



**APPENDIX 1**  
**Equality Impact Assessment**

**Rochdale Councils Homelessness Strategy 2016-2019 (Draft)**

Function	Strategy	Policy	Project	Other, please specify below
	<b>X</b>			

<b>Service:</b> Neighbourhoods	<b>Section:</b> Strategic Housing Services
<b>Responsible Officer:</b> Peter Maynard Housing Services Manager	<b>Name of function/strategy/ policy/ project assessed:</b> Rochdale Councils Homelessness Strategy
<b>Date of Assessment:</b> 14 <sup>th</sup> July 2016	
<b>Officers Involved:</b> Ian Jolley Graham Pilling Peter Maynard	

**1.What is the purpose of the function/strategy/policy/project assessed?**

*(Briefly describe the aims, objectives and purpose of the function/strategy/policy/project)*

Rochdale Borough Councils Homelessness Strategy 2016-2019 sets out how the council will seek to support households at risk of homelessness, to prevent homelessness and how it will support households that become homeless. This is based upon a refresh of the current strategy and a review of homelessness in the Borough.

It aims to identify key priorities and outcomes and mitigate future demand. The strategy ensures that objectives and outcomes are aligned to and support wider corporate aims of improving health and wellbeing; preventing homelessness; encouraging independence.

**2.Who are the key stakeholders?**

Elected members

Service providers

Statutory services

Health services

GMP

The voluntary sector

The wider community

Housing Providers

Private landlords and Lettings Agents

### **3. What is the scope of this equality impact assessment? That is, what is included in this assessment.**

Homelessness can affect any household in the Borough and may occur in any district.

The Homelessness Strategy Group has undertaken a strategic review of homelessness across the Borough. It has taken into account and has taken into account a range of data that is available and has looked in particular at

- Excluded groups
- Families, single homeless people and childless couples.
- People with complex dependencies
- Groups at higher risk of homelessness
- Causes of homelessness
- Current strategies and policies that support prevention
- Current services and support available to homeless households
- How this strategy links with broader corporate aims and where there is overlap between other strategies and corporate aims.
- It has identifies emerging and potential challenges
- It has made recommendations and has a delivery plan that will help mitigate against future homelessness.

### **4. Which needs is this function/strategy/ policy/ project designed to meet?**

The strategy ensures that the Council has identified key needs and challenges and a delivery plan that sets out how it intends to support households at risk of homelessness.

The aims and objectives within it are designed to:

- address the causes and prevent homelessness where possible,
- deal effectively with those the Council has a duty to accommodate,
- provide sufficient temporary accommodation for those who are homeless
- ensure that appropriate support is available to prevent repeat homelessness
- to contribute to wider corporate aims to enable people to improve their health and wellbeing
- to support people to contribute to the wider community.

**5.Has a needs analysis been undertaken?**

A strategic review of homelessness in the Borough was undertaken by a Homelessness Strategy Group. This is a task and finish group that included representatives of service providers, statutory services and stakeholders and was overseen and directed by the Joint Homelessness Strategy Board.

In addition, the Group had taken into account broader corporate aims and strategies including the Mental Health and Wellbeing Strategy, Public Health Plan 2016/17 and the Corporate Plan.

The review undertaken has followed the requirements of the Housing Act 2002 to consider

- a) the current levels, and likely future levels, of homelessness  
in the borough;
- b) how effective agencies are in preventing homelessness
- c) whether is there enough temporary accommodation
- d) whether arrangements are in place for homeless people to  
access settled housing
- e) whether support and advice services are effective
- f) what resources are available to carry out these activities

**6.Who is affected by this function/strategy/ policy/ project?**

All households that are potentially vulnerable to or at risk of homelessness including those in priority groups such as young people, people leaving institutions and older people.

The wider community and potential prosperity of the Borough can be adversely affected by the impact of homelessness on services and communities.

**7. Who has been involved in the review or development of this function/strategy/ policy/ project and who has been consulted? State your consultation/involvement methodology.**

The Joint Homelessness Board includes representatives from key stakeholders and partner agencies including service providers and representatives of service users.

Progress and development of the strategic review has been reported regularly to the Joint Board and the Borough of Rochdale Homelessness Action and Information Network. (BRHAIN). The Joint Board is overseen by the portfolio holder for Housing.

A task and finish group facilitated by the Homelessness Manager that included representatives from stakeholders and the wider BRHAIN partnership undertook the review.

**Consultation/Involvement methodology**

The recently completed strategic review of homelessness involved consultation with a wide range of statutory services, voluntary sector organisations and representatives of the service users. The draft strategy has been shared with colleagues from Bolton Council who have acted as 'critical friend'.

It is proposed that Strategic Housing will consult with the same services, organisations and groups including

Stakeholders, service providers, elected members and the wider community. We will also undertake public consultation through the Council's web site. Feedback will be sought from all members, the Welfare Reform Board, and Overview and Scrutiny Committee.

**8. What data have you considered for this assessment and have any gaps in the data been identified. What action will be taken to close any data gaps?**

**Data includes**

- Statutory information collected and reported to DCLG as part of P1E returns
- Shared information about anonymised individuals
- Adult care performance monitoring
- The mental Health and Wellbeing Commissioning Strategy 2014-2017
- Tackling homelessness and exclusion: Understanding complex lives JRT

- Impact of HB Reform in Rochdale Brendan Nevin & Philip Leather
- Joint Health and Wellbeing Strategy 2012-2015
- Rochdale Substance Misuse Needs Assessment 2015/16
- Integrated Early Help Strategy 2013-2016
- Welfare Reform – impacts and responses. K Mitchell, D Cummins, C Tostevin.
- LGBT Youth Homelessness. Albert Kennedy Trust.
- Homelessness Strategy Survey 2015

Although we have good information in relation to health and welfare needs of vulnerable households the strategy has identified that we need to get a better understanding of the health needs of homeless people in the Borough. The strategy commits partner agencies to undertaking a Health Assessment.

**9. Are there any other documents or strategies which are linked to this assessment? If so, please include hyperlinks to these documents below, where available.**

**10. What impact will this function/strategy/policy/project have on all the protected groups? This includes both positive and potentially negative impacts.**

#### **Race Equality**

The Borough currently experiences a relatively high demand for assistance from diverse communities largely due to the number of households that acquire leave to remain while resident in the Borough. While many of these households require only short term help the strategy recognises the need to ensure that services are accessible and available to all households.

All services currently commissioned or delivered through partnership arrangements provide support for a diverse range of households including established communities and new and emerging communities in the Borough including Refugee and Asylum households and Migrant workers.

## Disabled People

Following consultation it has been agreed that as part of the review of health needs of homeless people in the Borough that will be undertaken across the partnership, we will include a broader assessment to reflect issues relating to disabilities. We will use the broadest definition to enable the assessment to include issues such as Asperger's.

We are aware that some people that experience homelessness are often excluded from main stream and generic services due to their challenging behaviours and the strategy recognises the need for access to assistance to be inclusive.

The homelessness legislation is designed to ensure that any household containing a person who has a significant physical disability or mental health problem is considered to be in a priority need category and provided with accommodation.

In terms of physical disabilities, consideration should be given to accessibility of temporary accommodation. Some temporary accommodation is suitable for people with some disabilities, and the domestic violence provision does provide specific units for those with a physical disability.

The Petrus and Brentwood Day Centres play an important role in supporting single disabled people and those with mental health problems who have accommodation but need additional support. This strategy recommends the continuation of funding for that provision and support for the development of additional accommodation and support for those with complex needs (including mental health needs). Both these measures will target resources towards improving services for people with mental health issues.

Services commissioned to support the aims of the strategy do support people that present with a range health related issues including in some cases disabilities, mental ill health, mobility issues and general poor health.

Mental ill health both diagnosed and undiagnosed is prevalent amongst services users using homelessness services and seeking assistance..

Services support people that present with a range health related issues including in some cases disabilities, mental ill health, mobility issues and general poor health.

Mental ill health both diagnosed and undiagnosed is prevalent amongst services users using both services.

Services advocates, advises and supports numerous individuals often with multiple mental health issues and these services are often the only agency service users are not excluded from due to the nature of their challenging behaviour.

## Carers

There is no data available on the prevalence of carers within the population or within customers approaching the homelessness service. However, it is not considered that the proposals within the homelessness strategy would adversely impact on this group.

Where a homeless application includes a carer, they will be treated as a member of the family, and accommodation provided, if required.

Risk of homelessness can sometimes occur due to pressures upon family members and carers. The strategy recognises that family breakdown is a common cause of homelessness. The strategy seeks to mitigate against this by continuing to promote both improved health and behaviours of individuals at risk of homelessness and also by mediation and planned resettlement.

The aspiration to promote a case management approach and a whole family approach recognises the contribution carers and family members can make towards supporting people at risk of homelessness.

## Gender

The population of Rochdale Borough as a whole is evenly split between males and females according to the Census 2011 data. The homelessness legislation doesn't distinguish between males or females although single parent households are more likely to be adult women with children rather than men.

Although the 3 main reasons for priority homelessness include households experiencing domestic abuse, households homeless as a result of family breakdown and households living in the Borough being given leave to remain, the majority of households seeking assistance are white single men aged between 25-44yrs.

The strategy promotes the need to continue to provide gender specific support. The strategic review and subsequent strategy refresh has recognised that proportionately single women at risk of homelessness are more likely to experience complex dependencies and including mental ill health.

## Age

The strategy is not age specific but seeks to ensure that services are accessible to household and individuals of all ages.

Young people are more at risk and vulnerable to becoming homeless than the adult population as a whole. The homelessness review identified some concerns about the lack of a clear pathway for young people, and high rates of tenancy failure amongst under 25s, leaving them with debts/ poor housing history and a cycle of repeat homelessness.

The Homelessness strategy proposes a clear pathway, and close working with children's services to ensure that young people are protected and supported if they become homeless. Measures relevant to this group also include proposals for working with social landlords to agree action plans for improved assessment and housing management so as to reduce the rate of tenancy failure amongst young people.

The strategy recognises in particular the challenges facing young people aged between 18-21years; single people on benefit under 35yrs and care leavers.

The majority of service users are aged between 25-44years although there are small numbers of people seeking assistance aged between 16/17yrs and +75years.

## Armed Forces and Ex-Armed Forces Personnel

The strategy recognises that Ex-armed forces personnel may need additional support and that partners will work with current specialist support services to ensure the needs of this group are met in accordance with the Councils commitment.

## Sexual Orientation

The strategic review has recognised that young people in LGBT groups are disproportionality at risk of becoming homeless and has taken into account the recent research undertaken by Albert Kennedy Trust. One of the aims of the strategy will be for all partners to ensure that services are fully accessible.

### **Gender Reassignment**

As above the strategy aims to ensure that anyone at risk of homelessness or sleeping rough should not be excluded as a result of gender reassignment. The strategy recognises that people undertaking gender reassignment may be at heightened risk of homelessness due to family breakdown, loss of networks or harassment.

### **Religion or Belief**

Census results show that 18% of the population consider themselves to have 'no religion' as opposed to 10% in 2001. Christians have reduced in number by 11.5% and Muslims increased by 4.5%. Other religious groups have remained relatively stable.

There is no reason to believe that there will be an impact on any particular religious group from the proposals contained within the Homelessness Strategy, although consideration could be given to how faith needs are accommodated within temporary accommodation. For example the sharing of cooking facilities and utensils (used for Halal and non-Halal meat) would cause concern for those of a Muslim faith and they may wish to bring their own utensils with them. Currently the Councils temporary accommodation for families is fully furnished including kitchen equipment. Accommodation for singles is fully catered: removing catering services makes it easier for those with faith needs (or other special diets) to choose appropriate foods, but care will need to be taken in designing new shared kitchen facilities.

Faith groups are often involved with service provision and some provide essential front line services such as food banks, furniture distribution and family support. The strategy proposes an expansion of the homelessness forum, with peer support for emerging/ smaller charities and community groups.

The strategy recognises the diversity of households at risk of homelessness and their cultural, ethnic and religious requirements.

### **Pregnant Women or Those on Maternity Leave**

The strategy recognises pregnant women and those that have recently given birth are a priority group and that the council is committed to supporting all households with children at risk of homelessness.

### **Marriage or Civil Partnership**

The Census figures show that the % of people being married in Rochdale has remained stable at around 44% between 2001 and 2011 with 293 people entering into a civil partnership which equates to 0.2% of the population. The largest increase is amongst single (never married) which grew by 6% to 35% of the population.

The Homelessness legislation takes no account of whether or not someone is married or in a civil partnership and would treat people as in a relationship if there were married, in a civil partnership or just living together. Therefore the proposals within the Homelessness Strategy do not impact adversely on this group.

The strategy recognises the council's commitment to provide an inclusive approach to supporting all households at risk of homelessness including single people, families and childless couples.

### **11.What are your main conclusions from this analysis?**

The strategy recognises that although any household can become at risk of homelessness, those most vulnerable include a high proportion of households without social/family networks that can support them, are most likely to be from deprived areas and on low or welfare based incomes. Many are excluded from services and have had poor life chances, made poor or ill informed choices and are likely to have health related issues.

The strategy is specific in seeking to tackle exclusions, improve accessibility and assessment, and enable individuals to achieve sustained outcomes that included improved health, wellbeing and life chances.

The proposals within the Homelessness Strategy are designed specifically to address the needs of the most disadvantaged people living in the Borough. A number of the equality groups within the EIA are positively targeted with actions designed to support and help them to maintain a home. Where homelessness occurs, support to find, secure and maintain accommodation is provided either through the Council if there is a statutory duty to accommodate or through provision of advice and assistance to secure accommodation through another provider. The emphasis is on provision of an accessible service and effective pathways to ensure sufficient advice and support are in place to make sure that once accommodation is found it is maintained.

**12.What are your recommendations?**

The consultation has already identified some addition actions specifically with regards the broader health assessment to consider whether disability is a contributing factor to homelessness or prevents people to access services and resettle in the community.

There are also opportunities to engage in specialist support to ensure that services are accessible for all groups in the community such as those from LGBT.

The Strategy is aimed at a number of groups that are at relatively high risk and it is appropriate that emergency cold weather provision and plans to support any individual at risk of sleeping rough should be reviewed.

**13.What actions are you going to take to address the findings of this assessment? Please attach an action plan including details of designated officers responsible for completing these actions.**

As part of a review of the strategy we will task the BRHAIN to coordinate a self-assessment survey to measure the effectiveness of the strategy.

Signed (Completing Officer): \_\_\_\_\_

Date: \_\_\_\_\_

Signed (Head of Service): \_\_\_\_\_

Date: \_\_\_\_\_

## Equality Impact Assessment Action Plan 2016/17

<b>Action</b>	<b>Outcome</b>	<b>Target Date For Completion</b>	<b>Resource Implications</b>	<b>Lead Officer</b>
To include a broad definition of disability as part of the Homelessness Health Survey	To identify whether the needs of homeless people with disabilities are being met as part of the strategy.	March 2017	To be done within existing resources	Ian Jolley
To design a self-assessment to enable services and organisations to measure accessibility for LGBT client group	To ensure that people feel confident in accessing services and that the strategy has enabled services to meet the needs of LGBT client group	March 2017	To be done within existing resources	Ian Jolley
To ask BRHAIN to review CWP Protocol	To ensure sufficient accommodation is available to support No Second Night Out	November 2017	To be done within existing resources	Ian Jolley