

Appendix 8: Summary of Findings

Proposal 1: Budget allocation – retain both accommodation based and floating HRS Services and allocate the available budget in the same proportions			
Consultation Feedback	Impact & Suggestions for Redesign (examples of comments provided)	We will	Further considerations for service model and specification
<p>54% of respondents on Ask Warwickshire agreed with 24% disagreeing. Those who agreed felt HRS services are critical providing support to vulnerable people. And this was considered a balanced approach.</p> <p>Those who disagreed expressed concerns that despite retaining both services, the budget reductions will inevitably lead to a decline in quality, effectiveness and scope of services.</p> <p><i>"Our services, across the county, are already seeing more and more households threatened with homelessness or actually homeless."</i></p> <p>In Outreach – people were asked whether to keep providing services to support homeless and prevent homelessness - i.e., accommodation-based and floating support - 94 % agreed</p> <p>Not answered within the Easy Read - people focussed on service design elements Proposals 2,3,4)</p> <p>Focus group highlighted the importance of both types of services.</p> <p>The stakeholder forum felt whilst both services were essential, allocating more to floating support may be beneficial as many people they worked with were housed.</p>	<p>Many respondents mentioned how the proposal would affect them and their families with concerns about their individual circumstances.</p> <p><i>"All the services currently provided are needed by Warwickshire"</i></p> <p><i>"A fair method of keeping all services going".</i></p> <p>Impacts also related to service reductions due to savings:</p> <p><i>"Due to the budget cut it is likely to lead to some delays and reduced numbers of people on probation who will receive support."</i></p> <p>Floating support</p> <p>Further measures that were suggested by respondents to increase efficiencies included improved resource management, streamlining referrals, focusing on early intervention/prevention and forming more effective partnerships with local voluntary and community sectors. This included innovative community-based solutions, like setting up communal kitchens.</p>	<p>Implement the proposal</p>	<p>The work around streamlining referrals and focusing early interventions are proposals covered in the consultation at a later stage and aim to achieve this.</p> <p>In addition, within the specifications the importance of partnership working across all sectors is paramount in these services and will be clear. HRS services often act as the conduit to support people with multi-disadvantages to access a wide range of specialist support services to enable them to meet their housing related support goals.</p>

Proposal 2: Creating a redesigned inclusive floating support – stop commissioning a separate floating HRS service for people living with disabilities			
Consultation Feedback	Impact & Suggestions for redesign (examples of comments provided)	We will	Further considerations for service model and specification
<p>In Ask Warwickshire: 62% agreed – people felt it simplified access and streamlining, reduced waiting times, was cost-efficient and focussed on inclusivity.</p> <p>"As a referral and signposting service, it would streamline the service." 25% disagreed - with specialist support concerns, impact on disabled people, impact on service providers due to restructuring and retendering of services, referral confusion. A major concern for respondents was whether the redesigned services could adequately support disabled individuals.</p> <p><i>"I have family members and close friends with disabilities and a future without services that acknowledge their disabilities makes me lose faith..."</i></p> <p>In outreach 36% agreed and 54% disagreed with concern expressed that disabled people wouldn't be given the specialist support required.</p> <p>Easy Read responses (n25 - all current disability service provider customers) Vast majority (92%) disagreed. They expressed concern about the lack of specialist support, diminished quality, and highlighted positive outcomes of dedicated service that currently exists.</p> <p>Focus groups supported moving to two inclusive services for one young people 16-24 and adults 25 + years.</p> <p>Participants in the stakeholder workshop mostly agreed that turning separate services into an inclusive service supporting disabled residents could be beneficial.</p>	<p><i>"More streamlined service would save money and make it more simple"</i></p> <p><i>"I think it would mean I would get floating support easier without having to think which service suited me best."</i></p> <p><i>"I think by not having a separate disability service runs the risk of their vulnerabilities not been seen and not be given the priority that they should receive"</i></p> <p><i>"This sounds like a good idea in principle, as long as staff... had the specialist training and knowledge"</i></p> <p><i>"Agree as long as services and quality of service for people with disabilities is not impacted"</i></p> <p><i>"I am really concerned about the impact of these proposals on disabled people"</i></p> <p>Concern was expressed about the impact on organisations and staff affected by changes.</p> <p>To use the available funding more efficiently, respondents suggested implementing preventative services for young people, employing support workers directly rather than via contracts, and partnering with community organisations for more holistic support.</p>	<p>Implement the proposal while being mindful of concerns in relation to specialist skills, training and knowledge and ensure incorporated within the specification and future monitoring requirements</p>	<p>Strengthen the staff training and knowledge requirements to include trauma informed care; physiologically information environments; specialist training in autism, learning disability and, visual impairment awareness training for workforce.</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>

Proposal 3- Flexible range of shorter interventions

<p>Consultation Feedback</p>	<p>Impact & Suggestions for redesign (Examples of comments provided)</p>	<p>We will</p>	<p>Further considerations for service model and specification</p>
<p>In Ask Warwickshire 72% agreed - focussing on its flexible approach and its early intervention benefits and thereby freeing up resources for others who may require more intensive support.</p> <p>Several people expressed clear support for the proposal, viewing it as aligning with existing strategies or as a positive move. "Warwickshire County Council Public Health support this approach..."</p> <p>"Brilliant idea." "Your reasons make sense and focused short-term intervention makes sense if it works."</p> <p>18% disagree - citing deviation from core principles and reduced personal interaction. Concern was expressed about the quality of relationships and time it takes to establish trust and rapport and the importance of in-person sessions:</p> <p>"Everybody is different, not all people are able to seek the support they require in the first instance of speaking with organisations."</p> <p>Respondents who were against the proposal were concerned about whether short-term interventions can meet the diverse and complex needs of clients, such as young people: <i>"Young people are vulnerable for a reason...these needs don't disappear after one short episode of support"</i></p> <p>Easy Read survey 72% disagreed with this proposal with 24% agreeing Impact on equalities: concerns about the possibility of certain individuals <i>"falling through the net"</i>, and the need to be adaptive to diverse needs</p>	<p><i>"A triage system seems an efficient way to identify those most in need..."</i></p> <p><i>"I do agree with short term interventions provided they are not at the expense of those who need more intensive floating support."</i></p> <p><i>"Personalising the level of support should enable better use of resources"</i></p> <p>Bring in ways of measuring success for those receiving advice and information/brief intervention:</p> <p>People also emphasised the importance of how any changes are implemented and monitored: <i>"As with other elements of these proposals, they make sense as a matter of high-level principle, but what is critical is that they are implemented quickly and well..."</i></p> <p>Additional ideas offered included combining short-term and long-term service options in a personalised support plan with options for pausing support, incorporating user perspectives in service design, alongside streamlined paperwork to increase efficiency and foster good communication and collaboration across agencies.</p>	<p>Implement the proposal for an enhanced triage with information and advice and brief intervention as part of the HRS Service offer</p>	<p>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.</p> <p>All support offered will be based on mutually agreed support plans and outcomes monitored to support progression.</p> <p>Devise monitoring of services that looks at outcomes, captures customers returning for support.</p>

Proposal 4: Reducing the maximum duration of services			
Consultation Feedback	Impact & Suggestions for redesign (Examples of comments provided)	We will	Further considerations for service model and specification
<p>There was a general disagreement with this proposal especially for young people due to their age, 16-17 not reaching adulthood before support finishing and their ability to sign a tenancy agreement for their housing prior to being 18 years old.</p> <p><i>“To only provide 12 months of support to a 16-year-old leaves them without support before they are even legally an adult”</i></p> <p>Ask Warwickshire 40% disagreed – favour tailored support without time restrictions, worried over premature termination of support, especially for young people. 39% agreed – expands service reach and promotes independence. “A focus on results and independence is good”</p> <p>Easy Read Survey 83% disagreed with the proposal - a lot of service users face complex challenges that demand time, patience and consistent support to address effectively.</p> <p>Outreach respondents were not asked about this.</p> <p>Focus groups all fed back that young people needed longer for support and a personalised approach was key to supporting people to be independent.</p> <p>The stakeholder workshop saw practical difficulties in delivering bespoke personalised support</p>	<p>Respondents suggested adopting a more individualised approach to service provision, focusing on clearly defined and flexible support plans co-created with customers.</p> <p><i>“If this is a holistic, person-centred approach then it seems strange to have a one-size-fits all approach”</i></p> <p>Concern was voiced about ending support too soon. Shortening support duration might create a <i>“revolving door”</i> instead of empowering service users to be fully independent.</p> <p><i>“If support is withdrawn too soon it may lead to further escalation of problems”</i></p> <p><i>“It’s not sustainable in the long term if the same people have to reapply for continued service.”</i></p> <p>Impact on equalities: reduction in duration might have a negative impact on individuals with complex needs</p> <p><i>“It can take a long time for people to engage and feel comfortable enough with staff to move forward”</i></p> <p>Many highlighted the critical role of efficient case management, including regular reviews to facilitate goal achievement and potentially shortening the service duration but only where it is appropriate to do so. They emphasised the need for a collaborative relationship with local community groups to enhance services.</p>	<p>For young people’s HRS services, we recommend not reducing the duration of support for young people.</p> <p>For adults’ HRS services we recommend the reductions are taken forward for floating support.</p> <p>For adult accommodati on-based services we recommend this is reviewed annually during the lifetime of the contract.</p>	<p>All HRS services will offer holistic and personalised support to meet need, promoting wellbeing, safety, resilience, independence to prevent, reduce and/or delay an individual’s need for ongoing care and support.</p> <p>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>Reducing the duration of adult accommodation-based HRS may be particularly challenging due to the lack of affordable move-on accommodation across Warwickshire. WCC will work with District and Borough Housing to review their move-on protocol for HRS services</p>

Proposal 5 – Change name to Supporting Independence			
Consultation Feedback	Impact & Suggestions for redesign (Examples of comments provided)	We will	Further considerations for service model and specification
<p>There was very little support for a name change. It was considered important to name the type of support on offer – ‘housing related support’. Some liked the emphasis on independence</p> <p>Feedback includes:</p> <ul style="list-style-type: none"> • lacks clarity and specificity • Concerns about confusion with other services • Potential waste of resources and money • Cost and rebranding concerns • Scepticism about intent behind it • Not clear what problem it solves <p>Not answered within the Easy Read - people focussed on service design elements (Proposals 2,3,4) Not asked in outreach.</p>	<p>The following quotes capture impact:</p> <p><i>“The new name is confusing. There are too many other similar sounding services in Health and Social Care, for people to recognise what this actually is”</i></p> <p><i>“Confusing name, the word housing needs to be included”</i></p> <p><i>“We are learning to become independent, so this sounds good.”</i></p> <p><i>“Changing the name is meaningless - the money spent on the re-branding can be better spent on the service itself”</i></p>	<p>Not implement the proposal</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>
Proposal 6– current additional services (Street Outreach and Hubs in Nuneaton and Rugby) are not included in future service specification			
Consultation Feedback	Impact & Suggestions for redesign (Examples of comments provided)	We will	Further considerations for service model and specification
<p>Ask Warwickshire</p> <p>Respondents acknowledged the financial constraints facing the Council, viewing the removal of additional services as a necessary step given the budget restrictions.</p> <p>29% agree – inefficient services, financial pragmatism, overlap and redundancy.</p>	<p>Impact on equalities: particular concern for people with multiple complex needs</p> <p><i>“Lots of service users do not have telephones or a means of transport. Lack of outreach and navigation hubs makes it harder for those in need to get help they may require”</i></p> <p><i>“Street Outreach by P3 overlaps with our own Outreach Team and is not needed in Rugby although I can't comment on other areas in Warwickshire.”</i></p>	<p>Implement the proposal and not change the core activity of HRS services to include Street Outreach</p>	<p>Within the current contract ending in March 2025 the P3 street outreach team is looking to train and support volunteers as an exit strategy to the external funding received from WDC and SDC for the Rough Sleepers Initiative funding that</p>

<p>They noted the inefficiency in the current system and believed that some services such as the navigator hubs and street outreach could be removed as long as clear signposting is available, indicating a belief that more streamlined services could potentially be more effective. "People will be approaching the correct service i.e., the council for housing advice..."</p> <p>41% disagree – will increase pressure on other services, lack of clear alternatives, false economy (will increase costs in the long run)</p> <p>Not answered within the Easy Read - people focussed on service design elements Proposals 2,3,4)</p> <p>Not asked in outreach.</p> <p>In the stakeholder workshop professionals discussed the inclusion of additional services in the context of existing alternatives such as the specialist Street Outreach Health teams (physical health nurses and mental health practitioners) and local voluntary sector projects.</p>	<p>Many respondents expected a directly negative impact on homeless individuals, fearing that the loss of these services will leave them with decreased support. Services may be less targeted and fewer people might be reached. <i>"This is often the only way that some clients can access support, especially those that are street homeless"</i>.</p> <p>Discontinuing the services would place a greater burden on other agencies, charities and community groups to provide support, which may already be stretched thin.</p> <p>Participants further pushed for community participation and inter-agency collaboration to strengthen the effectiveness of service provision.</p> <p>Respondents underlined the need to advocate for policy changes at government level, including lobbying for increased funding and promoting investment in social housing by central government.</p>	<p>and Hubs in two areas.</p> <p>Liaise with District and Borough Housing Teams and Health Services about the changes to street outreach to ensure an appropriate exit strategy.</p>	<p>supports half of the current staff team.</p> <p>Looking at future tendering the floating HRS services will include intensive support and this will be available through the redesigned commissioned HRS services. This has proved effective in supporting some rough sleepers 18+ into temporary accommodation/ moving into more secure accommodation which has been facilitated by District and Borough housing teams.</p> <p>The redesigned service will be offering an information and advice service across the county so the need for specific hubs is reduced. Providers will explain how they deliver this within their tender submission and may include both virtual and community-based locations.</p>
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4.16 The outreach findings told us about people’s experience of accessing housing support, what works well and what gets in the way. (Table 2) Within the outreach findings we are unable to separate their experience specific to Housing Related Support services due to the complex nature of the housing support landscape (District and Boroughs Housing Options Teams, voluntary and community sector, non –commissioned housing support and the WCC commissioned HRS services). However, this level of detail offers a valuable insight for when we commission services and consider what is included in the specification and how we assess quality and performance.

Table 2: Additional Outreach Findings

For those with experience of accessing support:	What works well included:	What gets in the way
<ul style="list-style-type: none"> • 3 in 4 sought or received housing support • 63% of those who tried accessed housing support; 37% did not • 52% found it challenging to access the desired support • 19% waited over 6 months for housing support; a third never received it • Half of respondents found the support helpful, but 28% did not 	<ul style="list-style-type: none"> • Online availability makes accessing information easier • Strong knowledge of clients helps in tailoring support • Diverse range of services, although it can be overwhelming • Effective professional relationships and collaboration between teams • Acknowledgement that different approaches work for different individuals • Willingness to engage and support people with complex needs • Positive impact of partnership working involving various agencies 	<ul style="list-style-type: none"> • Insufficient resources and funding; more resources are needed • Waiting lists for services • Confusion regarding service roles and boundaries • Local connection and priority needs can be unclear • Challenges related to the two-tier authority • Lack of support for individuals with personality disorders

4.17 Equality Impact Assessment feedback is outlined in Table 3.

4.18 We have updated the Equality Impact Assessment in response to feedback. Equality Impact Assessment (EAI) Summary and Equality Impact Assessment Version 2. Appendix 3/4

Table 3: Equality Impact Assessment Feedback

Equality Impact Assessment			
<i>Consultation Feedback</i>	<i>Impact & Suggestions for redesign (Examples of comments provided)</i>	<i>We will</i>	<i>Further considerations for service model and specification</i>
<p>From Ask Warwickshire Stopping the dedicated Disabled people floating HRS - Concerns about exclusion of 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 did not</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>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 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 support 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 have updated the EIA.</p> <p>We will continue to monitor equality data (access and outcomes) throughout the life of the contract.</p>	<p>Requirements for providers to align to WCC policy regarding equality will be clearly stated in the service specifications and tested in the tendering process.</p> <p>Staff training, accessibility and the requirement for personalised approach with 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>

- 4.19 These redesigned services will offer a personalised support service that meets individual needs of customers, inclusive of those with disabilities.
- 4.20 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. There will be a requirement for staff teams to be adequately trained to support the range of customers who may require support. We will expect our providers to make reasonable adjustments for people with disabilities to ensure everyone can access the support they require.