

## Appendix 4 Summary of Equality Impact Assessment for the Housing Related Support Services Redesign following the Public Consultation

An Equality Impact Assessment Version 1 was developed prior to public consultation for the Housing Related Support (HRS) Services Redesign . A key part of the consultation was to better understand the impact the changes might have, consider how to minimise the negative impact on these groups and ensure equalities considerations were at the forefront of their decision-making in redesigning the new services. WCC sought feedback on their Equality Impact Assessment Version 1 and thoughts and ideas on how the negative impact on specific groups could be mitigated, both directly and the impact on groups which support people with protected characteristics. This has been reviewed after the public consultation and we have subsequently developed Equality Impact Assessment Version 2. (Appendix 1).

EIA version 1 identified that the proposals have the potential to have some negative impacts on people with protected characteristics and that careful consideration needs to be given to these with ideas on how to mitigate these impacts where possible. This was reinforced within the consultation with some additional impacts identified. As a result, following the public consultation, we have reviewed the redesign proposals and changed some to reduce the impact.

We shall be presenting the redesign model to Cabinet in January 2024 for approval to move forward and tender. As we amend the specifications and contract for the redesigned model we shall be building on our learning and feedback. When contracts are awarded, we shall be planning a robust mobilisation process to ensure any transfer of services do not impact on customers and there is clarity on future referral pathways and the offer for HRS services. Performance and quality contract monitoring requirements will be outlined in the tender process and will remain in place throughout the lifetime of the contract.

**Table 1 Summary of Equality Impact Assessment Feedback and Consideration for Service Model and Specification**

<b>Equality Impact Assessment</b>			
<b>Consultation Feedback</b>	<b>Impact &amp; Suggestions for redesign (Examples of comments provided)</b>	<b>We will</b>	<b>Further considerations for service model and specification</b>
From Ask Warwickshire Stopping the dedicated Disabled people floating HRS - Concerns about exclusion of	Concern and lack of specificity for vulnerable groups were outlined from some respondents, this included: refugees, asylum seekers and those from countries at war; those with disabilities, including	We have updated the EIA Version 2.	Requirements for providers to align to WCC policy regarding equality will be clearly

<p>certain individuals and its impact on waiting lists, accessibility should remain a priority.</p> <p>42% believe EIA accurately reflects impact, 30% were unsure and 28% felt it did not.</p> <p>Those who use HRS services were most likely to say they did not know whether the EIA identified the impact of these proposals, a finding that was consistent with Easy Read responses</p> <p>Outreach findings: Women found it easier and quicker to access support, but men found the support more helpful</p> <p>Disabled respondents (36%) found it easier to access the required support compared to non-disabled (24%)</p> <p>Young people (18-24) were less likely to seek out support but were quicker at accessing it when they did</p>	<p>mental health and autism; male offenders; illiterate individuals; young parents and their babies; Gypsy, Roma, Travellers, and young people.</p> <p>Impact of decommissioning some services, service delivery and effectiveness, lack of involvement.</p> <p><i>"No mention of the impact on Gypsy, Roma or Traveller communities - only generic 'other ethnic groups'"</i></p> <p><i>"The issue of ex-prisoners not being allowed onto the council housing register."</i></p> <p><i>"I think it forgets about illiterate people, who cannot navigate the housing system"</i></p> <p>How to reduce the impact focussed on staff training; service availability and accessibility with face to face alongside virtually/telephone; communication strategy so everyone is aware of changes and supported through the transition of mobilisation; consideration of specialist team within the redesign services to meet specific needs in particular people living with disabilities; robust monitoring and data collection.</p> <p><i>"Warwickshire Public Health is pleased to see the level of detail that has been collated in this EIA"</i></p> <p><i>"I think the EIA is quite clear on impact"</i></p>	<p>We will continue to monitor equality data (access and outcomes) throughout the life of the contract.</p>	<p>stated in the service specifications and tested in the tendering process.</p> <p>Staff training, accessibility and the requirement for personalised approach will be outlined in the specification to meet the diverse needs of vulnerable groups, including those with protected characteristics</p> <p>Ensure the mobilisation of services is smooth and clarity of redesigned HRS services, referral pathways is communicated to the public and key stakeholders that refer people.</p>
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## Public Sector Equality Duty (PSED)

Public Authorities must have 'due regard' to the need to eliminate unlawful discrimination, advance equality of opportunity and foster good relations. Please evidence how your proposed activity meets our obligations under the PSED. When we commission providers to deliver services on behalf of WCC we expect them to carry out the PSED duty on our behalf and this is evidenced in our specification and contracts; evaluated as part of the tender process and monitored throughout the lifetime of our contracts.

**Table 2: Public Sector Equality Duty (PSED)**

	<b>Evidence of Due Regard</b>
<p><b>Eliminate unlawful discrimination (Harassment, victimisation and other prohibited conduct):</b></p>	<p>During the tender process it will be made clear to providers the expectations from our commissioned providers including discrimination policies for customers and staffing of services.</p>
<p><b>Advance equality of opportunity:</b> This involves</p> <ul style="list-style-type: none"> <li>removing or minimizing disadvantages suffered by people due to their protected characteristics.</li> <li>taking steps to meet the needs of people with certain protected characteristics where these are different from the needs of other people, for example, taking steps to take account of people with disabilities;</li> <li>encouraging people with certain protected characteristics to participate in public life or in other activities where their participation is disproportionately low.</li> </ul>	<p>During the tender process it will be clear from the specification that providers are to respond to and deliver ongoing support to customers through an inclusive and non-discriminatory approach. We will expect our providers to make reasonable adjustments to ensure everyone can access the support they require.</p> <p>The services will cover the support of customers with disabilities with their housing needs. This will support them to participate in public life and other activities. The service also supports offenders and care leavers to find suitable housing arrangements and with their housing and financial needs.</p> <p>The consultation targeted those groups who are seldom heard including vulnerable adults and young people to participate in the public consultation. This has ensured that their voice and opinions are heard and listened to and as a result we have changed some of the proposals and the final recommendation for the redesign of Housing Related Support services.</p>
<p><b>Foster good relations:</b> This means tackling prejudice and promoting understanding between people from different groups and communities.</p>	<p>Within the service specifications we require service providers to evidence their commitment to eliminate unlawful discrimination, advance equality of opportunity and foster good relations including aiming to employ diverse staff who reflect the communities we serve so that everyone can be understood and respected.</p> <p>Training and support being available for staff about working with customers and communities from diverse backgrounds and identities so that everyone in Warwickshire can feel safe, valued, supported and respected.</p>

**Table 3 Protected Characteristic Impacts identified and changes made following consultation**

	<b>Impact type (+) (=) (-) or (+&amp;-)</b>	<b>Nature of impact</b>	<b>What we have done following consultation to reduce the impact identified</b>
<b>Age</b>	<b>(+&amp;-)</b>	<p>There will be fewer customers supported through the young people accommodation services. There will be fewer customers supported through the adults' accommodation service. These customers may still require accommodation support services which may increase pressure in other areas, some of which may not be available to some age groups due to the nature of the service.</p> <p>Having two separate services (young people 16 – 25 and adults 25 +) will ensure the needs of people in transition is met adequately so we don't anticipate a negative impact on transitions.</p> <p>Whilst concern was expressed for young people generally having access to HRS services in relation to the budget allocation this was felt to be fair and reasonable given the savings required.</p> <p>For young people's HRS services, we recommend not reducing the time limits for young people. This reflects feedback given on the consultation feeling young people in particular would benefit from maintaining their current length of support. For adults' HRS services we recommend the reductions in duration are taken forward.</p>	<p>Changed proposal 4 (Shorten the maximum duration of HRS services) to recommend young people's duration of support is not changed and remains the same as current HRS services.</p> <p>All HRS services will offer holistic and personalised support to meet need, promote wellbeing, safety, resilience, independence to prevent, reduce and/or delay an individual's need for ongoing care and support. Clarity will be given within the specification with allowance for exceptions where necessary to support clients whose outcomes have not been met within the expected timescale.</p>

<p><b>Disability</b></p> <p>Consider:</p> <ul style="list-style-type: none"> <li>• Physical disabilities</li> <li>• Sensory impairments</li> <li>• Neurodiverse conditions (e.g. dyslexia)</li> <li>• Mental health conditions (e.g. depression)</li> <li>• Medical conditions (e.g. diabetes)</li> </ul>	<p><b>(+&amp;-)</b></p>	<p>The disabilities contract for floating support is currently separate. In the new contract we propose that the needs of people with disabilities will be met by two inclusive services – 16 - 25 years old floating support and 25+ floating support. We expect these services will offer a personalised service that meets individual needs of customers, inclusive of those with disabilities.</p> <p>From an inclusivity perspective, respondents thought that one service for all could avoid segregation and increase equality and streamline services. However, respondents caveated that it is essential that quality remains high and specialised support for disabled people is still available.</p> <p>Some respondents had great concerns regarding the potential loss of specialised support for disabled people. Respondents emphasised that a generalised service may not be able to address the unique needs of disabled people and may fail to provide the tailored support they require.</p>	<p>We recommend implementing the proposal and create two inclusive services (young people 16 – 25 years and adults 25+) while being mindful of concerns in relation to specialist skills, training and knowledge and ensure these are incorporated within the specification and future monitoring requirements.</p> <p>To support consistency in service and quality, within the specification we shall strengthen the staff training requirements around trauma informed care, psychologically informed environments, autism, learning disability, visual impairment awareness training.</p> <p>Providers will be expected to evidence that staff members are adequately trained and experienced for supporting disabled customers. This may result in providers choosing to have specialist staff with dedicated caseloads or adopting alternative ways to address this.</p> <p>We will also build in monitoring of accessibility and outcomes to ensure we understand how inclusive our services are for people living with disabilities.</p>
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<b>Gender Reassignment</b>	(=)	<p>This service redesign won't directly impact.</p> <p>No further equality impacts were identified from the consultation.</p>	The specification will outline training requirements to ensure providers have sufficient training to support the wide range of potential customers.
<b>Marriage and Civil Partnership</b>	(=)	<p>This service redesign won't directly impact.</p> <p>No further equality impacts were identified from the consultation.</p>	The specification will outline training requirements to ensure providers have sufficient training to support the wide range of potential customers.
<b>Pregnancy and Maternity</b>	(+&-)	The current mother and baby and family accommodation services for young people offer under the HRS Young People's services for 16-25 years will not have a reduction in duration of service as proposed and will remain the same as is currently available.	Changed the recommendation so as not to reduce the duration of support for young people.
<b>Race: Including:</b> <ul style="list-style-type: none"> <li>• Colour</li> <li>• Nationality</li> <li>• Citizenship</li> <li>• Ethnic or national origins</li> </ul>	(=)	<p>Data on ethnicity needs to be improved before clear conclusions can be drawn. However, there are suggestions in available data that there are differences in the proportions of people identifying as Asian or Black in the general population compared with the current HRS service users.</p> <p>No further equality impacts were identified from the consultation.</p>	We will monitor equality data (access and outcomes) throughout the life of the contract.
<b>Religion or Belief</b>	(=)	The number of people using the services at present are representative of the religious make up of Warwickshire, however data collection across current services is not consistent. Further work is required in this area to better	We will monitor equality data (access and outcomes) throughout the life of the contract.

		<p>understand if there are barriers for customers in accessing services based on religion or belief.</p> <p>No further equality impacts were identified from the consultation.</p>	
<b>Sex</b>	<b>(+&amp;-)</b>	<p>Looking at the current disabilities service we have a slightly higher percentage of males using the service at 58% compared to 42% females. For young people 16-25 years floating services - 35% of customers are male compared to 65% female and for generic adult 25+ floating services 45% are males and 55% are females. By combining the floating support services, we would not envisage a direct impact on any specific sex and the overall service is expected to reflect the Warwickshire profile.</p> <p>No further equality impacts were identified from the consultation.</p>	<p>From the outreach findings it was identified that women and men may experience accessing support differently. Whilst the consultation report was clear to state this isn't statistically valid it is interesting to note and consider when developing the offer around early information, advice and signposting, brief intervention and how to address in a personalised way.</p> <p>More women (39%) reported finding it easy or very easy to access support compared to men (15%).</p> <p>More men (60%) found the support they received to be helpful compared to women (51%).</p>
<b>Sexual Orientation</b>	<b>(=)</b>	<p>Further work is required in this area to better understand if there are barriers for customers in accessing support services based on sexual orientation.</p> <p>No further equality impacts were identified from the consultation.</p>	<p>WCC will work with services under the new contract/s to develop good quality data collection tools which will support this going forward.</p>

<p><b>Vulnerable People:</b></p> <ul style="list-style-type: none"> <li>• Individuals who suffer socio-economic disadvantage</li> <li>• Armed Forces (WCC signed the <u>Armed Forces Covenant</u> in June 2012)</li> <li>• Carers</li> <li>• Homeless</li> <li>• People leaving Prison</li> <li>• People leaving Care</li> </ul>	<p>(=)</p>	<p>The identified vulnerabilities of people within the current disability services are similar to that of other customers. The specification will outline training requirements to ensure providers have sufficient training to support the wide range of potential customers. Providers will be required to work with customers though their support offer/arrangements in a way which supports customers to continue to access/attend other key services/appointments.</p> <p>Concerns were expressed that no further equality impacts were identified from the consultation.</p>	<p>Recommendation 3 – offer flexible, shorter interventions. We recommend proceeding with an enhanced triage process that offers early information, advice and signposting, brief intervention which supports resolving issues at the earliest stage and only offering short-term HRS support for those that require on-going support. This will improve the customer’s journey to get the right service at the right time, telling their story only once to HRS services.</p> <p>Triage was considered an effective way to identify those in greatest need. Whilst a 12-week service was suggested within this proposal and shorter duration support in proposal 4 - there was overwhelming support to ensure the services remained personalised to each person receiving support.</p> <p>With this in mind, stating a precise 12-week service timescale may not be needed. Focus will remain on assessing individuals’ needs and whether advice and information, brief intervention and/or a short-term HRS service is required. All support offered will be based on mutually agreed support plans and outcomes monitored to support progression.</p>
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			<p>Ensure the mobilisation of services is smooth and clarity of redesigned HRS services, referral pathways is communicated to the public and key stakeholders that refer people.</p> <p>Devise monitoring of services that looks at outcomes and captures customers' feedback.</p>
<p><b>Health Inequalities (HI)</b></p> <p>Many issues can have an impact on health: is it an area of deprivation, does every population group have equal access, unemployment, work conditions, education, skills, our living situation, rural, urban, rates of crime etc</p>	(-)	<p>Overall decrease in service may result in some customers who require support not accessing this which can increase stress and anxiety around their housing situation. The knock-on impact of a reduction of service therefore may risk increasing negative impacts in other areas of customers lives.</p> <p>We will work with customers, providers and district and borough councils to support with access to alternative services and other support services related to the specific area of need/inequality. Providers will be required to work with customers through their support offer/arrangements in a way which supports customers continuing to access/attend other key services/appointments.</p> <p>It was felt that the service redesign could lead to increased mental health issues and concern was raised regarding social and rural isolation and digital exclusion.</p>	As above

<p><b>Other Groups</b></p> <p>If there are any other groups</p>		<p>Generally concerns were raised for the following groups who are not specifically identified and may be impacted</p> <ul style="list-style-type: none"> <li>• Gypsy, Roma, Travellers</li> <li>• Illiterate individuals</li> <li>• Refugees, asylum seekers and those from countries at war</li> </ul> <p>Except for people with no recourse to public funds HRS services may be accessed by people from these groups.</p>	<p>Ensuring the communication plan is effective and we have a clear offer and a trauma informed and personalised approach which will support these groups' access.</p> <p>This will include a clarity of offer, with an enhanced triage system and sign posting to the right service, referral pathways (self referral and referrals by organisations) and is communicated to the public and key stakeholders that refer people.</p>
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## Section Two: Sign Off

**N.B** To be completed after the EIA is completed but before the area of work commences.

<b>Name of person/s completing EIA</b>	Victoria Church, Victoria Jones and Jackie Soulier
<b>Name and signature of Assistant Director</b>	Becky Hale
<b>Date</b>	22 <sup>nd</sup> February 2023
<b>Date of next review and name of person/s responsible</b>	September 2023 - Victoria Jones

<b>Name of person/s completing EIA Version 2 Updated</b>	Ranbir Johal and Victoria Jones
<b>Name and signature of Assistant Director</b>	Becky Hale
<b>Date</b>	October 2023

<b>Name of person/s completing EIA Summary following Consultation</b>	Victoria Jones
<b>Name and signature of Assistant Director</b>	Becky Hale
<b>Date</b>	17.10.23
<b>Date of next review and name of person/s responsible</b>	April 2025 - Victoria Jones

Once signed off, please ensure the EIA is uploaded using the following form. Please name it “EIA [project] [service area] [year]”: Upload Completed Equality Impact Assessments

These will be stored on a Sharepoint library which WCC colleagues can access.