

CABINET – 5 December 2013 EXECUTIVE SUMMARY OF AGENDA ITEM 17

Report title: Tendering for rough sleeping services

Wards affected: All

Strategic Director: Netta Meadows/Mike Hennessey

Report Author: Hywel Caddy

RECOMMENDATION for the Mayor's approval:

That the Mayor agrees to BCC tendering for the rough sleeping service contract from October 2014 for a period of three years, subject to confirmation of the budget at Full Council in February 2014. In the event that a longer contract period can be agreed at significantly lower cost then further cabinet approval will be sought.

That the Mayor delegates authority for the contract award to the Service Director for Strategic Housing.

Key background / detail:

a. Purpose of report:

To seek approval to tender, and subsequently award, the rough sleeping service contract, with services to commence in October 2014 for a period of three years subject to confirmation of the budget at Full Council in February 2014.

b. Key details:

1. The city council commissions a range of preventing homelessness services to help people avoid homelessness and maintain their accommodation. Most of these services have recently been reviewed and re-commissioned, delivering more targeted services and a 20% saving in overall contract costs. This is the only service helping rough sleepers to leave the streets and gain independent living skills.
2. Rough sleeping in the city has been increasing since 2010 and has been significantly higher this year. Effective services have helped to limit this increase.
3. Bristol's current rough sleeping service, based at the Compass Centre, Jamaica Street, is funded through the Preventing Homelessness Grant (PHG) from the Department for Communities and Local Government (DCLG). The contract, provided by St Mungos, expires in September 2014.
4. The Compass Centre building is a focal point for other innovative services that work with rough sleepers and vulnerable homeless people including a specialist healthcare service for homeless people (funded by NHS England) and a primary level mental health service (funded by NHS England, BCC H&SC with a small amount of PHG). The service also works effectively with Streetwise for those rough sleepers involved in street-based anti-social behaviour.
5. This service will also link into Fulfilling Lives (Lottery funding): Complex needs.

Some rough sleepers with the most complex needs will also engage with this programme which is intended to make longer term improvements to the way that services are delivered, but this funding cannot be used to replace funding for the rough sleeping service.

6. The government has made a clear commitment to funding local authorities through PHG. It is likely that this commitment will extend beyond the next spending review (after April 2015). This service achieves four of the 10 objectives set out in 'Making every contact count: A joint approach to preventing homelessness' (DCLG 2012).
7. The proposal is for a competitive tender for the new contract, with a contract ceiling in the region of £550,000 per annum for three years, with an option to extend for a further two years. The contract amount for the three years from 1st October 2014 to 30th September 2017 will be in the region of £1,650,000. We are continually seeking more cost effective solutions to commissioned services. As part of the procurement process we will consider a much longer contract, possibly up to 10 years, with suitable break clauses. If this proves to give us much better value for money because of the cost efficiencies a provider can pass on to us through having greater contract certainty, then cabinet approval will be sought for this.

Added Value

8. The new rough sleeping service will achieve added value through widening the service and accessibility to activities at 1 New Street (former day centre for homeless people). The service will also include the continuation of the No Second Night Out work which is currently grant funded separately by the Homelessness Transition Fund, by assimilating this in at no extra cost, this will effectively be reducing the overall cost by 14%. The new service will offer additional value through working with higher levels of people sleeping rough within the current funding level. The service will:
 - Reduce (or limit the increase in) rough sleeping;
 - Improve mental and physical health;
 - Reduce or cease drug and alcohol use;
 - Develop skills, self-esteem, and confidence amongst the client group to increase social inclusion and employability (including a programme provided in partnership with Business in the Community);
 - Work with nationals from central and eastern European EU states to help them off the streets;
 - Incorporate a 'No Second Night Out' model;
 - Clearly link to the Big Lottery funded Fulfilling Lives complex needs services.

**BRISTOL CITY COUNCIL
CABINET
5 December 2013**

REPORT TITLE: Tendering for rough sleeping services

Ward(s) affected by this report: All

Strategic Director: Nick Hooper, Service Director, Strategic Housing

Report author: Hywel Caddy, Senior Commissioning Officer, Strategic Housing

Contact telephone no. & e-mail address: (0117) 3526749
hywel.caddy@bristol.gov.uk

Purpose of the report:

To seek approval to tender, and subsequently award, the rough sleeping service contract, with services to commence in October 2014 for a period of three years subject to confirmation of the budget at Full Council in February 2014.

RECOMMENDATION for the Mayor's approval:

That the Mayor agrees to BCC tendering for the rough sleeping service contract from October 2014 for a period of three years, subject to confirmation of the budget at Full Council in February 2014. In the event that a longer contract period can be agreed at significantly lower cost, then further cabinet approval will be sought.

That the Mayor delegates authority for the contract award to the Service Director for Strategic Housing.

The proposal:

Background

1. The city council commissions a range of preventing homelessness services to help people avoid homelessness and maintain their accommodation. Part of this is the homelessness pathway; services for people who do become homeless to help them recover, address any presenting issues and move towards settled accommodation and prevent future homelessness. Most of these services have recently been reviewed and recommissioned, delivering more targeted services and a 20% saving in overall contract costs.
2. The rough sleeping service, subject of this current report, is funded through a

specific government grant (see para. 6). This is the only service helping rough sleepers to leave the streets, find suitable accommodation and build resilience to reduce the likelihood of future homelessness.

Rough sleeping in Bristol

3. There has been an increase in rough sleeping in Bristol since autumn 2010. The 'hotspot' count found an average of 6 people sleeping rough in 2010, rising to 9 in 2011 and 10 in 2012. Rough sleeping in the city has increased significantly this year, between April and September the average snapshot of people counted sleeping rough on any one night had risen to 19. This upward trend is highly likely to continue as recession and welfare benefit reforms continue to have an impact. The new service will continue to respond flexibly to the needs of different types of rough sleepers e.g. putting more resources into assisting people to find private sector accommodation for those new to the streets if there is a significant increase in demand.
4. Bristol has traditionally been considered alongside Brighton and Manchester as having significant rough sleeping problems outside of London. During the period between autumn 2010 and autumn 2012, rough sleeping in these areas rose by 258% and 286% respectively. The lower increase in Bristol demonstrates the impact and effectiveness of the commissioned rough sleeping services in Bristol, the joined-up partnership approach and the importance of continuing to fund such services, however it is anticipated that pressures will grow due to a number of factors, including welfare benefit changes.

Rough sleeping service

5. Bristol's rough sleeping service, based at the Compass Centre, Jamaica Street, is funded through the Preventing Homelessness Grant (PHG) from the Department for Communities and Local Government (DCLG). This funding is ring fenced for homelessness prevention services and in Bristol has focused on working to reduce rough sleeping. A summary of the PHG equalities impact assessment is appendix 1 to this report. The current contract ends on 30th September 2014, having been extended (the extension was agreed at cabinet on 20th December 2012).
6. The Compass Centre is Bristol's multi-agency centre for assessing, planning and meeting the needs of homeless people in Bristol, with particular focus on rough sleepers, people at risk of rough sleeping and people with complex needs. The centre was completed in May 2008 using Hostels Capital Improvement Grant funding from the DCLG.
7. The Compass Centre building is a focal point for other innovative services that work and engage effectively with rough sleepers and vulnerable homeless people:
 - Compass Health – a specialist healthcare service for homeless people in the Centre, staffed by nurses and GPs (funded by NHS England);
 - The Wellbeing Service - support for homeless and vulnerable people. The service is staffed by a clinical manager, psychologist, and two engagement and assessment workers (funded by NHS Bristol, BCC H&SC with a small amount of PHG).

8. The Wellbeing service will be replaced in November 2014 by a larger Assertive Engagement Service currently being commissioned by the Clinical Commissioning Group as part of the wider mental health commissioning programme. Rough sleepers' services are identified as a key partner for the new service.
9. Safer Bristol delivers services to tackle street-based anti-social behaviour, such as aggressive begging and street drinking, through the Streetwise Project. A proportion of rough sleepers are involved in street-based anti-social behaviour (but most are not). Streetwise is also a key rough sleeping partner.
10. Bristol is one of 15 areas invited by the Big Lottery Fund to develop a Fulfilling Lives Complex Needs partnership proposal. Bristol has provisionally been awarded £10 million over 8 years for this project which will effectively link into the rough sleeping service to achieve effective outcomes for clients with complex needs and a history of rough sleeping. This project will begin working with service users in April 2014. The Fulfilling Lives funding is intended to help services come together (including whole system redesign) to ensure they provide tailored support for people with multiple and complex needs. It cannot be used to replace service delivery costs for a rough sleeping service.

Request to tender for a new service

11. This report requests approval to tender for a rough sleeping service to help rough sleepers move off the streets and into accommodation and support. The service will be primarily based at the Compass Centre, and will also have use of 1 New St, St Judes (former day centre for homeless people) in conjunction with other community services/groups. The proposal is for a competitive tender for the new contract, with a contract ceiling in the region of £550,000 per annum for three years, with an option to extend for a further two years. The contract amount for the three years from 1st October 2014 to 30th September 2017 will be in the region of £1,650,000. We are continually seeking more cost effective solutions to commissioned services. As part of the procurement process we will consider a much longer contract, possibly up to 10 years, with suitable break clauses. If this proves to give us much better value for money because of the cost efficiencies a provider can pass on to us through having greater contract certainty, then cabinet approval will be sought for this.
12. The government has made a clear commitment to funding local authorities through PHG and realises the impact that the recession and welfare benefit changes are having on increasing homelessness. It is likely that this commitment will extend beyond the next spending review (after April 2015).
13. 'Making every contact count: A joint approach to preventing homelessness' was published by the Department for Local Government and Communities (DCLG) in August 2012. One of the main aims is to provide a focus on how services can be managed in a way that prevents all households, regardless of whether they are families, couples, or single people, from reaching a crisis point where they are faced with homelessness. It poses ten challenges for local authorities. The rough sleepers service particularly addresses the following of the ten challenges:
 - Actively work in partnership with voluntary sector and other local partners to address support, education, employment and training needs;

- Adopt a No Second Night Out model (separate funding stream until December 2014);
- Have housing pathways agreed or in development with each key partner and client group that includes appropriate accommodation and support;
- Develop a suitable private rented sector offer for all client groups, including advice and support to both clients and landlords.

Added Value

14. The new rough sleeping service will achieve added value through widening the service and accessibility to activities at 1 New Street (former day centre for homeless people). The service will also include the continuation of the No Second Night Out work which is currently grant funded separately by the Homelessness Transition Fund, by assimilating this in at no extra cost, this will effectively be reducing the overall cost by 14%. The new service will offer additional value through working with higher levels of people sleeping rough within the current funding level. The service will:

- Reduce (or limit the increase in) rough sleeping;
- Improve mental and physical health;
- Reduce or cease drug and alcohol use;
- Develop skills, self-esteem, and confidence amongst the client group to increase social inclusion and employability (including a programme provided in partnership with Business in the Community);
- Work with nationals from central and eastern European EU states to help them off the streets;
- Incorporate a 'No Second Night Out' model;
- Clearly link to the Big Lottery funded Fulfilling Lives complex needs services.

Consultation and scrutiny input:

There has been extensive consultation with service users, stakeholders (both internal and external), providers and equality groups both during the analysis and planning stages of the Lower and Floating Support Review. Consultation on the draft Commissioning Plan for Wraparound services and the rough sleepers service proposed for October 2014 was conducted from November 19th 2012 to February 8th 2013.

a. Internal consultation:

Commissioners and staff from other relevant council teams have been involved in developing and commenting on the draft commissioning plan (i.e. Health and Social Care, Safer Bristol and CYPS). Support and advice has also been provided by:

- Legal Services
- Commissioning and Procurement Service

b. External consultation:

See above

Other options considered:

Option 1- Consider breaking the contract up into the two components of outreach and

engaging with rough sleepers; and building confidence and skills. This was rejected on the basis that:

- There are a number of different complex and interwoven services working with different types of rough sleepers with different needs – explaining how each would interact and having faith that all services would work seamlessly would be a risk in itself against a backdrop of increasing levels of rough sleeping;
- Dividing up the service would increase overheads and diminish resources towards direct service provision when rough sleeping figures are increasing;
- There is a need to work in partnership with other services and assimilate some currently funded services into the contract (Wellbeing Service, Fulfilling Lives Complex Needs Service, Bridge the Gap Service (Business in the Community), Compass Health (Homeless GP Service including access to treatment) and assimilating in a No Second Night Out Service model (currently funded by DCLG through Homeless Link). This requires a need for some strategic coordination rather than creating a number of other smaller services.

Option 2 – Consider providing all the services from one building (the Compass Centre). The building is increasingly busy with the clients from the other different services accessing the building e.g. the Wellbeing service and Compass Health. In order to alleviate this pressure and allow the service to work with rough sleepers with different needs it was decided to incorporate the use and management of 1 New Street into the specification (this building has traditionally been used to accommodate homelessness prevention services and will continue to do so).

Risk management / assessment:

FIGURE 1							
The risks associated with the implementation of the (subject) decision :							
No.	RISK Threat to achievement of the key objectives of the report	INHERENT RISK (Before controls)		RISK CONTROL MEASURES Mitigation (ie controls) and Evaluation (ie effectiveness of mitigation).	CURRENT RISK (After controls)		RISK OWNER
		Impact	Probabilit		Impact	Probabilit	
1	Lack of continuity for service users if current provider is not successful in bidding for rough sleeping service	Low	Med	Going out to the market will increase competition leading to improved service provision. TUPE will ensure there is continuity in workers and service provision.	Low	Low	

FIGURE 2							
The risks associated with <u>not</u> implementing the (subject) decision:							
No.	RISK Threat to achievement of the key objectives of the report	INHERENT RISK (Before controls)		RISK CONTROL MEASURES Mitigation (ie controls) and Evaluation (ie effectiveness of mitigation).	CURRENT RISK (After controls)		RISK OWNER
		Impact	Probability		Impact	Probability	
The current contract would end, leaving Bristol with no directly commissioned service to work with rough sleepers, leading to:							
1	A substantial increase in rough sleeping in the city.	High	High	There are no mitigating measures.	High	High	Hywel Caddy
2	An increase in statutory homeless acceptances towards	High	High	There are no mitigating measures.	High	High	Hywel Caddy

FIGURE 2

The risks associated with not implementing the (subject) decision:

No.	RISK Threat to achievement of the key objectives of the report	INHERENT RISK		RISK CONTROL MEASURES Mitigation (ie controls) and Evaluation (ie effectiveness of mitigation).	CURRENT RISK		RISK OWNER
		(Before controls)			(After controls)		
		Impact	Probability		Impact	Probability	
<p>The current contract would end, leaving Bristol with no directly commissioned service to work with rough sleepers, leading to:</p>							
	this client group rather than a proactive preventative approach to helping them off the streets. This will inevitably lead to a need for more resources and costs on other BCC statutory services.						
3	An increase in criminality associated with drug and alcohol use for this client group resulting in increasing policing, prison and probation costs.	High	High	There are no mitigating measures.	High	High	Hywel Caddy
4	An increase in emergency hospital admissions and A&E presentations in the city, increasing costs to the C.C.G .	High	High	There are no mitigating measures.	High	High	Hywel Caddy
5	An increase in deaths amongst this client group as a result of increasing numbers of rough sleepers with chaotic lifestyles exacerbated by drug and alcohol use.	High	High	There are no mitigating measures.	High	High	Hywel Caddy
6	An increase in deaths of rough sleepers during very cold spells of weather (this service ensures people come in off the streets during prolonged spells of cold weather).	High	High	Co-ordinate this service separately although this will be less effective without intelligence from a rough sleeping team.	Med	Med	Hywel Caddy
7	A potential decrease on the levels of tourism in the city and the benefits to the local economy as rising 'visible' rough sleeping and associated begging and street crime reduces the desirability of Bristol as a tourist destination.	High	High	There are no mitigating measures.	High	High	Hywel Caddy
8	With no commissioned service for rough sleepers, central government may reduce Bristol's allocation of Preventing Homelessness Grant.	High	High	There are no mitigating measures.	High	High	Hywel Caddy
9	There is a knock on effect to other services that operate from the Compass Centre, including Compass Health, the Wellbeing Service and St Mungo's other services, including No Second Night Out. Management of the building is shared, but the Compass Centre contract oversees such work, as well as employing volunteers and reception staff. With these services taken out, access to services and the centre would be severely restricted.	High	High	Other services would have to organise services and access to the building but engagement with rough sleepers would be noticeably curtailed without assertive engagement on the streets	High	High	Hywel Caddy
10	The space, refurbished with money from DCLG's HCIP	Medium	High	None.	Medium	High	Hywel Caddy

FIGURE 2

The risks associated with not implementing the (subject) decision:

No.	RISK Threat to achievement of the key objectives of the report	INHERENT RISK		RISK CONTROL MEASURES Mitigation (ie controls) and Evaluation (ie effectiveness of mitigation).	CURRENT RISK		RISK OWNER
		(Before controls)			(After controls)		
		Impact	Probability		Impact	Probability	
The current contract would end, leaving Bristol with no directly commissioned service to work with rough sleepers, leading to:							
	programme will be underused, and the landlord will lose revenue.						
11	No commissioned service for rough sleepers in Bristol could jeopardise Bristol's ability to attract external funding. An example is the Big Lottery Fulfilling Lives funding for people living complex lives which Bristol is bidding for (up to £10m over five years).	High	Medium	None.	High	Medium	Hywel Caddy

Public sector equality duties:

Before making a decision, section 149 of the Equality Act 2010 requires that each decision-maker considers the need to promote equality for persons with the following “protected characteristics”: age, disability, gender reassignment, pregnancy and maternity, race, religion or belief, sex, sexual orientation. Each decision-maker must, therefore, have due regard to the need to:

i) eliminate discrimination, harassment, victimisation and any other conduct prohibited under the Equality Act 2010.

ii) advance equality of opportunity between persons who share a relevant protected characteristic and those do not share it. This involves having due regard, in particular, to the need to:

- remove or minimise disadvantage suffered by persons who share a relevant protected characteristic.

- take steps to meet the needs of persons who share a relevant protected characteristic that are different from the needs of people who do not share it (in relation to disabled people, this includes, in particular, steps to take account of disabled persons' disabilities);

- encourage persons who share a protected characteristic to participate in public life or in any other activity in which participation by such persons is disproportionately low.

iii) foster good relations between persons who share a relevant protected characteristic and those who do not share it. This involves having due regard, in particular, to the need to tackle prejudice and promote understanding.

In order to ensure that all future providers comply with legal requirements and are committed to promoting equality and diversity, bidders equality policies and practices will be assessed at both PQQ and ITT stage.

A full Screening Equality Impact Assessment has been carried out (appendix 1) and a full Equality Impact Assessment will be developed during the tendering process for a new service to be in place for October 2014. Data analysis for all Wraparound services indicates that there is poor recording of equality data (particularly for disability and sexual orientation) and that equality data is not regularly updated. Data analysis for the Compass

Centre is better recorded than other services. New contractors will be required to update data once a trusting relationship with each client has been established. Emerging equality information, including comparing outcomes for equality groups, will be addressed at regular performance management meetings.

Environmental checklist

There are no significant environmental impacts arising directly from this report, and a full Environmental Checklist is therefore not required in this instance. However, the advice of the Departmental Environment Adviser will be incorporated into the procurement of the new service to ensure that its environmental impact is minimised when it begins in October 2014.

Giles Liddell, Environment Officer, 31/10/13

Resource and legal implications:

a. Financial (revenue) implications:

The revenue consequences arising from the retender of this service is that whilst not generating savings is expected to provide a more efficient and effective service to a growing number of service users (see para 14).

Shahida Nasim, Interim Finance Business Partner, 29/10/13

b. Financial (capital) implications:

There are no capital implications arising from this report.

Shahida Nasim, Interim Finance Business Partner, 9/10/13

c. Legal implications:

Procurement

The services under the proposed contract will be classed as a Part B services for the purposes of the Public Contracts Regulations 2006 and will not be subject to the full European procurement regime. The tendering exercise must however still comply with the general obligations regarding fairness and transparency. By conducting a two stage procedure (pre-qualification questionnaire followed by invitation to tender) the Council will reduce the risk of a procurement challenge.

Kate Fryer, Solicitor 7/10/13

d. Land / property implications:

1 New Street is owned by the City Council. The building is located in the heart of St Judes and has been used as a centre for delivering homelessness prevention services for many years. The intention is to continue to deliver homelessness services from the building but to also allow local community groups to use the building as a resource. We intend that the building will still be available for community use under the new contract. This is an appropriate operational and community use for this asset on a continuing basis, subject to appropriate contractual arrangements being put in place.

Robert Orrett, Service Director – Property 21/11/13

e. Human resources implications:

There are no HR implications contained in this report other than the requirement to commit internal resources to manage the tendering process.

Sandra Farquharson, HR People Partner, 25/10/13

Appendices:

Appendix 1 – Equalities Impact Assessment

Access to information (background papers):

Further information about preventing homelessness commissioning can be found at:

<http://www.bristol.gov.uk/page/housing/commissioning-homelessness-prevention-support-services-bristol>

Making Every Contact Count – <https://www.gov.uk/government/publications/making-every-contact-count-a-joint-approach-to-preventing-homelessness>



Bristol City Council Equality Impact Assessment Form

Name of policy, project, service, contract, review or strategy being assessed (from now on called 'the proposal') – Preventing Homelessness Grant commissioning plan.

Directorate and Service: N&CD, Homelessness Grant funded 'Wraparound services.

Lead officer (author of the proposal): Hywel Caddy, Senior Commissioning Officer

Additional people completing the form (including job title):

Aric Lacoste (Commissioning Project Officer)

Start date for EqIA: 12 October 2012

Estimated completion date: 20 March 2013.

The information contained below is a summary of the full assessment document and covers the following Steps:

Step 3: details of the current position

Step 4: details of the consultation conducted

Step 5: details of the possible impacts and actions to address these

Step 7: details of monitoring arrangements to measure actual impacts

The full Wraparound EqIA can be downloaded from the Council's website at:

http://www.bristol.gov.uk/sites/default/files/documents/housing/homelessness_and_prevention/Final%20Equalities%20Impact%20Assessment%2020.03.13.pdf

Step 3

Current position: What information and data by equalities community do you have on service uptake, service satisfaction, service outcomes, or your workforce (if relevant)?

Please see below a summary of key equalities information. Demographic information is collected by service providers. This shows that PHG services have a very strong background in engaging service users from equalities groups. For instance the proportion of service users from BME backgrounds is above the levels in the population in Bristol as a whole, and a significant percent of users have mental health needs, which is essentially what one would expect from services that are intended to support vulnerable people. Additionally among Female service users 37% are fleeing domestic abuse and violence.

ETHNICITY	No.	%
English/Welsh/Scottish/Northern Irish/British	1599	73.0%
African (non-Somali)	125	5.7%
Eastern European	92	4.2%
Somali	73	3.3%
White and Black Caribbean	49	2.2%

ETHNICITY	No.	%
Caribbean	49	2.2%
Irish	27	1.2%
Any other Black / African / Caribbean background	22	1.0%
Preferred not to say	22	1.0%
Any other White background	20	0.9%
Any other ethnic group	18	0.8%
Pakistani	17	0.8%
White and Black African	10	0.5%
Indian	10	0.5%
Any other Mixed/multiple ethnic background	9	0.4%
Bangladeshi	9	0.4%
Iranian	7	0.3%
Chinese	6	0.3%
Iraqi	5	0.2%
Gypsy (including English, Scottish and Roma Gypsy) or Irish Traveller	4	0.2%
Any other Asian background	4	0.2%
Kurdish	4	0.2%
Turkish	4	0.2%
White and Asian	2	0.1%
Arab	2	0.1%
Total:	2189	

Health and Wellbeing	2011 - 2012	
	No.	%
Mental and emotional distress	578	63.8%
Physical impairment	135	14.9%
Learning difficulties	80	8.8%
Specific learning difficulties like dyslexia	48	5.3%
Preferred not to say	42	4.6%
Visual impairment	9	1.0%
A health condition e.g. HIV, multiple sclerosis, cancer	8	0.9%
Hearing impairment	6	0.7%
Total:	906	

nb The figure of 906 disabled people represents nearly 40% of the total of service users funded through preventing homelessness grant.

GENDER	No.	%	Bristol % (ONS 2009)
Male	1656	72%	50%
Female	642	28%	50%
Transgender	1	0%	0%
Preferred not to say	1	0%	0%
Total:	2300		

nb the gender information in the table above includes 239 Females from Next Link (women only service). If this data is not included, the % of males accessing the services is noticeably higher (80%):

Male	1656	80%
Female	403	20%
Total:	2059	

3.1 Summarise how equalities communities are currently benefiting from your service* here (& add an electronic link to the information if possible).

See above.

3.2 Then compare to the relevant benchmark (eg. the % of people from each community who use your services* with the % of people within the relevant equalities community who live in your local area or in the city of Bristol).

DISABLED PEOPLE

Amongst PHG service users who indicate having a Disability (nearly 40% of all service users) the top three identified were:

- Mental and emotional distress - 63.8%
- Physical impairment - 14.9%
- Learning difficulties - 8.8%

Disabled people are over represented amongst service users compared to the Bristol population of 18%.

ETHNICITY

The proportion of BME people in PHG services is 20%, exceeding the Bristol population as a whole (13.5%).

The higher level of BME people using these services reflects wider national homelessness statistics. The P1E Homelessness statistics (submitted by local authorities to central government on homeless households that they accept a Part VII duty towards) for 2011-12 show that 29% are BME households.

In Bristol the P1E homelessness statistics for the same period show that 31% of households where a duty was accepted were BME households. This reflects findings in other studies on homelessness that BME households do not tend to access homelessness services until their situation reaches crisis point. All PHG funded services need to ensure that

they are accessible to BME communities and effective in preventing homelessness before their situation reaches crisis point.

GENDER

The proportion of men in PHG services is 80% although when taking into account women seeking shelter from domestic violence and abuse (a women only service), the proportion of males drops to 72%. The majority of the PHG funding provides services to rough sleepers, the majority of whom using rough sleepers services (84%) are men.

It is also important to note that 37% of all female service users are experiencing domestic violence and abuse.

3.3 Evaluate what the data in 3.1 & 3.2 tells you about how the current position affects people from equalities communities (see Guidance for further information and examples).

PHG services attract a representative cross-section of the community. This is the pattern of demographics that one would want and expect to see in services provided to vulnerable people. There is not adequate data available on these types of services (other than ethnicity) to compare the take up of these services with national figures.

Step 4

Ensure adequate consultation is carried out on the proposal and that all relevant information is considered and included in the EqlA

Adequate consultation with service users, providers and other stakeholders is critical to meeting equalities duties as well as meeting the City Council's commitments under the Compact with the voluntary sector – as all PHG services are delivered by the 3rd sector.

Consultation has taken place at a number of levels (for housing support services):

- Where services are being tendered, a commissioning plan is published for consultation.
- Where a current service is being reviewed, the views of service users are captured as an embedded part of the Service Review process, involving client interviews and questionnaires. This allows a rich understanding of clients' experience of each service, and how quality can be improved.
- A number of consultation exercises have been undertaken with users of a range of similar services (e.g. homelessness, mental health) at an early stage, to inform the subsequent development of commissioning plans. This has directly influenced the commissioning of high support homelessness services, lower and floating support services and this draft commissioning plan.

Consultation on the draft commissioning plan will begin on the 19th November 2012 and ended on the 18th February 2013.

4.1 Describe any consultations that have taken place on the proposal. Please include information on when you consulted, how many people attended, and what each equalities community had to say (& provide a web link to the detailed consultation if possible).

The Lower and Floating Support Review draft Commissioning Plan was published for a consultation period from 15th June to 10th August 2012. We also asked people about specific questions about 'Wraparound' services and gaps in services. Stakeholders were invited to comment on the draft plan and purchasing proposals via email, post, through responding to an electronic questionnaire and the range of stakeholder events and focus groups set out below.

Consultation Analysis of feedback received, along with a You Said, We Did summary of the council's response to the key issues raised in the consultation, are published on the council's webpages.

<http://www.bristol.gov.uk/page/housing/commissioning-homelessness-prevention-support-services-bristol>

Consultees	Where/how	When
Women users of drug & alcohol services	UFO women's group – Brunswick Square	19.6.12
Young parents at the Meriton School	Meriton School	20.6.12
Young parent clients	Lanercost and Wigton supported accommodation for young parents	25.6.12
Professional stakeholders	The Pavilion, Harbourside	25.6.12
Women service users	Phoenix Place	27.6.12
Service users	Focus group - Barton Hill Settlement	2.7.12
Young parents practitioners	Meeting in council offices	10.7.12
Service users	Focus group - Bristol Youth Hostel	16.7.12
LGB young people	Focus group - Out Loud	17.7.12
Young service users	Focus group - 1625	19.7.12
Mental health service users	Focus group - Second Step	24.7.12
Professional stakeholders	Stakeholder event - Old Council House	25.7.12
Professional stakeholders	Stakeholder event – Old Council House	1.8.12

The information from these consultation events helped to inform the Needs analysis and the draft commissioning plan for the 'wraparound Review' (funded through Preventing Homelessness Grant).

Consultation on the 'Wraparound Review' draft commissioning plan begins on the 16th November. Stakeholders will be invited to comment on the draft plan and purchasing proposals via email, post, through responding to an electronic questionnaire. We are also arranging a range of generic stakeholder events and focus groups with a particular emphasis on consulting with young people, LGBT people, BME Groups, families and disabled people.

Consultees	Where/how	When
Stakeholder Event	Old Council Hse	19.11.12
Provider Event	Old Council Hse	4.12.12
Service User Event	Barton Hill Settlement	26.11.12
Shelter (family service)	Shelter – focus group	16.11.12
Users Feedback Organisation (UFO) Women's Group	BDP Brunswick Sq – focus group	20.11.12
1625 Independent People Service User Group	1625 Independent People – focus group	22.11.12
UFO Mushwera (BME Group)	Barton Hill Settlement – focus group	11.12.12
British Red Cross	Red Cross offices – focus group	14.1.13
Business in the Community - Mentors	BITC offices – focus group	29.1.13
Compass Centre service users	Compass Centre	4.2.13
Freedom Youth	Focus Group, Terrence Higgins Trust	12.2.13

Consultees	Where/how	When
Second Step S Users	Second Step offices – focus group	12.2.13

4.2 Please include when and how the outcome of the consultation was fed back to the people whom you consulted.

We will load a copy of the final 'You Said, We Did' document onto the BCC Website and send out this document to all the organisations that we have consulted with.

Step 5

Giving due regard to the impact of your proposal on equalities communities.

Possible Impact on Equalities Communities, whether or not you will address the impact and the Actions to be included in the proposal

AGE

PHG services target all ages, although the majority are aged 25 – 49 years:

Age	%
16-17	0.4%
18-21	10.9%
22-24	15.9%
25-49	62.3%
50-64	10.2%
65+	0.3%

27% of all service users are aged between 16-24, this is significantly higher than the general population in Bristol recorded in the 2011 census (15% aged 15-24). This reflects the impact of recession on young people and the draft commissioning plan seeks to maintain or increase services to prevent homelessness for this age group.

The proposals in the draft commissioning plan considered linking into and potentially funding homelessness services provided through the Youth Links Commissioning process. However, the service that is now funded through Youth Links is considered to have enough capacity without other funding being made available from PHG.

There was also a proposal to extend ETE services to young people to increase access to mainstream employment opportunities. The need for services that assist young people into work was raised in the lower and floating support review consultation. However, due to the cuts that have to be made by Bristol City Council in 2013-14 (£35 million) it has not been possible to find additional funding for this service.

We will share the information that came back from service users over what this service should look like and how it can be made more accessible to young people with Business in the Community (BITC). BITC provide similar services and the aim is that BITC can make their services that link people into training and employment more accessible for this client group. Nationally, BITC are working with organisations that will be tailoring training and employment opportunities to young people.

There was feedback in the consultation that there are likely to be more young people and older men who could potentially end up rough sleeping. The specification for this service will ensure that the service works with all service users and regularly monitors

the equalities profiles of rough sleepers in the city in order to make services accessible to these groups and achieve effective outcomes for them in assisting them off the streets.

Providing young people only services amounts to direct discrimination on the grounds of age. If and when the service-related age discrimination provisions of the Equality Act 2010 come into force, we believe that the direct discrimination will continue to be lawful as it is a proportionate means of achieving a legitimate aim (i.e. to keep young people safe and meet their specific needs).

Initial consultation results from lower and floating support services young people were generally in agreement that they wanted services that were specifically for young people. This bears out other research on making services accessible to young people.

We must acknowledge that even though we are not able to create or fund specific services for young people, we will use feedback from all consultations with young people to ensure that grant funded and contracted organisations tailor provision to enable access to their services for young people.

There are lower levels of people in the 50+ category than the general population in Bristol recorded in the 2011 census (28% aged 50+). This is likely to be that the majority of services are for rough sleepers who tend to have a younger age profile and shorter life expectancy. This was scrutinised during the consultation.

We asked young people where these services should be delivered from in this consultation. There was general agreement that rough sleeping services should be better promoted so that young people are aware of them and that some young people are intimidated by the Compass Centre where they are delivered from.

DISABILITY

Disabled people are significant users of PHG services, with significant numbers citing mental and emotional stress. It is intended that services will continue to be provided for this vulnerable client group in the final commissioning plan.

During the consultation we consulted with disabled people to find out if the services are accessible and if the services proposed provide positive outcomes for them.

Specifications for services will ensure that services are accessible to this client group and that they (particularly rough sleeping services) are effectively linked into physical and mental health services in the city.

ETHNICITY

There are no PHG services commissioned for specific ethnic groups – as most services have a proven ability to engage a broad cross-section of the Bristol community.

The success of PHG services in attracting service users from a diverse range of ethnic groups will not be affected by these proposals.

Providers of PHG funded services will be required to collect and analyse data on use of the service by BME service users. There is also a need to ensure that homelessness prevention services are adjusted and accessible to BME communities in order to prevent the high levels of BME household that experience homelessness crisis.

BME people were asked about accessibility and service outcomes during the consultation. Some of the main points were:

- Recognise needs of refugees and new communities

- Promote services in an accessible way to BME communities (taking into account language, culture etc)
- There should be BME mentors to reflect the client group they will be working with
- Young BME men can feel intimidated in accessing services from the Compass Centre.

This feedback will be reflected in grant agreements and specifications for organisations to ensure services and venues are accessible to people from BME communities.

GENDER

See Section Three for demographic information, which show that the proportion of women in PHG services is 19.6% but when women seeking seeking shelter from domestic abuse and violence they represent over 35% of all female service users. There is an intention to continue to provide services that assist women fleeing domestic violence and abuse.

This service links into existing safe house beds. The number of safe house beds in Bristol has been maintained despite reductions in bed spaces to other supporting people funded services.

The draft commissioning plan proposed to make available existing funding to the Domestic Violence and Abuse (DVA) Joint Commissioning Group to provide more effective services commissioned through the new DVA strategy.

We consulted on the effectiveness of current services during the consultation and will forward these findings to safer Bristol so that they can be incorporated in their commissioned services.

PREGNANCY & MATERNITY

The draft commissioning plan proposed to extend ETE services to families in view of the impact of welfare benefit changes and the need for parents to have the confidence and skills to find employment when their children reach school age.

We consulted with families to consider how best to deliver this service so that it is accessible to them around school hours, childcare etc.

However, due to the cuts that have to be made by Bristol City Council in 2013-14 (£35 million) it has not been possible to find additional funding for this service.

This feedback will be shared with BITC to ensure that grant funded services that help families into training and employment are accessible to them.

RELIGION AND BELIEF

PHG service providers capture Religion and belief and no future PHG services will be targeted at these groups but providers will be required to provide detailed data to maintain the ability to monitor service users and adjust provision as appropriate.

SEXUAL ORIENTATION

PHG service providers capture Sexual orientation and no future PHG services will be targeted specifically at these groups but providers will be required to provide detailed data to maintain the ability to monitor service users and adjust provision as appropriate.

It is acknowledged that LGBT young people are more at risk of homelessness as a result of being asked to leave by family, friends and relatives. Also, LGBT young people may be likely to be at risk of harassment through housing benefit only paying for a room in a shared house for people who have not been in supported housing or a hostel for three months.

During the consultation we consulted with LGBT young people to ask about the proposed mediation service, the ETE service and the homelessness prevention service in schools and how the services can be provided to ensure that they are comfortable in accessing them.

The consultation raised the issue that services should positively promote themselves to LGBT people so that they feel comfortable in accessing services.

This feedback will be reflected in grant agreements and specifications for organisations to ensure services and venues are accessible to LGB people.

TRANSGENDER

PHG service providers capture Transgender data and no future PHG services will be targeted at this group but providers will be required to provide detailed data to maintain the ability to monitor service users and adjust provision as appropriate.

Step 7

Monitoring arrangements

7.1 If your proposal is agreed, how do you plan to measure whether it has achieved its aims as described in 2.1. Please include how you will ensure you measure its actual impact on equalities communities?

The success of these proposals will be measured in the following ways:

- Number of vulnerable people supported.
- Number of vulnerable people referred to other services.
- Changes to the demographic profile of PHG service users.
- Changes to the outcomes achieved by PHG services.
- Changes to the performance delivered by PHG services.
- The impact of these services in offsetting funding reductions in housing support services.
- The satisfaction of service users in the service and outcomes they receive cross referenced against Equalities communities