

Somerset Equality Impact Assessment

Before completing this EIA please ensure you have read the EIA guidance notes – available from your Equality Officer

Organisation prepared for	Somerset County Council		
Version	V8.0	Date Completed	10 January 2019

Description of what is being impact assessed

Proposals for the alteration and/or reduction of early help services provided to children and their families.

The Council is proposing to reduce some of the support currently provided for children and their families by the Council's getset service. The support that would be reduced is mostly for families with children aged 0 to 4 who have Level 2 additional needs as set out in the Somerset Safeguarding Children Board's [Effective Support for Children and Families in Somerset guidance](#).

Early help means providing support as soon as a problem emerges, at any point in a child's life. Effective early help relies upon families, communities and local agencies working together to identify and assess the need for early help.

Level 2 describes children and families who require some extra support in addition to what every child receives, to help them reach their potential. This may be short term, but requires a targeted service to support the child and family.

The Council's getset services are part of Somerset's early help offer and is delivered in 2 parts:

- Level 2 - Work with children and families with 'additional' needs, aged 0-4
- Level 3 - Work with children and families who have 'complex' needs aged 0-19 and this work requires support from different organisations working together.

Please note: Early help is not the help and support that children and families get when they have serious difficulties and require statutory interventions including children's social care. This help and support, including that from getset Level 3, is unaffected by these proposals.

The work that getset level 2 undertake can be grouped together:

Parenting support groups (including parenting programmes)

Groups can be offered in 2 ways:

Universal provision – Groups that support the population as a whole. These services are available to all children, young people, and their families. They can be accessed without any type of assessment.

Targeted provision - These are for children, young people and their families who may need additional support to access services, or may need groups or services that are specifically designed to meet their needs. Some targeted provision can be accessed directly with or without an assessment.

There are different groups which can be explained below:

Bumps and Babes	Universal – Group for parents to be and parents with babies under 18 months.
Messy Play Stay, Play and Learn	Universal - Group for parents to come together with other families to have fun playing and learning with their children (aged under 5).
PEEP (Peers Early Education Partnership)	Targeted - Learning together programme supporting parents and children to learn together.

Support for individual families

This work involves direct, one-to-one support with individual children and families. It involves establishing relationships and working closely with families to carry out an assessment, which is called an Early Help Assessment) which is used to help discuss what support is needed to get families back on track and to make positive changes to their lives.

FUTURE PROPOSAL

- Retain getset level 2 team until March 2020 providing support to children with some additional needs at level 2 and their families by delivering group work and some key parenting programmes in areas identified as greatest need.
 - The team will move to providing group work and building resilient community settings, rather than individual case work, working alongside other key agencies that support 0-4 year olds eg health visitors and Early Years settings enabling more families to be supported.

- The team will provide some key parenting programmes and groups
- The team will deliver a “train the trainer” model for evidence based parenting programmes open to any community / voluntary group to enable them to identify and support more vulnerable families and run parenting programmes
- The team will align with the Public Health Nursing teams and be allocated across the 8 family hubs; they should act as community agents and help partners through training to identify and provide support for families so that partners can continue this once the getset level 2 service ends in March 2020.

NB these proposals form part of a larger programme of activity to improve Somerset’s early help approach.

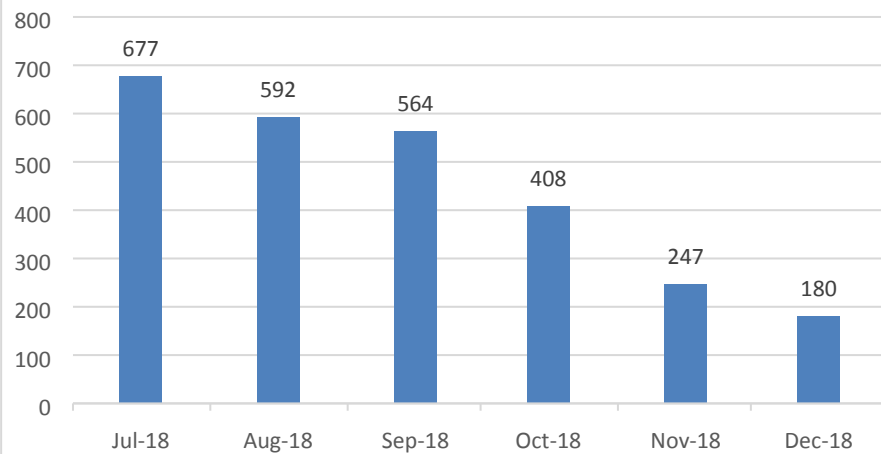
Impacts on staff have not been considered as part of this assessment due to the low numbers of staff affected. Any consideration around changes to staffing and impacts upon them will be dealt with separately through HR policy and practice and via a collective consultation with the unions.

Evidence

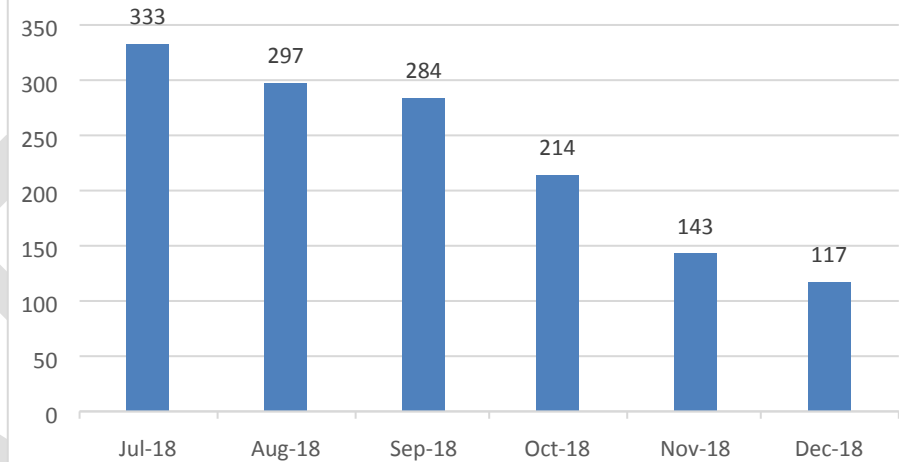
What data/information have you used to assess how this policy/service might impact on protected groups? Sources such as the [Office of National Statistics](#), [Somerset Intelligence Partnership](#), [Somerset’s Joint Strategic Needs Analysis \(JSNA\)](#), Staff and/or [area profiles](#), should be detailed here

Current demand of getset Level 2 Service

Number of Open Cases for Level 2 (by Child)



Number of Open Cases for Level 2 (by Families)



Open cases and caseloads

The following graphs show the Level 2 open cases, by child and by family since July 2018.

The revised staffing structure in getset level 2 was implemented from the 1 January 2019:

- July - December 2018 = 30 FTE (full time equivalent)
- January 2019 = 11 FTE

Using the above staff numbers the average caseload for a worker in July 2018 can be calculated by using the figure of 333 families divided by 30 FTE which equates to 11.1 families. In December this has reduced to 117 families divided by 30 FTE which equates to 3.9 families.

It is worth noting these calculations are based on establishment rather than headcount. From January 2019 the Level 2 establishment has reduced to 11 FTE which if using December's data would equate to a caseload of 10.6 families per worker. This remains well within the agreed caseload figures of 1:20.

Age breakdown of cases

The level 2 cases (as at December 2018) can be broken down further to show the split of the cases across the 4 geographical

areas and shows unborn children and up to the age of 4 years being worked with.

Age	Mendip	Sedgemoor	South Somerset	Taunton & West Somerset
Unborn	1	3	3	1
0 to 4	32	20	43	55

Gender breakdown

The table below shows the breakdown for children with open cases by gender (As at December 2018).

	Level 2 (Children)
Female	66
Male	79
Unknown	1
Unborn	8

Disability data

The level 2 cases (as at December 2018) shows that 3 children had a disability.

Ethnicity data

The table below shows the breakdown for children with open cases by ethnicity level 2 cases (as at December 2018)

Ethnic Group	Children
Any Other Ethnic Group	1
Asian/Asian Bri - Other Asian	2
Black or Black British - African	1
Client Declined	2
Filipino	1

Mixed - Other Mixed Background	2
Mixed - White & Asian	1
White - British	123
White - Other Cultural Background	1
White - Other European	1
Unknown	19

Parenting Support Groups

The following tables show attendance at the getset led parenting support groups across the 5 geographical areas.

Area	Group	01/01/2018 - 31/03/2018			01/04/2018 - 30/06/2018			01/07/2018 - 30/09/2018			01/10/2018 - 31/12/2018		
		No. of times group occurred	No. of 0-4 children attended (0-4)	No. of carers attended	No. of times group occurred	No. of 0-4 children attended (0-4)	No. of carers attended	No. of times group occurred	No. of 0-4 children attended (0-4)	No. of carers attended	No. of times group occurred	No. of 0-4 children attended (0-4)	No. of carers attended
Mendip	Bumps and Babes	15	45	45	19	46	57	11	31	34	15	28	33
	Messy Play	10	16	17	0	0	0	2	14	12	0	0	0
	PEEP	0	0	0	0	0	0	0	0	0	0	0	0
	Stay, Play & Learn	63	151	140	56	140	133	28	140	128	22	79	81
Mendip Total		88	212	202	75	186	190	41	185	174	37	107	114
Sedgemoor	Bumps and Babes	11	13	17	12	13	20	10	16	17	12	7	7
	Stay, Play & Learn	21	57	58	23	53	54	15	32	30	19	31	27
Sedgemoor Total		32	70	75	35	66	74	25	48	47	31	38	34
South Somerset	Bumps and Babes	0	0	0	0	0	0	3	1	1	9	7	9
	PEEP	38	54	59	47	49	57	10	19	21	6	6	10
	Stay, Play & Learn	35	70	69	24	55	51	9	38	30	17	36	32
South Somerset Total		73	124	128	71	104	108	22	58	52	32	49	51
Taunton Deane	Bumps and Babes	29	41	45	24	33	37	23	35	39	27	15	17
	Drop in	0	0	0	0	0	0	0	0	0	0	0	0
	PEEP	9	12	12	2	1	1	0	0	0	0	0	0
	Stay, Play & Learn	37	130	137	33	99	97	23	90	101	32	51	49
Taunton Deane Total		75	183	194	59	133	135	46	125	140	59	66	66
West Somerset	PEEP	0	0	0	5	10	8	2	6	5	0	0	0
	Stay, Play & Learn	35	126	125	32	85	82	26	53	56	24	31	28
West Somerset Total		35	126	125	37	95	90	28	59	61	24	31	28
Grand Total		303	715	724	277	584	597	162	475	474	183	291	293

Appendix 1 of the public consultation listed other groups and activities that are run by other people or organisations that provide the same kind of support for children and families. The list below shows how many groups are based in venues linked to a faith. This

shows that there are other groups and activities for people with religious/non religious beliefs.

Area	Total number of groups	Groups based in venues linked to a faith
Mendip	109	23 (21.1%)
Sedgemoor	84	12 (14.2%)
South Somerset	111	35 (31.5%)
Taunton	57	11 (19.2%)
West Somerset	60	11 (18.3)

Consultation responses

The public consultation ran for 8 weeks and over 900 responses were received. Over 1,200 free text comments, were analysed to identify the key themes emerging from the responses. The full report, analysis and breakdown of demographics can be [seen here](#).

Some key highlights from the consultation:

- 171 responses were from someone who uses the getset service. At any one time, over the last 12 months, an average of 299 families at Level 2 were receiving individual support from getset staff; which equates to 57% which is a good representation of getset users.
- The largest response was 235 (32%) which were members of staff either from SCC or the wider children's workforce.
- The strongest theme from the free text fields was that early help and prevention is key to preventing families' needs escalating and requiring higher levels of care.
- 89.6% of respondents had 'some awareness' or were 'well aware' of the parenting support groups currently available across Somerset, which is reassuring.
- Across all districts over 60% of respondents said there would be either a 'notable impact' or a 'significant impact' on individuals, organisations and communities if parenting support groups were stopped
- Across all districts over 65% of respondents said there would be either a 'notable impact' or a 'significant impact' on individuals, organisations and communities if support for individual families was stopped.
- Over 80% of respondents who were users of the getset service were women.

Who have you consulted with to assess possible impact on protected groups? If you have not consulted other people, please explain why?

In an attempt to ensure that the views of traditionally under-represented areas of the community were captured and considered, specific programmes of activity were developed as part of the consultation process. Diversity Voice were commissioned to translate the consultation paperwork into Portuguese, Polish and Romanian and then engage with relevant families in these communities. This resulted in at least 56 consultation questionnaires being completed by nationalities including the above as well as Bulgarian, Lithuanian, Danish and French.

Responses received through the online consultation:

- 15.0% were men
- 73.7% were women
- 7.0% considered themselves to have a disability
- 27.2% defined themselves as a 'carer'
- 17.2% were in receipt of universal credit/family tax credit
- 73.6% has children
- 78.5% had access to a car
- 39.9% had access to transport (including public transport)

Analysis of impact on protected groups

The Public Sector Equality Duty requires us to eliminate discrimination, advance equality of opportunity and foster good relations with protected groups. Consider how this policy/service will achieve these aims. In the table below, using the evidence outlined above and your own understanding, detail what considerations and potential impacts against each of the three aims of the Public Sector Equality Duty. Based on this information, make an assessment of the likely outcome, before you have implemented any mitigation.

Protected group	Summary of impact	Negative outcome	Neutral outcome	Positive outcome
Age	<ul style="list-style-type: none"> • There could be a disproportionate impact on young parents who are more likely to require additional support and guidance around parenting skills. • The impact of not providing support and guidance to parents/carers with children aged 0-4 could increase the need 	☒	☐	☐

	for those families. This could see an increase in families presenting for level 3 and 4 services.			
Disability	<p>getset is open to all children which can include children with special educational needs and disability (SEND).</p> <p>SCC also provides early help through its Children's with Disabilities Team which offers support to families who have a child with a disability. This includes one to one emotional support, respite and opportunities for children to attend activities. The Special Educational Needs and Disabilities (SEND) Team provide advice and guidance for children and young people who need additional help with learning and who may require an Education Health and Care plan (EHCP). They will also signpost to other relevant organisations to provide support.</p> <p>Support for parents with learning disabilities or literacy skills could be reduced which would mean their ability to be able to engage in additional support and guidance would be reduced.</p> <p>SCC Adults Learning Disabilities Service support adults with learning disabilities of a working age and older people who have disabilities, mental health problems, or a sensory loss.</p>	☐	☒	☐
Gender reassignment	On review of the data we don't foresee any disproportionate impacts on this group.	☐	☒	☐
Marriage and civil partnership	On review of the data we don't foresee any disproportionate impacts on this group.	☐	☒	☐

Pregnancy and maternity	On review of the data we don't foresee any disproportionate impacts on this group.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Race and ethnicity	Reduction in support of level 2 provision could result in an increase in demand on level 3 and 4. This increase in demand could result in staff not having as much time to support service users. For service users who have English as a second language this may impact on the time available to communicate through an interpreter.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Religion or belief	On review of the data we don't foresee any disproportionate impacts on this group.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Sex	Current data on open cases show slightly more male children requiring support than females.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sexual orientation	On review of the data we don't foresee any disproportionate impacts on this group.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Other, e.g. carers, veterans, homeless, low income, rurality/isolation, etc.	<p>The removal of level 2 support for socially isolated and vulnerable groups in Somerset could lead to increased isolation and vulnerability for these groups.</p> <p>The removal of level 2 support for families on low income in Somerset could lead to increased isolation and vulnerability for these groups. This group is less financially able to access additional support and guidance where there is a fee attached.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Negative outcomes action plan

Where you have ascertained that there will potentially be negative outcomes, you are required to mitigate the impact of these. Please detail below the actions that you intend to take.

Action taken/to be taken	Date	Person responsible	How will it be monitored?	Action complete
NB A set of proposals to improve Somerset's early help approach is being developed, subject to cabinet approval in February 2019 and will then form a detailed project action plan. Main proposals are:				
Retain getset level 2 team in its current form, for the implementation period until March 2020 providing support to children with some additional needs at level 2 and their families by delivering group work and some key parenting programmes in areas identified as greatest need				
Continue to work with schools to develop the Team around the School model, ensuring it is fully embedded and reporting performance to assess impact. Consider feasibility to extend the model to cover ages 0-4 and 16+ ie wider remit than those of school age				
Empower parents/carers to be confident in utilising self-help methods to increase self reliance, in line with SCC's digital strategy, by signposting families via Somerset Choices and the local offer				
Redesign and resourcing of Somerset Direct (SD) to be first point of contact for young people and families (based on adults model) providing advice and guidance, only referring onto the Early Help (EH) Advice Hub if appropriate				

Remodel EH Advice Hub as one multi-agency support and triage point providing support and training for professionals and for families requiring further telephone advice				
Assess requirements for implementing the Early Help Case Management (EHM) portal and / or roll out EHM to a wider group of professionals across partners to support them in early help work with families				
Undertake further development of the current Early Help Assessment (EHA) into a digital form enabling quicker and simplified process for all practitioners				
Establish an annual £200k commissioning / grant fund (which could be increased with other partners financial contribution eg CCG, district councils) that would initially be focused on mitigating gaps identified by cessation of getset level 2 for example investing in parenting programmes, and consideration to establish a children's version of community connect and community catalyst model (based on successful implementation and learning from adults commissioners)				
Develop stronger, collaborative relationships with district councils working in partnership to develop and deliver a community development offer.				
Collaborate with partners and larger voluntary and community sector provision eg Homestart, Safe Families, Yeovil4Families, YMCA etc to identify further opportunities				

Strengthen the multi-agency Early Help Area Advisory Boards in each district council area to understand local needs, undertake local audit of provision and identifying gaps and prioritising early help action in their areas. This will allow integration with the emerging Neighbourhood model.				
Utilise Somerset Choices and the SEND Local Offer as key resource of information, advice and guidance to families by ensuring community groups, support and activities are widely publicised, thereby supporting individuals to help themselves and promote independence				
Remodel and integrate children's services level 3 services in line with Peopletoo recommendations.				
Retain a separate Children with Disabilities level 2 and 3 team and explore integration with the and explore integration arrangements with SEND and the NHS to provide a coherent offer neighbourhood offer				
Remodel the Education Welfare Service to support the schools funded L2 service				
Test a business case to implement the national model of Pause in Somerset - a programme of support to vulnerable mothers who have, or are at risk of, repeat removals of children being taken into care				
Strengthen multi-agency EH Strategic Commissioning Board				
Continue to embed Troubled Families (TF) approach and				

strategic outcomes across partners				
Improved information sharing and continued development and use of the TF data warehouse to provide intelligence on need and allow targeting of resources				
Continued development and awareness raising of early help “tools” ie Early Help Assessment, portal/access to EHCM, professional choices, effective support guidance				
Continue to train and develop the early help workforce				
Other actions:				
Users with SEND can access support and guidance from the Early Support Team and the Resources Team within the Children with Disabilities Team as well as the Early Help Advice Hub	Ongoing	Children with Disabilities Team/Early Help Advice Hub		
A co-ordinated ante natal and post natal offer of individual support around breastfeeding will be available through maternity and public health nursing services, this is tailored to individual needs and linked to specialist services (for example drugs and alcohol or children’s social care) where required	Ongoing	Maternity and Public Health Nursing		
School readiness starts at birth, with the support of parents and caregivers, when children acquire the social and	Ongoing	Early Years Commissioners		<input type="checkbox"/>

<p>emotional skills, knowledge and attitudes necessary for success in school and life. Closely monitor take up of targeted 2 year old funding for child care.</p>				
<p>If negative impacts remain, please provide an explanation below.</p>				
<p>Effectiveness of early help interventions across the partnership needs to be closely monitored, as the combined effect of the proposed reductions and mitigating actions is difficult to assess with any accuracy. It is likely that some families will receive reduced support.</p>				
<p>Completed by:</p>	<p>Children's Commissioning Team</p>			
<p>Date</p>	<p>16th January 2019</p>			
<p>Signed off by:</p>				
<p>Date</p>				
<p>Equality Lead/Manager sign off date:</p>				
<p>To be reviewed by: (officer name)</p>				
<p>Review date:</p>				