

<b>Name of proposal/policy</b>	Funding changes for Social Wellbeing Services in Northamptonshire	<b>Budget number (if applicable)</b>	n/a
<b>Service area responsible</b>	Public Health and Wellbeing	<b>Cabinet meeting date</b>	17/12/2019
<b>Name of completing officer</b>	Rhosyn Harris/Jane Pitchfork	<b>Date EqIA created</b>	14/10/2019
<b>Approved by Director / Assistant Director</b>	Lucy Wightman	<b>Date of approval</b>	9/12/2019
<b>Signed off by NCC Equalities Lead</b>	Emma Gadsby	<b>Date</b>	9/12/2019

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](mailto:equalities@northamptonshire.gov.uk)

## PART A

### 1) Description of current provision/policy and main beneficiaries/stakeholders

The Social Wellbeing contract is commissioned by NCC PH to provide a range of services from the VCS through a single contract with Commsortia. The Social Wellbeing contract was novated to First for Wellbeing in 2016, funded by the Public Health grant. At contract commencement the Lead Provider took on a number of pre-existing services which had previously been commissioned under the Supporting People Programme, historically funded by Adult Social Care.

The Social Wellbeing contract came under the direct management of the Public Health commissioning team on 1<sup>st</sup> Sept 2018 when First for Wellbeing CiC, and all of its contracts, were transferred back to NCC control. Current provision focuses around two main types of services, namely day centre services for older adults and homelessness support services. The objectives of these services are to remove or reduce the need for long-term social care interventions and reduce social isolation, and to delay or prevent homelessness in vulnerable groups.

#### Day Centre Provision

The main beneficiaries of day centre opportunities include:

- Adults with learning disabilities
- Adults with physical disabilities and/or sensory deficits
- Older adults
- Carers

Northamptonshire is one of the UK's fastest growing counties. The proportion of older people in Northamptonshire has been growing faster in Northamptonshire over the last 3 years than across England as an average. 12% more people in Northamptonshire are over 65 in 2017 than in 2014, the national average increase being a little over 5%. Northamptonshire's over 65 population in 2017 was estimated to number 131,425. Within 5 years, this is estimated to grow to around 147,100 (2022). As people age they face a higher risk of poor health outcomes, often linked to frailty and social isolation. [Source: [Older People's JSNA 2019](#)]

Day Opportunities for older people funded via this contract are delivered through a network of seven VCSE managed day centres operating across Corby, Wellingborough, Northampton, Desborough and Rushden with outreach services offered in community venues across Daventry and South Northants.

The total value of Day Opportunities funding provided through the current contract is £655,691.72. Funding allocations differ between Providers. Commsortia has continued with a funding model inherited from the Supporting People contracts. Its original funding formula was based loosely on population/ reach. The proportion of each provider's overall income received through this contract ranges from 8.3% to 41%. Additional income is received through fees and charges, external grants and contributions from District and Borough Councils.

There is added value achieved through working with VCSE sector in terms of the investment of volunteer time and community support which has increased the overall financial and social value of the contract. With the exception of Age UK, which is part of a national organisation, the remaining providers are all local independent charities.

There are different service models operating across the county:

Serve in East Northants offers a programme of sessional activities including Otago exercise classes, a memory cafe, dance classes, learning events and assisted social opportunities such as shopping and day trips. They operate out of a building based in Rushden but do not offer a full day centre provision.

Age UK offer a mixed service model across in the county. They run traditional full time day centre offers from buildings in Northampton (Venton centre) and Wellingborough. In South Northants and Daventry, they run an outreach day centre provision once or twice each week based in community venues across Brackley, Towcester and Daventry. Age UK also run a programme of social interest classes for over 65s at various locations countywide. Individuals accessing the service pay a small daily attendance fee and a contributions towards a cooked midday meal and transport to and from the centre or outreach venue.

The Autumn Centre in Corby, Glamis Hall in Wellingborough and Marlow House in Desborough operate a traditional day centre model. Each of these centres are open five days a week. Individuals pay a daily rate and can choose how often they attend. Day centres includes a programme of activities within the centre such as chair exercise, entertainment, and quizzes. Clients pay a contribution towards a cooked midday meal and, where required, transport to and from the centre. Additional services are available on site for an extra charge including assisted bathing, podiatry and hairdressing. Marlow House also provides freshly cooked meals to older people in their own homes. Meals are cooked at the day centre and then transported to residents in Desborough and surrounding villages. Residents pay a contributory charge for this outreach service

WACA operates a traditional day centre service from a site in Wellingborough as above, but opens only four days per week. The centre caters mainly for older people of West African origin. WACA charges a day rate fee which includes a midday meal.

Dostiyo's service model includes day centre services from its building in Northampton and outreach activities in Northampton and Wellingborough. Dostiyo mainly caters for older people of Bangladeshi origin. At present Dostiyo does not charge for this service and does not offer transport or cooked meals.

### Homelessness Support

In 2017/18 there were 1,286 households in the county who were classified as statutorily homeless (eligible people who are unintentionally homeless and in priority need) and a further 80 eligible people not in priority need. Groups of people at higher risk of homelessness, including street homelessness, are: care leavers, those people who are substance misusers, immigrants, men and women fleeing domestic violence, ex-armed forces personnel, ex-offenders and single people, who do not meet the threshold for accommodation and cannot afford private rented accommodation. [Source: [Homelessness JSNA Insight Pack 2019](#)]

The homelessness support services are contracted to work with vulnerable single adults who are homeless or threatened with homelessness, helping them to manage their health and wellbeing. Typically, service users have multiple complex needs such as substance misuse, mental ill health, a history of offending or a learning need, and face significant challenges in accessing and sustaining accommodation. The support they receive on a one-to-one basis or within groups helps develop the skills they need to overcome challenges, increase their independence, be self-determined and move on to independent living in settled accommodation.

The main beneficiaries of homeless support services include people who are homeless or at risk of homelessness with the following vulnerabilities:

- Mental health issues
- Substance misuse issues
- Experience in the criminal justice system

- Physical or learning disabilities
- Experience of domestic violence
- Experience of serving in the armed forces

There are five homelessness support providers funded through the Social Wellbeing Contract with a combined value of £836,500.62. Each Provider operates differently, depending on the location and client cohort.

## 2) Description of proposal under consideration/development

The proposal is that an extension to the contract be invoked; providing a bridging period to ensure safe transition to new prevention services for vulnerable groups. The bridging period will provide 75% of current funding to providers to ensure continuity of service. The contract will be varied to ensure more equitable distribution of resource, continued improvements in clearer and more consistent outcome reporting, and will support development of more innovative models.

## 3) 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)	What does this data tell us?
<p><u>Contract monitoring data (KPIs Q1-Q4 2018-19) and Q1 2019/20 updated service user</u></p>	<p><b>Homeless Support Services</b>            Data from the four providers that deliver “wrap around” support as part of a supported accommodation programme (Mayday Trust, NAASH, Midland Heart, Catch 22) shows over 400 new referrals into services during 2018/19. Collectively, services were supporting between 312-378 individuals each month.</p> <p>On average about 130 individuals would be living in supported accommodation whilst in receipt of this support at any point in time. The remaining individuals were in very temporary accommodation – technically homeless, this would include B&amp;B, hostel, night shelter, street homeless or individuals who are sofa surfing, with no fixed address.</p> <p>During 2018/19 Creative Support received 136 new referrals into their housing and community service and were supporting between 159 -175 individuals at one point in time during the year. Creative Support provides housing related wellbeing support through advice and advocacy.</p> <p><b>Q1 Figures for 2019/20</b>            Collectively, NAASH, Mayday Trust, Midland Heart and Catch 22 received 154 new referrals and worked with between 151 -167 individuals per month between April and June 2019.</p>

Creative Support received 13 new referrals and worked with 94-120 individuals per month between April and June 2019. As of June 2019 there were 346 individuals with cases open to the homeless support services and Creative Support services; of these 106 were women and 237 male. All individuals were aged 18 and above. Age breakdown is not currently recorded, neither is sexuality.

**Ethnicity profile**

282 White British - English/Welsh/Scottish

6 Asian/ Asian British

18 Black African/Caribbean/British

3 EU Citizen

11 mixed

**Profile of need/vulnerability**

All service users had one or more of the following vulnerabilities:

158 NEET

120 had a learning need or disability (most of these were accessing Creative Support)

55 had a physical disability

200 had a mental health condition

78 had a reported substance misuse problem

35 had a history of alcohol misuse

78 had an offending history

2 were veterans

13 had a history of domestic violence

**Referral routes**

The sources of referral to this service include district and borough housing teams (36%), NHS including drug and alcohol services (17%), police or probation services (10%), other local authority departments, voluntary organisations and job centres refer less than 10% of service users each. Around 13% of service users self-referred.

Day Centre Opportunities

The monthly average number of individuals accessing services at least once is approximately 1,900. Total numbers of contacts per month range between 3,788 and 4,020 (average 2 contacts per person).

72% female

28% are male

under 65yrs (109) 6%  
65-69 (108) 6%  
70-74 (156) 8%  
75-79 (232) 12%  
80-84 (490) 25%  
85 -90 (293) 15%  
over 90 (144) 6%  
Prefer not to say or unrecorded 22%

The ethnicity of service users reflects local demographics in that the majority of service users were white British (84%), 10% described their ethnicity as Asian, 1% as Black African, 3% as white EU and 2% "other".

The homelessness insights pack indicates that an estimated 3,026 people in Northamptonshire in 2018 may be homeless, including over 1,200 who are accepted by the local authority as statutorily homeless and in priority need i.e. those that the local authority have a duty to house. Rates of statutory homeless households per head of population are highest in Wellingborough, followed by Northampton, Kettering and then Corby.

Given the larger population of Northampton borough, absolute numbers of households accepted as statutorily homeless are highest in Northampton. Almost half of all homeless households in the county are in Northampton borough. Over 1,200 households were accepted as being statutorily homeless and in priority need of housing in 2017/18, but an estimated additional 1,800 adults are homeless or insecurely housed in Northamptonshire.

Statistics reported as part of the street count indicate that there are around 91 rough sleepers in the county. Street counts are known not to be a definitive count of street sleepers, however, are a useful way of monitoring trends. Numbers of rough sleepers identified through street count in Northamptonshire have doubled in the last 3 years. Local stakeholders estimate that the true figure might be as high as 500.

The proportion of older people in Northamptonshire has been growing faster in Northamptonshire over the last 3 years than across England as an average. 12% more people in Northamptonshire are over 65 in 2017 than in 2014, the national average increase being a little over 5%. The percentage of residents aged 85 and over has grown a little less than national average, 4.7% in Northamptonshire compared to a national average of 6%.

[Homelessness Insight Pack 2019](#)

[Older people's JSNA 2019](#)

The ethnic make-up of Northamptonshire’s older population is less diverse than the younger adult cohort. It is estimated that only 3% of over 65s identify as being from non-white ethnic groups. The Index of Deprivation Affecting Older People Index (IDAOP) measures the percentage of the population aged 60 and over who receive income support. IDAOP data shows that there are higher levels of older people in deprivation in urban areas than rural in Northamptonshire.

Frailty describes a gradual loss of physiological resilience and increased vulnerability to illness and ill health. People with severe frailty are nearly five times more likely to be admitted to hospital or a care home as an emergency than those who are not frail and once in hospital stay for an average of 11.1 bed days compared to 9 days for those not frail. It is estimated that over 15,000 over 65s in Northamptonshire are moderately frail and over 4,000 are severely frail.

4) Please give details about planned consultation or engagement with communities and other stakeholders that are likely to be affected by the policy/decision/service change. Contact the Consultation, Equalities & Accessibility Team ([ceat@northamptonshire.gov.uk](mailto:ceat@northamptonshire.gov.uk)) for advice or complete the online form with details of your consultation/engagement activity.

If you are not carrying out any consultation or engagement activity, please provide reasons why you think this is not necessary.

A consultation process around commissioning of the new service is planned to take place with key stakeholders over 2020/21.

5) If consultation or engagement has been carried out in the past, please provide details. If so, what were their views and how have their views influenced the work to date?

No previous consultation work has been completed in this service area.

**Protected characteristics as set out in the Equality Act 2010**

6) Based on the above information, what is the likely impact on the following groups? Please explain why you have made this assessment. If you are unsure, set out what you will do to get enough information to make an assessment.

<b>Sex</b>	Impact and explanation	<b>Neutral</b> <b>Explanation:</b> More men access homeless support services than women and more women over 65 access day opportunity services than men. The proposed transitional arrangement will not disadvantage one gender over another.
	Mitigations/actions	The bridging arrangement will prioritise funding in areas of greatest need in order to support reduction in health inequalities.  Homelessness support

		<p>Whilst most current services users are male, we are aware that female ex-offenders are particularly vulnerable when facing homelessness. We will continue work with stakeholders to identify local needs that future services should address.</p> <p>Day opportunities Work with existing providers to develop business models that provide full cost recovery is already underway and is being led by Commsortia /Voluntary Impact Northamptonshire. The bridging arrangement will provide time to embed new working methods.</p>
<b>Gender Reassignment</b>	Impact	<p><b>Neutral</b> <b>Explanation:</b> Existing services do not offer targeted provision for those who are LGBTQ+.</p>
	Mitigations/actions	<p>Homelessness support National evidence suggests that LGBTQ young people are more likely to become homeless than non-LGBTQ peers, however a targeted homelessness offer for this group has not been identified as a local need. In developing future public health support for primary prevention of homelessness we will consider needs related to gender reassignment as part of wider LGBT issues considered.</p>
<b>Age</b>	Impact	<p><b>Neutral</b> <b>Explanation:</b> The funding of a bridging period protects delivery of services to older adults who currently use the day opportunities provided through this contract.</p>
	Mitigations/actions	<p>Day opportunities We will work with voluntary sector providers using the bridging fund to continue to improve and embed innovative business models that allow them to continue reaching the most vulnerable groups. We will also support the signposting of older people eligible for other support services including the Supporting Independence Programme (SIP) that supports individuals with low to moderate frailty scores to improve physical and physical mental health.</p>
<b>Disability</b>	Impact	<p><b>Neutral</b> <b>Explanation:</b> Both day centre opportunities and homelessness support provide services for individuals with both physical and learning disabilities. A reduction in provision may lead to individuals finding it more difficult to access support – leading to repeat homelessness and/ or social isolation.</p>
	Mitigations/actions	<p>We will work with voluntary sector providers using the bridging fund to continue to improve and embed innovative business models that allow them to continue reaching the most vulnerable groups. We will also support the signposting of people with disabilities to other organisations and opportunities.</p>
<b>Race &amp; Ethnicity</b>	Impact	<p><b>Neutral</b> <b>Explanation:</b> Two day opportunities providers are providing bespoke support to BME communities. These individuals may face greater challenges in accessing mainstream social</p>

		activities and age appropriate support. Transition funding will protect these service users from loss of service provision.
	Mitigations/actions	We will work with voluntary sector providers using the bridging fund to ensure that opportunities that meet the needs of older people from BME backgrounds are provided, but that more innovative and cost effective models of delivery are developed.
<b>Sexual Orientation</b>	Impact	<b>Unsure</b> <b>Explanation:</b> LGBTQ groups are one of the population cohorts identified by national evidence summaries and guidance as at increased risk of homelessness.
	Mitigations/actions	In developing future public health support for primary prevention of homelessness we will consider needs of LGBT communities.
<b>Religion or Belief (or No Belief)</b>	Impact	<b>Neutral</b> <b>Explanation:</b> No specific impact on faith communities anticipated.
	Mitigations/actions	No action required.
<b>Pregnancy &amp; Maternity</b>	Impact	<b>Neutral</b> <b>Explanation:</b> Individuals accessing the Social Wellbeing services are mainly over 65s or single male adults as pregnant women are prioritised for housing when homeless.
	Mitigations/actions	No action required.

#### Cross-cutting considerations

<b>7) Based on the above information, what is the likely impact on the following groups? Please explain why you have made this assessment. If you are unsure, set out what you will do to get enough information to make an assessment.</b>		
<b>Human Rights (Please see articles in the toolkit for more information)</b>	Impact	<b>Unsure</b> <b>Explanation:</b> No clear impact on people's fundamental human rights have been identified as a result of withdrawing funding for this service.
	Mitigations/actions	No action identified at present.
<b>Rural isolation</b>	Impact	<b>Neutral</b> <b>Explanation:</b> Analyses suggest that the risk of homelessness or social isolation in Northamptonshire is higher in urban communities, however there is a risk that a reduction in funding for accessible social wellbeing support and low cost day opportunities may have greater impact on rural communities. Poor transport links from rural areas into the towns, will make it more challenging for these individuals to access alternative provision. In allocating transition funding to providers the above factors will be considered.
	Mitigations/actions	As Above
<b>Socio-economic exclusion</b>	Impact	<b>Neutral</b> <b>Explanation:</b> Individuals who are socio-economically deprived may be impacted more severely by a reduction in funding for homelessness and day opportunities services.

	Mitigations/actions	In allocating funding for the bridging period, deprivation will be considered as a key factor. Business models will need to include provision for retaining some level of subsidised provision to ensure individuals on low incomes can continue to access social wellbeing activities.
<b>Health (please see the health impact assessment guidance for more information)</b> <ul style="list-style-type: none"> <li>• Lifestyle determinants</li> <li>• Social and community determinants</li> <li>• Environmental determinants</li> <li>• Economic determinants</li> <li>• Transport determinants</li> </ul>	Impact	<b>Neutral</b> <b>Explanation:</b> Social and community determinants of health, as well as individual lifestyle determinants of health may be impacted by a change to this service.
	Mitigations/actions	The bridging fund will seek to mitigate the risks to health and wellbeing of the end of the contract. Health needs assessments will be conducted as part of work to commission a new service that has an impact on reducing health inequalities for vulnerable groups.

**PART B – if you are undertaking any further work before the decision on this policy or service change is made, please complete Part B and then make a final assessment based on this additional information**

1) Consultation, follow up data and information gathered from actions identified above	
	What does this information tell us?

**Protected characteristics as set out in the Equality Act 2010**

2) Based on the above information, what is the likely impact on the following groups? Please explain why you have made this assessment. If you are still unsure, please explain what you plan to do in future to address this.		
Sex	Impact	<b>Positive / neutral / negative / unsure (delete as appropriate)</b> <b>Explanation:</b>
	Mitigations/actions	
Gender Reassignment	Impact	<b>Positive / neutral / negative / unsure (delete as appropriate)</b> <b>Explanation:</b>

	Mitigations/actions	
<b>Age</b>	Impact	<b>Positive / neutral / negative / unsure (delete as appropriate)</b> <b>Explanation:</b>
	Mitigations/actions	
<b>Disability</b>	Impact	<b>Positive / neutral / negative / unsure (delete as appropriate)</b> <b>Explanation:</b>
	Mitigations/actions	
<b>Race &amp; Ethnicity</b>	Impact	<b>Positive / neutral / negative / unsure (delete as appropriate)</b> <b>Explanation:</b>
	Mitigations/actions	
<b>Sexual Orientation</b>	Impact	<b>Positive / neutral / negative / unsure (delete as appropriate)</b> <b>Explanation:</b>
	Mitigations/actions	
<b>Religion or Belief (or No Belief)</b>	Impact	<b>Positive / neutral / negative / unsure (delete as appropriate)</b> <b>Explanation:</b>
	Mitigations/actions	
<b>Pregnancy &amp; Maternity</b>	Impact	<b>Positive / neutral / negative / unsure (delete as appropriate)</b> <b>Explanation:</b>
	Mitigations/actions	

**Cross-cutting considerations**

**3) Based on the above information, what is the likely impact on the following groups? Please explain why you have made this assessment. If you are still unsure, please explain what you plan to do in future to address this.**

<b>Human Rights (Please see articles in the toolkit for more information)</b>	Impact	<b>Positive / neutral / negative / unsure (delete as appropriate)</b> <b>Explanation:</b>
	Mitigations/actions	
<b>Rural isolation</b>	Impact	<b>Positive / neutral / negative / unsure (delete as appropriate)</b> <b>Explanation:</b>
	Mitigations/actions	
<b>Socio-economic exclusion</b>	Impact	<b>Positive / neutral / negative / unsure (delete as appropriate)</b> <b>Explanation:</b>
	Mitigations/actions	
<b>Health (please see the health impact assessment guidance for more information)</b> <ul style="list-style-type: none"> <li>• Lifestyle determinants</li> <li>• Social and community determinants</li> <li>• Environmental determinants</li> <li>• Economic determinants</li> <li>• Transport determinants</li> </ul>	Impact	<b>Positive / neutral / negative / unsure (delete as appropriate)</b> <b>Explanation:</b>
	Mitigations/actions	

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