



Name of the proposal, project or service

Reconciling Policy, Performance and Resources (RPPR) 2018/19:

Proposed reductions to Supporting People Home Works services

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Part 1 – The Public Sector Equality Duty and Equality Impact Assessments (EIA)

- 1.1 The Council must have due regard to its Public Sector Equality Duty when making all decisions at member and officer level. An EIA is the best method by which the Council can determine the impact of a proposal on equalities, particularly for major decisions. However, the level of analysis should be proportionate to the relevance of the duty to the service or decision.
- 1.2 This is one of two forms that the County Council uses for Equality Impact Assessments, both of which are available on the intranet. This form is designed for any proposal, project or service. The other form looks at services or projects.

1.3 The Public Sector Equality Duty (PSED)

The public sector duty is set out at Section 149 of the Equality Act 2010. It requires the Council, when exercising its functions, to have "due regard" to the need to

- Eliminate discrimination, harassment, victimisation and any other conduct that is prohibited under the Act;
- Advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it;
- Foster good relations between persons who share a relevant protected characteristic and persons who do not share it. (see below for "protected characteristics")

These are sometimes called equality aims.

1.4 A "protected characteristic" is defined in the Act as:

- age;
- disability;
- gender reassignment;
- pregnancy and maternity;
- race (including ethnic or national origins, colour or nationality);
- religion or belief;
- sex;
- sexual orientation.

Marriage and civil partnership are also a protected characteristic for the purposes of the duty to eliminate discrimination.

The previous public sector equalities duties only covered race, disability and gender.

1.5 East Sussex County Council also considers the following additional groups/factors when carry out analysis:

- Carers A carer spends a significant proportion of their life providing unpaid support
 to family or potentially friends. This could be caring for a relative, partner or friend
 who is ill, frail, disabled or has mental health or substance misuse problems. [Carers
 at the Heart of 21st Century Families and Communities, 2008].
- Literacy/Numeracy Skills
- Part time workers
- Rurality

1.6 Advancing equality (the second of the equality aims) involves:

- Removing or minimising disadvantages suffered by people due to their protected characteristic
- Taking steps to meet the needs of people from protected groups where these are different from the needs of other people including steps to take account of disabled people's disabilities
- Encouraging people from protected groups to participate in public life or in other activities where their participation in disproportionately low
- NB Please note that, for disabled persons, the Council must have regard to the possible need for steps that amount to positive discrimination, to "level the playing field" with non-disabled persons, e.g. in accessing services through dedicated car parking spaces.

1.7 Guidance on Compliance with The Public Sector Equality Duty (PSED) for officers and decision makers:

- 1.7.1 To comply with the duty, the Council must have "due regard" to the three equality aims set out above. This means the PSED must be considered as a factor to consider alongside other relevant factors such as budgetary, economic and practical factors.
- 1.7.2 What regard is "due" in any given case will depend on the circumstances. A proposal which, if implemented, would have particularly negative or widespread effects on (say) women, or the elderly, or people of a particular ethnic group would require officers and members to give considerable regard to the equalities aims. A proposal which had limited differential or discriminatory effect will probably require less regard.

1.7.3 Some key points to note:

- The duty is regarded by the Courts as being very important.
- Officers and members must be aware of the duty and give it conscious consideration: e.g. by considering open-mindedly the EIA and its findings when making a decision. When members are taking a decision, this duty can't be delegated by the members, e.g. to an officer.
- EIAs must be evidence based.
- There must be an assessment of the practical impact of decisions on equalities, measures to avoid or mitigate negative impact and their effectiveness.
- There must be compliance with the duty when proposals are being formulated by officers and by members in taking decisions: the Council can't rely on an EIA produced after the decision is made.
- The duty is ongoing: EIA's should be developed over time and there should be evidence of monitoring impact after the decision.
- The duty is not, however, to achieve the three equality aims but to consider them –
 the duty does not stop tough decisions sometimes being made.
- The decision maker may take into account other countervailing (i.e. opposing) factors that may objectively justify taking a decision which has negative impact on equalities (for instance, cost factors).
- 1.7.4 In addition to the Act, the Council is required to comply with any statutory Code of Practice issued by the Equality and Human Rights Commission. New Codes of Practice under the new Act have yet to be published. However, Codes of Practice issued under the previous legislation remain relevant and the Equality and Human Rights Commission has also published guidance on the new public sector equality duty.

Part 2 – Aims and implementation of the proposal, project or service

2.1.1 What is being assessed?

- a) Proposal or name of the project or service. The proposal is to reduce funding to Home Works by £1,650,000.
- b) What is the main purpose or aims of proposal, project or service? The proposal is to reduce funding to the Home Works service to achieve savings as part of the overall budget for Adult Social Care's RPPR process.
- Manager(s) and section or service responsible for completing the assessment

Jude Davies, Strategic Commissioning Manager Candice Miller, Policy Development Manager

2.1.2 Who is affected by the proposal, project or service?

The residents of East Sussex who are affected by the proposal are:

- of working age (plus any family members);
- facing issues of homelessness/difficulties maintaining their independence; and
- have multiple and complex needs.

Between 1 February 2017 and 31 January 2018, 3,285 people accessed Home Works. It adopts a whole family approach, so family members and children also benefit from the support. Taking those people into account, the household members benefiting from the service during this period totalled 6,617.

Home Works data categorises people in more than one way:

Table 1 shows the range of primary needs presented by the 3,285 people that accessed Home Works between 1 February 2017 and 31 January 2018.

Table 1:

Primary needs presented by individuals 1/2/17 – 31/1/18	No.	%
Mental Health Problems	2,268	69%
Poor Independent Living Skills	1,105	34%
Long Term Condition	683	21%
Physical Disability	584	18%
People At Risk Of Domestic Violence	419	13%
None Identified	364	11%
Learning Disabilities	258	8%
Substance Misuse	245	7%
Alcohol Problems	211	6%
Physical or Sensory Disability	174	5%
English Not First Language	85	3%
Autistic Spectrum Condition	69	2%
Acquired Brain Injury	48	1%
Sensory Disability	32	1%
Refugees / Asylum Seekers	25	1%
Total Supported	3,285	

Table 2 (below) shows the additional needs experienced by the 3,285* clients:

(*Clients may be counted in more than one client group, therefore the total number of needs presented will be greater than the total number of clients during the period).

Additional Needs	No.	%
Clients with a Mental Health Condition	2,598	79.10%
Disabled Clients	1,884	57.40%
Clients with a Long Term Health Condition	1,385	42.2%
Households with Children, Including Pregnant	1,239	37.70%
Clients with Literacy and or Numeracy Issues	1,048	31.90%
Clients who are ASC Clients	966	29.40%
Clients aged 16-25 (Young People at Risk)	650	19.80%
Clients who are Carers	369	11.20%
Clients who are Care Leavers	170	5.20%
Clients who are Ex Service Personnel	90	2.70%
Clients serving Suspended Sentence/On License	79	2.40%
Total MARAC Clients	40	1.20%
MARAC Clients - Victim	30	0.90%
MAPPA Clients	21	0.60%
MARAC Clients - Perpetrator	7	0.20%
MARAC Clients - Victim & Perpetrator	3	0.10%

During the period 1 February 2017 to 31 January 2018, 85% of clients were supported to either find new accommodation or to better manage their housing situation, keep safe and avoid street homelessness.

It is important to understand that the people affected by the proposal to reduce the service budget will be experiencing a housing and personal crisis and have multiple and complex needs including:

- poor mental health
- poor physical health
- child protection issues
- adult safeguarding issues

The case studies at Appendix 1 (provided by Home Works) illustrate the needs presented by this cohort and outcomes achieved. Names have been changed.

2.3 How is, or will, the proposal, project or service be put into practice and who is, or will be, responsible for it?

All providers have been made aware of the budget proposals by the Supporting People Strategic Commissioning Manager. The proposals were discussed at Cabinet on 23 January 2018 and are now out to public consultation which began on 15 February and ended on the 25 April 2018. The process involves reviewing the consultation findings, following which recommendations will be made to members with a final decision being made by Cabinet on the 26 June 2018.

East Sussex County Council's Adult Social Care (ASC) Department is responsible for the Supporting People budget. If the proposals are approved, then negotiations with the provider and discussions with partners will commence to agree how to manage the budget reduction.

2.4 Are there any partners involved? E.g. NHS Trust, voluntary/community organisations, the private sector? If yes, how are partners involved?

Home Works has developed a pathway with HSCC. 30% of Home Works clients are **ASC** clients including Carers. Home Works provides input around self-care and self-management.

8% of referrals are from Health Visitors and **Children's Services (CS)**. The focus is largely where children are at need and at risk, and many of these clients have Child Protection Plans. CS has confirmed that Home Works are formally named in many Child Protection Plans and this means that the family have to work with Home Works to fulfil key objectives. CS also refers Care Leavers of working age who have moved on from supported accommodation to live independently but who require support to avoid a crisis, sustain their tenancy and prevent homelessness.

Home Works contribute to supporting **domestic abuse** and sexual violence victims. The service works in partnership with the Domestic Abuse Portal and supports those women who do not meet the threshold for Domestic Abuse services but need support to manage their safety and mitigate risk.

Home Works supports the work of **housing** partners (10% of referrals in 16/17 were from housing partners) and in particular supporting clients to move on from temporary accommodation; to access the private rented sector; to access social housing; and to sustain a tenancy. At a meeting with strategic housing authorities, it was reported that the proposed savings will lead to a negative impact on the homeless.

Home Works works in partnership with the members of East Sussex Advice Partnership. Concerns expressed by members of this group that includes Brighton Housing Trust, Hastings Advice Centre, Wealden Citizens Advice Bureau and Sussex Community Development Association can be read at 3.4.

The East Sussex Advice Partnership particularly values the home visit aspect of the service, because it is then possible to establish if clients actually have food, can experience how warm their home is, can prevent destitution and pick up on safeguarding issues.

2.5 Is this proposal, project or service affected by legislation, legislative change, service review or strategic planning activity?

East Sussex County Council's total budget for the year beginning April 2018 is £371m. That is a reduction of £17m based on last year. As a department, Adult Social Care needs to save nearly £10 million in the year beginning April 2018 (no decisions have been made yet about how the additional funding of £1.6m will be allocated).

The proposals are made as part of ESCC's budget planning process, **Reconciling Policy**, **Planning and Resources for 2018-19** onwards. The savings proposed to Home Works within this EIA are part of the overall ASC savings proposals.

Care Act 2014: The service prevents, reduces and delays support and care needs in line with the Care Act. Any reduction in funding will impact on the service's ability to do this. An appendix at the end of the document shows how we are meeting our Care Act duties for information and advice.

Homelessness Reduction Act: Home Works has an established relationship with district and borough councils In preparation for the introduction of the Homelessness Reduction Act (from April 2018), all five authorities have identified which clients will be eligible for Home Works support and how this is best delivered to ensure clients receive the required outcomes. Under this new Act ASC and CS have a duty to refer and Home Works could fulfil this function which would prevent the cost of resources for this purpose. Government has not allocated any funding to ASC to support this activity.

Domestic Abuse and Sexual violence legislation and guidance is becoming much more robust and the definition has broadened e.g. the inclusion of coercion and "sex for rent". Home Works works with the police to assist in the delivery of a response to all areas of community safety, including issues of modern day slavery and "cuckooing". Home Works is supporting these vulnerable people many of whom it is likely would meet the 3 key tests within the Care Act.

The Children (Leaving Care Act) (2000) places an obligation on councils to act as Corporate Parents to young people as they leave the care system, which includes meeting their accommodation needs, and their right to receive support including accommodation related support and life skills up to the age of 25 years.

Safeguarding: between February 2017 and January 2018 Home Works made 105 external agency safeguarding reports to statutory agencies. These agencies include ASC Safeguarding Unit, CS Child Protection Team, the Police (including ASB, Hate Crime, suicide risk and risk to others) and MARAC referrals.

Suicide Prevention: A significant number of Home Works clients are in mental distress and have suicidal thoughts. Home Works proactively intervenes and hence contributes to the East Sussex Suicide Prevention Plan.

2.6 How do people access or how are people referred to your proposal, project or service? Please explain fully.

Referrals come from a range of organisations including self-referrals.

Table 3 (below) shows a snap shot of referrals from a wide range of agencies/organisations:

	Grand	Total
Adult Education	0.3%	12
Adult Social Care	13.6%	567
Children's Services	9.7%	405
Community Safety	0.7%	28
Community Mental Health Team	1.5%	64
CRC - Community Rehabilitation Company	1.0%	40
DWP/Employment Services	0.3%	12
ESFR - East Sussex Fire and Rescue	0.0%	1
Health service	13.2%	549
Housing Services - Voluntary	0.9%	36
Local Authority Housing Department	8.4%	350
NPS - National Probation Service	0.7%	29
Police	0.3%	13
Probation service/prison	3.7%	154
RSL	2.9%	121
Self-referral/direct application	32.6%	1359
Social Housing Landlord	0.5%	19
Traveller team	0.1%	.4
Voluntary Services	9.7%	406
Youth Offending Team	0.0%	1
Grand Total	41	.70

2.7 If there is a referral method how are people assessed to use the proposal, project or service? Please explain fully.

Home Works operates a gateway to receive referral forms from agencies or self-referrals via the phone. Home Works considers the following information to make an assessment:

- An understanding of the individual's Housing Situation.
- The individual's vulnerability and support needs.

The gateway then considers:

- How severe is the housing issue?
- How urgent is the issue?
- The ability of the person (independent living skills and resilience).
- Risk issues (these include: street homeless, destitution, domestic abuse, sexual violence, other violence and abuse, mental health, modern day slavery).
- Support networks available to help the person without Home Works.

2.8 How, when and where is your proposal, project or service provided? Please explain fully.

Home Works is a face to face service normally delivered on an outreach basis. This means the service is, with the client's agreement, delivered to wherever the client is living. If home visits are not possible, the visits would be held in a community facility or café.

The service is provided flexibly and tailored to clients' requirements: It is expected the service will be available daytime and evenings Monday to Friday (not usually Bank holidays).

It is expected that most clients will receive a service for less than one year. Many receive a service for a much shorter period.

The service has the operational framework to support the most vulnerable people, and this includes people with challenging behaviours, multiple needs, offenders and people with safeguarding issues including parents.

Part 3 – Methodology, consultation, data and research used to determine impact on protected characteristics

3.1 List all examples of quantitative and qualitative data or any consultation information available that will enable the impact assessment to be undertaken.

	Types of evidence identified as relevant have X marked against them									
	Employee Monitoring Data		Staff Surveys							
	Service User Data	х	Contract/Supplier Monitoring Data							
х	Recent Local Consultations		Data from other agencies, e.g. Police, Health, Fire and Rescue Services, third sector							
	Complaints		Risk Assessments							
	Service User Surveys	х	Research Findings							
x	Census Data	х	East Sussex Demographics							
x	Previous Equality Impact Assessments	х	National Reports							
	Other organisations Equality Impact Assessments		Any other evidence?							

3.2 Evidence of complaints against the proposal, project or service on grounds of discrimination.

None.If you carried out any consultation or research on the proposal, project or service explain what consultation has been carried out.

Providers were initially advised of proposed savings in January 2018 and formally advised of the imminent consultation on 12 February 2018 by the Supporting People Strategic Commissioning Manager.

All providers were sent a copy of the consultation web link and this included an explanation of the consultation process and a survey for clients.

Providers were advised they could be supplied with printed copies.

The formal consultation started on 15 February 2018 and completed on 25 April 2018.

Consultation meetings held:

- All Supporting People providers: 8 March 2018
- Inclusion Advisory Group gave feedback on all the RPPR proposals: 14 March 2018
- Accommodation Planning & Design Group: 15 March 2018
- Public Health: 15 March 2018
- Financial Inclusion Steering Group: 22 March 2018
- Hastings and Rother/Eastbourne, Hailsham and Seaford CCGs: 23 March 2018 and 16 April
- East Sussex Housing Officers Group: May 11 2018
- Domestic Abuse Management Group: 12 March 2018
- Rother DC Task & Finish Group: 28 March 2018
- East Sussex Housing Offices Group (ESHOG) May 11 2018

3.4 What does the consultation, research and/or data indicate about the positive or negative impact of the proposal, project or service?

Key findings from research studies

The negative impacts of the proposal centre around the fact that Home Works will be able to support significantly less people and this is likely to result in an increase in:

- Homelessness, including street homelessness and sofa surfing;
- Evictions;
- demand for emergency and temporary accommodation;
- suicide;
- destitute people;
- reliance on food banks;
- crime;
- tenancy arrears poverty and debt;
- poor mental health and
- presentations at statutory services including Adult Social Care, Children's Services, homeless authorities and A&E.

Fewer people with children will receive a whole-family approached based service to improve their health and wellbeing; protect their children; reduce their offending; and keep themselves safe. It is likely this role will be negatively affected as Home Works resources are reduced.

The **Homeless Link Health Audit 2014** found that there were 1.8 hospital admissions per year for homeless people compared to 0.28 among the general public with the resultant higher 'year of care' costs. A Department of Health report in 2010 reported that these costs are at least £85m per year.

Homeless people have higher rates of premature mortality than the rest of the population, especially from suicide and non-accidental injuries and an increased prevalence of a range

of diseases, mental disorders and substance misuse. The 2014 Audit identified that for homeless people:

- 73% reported **physical health** problems
- 80% reported mental health issues
- 35% had attended **A and E** over the previous 6 months
- 26% had been admitted to hospital in the previous 6 months
- 36% of hospital discharges were on to the street

The **East Sussex Homeless Health Needs Audit 2016** supported the findings of the national study. Key findings:

- 40% of respondents (286) had been admitted to hospital within the last 12 months and that when discharged to the streets or unsuitable accommodation readmittance rates were high.
- 78% of respondents reported at least one **mental health condition**.
- 8% were **employed**.
- **Domestic violence** was reported twice as often in homelessness respondents compared to the general population.
- **Learning difficulties or disabilities** were reported 10 times more frequently than estimated prevalence in the general population.
- 45% of males had been in prison and 21% of females.
- 11% reported a current **drug** problem and 12% reported recovering from a drug problem.

Views of the East Sussex Advice Partnership (ESAP)

Contributors include: Brighton Housing Trust, Hastings Advice and Representation Centre, Wealden Citizens Advice, Sussex Community Development Association.

East Sussex Advice Partnership has expressed concerns that the impact of the proposed saving will be felt disproportionately by the most vulnerable residents in East Sussex. (Those affected by mental or physical health issues, learning disabilities, younger people, people suffering violence, people who have been trafficked, single parents with young children, people with addiction issues, young people at risk of exploitation). This is because:

- Home Works and STEPS support workers are able to support clients to progress an
 advice case to a conclusion, for instance; supporting a person to bring in all of their
 paperwork for an appointment, working with the people to engage with the mental
 health services.
- Home Works and STEPS are able to work with people in the community and in their homes. This also enables the support workers to pick up on other issues that could be impacting on the person's ability to manage their housing as well as other issues of safety e.g. safeguarding issues in relation to children, young people or other household members.

- People will become homeless. Families and individuals will then end up in temporary or
 emergency accommodation (sometimes out of county) or without accommodation
 available to them at all. The impact of this will be felt financially by other departments
 within East Sussex County Council e.g. Children's Services for those found intentionally
 homeless, Adult Social Care where intentionally homeless vulnerable people are left
 without suitable accommodation, police budgets for managing street homelessness, loss
 of revenue for tourism where you have street homelessness and street communities.
- There will be increased costs to the health services, e.g. increased admissions to
 hospital, increased A&E presentations, bed blocking if clients have no suitable home to
 return to, people waiting for operations because they have no suitable home and their
 health deteriorates, increased presentations at GP surgeries.
- The impact on the advice services will be an increase in the number of people coming into the advice services to try and find help and support, as well as advice. Advice Services are already working at capacity (and beyond) and will not be able to address the need. It will be difficult for the advice services to work with some people to resolve their presenting issues if there is not the support service via Home Works/STEPS to refer people to.
- The introduction of the Homelessness Reduction Act on the 3 April 2018 and the introduction of the duty for referrals to be made to the Local Housing Authority by statutory partners in October 2018 means there will be an increase in the numbers of people accessing local housing authority homelessness services at a much earlier stage. A high proportion of these clients will require support to alleviate their housing situation, either with support to maintain their current accommodation or by assisting them to access alternative accommodation. Home Works and STEPS would be able to work with this group of people if the funding was available.
- If the criteria becomes more stringent and the length of time a person has to wait for a service increases there will be some people who will not be able to access Home Works/STEPS, and will try and access support elsewhere, such as from Food Banks (who themselves may not be able to deal with the increase). There will also be some people who will just not do anything and their situation will not end happily, with them becoming further disadvantaged by being homeless.

An unabbreviated copy of the response received from the ESAP is included within the consultation responses pack.

Inclusion Advisory Group: March 14 2018

• The group noted that funding for young people overall is being largely reduced, and currently many services are only able to offer very basic support such as completing assessments. [Name] identified a potential increase in exploitation.

- Impacts are rarely felt in individual isolation, and that the ripple effect to relatives, carers, neighbours, schools etc. should not be underestimated. Such drastic changes can result in the upheaval and detriment to many lives including children, the long-term effects of which (missing school, isolation, impaired prospects) can be calamitous. East Sussex is at a point where only extreme crisis intervention is available.
- People from out of area including Brighton and Hove are arriving in East Sussex and this is impacting services in the county. Services are spread out across the county and this presents issues around transport, unlike Brighton & Hove where services are more centralised and there is better infrastructure. Although there's been an increase of people for whom English is not their first language, this hasn't been reflected in demand for interpreters as many have a good level of English. People from BAME communities have been consulted a number of times over the years, and the perceived lack of action has led to distrust and engagement fatigue. These groups and communities are often used as a scapegoat which is divisive and potentially dangerous, and cited an increase in anti-Semitic harassment.
- Some services have been suspended whilst confirmation around funding is awaited, e.g. Safe from Harm (ASB & Hate Crime) dependant on recommissioning by Police.
- Although there are additional pressures for urban areas, the rural population has its
 own challenges. Where there is an increase in need for Universal Credit but no easily
 accessible Jobcentre this is doubly difficult, and compounded by a loss of libraries
 where people can access computers and online information it should not be
 assumed that everyone can afford and use a smart phone. These factors can be
 accumulative resulting in great hardship.
- The group raised concerns around the homeless population and an increase in weather related deaths. Also people in their own homes who can only afford to heat one room may experience associated health issues (e.g. respiratory). The forthcoming Homelessness Act, and the difficulty for District/Borough councils to meet their duties.
- A rise in demand for foodbanks was acknowledged. In some areas there is a drive for food banks to provide other essentials such as clothing and blankets, and a promoted linking in with charity shops and local amenities to meet this need.

Key findings from the consultation

Home Works

- Many people strongly disagree with the proposal to cut the funding for this vital service.
- Cutting the service would affect people's ability to keep or find a home, lead to an increase in homelessness and lives could be put at risk.

- ➤ Home Works plays an important role helping and supporting people who are struggling with mental health issues.
- People say their life would have been at risk without this service.
- There would be a negative impact on the community if Home Works was cut, through increases in homelessness, anti-social behaviour and crime.
- The level of funding that would be cut is particularly concerning for organisations.
- Organisations say the service works in a practical way with people, helps people to cope, builds resilience, and saves lives.
- ➤ The service focuses on crisis intervention and supports the work of many other statutory and charity services.
- Organisations say the service plays a vital role in helping people to sustain tenancies and move on to permanent accommodation, particularly young people and care leavers.
- The service has already seen cuts and has capacity issues. Further cuts could make it unsustainable.
- Organisations say that cutting the service would make it harder for statutory organisations across the county to meet their duties.
- It would make it harder to reduce homelessness in Hastings, which already suffers from deprivation and high numbers of rough sleepers.
- The top three choices people said they find most helpful about the service are: 1)
 Liaising with other professionals/services; 2) Creating an action plan with you; and 3)
 Helping you by doing things when you felt overwhelmed;
- ➤ The top three choices people said they find make the biggest difference to living independently were: 1) Support to better manage your mental health and emotional wellbeing; 2) To increase your income; and 3) To find new accommodation.
- If Home Works wasn't available they don't know where would have gone, as nowhere else offers this sort of support.
- ➤ People would be most likely to try and get help from the Citizens Advice Bureau if the service wasn't available.
- Organisations say that the Council should rethink the cut for Home Works or at least make it much smaller than proposed.

Most helpful about the service

Over two thirds of respondents chose the following options: liaising with other professionals/services; creating an action plan with you; helping you by doing things when you felt overwhelmed; giving you support by phone between meetings; helping you to understand how to do things for yourself; helping you to have more choice and control in your life; meeting you at home; and supporting you to attend meetings with professionals/services.

Biggest difference to living independently

- Over two thirds of respondents chose the following options: support to better manage your mental health and emotional wellbeing; to increase your income; to find new accommodation; and to manage your budget.
- ➤ If Home Works hadn't been available where would you have gone: People said they don't know where would have gone and that nowhere else offers this sort of support. They said they would have tried the Citizens Advice Bureau. Their life would have been at risk without this support.
- ➤ Other comments: This is a vital service and the budget shouldn't be cut. Cutting the service would lead to an increase in homelessness. People won't be happy if the proposals go ahead and are worried about the impact on people who need this sort of support in future. They praise the service and say the cuts would target the most vulnerable. Cutting Home Works would affect people's ability to find or keep a home.

Sample quotes:

"There is already a housing crisis across the UK, including East Sussex, and cuts like this will undoubtedly cause it, and its demand on services, to increase dramatically. Cuts like this are the definition of short term-ism."

"Helped me find a home and sort out my UC claim, which enabled me to find a job and start to get my life back on track."

Part 4 – Assessment of impact

- 4.1 Age: Testing of disproportionate, negative, neutral or positive impact.
 - a) How is this protected characteristic reflected in the County/District/ Borough?

Population by age and gender in 2011 (source: ONS Census 2011):

		All people	0-14	15-29	30-44	45-64	65-69	70-74	75-79	80-84	85-89	90+
All people	No.	526,671	84,910	83,732	90,763	147,503	32,496	26,270	22,607	18,524	12,349	7,517
	%	100%	16.1%	15.9%	17.2%	28%	6.2%	5%	4.3%	3.5%	2.3%	1.4%
Females	No.	272,907	41,146	41,052	46,948	76,122	16,840	14,077	12,301	10,956	7,984	5,481
	%	51.8%	7.8%	7.8%	8.9%	14.5%	3.2%	2.7%	2.3%	2.1%	1.5%	1%
Males	No.	253,764	43,764	42,680	43,815	71,381	15,656	12,193	10,306	7,568	4,365	2,036
	%	48.2%	8.3%	8.1%	8.3%	13.6%	3%	2.3%	2%	1.4%	0.8%	0.4%

61.1% of the population in East Sussex are aged 15 to 64.

Population estimates 2016 (ONS mid-year estimates)

		All people	0-15	16-29	30-44	45-64	65 and over
All people	No.	547,797	93,688	77,067	86,210	152,568	138,264
	%	100%	17.1%	14.1%	15.7%	27.9%	25.2%
Females	No.	282,789	45,448	37,524	44,748	78,617	76,452
	% of age group	51.6%	48.5%	48.7%	51.9%	51.5%	55.3%
Males	No.	265,008	48,240	39,543	41,462	73,951	61,812
	% of age group	48.4%	51.5%	51.3%	48.1%	48.5%	44.7%

b) How is this protected characteristic reflected in the population of those impacted by the proposal, project or service?

Home Works clients 2016/17 (source: Home Works annual data report)

Age breakdown of clients

	The state of the s		Local Au	thority				C	7 6		Grand
	Eastbourne	Hastings	Lewes	Rother	Wealden	Other	EHS	HR	HWLH	Other	Total
46 47	0.5%	0.9%	0.9%	1.4%	0.2%	0.0%	0.6%	1.0%	0.4%	0.0%	0.7%
16 - 17	4	10	4	5	1	0	7	15	2	0	24
	14.9%	17.9%	20.7%	21.7%	17.5%	18.2%	15.6%	18.7%	20.8%	18.2%	17.9%
18 - 24	129	204	94	80	74	2	187	280	114	2	583
	14.7%	13.5%	14.7%	13.9%	14.0%	9.1%	14.0%	13.4%	16.2%	9.1%	14.1%
25 - 29	127	154	67	51	59	1	168	201	89	1	459
	12.9%	9.6%	11.2%	9.5%	11.4%	9.1%	12.3%	9.5%	11.7%	9.1%	10.9%
30 - 34	112	109	51	35	48	1	148	143	64	1	356
35 - 39	9.8%	11.9%	8.8%	7.9%	6.4%	27.3%	9.2%	10.9%	7.7%	27.3%	9.8%
	85	136	40	29	27	3 .	111	164	42	3	320
	10.4%	11.6%	11.4%	8.7%	10.9%	18.2%	11.1%	10.9%	10.0%	18.2%	10.8%
40 - 44	90	132	52	32	46	2	133	164	55	2	354
45 40	11.5%	11.5%	7.9%	13.9%	13.5%	0.0%	11.8%	12.3%	8.9%	0.0%	11.5%
45 - 49	100	131	36	51	57	0	142	184	49	0	375
FO 54	10.7%	10.9%	11.4%	9.2%	11.1%	18.2%	11.3%	10.5%	10.4%	18.2%	10.8%
50 - 54	93	124	52	34	47	2	136	157	57	2	352
	9.7%	8.1%	8.1%	7.6%	9.5%	0.0%	9.6%	8.0%	8.4%	0.0%	8.6%
55 - 59	84	92	37	28	40	0	115	120	46	0	281
	4.8%	4.3%	4.8%	6.3%	5.5%	0.0%	4.6%	4.9%	5.6%	0.0%	4.9%
60 - 64	42	49	22	23	23	0	55	73	31	0	159
Gran	26.5%	35.0%	13.9%	11.3%	12.9%	0.3%	36.8%	46.0%	16.8%	0.3%	
Total	866	1141	455	368	422	11	1202	1501	549	11	3263

Household type

			Local Aut	hority			CCG				Grand
	Eastbourne	Hastings	Lewes	Rother	Wealden	Other	EHS	HR	HWLH	Other	Total
CNC - Couple,	5.0%	5.1%	4.0%	6.3%	4.7%	0.0%	4.6%	5.3%	4.9%	0.0%	4.7%
no children	43	58	18	23	20	. 0	55	80	27	0	162
CC - Couple	12.8%	9.7%	8.4%	9.5%	11.4%	18.2%	11.9%	9.8%	9.7%	18.2%	10.4%
with children	111	111	38	35	48	2	143	147	53	2	345
CP - Couple	1.0%	1.0%	1.3%	0.5%	0.7%	0.0%	1.2%	0.9%	0.7%	0.0%	1.1%
pregnant, no children	9	11	6	2	3	0	14	13	4	0	31
F - Single	18.7%	- 19.9%	19.6%	24.5%	25.1%	36.4%	20.5%	21.1%	20.4%	36.4%	21.0%
female	162	227	89	90	106	4	246	316	112	4	678
FC - Female	23.9%	19.9%	28.1%	23.9%	22.7%	9.1%	23.7%	21.1%	26.4%	9.1%	23.0%
with children	207	227	128	88	96	1	285	316	145	1	747
FP - Female	0.5%	0.8%	0.9%	1.1%	1.2%	0.0%	0.8%	0.9%	0.5%	0.0%	1.2%
pregnant, no children	4	9	4	4	5	0	10	13	3	0	26
M -	35.0%	39.4%	33.2%	30.2%	32.0%	36.4%	34.2%	36.8%	33.9%	36.4%	34.6%
Single male	303	449	151	111	135	4	411	552	186	4	1153
MC-	2.3%	2.5%	2.9%	3.0%	1.2%	0.0%	2.2%	2.6%	2.0%	0.0%	2.6%
Male with children	20	28	13	11	5	0	27	39	11	0	77
OTHR -	0.8%	1.8%	1.8%	1.1%	0.9%	0.0%	0.9%	1.7%	1.5%	0.0%	1.5%
Others	7	21	8	4	4	0	11	25	8	0	44
Grand Total	26.54% 866	34.97% 1141	13.94% 455	11.28% 368	12.93% 422	0.34% 11	36.84% 1202	46.00% 1501	16.83% 549	0.34% 11	3263

Will people with the protected characteristic be more affected by the proposal, project or service than those in the general population who do not share that protected characteristic?

Yes. People of working age will be more affected by the proposal than those in the general population as Home Works is for people aged 16 to 64. Children who live with Home Works clients will also be affected.

d) What is the proposal, project or service's impact on different ages/age groups?

The impact will be that fewer people/households can receive short term housing support to sustain or increase their independence, avoid homelessness and prevent a crisis.

The proposal will have a negative impact on people aged 16 to 64 who are at risk of homelessness and/or need short-term housing support to sustain or increase their independence.

The proposal will also have a negative impact on children. In 2016/17, Home Works supported 1,169 households with children (35.8% of the total number of households):

- 345 couples with children
- 747 females with children
- 77 males with children

e) What actions are to/or will be taken to avoid any negative impact or to better advance equality?

Once final savings are confirmed, the Strategic Commissioner Manager (Supporting People) will work with the Provider and strategic partners to develop an implementation plan for achieving the savings, minimise the negative impacts on clients and better advance equality.

f) Provide details of the mitigation.

An implementation plan will set out the details for future clients and this will include referrals to other information and advice sources. It will be impossible to mitigate the full impact as there is no other service that provides the Home Works service. Any mitigation for current clients will include supporting them to obtain appropriate statutory assessments.

g) How will any mitigation measures be monitored?

To be completed once an implementation plan is agreed and dependent on resources allocated for this purpose. Any monitoring measures put in place will include this cohort.

- 4.2 Disability: Testing of disproportionate, negative, neutral or positive impact.
 - a) How is this protected characteristic reflected in the County /District/ Borough?

Residents with limiting long-term illness in 2011 (source: ONS Census 2011):

	All people	People with long- term health problem or disability	Day-to-day activities limited a little	Day-to-day activities limited a lot	People without long-term health problem or disability
All ages	526,671	107,145	58,902	48,243	419,526
		20.3%	11.2%	9.2%	79.7%
Working	315,752	43,632	24,941	18,691	272,120
age: 16-64		13.8%	7.9%	5.9%	86.2%

b) How is this protected characteristic reflected in the reflected in the population of those impacted by the proposal, project or service?

Of the people supported by Home Work in 2016/17:

(source: Home Works annual data report)

- 2585 (79.2%) had a mental health problem
- 1331 (40.1%) had a long term condition
- 955 (29.3%) had a physical disability/sensory impairment
- 250 (7.7%) had a learning disability
- 26 people (0.8%) had an Acquired Brain Injury
- c) Will people with the protected characteristic be more affected by the proposal, project or service than those in the general population who do not share that protected characteristic?

Yes. Disabled people will be more affected than those in the general population. Roughly 13.8% of people of working age have a limiting long-term illness.

In 2016/17:

- 2585 Home Works clients (79.2%) had a mental health problem,
- 1331 (40.1%) had a long term condition and
- 955 (29.3%) had a physical disability/sensory impairment.
- d) What is the proposal, project or service's impact on people who have a disability?

It is likely the impact will be that fewer people/households with a disability can receive short term housing support to sustain or increase their independence, avoid homelessness and prevent a crisis.

The proposal will have a negative impact on disabled people aged 16 to 64 who are at risk of homelessness and/or need short-term housing support to sustain or increase their independence.

e) What actions are to/ or will be taken to avoid any negative impact or to better advance equality?

Once final savings are confirmed, the Strategic Commissioning Manager (Supporting People) will work with the provider and strategic partners to develop an implementation plan for achieving the savings, minimise the negative impacts on clients and better advance equality.

f) Provide details of any mitigation.

An implementation plan will set out the details for future clients and this will include referrals to other information and advice sources. It will be impossible to mitigate the full impact as there is no other service that provides a Home Works type service. Any mitigation for current clients will include supporting them to obtain appropriate statutory assessments.

g) How will any mitigation measures be monitored?

To be completed once an implementation plan is agreed and dependent on resources allocated for this purpose. Any monitoring measures put in place will include this cohort.

4.3 Ethnicity: Testing of disproportionate, negative, neutral or positive impact.

a) How is this protected characteristic reflected in the County/District/ Borough?

Population by ethnic groups in 2011 (source: ONS Census 2011)

			White					All		
			British					Asian		
			and		Gypsy or			or	All Black	Other
	All		Northern	White	Irish	Other	All	Asian	or Black	ethnic
	people	All White	Irish	Irish	Traveller	White	Mixed	British	British	group
All										
people	526,671	505,422	482,769	3,966	815	17,872	7,473	9,143	2,912	1,721
15-29	83,732	78,981	74,858	257	180	3,686	1,850	2,001	541	359
30-44	90,763	85,314	79,140	704	161	5,309	1,180	2,841	898	530
45-64	147,503	143,319	137,370	1,354	133	4,462	1,006	2,002	732	444
Total										
15-64	321,998	307,614	291,368	2,315	474	13,457	4,036	6,844	2,171	1,333
		95.5%	90.5%	0.7%	0.1%	4.2%	1.3%	2.1%	0.7%	0.4%

b) How is this protected characteristic reflected in the population of those impacted by the proposal, project or service?

Home Works clients in 2016/17 (source: Home Works annual data report)

	Grand	Total
White: British	2,785	85.4%
White: Irish	24	0.7%
White: Other	165	5.1%
Mixed: White & Black Caribbean	24	0.7%
Mixed: White & Black African	14	0.4%
Mixed: White & Asian	14	0.4%
Mixed: Other	32	1.0%
Asian/Asian British: Indian	11	0.3%
Asian/Asian British: Pakistani	3	0.1%
Asian/Asian British: Bangladeshi	4	0.1%
Asian/Asian British: Other	29	0.9%
Black/Black British: Caribbean	12	0.4%
Black/Black British: African	52	1.6%
Black/Black British: Other	16	0.5%
Chinese/Other ethnic group: Chinese	11	0.3%
Chinese/Other ethnic group: Other	6	0.2%
Gypsy/Irish Traveller	17	0.5%
Arab	23	0.7%
Did not wish to disclose	21	0.6%
Grand Total	32	:63

First language

	Local Authority CCG						Grand				
Historical Control of the Control of	Eastbourne	Hastings	Lewes	Rother	Wealden	Other	EHS	HR	HWLH	Other	Total
04	10.9%	8.9%	5.7%	1.9%	4.5%	27.3%	27.3%	8.9%	7.3%	5.8%	7.7%
Other	94	102	26	7	19	3 ,	3	107	109	32	251
ed Strate	89.1%	91.1%	94.3%	98.1%	95.5%	72.7%	72.7%	91.1%	92.7%	94.2%	92.3%
English	772	1039	429	361	403	8	8	1095	1392	517	3012
Grand	26.5%	35.0%	13.9%	11.3%	12.9%	0.3%	0.3%	36.8%	46.0%	16.8%	2262
Total	866	1141	455	368	422	11	11	1202	1501	549	3263

C) Will people with the protected characteristic be more affected by the proposal, project or service than those in the general population who do not share that protected characteristic?

Yes. People from different ethnic backgrounds (which may include refugees and asylum seekers) will be more affected that those in the general population. The population of White British people in East Sussex is 482,769 which is 91.7% and the population is White British people aged 15 to 64 is 291,368 which is 90.5%. In comparison, 84.5% of Home Works clients were White British.

d) What is the proposal, project or service's impact on those who are from different ethnic backgrounds?

Yes. It is likely that fewer people from different ethnic backgrounds (who represent a greater proportion of Home Works clients than those in the general population) and need housing support will be able to access it. This could mean that this cohort of people will face greater barriers (including language barriers) to accessing services and establishing what they can do to remain living in their home or find a new one and prevent a crisis.

Literacy data at section 4.9.4 reflects that for 3% of Home Works clients, English is not a first language.

e) What actions are to/or will be taken to avoid any negative impact or to better advance equality?

Once final savings are confirmed, the Strategic Commissioning Manager (Supporting People) will work with the provider and strategic partners to develop an implementation plan for achieving the savings, minimise the negative impacts on clients and better advance equality.

f) Provide details of any mitigation.

An implementation plan will set out the details for future clients and this will include referrals to other information and advice sources. It will be impossible to mitigate the full impact as there is no other service that provides a Home Works type service.

g) How will any mitigation measures be monitored?

To be completed once an implementation plan is agreed and dependent on resources allocated for this purpose. Any monitoring measures put in place will include this cohort.

4.4 Gender/Transgender: Testing of disproportionate, negative, neutral or positive impact

a) How is this protected characteristic target group reflected in the County/District/Borough?

Population by age and gender in 2011 (source: ONS Census 2011)

	Number	Percentage
All people	526,671	100%
Females	272,907	51.8%
Males	253,764	48.2%

Population estimates 2016 (ONS mid-year estimates)

	Number	Percentage
All people	547,797	100%
Females	282,789	51.6%
Males	265,008	48.4%

Transgender statistics are not currently collected.

b) How is this protected characteristic reflected in the population of those impacted by the proposal, project or service?

Home Works clients in 2016/17 (source: Home Works annual data report)

	Number	%
Female	1838	56.3%
Male	1425	43.7%
Total	3263	100%

Number of transgender clients in 2016/17

	Number	%
Eastbourne	5	0.6%
Hastings	2	0.2%
Lewes	5	1.1%
Rother	2	0.5%
Wealden	1	0.2%
Total	15	2.6%

Will people with the protected characteristic be more affected by the proposal, project or service than those in the general population who do not share that protected characteristic?

There does not appear to be a disproportionate impact on females or males however there could be a disproportionate impact on transgender people who were 2.6% of the total number of clients in 2016/17.

d) What is the proposal, project or service's impact on different genders?

It appears that the impact on males and females will be neutral however there could be a negative impact on transgender people. We have limited information and we would need to do further work to understand the impact. However, we should acknowledge that there are additional barriers and health impacts for transgender people.

e) What actions are to/or will be taken to avoid any negative impact or to better advance equality?

Once final savings are confirmed, the Strategic Commissioning Manager (Supporting People) will work with the provider and strategic partners to develop an implementation plan for achieving the savings, minimise the negative impacts on clients and better advance equality.

f) Provide details of any mitigation.

This section will be completed once an implementation plan can begin. It will be impossible to mitigate the full impact as there is no other service that provides a Home Works type service. Any mitigation for current clients will include supporting them to obtain appropriate assessments.

g) How will any mitigation measures be monitored?

To be completed once an implementation plan is agreed and dependent on resources allocated for this purpose. Any monitoring measures put in place will include this cohort.

4.5 Marital Status/Civil Partnership: Testing of disproportionate, negative, neutral or positive impact.

a) How is this protected characteristic target group reflected in the County/District/Borough?

Marital status by age and gender in 2011 (source: ONS Census 2011)

	All people aged 16 and over	Single	Married	In a registered same-sex civil partnership	Separated	Divorced	Widowed
No.	435,515	126,922	210,786	1,471	11,954	46,470	37,912
%	100%	29.1%	48.4%	0.3%	2.7%	10.7%	8.7%

b) How is this protected characteristic reflected in the population of those impacted by the proposal, project or service?

This data is not collected.

Will people with the protected characteristic be more affected by the proposal, project or service than those in the general population who do not share that protected characteristic?

There is no data on the marital status of Home Works clients however it is expected people who are married or who are in a registered same-sex civil partnership will not be more affected by the proposal than those in the general population.

d) What is the proposal, project or service's impact on people who are married or same sex couples who have celebrated a civil partnership?

There is no data on the marital status of Home Works clients however it is expected that the impact will be neutral.

e) What actions are to/or will be taken to avoid any negative impact or to better advance equality?

Once final savings are confirmed, the Strategic Commissioning Manager (Supporting People) will work with the provider and strategic partners to develop an implementation plan for achieving the savings, minimise the negative impacts on clients and better advance equality.

f) Provide details of the mitigation.

This section will be completed once an implementation plan can begin. It will be impossible to mitigate the full impact as there is no other service that provides a Home Works type service. Any mitigation for current clients will include supporting them to obtain appropriate assessments.

g) How will any mitigation measures be monitored?

To be completed once an implementation plan is agreed and dependent on resources allocated for this purpose. Any monitoring measures put in place will include this cohort.

- 4.6 Pregnancy and maternity: Testing of disproportionate, negative, neutral or positive impact.
 - a) How is this protected characteristic target group reflected in the County/District/Borough?

In 2015, there were 5,046 live births in East Sussex and in 2016 there were an estimated 82,272 women aged 16-44 in the County.

b) How is this protected characteristic reflected in the population of those impacted by the proposal, project or service?

Data on Home Works household types in 2016/17 shows that there were 31 couples pregnant with no children and 26 females, pregnant with no children.

Will people with the protected characteristic be more affected by the proposal, project or service than those in the general population who do not share that protected characteristic?

Comparative data is not available however it is expected that pregnant women will not be more affected that those in the general population who are not pregnant.

d) What is the proposal, project or service's impact on pregnant women and women within the first 26 weeks of maternity leave?

Comparative data is not available however it is expected that the impact will be neutral.

e) What actions are to/or will be taken to avoid any negative impact or to better advance equality?

Once final savings are confirmed, the Strategic Commissioning Manager (Supporting People) will work with the provider and strategic partners to develop an implementation plan for achieving the savings, minimise the negative impacts on clients and better advance equality.

f) Provide details of the mitigation

This section will be completed once an implementation plan can begin. Any mitigation for current clients will include supporting them to obtain appropriate assessments.

g) How will any mitigation measures be monitored?

To be completed once an implementation plan is agreed and dependent on resources allocated for this purpose. Any monitoring measures put in place will include this cohort.

4.7 Religion, Belief: Testing of disproportionate, negative, neutral or positive impact.

a) How is this protected characteristic reflected in the County/District/Borough?

Religion in 2011 (source: ONS Census 2011)

											Religion
		All							Other	No	not
Religions		people	Christian	Buddhist	Hindu	Jewish	Muslim	Sikh	religions	religion	stated
East Sussex	No.	526,671	315,659	2190	1501	1074	4201	178	3508	155723	42637
	%	100%	59.9%	0.4%	0.3%	0.2%	0.8%	0%	0.7%	29.6%	8.1%
Eastbourne	No.	99,412	59,232	482	429	211	1458	53	586	28995	7966
	%	100%	59.6%	0.5%	0.4%	0.2%	1.5%	0.1%	0.6%	29.2%	8%
Hastings	No.	90,254	46,832	475	423	142	1159	38	668	33066	7451
	%	100%	51.9%	0.5%	0.5%	0.2%	1.3%	0%	0.7%	36.6%	8.3%
Lewes	No.	97,502	55,572	489	257	320	558	42	603	31641	8020
	%	100%	57%	0.5%	0.3%	0.3%	0.6%	0%	0.6%	32.5%	8.2%
Rother	No.	90,588	58,706	290	171	170	460	12	525	22864	7390
	%	100%	64.8%	0.3%	0.2%	0.2%	0.5%	0%	0.6%	25.2%	8.2%
Wealden	No.	148915	95317	454	221	231	566	33	1126	39157	11810
	%	100%	64%	0.3%	0.1%	0.2%	0.4%	0%	0.8%	26.3%	7.9%

b) How is this protected characteristic reflected in the population of those impacted by the proposal, project or service?

Home Works clients in 2016/17 (source: Home Works annual data report)

	Gran	d Total	
Buddhist	32	1.0%	
Christian (all denominations)	831	25.5%	
Hindu	3	0.1%	
Jewish	6	0.2%	
Muslim	66	2.0%	
Sikh "" " " " " " " " " " " " " " " " " "	1	0.0%	
Any other religion	73	2.2%	
No Religion	2095	64.2%	
Do not wish to disclose	156	4.8%	
Grand Total	3263		

Will people with the protected characteristic be more affected by the proposal, project or service than those in the general population who do not share that protected characteristic?

People with different religions and beliefs are not expected to be more affected by the proposal than those in the general population.

- 4.8 Sexual Orientation Gay, Lesbian, Bisexual and Heterosexual: Testing of disproportionate, negative, neutral or positive impact.
 - a) How is this protected characteristic reflected in the County/District/Borough?

Sexual Identity – South East (Source: ONS data 2016)

	Number	%
Heterosexual or straight	6,703,000	93.4%
Gay or lesbian	87,000	1.2%
Bisexual	61,000	0.9%
Other	38,000	0.5%
Don't know or refuse	284,000	4.0%

b) How is this protected characteristic reflected in the population of those impacted by the proposal, project or service?

Home Works clients 2016/17 (source: Home Works annual data report)

		Gra	nd Total
Bisexual		67	2.1%
Gay man		36	1.1%
Lesbian		32	1.0%
Heterosexual		2,872	88.0%
Does not wish to disclose	9	256	7.8%
Grand Total		3263	

C) Will people with the protected characteristic be more affected by the proposal, project or service than those in the general population who do not share that protected characteristic?

It is not clear from the data whether people with differing sexual orientation will be more affected by the proposal than those in the general population. A higher proportion of Home Works clients than those in the general population did not want to disclose their sexual identity which affects the figures.

d) What is the proposal, project or service's impact on people with differing sexual orientation?

People with different sexual orientation do not appear to be disproportionately more affected by the proposal than those in the general population, however the proposal will still have a negative impact on all people aged 16 to 64 who are at risk of homelessness and/or need short-term housing support to sustain or increase their independence. People with differing sexual orientation within this cohort may also experience barriers, if the proposal goes ahead.

4.9 Other: Additional groups/factors that may experience impacts - testing of disproportionate, negative, neutral or positive impact.

4.9.1 Rural population

a) How are these groups/factors reflected in the County/District/Borough?

Urban-Rural		Urban		Ru	ral
Age group		All people	16-64	All people	16-64
East Sussex	No.	389,946	235,177	136,725	80,575
	%	74%	74.5%	26%	25.5%
Eastbourne	No.	99,412	60,388	0	0
	%	100%	100%	0%	0%
Hastings	No.	90,254	58,087	0	0
	%	100%	100%	0%	0%
Lewes	No.	75,173	45,232	22,329	13,148
	%	77.1%	77.5%	22.9%	22.5%
Rother	No.	43,168	22,951	47,420	27,645
	%	47.7%	45.4%	52.3%	54.6%
Wealden	No.	81,939	48,519	66,976	39,782
	%	55%	54.9%	45%	45.1%

25.5% of the East Sussex population aged 16 to 64 live in a rural area.

b) How is this group/factor reflected in the population of those impacted by the proposal, project or service?

This data is not available.

c) Will people within these groups or affected by these factors be more affected by the proposal, project or service than those in the general population who are not in those groups or affected by these factors?

Data on Home Works clients living in rural areas is not available however it is not expected that people living in rural areas could be more affected than those living in urban areas.

d) What is the proposal, project or service's impact on the factor or identified group?

Although we do not have numerical data we know that people from rural areas benefit from Home Works to prevent a crisis, remain independent and/or find alternative accommodation. Home Works is a visiting service and therefore any reduction in service will be particularly felt amongst people in rural areas as access to any other service for a face to face intervention will involve travelling and related costs to be incurred by the individual, many of whom are already experiencing poverty.

4.9.2 Carers

a) How are these groups/factors reflected in the County/District/ Borough?

Provision of unpaid care 2011 in East Sussex (source: ONS Census 2011)

	All people	People	People	Provides 1 to	Provides 20	Provides 50
		provide no	provide	19 hours	to 49 hours	or more
		unpaid care	unpaid care	unpaid care a	unpaid care a	hours unpaid
				week	week	care a week
No.	526,671	467,262	59,409	39,537	6,745	13,127
%	100%	88.7%	11.3%	7.5%	1.3%	2.5%

b) How is this group/factor reflected in the population of those impacted by the proposal, project or service?

In the year 2016/17, 12.5% of clients were carers (source: Home Works annual data report).

In the year 1 February 2017 to 31 January 2018, 11% of clients were carers (source: Home Works impact statement)

c) Will people within these groups or affected by these factors be more affected by the proposal, project or service than those in the general population who are not in those groups or affected by these factors?

No. Carers do not appear to be disproportionately more affected by the proposal than those in the general population. However, this is still a significant number. So, should the proposals go ahead, there may be an impact on carers having to provide additional support.

Note: The proposed savings to commissioned carers services may have an additional impact on carers who would also be affected by the proposals to Home Works.

4.9.3 People on low incomes

a) How are these groups/factors reflected in the County/District/Borough?

In East Sussex in 2016 (source: ESIF) 27,140 people received out of work benefits and 20,560 people ESA and Incapacity Benefit. Using the population estimates below between 8% and 9% of the working age population receive out of work benefits.

Population estimates 2016 (ONS mid-year estimates)

		0-15	16-29	30-44	45-64	65 and over
All people	547,797	93,688	77,067	86,210	152,568	138,264
%	100%	17.1%	14.1%	15.7%	27.9%	25.2%
Females	282,789	45,448	37,524	44,748	78,617	76,452
%	51.6%	48.5%	48.7%	51.9%	51.5%	55.3%
Males	265,008	48,240	39,543	41,462	73,951	61,812
%	48.4%	51.5%	51.3%	48.1%	48.5%	44.7%

b) How is this group/factor reflected in the population of those impacted by the proposal, project or service?

Home Works clients in 2016/17 (source: Home Works annual data report)

	Local Authority					CCG			Grand		
	Eastbourne	Hastings	Lewes	Rother	Wealden	Other	EHS	HR	HWLH	Other	Total
Full-time	0.3%	0.8%	0.2%	0.3%	0.9%	9.1%	0.5%	0.7%	0.4%	9.1%	0.6%
student	3	9	1	1	4	1	6	10	2	1	19
Full-time	4.8%	2.8%	6.4%	3.8%	5.5%	0.0%	4.6%	3.1%	7.1%	0.0%	4.3%
work > 24 hrs/wk.	42	32	29	14	23	0	55	46	39	0	140
Govt	0.3%	0.4%	0.4%	0.0%	0.2%	0.0%	0.2%	0.3%	0.5%	0.0%	0.6%
training/Work Programme	3	4	2	o	1	0	3	4	3	0	20
	6.4%	10.1%	8.6%	7.9%	5.7%	18.2%	6.2%	9.6%	7.8%	18.2%	8.1%
Job seeker	55	115	39	29	24	2	75	144	43	2	264
Long-term	26.2%	23.0%	38.9%	22.6%	28.0%	45.5%	29.2%	22.9%	31.3%	45.5%	26.7%
sick/disabled	227	262	177	83	118	5	351	344	172	5	872
Not seeking	14.4%	11.0%	17.6%	10.3%	12.8%	0.0%	14.4%	10.9%	15.7%	0.0%	13.0%
work	125	126	80	38	54	0	173	164	86	0	423
Otheradult	40.3%	47.9%	19.8%	51.1%	41.5%	27.3%	38.0%	48.4%	29.9%	27.3%	41.4%
Other adult	349	546	90	188	175	3	457	727	164	3	1351
Part-time	6.4%	3.8%	7.5%	2.7%	5.2%	0.0%	6.1%	3.5%	6.9%	0.0%	5.0%
work < 24 hrs/wk.	55	43	34	10	22	0	73	53	38	0	164
n.u.d	0.8%	0.4%	0.7%	1.4%	0.2%	0.0%	0.7%	0.6%	0.4%	0.0%	0.6%
Retired	7	4	3	5	1	0	9	9	2	0	20
C1 T-1-1	26.5%	35.0%	13.9%	11.3%	12.9%	0.3%	36.8%	46.0%	16.8%	0.3%	2262
Grand Total	866	1141	455	368	422	11	1202	1501	549	11	3263

c) Will people within these groups or affected by these factors be more affected by the proposal, project or service than those in the general population who are not in those groups or affected by these factors?

Yes. People on low incomes will be more affected as most people who access Home Works are dependent on the welfare benefit system and/or are on a low income. There is a benefit service embedded within Home Works provided by the Benefit and Debt project. It is funded by Hastings and Rother CCG and Eastbourne, Hailsham and Seaford CCG in recognition that the clients are some of the poorest people; need help to rise out of poverty and can find it difficult to communicate with the DWP, avoid scams, debt and financial exploitation. In 2016/17 1,355 people at risk of homelessness received expert advice from the benefit service embedded within Home Works. Home Works also helps people to find and sustain employment. As fewer people will receive this service, fewer people will be supported to become financially robust and it is likely this will have a negative impact on employability

d) What is the proposal, project or service's impact on the factor or identified group?

The impact on the identified group will be that fewer people who need support to access housing/remain in their housing and avoid a crisis will be able to access holistic benefit advice tailored to meet their needs. Home Works helps people to find and sustain employment and less people will receive this service and therefore it is likely that less people will be financially stable.

There is likely to be an increase in tenancy arrears, evictions, debt, the need for food bank support and destitution. It is likely that more families will approach Children's Services for financial support and there will be a need for the advice agencies to be able to respond to this cohort who are disadvantaged with complex and multiple needs and to sustain their independence need an intervention that is both timely and time consuming.

e) What actions are to/or will be taken to avoid any negative impact or to better advance equality?

Once final savings are confirmed, the Strategic Commissioning Manager (Supporting People) will work with the provider and strategic partners to develop an implementation plan for achieving the savings, minimise the negative impacts on clients and better advance equality.

f) Provide details of the mitigation.

This section will be completed once an implementation plan can begin. It will be impossible to mitigate the full impact as there is no other service that provides a Home Works type service and integrates benefit advice into a holistic service to prevent a crisis. Any mitigation for current clients will include ensuring they are

financially stable before they leave the project and also have the skills to sustain that status.

g) How will any mitigation measures be monitored?

To be completed once an implementation plan is agreed and dependent on resources allocated for this purpose. Any monitoring measures put in place will include this cohort.

4.9.4 Literacy/Numeracy

a) How are these groups/factors reflected in the County/District/Borough?

There are areas of East Sussex among the top 10 most deprived wards in England for working age adults with no or low qualifications or who cannot speak English well or at all. Parts of the county have an adult population with skills below a level which means they could compare products and services for the best buy, or work out a household budget. The percentage of working age residents with no qualifications in East Sussex is 6.5%, compared to 7.8% nationally. There is variance across the county with Hastings having the highest percentage of working age residents with no qualifications at 11.7% (6,700 residents), compared to Lewes with the lowest percentage at 4.9% (2,800 residents).

b) How is this group/factor reflected in the population of those impacted by the proposal, project or service?

There is no direct comparative data available however Home Works data shows that 23% of clients in 2016/17 declared a difficulty with literacy or numeracy.

Home Works clients in 2016/17 (source: Home Works annual data report).

	Local Authority						CCG				Grand
	Eastbourne	Hastings	Lewes	Rother	Wealden	Other	EHS	HR	HWLH	Other	Total
Literacy	11.8% 102	11.3% 129	11.0% 50	5.7% 21	8.5% 36	18.2% 2	11.7% 141	9.9% 149	8.7% 48	18.2% 2	10.4% 340
Numeracy	3.1% 27	2.5% 28	2.2%	0.8%	1.4% 6	0.0%	2.8% 34	1.9% 29	2.0% 11	0.0%	2.3% 74
Literacy and Numeracy	24.9% 216	21.6% 247	24.0% 109	20.9% 77	23.5% 99	27.3% 3	25.0% 300	21.3% 320	23.3% 128	27.3% 3	23.0% 751
English not first Language	4.6%	4.4% 50	2.4% 11	1.1%	0.9%	0.0%	3.6% 43	3.5% 53	2.4% 13	0.0% 0	3.3% 109
None	55.5% 481	60.2% 687	60.4% 275	71.5% 263	65.6% 277	54.5% 6	56.9% 684	63.3% 950	63.6% 349	54.5% 6	61.0% 1989
Grand Total	26.5% 866	35.0% 1141	13,9% 455	11.3% 368	12.9% 422	0.3% 11	36.8% 1202	46.0% 1501	16.8% 549	0.3% 11	3263

c) Will people within these groups or affected by these factors be more affected by the proposal, project or service than those in the general population who are not in those groups or affected by these factors?

Yes it is likely that people with literacy and/or numeracy difficulties, who also need housing support to prevent a crisis, will be more affected than those in the general population.

d) What is the proposal, project or service's impact on the factor or identified group

It is likely the impact will be that less people/households with literacy/numeracy issues can receive short term housing support to sustain or increase their independence, avoid homelessness and prevent a crisis. A lack of numeracy and literacy skills can compound vulnerabilities and increases stress levels and this factor will contribute to the likelihood of destitution.

e) What actions are to/or will be taken to avoid any negative impact or to better advance equality?

Once final savings are confirmed, the Strategic Commissioning Manager (Supporting People) will work with the provider and strategic partners to develop an implementation plan for achieving the savings, minimise the negative impacts on clients and better advance equality.

f) Provide details of the mitigation.

An implementation plan will set out the details for future clients and this will include referrals to other information and advice sources. It will be impossible to mitigate the full impact as there is no other service that provides the Home Works service. Any mitigation for current clients will include supporting them to obtain appropriate statutory assessments.

g) How will any mitigation measures be monitored?

To be completed once an implementation plan is agreed and dependent on resources allocated for this purpose. Any monitoring measures put in place will include this cohort.

4.10 Human rights - Human rights place all public authorities — under an obligation to treat you with fairness, equality, dignity, respect and autonomy. Please look at the table below to consider if your proposal, project or service may potentially interfere with a human right.

Articles	
A2	Right to life (e.g. pain relief, suicide prevention)
А3	Prohibition of torture, inhuman or degrading treatment (service users unable to consent, dignity of living circumstances)
A4	Prohibition of slavery and forced labour (e.g. safeguarding vulnerable adults)
A5	Right to liberty and security (financial abuse)
A6 &7	Rights to a fair trial; and no punishment without law (e.g. staff tribunals)
A8	Right to respect for private and family life, home and correspondence (e.g. confidentiality, access to family)
А9	Freedom of thought, conscience and religion (e.g. sacred space, culturally appropriate approaches)
A10	Freedom of expression (whistle-blowing policies)
A11	Freedom of assembly and association (e.g. recognition of trade unions)
A12	Right to marry and found a family (e.g. fertility, pregnancy)
Protocols	
P1.A1	Protection of property (service users property/belongings)
P1.A2	Right to education (e.g. access to learning, accessible information)
P1.A3	Right to free elections (Elected Members)

Part 5 – Conclusions and recommendations for decision makers

- 5.1 Summarise how this proposal/policy/strategy will show due regard for the three aims of the general duty across all the protected characteristics and ESCC additional groups.
 - Eliminate unlawful discrimination, harassment and victimisation and other conduct prohibited by the Equality Act 2010;
 - Advance equality of opportunity between people from different groups
 - Foster good relations between people from different groups

5.2 Impact assessment outcome Based on the analysis of the impact in part four mark below ('X') with a summary of your recommendation.

X	Outcome of impact assessment	Please explain your answer fully.
	A No major change – Your analysis demonstrates that the policy/strategy is robust and the evidence shows no potential for discrimination and that you have taken all appropriate opportunities to advance equality and foster good relations between groups.	If agreed, the proposals carry the potential risk of serious adverse impact for vulnerable people and families many of whom have both mental and physical health needs. Some may be eligible in terms of the Care Act. Individual circumstances are detailed in the EqIA and the assessment of impact should be applied to individuals and included in the Action Plan. The proposals are likely to have a negative impact in terms of opportunity that can be offered to people at
	B Adjust the policy/strategy – This involves taking steps to remove barriers or to better advance equality. It can mean introducing measures to mitigate the potential effect.	risk of homelessness, in respect of keeping safe and receiving support to develop the life skills and the economic wellbeing necessary to successfully access and maintain independent accommodation. There may be a risk of serious adverse impact for
х	C Continue the policy/strategy - This means adopting your proposals, despite any adverse effect or missed opportunities to advance equality, provided that it does not unlawfully discriminate.	certain individuals e.g. if they are disabled people or older/younger people who become more seriously at risk or vulnerable as a result of the proposals. The current users are more likely to be people on low incomes (and unable to source alternative accommodation in the private sector as a result; with
	D Stop and remove the policy/strategy – If there are adverse effects that are not justified and cannot be mitigated, you will want to consider stopping the	illness and long-term conditions; experience anxiety, depression or dual diagnosis; substance misuse issues. Greater risk of suicide, food and fuel poverty, increased ill-health. Increased risk of hospitalisation and possibility of offending for some individuals.

policy/strategy altogether. If a policy/strategy shows unlawful discrimination it <i>must</i> be removed or changed.	In addition, the requirement to foster good relations maybe compromised by increasing the number of people living on the streets where drug and alcohol use and crime may be associated.
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5.3 What equality monitoring, evaluation, review systems have been set up to carry out regular checks on the effects of the proposal, project or service?

This will be completed once final decisions regarding the proposals are made.

5.4 When will the amended proposal, project or service be reviewed?

June 2019

Date completed:	June 2018	Signed by (person completing)	Jude Davies
		Role of person completing	RPPR Lead
Date:	June 2018	Signed by (Manager)	Samantha Williams, Assistant Director, Planning, Performance and Engagement Adult Social Care and Health

Part 6 – Equality impact assessment action plan

If this will be filled in at a later date when proposals have been decided please tick here and fill in the summary report.

The table below should be completed using the information from the equality impact assessment to produce an action plan for the implementation of the proposals to:

- 1. Lower the negative impact, and/or
- 2. Ensure that the negative impact is legal under anti-discriminatory law, and/or
- 3. Provide an opportunity to promote equality, equal opportunity and improve relations within equality target groups, i.e. increase the positive impact
- 4. If no actions fill in separate summary sheet.

Please ensure that you update your service/business plan within the equality objectives/targets and actions identified below:

Area for improvement	Changes proposed	Lead Manager	Timescale	Resource implications	Where incorporated/flagged? (e.g. business plan/strategic plan/steering group/DMT)

6.1 Accepted Risk

From your analysis please identify any risks not addressed giving reasons and how this has been highlighted within your Directorate:

Area of Risk	Type of Risk? (Legal, Moral, Financial)	Can this be addressed at a later date? (e.g. next financial year/through a business case)	Where flagged? (e.g. business plan/strategic plan/steering group/DMT)	Lead Manager	Date resolved (if applicable)
Homelessness	Homelessness	No as reduction in service is planned for 18/19	EIA Reconciling Policy, Performance and Resources, (RPPR) DMT	Jude Davies ESHOG leads	Not applicable
Lack of suitable support to maintain independent living	Vulnerability	No as needs will arise as service reduces	EIA Reconciling Policy, Performance and Resources, (RPPR) DMT	Jude Davies	Not applicable
Increased harm and abuse from others	Safeguarding	Yes for clients who would not receive a service in future as capacity reduces	EIA Reconciling Policy, Performance and Resources, (RPPR) DMT	Jude Davies	Not applicable
Increase in safeguarding alerts	Financial	Yes	EIA Reconciling Policy, Performance and Resources, (RPPR) DMT	Jude Davies Safeguarding lead	Not applicable
Increased risk of suicide/ self-harm	Vulnerability and Safeguarding	Needs to be mitigated for current clients in Action	EIA Reconciling Policy, Performance and Resources,	Jude Davies Public Health CCGS	Not applicable

		Plan Future initiatives need to address this need	(RPPR) DMT		
Increased use of A and E and hospital admissions	Financial and vulnerability	Yes Future initiatives need to address this need	EIA Reconciling Policy, Performance and Resources, (RPPR) DMT	CCGs	Not applicable
Negative impact on hospital discharge pathways	Reputational risk Financial risk	Yes – needs to be decided whether or not reduced service prioritises this , Include in Action Plan	EIA Reconciling Policy, Performance and Resources, (RPPR) DMT	Jude Davies Public Health CCGS	Not applicable
Negative impacts on poverty, fuel and food poverty, health and well being	Moral Vulnerability	Future initiatives need to address this for those who would not access a service, Future priorities of home Works needs to address it	EIA Reconciling Policy, Performance and Resources, (RPPR) DMT	Jude Davies CCGS	Not applicable
Risk of increase in tenancy break downs	Homelessness	Future initiatives need to address this for those who would not access a service, Future priorities of home Works needs to address	Reconciling Policy, Performance and Resources, (RPPR) DMT	Jude Davies ESHOG members	Not applicable
Risk of staff leaving the service early	Business	No need to give certainty on future asap	(RPPR) DMT	Jude Davies	Not applicable

Appendix1: Case Studies

1. J

J is mainly house bound with Chronic Obstructive Pulmonary Disease (COPD) and significant mobility and mental health issues. At the point of referral J was living with his partner who also had significant long-term health issues. Due to their health conditions they were not coping with the daily household tasks or personal hygiene or opening post. The accommodation was in need of a deep clean and a 'de-clutter'. They wanted to move because their accommodation was in such a poor state. Unfortunately J's partner died, and Home Works supported him to cope with the bereavement.

Home Works supported J to access a care package to help with daily tasks; arrange a deep clean of the accommodation; apply for appropriate benefits; install Lifeline; arrange optician & chiropody home visits; look after his mental well-being; and access funding for his partner's funeral.

Without the intervention of Home Works it is likely J would have deteriorated to the point where he needed emergency ambulance and hospital services. With support he was able to stay in his accommodation and to re-establish a quality of life.

2. S

S, a single mum with three children came to Home Works with rent arrears due to the benefit cap, putting her accommodation at risk. Home Works began work on S's benefit arrears during which time S's partner moved into the flat. Soon after the support started S had a stroke, which left her disabled and for a while unable to speak, with acquired brain injury. Following the stroke S had to have heart surgery. S experienced considerable mental health issues.

Home Works supported S to access specialist mental health services; and worked with the hospital discharge and rehabilitation teams to help her move to more appropriate accommodation. They also helped her apply for adaptations; and to claim relevant benefits. During this period S also became subject to domestic abuse by her partner, who had become her carer. The partner moved out and Home Works supported S to take the necessary actions to keep her and the children safe. Home Works worked with the children's school to ensure there was a solution in place to get the children to school as they lived 1.5 miles away and S could not walk that far.

S continues to make a recovery – with improving but limited mobility, returned speech and a personal assistant to support her to carry out day to day tasks, the children are supported by a carers group and have school transport arranged. Without this intervention it is possible S would have had a significantly delayed discharge and longer recovery time and the children may have been taken into care during the immediate aftermath of the stroke.

3. Siblings

A family of three siblings (A,18, C, 21 and L, 24 years old) were referred to Home Works by the local Housing Department following a notice of eviction for rent arrears. A range of other issues were also identified: extreme hoarding; significant issues around health & safety and cleanliness; and significant and multiple debts. All siblings had depression and issues around loss following the death of their parents. They had no informal support networks or any family living nearby. None of them were able to manage simple day to day tasks, but despite this were supporting each other the best they could and were somehow maintaining their jobs and study. L, who has been diagnosed with Asperger's Syndrome, was however facing a disciplinary at work.

A safeguarding concern was raised with Adult Social Care based on L's vulnerability and the issues of self-neglect. A joint visit was arranged and Home Works then worked with the family to help resolve the interrelated issues. This included negotiating with the landlord whilst the hoarding was cleared and a support package put in place. The landlord agreed to stop the eviction and to carry out repairs to the property once it had been cleared. Home Works also liaised with the Housing Department for help with arrears and worked with Adult Social Care to access funding for a Personal Assistant for L and funding for a deep clean. Home Works contacted a local charity to fund skip hire to clear the property and secure a loan to help clear the arrears. The family was then supported to access CAB for benefits and debt advice, their GP for bereavement counselling and their local Foodbank.

The house has now been de-cluttered, deep cleaned and new furniture purchased. Repairs have been made and the landlord has agreed to a further 12 months tenancy agreement. Home Works arranged for L to receive employment support, which has meant he has been able to retain his job. Home Works has supported all three to access getting support with their mental health and have been helped to move from crisis to a position where they are now starting to rebuild and sustain their everyday lives. It is likely that without the intervention the three young people would have been evicted and started on the route into homelessness, isolation and exploitation. Central to this successful outcome was a multiagency coordinated response and the skill of staff who have worked sensitively with the family, building up trust and helping them feel in control of decision making so that they felt empowered to take control of their lives.

Appendix 2: Care Act Information and Advice

As a local authority, and under the Care Act 2014, East Sussex County Council also has a commitment to the provision of information and advice relating to care and support for all people in the county. It meets this in a number of ways including:

- Health and Social Care Connect (HSCC), Adult Social Care and Health's contact centre. There are many different ways to contact them, including phone, email, typetalk and webchat via the Council's website. HSCC's specially trained staff offer free, tailored information and advice regardless of whether or not someone qualifies for social care funding or help. This includes about residential and nursing care options, as well as up-to-date information about local and community health and care services. Anyone can ask for an assessment of their social care needs, and it's free for them to do that. They are also the first point of contact for enquiries about safeguarding, Blue Badges and provide referrals for health professionals.
- Public information leaflets; we publish and widely distribute 5 printed leaflets which cover a range of basic information about adult social care and health for people who might need it. These leaflets and accompanying factsheets, which can be given to clients in tailored situations offer clear, plain English information about options and guidance about processes and expectations of adult social care. They also include information in them as standard on how to contact HSCC and find out about local health and care services, complain or give feedback, how to report safeguarding concerns or get alternative formats. The leaflets and factsheets are available to download for free, and also in other languages, audio, large print, easy read and braille on request.

Online directories

There a range of online directories to support people to find the most appropriate care and support. These include **East Sussex 1Space** — an free online directory specialising in listing care, support and wellbeing services, which is maintained by Adult Social Care. It is mainly for adults, and is a sister site to ESCIS (see below). It was designed with the help of volunteers including service users, carers, members of the public and service providers to ensure it is easy to use and understand for both visitors looking for services and service providers registering their services. We also provide **Support with Confidence**, an accreditation scheme for providers of health and social care akin to Buy with Confidence, a Trading Standards scheme. These facilities are searchable via the council's website.

East Sussex Community Information Service (ESCIS); a computer database of local
and community information developed and managed by the Library and Information
Services of East Sussex County Council in association with Brighton and Hove Library
Service. It is a free resource for everyone. It is free to be listed and free to use. ESCIS
is a broad directory, encompassing all community information & events in East
Sussex.

In addition to the above, we work with a range of partners such as our NHS Clinical Commissioning Groups, healthcare trusts, Citizens Advice Bureaux and other voluntary sector partners to provide up-to-date and tailored information in our own factsheets and online, and we contribute to others' publications (such as a local 'Care Choices' brochure) where they are credible and distribution is wide.