

## Annex 2- Personal Support Services for Children, Young People & their Families

### Equality Impact Assessment (EIA)

#### 1. Topic of assessment

<b>EIA title</b>	Proposals for Personal Support retender 2019-22, part of Surrey's Short Breaks offer
<b>EIA authors</b>	Karen Harrell, Project Officer, Surrey Short Breaks, SCC Julia McDonald, Senior Commissioning Manager, SCC Emily Huntington, Senior Commissioning Officer, SCC

#### 2. Approval

	Name	Date approved
<b>Approved by</b>	Tina Benjamin	23/11/2018

#### 3. Quality control

<b>Version number</b>	v.0.14	<b>EIA completed</b>	15/11/2018
<b>Date saved</b>	15/11/2018	<b>EIA published</b>	07/12/2018

#### 4. EIA team

Name	Job title	Organisation	Team role
Frank Offer	Head of Market Strategy	Surrey County Council	Project Sponsor
Carol Douch	Head of Countywide Services	Surrey County Council	Project Sponsor
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Jane Stark	Short Breaks Manager	Surrey County Council	Management Lead
Karen Harrell	Project Officer	Surrey County Council	Project Lead
Andrea Collings	Co-Chair	Family Voice Surrey	Family Lead
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Sam Morrison	Principal Commissioning Manager	Surrey County Council	Commissioning Lead
Winnie Turay	Procurement Specialist	Surrey County Council	Procurement Lead

## 5. Explaining the matter being assessed

What policy, function or service is being introduced or reviewed?

The purpose of this Equality Impact Assessment is to review the impact of Surrey County Council's (SCC) retender of the Personal Support framework, which expired in March 2018.

In February 2018, formal approval was granted by the Procurement Sourcing Governance Board (SGB) to waive the Procurement Standing Orders, which enabled SCC to continue purchasing with framework providers for one year. This meant families and professionals had a quality assured list of providers to choose from, following a social care assessment of need, whilst a permanent solution was worked on. Feedback from a range of stakeholders indicates that the current framework has been limited in its success. This, along with a review of current provision by the Personal Support Steering Group, has identified the need for change.

The target group for Personal Support services is children and young people with Special Educational Needs and/or Disabilities. The service can be provided in their own homes or within the community following a social care assessment. The Personal Support framework is part of SCC's Short Breaks offer, which provides vital support to many children and young people with SEND in Surrey, and their families, to achieve better outcomes.

The Short Breaks Regulations (2011) provide further detail on how local authorities must perform their care duty under the Children Act 1989. The regulations state that Local Authorities have legal duties to:

- Provide short break services that are designed to assist parent carers who provide care for disabled children to continue to do so;
- Have regard to the needs of different types of carers when making Short Breaks provision;
- Provide a range of services, as appropriate, during the day or night, at weekends and during the school holidays;
- Provide parents with a Short Breaks statement detailing the range of breaks and eligibility criteria; and
- Work in partnership across education, health and care to improve outcomes for children and young people with disabilities.

What proposals are you assessing?

The proposal is to develop a new Light Touch Dynamic Purchasing System (DPS) to deliver Personal Support services. Personal Support is part of a range of short break provision within the county of Surrey which aims to develop and support disabled children, young people and their families. These services are provided primarily but not limited to inside the home, with the children and young people being offered support with personal care, health & behavioural support and also opportunities to participate in social and leisure activities with other children in the local community.

To maximise the successful outcome of this commission, the Light Touch DPS was split into three Lots:

- **Lot 1: Personal Support:** includes but is not limited to children and young people with permanent and substantial disabilities who require support which is personalised to each child. Support will be focused and based on desired outcomes and may include help with personal care in the home or supporting the child to access activities in the community.

- **Lot 2: Managing Behaviour That Challenges:** includes but is not limited to supporting children and young people with managing their behaviours and emotions particularly where there are identified behaviours that challenge. This may take place in the child's home or in supporting the child to access the community. Depending on the assessed need and subsequent risk assessment 2 staff members may be required.
- **Lot 3: Complex Needs:** includes but is not limited to children with more complex health needs which may include gastrostomy care, catheter care, moving and assisting and help with all personal and imitate support needs. This does not include nursing care.

Provision will be called-off the Light Touch DPS for spot placements to be made. For Lot 3, along with Health partners, prior to calling-off the Light Touch DPS, an assessment of the provision that represents the best value will be made, based on the specific needs of the child and their family.

**This project will allow the Council to:**

- Continue to deliver a range of Short Break services for Children with Disabilities within Surrey and their families. By having a greater range of provision, split into 3 Lots of increasing need, the specific requirements of children and young people with protected characteristics are more likely to be met. The use of a consistent outcomes-based approach across the Lots places an emphasis on demonstrating how providers are improving outcomes for the children and young people they provide care for. Particular outcomes that will impact children and young people with protected characteristics are:
  - Children and young people will be more independent – indicators of which are that they will have a positive sense of identity, and will have opportunities to socialise and participate in community activities.
  - Children and young people will achieve successful transitions to the next stage of development – indicators of which are that they are involved with their planning, and supported to manage emotions around change.
- Stimulate the market and increase the number of providers in short break and Personal Support services. This will increase the likelihood of successfully finding a Support package that meets the needs of children and young people. This improved choice could be particularly valuable when children and young people have requirements around protected characteristics, which may make it more difficult to find providers who can meet their needs.
- Attempt to maximise efficiencies and deliver better value for money for Children with Disabilities and their families
- Develop new, innovative and flexible services that will offer more choice to a wider range of disabled children, young people and their families, which will improve outcomes for disabled children, young people and their families.

It should also be noted that these changes are part of the Council's ongoing overall approach to transform its services to improve outcomes for children and young people with SEND and their families. In particular this includes responding to the areas for improvement highlighted in the recent Joint local area SEND inspection by Ofsted and the Care Quality Commission.

**Out of scope:**

- Play and Leisure and Residential Short Breaks
- The Council's in-house domiciliary service
- The provision of nursing care
- Regular provision of domestic duties

**Who is affected by the proposals outlined above?**

The key groups affected by the proposals set out in this EIA are:

- Children and young people with SEND aged 0-18 (young people transfer to adult services at the end of the month in which they turn 18) in Surrey. This includes those with a wide range of needs covering: learning disabilities; physical disabilities; sensory impairments; complex health needs; autistic spectrum disorders (ASD); attention deficit hyperactivity disorder (ADHD); and behaviour that challenges - as well as associated mental health needs.
- Their parent/carers (this term covers parents, grandparents, foster parents and special guardians) and siblings (who could be young carers themselves).
- Provider market which is made up of a range of private and third sector organisations.
- Staff from provider organisations.

In November 2017 there were approximately 892 children and young people in Surrey open to the Children with Disabilities Teams. During the financial year 2016-17, in total 18,847 hours of Personal Support were provided to a total of 111 children and young people from framework providers. This was made up of:

- 15,105 – spot purchased hours provided to 65 children and young people.
- 3,742 – self-funded hours (either direct payments or own parental funding) provided to 46 children and young people.
- The largest number of children and young people supported on the framework have a learning disability (71%) followed by those with Autism Spectrum Disorders (58%). 24% have complex health needs and 26% have challenging behaviour. (NB some children and young people are recorded as having more than one disability).

**6. Sources of information****Engagement carried out since May 2017**

The Short Breaks team have consulted with colleagues in Procurement and the Children with Disabilities teams (East and West) through monthly Steering Group meetings, to help develop the specification. Questionnaires have also been sent to social work colleagues to gain their perspective on current needs and capacity.

A provider engagement event, led by the service, was held on 10th August 2017 which was well attended by new and existing providers. This was supplemented by a questionnaire sent to providers to help gain a better understanding of current needs and capacity. The draft specification has also been shared with providers to gather feedback – this is essential to ensure the service listed in the specification is something that the providers can deliver to, and also to ensure that the specification does meet the needs and requirements of the children they support (including those with various protected characteristics). At another provider event, held in June 2018, SCC shared its vision for the new Light Touch DPS and model and gathered feedback from providers (see Appendix 4). This was fed into a Market Position Statement.

We consulted with Family Voice Surrey to get representative and family feedback, and a Family Voice representative was part of the steering group membership. They have also supported the tender process by contributing to the drafting of the specification, offering feedback on this Equality Impact Assessment and taking part in the evaluation and moderation of bids. It has proved challenging to engage with children and young people directly through existing consultation processes because of under-representation of the relevant children and young people. Steps are being taken to develop and improve this, so feedback from the cohort will be drawn on as this happens throughout the life of the Light Touch DPS. To mitigate this, relevant information from the Market Position Statement, and SEND Sufficiency Plan has been drawn on, where views were captured through a number of drop-in sessions and workshops.

A number of other Local Authorities in the South East were contacted to understand how they have commissioned their Personal Support services in order to identify good practise which could help overcome challenges experienced across the region.

**Appendix 1** - Key messages from parent/carer feedback

**Appendix 2** - Key messages from providers

**Appendix 3** - Key messages from Social Workers

**Appendix 4** – Market engagement Debrief (6 June 2018)

#### Data used

- JSNA (2017) Children and young people with Special Educational Needs and Disabilities (SEND) chapter
- JSNA (2018) Surrey context
- JSNA (2016) Adult carers
- JSNA (2017) Young carers and young adult carers
- Surrey County Council (2016) Needs analysis of children and young people 0 – 25 years old with SEND
- Surrey County Council (2016) The SEND challenge: growing levels of need: Needs analysis summary
- Surrey County Council (2017) Assessment of Need in Relation to Short Breaks in Surrey
- Surrey County Council (2013) Needs analysis for Surrey's Gypsy, Roma and Traveller children and young people
- Surrey County Council (2016) Short Breaks data pack
- Surrey County Council (2016-17) Short Breaks data
- Surrey County Council (2016-17) Finance data
- Monitoring data 2016-17
- Surrey children's disability register
- SCC Needs analysis for Surrey's Gypsy, Roma and Traveller children and young people 2013
- Surrey County Council (June 2018) Draft SEND Sufficiency Plan
- Gender Identity and Research Education Society (2011) The number of gender variant people in the UK
- ONS (2017) Births by mothers' usual area of residence in the UK
- Best Beginnings, Parents with Disabilities
- Action for Children, The Next Chapter: Young People and Parenthood
- The National Autistic Society – Gender and autism
- Carers UK (2012) In sickness and in health
- Carers UK (2015) Alone and caring

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

In retendering the Personal Support framework we have looked to build the Personal Support offer by improving availability of support and the range of agencies able to provide this support in Surrey.

In re-commissioning Personal Support we have used our purchasing power to promote the public sector equality duty.

In the following tables we have brought together our equality analysis and set out how the proposed changes will affect children with disabilities, their parents and carers, families and staff. Analysis was based on the information gathered from the data and engagement activities listed in section six.

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

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Protected characteristic	Potential positive impacts	Potential negative impacts	Evidence
<p><b>Age</b></p>	<p>The Light Touch DPS will continue to support children and young people aged 0-18. Increased choice across Surrey will positively impact children of all ages.</p> <p>We have heard from children, young people and their families that the transition to adulthood is a challenging time. By purchasing from providers who deliver a service for both children and adults, the transition process might be enhanced. Outcome 4 specifies that “children and young people will achieve successful transitions to the next stage of their development”, which will help ensure young people continue to achieve good outcomes through their transition to Adult’s provision.</p>	<p>The demand for Personal Support across all levels of need outstrips supply and is likely to continue to increase as a result of existing barriers to accessing services and suppressed levels of need.</p> <p>There is a risk that the new approach may not increase availability sufficiently, at least in the short-term. This will impact all children, but could be particularly evident for those with protected characteristics.</p> <p>This has been mitigated under the new approach by tendering under three lots including a specific lot related to complex needs, and by the outcome of the tender, which has identified six providers to join the Light Touch DPS,</p>	<ul style="list-style-type: none"> <li>• The majority of children with statutory plans maintained by Surrey are aged 11 to 15 (45%) with 39% aged 5 to 10.<sup>i</sup></li> <li>• Data shows exponential growth in the numbers of EHCPs, of which one of the biggest groups are younger children whose complex needs were identified at birth or pre-school age<sup>ii</sup> – historically, the biggest growth area has been teenagers.</li> <li>• Families have identified that there are a range of gaps in provision (within Short Breaks as a whole), for children under 10, and older teenagers in transition.<sup>iii</sup></li> </ul>

		<p>subject to Cabinet approval, who have evidenced that they can provide good coverage in their provision across the three lots and across the county.</p> <p>In addition, reopening the Light Touch DPS every four months will enable new entrants to the market to join, and will make market management particularly vital if there are gaps identified around specific protected characteristics.</p>	
<p><b>Disability</b></p>	<p>There will be increased choice across Surrey, with new providers available to meet more specific needs by using the Lot model. New providers have demonstrated that they can meet the quality standard required from the new commission.</p> <p>It is recognised that children and young people with disabilities struggle to access activities in the community, compared to the general population. The Light Touch DPS aims to address this; Outcome 1 specifies that “children and young people are more independent”, and is indicated by having</p>	<p>The demand for Personal Support across all levels of need outstrips supply and is likely to continue to increase as a result of existing barriers to accessing services and suppressed levels of need.</p> <p>There is a risk that the new approach may not increase availability sufficiently, at least in the short-term. This will impact all children, but could be particularly evident for those with protected characteristics.</p> <p>There is a particular growing need for support for behaviour</p>	<p>The largest number of children and young people supported on the framework have a learning disability (71%) followed by those with Autism Spectrum Disorders (58%). 24% have complex health needs and 26% have challenging behaviour. (NB Some children and young people have more than one disability)</p> <ul style="list-style-type: none"> <li>• 8,393 children and young people have statutory plans in Surrey.<sup>iv</sup></li> <li>• The number of children with plans with a primary need of ASD has almost doubled since 2013.<sup>v</sup></li> <li>• Increasing population and growing need – data projections based on current demand growth suggest that by 2023 there will be 13,999 children with statutory plans in Surrey. That would be a 67% increase from 2018.<sup>vi</sup></li> <li>• A particularly high level of educational placements in the non-maintained and independent sector for children with ASD or SEMH.<sup>vii</sup></li> <li>• A need to reduce the gap in key outcomes achieved by children and young people with SEND compared to their peers.<sup>viii</sup></li> </ul>

	<p>opportunities to socialise and participate in community activities.</p> <p>Robust contract monitoring processes will ensure the effectiveness of the Light Touch DPS and enable resource issues to be addressed.</p>	<p>that challenges (Lot 2) and complex needs (Lot 3).</p> <p>This has been mitigated under the new approach by tendering under three lots including a specific lot related to complex needs, and by the outcome of the tender, which has identified six providers to join the Light Touch DPS, subject to Cabinet approval, who have evidenced that they can provide good coverage in their provision across the three lots and across the county.</p> <p>In addition, reopening the Light Touch DPS every four months will enable new entrants to the market to join, and will make market management particularly vital if there are gaps identified around specific protected characteristics.</p>	<ul style="list-style-type: none"> <li>Increasing need for learning pathways for young people post-16 and post-19 that support preparation for adulthood.<sup>ix</sup></li> </ul>
<p><b>Gender reassignment</b></p>	<p>An Indicator for Outcome 1, which specifies that “children and young people will be more independent”, is that children and young people will have a positive sense of identity, which will help drive improved outcomes for children and young people with specific protected</p>	<p>The demand for Personal Support across all levels of need outstrips supply and is likely to continue to increase as a result of existing barriers to accessing services and suppressed levels of need.</p> <p>There is a risk that the new approach may not increase</p>	<p>The Gender Identity Research and Education Society (GIREs) states “that organisations should assume that 1% of their employees and service users may be experiencing some degree of gender variance. At some stage, about 0.2% may undergo transition.”<sup>x</sup></p> <p>GIREs also recognises that ‘few younger people present for treatment despite the fact that most gender dysphoric adults report experiencing gender variance from a very early age. Social pressure, in the family and at school, inhibits the early revelation of their gender variance. Only 100 or so children and adolescents are referred annually to the</p>

	<p>characteristics. Increased choice of provision will also improve outcomes, as more suitable placements will be able to be made for the child or young person’s particular need.</p>	<p>availability sufficiently, at least in the short-term. This will impact all children, but could be particularly evident for those with protected characteristics.</p> <p>This has been mitigated under the new approach by tendering under three lots including a specific lot related to complex needs, and by the outcome of the tender, which has identified six providers to join the Light Touch DPS, subject to Cabinet approval, who have evidenced that they can provide good coverage in their provision across the three lots and across the county.</p> <p>In addition, reopening the Light Touch DPS every four months will enable new entrants to the market to join, and will make market management particularly vital if there are gaps identified around specific protected characteristics.</p>	<p>UK’s sole specialised gender identity service, compared to 1,500 referred to the adult clinics. Nonetheless, presentation for treatment among youngsters is also growing rapidly and has the potential to accelerate if young people feel increasingly able to reveal their gender variance and undertake transition while still young.’<sup>xi</sup></p>
<p><b>Pregnancy and maternity</b></p>	<p>Increased choice of provision will improve outcomes, as more suitable placements will be able to be made for the child or young person’s particular need.</p>	<p>The demand for Personal Support across all levels of need outstrips supply and is likely to continue to increase as a result of existing barriers</p>	<p>The service is aimed at children and young people of up to 18 year olds, which means that young parents might fall within the Personal Support service user group.</p> <p>Data for births to teenage mothers with disabilities in Surrey is not available. However, in 2016 there were 52 occasions where women</p>

		<p>to accessing services and suppressed levels of need.</p> <p>There is a risk that the new approach may not increase availability sufficiently, at least in the short-term. This will impact all children, but could be particularly evident for those with protected characteristics.</p> <p>This has been mitigated under the new approach by tendering under three lots including a specific lot related to complex needs, and by the outcome of the tender, which has identified six providers to join the Light Touch DPS, subject to Cabinet approval, who have evidenced that they can provide good coverage in their provision across the three lots and across the county.</p> <p>In addition, reopening the Light Touch DPS every four months will enable new entrants to the market to join, and will make market management particularly vital if there are gaps identified around specific protected characteristics.</p>	<p>under the age of 18 gave birth in Surrey.<sup>xii</sup> Anecdotal evidence would indicate that pregnancy and birth rate for women under 18 with disabilities is even lower, as their care plan often manages fertility and contraception.</p> <p>Parents / expectant parents with disabilities might commonly experience issues such as:<sup>xiii</sup></p> <ul style="list-style-type: none"> <li>• Negative attitudes to their decision to have a child</li> <li>• Physical access to buildings or equipment</li> <li>• Lack of flexible appointment times</li> <li>• Communication difficulties - people with sensory impairments may need an advocate or interpreter.</li> </ul> <p>Parents with learning disabilities (71% of service users of PS have a learning disability):<sup>xiv</sup></p> <ul style="list-style-type: none"> <li>• The babies of mothers with learning disabilities are at increased risk of poor birth outcomes.</li> <li>• One third of pregnant woman with a learning disability report moderate to severe levels of stress, anxiety and depression.</li> <li>• Many parents with a learning disability live under conditions that may contribute to poorer parenting, including poverty, low literacy, poor health, poor mental health, domestic abuse, having grown up in care, and social isolation. In particular, social support (such as living with relatives) contributes to successful parenting.</li> </ul> <p>In addition, these challenges are compounded by issues faced by all young parents:<sup>xv</sup></p> <ul style="list-style-type: none"> <li>• Only one in ten young parents (11%) has attended university, compared to 45% of young people who aren't parents.</li> <li>• One in five young parents (19%) rarely or never see friends, compared to 11% of young people who aren't parents.</li> </ul>
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<p><b>Race</b></p>	<p>Short break provision data indicates that BME groups are accessing short break services close to or above Surrey population rates (See Evidence). Providers will bid to cover specific geographic areas, which should allow them to focus recruitment locally so they can better match staff with local need.</p> <p>An Indicator for Outcome 1, which specifies that “children and young people will be more independent”, is that children and young people will have a positive sense of identity, which will help drive improved outcomes for children and young people with specific protected characteristics. Increased choice of provision will also improve outcomes, as more suitable placements will be able to be made for the child or young person’s particular need.</p>	<p>The demand for Personal Support across all levels of need outstrips supply and is likely to continue to increase as a result of existing barriers to accessing services and suppressed levels of need.</p> <p>There is a risk that the new approach may not increase availability sufficiently, at least in the short-term. 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Waverley is the least diverse with 90.6% White British.</li> </ul> <p>Children and young people in Gypsy, Roma and Traveller (GRT) Communities are often expected to assume caring responsibilities for siblings or relatives; 59% of Surrey GRT children have special needs, compared to 19% amongst the whole Surrey school population. Many GRT families report services are ‘hard to reach’ due to isolated locations with few amenities or transport links, high rates of illiteracy, and discrimination.<sup>xvii</sup></p> <p><b>Short Breaks users:</b></p> <ul style="list-style-type: none"> <li>The majority of Short Breaks users were White British (79%) however short break users are more diverse than the general public in Surrey.<sup>xviii</sup></li> </ul> <p><b>All Short Breaks users by ethnicity (from Short Breaks data 2016-17)</b></p> <table border="1"> <thead> <tr> <th data-bbox="1198 869 1691 1029">Ethnicity</th> <th data-bbox="1691 869 1841 1029">Number of children 2016-17*</th> <th data-bbox="1841 869 1993 1029">Number of children 2016-17 (%)</th> <th data-bbox="1993 869 2116 1029">2011 Census</th> </tr> </thead> <tbody> <tr> <td data-bbox="1198 1029 1691 1069">Asian/Asian British: Bangladesh</td> <td data-bbox="1691 1029 1841 1069">15</td> <td data-bbox="1841 1029 1993 1069">0.9%</td> <td data-bbox="1993 1029 2116 1069">0.3%</td> </tr> <tr> <td data-bbox="1198 1069 1691 1109">Asian or Asian British: Indian</td> <td data-bbox="1691 1069 1841 1109">35</td> <td data-bbox="1841 1069 1993 1109">2.0%</td> <td data-bbox="1993 1069 2116 1109">1.8%</td> </tr> <tr> <td data-bbox="1198 1109 1691 1149">Asian/Asian British: Other Asian</td> <td data-bbox="1691 1109 1841 1149">25</td> <td data-bbox="1841 1109 1993 1149">1.5%</td> <td data-bbox="1993 1109 2116 1149">1.7%</td> </tr> <tr> <td data-bbox="1198 1149 1691 1189">Asian/Asian British: Pakistani</td> <td data-bbox="1691 1149 1841 1189">42</td> <td data-bbox="1841 1149 1993 1189">2.4%</td> <td data-bbox="1993 1149 2116 1189">1%</td> </tr> <tr> <td data-bbox="1198 1189 1691 1228">Black/Black British: Black African</td> <td data-bbox="1691 1189 1841 1228">11</td> <td data-bbox="1841 1189 1993 1228">0.6%</td> <td data-bbox="1993 1189 2116 1228">0.7%</td> </tr> <tr> <td data-bbox="1198 1228 1691 1268">Black/Black British: Black Caribbean</td> <td data-bbox="1691 1228 1841 1268">7</td> <td data-bbox="1841 1228 1993 1268">0.4%</td> <td data-bbox="1993 1228 2116 1268">0.3%</td> </tr> <tr> <td data-bbox="1198 1268 1691 1308">Black/Black British: Other Black</td> <td data-bbox="1691 1268 1841 1308">12</td> <td data-bbox="1841 1268 1993 1308">0.7%</td> <td data-bbox="1993 1268 2116 1308">0.1%</td> </tr> <tr> <td data-bbox="1198 1308 1691 1348">Chinese/Other Ethnic Group: Chinese</td> <td data-bbox="1691 1308 1841 1348">6</td> <td data-bbox="1841 1308 1993 1348">0.3%</td> <td data-bbox="1993 1308 2116 1348">0.8%</td> </tr> <tr> <td data-bbox="1198 1348 1691 1388">Chinese/Other Ethnic Group: Other</td> <td data-bbox="1691 1348 1841 1388">5</td> <td data-bbox="1841 1348 1993 1388">0.3%</td> <td data-bbox="1993 1348 2116 1388">0.9%</td> </tr> </tbody> </table>	Ethnicity	Number of children 2016-17*	Number of children 2016-17 (%)	2011 Census	Asian/Asian British: Bangladesh	15	0.9%	0.3%	Asian or Asian British: Indian	35	2.0%	1.8%	Asian/Asian British: Other Asian	25	1.5%	1.7%	Asian/Asian British: Pakistani	42	2.4%	1%	Black/Black British: Black African	11	0.6%	0.7%	Black/Black British: Black Caribbean	7	0.4%	0.3%	Black/Black British: Other Black	12	0.7%	0.1%	Chinese/Other Ethnic Group: Chinese	6	0.3%	0.8%	Chinese/Other Ethnic Group: Other	5	0.3%	0.9%
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		<p>if there are gaps identified around specific protected characteristics.</p>	<table border="1"> <tr> <td>Mixed: Other Mixed</td> <td>46</td> <td>2.7%</td> <td>0.6%</td> </tr> <tr> <td>Mixed White &amp; Asian</td> <td>31</td> <td>1.8%</td> <td>0.9%</td> </tr> <tr> <td>Mixed White &amp; Black African</td> <td>10</td> <td>0.6%</td> <td>0.2%</td> </tr> <tr> <td>Mixed White &amp; Black Caribbean</td> <td>17</td> <td>1.0%</td> <td>0.4%</td> </tr> <tr> <td>White British</td> <td>1358</td> <td>79.0%</td> <td>83.5%</td> </tr> <tr> <td>White Irish</td> <td>11</td> <td>0.6%</td> <td>1.3%</td> </tr> <tr> <td>White Other White</td> <td>89</td> <td>5.2%</td> <td>5.5%</td> </tr> </table>	Mixed: Other Mixed	46	2.7%	0.6%	Mixed White & Asian	31	1.8%	0.9%	Mixed White & Black African	10	0.6%	0.2%	Mixed White & Black Caribbean	17	1.0%	0.4%	White British	1358	79.0%	83.5%	White Irish	11	0.6%	1.3%	White Other White	89	5.2%	5.5%
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<p><b>Religion and belief</b></p>	<p>An Indicator for Outcome 1, which specifies that “children and young people will be more independent”, is that children and young people will have a positive sense of identity, which will help drive improved outcomes for children and young people with specific protected characteristics. Increased choice of provision will also improve outcomes, as more suitable placements will be able to be made for the child or young person’s particular need.</p>	<p>The demand for Personal Support across all levels of need outstrips supply and is likely to continue to increase as a result of existing barriers to accessing services and suppressed levels of need.</p> <p>There is a risk that the new approach may not increase availability sufficiently, at least in the short-term. This will impact all children, but could be particularly evident for those with protected characteristics.</p> <p>This has been mitigated under the new approach by tendering under three lots including a specific lot related to complex needs, and by the outcome of the tender, which has identified six providers to join the Light Touch DPS, subject to Cabinet approval, who have evidenced that they can provide good coverage in their provision across the</p>	<p>In the 2011 Census, 62.8% of Surrey’s population identified themselves as Christian. The next largest group was that which reported no religion, at 24.8% of the population. Those reporting all other religions together, other than Christian, formed 5% of the Surrey population, of which the next largest religious group after Christian was Muslim (2.2% of the population). 7.4% of the population did not state their religion.<sup>xix</sup></p> <p>There is no data available on religion and belief for Personal Support users. However, it is expected – in like with the requirements of the Equalities and Diversity Act 2010 – that providers will be aware and culturally sensitive to specific needs of children and families from religious groups.</p>																												

		<p>three lots and across the county.</p> <p>In addition, reopening the Light Touch DPS every four months will enable new entrants to the market to join, and will make market management particularly vital if there are gaps identified around specific protected characteristics.</p>	
<p><b>Sex</b></p>	<p>Increased choice of provision will also improve outcomes, as more suitable placements will be able to be made for the child or young person's particular need.</p>	<p>The demand for Personal Support across all levels of need outstrips supply and is likely to continue to increase as a result of existing barriers to accessing services and suppressed levels of need.</p> <p>There is a risk that the new approach may not increase availability sufficiently, at least in the short-term. This will impact all children, but could be particularly evident for those with protected characteristics.</p> <p>This has been mitigated under the new approach by tendering under three lots including a specific lot related to complex needs, and by the outcome of the tender, which has identified six providers to join the Light Touch DPS,</p>	<p>Out of the 8,393 children and young people with an EHCP, 73% are male and 27% are female.<sup>xx</sup></p> <p>The most common primary need in boys' statutory plans is ASD (38%), Speech Language and Communication Needs (SLCN, 18%) and Social, Emotional &amp; Mental Health (SEMH, 14%), this compares to girls' primary need of ASD (21%), Moderate Learning Difficulties (21%) and SLCN (19%). According to NAS, various studies together with anecdotal evidence have come up with men/women ratios of ASD diagnosis ranging from 2:1 to 16:1. Causes for this could be genetic and/or societal (e.g. girls masking their symptoms better).<sup>xxi</sup></p>

		<p>subject to Cabinet approval, who have evidenced that they can provide good coverage in their provision across the three lots and across the county.</p> <p>In addition, reopening the Light Touch DPS every four months will enable new entrants to the market to join, and will make market management particularly vital if there are gaps identified around specific protected characteristics.</p>	
<p>Page 74</p> <p><b>Sexual orientation</b></p>	<p>An Indicator for Outcome 1, which specifies that “children and young people will be more independent”, is that children and young people will have a positive sense of identity, which will help drive improved outcomes for children and young people with specific protected characteristics. Increased choice of provision will also improve outcomes, as more suitable placements will be able to be made for the child or young person’s particular need.</p>	<p>The demand for Personal Support across all levels of need outstrips supply and is likely to continue to increase as a result of existing barriers to accessing services and suppressed levels of need.</p> <p>There is a risk that the new approach may not increase availability sufficiently, at least in the short-term. This will impact all children, but could be particularly evident for those with protected characteristics.</p> <p>This has been mitigated under the new approach by tendering under three lots including a specific lot related</p>	<p>The UK Government estimates that 7% of the population are lesbian, gay, bisexual, transgender or questioning (LGBTQ). Applying this to mid-2009 population estimates for Surrey, there are an estimated 5,700 people aged 11 to 16 in Surrey who are LGBTQ.<sup>xxii</sup></p>

		<p>to complex needs, and by the outcome of the tender, which has identified six providers to join the Light Touch DPS, subject to Cabinet approval, who have evidenced that they can provide good coverage in their provision across the three lots and across the county.</p> <p>In addition, reopening the Light Touch DPS every four months will enable new entrants to the market to join, and will make market management particularly vital if there are gaps identified around specific protected characteristics.</p>	
<b>Marriage &amp; civil partnerships</b>	N/A	N/A	
<b>Carers (protected by association)</b>	<p>This retender aims to deliver improved Personal Support provision, with more specialist support available from a wider range of providers. Access to practical support has been identified as a cause of poor mental and physical health for carers (see evidence). It will also give carers more opportunities to have a break from their caring responsibilities.</p>	<p>The demand for Personal Support across all levels of need outstrips supply and is likely to continue to increase as a result of existing barriers to accessing services and suppressed levels of need.</p> <p>There is a risk that the new approach may not increase availability sufficiently, at least in the short-term. This will impact all children, but could be particularly evident for</p>	<p>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 looking after siblings, parents or other relatives.<sup>xxiii</sup></p>

The most common benefit of Short Breaks for carers is that they get to spend time with other family members (25% of responses to Surrey Short Breaks survey 2015). They told us they also spend the time resting (17%), seeing friends (14%) and pursuing leisure activities, and working (11% each). However 22% of carers said they use the time to catch up on chores.

Request for commitments by providers to use social capital (cash or in-kind) to develop initiatives that better meet the needs of carers and enable them to provide support to one another (Social Value Act 2012).

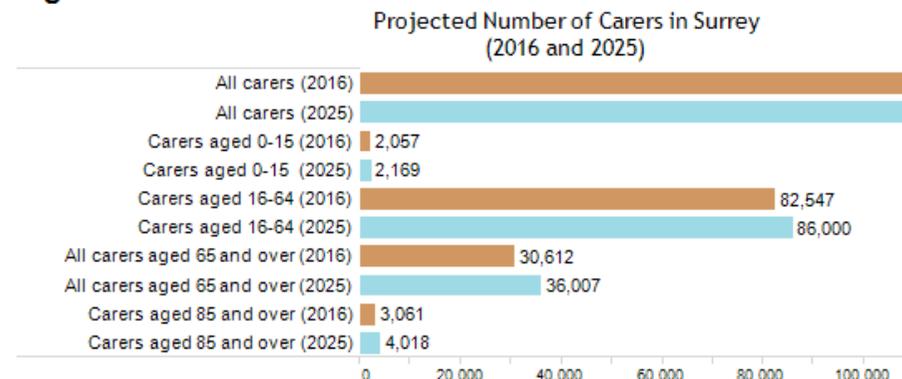
those with protected characteristics.

Providers were asked which districts and boroughs they would be able to cover (as opposed to quadrants NW/NE/SW/SE Surrey, as was done in the last Personal Support tender). At least three (and in most cases four or five) providers are able to provide services in each borough or district in each of the three lots.

Evaluation of bids for the three lots has indicated that all of the successful bidders have a strong commitment to social value. How this will operate in practice and, specifically, the use of social capital to better meet the needs of carers, won't be known until later in the lifetime of the Light Touch DPS.

Reopening the Light Touch DPS every four months will enable new entrants to the market to join, and will make market management particularly vital if there are gaps identified around specific protected characteristics.

Figure 1



Note: Carers aged 85 and over are included in the figures for Carers aged 65 and over  
Source: 2011 Census and population projections (ONS)

The impact of caring can be detrimental to both young carers' and adult carers' health, and can be due to a number of factors, including stress related illness or physical injury.<sup>xxiv</sup>

Over 80% of carers say that caring has a negative impact on their physical health and mental health. 64% believe that a lack of practical support is a supporting factor. The majority of carers thought their health would be improved if they receiving more practical support (52%), and more support from local services (62%).<sup>xxv</sup>

83% of carers have felt lonely or socially isolated as a result of their caring responsibilities, whilst around half report to have lost touch with friends or family and/or have experienced difficulties with their relationship with their partner as a result of caring.<sup>xxvi</sup>

The Surrey Young Carers Health Survey 2013 identified a range of factors which affect the emotional health and wellbeing of young carers, including eating disorder (35%, 10% relating it specifically to their caring role), self-harm, alcohol misuse or smoking. 65% of respondents had responded that they feel stressed, 50% angry, 28% depressed and 28% anxious.<sup>xxvii</sup>

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

Protected characteristic	Potential positive impacts	Potential negative impacts	Evidence
<b>Age</b>	None identified	None identified	
<b>Disability</b>			
<b>Gender reassignment</b>			
<b>Pregnancy and maternity</b>			
<b>Race</b>			
<b>Religion and belief</b>			
<b>Sex</b>			
<b>Sexual orientation</b>			
<b>Marriage and civil partnerships</b>			
<b>Carers (protected by association)</b>			

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## 8. Amendments to the proposals

Change	Reason for change
No changes identified but comprehensive set of mitigations included below.	

## 9. Action plan

Impacts and actions outlined below are general to the commission and are therefore primarily affecting the protected characteristic of 'Disability'.

Providers will be expected to adhere to the requirements of the Equalities Act 2010 and demonstrate evidence thereof to commissioners at bid and review stage (e.g. Equalities policies, E&D monitoring).

Potential impact (positive or negative)	Action needed to maximise positive impact or mitigate negative impact	By when	Owner
<b>Positive</b> – Specific Lots to support children and young people with complex health needs and/or behaviours that challenge, with associated outcomes.	<p>Contract management: Ensure that providers plan to and deliver the full requirements of the service specification by robust contract management</p> <p>Communication plan: Communicate with all stakeholders particularly social workers to ensure they are aware of new providers and the specialisms they have. This will maximise available resources.</p> <p>Provider best practice forums</p> <p>Data analysis: Quarterly collation and analysis of data to measure effectiveness of the Light Touch DPS.</p> <p>Outcomes framework: Personal Support providers will be contractually obliged to measure impact of their provision</p>	1 April 2019 then ongoing when new providers join the Light Touch DPS	Short Breaks team
<b>Positive</b> – Tendering at district and borough level to meet local need, increases access in some areas for families from a range of ethnic backgrounds.	Ensure that providers plan to and support them through contract monitoring to meet the full requirements of the service specification and their commitment to cover relevant district / borough.	1 April 2019	Short Breaks team
<b>Positive</b> – A robust approach to outcomes measurement for children and young people	Provision of an outcomes toolkit. Surrey will collate and analyse outcomes data across the Light Touch DPS.		
<b>Negative</b> – Availability of Personal Support might not meet need for reasons including:	Work with providers to develop market and make joining the Light Touch DPS attractive.	1 April 2019	Procurement team

<p>Providers are unable to sufficiently recruit staff.</p> <p>Some providers might decide they aren't prepared to invest in recruitment without baseline funding.</p> <p>Some providers might want to recruit to care packages upon referral but social workers requiring immediate support.</p>	<p>Ensure that providers plan to and support them through contract monitoring to meet the full requirements of the service specification and their commitment to cover relevant district / borough.</p> <p>The Light Touch DPS will reopen every 4 months, which will allow SCC to expand the pool of provision to address any gaps.</p>	<p>Ongoing</p>	<p>Short Breaks team</p>
<p><b>Negative</b> - Unmet need may not have been sufficiently identified, particularly where families have suppressed levels of actual need, and when there are barriers to families accessing services. It is difficult to quantify the gaps in provision, as not all required data is collected.</p>	<p>The Light Touch DPS will reopen every 4 months, which will allow SCC to respond to new intelligence about need.</p>	<p>Ongoing</p>	<p>Short Breaks team and Children with Disabilities</p>
<p><b>Negative</b> - Families already using Personal Support services mistakenly think that their support is changing and this leads to additional stress and anxiety, particularly where the transition is not well managed.</p>	<p>Provide clear communication with families throughout the changes to ensure they are aware that existing Personal Support packages with framework providers will not be affected, and that packages with providers who are not on the Light Touch DPS will be transitioned appropriately and sensitively to providers on the DPS.</p> <p>Make sure parents know who to contact if they need additional advice.</p>	<p>1 April 2019</p> <p>Ongoing</p>	<p>SCC Comms. Team</p> <p>Short Breaks team</p>
<p><b>Negative</b> - For children and young people with chronic mental health conditions, the most appropriate support may come from CAMHS provision rather than Short Breaks</p>	<p>Meeting facilitated with Family Voice and CAMHS Manager.</p> <p>Monitor need going forward.</p>		
<p><b>Negative</b> - Lack of incentive for more providers to join the Light Touch DPS, as SCC has been spot-purchasing from other providers.</p>	<p>Ongoing market engagement to encourage more providers to apply to join the Light Touch DPS.</p> <p>The improved coverage that the Light Touch DPS provides (particularly for complex needs) means that children and families receiving support from non-DPS</p>	<p>Ongoing</p>	<p>Procurement team</p>

	<p>providers will be transitioned as appropriate to providers on the Light Touch DPS, and that there will be less need for spot-purchased provision. Therefore, if these providers remain off the Light Touch DPS, their business with SCC will substantially reduce or disappear.</p>		
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**10. Potential negative impacts that cannot be mitigated**

None.

**11. Summary of key impacts and actions**

<p><b>Information and engagement underpinning equalities analysis</b></p>	<ul style="list-style-type: none"> <li>• Engagement with parents and carers:             <ul style="list-style-type: none"> <li>• Approaching 600 responses to online Short Breaks surveys since January 2016, in partnership with Family Voice Surrey (please note this relates to the Short Breaks tender and not Personal Support specifically), however the key messages are relevant to this tender</li> <li>• Around 200 attendances at Short Breaks engagement events by Surrey families and partners since January 2016</li> <li>• Personal Support survey carried out in September 2017</li> </ul> </li> <li>• Engagement with providers:             <ul style="list-style-type: none"> <li>• Engagement event in August 2017, and questionnaire. The draft service specification was also been shared with providers to gain their feedback</li> </ul> </li> <li>• Engagement with colleagues:             <ul style="list-style-type: none"> <li>• Social care professionals through Steering Group meetings and questionnaires</li> <li>• Procurement through Steering Group meetings</li> </ul> </li> <li>• Engagement with Family Voice Surrey             <ul style="list-style-type: none"> <li>• Representation on the Steering Group, and survey on the impact of caring on their health and wellbeing (March 2017)</li> </ul> </li> <li>• Data             <ul style="list-style-type: none"> <li>• Surrey’s Joint Strategic Needs Assessment and other SCC needs assessments</li> <li>• Data provided by the Short Breaks Team, Children’s Services and Finance</li> <li>• ONS data</li> <li>• Local and national research, including identifying good practise from other local authorities in the region</li> </ul> </li> </ul>
<p><b>Key impacts (positive and/or negative) on people with protected characteristics</b></p>	<ul style="list-style-type: none"> <li>• <b>Positive</b> – The Light Touch DPS will give increased choice of provision.</li> <li>• <b>Positive</b> – The Outcomes Framework includes several outcomes and indicators that will positively impact children and young people with protected characteristics.</li> <li>• <b>Positive</b> - Provision will better meet the needs of children, young people with disabilities and their families, as services have been re-designed and re-commissioned to enable them to achieve the outcomes families told us were most important.</li> </ul>

	<ul style="list-style-type: none"> <li>• <b>Positive</b> – Providers have been asked to provide at a very local level (districts and boroughs), meaning smaller, local providers may be more able to join the Light Touch DPS, and providers will be able to focus recruitment locally to better match staff with local need.</li> <li>• <b>Positive</b> - Specific Lots ensure services are accessible to children and young people with complex health needs or behaviours that challenge, and are better aligned to need.</li> <li>• <b>Positive</b> – The Light Touch DPS will allow new providers to join the system every four months to help SCC respond to the growing need for this type of support.</li> <li>• <b>Negative</b> - Some professionals have communicated a lack of confidence in the ability of providers to respond to the growing demand for Personal Support. This is in part due to difficulties in recruiting in this sector. This tender may not change the situation significantly – affecting capacity to support children with disabilities.</li> <li>• <b>Negative</b> – Impact of Direct Payments on providers: skilled staff might leave for non-DPS provision offering support through direct payments where rates are not set by contractual framework agreements with the council. This will have a negative impact on the ability to provide services to children with disabilities.</li> <li>• <b>Negative</b> - Lack of incentive for more providers to join the Light Touch DPS, as SCC has been spot-purchasing from other providers.</li> </ul>
<p><b>Changes made as a result of the EIA</b></p>	<p>No changes identified but comprehensive set of mitigations included below.</p>
<p><b>Key mitigation actions planned to address any outstanding negative impacts</b></p>	<ul style="list-style-type: none"> <li>• Contract management to ensure providers meet outcomes and deliver requirements.</li> <li>• Develop a communication plan to ensure professionals and families are awareness of the new providers and their specialisms</li> <li>• Develop best practise forums</li> <li>• Take advantage of the Light Touch DPS to allow providers to join and provide Personal Support services across its lifetime. This allows us to develop the market and ensure provider are quality assured and contract monitored.</li> <li>• Ensure that providers plan to and deliver the full requirements of the service specification including greater focus on complex health and behaviours that challenge, social capital commitments and implementing new approaches to outcomes monitoring.</li> <li>• Work with providers to develop local recruitment plans wherever possible, to maximise staffing potential at a district and borough level.</li> <li>• Continue to engage with the market and encourage more providers to apply to join the Light Touch DPS.</li> <li>• Develop proposals for a joint funded nurse trainer role, with Health, in response to lack of parental confidence in the ability of provision to meet complex health needs.</li> <li>• Monitor need going forward.</li> </ul>
<p><b>Potential negative impacts that cannot be mitigated</b></p>	<ul style="list-style-type: none"> <li>• None.</li> </ul>

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- <sup>i</sup> SCC SEND Needs Analysis (2017)
- <sup>ii</sup> SCC Draft SEND Sufficiency Plan (2018)
- <sup>iii</sup> SCC Assessment of Need in Relation to Short Breaks in Surrey (2017)
- <sup>iv</sup> SCC Draft SEND Sufficiency Plan (2018)
- <sup>v</sup> *ibid*
- <sup>vi</sup> *ibid*
- <sup>vii</sup> *ibid*
- <sup>viii</sup> JSNA Chapter: children and young people who have SEND (Feb 2017) <https://www.surreyi.gov.uk/jsna/children-with-send/>
- <sup>ix</sup> *ibid*
- <sup>x</sup> GIRES (2011), The Number of Gender Variant People in the UK - Update 2011; <http://www.gires.org.uk/wp-content/uploads/2014/10/Prevalence2011.pdf>
- <sup>xi</sup> *ibid*
- <sup>xii</sup> ONS (2017), Births by mothers' usual area of residence in the UK (accessed 26 July 2018) - <https://www.ons.gov.uk/peoplepopulationandcommunity/birthsdeathsandmarriages/livebirths/datasets/birthsbyareaofusualresidenceofmotheruk>
- <sup>xiii</sup> Best Beginnings, Parents with Disabilities, (accessed 11 July 2018), <https://www.bestbeginnings.org.uk/parents-with-disabilities>
- <sup>xiv</sup> Best Beginnings, Parents with Learning disabilities, (accessed 11 July 2018) <https://www.bestbeginnings.org.uk/parents-with-learning-disabilities>
- <sup>xv</sup> Action for Children, The Next Chapter: Young People and Parenthood, (accessed 11 July 2018) <https://www.actionforchildren.org.uk/media/9612/the-next-chapter.pdf>
- <sup>xvi</sup> JSNA Chapter: Ethnicity, <https://www.surreyi.gov.uk/jsna/surrey-context/#header-lesbian-gay-bisexual-transgender-and-questioning-lgbtq>
- <sup>xvii</sup> SCC Needs analysis for Surrey's Gypsy, Roma and Traveller children and young people 2013
- <sup>xviii</sup> Short Breaks service, Surrey County Council, 2017
- <sup>xix</sup> JSNA Chapter: Religion and Belief, <https://www.surreyi.gov.uk/jsna/surrey-context/#header-lesbian-gay-bisexual-transgender-and-questioning-lgbtq>
- <sup>xx</sup> SCC Draft SEND Sufficiency Plan (2018)
- <sup>xxi</sup> NAS Gender and autism (accessed 10 July 2018) <https://www.autism.org.uk/about/what-is/gender.aspx>
- <sup>xxii</sup> JSNA Chapter: Lesbian, gay, bisexual and transgender, <https://www.surreyi.gov.uk/jsna/surrey-context/#header-lesbian-gay-bisexual-transgender-and-questioning-lgbtq>
- <sup>xxiii</sup> JSNA Chapter: Adult Carers, <https://www.surreyi.gov.uk/jsna/adult-carers/>
- <sup>xxiv</sup> *ibid*
- <sup>xxv</sup> Carers UK (2012) In Sickness and in Health (accessed 26 July 2018), <https://www.carersuk.org/for-professionals/policy/policy-library/in-sickness-and-in-health>
- <sup>xxvi</sup> Carers UK (2015) Alone and caring (accessed 26 July 2018), <https://www.carersuk.org/for-professionals/policy/policy-library/alone-caring>
- <sup>xxvii</sup> JSNA Chapter: Young Carers and Young Adult Carers, <https://www.surreyi.gov.uk/jsna/young-carers-and-young-adult-carers/>