

Bristol City Council Equality Impact Assessment Form

Name of proposal	Supporting People Service
Directorate and Service Area	People – Adults - Strategic Commissioning
Name of Lead Officer	Netta Meadows

Step 1: What is the proposal?

1.1 What is the proposal?

The People Directorate of the City Council spends £7.2m on housing-related and preventative support to vulnerable people (formally called ‘Supporting People’).

These services are not statutory, however some of them are very immediate to statutory eligible care needs (particularly accommodation-related ‘supported living’ schemes for services users with learning disabilities, which cost £3m pa). The withdrawal of these services would immediately lead to service users being referred for statutory care as the service users are at a level of complexity that would make them eligible for support.

Reductions are conceivable in the remaining services, which predominantly comprise:

- Short term floating support, to clients with mental health needs, older people, HIV, physical/sensory disability or generic needs.
- Sheltered housing and alarms for older people.
- There is also a separate mental health service commissioned to support statutory care (£394k) where reductions could be achieved if conducted at the same time. This is not former Supporting People money but the services provide a similar function

Most services are provided by voluntary and community organisations, though some are provided in-house by City Council services.

Contracts – where required – had extensions applied extending the services until 30th Sept 2017. Further extensions can be applied where necessary.

Agreed negotiated changes can be made within this period. Variations with notice can be made with 28 days notice. All contracts need 6 months notice for termination.

(Please note: These proposals exclude the Home Improvement Agency, where a framework contract is in place to September 2018, and a commissioning plan is already being developed to continue to procure jointly this with other Local Authorities following a Health and Wellbeing Board decision in 2016.

Description of proposal:

The reductions to each service are subject to public consultation. The level of reduction to each service will not be agreed until after the consultation based on feedback from that and officer and member recommendation.

Type of saving:

Reduction in provision to vulnerable people, by targeting support only where support is most likely to reduce the need for statutory care.

Step 2: What information do we have?**2.1 What data or evidence is there which tells us who is, or could be affected?**

Bristol City Council completes a Joint Strategic Needs Assessment for the whole city on an annual basis. The Joint Strategic Needs Assessment is an on-going process to identify the current and future health and wellbeing needs of the local Bristol population. The Joint Strategic Needs Assessment uses a range of sources to compile its statistics, including the Office of National Statistics and local data such as information obtained from Public Health colleagues within the city.

Bristol is a rapidly growing city. Bristol ranks as one of the healthiest of the Core Cities; however the overall citywide picture can hide the difference in experiences for different areas and population groups within the city. There are areas of Bristol that are very affluent and areas that rank amongst the most deprived in the country. Where you live in Bristol can be seen as one of the biggest factors affecting your health and wellbeing. The services within this proposal will affect service users across the city.

Providers of these services submit equalities information about each service user that enters their service. This information is submitted to the University of St Andrews, Centre for Housing Research. This information is based on the information given by service users & collated and compiled into an online database. Reports generated from this database, contain the number and percentage of service users from different equalities groups who access these services. The reports generated from the St Andrews online database, do not contain information about all service users within the service at that time. Service users also have the right to refuse to provide the information. The information generated from the report will therefore not be completely representative.

Advice Services (Welfare Rights and Money Advice Service - WRAMAS)

There are currently 134 service users.

Service users in this group have a high representation of people with mental health issues. Further analysis of data is needed to establish whether any other groups with protected characteristics are over represented. However it is highly likely that there is a high representation of poorer citizens in this group due to the nature of the service.

Supported Living (Learning Disabilities / Mental Health)

There are currently 340 service users.

Service users in this group will either have Learning Disabilities or Mental Health issues – or both. There is no indication at this stage that any other group with a protected characteristic is over represented.

Long Term Floating Support (Learning Disabilities / Mental Health)

There are currently 72 service users..

Service users in this group will either have Learning Disabilities or Mental Health issues – or both. There is no indication at this stage that any other group with a protected characteristic is over represented.

Short Term Mental Health Floating Support

There are currently 260 service users.

Service users in this group will have Mental Health issues. There is no indication at this stage that any other group with a protected characteristic is over represented.

Physical and Sensory Impairment Supported Housing

There are currently 8 service users.

Service users in this group will have physical or mental disability. The ratio of men to women is on average 1:2 . Users are normally of working age. There is no indication at this stage that any other group with a protected characteristic is over represented.

Sheltered Housing / Alarm only Services

There are currently 1593 service users.

Service users in this group will have Mental Health issues. There is no indication at this stage that any other group with a protected characteristic is over represented.

Older People floating support

There are currently 156 service users.

Service users in this group will all be older people and many are likely to have physical and mental impairments. There is no indication at this stage that any other group with a protected characteristic is over represented.

One of the services within the proposal is specifically for BME service users, therefore service users within this service will be disproportionately affected. Despite being a small service, it is important to recognise the impact this proposal may have on BME service users and any mitigation to take this into account.

Floating Support Service for people with HIV

There are currently 24 service users.

Service users in this group are predominantly African nationalities, recent migrants to the UK, have HIV and at risk of homelessness. There is no indication at this stage that any other group with a protected characteristic is over represented but it is important to recognise the impact this proposal may have on the BME service users and any mitigation to take this into account.

Physical and Sensory Impairment Floating Support

There are currently 55 service users.

Service users in this group will have a physical or sensory impairment. There is no indication at this stage that any other group with a protected characteristic is over represented.

Generic Floating Support Service

There are currently 280 service users.

On average over 25% of this group have a mental illness and or physical disability and approx 20% have a learning disability. There is no indication at this stage that any other (17% recorded as BME with the Bristol average being 16%) group with a protected characteristic is over represented although it is noted that religion and sexual orientation is poorly recorded.

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This is an open service and service user numbers are not available.

Service users in this group have mental health issues. There is no indication at this stage that any other group with a protected characteristic is over represented.

2.2 Who is missing? Are there any gaps in the data?

It is recognised that the information on certain protected characteristics is limited. Providers of these services submit equalities information about each service user that enters their service. This information is submitted to the University of St Andrews, Centre for Housing Research. This information is based on the information given by service users & collated and compiled into an online database. Reports generated from this database, contain the number and percentage of service users from different equalities groups who access these services. Service users have the right to refuse to provide the information. The information generated from the report will therefore not be completely representative.

2.3 How have we involved, or will we involve, communities and groups that could be affected?

Once proposals have been finalised, commissioning will consult with equalities groups, particularly those that advocate for disability groups, service users, carers and stakeholders. A project team is currently making plans for a consultation to take place.

Step 3: Who might the proposal impact?

3.1 Does the proposal have any potentially adverse impacts on people with protected characteristics?

Service Users

Across all the streams of work almost all groups with protected characteristics may be affected in some way with a particular emphasis on older people, people with learning disabilities and people with mental health issues. Most people accessing the floating support service need help accessing benefits and losing this support is likely to lead to an increased risk of homelessness among this group.

Staff

The bulk of staff employed to deliver these services are employed by external agencies. Staffing figures and characteristics are not regularly reporting through performance monitoring. However the Sensory Support Service is a council team and many of the members have a sensory impairment. A reduction in this service could result in redundancies for these staff.

When the proposed reductions were announced, service users and providers responded raising the following issues. These will all be taken into account and explored in the public consultation :

a) Reductions to sensory support service

- Deaf community already risk isolation since the closure of the deaf club – reduction in sensory support service will increase this
- Sensory support service provides highly skilled communication facilities the only place deaf service users can go to for help where they can communicate in their 1st language. Many of the staff in the service are deaf and so they provide a trusted service to the deaf community – many of whom have a low level of education.
- Using the council web site is not an option for many people due to the heavy use of english which is not easily understandable to some deaf citizens
- Attending the Temple St customer service point is not an easy option for many deaf citizens due to the delays and difficulties in booking a sign language interpreter
- Visually impaired people rely on the Sensory Support Service to support their independent living.
- The Sensory Support Service are well informed about the specifics of benefits from sensory impaired citizens and so can support them with form completion and benefit challenges.
- The Sensory Support Service often provides early intervention for deaf

citizens who often have low educational attainment and have difficulty understanding written English. A reduction in service will result in deaf citizens suffering needless worry and stress when they cannot obtain support to get clarification on a query and so impact upon their wellbeing .

- The reduction in the Sensory Support Service will increase costs for the council as a member of staff and a sign language interpreter will be needed for every meeting where a deaf person has a query – which may just be a simple question about a letter that they have received. Basic sign language skills to level 1 or 2 are not sufficient for true communication and often lead to misunderstandings.

b) Long Term Floating Support (Statement from SiLS)

We have already been experiencing cuts from funding for some years. No more efficiency to be gained. This cut will mean no further housing services can be provided leaving adults with learning disabilities and/ or mental health issues vulnerable to homelessness or loss of independence. This will present further pressure back on the council in the future in supporting these citizens.

c) HIV support Services

- These proposals and the accompanying EqlA were not prepared with consultation with the community and therefore don't contain all the necessary information of the effects.

3.2 Can these impacts be mitigated or justified? If so, how?

Service users will be directed to other options for services where this is available and appropriate such as the service users currently with the Physical and Sensory and HIV floating support services who can use other less specialised services.

Where appropriate the impact will be mitigated by offering the option of self-funding to keep the service (such as the alarm service) and making better use of assistive technology. This is unlikely to provide a total mitigation

Where a charge is offered service users with higher support needs will be assessed for a generic floating support service.

Part of the consultation with service providers will cover helping them to explore other partnerships and opportunities to deliver the service despite the reduced funding from the council.

In addition the consultation will look at whether the reductions in funding are being applied in the most appropriate way.

The consultation will take place via :

- Individual meetings with some providers – or group meetings with providers commissioned for the same service
- An on line survey – advertised to service users via providers and other 3rd sector outlets who have known contact with service users
- Meetings with service users where most appropriate
- Meetings with other stakeholders

3.3 Does the proposal create any benefits for people with protected characteristics?

None identified

3.4 Can they be maximised? If so, how?

N/A

Step 4: So what?

4.1 How has the equality impact assessment informed or changed the proposal?

The original proposal had already defined how the budget reductions would be applied across the services. This will now be a matter for consultation in order to ensure that the effect of the reductions on the most vulnerable is minimised as much as possible .

4.2 What actions have been identified going forward?

- A consultation will be taking place to assess how best to implement the reductions. For example we may look at engaging with providers about how they can focus and prioritise services on the most vulnerable.
- Actions to mitigate the impact will be looked for at each stage.
- It has been noted that an equalities impact assessment addresses issues relating to protected characteristics but overlooks the issue of class or socio-economic groups. These reductions are likely to have more impact on lower social economic groups and this impact will be addressed in the consultation.
- For many of the service users an increased use of assistive technology will help to mitigate the impacts. There is currently an assistive technology project in place which is promoting the increased understanding and deployment of this. However the lead officer on this project is about to leave the business and no authority has been given to recruit a replacement which could reduce the benefits in this area. The impact of this loss will be monitored and other solutions looked for to continue this development.
- Particular solutions will need to be identified for service users with sensory impairment – particularly the deaf and deaf/blind where communication in english (written or spoken) can present a barrier . Solutions will be looked for as part of the consultation.
- All providers have been accredited to provide housing related support services. The accreditation process ensures that all providers have an up to date equalities policy which is reviewed on a minimum of every 3 years or more frequently were appropriate (i.e. changes to legislation).
- All services have to meet the minimum standards of the Supporting People Quality Assessment Framework (QAF) as part of their contract. Providers have to review & submit their QAF on a regular basis and/ or when they are under review by the Quality & Review Team. Within this QAF, the providers have to confirm & evidence that their equalities policy is up to date & that all their staff cover equalities & diversity within both

their induction & training & this is kept up to date.

- The impact of the proposals will be measured throughout the decommissioning process. Any actions will be conducted in partnership with relevant internal departments, providers and relevant agencies to ensure that those service users of protected characteristics affected are provided with support from a relevant service. Not all service users will be mitigated from the impact of this proposal due to eligibility for services.