

Equality Impact Assessment

Name of the proposal, project or service
Supporting People RPPR 2016-17: Sheltered Housing Schemes; Extra care Housing Schemes; Learning Disability Housing Support; Home Works

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How to use this form

Press F11 to jump from field to field in the form.

There are comments on some questions which you can view by pressing the show/hide pilcrow icon in the tool bar of Word. Some of you may use this to show paragraph and other punctuation marks:



You can delete the comments as you would for normal text, but they will not show up if you print out the form.

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 direct and indirect discrimination, harassment and victimisation and other conduct prohibited under the Act,
- advance equality of opportunity and foster good relations between those who share a “protected characteristic” and those who do not share that protected characteristic (see below for “protected characteristics”
- foster good relations between persons who share a relevant protected characteristic and persons who do not share it

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.

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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 21stCentury 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 is 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.

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

1.6.1 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.

1.6.2 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,

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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.

1.6.3 *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)

1.6.4 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.

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

2.1 What is being assessed?

a) Proposals to remove funding from:

See Appendix one for details of:

1. all sheltered housing schemes listed by service and provider
2. all extra care schemes listed by service and provider
3. 6 learning disability schemes listed by service and provider

In addition, we are looking to reduce funding to Home Works, a county wide floating support service for people aged 16-64.

b) What is the main purpose of these proposals?

The purpose of all four proposals above is to help achieve the required savings presented to Cabinet on 13th October 2015.

c) Manager(s) responsible for completing the assessment Jude Davies/Sue Dean

2.2 Who is affected by the proposal for these services?

1. Sheltered housing: current clients and staff of sheltered housing schemes will be affected including 3,445 primarily older people households living in sheltered housing as well as their carers and families.
2. Extra care: current clients and staff of extra care schemes will be affected including 262 households of primarily older people living in extra care schemes as well as their carers and families.
3. Learning disability: current clients and staff of learning disability schemes will be affected including 34 individuals living in accommodation for people with learning disabilities, as well as their carers and families.
4. Home Works floating support: current clients and staff of the Home Works service and their carers and families will be affected: a reduction by the proposed amount would impact on an estimated 850 people who are homeless or at risk of homelessness.

2.3 How will the proposals be put into practice and who is responsible for carrying these out?

All providers have been made aware of the proposals by the Supporting People team. The proposals were discussed at Cabinet on 13th October and went out to public consultation which began on 23rd October and ended on the 18th December. The process involves reviewing the consultation findings, following which recommendations will be made to members with a final decision being made by full council on the 9th February 2016.

The Health, Housing, Social Care and Probation Strategic Forum are responsible for making decisions about the Supporting People programme. East Sussex County Council's Adult Social Care Department is responsible for the budget. If the proposals are ratified, there is a minimum three month notice period on all contracts which would be implemented, where required, by the Supporting People team. (see 3.4).

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During the consultation period providers were asked to help ensure that clients and carers are informed of the proposals and receive information about how to take part. Details in para 3.4.

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

The Supporting People programme has historically been governed as a partnership across Adult Social Care, Children's Services, Health, Probation and all five of the District and Boroughs in East Sussex.

All the above partners are referrers to the services within this proposal. Referrals to Home Works can also be made by the Voluntary and Community Sector.

Some partners also work as providers e.g. Eastbourne BC and Wealden DC.

The organisations affected also work in partnership with a range of voluntary and statutory organisations in order to support clients to achieve agreed outcomes.

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

Adult Social Care will have £40 million less to spend on adult social care services by March 2019. This is in addition to the £28 million that has already been saved from services since 2013. .

The proposals are made as part of ESCC's budget planning process, **Reconciling Policy, Planning and Resources for 2016-17**. The Council and Adult Social Care's statutory duties under the **Care Act 2014** will impact these proposals as well. These duties include:

- **A general duty to promote wellbeing** (this includes personal dignity; physical and mental health and emotional well-being; protection from abuse and neglect; control by the individual over day-to-day life; participation in work, education, training or recreation; social and economic well-being; domestic, family and personal relationships; suitability of living accommodation; and the individual's contribution to society).
- **Focussing on the person and their needs**, their choices and what they want to achieve.
- Providing, arranging for **the provision of services, facilities or resources**, or taking other steps to prevent, reduce or delay the development of needs for care and support (including carers).
- Providing, or facilitating access to, **information and advice** to enable people, carers and families to take control of, and make well-informed choices about, their care and support (including independent financial advice).
- Arranging **independent advocacy** where someone has substantial difficulty being involved and there is no-one appropriate to support and represent them.
- **Parallel rights for carers and a focus on the whole family.**
- Joining up with **health and housing.**
- **Market shaping** including supporting sustainability and encouraging a variety of different types of providers to ensure people have a choice of different types of

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service. This includes independent private providers, third sector, voluntary and community based organisations, user-led and small businesses.

The Human Rights Act is also relevant (see section 4.10)

2.6 How do people access or how are people referred to the services? Please explain fully.

Sheltered housing:

Sheltered housing providers receive referrals from District and Borough Housing Departments and self-referrals in some cases.

Extra Care:

Access to extra care is managed through an allocation panel which includes representatives from ASC, Districts and Boroughs and the provider. Referrals can come from anyone but are routed via the panel. Applicants must be eligible for ASC i.e. have an assessed minimum care need of 5 hours and have a local connection. People who are buying a property within an extra care scheme do not need to have an eligible care need or local connection, although priority will usually be given to local people.

Learning Disability schemes:

All referrals come via Adult Social Care.

Home Works:

Home Works is open access. People can self-refer or be referred by a statutory or voluntary agency.

2.7 If there is a referral method how are people assessed to use services? Please explain fully.

Sheltered housing:

There is an age criteria and applicants would be expected to have housing and support needs. There are financial capital eligibility rules which vary by provider and which are not linked to Supporting People eligibility. People are assessed for financial eligibility in regards to their revenue/income in line with the Supporting People eligibility and charging policies.

Extra care:

Applicants are assessed by Adult Social Care to establish an eligible care need

Learning Disability service:

Applicants are assessed by Adult Social Care to establish an eligible care need

Home Works:

Applicants are assessed by the provider through the Home Works gateway to determine eligibility for the service based on vulnerability, need and risk of homelessness. The assessment would prioritise clients with multiple and complex needs.

2.8 How, when and where are the services provided? Please explain fully.

The accommodation based services (including sheltered housing) are provided across the five Districts and Boroughs as shown below. These services are building based with onsite staff.

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Service	Hastings	Lewes	Wealden	Rother	Eastbourne	Total
Sheltered housing	741	736	643	637	688	3,445
Learning Disability	20	2	0	0	12	34
Extra care	40	41	84	35	62	262
Total	801	779	727	672	762	3,741

N.B. the above numbers refer to households which may include more than one person.

Sheltered housing: the onsite scheme managers provide support to households to support their independence. The service is normally provided between 9-5 pm Monday to Friday. This may be full time staff or part time based on the size of the scheme.

Extra care: the onsite scheme managers provide support to households to support their independence. The service is normally provided between 9-5 pm Monday to Friday and staff work alongside the care provider who offers 24 hr onsite care.

Learning Disability schemes: the onsite scheme managers provide support to individuals with a learning disability to support their independence. The service is normally provided between 9-5 pm Monday to Friday and staff work alongside the care provider who usually offers 24 hr onsite care.

Home Works: Home Works is a county wide service covering all areas of East Sussex and delivers floating housing support to people with multiple and complex needs who are homeless or at risk of homelessness. It is normally provided between 9-7pm on working days (Bank holidays and weekends by exception). The service is usually delivered in the client's home, or in a community venue of their choice. The service aim is to support people who are homeless or at risk of homelessness to achieve and maintain suitable accommodation and build resilience.

3,867 clients accessed the Home Works service between 1/10/14 and 30/09/15

	EBC	%	HBC	%	LDC	%	RDC	%	WDC	%	Total
Client	1,133	29	1,262	33	513	13	434	11	525	14	3,867

Part 3 – Methodology, consultation, data and research used to determine impact on protected characteristics. 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
X	Service User Data	x	Contract/Supplier Monitoring Data
x	Recent Local Consultations		Data from other agencies, e.g. Police, Health, Fire and Rescue Services, third sector

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X	Complaints		Risk Assessments
X	Service User Surveys	x	Research Findings
X	Census Data	x	East Sussex Demographics
X	Previous Equality Impact Assessments		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 received

3.3 Are there any potential impacts concerning safeguarding that this assessment should take account of? Please consider any past evidence of safeguarding events or potential risks that could arise.

Service	Alert notifications to SP between 9.4.14 – 27.3.15
Sheltered housing	3
Extra care	1
Learning Disability	0
Home Works	46
Total	
Home Works provision of safeguarding reports to external agencies – Oct 2014 – Sept 2015	
External report to:	Number
Adult Social Care	28
Children's services	23
Police	32
MARAC	23
Police Hate crime	7
Police ASB	9
Total	122

The data above would indicate that there are very limited safeguarding alerts reported via onsite staff within sheltered, extra care and learning disability services so removal of that support could be felt to have a limited impact. However, the removal of the onsite presence may leave older people more vulnerable to abuse and with less opportunity to disclose abuse

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The figures for Home Works are of concern due to the large volume of people supported and the high level of vulnerability and complexity of the client group.

Comments from Safeguarding lead:

The consequences may be an increase in abuse or neglect of adults. This may be due to reduced opportunities for safeguarding issues (abuse or neglect) to be picked up by workers within those agencies, reduced opportunities for disclosure by adults at risk themselves of abuse and neglect and reduced resilience of adults to protect themselves from factors which may increase the risk of abuse and neglect.

Once safeguarding issues have been identified, there may be an increase in the number of safeguarding concerns and consequent safeguarding enquiries. Issues of abuse and neglect may become apparent at a later stage e.g. abuse may have gone on longer or have become of a more serious nature or have become normalised by adults themselves or staff working with them.

Safeguarding is now on a statutory footing with several duties within the Care Act. Making Safeguarding Personal (MSP) is a thread which runs through the Care and Support Act Statutory Guidance which supports the implementation of the new duties. MSP focuses on individualised responses to safeguarding issues and any reduction in engagement with adults themselves within the context of safeguarding could reduce opportunities to promote personalised responses. Advocacy within safeguarding is now a duty too.

Self-neglect, modern slavery and domestic abuse are included as additional types of abuse of safeguarding. Fewer opportunities to highlight these may exist in reduced or ceased services. These three types of abuse are more likely to occur in the community rather than within institutions and there is a potential risk for opportunities to be missed and abuse to continue or increase.

3.4 If you carried out any consultation or research explain what consultation has been carried out.

Full consultation results relating to these proposals can be found in 'Consultation Results: ASC Savings Proposals 2015' Report that can be found online, with copies in the Members' room and are available for public inspection at County Hall on request.

Initial engagement with providers was on the 16th September when the Head of Service for Supporting People delivered a presentation explaining the impending budget pressures across ASC, Public Health and Children's Services. It was explained to providers that Supporting People services have been identified as 'areas of search'.

Providers were then advised of the specific proposed cuts to services via a presentation on the 14th October. On 22nd October, all providers were sent:

- A letter to explain the consultation process
- A draft letter for clients
- A client briefing
- A template for the provider to record all consultation activity with clients and return to ASC
- An easy read letter for clients (where appropriate)

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The formal consultation started on 23rd October. The briefing for clients included the dates of five areas wide consultation drop in events.

The Supporting People Facebook page has advised of the consultation and drop in events including the additional ones announced 17th November and all members of the SP team added the consultation information to their e-mail signature blocks.

Meetings have also been held with:

- Mental health commissioners and operational leads
- Learning Disability commissioners and operational leads
- Heads of Housing in all five Districts and Boroughs
- Relevant ASC commissioners, including older people, dementia, PSI and carers
- A combined meeting with Heads of Housing, young people providers with Children's services representation
- Southdown Housing - provider of Home Works .
- Home Works clients (15th December)

Contact has been made or meetings held with Learning Disability Providers

3.5 What does the consultation, research and/or data indicate about the positive or negative impact of the proposals?

Key messages:

Comments from Mental Health commissioners

- Some working age clients live within sheltered housing – the onsite scheme manager is integral to their support plan for maintaining independence
- Cuts to Home Works are likely to increase homelessness – people are likely to fall under section 136 with a cost to the Trust
- Cuts to Home Works are likely to lead to an increase in safeguarding referrals
- Home Works saves on the cost of Personal Assistant packages and a reduction in available resources will have an impact on Adult Social Care costs through the mental health funding panel.

Comments from Learning Disability commissioners:

- Cuts to extra care will impact on other schemes where managers are used in other developments.
- Concern re LD cuts if costs shunt to ASC – ASC is required to make substantial savings and additional cost pressure will be caused if there is a need to pick up the shortfall through a cut to Supporting People funding.
- Costs in these services are low and fall below the ASC benchmark
- Issues re claiming additional housing benefit/service charge is dependent on positive relationships between the provider and the landlord of the service

Comments from Heads of Housing:

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- High levels of concern re impact on single homeless people due to the cut to Home Works
- Very high concern expressed about cuts to accommodation based services for mental health, single homeless, young people at risk and young mums.

Comments from Older People commissioners:

- Expressed concern re proposed changes to the model of extra care

Comments from the Provider meeting:

- Concerns expressed about loss of preventative services at a time when East Sussex Better Together are aiming to increase prevention.
- There will be a loss of experienced, skilled, trained staff who will be impossible to recruit back for future preventative services.

Public Consultation results

Supporting People services are recognised as preventative support that reduces people's reliance on statutory services. A number of comments note that the value of these services comes in part from the fact that they often used at crisis point. As a result, any cuts to this area would have a short term effect in terms of making savings, as it will just lead to cost pressures elsewhere for the Council and for other statutory services.

Comments such as:

- "Home Works provides essential preventative support and achieves outcomes across a multitude of client groups and areas. Home Works often prevents issues becoming more serious and save money ultimately more than it costs to run the service."
- "Much of SP is preventative and community based which often allows people to remain in their homes and to cope better with issues that arise. If this aspect is severely cut, then more people will lose their homes which means that more temp accommodation is required which will have high cost implications"
- "Supporting people in the community saves many hospital admissions therefore saving money in the long term."

It would be more economic to be investing in community support services, rather than removing funding. Comments such as:

- The proposal recommends a significant cut in accommodation based services. This will have a massive impact on the type of accommodation available and may force a greater level of residential or poor quality services to be commissioned. The Shared Lives Scheme is part of the proposed savings under SAILS and a recent independent report evidenced that over a year a residential care service is £26,000 more expensive than a Shared lives placement for LD clients and £8,000 for people with MH issues. It will take very few placement breakdowns or Shared

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Lives carers leaving the scheme due to financial restrictions to have a noticeable impact on the social care budget. Shared Lives is being promoted at a national level, and with the introduction of the Care Act it fits with all the key principles. They are community based, small scale, person centred and cost effective. If the suggested savings from SAILS has an impact on the Shared Lives scheme I fear that it will jeopardise its short and long-term viability.

- I work for the SAILS Shared Lives scheme, which is featured in the proposed cuts in Supporting People services. I think that it would be much more sensible to actually invest in the Shared Lives scheme. It is a model of service which can work for a wide range of people, and can be very cost effective, particularly as an alternative to residential care. Therefore investing in the Shared Lives scheme instead of reducing the budget would be a positive Invest to Save exercise.

Services in this area have already been affected by previous budget reductions. In addition, many of the people who would be affected are experiencing pressures caused by other national and local cuts to statutory services.

Reducing or removing funding would:

- Have a negative impact on people's safety, health and wellbeing
- Increase hospital admissions and make people more dependent on acute services
- Push some client groups into residential care, such as people with a learning disability living in supported living or older people living in sheltered housing
- Put financial pressure on older people living in sheltered and extra care housing, possibly forcing them back into work
- Leave older people living in sheltered and extra care housing isolated and without the safety net of regular support
- Cuts to services for people with learning disabilities would directly impact as a cost pressure on Adult Social Care.

Comments such as:

- "We would be made vulnerable here alone without the support of our warden. On the instance of a fall, heart attack, stroke."
- "I need the scheme manager to help me with my post and menus. If they can't help me with this, who will. I do not have any family or close friends who can help me."
- "I would not be able to read or deal with my post. I might get into debt because of this or miss something important"
- "If the cuts come in to place people will have nowhere to turn to and know one to help them in need"

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- “We should be there to help all types of people if we take money away from adults who have learning disabilities they won’t be able to live on their own or have to move back to families who may not be able to look after them. Which means going into care homes but people within supported living don't want that, they have independent lives in supported living.”
- “One example will be that a person will not be able to stay at their supported living accommodation if they are unwell but be compelled to go to day care settings.”

There were some comments about the national context and related spending decisions. Suggestions locally include making savings from other areas of the Council’s budget, such as the back office. People also suggest working with providers to find alternative services or to allow them to reconfigure their services to make them viable to continue. It will be important to understand the impact on client groups and individuals and the associated risks.

Comments such as:

- "Supporting people services are essential to many people who would otherwise find it very difficult to cope living independently. There are many people unable to access services without support, unable to engage within the community and who without housing support would be in a far worse position. I believe that this would trigger further decline in health and wellbeing that would mean that these people would then meet the 'essential' criteria. therefore it would be a more sound idea to have a preventative strategy."
- "Supporting People Services fund staffing at the necessary levels in accommodation based services. Cutting or reducing this is a recipe for disaster. Housing providers will not allow their properties to be left unsupervised with the various resident client groups and will close them as they will be unsafe."

Impact if the proposals went ahead

Many comments focused on the benefit the affected service provided to them or a family member and how hard, if not impossible, they would find it to cope without that support. People also talked about the help they’ve had and how it should be available to others. Many professionals explained the value services provide and how they’ve seen them permanently improve vulnerable people’s lives.

The role of housing and related support services was also recognised in terms of the wider impact it has on someone’s life. It affects many other things, like the ability to work and being part of the community.

Removing or reducing Support People services would affect many preventative services, meaning people will need more support from higher cost services. There would be greater pressure on statutory service budgets in the long term.

Other statutory services would all be affected, including health, the police and fire services. There would be cost pressures and more need for support from these services.

There would also be an economic impact on the county, with jobs being lost at many providers, tourism being affected by the community impact of the proposals and an increase in deprivation.

Preparing people if the proposals went ahead

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In terms of suggestions for helping individuals to prepare people suggested:

- The Council telling people directly how they will be affected
- Keeping people informed about what is happening
- Providing clear timescales
- Giving people time to prepare
- Being clear about the alternative services, if any, that are available
- Provide referrals to other agencies
- Being open and transparent about what it means for the service(s) they use
- Providing signposting and considering how technology can support people who no longer have access to the same level of service

In terms of suggestions for helping organisations to prepare people suggested:

- Giving them time to prepare
- Support organisations to bid for funding from other sources

Provide clear service pathways showing what is still available

Comments such as:

- “Perhaps do it gradually with plenty of notice and advice of alternatives places to go who offer the same services.”
- “Provide clear guidance as to how to manage transitions for people, what services are still available and clear eligibility criteria.”
- “The only way you will engage is to work with partners and speak to people face to face. People will not know how it will impact them until it is too late.”
- “Where services within Supporting People are removed or reduced, it’s important that alternatives including information, advice and guidance are publicised widely and are easily accessible – use of CAB / social media for example.”

Organisational & Group Responses to the Public Consultation:

Below are summaries of some comments received by letter and email from organisations about the proposed Supported people savings:

Homeless Link: Whilst in the short term cuts to housing-related support may seem like a viable way to absorb some of the worst impacts of the impending cuts, Homeless Link urges local councillors, authorities and budget holders to adopt a longer term view, accepting the case that continued investment in these services will result in considerable human and financial benefits over time. We would also like to make the case that maintaining a significant percentage of their existing services will enable them to adapt to the new ways in which they will be expected to operate, post Spending Review.

Currently the East Sussex proposals fall very heavily on Supporting People services removing a whole raft of what can be broadly characterised as preventative services, without which people’s needs will become more complex and they are likely to then present with eligible needs for ASC and the costs to the health service are likely to rapidly increase.

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Many housing-related support services assist those who are not owed a statutory housing duty. These people are often experiencing homelessness at a time of crisis, and many experience poor mental health, substance misuse and poor physical health. Services for single homeless people offer a critical source of support, without which they would otherwise be left at risk of street homelessness, worsening health and destitution.

Anchor: The letter recognises the financial pressure but raises concerns about the impact of the proposals on the scheme manager service the organisation provides to its sheltered housing schemes. A review of the scheme manager service confirmed the role is essential to providing a safe and secure environment. The scheme managers provide a proactive service to vulnerable people and can make early interventions as they know the residents well. Their presence prevents residents needing higher levels of social care support and enables earlier discharge from hospitals. They also have a role in helping people to maintain their independence and stopping them becoming isolated. The organisation feels that the proposals would affect the quality of service it offers and could have financial consequences for residents. The consultation has created a mix of fear, anxiety and anger among residents.

Lewes & District Seniors forum Removing the Supporting People will take away valuable assistance and is likely to lead to an increasing demand on the voluntary sector even as it also faces cuts to Council funding. The email also notes the issue with bed-blocking and the reducing funding for adult social care services.

Saxon Weald : The letter says the organisation is disappointed by the proposal to remove Supporting People funding from extra care schemes. The success of the model is largely defined by the on-site presence of care and support, which supports independent living and decreases the need for statutory services. It provides information on the value of the scheme it provides in East Sussex. If the proposals went ahead the organisation would be forced to remove these valuable support services and reduce the amount of time scheme managers are employed on site. The STEPS service would not be able to replace this. This will affect residents' wellbeing and risks reducing independence and creating a residential environment. The Council and the organisation have invested significantly in the extra care schemes in East Sussex and the low cost is great value for money compared to care home alternatives.

Wealden District Council: The letter recognises the difficult choices the Council has to make, although it raises concerns about the potential impact of cuts on its residents. It also notes that adult social care seems to be hardest hit and asks whether other areas of the Council could be required to take a larger cut in order to protect the most vulnerable. It welcomes the way the Supporting People team is working with partners to mitigate savings where they can and says this ongoing dialogue needs to continue. In terms of the proposed areas of savings, it says that Supporting People provides support to the most vulnerable. Wealden has access to county-wide services and there two services in the area that would be affected. For one service there are major concerns about if it will be able to continue. In terms of sheltered housing and extra care, the letter welcomes the continued funding of floating support but says this cannot replace on-site support. Savings in this area will have a direct impact on homelessness in the area and also create additional costs to the organisation. The voluntary sector savings are described as disappointing, with particular concern raised about

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losing services that prevent interactions with statutory services such as health, housing and care.

Lewes District Churches Homelink The letter says that Home Works is often a key support to its clients and praises the expertise, conscientiousness and dedication of the staff. It explains the role of the charity in helping homeless people into accommodation and the role Home Works plays in helping them develop life skills. Removing or reducing the support the service offers could lead to people becoming homeless.

Eastbourne Homes The letter says the proposed loss of Supporting People funding for sheltered housing mean the organisation will have to review how services are provided to residents and how they are paid for. The organisation is committed to retaining in an onsite service as removing it would impact negatively on residents (increasing their isolation and vulnerability) and would increase hospital admissions and the length of stays. The letter addresses the value of the Home Works service in providing effective services to the vulnerable and in providing early intervention to prevent homelessness.

Full consultation results relating to these proposals can be found in 'Consultation Results: ASC Savings Proposals 2015' Report that can be found online, with copies in the Members' room and are available for public inspection at County Hall on request.

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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?**

The overall population of East Sussex is **527,209** (2011 Census data) and is projected to continue increasing over the next few years. The population by age breakdown for East Sussex is:

Age	Population
15-29	83,791
30-44	90,220
45-64	147,613
65+	120,722

People are living longer and by 2020, it is estimated that around 38% of the UK population will be aged 50 plus and in East Sussex the figure is likely to be as high as 50%.

We know that East Sussex has a higher than average older population with around 23% of people aged over 65, compared to the national average of 16%. There are 228,881 people aged 50+ (43.4%) in East Sussex, and 20,022 (3.8%) of these are aged over 85 – East Sussex has one of the highest populations of people aged 85+ in the UK. (2011 mid-year estimates, based on 2011 Census data). The highest percentage of people over 65 years of age is in Rother, where the figure is 28.6% of the total East Sussex population.

b) How is this protected characteristic reflected in the population of those impacted by the proposals?**Sheltered housing:**

Supporting People do not hold client specific data however a profile of people living in sheltered housing schemes conducted during April/May 2015 shows that 85% of residents are aged 65 and over and 19% are aged 85 and over. The profile is similar in each housing authority. Lewes has the highest percentage of residents aged 65 and over (89%); Eastbourne has the highest percentage of residents aged 85 and over (22%), followed by Wealden (21%). Hastings has the lowest percentage of residents aged 65 and over (76%) and the lowest percentage of residents aged 85 and over (16.5%).

Extra care:

Supporting People do not hold client specific data however a profile of people living in 4 extra care schemes in 2014 shows the following:

Scheme	Under 60 %	60-69 %	70-79 %	80-89 %	90+ %
Cranbrook	8	23	33	23	13
Margaret House	2	7	30	42	19
Downlands	0	11	34	29	27
Newington Court	7	6	19	50	19

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Learning Disability services:

Supporting People do not hold data on the client group within these services so are unable to identify the impact on this protected characteristic.

Home Works:

Age range	EBC	HBC	LDC	RDC	WDC	Total	%
16-29	375	434	181	162	170	1,322	34.2
30-44	393	411	159	107	156	1,226	31.7
45-64	36	417	173	165	199	1,319	34.1
Total	1133	1262	513	434	525	3,867	100

The above data shows a profile of the protected characteristic age of all clients supported by Home Works between 1st October 2014 and 30th September 2015. The profile indicates that the service is delivered equitably across the age ranges. The proposal is to reduce funding to the overall service and this would be equitable across all age ranges.

c) Will people with the protected characteristic be more affected by the proposals than those in the general population who do not share that protected characteristic?

Sheltered housing:

23% of the population of East Sussex are aged 65 and over. 85% of people affected by the proposal for sheltered housing are aged 65 and over so people with the protected characteristic i.e. older people will be more affected than the general population.

Extra care:

Yes – the above profile shows that over 90% of the people affected are aged 65 and over.

Learning Disability services:

Not known – see above

Home Works:

Yes.

15-29 year olds make up 15.89% of the general population and 34.2% of Home Works clients are 16-29 yrs old.

30-44 year olds make up 17.11% of the general population and 31.7% of Home Works clients are 30-44.

45-64 year olds make up 28% of the general population and 34.1% of Home Works clients are in that age bracket.

This means there is an overall negative impact from reducing the service

d) What are the proposals' impacts on different ages/age groups?

Sheltered housing:

The impact will be negative on all ages living in sheltered housing as the removal of the onsite scheme manager will impact on all older people equally. 15% of the residents are under 65 and again the impact will be consistent across the age ranges. The case study

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below demonstrates the impact sheltered housing can have on clients and outcomes achieved.

“Mrs H is in her 70’s and suffers from short-term memory loss. Her sheltered housing service provides practical support to help her remember everyday challenges. Examples of their help includes installing a hook for her key; prompting her to take her medication; reminding her daily of her routine and any appointments; and supporting her to daily self-check her pendant alarm so she remembers how to use it.

The service has worked with Mrs H’s sister to purchase a freezer so she can eat a hot, nutritional meal daily. Mrs H’s sister deals with her finances and the service ensures her sister knows about rent and service charge changes. Mrs H is actively supported to engage with on-site activities so she can continue to enjoy social interaction. Mrs H continues to live as independently as possible; she now regularly takes her medication and her mood has lifted to what it previously was”

Extra care:

The impact will be the same on all ages living in extra care as the removal of the onsite scheme manager will impact on all older people equally.

Learning Disability:

The impact will be the same on all ages within these services as the removal of the onsite scheme manager will impact on all residents equally

Home Works:

The impact will be broadly the same on people of all ages as removal of support to people who are homeless or at risk of homelessness is not age related, however there could be an assumption that people aged 16-18 are at more significant risk. Of the above cohort, 167 are aged 16-18.

The case study below demonstrates the impact Home Works has and outcomes achieved.

S was an anxious young man with Asperger’s who, because his Asperger’s had made it difficult to manage shift changes, lost his job. His landlady would not accept housing benefit so S was now in rent arrears and had received a notice to quit. S struggling to claim benefits resulting in no income and was unable to buy food so he was reliant on food bank vouchers.

Home Works supported and coached to sort out his benefits and to receive a back payment. They worked with his landlady to allow him more time to find a new property and helped him to use digital communication to find a flat. In addition they helped him to obtain a deposit and rent in advance; to understand landlord and tenant responsibilities; and to obtain volunteering opportunities.

S was referred to a Supported Employment Service and began to research Open University (OU) on-line courses. He also researched ways to better understand and manage his Asperger’s.

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S secured a new flat and a new job. He learned about low pay and benefits and as a result he now receives Working Tax credit and housing benefit. He is linked into an Asperger's support group and has re-established a good relationship with his GP and family. S is applying to the OU to pursue a degree and his well-being has greatly benefited from digital inclusion coaching.

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

Sheltered housing:

Residents living in sheltered housing will become eligible for a floating support service from either Home Works (16-64 yrs) or STEPS (65 and over) to address housing support needs. These services would visit eligible people in their home. These services can advise and signpost vulnerable people to other available provision, however funding reductions will impact on availability of a range of services. Within sheltered housing, there will not be a general information and advice service and promotion of well-being for all residents unless provided through housing management. Services are unlikely to be able to support general social activities and there will be a reduction in the impetus for providers to use the buildings as a community hub. Providers will be advised to refer people who may be eligible for support from Adult Social Care.

Extra care:

Residents living in extra care will become eligible for a floating support service from either Home Works (16-64 yrs) or STEPS (65 and over) to address housing support needs. These services would visit eligible people in their home. These services can advise and signpost vulnerable people to other available provision, however funding reductions will impact on availability of a range of services. Within extra care, there will not be a general information and advice service and promotion of well-being for all residents unless provided through the onsite care team or housing management. Services are unlikely to be able to support general social activities and there will be a reduction in the impetus for providers to use the buildings as a community hub. Providers will be advised to refer people who may be eligible for support from Adult Social Care.

Learning Disability services:

Residents living in learning disability schemes will become eligible for a floating support service from either Home Works (16-64 yrs) or STEPS (65 and over) to address housing support needs. These services would visit eligible people in their home. These services can advise and signpost vulnerable people to other available provision, however funding reductions will impact on availability of a range of services.

Home Works:

The service will reduce gradually and the loss of funding can be managed over a period of months which means that as people move on from the service they will not be replaced. However, it should be noted that Home Works is already working to mitigate the loss of Reconnect, a £1m floating support service which was de-commissioned in the last savings round i.e. July 2014. It is now proposed that Home Works will act as mitigation for cuts to

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some of the above services, and other cuts proposed within the current consultation will impact on demand for Home Works e.g. loss of 83 units of accommodation for people who are single homeless with complex needs or who have mental health issues. Providers will be advised to refer people who may be eligible for support from Adult Social Care.

f) Provide details of the mitigation.

See above

g) How will any mitigation measures be monitored?

Progress will be monitored re:

- informing clients and carers
- numbers of referrals for independent advocacy or assessment and support planning (Commissioning Team, during the notice period)
- Referrals to Home Works and STEPS are monitored by referral source so we will be able to see the increase in referrals from sheltered housing, extra care and learning disability services. The transition plan for reducing Home Works can be monitored. The service will monitor levels of new referrals and those who cannot be supported due to restricted capacity.
- Monitoring measures will be developed in conjunction with the ESBT Programme and associated work streams as they develop and go live to identify patterns in crisis intervention; hospital re-admissions; and patterns of in demand for health and social care support.; and carer's assessments and personal budgets; (ASC PPE/Strategy and Commissioning)
- including impact on Urgent Care Programme- the strategic plan to develop integrated urgent care pathway (this includes increase in 7 day discharges) that incorporates voluntary sector supported discharge services that ensures frail older people are not admitted to hospital unnecessarily (Commissioning Team)
- Qualitative feedback on specific areas to be sourced through a combination of e.g. targeted ASC Listening to You customer satisfaction surveys; focus groups; organisational feedback as necessary. ((ASC PPE/Strategy and Commissioning)

4.2 Disability: Testing of disproportionate, negative, neutral or positive impact.

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

General population data indicates that 20% of population were identified as having a long term condition or disability

b) How is this protected characteristic reflected in the population of those impacted by the proposals?

Sheltered housing:

53% of the people profiled in April/May 2015 indicated that they have a disability and 64% indicated they have one or more long term conditions. In addition, 40% reported issues with mobility.

Extra Care:

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Percentages below relate to average prevalence of each condition as reported by scheme managers. The extra care commissioner was asked for information on anyone with a learning disability in these schemes but information was not available.

Service	Chronic illness %	Mental health %	Physical disability %	Sensory impairment %
Cranbrook	14	31	50	5
Margaret House	31	18	45	6
Downlands	14	37	43	7
Newington Court	34	15	45	6

Learning Disability:

100% of people living in these services will have a learning disability. We do not hold client specific data for these services but are aware that the nature of the client group means there are likely to be additional long term conditions impacting on people using the services.

Home Works:

26% of people receiving a Home Works service between October 1st 2014 and September 30 2015 reported having a physical or sensory disability. 6% have a learning disability. 49% report having a mental health problem.

61% of people assessed between 1st January 2015 and 30th September 2015 have one or more long term conditions.

c) Will people with the protected characteristic be more affected by the proposals than those in the general population who do not share that protected characteristic?

Yes. In the service specific data provided it is clear that for all four affected service areas there is a significant over representation of this protected characteristic.

d) What are the proposals' impacts on people who have a disability?

Sheltered housing:

The removal of funding from sheltered housing may result in the removal of the onsite scheme manager which will impact on the outcomes currently achieved by services.

In 2014/15, from a profile of 1166 people living in sheltered housing, 681 people were supported to be manage their physical health and 171 to better manage their mental health, 558 to maximise their income and 514 were supported to acquire and use aids and adaptations to support their independence. Although we do not hold specific data to evidence this it is reasonable to assume that people with sensory/physical disabilities benefited from having a relationship with the onsite scheme manager which helped them to achieve the above outcomes as well as reducing isolation and maintaining and improving their wellbeing.

Extra care:

The removal of funding from extra care housing may result in the removal of the onsite scheme manager which will impact on the outcomes currently achieved by services.

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In 2013/14, out of a sample of 108 clients living in extra care housing (and where a need was identified) 91% better managed their physical health.

A reduction in onsite resource will affect the ability of the service provider to address identified housing support needs.

Learning Disability:

The potential removal on onsite housing support will reduce the resources available to support people with communication issues and impact their ability to achieve outcomes.

Home Works:

Data from July 2014 to March 2015 indicates that of 1,448 people who needed support to better manage their physical health, 98% achieved the outcome and for 1,475 people who needed support to better manage their mental health, 99% achieved this outcome. In addition for this cohort, 97% maintained or secured their accommodation.

In addition, 560 people needed support to obtain an aid/adaptation to live independently and 99% achieved this outcome.

A reduction to Home Works means that less people will benefit from the outcomes that this service can deliver in respect of independent living skills.

For all the above services there is a potential for further negative impact as a result of the combined effects of wider cuts across services.

e) What actions will be taken to avoid any negative impact or to better advance equality?**Sheltered housing:**

As explained above, people in sheltered housing will be able to access floating support through either STEPs or Home Works, as age appropriate.

In addition, commissioners are working with providers to try and maintain an onsite scheme manager service using alternative funding streams building on the housing management rental income.

There is no reason for these budget reductions to mean sheltered schemes cannot continue to have an available alarm system for residents to access emergency support 24/7.

Extra care:

As explained above, people in extra care housing will be able to access floating support through either STEPs or Home Works, as age appropriate.

In addition, the landlord is also the service provider so is able to apply for increased funding building on the housing management rental income to try and sustain an onsite scheme manager service.

Additionally, the schemes have a 24 hour on site care provision which will mitigate the impact of this reduction. It is not possible to disaggregate the contribution made by care and housing support providers to achievement of outcomes within these services.

Learning Disability schemes:

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As explained above, people in learning disability services will be able to access floating support through either STEPs or Home Works, as age appropriate. However both providers and Learning Disability commissioners have expressed concern that clients with substantial learning disabilities will find it difficult to engage with floating support

Commissioners will work with the providers to aim to maximise rental income to minimise the impact.

In addition, people with eligible care needs will continue to receive a care service onsite.

Home Works:

The services has been designed to meet the housing support needs of vulnerable people, including those who have a disability.

The provider will continue to be required to:

- Operate a fair access, fair exit, and equality and inclusion policy. The policy will be consistent with requirements of the Supporting People Quality Assessment Framework.
- Ensure they have the operational framework in place to meet the housing support needs of their clients which includes the most challenging vulnerable people including offenders and people with complex, challenging and/or multiple support needs and parents with child safeguarding issues.
- Successfully assess and meet the specific housing support needs of all individuals including people who have communication difficulties and people with disabilities including people with a sensory impairment (as defined in the Disability Discrimination Act 2005).
- Develop an Equality Action Plan.
- Record incidences of harassment.

f) Provide details of any mitigation.

See above

g) How will any mitigation measures be monitored?

Sheltered housing:

Referrals can be monitored for Home Works and STEPs to see whether services are accessing support from them.

Providers and commissioners will remain in contact throughout the period to contract end and discussions will be continued in terms of rental levels achieved.

Extra care:

Referrals can be monitored for Home Works and STEPs to see whether services are accessing support from them.

Learning Disability schemes:

Referrals can be monitored for Home Works and STEPs to see whether services are accessing support from them.

Home Works:

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Monitoring will be carried out through regular operational meetings with providers and in line with the Supporting People monitoring and review policy.

Progress will also be monitored re:

- informing clients and carers
- numbers of referrals for independent advocacy or assessment and support planning (Commissioning Team, during the notice period)
- Monitoring measures will be developed in conjunction with the ESBT Programme and associated work streams as they develop and go live to identify patterns in crisis intervention; hospital re-admissions; and patterns of in demand for health and social care support.; and carer's assessments and personal budgets; (ASC PPE/Strategy and Commissioning)
- include impact on Urgent Care Programme- the strategic plan to develop integrated urgent care pathway (this includes increase in 7 day discharges) that incorporates voluntary sector supported discharge services that ensures frail older people are not admitted to hospital unnecessarily (Commissioning Team)
- Qualitative feedback on specific areas to be sourced through a combination of e.g. targeted ASC Listening to You customer satisfaction surveys: focus groups; organisational feedback as necessary. ((ASC PPE/Strategy and Commissioning)

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

The overall population of East Sussex is 527,209 (2011 Census data) and is projected to continue increasing over the next few years. The population aged 65+ (males) and 60+ (females) by ethnic group for East Sussex is shown in the table in Section 4.1 above. Census figures below demonstrate ethnic diversity in the area as 8.3% overall. Increases are particularly in the 'White other' and 'mixed' categories reflecting East European and other white groups migration and other societal changes. Largest overall minority populations are 'White other' and 'Asian and Asian British'.

Ethnic group in 2011 by districts

Ethnicity	All people	British and Northern Irish	Irish	Gypsy or Irish Traveller	Other White	All Mixed	All Asian or Asian British	All Black or Black British	Other ethnic group
Geography									
England & Wales	100	80.5	0.9	0.1	4.4	2.2	7.5	3.3	1
South East	100	85.2	0.9	0.2	4.4	1.9	5.2	1.6	0.6
East Sussex	100	91.7	0.8	0.2	3.4	1.4	1.7	0.6	0.3
Eastbourne	100	87.4	1	0.1	5.6	1.8	2.8	0.8	0.5
Hastings	100	89.3	0.8	0.2	3.5	2.2	2.4	1.2	0.5
Lewes	100	92.5	0.8	0.1	3.2	1.3	1.4	0.4	0.3
Rother	100	94.1	0.7	0.1	2.1	1.1	1.2	0.3	0.2
Wealden	100	93.8	0.6	0.2	2.8	1	1.2	0.2	0.2

Ethnic group in 2011 by districts (%)

Ethnicity	All people	British and Northern Irish	Irish	Gypsy or Irish Traveller	Other White	All Mixed	All Asian or Asian British	All Black or Black British	Other ethnic group
Geography									
England & Wales	56075912	45134686	531087	57680	2485942	1224400	4213531	1864890	563
South East	8634750	7358998	73571	14542	380709	167764	452042	136013	51
East Sussex	526671	482769	3966	815	17872	7473	9143	2912	1
Eastbourne	99412	86903	978	66	5561	1791	2795	783	

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Hastings	90254	80624	702	150	3155	1948	2126	1065	
Lewes	97502	90218	757	97	3087	1275	1400	416	
Rother	90588	85279	596	134	1942	1031	1103	305	
Wealden	148915	139745	933	368	4127	1428	1719	343	

b) How is this protected characteristic reflected in the population of those impacted by the proposals?

Sheltered housing:

We do not collect ethnicity data for this cohort of people.

Extra care:

Ethnic diversity in the four profiled extra care schemes ranges between 0% and 5% compared to 8.3% within the East Sussex population. We are unable to compare with a similar age profile as area data is not supplied but this is an underrepresentation when compared with East Sussex data for all ages.

Learning Disability services:

We do not collect ethnicity data for this cohort of people.

Home Works:

Within Home Works, ethnic diversity is 14.2% compared with 8.3% of the East Sussex population (Census 2011). Home Works data covers people aged 16-64 and is as detailed below

Ethnicity

Ethnicity	Grand Total	%
Asian/Asian British: Bangladeshi	2	0.1%
Asian/Asian British: Indian	16	0.4%
Asian/Asian British: Other	43	1.1%
Asian/Asian British: Pakistani	5	0.1%
Black/Black British: African	53	1.4%
Black/Black British: Caribbean	13	0.3%
Black/Black British: Other	11	0.3%
Chinese/Other ethnic group:Chinese	9	0.2%
Did not wish to disclose	223	5.8%
Gypsy/Irish Traveller	40	1.0%
Mixed: Other	28	0.7%
Mixed: White & Asian	21	0.5%
Mixed: White & Black African	15	0.4%

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Mixed: White & Black Caribbean	38	1.0%
White: British	3132	81.0%
White: Irish	28	0.7%
White: Other	190	4.9%
Grand Total	3867	

c) Will people with the protected characteristic be more affected by the proposals than those in the general population who do not share that protected characteristic?

The information above shows that we are unable to comment on sheltered housing or learning disability services.

For extra care, there would not appear to be an impact on people with this protected characteristic.

For Home Works, the overrepresentation of ethnic diversity would indicate that they will be disproportionately affected.

d) What are the proposals' impacts on those who are from different ethnic backgrounds?

The reduction in the Home Works service will be the same as for the general population in terms of loss of housing support however due to the diversity of the user group the impact is disproportionate for people from minority ethnic backgrounds.

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

Home Works will continue to be required to:

- Operate a fair access, fair exit, and equality and inclusion policy. The policy will be consistent with requirements of the Supporting People Quality Assessment Framework.
- Successfully assess and meet the specific housing support needs of all individuals and including Black and minority ethnic people and people for whom English is not their first language
- Maintain an Equality Action Plan.
- Record incidences of harassment.
- Ensure access to appropriate translation, signing and interpreting services and tools such as "Google translate" as required by an individual.
- Ensure social and educational activities are culturally appropriate and reflect and celebrate the diverse nature of the client group.

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f) Provide details of any mitigation.

See above

g) How will any mitigation measures be monitored?

- Monitoring will be carried out through regular operational meetings with providers and in line with the Supporting People monitoring and review policy.
- Monitoring measures will be developed in conjunction with the ESBT Programme and associated work streams as they develop and go live to identify patterns in crisis intervention; hospital re-admissions; and patterns of in demand for health and social care support.; and carer's assessments and personal budgets; (ASC PPE/Strategy and Commissioning)
- including impact on Urgent Care Programme- the strategic plan to develop integrated urgent care pathway (this includes increase in 7 day discharges) that incorporates voluntary sector supported discharge services that ensures frail older people are not admitted to hospital unnecessarily (Commissioning Team)
- Qualitative feedback on specific areas to be sourced through a combination of e.g. targeted ASC Listening to You customer satisfaction surveys: focus groups; organisational feedback as necessary. ((ASC PPE/Strategy and Commissioning)

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

People affected by these proposals will not be specifically impacted on the basis of these protected characteristics.

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

People affected by these proposals will not be specifically impacted on the basis of these protected characteristics.

4.6 Pregnancy and maternity: Testing of disproportionate, negative, neutral or positive impact.

People affected by these proposals will not be specifically impacted on the basis of these protected characteristics.

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

People affected by these proposals will not be specifically impacted on the basis of these protected characteristics.

4.8 Sexual Orientation - Gay, Lesbian, Bisexual and Heterosexual: Testing of disproportionate, negative, neutral or positive impact.

People affected by these proposals will not be specifically impacted on the basis of these protected characteristics.

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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?

Population by age groups and gender in 2011

Age	All people	0-14	15-29	30-44	45-64	65+
Geography						
England and Wales	56075912	9891138	11183239	11515165	14263297	9223073
South East	8634750	1535168	1604028	1761278	2252256	1482020
East Sussex	526671	84910	83732	90763	147503	119763
Eastbourne	99412	15574	18407	18195	24933	22303
Hastings	90254	15659	17149	17677	24368	15401
Lewes	97502	15832	14854	16907	27755	22154
Rother	90588	13214	12047	13026	26538	25763
Wealden	148915	24631	21275	24958	43909	34142

Population by age groups and gender in 2011(%)

Age	All people	0-14	15-29	30-44	45-64	65+
Geography						
England and Wales	100	17.6	19.9	20.5	25.4	16.4
South East	100	17.8	18.6	20.4	26.1	17.2
East Sussex	100	16.1	15.9	17.2	28	22.7
Eastbourne	100	15.7	18.5	18.3	25.1	22.4
Hastings	100	17.3	19	19.6	27	17.1
Lewes	100	16.2	15.2	17.3	28.5	22.7
Rother	100	14.6	13.3	14.4	29.3	28.4
Wealden	100	16.5	14.3	16.8	29.5	22.9

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b) How is this factor reflected in the population of those impacted by the proposals?

Sheltered housing:

58.5% of sheltered housing is provided within Lewes, Wealden and Rother which are primarily rural areas.

Extra care:

The only extra care scheme situated in a truly rural area is Newington Court.

Learning Disability schemes:

All these services are based in urban areas.

Home Works:

The above table shows that 43% of the population of East Sussex who are aged 16-65 live in rural areas of Lewes, Rother and Wealden. Home Works data shows that between 1/10/14 and 30/09/15, 38% of clients supported lived in those areas.

c) Will people affected by these rurality be more affected by the proposal, project or service than those in the general population who are not living in rural areas?

Sheltered housing:

The loss of sheltered housing onsite support in rural areas will potentially have a disproportionate impact in that the services are encouraged to operate a hub model for older people in the local community and include local older people in scheme activities. The services are also encouraged to deliver/host health and wellbeing activities open to the local community. If these services cease, there will be a disproportionate impact as alternative services will be limited or non-existent in most rural areas.

Extra care:

People living in the one rural scheme will be affected as per sheltered housing above

Learning disability schemes:

Not applicable

Home Works:

Home Works is a floating support service which is delivered to people in their own homes or in the area where they live. A reduction in service would mean that the level of service to rural areas would reduce but only in proportion to urban areas so there is not a disproportionate impact. However, lack of alternative support is likely to be more of an issue in rural areas where services are limited and travel is costly and often problematic.

We do not expect changes to the Home Works service to have a disproportionate impact on people living in rural areas.

d) What are the proposals' impacts on rural populations?

Sheltered housing/extra care:

See above.

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Learning Disability:

Not applicable

Home Works:

See above

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

As detailed above, sheltered providers are working to try and maintain an onsite service. If this is successful, the impact of the cuts will be minimal.

If services are reduced in rural areas there is no identified mitigation beyond the use of STEPS for specific short term housing support. Commissioners are unable to replace the loss of activities and wellbeing activities. The cumulative impact of other savings proposal to the Commissioning Grants Prospectus will also potentially impact on this cohort of people.

Home Works:

The Home Works service will continue to be inclusive and open to everyone who needs housing support to live independently, including people in rural areas.

As there will be a reduced service, less people can be seen in total across East Sussex. However, the service will continue to be required to:

- Operate a fair access, fair exit, and equality and inclusion policy. The policy will be consistent with requirements of the Supporting People Quality Assessment Framework.
- Successfully assess and meet the specific housing support needs of all individuals and including people who live in rural and/or remote areas.
- Maintain an Equality Action Plan.

f) Provide details of the mitigation.

As above

g) How will any mitigation measures be monitored?

- Monitoring measures will be developed in conjunction with the ESBT Programme and associated work streams as they develop and go live to identify patterns in crisis intervention; hospital re-admissions; and patterns of in demand for health and social care support.; and carer's assessments and personal budgets; (ASC PPE/Strategy and Commissioning)
- including impact on Urgent Care Programme- the strategic plan to develop integrated urgent care pathway (this includes increase in 7 day discharges) that incorporates voluntary sector supported discharge services that ensures frail older people are not admitted to hospital unnecessarily (Commissioning Team)

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- Qualitative feedback on specific areas to be sourced through a combination of e.g. targeted ASC Listening to You customer satisfaction surveys: focus groups; organisational feedback as necessary. ((ASC PPE/Strategy and Commissioning)

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4.9.2 Carers**a) How are carers reflected in the County/District/ Borough?**

Provision of unpaid care in 2011 - districts

Provision unpaid care	All people	People provides no unpaid care	People provide unpaid care	Provides 1 to 19 hours unpaid care a week	Provides 20 to 49 hours unpaid care a week	Provides 50 or more hours unpaid care a week
Geography						
England & Wales	56075912	50275666	5800246	3665072	775189	1359985
South East	8634750	7787397	847353	577114	96883	173356
East Sussex	526671	467262	59409	39537	6745	13127
Eastbourne	99412	88894	10518	6678	1261	2579
Hastings	90254	80812	9442	5708	1321	2413
Lewes	97502	86001	11501	8000	1197	2304
Rother	90588	79327	11261	7279	1250	2732
Wealden	148915	132228	16687	11872	1716	3099

Provision of unpaid care in 2011 – districts (%)

Provision unpaid care	All people	People provides no unpaid care	People provide unpaid care	Provides 1 to 19 hours unpaid care a week	Provides 20 to 49 hours unpaid care a week	Provides 50 or more hours unpaid care a week
Geography						
England & Wales	100	89.7	10.3	6.5	1.4	2.4
South East	100	90.2	9.8	6.7	1.1	2
East Sussex	100	88.7	11.3	7.5	1.3	2.5
Eastbourne	100	89.4	10.6	6.7	1.3	2.6
Hastings	100	89.5	10.5	6.3	1.5	2.7
Lewes	100	88.2	11.8	8.2	1.2	2.4
Rother	100	87.6	12.4	8	1.4	3

Nov 2011

Wealden	100	88.8	11.2	8	1.2	2.1
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b) How are carer's reflected in the population of those impacted by the proposals?

Sheltered housing:

Our profile data indicates that 5% of people living within sheltered housing provide care for another person. It also indicates that 25% of people have a carer, although we are unable to identify whether this is paid or unpaid.

Extra care:

Using a profile of three extra care schemes, in Cranbrook, out of 75 residents, 20 cared for another person. In Margaret House, out of 45 residents, 7 cared for another person and in Downlands out of 47 residents 3 cared for another person.

Learning Disability schemes:

Supporting People do not hold this data for residents in these schemes.

Home Works:

In the period from 1/10/14 to 30/9/15, 8% of Home Works clients cared for another person. 20% have a carer (paid or unpaid).

11% of all people in the county provide unpaid care

c) Will carers be more affected by the proposals than the general population?

Sheltered housing:

Not from the data we have access to.

Extra care:

The above data would indicate that 18% are carers which would be higher than the county average.

Learning Disability schemes:

N/K

Home Works:

No

d) What are the proposals' impacts on carers?

Sheltered housing:

A reduction in on site housing support should not significantly impact on carers as scheme managers do not provide care. There may be a perception that older people are more vulnerable without an onsite presence which may raise concerns for carers.

Extra care:

Nov 2011

A reduction in on site housing support should not significantly impact on carers as scheme managers do not provide care. There will continue to be an onsite 24/7 care provision.

Learning Disability schemes:

N/K

Home Works:

The service reduction would not be disproportionate in terms of the population however; many of Home Works clients have significant complex and challenging needs. Where support is not available the impact on carers of any deterioration in that individual's health wellbeing could be significant. People unable to access this service are likely to place higher demands on their carers.

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

None – no significant impact identified

Extra care:

None – no significant impact identified

Learning Disability schemes:

N/K

Home Works:

We do not expect changes to the floating support services to have a disproportionate impact on carers.

f) Provide details of the mitigation.**Sheltered housing:**

None identified

Extra care:

None identified

Learning Disability schemes:

n/k

Home Works:

None identified

g) How will any mitigation measures be monitored?**Sheltered housing:**

n/a

Extra care:

Nov 2011

n/a

Learning Disability schemes:

n/a

Home Works:

n/a

Nov 2011

4.9.3 People on low incomes**a) How are these groups/factors reflected in the County/District/ Borough?**

In East Sussex 28.7% of households have an income below 60% of the national median (ESIF) This means that 71.3% do not

b) How is this factor reflected in the population of those impacted by the proposals?**Sheltered housing:**

Our financial data would indicate that around 78.5% of people living in sheltered housing have an income low enough to qualify for Supporting People subsidy. This usually means they are eligible for Housing Benefit. People who are not eligible for subsidy have to pay their charge and if the service ends this cohort will also be impacted negatively. If the charge is increased then this cohort would have to find the increase from their income.

Extra care:

Supporting People do not hold this data

Learning Disability schemes:

Supporting People do not hold specific data for these services however; all residents have a level of ASC funding which would indicate they have had a financial assessment and are eligible for ASC funding.

Home Works:

Out of a profile of 3,867 people, 305 i.e. 7.89% receive full time paid income. Of the remainder, 521 receive a work related benefit; 1,105 receive child tax credits, and 272 receive working tax credit. Other benefits are detailed below

***Clients can receive multiple benefits; the average number of benefits received by a Home Works client is 3.**

Type of Benefit	Grand Total	%
Attendance Allowance	2	0.1%
Carers Allowance	147	3.8%
Child Benefit	1165	30.1%
Child Tax Credit	1105	28.6%
Council Tax Support	1129	29.2%
Disability Premiums	5	0.1%
Discretionary Housing Payment	7	0.2%
Full time Employment	240	6.2%
Housing Benefit	1649	42.6%
Income Support	570	14.7%

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Type of Benefit	Grand Total	%
JSA	521	13.5%
Maintenance Payments (CSA)	20	0.5%
Maternity Allowance	23	0.6%
Other	179	4.6%
Part time employment	302	7.8%
Pension Credit	46	1.2%
Private/Occupational Pension	63	1.6%
Self-employed - Full time	21	0.5%
Self-employed - Part time	24	0.6%
Severe Disability Premium	20	0.5%
Severe Disablement Allowance	22	0.6%
State Pension	24	0.6%
Statutory Maternity Pay	18	0.5%
Statutory Sick Pay	40	1.0%
Universal Credit	1	0.0%
Working Tax Credit	272	7.0%
DLA Care component	790	20.4%
DLA Mobility component	663	17.1%
ESA (Assessment phase)	575	14.9%
ESA (Support group)	967	25.0%
ESA (Work related activity group)	257	6.6%
Incapacity Benefit	20	0.5%
PIP Daily Living component	335	8.7%
PIP Mobility component	146	3.8%
Total Benefits received	11368	
Total Clients	3867	

c) Will people on low incomes be more affected by the proposals than those in the general population

Sheltered housing:

Yes

Nov 2011

Extra care:

N/k

Learning Disability schemes:

Yes

Home Works:

Yes

d) What are the proposals' impacts on people on low incomes?**Sheltered Housing:**

If the Supporting People subsidy which supports people on low incomes is removed, there is a potential for providers to ask residents to pay the shortfall. As detailed above, providers have indicated that the majority will try and mitigate this by increasing rents and service charges which would be mainly covered by Housing Benefit for the poorest clients. However, we will have no control over this outcome.

Additionally, older people who received support to maximise their income and reduce debt may no longer have access to an onsite service to address this support need.

Extra care:

If the Supporting People subsidy which supports people on low incomes is removed, there is a potential for providers to ask residents to pay the shortfall. As detailed above, providers may try and mitigate this by increasing rents and service charges which would be mainly covered by Housing Benefit for the poorest clients. However, we will have no control over this outcome.

Additionally, older people who received support to maximise their income and reduce debt may no longer have access to an onsite service to address this support need.

Learning Disability:

If the Supporting People subsidy which supports people on low incomes is removed, there is a potential for providers to ask residents to pay the shortfall. Providers may seek to maximise intensive housing management as an income stream.

Home Works:

A proportion of this cohort of people would no longer be supported to maximise their income, reduce debt, better manage their tenancies, avoid eviction and acquire the necessary money management skills and resilience to achieve and maintain independent living.

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

Funding has been secured to continue the countywide Welfare Reform project and all clients of all services will be informed of this service. There is also a Public Health fuel poverty programme which will be re-targeted as those considered to be most at risk.

Sheltered housing:

Supporting People staff will try and facilitate constructive discussions with Housing Benefit departments to try and litigate the impact of the cuts. STEPS is a free service so this mitigation applies equally to all clients

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Extra care:

The providers will need to consider potential to increase rental income to mitigate the cuts (as above)

Learning Disability schemes:

Supporting People staff will work with the provider to try and maximise alternative income streams via Housing Benefit.

Home Works:

Commissioners will ensure that people leaving the service before the service reduction are supported to maximise their income and reduce debt etc.

For those people who receive a Home Works service in the future they will receive a service to support them to achieve economic wellbeing however less people requiring this support will be able to access it due to reduced capacity.

There is an additional concern about the cumulative impact of other service changes and reductions related to support with low income

f) Provide details of the mitigation.

As above

g) How will any mitigation measures be monitored?

The Supporting People team will monitor outcomes in terms of economic wellbeing where clients in sheltered housing and extra care access these services.

We will be unable to monitor the impact across services with whom we no longer have a contractual relationship.

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.**

A consideration of this table leads to the conclusion that the proposal may interfere with article 5 and 8.

Articles	
A2	Right to life (e.g. pain relief, suicide prevention)
A3	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)
A9	Freedom of thought, conscience and religion (e.g. sacred space, culturally appropriate approaches)
A10	Freedom of expression (whistle-blowing policies)

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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

Sheltered housing:

The majority of sheltered housing providers have indicated an intention to maintain a level of on site provision if Supporting People funding is removed. In addition, there is proposed mitigation through using the STEPS floating support service for older people who need additional housing support to maintain their accommodation.

Extra care:

As with sheltered providers there is potential for extra care providers to maximise rental income and try to mitigate the proposed reduction in SP funding. In addition, there is proposed mitigation through using the STEPS floating support service for older people who need additional housing support to maintain their accommodation. The service will retain a 24/7 on site care service.

Learning Disability services:

Work will be undertaken to support providers to maximise rental income to mitigate cuts to Supporting People funding. There is also some mitigation through enabling access to Home Works and STEPS. Eligible clients will still be entitled to ASC funding to meet eligible needs.

Home Works:

Supporting People funded floating support services will continue to be specified and monitored to ensure they successfully assess and meet the specific housing support needs of all individuals and achieve the three aims of the general duty across all the protected characteristics and ESCC additional groups in particular:

- Black and minority ethnic people
- People who are lesbian, gay or bisexual
- Transgender people
- People who have communication difficulties
- People for whom English is not their first language
- People who live in rural and/or remote areas
- People with complex and challenging needs and behaviours
- Travellers and Gypsies
- Pregnant women
- People with disabilities including people with a sensory impairment (as defined in the Disability Discrimination Act 2005)
- People from a range of faiths and beliefs

Equality Impact Assessment

- Carers
- People who are the subject of abuse

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.	Sheltered housing, extra care Although some individuals will experience increased anxiety and a less effective level of personal contact and support, providers have been encouraged to seek opportunities to maintain a level of onsite service by maximising rental income.. Timely information will be given by the provider to people who may wish to seek alternative accommodation. . Care and support will remain in place for those with eligible needs. In the event that anyone developed eligible needs as a result of the reduction in personal contact and other changes, they will be signposted to alternative services, including social care assessment and support planning.
X	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. Sheltered housing, extra care	Extra Care clients may experience least disruption as care packages will remain in place.
X	C Continue the policy/strategy - This means adopting your proposals, despite any adverse effect or missed opportunities to advance equality, provided you have satisfied yourself that it does not unlawfully discriminate LD housing support, Homeworks	There is a risk of increased social isolation and less ability to access activities on site in sheltered housing. LD housing support, Homeworks LD housing support clients will be less able to access community facilities and more likely to experience an escalation of eligible needs with impact on ASC assessment and support planning services and impact on the Community Care budget.
	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 policy/strategy altogether. If a policy/strategy shows unlawful discrimination it <i>must</i> be removed or changed.	The focus of Homeworks will be on clients with higher needs therefore some who would have previously been eligible for a service will no longer be so in future.

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?

In terms of sheltered housing, extra care and learning disability schemes the proposal is to cease funding the services. We would have no ongoing contractual relationship and beyond monitoring referrals to the services which will help to mitigate the impact i.e. Home Works and STEPS we will be unable to genuinely monitor the effects of the proposal.

Within Home Works we will monitor the impact through regular operational meetings with the provider. See Action Plan for other details.

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

n/a

Date completed:	13.1.16	Signed by (person completing)	Sue Dean and Jude Davies
		Role of person completing	Head of Supporting People and Strategic Commissioning Manager
Date:		Signed by (Manager)	

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)
Approach to de-commissioning	Activate the de-commissioning protocol for service areas where the decision is to remove funding	Jude Davies / Sue Dean	Following ESCC decision to proceed with proposals	Supporting People (SP) Team and Provider	RPPR, DMT, EIA and De commissioning plan & cabinet report
Transition	Establish a transition plan for reduction in Home Works	Jude Davies / Sue Dean	Following ESCC decision to proceed with proposals	Supporting People (SP) Team and Provider	RPPR, DMT, EIA and De commissioning plan & cabinet report
Financial maximisation	Encourage and support sheltered housing, extra care and learning disability providers to maximise Housing Benefit	Jude Davies / Sue Dean	Prior to May 2016	Supporting People (SP) Team and Providers, housing authorities	Supporting People Steering Group, DMT and within RPPR & cabinet report

	income and minimise impact on services				
Social care eligibility	People who may be eligible for ASC support in all affected services are referred to adult social care for assessment	Jude Davies / Sue Dean	Following ESCC decision to proceed with proposals	Supporting People (SP) Team and Provider, Adult Social Care	EIA, DMT, and De commissioning Plan & cabinet report
Eligibility criteria for Home Works	Home Works eligibility criteria is extended to include: People 16-64 living in sheltered housing, extra care, learning disability services	Jude Davies / Sue Dean	This needs to be agreed with Home Works to coincide with date changes to these services are implemented	Supporting People (SP) Team and Provider	Decommissioning Plan and EIA & cabinet report
Eligibility criteria for STEPS	STEPS eligibility criteria is extended to include: People living in sheltered housing, extra care, learning disability services	As above	This needs to be agreed with STEPS to coincide with date changes to these services are implemented	Supporting People (SP) Team and Provider	Decommissioning Plan and EIA & cabinet report
Monitoring system for referrals	Establish a monitoring system within Home Works and STEPS for referrals from sheltered housing, extra care and learning disability services.	As above	On-going and this needs to be agreed with STEPS and Home Works to coincide with date changes to these services are implemented	Supporting People (SP) Team and Provider	Decommissioning Plan and EIA & cabinet report
Monitoring capacity	Monitoring people who are unable to access a Home Works service due	As above	Establish system by mid May 2016	Supporting People (SP) Team and Provider	Decommissioning Plan and EIA & cabinet report

	to reduced capacity				
Monitoring	<p>Monitoring measures will be developed in conjunction with the ESBT Programme and associated work streams as they develop and go live to identify patterns in crisis intervention; hospital re-admissions; and patterns of in demand for health and social care support.; and carer's assessments and personal budgets; (ASC PPE/Strategy and Commissioning)</p> <p>include impact on Urgent Care Programme- the strategic plan to develop integrated urgent care pathway (this includes increase in 7 day discharges) that incorporates voluntary sector supported discharge services that ensures frail older people are not admitted to hospital unnecessarily (Commissioning Team)</p>	ASC; ESBT Programme	Apr-2016-Apr-2017 and review then	ASC; ESBT Programme	EIA & cabinet report

	Qualitative feedback on specific areas to be sourced through a combination of e.g. targeted ASC Listening to You customer satisfaction surveys; focus groups; organisational feedback as necessary. ((ASC PPE/Strategy and Commissioning)				
Monitoring re: numbers of referrals for independent advocacy or assessment and support planning.	Monitor numbers of referrals for independent advocacy or assessment and support planning	Jude Davies / Sue Dean Richard Lewis	This can only be monitored until the contract end date for 3 of the 4 services as we will have no relationship with the providers after this date . For Home Works this will be monitored within the Transition Plan	Supporting People (SP) Team and Provider and Advocacy commissioner and Provider	EIA, Decommissioning Plan & cabinet report
Equalities policy	Ensure Home Works operates a fair access, exit and equality inclusion policy.	Jude Davies / Sue Dean	On going	Supporting People (SP) Team and Provider	EIA, Decommissioning Plan & cabinet report
Benefit support	Ensure the county wide welfare reform project continues to offer a specialist service for	Jude Davies / Sue Dean	On going	Supporting People (SP) Team and Provider and East Sussex Advice Partnership	East Sussex Advice Partnership, EIA and Decommissioning Plan & cabinet report

	Home Works clients				
Financial wellbeing	Ensure the Home Works provider works with clients leaving the service to maximise income and reduce debt	Jude Davies / Sue Dean	By May 2016	Supporting People (SP) Team and Provider	East Sussex Advice Partnership, EIA and Decommissioning Plan & cabinet report

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)
An increase in Safeguarding alerts in Sheltered housing due to removal of on site service	Legal Client vulnerability	Unlikely as the decision to remove funding is due to the financial pressure on the LA which is scheduled to increase	Departmental Management Team (DMT) Equality Impact Assessment (EIA) & cabinet report	Head of Safeguarding, Angie Turner	n/a
Safeguarding alerts not being raised when they should due to reduction in Home Works service	Legal Client vulnerability	Unlikely as the decision to remove funding is due to the financial pressure on the LA which is scheduled to increase	Departmental Management Team (DMT) Equality Impact Assessment (EIA) & cabinet report	Sue Dean/Jude Davies	n/a
Increase in street homelessness	Moral Client vulnerability	There may be increased support from the charitable/voluntary sector but not within our power to control	Departmental Management Team (DMT) Equality Impact Assessment (EIA) East Sussex Better Together (ESBT) & cabinet report	Sue Dean/Jude Davies	n/a
Increase in costs to Mental Health Trust	Financial	A business case has been made to East Sussex Better Together to recommend investment in Home Works to avoid transfer of costs to health	ESBT Strategic Planning Group DMT EIA & cabinet report	ESBT	n/a

Increase in demand for ASC assessments	Legal	No – eligible people will require assessment	ESBT Strategic Planning Group DMT EIA & cabinet report	ASC operational lead, Andy Cunningham/ Steve Hook	n/a
Increase in PA costs to ASC	Financial	No – eligible people requiring support will need funding for PA's	DMT EIA & cabinet report	Andy Cunningham/Steve Hook	n/a
People have eligible needs as a result of the changes	legal	Yes - ASC could review and reassess eligible clients	DMT EIA & cabinet report	Andy Cunningham/Steve Hook	n/a
Loss of highly skilled staff who deliver preventative outcomes	Financial	No – skilled staff will seek other employment	ESBT Strategic Planning Group DMT EIA & cabinet report	Sue Dean/Jude Davies	n/a
Loss of publically funded purpose designed properties	Financial	No – providers may choose to exit supported housing, access the capital and the buildings will be lost to the sector	ESBT Strategic Planning Group DMT EIA & cabinet report	Sue Dean/Jude Davies	n/a
Capacity issues for STEPS due to their mitigation role	Client vulnerability Financial	A business case could be made to increase STEPS capacity but would require investment	DMT EIA & cabinet report	Sue Dean/Jude Davies	n/a
Capacity issues for Home Works as less budget	Client vulnerability Financial	A business case has been made to East Sussex Better Together to recommend investment in this service to avoid transfer of costs to health	DMT EIA & cabinet report	Sue Dean/Jude Davies	n/a

Less support available to people in rural areas. Home Works goes to the clients so no costs to the individual e.g transport	Client vulnerability Financial	No - unless alternative investment is agreed for rural services	DMT EIA & cabinet report	Sue Dean/Jude Davies	n/a
Carers concerned about vulnerability in sheltered housing	Moral and reputational	No – unless providers can mitigate cuts to funding through increased housing management and maintain onsite provision	DMT EIA & cabinet report	Barry Atkins	n/a
More demands on carers	Moral and reputational	As above	DMT EIA & cabinet report	Barry Atkins	n/a
Less economic security for all clients leading to debt, fuel poverty, malnutrition and increased health needs	Financial Client vulnerability	This can be mitigated by ensuring clients are supported to maximise their finances supported by the Welfare reform project and Winter Home Check	ESBT Strategic Planning Group DMT EIA & cabinet report	Sue Dean/Jude Davies	n/a

Service Type	Provider	Name of Service
Eastbourne		
Sheltered Housing	Anchor Trust	Millfield Court 829
	Anchor Trust	Redman King House 831
	Anchor Trust	St Clements 832
	Eastbourne Homes Ltd	Archery Court
	Eastbourne Homes Ltd	Cumbria Court
	Eastbourne Homes Ltd	Gwent Court
	Eastbourne Homes Ltd	New Derby House
	Eastbourne Homes Ltd	Riverbourne House
	Eastbourne Homes Ltd	Roxburgh Court
	Eastbourne Homes Ltd	St Mary's Court
	Eastbourne Homes Ltd	Sutherland Court
	Eastbourne Homes Ltd	Tyrone Court
	Eastbourne Homes Ltd	Upwyke House
	Eastbourne Homes Ltd	Winchester House
	Hanover Housing Association	Sheltered Housing - East Sussex 835
	Housing & Care 21	Duke Bernard Court 837
	Housing & Care 21	Nicholson Court 841
	Places For People Individual Support	Croxden Way 865
	Places For People Individual Support	Howletts Close 866

Service Type	Provider	Name of Service
Eastbourne		
Extra Care	Saxon Weald Homes Ltd	Cranbrook

Service Type	Provider	Name of Service
Eastbourne		
People with Learning Disabilities	Livability	Martello Road

Service Type	Provider	Name of Service
Hastings		
Sheltered Housing	Amicus Horizon Ltd	Bevin Court
	Amicus Horizon Ltd	Evesham and Bristol Rd, St Leonards
	Amicus Horizon Ltd	Fallowfield
	Amicus Horizon Ltd	Halton Heights
	Amicus Horizon Ltd	Orchard Close and Beverley Walk, Hastings
	Amicus Horizon Ltd	Roosevelt Court
	Amicus Horizon Ltd	Royal Terrace
	Amicus Horizon Ltd	Torfield Close
	Anchor Trust	Mount Pleasant Court 830
	Family Mosaic	Beaufort Court 906
	Housing & Care 21	Farren Court 839
	Orbit Housing Association	Sherwood Close 862
	Orbit Housing Association	Sherwood House 863

Service Type	Provider	Name of Service
Hastings		
Extra Care	Family Mosaic	Marlborough House

Service Type	Provider	Name of Service
Hastings		
People with Learning Disabilities	Royal Mencap Society	19 Millward Road
	Royal Mencap Society	4 Victoria Road
	Royal Mencap Society	49 Lower Park Road
	East View Housing Management	East View Housing

Service Type	Provider	Name of Service
Lewes		
Sheltered Housing	Family Mosaic	Martlet House 909
	Family Mosaic	Mitchell House 910
	Housing & Care 21	Ellis Gordon Court 838
	Lewes District Council	Churchill House 847
	Lewes District Council	Coldstream House 848
	Lewes District Council	Downland 849
	Lewes District Council	Meridian Court 850
	Lewes District Council	Neills Close 851
	Lewes District Council	Newick 852
	Lewes District Council	Newton Road 853
	Lewes District Council	Rathan Court 854
	Lewes District Council	Reed Court 855
	Lewes District Council	Ringmer Scheme 856

	Lewes District Council	Seaford House 857
	Lewes District Council	Southdown 858
	Lewes District Council	St Davids Court 859
	Old Ben Homes	Old Ben Homes 861
	Peacehaven and Telscombe Housing Association	Sheltered Housing 864
	Sussex Housing and Care	Ashleigh Glegg House 875
	Sussex Housing and Care	Clevedown 876
	Sussex Housing and Care	Falfield 879
	The Guinness Partnership Limited	Guinness Court 883
	The Guinness Partnership Limited	Leighside House - 884

Service Type	Provider	Name of Service
Lewes		
Extra Care	Saxon Weald Homes Ltd	Downlands Court

Service Type	Provider	Name of Service
Lewes		
People with Learning Disabilities	Southdown Housing Association	Fiveways

Service Type	Provider	Name of Service
Rother		
Sheltered Housing	Amicus Horizon Ltd	Alexander Court
	Amicus Horizon Ltd	Badger Gate
	Amicus Horizon Ltd	Burghwood House
	Amicus Horizon Ltd	Geary Place
	Amicus Horizon Ltd	Glovers Court
	Amicus Horizon Ltd	Goddens Gill
	Amicus Horizon Ltd	Magdala House
	Amicus Horizon Ltd	Old Rectory Court
	Amicus Horizon Ltd	Rother and Honies Court, Bexhill
	Amicus Horizon Ltd	St Marks' Close, Little Common
	Amicus Horizon Ltd	St Martins
	Amicus Horizon Ltd	Strome House
	Amicus Horizon Ltd	Thalia House
	Amicus Horizon Ltd	The Maltings
	Amicus Horizon Ltd	Thornwood
	Amicus Horizon Ltd	Woodruffe Court
	Family Mosaic	Catley Court 907
	Five Villages Home Association	Five Villages 833
	Housing & Care 21	Gavin Astor Court 840
	Sanctuary Group	St Bartholomews Court 872
	Sussex Housing and Care	Devonport House 877
	Sussex Housing and Care	Yvonne Robertson House 882

Service Type	Provider	Name of Service
Rother		
Extra Care	Amicus Horizon Ltd	Newington Court

Service Type	Provider	Name of Service
Wealden		
Sheltered Housing	Abbeyfield (Mid Sussex) Society	Abbeyfield House (Mid Sussex) 824
	Anchor Trust	Luke Lade Court 828
	Home Group Limited	Busheyfields 836
	Sussex Housing and Care	Nevill Court 880
	Sussex Housing and Care	St Thomas of Canterbury Court 881
	Wealden District Council	Buxted Court 885
	Wealden District Council	Cherry Tree Court and Hillside Bungalows 886
	Wealden District Council	Church Bailey Court 887
	Wealden District Council	Elizabeth Court 888
	Wealden District Council	Fazan Court 890
	Wealden District Council	Hampton House and Maryan Court 892
	Wealden District Council	Joan Hughes Court 893
	Wealden District Council	Mary Burfield Court and Newnham Way Bungalows 894
	Wealden District Council	Rumsey Court 895
	Wealden District Council	Streatfield House 896
	Wealden District Council	Wade Court 889

Service Type	Provider	Name of Service
Wealden		
Extra Care	Saxon Weald Homes Ltd	Margaret House
	Saxon Weald Homes Ltd	Bentley Grange