

Name of proposal/policy	Reductions in Public Health Grant Funding for Social Wellbeing Contract	Budget number (if applicable)	
Service area responsible	First for Wellbeing / Public Health	Cabinet meeting date	N/A
Name of completing officer	Lorraine Meads/ Jane Pitchfork	Date EqIA created	14/05/2018
Approved by Director / Assistant Director	Lucy Wightman	Date of approval	07/06/2018

The Equality Act 2010 places a 'General Duty' on all public bodies to have 'Due regard' to:

- Eliminating discrimination, harassment and victimisation
- Advancing equality of opportunity
- Fostering good relations

We do this by undertaking equality impact assessments (EqIAs) to help us understand the implications of policies and decisions on people with protected characteristics – EqIAs are our way of evidencing this.

All assessments must be published on the NCC equalities web pages. All Cabinet papers where an EqIA is relevant **MUST** include a link to the web page where this assessment will be published. If you require assistance in getting your EqIA published, please contact equalities@northamptonshire.gov.uk

PART 1

Description of current provision/policy and main beneficiaries/stakeholders

Public Health currently funds a range of Social Wellbeing services. The Social Wellbeing services are commissioned by Public Health to First for Wellbeing as part of a broad health and wellbeing service contract. The contract term is 2 years and runs from 01/04/2018 – 31/03/2020.

First for Wellbeing has a contract with Commsortia. Commsortia is an umbrella organisation representing community sector partners. Commsortia subcontracts with the 21 separate voluntary and community sector organisations to deliver the different aspects of the Social Wellbeing service. Commsortia manage these under 4 broad themes: Day Opportunities, Housing Improvement Agencies, Advice and Guidance and Homelessness.

This EqIA will have a specific focus on provision which sits under the Housing Improvement and Advice and Guidance themes. These include the following services:

Housing Improvement Agencies

Care and Repair – holistic assessments focused on older people, home adaptations and equipment to support independent living

Spire Homes - holistic assessments and help applying for funding to ensure elderly and their carers feel safe in their own homes and can live independently.

Advice and Guidance – includes general and specialist IAG provision

Catch 22 – floating housing support for vulnerable individuals, with a focus on ex offenders

Accommodation Support – holistic support for individuals homeless or threatened with homelessness.

Creative Support – IAG services for disabled individuals, focus on welfare and benefits advice

Disability Resource – IAG for disabled individuals, significant focus on welfare and benefits advice

Community Law – IAG services, significant focus on welfare and benefits advice

Citizens Advice Services (Daventry District, Corby and Kettering, South Northants) - IAG services, significant focus on welfare and benefits advice.

Description of proposal under consideration/development

Context for change

As part of a review of Public Health grant funding, Public Health England has raised concerns about areas of current spend. There has been specific challenge in regard to the Social Wellbeing contract relating to the Housing Improvement Agencies (HIAs) and the Advice and Guidance (A&G) services. The basis of this challenge is that Public Health funding is being used to pay for services which fall under the remit of another local authority directorate or public body.

Public Health England are of the view that housing adaptations and advice & guidance services should be funded through Adult Social Care:

- Home adaptations – Adult Social Care Funding - budget line 53
- Advice and Guidance – Adult Social Care Funding - budget lines 40-41 disability, lines 44-45 mental health, line 55 information and early intervention

Proposal

To withdraw Public Health Grant funding from HIAs and A&G services. As stated above, this is being driven by the need to ensure Public Health grant expenditure remains fully compliant and is not being used to subsidise services which should be provided by other funding streams.

As part of this process Public Health will seek to remodel and align local services, where appropriate, as part of developing a new Frailty Service.

Equality Impact Assessment

This aim of this EqIA is to gain a full understanding of the impact of change on individuals with protected characteristics as defined by the Equalities Act 2010: these are

- Age;
- Disability;
- Gender reassignment;
- Marriage and civil partnership;
- Pregnancy and maternity;
- Race;
- Religion or belief;
- Sex; and
- Sexual orientation.

Commsortia commissioned a baseline EqIA in September 2017. This has been reviewed and refreshed with regard to the 7 services which will be directly affected by funding changes. The process has included a review of individuals accessing services between Dec and Mar 2018.

Data used in this Equality Impact Assessment (general population data where appropriate but each EqIA should contain information on people who use the service under consideration – if this is not applicable to your proposal then you probably do not need to do an EqIA)

Data Source (include link where published)	Please summarise what the data tells us – for example “X number of people use this service, X are male, Y are female etc”
EqIA baseline Report Sept 2017	<p>This report was compiled by Northamptonshire Rights and Equality Council on behalf of Commsortia. The report was intended to provide baseline data on all services included as part of the Social Wellbeing service and accessed by groups with protected characteristics. The report has been revisited and reviewed as part of the current EqIA linked to the 7 providers likely to be effected by funding reductions.</p> <p>The key demographic data from the report relating to age, gender, disability and other protected characteristics, where data was made available, is included below against each provider.</p>

<p>Catch 22</p> <p>Updated data report and service analysis from Provider 07/06/2018 + info from EqIA baseline Report Sept 2017</p> <p>Provider was asked to report on service user profile from Dec 17- Mar 18</p>	<p>3 month period Dec – Mar 2018</p> <p>Service Users 14 Male 12 Female</p> <p>Age: 18-29: 12 30-39: 8 40-49: 3 50-59: 1 60-69: 2</p> <p>94% Mental Health condition 23% Learning disability 54% Substance misuse 21% minority ethnic background 52% history of offending</p> <p>Other protected characteristics No further information collected by provider.</p> <p>Service offer to client group: Homelessness prevention including but not limited to:</p> <ul style="list-style-type: none"> ▪ Floating support ▪ Preventative work ▪ Crisis intervention ▪ Low level and on-going support ▪ Mental health support ▪ Physical health support ▪ Drug and alcohol misuse and dependency ▪ Social isolation
<p>Accommodation Concern</p> <p>Updated data report and service analysis from Provider 07/06/2018 + info from EqIA baseline Report Sept 2017</p> <p>Provider was asked to report on service user profile from Dec 17- Mar 18</p>	<p>3 month period Dec – Mar 2018</p> <p>22 Male 19 Female</p> <p>Age 16-24: 10</p>

25-30: 20
50-65:10

High % suffering poor mental health and general vulnerabilities

Other protected characteristics

Other protected information – Accommodation Concern collects info on the following: Region and belief, sexual orientation, gender re-assignment, socio-economic data (income source, household data, health and domestic violence)

Notes from Sept EqIA:

We see fewer Heterosexuals than the average, and all other sexualities are more represented than the NCC figures. We have a high number of refused, for a variety of reasons, choice, health issues, dislike of official record keeping.

All of these over represented groups would suffer if our services were closed or reduced.

We have had no Jewish clients during the year. However, for the first year ever, the vast majority of our service users have stated that they have no religion.

Key interventions:

Preventing and alleviating homelessness - Improving the physical, mental and social wellbeing for people who are homeless or at risk of becoming homeless:

- Supporting vulnerable adults at risk of homelessness to keep their homes.
- Supporting vulnerable adults at risk of homelessness to access appropriate healthcare. (for physical, mental, emotional health issues).
- Assisting vulnerable adults who are already homeless to secure safe, affordable housing.
- Tackling disadvantage and social isolation.
- Preventing homelessness through negotiation and legal advocacy.
- Supporting vulnerable adults at risk of homelessness to access drug and alcohol treatments.

Secure accommodation 3

Debt support 15

Housing advice 21

Advice other 2

Creative Support

Updated data report and service analysis from Provider 07/06/2018 + info from EqIA baseline REport Sept 2017

3 month period Dec – Mar 2018

Service Users = 267. 52% Male / 48% female)

Under 18 = **3**

18 – 29 = **55**

30 – 39 = **53**

40 – 49 = **56**

50 – 59 = **58**

60 – 69 = **36**

70 – 79 = **3**

80 – 89 = **3**

Disability 100%

Other protected characteristics

Ethical/racial groups – Services being accessed by *Disproportionately* higher numbers of (White/Black/BME) clients/users Creative Support (White)

The majority of our clients fall into the 31-59 age group. Although the over 60's group is higher than in previous years and we are dealing with under 18's (homeless children) also.

Provider also collects client data on Gender re-assignment, sexual orientation, religion and belief, socio-economic status (work status) No specific impact on these groups reported on Sept baseline EqIA

Intervention:

Range of advice and support services offered. Benefits and money are most common interventions provided, followed by housing and independent living support

Disability Resource

Updated data report and service analysis from Provider 07/06/2018 + info from EqIA baselineREport Sept 2017

3 month period Dec – Mar 2018

Service Users = 467

Age range

20-29	3%
30-39	5%
40-49	14%
50-59	27%
60-69	25%
70-79	14%
80-89	9%
90+	2%

Interventions:

Range of advice and support services offered. Benefits and money are most common interventions provided.

Disability 100%

Ethical/racial groups – Services being accessed by *Disproportionately* higher numbers of (White/Black/BME) clients/users Disability Resource (White)

Other protected characteristics

Provider collects data on Carers, but no specific reporting on clients with protected characteristics

Community Law

Updated data report and service analysis from Provider 07/06/2018 + info from EqIA baselineREport Sept 2017

3 month period Dec – Mar 2018

New Clients 721 (+ 265 ongoing)

Male 42%

Female 58%

Age 0-16 : 1%

17-24: 6%

25-34:16%

35-49:30%

50-64: 36%

65+:11%

	<p>Disability: Community Law (over 50%)</p> <p>Ethnic/racial groups – Services being accessed by <i>Disproportionately</i> higher numbers of (White/Black/BME) clients/users: Community Law (White and European).</p> <p>Other protected characteristics Provider also collects data relating to Gender re-assignment, sexual orientation, religion and belief, socio-economic status (work status)</p> <p>Interventions: A wide arrange of specialist welfare and benefits advice, including debt recovery support.</p>
<p>CABS</p> <p>Updated data report and service analysis from Provider 07/06/2018 + info from EqIA baseline Report Sept 2017</p> <p>Provider was asked to report on service user profile from Dec 17- Mar 18</p>	<p>3 month period Dec – Mar 2018 CADD – Daventry District 227 Clients Male 46% Female 54%</p> <p>Age 20-49: 23% 50-54:21% 55-59:26% 60+ 27%</p> <p>163 with a disability or long term health condition</p> <p>CASCK = Corby and Kettering 386 Clients 185 male, 201 female Age 144 aged 64+</p> <p>NOSN clients 119. No other provided regarding age, gender and or protected characteristics of client group.</p> <p>Other protected characteristics No data collected by Providers</p> <p>Interventions: A wide arrange of specialist welfare related and benefits advice.</p>
<p>Care and Repair</p>	<p>3 month period Dec – Mar 2018 863 households supported</p>

<p>Updated data report and service analysis from Provider 07/06/2018 + info from EqIA baseline Report Sept 2017</p> <p>Provider was asked to report on service user profile from Dec 17- Mar 18</p>	<p>68% female/32%male</p> <p>Age: 70% aged 60+</p> <p>Disability: Care and Repair Northamptonshire (over 50%)</p> <p>Ethnic/racial groups – Services being accessed by <i>Disproportionately</i> higher numbers of (White/Black/BME) clients/users: Care and Repair (White)</p> <p>Other protected characteristics Provider collects Socio-economic data (Benefits and tenancy). No additional info provided re client profile</p> <p>Interventions: Home assessments and home adaptations</p>
<p>Spire homes</p> <p>Updated data report and service analysis from Provider 07/06/2018 + info from EqIA baseline Report Sept 2017</p>	<p>3 month period Dec – Mar 2018</p> <p>Age 63% Over 60yrs 47 Male; 75 Female</p> <p>Other protected characteristics Provider collects info on sexual orientation. No additional info provided re client profile</p> <p>Interventions: Home assessments and support to access funding for home adaptations</p>

Tick the relevant box for each line by using a capital 'P' to make a <input type="checkbox"/>	Based on the above information, what impact will this proposal have on the following groups?			
	Positive	Negative	Neutral	Unsure
Sex			X	
Gender Reassignment			X	
Age		X		
Disability		X		
Race & Ethnicity			X	
Sexual Orientation			X	
Religion or Belief (or No Belief)			X	
Pregnancy & Maternity			X	
Human Rights (Please see articles in toolkit)			X	
Other Groups (rural isolation, socio-economic exclusion etc)		X		

Initial impact	
Explain your findings above	Actions identified to mitigate, advance equality or fill gaps in information
<p>Disability, Information and Advice Services</p> <p>Creative Support Disability Resource/ Community Law and CABs</p> <p>The service review has indicated that these services are likely to continue in some form with other funding streams. However Public Health funding reductions, without mitigation, may have a negative impact on the level of IAG service available in each area. The greatest impact is likely to be on vulnerable individuals, particularly older people and those with a disability who need financial and practical support to maintain independent living. Providers have specifically highlighted the impact of debt on mental health.</p>	<p>There are a number of new developments and opportunities which will increase access to support for vulnerable individuals, including those with protected characteristics:</p> <p>Frailty Service</p> <p>NCC Public Health will be delivering a new countywide Frailty Service from Autumn 2018. This will provide holistic assessment and support to individuals who are identified as being pre or mildly frail and those with a comorbidity (including those with long term conditions), with the objective to maintain health and independence and to reduce the pressure on acute services. The service will receive referrals from other agencies, including self referrals. Wellbeing Advisors will work with individual providing direct interventions and also signposting to further services where required.</p> <p>Grant funding opportunities</p> <p>Grant funding linked to reducing Fuel poverty is available to the sector (£>1m over 3 years) supported by NCC.</p>

Spire homes and Care and Repair – HIAs

Without mitigating actions, there is likely to be a negative impact on older people who are at risk of losing their independence due to safety concerns in the home. The majority of those accessing these services are over 65+ and have a disability or other Frailty. A service review has identified that a high % of these individuals are already known to Adult Social Care and receive Personal independence Payments. These can be used to pay for minor adaptations and equipment in the home.

Catch 22 And Accommodation Concern

Reduction in funding, without mitigation, may have a negative impact on the level of support available to individuals who are homeless or threatened with homelessness, due to a mental health or other health related concern.

Alternative provision for home assessments, minor adaptations and equipment:

- New Frailty Service will provide home assessments for pre frail and mild frail individuals.
- Other services also offer home safety assessments for higher need individuals, particularly those leaving hospital/care (OT service)

Procurement opportunity

Adult Social Care is currently retendering for Integrated Community Equipment services. New contracts anticipated to be in place Autumn 2018 Procurement includes specific funding for home adaptation and equipment (£400K) This will provide basic home adaptations and equipment to support independence in the home based, on assessment.

HIAs have the opportunity to bid for this home adaptations. If successful, this may have the added advantage of sustaining capacity across HIAs and enable them to offer a fee paying service to those who are not eligible for ASC.

Alternative service models

Consortia are actively supporting HIAs where required, to explore new business models based on income generation eg: use of PIPs, grants and fees

District and Borough Councils Housing teams have a new duty to provide housing advice and support to individuals and families impacted by homelessness or the threat of homelessness (Homeless Reduction Act 2017).

Further actions required:

The mitigating actions for vulnerable individuals relating to homelessness support have not been fully assessed within part 1. See below.

Do you need to undertake further work (e.g. consultation, further equality analysis) based on the impact and actions identified above? If yes, set this out below and then carry out the work and complete Part 2

Catch 22 and Accommodation Concern focus entirely on homelessness IAG and support. Further action is needed to understand the potential impact on vulnerable individuals who currently use these community based homeless support services. The age profile of this client group indicates that most users are under 50 yrs, but have a high incidence of mental health related issues, high rate of offending and high rate of substance misuse.

Further Actions required:

To review the service offer provided by housing teams in each locality in order to promote and facilitate access to specialist housing advocacy support amongst vulnerable groups. To review alternative service provision and to understand and reduce the impact of the Homeless Reduction Act 2017.

To link in with the work being undertaken as part of the mental health prevention concordat and homelessness. To ensure mental health support services are fully aware of service changes and able to build capacity where needed.

PART 2 – if required

Consultation, follow up data and information gathered from actions identified above

	What does this information tell us?

Final impact analysis (taking the findings from Part 2 into account) – including review date if required

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