

# **Equality & Human Rights Impact Assessment (EHRIA)**

This Equality and Human Rights Impact Assessment (EHRIA) will enable you to assess the **new, proposed or significantly changed** policy/ practice/ procedure/ function/ service\*\* for equality and human rights implications.

Undertaking this assessment will help you to identify whether or not this policy/ practice/ procedure/ function/ service\*\* may have an adverse impact on a particular community or group of people. It will ultimately ensure that as an Authority we do not discriminate and we are able to promote equality, diversity and human rights.

Before completing this form please refer to the EHRIA [guidance](#), for further information about undertaking and completing the assessment. For further advice and guidance, please contact your [Departmental Equalities Group](#) or [equality@leics.gov.uk](mailto:equality@leics.gov.uk)

*\*\*Please note: The term 'policy' will be used throughout this assessment as shorthand for policy, practice, procedure, function or service.*

<b>Key Details</b>	
<b>Name of policy being assessed:</b>	Adult Social Care Accommodation Strategy for Older People 2016 to 2026.
<b>Department and section:</b>	Adults and Communities – Strategic Planning and Commissioning
<b>Name of lead officer/ job title and others completing this assessment:</b>	Julia Eames - Strategic Planning and Commissioning Officer
<b>Contact telephone numbers:</b>	0116 3055382
<b>Name of officer/s responsible for implementing this policy:</b>	Amanda Price – Interim Head of Service, Strategic Commissioning and Market Development
<b>Date EHRIA assessment started:</b>	1.2.16
<b>Date EHRIA assessment completed:</b>	3.11.16

# Section 1: Defining the policy

## Section 1: Defining the policy

You should begin this assessment by defining and outlining the scope of this policy. You should consider the impact or likely impact of the policy in relation to all areas of equality, diversity and human rights, as outlined in Leicestershire County Council's Equality Strategy.

### 1 What is new or changed in this policy? *What has changed and why?*

This 10 year strategy has been prepared with the aim to raise awareness with older people, their families and support networks, about maintaining independence and planning for the future. By ensuring older people have access to advice and information about housing services that support their needs and promote independence the aim is that fewer people will require formal care and support in the future.

Although Adult Social Care doesn't directly provide accommodation, the strategy relates to how the Department will work alongside partners, particularly across local councils and the NHS, to develop preventative interventions relating to accommodation choice and services and the responsibilities of adult social care in relation to accommodation in line with the Care Act Guidance 2014.

The Strategy relates to all current and future older people within Leicestershire County, including those without any social care needs as well as those who do have eligible social care needs and includes people with acute illnesses, people with long term physical or mental health conditions, people with dementia, older people with a learning disability.

The strategy relates to people living in different types of accommodation, including general purpose housing and specialist accommodation for the elderly. The strategy relates to people regardless of tenure of accommodation or if the person lives alone or with others.

There is still a need for local data to evidence the need for different types and tenures of accommodation for older people to inform planning and policies. The Housing and Economic Development Needs Assessment is due imminently.

There are currently 5 Extra Care Housing Schemes in the County, another one is currently in development and others are in the pipeline. There are many sheltered and retirement schemes. There are currently 180 residential and nursing homes registered with CQC within the County.

MTFS targets relating to the development of extra care to be used where appropriate in favour of residential care, are currently £30k (16/17), increasing to £95k (17/18).

The way that Extra Care is commissioned and provided in Leicestershire is being relaunched to ensure it is targeted at people who are ordinary resident of

	<p>Leicestershire and people who have been assessed in accordance with the Care Act guidance and identified as a result to have care needs that are eligible to be appropriately met by the provision of an extra care housing scheme.</p> <p>Consultation has identified that much current conventional sheltered housing stock is often difficult to fill as it isn't built to mobility/wheelchair accessibility standards, has a lack of facilities, lack of on-site support and lack of social activities. Planning commitment to 'Lifetime homes' accessibility is now dealt with under Part M of building regulations and is optional dependent on local need and viability. This affects the availability of accommodation for people with mobility difficulties in terms of living accommodation and visitability. In reality people without mobility problems may choose to live in non-accessible properties and people may buy accessible properties even though they do not need them at the time. The strategy aims to promote the need for more focus on developing suitable accommodation to meet the needs of older people and increase choice.</p> <p>Social isolation and loneliness amongst older people is also recognised in the strategy and the need for developing a sense of community and neighbourhood support is also identified in the action plan.</p> <p>The consultation has not revealed any accommodation initiatives specifically aimed at minority groups.</p>
2	<p>Does this relate to any other policy within your department, the Council or with other partner organisations? <i>If yes, please reference the relevant policy or EHRIA. If unknown, further investigation may be required.</i></p> <p>The Adult Social Care Strategy 2016 - 2020 has been prepared to outline the vision and strategic direction of social care support for the next 4 years. The life of the strategy has been determined by matching to the life of the current Medium Term Financial Strategy (MTFS), in order for us to our meet financial targets and implement our new approach to adult social care.</p> <p>In order to meet our statutory and financial obligations we have developed a model which is a 'stepped' approach, designed to ensure that people can get the right level and type of support, at the right time to help prevent, delay or reduce the need for ongoing support, and maximise people's independence. The 'stepped' approach outlines how the Department can support people with different levels of need in order to:</p> <ul style="list-style-type: none"> <li>• prevent a need for social care (by making universal services eg advice and information relating to housing related support to make homes healthy, safe, accessible and convenient and availability of desirable and affordable housing options to meet the needs of older people and the development of community and neighbourhood support),</li> <li>• reduce the need for social care (through targeted interventions, eg equipment, adaptations and assistive technology),</li> <li>• delay the need for social care (through reablement and rehabilitation services) and for those most in need,</li> <li>• meeting needs where need and eligibility established in a way that still maximises independence and quality of life ( through the development of extra care housing and shared lives).</li> </ul>

	<p>The following strategies/workstreams are related to this area of work:</p> <ul style="list-style-type: none"><li>- Adult Social Care Strategy 2016-20</li><li>- Adult Social Care Commissioning Strategy</li><li>- Medium Term Financial Strategy</li><li>- Adult Social Care Workforce Strategy</li><li>- Finance</li><li>- Assessment, support planning and review</li><li>- Resource allocation</li><li>- Learning and Development</li><li>- Compliance</li><li>- Performance Management</li><li>- Integration with District and Borough Planning and Housing Departments and housing providers</li><li>- Integration with health and voluntary sector</li><li>- The Lightbulb project, (Better Care Fund)</li><li>- Local Area Co-ordinators (Public Health)</li><li>- The Adult Social Care Equipment, Adaptations and Assistive Technology Strategy 2016 – 2020.</li><li>- Market shaping</li><li>— Prevention Strategy</li><li>— Information &amp; Advice Strategy</li></ul>																																																
3	<p>Who are the people/ groups (target groups) affected and what is the intended change or outcome for them?</p> <p>The potential impact is upon everyone living in Leicestershire. The accommodation requirement for older members of the population will have an impact on accommodation for all age groups.</p> <p>The greatest impact will be on older people and people with disabilities, with a need or potential need for social care support.</p> <p>The projected numbers and <b>proportions of the population</b> in Leicestershire aged 65 are;</p> <table><tr><th>POPPI projections 2015</th><th>2015</th><th>2020</th><th>2025</th><th>2030</th><th>% increase from 2015 to 2030</th></tr><tr><td>People aged 65-69</td><td>42,400</td><td>38,600</td><td>41,200</td><td>47,900</td><td>11.48%</td></tr><tr><td>People aged 70-74</td><td>31,700</td><td>40,200</td><td>36,900</td><td>39,600</td><td>20.00%</td></tr><tr><td>People aged 75-79</td><td>24,400</td><td>29,000</td><td>37,100</td><td>34,300</td><td>28.86%</td></tr><tr><td>People aged 80-84</td><td>17,800</td><td>20,500</td><td>24,800</td><td>32,000</td><td>44.38%</td></tr><tr><td>People aged 85-89</td><td>11,100</td><td>12,900</td><td>15,500</td><td>19,100</td><td>41.88%</td></tr><tr><td>People aged 90 and over</td><td>6,600</td><td>8,300</td><td>10,700</td><td>14,000</td><td>52.86%</td></tr><tr><td><b>Total population 65 and over</b></td><td><b>134,000</b></td><td><b>149,500</b></td><td><b>166,200</b></td><td><b>186,900</b></td><td><b>28.30%</b></td></tr></table>	POPPI projections 2015	2015	2020	2025	2030	% increase from 2015 to 2030	People aged 65-69	42,400	38,600	41,200	47,900	11.48%	People aged 70-74	31,700	40,200	36,900	39,600	20.00%	People aged 75-79	24,400	29,000	37,100	34,300	28.86%	People aged 80-84	17,800	20,500	24,800	32,000	44.38%	People aged 85-89	11,100	12,900	15,500	19,100	41.88%	People aged 90 and over	6,600	8,300	10,700	14,000	52.86%	<b>Total population 65 and over</b>	<b>134,000</b>	<b>149,500</b>	<b>166,200</b>	<b>186,900</b>	<b>28.30%</b>
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<b>Total Population 75 and over</b>	<b>59,900</b>	<b>70,700</b>	<b>88,100</b>	<b>99,400</b>	<b>39.74%</b>
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The ethnic breakdown of older people living in Leicestershire is;

### **Ethnic group**

People aged 65 and over by age and ethnic group, year 2011(POPPI)

	<b>White</b>	<b>Mixed/ multiple ethnic group</b>	<b>Asian/ Asian British</b>	<b>Black/ African/ Caribbean/ Black British</b>	<b>Other Ethnic Group</b>
People aged 65-74	59,697	110	1,763	143	78
People aged 75-84	37,467	67	791	62	49
People aged 85 and over	15,015	27	150	10	8
<b>Total population aged 65 and over</b>	<b>112,179</b>	<b>204</b>	<b>2,704</b>	<b>215</b>	<b>135</b>

A particularly important factor is the tripartite relationship between health, ageing and inequality (Draper and Fenton, 2014). This means that the experiences of older people from different groups in terms of age, gender, socio-economic status, will impact differently on their mental health.

Several authors (Guasp, 2011, Manthorpe et al, 2010, 2012, Moriarty & Manthorpe, 2012) have highlighted the limited evidence base in terms of our knowledge about the mental health of older lesbian, gay, bisexual and transgender people and older people from minority ethnic groups.

### **Summary of proposed changes to current framework;**

The focus is on maximising individuals own assets, informal support from families and communities and encouraging people to plan ahead.

The key aims is to help older people to live in their own home for as long as possible and for those who can no longer manage living in general purpose accommodation to provide specialist accommodation that continues to maximise people's independence and wellbeing.

The strategy proposes;

- taking a more proactive approach to providing advice and information which relates to housing, to enable people to maintain their homes, make changes and plan for their older age.
- identify people who may most benefit from assistive technology, daily living equipment and adaptations to their accommodation.
- ensuring all specialist accommodation has dementia friendly facilities.
- ensuring the age criteria in extra care is applied flexibly, so that where relevant younger people with a learning disability, early onset dementia or

	<p>other disabilities can benefit from the unique provision of independent living, with a level of support, that extra care can offer.</p> <ul style="list-style-type: none"> <li>• identifying locations where additional specialist accommodation is needed and working with partners to facilitate provision.</li> <li>• Build on the advocacy, advice and practical support available to support people to access appropriate housing.</li> <li>• Agree the definitions for describing specialist accommodation for older people locally.</li> <li>• Work with local planning authorities to influence the types of homes delivered to better meet the needs of older people in response to the evidence of need.</li> <li>• Promote development of community and neighbourhood support and social prescribing.</li> <li>• Highlight the need for accessible public transport to enable older people to remain active and independent and connected to their local community, including those living in specialist retirement accommodation and extra care housing.</li> <li>• Review the evidence to establish if it is beneficial to utilise sheltered and extra care schemes to provide opportunities for reablement.</li> <li>• Explore opportunities to develop the Share Lives scheme run by the Council.</li> <li>• Introduce revised eligibility criteria for new applicants to extra care schemes where the Council has nomination rights.</li> </ul>																		
<b>4</b>	<p>Will this policy meet the Equality Act 2010 requirements to have due regard to the need to meet any of the following aspects? <b>(Please tick and explain how)</b></p> <table border="1"> <thead> <tr> <th></th><th>Yes</th><th>No</th><th>How?</th></tr> </thead> <tbody> <tr> <td>Eliminate unlawful discrimination, harassment and victimisation</td><td>X</td><td></td><td>The strategy recognises the Council serves a diverse population and supports all individual's rights to make decisions and choices about their accommodation.</td></tr> <tr> <td>Advance equality of opportunity between different groups</td><td>X</td><td></td><td>The strategy aims to improve choices and outcomes for all older people.</td></tr> <tr> <td>Foster good relations between different groups</td><td>X</td><td></td><td>The strategy aims to identify ways that communities can support each other and that specialist accommodation for older people can act as a 'hub' for the wider community so help to foster good relations between different groups</td></tr> </tbody> </table>				Yes	No	How?	Eliminate unlawful discrimination, harassment and victimisation	X		The strategy recognises the Council serves a diverse population and supports all individual's rights to make decisions and choices about their accommodation.	Advance equality of opportunity between different groups	X		The strategy aims to improve choices and outcomes for all older people.	Foster good relations between different groups	X		The strategy aims to identify ways that communities can support each other and that specialist accommodation for older people can act as a 'hub' for the wider community so help to foster good relations between different groups
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## Section 2: Equality and Human Rights Impact Assessment (EHRIA) Screening

### Section 2: Equality and Human Rights Impact Assessment Screening

The purpose of this section of the assessment is to help you decide if a full EHRIA is required.

If you have already identified that a full EHRIA is needed for this policy/ practice/ procedure/ function/ service, either via service planning processes or other means, then please go straight to [Section 3](#) on Page 7 of this document.

## Section 2

### A: Research and Consultation

<b>5.</b>	Have the target groups been consulted about the following?	<b>Yes</b>	<b>No*</b>
	a) their current needs and aspirations and what is important to them;	<b>X</b>	
	b) any potential impact of this change on them (positive and negative, intended and unintended);		<b>X</b>
	c) potential barriers they may face		<b>X</b>
<b>6.</b>	If the target groups have not been consulted directly, have representatives been consulted or research explored (e.g. Equality Mapping)?		<b>X</b>
<b>7.</b>	Have other stakeholder groups/ secondary groups (e.g. carers of service users) been explored in terms of potential unintended impacts?	<b>X</b>	
<b>8.</b>	*If you answered 'no' to the question above, please use the space below to outline what consultation you are planning to undertake, or why you do not consider it to be necessary.		
	<p>The consultation has been open to the general public and through relevant organisations to promote to maximise a wide ranging response. The consultation sought comment from internal colleagues and partner agencies.</p> <p>Details of the on-line survey was sent to Parish Councils, Community and Faith groups, voluntary sector organisations, primary and secondary care health services and district and borough councils. Posters were displayed in libraries and the customer reception area at County Hall.</p> <p>Details were sent to residential care homes and extra care housing schemes and other housing providers of specialist retirement housing.</p> <p>Focus groups were undertaken in extra care housing schemes and with Age UK participants and the OPEN older person's forum.</p>		

**Section 2****B: Monitoring Impact**

<b>9.</b>	Are there systems set up to:	<b>Yes</b>	<b>No</b>
	a) monitor impact (positive and negative, intended and unintended) for different groups;	X	
	b) enable open feedback and suggestions from different communities	X	

**Note: If no to Question 8, you will need to ensure that monitoring systems are established to check for impact on the protected characteristics.**

**Section 2****C: Potential Impact**

10.	Use the table below to specify if any individuals or community groups who identify with any of the ' <a href="#">protected characteristics</a> ' may <u>potentially</u> be affected by this policy and describe any positive and negative impacts, including any barriers.			
		Yes	No	Comments
	Age	x		This strategy is focused on providing positive outcomes for all older people. The strategy relates to providing advice and information to enable people to consider their options and obtain housing related support from their local community and is not just for people who approach social care. Providing information in a variety of places and formats that considers communication needs including language, reading ability, IT skills and access to the internet, vision and hearing problems has been highlighted in the delivery plans.
	Disability	x		This strategy is focused on maximising the safety, independence and quality of life of older people with disabilities by promoting accessible accommodation and increasing accommodation options and services. This approach would benefit all disabled people.
	Gender Reassignment	x		As Race – see below.



	<b>Marriage and Civil Partnership</b>	<b>x</b>		The strategy for extra care housing supports the provision of accommodation for older couples.
	<b>Pregnancy and Maternity</b>		<b>x</b>	
	<b>Race</b>	<b>x</b>		The focus on achieving individual outcomes will support equality of service delivery. The strategy promotes that all specialist accommodation should endeavour to provide flexible inclusive services. Ongoing monitoring is required to ensure that services are accessible and inclusive.
	<b>Religion or Belief</b>	<b>x</b>		As above
	<b>Sex</b>	<b>x</b>		As above
	<b>Sexual Orientation</b>	<b>x</b>		As above
	<b>Other groups e.g. rural isolation, deprivation, health inequality, carers, asylum seeker and refugee communities, looked after children, deprived or disadvantaged communities</b>	<b>x</b>		Partnership working with District and Borough Council's to deliver the strategy will help to identify particular local needs and address accommodation issues for older people in relation to rural areas, homelessness, asylum seekers, disadvantaged communities.  Support for Carers is an integral part of the aims of the strategy.  Integration and partnerships with health services will contribute to addressing health inequalities. Reablement is a central part of the strategy and will benefit individuals through identifying personalised goals and reablement plans.
	<b>Community Cohesion</b>	<b>x</b>		The focus on maximising use of community resources should promote greater inclusion and community cohesion to promote similar opportunities to all.

11.	<p>Are the human rights of individuals <u>potentially</u> affected by this proposal? Could there be an impact on human rights for any of the protected characteristics? <b>(Please tick)</b></p> <p>Explain why you consider that any particular <a href="#">article in the Human Rights Act</a> may apply to your policy/ practice/ function or procedure and how the human rights of individuals are likely to be affected below: [NB. Include positive and negative impacts as well as barriers in benefiting from the above proposal]</p>		
	Yes	No	Comments
<b>Part 1: The Convention- Rights and Freedoms</b>			
<b>Article 2: Right to life</b>		<b>x</b>	
<b>Article 3: Right not to be tortured or treated in an inhuman or degrading way</b>		<b>x</b>	The strategy is underpinned by ASC duty to promote wellbeing and personal dignity. All services, either in house or commissioned, are expected to be delivered at an acceptable standard to maintain health and dignity. The strategy aims to enable people to live in the place of their choice. It also aims to make achievable the opportunity for people to die at home, if that is their wish.
<b>Article 4: Right not to be subjected to slavery/ forced labour</b>		<b>x</b>	
<b>Article 5: Right to liberty and security</b>	<b>x</b>		Available accommodation options will prevent people being forced to live in environments that are potentially harmful to their health and wellbeing.
<b>Article 6: Right to a fair trial</b>		<b>x</b>	
<b>Article 7: No punishment without law</b>		<b>x</b>	
<b>Article 8: Right to respect for private and family life</b>	<b>x</b>		The strategy focuses on how to support people to remain independent in the setting of their choice.
<b>Article 9: Right to freedom of thought, conscience and religion</b>		<b>x</b>	The strategy aims to ensure individuals can live in accommodation that provides people with such freedoms.
<b>Article 10: Right to freedom of expression</b>		<b>x</b>	
<b>Article 11: Right to freedom of assembly and association</b>		<b>x</b>	

	<b>Article 12: Right to marry</b>		<b>x</b>	
	<b>Article 14: Right not to be discriminated against</b>	<b>x</b>		The values and principles of the strategy are designed to ensure that no particular groups are intentionally or unintentionally excluded or disadvantaged from accessing or benefitting from them.
	<b>Part 2: The First Protocol</b>			
	<b>Article 1: Protection of property/ peaceful enjoyment</b>	<b>x</b>		Supporting people to remain independent in the setting of their choice supports this article, together with safeguarding policy
	<b>Article 2: Right to education</b>		<b>x</b>	
	<b>Article 3: Right to free elections</b>		<b>x</b>	
<b>Section 2</b>				
<b>D: Decision</b>				
<b>12.</b>	Is there evidence or any other reason to suggest that:		<b>Yes</b>	<b>No</b>
	a) this policy could have a different affect or adverse impact on any section of the community;			<b>x</b>
	b) any section of the community may face barriers in benefiting from the proposal			<b>x</b>
<b>13.</b>	Based on the answers to the questions above, what is the likely impact of this policy			
	No Impact <input type="checkbox"/>	Positive Impact <input checked="" type="checkbox"/>	Neutral Impact <input type="checkbox"/>	Negative Impact or Impact Unknown <input type="checkbox"/>
<b>Note: If the decision is 'Negative Impact' or 'Impact Not Known' an EHRIA Report is required.</b>				
<b>14.</b>	Is an EHRIA report required?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	

## Section 2: Completion of EHRIA Screening

Upon completion of the screening section of this assessment, you should have identified whether an EHRIA Report is required for further investigation of the impacts of this policy.

**Option 1:** If you identified that an EHRIA Report is required, continue to [Section 3](#) on Page 7 of this document to complete.

**Option 2:** If there are no equality, diversity or human rights impacts identified and an EHRIA report is not required, continue to [Section 4](#) on Page 14 of this document to complete.

## Section 3: Equality and Human Rights Impact Assessment (EHRIA) Report

### Section 3: Equality and Human Rights Impact Assessment Report

This part of the assessment will help you to think thoroughly about the impact of this policy and to critically examine whether it is likely to have a positive or negative impact on different groups within our diverse community. It is also to identify any barriers that may detrimentally affect under-represented communities or groups, who may be disadvantaged by the way in which we carry out our business.

Using the information gathered either within the EHRIA Screening or independently of this process, this EHRIA Report should be used to consider the impact or likely impact of the policy in relation to all areas of equality, diversity and human rights as outlined in Leicestershire County Council's Equality Strategy.

### Section 3

#### A: Research and Consultation

When considering the target groups it is important to think about whether new data needs to be collected or whether there is any existing research that can be utilised.

- 15.** Based on the gaps identified either in the EHRIA Screening or independently of this process, how have you now explored the following and what does this information/data tell you about each of the diverse groups?
- a) current needs and aspirations and what is important to individuals and community groups (including human rights);
  - b) likely impacts (positive and negative, intended and unintended) to individuals and community groups (including human rights);
  - c) likely barriers that individuals and community groups may face (including human rights)

The consultation process has helped to inform what is important to individuals and community groups. It has helped to provide insight into barriers that individuals or community groups may experience that need to be further explored.

The strategy is not proposing to make any changes to the people currently living within specialist accommodation for older people provided through the Council.

Of the people who returned the survey;

**166 Responses were received**

34 (21%) from an Interested member of the public

42 (26%) from a Person over 55 living in own home

34 (21%) from a Person over 55 living in specialist retirement accommodation

9 (5%) from a Family member/carer or friend of a person living in extra care housing

20 (12%) from a Person who works in Adult Social Care

3 (2%) from a member of district council housing staff

1 (1%) from a health care professional

32 (21%) were aged between 55 – 64 years

33 (21%) were aged 65 -74 years

19 (12%) were aged 75 -84 years

20 (13%) were aged 85+ years

i.e. **104 ( 63 %)over the age of 55 years.**

89 (58%) described themselves as having a long term illness or disability.

140 (93%) described their ethnic group as white.

73% of respondents were female.

**Responses to the question “To what extent do you agree or disagree with our ideas to improve information about housing support?” were as follows;**

Strongly agree	50% (80)
Tend to agree	37% (60)
Neither agree or disagree	9% (15)
Tend to disagree	2% (4)
Strongly disagree	0% (0)
Don't know	1%(2)

**Responses to the question “To what extent do you agree or disagree with our ideas for extra care housing support?” were as follows;**

Strongly agree	45% (72)
Tend to agree	39% (62)
Neither agree or disagree	10% (16)
Tend to disagree	2% (4)
Strongly disagree	2% (3)
Don't know	2% (4)

**Responses to the question “To what extent do you agree or disagree with our ideas for developing accommodation options for older people?” were as follows;**

Strongly agree	48% (77)
Tend to agree	36% (58)
Neither agree or disagree	10% (16)
Tend to disagree	2% (4)
Strongly disagree	1% (2)
Don't know	2% (4)

The key themes which emerged from consultation were:

- The level of familiarity with different types of housing related support is variable and more information is needed and will form part of the action plan to address.
- When asked about preferred sources when looking for information about how to make home improvements, or about accommodation options, search engine was the most popular, talking to friends or family came close second. Libraries, Council Offices were least popular when 'other' was discounted. A search engine was also the source that the majority of respondents said that they would go to first.
- It was highlighted that although many are, not all older people have access to or are familiar with using the internet.
- Making sure information is available to families, the development of wider community support networks and more staff being able to provide advice on housing support would help people plan for older age.
- Information and advice needs to be available for older people regarding potential housing for all tenures.
- Voluntary and community sector groups need to offer something different to traditional services, seen as being 'for older people' and activities that link older people to the wider community and offer choice are valued.
- Specialist accommodation for older people needs things like space for wheelchairs and mobility scooters.
- Loneliness; isolation; transport; maintaining the home and dementia are issues that older people feel needed to be considered.
- People's aspirations were often to remain in their current home for as long as possible and put off considering alternatives.
- Many people did not understand the unique nature of extra care until they had had personal experience of it.
- People would like to see stricter planning regulation in terms of the provision of a mix of housing in new developments which includes bungalows and restrictions on buy to let.

<b>16.</b>	Is any further research, data collection or evidence required to fill any gaps in your understanding of the potential or known affects of the policy on target groups?
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No further research or data collection is required in relation to this overarching strategy.

Further work will be required and undertaken in relation to each specific commissioning activity as it arises.

When considering who is affected by this proposed policy, it is important to think about consulting with and involving a range of service users, staff or other stakeholders who may be affected as part of the proposal.

<b>17.</b>	Based on the gaps identified either in the EHRIA Screening or independently of this process, <u>how</u> have you further consulted with those affected on the likely impact and <u>what</u> does this consultation tell you about each of the diverse groups?
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In the early weeks of the consultation period communication with key partners took place with the aim of awareness raising, promotion and further distribution of the strategy consultation. Organisations were provided with posters, flyers and web-links and were requested to pass on to anyone they thought would be interested in responding.

Various voluntary groups were targeted including; Age UK, The Bridge, WRVS, VASAL, Alzheimer's Society, VISTA, Centre for the Deaf, LAMP, Red Cross, British Legion, Voluntary Action Leicestershire, Citizen's Advice Bureau, Healthwatch.

Information was also sent via e-mail to a newly created list of community groups and faith groups.

Information was published through local parish councils, health services, district and borough councils, residential and domiciliary care providers and extra care housing schemes.

The strategy has identified issues in relation to the views of older people and those with long term health conditions, particularly in relation to dementia and the need for co-ordinated services and housing options to prevent repeated changes to their accommodation as their condition progresses and help for them and their families to navigate the systems. The consultation identified that there are significant numbers of people with learning disabilities who are getting older, who are thus becoming older people with a disability, often with aged parents whose particular needs require consideration to provide accommodation options that address their needs.

The consultation has not revealed that any other groups will face any positive or negative barriers in relation to the strategy, although no information has been identified to demonstrate that the needs of diverse groups are being addressed.

It has been suggested that people living in rural locations may have more difficulty obtaining suitable accommodation for their older age within the community in which they have family and friends.

<b>18.</b>	Is any further consultation required to fill any gaps in your understanding of the potential or known effects of the policy on target groups?
	<p>Monitoring forms are being introduced in the extra care schemes to identify ethnic origin.</p> <p>The projections are for significantly increased numbers of older people in their third age and fourth age across Leicestershire but numbers may be higher in some locations compare to others. Further insights into the types, tenures and locations of accommodation to meet their needs is required. The Housing Economic Development Needs Assessment, due to be published imminently and insights from district and borough councils will help to inform.</p>

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### Section 3

#### B: Recognised Impact

19.	Based on any evidence and findings, use the table below to specify if any individuals or community groups who identify with any 'protected characteristics' are <u>likely</u> be affected by this policy. Describe any positive and negative impacts, including what barriers these individuals or groups may face.	
		<b>Comments</b>
	<b>Age</b>	The strategy recognises that where people live can have a positive or negative impact on their health and wellbeing and this is particularly the case for older people. The rising numbers of older people has ramifications for the availability of suitable accommodation suitable for an ageing population. The aim is to improve housing related services and accommodation options for all older people.
	<b>Disability</b>	Advice and information in relation to housing related support and housing options need to be provided in accessible locations and formats considering people's communication needs and people enabled to exercise choice and control. There is a significant shortage of accessible homes compared to the number of people who want or need them. Universal access standards need to be promoted to enable disabled people to be able to visit the homes of others as well as specially adapted properties for people to live in. This strategy attempts to raise the profile of partner organisations working with the general public and housing developers to address.
	<b>Gender Reassignment</b>	There is no monitoring data available regarding numbers of people in this group in relation to accommodation issues.
	<b>Marriage and Civil Partnership</b>	As people are living longer there are increased numbers who are separated or widowed. However it has been suggested many people in this situation are embarking on new relationships and are looking for



		accommodation suitable to spend time as an older couple whilst retaining a degree of independence.
	<b>Pregnancy and Maternity</b>	
	<b>Race</b>	<p>All areas of service development are expected to address the needs of BME community groups, e.g. through monitoring uptake of services and ensuring individuals needs and preferences are taken into account. Some groups may find it more difficult to access services; if such issues are identified then this will aim to be addressed. As we develop our communication plan in connection to delivering this strategy it will present opportunities to ensure information is provided that engages people from different races to ensure they are aware of options available to them.</p> <p>The delivery plan aims to identify innovative solutions to develop community and neighbourhood support which links older people to their wider community. This should help to address any barriers for people in this group.</p>
	<b>Religion or Belief</b>	As race
	<b>Sex</b>	Demographic data shows that females are still outnumbering males living longer so will be more impacted as a group, but the issues regarding available housing related support and housing options are similar regardless of sex.
	<b>Sexual Orientation</b>	The Office for National Statistics (ONS) estimated that LGBT people represented 1.1% of the East Midlands population in 2010, of which approx. 8.0% were over 65 yrs. Based on the total population figures for Leicestershire at the 2011 census being 1,016,697 this would equate to 895 people
	<b>Other groups</b> <b>e.g. rural isolation, deprivation,</b> <b>health inequality, carers,</b> <b>asylum seeker and refugee</b> <b>communities, looked after</b> <b>children, deprived or</b> <b>disadvantaged communities</b>	For home owners their house generally provides them with their largest asset which could be used to provide them with options in their later life. However the cost of running and maintaining a house can be a burden to some people as they get older. People living in rented properties will have different options available to them. Deprivation can be an issue for either group resulting in health

		<p>inequalities. Homelessness could be a reality for some older people, unless they are deemed to be in a vulnerable category and eligible for accommodation.</p> <p>Loneliness and isolation have been identified as significant issues for many older people.</p>
	<b>Community Cohesion</b>	<p>The delivery plan aims to promote the development of community, neighbourhood support and social prescribing and identify opportunities within local communities where people can be supported to consider their future accommodation options.</p>

<b>20.</b>	<p>Based on any evidence and findings, use the table below to specify if any particular Articles in the Human Rights Act are <u>likely</u> apply to your policy. Are the human rights of any individuals or community groups affected by this proposal? Is there an impact on human rights for any of the protected characteristics?</p>	
		<b>Comments</b>
	<b>Part 1: The Convention- Rights and Freedoms</b>	
	<b>Article 2: Right to life</b>	<p>Services are expected to identify any risks to service users and professionals and to have Health &amp; Safety, safeguarding and whistle blowing policies and procedures in place. Findings supported services have policies and procedures in place.</p>
	<b>Article 3: Right not to be tortured or treated in an inhuman or degrading way</b>	<p>All service users will be made aware of complaints procedures and the right to have decisions reconsidered. Findings supported services have policies and procedures in place.</p> <p>By increased partnership working opportunities to improve individual's quality of life will be enhanced.</p>
	<b>Article 4: Right not to be subjected to slavery/ forced labour</b>	Not likely
	<b>Article 5: Right to liberty and security</b>	<p>Increased appropriate accommodation options for older people will improve their safety and independence. Evidence suggests some people are not currently aware of some of the preventative services and housing options available to them.</p>
	<b>Article 6: Right to a fair trial</b>	Not likely

	<b>Article 7: No punishment without law</b>	Not likely
	<b>Article 8: Right to respect for private and family life</b>	The strategy advocates the need for increased accommodation options to be made available to enable older people to have a private and family life. Flexible and innovative housing design, care and support services need to address the current shortfall of suitable accommodation. Multi-generation households are reported to be on the rise driven by demographic and economic trends. The day to day impact of sharing living space can be a strain but research indicates that the majority of multi-generational households view it as a positive with benefits of company and reduced living costs.
	<b>Article 9: Right to freedom of thought, conscience and religion</b>	Services are expected to ensure individuals can live in accommodation that provides people with such freedoms. This is monitored through compliance visits.
	<b>Article 10: Right to freedom of expression</b>	Services are expected to ensure individuals can live in accommodation that provides people with such freedoms. This is monitored through compliance visits.
	<b>Article 11: Right to freedom of assembly and association</b>	Not likely
	<b>Article 12: Right to marry</b>	Not likely
	<b>Article 14: Right not to be discriminated against</b>	The principles of the strategy recognise that the Council serves a diverse population and everyone should have access to the resources and facilities which the Council commissions. When necessary the Council will target delivery of services to individuals and groups to ensure equality of access.
	<b>Part 2: The First Protocol</b>	
	<b>Article 1: Protection of property/peaceful enjoyment</b>	The strategy supports this protocol.
	<b>Article 2: Right to education</b>	
	<b>Article 3: Right to free elections</b>	
<b>Section 3</b>		
<b>C: Mitigating and Assessing the Impact</b>		
Taking into account the research, data, consultation and information you have reviewed and/or carried out as part of this EHRIA, it is now essential to assess the impact of the policy.		

<b>21.</b>	If you consider there to be actual or potential adverse impact or discrimination, please outline this below. State whether it is justifiable or legitimate and give reasons.
<p>N.B.</p> <p>i) If you have identified adverse impact or discrimination that is <u>illegal</u>, you are required to take action to remedy this immediately.</p> <p>ii) If you have identified adverse impact or discrimination that is <u>justifiable or legitimate</u>, you will need to consider what actions can be taken to mitigate its effect on those groups of people.</p>	
<b>22.</b>	<p>Where there are potential barriers, negative impacts identified and/or barriers or impacts are unknown, please outline how you propose to minimise all negative impact or discrimination.</p> <ul style="list-style-type: none"> <li>a) include any relevant research and consultations findings which highlight the best way in which to minimise negative impact or discrimination</li> <li>b) consider what barriers you can remove, whether reasonable adjustments may be necessary, and how any unmet needs that you have identified can be addressed</li> <li>c) if you are not addressing any negative impacts (including human rights) or potential barriers identified for a particular group, please explain why</li> </ul>
<p><b>Section 3</b> <b>D: Making a decision</b></p>	
<b>23.</b>	Summarise your findings and give an overview as to whether the policy will meet Leicestershire County Council's responsibilities in relation to equality, diversity, community cohesion and human rights.
<p>The new strategic approach aims to support people to be as independent as possible and plan ahead for their accommodation needs in later life. It requires that vulnerable people are safeguarded, and that community support and engagement are maximised. This strategy meets Leicestershire County Council's responsibilities in relation to equality, diversity, community cohesion and human rights.</p>	
<p><b>Section 3</b> <b>E: Monitoring, evaluation &amp; review of your policy</b></p>	
<b>24.</b>	Are there processes in place to review the findings of this EHRIA and make appropriate changes? In particular, how will you monitor potential barriers and any

	<p>positive/ negative impact?</p> <p>The action plan will be used to checks on progress of implementation of the strategy, which will be overseen by the Adult Social Care Strategy Steering Group. Monitoring the impact and any barriers in relation to equalities and human rights will be integral to the implementation of the action plan.</p>
<b>25.</b>	<p>How will the recommendations of this assessment be built into wider planning and review processes?  <i>e.g. policy reviews, annual plans and use of performance management systems</i></p> <p>The findings of EHRIAs are incorporated into appropriate plans and policies.</p>

**Section 3:**  
**F: Equality and human rights improvement plan**

Please list all the equality objectives, actions and targets that result from the Equality and Human Rights Impact Assessment (EHRIA) (continue on separate sheets as necessary). These now need to be included in the relevant service plan for mainstreaming and performance management purposes.

Equality Objective	Action	Target	Officer Responsible	By when
Embed equality issues into strategy delivery and performance framework to support older people to live in accommodation that supports their wellbeing and that of their carers.	<p>Performance Improvement Officer will assist with developing a framework for delivery of the strategy linked to the overarching ASC strategy.</p> <p>Consider specific accommodation needs of older people living with particular disabilities such as dementia and learning disabilities, and support to address.</p> <p>Build into Strategy delivery plan to proactively market and develop processes to ensure extra care schemes are addressing the needs of people with protected</p>	<p>Performance framework in place and includes equality monitoring that relate to people's satisfaction with their accommodation as being able to maintain their wellbeing and evidence of where barriers and negative impacts have been addressed.</p> <p>Disruption caused by unnecessary changes of accommodation reduced or eliminated.</p> <p>Extra Care Schemes are able to demonstrate that they are meeting the needs of people with protected characteristics to reflect the diversity of the population served.</p>	<p>Performance Improvement Lead Officer</p> <p>Planning and commissioning officer for extra care</p>	23.11.16

	<p>characteristics.</p> <p>Work with all relevant staff groups, partner agencies and providers to be aware of the principles and support to implement in their actions.</p>			
Impact upon specific groups due to any changes is examined in detail	Use the outcomes of EHRIAs for specific services to inform Service Planning, monitoring whether the EHRIAs and associated action plans lead to improved outcomes for customers.	All service plans reflect EHRIA outcomes.	<p>Contract Compliance Manager</p> <p>Strategic Planning &amp; Commissioning Manager</p>	
There is equity of access to service provision without discrimination to any protected groups, as identified in Section 2 (above), particularly in relation to disability, race, religion and belief.	Service specifications for any new or remodelled service will clearly state equality requirements (including expected non-discriminatory access to the service. This will be tested through the procurement process and monitored during the life of the contract.	All contracts include EHRIA requirements and monitoring arrangements.	<p>Strategic Planning &amp; Commissioning Manager</p> <p>Contract Compliance Manager</p>	
Communities are able to meet the expectations implicit in the shift towards community support and local provision in supporting people to consider and	Evaluation of Local Area Co-ordinator pilot (started 2015)	Increased/multiple examples of advanced equality of opportunity and good relations between groups supporting older people locally to manage	(Public Health)	

manage their accommodation needs.		housing related issues  Variations in provision between different localities is minimised,		
Ensure accessibility of Information and Advice services, and all forms of communication between LCC, its partners and the public.	All known barriers to accessing these activities, as outlined in section 3B, are taken into account and adequately resourced.	Information & Advice Strategy developed.  Information Standards adopted.	Strategic Planning & Commissioning Manager	



## Section 4: Sign off and scrutiny

Upon completion, the Lead Officer completing this assessment is required to sign the document in the section below.

It is required that this Equality and Human Rights Impact Assessment (EHRIA) is scrutinised by your [Departmental Equalities Group](#) and signed off by the Chair of the Group.

Once scrutiny and sign off has taken place, a depersonalised version of this EHRIA should be published on Leicestershire County Council's website. Please send a copy of this form to [louisa.jordan@leics.gov.uk](mailto:louisa.jordan@leics.gov.uk), Members Secretariat, in the Chief Executive's department for publishing.

### Section 4

#### A: Sign Off and Scrutiny

Confirm, as appropriate, which elements of the EHRIA have been completed and are required for sign off and scrutiny.

**Equality and Human Rights Assessment Screening** ☐

**Equality and Human Rights Assessment Report** ☒

1<sup>st</sup> Authorised Signature (EHRIA Lead Officer): .....

Date: .....

2<sup>nd</sup> Authorised Signature (DEG Chair): .....  .....

Date: .....08 November 2016.....