

EQIA Submission Draft Working Template

If required, this template is for use prior to completing your EQIA Submission in the EQIA App.

You can use it to understand what information is needed beforehand to complete an EQIA submission online, and also as a way to collaborate with others who may be involved with the EQIA.

Note: You can upload this into the App when complete if it contains more detailed information than the App asks for and you wish to retain this detail.

Section A

1. Name of Activity (EQIA Title):	Kent Homeless Connect Contract
2. Directorate	ST
3. Responsible Service/Division	Strategic Commissioning

Accountability and Responsibility

4. Officer completing EQIA Note: This should be the name of the officer who will be submitting the EQIA onto the App.	Max Guest
5. Head of Service Note: This should be the Head of Service who will be approving your submitted EQIA.	Sharon Dene
6. Director of Service Note: This should be the name of your responsible director.	Clare Maynard

The type of Activity you are undertaking

7. What type of activity are you undertaking?	
Tick if Yes	Activity Type
	Service Change – operational changes in the way we deliver the service to people.
	Service Redesign – restructure, new operating model or changes to ways of working
	Project/Programme – includes limited delivery of change activity, including partnership projects, external funding projects and capital projects.
	Commissioning/Procurement – means commissioning activity which requires commercial judgement.
	Strategy /Policy – includes review, refresh or creating a new document
X	Other – Please add details of any other activity type here. The Council has proposed to allow the Kent Homeless Connect service to come to an end on 30 September 2022.

8. Aims and Objectives and Equality Recommendations – Note: You will be asked to give a brief description of the aims and objectives of your activity in this section of the App, along with the Equality recommendations. You may use this section to also add any context you feel may be required.

In its most recent published budget, the council has proposed to allow the Kent Homeless Connect service to come to an end on 30 September 2022. As part of this proposal, the council has committed to put transitional arrangements and protection funding in place, as alternative plans are made with stakeholders, until at least the remainder of the financial year.

Since October 2018 the council has been spending £5,069,901 annually on this contract to provide a wide-ranging support package for adults with complex needs facing homelessness in Kent. This includes, but is not limited to, homeless prevention support for those people who are at risk of homelessness or those who have recently settled into their own accommodation, help in supported accommodation and outreach to rough sleepers.

As this decision reflects a change in policy, there is a need for an EQIA and public consultation, prior to this decision being considered for final approval in July 2022.

This Equality Impact Assessment (EQIA) assesses the impact and considers the implications of allowing the service to come to an end for those people who use the service and focuses on those who are part of a protected group within the Equality Act.

This EQIA has been updated reflecting the comments received during the consultation.

Section B – Evidence

Note: For questions 9, 10 & 11 at least one of these must be a 'Yes'. You can continue working on the EQIA in the App, but you will not be able to submit it for approval without this information.

9. Do you have data related to the protected groups of the people impacted by this activity? <i>Answer: Yes/No</i>	Yes
10. Is it possible to get the data in a timely and cost effective way? <i>Answer: Yes/No</i>	Yes
11. Is there national evidence/data that you can use? <i>Answer: Yes/No</i>	Yes
12. Have you consulted with Stakeholders? <i>Answer: Yes/No</i> <i>Stakeholders are those who have a stake or interest in your project which could be residents, service users, staff, members, statutory and other organisations, VCSE partners etc.</i>	Yes

13. Who have you involved, consulted and engaged with?
Please give details in the box provided. This may be details of those you have already involved, consulted and engaged with or who you intend to do so with in the future. If the answer to question 12 is 'No', please explain why.

Regular programmed engagement with the housing teams within the district and borough authorities are in place to explore the potential impact of the budget proposal and how this may be mitigated.

District and borough leaders and chief executives of these authorities and of other public bodies have been engaged, following KCC publishing its proposed budget.

Members of Kent Housing Group, including the Executive Board, and the Group's subgroups - Kent Housing Officers Group, and Kent Health and Housing and Social Care Group - have also been engaged. Housing authorities have also been made aware of the councils most recent published budget and worked with to ensure that the public consultation reached the widest possible audience.

The EQIA was attached to the public consultation. This consultation provided the opportunity for people who are currently using the service, or who have in the past, providers and interested members of the public to give feedback

about the potential impact if the decision is made. The consultation specifically requested feedback on the contents of the EQIA. The EQIA has been amended in view of this feedback.

We worked with the prime providers of the service and the district housing authorities to plan bespoke events to ensure they were accessible and meaningful opportunities for people who may be affected by the proposal to have their views heard through the consultation.

14. Has there been a previous equality analysis (EQIA) in the last 3 years? <i>Answer: Yes/No</i>	No
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15. Do you have evidence/data that can help you understand the potential impact of your activity? <i>Answer: Yes/No</i>	Yes
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Uploading Evidence/Data/related information into the App <i>Note: At this point, you will be asked to upload the evidence/ data and related information that you feel should sit alongside the EQIA that can help understand the potential impact of your activity. Please ensure that you have this information to upload as the Equality analysis cannot be sent for approval without this.</i>	
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Section C – Impact

16. Who may be impacted by the activity? *Select all that apply.*

Service users/clients <i>Answer: Yes/No</i>	Yes	Residents/Communities/Citizens <i>Answer: Yes/No</i>	Yes
Staff/Volunteers <i>Answer: Yes/No</i>	Yes		

17. Are there any positive impacts for all or any of the protected groups as a result of the activity that you are doing? <i>Answer: Yes/No</i>	Yes
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18. Please give details of Positive Impacts

We are drafting collaborative transition plans with districts, boroughs, KHC providers and other partners. These plans will ensure that alternative arrangements are explored and that support for this group of people is continued beyond the ending of the service in a sustainable way. This includes accessing and maximising the available funding streams now and, in the future, to ensure a seamless move to these new arrangements when the KHC transition period ends.

Negative Impacts and Mitigating Actions

The questions in this section help to think through positive and negative impacts for people affected by your activity. Please use the Evidence you have referred to in Section B and explain the data as part of your answer.

19. Negative Impacts and Mitigating actions for Age

a) Are there negative impacts for age? <i>Answer: Yes/No (If yes, please also complete sections b, c, and d).</i>	Yes
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b) Details of Negative Impacts for Age	<ul style="list-style-type: none"> To date, appropriate interventions have been provided to all individuals aged 18 years old and above, meeting the criteria for support. 21.4% of the people who use Kent Homeless Connect
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	<p>are aged 18-24; 27.7% are aged 25-34.</p> <ul style="list-style-type: none"> • In comparison, only 11.7% of Kent’s residents are aged between 25-34, making members of this age group almost two and a half times more likely to be using the service • Nationally, the ability of young adults to form households of their own continues to fall¹. It is estimated that 7% of rough sleepers in Kent are under 25 years old (2018)². • Young adults (18-34) have a reduced local housing allowance (LHA) rate and a reduced standard allowance from Universal Credit which impacts their ability of securing affordable housing. • The decision to allow the service to end may have a disproportionate impact on adults within the 18-34 age range, if alternative provision cannot be arranged.
<p>c) Mitigating Actions for age</p>	<ul style="list-style-type: none"> • Transitional planning is being undertaken with districts, boroughs, health, and other support services, to identify alternative sources of support for those that have this protected characteristic. • The council has committed to ensuring that transitional funding will be made available whilst alternative sources of support are sought • KHC’s prime providers have provided data around the way the service is used, including an estimation of the likely numbers that could require a social care assessment. This will help to ensure that people with these protected characteristics that are statutorily eligible for support, will be supported to put alternative support arrangements in place
<p>d) Responsible Officer for Mitigating Actions - Age</p>	<p>Max Guest and Luke Edwards</p>
<p>20. Negative Impacts and Mitigating actions for Disability</p>	
<p>a) Are there negative impacts for Disability? <i>Answer: Yes/No (If yes, please also complete sections b, c, and d).</i></p>	<p>Yes</p>
<p>b) Details of Negative Impacts for Disability</p>	<ul style="list-style-type: none"> • 68% of the referrals to Kent Homeless Connect are for those with some form of physical or mental disability or condition, which limits their ability to carry out normal day-to-day activities. • This is almost four times higher than the Kent wide

¹ https://www.crisis.org.uk/media/238700/homelessness_monitor_england_2018.pdf

² https://www.kent.gov.uk/_data/assets/pdf_file/0020/91361/Rough-sleepers-in-Kent-report.pdf

figure of 17.6% of residents having a disability which limits their day-to-day activities.³

- The current service provides clear pathways of support for those with additional or complex needs and makes sure that all staff have appropriate training in mental health issues. Should KHC end, these pathways and specialisms will no longer be available unless suitable alternative provision is arranged.
- Within the service, people are supported to manage their mental and physical health, e.g., by helping to keep appointments and referring to additional services if needed. People may experience negative impacts on their health if alternative provision for these purposes is not in place.
- A proportion of the supported accommodation each area is currently wheelchair accessible in each Lot of the contract. Some of these accessible units could be lost if they cannot be included in a future model of support.
- This indicates that people with disabilities could be disproportionately impacted if alternative provision cannot be arranged.

³ https://www.kent.gov.uk/__data/assets/pdf_file/0018/8181/Disability-in-Kent.pdf

<p>c) Mitigating Actions for Disability</p>	<ul style="list-style-type: none"> • Transitional planning is being undertaken with districts, boroughs, health, and other support services, to identify alternative sources of support for those that have this protected characteristic. • The council has committed to ensuring that transitional funding will be made available whilst alternative sources of support are sought • KHC's prime providers have provided data around the way the service is used, including an estimation of the likely numbers that could require a social care assessment. This will help to ensure that people with these protected characteristics that are statutorily eligible for support, will be supported to put alternative support arrangements in place • KCC will work with the Kent Housing Options Group (KHOG) to identify and agree the future pathways for support and the protocols to support them where necessary • We will identify where the existing wheelchair accessible units are and work with districts, boroughs, and landlords to prioritise these units where possible • Alternative sources of support for those with disabilities have been identified. Where appropriate, referrals will be made to the physical disability and mental health social work teams, where a statutory assessment and specialist support can be put in place to support those living with a disability • Referrals may also be made to the council's other commissioned support services, such as Live Well Kent, which provides support for individuals' mental and physical health and general wellbeing
<p>d) Responsible Officer for Mitigating Actions - Disability</p>	<p>Max Guest and Luke Edwards</p>
<p>21. Negative Impacts and Mitigating actions for Sex</p>	
<p>a) Are there negative impacts for Sex? Answer: Yes/No (If yes, please also complete sections b, c, and d).</p>	<p>Yes</p>
<p>b) Details of Negative Impacts for Sex</p>	<ul style="list-style-type: none"> • 65.97% of KHC's clients are male, compared to 49.1% of Kent's population. This could indicate that changes to KHC could negatively impact males. • 32% of homeless women from the general population reported that domestic violence contributed to their homelessness and 52% of domestic abuse survivors need support to help them stay in their own home or move to new accommodation.⁴ • Females may be more impacted if alternative provision is not made available, as they are more

⁴ <https://safelives.org.uk/spotlight-5-homelessness-and-domestic-abuse>

	likely to be affected by domestic abuse.
c) Mitigating Actions for Sex	<ul style="list-style-type: none"> • Transitional planning is being undertaken with districts, boroughs, health, and other support services, to identify alternative sources of support for those that have this protected characteristic. • The council has committed to ensuring that transitional funding will be made available whilst alternative sources of support are sought • KHC's prime providers have provided data around the way the service is used, including an estimation of the likely numbers that could require a social care assessment. This will help to ensure that people with these protected characteristics that are statutorily eligible for support, will be supported to put alternative support arrangements in place • Appropriate referrals will be made to KCC's domestic abuse commissioned services which has recently been boosted by additional funding for support in accommodation as result of the Domestic Abuse Act. • As rough sleepers are disproportionately male, mitigation can be achieved through utilising government funding to reduce rough sleeping such as the Rough Sleeper Initiative (RSI) funding that is provided to districts and boroughs. The RSI funding was designed as the primary vehicle to achieve central government's ambition to end rough sleeping by 2024. • Conversations are ongoing with districts and boroughs, to identify how this funding and any other funding streams available from government in relation to homelessness and rough sleeping can be maximised. • The Homeless Reduction Act 2017 introduced an increased focus on prevention, after placing the duties to prevent and relieve homelessness on district and borough housing authorities. This should help to minimise the numbers of male adults reaching the point of rough sleeping. This reaffirms the need for KCC to work closely with district and boroughs.
d) Responsible Officer for Mitigating Actions - Sex	Max Guest and Luke Edwards
22. Negative Impacts and Mitigating actions for Gender identity/transgender	
a) Are there negative impacts for Gender identity/transgender? Answer: Yes/No (If yes, please also complete sections b, c, and d).	Yes
b) Details of Negative Impacts for Gender identity/transgender	<ul style="list-style-type: none"> • One in four transgender people have experienced homelessness at some point in their lives. Issues

	<p>related to gender identity can play a key role in the onset of homelessness, particularly if traumatic.</p> <ul style="list-style-type: none"> • 82 KHC clients have identified as being transgender, equivalent to 1.06% of total referrals, since the contract's inception. • The Government Equalities Office tentatively estimate that there are approximately 200,000-500,000 trans people in the UK. Even if we take the higher figure of 500,000, this is less than 0.8% of the population. • The data indicates that that transgender people are more highly represented in KHC, compared to the national average. This could mean that this group has an increased likelihood of being disproportionately impacted by this decision if alternative support is not in place.
<p>c) Mitigating actions for Gender identity/transgender</p>	<ul style="list-style-type: none"> • Transitional planning is being undertaken with districts, boroughs, health, and other support services, to identify alternative sources of support for those that have this protected characteristic. • The council has committed to ensuring that transitional funding will be made available whilst alternative sources of support are sought • KHC's prime providers have provided data around the way the service is used, including an estimation of the likely numbers that could require a social care assessment. This will help to ensure that people with these protected characteristics that are statutorily eligible for support, will be supported to put alternative support arrangements in place
<p>d) Responsible Officer for Mitigating Actions - Gender identity/transgender</p>	<p>Max Guest and Luke Edwards</p>
<p>23. Negative Impacts and Mitigating actions for Race</p>	
<p>a) Are there negative impacts for Race? Answer: Yes/No (If yes, please also complete sections b, c, and d).</p>	<p>Yes</p>
<p>b) Details of Negative Impacts for Race</p>	<ul style="list-style-type: none"> • Whilst the majority of service users (86.4%) are White British, the three ethnicities that have the highest proportionate representation and are likely to be most disproportionately impacted by KHC's removal are: <ul style="list-style-type: none"> – Black/ Black British: Caribbean – which make up 0.86% of KHC's clients, but only 0.22% of the countywide population, – Mixed: White and Black Caribbean – which make up 1.2% of KHC's clients, but only 0.43% of the countywide population,

	<ul style="list-style-type: none"> – Arab – which make up 0.29% of KHC’s clients, but only 0.1% of the countywide population, • Due to their immigration status, some residents have limited access to benefits and other essential services that help to prevent and relieve homelessness • Whilst KHC interventions are targeted for residents of Kent who have recourse to public funding (i.e., British nationals or EU nationals that have a ‘right to reside’ or are ‘exercising a treaty right’), advice and signposting at the single point of access is available to anyone.
c) Mitigating Actions for Race	<ul style="list-style-type: none"> • Transitional planning is being undertaken with districts, boroughs, health, and other support services, to identify alternative sources of support for those that have this protected characteristic. • The council has committed to ensuring that transitional funding will be made available whilst alternative sources of support are sought • KHC’s prime providers have provided data around the way the service is used, including an estimation of the likely numbers that could require a social care assessment. This will help to ensure that people with these protected characteristics that are statutorily eligible for support, will be supported to put alternative support arrangements in place
d) Responsible Officer for Mitigating Actions - Race	Max Guest and Luke Edwards
24. Negative Impacts and Mitigating actions for Religion and belief	
a) Are there negative impacts for Religion and Belief? <i>Answer: Yes/No (If yes, please also complete sections b, c, and d).</i>	Yes
b) Details of Negative Impacts for Religion and belief	<ul style="list-style-type: none"> • If no alternative provision can be arranged, the impact of this service ending will disproportionately be felt by those who have responded as having no religion, making up 62.21% of KHC’s clients, compared to 26.75% of Kent’s population. • After this, the second most disproportionately impacted religious group will be Muslims, who make up 1.1% of the KHC’s clients but only 0.95% of the countywide population.
c) Mitigating Actions for Religion and belief	<ul style="list-style-type: none"> • Transitional planning is being undertaken with districts, boroughs, health, and other support

	<p>services, to identify alternative sources of support for those that have this protected characteristic.</p> <ul style="list-style-type: none"> • The council has committed to ensuring that transitional funding will be made available whilst alternative sources of support are sought • KHC's prime providers have provided data around the way the service is used, including an estimation of the likely numbers that could require a social care assessment. This will help to ensure that people with these protected characteristics that are statutorily eligible for support, will be supported to put alternative support arrangements in place
<p>d) Responsible Officer for Mitigating Actions - Religion and belief</p>	<p>Max Guest and Luke Edwards</p>
<p>25. Negative Impacts and Mitigating actions for Sexual Orientation</p>	
<p>a) Are there negative impacts for sexual orientation. <i>Answer: Yes/No (If yes, please also complete sections b, c, and d).</i></p>	<p>Yes</p>
<p>b) Details of Negative Impacts for Sexual Orientation</p>	<ul style="list-style-type: none"> • The ONS consider the figures for gay or lesbian and bisexual for Kent as "unreliable for practical purposes". The ONS recommends that only national figures on sexual identity should be used for analysis. • The group that would be most disproportionately impacted here are those who identify as bisexual, who make up 3.01% of KHC's clients, and only 1.1% of the UK's population, according to national figures from the ONS. • The national figures show that 1.1% of the population are gay men, whereas 1.23% of KHC clients are gay men, making them the second disproportionately impacted group. • 16% of LGB (non-trans) people have experienced homelessness at some point in their lives. The likelihood is exacerbated further for disabled LGBT (28%).
<p>c) Mitigating Actions for Sexual Orientation</p>	<ul style="list-style-type: none"> • Transitional planning is being undertaken with districts, boroughs, health, and other support services, to identify alternative sources of support for those that have this protected characteristic. • The council has committed to ensuring that transitional funding will be made available whilst alternative sources of support are sought • KHC's prime providers have provided data around the way the service is used, including an estimation of the likely numbers that could require a social care assessment. This will help to ensure that people with

	these protected characteristics that are statutorily eligible for support, will be supported to put alternative support arrangements in place
d) Responsible Officer for Mitigating Actions - Sexual Orientation	Max Guest and Luke Edwards
26. Negative Impacts and Mitigating actions for Pregnancy and Maternity	
a) Are there negative impacts for Pregnancy and Maternity? <i>Answer: Yes/No (If yes, please also complete sections b, c, and d).</i>	Yes
b) Details of Negative Impacts for Pregnancy and Maternity	<ul style="list-style-type: none"> • There is no service data collected on those who are pregnant at the point of referral into the service. • It is known that there are people who are pregnant and/or have children in the community prevention and outreach pathways. • There is no supported accommodation within the contract that permit children on the premises.
c) Mitigating Actions for Pregnancy and Maternity	<ul style="list-style-type: none"> • When pregnancy and maternity are involved, additional support with homelessness is triggered. This assists to prevent support needs from escalating.
d) Responsible Officer for Mitigating Actions - Pregnancy and Maternity	Max Guest and Luke Edwards
27. Negative Impacts and Mitigating actions for marriage and civil partnerships	
a) Are there negative impacts for Marriage and Civil Partnerships? <i>Answer: Yes/No (If yes, please also complete sections b, c, and d).</i>	Unknown
b) Details of Negative Impacts for Marriage and Civil Partnerships	<ul style="list-style-type: none"> • Data on marriage and civil partnership status is not collected. • Relationship breakdown with a partner presents as the leading reason people give for losing their home nationally.⁵ • However, the protection afforded by the Equality Act does not extend to those that are single, divorced or have had a civil partnership dissolved.
c) Mitigating Actions for Marriage and Civil Partnerships	<ul style="list-style-type: none"> • Transitional planning is being undertaken with districts, boroughs, health, and other support

⁵ <https://www.homeless.org.uk/facts/understanding-homelessness/causes-of-homelessness>

	<p>services, to identify alternative sources of support for those that have this protected characteristic.</p> <ul style="list-style-type: none"> • The council has committed to ensuring that transitional funding will be made available whilst alternative sources of support are sought • KHC's prime providers have provided data around the way the service is used, including an estimation of the likely numbers that could require a social care assessment. This will help to ensure that people with these protected characteristics that are statutorily eligible for support, will be supported to put alternative support arrangements in place
d) Responsible Officer for Mitigating Actions - Marriage and Civil Partnerships	Max Guest and Luke Edwards
28. Negative Impacts and Mitigating actions for Carer's responsibilities	
a) Are there negative impacts for Carer's responsibilities? Answer: Yes/No (If yes, please also complete sections b, c, and d).	No
b) Details of Negative Impacts for Carer's Responsibilities	<ul style="list-style-type: none"> • 5.57% of KHC referrals reported having some carer responsibilities, compared to a countywide figure of 11%. Carers should not be disproportionately impacted by the decision to end KHC. • Families with children or other members requiring care tend to have access to statutory services and as such move through KHC quickly, with limited support required.
c) Mitigating Actions for Carer's responsibilities	<ul style="list-style-type: none"> • As there are no expected impacts on the basis of carer's responsibilities, no further mitigating action is raised.
d) Responsible Officer for Mitigating Actions - Carer's Responsibilities	N/A