

'You will not get far if you perceive the duty to be over burdensome or take a mechanistic approach....there will be progress if the duty is seen as a way of fundamentally changing the core values and culture of the organisation....we need and <u>outcome-oriented approach</u>' – CRE Chair 2001

# **Equality Impact Assessment: Stage 1: Initial Screening Form for Policies or Functions (including new & revised)**

## A: Summary Details

Directorate: Community and Children's Services

Section: People

Person responsible for the assessment: Simon Cribbens

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Names of other people participating in review: Jonathan Qureshi

Name of Policy to be assessed: Homelessness Strategy

Is this a new or revised policy: Revised

Date policy scheduled for Committee (if relevant): 13 June 2014

## **B**: Preparation

It is important to consider <u>all available information</u> that could help determine whether the policy could have any actual or **potential** adverse impact. Please attach examples of available monitoring information, research and consultation reports.

1. Do you have monitoring data available on the number of people (with protected characteristics\*) who are using or are potentially impacted upon by your policy? Please specify what monitoring information you have available (your monitoring information should be compared to the current available census data or more recent population data if available to see whether a proportionate number of people are taking up your service).

Statutory homelessness statistics for the UK are available on the central government website<sup>1</sup>. In addition, each borough submits quarterly statutory homeless returns which are collated by the Department of Communities and Local Government (DCLG)<sup>2</sup>. These returns identify ethnicity of those who have made a homeless application. For those who are owed a full housing duty, the following is collated:

- Age
- Reason for priority
- Reason for loss of home
- Nationality

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<sup>&</sup>lt;sup>1</sup> https://www.gov.uk/government/collections/homelessness-statistics

<sup>&</sup>lt;sup>2</sup> http://www.iform.co.uk/

The last available published statutory homelessness figures for the City of London are for 2012-13: This reports detailed data for 18 households accepted as homeless by the City during that period. This shows:

Ethnicity	count	%
White	13	72%
Black	3	17%
Asian	2	11%
Mixed	0	0%
other	0	0%
Total	18	100%

Ages of those accepted	count	%
18-24	2	11%
25-44	13	72%
45-59	2	11%
60-64	1	6%
65-74	0	0%
75 & over	0	0%
total	18	100%

Reason for Priority	count	%
Dependent children	3	17%
Physical disability	2	11%
Mental illness or disability	4	22%
Drug dependency	2	11%
other	4	22%
Been in custody	2	11%
fleeing DV	1	6%
total	18	100%

It should however be noted that reason for priority may not reflect an individual's circumstances in full. For example, if someone presents with dependents, but also have underlying mental health issues, the reason for priority would likely be due to the children in the household, therefore the statistics do not always reflect the complete picture.

Rough sleeping statistics are available through CHAIN (Combined Homeless and Information Network) on the St Mungo's Broadway website<sup>3</sup>. This records all street contacts with rough sleepers in London. It provides detailed demographic detail for this group including:

- Age
- Ethnicity

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<sup>&</sup>lt;sup>3</sup> http://www.broadwaylondon.org/CHAIN/Reports.html

- Nationality
- Support needs (drugs, mental health, alcohol)
- Gender

CHAIN has published data on rough sleeping in the City of London in 2013-2012. This data shows that 284 people were recorded sleeping rough in the City over the course of that year.

Gender	count	%
Female	18	6%
Male	266	94%

Age	count	%
18-25	14	5%
26-35	75	26%
36-45	92	32%
46-55	72	25%
over 55	31	11%
total	284	100%

Ethnicity	%
White - other	36%
White - Irish	3%
White - British	48%
Refused	0%
Other	1%
Mixed	3%
Black	7%
Asian	2%

Nationality	count	%
UK	158	56%
Central and		
East Europe	78	27%
Other Europe	29	10%
Africa	6	2%
America	1	0%
Asia	5	2%
Not known	7	2%
Total	284	100%

2. If monitoring has NOT been undertaken, will it be done in the future or do you have access to relevant monitoring data for this area? If not, specify the arrangement you intend to make; if not please give a reason for your decision.

We have used the monitoring data available and identified some areas that need improving such as data collection of the sexuality of clients. In rough sleeping and homelessness situations can be difficult to gather at first point of contact.

3. Please list any consultations that you may have had and/or local/national consultations, research or practical guidance that will assist you in completing this EqIA.

We have reviewed the EqIAs of neighbouring boroughs, which although much larger, have similar characteristics to the City in terms of rough sleeping.

## **C: Your Policy or Function**

1. What is the main purpose of the policy or function?

The Homeless Act 2002 places a duty on local authorities to carry out a review of homelessness in their area and based on this review publish a strategy to prevent and tackle homelessness. This is the City of London's third Homelessness Strategy and as has been developed through consultation with key stakeholders, including those who have experienced homelessness and those who remain homeless in the City. The strategy also draws on the successes, learning and changing environment that have been experienced within and beyond the City since the last strategy was produced.

The strategy identifies five key priorities

- 1. Preventing homelessness
- 2. Ending rough sleeping
- 3. Increasing supply of and access to accommodation
- 4. Delivering outstanding integrated services
- 5. Improving the health and wellbeing of homeless people

#### Groups that are overrepresented

A number of vulnerable and minority groups of society are over-represented in the homeless demographic. However it is important to note that given the City's relatively low numbers for statutory homelessness applications, representation can considerably fluctuate from year to year. The P1E data is based on 2012-2013 statistics, but provide a relevant 'snapshot' of marginal and vulnerable groups being over-represented in this sector. For example, according to the P1E 2012-2013 statistics, 19.4% of decisions completed for those who made a homeless application in the City were from the black population. This is high compared to the 2.6% black resident population of the Square Mile, the 5% black City workers population <sup>4</sup> and the 13.3% black resident population of Greater London<sup>5</sup>. The Asian population is also over-represented at 16% of applications made compared to 12.7% resident population and 12% City workers population.

The biggest reason for priority need (P1E, 2014) was mental illness, or disability. This accounted for 22% of those deemed to be owed a full housing duty. The proportion of the English population meeting the criteria for one common mental

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<sup>&</sup>lt;sup>4</sup> JSNA City Supplement-draft (2014)

http://www.cityoflondon.gov.uk/services/environment-and-planning/planning/development-and-population-information/demography-and-housing/Documents/census-information-reports-ethnicity.pdf

disorder (is) 17.6 per cent in 2007<sup>6</sup>. Further to this, those with drug dependency and rough sleeping were other reasons for being placed in priority need which also are over-represented groups. Therefore this group is also over-represented according to 2012-2013 statistics.

Regarding age, the City's rough sleeping population aligns with that of Greater London's (CHAIN, 2014), but those who present as homeless are over-represented in the 25-44 age group consisting of over 72% of those households accepted in comparison to the 40.5% representation of the City's resident population and roughly 55% of the City workers population<sup>7</sup>.

The City rough sleeping population consists of a significantly over-represented group of males compared to females at 94% male in 2012-2013 (CHAIN, 2014). The London rough sleeping gender divide consists of 88% male. Compare this to the 61% male working population of the City (PHAST report, 2012) and we can see a large over-representation of the male population with regards to the strategy.

Sexuality is not routinely recorded by CHAIN or for the purpose of statutory homeless reporting. However, this characteristic is often identified through case work. No applicant's approached the City as homeless in 2012-2013 as a reslt of homophobic abuse. However, the city provides signposting to specialist services such as Stonewall Housing (which is also signposted on the website), the Albert Kennedy Trust and Broken Rainbow. Working with people sleeping rough presents a number of difficulties in asking their sexuality therefore statistics are very sparse. The City is working with its outreach provider to examine how this recording can be improved.

2 Are there any other objectives of the policy or function, if so what are they?

The strategy sits within the wider objective of the government's commitment to tackling homelessness. This document balances the wider objectives with the City's specific and unique homeless demographic needs (high levels of rough sleeping compared to relatively low numbers of statutory applications).

3 Do any written procedures exist to enable delivery of this policy or function?

The Homelessness Act 2002 and Code of Guidance for Homelessness are the key written procedures regarding the statutory homelessness function. The strategy is also supported through guidance from DCLG and Homeless Link regarding working with rough sleepers. Other supporting documents and procedures include guidance on eligibility, benefits legislation, working with those with NRPF (No Recourse to

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<sup>&</sup>lt;sup>6</sup> http://www.nhsconfed.org/Publications/Documents/Key\_facts\_mental\_health\_080911.pdf

<sup>&</sup>lt;sup>7</sup> <a href="http://www.cityoflondon.gov.uk/business/economic-research-and-information/research-publications/Documents/research-2012/The%20Public%20Health%20and%20Primary%20Healthcare%20Needs%20of%20City%20Workers.pdf">http://www.cityoflondon.gov.uk/business/economic-research-and-information/research-publications/Documents/research-2012/The%20Public%20Health%20and%20Primary%20Healthcare%20Needs%20of%20City%20Workers.pdf</a>

Public Funds), and other related Governmental procedures which are amended due changes in policy and legislation, such as Welfare Reform.

In addition, the City Outreach team is commissioned with respect to a specification which also includes equalities policies and procedures.

4 Are there elements of common practice in the service area or function that are **not** clearly defined within the written procedures?

No

5 Who are the main stakeholders of the policy?

There are number of stakeholders to this policy. The main stakeholders are the homeless population of the Square Mile. However, other key stakeholders also include partner agencies as discussed in the strategy. The strategy has been developed through consultation with key stakeholders, including those who have experienced homelessness and those who remain homeless in the City. Others consulted include the following.

#### Internal:

- Members of the Court of Common Council of the City of London Corporation
- Adult Social Care
- Built Environment
- Children's Social Care
- City of London Police
- Community Safety Partnership
- Early Years and Education
- Housing
- Public Health
- Substance Misuse Partnership

#### External:

- Broadway
- East London NHS Foundation Trust
- London Borough of Tower Hamlets
- London Probation Trust
- Pathway Homeless Team, Royal London Hospital
- Providence Row
- Providence Row Housing Association
- Toynbee Hall
- Westminster City Council
- 6 Is the policy associated with any other Corporation policy (s)?

The strategy sits alongside the Housing Strategy and Housing Allocations Policy

It also integrates with, and supports the delivery of, a number of the City's strategies and policies, including:

- City Together Strategy: The heart of a world class city 2008–2014, which
  identifies the challenge of supporting our communities, including those
  experiencing homelessness and rough sleeping
- Corporate Plan 2013-17, in which responding to the implications of welfare reform, the Localism Act, and NHS and public health reforms is a key priority
- **Department of Community and Children's Services Business Plan**, in which protecting and safeguarding vulnerable people through better prevention and early intervention is a priority
- Joint Health and Wellbeing Strategy, in which improving the health and wellbeing of those who are homeless and sleeping rough is identified as a priority, and which sets out plans to reduce health inequalities between local communities, and
- Safer City Partnership Plan 2013-16, which sets out the City's response to domestic abuse, a significant cause of homelessness, and anti-social behaviour.
- 7 Are there any areas of the service/policy that are governed by discretionary powers? If so, is there clear guidance as to how to exercise these?

There is some discretion within the Homelessness Act, for example the discretion to provide interim accommodation or who to provide rent deposit to. This will be covered by the action plan which will aim to create protocols for such discretionary issues to ensure transparency.

8 Is the responsibility for the proposed policy or function shared with another department or authority or organisation? If so, what responsibility, and which bodies?

Under each priority, the strategy states 'we will'. The 'we' does not refer to the City alone. It is instead a reference to the broad range of partners – City services, outreach services, health services, the City of London Police, businesses and others – who have a role in delivering better outcomes for those who are homeless or at risk of homelessness. Where the City is responsible, it will lead on the delivery of actions, and where partners are responsible, the City will work to co-ordinate and support delivery where necessary. The City will lead on monitoring the implementation of this strategy and reporting its progress.

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## D: The Impact

Assess the potential impact that the policy could have on people who share the protected characteristics. The potential impact could be negative, positive or neutral. If you have assessed negative potential impact for any people who share one or more of the protected characteristics, you will need to also assess whether that negative potential impact is high, medium or low.

(N.B. Impact will not be equally negative or positive or neutral for all groups. There will be differing degrees of impact, the purpose of this section is to highlight whether it is disproportionately different)

a) Identify the potential impact of the policy/service/proposal on men and women:

Gender	Positive	Negative (please specify if High, Medium or Low)	Neutral	Reason
Women	<b>✓</b>			Although under-represented, this group is likely to be addressed through strategy regarding factors such as Domestic Abuse and prevention of homelessness
Men	<b>✓</b>			This group is over-represented particularly in the rough sleeping demographic. The strategy makes tackling rough sleeping a priority and therefore is expected to have a beneficial impact for this group.
Transgender/ transexual			<b>✓</b>	We recorded a homeless applicant or rough sleeper from this from this client group, but signposting is available to appropriate agencies.

b) identify the potential impact of the policy/service/proposal on the basis of the following:

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	Positive	Negative (please specify if High, Medium or Low)	Neutral	Reason
Pregnancy & Maternity	~			strong safety net for homeless families in this category regarding priority need
Marriage & Civil Partnership			<b>✓</b>	

c) Identify the potential impact of the policy/service/proposal on different race groups:

Race	Positive	Negative (please specify if High, Medium or Low)	Neutral	Reason
Asian (including Bangladeshi, Pakistani, Indian, Chinese, Vietnamese, Other Asian Background – please specify	<b>✓</b>			This group is over-represented and therefore should benefit from the actions resulting from the strategy
Black (including Caribbean, Somali, Other African, Other black background – please specify)	<b>√</b>			This group is over-represented and therefore should benefit from the actions resulting from the strategy
White (including English, Scottish, Welsh, Irish, Other white background – please specify)	<b>✓</b>			This group is over-represented, such as EEA nationals who are sleeping rough, and therefore should benefit from the aims of the strategy
Mixed/ Dual heritage (White and Black Caribbean, White and Black African, White and Asian, Other mixed background - please specify)	<b>✓</b>			This group is over-represented and therefore should benefit from the aims of the strategy
Gypsies/Travellers			✓	Annual monitoring statistics suggest

		there are no clients in this group in the City
Other (please specify)		

d) Identify the potential impact of the policy/service/proposal on disabled people:

Disability	Positive	Negative (please specify if High, Medium or Low)	Neutral	Reason
Physical Disability	✓			Legislation provides a statutory responsibility to prioritise homeless people who are vulnerable with these support needs
Sensory Impairment	✓			Legislation provides a statutory responsibility to prioritise homeless people who are vulnerable with these support needs
Learning Difficulties	✓			Legislation provides a statutory responsibility to prioritise homeless people who are vulnerable with these support needs
Mental Health Issues	✓			Rough sleeping services have been developed significantly and will continue to address this client group which is an over-represented demographic

e) Identify the potential impact of the policy/service/proposal on different age groups:

Age Group (specify, for example younger, older etc)	Positive	Negative (please specify if High, Medium or Low)	Neutral	Reason
Older People	✓			Services have been developed significantly and will continue to address this client group which is an over-represented demographic
Young People/children	✓			Services have been developed significantly and will continue to address this client group which is an over-represented demographic

f) identify the potential impact of the policy/service/proposal on lesbians, gay men, bisexual or heterosexual people:

Sexual Orientation	Positive	Negative (please specify if High, Medium or Low)	Neutral	Reason
Lesbian			<b>✓</b>	Monitoring is limited for this characteristic, however, support and signposting to specialist services is available for this group
Gay Men			<b>✓</b>	Monitoring is limited for this characteristic, however, support and signposting to specialist services is available for this group

Bisexual	chai sign	itoring is limited for this racteristic, however, support and posting to specialist services is lable for this group
Heterosexual	chai prov grou thos	racteristic. However mainstream rision meets the needs of this up. Specialist provision exist for the in circumstances such as nestic abuse.

g) Identify the potential impact of the policy/service/proposal on different religious/faith groups?

Religious/Faith groups (specify)	Positive	Negative (please specify if High, Medium or Low)	Neutral	Reason
Buddhist			✓	This group is not monitored, but it is not anticipated that faith groups will be impacted negatively by the strategy
Christian			<b>√</b>	This group is not monitored, but it is not anticipated that faith groups will be impacted negatively by the strategy
Hindu			<b>✓</b>	This group is not monitored, but it is not anticipated that faith groups will be impacted negatively by the strategy
Jewish			✓	This group is not monitored, but it is not anticipated that faith groups will be impacted negatively by the

	strategy
Muslim	
Sikh	
Other (please specify)	

h) As a result of completing Question 1 a-f above what is the potential impact of your policy?

High **⑤** Medium **⑤** Low ✓

The safety net provision of legislation more broadly supports those with vulnerabilities such as age, mental health etc and are therefore deemed as priority. In addition, the City of London is committed to monitoring the equalities impact of the strategy within the context of the wider monitoring process.

2. Could you minimise or remove any negative potential impact? Explain How.

We have not identified any potential negative impacts but through monitoring will continue to identify any risk and respond accordingly.

3. If there is no evidence that the policy promotes equality of opportunity or prevents unlawful discrimination—could it be adapted so that it does? How?

We believe that the policy promotes equality of opportunity / prevents unlawful discrimination by delivering a targeted response to improve outcomes for clients.

Please ensure that all actions identified are included in the attached action plan and reflected in your service plan.

Please sign and date this form, keep one copy and send one to Equality, Diversity & Human Rights Manager

Signed Signed Signed

Simon Cribbens Service Head

Date Date

# **Action Plan**

Recommendation	Key activity	Progress milestones	Officer Responsible	Progress