

Equality Impact Assessment Form

Before completing this form, please refer to the supporting guidance document and alert the Policy Team (Insert email).

The purpose of the assessment is to identify risks and the following actions should be taken to treat any known equality risks

- Remove risks: abandon the proposed policy or practice
- Mitigate risks amend the proposed policy or practice so that risks are reduced
- Justify policy or practice in terms of other objectives

Public Sector Equality Duty

Compliance with the equality duties ensures Leicestershire County Council can demonstrate it is making decisions in a fair, transparent, and accountable way by considering the needs and rights of different members of the community. The Public Sector Equality Duty (PSED) in the Equality Act 2010 places the County Council (or a third-party exercising function on its behalf) under a duty to have "due regard" to the need to eliminate unlawful discrimination, advance equality of opportunity and foster good relations between persons who share a relevant protected characteristic and those who do not. The nine protected characteristics are: age; disability; gender reassignment; pregnancy and maternity; race, religion, or belief; marriage and civil partnership, sex, and sexual orientation. The fact that others outside these protected groups are also affected by any decision, does not affect the operation of the PSED.

The requirement to advance equality of opportunity requires the decision-maker to have due regard to the need to remove or minimise disadvantages suffered by persons who share a relevant protective characteristic, take steps to meet their needs and encourage them to participate in public life or in any other activity in which participation is disproportionately low. Fostering good relationships requires the decision-maker to have due regard to the need to tackle prejudice and promote understanding. The statutory framework recognises that compliance with the public sector equality duty may involve treating some persons more favorably than others.



1- Policy details	
Name of policy	Review of Homeless support provision
Department and service	Public Health
Who has been involved in completing the Equality Impact Assessment?	Kirsty Walton, Strategic Lead for Health-Related Harm (Substance Misuse and Homelessness)
Contact numbers	0116 305 9211
Date of completion	
	September - October 2023

2- Objectives and background of policy or practice changeUse this section to describe the policy or practice change
What is the purpose, expected outcomes and rationale?



Include the background in	nformation and context
What is the proposal?	Proposal
	The proposal is for the County Council to cease funding a dedicated homeless support service, and instead to provide support via the Council's existing public health services where eligibility is wider.
	This will be achieved primarily through the universal offer of First Contact Plus and the Local Area Coordination service as opposed to a bespoke offer specifically for individuals who are homeless or at risk of becoming homeless . First Contact Plus helps adults in Leicestershire to access information, advice, help and support on a range of services. Referrals to First Contact Plus are made via an online form. For those individuals who may have difficulties in self-referring via an online platform, a referral can be made on their behalf by a professional or friend/family member/carer. Local Area Coordinators work with individuals who may be vulnerable or at risk of crisis by building a supportive community around them thereby reducing social isolation.
	The principles of the future approach centre around the following:
	 a) Coverage across the whole of Leicestershire for anyone 18 years and over. b) Eligibility that includes any individual who is currently homeless or at risk of becoming homeless, irrespective of whether they fall under the priority need group or not. c) Access to support via a central point of access. d) Support that is tailored to the needs of each individual with no defined timescales for the support offer. e) Greater focus on improving the health and wellbeing of individuals.



This model will include using First Contact Plus as the referral hub into services which include the following:

- Department for Work and Pensions for support to access the right benefits.
- Citizens Advice for debt management support.
- Local Area Coordination Team for one-to-one support.
- Warm Homes Service for support on housing issues such as damp, mould, draught proofing, and signposting to funding for energy efficiency measures.
- Health and wellbeing services such as smoking cessation, drug and /or alcohol misuse, healthy weight, physical activity, and sexual health services.
- Mental wellbeing services such as Vita Minds (a talking therapies service for low level mental health support).
- Services provided by the Council's Adults and Communities Department, including community support workers and social care.
- Adult Learning and Multiply for support on accessing learning and educational courses, including support on budgeting. Multiply is a programme aimed at helping adults to improve their numeracy skills.

Where one-to-one support is required, the Local Area Coordination service is well established within communities and so can meet this need through their links with community groups, drop-in sessions and through the direct provision of one-to-one support. Other services commissioned by Public Health such as the substance misuse treatment service and the sexual health service already provide outreach services on a one-to-one basis.

A key strength of this approach is that links can be made to a broader range of health and wellbeing services therefore providing a more holistic support offer for individuals. In addition,



	this approach enables better links into existing public health services and wider onward referrals including to the district housing authorities.
What is the rationale for this proposal?	The Homelessness Reduction Act 2017 amended the Housing Act 1996 to place duties on housing authorities to prevent homelessness and to provide homelessness services to all those affected.
	Locally, these responsibilities sit with district councils as the Housing Authority. Funding through the Homelessness Prevention Grant has been provided by The Department for Levelling Up, Housing and Communities (DLUHC) to support district councils to deliver against these responsibilities.
	It is not a statutory responsibility for the County Council to provide specific services for individuals who are homeless, and the council is not a recipient of grant funding that is focused on preventing or relieving homelessness.
	The County Council has a statutory responsibility to take appropriate steps to improve the health of people living in Leicestershire, including the provision of health improvement information, advice, and support services aimed at preventing illness.
	People experiencing homelessness have far worse health and social care outcomes than the general population. The average age of death for the homeless population is around 30 to 40 years lower than for the general population. People experiencing or at risk of homelessness are therefore one of several populations of concern for the County Council in terms of their health and wellbeing.



	The County Council's Medium-Term Financial Strategy 2023/24 – 2026/27 includes a target of saving £300,000 by 1 st April 2024 through a review of homeless support services. The Council currently commissions, on a discretionary basis, a homeless support service which aims to improve the health of this population by providing support to adults who are homeless or at risk of becoming homeless. This is provided for the Council by Falcon Support Services (Falcon) and Nottingham Community Housing Association (NCHA). The contract value is £300,000 per annum and ends on 31 st March 2024.		
What change and impact is intended by	The intention of the proposal is to ensure that the population of Leicestershire has the		
the proposal?	opportunity to access the support offer. A key strength of this approach for individuals is that		
	links can be made to a broader range of health and wellbeing services therefore providing a		
	more holistic preventative offer.		
	The proposed offer has a wider reach than the current offer. Rural inequalities are lessened with the offer being both online and accessible through multiple internal and linked providers and the option to attend drop in sessions throughout the county, which could lead to one-to-one support. Having an online form and allowing third party referrals which include family members, is a good offer for those who have learning disabilities, sight issues or where English is not their first language. Third party referrals will also enable those that have limited or no access to technology to be referred into the service.		
	It has also been identified that those that are less likely to engage with a face-to-face drop-in service are more likely to utilise the online self-referral. This could include anyone, but characteristics mentioned have been those with mental health issues, gender reassignment, maternity etc. I.e., those that would avoid face to face interaction with fear of discrimination or those that have difficulties getting to a location, be that physical or mental barriers.		



3- Evidence gathered on equality implications - Data and engagement

What evidence about potential equality impacts is already available?

This could come from research, service analysis, questionnaires, and engagement with protected characteristics groups

What equalities information or data has been gathered so far?

What does it show?

Prior to consultation, a period of engagement on current service provision for homeless individuals took place in spring 2022.

Engagement took place which included several online sessions with stakeholders; this included Menti-meter questions as well as open discussions. Stakeholders were from a broad range of areas which included district representatives, homeless support providers, domestic abuse services, substance misuse services, and voluntary sectors organisations. It is important to note that the scope of this engagement exercise included all services available for homeless individuals in Leicestershire, not just the service described within this report. There were a number of areas of work that were identified as working well. These include:

Key strengths of the existing offer were reported as follows:

- Accessibility of services e.g., drop in sessions, face to face support, day centres, access to hostels.
- Types of support available e.g., support to complete application forms, support to maintain living situation, move-on support, bespoke support for street homeless
- Links with the substance misuse service

Areas of work that were identified as a gap or requiring improvement included:

- Lack of suitable and affordable housing
- Access to healthcare, particularly mental health services
- Access to dental care
- Access to social care
- Need for multi-agency working including better data sharing



- Need for Leicestershire wide support
- Need for a flexible offer
- Need for greater emphasis on life skills and resilience building

Consultation was approved by Cabinet on 23 June 2023. The consultation launched on 28 June 2023 and ran for 10 weeks (closed on 3 September 2023) to seek feedback on the proposed model.

The consultation was aimed at the general public, users of the service, service providers, and a range of additional stakeholders including NHS service providers, district councils, voluntary sector providers, and Leicestershire Police. No single characteristics were singled out. The survey was accessible online on the County Council's website and available as a hard copy on request. An easy read version of the supporting information was also available online.

The views of professional and partner stakeholders, as well as the general public, current and previous service users and support workers, was captured through:

- a) Discussions at face to face and online information sessions to talk though the proposal and provide information on how individuals could have their say. A total of 5 sessions were held during the consultation period. At the face-to-face sessions, paper copies of the consultation information were made available to attendees. The information packs included: questionnaire with free post return, supporting information, easy read version of supporting information, and a set Frequently Asked Questions.
- b) Responses to the questionnaire (paper copy and online copy)



c) Responses received via the consultation email address

There were 251 responses to the questionnaire. The majority of responses were received from service users (25%) and employees or volunteers of homeless support services (24%).

Demographic data from the consultation results for service users, family, friends, and interested members of the public showed that 56% were male with 41% female. 50% stated that they had a form of disability, with 9.8% preferring not to say. Of those that answered 86.5% were white, with 5.8% stating mixed as their ethnicity.

There was general confusion and potential misconception amongst stakeholders of the offer that is currently funded. This was overcome by ensuring that the correct information was cited and although some of the feedback received via the consultation responses was not quite relevant to the proposed offer, it has been detailed and actioned where possible in the 'Concern' section of this EIA.

The key issues identified through consultation relating specifically to equality are as follows:

- Accessibility of the service
 - O Digital exclusion and the need for further support e.g., completing online forms.
 - Communication barriers, for example, disability including hearing impairment, learning difficulties, literacy and language (including individuals whose first language is not English)
 - Challenges related to accessing an online or telephone service for individuals with complex physical and mental health issues
- Awareness of the service Lack of awareness and understanding of other public health services e.g. First Contact Plus
- Concerns about the need for kind and non-judgmental treatment



	The outcomes of the consultation will be reported back to the Health and Overview Scrutiny Committee at its meeting on 1 November 2023 and will inform the final proposal put forward to the Cabinet on 24 November 2023.
Which protected characteristic groups or organisations have been engaged with so far?	The consultation was designed to ensure that it was all encompassing. Current providers were encouraged to promote the consultation to their service users. Internal community-based teams were utilised throughout the process to reach the wider population which included those at risk of becoming homeless.
	Those currently using the service were invited to two face to face information sessions and one online session to provide an opportunity to have their say.
	The proposal and consultation were presented at the Leicestershire Equality Challenge Group, which included representatives from different protected characteristic groups.
	Paper copies, online surveys and support over the phone were offered to any persons to ensure that there were minimal exclusions. Face to face and online information sessions were offered to ensure that people understood the consultation and had the chance to have their say – this was for stakeholders, the general public and service users (current and previous).
	The offer is open to ANY person within Leicestershire over 18. No single characteristics have been singled out and those that have been in contact with the homeless provision have been asked about their needs as a cohort rather than individual characteristics. Varying adults ages, and genders have been engaged with via the current contracts; with the service predominantly being white males within the hostel support.



4- Benefits, concerns and mitigating action

Please specify if any individuals or community groups who identify with any of the 'protected characteristics' may **potentially** be affected by the policy and describe any benefits and concerns including any barriers.

Use this section to demonstrate how risks would be mitigated for each affected group

Group	What are the benefits of the proposal for those from the following groups?	What are the concerns identified and how will these affect those from the following groups?	How will the known concerns be mitigated?
Age	All ages will be able to access the provision, including care leavers who are 18+ All cohorts will be able to access FC+ as they do now, the offer is specifically via an online form.	Care leavers or elderly persons may not be aware of the offer	Referrals can be from any third party and clear communications will continue with referring agencies of the process and offer to support residents. A specific communications plan can be added to ensure that all relevant partners are aware of the offer and how they can support their cohorts to interact.
Disability	Positive impact – Having an online offer rather than physical drop-in sessions may positively impact physically disabled person as they will not need to travel.	Accessibility and engagement could potentially be an issue.	Additional support could be offered to promote access and engagement if this is an issue; this would need to be within the current services and could include linked services to



Race	Those individuals that require additional support would be supported to refer by any agency, this would include visually impaired and those with learning disabilities. The proposal is open to all races and	N/A	support such as Local Area Coordinators or Community Recovery Workers. N/A
Nucc	is a culturally appropriate service.	14/14	14,71
Sex	The offer is open to men and women. The support that is required may differ although the service takes a person-centred approach and takes into account issues of gender and responds appropriately.	N/A	
Gender Reassignment	The offer may have a positive effect to those that have had gender reassignment where there is as perceived stigma. Physical location issues would be taken away with residents more likely to reach out and access the offer. Person centred approach that would work with the person's needs and a person would not be turned away if they were transgender. It is an accessible service.	N/A	N/A
Marriage and Civil Partnership	None	N/A	N/A



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Sexual Orientation	The LGBTQ+ community will continue		
	to have equal access to First Contact		
	Plus. The offer may have a positive		
	effect as perceived stigma and		
	physical location issues would be		
	taken away with residents more likely		
	to reach out and access the offer.		
	Person centred approach for referral		
	and access which is ensuring		
	accessible for all.		
Pregnancy and Maternity	The offer may have a positive effect	N/A	N/A
	as perceived stigma and physical		
	location issues would be taken away		
	with residents more likely to reach		
	out and access the offer. Women		
	would not need to physically attend a		
	location whilst pregnant or with a		
	small child which will be of benefit to		
	them.		
	Having an offer for them, when they		
	want access to it rather than specific		
	times and location is beneficial and		
	could result in increased uptake.		



Religion or Belief	None	N/A	N/A
Other groups: e.g., rural	All districts will have access to the		
isolation, deprivation, health	same level of support.	Providers and residents may not be	Wider interaction with relevant
inequality, carers, asylum		aware of the offer or utilising as	stakeholders will ensure that
seeker and refugee	Use of the Local Area Co-ordinators,	much as they could do.	the offer is being promoted and
communities, looked after	and the First Contact Plus services will		access monitored through leads
children, deprived, or	provide wider links across		of the service; as well as a
disadvantaged communities	Leicestershire. This will remove existing geographic barriers.		comprehensive communications plan during implementation.
	Domestic Abuse victims will have easy access to the offer with it being online. Children and Family Leads have been engaged to ensure that Care Leavers are able to access the services provided. Those requiring additional support can have a third party make the referral for them into the service, this could include language barriers. There is a correlation between homelessness and health and		



and substance misuse. The offer provided by First Contact Plus will have a positive impact for this cohort.	
Having an online offer that allows online referrals may be beneficial and have a positive impact to those where English is not their first language. They would be able to get support to fill in the online referral form.	
Ex armed force are at a greater risk of homelessness and the service will support persons with their specific needs where appropriate.	

5- Action Plan and Recommendations

Use this section to describe concerns further

Produce a framework to outline how identified risks/concerns will be mitigated.

What concerns were identified?	What action have you taken or planned?	Who is responsible for the action?	By when
Awareness of the service	First Contact Plus is an established offer that is advertised widely – this	The Homeless Project Delivery Group will ensure that an effective and comprehensive communications	Implementation plan to be delivered from January 2024 with a clear communications



	work will continue and be advertised to wider networks that were specifically linked to the commissioned service via a detailed communications plan	plan is put in place and acted upon during implementation. Following implementation, it will be the service leads.	plan to ensure awareness of the offer in preparation for April 2024; Although to note that the offer is currently available to all.
Accessibility of the service	First Contact Plus allows third party referrals, be this via family, friends or other services / providers. This is via the online referral form. This can be any service linked to the service user and the intention is to ensure the offer is advertised wider to relevant services. This would support those that do not have direct access to the internet. Once assessed, First Contact Plus allocates the relevant offer for the person. This could be utilising Local Area Coordinators as an onward referral option which could involve face to face interaction. A number of drop-in locations for wider services are available where linked providers can refer for residents. As well as local libraries	The Homeless Project Delivery Group will ensure that an effective and comprehensive communications plan is put in place and acted upon during implementation. Following implementation, it will be the service leads.	This is an offer that is already in place that is being utilised by numerous residents of Leicestershire. Ensure that the communications plan is clear and details the offer.



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	supporting people to access the		
	service where they will be supported		
	to complete the online form.		
Concerns about the need for	Staff are trained and work currently	N/A	N/A
kind and non-judgemental	with a variety of residents. The team		
treatment	are professional, empathetic,		
	compassionate and mindful of the		
	needs of service users. Concerns are		
	potentially raised by persons not		
	aware of the service and the already		
	agreed communications plan will		
	detail the offer which may relieve		
	concerns.		
	The offer is via a person-centred		
	approach that is available to all		
	regardless of any particular		
	protected characteristic. The service		
	has access to relevant training and		
	support to ensure this.		

6- Way forward

How will the action plan and recommendations of this assessment be built into decision making and implementation of this proposal? If the proposal is accepted, any additional requirements identified will be added during the transition period. This would include clear communication to all persons that currently link with the previous service and ensuring that the proposal of utilising First Contact Plus is in the required format to reach all persons. Wider linked services will also be given clear instructions as to how they can link in with the service and what the referral process is.



How would you monitor the impact of your proposal?	The impact of the proposal will be monitored via the First Contact Plus team's current review process; this includes dashboards and data to check demographics of those utilising the offer. Where there is low uptake, work will take place to ensure that communications are clear with those areas and cohorts not engaging where possible.
	The dashboard figures are presented quarterly at the Public Health departmental Senior Leadership Team meetings.
Sign off by DEG Chair/Director or Head of Services	
Review Date	