

## **Equality Analysis Report**

<b>Title of activity / Budget Proposal title and number</b> Supported Housing Strategy 2017-2022	<b>Committee meeting (decision maker) and date</b>
<b>Service area</b> Children's and Adult Services, Supported Housing	<b>Lead officer</b> Lisa Sparks, Commissioning Manager, Supported Housing
<b>Approved by</b> Simon White, Asst Director (Commissioning & Bus Serv)	<b>Date of approval</b> 25 September 2017
<b>Description of activity:</b> This is a new Supported Housing Strategy which will replace the previous Supporting People Strategy. The purpose of the strategy is to provide an understanding of what the housing related support and supported accommodation needs of Bedford Borough are and how current provision meets current and future needs. Once approved, the strategy will be used to develop an Action Plan which will be delivered by the Supported Housing Team and/or other relevant Council Teams and external partners. The delivery of the Action Plan and Outcomes will be overseen by the Adults Overview and Scrutiny Committee.	

**Please refer to the Equality Analysis Template Notes for guidance on completing this form.**

## **Relevance Test**

1. The outcomes of the activity directly and significantly impact on people, e.g. service users, employees, voluntary and community sector groups.	Yes	X	No	<input type="checkbox"/>
2. The activity could / does affect one or more protected equality groups.	Yes	X	No	<input type="checkbox"/>
3. The activity could / does affect protected equality groups differently.	Yes	<input type="checkbox"/>	No	X
4. One or more protected equality groups could be disadvantaged, adversely affected or are at risk of discrimination as a result of the activity.	Yes	<input type="checkbox"/>	No	X
5. The activity relates to an area where there are known inequalities.	Yes	X	No	<input type="checkbox"/>
6. The activity sets out proposals for significant changes to services, policies etc. and / or significantly affects how services are delivered.	Yes	<input type="checkbox"/>	No	X
7. The activity relates to one or more of the three aims of the Council's equality duty.	Yes	X	No	<input type="checkbox"/>
8. The activity relates to the Council's Corporate Plan objectives, is a significant activity and / or presents a high risk to the Council's public reputation.	Yes	<input type="checkbox"/>	No	X
9. An equality analysis of this activity is required.	Yes	X	No	<input type="checkbox"/>
This activity has no relevance to Bedford Borough Council's duty to eliminate unlawful discrimination, harassment and victimisation; to advance equality of opportunity; and to foster good relations. An equality analysis is not needed.				<input type="checkbox"/>
<b>Explanation why equality analysis is not needed</b>				

## **Scope of equality analysis**

<b>Who is / will be impacted by the activity's aims and outcomes?</b>	<p>The Strategy aims and outcomes will impact directly on service users and also voluntary sector providers who are the main providers of supported housing/housing related support for vulnerable people in Bedford Borough.</p> <p>Main stakeholders in relation to the strategy will be voluntary sector service providers, statutory services (e.g. ELFT, Health) and the service users themselves.</p> <p>Through delivering the strategy, there may also be benefits to members of the public e.g. increased service provision to support relatives or friends.</p>
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<b>Which particular protected equality groups are likely / will be affected?</b>	<p>Protected Equality Groups:</p> <p>Age: Older People and Young people (16/17yr olds)</p> <p>Gender: Women (Domestic Abuse victims and teenage parents)</p> <p>Pregnancy: Teenage Parents</p> <p>Disability: People with mental health problems, learning disability, physical disability and autism</p> <p>Race: Across all client group areas</p> <p>Other groups:</p> <p>Carers and those who are socio economically disadvantaged.</p>
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### **Evidence, data, information and consultation**

<b>What evidence have you used to analyse the effects on equality?</b>	<p>The Strategy has been developed using the Council's 'Housing Related Support' Needs Analysis carried out in 2015 and published in 2016. The Needs Analysis includes information collected from a range of sources including surveys and monitoring/performance data. It focuses on the needs of older and frail people, people with Autism, people with learning disabilities, people with Mental Health, with physical and sensory disabilities ,young people (teenage parents and those leaving care), people affected by domestic abuse and those who are homeless. To view the Needs Analysis please click <a href="#">here</a> .</p>
<b>What consultation did you carry out with protected equality groups to identify your activity's effect on equality?</b>	<p>A 10 week public consultation took place between the 24<sup>th</sup> April and the 3<sup>rd</sup> July. The link to the consultation was emailed to various groups and agencies across the Borough, consultation meetings were arranged for professionals and partners and copies of the consultation documents were also sent to all of the Borough's Libraries, the Customer service Centre and Borough Hall Reception. In addition to this, once the strategy is approved then an Action Plan will be developed to deliver the recommendations and actions identified within the strategy. Where these relate to a service change or development then targeted consultation will be carried out with relevant groups of people and organisations.</p> <p>The public consultation received very few responses. None of the responses identified a need for</p>

	any additional services or support for protected groups, nor did respondents identify any detrimental impact of the strategy on any of the protected groups.
<b>What does this evidence tell you about the different protected groups?</b>	<p>The Needs Analysis highlights the following key points relevant to this assessment;</p> <ul style="list-style-type: none"> <li>• There is an under representation of BME groups across some client groups e.g. older people and an over representation across others e.g. young people at risk</li> <li>• More support or services are needed for older people living independently within the community, dementia sufferers, women and men experiencing domestic abuse, people with mental health problems, people with learning disabilities, people with autism and homeless people/rough sleepers with complex needs</li> <li>• A number of the groups within the strategy include high numbers of socio economically disadvantaged individuals</li> <li>• The aging population will mean a continuing increase in the number older people requiring services such as 'extra care housing' in the future</li> <li>• Very low numbers of people from the LGBT community appear to be accessing services</li> </ul> <p><b>Older people</b></p> <ul style="list-style-type: none"> <li>• The older population is increasing at a much higher rate than other age groups. The 65+ population is forecast to increase by 19% and the 85+ population by 37%.</li> <li>• The number of people aged 65+ with social care needs is projected to rise by 65% by 2028.</li> <li>• The number of people aged 65+ in Bedford Borough with dementia that results in severe cognitive impairment and functional disability is projected to increase by 80% by 2028.</li> <li>• Household data for persons aged 65 and over shows that the vast majority of this group (77%) are homeowners, and almost half (47%) are single person households.</li> <li>• There is an identified need for additional extra care housing to be developed, although developments already underway may deliver most if not all of this.</li> <li>• It was felt that there was a need for services that could support the large numbers of older owner occupiers within the Borough and older people who are privately renting. There was also an emphasis on the need for increased dementia support and initiatives and/or support to prevent social isolation.</li> </ul>

	<p><b>People with mental health problems</b></p> <ul style="list-style-type: none"> <li>• The number of people with a mental health condition in Bedford Borough is predicted to rise primarily as a result of the changing population.</li> <li>• Mental health problems affect about one in four people. For Bedford Borough this means based on 2013 population figure, the total population at risk of mental health problems is 39,460. However only 8% to 12% of this number would be expected to need referral to a specialist mental health service, and only 4% are likely to be admitted to a mental health hospital. The majority will be seen, diagnosed and treated by their GP.</li> <li>• Housing needs to be an integral part of exit planning for those in hospital.</li> <li>• A number of people with mental health issues still live with parents or other relatives who act as their carer, however there is no planning around identifying clients living with aging and/or unwell carers so that their future accommodation and/or support needs can be recognised and planned for in advance rather than at crisis point (e.g. if a carer dies, is hospitalised or needs residential care).</li> <li>• It was felt that a greater range and number of services were needed, including supported housing, accommodation in the community with access to support and other wraparound services. Services also need to be flexible so that they can adapt and react to changing client needs and can offer support at weekends.</li> <li>• There was also an identified need for accommodation and support for people with enduring mental health problems and chaotic lifestyles who are homeless or rough sleeping, and may have an extensive history of homelessness.</li> <li>• Limited availability of move on accommodation (both supported housing and general needs), particularly 1 bedroom properties</li> <li>• A need for more innovative and creative use of self-directed support and personal budgets</li> <li>• Lack of follow on support, structure and opportunities for clients (once they are accommodated)</li> <li>• Need for support for ex-offenders experiencing anxiety and depression to help them transition between prison and society</li> <li>• A significant minority of non-elderly veterans experience a range of largely mental health problems related to their service in the military, which can have a number of serious consequences for their health outcomes and those of their families.</li> </ul>
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**People with a physical disability**

- In 2012 there were an estimated 7,860 Bedford Borough residents aged 16-64 with a moderate physical disability. This number will increase as the population ages. By 2020 it is predicted that 8,500 will have a moderate disability, and an estimated 4,190 of these will require some personal care.
- In 2012 there were 2,310 Bedford Borough residents aged 16-64 with a serious physical disability. This is predicted to rise to 2,520 by 2020, with 930 of these requiring personal care.
- In February 2013, 302 people in the Borough were certified as severely sight impaired/blind, 320 people certified as sight impaired/partially sighted and 453 were registered as Deaf or hearing impaired. These numbers are lower than would be expected based on population size.
- The majority of those with visual and hearing impairments will be older people.
- In February 2013 there were just 5 people registered with a dual sensory impairment (deafblindness) in Bedford Borough, whereas the estimated prevalence of deafblind suggests there are approximately 60 deafblind people (all age groups) within Bedford Borough.
- The aging population profile of the Borough will also generate an increase in the numbers of people with the sorts of physical disabilities and sensory impairments connected with aging.
- Social isolation is an identified issue for this group and people do not have access to the wraparound services and support that they need to maintain independence or maintain settled accommodation/independent living e.g. floating support, life skills, social and leisure activities, employment support.
- There is a lack of housing related support services, particularly supported housing, available for those with physical disabilities or sensory impairments, especially those under 55 or younger people. This means that younger people can sometimes end up being accommodated in services aimed at older people or in residential care because no other suitable alternatives are available.
- There is a lack of adapted properties for larger families e.g. 4 bedrooms or properties with space for a downstairs bedroom.
- A more preventative approach is needed to ensure needs are identified earlier and adaptations (where required) are provided quicker.

**People with a learning disability**

- The prevalence of learning disabilities will increase in line with population growth
- We expect the population of learning disabled 65-74 years olds to increase by 16.4% by 2020. The overall increase of people with Learning Disability over 65 is 17.2% by 2020.
- Mild to moderate learning disability is linked with poverty, and rates are higher in deprived and urban areas.
- Access to appropriate move on accommodation (when required) was highlighted as an issue, both in terms of availability and property location.
- The 'transitioning' of clients from Children's to Adult services means that there will be an ongoing need for a number of additional supported accommodation placements to meet the needs of these individuals in the future.
- There were some particular accommodation gaps identified;
- accommodation that focuses on life skills development (primarily for those transitioning) and emergency accommodation (for those who are homeless)
- accommodation and support that would allow those with a learning disability to live with their aging carer
- accommodation and visiting support for those with lower needs (i.e. below social care threshold)
- specialist accommodation with support for learning disabled parents who can and want to care for their children (though only 2 cases were known of in the Borough)

**People with autism**

- The current numbers of adults, aged between 18 and 64, with autism in Bedford Borough is estimated to be 984. Of these 354 are estimated to have Asperger syndrome and 344 to have higher functioning autism.
- In 2012 there were 232 people with LD and autism receiving services from Bedford Borough Council social services.
- Access to both supported housing and independent housing with some support was highlighted as a big gap for this group.
- There was a particular concern around the fact that there is no transition planning undertaken

	<p>for clients living with elderly parents.</p> <ul style="list-style-type: none"> <li>• Many people with autism don't meet the threshold for social care services, and other support available for this group is very limited.</li> <li>• Most adults with autism only need a little support to enable them to manage independently, but often end up unsupported and then go into crisis.</li> <li>• 'Valuing People Now' recognised that people with autism are some of the most excluded and least heard people in society, with poor health outcomes.</li> <li>• The three main areas of difficulty shared by all people with autism are known as "the triad of impairments" (Wing and Gould, 1978) and these are:</li> <li>• Social communication (e.g. problems using and understanding verbal and non-verbal language, such as gestures, facial expressions and tone of voice)</li> <li>• Social interaction (e.g. problems in recognising and understanding other people's feelings and managing their own)</li> <li>• Social imagination (e.g. problems in understanding and predicting other people's intentions and behaviour and imagining situations outside their own routine)</li> </ul> <p><b>Young parents (pregnancy and maternity)</b></p> <ul style="list-style-type: none"> <li>• In 2013 the under 18 conception rate for Bedford Borough was 22.0 per 1000 (actual number 67) and in 2014 there was an increase in the rate to 24.7 per 1000 (actual number 75).</li> <li>• Overall, since 1998 to 2014 there has been a reduction of 47.6% in Bedford Borough compared to 46.7% in the East of England and 51.1% in England.</li> <li>• Castle and Kingsbrook remain the wards with the highest under 18 conception rate</li> <li>• There is a lack of services for teenage/young fathers and those wishing to remain as a family unit (i.e. teenage/young couple and child). There is no support for young fathers, who can often be excluded.</li> <li>• There are young mothers with 2 or 3 young children who need support but may not be able to access the level of support, care and life skills development that they need</li> <li>• There is perceived stigma about approaching services</li> <li>• The needs of clients are increasing, with clients with higher and more complex needs now coming through the Teenage Parent accommodation service (Charis), particularly in connection to child protection</li> </ul>
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	<ul style="list-style-type: none"> <li>• More flexibility around age ranges is needed to allow the Teenage Parent Accommodation service to pick up those who need the support the service can offer, but fall slightly outside of the 16 to 24 age range</li> </ul> <p><b>Young people</b></p> <ul style="list-style-type: none"> <li>• Young people who are 'Not in Education, Employment or Training' (NEET) are more likely to be involved in delinquency and crime. Being out of work can lead to poor mental health (for example depression) and make them more likely to turn to drugs and alcohol Bedford Borough saw an 11.3% increase in numbers recorded as NEET in 2014/2015.</li> <li>• In January 2012 and 2014, just under half of the NEET group were made up of mainly 18/19 year olds. This rose to 55.7% in January 2015.</li> <li>• In terms of ethnicity young people from 'White British', 'other White' and 'White and Black African' backgrounds contributed the most to the NEET group.</li> <li>• The number of clients presenting with mental health problems or complex needs appears to be increasing, and feedback from service providers and other agencies suggests that current services within the Borough are unable to support young people with complex or high needs.</li> <li>• The shortage of affordable 1 bedroom private sector accommodation makes it difficult to find accommodation for clients, particularly accommodation that will also accept housing benefit.</li> <li>• There are a shortage of daytime services and activities for young people, particularly those who are NEET. Although this is not a housing related support need, lack of access to appropriate 'wraparound' services is likely to impact negatively on their ability to maintain a tenancy or placement.</li> </ul> <p><b>Victims of domestic abuse</b></p> <ul style="list-style-type: none"> <li>• Collectively the services in Bedford received 180 eligible referrals within a 12 month period.</li> <li>• The two accommodation based refuges in Bedford cater for female victims of domestic abuse only.</li> <li>• The vast majority of those entering these refuges are from outside of the Bedford Borough or</li> </ul>
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	<p>wider Bedfordshire area.</p> <ul style="list-style-type: none"> <li>• The IDVA<sup>1</sup> service is able to provide support to male and female victims of domestic abuse, but only has the capacity to support those who meet the MARAC<sup>2</sup> threshold (i.e. those who are high risk victims).</li> <li>• Delays in moving clients on were identified by the services, but these related solely to the time clients have to wait for accommodation to become available through 'Choice Based Lettings' and, the growing demand for social housing means that this is a wider issue which is affecting all those seeking social housing within Bedford Borough.</li> <li>• A dedicated floating service is needed for those below the MARAC threshold.</li> <li>• Those being supported by the Refuge and IDVA services are from a wide variety of BME groups</li> <li>• 3<sup>rd</sup> sector organisations have also highlighted a growing need for translated literature and translators to deliver courses or sessions.</li> <li>• It is felt there is a lack of services for male victims</li> <li>• There is only limited support for children witnessing domestic abuse</li> <li>• Victims need to be able to access counselling and other wraparound services.</li> <li>• Domestic Abuse is a priority for the Bedford Borough Community Safety Partnership.</li> <li>• There were 196 referrals to the Bedford MARAC between April 2016 and March 2017, of which 51 were repeat referrals (i.e. the victim had been referred to MARAC previously).</li> <li>• Bedfordshire Police recorded 3,175 reports of Domestic Abuse Incidents within Bedford Borough for the period April 2016 to March 2017 - an average of more than 61 incidents a week.</li> <li>• IDVA data – Mar 2015 – Apr 2016: <ul style="list-style-type: none"> <li>○ 221 referrals – majority from the Police</li> <li>○ 43 (19%) of these were re-referrals</li> <li>○ 140 were high risk</li> <li>○ 56 were professional judgement</li> <li>○ 25 were escalation of violence</li> <li>○ 215 referrals were for females and 6 were for males</li> </ul> </li> </ul>
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<sup>1</sup> Independent Domestic Violence Advisor

<sup>2</sup> Multi Agency Risk Assessment Conference

### **Single homeless and rough sleepers**

- Those who are homeless or rough sleeping experience higher rates of mental and physical ill health and that those with offending histories and substance misuse issues are disproportionately represented within this group.
- The vast majority (around 90%) of those entering homeless or rough sleeper services are single males.
- Client ages range from 18 through to 68, but with higher numbers of people in their 20's (32%), 30's (20%) and 40's (17%). The majority of those entering service (87%) are working age adults aged 18-64.
- Need a service for those with more complex/higher needs
- Particular issues were highlighted around the shortage of affordable private sector accommodation of a reasonable quality, that will also accept Housing Benefit. Affordability is an issue, as many clients cannot fund the deposits and advance rent needed for private sector accommodation.
- A high number of clients within services present with mental health problems (diagnosed and undiagnosed) and finding move-on accommodation and on ongoing support for these individuals can be challenging.
- Single homeless and rough sleepers need greater access to meaningful daytime activities such as volunteering, work experience or training/education.
- Only 15% of clients entering services were from BME groups. This seems low considering that 28.5% of the Borough's population are from BME groups.
- Need ongoing support for those with low level mental health problems to enable them to manage everyday life.
- Some mental health clients are still being discharged from hospital without accommodation.
- The last official rough sleeper estimate for Bedford Borough identified 59 rough sleepers.
- During 2015/16 (April – March), 735 people presented themselves to Bedford's Housing Options Team for advice or assistance. A homeless duty was accepted for 253 of these and, 35 were found to be non-priority homeless and 39 were found to be intentionally homeless.

### Offenders

- Ex-Offenders experience higher rates of physical and mental health problems and are more likely to suffer with substance misuse issues.
- A reported 71% of female prisoners and 72% of male prisoners have two or more mental health issues e.g. personality disorder, psychosis (Revolving Doors Agency, 2013).
- It is estimated that there is a higher rate of learning disability among those in contact with the criminal justice system than within the general population.
- Need a service for those with more complex/higher needs
- There are insufficient resources to provide all prisoners with housing advice before they are released
- It is important that this group have access to meaningful daytime activities that will support future employment (e.g. training, volunteering, courses etc.)
- As at 30/06/2016 there were 459 Adults (21+), and 30 Juveniles and young adults (15 to 20) within Bedford Prison<sup>3</sup>.
- Between April 2015 and March 2016 677 people were released from Bedford Prison<sup>4</sup>.

The tables below show proven re-offending data for the period October 2013 to September 2014;

Table 31:

	Reoffending rate
<b>Bedford Borough</b>	24.5%
<b>East of England</b>	22.9%
<b>England and Wales</b>	24.7%

Source: Proven Re-Offending Rates, Ministry of Justice, 2016

Table 32:

	No. Re-offences	No. Reoffenders
<b>Bedford Borough</b>	1088	308

Source: Proven Re-Offending Rates, Ministry of Justice, 2016

<sup>3</sup> Source: Prison Population Data Tool, Ministry of Justice (2016)

<sup>4</sup> Source: Prison Releases, Ministry of Justice, (2016)

	<p><b>Homeless Families:</b></p> <ul style="list-style-type: none"> <li>• We know that a significant number of the families which the Council and their partners work with are affected by the 'toxic trio' of domestic abuse, drugs and/or alcohol and mental illness. From April to November 2016 the numbers identified with factors relating to these areas represented a considerable percentage of all the contacts and assessments undertaken;</li> <li>• Domestic abuse relating to a parent/carer was an identified factor for 27.2% of all contacts and 34.9% of all assessments.</li> <li>• Mental health issues relating to a parent/carer was an identified factor for 4% of all contacts and 18.2% of all assessments.</li> <li>• Drug misuse relating to a parent/carer was an identified factor for 3.5% of all contacts and 15.9% of all assessments.</li> <li>• Alcohol misuse relating to a parent/carer was an identified factor for 2.5% of all contacts and 11.9% of all assessments.</li> <li>• There is a shortage of affordable private sector accommodation that will also accept Housing Benefit and Homeless families can have difficulties funding rental deposit and advance rent for private sector</li> <li>• By May 2014 the 'Troubled Families Programme' (Family Focus Team), had turned around the lives of 198 families. Within the cohort supported the following trends were highlighted<sup>5</sup>;</li> <li>• a tendency to have three or more children per household</li> <li>• numbers in social housing were higher than the national average</li> <li>• lone parents numbers were greater than the national average</li> <li>• 81% of families were unemployed</li> <li>• 71% of families had health problems</li> <li>• 80% of families had problems with education</li> <li>• 32 of the families were Children In Need (CIN), Child on a Protection Plan (CPP) or Looked after Children (LAC)</li> <li>• 64% of families were causing Anti-Social Behaviour (ASB) or known within the criminal justice</li> </ul>
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<sup>5</sup> Source: Children, Young People and Families LOCALITY PROFILE - PROFILE FOR Bedford Locality 2014

	system
<b>What further research or data do you need to fill any gaps in your understanding of the potential or known effects of the activity?</b>	None at present.

### **General Equality Duty**

<b>Which parts of the general equality duty is the activity relevant to?</b>			
	Eliminate discrimination, harassment and victimisation	Advance equality of opportunity	Foster good relations
Age	More extra care housing is available for older people. More older people can access dementia services and community support. Young homeless people can access appropriate services. Young parents can access the support they need - see pregnancy and maternity section below.		
Disability	The additional needs of those with a physical disability or sensory impairment are not a barrier to accessing appropriate support. A greater volume and variety of services are available to those with mental		

	health problems.		
Gender reassignment			
Pregnancy and maternity	Teenage parents can access the support they need in order to minimise involvement with statutory services and maximise their ability to live independently and positively support their child		
Race	The additional needs of those from BME communities (e.g. language, cultural beliefs) are not a barrier to accessing appropriate support		
Religion or belief			
Sex	More services are available to male victims of domestic abuse.		
Sexual orientation	LGBT clients can easily access services and receive effective and appropriate support		
Marriage and civil partnership			

### **Impact on equality groups**

<b>Based on the evidence presented what positive and negative impact will your activity have on equality?</b>				
	Positive impact	Negative impact	No impact	Explanation

Age	X	<input type="checkbox"/>	<input type="checkbox"/>	<p>The strategy has identified a number of key actions to be delivered in relation to older people;</p> <ul style="list-style-type: none"> <li>• Community or visiting support services which can engage with and offer support to the large number of older owner occupiers and to older people who are privately renting</li> <li>• To assess whether the current extra care developments will provide the level of extra care housing required for the Borough or whether further developments will also be needed</li> <li>• More support for the increasing number of dementia sufferers</li> <li>• Support from statutory health and social care partners to enable sheltered and extra care providers to develop some of their schemes into community resources/hubs</li> <li>• Continued promotion of Assistive Technology/Telecare to enable people to have the opportunity to access this type of support</li> <li>• To help more older people to stay independent for longer</li> </ul> <p>The strategy has identified a number of key actions to be delivered in relation to young people;</p> <ul style="list-style-type: none"> <li>• To understand what sorts of day opportunities clients are currently unable to access and whether some of these gaps can be met by facilitating better access to existing services for this group.</li> <li>• To consider the possibility of funding a 1 year pilot project for 1 or 2 furnished properties, with low level support attached, for use as emergency temporary accommodation for vulnerable individuals who would be unable to cope in bed and breakfast or other alternatives.</li> <li>• To look at whether anything can be done to reduce the time taken for care leavers to be allocated social housing through CBL (e.g. making earlier applications, additional assistance with bidding etc.)</li> <li>• To quantify the numbers who are unable to access ongoing support when they transition to Adult Services and look at whether other existing services could be accessed to provide appropriate interim support to at least some of these individuals to enable them to manage within independent</li> </ul>
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				<p>accommodation.</p> <ul style="list-style-type: none"> <li>To establish whether any of the required independent or semi-independent accommodation for care leavers could be provided in partnership with local social housing (RSL) partners through supported or affordable housing developments.</li> </ul> <p>Young parents - see pregnancy and maternity below.</p>
Disability	X	<input type="checkbox"/>	<input type="checkbox"/>	<p>The strategy identified the following actions for single homeless and rough sleepers in connection with disability</p> <ul style="list-style-type: none"> <li>To identify the actual numbers of clients within services who are presenting with diagnosed and undiagnosed MH problems and work in partnership with ELFT and 3<sup>rd</sup> sector mental health services to; <ul style="list-style-type: none"> <li>identify what services these individuals require</li> <li>identify any barriers to services</li> <li>ensure that there are clear pathways into services for this group</li> </ul> </li> <li>To ensure there is early identification of housing needs for those admitted to wards and that these are shared with appropriate partners as early as possible.</li> </ul> <p>The strategy identifies a number of key actions across the various disability groups;</p> <p>Physical Disability</p> <ul style="list-style-type: none"> <li>To work jointly with other relevant commissioners to explore options for increasing the availability of low level housing related support to assist those with physical disabilities and/or sensory impairments to maintain or increase their independence and/or maintain settled accommodation.</li> <li>To facilitate access to information and training for housing related support providers to help them to identify clients who may benefit from aids or adaptations (minor or major) so they can then support them to apply for these items or works.</li> <li>To develop a protocol for use by local housing providers and adult social</li> </ul>

				<p>care which details who should be informed if tenants with disabilities or medical conditions are threatened with eviction, and timescales for notification.</p> <ul style="list-style-type: none"> <li>• To work with housing providers and other relevant commissioners to identify the need for accommodation for those with disabilities, and look at ways of increasing the availability of accessible, appropriate accommodation through more innovative use of existing accommodation as well as any need for new developments.</li> <li>• To ensure that any demonstrated need for adapted properties for larger families (e.g. 4 bedrooms or properties with space for a downstairs bedroom) is captured within future Strategic Housing Market Assessments.</li> </ul> <p>Mental Health</p> <ul style="list-style-type: none"> <li>• To continue to work jointly with local housing providers and relevant commissioners to explore options for increasing the number of services available for those with MH problems, including development of new services and facilitating access to existing services where these can help meet assessed needs.</li> <li>• To consider how clients can make better use of the range of existing services within the Borough e.g. One Support, day activities, employment services etc. and whether these are accessible to those with mental health problems and other needs e.g. offenders with depression who are leaving prison, people with MH and substance misuse issues.</li> <li>• To ensure that all services that are developed and/or commissioned can provide flexible support, to include a commitment to providing reasonable levels of support at weekends or out of normal hours where required.</li> <li>• To ensure there is early identification of housing needs for those admitted to wards or crisis units to enable housing needs to be addressed (fully or partially) prior to discharge.</li> <li>• To establish how many people currently supported by carers are likely to require alternative accommodation within the next 10 years, and what their accommodation and support needs are likely to be.</li> </ul>
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				<ul style="list-style-type: none"> <li>• To look at more innovative and creative ways of using self-directed support and personal budgets</li> <li>• To identify the specific issues around 'move on' and to try and identify ways to minimise or resolve these.</li> </ul> <p>Learning Disability</p> <ul style="list-style-type: none"> <li>• To identify the specific issues around 'move on' reported by transitional services and try to identify ways to minimise or resolve these</li> <li>• To identify the numbers of vulnerable clients, below the social care eligibility threshold, who are living in the community without adequate support and ascertain what type and level of visiting support service they require</li> <li>• Low level supported accommodation services for those with lower needs and higher levels of independence (i.e. a service with minimal staffing that will encourage independence but provide clients with access to support when needed)</li> <li>• To look at whether those wishing to continue living with ageing carers could be accommodated within extra care or sheltered accommodation services</li> <li>• To consider the possibility of providing multi-purpose units of accommodation that could be used to provide emergency, short term or interim accommodation for a range of client groups and services.</li> </ul> <p>Autism</p> <ul style="list-style-type: none"> <li>• To ensure that supported housing, housing related support providers and other front line housing staff have access to the training and information they need to enable them to have a good understanding of autism and the support needs of clients with this condition.</li> <li>• To encourage local autism organisations to use the Bedford Supported Housing Forum to make contact with a range of local supported housing and housing related support providers to build relationships and increase their knowledge of what is available and how to access services.</li> </ul>
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				<ul style="list-style-type: none"> <li>• To work with local autism services to assess the number of people requiring low level housing related support (e.g. floating support) to enable them to maintain their current accommodation or to move to independent accommodation</li> <li>• To work with the Service Manager for Housing and bpha to establish whether it is possible to identify those with autism who require tenancy support (prior to allocation)</li> <li>• To establish how many people currently supported by carers are likely to require alternative accommodation within the next 10 years, and what their accommodation and support needs are likely to be.</li> </ul>
Gender reassignment	<input type="checkbox"/>	<input type="checkbox"/>	X	Current services can already be accessed by anyone within this protected group and any new services would also need to ensure they can support this group.
Pregnancy and maternity	X	<input type="checkbox"/>	<input type="checkbox"/>	<p>The strategy has identified 4 key actions to be developed:</p> <ul style="list-style-type: none"> <li>• Consider extending the age range for the existing Teenage Parent Accommodation service (Charis) to allow them to support slightly older mothers with babies who have a real need for this type of accommodation based support.</li> <li>• To work with the Service Manager for Housing and Children's Services Placements Manager to establish the numbers of families likely to need accommodating after staying at a Parenting assessment Unit, and whether any existing initiative (e.g. private sector leasing or rent deposit scheme) could be used to address the needs of this cohort.</li> <li>• To look at whether an outreach pilot (attached to an existing service) could be established to work with teenage/young parent couples living within the community and support teenage/young fathers to build their parenting skills</li> <li>• To re-provide the current Teenage Parent service to enable the service to be delivered from one building or to have 2 sites within much closer proximity.</li> <li>•</li> </ul>
Race	X	<input type="checkbox"/>	<input type="checkbox"/>	The strategy identified the following actions for single homeless and rough sleepers in connection with race

				<ul style="list-style-type: none"> <li>To understand why BME numbers accessing services are low in comparison to BME figures for Bedford Borough.</li> </ul>
Religion or belief	<input type="checkbox"/>	<input type="checkbox"/>	X	Current services can already be accessed by anyone within this protected group and any new services would also need to ensure they can support this group.
Sex	X	<input type="checkbox"/>	<input type="checkbox"/>	<p>The strategy identified the following key actions for victims of domestic abuse;</p> <ul style="list-style-type: none"> <li>To look at whether private sector rental would provide a quicker route into accommodation for some clients ready to move on.</li> <li>To produce a business case for funding a DA specific community visiting support post for an 18month/2 year period which would support male and female DA sufferers who fall below the MARAC threshold.</li> <li>To continue to explore all viable opportunities for relocation of the Bedford Refuge.</li> <li>To ensure that housing related support services are embedded within the Borough's emerging strategic approach to DA.</li> <li>To understand what services may be need for male victims and whether any current services could meet these needs.</li> </ul>
Sexual orientation	X	<input type="checkbox"/>	<input type="checkbox"/>	The issue raised by the generic floating support service in relation to underrepresentation of some demographic groups such as the LGBT community and the need to target support to these groups will also be considered in relation to all other client groups as well.
Marriage and civil partnership	<input type="checkbox"/>	<input type="checkbox"/>	X	Current services can already be accessed by anyone within this protected group and any new services would also need to ensure they can support this group.
Other relevant groups	X	<input type="checkbox"/>	<input type="checkbox"/>	<p>The strategy also identified actions in relation to socio economic inequalities;</p> <ul style="list-style-type: none"> <li>To ensure that the shortage of affordable one bedroom properties and bedsits within Bedford Borough continues to be highlighted as a gap with relevant departments and agencies (e.g. Strategic Housing, RSL's etc.)</li> <li>To ensure that housing needs are identified whilst still in prison and work with</li> </ul>

				<p>the prison to understand what the unmet need is in relation to housing advice for prisoners pre-release and whether there are ways to provide advice in a more creative way e.g. regular housing advice workshops for small groups of prisoners</p> <ul style="list-style-type: none"> <li>• To produce a business case for establishing a small fund that could be used towards assisting with deposit costs for those who have a local connection to Bedford but are ineligible for a loan from the Council and are unable to (or do not wish to) access social housing.</li> <li>• To establish whether the existing generic Floating Support and 'Drop In' service provided by One Support is currently able to meet the demand for providing housing related support to homeless families.</li> <li>• Encourage the growth of the 'Shared Houses' model (Kings Arms Project) and provision of service specific move-on flats (Emmaus) within the Borough, and work with other local providers and partners to explore any other potential models that could offer this sort of 'move-on' or early intervention support.</li> <li>• Develop a Rough Sleeper Outreach Service in conjunction with Sustainability and Transformation Plan and DCLG.</li> </ul> <p>Impacts listed under age and disability would also benefit the carers of those accessing these services.</p>
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### **Commissioned services**

<p><b>What equality measures will be included in Contracts to help meet the three aims of the general equality duty?</b></p>	<p>Any services commissioned by the Supported Housing Team to meet identified actions and service gaps would be subject to standing orders and tendering regulations and would include checks that any service provider has relevant policies in relation to equality.</p> <p>The contract used for any commissioned service includes clauses relating to equality and the contract monitoring process includes a 'Quality Assessment Framework' tool which has a dedicated</p>
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	<p>section covering equality.</p> <p>In order to deliver some of these actions and identified gaps, other teams or partners may also need to commission or develop services. In these situations, they would use their own processes and practices for assuring the general equality duty is recognised.</p>
<b>What steps will be taken throughout the commissioning cycle to meet the different needs of protected equality groups?</b>	Please see comments above.

### Actions

	What will be done?	By who?	By when?	What will be the outcome?
<b>Actions to lessen negative impact</b>	N/A	N/A	N/A	N/A
<b>Actions to increase positive impact</b>	<p>Any action Plans developed to deliver the strategy will use key questions to specifically identify where there may be an impact on protected groups for each of the actions (e.g. lack of services for male DA victims, low numbers accessing services from the LGBT and BME communities, access to services for those with disabilities).</p> <p>Consideration will also be given</p>	Head of Service	31.03.18	<p>Action plans will identify which actions will impact on which protected groups and will include specific actions around addressing the needs and gaps identified for these groups.</p> <p>Service users and members of the public will be able to access any relevant information in a language or format which they can easily understand.</p>

	to how elementary issues such as language barriers can be overcome for the purposes of consultation or information sharing.			
<b>Actions to develop equality evidence, information and data</b>	CAPITA will continue to be used to capture equality evidence, information and data for all contracted services. Where the Action Plan identifies another party as lead agency, the process for capturing equality evidence, information and data will form part of the monitoring or reporting process for the action.	Head of Service	30.11.17	Equality evidence, information and data will be readily available when required.
<b>Actions to improve equality in procurement / commissioning</b>	N/A	N/A	N/A	N/A
<b>Other relevant actions</b>	Proactively engage with any organisations working with those protected groups which may benefit from delivering particular elements of this strategy.	Head of Service	This will be ongoing across the life of the strategy.	More people from protected groups taking part in consultations. Better understanding of any barriers relating to protected groups. Building sustainable relationships.

### Recommendation

<b>No major change required</b>	<input checked="" type="checkbox"/>	The potential changes that could result from this Strategy are all positive in terms of the impact on both 'protected' and other relevant groups identified.
<b>Adjustments required</b>	<input type="checkbox"/>	



<b>Justification to continue the activity</b>	<input type="checkbox"/>	
<b>Stop the activity</b>	<input type="checkbox"/>	

### **Summary of analysis**

In preparing this report, due consideration has been given to the Borough Council's statutory Equality Duty to eliminate unlawful discrimination, advance equality of opportunity and foster good relations, as set out in Section 149 (1) of the Equality Act 2010.

The equality analysis shows that the Supported Housing Strategy will impact positively on a number of vulnerable people by increasing services to enable more people to have access to services when they need them and will improve access to services for protected equality groups who are currently under-represented across services.

### **Monitoring and review**

<b>Monitoring and review</b>	<b>Review date</b>
There will be an Action Plan for delivering this strategy which will be reviewed quarterly. This Action Plan will include specific outcomes relating to the impact on protected groups which will then be picked up through the quarterly review process.	Quarterly
Although this is a five year strategy it will be reviewed after three years to ensure it is still fit for purpose.	2020
The officer responsible for the monitoring review of the Action plan and Strategy will be the Head of Commissioning.	