



Tackle inequality so people have a fair chance

INTEGRATED IMPACT ASSESSMENT TEMPLATE

Homelessness and Rough Sleeping Strategy and Homelessness Charter <i>To end homelessness, in all forms, in Gateshead</i>	Age	Race	Sex	Gender reassignment	Disability	Religion or Belief	Pregnancy and Maternity	Sexual Orientation	Marriage and Civil Partnership	Description of potential mitigation
Equality impact: (✓ all that apply. The assessment should also consider impact on council employees and carers where applicable)	Y	Y	Y	Y	Y	Y	Y	Y		
Age <p>The above data collated in our Homelessness Review 2021 shows those aged 25-34 are most likely to be homeless or at risk of homelessness, accounting for 34% of all homelessness cases. Homelessness occurs less frequently for those aged over 45 years old.</p>										<p>Publicising the strategy and charter to relevant services, particularly those for under 25s.</p> <p>Develop an online service directory that advertises related provision and includes age specific information, where appropriate.</p> <p>The strategy outlines an action to carry out a needs assessment to identify the types of supported accommodation and support services required. This should consider age-related demand data to match provision with those ages most affected and any age-related gaps in provision. This will include reviewing provision currently under the Support and Independent Living Service (SAILS) model and addressing gaps, including those for young offenders and young couples. This will also include assessing any gaps</p>



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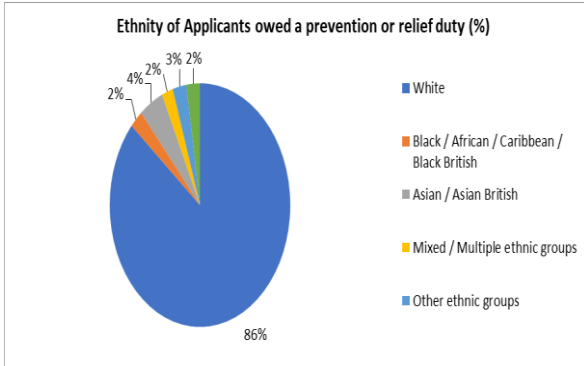
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<p>There is already a specific pathway for people aged 16/17, with a specialist worker within our Integrated Referral and Assessment Team. There is also already a Support and Independent Living Service (SAILS) accommodation model for young people.</p> <p>The strategy and charter are not impacted by any age-related criterion, so the aims and actions should improve homelessness for all age groups, including children.</p> <p>The strategy has an action to extend access to family mediation to those aged over 18, with a view that this can be a means to preventing homelessness for more young people. It also has specific actions on developing joint working protocols for 16/17-year-olds and care leavers, and highlights the need to address provision requirements for young people.</p> <p>Bed and breakfasts are an unsuitable type of accommodation for families with children and for young people. To address this, the strategy has an action to ensure sufficient provision of appropriate 24/7 crisis accommodation for a diversity of needs to prevent homelessness and rough sleeping and to reduce reliance on B & B.</p>												<p>in support for children in homelessness/supported accommodation, particularly those affected by domestic abuse.</p> <p>Ensure sufficient provision of appropriate 24/7 crisis accommodation to reduce reliance on bed and breakfasts for families with children.</p> <p>Work with DLUHC (Department for Levelling Up Housing and Communities) Homelessness Advisor during Phase 2 of the Homelessness and Allocations Review to ensure the needs of young people are addressed.</p>
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<p>Ensuring timely intervention for young people in transition who are leaving care is also outlined as an action within this strategy.</p>												
<p>Race, religion and belief</p>  <p>The above data collated in our Homelessness Review 2021 shows that 86% of those who are homeless are white.</p> <p>The strategy and charter are not impacted by any race or religion/belief criterion, so the aims and actions should improve issues around homelessness for all.</p> <p>The strategy outlines a need to develop a protocol with social care colleagues for those rough sleepers that are likely to be eligible</p>	Y					Y					<p>Publicising the strategy and charter to relevant services, particularly faith groups and services for minority groups, including relevant voluntary and community sector (VCS) services.</p> <p>Ensure the strategy and charter is accessible to those whose first language isn't English. Ensure housing officers know how to access interpreters to provide a fair service and promote the facility for accessing interpreting services.</p> <p>Develop an online service directory that advertises related provision and includes specific information on BME and faith services where appropriate.</p> <p>The strategy outlines an action to carry out a needs assessment to identify the types of supported accommodation and support services required. This should consider ethnicity and faith related data and information to assess any gaps in provision.</p>	



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<p>under the Care Act and for those with no recourse to public funds (NRPF). Those with no recourse to public funds are more likely to come from more diverse ethnic groups and therefore the strategy should have a positive impact on provision for minority groups.</p>											<p>Develop a protocol as outlined within the strategy for those with no recourse to public funds.</p> <p>We will work with our Refugee and Migration Team and relevant partners, including those within VCS, to understand any relevant needs and barriers to seeking advice and support when assessing and developing homelessness pathways and provision.</p>
<p>Sex and gender</p> <p>Annual data considered in the development of this strategy shows 574 single males and 406 single females were owed a homelessness prevention duty.</p> <p>There was a far greater proportion of females owed this duty overall when also adding in those with children, there were 392 additional females with dependent children in comparison to 42 males with dependent children.</p> <p>In comparison 295 single males and 93 single females were owed a homelessness relief duty, which is given when we are no longer able to prevent homelessness.</p>			Y	Y							<p>Publicising the strategy and charter to relevant gender-related services, including services for those who are transgender.</p> <p>Develop an online service directory that advertises related provision and includes information on gender-related services where appropriate.</p> <p>The strategy outlines an action to carry out a needs assessment to identify the types of supported accommodation and support services required. This should consider gender-related data and information to assess any gaps in provision. This will include considering the provision of emergency accommodation for female victims of domestic abuse with older male</p>



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<p>This data shows that more females are owed a homelessness duty, however we are less likely to prevent homelessness for single males.</p> <p>The strategy and charter are not impacted by any sex and/or gender criterion, so the aims and actions should improve issues around homelessness for all.</p>											<p>children in household as well as provision for male victims of domestic abuse.</p> <p>We will also assess provision for homelessness applicants who are transgender, to consider any gaps in provision. This will include assessing whether our homelessness pathways and processes best meet the needs of transgender applicants.</p>
<p>Pregnancy</p> <p>Government Homelessness Case Level Collection (HCLIC) data in this area is limited, only showing pregnancy in relation to priority need. This shows just 1.6% of those given a priority need were given it due to pregnancy. The data does not show the volume of those assessed at prevention and relief stage that were pregnant when assessed, which is likely to be much higher.</p> <p>The strategy and charter are not impacted by any pregnancy related criterion, so the aims and actions should improve issues around homelessness for all.</p>											<p>Publicising the strategy and charter to services accessed by those who may be pregnant.</p> <p>Develop an online service directory that advertises related provision and includes information on provision for those who are pregnant.</p> <p>The strategy outlines an action to carry out a needs assessment to identify the types of supported accommodation and support services required. This should consider other potential sources of pregnancy related data and information to assess any gaps in provision. Future contracts and service specifications developed should also consider requirements for pregnant service users. This will also include assessing whether our homelessness pathways and processes best meet the needs of pregnant applicants.</p>



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										<p>We should review the data we collect on pregnant women to better inform our homelessness strategy moving forward.</p>
<p>Disability</p> <p>15.4% of those owed a homelessness duty were not working due to long-term illness / disability</p> <p>13.8% of those owed a homelessness duty said they had a ‘physical ill health and disability’ support need. 32.5% said they had a ‘History of mental health problems’ and 4.3% said they had a learning disability.</p> <p>Our snapshot survey of those living in homelessness supported accommodation suggests this figure is much higher, with 69% of service users having some form of disability or long-term health condition.</p> <p>The strategy and charter are not impacted by any criterion related to disability, so the aims and actions should improve issues around homelessness for all.</p>					Y					<p>Publicising the strategy and charter to services accessed by those who may have a disability.</p> <p>Develop an online service directory that advertises related provision and includes information on provision for those who have a disability.</p> <p>The strategy outlines an action to carry out a needs assessment to identify the types of supported accommodation and support services required. This should consider disability related data and information to assess any gaps in provision. Future contracts and service specifications developed should also consider requirements for disabled service users. This will also include assessing whether our homelessness pathways and processes best meet the needs of disabled applicants.</p>



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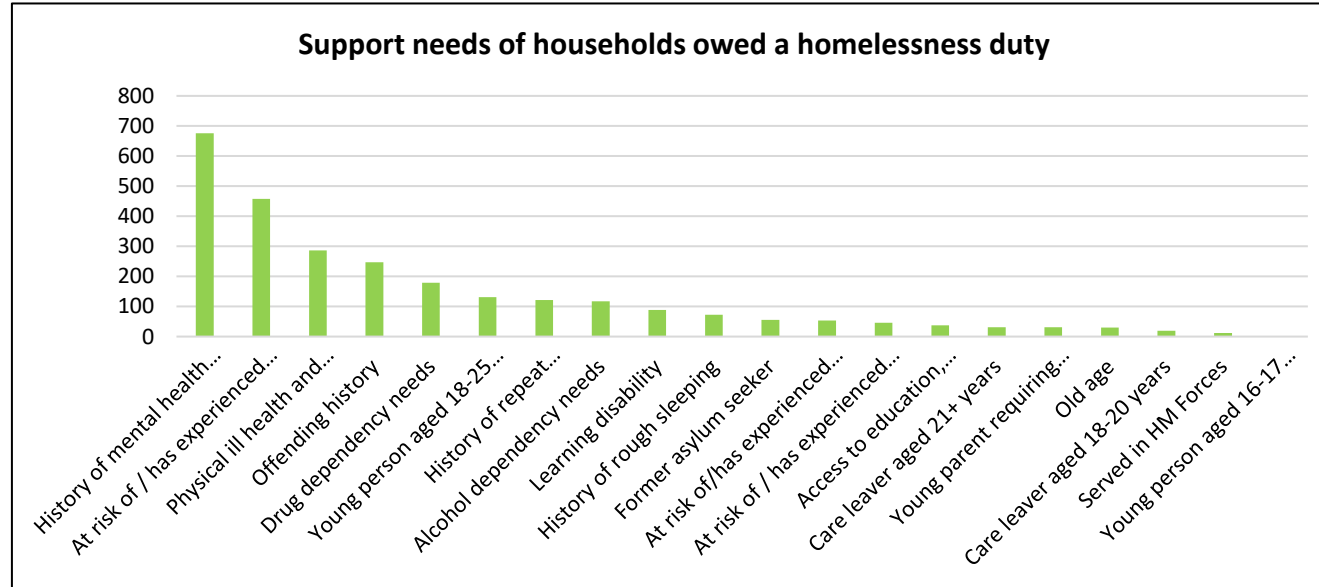
<p>Sexual orientation</p> <p>There is no data on sexual orientation provided in the homelessness review which informed the Homelessness and Rough Sleeping Strategy.</p> <p>The strategy and charter are not impacted by any criterion relating to sexual orientation, so the aims and actions should improve issues around homelessness for all.</p>									Y		<p>Publicising the strategy and charter to LGBT services.</p> <p>Develop an online service directory that advertises related provision and includes information on provision for those who are LGBT.</p> <p>The strategy outlines an action to carry out a needs assessment to identify the types of supported accommodation and support services required. This should consider other potential sources of LGBT related data and information to assess any gaps in provision. Future contracts and service specifications developed should also consider requirements for LGBT service users. This will also include assessing whether our homelessness pathways and processes best meet the needs of LGBT applicants.</p> <p>We should review the data for this that we collect on applicants to better inform our homelessness strategy moving forward.</p>
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Health impact: (eg physical health, mental health, wellbeing, substance misuse)



The most significant support needs of households for those owed a homelessness duty were as follows:

- 32.5% History of mental health illness
- 22.1% At risk of or has suffered domestic violence
- 13.8% Physical ill health or disability
- 11.9% History of offending

366 households who were owed a duty had three or more support needs and the total proportion of households with support needs owed a duty is higher in Gateshead (average 68% each quarter) than the average in England (49%) and the North East (59%).

Publicising the strategy and charter to services accessed by those who may have health-related needs.

Develop an online service directory that advertises related provision and includes information provision for those who have health-related needs.

The strategy outlines an action to carry out a needs assessment to identify the types of supported accommodation and support services required. This should consider health-related data and information to assess any gaps in provision. This will also include assessing whether our homelessness pathways and processes best meet the needs of those with health-related needs.



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The strategy outlines the following health-related actions, aimed at improving health-related outcomes for those homeless or at risk of homelessness:

- Develop protocols with health services to assist with prioritising access to substance misuse and specialist mental health services
- Early intervention and prevention of homelessness in relation to domestic abuse
- Carry out a needs analysis using the data generated from the homelessness review, as well as other data, to identify the types of supported accommodation and support services required, particularly for people with multiple complex needs and those subject to domestic abuse, and ensure adequate provision
- Develop service specifications for those services that are to be commissioned, including Psychologically Informed Environment (PIE) principles for those with complex needs to provide a trauma-informed approach to support.
- Review the pathways for homeless people with multiple or complex needs including mental health and dual diagnosis to improve customer journey

Rough sleeping

Rough sleeper numbers have largely been monitored through an annual count one night a year, which for the previous two years has recorded 0 rough sleepers. However, data collected during our homelessness assessments shows that the number of rough sleepers that were subject to the duty to relieve homelessness during 19/20 was 20, and the number with a history of rough sleeping was 73.

The strategy outlines the following rough sleeper specific health-related actions, aimed at improving outcomes for those homeless or at risk of homelessness:

- Ensure sufficient provision of appropriate 24/7 crisis accommodation for a diversity of needs to prevent homelessness and rough sleeping and to reduce reliance on B & B.
- Work in partnership with health to better address the health needs of rough sleepers and those at risk of rough sleeping, including access to primary care
- Provide outreach support to people in very insecure accommodation who are at risk of rough sleeping

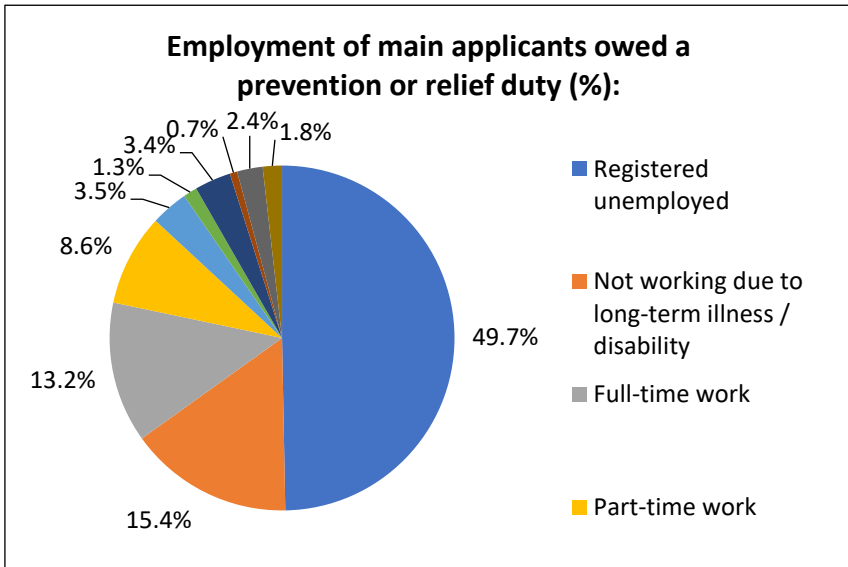


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The strategy and charter should therefore have a positive impact on the health needs of those who are homeless or at risk of homelessness.

Socio Economic impact: (eg neighbourhood, ward, area of deprivation, household group, income, wealth)



In Gateshead 49.7% of those owed a homelessness duty were registered as unemployed during the year 19/20. This is substantially higher compared to 30.5% nationally during 19/20 and was around 10% higher than the North East regional average for Oct-Dec 2020.

The LIoN map was also used to search for areas in Gateshead with the most need for employment, high out of work benefit claimants and areas with income poverty to identify specific locations where there may be more people

Publicising the strategy and charter to services accessed by those who may have employment related needs and/or reside in areas of deprivation. Publicising the strategy and charter to businesses and services providing opportunities around training, volunteering and employment, as well as those which provide financially related advice and assistance.

Develop an online service directory that advertises related provision and includes information on provision for those who have employment or financial related needs.

The strategy outlines an action to carry out a needs assessment to identify the types of supported accommodation and support services required. This should consider LIoN data and information to inform any future models of provision.



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<p>registered as unemployed who could be at greater risk of homelessness. This highlights areas such as the Springwell Estate, Chopwell, Old Fold, Felling and Beacon Lough as some of those that may need more focused action.</p> <p>The strategy also outlines an action to work with landlords to prevent eviction, which will result in positive outcomes in this area for those who are homeless or at risk of homelessness</p>	
<p>Environmental impact: (does the proposal impact on climate change and the Council’s commitment to be carbon neutral by 2030?)</p> <p>N/A</p>	
<p>Cumulative impact: (consider impact based on successive budgetary decisions relating to the proposal, or is the proposal part of wider budgetary considerations that may collectively have an impact on service users, and is potentially at odds with the Thrive agenda)</p> <p>N/A</p>	
<p>Summary of consultation/data/research undertaken to inform the assessment: (eg feedback and engagement with service users, trade unions, employees, partners, public, benchmarking, case studies)</p> <p>We undertook a statutory homelessness review which gathered a range of relevant data to inform the development of the strategy. Findings from this will be publicised via our website, alongside our Homelessness and Rough Sleeping Strategy.</p> <p>As part of this Statutory Homelessness Review, a survey was carried out to gather views and experiences from currently homeless people that could inform the Homelessness and Rough Sleeping Strategy and the Homelessness Charter. The main findings were as follows:</p> <p>Experience of homelessness</p> <ul style="list-style-type: none"> • For the majority of those responding (67%), this was their first experience of homelessness. • A small minority (7% of the sample) had been homeless more than ten times. Both of these respondents were male. <p>Reasons for homelessness</p>	



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- Family and relationship breakdown were by far the most prevalent reasons cited for homelessness.
- Violence at home was cited by all the respondents living in the refuge, but this reason was also cited by four other respondents.
- 19% cited rent arrears and debt being a factor in homelessness. A prison stay, and having nowhere to go on discharge, was a determining factor in 19% of returns (6 people, all male).

Prevention of homelessness

- A significant proportion suggested that their homelessness might have been prevented if they had been given a temporary place to stay.
- Access advice at the right time was cited as a preventable factor by 14% of respondents.

Exiting homelessness

- In terms of exiting homelessness, 66% wanted their own flat in Gateshead and 34% wanted supported accommodation.
- A significant minority of people (21%) suggested they would benefit from a move to accommodation outside Gateshead.
- Almost all the respondents chose the Council as the most important organisation that should contribute to ending homelessness in Gateshead.

Main concerns

- A significant minority of respondents had concerns about successfully managing their tenancy and bills, feeling lonely or isolated, or losing the support they are currently receiving when they are housed. Safety (of self, and of children) also featured multiple times.
- A fifth of respondents cited worries about having their health needs met once they are rehoused. The health needs reported included Parkinson's disease, ADHD, asthma/eczema/allergies, mobility issues, and having a learning disability.

We also undertook a detailed analysis of the needs of those using supported accommodation and floating support services. Findings from this will be publicised via our website, alongside our Homelessness and Rough Sleeping Strategy.

We consulted internal partners within our Internal Homelessness Working Group to co-produce this strategy and charter as well as external partners in our External Homelessness Working Group.

We have also consulted our Strategic Housing Board, Health and Wellbeing Board and Community Safety Board, in addition to our Strategic Housing Providers Partnership and our new Homelessness Forum. All were supportive of both the Strategy and the Charter.



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V Sibson

Signed: Vicky Sibson, Strategy and Partnership Service Manager : (completing officer)

Date: 24.11.21

Kevin Scarlett

Signed: Kevin Scarlett, Service Director: (approved)

Date: 24.11.21