised equality teams or infrastructure that previously supported anti-racism initiatives across the county.

Positive:

- New authorities may develop more culturally responsive services tailored to the demographics of their specific area.

RELIGION OR BELIEF

The 2021 Census asked about religion, but this question was voluntary and 'no religion' was an accepted and popular answer. In Surrey, 93.7% of respondents answered the religion question.

Christianity was the largest religion reported by Surrey residents on the 2021 Census Day. Half of Surrey residents reported that they were Christian (603,072). Over a third (36.6%) of Surrey residents also reported 'no religion' (40,069).

Non-Christian religions were reported by 7.0% of Surrey residents (84,641) in 2021. Islam was the second most common religion in Surrey, where Muslims represented 3.2% of Surrey residents (38,138).

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Local authority	% No religion	% Christian	% Buddhist	% Hindu	% Jewish	% Muslim	% Sikh	% Other religion	% Not answered	Total population
Elmbridge	35.4%	52.0%	0.5%	1.6%	0.5%	2.5%	0.5%	0.4%	6.4%	138,753
Epsom and Ewell	35.7%	48.1%	0.7%	3.6%	0.3%	4.9%	0.3%	0.4%	6.1%	80,938
Guildford	39.7%	48.2%	0.7%	1.4%	0.3%	2.2%	0.2%	0.5%	7.0%	143,649
Mole Valley	38.4%	52.2%	0.4%	0.7%	0.2%	1.2%	0.1%	0.4%	6.3%	87,387
Reigate and Banstead	38.1%	49.1%	0.5%	2.4%	0.2%	3.1%	0.2%	0.4%	6.0%	150,846
Runnymede	34.8%	50.4%	0.5%	2.3%	0.3%	2.9%	1.4%	0.5%	6.9%	88,079
Spelthorne	31.2%	50.9%	0.7%	4.2%	0.2%	4.0%	2.5%	0.5%	5.7%	102,955
Surrey Heath	36.0%	50.0%	1.1%	2.2%	0.2%	3.1%	1.2%	0.5%	5.7%	90,457
Tandridge	38.9%	51.2%	0.4%	1.2%	0.2%	1.3%	0.1%	0.4%	6.4%	87,872
Waverley	39.0%	51.9%	0.4%	0.4%	0.2%	1.2%	0.1%	0.5%	6.3%	128,229
Woking	33.3%	47.6%	0.6%	2.4%	0.2%	9.4%	0.3%	0.5%	5.8%	103,943

Figure 7: The prevalence of religion within Surrey boroughs and districts, Census 2021

As shown in Figure 7 (above), there are clear variances with some areas of the county seeing greater concentrations of some religions, beliefs and communities than others. With generally higher levels of religiosity found in the north of the county and around more urban parts of the county.

Whilst it is therefore difficult to quantify potential impacts related to this characteristic, faith communities can be important sources of support for people, including older people and newly arrived populations so consideration should be given as implementation progresses as to how to ensure we engage with faith groups where needed.

SEX

According to the 2021 census, 51.3% of Surrey's population is female. This is slightly above the national position for England of 51.0%, reflecting our older population structure. Tandridge (at 51.8% female) has the largest female population, and Woking (at 50.3%) the lowest.

The proportion of residents who are female generally increases with age: 48.7% of those aged 4 or under are female, compared to two thirds (67.6%) of those aged 90 or older.

Given the current proportions of male and female, universal changes that would impact all residents would disproportionately impact women.

The East of the county has a higher proportion of women, so potential options for unitarisation may have disproportionate impacts depending on how unitary authorities are structured.

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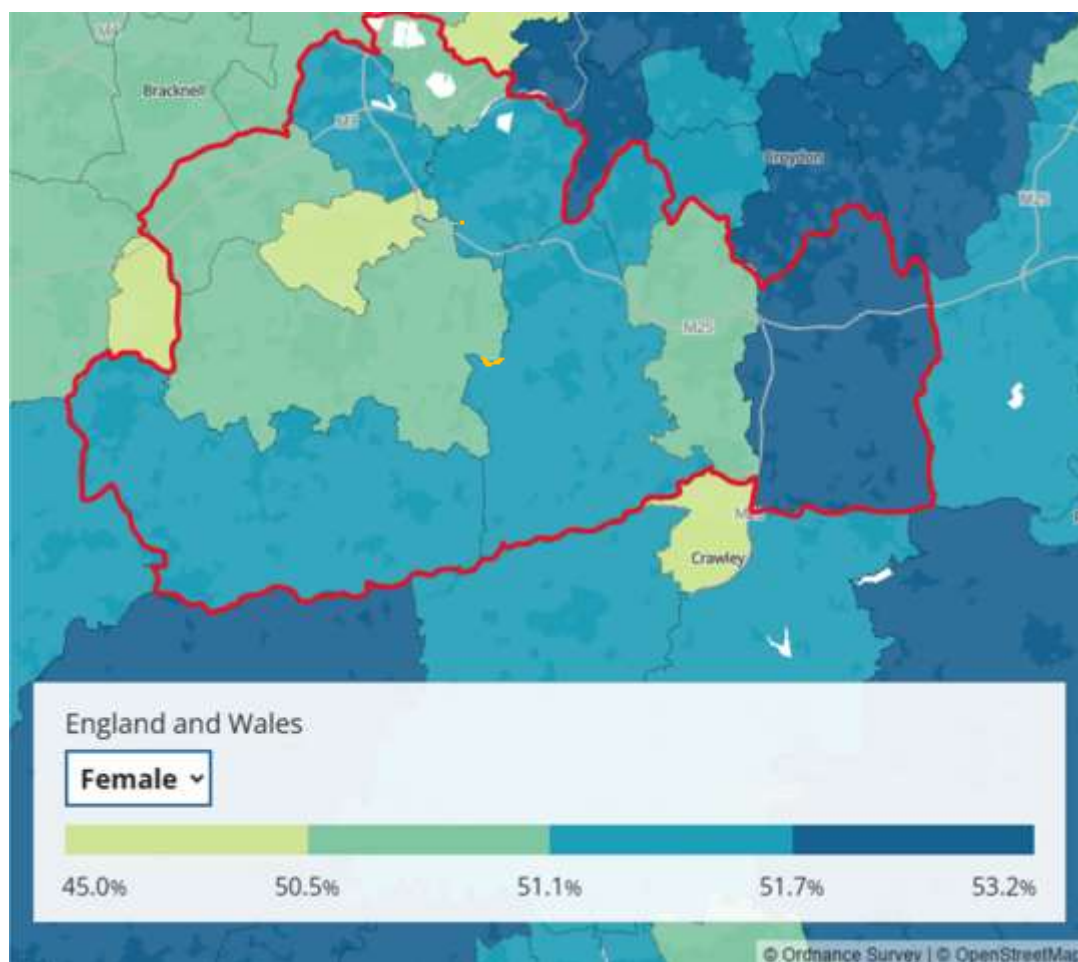


Figure 8: Map of Surrey showing percentage of the population which is female, Census 2021

Based on some provisional analysis on the proposed geographies, as outlined in Table 3 (below), For males, the East has a larger life expectancy gap compared to the West. For females, the East also has a large life expectancy gap.

Scenario	Sex	Type	Local Authority	Area Name	Years (Gap)
East	Male	Min	Tandridge	Portley	77.6
East	Male	Max	Tandridge	Warlingham West	88.0 (10.4)
West	Female	Min	Spelthorne	Ashford North and Stanwell South	81.2
East	Female	Max	Tandridge	Woldingham	93.5 (12.3)
West	Male	Min	Surrey Heath	St Michaels	77.7
West	Male	Max	Waverley	Farnham Bourne	87.3 (9.6)
West	Female	Min	Runnymede	Chertsey St Ann's	81.6
West	Female	Max	Guildford	Pirbright	92.5 (10.9)

Table 5: Analysis of life expectancy differentials for proposed unitary geographies

Potential impacts:

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Negative:

- [Research](#) suggests women are more likely to rely on county council and district and borough services (both targeted and universal) and so disruption of any significant kind to service delivery would likely disproportionately impact them.
- We also know from service-level data that we have more older women than men, therefore they are more likely to be affected by any potential disruption to adult social care.
- There could be potential impacts linked to the risk of diluting county-wide strategies for tackling gender inequality if efforts are not mirrored across both new authorities.

Positive:

- Unitarisation and a general review of service delivery could present opportunities to review work which aims to tackle gender-based service disparities (e.g. in domestic abuse, workforce inequality) through targeted local strategies.

SEXUAL ORIENTATION

Sexual orientation was included in the Census for the first time in 2021. In total, 905,795 Surrey residents answered the question (93.1% of the Surrey population aged 16 years and over which is slightly higher than the 92.5% of the England population).

- 881,673 people (90.66% of the Surrey population aged 16 years and over) identified as straight or heterosexual
- 11,355 (1.17%) described themselves as gay or lesbian
- 10,232 (1.05%) described themselves as bisexual
- 2,535 (0.26%) selected "Other sexual orientation"

The overall number of residents of Surrey who identified with an LGB+ orientation (representing all sexual orientations apart from heterosexual and straight) was therefore 24,122 and represented 2.48% of the population aged 16 years and over.

As with other characteristics, the diversity of answers varied across the county (see Figure 9 below):

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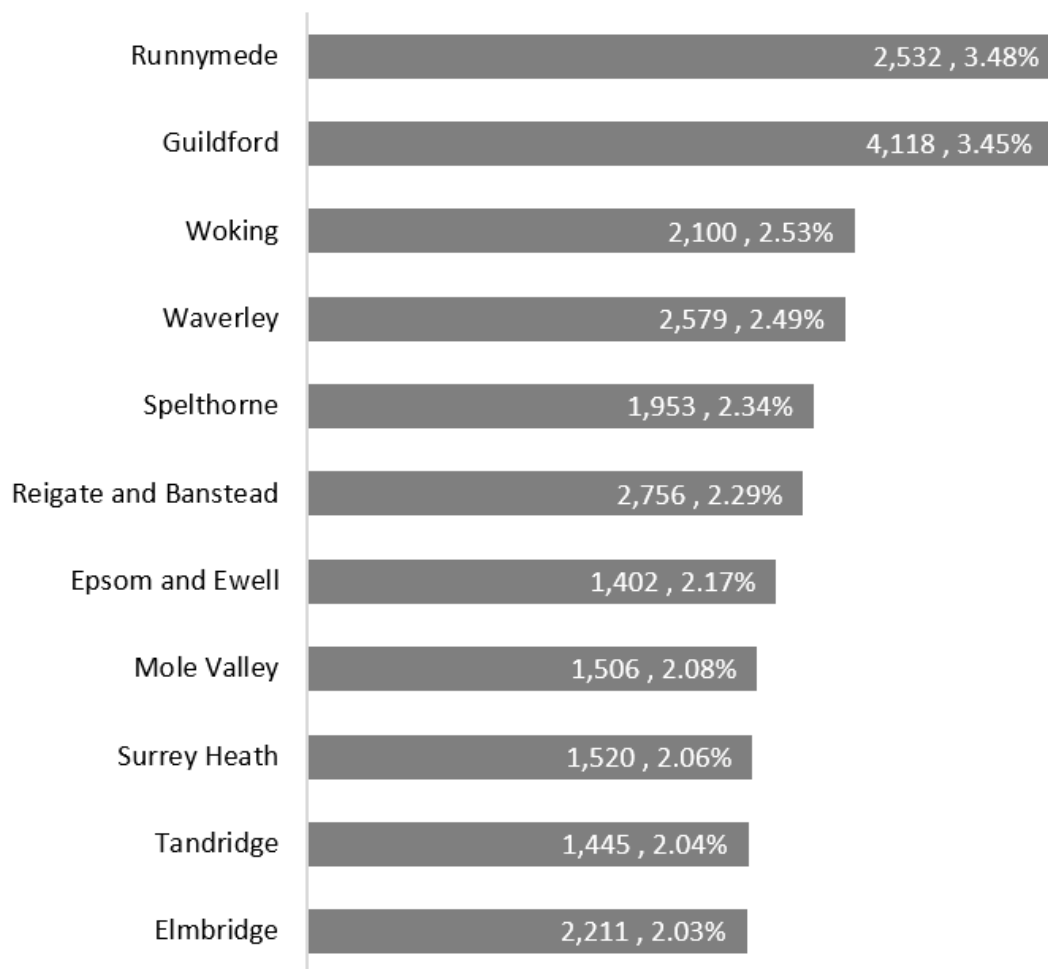


Figure 9: Percentage of Surrey residents aged 16 and over who reported identifying with an LGB+ orientation, Census 2021

The four areas with the highest proportions of those identifying as LGB+ are in the West. This would mean that potential changes that have disproportionate impacts on those who identify this way, would more widely impact residents in the west of the county.

There is limited information available that could suggest significant impacts for residents based on sexual orientation. There are some potential risks more associated with the partner organisations we are involved with and how we link up with voluntary, community and faith sector (VCFS) partners who provide support related to sexual orientation. It is therefore likely that any significant changes in how funding streams, support services and general cooperation through these groups are impacted may have knock-on implications, particularly for LGB+ people. More detailed analysis will be developed as further implementation plans are drawn up.

MARRIAGE/ CIVIL PARTNERSHIP STATUS

At this stage, it is not possible to identify specific impacts for people based on this characteristic. If the Government approves Surrey County Council's proposal, this EIA will be updated as new impacts are identified through consultation and engagement with stakeholders and data analysis.

There are potentially implications associated with the disaggregation of registration services, though the exact details on these potential impacts won't be known until it is clear what the proposed disaggregation programme of work will involve.

SOCIO-ECONOMIC STATUS

The Index of Multiple Deprivation 2019 (IMD) is the official measure of relative deprivation for small areas in England.

There are 32,844 small areas, called Lower-layer Super Output Areas (LSOA) in England with an average of 1,500 residents. The Index of Multiple Deprivation ranks every LSOA in England from 1 (most deprived area) to 32,844 (least deprived area).

It is common to describe how relatively deprived a small area is by saying whether it falls among the most deprived 10%, 20% or 30% of small areas in England (although there is no definitive cut-off at which an area is described as 'deprived').

To help with this, deprivation 'deciles' are published alongside ranks. Deciles are calculated by ranking the 32,844 small areas in England from most deprived to least deprived and dividing them into 10 equal groups. These range from the most deprived 10% of small areas nationally to the least deprived 10% of small areas nationally.

As seen in Figure 10, the most recent IMD data suggests that there are pockets of deprivation hidden across the county, meaning that any changes to services that will have disproportionate impacts in those facing socio-economic disadvantage will be spread across the county and more acutely felt in particular in more densely populated areas like Hooley, Merstham, Woking and Guildford.

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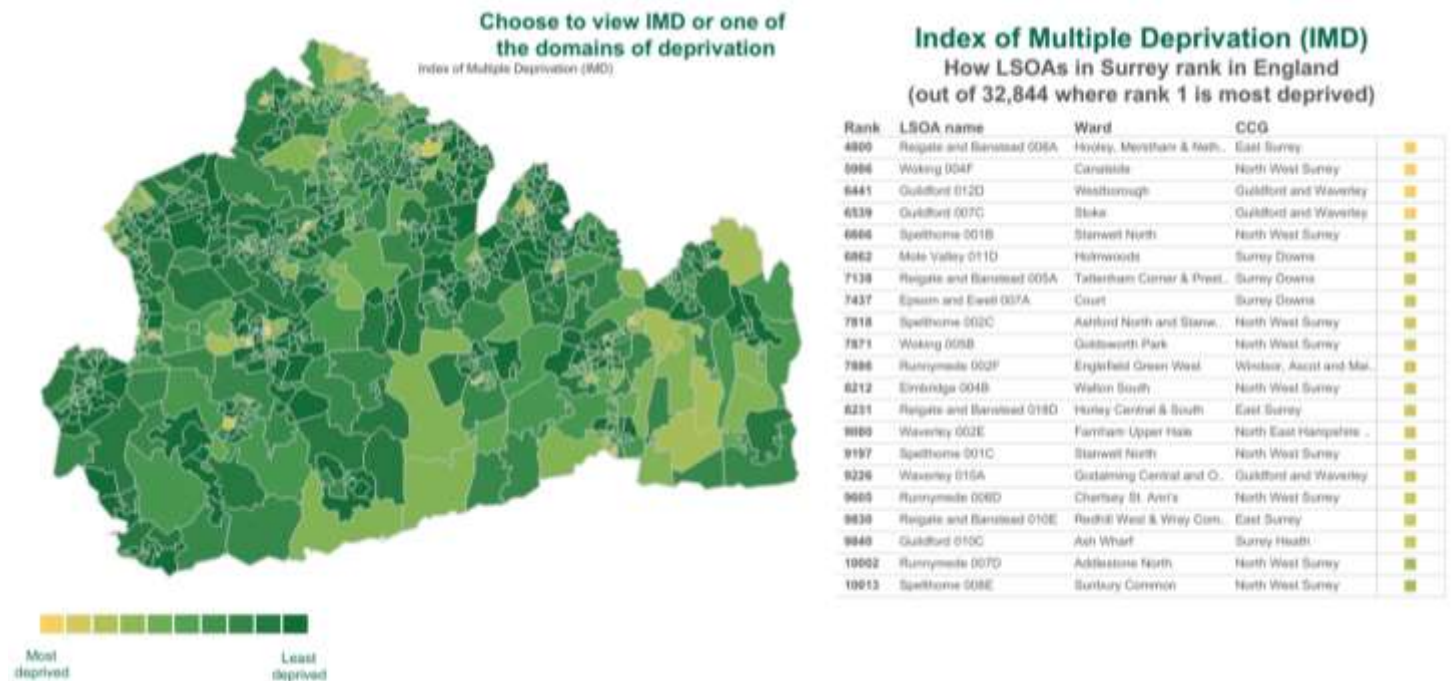


Figure 10: IMD overview for Surrey, Source: Surrey-i

In addition to the IMD data, we also have information from the 2021 Census which looks at household deprivation by four 'dimensions':

- **Employment:** where any member of a household, who is not a full-time student, is either unemployed or long-term sick.
- **Education:** no person in the household has at least five or more GCSE passes (grade A* to C or grade 4 and above) or equivalent qualifications, and no person aged 16 to 18 years is a full-time student.
- **Health And Disability:** any person in the household has general health that is "bad" or "very bad" or has a long-term health problem.
- **Housing:** the household's accommodation is either overcrowded, with an occupancy rating of negative 1 or less (implying that it has one fewer room or bedroom required for the number of occupants), or is in a shared dwelling, or has no central heating.

Surrey, on average, had fewer households which were deprived than other parts of the South East and England with 57.1% of households which did not meet any of the dimensions of deprivation. Overall, 42.9% of Surrey households (representing 206,798 households) were deprived in at least one of the dimensions, which was lower than the national (51.6%) and regional (48.0%) averages.

Some households had a combination of disadvantage and there were 733 Surrey households which met all four of the dimensions of deprivation, and 9,670 which met three of the four dimensions.

The highest proportion of households which met at least one dimension of deprivation was in Spelthorne (49.1%) and the lowest was in Elmbridge (38.1%). Every borough and district in

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Surrey had lower overall proportions of households which met at least one dimension of deprivation than the national average, and only Spelthorne had a higher proportion than the South East overall.

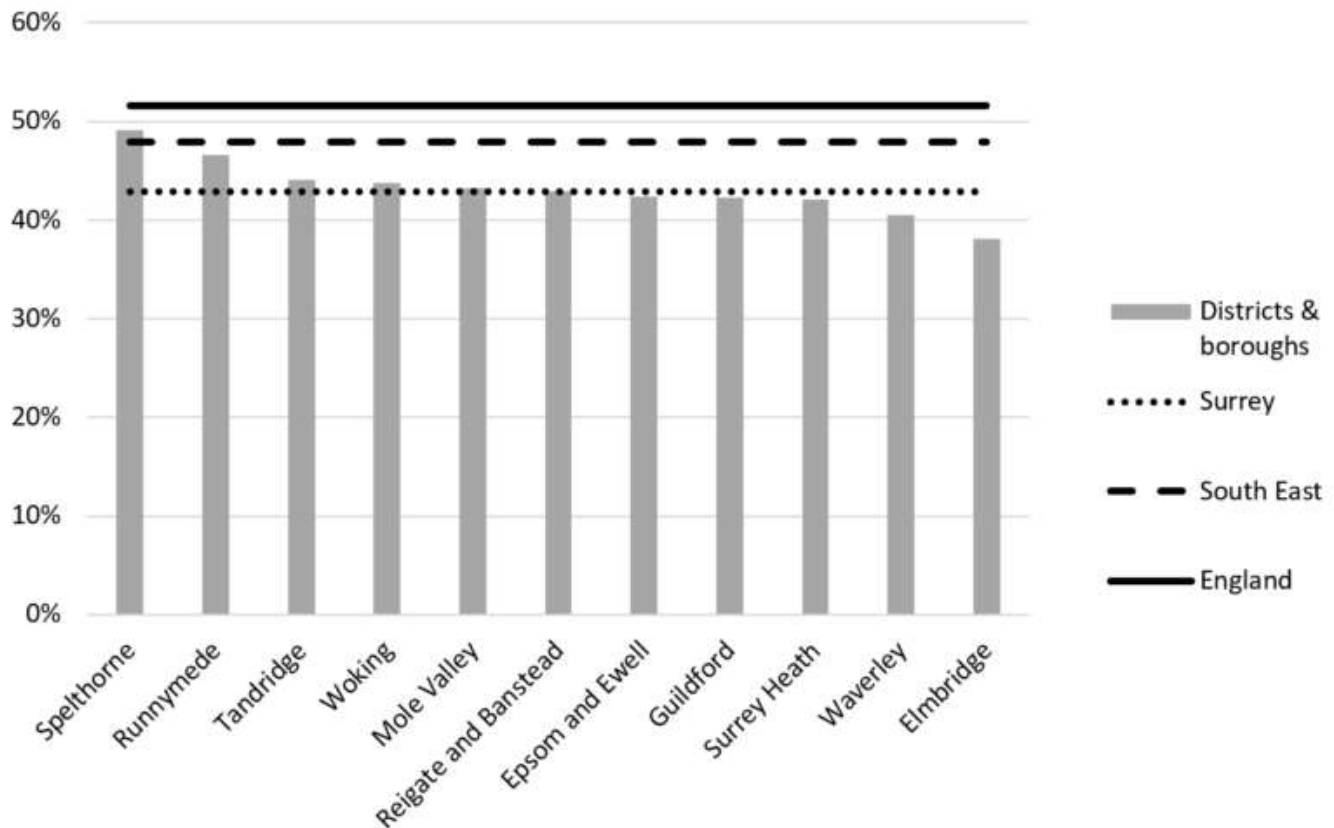


Figure 11: The percentage of Surrey households which were considered deprived in at least one of the four dimensions of deprivation, Census 2021

When looking more specifically at how LSOAs are distributed across the proposed unitary areas, the data in Table 6 (below) would suggest very similar levels of overall deprivation across both unitary authority areas. Given Spelthorne has a slightly higher than the South East regional average for deprivation, there could be the potential for higher demand on means-tested/targeted services, though more detailed analysis will have to be carried out for practical implications of service disaggregation.

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NATIONAL DECILES											
most deprived				least deprived							
		LSOAs in decile 1	LSOAs in decile 2	LSOAs in decile 3	LSOAs in decile 4	LSOAs in decile 5	LSOAs in decile 6	LSOAs in decile 7	LSOAs in decile 8	LSOAs in decile 9	LSOAs in decile 10
Overall Deprivation	2.1 East		0.32%	1.90%	5.71%	4.44%	8.25%	9.84%	14.92%	19.37%	35.24%
	2.1 West	0.00%	0.76%	2.27%	5.79%	7.30%	7.56%	10.58%	13.60%	19.40%	32.75%
Income Deprivation	2.1 East		0.95%	2.86%	4.76%	5.08%	9.21%	11.43%	16.51%	16.51%	32.70%
	2.1 West	0.00%	0.76%	3.27%	6.05%	7.56%	11.34%	9.82%	10.58%	17.63%	33.00%
Employment Deprivation	2.1 East		0.32%	3.81%	3.17%	6.03%	8.57%	9.52%	13.65%	18.73%	36.19%
	2.1 West	0.00%	0.76%	1.51%	6.05%	7.30%	6.80%	13.10%	11.34%	15.87%	37.28%
Education, skills and training	2.1 East	0.95%	1.59%	5.71%	4.76%	5.08%	8.89%	11.11%	14.60%	15.56%	31.75%
	2.1 West	1.01%	4.53%	6.05%	7.56%	6.30%	7.30%	10.33%	13.35%	14.36%	29.22%
Health and Disability	2.1 East		0.32%	1.59%	2.54%	4.44%	6.35%	7.94%	13.33%	18.73%	44.76%
	2.1 West	0.00%	0.00%	2.02%	3.78%	5.54%	7.30%	9.07%	16.62%	21.16%	34.51%
Crime	2.1 East		6.03%	5.40%	10.48%	12.70%	17.14%	17.78%	14.92%	10.16%	5.40%
	2.1 West	0.25%	3.02%	5.54%	6.05%	10.33%	17.38%	11.34%	15.62%	14.36%	16.12%
Barriers to Housing and Services	2.1 East	7.94%	9.84%	7.94%	11.11%	13.97%	12.70%	14.92%	8.57%	9.21%	3.81%
	2.1 West	7.30%	13.35%	15.11%	13.60%	12.09%	9.82%	10.08%	8.82%	7.30%	2.52%
Living Environment	2.1 East	0.32%	1.59%	2.86%	5.40%	13.65%	21.27%	27.62%	17.78%	8.89%	0.63%
	2.1 West	1.01%	1.76%	4.53%	8.82%	12.59%	13.85%	15.87%	14.86%	18.89%	7.81%

Table 6: LSOAs in different deciles by unitary authority area.

Potential impacts:

Whilst we have useful data to understand the spread of deprivation and the impacts it has on wider determinants of health and many other aspects of how residents live their lives, at the business case stage of LGR, it isn't clear what the specific implications of any proposed changes will be. We are, however, able to identify how residents living in more deprived areas might be impacted.

Negative:

- One of the new authorities may inherit a higher concentration of deprivation but fewer resources, leading to stretched services and reduced revenue raising potential. This risks a greater widening of unequal outcomes and disparities in the level of service delivery.
- The potential breaking up of county-wide services (e.g. youth employment support, transport subsidies, or digital inclusion programmes) may reduce access or make provision more expensive per capita.
- As with other more targeted services later into the implementation process, if new authorities adopt different eligibility criteria, application processes, or digital systems, low-income residents (especially those with lower digital literacy or language barriers) may struggle to engage with services.

Positive:

- The new unitary authorities may have the freedom to tailor social and economic policies (e.g. on housing, employment, welfare support) to better reflect the unique socio-economic needs of their populations.
- Commissioning and procurement practices can be redesigned to prioritise local jobs, apprenticeships, and inclusive economic growth, with a more direct link between service planning and economic regeneration.
- There is also the potential that more localised services would mean a possible reduction in travel costs associated and reduced distances being travelled by residents.

CARERS

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Whilst a more detailed analysis will be completed later in the process on specific implications for residents who care for adults and children with additional needs or who require support, we do have some general information/ data to draw from on which how many residents who provide unpaid care or who would identify themselves as unpaid carers.

Census 2021 asked “Do you look after, or give any help or support to, anyone because they have long-term physical or mental health conditions or illnesses, or problems related to old age?”. People were asked to exclude anything they did as part of their paid employment. The wording of the question differs from the 2011 Census question, which began “Do you look after, or give any help or support to family members, friends, neighbours or others”.

Census 2021 was undertaken during the coronavirus (COVID-19) pandemic, which may also have influenced how people perceived and undertook their provision of unpaid care and therefore may have affected how people chose to respond.

At the time of the 2021 Census, 90,497 residents reported that they provided unpaid care (8.0% of usual residents). The largest groups within unpaid carers were residents who provided 9 hours or less unpaid care a week (3.5% of the usual population, representing 39,968 residents) and residents who provided 50 or more hours of unpaid care a week (2.1% of the usual population, representing 23,469 residents).

As shown in Figure 12 (below), the distribution of caring responsibilities varies across the county:

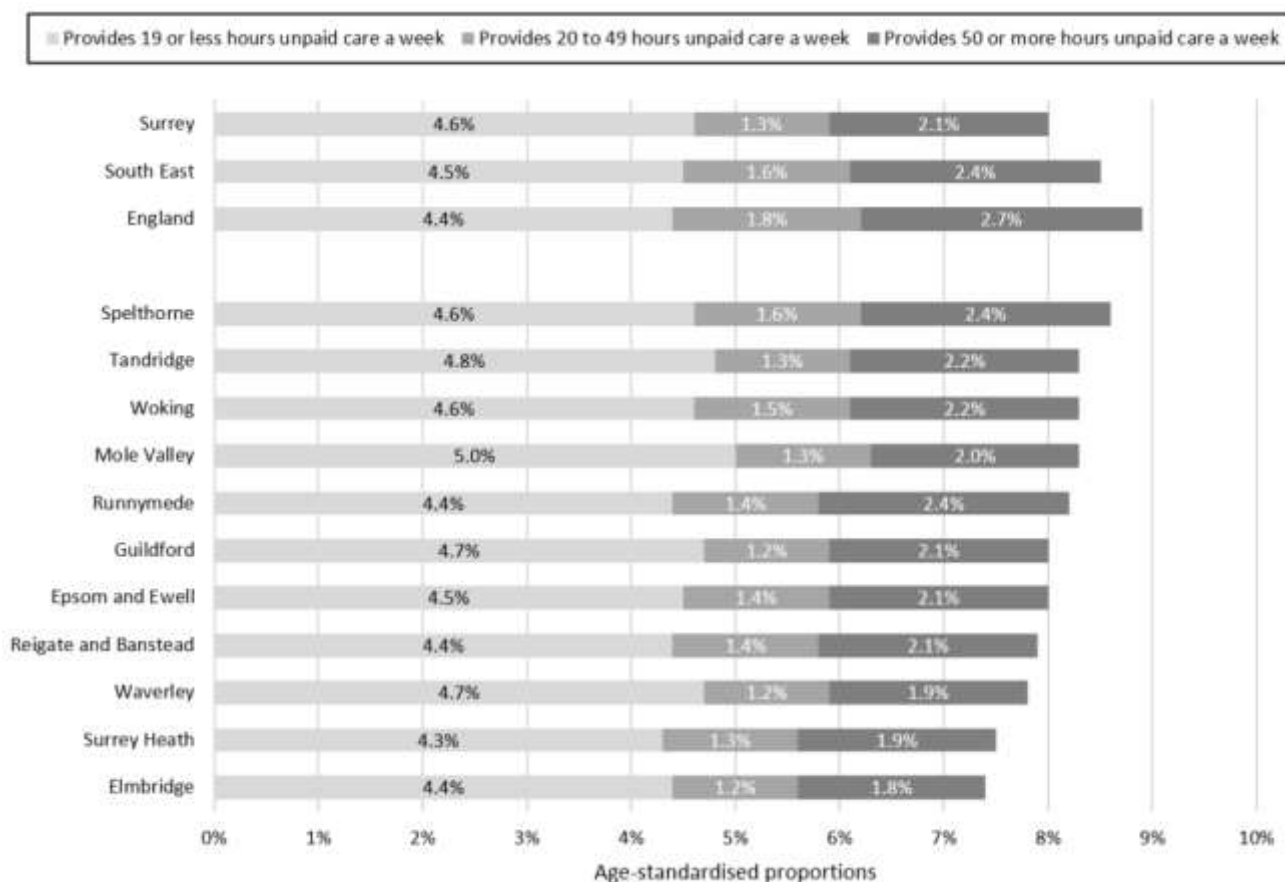


Figure 12: Age-standardised proportions of residents of districts and boroughs in Surrey who provided unpaid care, Census 2021

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When accounting for the age structure and population size, the proportion of Surrey residents who provided unpaid care (8.0%) was lower than the South East (8.5%) and England (8.9%) averages. Spelthorne had the highest age-standardised proportion of residents who provided unpaid care (8.6%), alongside the joint highest age-standardised proportion of residents who provided 50 or more hours of unpaid care a week with Runnymede at 2.4%. Elmbridge had the lowest age-standardised percentage of residents who provided unpaid care at 7.4%. As shown in the image below, evidence from SCC's own analysis suggests that women provide more care and the most care is provided by women in later middle age, especially 50-64 year-old age cohort.

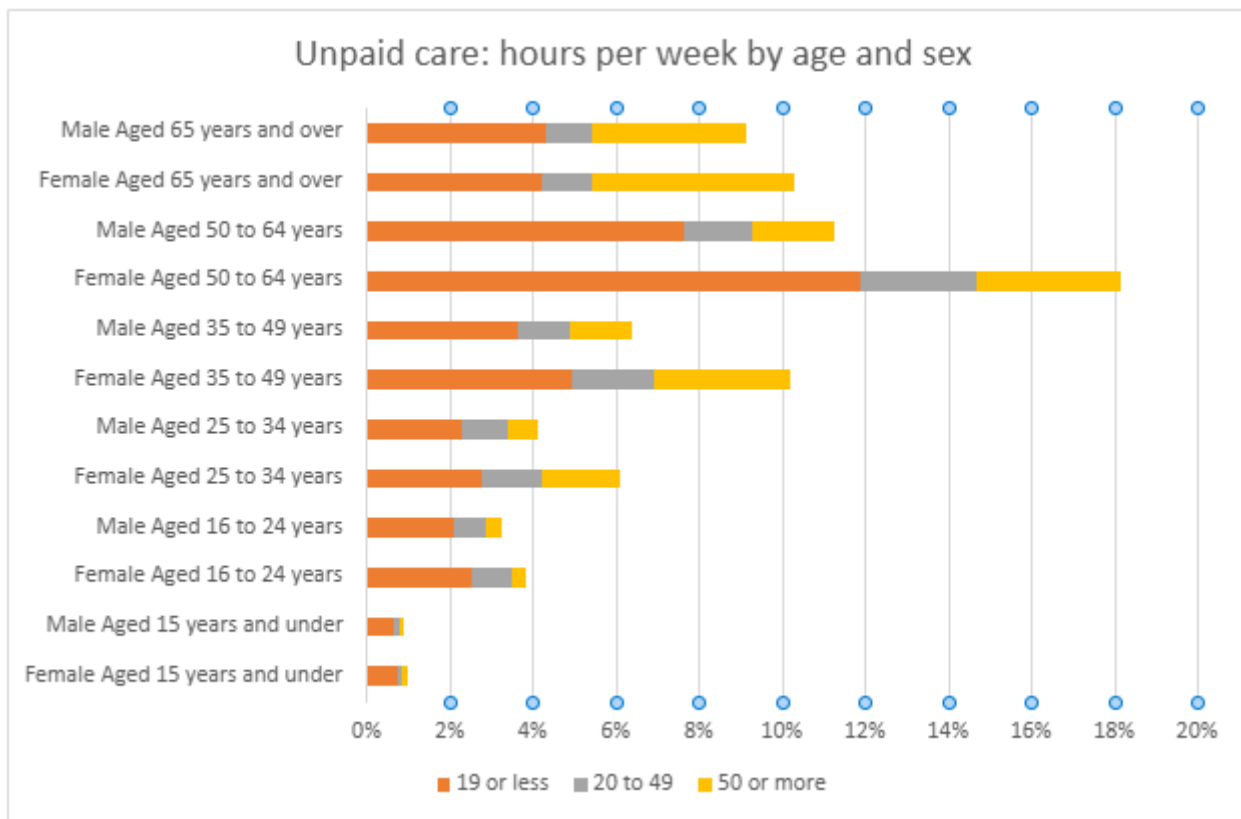


Figure 13: Hours per week of unpaid care provided by age and sex, Census 2021

Potential impacts:

As with other characteristics, more detailed and through analysis, including engagement with impacted residents, will be carried out later as implementation plans take shape and are delivered. There will also hopefully be more information on the scale of the potential impacts as the relevant JSNA chapter on unpaid carers is also in the process of being updated. There are some general implications it is worth being mindful of at this stage which will likely require some further investigation throughout the process of disaggregation.

Negative:

- One authority may offer better access to breaks, assessments, or financial support, creating postcode inequality. This also extends to the risk related to differences in eligibility criteria and thresholds for support which might exist between the different authorities.
- Carers may also struggle to find or access help during the reorganisation — especially those with limited digital access or complex caring roles.

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Positive:

- Smaller authorities may be more attuned to local carer needs and able to provide more tailored support (e.g. localised carer breaks, peer groups, or training).
- A closer partnership between local authorities and voluntary/community sector organisations may make carer services more accessible and better coordinated with community assets.

2.1 Mitigations for Impacts on Residents

At this stage, mitigations are defined in general terms and will be refined to be more specific as implementation plans are developed. Later in the process, when more detailed workstreams associated with LGR are initiated, colleagues across SCC will work to ensure that any potential negative impact are minimised and mitigated against, and any positive impacts, or opportunities for promoting fairness are maximised. Understanding how inequalities are experienced by residents under the current local government arrangements is essential. They need to be factored into the potential impacts on services from day one of the new authorities, as well as the overriding ambition that work already in train to reduce these existing inequalities continues.

It is likely that as more specific implementation activity is drawn up, work will be done to close any potential policy/ procedural disparities between the new authorities and consistency in policies linked to service delivery will be engaged.

Additionally, as services which currently sit at district and borough level are aggregated across the proposed unitarisation footprint, more work will be done to ensure greater consistency and that potential existing disparities are actively closed, whilst further disparities are prevented.

There are some general principles for mitigation that can be adopted throughout the process:

- Being sure to follow the statutory requirements on consultation with residents, as well as ensuring we explore more detailed and nuanced opportunities for additional engagement and insight.
- Ensure clear arrangements are in place to deal with the transition with no/ minimal impacts on service delivery.
- Ensuring that approaches to service reforms and alterations to policies or eligibility criteria set locally are evidence led and backed by a robust catalogue of supporting data.
- As part of the implementation process and development of internal policies, services can ensure that equality considerations are embedded from day one as well.

As implementation plans are developed, dependencies with existing transformation and change programmes will be mapped to identify where changes arising from structural reform could exacerbate any negative impacts for these residents. This also extends to existing priorities, policies and strategies of local district and borough councils which will need to be considered.

Any negative impacts that cannot be mitigated will be reviewed and information captured in future iterations of this EIA.

3. Staff

There will be significant impacts on working practices and changes to staffing as we transition to the new councils. Further work will be done to understand the specific impacts on select groups of staff from across the different services. For the final proposal, this analysis will outline the overarching staffing profile of Surrey County Council, to help inform decision-makers of potential scale of impacts on the workforce as a whole.

The data on staff is taken from the yearly EDI analysis of SCC staff published each year in March. The data below is taken from the March 2024 publication. Data on district and borough council staff was unavailable for this assessment.

As implementation plans are developed and closer working continues throughout the process, we will continue to analyse the potential impact of LGR on staff across all 12 of the current councils, and policies for the new authorities will ensure greater levels of consistency.

AGE

Data from 2024 suggests a gradual decline in the proportion of staff coming from the younger age brackets (in particular ages 13 – 24), but gradual increases in the proportion of staff from ages 25 – 39. The age range with the highest proportion of staff is also now age 50-54, having previously been ages 45 – 49 in the previous year.

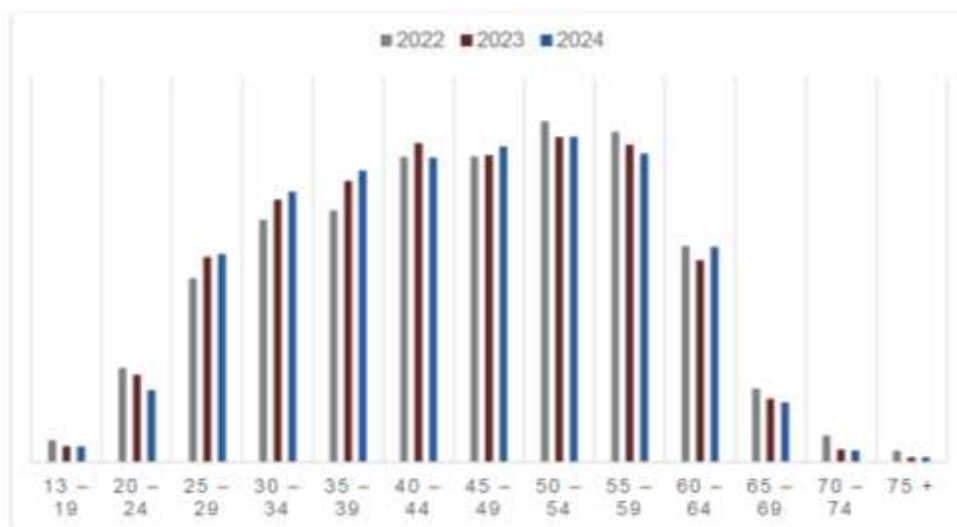


Figure 14: Statistics for members of Surrey County Council staff and their Age groups over the last three years

These ages groups are more likely to be disproportionately impacted by changes to working practices, policies and structures from the reorganisation process. There are of course more detailed ways of breaking down this data by service area and this will be done later on in the development process.

Where restructures to teams, changing to working practices or general reduction in staffing levels means some staff are made redundant, then there could be disproportionate impacts on these age ranges.

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Potential impacts:

Using the data above, we can generally start to identify some themes of potential implications.

Negative:

- Given the proportion of SCC staff over the age of 50, [research](#) suggests people aged 50 and over struggle most with finding work after being made redundant from their jobs.
- Where restructuring and changes to existing work arrangements occur, there are also potential risks of age bias in recruitment that HR policies will need to account for and actively seek to address.
- Younger staff in more entry-level/ junior roles may be more at risk of redundancy and may also have higher barriers to accessing work further afield if they are [TUPE'd](#) across to one of the unitary authorities which is further away from their homes and/or previous base for their role.

Positive:

- Given the change in roles and the restructuring that will follow implementation, there may be increased opportunities for younger staff to step into more leadership roles.
- New authorities could design age-inclusive professional development and flexible retirement policies.

DISABILITY

Analysis from over the last three years suggests that around 5.54% of staff have declared a disability, with the majority of those being front line staff:

Disability analysis	2022	2023	2024
Disabled	2.87%	4.20%	5.54%
Not stated	97.13%	95.80%	94.46%

Table 3: Summary percentages of staff who identify as disabled

Disability role analysis	2022	2023	2024
Disabled front line staff	2.28%	2.32%	2.95%
Disabled team leader	0.14%	1.10%	1.34%
Disabled middle manager	0.23%	0.96%	1.30%
Disabled senior manager & leadership	0.07%	0.09%	0.12%

Table 7: Staff who identify as disabled by role

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Potential Impacts:

As with other characteristics, it is expected that work will be done to align policies, and thus until these proposals are developed it may be difficult to pinpoint specific examples of potential impact. Given the different needs and workplace adjustments of current SCC staff, we can, however, make some general assumptions around certain implications that need to be considered.

Negative:

- As the new shadow authorities are set up and implemented, there is the risk of delays or breaks in continuity of adjustments (e.g. equipment, flexible hours, or specialist software) during team or office transitions.
- Disabled staff may be more affected by location changes, especially if transport or workplace accessibility is not prioritised.
- As the service disaggregation continues throughout the implementation process, there is the risk of potential loss of specialist knowledge (e.g. from disability staff networks, equality officers) if this inclusion infrastructure is not maintained in both new authorities.
- With changes to working practices or any TUPE of staff, there could be increased anxiety or stress from uncertainty which can particularly impact staff with mental health needs or neurodiverse conditions.

Positive:

- There is a potential for new authorities to embed accessibility into their physical spaces, HR systems, and remote/hybrid working setups from the outset.
- There is also opportunity for the new authorities to develop clearer inclusion policies which could lead to greater visibility and support for staff with non-visible disabilities or mental health conditions.

As the county works with partners and district and borough colleagues to become unitary authorities, work will be done to ensure that staff policies on workplace adjustments are in place and there is work done to ensure places of work are accessible for staff with disabilities. As with other characteristics though, the exact scale of some of the impacts and requirements may differ between services and a more detailed analysis will be carried out in due course.

GENDER REASSIGNMENT

There is currently no data available on Gender Reassignment. Work will be done to assess what potential impacts could be and what staff policies will need to be put in place. This will include engagement with the relevant groups and a greater understanding of potential impacts.

Potential impacts:

Whilst the exact extent or scale of the implication on gender reassignment are difficult to know, as with many other characteristics there are general impacts that can be associated with structural staffing changes that could require specific attention.

Negative:

- Risk of inconsistent HR practices and policies between authorities (e.g. how names/pronouns are recorded, dress codes, access to support). There may also be misalignment in policies at district and borough level that will need to be resolved as part of the TUPE process for the new authorities.

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Positive:

- The process of implementing and setting up of new authorities presents an opportunity to improve trans inclusion through updated training, gender identity policies, and facilities.

PREGNANCY AND MATERNITY

March 2025 data from Unit 4 suggests around 1.7% of staff currently on Maternity/ Paternity/ Parental leave. As and when more detailed implementation plans are developed, work will be undertaken to assess the potential scale of the impacts, and what staff policies will need to be put in place to support those on maternity leave, who are pregnant and due to go on maternity leave and those who are returning to work to ensure that there any restructures or changes to working practices pay due regard to potential impacts on those under this characteristic.

Potential impacts:

As outlined above, at this stage it isn't easy to judge the scale of the likely impacts, but there are some risks that need to be considered that are inherent to these particular types of organisational changes.

Negative:

- Staff on maternity leave during transition may face anxiety over job security, changes in line management, or altered roles.
- The need to TUPE roles over to one of the two new unitary authorities could require significant changes in working patterns and locations that could be different to what pregnant members of staff or new mothers agreed prior to going on maternity leave.
- As new organisations are set up there could be risks associated with processing leave, pay, or flexible working arrangements during reorganisation.

Positive:

- Converse to what has been outlined above, there is also the chance that more localised workforce planning may allow for better flexible working, return-to-work support, and accommodations.

RACE (INCLUDING ETHNICITY)

Current data suggests that around 11% of staff are from ethnic minority backgrounds, with the majority of which being in front line and team leader roles:

Ethnicity analysis	2022	2023	2024
Ethnic Minority Group (EMG)	10.14%	10.75%	11.00%

Table 8: Percentage of SCC staff who identify as a member of an ethnic minority group

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Ethnicity role analysis	2022	2023	2024
EMG front line staff	10.59%	11.00%	11.06%
EMG team leader	9.69%	14.41%	15.61%
EMG middle manager	9.69%	11.98%	11.39%
EMG senior manager & leadership	6.49%	6.47%	7.84%

Table 9: EMG percentage by job role type

Potential impacts:

As with other characteristics, whilst the exact composition of specific services with mean different levels of impact, generally speaking changes impacting frontline staff and team leaders will have disproportionate impacts on staff from ethnic minority backgrounds.

Negative:

- There is a potential risk of reduced focus on anti-racism work or equality initiatives if structures are fragmented or de-prioritised.
- Additionally there are communications-related risks where language barriers could impact communication during the transition, particularly for non-native English speakers.

Positive:

- Targeted staff engagement or inclusion strategies may reflect the local population better.

RELIGION OR BELIEF

With regards to religion and belief, the largest proportion of responses stated either Christianity or no faith/ religion – with a similar proportion choosing not to say or not stated:

Religion profile	2022	2023	2024
Buddhist	0.46%	0.41%	0.42%
Christian all faiths	28.89%	29.71%	31.14%
Hindu	1.16%	1.16%	1.26%
Jewish	0.07%	0.11%	0.14%
Muslim	1.65%	1.85%	1.87%
Sikh	0.22%	0.24%	0.30%

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Any other faith or religion	0.78%	2.42%	3.49%
No faith or religion	24.72%	28.50%	30.26%

Table 10: Summary of the proportion of staff who identify as having a particular religion/ belief

Potential impacts:

As with other characteristics, whilst the exact composition of specific services with mean different levels of impact, and a more thorough analysis will be carried out when more information becomes available.

Negative:

- There is a risk of religious needs being overlooked during office moves, reallocation, or new policy development. This includes the need for prayer rooms or a multi-faith space needing to be accommodated if staff are asked to relocate and work from a new location.

Positive:

- As with other changes to the physical/ office spaces as a result of unitarisation, LGR presents an opportunity to design inclusive workspaces (e.g. multifaith rooms, culturally appropriate catering) or flexible leave policies.

SEX

As shown in the tables below, over 70% of the SCC workforce is female, with the vast majority of them being front line/ team leader roles:

Gender analysis	2022	2023
Female	72.90%	73.36%
Male	27.10%	26.64%

Table 11: Summary of staff composition by sex

Gender role profile	2022	2023	2024
Female front line staff	80.07%	84.02%	83.29%
Female team leader	64.62%	74.29%	74.60%
Female middle manager	70.94%	70.13%	70.63%
Female senior manager & leadership	57.11%	58.96%	61.76%

Table 12: Composition of female representation at varying job levels

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Potential impacts:

As with other characteristics, whilst the exact composition of specific services with mean different levels of impact, generally speaking changes impacting frontline staff and team leaders will have disproportionate impacts on women. With the above evidence in mind though, it is important to consider potential implications on any restructures linked to LGR.

Negative:

- Increased likelihood of indirect discrimination on women given they make up over 70% of staff. There is also the fact women often make up the majority of front line, social care and admin roles, meaning they are more at risk of changes that impact these working arrangements.

Positive:

- The new unitary authorities may make steps to improve gender balance in leadership, management, or technical roles.

SEXUAL ORIENTATION

As shown from Table 12 (below), the majority of staff identify as Heterosexual. Both 'not stated' and prefer not to say have high responses:

Sexual orientation profile	2022	2023	2024
LGBTQ+	2.24%	2.75%	3.24%
Heterosexual	50.06%	53.36%	54.83%
Not stated	11.01%	9.16%	14.52%
Prefer not to say	36.69%	34.73%	27.41%

Table 4: SCC staff sexual orientation summary

It is hoped that through the work on 'Prefer not to say' campaign (which encourages staff to disclose information, like sexual orientation) that we can start to build a more robust evidence base to understand the potential scale of impacts brought on by workforces changes through LGR.

It is also likely that throughout the process of developing implementation plans related to workforce, that there will be engagement with the LGBTQ+ staff network.

Potential impacts:

As with many other characteristics, staff are not required to disclose their sexual orientation, and as such, understanding the scale of the impacts certain changes have on staff can be difficult. As LGR moves further into the implementation phase, there is further opportunity with specific representative groups and communities to understand what potential specific needs should be considered.

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Negative:

- There is a potential risk that as we move towards a new organisation structure, that staff may be hesitant to be out in unfamiliar teams or worry about how inclusive the new environment will be. In addition to this, there is the potential loss of established LGBTQ+ networks or allies if staff are split or reassigned.

Positive:

- The new authorities may adopt stronger commitments to LGBTQ+ inclusion from the outset, creating new networks or policies to support LGBTQ+ staff.

MARRIAGE/ CIVIL PARTNERSHIP STATUS

March 2025 data from Unit 4 indicates that 36.4% of SCC staff are married, 0.4% are in a civil partnership and 29.1% have never married and never been in a civil partnership. Given what is currently known about LGR, it isn't clear that any implications on this characteristics are likely, but any potential changes to internal policies and practices that are revised for the new unitary authorities will be assessed for potential implications.

SOCIO-ECONOMIC STATUS

There currently isn't data available on Socio-Economic status, but as and when more detailed implementation plans are developed, work will be done to assess what potential impacts could be, as often changes to working practices and restructures will impact those experiencing socio-economic disadvantage more so than others. It should be noted as a general point, that where restructures involves reductions in staffing numbers and redundancies, or changes to working practices and policies limit things like staff being able to work overtime, then this would impact on staff facing socio-economic disadvantage or who relied on the ability to earn extra through additional working more acutely.

Potential impacts:

Whilst the exact socio-economic status of staff both at SCC level and at district and borough level isn't clear. Any potential restructures would likely have more acute impacts on those on staff on lower incomes and from potentially socio-economically disadvantaged households and LSOAs. Whilst the scale of the impact isn't clear, we can make some general assumptions on the implications for staff to whom these circumstances might apply.

Negative:

- Staff from lower-income backgrounds may face hardship due to relocation, travel changes, or job insecurity.
- Where redundancies or pay grade changes occur, financially vulnerable staff may be hit hardest.

Positive:

- As part of the implantation phase and during the TUPE process, the new local authorities could use reorganisation as a chance to tackle workforce inequalities (e.g. access to training, progression, or digital tools).

CARERS

The latest March 2025 data from Unit 4 suggests only around 3.5% of staff have indicated they are carers/ have caring responsibilities, but over 96% have not stated.

Given the high levels of not stated responses, there isn't always clear or definitive information on staff who are carers and having caring responsibilities.

Given there is a well-established and well subscribed to staff Carer's Network, there is the potential opportunity to gain insight and guidance from staff with lived experience, to help better understand the impacts, as detailed delivery plans are developed.

In addition, through the work on 'Prefer not to say' campaign (which encourages staff to disclose information, like caring responsibilities) it is hoped we can start to build a more robust evidence base to understand the potential scale of impacts brought on by workforces changes through LGR.

Potential impacts: As with other characteristics, when more detailed implementation plans are developed, work will be done to assess what potential impacts could be, and workplace policies could be adjusted to account for those who have such responsibilities, including what leave options or flexible/ hybrid working options are available.

Negative:

- There is a risk that increased anxiety around job security or workload may exacerbate the challenges of balancing work and care. This in addition to the potential loss of informal flexibility arrangements or supportive line managers during team changes.
- Changes in work location to a new destination that could be further from an employee's home could potentially increase the time spent for carers to travel, disrupting their caring routines, as well as increasing the cost of travel.

Positive:

- Conversely there is the opportunity whilst drafting new policies for these unitary authorities to align existing policies between district and borough partners and to embed carer-friendly policies (e.g. carers' leave, flexible working) into new organisational cultures.

3.2 Mitigations for Impacts on Staff

At the business case stage, just as it is not always possible to identify specific impacts for staff based on many of the protected characteristics, it is also not necessarily clear what sort of mitigating activity could be put in place and what elements of existing internal staff policies will be ported over to the new authorities. Later in the process when detailed workstreams associated with LGR are initiated, colleagues across SCC will work to ensure that any potential negative impact are minimised and mitigated against, and any positive impacts, or opportunities for promoting fairness are maximised. These updates and more detailed analysis will also look to bring in insights gained through formal statutory consultation (where this is required), engagement with stakeholders and data analysis. This engagement will likely involve directly working with staff networks, as well as staff unions. At this stage we are also impacted by a lack of information on the staffing makeup of district and borough partners. There is an expectation

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that further along the process, that a more detailed plan for engaging these staff will be drawn up.

There are some general principles for mitigation that can be adopted throughout the process:

- Clear and regular engagement with staff to help offset any anxiety around job security or fears around significant changes to working patterns and practices. This includes ensuring we follow any statutory requirements to consult and we are mindful of the potential implication on specific changes to employment law that could come into force throughout the process of LGR.
- Taking general steps, where appropriate, to involve staff in planning and decision-making through consultation, working groups, and staff networks.
- Ensure clear arrangements are in place to deal with the transition, both in terms of policy and practice.
- Ensuring that approaches to reforms, restructures changes and alterations to policies are evidence led and backed by a robust catalogue of supporting data.
- Actively addressing data quality issues to help develop our understanding of the scale of the impacts of internal changes. For example, work is underway to improve our collection of data on staff demographics through the Prefer not to Say campaign. If this is successful, it will mean we have more meaningful understanding of the makeup of our staff and will be better able to track impacts of future restructures.
- We have also been developing our understanding of the makeup of senior leadership positions and have found that women, staff from ethnic minority backgrounds and staff with disabilities are less represented in these senior roles. As we work to develop plans for the structures of the new organisations, we will simultaneously work to break down potential barriers to these groups.

As implementation plans are developed, dependencies with existing transformation and change programmes will be mapped to identify where changes arising from structural reform could exacerbate any negative impacts for these members of staff.

Any negative impacts that cannot be mitigated will be reviewed and information captured under each of the headings/ characteristics above.

4. Recommendation

Our recommendation is:

- **No major change to the policy/service/function required.**

Rationale:

At the final plan stage, this analysis has identified themes for potential positive and negative equality impacts.

It is important to set out the profiles of staff and residents based on protected characteristic to understand the overarching scale of the potential impacts of changes likely to be brought forward, as well as highlight where gaps in this evidence might be.

Deciding to agree the LGR proposal will, in itself, not lead to direct positive or negative equality impacts. As detailed implementation plans are developed, more detailed analyses will be completed based on refined data and engagement. At this point, more specific impacts and mitigating activity will need to be included.

5. Approval

Approved by	Date approved
Nicola Kilvington, Director of Corporate Strategy and Policy	29 April 2025
Andy Brown, Deputy Chief Executive and Executive Director Resources (S.151 Officer)	29 April 2025
Tim Oliver OBE, Leader of the Council	29 April 2025

EIA author: Joe Osborne, Strategic Lead – Policy and Strategy

6. EIA Team

Name	Job Title	Organisation	Team Role
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