





**Brighton & Hove
City Council**

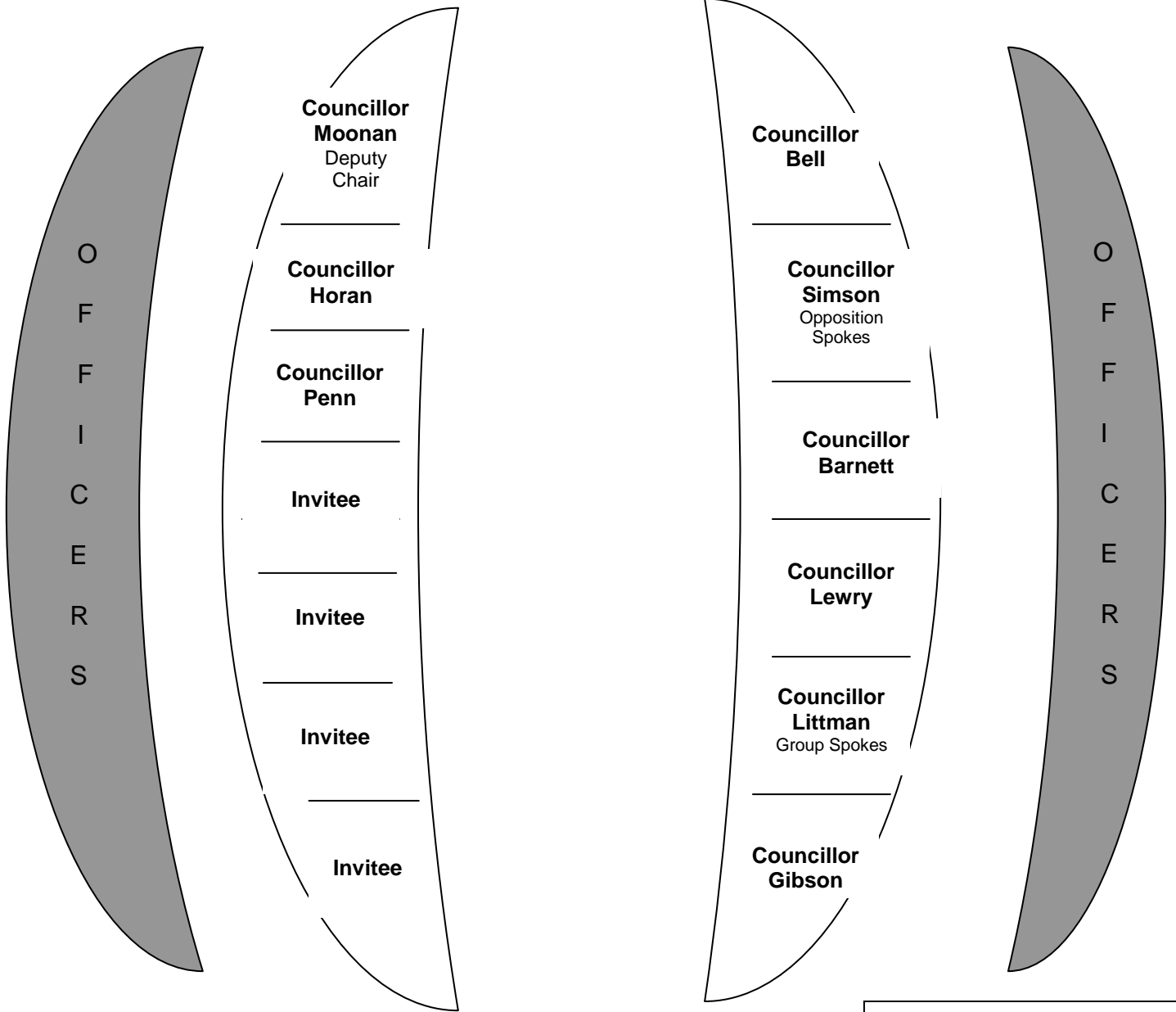
Neighbourhoods, Communities & Equalities Committee

Title:	Neighbourhoods, Communities and Equalities Committee
Date:	14 March 2016
Time:	4.00pm
Venue	Valley Social Centre, Whitehawk Way, Brighton
Members:	Councillors: Daniel (Chair) Moonan (Deputy Chair), Simson (Opposition Spokesperson), Littman (Group Spokesperson), Barnett, Bell, Gibson, Hill, Horan and Lewry,
Invitees:	Claire Holloway, Clinical Commissioning Group; Hanan Mansi; Joanna Martindale and Superintendent Nev Kemp (Sussex Police)
Contact:	Penny Jennings Democratic Services Officer 01273 291065 penny.jennings@brighton-hove.gov.uk

	The venue has facilities for wheelchair users, including lifts and toilets
	An Induction loop operates to enhance sound for anyone wearing a hearing aid or using a transmitter and infra red hearing aids are available for use during the meeting. If you require any further information or assistance, please contact the receptionist on arrival.
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Democratic Services: Neighbourhoods, Communities & Equalities Committee

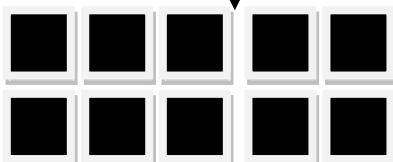
Legal Officer	Assistant Chief Executive	Councillor Daniel Chair	Democratic Services Officer
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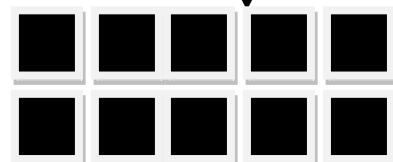
Press

Public Speaker Public Speaker

Public Seating



Public Seating



AGENDA

50 PROCEDURAL BUSINESS

- (a) **Declarations of Substitutes:** Where councillors are unable to attend a meeting, a substitute Member from the same political group may attend, speak and vote in their place for that meeting.
- (b) **Declarations of Interest:**
 - (a) Disclosable pecuniary interests;
 - (b) Any other interests required to be registered under the local code;
 - (c) Any other general interest as a result of which a decision on the matter might reasonably be regarded as affecting you or a partner more than a majority of other people or businesses in the ward/s affected by the decision.

In each case, you need to declare

- (i) the item on the agenda the interest relates to;
- (ii) the nature of the interest; and
- (iii) whether it is a disclosable pecuniary interest or some other interest.

If unsure, Members should seek advice from the committee lawyer or administrator preferably before the meeting.

- (c) **Exclusion of Press and Public:** To consider whether, in view of the nature of the business to be transacted or the nature of the proceedings, the press and public should be excluded from the meeting when any of the following items are under consideration.

Note: Any item appearing in Part Two of the agenda states in its heading the category under which the information disclosed in the report is exempt from disclosure and therefore not available to the press and public.

A list and description of the exempt categories is available for public inspection at Brighton and Hove Town Halls and on-line in the Constitution at part 7.1.

51 PRESENTATIONS

There will be two presentations before proceeding to the formal business of the meeting by the following:

- (a) A presentation by representatives of “Due East” detailing their work and including the opportunity to ask questions; and
- (b) A presentation by local community representative(s) detailing their

work and including the opportunity to ask questions.

Following these presentations and the opportunity to ask questions it is intended that there will be a short break before proceeding to the further business of the meeting.

52 MINUTES

1 - 12

To consider the minutes of the meeting held on 25 January 2016 (copy attached).

53 CHAIRS COMMUNICATIONS

54 CALL OVER

- (a) Items (54-60) will be read out at the meeting and Members invited to reserve the items for consideration.
- (b) Those items not reserved will be taken as having been received and the reports' recommendations agreed.

55 PUBLIC INVOLVEMENT

To consider the following matters raised by members of the public:

- (a) **Petitions:** To receive any petitions presented by members of the public to the full Council or at the meeting itself.
- (b) **Written Questions:** To receive any questions submitted by the due date of 12 noon on the 7 March 2016.
- (c) **Deputations:** To receive any deputations submitted by the due date of 12 noon on the 7 March 2016.

56 MEMBER INVOLVEMENT

To consider the following matters raised by Members:

- (a) **Petitions:** To receive any petitions referred from Full Council or submitted directly to the Committee;
- (b) **Written Questions:** To consider any written questions;
- (c) **Letters:** To consider any letters;
- (d) **Notices of Motion:** to consider any Notices of Motion referred from Full Council or submitted directly to the Committee.

57 DEVELOPING AND IMPROVING THE FUNCTIONING AND OUTCOMES OF LOCAL ACTION TEAMS 13 - 18

Report of the Director of Public Health (copy attached)

Contact Officer: Peter Castleton Tel: 01273 292607
Ward Affected: All Wards

58 RACIAL HARASSMENT FORUM MEMORANDUM OF UNDERSTANDING 19 - 26

Report of the Director of Public Health (copy attached)

Contact Officer: Peter Castleton Tel: 01273 292607
Ward Affected: All Wards

59 ROUGH SLEEPING STRATEGY 2016: CONSULTATION DRAFT 27 - 160

Joint report of the Executive Director of Adult Services and the Acting Director of Environment, Development and Housing (copy attached)

Contact Officer: Andy Staniford Tel: 01273 293159
Ward Affected: All Wards

60 ITEMS REFERRED FOR FULL COUNCIL

To consider items to be submitted to the Council for information.

In accordance with Procedure Rule 24.3a, the Committee may determine that any item is to be included in its report to Council. In addition, any Group may specify one further item to be included by notifying the Chief Executive no later than 10am on the eighth working day before the Council meeting at which the report is to be made, or if the Committee meeting take place after this deadline, immediately at the conclusion of the Committee meeting

61 VENUES FOR FUTURE MEETINGS

2016/17 Municipal Year:

11 July 2016, Friends Centre, Ship Street, Brighton;

10 October, The Bridge Community Centre, Lucraft Road, Brighton;

28 November 2016, St Richard's Church Hall, Egmont Road, Hove;

23 January 2017, Whitehawk Library, 179a Whitehawk Road, Brighton;

13 March 2017 tbc

The City Council actively welcomes members of the public and the press to attend its meetings and holds as many of its meetings as possible in public. Provision is also made on the agendas for public questions to committees and details of how questions can be raised can be found on the website and/or on agendas for the meetings.

The closing date for receipt of public questions and deputations for the next meeting is 12 noon on the fifth working day before the meeting.

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Meeting papers can be provided, on request, in large print, in Braille, on audio tape or on disc, or translated into any other language as requested.

Electronic agendas can also be accessed through our meetings app available through www.moderngov.co.uk

For further details and general enquiries about this meeting contact Penny Jennings, (01273 291065, email penny.jennings@brighton-hove.gov.uk) or email democratic.services@brighton-hove.gov.uk

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For further details and general enquiries about this meeting contact Penny Jennings, (01273 291065, email penny.jennings@brighton-hove.gov.uk) or email democratic.services@brighton-hove.gov.uk

Date of Publication Friday, 4 March 2016

BRIGHTON & HOVE CITY COUNCIL

NEIGHBOURHOODS, COMMUNITIES AND EQUALITIES COMMITTEE

4.00pm 25 JANUARY 2016

SOUTH PORTSLADE COMMUNITY CENTRE, CHURCH ROAD, PORTSLADE

MINUTES

Present : Councillors Daniel (Chair); Councillor Moonan (Deputy Chair), Simson (Opposition Spokesperson), Littman (Group Spokesperson), Barnett, Gibson, Hill, Horan, Lewry and Taylor

Invitees: Hanan Mansi (HOPE Sussex), Joanna Martindale (H K Project) and James Collis (Sussex Police)

Apologies: Apologies were received on behalf of Councillor Bell and Claire Holloway (Clinical Commissioning Group)

PART ONE

40 PROCEDURAL BUSINESS

40a Declaration of Substitutes

40.1 Councillor Taylor was in attendance in substitution for Councillor Bell.

40b Declarations of Interest

40.2 There were none.

40c Exclusion of Press and Public

40.3 In accordance with Section 100A of the Local Government Act 1972 ("the Act"), the Committee considered whether the public should be excluded from the meeting during consideration of any item of business on the grounds that it is likely in view of the business to be transacted or the nature of the proceedings, that if members of the public were present during it, there would be disclosure to them of confidential information as defined in Section 100A (3) of the Act.

40.4 **RESOLVED** - That the public be not excluded during consideration of any item of business on the agenda.

41 RESPONDING TO DOMESTIC AND SEXUAL VIOLENCE AND ABUSE AND VIOLENCE AGAINST WOMEN AND GIRLS: COMMISSIONING AND PARTNERSHIP PRIORITIES - PRESENTATION & REPORT

41a Presentation by Survivor of Domestic Abuse

- 41.1 Madeleine Hunter introduced herself and gave a presentation based on her own experiences and drawing out common threads in the experience of survivors of domestic and sexual violence. Madeleine referred to her own situation and explained that having broken from and come through an abusive relationship she now worked for RISE and for a Lewes based group, in the case of the latter seeking to raise awareness of this issues in rural communities and in assisting victims on their journey through and to the other side of abuse and was committed to raising awareness of the needs of those who had suffered abuse and the support available to them.
- 41.2 A common experience of all survivors was that in the aftermath of abuse the impact on victims and their families lasted for a very long time after the chain of events which had acted as a catalyst in seeking help. That journey was slow and draining for all concerned and still had an effect on herself and her children daily, notwithstanding that they had rebuilt their lives over several years now. In her own case, she realised afterwards that she had been subjected to sustained verbal abuse for a number of years which had eroded her self-esteem and confidence and that she had not recognised this as abuse until it had become physical. She had found the Police sympathetic but had found in common with many victims that they felt overwhelmed and then became swamped by the process and found themselves almost to be on trial as they struggled to deal with paperwork, case conferences and practical issues whilst trying to maintain some normality and to move on with their lives.
- 41.3 In her own case her ex-partner had been clever and manipulative (as perpetrators often were), she had felt heavily scrutinised, especially by her own social worker until she had been subjected to a tirade of abuse at a case conference and had finally felt that she was believed.
- 41.4 The Committee thanked Madeleine for her courage in coming forward and in sharing her experiences, which were enlightening and also highlighted the need to raise awareness of these issues which were often hidden and could go unreported until victims had reached the point of desperation. It was really important that information was out there which enabled victims to feel they could come forward and would receive the assistance they needed.
- 41.5 The Chair stated that it appeared clear that as well seeking to ensure that the multi-agency/professional involvement which might be necessary was streamlined. It was also vitally important that the support offered was appropriate to each individual/family, there would be differing individual needs and it must to be recognised assistance offered needed to be person specific.

41.6 **RESOLVED** – That the content of the presentation be noted.

41b Responding to Domestic and Sexual Violence and Abuse and Violence Against Women and Girls Commissioning and Partnership Priorities - Report

41.7 The Committee considered a report of the Director of Public Health summarising the work undertaken in relation to Domestic Violence and Abuse (DVA and Rape, Sexual Violence and Abuse (RSVA), describing the extent and impact of these crime types in the city and commissioning and partnership priorities.

41.8 The Violence Against Women and Girls Commissioner, James Rowlands, introduced the report explaining that the City had a Violence Against Women and Girls (VAWG) Strategy which set out an approach to DVA and RSVA, as well as other forms of VAWG. This was consistent with the approach which had been taken by HM Government in their action plan “Call to End Violence Against Women and Girls”. The overarching outcome of the strategy was to realise the aspiration that residents and communities were free from VAWG crimes, specifically by: holding perpetrators to account, decreasing social tolerance and acceptance and to increase people’s ability to have safe, equal, violence-free relationships.

41.9 The Chair, Councillor Daniel, commended the report which set out the extent and impact of these crime types in the city and the commissioning and partnership priorities which had been identified and flowed from them. Councillor Moonan, the Deputy echoed the comments made by the Chair and the Committee concurred in that view.

41.10 Councillor Horan alluded to paragraph 3.26 which referred to the financial risks and implications which would arise in consequence of the predicted reduction in funding for 2016/17, asking whether and what contingency arrangements were in place to address this. Joanna Martindale sought clarification in respect of the same matter. Councillor Littman stated that it was important that this important work as underlined by the presentations given that afternoon was not undermined or compromised as a result of lack of funding.

41.11 Councillor Gibson stated that it was also important to link into the work carried out in schools to ensure awareness of this issue.

41.12 Superintendent James Collis stated that it was intended to seek to protect delivery of these services from the Police’s perspective. It was also explained that alternative/new funding streams were currently under investigation. The Chair, Councillor Daniel, stated that she was minded to submit a letter to the Home Office, and to the Police and Crime Commissioner emphasising the importance of this work and the need to ensure that its effectiveness was not compromised due to lack of funding. As a result of discussion it was agreed that there was cross-party support for approach suggested by the Chair and that a letter should be sent on behalf of the Committee in those terms.

41.13 Councillor Daniel also requested that a further update report be provided to the Committee later in the year updating on the current position and detailing the potential consequences of any funding short-falls.

41.14- **RESOLVED** – (1) That the Committee notes the current work in the city in relation to Domestic Violence and abuse (DVA) and Rape, Sexual Violence and Abuse (RSVA); and

(2) That the Committee notes that the reporting of DVA and RSVA is increasing and that:

- While a re-commissioned specialist service is in place this is likely to operate within a reduced joint commissioning budget and will require outcomes to be prioritised;
- There is a risk to the sustainability of the Multi-Agency Risk Assessment Conference (MARAC) process.

(3) The Committee also agree that a letter be sent to the appropriate Minister indicating Cross-Party support of the Committee for protection of Home Office funding for this important work, a copy also to be sent to the local Police and Crime Commissioner; and

(4) A further update report to be provided to the Committee later in the year updating on the current position and detailing the potential consequences of any funding short-fall.

41c Launch of “The Portal” (New Specialist Service) – Presentation by Representatives of RISE and the Survivors Network

41.15 A joint presentation was given by Gail Gray, the Chief Executive Officer of RISE and Fabia Bates Director of the Survivors Network.

41.16 It was explained that “The Portal”, which had been designed to meet diverse needs and to link existing services to provide support for survivors of abuse and violence. The important headline message to victims was that domestic abuse or sexual abuse and violence could happen to anyone and that victims were not alone, there were those who understood, that victims were believed and that they should not suffer in silence. It was recognised that a critical longer term aim was to seek to ensure that perpetrators were held to account and that survivors were not “re-victimised”.

41.17 The Portal had been designed to deliver a transformational specialist service via pooled resources, shared learning and removal of existing silos. The Portals key functions were to provide an integrated domestic violence and sexual violence service, a single point of contact/access, web based/remote access, triage, allocated case co-ordinators, comprehensive needs and risk assessment and a single case management system. Gender specific services would also be provided, a BME worker, Male worker, LGBT worker, children and young people’s worker and the ability to provide support and assistance to families who had complex needs.

41.18 The Chair commended the tremendous work which had been carried out stating that there were a number of key pointers which could be drawn out from this, namely, that it was important to prioritise with individuals on the issues which were important to them, it had been recognised that this would be differ between one individual and family and another. It was also important to involve community leaders, to facilitate the creation of

leaders from those who had been effected and to look at how the council could work most effectively with non-profit organisations. If a strapline/link highlighting the Portal could be added to Members signatures this would publicise it and she would discuss the practicalities of whether/how this might best be achieved with Democratic Services.

41.19 Both Gail Gray and Fabia Bates stressed the importance of co-ownership/working and co-operation and collaboration by all who had a locus in provision, particularly in the current financial climate in order to optimise funding opportunities in order to provide the focused support that was needed.

41.20 Councillor Simson was in agreement that it was very important to publicise the Portal and the services to which it gave access.

41.21- **RESOLVED** – That the content of the presentation be noted.

42 MINUTES

42.1 **RESOLVED** – That the Chair be authorised to sign the minutes of the meeting held on 23 November 2015 as a correct record.

43 CHAIRS COMMUNICATIONS

43.1 The Chair explained that the meeting was being recorded and would be capable of repeated viewing via the subsequent on-line webcast. The Chair gave the following communications:

South Portslade Community Centre

43.2 The Chair wished everyone a New Year as she had not seen all Committee Members already and that was the Committees' first meeting of the New Year (its fourth in total). The Chair hoped that all had, had the opportunity to rest and relax over the festive period and to recharge for the year ahead and welcomed everyone to this venue in South Portslade.

It had already been a busy year and the Chair outlined some of the work which had been undertaken to date.

City Employment and Skills Plan

43.3 The development of the "City Employment and Skills Plan" was in full swing, which whilst not the responsibility of this committee was off keen interest as its focus this time was on our city's residents furthest away from securing and sustaining employment. The Chair stated that she was particularly pleased that just last week there had been a specific event for BME people in the city to look at the barriers to employment they faced. This was combined with the opportunity for BME people to meet with members of the Fairness Commission and give their experiences of the city and how we can make it a fairer place. It was understood that it gave the commissioners and our own economic development officers lots of food for thought and importantly the information shared by the participants on housing and older people would be feed into the two remaining

public meetings of the fairness commission - the one in February dealing with Housing and the final public meeting in March on older people and wellbeing.

Fairness Commission

- 43.4 Indeed, the Fairness Commission had been in the thick of it at the moment with the commissioners visiting many groups, organisations and activities across the city including the Carers Centre, The Purple People Kitchen (Portslade Town Hall), Lunch Positive, and Deaf COG to name but a few. Seeing how much they're covering and how committed they were to their role on the Commission the Chair wished to place on record her thanks for the time and energy the commissioners had been giving.

Holocaust Memorial Day

- 43.5 It was noted with sadness that Holocaust Memorial Day fell on January 27. This year was the 71st anniversary of the liberation of Auschwitz-Birkenau, and would also be the 21st anniversary of the Genocide in Srebrenica, Bosnia. Each year the memorial day had a theme, this year's was "Don't Stand By". An apt theme which resonated with the challenges the world faces today. The Brighton and Hove Holocaust Education project had been organising, with other local projects and schools a range of events. A vigil had been held at the Friends Meeting House the previous day with another to take place on Tuesday afternoon at the Old Court Room in Brighton, there would be a schools event followed by a lead discussion open to the public.

February - LGBT History Month

- 43.6 As the end of January already was fast approaching the Chair wished to remind everyone that February was LGBT history month. The theme this year was, "Religion, Belief and Philosophy". Members were urged members to read the recent Transgender Equality report released two weeks ago by the Women and Equalities Committee. It made over 30 recommendations in a wide range of policy areas that echo many of the issues brought forward by the city's own "Trans Needs Assessment". It was great to see this raised at national level and receiving the profile it deserved. It was interesting to you read the summary which started with "Fairness and equality are basic British values". It was also interesting to note that Maria Caulfield currently MP for Lewes and ex-Brighton and Hove City Council Conservative Councillor had held the portfolio for housing when the Conservatives been in Administration 2007-2010)
- 43.7 Whilst not quite February, the Chair also wished the City's Chinese community a happy new year in two weeks' time Monday 8th February, noting that it was the year of the Monkey.

- 43.8 **RESOLVED** – That the Chair's Communications be received and noted.

44 CALL OVER

- 44.1 All items on the agenda were reserved for discussion.

45 PUBLIC INVOLVEMENT

- 45.1 The following petition which had been presented at Council on 17 December 2015 was considered.

“We the undersigned are pleased to hear that 5 Syrian refugee families will soon be arriving in Brighton and Hove. But given the scale of the current refugee crisis, we could do much more. We have the experience of welcoming 79 Oroma refugees in 2006 and an upsurge in offers of help from individuals and existing and new organisations working with refugees. We urge Brighton and Hove Council to bring in far greater numbers of Syrian refugees as soon as possible.”

(916 signatues)

- 45.2 Ms Senker the lead petitioner was invited by the Chair, Councillor Daniel to speak for 3 minutes in support of the petition and made the additional points in respect of this matter. Ms Senker amplified on the matters raised in the original petition urging that the issue be treated as a matter of extreme urgency and that priority be given to the manner in which refugees were considered for housing, empty properties, spare rooms etc., and that the number admitted to the city be re-assessed. In Ms Senker’s view the matter had moved forward since it had been considered at Council, the plight of such individuals was now more desperate.
- 45.3 The Chair then responded in the following terms.

“The Syrian Resettlement Programme is to bring a total of 20,000 Syrian refugees to the UK during the course of this parliament (ie up till 2020). Brighton & Hove City Council has so far welcomed three households (two of them with complex needs) and is committed to participating in the programme over the long term, working with a growing number of private landlords who are willing to offer affordable sustainable accommodation to refugees. We currently have two further confirmed offers of accommodation at affordable rents and are matching households to those properties with the intention of bringing those households over at the end of January or beginning of February.

We intend to increase our pro-active capacity to advertise and secure more suitable property in the city at affordable rents using funds available to us from the Home Office.

It is not possible for the council to give a definitive number of ‘places’ that it can offer the Home Office as our response will depend on appropriate accommodation being available. The Council also continues to assist homeless Syrian households who have arrived here independently as it would any other homeless families.

We are working with a wide range of organisations to ensure that the refugees who have arrived, adults and children, have the best chance of integrating here long term and contributing to the life of the city. We are enormously grateful to all those who have offered to help in many ways. The council is also supporting the existing Syrian community to organise and form an association that is able to support new arrivals.

Brighton & Hove City Council, alongside other local authorities, is advising and supporting central government to develop the systems they need to respond quickly to offers of accommodation as they become available across the South East where vacant affordable properties are so scarce.”

45.4 The Chair responded further to the additional points raised, of which she had not been given prior notice, re-iterating, that whilst there was a willingness to assist, the needs of refugees could be complex, it was not necessarily appropriate or desirable, although laudable, to house lone young people in spare rooms in people's houses, without fully assessing their needs first. Many residing in the city were in severe need of good quality affordable housing and the council was seeking to address this in concert with other agencies, those coming to the city would not be given higher priority than those living in the city and who had ties to it and had been identified as high of high priority on the Housing Waiting List. It was important to note that the city had been commended for its welcoming and inclusive approach. A number of authorities who did not have a comparable lack of housing had shown themselves to be dilatory/unwelcoming.

45.5 **RESOLVED** – That the content of the petition and response given be noted.

47b Written Questions

45.6 There were none.

47c Deputations

45.7 There were none.

46 MEMBER INVOLVEMENT

46a Petitions

46.1 There were none.

46b Written Questions

46.2 There were none.

46c Letters

46.3 There were none.

46d Notices of Motion

46.4 There were none.

47 COMMUNITY SAFETY AND CRIME IN BRIGHTON & HOVE - INFORMATION UPDATE TO NOVEMBER 2015

47.1 The Committee considered a report of the Director of Public Health describing recent activities and progress relating to priority areas in the Brighton & Hove Community Safety and Crime Reduction Strategy. A statistical analysis was also included which provided an update for key crime groups for 2015/16 up to November 2015.

- 47.2 The Head of Community Safety, Peter Castleton, explained that this was the first report that had been prepared for consideration by the Neighbourhoods Communities and Equalities Committee and that it was intended to produce a similar report for consideration by the Committee at six monthly intervals. The format for the report had been based on that previously used for the Community Safety Committee, however, feedback regarding the content and style of the report would be used to shape and develop future reports. Graphs had been provided showing monthly crime data from April 2011 to November 2015 and set out recent data in the context of both longer term trends and also seasonal crime cycles where that was applicable.
- 47.3 The Head of Community Safety was accompanied by Superintendent James Collis who was in attendance on behalf of the Police when giving his presentation. It was explained that following a period of sustained reduction in crime there had been a small increase in some areas. This was due in part although not wholly, to increased reporting, for instance in relation to domestic violence and to changes to the manner in which some crimes were recorded. Having reached a plateau over successive recent years, there had also been an increase (though small) in relation to some types of crime. Superintendent Collis stated that notwithstanding budget pressures the Police were committed to delivery of core services, and went on to explain, that HMI had instituted further changes to the manner in which crime figures were recorded.
- 47.4 Councillor Horan welcomed the report stating that if future reports could include details in relation to cyber bullying/crime. This was an insidious and apparently growing crime, with victims often initially unaware that they were being targeted. Councillor Horan's comments were acknowledged and it was agreed that the practicalities of so doing and how this information could best be presented in a meaningful way would be explored.
- 47.5 Councillor Gibson noted what had been said in relation to the manner in which figures were collected and recorded and asked for confirmation of when these changes had come into effect. It was explained that the changes had been advised in 2015 and were still being implemented. Councillor Gibson stated that in future reports it would be beneficial for Members if greater explanation could be given as on the face of it some of increases appeared to be greater than might be expected, even taking account of changes to and increased reporting.
- 47.6 Councillor Simson, referred to the way in which the figures were presented, requesting that it was important when there were changes in how reported crime was recorded that explanation was given in the text or footnotes to the tables and that a basis for comparison was retained. During her period as Chair of the Community Safety Forum (to which these figures had previously been reported), when such changes had occurred it had been difficult to make comparisons in a meaningful way between the figures as previously recorded and under the new methodology. Although not doubting the explanations given for the changes, it would give a measure of reassurance if comparisons could continue to be made. Councillor Simson also stated that it would be helpful if better comparator authorities could be cited, whilst realising that this was prescribed, in her opinion, they very different to Brighton and Hove.
- 47.7 In answer to questions in relation to the recording of drug/substance abuse related deaths it was explained that fluctuations in these figures related to the manner in which these needed to be recorded by the coroner's office.

- 47.8 Councillor Hill referred to the high incidence of “used” needles found around the city, seeking information regarding measures being taken to manage this and to improve on the current situation, given that residents often expressed concern about the public safety issues which arose. The Head of Community Safety, Peter Castleton, explained that, currently city pharmacies did not appear keen to operate needle exchange schemes, however measures to address this problem were being investigated e.g., the practicality of providing drug litter bins. The Chair, Councillor Daniel, stated that this was an issue of concern, especially in relation to the city’s parks, open spaces and other areas visited by families with children. It would be valuable to Members if information how this matter was being tackled could be provided in future reports to the Committee.
- 47.9 Councillor Simson referred to the reference in the report to the introduction a “Late Night Levy.” A decision had yet to be made by the appropriate committee (the Licensing Committee (Licensing Act 2003 Functions)), on whether to consult regarding introduction of a Levy and subsequently to introduce one. It was not certain that a Levy would be introduced and Councillor Simson would be very concerned if strategies referred to were predicated on that. Superintendent Collis confirmed that notwithstanding budgetary constraints in consequence of reduced funding, the Police remained committed to addressing issues associated with the City’s late night economy and protecting the vulnerable, based on funding as it stood currently.
- 47.10 Joanna Martindale referred to the role played by Local Action Teams (LAT’S), enquiring regarding the level of financial and other support available to them. The Head of Community Safety explained that the council was unable to provide financial support towards their running costs, LAT’s were however being signposted towards funding streams which could be available to them, advice was also available in helping them to run effectively and efficiently. Joanna Martindale responded that it appeared that not all LAT’s were aware of the position in relation to funding and this suggested that information could have been communicated more clearly. The Chair stated that engagement with the third sector and other partner organisations in order to continue to deliver to communities against a backdrop of significant funding reductions was on-going and an integral part of the Committees’ ethos.
- 47.11 In answer to further questions, it was explained that it was recognised that some LAT’s appeared, notwithstanding the differing communities across the city, to operate more effectively than others. Whilst not seeking, to be proscriptive advice was available to all, and all were encouraged to have adopt a constitution and acknowledged best practice, in order to formalise and have clarity regarding their operation. It was clearly understood that it was important to harness the energy and local awareness of LAT’s and to harness that collaboratively.
- 47.12 **RESOLVED** – That the contents of the report be noted, the general structure of the report as presented, be agreed as a template for future reports to the Committee, taking on boards the feedback received in relation to inclusion of information in relation to cyber bullying/crime, the manner in which data was presented and the comparators used.

48 THE POWER OF VOLUNTEERING

- 48.1 The Committee considered a report of the Assistant Chief Executive detailing the rationale for and asking the Committee to sign up to “The Power of Volunteering”, the new volunteering pledge for the City.
- 48.2 The Head of Communities and Equality, Emma Mc Dermott explained that the previous volunteering strategy “Joining the Dots” had been developed in 2010 and had provided a detailed understanding of the volunteering situation and priorities within the city. “The Power of Volunteering aimed to build on that work and to act as a call to action for public service organisations and voluntary sector organisations as well as businesses and individuals to engage with volunteering. This new pledge had been developed by the city wide volunteering champions group on behalf of Brighton and Hove Connected (the city’s Local Strategic Partnership). This group consisted of representatives from across the public, community and voluntary sector and had been responsible for the city’s previous volunteering strategy “Joining the Dots”.
- 48.3 Councillor Moonan welcomed the report which she considered represented an important piece of work which going forward would provide an updated strategy which would seek to ensure that the valuable resource provided by those carrying out volunteering work in the city was maximised.
- 48.4 Councillor Hill also commended the report citing the improvements that could be effected to a community as a result of work carried out by volunteers for instance in her own ward where the community café in Hollingdean had use of use of a Council building and provided a much valued community hub. A lot had been learned up which could be applied elsewhere across the city, and there were areas where improvements could be effected.
- 48.5 Councillor Littman welcomed the report, stating, however that it was important that the current level of support to voluntary groups be sustained. In the face of continuing budgetary pressures year on year, it was important that the Council did not make commitments/raise expectations which could not be met.
- 48.6 Councillor Gibson sought information regarding the structures in place to deliver the arrangements outlined. Essentially he considered that there needed to be twofold at both a formal and informal level. Overall, it was important to foster a greater sense of neighbourliness within communities, which would in turn help to achieve better outcomes.
- 48.7 The Chair agreed that work did need to be carried out both formally and informally and that “space” needed to be allowed in order for that to happen. The work being undertaken and in signing up to the “Partnership” Pledge marked the start of that process. Ultimately, due in part to the on-going pressures that had been identified, very different mechanisms and working practices needed to be put into place.
- 48.8 The Head of Communities and Equalities, Emma Mc Dermott, stressed that the “Power of Volunteering” aimed to build on the work carried out to date and to act as a call to action for public service organisations and voluntary sector organisations as well as businesses and individuals to engage with volunteering.

48.9 **RESOLVED** – (1) That the Committee agrees to sign up to the Partnership Pledge (“The Pledge”) included in the “Power of Volunteering” document set out in appendix 1 to the report on behalf of Brighton & Hove City Council;

(2) That the Committee endorses the Council’s involvement in the Volunteering Champions Group to support the co-ordination and promotion of volunteering across the city; and

(3) That the Committee notes that a further report will be brought to Committee by the Assistant Chief Executive on council plans to support and develop volunteering activity as part of the action plan developed from the pledge.

49 ITEMS REFERRED FOR FULL COUNCIL

49.1 There were none.

49b Venue for Next Meeting

49.2 It was noted that the next meeting of the Committee would take place on Monday 14 March at the Valley Social Centre, Whitehawk Way, Brighton.

The meeting concluded at 7.20pm

Signed

Chair

Dated this

day of

NEIGHBOURHOODS, COMMUNITIES & EQUALITIES COMMITTEE	Agenda Item 57 Brighton & Hove City Council
Subject:	Developing and improving the functioning and outcomes of Local Action Teams
Date of Meeting:	14th March 2016
Report of:	Director of Public Health
Contact Officer Names:	Peter Castleton/Simon Bannister and Garry Collins Tel: 29-2607
Ward(s) affected:	All

FOR GENERAL RELEASE**1. PURPOSE OF REPORT AND POLICY CONTEXT**

- 1.1. The purpose of this report is to give an overview of the Local Action Team (LAT) project work undertaken to date, specifically phase 1 work from June to December 2015, and to update on planned work to take place under phase 2 of this initiative which will conclude in June 2016.
- 1.2. The outcomes of this work will help the council in the development and delivery of co-operative working in neighbourhoods.
- 1.3. This work will assist LATs to proactively respond to community safety issues in their locality and contribute to the developing City Neighbourhoods agenda.

2. RECOMMENDATIONS:

- 2.1 That the committee note the report and recommendations developed from phase 1 of the initiative
- 2.2 That the committee agrees the proposed activities within phase 2 of this initiative.
- 2.3 The committee notes progress toward developing an independent Local Action Team Chairs Forum, which will give the LAT structure an improved opportunity as a recognised community voice enhancing collaborative relationships with council services and the NCE Committee.

3. CONTEXT/ BACKGROUND INFORMATION

- 3.1 LATs have been in existence across the city for the past 10 years. They were originally pulled together and supported by the police to identify crime and

- community safety concerns in neighbourhoods. LATs were asked to come up with three priorities which the police sought to address.
- 3.2 Phase I of the LAT development project (June-December 2015) established that there are currently 32 LATs in the city which vary considerably in the size of the area they cover, levels of attendance, governance, accountability and their willingness to work collaboratively to address the wellbeing and community safety needs of residents in their areas. The meetings are often attended by the police and a council officer, some LATs expect attendance of officers who they perceive should be accountable to them.
 - 3.3 The project aim is to seek to improve the functioning and outcomes of LATs, specifically seeking to enhance the capacity of individual LATs and the network as a whole to offer strong, representative and independent community voices, better able to raise and reflect community concerns, and to work collaboratively with the council and other stakeholders to seek community and neighbourhood improvements in relation to community safety.
 - 3.4 Seeking to enhance independence, representation and collaboration as key outcomes includes supporting LATs to understand and articulate shared neighbourhood priorities, identify and manage their own resources, seeking good standards of governance and community involvement and developing the role of LATs from a sometimes reactive 'problem identification' role to a more proactive 'problem solving' role and developing stronger partnerships with service providers to achieve this.
 - 3.5 Phase 1 of this initiative has comprised of a review of the existing LAT network, focusing on the functionality and capacity of individual LATs, identifying strengths and weaknesses of the existing network as described by LAT members, police and council staff and has sought to identify key issues and areas affecting functioning and outcomes across the network.
 - 3.6 A number of recognised strengths have been identified, particularly the LATs strong identity as independent community led groups, which are ideally placed to promote a wide range of preventative action and education in both community safety and public health/well-being. The groups also serve as a credible sounding board to raise concerns and develop local interventions. Again good examples exist in this area, particularly with ASB, working closely with the Community Safety Casework Team.
 - 3.7 Areas of work to develop further include local membership and representation to improve inclusion and capacity within many of the LAT groups. This would help improve resources, visibility, credibility and an improved ownership and understanding of neighbourhoods' priorities and concerns.
 - 3.8 Phase 2 (outlined in Appendix 1) will focus on areas of need or for development which have been identified in Phase 1, and will put in place a resource structure which LATs will be able to access and contribute towards to support improved functioning and outcomes.

- 3.9 Cutting across both phases has been a distinct sub project aimed at developing the LAT Chairs Forum as an independent umbrella group for the LAT network and a representative voice able to contribute to city-wide and strategic discussions around crime reduction and community safety.
- 3.10 Findings from the phase 1 work identify variations across the LAT network, with groups falling into three distinct types:
1. Local 'friends of' or street based groups operating informally with limited governance or proactive partnership links
 2. Local area action groups which come together around particular community issues or concerns but may be limited in their role or capacity to deliver solutions
 3. Neighbourhood forum groups which are generally well organised with a full constitution, forward planning based around a proactive vision of their community with an active officer group each requiring a distinct response and occupying a distinct role, and

This project seeks to work with the strengths and ambition of each type to enable them to best support neighbourhood work in their chosen way rather than attempting a 'one size fits all' approach toward them. Levels of support and engagement with LATs by the council will be determined within phase 2 and will be influenced by which type of LAT they are or aspire to be.

A development day is planned in March/April 2016 which will offer training to LAT Chairs and members to enable them to function at the level they are comfortable with and give them an opportunity to consider how they would like their LAT to develop in the future and how that might be achieved. This is being developed in conjunction with the Trust for Developing Communities.

4. ANALYSIS & CONSIDERATION OF ANY ALTERNATIVE OPTIONS

- 4.1. The LAT network forms the most comprehensive community response to community safety issues across the city, and without investment in the network identified within this process there is a risk that groups will become less able to contribute and that the network as a whole will weaken over time.
- 4.2. In addition to community safety concerns, the LAT network forms a valuable function in terms of local consultation and provides a representative community voice in neighbourhoods.
- 4.3. A strong and functioning community network is important to support the delivery of the council co-operative ambitions. A wide range of alternative community groups, forums and associations exist across the city. Many are small charity or local neighbourhood groups which do not have a set constitution or specific role in working with the council on community safety themes. Therefore, they have not been considered a viable option to replace the existing established LAT structure. However, they do form a key community stakeholder link at a local level.

- 4.4. Many tenant and resident groups also exist across the City with some having formal arrangements that link directly into BHCC Housing responsibilities. Some of these have evolved into the LAT structure, merging into one collective community group in a larger forum structure. This approach can help with the connectivity of various stakeholder groups covering a single demographic area. However, it is the LAT element which will set annual priorities linked specifically to community safety, with a direct link into the LAT Chairs Forum which aligns to the NCE committee.
- 4.5. The LAT structure is therefore the most suitable community group that delivers a single credible contact point to best support service delivery, community consultation, resilience and intelligence in relation to community safety.

5. COMMUNITY ENGAGEMENT & CONSULTATION

- 5.1. All local action teams have been informed about this process by council staff attending LAT meetings, and opportunities to engage in the process have been through a questionnaire circulated to all LATs, through conversations with individual council officers, via email updates and at the LAT Chairs Forum.
- 5.2. Consultation arrangements vary across the LAT structure with some meetings being much more inclusive involving a wide range of partners and community groups. A number of key stakeholders have been identified to enhance the partnership links at a local level including the active involvement of local ward Councillors. The importance of this key role has been acknowledged in supporting LATs deliver against locally identified priorities. Some LATs are chaired by Councillors in the absence of a willing community member. However, generally, LATs should be chaired by a community member with the LAT supported by Councillors.

6. CONCLUSION

- 6.1 Engagement has been very positive by LAT chairs, local Councillors and residents attending all public meetings. This has helped establish good communication links in both the LAT Chair Forum and individual local meetings. The initial phase 1 collaboration work has set a strong knowledge and relationship foundation to build upon to progress the phase 2 work. This phase 2 work will now involve individual development work to better measure input/output and outcomes to the local community for each LAT area. This evidence will then be tracked and compiled for the final LAT project report in June 2016.
- 6.2 Establishing stronger and more accountable LATs, able to identify achieve and manage resources, will help in the collaboration with the council in delivering key community safety outcomes or neighbourhood services. This will enable LATs to occupy a more proactive role, extending outcomes which not only identifying problems but collaboratively develop better solutions and share best practice.

7. FINANCIAL & OTHER IMPLICATIONS:

Financial Implications:

- 7.1 The Community Safety Partnership has previously made funds available for LAT expenses. Under the new model being developed this will no longer be available, however LATs will be directed toward and assisted to apply for funds from other sources. Additionally support is currently provided to meet the cost of LAT Chairs meetings, which is being resourced from the existing Community Safety Partnership budget. There are no other anticipated costing implications.

Finance Officer Consulted: Anne Silley

Date: 25/2/2016

Legal Implications:

- 7.2 There are no legal implications in relation to this report.

Lawyer Consulted: Simon Court

Date: 25/2/2016

Equalities Implications:

- 7.3 No EIA has been completed as this work is currently at an early stage and this will be completed as part of the phase 2 work. A key outcome of this project is to improve representation and governance within the local action team network, this has the potential to impact positively on equalities issues

Corporate / Citywide Implications:

- 7.4 The outcome of this work will assist LATs to proactively respond to the developing City Neighbourhoods agenda.

Any Other Significant Implications:

- 7.5 The project recognises the importance of the LAT Chair role (held by a community member) in leading the group. This need will be supported in the phase 2 project which will provide training for LAT Chairs developed in partnership with the Trust for Developing Communities.

SUPPORTING DOCUMENTATION

Appendices:

Appendix 1. – Range of options / opportunities for Phase 2 work:

LAT Development Phase 2 Goals

1. Governance & organisational support for LAT structure. Continue to build stronger formal LAT structure, attendance, priorities & accountability. Determine how complaints about LATs can be resolved.
2. Formalise LAT Chair Forum meeting arrangements quarterly for the year linked to NCE Committee.
3. Increase community awareness of Domestic and Sexual Violence across LAT structure, including recognised champions to support specific campaigns.
4. Expand local 'self-help' resilience plans across the LAT structure sharing best practice.
5. Expand community assets, including venues to encourage inclusion, increased membership volume, inclusive representation & shared information/intelligence.
6. Develop closer links across Tenant & Resident Forums/associations to ensure LAT structure is more inclusive/accessible to others local groups.
7. Community Safety Caseworkers continue to work with local LAT ASB priorities, attending meetings when possible gathering and sharing information (prevention & detection).
8. CCG links to support Public Health and better care agenda across LAT structure, specifically utilising Patient Participation Groups (PPG) opportunity.
9. Embed Fire/Police Community volunteers into established LAT structures to assist delivery of LAT, Fire, Police & Health prevention priorities.
10. Wider Neighbourhood Watch Coordination across LAT structure sharing best practice from established schemes.

4. ANALYSIS & CONSIDERATION OF ANY ALTERNATIVE OPTIONS

- 4.1 The memorandum is considered by the forum to be the most effective way of agreeing working arrangements. The forum is not asking the council to consider any other options at this stage although as the forum develops it may consider whether it could be commissioned to undertake work in this area.

5. COMMUNITY ENGAGEMENT & CONSULTATION

- 5.1 The council Community Safety Team has worked closely with the Forum to agree the Memorandum of Understanding.

6. CONCLUSION

- 6.1 The Memorandum of Understanding will provide the Forum with a secure footing which will enable it to move forward confidently to provide a community led service to address racist and religiously motivated crimes and incidents alongside the council and other key partners.

7. FINANCIAL & OTHER IMPLICATIONS:

Financial Implications:

- 7.1 There are no financial implications in relation to this report.

Finance Officer Consulted:

Date:

Legal Implications:

The proposals in the memorandum of understanding will help the Council in discharging its duties under the Equalities Act 2010 and the Crime and Disorder Act 1998 as well as supporting the Council's objectives of tackling inequality and discrimination.

Lawyer Consulted: Abraham Ghebre-Ghiorghis

Date 25/02/2015

Equalities Implications:

- 7.3 The adoption of the memorandum evidences the council's commitment to address racially and a religiously motivated incidents in collaboration with BME and faith communities.

Sustainability Implications:

- 7.4 There are none to this report for information. These will continue to be considered by the Substance Misuse Programme Board.

Any Other Significant Implications:

SUPPORTING DOCUMENTATION

Appendices:

1. Racial Harassment Forum: Memorandum of Understanding

Racial Harassment Forum: Memorandum of Understanding

1.0 Commitment:

1.1 This Memorandum of Understanding states Brighton & Hove's City Council's approach and commitment to the multi-agency partnership of the Racial Harassment Forum. The Forum is a fully independent, community led, non-incorporated association of statutory and non-statutory agencies and groups which participate on the basis of equality.

1.2 The Forum is within the structure of the Safe In the City Partnership and as such, accountable to the Local Strategic Partnership and Neighbourhood Communities and Equalities Committee.

1.3 The Forum was established (1999) in response to the recommendations of the Stephen Lawrence Inquiry and adopted its definition of a racist incident (also adopted nationally) which is:

“A racist or religiously motivated incident is any incident which is perceived to be racist or religiously motivated by the victim or any other person”

1.4. The Stephen Lawrence Inquiry identified 'institutionalised racism' as a factor for police and other services (housing and education are specified) which is to be taken into account in dealing with racist and religiously motivated crimes and incidents. 'Institutionalised racism' is defined as:

'The collective failure of an organisation to provide an appropriate and professional service to people because of their colour, culture or ethnic origin. It can be seen or detected in processes, attitudes and behaviour which amount to discrimination through unwitting prejudice, ignorance, thoughtlessness and racist stereotyping which disadvantage minority ethnic people' and..

'it persists because of the failure of an organisation openly and adequately to recognise and address its existence and causes by policy, example and leadership. Without recognition and action, racism can prevail as part of the ethos or culture of the organisation' and..

'there must be specific and co-ordinated action within agencies and by society at large, particularly through the educational system, from pre-primary school upwards and onwards'

2.0 The Aims of the Racial Harassment Forum are:

- To increase the trust and confidence of the Black and Minority Ethnic (BME) individuals and communities in mainstream statutory, community and voluntary organisations

- To encourage and improve the reporting of all racist and religiously motivated incidents and crimes
- To provide continuously improved responses for victims of racist and religiously motivated crimes and their families, to increase crime detection and to appropriate criminal justice and civil remedies to be delivered to those victims
- To inform the development and mainstreaming of policy and best practice in tackling racist and religiously motivated crimes and incidents
- To effectively scrutinise the levels and trends of reported racist and religiously motivated incidents, performance and victim satisfaction with services by reviewing the statistical and evidence base for the City. The Forum will also scrutinise the range of relevant statutory work practices, hold statutory authorities to account and ensure that issues or barriers to achieving the aims and objectives of the Forum are addressed by the relevant authorities.

2.1 The Terms of Reference adopted in June/July 2015 (AGM) by the membership of the Racial Harassment Forum sets out the arrangements for conduct of the Forum's business.

2.2 The aims and objectives of the Forum are a priority within the statutory Community Safety, Crime Reduction and Drugs Strategy, 2014 to 2017. The Racial Harassment Forum participates in the annual refresh of the strategic assessment of the extent and nature of racially and religiously motivated crimes and incidents in the city and in reviewing the multi-agency work programme which is set out in the Strategy. Performance and crime and incident trends are reviewed regularly by the Forum.

2.3 The Strategy and work programme are subject to resources but seek to deliver (summarised):

Area of Work 1. Increase reporting and improve responses & services:

- through mainstreaming reporting arrangements throughout statutory services including within Safeguarding Adults at Risk arrangements, young people's settings and NHS services; integrate equality considerations within commissioning contracts
- targeted publicity and outreach, enhanced reporting centres and training for supportive volunteers; targeting informed by hot-spot analysis
- Sustain delivery of a high quality casework service, assess risk and vulnerability particularly for repeat victims and take enforcement action; develop capacity of Multi-agency and Risk Assessment and Tasking meetings including community involvement and communication on performance and accountability
- Evaluate standards of service provision, including through client satisfaction surveys

Area of Work 2. Effective monitoring and improved accountability:

- Maintain, map and analyse city wide monitoring of racist/religiously motivated incidents and produce regular reports for scrutiny; all statutory partners to participate

Area of Work 3. Deter perpetrators through good criminal justice processes and ways of dealing with offenders:

- Identify early and tag racist/religiously motivated crimes and incidents and monitor quality of first response, arrests, investigation, cautions, prosecutions, convictions, victim experience and use of special measures and court sentence uplift; increase the number of successful prosecutions, reduce the number of discontinued cases and ensure victims views and safety needs are taken into account in sentencing plans; manage risks of offenders and prevent repeat offending; feedback to communities on all matters
- Maintain effectiveness and community confidence in restorative justice interventions and engage with families of perpetrators to deal with prejudice and discrimination; develop an early intervention programme for young people

Area of Work 4. Targeted projects to reduce vulnerability and risk:

- Housing services to develop policies and practices to work with social landlords (inc' within private sector) and minimise risks to those vulnerable within implementation of allocations policies and decisions
- Housing services to put in place arrangements which are consistent to city wider service standards, to combat crimes and incidents
- Assess the gap between reporting and experiences of women and act to reduce the gap and improve quality; address under-reporting by young people

Area of Work 5: Promotion of anti-racist and anti-discriminatory attitudes within communities and promote community cohesion:

- Build capacity of Forum, (including involvement by young people) and key organisations (including schools, English Language schools) through training, media and publicity;
- Monitor community tensions, potential conflicts, risk assess and reduce escalation when necessary and respond to international and national incidents/events
- Engage with refugees and migrants and support community led partnerships which help deliver community safety and inclusion objectives
- Deliver publicity and communications which counter racism and discrimination and which promote diversity and inclusion

3.0 What does this Memorandum of Understanding mean in practice?

The Racial Harassment Forum can expect to be supported by:

- Brighton & Hove City Council fulfilling its responsibilities which are set out within the Crime & Disorder Act 1998 and the Equality Act 2010. The Crime and Disorder Act states that local authorities (and partner Responsible Authorities) have an 'equal duty' to reduce crime and disorder in their area and after consultation with communities, to select priorities for action. Tackling Hate crime is identified as a priority. The Equality Act is a consolidating Act and sets out the 'public sector equality duty' which includes requirements to:
 - 'eliminate unlawful discrimination, harassment and victimisation and other conduct prohibited by the Act'.
 - Advance equality of opportunity and foster good relations'
- A designated representative of each Directorate to actively participate in progressing the aims and objectives of the Racial Harassment Forum and its work programme and to be accountable for explaining service responses and outcomes and responding to feedback from members of the RHF
- An annual Strategic Assessment and quarterly updates of national and local, racially and religiously motivated crimes and incidents, including on recorded crime levels, prosecution and conviction rates and indicators of levels of victim and community satisfaction on outcomes
- In kind support for regular meetings of the full Racial Harassment Forum, its Executive Panel and Annual General Meeting
- Opportunities to problem solve jointly with the members of Safe In The City Partnership and/or the Neighbourhood, Communities and Equalities Committee and to report on progress against key measures and approved outcomes
- Proactive monitoring and identification of community tensions and information sharing about actions that are being taken to reduce those tensions and the potential for conflict in the city
- Information about matters relevant to the core objectives of the Forum, which help increase trust and confidence, such as the findings of Equality and Impact Assessments on key service initiatives and opportunities for joint working on such initiatives
- Actions which increase the resources and capacity of the RHF including consideration of in kind support for funding applications which could further progress the aims and objectives of the Forum and which may enable the Forum to achieve independent, grant aided status
- Pro-active and positive publicity about the work of the Forum which respond to and counter negative stereotyping, inequality or incite discrimination or racial hatred and which advance equality of the diverse population and communities in the city

**HOUSING & NEW HOMES
COMMITTEE**

Agenda Item 59

Brighton & Hove City Council

**NEIGHBOURHOODS,
COMMUNITIES & EQUALITIES
COMMITTEE**

Subject:	Rough Sleeping Strategy 2016: Consultation Draft		
Date of Meeting:	2 March 2016: Housing & New Homes Committee 14 March 2016: Neighbourhoods, Communities & Equalities Committee		
Report of:	Executive Director, Adult Services and Acting Executive Director, Environment, Development & Housing		
Contact Officer:	Name:	Andy Staniford	Tel: 29-3159
	Email:	andy.staniford@brighton-hove.gov.uk	
Ward(s) affected:	All		

FOR GENERAL RELEASE

1. PURPOSE OF REPORT AND POLICY CONTEXT

- 1.1 The issue of rough sleeping has become more acute recently with a visibly increased presence on the streets. This not only impacts on the individual's life chances, but also the city's reputation and costs to public services and business.
- 1.2 The city's current approach to rough sleeping is being re-assessed to ensure that the city's commissioners, service providers and those supporting people sleeping rough are working in partnership to a clear strategic plan. This plan will reduce rough sleeping in the city and improve outcomes for people sleeping rough and those at risk of rough sleeping.
- 1.3 This report presents the draft Rough Sleeping Strategy 2016 and requests permission to carry out formal consultation to shape the final version that will be brought back for adoption later in the year.

2. RECOMMENDATIONS

- 2.1 That Housing & New Homes Committee and the Neighbourhoods, Communities & Equalities Committee:
 - (1) Approve the consultation draft of the Rough Sleeping Strategy 2016 (Appendix 1).
 - (2) Authorise the Executive Director, Adult Services and the Executive Director, Environment, Development & Housing to carry out consultation on the draft strategy.

- (3) Note that it is intended for the final strategy to come back to a joint meeting of the two committees for formal adoption and permission to implement.

3. CONTEXT / BACKGROUND INFORMATION

- 3.1 People sleeping rough are a transient population and the city's street services work with more than 1,000 cases each year, 20 every week. Around a third of these relate to people being seen more than once (in 2014/15 there were 1,129 cases involving 775 people). In November 2015, a snapshot of a single night estimated there were 78 people sleeping rough in Brighton & Hove:

People living on the streets	2010/11	2011/12	2012/13	2013/14	2014/15
Street service cases (financial year)	588	732	1,163	1,066	1,129
Official street count (people on a single night)	14 (Nov'10)	36 (Nov'11)	43 (Nov'12)	50 (Nov'13)	41 (Nov'14)
Street estimate (people on a single night) ¹	x	76 (Nov'11)	90 (Mar'13)	132 (Mar'14)	78 (Nov'15)

- 3.2 There are concerns that numbers could increase further over the next year with the natural draw of Brighton & Hove as the place to be, the impact of welfare reforms and the high cost of accessing and sustaining accommodation in the city's private rented sector.
- 3.3 As of the January 2016, the city has 272 hostel beds and 25 mental health hostel beds which are full and has a waiting list of 197 clients, 82 of which are considered a high priority.
- 3.4 Information is not available for many of the hidden homeless in our city that may be living in squats, sleeping on sofas, and staying with friends and family.
- 3.5 Rough sleeping is not a lifestyle choice, but often driven out of desperation, poverty and ill health. Police, prisons and health service report high levels of service need caused by rough sleeping:
- People sleeping rough are more likely to be the victim of crime and also more likely to commit crimes
 - The City's Joint Strategic Needs Assessment² highlights a high prevalence of mental and physical ill-health and drug and alcohol dependency amongst people sleeping rough. Other common problems include physical trauma (especially foot trauma), skin problems, respiratory illness and infections (including hepatitis).

¹ The Rough Sleeper Estimate is a different methodology from the official count and records the number of rough sleepers known to services in the city on a particular date.

² Joint Strategic Needs Assessment 2014: Rough Sleeping and Single Homeless:
<http://www.bhconnected.org.uk/sites/bhconnected/files/jsna-6.4.3-Rough-sleepers2.pdf>

- Nationally, it is estimated that the use of inpatient hospital care by people who are sleeping rough or living in insecure accommodation (such as hostels) is eight times higher than in the general population aged 16-64
 - The average age of death for a homeless person nationally is estimated to be 47 years old compared to 77 for the general population
- 3.6 The rough sleeping and single homeless population is not representative of the wider city with the 2014/15 Rough Sleeper Annual Report showing that of the 1,129 cases (involving 775 people):
- 83% were male; 17% were female
 - 12% (136 cases) were aged 17-25; 7% (83 cases) were over 55
 - 81% (917 cases) indicated that they were UK nationals
 - 19% (212 cases) were not from the UK with the largest group from central or eastern Europe (86 cases, a 50% increase from this region on 2013/14)
 - 39% (438 cases) had a local connection.
- 3.7 The council is facing significant budget reductions which have seen £77m saved in recent years and a further £68m needing to be saved by 2020. The council budget for Housing Related Support linked to rough sleeping services is £4.3m for 2016/17. In addition there was funding from Better Care, in partnership with the NHS, in 2015/16 of £0.600m. The Better Care allocation for Brighton & Hove has been confirmed for 2016/17 and the joint decision of how this is apportioned between services is planned for mid March 2016. The Community and Voluntary Sector is estimated to contribute many more millions from other funding sources and in-kind support such as through volunteering.

What will our new strategy achieve?

- 3.8 The strategy is allowing us an opportunity to refocus and reprioritise services within the available funding to better meet the needs of those at risk. Amongst the range of actions proposed in the draft strategy, we would like to see:
1. A new shared agreement, a **Multi-Agency Protocol**, between the council, service providers, and other groups supporting people sleeping rough aimed at making sure we are all promoting the same consistent message, a single offer of support focussed on moving away from rough sleeping and street life.
 2. A new permanent **Assessment Centre** with a number of temporary (sit-up) beds to enable service providers to assess the needs of people sleeping rough in a stable environment.
 3. Each person having their own **Multi-Agency Plan** that will outline who is responsible for co-ordinating their care, which services are working with them and the support available. A key part of the Plan will be to outline the client's housing options to help them make an informed choice about their future.
 4. A **primary care led hub** with a multidisciplinary team delivering services in a number of settings in the city. This will to support homeless people to access primary and community healthcare services and include outreach to street settings where appropriate, day centres and hospitals to support care and discharge planning.

5. **New accommodation** for older homeless people with complex needs following a successful bid to the Homes & Communities Agency for £569,000. The accommodation which will offer at least eight en-suite rooms adapted for people with physical disabilities, they will be able to get the extra support they need to improve their lives. This will also free up much needed hostel space for others in need.

City's Vision (draft)

- 3.9 People sleeping rough die younger than the general population yet the cost of preventing rough sleeping or supporting someone back into independence is much less than the cost to the individual and society than a life on the streets . Our draft strategy vision is:

“To make sure no-one has the need to sleep rough in Brighton & Hove by 2020”

Strategic Principle: Working together, a partnership (draft)

- 3.10 Within these priorities there is an underlying principle that, as a city, whether service commissioner, provider, community group, or individual with the desire to help, we need to work together to provide a consistent message and response to rough sleeping to support people to turn a corner and improve their lives.
- 3.11 The city's strategy needs to harness this expertise, energy and goodwill to enable all those with a stake in the city to work together and deliver our shared vision in partnership to make sure our combined efforts are not keeping people on the streets, but are focussed on getting people off the streets.

The City's Strategic Priorities (draft)

- 3.12 To help us come together as a city and deliver the strategic vision, we have focussed our strategy on five priority areas, each with a number of goals and strategic actions:

Priority 1: Preventing Homelessness and Rough Sleeping – to provide a consistent message about housing options that helps services prevent homelessness and moves people away from sleeping rough

- Goal 1: Develop a consistent citywide approach to prevent homelessness and rough sleeping
- Goal 2: Improve housing options for single person households

Priority 2: Rapid Assessment and Reconnection – outreach to assess the needs of people sleeping rough to plan support, and where appropriate, reconnect people with friends, families and support networks, before they are fully immersed in street life

- Goal 3: Provide rapid assessment, support planning and effective reconnection
- Goal 4: Target people sleeping rough with complex needs to ensure there is an integrated plan to move people into accommodation
- Goal 5: Ensure services are sensitive to the needs of all vulnerable groups including LGBT* people, young, older, women and ex service personnel

Priority 3: Improving Health – to ensure people sleeping rough are supported by health and social care services that help them to regain their independence

- Goal 6: Improve outcomes by delivering integrated primary care led health and social care services that are accessible to homeless people and support them to regain their independence
- Goal 7: Ensure those on the streets have access to emergency shelter during extreme weather

Priority 4: A Safe City – making sure people sleeping rough, residents and visitors are safe and free from intimidation

- Goal 8: Focus on managing risks, harm and promoting appropriate behaviour
- Goal 9: Promote alternatives to discourage begging

Priority 5: Pathways to Independence – to support people sleeping rough into regaining their independence

- Goal 10: Have a flexible accommodation pathway that responds to changing needs
- Goal 11: Develop bespoke supported accommodation options where appropriate
- Goal 12: Ensure timely move-on to independent accommodation

Timescales:

3.13 The Rough Sleeper Strategy Review is being developed in phases to give stakeholders opportunity to help shape the city's priorities and future action:

1. **Position Paper (Nov/Dec 2015):** this was published in November 2015 and summarised the city's current approach to rough sleeping. The Paper was used as the basis for consultation in December 2015.
2. **Draft Rough Sleeping Strategy 2016 (Mar/Apr 2016):** building on the Position Paper and options developed in the summit. We wish to consult on the draft strategy and particularly welcome contributions from those who are, or have been, sleeping rough. The results of this consultation will help shape the final strategy.
3. **Final Strategy (July 2016):** stakeholders will be encouraged to formally sign-up to the vision, aims and objectives of the strategy to ensure a unified and consistent approach across the city.
4. **Implementation 2016/17:** Delivery of the city's strategy and remodelling or redesigning services where necessary.

4. ANALYSIS & CONSIDERATION OF ANY ALTERNATIVE OPTIONS

4.1 Options for service delivery and design will be reviewed as part of the development of the new Strategy.

5. COMMUNITY ENGAGEMENT & CONSULTATION

5.1 To support the development of this draft strategy, a Position Paper was produced in November 2015 that summarised the city's current approach to rough sleeping, existing plans as well as highlighting the challenges we face. This

Paper included the draft vision and priorities for the new strategy and was the basis of the initial scoping consultation. The Paper was emailed to all councillors, MPs and stakeholders with consultation carried out through December 2015.

- 5.2 During the consultation, a stakeholder summit was held which had 78 professionals attend, and there was online consultation through the council's consultation portal which received 36 detailed submissions covering all aspects of our proposals. The council's website, social media and press engagement was used to promote the consultation.
- 5.3 There was overwhelming support for the proposed vision and priorities of the strategy, with many suggestions for improvements to the way we work. Many respondents highlighted the significant challenges faced by the strategy arising from the fundamental issues arising from the shortage of high quality affordable housing and budget pressures.
- 5.4 As a result of the consultation, there have been a number of changes to the initial priorities for the city's strategy suggested by the Position Paper:
- **Street Triage** and **Reconnection** have been merged into a new priority on **Rapid Assessment and Reconnection** which is developing Multi-Agency Plan's for people sleeping rough, where professionals work together with clients to agree the most effective course of action.
 - **Managing the Street Communities** received criticism, particularly as people sleeping rough are more likely to be the victims of crime and around half of those in the city's street communities are not sleeping rough. There were also opposing views on the balance between support and enforcement. This priority has been rewritten to focus on making Brighton & Hove **A Safe City** – for rough sleepers, residents, businesses and tourists – and recognises that a life on the streets is not appropriate and should not be supported
 - **Working with the City** has been removed as a priority as it was very clear that partnership working needs to underpin the whole strategy rather than be a separate element. We recognise that not a single element of our strategy is achievable without the combined efforts of all those living and working in the city. **A Partnership Approach** is now the strategic principle of this strategy and underpins all of the work we do.
- 5.5 Other responses to the consultation highlighted the need for the strategy to take into account the specialist needs of particular groups who may be more vulnerable and require a slightly different approach, such as the young, women and LGBT* people.
- 5.6 The detailed consultation responses were shared with those responsible for the priorities within the strategy to develop the goals and strategic actions presented in this document. A transcript of these responses is contained in the **Consultation Report at Appendix 2.**
- 5.7 A set of five partnership **Homeless Strategy Working Groups** are tasked with developing action plans to implement the priorities of the Homeless Strategy 2014. These are focussed on the Integrated Support Pathway; Work & Learning; Youth Homelessness; Homeless Prevention; and Day & Street Services. Alongside the development of this strategy, these working groups are being reviewed to develop stronger links with health and other support services to

encourage the shared ownership of actions which relate to improving services and improving the outcomes of service users. This model will include wider representation from service users. The review will be complete in March 2016 and implemented by March 2017.

- 5.8 Subject to this report being accepted, we intend to consult on this draft strategy between 16 March and 17 April 2016. As part of the consultation there will be workshops for service providers and community organisations, online consultation for all residents and businesses through the council's consultation portal, and we encourage those working with people sleeping rough to ensure their clients have a voice in responding to the consultation.

6. CONCLUSION

- 6.1 The issue of rough sleeping has become more acute recently with a visibly increased presence on the streets. This not only impacts on the individual's life chances, but also the city's reputation and costs to public services and business.
- 6.2 We are concerned that numbers could increase further over the next year with the natural draw of the city, the impact of welfare reforms and the high cost of accessing and sustaining accommodation in the city's private rented sector.
- 6.3 The city's current approach to rough sleeping needs to be re-assessed to ensure that the city's commissioners, service providers and advocates are working in partnership to a clear strategic plan that will reduce rough sleeping in the city and improve outcomes for rough sleepers and those at risk of rough sleeping.

7. FINANCIAL & OTHER IMPLICATIONS

Financial Implications:

- 7.1 Any housing related costs associated with the consultation on this strategy will be managed from within the general fund budget. Once the strategy is consulted upon, the final strategy will be reported back to this committee and any housing costs of implementation will be highlighted prior to approval.

Finance Officer Consulted: Neil Smith

Date: 08/02/16

Finance Officer Consulted: Monica Brooks

Date: 08/02/16

Legal Implications:

- 7.2 This is a draft consultation request and at this stage does not bind the Council to any decision save commitment to a small amount of resources to pursue the consultation. Given the stages process described it is sensible to have consultation take place. Choosing the correct consultees who represent all the relevant interest groups will be important.
- 7.3 There will be a significant portion of the cohort of street population who will have a range of issues which may then bring them under the umbrella of the Equalities Act and there may be some legal duties owed to them depending on their level of need. The Care Act may also apply in some instances. This should be noted in relation to the consultation process going forward.

- 7.4 The proposals themselves are proportionate and reasonable in relation to consultation and then referring back for final approval.
- 7.5 The function of street homelessness straddles the functions of the Housing & New Homes Committee as well as that of the Neighbourhoods, Communities & Equalities Committee. That is why the report is coming to both committees

Lawyer Consulted: Simon Court *Date: 04/02/16*

Lawyer Consulted: Abraham Ghebre-Ghiorghis *Date: 08/02/16*

Equalities Implications:

- 7.6 Rough sleepers are a vulnerable group more likely to have contact with the criminal justice system, drug, alcohol and health conditions, be excluded from mainstream services and have much worse outcomes than other groups. Measures to reduce rough sleeping will have a direct impact on reducing inequality in Brighton & Hove. An **Equalities Impact Assessment** has been completed for this draft strategy which is included at **Appendix 3**.

Sustainability Implications:

- 7.7 None directly arising from this report.

Crime & Disorder Implications:

- 7.8 Rough sleepers are more likely to commit crime and be the victim of crime. Measures to reduce rough sleeping will decrease the level of crime and perception of crime and increase the availability of the emergency services making the city a safer place for residents and visitors alike.

Risk and Opportunity Management Implications:

- 7.9 Genuine good practice that does not simply result in rough sleepers being pushed to less visible locations appears limited and highlights the challenge faced by the city. We need to ensure that our approach does not view rough sleepers as a problem to move but provides real solutions to prevent rough sleeping and improve the lives of those affected.

Public Health Implications:

- 7.10 As part of the Better Care initiative overseen by the Health and Wellbeing Board, an integrated health and care model for the single homeless is being developed. Although the remit of this work is broader than rough sleeping, it will be closely linked with the emerging work to develop a Rough Sleeping Strategy.

Corporate / Citywide Implications:

- 7.11 If we do not reduce rough sleeping there will be:
- More early deaths
 - Wasted lives
 - Reputation damage as a caring city
 - Tourism impact from street begging
 - Crisis pressure on Police, A&E and other services
 - Crime / ASB associated with rough sleeping / street drinking
 - Increased costs to the local authority, Police and NHS
 - Increased use of acute services

SUPPORTING DOCUMENTATION

Appendices:

1. Draft Rough Sleeping Strategy 2016
2. Consultation Report 1: Position Paper
3. Equalities Impact Assessment

Documents in Members' Rooms

1. None

Background Documents

1. Rough Sleeper Strategy Update, Neighbourhoods, Communities & Equalities Committee, 5 October 2015: [http://present.brighton-hove.gov.uk/Published/C00000885/M00005949/AI00047907/\\$20150923114229_007841_0032963_ReportRoughSleeperStrategyUpdate2015.docxA.ps.pdf](http://present.brighton-hove.gov.uk/Published/C00000885/M00005949/AI00047907/$20150923114229_007841_0032963_ReportRoughSleeperStrategyUpdate2015.docxA.ps.pdf)
2. Housing Related Support Budget & Commissioning, Housing & New Homes Committee, 23 September 2015: [http://present.brighton-hove.gov.uk/Published/C00000884/M00005929/AI00047254/\\$20150914111457_007769_0032819_HousingRelatedSupportCommissioningUpdateforHousingNewHomesCommitte.docxA.ps.pdf](http://present.brighton-hove.gov.uk/Published/C00000884/M00005929/AI00047254/$20150914111457_007769_0032819_HousingRelatedSupportCommissioningUpdateforHousingNewHomesCommitte.docxA.ps.pdf)

**Brighton & Hove
Rough Sleeping Strategy 2016**

Draft Rough Sleeping Strategy 2016

*Making sure no-one has the need to sleep
rough in Brighton & Hove by 2020*



**Brighton & Hove
City Council**

About this Draft Strategy

This draft strategy details our proposed approach to making sure that no-one has the need to sleep rough in Brighton & Hove by 2020.

The Rough Sleeping Strategy is being developed in phases to give stakeholders opportunity to help shape the city's priorities and future action:

- 1. Position Paper (Nov/Dec 2015):** this was published in November 2015 and summarised the city's current approach to rough sleeping. The Paper was used as the basis for consultation in December 2015. Consultation included a Summit that brought together a range of stakeholders including councillors, the council, NHS, Police, third sector advocates, service providers and business community, relevant professional experts and service user representatives to review the city's approach to rough sleeping.
- 2. Draft Rough Sleeping Strategy 2016 (Mar/Apr 2016):** building on the Position Paper and options developed in the summit. We wish to consult on the draft strategy and particularly welcome contributions from those who are, or have been, sleeping rough. The results of this consultation will help shape the final strategy.
- 3. Final Strategy (July 2016):** stakeholders will be encouraged to formally sign-up to the vision, aims and objectives of the strategy to ensure a unified and consistent approach across the city.
- 4. Implementation 2016/17:** Delivery of the city's strategy and remodelling or redesigning services where necessary.

To comment on this draft strategy, please visit the Council's Consultation Portal at <http://consult.brighton-hove.gov.uk/portal>. You can also write to us as Housing Strategy Team, Brighton & Hove City Council, 4th Floor Bartholomew House, Bartholomew Square, Brighton BN1 1JE or housing.strategy@brighton-hove.gov.uk.

Comments on this draft strategy are welcome between 16 March and 17 April 2016.

Introduction from the Lead Member for Rough Sleeping

The issue of people sleeping rough has become more acute with a visibly increased presence on the streets. Most importantly, this impacts on the individual's life chances, the street is a very vulnerable place to be, but it also affects the city's reputation and adds costs to public services and business.

Homelessness and rough sleeping could happen to many of us with little warning, from the loss of a job or a relationship breakdown for example. These difficult times can be compounded if people have other needs such as mental health, addiction and other vulnerabilities.

The city's current approach to rough sleeping is being re-assessed in partnership with all groups and organisations providing services, the wider community and with commissioners. We have used the thoughts and ideas of many partners shared at our Rough Sleeping summit and earlier consultation, plus research with those who are sleeping rough or have previously slept rough, to develop this draft strategic plan which shows how we can come together as a city to improve lives. We need to make sure we combine our efforts with a joint sense of energy and purpose to focus on supporting people to move forward with their lives, regain their health and find secure housing.

If the city does not reduce rough sleeping there will be:

- More health problems and early deaths
- More suffering and hardship
- Crisis pressure on the Police, hospital accident and emergency and other services
- Crime and anti-social behaviour associated with rough sleeping and street drinking
- Increased costs to the local authority, Police and NHS
- Reputation damage as a caring city
- Tourism impact from street begging

I hope that all the partners across the city who work with people sleeping rough will endorse the final Rough Sleeping Strategy expected in summer, therefore I very much welcome your thoughts on this draft. Please help us make sure that we have identified the correct priorities and actions to deliver our vision "*To make sure no-one has the need to sleep rough in Brighton & Hove by 2020.*"



Councillor Clare Moonan
Lead Member for Rough Sleeping

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1. The City's Strategy

The City's Vision

People sleeping rough die younger than the general population¹ yet the cost of preventing rough sleeping or supporting someone back into independence is much less than the cost to the individual and society than a life on the streets². Our strategy vision is:

“To make sure no-one has the need to sleep rough in Brighton & Hove by 2020”

Strategic Principle: Working together, a partnership

Within these priorities there is an underlying principle that, as a city, whether service commissioner, provider, community group, or individual with the desire to help, **we need to work together** to provide a consistent message and response to rough sleeping to support people to turn a corner and improve their lives.

Rough sleeping and the impact of the wider street population affect everybody in Brighton & Hove. People sleeping rough die younger, suffer ill health and are more vulnerable to violence than those in the wider street population (who may be housed). It impacts on businesses, residents and tourists through shoplifting, aggressive begging, street drinking and other anti-social behaviour. These place additional demands on the council, police and health services.

Fundamentally, however, seeing people sleeping rough fosters the desire to help, whether from those providing services, those giving their spare time or those giving donations of food, clothing and other items to help those in need.

The city's strategy needs to harness this expertise, energy and goodwill to enable all those with a stake in the city to work together and deliver our shared vision in partnership:

- Street Outreach Services (St. Mungo's)
- Brighton Housing Trust (including First Base Day Centre)
- Brighton YMCA
- St John Ambulance
- Community and Voluntary Sector
- Faith based groups
- Churches Winter Emergency Shelters
- Pavilions Drug and Alcohol Services

¹ Homelessness Kills, Crisis, 2012

² Research into the Financial Benefits of the Supporting People Programme, DCLG, 2009

- Private landlords
- Brighton & Hove Business Crime Reduction Partnership (BCRP)
- Brighton City Centre Business Improvement District (BID) (City Centre Ambassadors)
- YMCA DownsLink Group
- Stopover (Impact Initiatives)
- Sanctuary Housing (The Foyer)
- Night Stop Plus
- Clocktower Sanctuary
- Emmaus
- Synergy
- Soup Run
- Sussex Armed Forces Network
- British Legion
- Help for Veterans
- Brighton & Hove City Council (BHCC)
- NHS organisations including Brighton & Hove Clinical Commissioning Group (CCG), Sussex Partnership Foundation Trust, Brighton & Sussex University Hospitals Trust, South East Coast Ambulance Service, Sussex Community Trust
- Sussex Police (Street Community Neighbourhood Police Team)
- Sussex Homeless Outreach, Reconnection and Engagement (SHORE) Partnership
- Homeless Link
- People with experience of sleeping rough
- The residents and visitors of Brighton, Hove, Portslade and Sussex

A constructive and meaningful dialogue is needed with those groups working in the city to support people sleeping rough who are not connected to the city's formal partnership structures. This will help all groups collectively understand what they want to achieve and make sure this good will and our combined efforts are not keeping people on the streets, but are focussed on getting people off the streets.

A set of five partnership **Homeless Strategy Working Groups** are tasked with developing action plans to implement the priorities of the Homeless Strategy 2014. These are focussed on the Integrated Support Pathway; Work & Learning; Youth Homelessness; Homeless Prevention; and Day & Street Services. Alongside the development of this strategy, these working groups are being reviewed to develop stronger links with health and other support services to encourage the shared ownership of actions which relate to improving services and improving the outcomes of service users. This model will include wider representation from service users. The review will be complete in March 2016 and implemented by March 2017.

The City's Strategic Priorities

To help us come together as a city and deliver the strategic vision, we have focussed our strategy on five priority areas:

1. **Preventing Homelessness and Rough Sleeping** – to provide a consistent message about housing options that helps services prevent homelessness and moves people away from sleeping rough
2. **Rapid Assessment and Reconnection** – outreach to assess the needs of people sleeping rough to plan support, and where appropriate, reconnect people with friends, families and support networks, before they are fully immersed in street life
3. **Improving Health** – to ensure people sleeping rough are supported by health and social care services that help them to regain their independence
4. **A Safe City** – making sure people sleeping rough, residents and visitors are safe and free from intimidation
5. **Pathways to Independence** – to support people sleeping rough into regaining their independence

Responding to the Position Paper Consultation

The findings from the consultation and engagement carried out in December 2015 have helped to develop this draft strategy.

Methodology

A Position Paper was produced that summarised the city's current approach to rough sleeping and existing plans as well as highlighting the challenges we face. This included the draft vision and priorities for the new strategy and was the basis of the initial scoping consultation. This paper was emailed to all councillors, MPs and all stakeholders invited to the summit.

During the consultation, a stakeholder summit was held which had 78 professionals attend, and there was online consultation through the council's consultation portal which received 36 detailed submissions covering all aspects of our proposals. The council's website, social media and press engagement was used to promote the consultation.

Summary of Findings

Those responding to the consultation recognised that homelessness and rough sleeping could happen to many of us with little warning, such as arising from the loss of a job or a relationship breakdown. These difficult times are compounded when other factors such as mental health, drug and alcohol, and other support needs may be present.

There was overwhelming support for the proposed vision and priorities of the strategy, with many suggestions for improvements to the way we work. Many respondents highlighted the significant challenges faced by the strategy from the fundamental issues arising from the shortage of high quality affordable housing and budget pressures. As these matters are picked up in plans such as the Housing Strategy 2015, Homelessness Strategy 2014 and the CCG Annual Operating Plan, this strategy has not replicated the actions needs to address these.

As a result of the consultation, there have been a number of changes to the initial priorities for the city's strategy suggested by the Position Paper:

- **Street Triage and Reconnection** have been merged into a new priority on **Rapid Assessment and Reconnection** which is developing Multi-Agency Plan's for people sleeping rough, where professionals work together with clients to agree the most effective course of action.
- **Managing the Street Communities** received criticism, particularly as people sleeping rough are more likely to be the victims of crime and around half of those in the city's street communities are not sleeping rough. There were also opposing views on the balance between support and enforcement. This priority has been rewritten to focus on making Brighton & Hove **A Safe City** – for rough sleepers, residents, businesses and tourists – and recognises that a life on the streets is not appropriate and should not be supported
- **Working with the City** has been removed as a priority as it was very clear that partnership working needs to underpin the whole strategy rather than be a separate element. We recognise that not a single element of our strategy is achievable without the combined efforts of all those living and working in the city. **A Partnership Approach** is now the strategic principle of this strategy and underpins all of the work we do.

Other responses to the consultation highlighted the need for the strategy to take into account the specialist needs of particular groups who may be more vulnerable and require a slightly different approach, such as young people, women and LGBT* people.

The detailed consultation responses were shared with those responsible for the priorities within the strategy to develop the goals and strategic actions presented in this document. A transcript of these responses is contained in **Consultation Report 1: Position Paper**, available at www.brighton-hove.gov.uk/content/housing/general-housing/how-help-people-living-rough-street

Consultation Questions 1: Revised Priorities and Principle

1.1 Do you support the city's revised strategic priorities?

1.2 Please tell us about anything you would like to change in the city's priorities and principle

2. Rough Sleeping in Brighton & Hove

What do we mean by People Sleeping Rough?

This strategy is not just about those living and sleeping on the city’s streets, but all those, predominantly single people, who are homeless where there is not likely to be a statutory housing responsibility.

For the purposes of the strategy, people sleeping rough have been defined as:

- People sleeping rough within Brighton & Hove
- Squatters who were previously or are at risk of sleeping rough
- Sofa surfers who were previously or are at risk of sleeping rough
- Those living in motor vehicles (not including Travellers)
- Those living in tents (not including campers, protesters or Travellers)
- Those currently supported in hostels who were previously sleeping rough
- All others considered at risk of rough sleeping

The City’s Challenge

People sleeping rough are a transient population and the city’s street services work with more than 1,000 cases each year, 20 every week. Around a third of these relate to people being seen more than once (in 2014/15 there were 1,129 cases involving 775 people). In November 2015, a snapshot of a single night estimated there were 78 people sleeping rough in Brighton & Hove:

People living on the streets	2010/11	2011/12	2012/13	2013/14	2014/15
Street service cases (year)	588	732	1,163	1,066	1,129
Official street count (people on a single night)	14 (Nov’10)	36 (Nov’11)	43 (Nov’12)	50 (Nov’13)	41 (Nov’14)
Street estimate (people on a single night) ³	x	76 (Nov’11)	90 (Mar’13)	132 (Mar’14)	78 (Nov’15)

There are concerns that numbers could increase further over the next year with the natural draw of Brighton & Hove as the place to be, the impact of welfare reforms and the high cost of accessing and sustaining accommodation in the city’s private rented sector.

³ The Rough Sleeper Estimate is a different methodology from the official count and records the number of rough sleepers known to services in the city on a particular date.

As of the January 2016, the city has 272 hostel beds and 25 mental health hostel beds which are full and has a waiting list of 197 clients, 82 of which are considered a high priority.

Information is not available for many of the hidden homeless in our city that may be living in squats, sleeping on sofas, and staying with friends and family. Nationally one study has shown that of 437 single homeless individuals, 62% were hidden homeless and a quarter had never accessed any accommodation provided by a homeless or housing organisation.⁴

Local Inequalities

Rough sleeping is not a lifestyle choice, but often driven out of desperation, poverty and ill health. Police, prisons and health service report high levels of service need caused by rough sleeping:

- People sleeping rough are more likely to be the victim of crime and also more likely to commit crimes
- The City's Joint Strategic Needs Assessment⁵ highlights a high prevalence of mental and physical ill-health and drug and alcohol dependency amongst people sleeping rough. Other common problems include physical trauma (especially foot trauma), skin problems, respiratory illness and infections (including hepatitis).
- Nationally, it is estimated that the use of inpatient hospital care by people who are sleeping rough or living in insecure accommodation (such as hostels) is eight times higher than in the general population aged 16-64
- The average age of death for a homeless person nationally is estimated to be 47 years old compared to 77 for the general population

The rough sleeping and single homeless population is not representative of the wider city with the 2014/15 Rough Sleeper Annual Report showing that of the 1,129 cases (involving 775 people):

- 83% were male; 17% were female
- 12% (136 cases) were aged 17-25; 7% (83 cases) were over 55
- 81% (917 cases) indicated that they were UK nationals
- 19% (212 cases) were not from the UK with the largest group from central or eastern Europe (86 cases, a 50% increase from this region on 2013/14)
- 39% (438 cases) had a local connection. Where known, the main reasons given for rough sleeping amongst those with a local connection in 2014/15 were: eviction from hostel or temporary accommodation (31%); abandoning own accommodation (13%); relationship breakdown (13%); prison release (12%), left rehab (11%). However, this does not identify the underlying cause, just the most recent trigger. For example, those evicted from hostels were already homeless.

⁴ Crisis, K Reeve with E Batty, The Hidden Truth about Homelessness – Experiences of Single Homelessness in England, May 2011

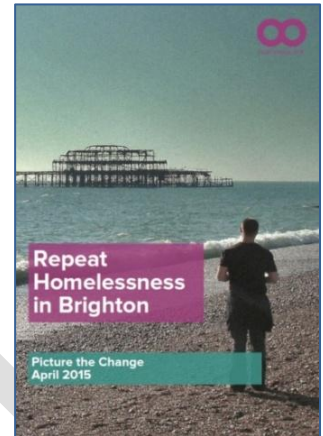
⁵ Joint Strategic Needs Assessment 2014: Rough Sleeping and Single Homeless: <http://www.bhconnected.org.uk/sites/bhconnected/files/jsna-6.4.3-Rough-sleepers2.pdf>

Local Causes of Rough Sleeping

Homeless Link carried out a qualitative research project in partnership with the Coordinated Agency Interventions to End Rough Sleeping (CAIERS) group, who work with people sleeping rough in Brighton & Hove⁶. The research was based on 29 in-depth interviews with clients using the city's homeless services 2014.

The research identified that the causes of homelessness and repeat homelessness are divided into two main areas:

- Structural - which included poor and unsuitable housing, insecurity in the private rented sector, transitioning/leaving accommodation or institutions (especially prison) and loss of employment; and
- Personal reasons - which included mental health issues, experience of trauma, relationship breakdown, and fleeing domestic violence or abuse.



There is a strong pull for people coming and returning to the city because they consider the city to be a place of diversity and acceptance. Many people had happy memories of Brighton & Hove, which stemmed from childhood or previous relationships. While people were positive about the homelessness services available, they were more likely to talk about how much they liked the town rather than its services.

There was a lack of understanding about local connection policies in Brighton & Hove. Many people travelled back to the city on the basis that they had previously held a local connection, only to find out that they were no longer eligible.

Some of those who had been helped to reconnect and move, either by the local authority or support services had returned to Brighton & Hove because they had been unable to access the support they needed. For others, the pull of Brighton & Hove meant that they were prepared to remain homeless if this meant remaining local to the area.

The recommendations made by this research have been used to help shape the strategy.

Rough Sleeping Amongst Lesbian, Gay, Bisexual and Trans* People

The Stonewall Housing Finding Safe Spaces⁷ project was commissioned by the Homelessness Transition Fund to understand the experiences of Lesbian, Gay, Bisexual and Trans (LGBT*) people who have been street homeless.

⁶ Repeat Homelessness in Brighton, Homeless Link, 2015:

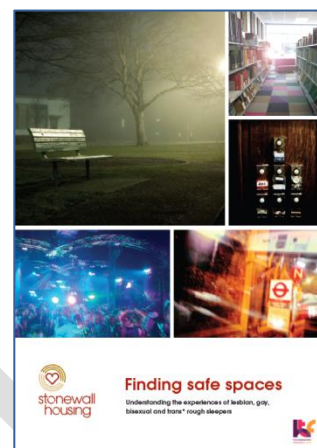
<http://www.homeless.org.uk/sites/default/files/site-attachments/Picture%20the%20Change.Repeat%20Homelessness%20in%20Brighton.pdf>

⁷ Finding Safe Spaces: Understanding the experiences of lesbian, gay, bisexual and trans* rough sleepers, Stonewall Housing, 2014: <http://www.stonewallhousing.org/>

Stonewall Housing spoke directly with LGBT* people who had experienced, or were experiencing, rough sleeping during summer 2014 in Manchester, Brighton and east London.

Whilst there were a wide range of reasons for rough sleeping amongst this group, the research found that more often than not, rough sleeping was related to their sexual orientation or gender identity, having a detrimental and often irreversible effect on their support systems of people such as after coming out to friends or family.

Stonewall Housing research with LGBT* people sleeping rough in the city found that many did not feel safe in hostels or on the streets. Drugs, alcohol, sex work or sex in exchange for accommodation was used as a way to secure a place to sleep, despite the great risk to safety as well as to their mental, physical and sexual health.



The research made a number of recommendations and Brighton & Hove City Council has committed (as part of the Trans Scrutiny Report) to reviewing these for the Rough Sleeping Strategy. These have been included in the strategic actions listed under the five strategy priorities.

Predicted Future Need

The impact of the Welfare Reform Bill is still being felt with the introduction of the benefit cap (to be reduced further to £20,000 in 2016), changes to Disability Living Allowance, reductions in Housing Benefit (particularly for young people), proposed reductions on tax credits and the introduction of Universal Credit.

Combined with high and rising property prices in Brighton & Hove, it is predicted that these changes will increase the number of individuals unable to sustain their accommodation in the coming year placing them at an increased risk of rough sleeping, and putting more pressure on services at a time of decreasing funding.

3. The City's Connected Approach

Housing Strategy 2015 & Homeless Strategy 2014

The Housing Strategy 2015⁸ is a key stand alone chapter of the city's Community Strategy⁹, and through the strategy:

"We want Brighton & Hove to be an inclusive city with affordable, high quality, housing that supports a thriving economy by offering security, promoting health and wellbeing and reduces its impact on the environment. We want to help bring about integrated communities in a society that values everyone to recognise and tackle the inequality faced by families, the poor and the vulnerable."

The Housing Strategy 2015 incorporates the priorities of the Homelessness Strategy 2014¹⁰ to prevent homelessness through early intervention, and the timely provision of advice and support. When homelessness is unavoidable, there is a need to ensure that people receive appropriate housing, care and support, with a clear pathway towards living independently.

The Homeless Strategy 2014 has five strategic objectives:

1. Provide housing and support solutions that tackle homelessness and promote the health and well-being of vulnerable adults
2. Provide 'whole families' housing and support solutions that tackle homelessness and promote the well-being of families and young people.
3. Develop access to settled homes
4. Reduce inequality and tackle homelessness amongst our communities of interest
5. Provide integrated housing, employment and support solutions as a platform for economic inclusion

Housing Related Support Commissioning Strategy 2015

Accommodation and support services for single homeless people are provided by the Housing Related Support team in Brighton & Hove City Council's Adult Services (Adult Social Care). These services aim to prevent homelessness and rough sleeping amongst vulnerable people and provide support to help individuals move towards or maintain independent living.

⁸ Housing Strategy 2015: <https://www.brighton-hove.gov.uk/sites/brighton-hove.gov.uk/files/Housing%20Strategy%202015%20%28FULL%20COUNCIL%20FINAL%29.pdf>

⁹ Brighton & Hove Community Strategy: <http://www.bhconnected.org.uk/strategy/strategy>

¹⁰ Homelessness Strategy 2014-19: [http://present.brightonhove.gov.uk/Published/C00000709/M00005185/AI00040396/\\$HomelessStrategy2014CommitteeVersion.docx.pdf](http://present.brightonhove.gov.uk/Published/C00000709/M00005185/AI00040396/$HomelessStrategy2014CommitteeVersion.docx.pdf)

The team is redrafting service specifications to ensure services are flexible. This is to provide a more personalised response to need, reducing dependency, avoiding duplication with other services across the city and meeting local priorities such as reducing admissions to more intensive services, as well as in response to budget reductions.

Those with the most complex needs, who receive a range of services, will be supported into independence where this is achievable or will have a suitable service in place to support them to maintain accommodation and prevent homelessness. A focus will also be on people who have been in homeless services for some time to offer them sustainable support and accommodation packages.

Brighton & Hove Better Care Plan

The Brighton & Hove Better Care Plan describes how services for our frail and vulnerable population will be improved to help them stay healthy and well, and will be more pro-active and preventative, and promote independence.

In Brighton & Hove improving health and care outcomes for homeless people has been identified as a priority. A Homeless Integrated Health & Care Board was established in 2014 with the vision:

“To improve the health and wellbeing of homeless people by providing integrated and responsive services that place people at the centre of their own care, promote independence and support them to fulfil their potential.”

The Board includes representatives from BHCC (adult social care, housing and public health), the CCG and NHS Trusts, a GP, community and voluntary sector, Sussex Police and service user representation. The Board has developed an integrated health and care model with a multi disciplinary team approach focussing on the single homeless people in the city that will be implemented in 2016/17.

Housing Related Support Cost Benefit Analysis

In 2009, the Department of Communities and Local Government commissioned Capgemini to produce a cost benefit analysis of housing related support services¹¹. In Brighton & Hove the local cost benefit analysis in 2013 showed savings of £4.90 for every £1 spent on housing related support services for single homeless clients. The study found the financial benefits of housing related support to be:

- Costs relating to housing and homelessness are reduced, because the risks of sleeping rough and failure to move into settled accommodation are reduced
- Health service costs are reduced through improvements in the general health of clients. These result in fewer admissions to Accident and Emergency, lower use

¹¹ Research into the Financial Benefits of the Supporting People Programme, Department of Communities and Local Government 2009

of GP and community mental health services, and fewer admissions to hospital for physical and mental health problems

- Health and social services costs are reduced because of a lower incidence of drug and alcohol problems
- Crime costs are reduced as clients are given advice to help them avoid burglary and street crime, and through reductions in their own re-offending

They also found non-financial benefits which included

- Improved quality of life for the individual including greater independence, decreased vulnerability, improved health, and greater choice of options on where and how to live
- Greater stability, allowing single homeless people to deal with other issues in their lives, such as substance abuse, unemployment, mental health problems, offending and behavioural problems
- Decreased fear of crime
- Easier access to appropriate services
- Improved involvement in the community (benefiting both the individual and society)

Resourcing the Strategy

The council is facing significant budget reductions which have seen £77m saved in recent years and a further £68m needing to be saved by 2020. This represents around 30% of the council's non-school funding and means that all services require a radical rethink to determine what services, and how they could operate, are possible within the reducing amount of available resources. Similarly, financial pressures are affecting health services, the police and the community and voluntary sector. This is at the same time as high housing costs, welfare reform and an ageing population are increasing demands for services.

The council budget for Housing Related Support linked to rough sleeping services is £4.3m for 2016/17. In addition there was funding from Better Care, in partnership with the NHS, in 2015/16 of £0.600m. The Better Care allocation for Brighton & Hove has been confirmed for 2016/17 and the joint decision of how this is apportioned between services is planned for mid March 2016. The Community and Voluntary Sector is estimated to contribute many more millions from other funding sources and in-kind support such as through volunteering.

In addition to expenditure on services to prevent rough sleeping and support people back to independence, the Police, criminal justice system and NHS spend significant sums of money on dealing with the impacts of crime, poor health and substance misuse attributable to people sleeping rough.

Priority 1: Prevent Homelessness and Rough Sleeping

To provide a consistent message about housing options that helps services prevent homelessness and moves people away from sleeping rough

As a city, we need to manage people's expectations about the availability of housing. Brighton & Hove is an expensive place to live and at the same time wages are relatively low making housing affordability a challenge for many. There are approximately, 23,000 households on the housing register, with 1,500 in temporary accommodation and only around 700 properties becoming available each year.

Average rents are above housing benefit limits putting them out of reach of those not working. In September 2015, just two shared properties were available to rent in Brighton & Hove on rightmove.co.uk within the local housing allowance limit for single people under 35 and, for those aged 35 or above, 14 properties were available within the 1 bedroom limit available, mainly bedsits and studio flats.¹²

Many single homeless households do not fall into a priority need category and hence there is no statutory duty for the council to provide housing under Part 7 of the Housing Act 1996. For those where there is not a housing duty, the chance of someone being offered social housing is remote because of the extremely high demand against a very small supply.

The Homelessness Strategy 2014 seeks to link into a broader 'prevention agenda' to provide advice and assistance to any resident in danger of losing their home. We want to minimise rough sleeping for those who we cannot provide accommodation for and to look at the wider impacts homelessness can have, such as deterioration in mental health, risk of suicide, substance misuse, offending and increased hospital admission. This also minimises the impact on more costly crisis services provided by the council and health services.

To prevent homelessness, the city will:

- Goal 1: Develop a consistent citywide approach to housing, health, care and other support to prevent homelessness and rough sleeping
- Goal 2: Improve housing options for single person households

¹² Brighton & Hove Housing Market Reports: <https://www.brighton-hove.gov.uk/content/housing/general-housing/housing-market-reports#RentLHA>

Goal 1: Develop a consistent citywide approach to prevent homelessness and rough sleeping

Brighton & Hove is fortunate in that it has a caring and tolerant population and many people want to help people sleeping rough through supporting charitable work or personal donations. As a city, we want to make sure that all those seeking to help rough sleepers are doing so in a way that leads to sustainable solutions that help encourage people to engage with services to move away from rough sleeping.

Success in preventing homelessness and entrenchment depends on all service providers promoting the same consistent message, a single offer of support focussed on minimising the risk of those getting into crisis and spending time on the streets.

To make sure this happens, all of the city's organisations working with homelessness will be brought together to develop a **Multi-Agency Protocol**. This will build on the strengths of existing partnerships that have developed new ways of working with the street population, tackle health inequalities and prevent repeat homelessness as well as removing duplication through multiple assessments by different providers.

Goal 2: Improve housing options for single person households

The city has a strong record in **preventing homelessness** or finding alternative accommodation where it has not been possible to sustain people's accommodation. Services provide advice and assistance, to those where there is not a statutory housing duty, on how to sustain their accommodation including their legal rights to remain in occupation. This often allows people some time to find an alternative home.

A new service called **Community Connections**, provided by Southdown, will help people to stay in their accommodation by working with landlords and agencies to prevent eviction. A range of support services will be provided including wellbeing and mental health, and practical help to support people settle and sustain new tenancies.

Many landlords do not accept tenants on benefits, and those at risk of homelessness are less likely to have a deposit, advance rent, fees or a guarantor. Even if a home is available, there is a gap in providing people with start up cost for private sector tenancies. The current rent deposit assistance is aimed at preventing homelessness where there is a statutory duty to assist. Any change to this requires funding and resources before this could be extended to people where there was no statutory duty.

The council works with a wide range of agencies such as **Brighton Housing Trust** and the **YMCA DownsLink Group** to sustain accommodation or source alternatives. Incentives and support for private landlords will help increase the supply of low cost rented housing without high set up costs or guarantors. Landlords will often keep good tenants at lower rent rather than maximise rental values to unknown tenants. The council also works with the prison service and probation to source accommodation for people leaving the criminal justice system who are at particular risk of rough sleeping.

Joint work with health and social care through the **Pathway Plus** project supports people leaving hospital to prevent them from being discharged onto the street.

The city needs to be open to innovative solutions to provide temporary affordable homes for single people and utilise initiatives, such as the credit union to provide a way for people to save money to cover the costs of moving on if the need arises. More affordable homes can be found in other parts of the country which may require people to make difficult choices about where they live.

Strategic Action Plan: Priority 1: Prevent Homelessness and Rough Sleeping

Strategic Action	Target	Resource Implication	Lead Partner
Goal 1	Develop a consistent citywide approach to prevent homelessness and rough sleeping		
Develop a Multi-Agency Protocol for Brighton & Hove	June 2016 (to include data sharing agreement)	To be developed within existing resources	BHCC Adult Services & St. Mungo's
All partners (commissioned and non-commissioned) sign the Multi-Agency Protocol	Signed as part of Strategy approval in July 2016	All partner commitment to the Plan will help utilise resources more effectively	All partners
Ensure the Plan is promoted and understood by staff, volunteers and residents	Roll out communications from June 2016	Communications Plan to be developed and costed (eg training, work shadowing, publicity etc)	BHCC Communications & St. Mungo's
Ensure a rolling communications programme on reducing rough sleeping that engages the general public	Roll out communications from June 2016	Media Campaign to be developed and costed	BHCC Communications & BHCC Adult Services
All partners to be aware of the housing market and benefit rates	Circulate B&H Housing Market Reports to partners	Reports already produced and publically available	BHCC Housing & BHCC Adult Services
Goal 2	Improve housing options for single person households		
Publicise where to go for assistance and to seek help at an early stage	Incorporate into the Multi-Agency Protocol	Within existing resources	BHCC Housing

Strategic Action	Target	Resource Implication	Lead Partner
Develop an easy referral mechanism so that other professionals can direct clients to housing advice	Review use of information prescriptions for housing advice	Within existing resources	BHCC Housing
Allow flexibility for those with complex needs when making nominations to supported accommodation	Incorporate into the Multi-Agency Protocol	Within existing resources	BHCC Adult Services
Ensure those ready for general needs accommodation are supported to manage their tenancy	Incorporate into the Multi-Agency Protocol	Within existing resources	BHCC Adult Services & Third Sector
Investigate creative solutions to increase accommodation options (such as lodgers)	March 2017	Subject to options developed	BHCC Adult Services & BHCC Housing
Improve access to housing information to raise awareness affordable housing options locally and in other parts of the country	IT approach to be developed	Within existing resources	BHCC Housing

Consultation Questions 2: Priority 1: Prevent Homelessness

- 2.1 Do you agree with the approach to this priority?
- 2.2 How successful do you think this approach will be? (On a scale of 1-10, 10 is best)
- 2.3 What do you think the city could change or do better to achieve this priority?

Priority 2: Rapid Assessment and Reconnection

Outreach to assess the needs of people sleeping rough to plan support, and where appropriate, reconnect people with friends, families and support networks, before they are fully immersed in street life

If someone finds themselves faced with the prospect of sleeping on the streets, it is essential that services engage with them as quickly as possible to get people at risk off the streets and prevent additional health and wellbeing needs developing.

The Rough Sleepers Street Services and Relocation Team Annual Report 2014/15 found that around 61% of rough sleeping cases involved people who did not have a local connection to Brighton & Hove. Around a quarter were from London and the wider South East, 19% from abroad, with the remainder from the rest of the UK.

Reconnecting people with safe and stable support networks such as friends, families and services from where they came from can bring about a sustainable move away from street life. We recognise that this is not appropriate in all cases, particularly if someone has fled abuse or in some instances where there may be overriding health needs.

Different approaches within a shared Multi-Agency Protocol are required to effectively respond to the needs of different groups of people sleeping rough. The Protocol needs to quickly get new arrivals away from the streets; to develop sustainable plans for those who keep returning to street life; to get a commitment from organisations to holistically support chronic entrenched cases; and to deliver solutions for those with no recourse to public funds. Through assessment, each person sleeping rough will have their own Multi-Agency Plan, their single offer under the Protocol.

To provide rapid outreach and assessment, the city will:

- Goal 3: Provide rapid assessment, support planning and effective reconnection
- Goal 4: Target people sleeping rough with complex needs to ensure there is an integrated plan to move people into accommodation
- Goal 5: Ensure services are sensitive to the needs of all vulnerable groups including LGBT* people, young, older, women and ex-service personnel

Goal 3: Provide rapid assessment, support planning and effective reconnection

To enable service providers to assess the needs of people sleeping rough in a stable environment we will set up a permanent **Assessment Centre**. It is recognised that this process may take time, particularly with those with more complex needs, and to prevent the client returning to the streets in the interim, the centre will have a number of **temporary (sit-up) beds**.

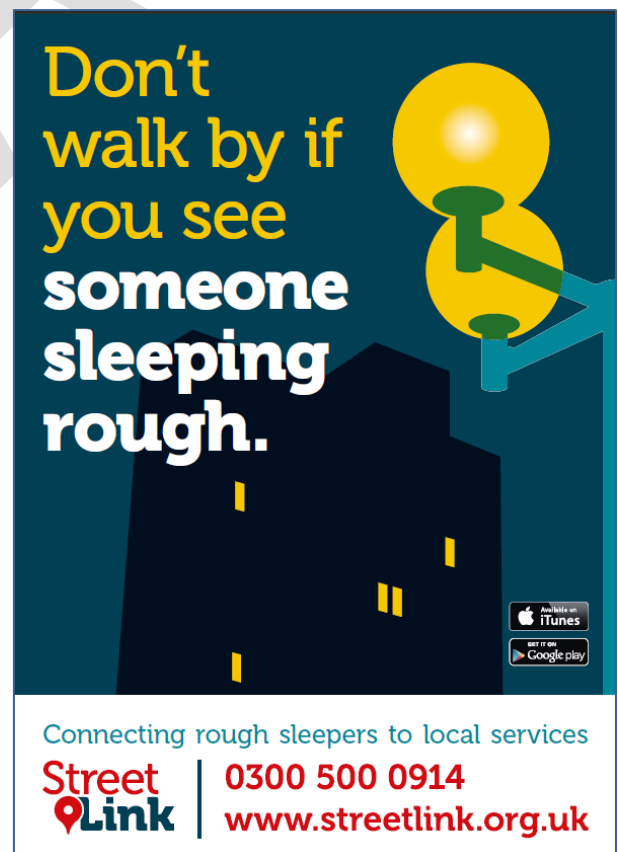
The centre will allow professionals across a range of disciplines to work with clients to develop a **Multi-Agency Plan** with that person. The Plan will outline who is responsible for co-ordinating that person's professional care, which services are working with the client and what support is to be provided. A key part of this Plan is to outline the housing and support options available to the client to help them make an informed choice about their future.

The citywide rough sleeper contract has recently been awarded to St Mungo's by the council. This started in September 2015 through their **Street Outreach Service (SOS)** to provide a rapid response with assertive outreach to people sleeping rough. This works through diversion and signposting, comprehensive assessment of individuals needs, reconnecting people sleeping rough to their place of origin in a structured way, and assisting people from homelessness into settled accommodation.

New **SOS Rapid Response Outreach Case Workers** receive the StreetLink alerts to provide a fast service to clients that are new to the city or have returned to the city after a period of being housed. Individuals without a local connection can be helped to reconnect to an area where they are entitled to support with accommodation.

StreetLink - is a website, mobile app and phone line which allows members of the public to send an alert with information about the location of someone sleeping rough.

Once this alert is received, StreetLink will pass the information to St Mungo's Street Outreach Service to engage with the person sleeping rough. By providing a means to act when they see someone sleeping rough, StreetLink allows the local community to be part of the solution to homelessness.

A poster with a dark blue background. On the left, a silhouette of a building with yellow windows. On the right, a stylized street lamp with a yellow globe and a green post. The text 'Don't walk by if you see someone sleeping rough.' is written in yellow and white. At the bottom, it says 'Connecting rough sleepers to local services', 'StreetLink' with a red location pin icon, '0300 500 0914', and 'www.streetlink.org.uk'. There are also logos for 'Available on iTunes' and 'GET IT ON Google play'.

As part of the St. Mungo's service, **No Second Night Out** targets those new to rough sleeping and offers them an alternative to a second night on the streets. This helps them move off the streets before they become entrenched. Sussex local authorities and their partners have come together to form the **Sussex Homeless Outreach Reconnection & Engagement (SHORE)** partnership to implement the No Second Night Out principles in Sussex to help those reconnect across the region.

In 2012/13, when delivered by the Crime Reduction Initiative, this project supported 76 individuals in Brighton & Hove, and in 2014/15 this had more than doubled to 174.

Supported housing is generally only available to those with a local connection^{13, 14} to Brighton & Hove. Reconnection is only used when a robust assessment of an individual's needs and accommodation history has been made and needs to provide the individual with a genuine route away from rough sleeping or they may return to the streets. This strategy recognises that this is not appropriate in all cases, particularly if someone has fled abuse or in some instances where there may be overriding health needs. **First Base Day Centre** and **Project Antifreeze** reconnect clients that access their day centres which has seen the reconnection rate increase.

Goal 4: Target people sleeping rough with complex needs to ensure there is an integrated plan to move people into accommodation

It can be a challenge to engage those with complex needs in a chaotic street environment, and have a meaningful dialogue about needs and support requirements.

To provide a more stable environment for assessing needs, the city has piloted an **Emergency Assessment Centre** that operated every few weeks through the night. This highlighted the need for space with temporary beds for rough sleepers to be assessed by a range of services.

A **Housing First** service has been developed for people with complex needs and expanding the use of personal budget and personalised support plans and St. Mungo's is developing a **Multi-Agency Plan** to target work around people who are entrenched in rough sleeping to move them into the most appropriate accommodation for their needs.

¹³ Local Connection: The statutory definition of local connection is heavily shaped by case law stemming from the Housing Act 1996, Part 7, Section 199(1) which provides that a person has a local connection with the district of a housing authority if he or she has a connection with it: i) because he or she is, or was in the past, normally resident there, and that residence was of his or her own choice; or ii) because he or she is employed there; or iii) because of family associations there; or iv) because of any special circumstances. <http://www.legislation.gov.uk/ukpga/1996/52/section/199>

¹⁴ The current Allocations Policy is under review in 2016

Goal 5: Ensure services are sensitive to the needs of all vulnerable groups including LGBT* people, young, older, women and ex-service personnel

Figures estimate that approximately 17% of rough sleepers are women. **Homeless Link**¹⁵ found that, rather than sleep on the streets, many, especially women, described staying out of sight and moving around because they felt vulnerable. Many had been or knew someone who had been a victim of violence and/or abuse, including robbery, intimidation and rape. Supported housing needs to be sensitive to the needs of women, particularly those who may be fleeing domestic violence.

Young people under 25 are one of the fastest growing groups of people sleeping rough. Consultation as part of developing this strategy has highlighted that some services may not feel accessible to younger people where processes and procedures can seem off putting. Through the **Young People's Accommodation and Support Pathway**¹⁶, use of advocates such as **The Clocktower Sanctuary**, and dedicated accommodation at the new **Housing First** service, young people are being helped to access the support they need.

The **Stonewall Housing Finding Safe Spaces**¹⁷ project spoke directly with LGBT* people who had experienced, or were experiencing, rough sleeping during summer 2014 in Manchester, Brighton and east London and found that many did not feel safe in hostels or on the streets. Drugs, alcohol, sex work or sex in exchange for accommodation was used as a way to secure a place to sleep, despite the great risk to safety as well as to their mental, physical and sexual health. The research made a number of recommendations and Brighton & Hove City Council has committed (as part of the **Trans* Scrutiny Report**¹⁸) to reviewing these recommendations for the Rough Sleeping Strategy:

1. Ask people about their sexual orientation and gender identity in an appropriate and consistent way.
2. Never make assumptions on how someone defines their gender identity of sexual orientation.
3. Be consistent in how you ask questions relating to gender identity and sexual orientation.

¹⁵ Repeat Homelessness in Brighton, Homeless Link, 2015:

<http://www.homeless.org.uk/sites/default/files/site-attachments/Picture%20the%20Change.Repeat%20Homelessness%20in%20Brighton.pdf>

¹⁶ Brighton & Hove Young People's Accommodation and Support Pathway:

http://www.google.co.uk/url?sa=t&rct=j&q=&esrc=s&frm=1&source=web&cd=2&cad=rja&uact=8&ved=0ahUKEwja-egwvb3KAhUECBoKHenQB4MQFggmMAE&url=http%3A%2F%2Fpresent.brighton-hove.gov.uk%2Fpublished%2FC00000709%2FM00004769%2FAI00036300%2F%242013091614474_9_004725_0018502_HousingandSupportforYoungPeopleJointCommissioningStrategyFinalSept.docA.ps.pdf&usq=AFQjCNHg8aH3tU49dEAJCP5SvnfCMhsQzw&sig2=C0kbD4PnxllyUurlwkGJGQ

¹⁷ Finding Safe Spaces: Understanding the experiences of lesbian, gay, bisexual and trans* rough sleepers, Stonewall Housing, 2014: <http://www.stonewallhousing.org/>

¹⁸ Trans Equality Scrutiny Panel: <http://www.brighton-hove.gov.uk/content/council-and-democracy/councillors-and-committees/trans-equality-scrutiny-panel-2013>

4. Be able to provide safe spaces for LGBT* rough sleepers using your services and working with your staff.
5. Know how many LGBT* people are experiencing rough sleeping in the area you work and are using your service.
6. Be very clear about the long term harmful impacts of rough sleepers not being able to talk about their gender identity and/or sexual orientation.
7. Make sure the first point of contact is trained with a clear awareness around LGBT* people's needs and experiences as rough sleepers.
8. For all LGBT* organisations, who carry out needs assessments for support, to ask their service users about the security of their housing.
9. A change in the verification protocol to fit the experiences of LGBT* people.

Strategic Action Plan: Priority 2: Rapid Assessment and Reconnection

Strategic Action	Target	Resource Implication	Lead Partner
Goal 3 Provide rapid assessment, support planning and effective reconnection for those new to rough sleeping			
Set up a permanent assessment centre(s) with temporary (sit-up) beds	Operational March 2017	Resource allocation as part of service recommissioning in 2016	BHCC Adult Services
Develop integrated joint assessments and support planning across housing, care and health	All clients to have their own Multi-Agency Plan. Pilot late 2016 to go live March 2017	Within existing resources	BHCC Adult Services & St. Mungo's
Sharing of client information across all partner organisations to ensure a consistent approach and improve interventions / outcomes	March 2017	Multi-agency IT system being investigated	BHCC Adult Services
Have direct access to temporary, emergency and supported housing options for No Second Night Out	Incorporate into Multi-Agency Protocol	Social housing demand exceeds supply	BHCC Adult Services & BHCC Housing
Work with providers and charities to ensure safe and sustainable reconnections	Memorandum of Understanding to be developed relating to good practice	Resource allocation as part of service recommissioning in 2016	BHCC Adult Services & SHORE
Goal 4 Target people sleeping rough with complex needs to ensure there is an integrated plan to move people into accommodation			
Provide temporary beds for those with complex needs to ensure engagement before reconnection assessment	Set up a permanent assessment centre(s) with temporary (sit-up) beds by March 2017	Resource allocation as part of service recommissioning in 2016	BHCC Adult Services

Strategic Action	Target	Resource Implication	Lead Partner
Develop integrated joint assessments and support planning across housing, care and health	Pilot late 2016 to go live March 2017	Within existing resources	BHCC Adult Services BHCC Housing BHCC Public Health CCG
Implement a scheme to target those entrenched / complex rough sleepers based on bespoke responses to individual needs through a multi agency response	Scheme late 2016	Part of integrated joint assessments and support planning pilot Possibly some resource implication regarding accommodation options	BHCC Adult Services & BHCC Housing
Goal 5	Ensure services are sensitive to the needs of all vulnerable groups including LGBT* people, young, older, women and ex service personnel		
Ensure providers implement recommendations of Stonewall Housing LGBT* report	Include recommendations in Multi-Agency Protocol	Within existing resources	BHCC Adult Services BHCC Housing St. Mungo's
Consult women and other groups about delivery of service which best meet their needs	Develop women only accommodation provision	Commissioning by March 2017	BHCC Adult Services
Continue to develop the Young People's Accommodation and Support Pathway	Young people's bed spaces in the Housing First Jan 2016 (complete)	As per the 2013 Joint Commissioning Plan	BHCC Adult Services BHCC Housing BHCC Children's Services
Ensure Care Act assessments are carried out for older and frail people sleeping rough	Include in integrated joint assessments across housing, care and health March 2017	Within existing resources	BHCC Adult Services
Maintain our commitments to ex-Armed Forces personnel through the Armed Forces Covenant	Monitoring and reporting of rough sleeping amongst ex-forces personnel	Regular liaison between BHCC and Armed Forces Network to agree appropriate action when necessary	BHCC Adult Services & Armed Forces Network

Consultation Questions 3: Priority 2: Rapid Assessment & Reconnection

- 3.1 Do you agree with the approach to this priority?
- 3.2 How successful do you think this approach will be? (On a scale of 1-10, 10 is best)
- 3.3 What do you think the city could change or do better to achieve this priority?

Priority 3: Improving Health

To ensure people sleeping rough are supported by health and social care services that help them to regain their independence

Local research^{19,20} has highlighted the multiple disadvantages faced by the homeless, including mental and physical health issues, drug and alcohol misuse and experience of violence and abuse while sleeping rough. Physical and mental health issues can increase people's risk of homelessness, including rough sleeping, and can also be a critical factor preventing their recovery from this situation. In turn, rough sleeping presents very high risks and often leads to further deterioration in individuals' health and wellbeing.

To improve health, the city will:

- Goal 6: Improve outcomes by delivering integrated primary care led health and social care services that are accessible to homeless people and support them to regain their independence
- Goal 7: Ensure those on the streets have access to emergency shelter during extreme weather

Goal 6: Improve outcomes by delivering integrated primary care led health and social care services that are accessible to homeless people and support them to regain their independence

Homeless people have often relied on unplanned care such as accident and emergency services. National evidence and best practice²¹ has demonstrated the benefits of adopting a more proactive approach to improve health and support recovery from homelessness.

In 2014, an **Integrated Health & Care Board**, including representatives of housing, social care, the third sector, public health, the NHS CCG, NHS Trusts, GPs, police and other services was set up to improve services for homeless people, as part of the Brighton & Hove Better Care Plan led by the Health & Wellbeing Board.

¹⁹ Brighton & Hove Homeless Health Needs Audit, 2014:
<http://www.bhconnected.org.uk/sites/bhconnected/files/Brighton%20and%20Hove%20Homeless%20Health%20Needs%20Audit%20FINAL.pdf>

²⁰ Repeat Homelessness in Brighton, Homeless Link, 2015:

<http://www.homeless.org.uk/sites/default/files/site-attachments/Picture%20the%20Change.Repeat%20Homelessness%20in%20Brighton.pdf>

²¹ The Faculty for Homeless and Inclusion Health (2013) Standards for commissioners and service providers Version 2.0 The Faculty for Homeless and Inclusion Health <http://www.pathway.org.uk/wp-content/uploads/2014/01/Standards-for-commissioners-providers-v2.0-INTERACTIVE.pdf>

In Brighton & Hove, homeless patients can register at any of the 44 GP practices in the city. The city has a specialist GP practice for those who are homeless and not registered with a GP. In 2016/17, a new model of care agreed by the Integrated Health & Care Board will be rolled out, which includes proposals to base the model around a primary care hub providing enhanced and specialist GP provision.

In addition, a number of pilot projects have been implemented between 2014 and 2016 including:

- **Pathway Plus** - this service provides specialist care and discharge planning for homeless patients in Royal Sussex Community Hospital delivered through GP in-reach, nursing, engagement workers and community transport.
- **Hostels Collaborative Project** - since 2013 Sussex Community NHS Trust has provided a specialist multi-disciplinary team to in-reach into the city's homeless hostel residents. Since November 2015, the team has been piloting ways to meet the needs of the rough sleeping population, working closely with established services, including the St Mungo's Street Outreach Service.
- **Mental Health Homeless Team** - this Sussex Partnership NHS Trust service has provided a service to street homeless and those in emergency accommodation. A pilot of mental health in-reach to hostel residents is being delivered from October 2015 to October 2016.
- **Complex Homeless Multidisciplinary Team meetings** - primary care led fortnightly meetings were established in June 2015. The team identify the homeless people who will most benefit from coordinated proactive management, including those rough sleeping. Initial evaluation of the impact of this way of working has been very positive.

Other key services for health and wellbeing include:

- **First Base Day Centre** – offers a range of services to support people who are sleeping rough or insecurely housed in the city, including health lifestyles, sexual health and employment and skills projects and access to other health services including St John Ambulance and oral hygienists.
- **Substance Misuse Services** – the Pavilions service begun in April 2015 with a focus on Dual Diagnosis. Substance misuse staff work collaboratively with Mental Health services in numerous locations to improve engagement and access to both mental health and substance misuse services for people with complex needs.

In 2015 the Integrated Health & Care Board agreed a model for improving services locally based on a Hub and Spoke model to provide a proactive and integrated model of care. This incorporates the learning from the pilot projects and includes:

- **A primary care led hub with a multidisciplinary outreach team delivering services in a number of settings (or 'spokes') in the city.** This will include outreach to street settings where appropriate, as well as day centres accessed by those rough sleeping.

- Enhanced primary care service for homeless people.
- Hospital in reach to support care and discharge planning.
- Proactive engagement model to support homeless people to access primary and community healthcare services and support care plans.

This new model will make a significant improvement in the accessibility and effectiveness of health and social care services for the homeless, including those rough sleeping. Delivery of the model will be aligned with homeless services, such as the St Mungo's Street Outreach Service, so that health services are part of the city wide integrated approach to support people rough sleeping. In addition, **hostel provision** and **mental health supported accommodation services** are being remodelled to include a strong focus on supporting health and wellbeing.

Goal 7: Ensure those on the streets have access to emergency shelter during extreme weather

The **Severe Weather Emergency Provision** ensures that people sleeping rough are housed when there is extreme cold or storms forecast. The protocols and provision will be reviewed in 2016 to ensure that the provision is aligned with the new model for providing health and social care.

Strategic Action Plan: Priority 3: Improving Health

Strategic Action	Target	Resource Implication	Lead Partner
Goal 6	To improve outcomes by delivering integrated primary care led health and social care services that are accessible to homeless people and support them to regain their independence		
Commission new integrated health and social care model for homeless	April 2016 – March 2017	CCG business case funding	Brighton & Hove CCG BHCC Adult Services BHCC Public Health
Review access to, and support for, assessment of rough sleepers under the Mental Capacity Act and Care Act to ensure that access is timely and supported by clear protocols and staff training	December 2016	Within existing resources	BHCC Adult Services
Improve access to support through increased flexibility and responsiveness in service delivery (increased outreach settings, holistic assessment and regular review of care) and ensure staff are trained and skilled to	April 2017	Targets to be developed and included in contracts and service plans	NHS BHCC CVS providers

Strategic Action	Target	Resource Implication	Lead Partner
deliver this model of care			
Ensure substance misuse services are aligned with the new service model	March 2017	Public Health commissioned service	BHCC Public Health and Pavilions
Goal 7	Ensure those on the streets have access to emergency shelter during extreme weather		
Review Severe Weather Emergency Provision protocols	September 2016	Within existing resources	BHC Adult Services

Consultation Questions 4: Priority 3: Improving Health

- 4.1 Do you agree with the approach to this priority?
- 4.2 How successful do you think this approach will be? (On a scale of 1-10, 10 is best)
- 4.3 What do you think the city could change or do better to achieve this priority?

DRAFT

Priority 4: A Safe City

Making sure people sleeping rough, residents and visitors are safe and free from intimidation

People sleeping rough are more likely to be the victim of crime than the general population. 10 people sleeping rough have been murdered in the city during the past 13 years. Homeless Link²² found that, rather than sleep on the streets, many, especially women, described staying out of sight and moving around because they felt vulnerable. Many had been or knew someone who had been a victim of violence and/or abuse, including robbery, intimidation and rape.

Whilst the street population is often associated to crime and anti-social behaviour, it is estimated that only half of those on the streets are sleeping rough, with the other half housed. The street population is a diverse collection of groups and can be defined as people having one or more of the following attributes: rough sleeping; street drinking / begging; antisocial behaviour; insecurely housed (e.g. hostel or temporary accommodation) and spending a high level of time in street based activities, which may have a negative impact on other members of the public.

Brighton & Hove is a popular city with a significant street population. Many have multiple and complex needs and have moved in and out of homelessness for many years. Individuals who end up rough sleeping quickly become entrenched in a street lifestyle and this can be difficult to change. A proportionate response is required that encourages those in the street communities to seek the support they require and also takes action to prevent anti-social behaviour.

To help make sure people sleeping rough, residents and visitors are safe and free from intimidation, the city will:

- Goal 8: Focus on managing risks, harm and promoting appropriate behaviour
- Goal 9: Promote alternatives to discourage begging

Goal 8: Focus on managing risks, harm and promoting appropriate behaviour

Whilst enforcement action to tackle street anti-social behaviour has a wide range of positive impacts, if not managed properly it risks a number of negative impacts:

- Whilst the use of enforcement action can result in some people choosing to engage with support services, others can disengage and see services as being in opposition.

²² Repeat Homelessness in Brighton, Homeless Link, 2015:

<http://www.homeless.org.uk/sites/default/files/site-attachments/Picture%20the%20Change.Repeat%20Homelessness%20in%20Brighton.pdf>

- Moving people on can resolve an immediate issue in one location, but is likely to result in people sleeping rough elsewhere, often still within the city area.
- Enforcement can have a damaging effect on people's wellbeing because it may further reduce their already limited options. It rarely resolves the underlying issues or causes of someone needing to sleep rough.
- Enforcement can generate media interest or community opposition. Equally, inaction can generate complaints, community opposition and media interest.
- It can take a long time to enforce legal action and this can potentially cost a significant amount; even then outcomes are likely to have a short term impact.

A focus on the needs and complexity of the individual is more likely to result in an effective solution and sustainable move away from street life. Through the **Substance Misuse Service**, the Equinox Drug and Alcohol Outreach Team provide outreach and engagement, working with street drinkers and drug users to support people into treatment and reduce their street presence.

The police have **Dispersal Powers** and can require groups likely to be engaged in causing harassment, alarm or distress or be in the locality of crime or disorder to leave an area for up to 48 hours. The decision must have regard to the European Convention on Human Rights which provide for the right for lawful freedom of expression and freedom of assembly where there is no anti-social behaviour.

The council, police and support services have developed an **Engagement and Move-On Protocol** in relation to tents and encampments. The city council and its partners work to remove tents and other structures where there is a detrimental effect on the wider community, where they pose a community safety or public health risk or where the encampment is preventing the lawful use of council land. The council is working with the police on the potential use of **Public Spaces Protection Order's** (PSPO) to protect some of the city's sensitive sites and higher profile locations to help deal with particular nuisance or problems. To issue a PSPO, the behaviour must be having a detrimental effect on the quality of life of those in the community, it must be persistent or continuing and it must be unreasonable.

Goal 9: Promote alternatives to discourage begging

It is an offence to beg in a public place under Section 3 of the Vagrancy Act 1824. Whilst it is an offence to beg, it has been suggested that some lucrative begging spots in the city can net hundreds of pounds a week for those individuals. Such spots see competition between 'professional' beggars and the local street population with the money often used to buy drugs²³.

²³ The Argus, 2 May 2012:

http://www.theargus.co.uk/news/9681166.On_patrol_with_the_head_of_Brighton_s_anti_begging_squad/

The generosity of local people and tourists may provide limited help to those in need and solutions are needed that offers alternatives for those who wish to help such as by donating to one of the charities supporting the strategy in helping people move away from the streets. Donations can be made to support a range of practical activities in Brighton & Hove such as by providing:

- a Rent Deposit Scheme to help move people from the streets into accommodation
- start-up funding for a sit up bed service to bring people off the streets and assess their needs

Strategic Action Plan: Priority 4: A Safe City

Strategic Action	Target	Resource Implication	Lead Partner
Goal 8	Focus on managing risks, harm and promoting appropriate behaviour		
Work with support agencies to ensure they are not inadvertently encouraging people to spend excessive time on the street	Number of agencies who had a formal briefing	Capacity to brief, planned rolling programme	Adult Social care Council Housing Communities Team Third Sector
Support to encourage the street community not to meet in groups and disperse to safer lower impact locations	Reduced ASB reported perpetrated against, and by, street community people	Encouraging reporting to get an accurate assessment of impact	Sussex Police BHCC Community Safety Team
Support people into appropriate treatment services where possible as an alternative to enforcement	Number of street community people accessing treatment	Identify those most at risk and harm	BHCC Public Health
When necessary and proportionate, use place based enforcement to protect the public realm and reduce risk and harm to people	Reduced ASB reported perpetrated against, and by, street community people	PSPO, dispersal powers, move on protocol	Sussex Police BHCC Community Safety Team
Take robust enforcement action where necessary to reduce the risk and harm caused to people	Reduced ASB reported perpetrated against, and by, street community people	Identify those causing the most risk and harm and through the High Impact Case Forum	Sussex Police BHCC Community Safety Team
Use tenancy/residency enforcement action where appropriate to manage behaviour on the street	Sussex Police Council Community Safety Team	Specialist officer and legal officer time. Court costs	BHCC Housing BHCC Adult Services
Goal 9	Promote alternatives to discourage street life and begging		

Strategic Action	Target	Resource Implication	Lead Partner
Promote alternatives to giving to beggars focussed on helping people move away from street life	Use communications to sustain and embed alternative giving in the public psyche	Council Communications team capacity	BHCC Communications Team
Take robust enforcement/disruption action against persistent or intimidating begging	Number of convictions for begging	Police/support services co-ordinated directed patrols Use Vagrancy Act to prosecute beggars	Sussex Police

Consultation Questions 5: Priority 4: A Safe City

- 5.1 Do you agree with the approach to this priority?
- 5.2 How successful do you think this approach will be? (On a scale of 1-10, 10 is best)
- 5.3 What do you think the city could change or do better to achieve this priority?

DRAFT

Priority 5: Pathways to Independence

To support people sleeping rough into regaining their independence

Simply putting a roof over someone's head does not resolve their housing needs. Physical health, mental health and substance misuse needs, and re-engagement with society through social skills, leisure activities, education and employment is needed to make sure the person is able to maintain accommodation and an active and engaged role in their community.

Homeless Link²⁴ found that there were particular barriers associated with the environment in hostel accommodation while trying to work, or if they were recovering from issues with alcohol or substance misuse. Other people spoke about the negative impact that living in hostel accommodation had on their health and wellbeing.

A further challenge is the lack of suitable and affordable alternative accommodation for people who have formerly slept rough to move on from hostels to more appropriate supported accommodation or independence. The move to independence frees up valuable supported accommodation for other service users in need.

To support people sleeping rough into regaining their independence through effective treatment and life skills training, the city will:

- Goal 10: Have a flexible accommodation pathway that responds to changing needs
- Goal 11: Develop bespoke supported accommodation options where appropriate
- Goal 12: Ensure timely move-on to independent accommodation

Goal 10: Have a flexible accommodation pathway that responds to changing needs

The **Integrated Support Pathway (ISP)** was set up in 2007 as a way of providing supported accommodation for single homeless people, people sleeping rough and ex offenders who require support. The intention of the Pathway was to move people from the streets, through a pathway of services with reducing support which would help them to develop greater independence and eventually move to independent living.

²⁴ Repeat Homelessness in Brighton, Homeless Link, 2015:

<http://www.homeless.org.uk/sites/default/files/site-attachments/Picture%20the%20Change.Repeat%20Homelessness%20in%20Brighton.pdf>

The Pathway is being remodelled in partnership across housing, social care, public health, children's services and the CCG. The aim is to ensure it meets needs, is flexible, services are personalised and asset based and fills identified gaps in provision. A Psychologically Informed Environment approach will make sure day-to-day running of hostels has been consciously designed to take into account the psychological and emotional needs of the service users recognising the emotional trauma that may cause, or arise from, an individual becoming homeless. To meet a gap in service provision, the council will be establishing a women only accommodation service for those with complex needs.

Work and Learning and **Peer Support** services are being remodelled and recommissioned. These support individuals' with literacy and numeracy, and accessing voluntary and paid work and also train people with experience of homelessness to support people who are on their recovery journey.

Goal 11: Develop bespoke supported housing options where appropriate

The council will make sure it takes advantage of opportunities to bid for funds to develop supported accommodation services which meet local needs. In December 2015, Brighton & Hove City Council was awarded government funding from the Homes & Communities Agency to develop new supported housing for older single homeless people with physical disabilities who are currently living in hostel accommodation. Not only will this meet their needs more effectively in more suitable surroundings, it will free up hostel space for others in need.

Housing First is a new service to offer secure long term, self contained homes with intensive support to individuals who have multiple complex needs and a history of repeatedly losing accommodation, and/or are unable to live in hostels. A pilot ran for almost two years and was evaluated as a success by the University of York. The pilot has been converted into a permanent service run by St. Mungo's. This is the first Housing First project known to offer some spaces specifically for young people.

Goal 12: Ensure timely move-on to independent accommodation

High costs in the private rented sector, with average rents above local housing allowance limits, mean few affordable properties become available. When they do, landlords may not accept tenants on benefits and those who have slept rough are less likely to have a deposit, advance rent, fees or a guarantor. A wide range of agencies such as **Brighton Housing Trust** and the **YMCA DownsLink Group** work to sustain accommodation or source alternatives however, the challenge is great.

Social housing is scarce with demand far in excess of supply and generally only available to those in priority need such as those with children or disabilities. This excludes most single homeless people; however, it is recognised that there may be complex cases where social housing may be an appropriate move-on solution.

More affordable homes can be found in other parts of the country which will require people to make difficult choices about where they live. Other services need to be aware of these pressures and deliver the same consistent message if we are to change perceptions and expectations.

The city needs to consider innovative solutions to provide temporary affordable homes for single people and utilise initiatives such as the credit union to provide a way for people to save money to cover the costs of moving on if the need arises.

Strategic Action Plan: Priority 5: Pathways to Independence

Strategic Action	Target	Resource Implication	Lead Partner
Goal 10	Have a flexible accommodation pathway that responds to changing needs		
Remodel and recommission supported accommodation within the integrated support pathway	Remodel and recommission 2016, mobilise 2017	Within reduced budget	BHCC Adult Services
Ensure hostel accommodation is safe, a suitable quality, and supports wellbeing	Introduction of Psychologically Informed Environments in all hostels by March 2017	Will be done as part of retendering within existing resources	BHCC Adult Services
Consult women and other groups about delivery of service which best meet their needs	Develop women only accommodation provision	Commissioning by March 2017	BHCC Adult Services
Review Homeless Strategy Working Groups	Review to be complete March 2016 and implemented by March 2017	Within existing resources	BHCC Adult Services BHCC Housing
Recommission Peer Support services	By March 2017	Within reduced budget	BHCC Adult Services
Commission Work and Learning services	By June 2017	Within reduced budget	BHCC Adult Services
Encourage social enterprise solutions between the Third Sector and business community that provide work and learning opportunities for service users	To be discussed as part of consultation	Within existing resources	BHCC Adult Services Third Sector Business Community

Strategic Action	Target	Resource Implication	Lead Partner
Goal 11 Develop bespoke supported housing options where appropriate			
Deliver new supported scheme for older people with complex needs	Accommodation to be sourced and developed March 2017	Government funding awarded December 2015	BHCC Housing
Commission Housing First accommodation with units for young people	Contract live January 2016 (action complete)	New service funded within existing commissioning budgets	BHCC Adult Services
Consult women and other groups about delivery of service which best meet their needs	Develop women only accommodation provision	Commissioning by March 2017	BHCC Adult Services
Goal 12 Ensure timely move on to independent accommodation			
Ensure all those on the pathway to independence have a move-on plan developed at an early stage	Incorporated as part of the new model tender March 2017	Within existing resources	BHCC Adult Services
Work with third sector and landlords to source secure accommodation suitable for single people	Target to be developed in 2016	Within existing resources	BHCC Adult Services BHCC Housing Third Sector
Improve access to social housing where appropriate to meet needs of those ready	Allocations Policy Review in progress 2016	Social housing demand exceeds supply	BHCC Adult Services & BHCC Housing
Ensure the Multi-Agency Protocol highlights the regions housing affordability challenge	June 2016	To be developed within existing resources	BHCC Adult Services & St. Mungo's
Investigate creative solutions to increase accommodation options (such as lodgers)	March 2017	Subject to options developed	BHCC Adult Services & BHCC Housing

Consultation Questions:

- 6.1 Do you agree with the approach to this priority?
- 6.2 How successful do you think this approach will be? (On a scale of 1-10, 10 is best)
- 6.3 What do you think the city could change or do better to achieve this priority?

How to Respond to the Consultation

Consultation Questions 7: Final thoughts

- 7.1 Now you have read the proposals, how successful overall do you think the city's strategy, priorities and approach will be? (On a scale of 1-10, 10 is best)
- 7.2 Is there anything else you would like to tell us about the city's approach to make sure no-one has the need to sleep rough in Brighton & Hove by 2020?

To comment on this draft strategy, please visit the Council's Consultation Portal at <http://consult.brighton-hove.gov.uk/portal>

You can also write to us as:

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Comments on this draft strategy are welcome between 16 March and 17 April 2016.

It is very important that the strategy is built on a firm understanding of the experiences of all those affected by rough sleeping. In addition to the valuable research done locally with people sleeping rough by Homeless Link and Stonewall Housing, we will particularly seek and welcome contributions from those with experiences of rough sleeping to share.

We will use the feedback from this consultation to finalise the strategy for approval in summer 2016.

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Brighton & Hove
City Council

**Brighton & Hove
Rough Sleeping Strategy 2016**

Consultation Report 1: Position Paper

*To make sure no-one has the need to sleep
rough in Brighton & Hove by 2020*



**Brighton & Hove
City Council**

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1. Introduction

This document reports the findings from our consultation and engagement carried out in December 2015 to help to develop the draft Rough Sleeping Strategy.

A Position Paper was produced that summarised the city's current approach to rough sleeping and existing plans as well as highlighting the challenges we face. This included the draft vision and priorities for the new strategy and was the basis of the initial scoping consultation. This paper was emailed to all councillors, MPs and all those stakeholders who were invited to the summit.

The consultation was promoted through the council's website, social media and press engagement. During the consultation we held a stakeholder summit attended by 78 professionals and carried out online consultation through the council's consultation portal which received a further 36 detailed submissions covering all aspects of our proposals. Comments were invited on the vision, priorities and partnerships and also our approach and suggested actions for each priority.

Please note that the views and opinions expressed in this report are those of the stakeholders responding to our consultation and do not necessarily represent the views and policies of the council. The findings have helped stimulate debate inform the development of the draft strategy. Where possible, responses to the consultation have been reported verbatim. Some responses have been edited or removed where they were deemed to be inappropriate for publication such as by targeting an individual or organisation with unsubstantiated allegations or they may have provided personal or otherwise confidential information.

A second consultation report will be produced on the consultation for the draft strategy.

2. Stakeholder Summit

The event was held on the 4 December 2015 at the Brighthelm Centre with keynote presentations from:

- Nick Webb, Client, Brighton Housing Trust: “Rough Sleeping in Brighton & Hove”
- Minister Dave Steell, One Church Brighton: “Community Outreach”
- Andy Winter, Brighton Housing Trust: “Pathways to Independence”
- David Walton, St Mungo’s Broadway: “Best Practice in Eliminating Rough Sleeping”

Interactive workshops were held covering the draft strategic priorities with an additional table for discussing issues that sat outside the priorities:

1. Preventing Homelessness (Lead: BHCC Housing)
2. Street Triage (Lead: BHCC Adult Services)
3. Managing the Street Communities (Lead: BHCC Community Safety)
4. Improving Health (Lead: BHCC Public Health)
5. Safe Reconnection (Lead: St. Mungo’s Broadway)
6. Pathways to Independence (Lead: BHCC Adult Services)
7. Working with the City (Lead: BHCC Public Health)
8. Anything else? (Lead: BHCC Housing)

Delegates had the opportunity to attend 3 workshops and provide feedback on the other priorities via the council’s consultation portal.

78 people attended the conference from partner agencies, community groups, and internal staff. Delegates attending represented a wide variety of organisations and sectors including:

- Adur & Worthing District Councils
- Brighton & Hove Business Crime Reduction Partnership
- BHCC Councillors
- BHCC Housing
- BHCC Adult Services
- BHCC Children’s Services
- BHCC Public Health
- BHCC Community Safety
- BHCC Cityclean
- BHCC Seafront Office
- Brighton & Sussex University Hospitals
- Brighton Housing Trust
- Brighton YMCA
- Business Crime Reduction Partnership
- Clinical Commissioning Group
- The Clocktower Sanctuary
- Eastbourne Council
- Economic Partnership
- Equinox

- Fairness Commission
- Homeless Link
- Justlife
- Lead GP
- Local Action Teams
- Love Activists
- NHS
- Off the Fence
- OneChurch Brighton
- Pavilions Substance Misuse
- Riverside (St Patricks Hostel)
- SHORE
- Southdown Housing Association
- St Johns Ambulance
- St Mungo's Broadway St Peters Church
- Sussex Community NHS Trust
- Sussex Nightstop
- Sussex Partnership NHS Foundation Trust
- Sussex Police
- YMCA Downslink

Workshop hosts were asked to seek feedback on the successes and challenges in each area:

<i>Workshop</i>	<i>Feedback</i>
1. Preventing Homelessness	<ul style="list-style-type: none"> • Partnership with Children’s Services not in the Position Statement • Affordability • Big issues • Ending of Private Rented Accommodation • Landlord licensing • Where is the Business Sector? • Spend to save • Reasons to tackle up stream • End of AST • Parental eviction • Relationship breakdown • Working with private sector landlords • Landlords don’t want under 25’s • Work with other local authorities to see what they are doing • Cant end it here it is a national problem • What can we do to enhance the supply of private rented sector accommodation • Too many demands on people who are struggling with issues other than homelessness • Safe guarding in TA • Clear pathway giving correct advice with clear message • Investment vehicle for private rented sector accommodation

Workshop	Feedback
	<ul style="list-style-type: none"> • All want to help but cuts are reducing services • More in control at the beginning • More choice • Expand housing first model top low medium and high cases • Management of eviction at Temporary Accommodation • How do you have no 1st night out with verification which is 3 nights out • One stop shop • State of accommodation in TA – staff not trained – different rates • Local development plan • Managing expectations to access social housing • Issues about drug use in hostels - not safe places
<p>2. Street Triage</p>	<p>Street Triage – use for entrenched RS too</p> <p>What does Triage mean? No consensus</p> <ul style="list-style-type: none"> • Very clinical term – is this a health assessment? • Degrees of urgency / prioritising • First assessment • By an expert • Street Triage – does this mean on the street? • Need to take service to them/in place of comfort for assessment vs seeing people in their own environment • E.g. Colchester – people have somewhere to go to, are directed there. Services can focus on that place to meet people • SOS to do the initial triage • Street triage taking place by lots of agencies currently for RS <p>Role:</p> <ul style="list-style-type: none"> • Prioritising where people go • Start of assessment / info gathering • Keep people alive is the 1st priority • 1 assessment would be preferable, then shared with services, but would need to be a good assessment. So who would carry it out? Issues such as mental health get missed if people not trained. • Person needs shelter initially

<i>Workshop</i>	<i>Feedback</i>
	<p>Way forward:</p> <ul style="list-style-type: none"> • How to include soup kitchens, other community based services and the public in assessing people. Training offer? • Need integration to improve communications and agree priorities. Collate information • Get clients to building based services. Step 2 after 1st street assessment • Need better intelligence to find people on the streets • Use community people to help assess someone e.g. shop keepers who know the RS <p>Concerns:</p> <ul style="list-style-type: none"> • EAC – better approach than street assessments but no primary care/MH there and are every few weeks • Triage can be great, but no accommodation to refer people to • People failing in emergency accommodation and at risk of rough sleeping and people not wanting to go out of area, preferring to RS. What to do with them? • Clients fed up with telling the same story to lots of agencies <p>Actions for strategy:</p> <ul style="list-style-type: none"> • Need to expand LGBT section to include other groups and ensure appropriate accommodation for needs • NSNO is an approach not a service • Acknowledge that lots of frontline services carry out triage/assessments • Person centred response – need good communication services, systems to support this. • How do services link up? Needs developing - how to ensure they are happy to work together • Need uniform way of passing on information about clients • Need shared system for information and joint aims • Shared responsibility from services plus a navigator through the services or buddy to get people off the street sustainably • People with multiple and complex needs need more options, rather than just being kept alive

Workshop	Feedback
	<ul style="list-style-type: none"> • Agencies need to agree so no mixed messages from other agencies • Need a good flow of information – can saves lives • IT systems • Co-ordinating pathways needed • Need services to carry on working with people when placed in a hostel/accommodation to smooth the transition between services/settings • MDT meetings crucial to focus on most needy people • Define what is meant by street triage.
<p>3. Managing the Street Communities</p>	<p>4.1 Do you agree with the approach to this priority?</p> <ul style="list-style-type: none"> • Overwhelming NO to this question • These should be elements of the approach but not stand alone • The term “managing” is unhelpful and sets the wrong tone • A multi disciplinary team to tackle is the answer • There is not a “one size fits all” approach as street community is NOT one group with the same needs or wants <p>4.2 What do you think the city does well in its approach to this priority?</p> <ul style="list-style-type: none"> • We are compassionate • We do work well as different agencies and organisations • We have a balanced approach <p>4.3 How successful do you think this approach will be?</p> <ul style="list-style-type: none"> • 0/10 • This is qualified by saying that the elements of engagement and enforcement of proposed strategy is good and we do need robust enforcement as we are seen/perceived as an “easy touch “ destination. • Other cities are cracking down on street community and we risk being overwhelmed if we don’t step up our robust response to anti social behaviour (asb) issues. • Contrary views were expressed in all sessions on balance of support/enforcement – common theme was that street community issue is wider than homelessness.

Workshop	Feedback
	<ul style="list-style-type: none"> • Needs a separate strategy and policy for street community. <p>4.4 What do you think the city could do better to achieve this priority?</p> <ul style="list-style-type: none"> • Have clear and defined pathways for street community to access services • Create dialogue with community groups affected by the problems <p>4.5 What changes would you like to see?</p> <ul style="list-style-type: none"> • A must..... is a clearly defined protocol to deal with hotspots • A separate strategy • Diverted giving campaign and awareness of promoted locally and to visitors
<p>4. Improving Health</p>	<p>Session 1</p> <p>Seamless integration required. Co-location of services important for this. Reference to impact of tendering / competition / bidding for contracts</p> <p>Outcomes are key: preventable death and ill health</p> <p>Positives</p> <ul style="list-style-type: none"> • Partnership and integration between health and homeless services. • Hostel outreach by hostel health team. Access to Occupational Therapy. • Fortnightly multidisciplinary team meetings – health and homeless services <p>Biggest gaps / issues</p> <ul style="list-style-type: none"> • Step up / step down beds that can be used for homeless people (Royal Sussex and mental health acute) to minimise length of stay • Core funding for homeless GP practice is low compared to other areas with comparable service/need (business case being developed by CCG) • Quality of emergency and temporary accommodation -

<i>Workshop</i>	<i>Feedback</i>
	<p>impact on health. Also what are the changes to the BHCC Housing Support Service? – need more information.</p> <ul style="list-style-type: none"> • Move on accommodation options – need to be healthy / health aware • Pace of progress can seem slow • Dentistry • Need to recognise importance of mental health and substance misuse • Ensure attention on how improving health is part of individuals’ plans to support move on and independence • Importance of “Psychologically Informed Environments” in homeless services • Could the “I Statements” used in Proactive Care be adapted for homeless health? • are health needs considered in homelessness information and advice functions (Care Act implications) • Shared records • Need to build in peer support models (Groundswell model mentioned)
<p>5. Safe Reconnection</p>	<p>How do we sustain? Problems to reconnection not being tackled include:</p> <ul style="list-style-type: none"> • Young people in squats • Those reconnected who keep returning in summer • Those who have exhausted family and friends • A community of rough sleepers has developed <p>Need to have time to plan effectively and develop real solutions, sometimes local connection policy not working for that client so should not be applied</p> <p>Reconnection Challenge of:</p> <ul style="list-style-type: none"> • Those in relationships • Some partners hard to engage • Friendships amongst street community • Returners • Balance of enforcement and support • Local connection policy hindering sometimes <p>Need to make sure we are reconnecting into positive relationships which will help move-on</p>

Workshop	Feedback
	<p>Sustainable Need to be assertive to prevent death. People can be persuaded and enforcement needed with penalties (difficult choice). Proper reconnection – needs to be planned from assessment and get it right first time with organisations sharing information to ensure same message is given.</p> <p>However, we also need to take time to do the correct groundwork and listen to the individual</p>
<p>6. Pathways to Independence</p>	<p>Engagement</p> <ul style="list-style-type: none"> • Does Housing First work – oppose, is this best use of resources? <p>Work and learning – very low literacy levels</p> <ul style="list-style-type: none"> • Should this be cut • Trust 3rd sector • Use volunteers and local charities • Creative <p>Faith community</p> <ul style="list-style-type: none"> • Can bring positive relationships / sound networks / more informal support – how do we link this? • Prescribed pathway does not work for all • Peer support, 121 support starts • Engage people out day centres • More flexible life skills <p>How do people get into accommodation pathway</p> <ul style="list-style-type: none"> • Jump to Band 3 too big • All clients now high needs • Increase in shared housing – must be for under 35 • Affordability • Loss of accommodation – can they city council do anything re: new housing/affordable accommodation • Lack of move on accommodation – affordability • Blockage and waiting list for hostels • Lack of ability to move to PRS • Accommodation for working people – has to link with DWP

<i>Workshop</i>	<i>Feedback</i>
	<ul style="list-style-type: none"> • Moving out of city putting huge issues outside city – Eastbourne and Hastings struggling (unsustainable). Look at Sussex-wide / great Brighton strategy. Isolation and MH issues from moving out • ISP criteria – not realistic • Personalisation and client choice – were possible • Digital inclusion – in services and peer support • Self reliant – everything now online • Appropriate pathways based on needs • Older cohort of RS/health issues • Housing options in terms of council accommodation • How commissioning process works with local community and allows community input <p>Partnership & Community</p> <ul style="list-style-type: none"> • City groups / business community - links • Life skills – done outside pathway – bring different experience, different community groups for homeless people to access • Pathway – first base to Brighton unemployed centre (they need to be at the table) • How can we help wider services to join with us? • Wider community having understanding/resident forums • Local action teams want to get involved • Volunteers to help people become independent • Reduce isolation • Link outside street community • Encourage people not to give to people on the street • Help in another way / get involved • Become lonely after leaving services and they come back – move back to street community • Mutual support / sport / creative • Need to give guidance to the public – pathway separate from society (false) • Do this through services, faith groups • Social capital • Re-establishing contacts • Need to develop soft skills / interpersonal skills.

<i>Workshop</i>	<i>Feedback</i>
<p>7. Working with the City</p>	<p>Focussing on the Winter Campaign:</p> <p>1. Help</p> <ul style="list-style-type: none"> • People wanted to help those less fortunate and are moved to compassion encountering homeless people on the street • People don't know how to help • There is often an immediacy in the desire to help • It was recognised that giving money isn't always the best thing but due to lack of alternatives people do this. • We need to be more joined up in connecting services and outcomes and in linking people who want to help with services which can provide help. • We need to give a clearer message about the potential impact of cash giving in causing harm, but also need to offer greater opportunities for positive contribution. • The Priority area currently reads negatively as it focuses on the risks of giving badly and not enough about the ways of giving well, but the only way that people are going to stop giving directly is if suitable alternatives are created and promoted and are seen as credible ways of offering direct help. <p>2. The App</p> <p>Enables people to report rough sleepers and for rough sleepers to seek support</p> <p>Helpful as a tool to gather info, and a way for people to help and to act on their concerns but issues raised included:</p> <ul style="list-style-type: none"> • Need good quality feedback for reporters • Just makes reporting easier – doesn't change the poor level of services available • Concern that there will be a time lapse between report and action • Concern that events will be reported on the app that should properly go to emergency services • Need to know what will happen with the information – may be a reluctance report people if it is thought that reporting will lead to sanction or punitive measures.

<i>Workshop</i>	<i>Feedback</i>
	<p>Enables opportunities to donate money See overall as a very positive feature, responding to this need and providing a helpful avenue for support. Issues raised included:</p> <ul style="list-style-type: none"> • Needs to have credibility – if the app was seen as primarily a fundraising tool, integrity would be damaged • Needs to link directly to addressing the issues of homelessness in Brighton & Hove • Needs bespoke Brighton & Hove page • As money raised is ringfenced for Brighton & Hove, needs to say how it will be/has been spent – possible fundraising targets? Public involvement in selecting projects to be funded? • Was noted that the web version has a donate button but not the app version • Could there be potential for direct giving to an individual homeless person rather than to an organisation? • Seems a lot of potential for business sponsorship – this should be explored <p>Gives background information on rough sleeping Has the potential to add to intelligence around rough sleeping and enable services to be better targeted. Comments included:</p> <ul style="list-style-type: none"> • Most likely to record visible city centre population which may be more street drinkers and beggars and drug users rather than homeless people who are more likely to be in less prominent places • Homelessness is a national problem Can the stats be used nationally to get a fuller picture of homelessness. <p>Highlights opportunities to do more – volunteering etc...</p> <ul style="list-style-type: none"> • Needs to have bespoke & comprehensive Brighton & Hove info on volunteering, helping and giving taking in all helpful avenues and not just St Mungos • Needs to be driven by the vision of eliminating street homelessness – a dynamic proposition linked to a live council and community strategy with landmarked achievements and milestones, rather than giving to a remote organisation to meet a bottomless pit of need...

Workshop	Feedback
	<p>The app was supported by all three groups as a helpful way of addressing this priority, but is only a part of the solution, with more work needed on other ways to help and a clearer and stronger articulation of the concerns around direct cash giving and why this may be a bad thing.</p>
<p>8. Anything Else?</p>	<p>Housing Shortage</p> <ul style="list-style-type: none"> • Where do the draft priorities address the shortage of affordable housing for single people in the city? • Vulnerable people have no desire to leave for less expensive areas, they would rather be homeless in Brighton & Hove. • Council needs to focus on social value of land for local affordable housing use rather than maximise capital receipt. • Spending Review has made Private Sector Leasing non-viable • Off-site manufacture can reduce build costs <p>Need people focussed young people’s services</p> <ul style="list-style-type: none"> • Rough sleeping amongst under 25’s is increasing. • It is felt that these are falling through the gaps where services are viewed as process driven rather than focussing on the needs of the service user which is causing young people to disengage. • Other third sector groups are picking up the pieces. • Young People’s service at Ovest House seen as putting off young people at risk. • Need to link to other groups to act as advocates, such as The Clocktower Sanctuary. <p>Live in Care</p> <ul style="list-style-type: none"> • Potential for an apprenticeship programme to train single homeless people to be live in carers. • Need to partner training organisation with long term care provider • Provides company and care for an older person. • Solves housing need of single homeless. <p>Build on our successes</p> <p>Brighton & Hove services have developed a lot of good</p>

<i>Workshop</i>	<i>Feedback</i>
	<p>practice over the years. Need to make sure that this is not lost as changes are implemented.</p> <p>Emergency & Temporary Accommodation The poor quality of emergency accommodation received repeated mention, in round table discussions, via a question from the floor and in specific feedback from Justlife (see chapter 4)</p> <p>Women Need to make sure women at risk of, and suffering, domestic violence are supported.</p> <p>Sussex Need to improve links across Sussex to achieve critical mass to make some services viable.</p> <p>JustLife Specific feedback on Emergency Accommodation was provided by Justlife at the Summit:</p> <ul style="list-style-type: none"> • Enforce landlords to provide decent standards • Give all staff/caretakers safeguarding training • DBS checks for staff • More inspections • Training in understanding people with multiple complex needs • Provide: confidential client complaint line • Notice boards • Welcome packs with information about services, receipt book for cooking on a single hob etc • If emergency placement let JustLife know when someone moves into EA and we will go and meet them and try and engage in services/activities • Run a peer to peer service to welcome new people to EA • Council host a regular round table with EA landlords, agencies working with people in EA and service User representatives • Have a room in each EA that agencies can use to deliver services

3. Consultation Portal Responses

In total 36 responses were completed on the Brighton & Hove City consultation portal (2 others were duplicate submissions):

Residency:

- 35 (97%) were resident in Brighton & Hove
 - 1 (3%) was replying as a carer
 - 21 (58%) were replying as residents
 - 1 (3%) was replying as a service commissioner
 - 2 (6%) were replying as service providers
 - 1 (3%) was replying as a service user
 - 1 (3%) was replying as a business representative
 - 5 (14%) were replying as Community & Voluntary Sector Organisations
 - 2 (6%) were replying as Community champions
 - 1 (3%) was replying as an ex rough sleeper
- 1 (3%) was not a resident of Brighton & Hove and was responding as a representative of a business based in the city

Respondents with a history of rough sleeping:

- 11 (31%) of those responding identified as being people who were sleeping rough or had previously slept rough.
 - 1 Living in a motor vehicle
 - 1 Living in a tent
 - 3 Sleeping rough
 - 1 Sleeping rough; Sofa surfing; Living in a tent
 - 1 Sleeping rough; Squatting; Sofa surfing; Living in a vehicle; Living in a tent
 - 1 Sofa surfing
 - 1 Sofa surfing; Living in a motor vehicle
 - 1 Squatting
 - 1 Squatting; Sofa surfing

Equalities Protected Characteristics of respondents:

- **Age:** Consultees who provided this information aged from 29 to 80. 4 (11%) were aged 29 to 40, 7 (19%) were aged 41 to 50, 12 (33%) were aged 51 to 60, 5 (14%) were aged 61 to 70, 1 (3%) aged 70+, 7 (19%) preferred not to disclose their age. The average Age of respondents was: 53
- **Gender:** Male 18 (50%), Female 14 (39%), Preferred Not To Say 2 (6%), No response 2 (6%)
- **Ethnicity:** 26 (72%) consultees identified as White UK/British and 5 (14%) as BME and 5 (14%) preferred not to disclose their ethnic origin or did not respond
- **Sexual Orientation:** 22 (61%) of consultees identified as being Heterosexual / Straight, 3 (8%) Gay man, 1 (3%) as Bisexual, 10 (28%) preferred not to say

- Disability:** 6 (17%) of consultees identified as having some kind of disability where their day-to-day activities were limited because of a health problem or disability which has lasted, or is expected to last, at least 12 months. Of those 3 responded that their impairment was due to a long-standing illness, 1 that their impairment was due to a physical condition and 1 that their impairment was due to a mental health condition
- Religion or Belief:** 3 (8%) of consultees identified as being Atheist , 3 (8%) as being Buddhist, 8 (22%) as being Christian, 1 (3%) as being Pagan, 1 (3%) as being Universalist & Liberal Christian, 16 (44%) was being of no particular religion and 4 (11%) preferred not to say or did not respond

Important Note

Where possible, responses to the consultation have been report verbatim. Opinions given are those of the respondents and they may not represent the views of the authority. The finding have helped stimulate debate inform the development of the draft strategy. Some responses have been edited or removed where they were deemed to be inappropriate for publication such as by targeting an individual or organisation with unsubstantiated allegations or they may have provided personal or otherwise confidential information.

Theme	Feedback from respondents																								
<p>1. Vision, Priorities & Partnerships</p>	<p>1.1 Do you support the city’s strategic vision?</p> <table border="1"> <caption>Data for 1.1: Do you support the city’s strategic vision?</caption> <thead> <tr> <th>Response</th> <th>Count</th> <th>Percentage</th> </tr> </thead> <tbody> <tr> <td>Yes</td> <td>30</td> <td>83%</td> </tr> <tr> <td>No</td> <td>5</td> <td>14%</td> </tr> <tr> <td>No response</td> <td>1</td> <td>3%</td> </tr> </tbody> </table> <p>1.2 Do you support the city’s strategic priorities?</p> <table border="1"> <caption>Data for 1.2: Do you support the city’s strategic priorities?</caption> <thead> <tr> <th>Response</th> <th>Count</th> <th>Percentage</th> </tr> </thead> <tbody> <tr> <td>Yes</td> <td>27</td> <td>75%</td> </tr> <tr> <td>No</td> <td>8</td> <td>22%</td> </tr> <tr> <td>No response</td> <td>1</td> <td>3%</td> </tr> </tbody> </table>	Response	Count	Percentage	Yes	30	83%	No	5	14%	No response	1	3%	Response	Count	Percentage	Yes	27	75%	No	8	22%	No response	1	3%
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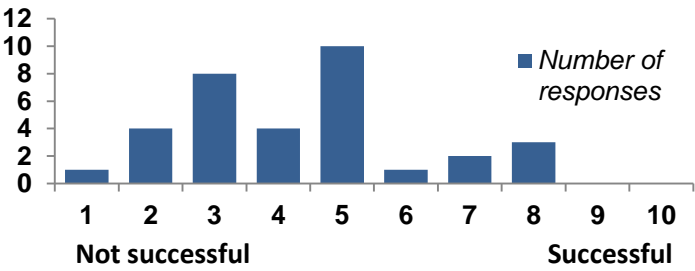
Theme	Feedback from respondents
	<p data-bbox="528 282 1391 360">1.3 Please tell us about anything you would like to change in the city's vision or priorities</p> <p data-bbox="528 412 863 443">22 consultees responded:</p> <p data-bbox="528 450 1353 584">Where will you house rough sleepers, even from hostels they congregate outside and annoy other residents in the area? "A robust approach" sounds good but I expect it needs resources you haven't got!</p> <hr/> <p data-bbox="528 591 1391 891">They all sound good if they are done in a genuinely caring way. My fear is that they will not be. We have already seen a crack down on 'moving rough sleepers along' and taking all they're possessions: this is totally uncaring and is motivated by 'reputation' not caring for these people as individuals. Priority 3 to me sounds like what I have just described. People do not choose to be rough sleeping so they should be treated with respect and care, not discrimination and disrespect for their value as human beings.</p> <hr/> <p data-bbox="528 898 1391 987">To ensure housing first to enable homeless people to have a base from which to recover and grow. To make sure Adult Social care services are not reduced,</p> <hr/> <p data-bbox="528 994 1391 1196">A national issue, but criminalising squatting was a step in wrong direction. Civil recourse was adequate; on top off all the other issues faced by rough sleepers do we really want to add a criminal record. With so many empty properties it is immoral not to put them to use. So what legislation do we have to seize non-utilised buildings at least for the short term and put them to use.</p> <hr/> <p data-bbox="528 1202 1391 1637">As the Support Worker for Emmaus Brighton & Hove we were most upset that we were not invited to Brighton Council's Rough Sleeping Summit on December 4th. As a 48 bed working Community we have a Social Return on Investment to the value of every one pound spent by the Government we give back £11. All our Companions come off all state benefits, are working volunteers for 40 hours a week, and there is no move on it can be a place for life. I support this plan but we are all upset that we were not asked to attend this event. 80% of our Companions were street homeless and the other 20 % come from prison. Very typical of Brighton Council not to include many third sector agencies who work with the homeless in the city. <i>[we have now spoken to Emmaus and rectified this mistake]</i></p> <hr/> <p data-bbox="528 1644 1391 1704">The cities strategic vision and strategic priorities are not yet clear from what I have read.</p> <hr/> <p data-bbox="528 1711 1391 2033">Severe Weather shelters should be open November through to March. It shouldn't need to drop below a certain temperature for them to open, as a young woman sleeping rough on West Street told me two weeks ago. Have you seen the Love Activists' 7 basic proposals? They seem very effective and easily doable: 1. Every homeless person is vulnerable and should therefore be considered in priority need, including those in temporary accommodation. 2. The Housing First model should be expanded to offer housing to all of the city's homeless people, offering adequate support to suit each individual's needs. 3. The Severe</p>

Theme	Feedback from respondents
	<p>Weather Emergency Protocol (SWEP) should be activated immediately, in any weather which threatens rough sleepers' health, particularly the wet. 4. The council should activate the Extended Winter Provision of the Severe Weather Emergency Protocol immediately. The emergency shelters should be opened every night, over the winter and beyond. 5. Affordable social rents should be imposed on private landlords and property investors, prioritising the provision of permanent homes until everyone is securely housed. 6. Reform the LASPO act, to make squatting empty properties safe and equitable for property owners and otherwise homeless people. 7. Because of the so-called 'first mover loses' phenomenon, it will be necessary for local authorities around the country to work together, in order to implement these measures nationally.</p>
	<p>I am very concerned about the reduction in housing provision for rough sleepers. The way beds are allocated favours those in social care need, however, new rough sleepers and individuals who are yet to develop severe health problems are not given a pathway out of homelessness and rough sleeping. This leaves them stranded in a cycle of homelessness with no clear way out. Hostel beds provide residents with a support service from highly skilled professional staff which allows people to move quickly off the street and address their support needs.</p>
	<p>The council routinely pays private landlords vast sums of money for extended periods of time to provide very substandard temporary• accommodation without any contracts, no minimum standards for the quality of accommodation/decoration/modern facilities. It is a phenomenal waste of money and no-one benefits but the greedy private landlords. Look at <i>[locations deleted but passed to relevant officers for investigation]</i> BHCC pays ridiculous amounts of money to. It is terrible that anyone is allowed to be houses in these places. It seems the attitude is that no-one else will house these otherwise homeless people so they are lucky to have anything at all and that poor standards are acceptable. Take it or leave it. It is a disgrace. The council should run temporary accommodation shelters themselves and not line the pockets of private landlords. Oh but then that means the council being responsible for housing people. Now we can't have that, can we?</p>
	<p>Street sleepers should be sent back to the towns from where came from or B&H send a bill to the towns for cost involved with that person. Residents are fed up with having to step over sleepers and going different routes so that one does not get molested by drunks e.g. New road which is a no go area</p>
	<p>That no one has to sleep rough any night, not by 2020</p> <p>Make it illegal for letting agents and private landlords to exclude prospective tenants who are in receipt of housing benefits by default. The council should provide written evidence of the benefit award and the agent should not automatically disqualify a prospective tenant on the grounds of being on benefits - this unfortunately seems to be quite common with agencies and private landlords. Just because somebody is on housing benefits doesn't make them a bad tenant. Improve availability of council</p>

Theme	Feedback from respondents
	<p>housing. Improve tenants' rights in the private rented sector - make private tenancies more secure in that the private landlord can't just ask the tenant to move out UNLESS mutually agreed OR the tenant has been misbehaving repeatedly. NOT because they landlord didn't like the tenant's hairstyle or life choices. Build more housing that low income earners can afford.</p>
	<p>Support in principal but it seems very resource heavy therefore expense and there is little to understand in terms of outputs and could be seen as the usual, although enhanced 'softly softly' approach</p>
	<p>We seem to encourage so called rough sleepers to come to the city because we provide more than other areas and in particular neighbouring areas. We should be actively discouraging rough sleepers but provide support for those with a bona fide link with the city.</p>
	<p>Eradicate van dwelling which is a form of rough sleeping. It is unhygienic, unsafe, and unhealthy and causes valuable parking spaces to be removed from local residents. It is also becoming a popular and apparently acceptable way of living in our city. Our roads are not a caravan park.</p>
	<p>A strategic vision is fine, as long as it is well informed and executed with the right tactics. The strategy described by BHC is naive in conception and not appropriately directed. Almost ALL homelessness in the western world can be linked to mental health disorders (diagnosed or not diagnosed). Failure to address the root causes of homelessness will yield little success. Studies in other cities and countries show this. Learn from the evidence, and do not be guided by empirical judgement. There is no place for it. Identify people who are NOT local and have them repatriated to their own locale. The priority for people with local connection should be that every person with a mental health disorder (including substance use disorders) is identified, diagnosed by professionals, provided with a treatment plan and supported though treatment. Putting a roof over their head the meantime is a good idea. The need is a medical one. Housing is just dealing with one symptom.</p>
	<p>Appears to be little input from people who have actually slept rough or are sleeping rough. As somebody has had the misfortune to sleep on the streets of Brighton I realise there are many issues that need addressing because many of the individuals have different and complex issues. However there appears to be a lot of organisations not co operating or with there own agendas and for the council appears not to have any function in the delivery or prevention of homelessness. I found where most of the objectives of the strategy very worthy they appear no different to what is already happening and that a closer working of different services would be an improvement.</p>
	<p>The priority must be provision of suitable accommodation - social housing that people can afford. A need for less rhetoric and PR and a greater emphasis on practical work There is an abundance of research and "visions" for activity but little implementation</p>

Theme	Feedback from respondents
	<p>1. Those with mental health or special needs have to be removed from the streets. 2. Begging, sleeping in doorways and congregating in drunken groups are first.</p> <hr/> <p>No 1 (prevention) has to be the absolute priority.</p> <hr/> <p>Actively encourage the retention and increase in shared accommodation, particularly for men and women under 35</p> <hr/> <p>The fancy words above are so vague they can be taken to mean almost anything that anyone speaking them wants a listener to believe - so although I'd like to agree with 'Motherhood and Apple Pie' I'm unable to do so, given the serious implications, in various directions, of the above vague aspirations and assertions. For example: "No-one has the need to sleep rough by 2020". So the taxpayers of Brighton & Hove will provide safe and salubrious accommodation to anyone arriving at the City's boundary without the means/ability to provide it for themselves, regardless of higher policy or law? Please get real with your words!!</p> <p>1.4 Please tell us any strategic partners we may have missed</p> <p>10 consultees responded</p> <p>Justlife Charity - supporting people in emergency and temporary accommodation</p> <hr/> <p>Local homeless action groups</p> <hr/> <p>I assume you count rough sleepers as 'strategic partners'. They may have a mix of issues, unable to find affordable homes, alcohol, MH, relationship problems, but are still people. Don't process them like peas.</p> <hr/> <p>Emmaus Brighton & Hove</p> <hr/> <p>Is there as any provision for rough sleepers animals, mainly dogs who are sometimes with them? Is there a service providing hot food and drinks for rough sleepers?</p> <hr/> <p>Residents who pay rates and your wages</p> <hr/> <p>Business - in terms of loss of income and mess to clear. City clean - for clearing mess left behind</p> <hr/> <p>Too many partners. Let's focus the effort in a single place.</p> <hr/> <p>Psychiatric services. Other councils to repatriate people who are not from the area. Other councils who house people here in "temporary" "B&B" accommodation, who are often subsequently evicted and live on Brighton streets and do not return to their place of origin.</p> <hr/> <p>All those residents who feel intimidated or just reluctant to go into the city centre because of this problem. And all the potential tourists who feel the same and stay away from Brighton.</p>
2. Preventing Homelessness	2.1 Do you agree with the approach to this priority?

Theme	Feedback from respondents												
	<div data-bbox="646 331 1173 582" data-label="Figure"> <table border="1"> <caption>Survey Results</caption> <thead> <tr> <th>Response</th> <th>Count</th> <th>Percentage</th> </tr> </thead> <tbody> <tr> <td>Yes</td> <td>25</td> <td>69%</td> </tr> <tr> <td>No</td> <td>10</td> <td>28%</td> </tr> <tr> <td>No response</td> <td>1</td> <td>3%</td> </tr> </tbody> </table> </div> <div data-bbox="523 663 1356 741" data-label="Section-Header"> <p>2.2 What do you think the city does well in its approach to this priority?</p> </div> <div data-bbox="523 790 858 824" data-label="Text"> <p>21 consultees responded</p> </div> <div data-bbox="534 828 1361 896" data-label="Text"> <p>Not a lot. The problem is not enough affordable housing in the city. Until then the problem can't really be solved.</p> </div> <div data-bbox="534 898 1378 1064" data-label="Text"> <p>In 2.1 ticked NO more appropriate than YES. Consider a third option – PARTLY "The city needs to consider innovative solutions" Try building more homes. Stop falling for home owner propaganda that says there is no room to build more. Build on The Deans</p> </div> <div data-bbox="534 1066 1382 1337" data-label="Text"> <p>Not enough, We need to involve more private sector landlords and letting agents to stop this stigma of people on housing benefit. As a support worker it is so difficult for me and all other support workers in other charity sector to move on clients. Is there agreement on new buildings in the city to provide a portion of new builds to go to the public sector? Is there empty land the council could get central Government money for to build new social housing</p> </div> <div data-bbox="534 1339 1345 1404" data-label="Text"> <p>Yes but many homeless people arrive from London and other cities</p> </div> <div data-bbox="534 1408 1321 1444" data-label="Text"> <p>Don't know enough about what council is doing to comment</p> </div> <div data-bbox="534 1447 1366 1615" data-label="Text"> <p>Plans to work closely with private landlords, supporting them to assist tenants whose tenancy is beginning to fail. Making information available about the current shortage of affordable housing in the area although this is the case in most boroughs especially where there is the likelihood of employment.</p> </div> <div data-bbox="534 1617 1369 1785" data-label="Text"> <p>Clients are identified as needing accommodation when being discharged from institutions, such as prison and hospital however, they are not always allocated accommodation. Identifying those at risk of rough sleeping is not enough without the prevention of rough sleeping.</p> </div> <div data-bbox="534 1787 1375 1919" data-label="Text"> <p>Does not tackle the core underlying cause in most cases... untreated mental illness. Get decent mental health provision. Also, many rough sleepers are not local. They come to Brighton for a "holiday" in the summer according to First Base.</p> </div> <div data-bbox="534 1921 1393 2022" data-label="Text"> <p>You haven't said what you do well, with 23,000 on the waiting list it looks like you're not doing the job. You should give priority to residents born or at least spent 25 years in the city , why should</p> </div>	Response	Count	Percentage	Yes	25	69%	No	10	28%	No response	1	3%
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No response	1	3%											

Theme	Feedback from respondents																						
	<p>the council give housing to persons who arrive in the city for free housing!</p> <hr/> <p>Fact-gathering - its unclear to me from the statement above who "we of the City are"?</p> <hr/> <p>Good floating support service - Community Connections</p> <hr/> <p>Writes fine words, we have yet to see what results</p> <hr/> <p>Yes, but... Brighton will always continue to draw the problem unless sleeping in the street and begging is made illegal. The rough sleeping also draws drug dealing and other illicit activities</p> <hr/> <p>Looking at directing people to affordable accommodation outside of the city. Many people are attracted to living in Brighton without realising how expensive it is. Early intervention is required so that visitors can return to their original neighbourhoods before they lose their community connections. Emphasis on that it will not be possible to just come to Brighton without sufficient funds to live here.</p> <hr/> <p>Prevention is a priority but all strategies and tactics must be based on evidence and sound practice.</p> <hr/> <p>Not at all. Policy is often good but implementation not the reality</p> <hr/> <p>Address the point of why so many are attracted to beg on Brighton streets. Stop that happening and the attraction is removed.</p> <hr/> <p>Well something isn't working otherwise we would not have such a problem.</p> <hr/> <p>Is it important to look at this fundamental area</p> <hr/> <p>Plenty resources, just lack of co-ordination.</p> <hr/> <p>Sometimes in mediating with PRS landlords to avoid the threatened eviction of troublesome tenants, such as by the funding of rent arrears and/or the provision of HB top-ups to meet rents increased beyond an existing tenant's reasonable ability to pay.</p>																						
	<p>2.3 How successful do you think this approach will be? (On a scale of 1-10, 10 is best)</p>  <table border="1"> <caption>Number of responses by rating</caption> <thead> <tr> <th>Rating</th> <th>Number of responses</th> </tr> </thead> <tbody> <tr><td>1</td><td>1</td></tr> <tr><td>2</td><td>4</td></tr> <tr><td>3</td><td>8</td></tr> <tr><td>4</td><td>4</td></tr> <tr><td>5</td><td>10</td></tr> <tr><td>6</td><td>1</td></tr> <tr><td>7</td><td>2</td></tr> <tr><td>8</td><td>3</td></tr> <tr><td>9</td><td>0</td></tr> <tr><td>10</td><td>0</td></tr> </tbody> </table> <p>2.4 What do you think the city could do better to achieve this priority?</p>	Rating	Number of responses	1	1	2	4	3	8	4	4	5	10	6	1	7	2	8	3	9	0	10	0
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Theme	Feedback from respondents
	<p>28 consultees responded</p> <p>Something needs to be done about the fees for letting agents, sometimes asking for 6 months rent in advance, charging administration fees every time the rent goes up etc. I really feel young vulnerable people don't get the help they need.</p> <hr/> <p>Build more affordable housing. Stop letting all the brown field sites getting built on for luxury homes</p> <hr/> <p>Take back empty homes that have been empty for several years</p> <hr/> <p>Build more affordable homes</p> <p>Stop the stigma around tenants on Housing Benefit, a guaranteed agreement for landlords to help accept social tenants. A bigger push from Brighton Council and its local MPs to ask for more local funding for social housing. A big ask, but something needs to happen soon.</p> <hr/> <p>A big problem is with youth hostels, I know you people who have chosen to camp in parks rather than use them because the environment is chaotic. Placing people with problems in a unit is not ideal.</p> <hr/> <p>Joined up action with other local authorities and organisations</p> <p>I am very pleased that the council are happy to involve local residents in helping rough sleepers. It is often the case that although local people in all areas want to help, that it is not clear how to go about this and often councils are not happy for people to give money to people who are apparently homeless. Giving local residents as much information as possible and also giving rough sleepers as much information as possible and in a timely way about how to change their circumstances.</p> <hr/> <p>More importance needs to be given to the skills and benefits of having hostel based accommodation for those with a history of rough sleeping. Their complex needs are unlikely to be addressed through any other provision.</p> <hr/> <p>Face the facts. Mental health provision and people from outside the area choosing to sleep rough here. BHCC is an ostrich.</p> <hr/> <p>Give all the out of town sleepers single tickets back to where they came from saying if they are picked up again an ASBO will be given to them for coming back to the city and sleeping on the street.</p> <hr/> <p>Provide better guidance to residents and visitors as to how to help the homeless without encouraging begging.</p> <hr/> <p>More resources to avoid people losing accommodation and entering the homeless system. More support for people at risk of losing their accommodation rather than this area being cut i.e. Housing Related Support, floating support, Housing Support Services. This includes people in council tenancies who should get the support they need and not be evicted. Recognise that people will have support needs in all tenancies and the system should be flexible to support this, rather than people losing their 'general' needs accommodation and then referred to supported accommodation. This is a very expensive model.</p> <hr/> <p>Fewer Managers more people on the ground</p>

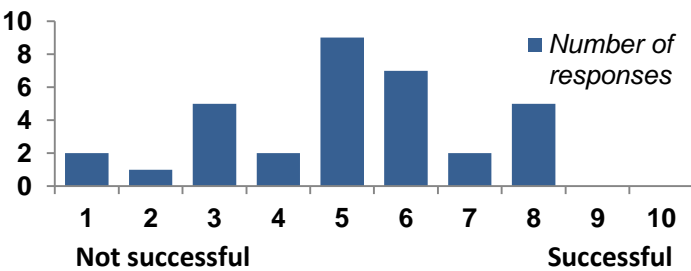
Theme	Feedback from respondents
	<p>"A new service called Community Connections, provided by Southdown, will help people to stay in their accommodation by working with landlords and agencies to prevent eviction"</p> <p>Unfortunately the possibility of staying in private accommodation often isn't because of misbehaviour but due to a range of different factors, which the service doesn't seem to address: -landlord "dislikes" the tenant due to skin colour, hair style, eating habits, sexual orientation etc., even though none of these would affect somebody's ability to be a good tenant. Landlord makes up an excuse to get the tenant to leave simply because they don't "like" the tenant. -landlord wants their nephew to take the room so the tenant needs to move out. -landlord is sexually harassing the tenant so the tenant chooses to leave - the service shouldn't encourage the tenant to stay in such circumstances. - accommodation is in such a poor state of repair that the landlord asks the tenant to "go away" 2 months to access the flat for repair but this is effectively like asking them to move out as they would need to find somewhere to store their furniture.</p>
	<p>Hard and firm no sleeping and/or begging n the street byelaw. It is not just about local homelessness - people actually travel to Brighton to do this – it's a party town and perhaps a bit warmer on the south coast!</p>
	<p>If you want Landlord to rent you property you need to ensure rents are paid to the LL and they you provide a cash deposit as opposed to a guarantee.</p>
	<p>Sadly a tough love approach is probably best. Helping people before they are habituated to either rough sleeping, van dwelling or sofa surfing to gain affordable accommodation outside the city. Either helping them to return to their original communities or finding affordable accommodation outside of the city. The Churches provide food etc. on a regular basis and I have heard it said that the homeless don't go hungry in Brighton but they are unable to provide much in the way of short or long term accommodation. All this does is make it possible to live in the streets as homeless people are fed and clothed regularly.</p>
	<p>We need to manage people's expectations about the fact that Brighton and Hove is one of the most desirable places to live in Europe. As individuals we can only afford to live where we can afford to live. I can't afford to live in a family house in Kensington, so I live here. There are many places along the coast that are very accessible to Brighton but are much, much cheaper to live in (rent, house prices, living expenses etc.). Stop being "anti-landlord". The private landlords in this city are mainly decent people who offer good accommodation at reasonable cost, given the market. Yet the Private Sector Housing (PSH) group in BHCC is so anti-landlord it is appalling. <i>[the rest of this comment has been deleted]</i></p>
	<p>As you pointed out as a single male I can only expect advice and assistance, I received this advice and ended sleeping rough for nine months and my present situation will probably lead to returning to the streets. So I can not see how you are going to stop people sleeping on the streets without using draconian</p>

Theme	Feedback from respondents
	<p>measures as when you get to the stage that you accept sleeping as your only option getting out of it is almost impossible with out assistance. I feel your approach can only fail as most of the people on the streets are single people and although shipping them off to somewhere else in the country where rents are cheaper is a option for some, Brighton is my home town and I refuse to be driven out so expect to see me back on the streets</p> <hr/> <p>Implement policy</p> <hr/> <p>Have its own temporary accommodation? Use churches?</p> <hr/> <p>This is, unfortunately, severely limited by the financial resources available to B&H. Any hold up in obtaining legitimate Universal Credit is likely to increase homelessness.</p> <hr/> <p>Teach people to be more aware, by commissioning more Mindfulness Based Cognitive Therapy (MBCT) 8 week courses,</p> <hr/> <p>A change in culture: housing as shelter rather than a commodity</p> <hr/> <p>Co-ordinate better, I move 3 ton of food round the city every week to foodbanks, hostels and onto streets. So understand some of the issues</p> <hr/> <p>Actively encourage the retention and increase in shared accommodation, particularly for men and women under 35</p> <hr/> <p>Not necessarily ".. this policy ..", but overall BHCC needs to have central Gov't declare a form of 'Housing Action Zone (HAZ)' for the City (for about 25 years), on the broad principle of an HAZ Authority having 'First Refusal' (at open market prices) to buy all land and buildings capable of being made suitable for residential use (through new-build and/or conversion or renovation where needed) to achieve a final stock of 'Social Rented Housing' in B&H of about 48,000 dwellings (with a greater total of bedrooms to be calculated according to the demographic situation and trends in the City). Self-evidently the work of the HAZ would also act to find ways to 'discourage' incomers to the City (of any income level) except under exceptional and clearly-defined provisions and exemptions (basically a policy of 'One out - One in' until the population and housing stock of the City has been brought into such equilibrium that all with an acquired 'right' to live here can do so in a 'Decent Home', and at a cost not exceeding 25% of their nett income (for owner-occupiers adjusted so that the capital element of mortgage repayments is EXCLUDED from the '25% of nett income' calculation)).</p> <p>2.5 What changes would you like to make?</p> <p>25 consultees responded</p> <p>In an ideal world, go back to the days when there were rent tribunals to stop landlords increasing the rent every 6 months. I don't think the high rent in Brighton is a huge factor in the number of rough sleepers in Brighton though. I think lots of the rough sleepers have drug/alcohol/mental health issues and would find it difficult to keep a tenancy, even with support. Plus many are not from Brighton and don't have connections here.</p>

Theme	Feedback from respondents
	Build more affordable housing. Cap rents
	I would like to see an end to the right to buy council homes, for the council to circumvent this as seems to be the plan. For the council not to work with housing associations that are only building buy/part buy properties which are clearly out of the reach of ordinary income/housing benefit. Extend work with co-ops. To let new council and HA builds at a social (not "affordable") rent.
	Build more affordable homes. Task BOE [<i>Bank of England</i>] with keeping property inflation down below 1% pa
	Better relationship with local landlords, better working with the third sector (that's us by the way). A greater understanding of the reasons for homelessness in our city. For our local MPs to have more say in Government on behalf of the homeless population in our city.
	There is no easy fix and no one size fits all but young people in crisis should be offered nurturing environments, where possible placing them with families rather than in hostels.
	I am very pleased that the council are happy to involve local residents in helping rough sleepers. It is often the case that although local people in all areas want to help, that it is not clear how to go about this and often councils are not happy for people to give money to people who are apparently homeless. Giving local residents as much information as possible and also giving rough sleepers as much information as possible and in a timely way about how to change there circumstances.
	More hostel based accommodation to provide beds for rough sleepers so they can access the support they may need and have a quick pathway off the streets where otherwise their needs may become entrenched.
	The council routinely pays private landlords vast sums of money for extended periods of time to provide very substandard temporary accommodation without any contracts, no minimum standards for the quality of accommodation/decoration/modern facilities. It is a phenomenal waste of money and no-one benefits but the greedy private landlords. Look at [<i>address details deleted but passed to relevant service for investigation</i>]. BHCC pays ridiculous amounts of money to. It is terrible that anyone is allowed to be houses in these places. It seems the attitude is that no-one else will house these otherwise homeless people so they are lucky to have anything at all and that poor standards are acceptable. Take it or leave it. It is a disgrace. The council should run temporary accommodation shelters themselves and not line the pockets of private landlords. Oh.. but then that means the council being responsible for housing people. Now we can't have that can we?
	Well the housing dept. should all resign with 23,000 on the waiting list. It must be touching on taking money on false pretences. Stop selling housing stock, as this comes from central government you could make it so difficult that no one would find a way though the paper work needed, that would then slow down the buy to let gang. Make all the University's house all students in purpose built

Theme	Feedback from respondents
	<p>halls of residents that would then free up houses in the town which are let to students. Till the time that the universities have housed all its students, a local tax should paid by the University for each student in private housing, this would then be used for local housing. This would in turn lower or at least slow down the cost of housing in the town, as the 'buy to let gang' would sell up and move on. Universities could then rent the rooms out in the summer as holidays lets</p>
	<p>I'm missing what the tangible goals are - 15% less than current - the statement says no one will sleep rough. Is that a statement of thousands or hundreds are to be supported - realism is best weighed up with deeper stats</p>
	<p>No more cuts to HRS or other tenancy sustainment services. Recognise that flexible services are needed to help people remain in their homes.</p>
	<p>Weed out those who simply drive desks</p>
	<p>Build more council housing.</p>
	<p>No sleeping in the street and/or begging and people made to move on by dedicated unit OR transport provided to collect for overnight at dedicated hostel incurring a fee!</p>
	<p>If you want Landlord to rent you property you need to ensure rents are paid to the LL and that you provide a cash deposit as opposed to a guarantee.</p>
	<p>Earlier intervention. My husband helps at a homeless soup kitchen and no one questions or challenges the homeless guests. It has become acceptable to live like this and this needs to stop. The soup kitchens should be a temporary last resort. In practice many of the homeless have been attending these establishments for many years and more and more are joining. Particularly migrants often with a poor command of English.</p>
	<p>People who do not have the means to live in Brighton should be supported to live in other towns where they do have the means to live. Overhaul PSH, <i>[comment deleted]</i> and stop being "anti-landlord"</p>
	<p>Homeless centres must be on the outskirts of the city - not the centre. It is too attractive there.</p>
	<p>Teach people to be more aware, by commissioning more Mindfulness Based Cognitive Therapy (MBCT) 8 week courses,</p>
	<p>Rent capping, more social housing, curbing council right-to-buy</p>
	<p>Organise and regulate but also encourage support for current help while taking immediate action to create accommodation.</p>
	<p>Actively encourage the retention and increase in shared accommodation, particularly for men and women under 35</p>
	<p>Not necessarily ".. this policy ..", but overall BHCC needs to have central Gov't declare a form of 'Housing Action Zone (HAZ)' for the City (for about 25 years), on the broad principle of an HAZ Authority having 'First Refusal' (at open market prices) to buy all land and buildings capable of being made suitable for residential use (through new-build and/or conversion or renovation where needed) to achieve a final stock of 'Social Rented Housing' in B&H of about 48,000 dwellings (with a greater total of bedrooms</p>

Theme	Feedback from respondents												
	<p>to be calculated according to the demographic situation and trends in the City). Self-evidently the work of the HAZ would also act to find ways to 'discourage' incomers to the City (of any income level) except under exceptional and clearly-defined provisions and exemptions (basically a policy of 'One out - One in' until the population and housing stock of the City has been brought into such equilibrium that all with an acquired 'right' to live here can do so in a 'Decent Home', and at a cost not exceeding 25% of their nett income (for owner-occupiers adjusted so that the capital element of mortgage repayments is EXCLUDED from the '25% of nett income' calculation).</p>												
<p>3. Street Triage</p>	<p>3.1 Do you agree with the approach to this priority?</p> <div data-bbox="646 779 1173 1030" data-label="Figure"> <table border="1"> <caption>Survey Results for Question 3.1</caption> <thead> <tr> <th>Response</th> <th>Count</th> <th>Percentage</th> </tr> </thead> <tbody> <tr> <td>Yes</td> <td>25</td> <td>69%</td> </tr> <tr> <td>No</td> <td>9</td> <td>25%</td> </tr> <tr> <td>No response</td> <td>2</td> <td>6%</td> </tr> </tbody> </table> </div> <p>3.2 What do you think the city does well in its approach to this priority?</p> <p>15 consultees responded</p> <p>Rapid</p> <hr/> <p>I agree services should link up. However with social care budgets being cut can this be possible?</p> <hr/> <p>Firstly at Emmaus Brighton and Hove we do not require a local connection, neither does many of the other Communities across the country, maybe you could look at the ethos of Emmaus as a working Community, no local connection or move on. Health wise, the mental health sector is massively underfunded, what we have is very good from my experience but could do with better training for the police in mental health. More beds in Millview or another mental health hospital wing.</p> <hr/> <p>The city recognises that rough sleepers can often live independently once the resources become available and no longer need supported accommodation. The city is addressing the possibility of moving people back to their original locality who do not have a local connection.</p> <hr/> <p>No second night out providing support alongside good quality housing.</p> <hr/> <p>Early intervention is always the best way - but involve mental health and send people who are not from the area back to where they come from.</p> <hr/> <p>Why is always 3.1 Yes or NO , could be that some is good but a</p>	Response	Count	Percentage	Yes	25	69%	No	9	25%	No response	2	6%
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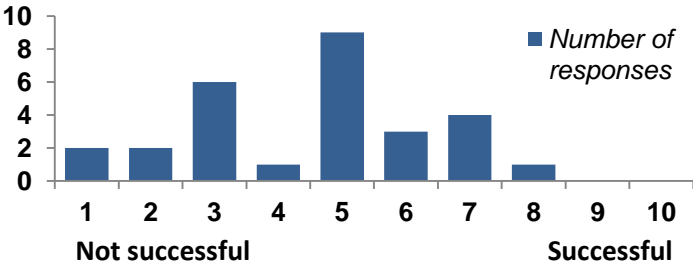
Theme	Feedback from respondents																						
	<p>lot is bad , seems that a lot of time is spent on no more than 150 people who like sleeping on the street</p> <hr/> <p>The contract has only recently been awarded. What PR activities have been undertaken to make it known in the circles of those sleeping rough?</p> <hr/> <p>SOS does a great job.</p> <hr/> <p>I am not sure, There were established care providers in the City, why do we appoint an organisation that "needs to get to understand the nature of the city's rough sleeping"?</p> <hr/> <p>Yes, but...the problems are not at all new, there is nothing new to understand - it is simply there is just more of the same problem. Unless there is a completely different and firmer line then the problem will just continue to grow!</p> <hr/> <p>Good but van dwellers need to be classed as rough sleepers too and included in the "no second night" initiative.</p> <hr/> <p>Not much... identification is only one part of the equation. Many of these people will be known to mental health services; they are patients who have fallen out of the system. Mental health involvement should be integral at every step.</p> <hr/> <p>The current wide provision of self-contained and shared housing for homeless men and women, and for people with mental health problems and addictions.</p> <hr/> <p>Almost nothing - the lack of basic humanity in this approach by BHCC is not only unacceptable - treating human beings like objects - but is ultimately unproductive and thus a mis-application of scarce funding!</p>																						
	<p>3.3 How successful do you think this approach will be? (On a scale of 1-10, 10 is best)</p>  <table border="1"> <caption>Data for 3.3: Number of responses by rating</caption> <thead> <tr> <th>Rating</th> <th>Number of responses</th> </tr> </thead> <tbody> <tr><td>1</td><td>2</td></tr> <tr><td>2</td><td>1</td></tr> <tr><td>3</td><td>5</td></tr> <tr><td>4</td><td>2</td></tr> <tr><td>5</td><td>9</td></tr> <tr><td>6</td><td>7</td></tr> <tr><td>7</td><td>2</td></tr> <tr><td>8</td><td>5</td></tr> <tr><td>9</td><td>0</td></tr> <tr><td>10</td><td>0</td></tr> </tbody> </table>	Rating	Number of responses	1	2	2	1	3	5	4	2	5	9	6	7	7	2	8	5	9	0	10	0
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	<p>3.4 What do you think the city could do better to achieve this priority?</p> <p>23 consultees responded</p> <p>Massive injection of funds to get more support workers! Seriously, I commend your efforts but with all the cuts to services how are you going to arrange access to mental health care, for example? This is difficult enough for the settled community!</p>																						

Theme	Feedback from respondents
	More places to put people once they have been seen initially
	I am not sure what is meant by a local connection - is this a certain time a person has lived in the city?
	Be less heavy handed
	Better training and engaging better with Mind and MindOut and better liaising with the police.
	When Dr Barnardo set-up the first children's home he turned away a boy who later died, after that he said he would never turn away a child in need. If he could achieve that in 1876 then we should be matching that ambition for all homeless people in 2015.
	Rapid response simply is not rapid enough. There needs to be workers available to respond immediately to alerts that vulnerable people are sleeping rough and severe weather shelters need to be accessible throughout winter. When I called the emergency council number one very cold night to tell them about a young vulnerable couple on the street I was told someone would be out over the next few days to check if they were still there. That is of no help to someone on the streets, who needs help now.
	Make as much accommodation available as possible bearing in mind that some people will prefer to live in shared houses rather than live alone.
	The housing used for No Second Night Out needs to be of good quality and of a high standard. This allows people to move out of homelessness and aids motivation to change.
	Mental health nurses on the streets.
	If you sleep on the streets of Brighton and you don't come from here, then an ASBO is given to them
	Benchmarking with other cities
	Premises to assess people. Multi disciplinary teams to assess people and clear service pathways after assessment, which includes accommodation
	Work with those who have experience of helping street sleepers
	Good but van dwellers need to be classed as rough sleepers too and included in the "no second night" initiative.
	Yes, but...the problems are not at all new, there is nothing new to understand - it is simply there is just more of the same problem. Unless there is a completely different and firmer line then the problem will just continue to grow!
	Immediately check with mental health services if someone is a patient the moment they are identified. Get access to Sussex Partnership database.
	Remove the reasons why Brighton attracts homelessness. Don't make the hostels appear to be like hotels. They aren't!
	Access local expertise.
	Most rough sleepers are drug addicts and substance misusers. This has to be addressed for any long term solution to be achieved. I have been running MBCT courses for these people for the last 5 years, with some spectacular results

Theme	Feedback from respondents
	<p>Organisation and co-ordination. When out I see rough sleepers with too much and others with nothing, Legal High drugs are causing so much grief, sometimes I cannot wake people up to help them, some agencies are too protective over their groups to the extent they do not want you feeding or helping rough sleepers they are giving a cup of soup to. An understanding of who is helping and for what reason, many people who help me have issues that helping others helps them with. This is very common.</p> <hr/> <p>Actively encourage the retention and increase in shared accommodation (as opposed to the lukewarm reference in the current mental health accommodation tender)</p> <hr/> <p>Not necessarily "... this policy ..", but overall BHCC needs to have central Gov't declare a form of 'Housing Action Zone (HAZ)' for the City (for about 25 years), on the broad principle of an HAZ Authority having 'First Refusal' (at open market prices) to buy all land and buildings capable of being made suitable for residential use (through new-build and/or conversion or renovation where needed) to achieve a final stock of 'Social Rented Housing' in B&H of about 48,000 dwellings (with a greater total of bedrooms to be calculated according to the demographic situation and trends in the City). Self-evidently the work of the HAZ would also act to find ways to 'discourage' incomers to the City (of any income level) except under exceptional and clearly-defined provisions and exemptions (basically a policy of 'One out - One in' until the population and housing stock of the City has been brought into such equilibrium that all with an acquired 'right' to live here can do so in a 'Decent Home', and at a cost not exceeding 25% of their nett income (for owner-occupiers adjusted so that the capital element of mortgage repayments is EXCLUDED from the '25% of nett income' calculation)). Basically sufficient decent affordable social rented housing, with adequately-trained and paid professionally-qualified (medical and social-work etc.) staff to provide well-tailored support to those in need. Possibly also small (15 to 30-person) fully-staffed and serviced 'Residential Communities' for those unwilling and/or unable to operate a dwelling for themselves, even with moderate support.</p> <p>3.5 What changes would you like to make?</p> <p>19 consultees responded</p> <hr/> <p>Sorry to be a pessimist, but I don't think you can do this!</p> <hr/> <p>More places to house people in the city that are better regulated and affordable</p> <hr/> <p>The root cause of not being able to house homeless is the lack of social housing and the lack of "ethical" landlords. The council needs to set up more ethical landlord schemes.</p> <hr/> <p>Identify the problem further down the chain. Home life environment in early teens.</p>

<i>Theme</i>	<i>Feedback from respondents</i>
	More training and advice for understanding of mental health needs of the homeless population in our city.
	A promise to house everyone in crisis immediately
	Rapid response simply is not rapid enough. There needs to be workers available to respond immediately to alerts that vulnerable people are sleeping rough and severe weather shelters need to be accessible throughout winter. When I called the emergency council number one very cold night to tell them about a young vulnerable couple on the street I was told someone would be out over the next few days to check if they were still there. That is of no help to someone on the streets, who needs help now.
	Better quality housing provision for No Second Night Out.
	Mental health nurses on the streets.
	If you sleep on the streets of Brighton and you don't come from here , them an ASBO is given to them
	Cannot comment due to lack of knowledge- would it not make sense to offer an online link to the contracted organisation St. Mungos Broadway for information??
	Continue to work with existing agencies First base, the churches, etc.
	Yes, but...the problems are not at all new, there is nothing new to understand - it is simply there is just more of the same problem. Unless there is a completely different and firmer line then the problem will just continue to grow!
	Good but van dwellers need to be classed as rough sleepers too and included in the "no second night" initiative.
	Acknowledge that no matter what a minority will prefer to live this way. There are some people who refuse to be helped
	Teach people to be more aware, by commissioning more Mindfulness Based Cognitive Therapy (MBCT) 8 week courses
	A meeting of all agencies, a project wall created and signed by everyone involved. A list of assets created so we can all see what we have and then a priority list made to acquire what is missing, simple things like carpet tiles to sit on, we have loads of warm clothes that cannot be put out until we hit a cold spell or they get dumped as heavy. Possible portable showers secure so rough sleepers can keep all their belongings safe while showering. Brighton needs to think out the box, we could even consider use of licensed camp sites and caravans, these could be used for families and relieve part of the pressure in the bedsitter city groups.
	Actively encourage the retention and increase in shared accommodation, particularly for men and women under 35
	Not necessarily ".. this policy ..", but overall BHCC needs to have central Gov't declare a form of 'Housing Action Zone (HAZ)' for the City (for about 25 years), on the broad principle of an HAZ Authority having 'First Refusal' (at open market prices) to buy all land and buildings capable of being made suitable for residential use (through new-build and/or conversion or renovation where needed) to achieve a final stock of 'Social Rented Housing' in

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	<p>B&H of about 48,000 dwellings (with a greater total of bedrooms to be calculated according to the demographic situation and trends in the City). Self-evidently the work of the HAZ would also act to find ways to 'discourage' incomers to the City (of any income level) except under exceptional and clearly-defined provisions and exemptions (basically a policy of 'One out - One in' until the population and housing stock of the City has been brought into such equilibrium that all with an acquired 'right' to live here can do so in a 'Decent Home', and at a cost not exceeding 25% of their nett income (for owner-occupiers adjusted so that the capital element of mortgage repayments is EXCLUDED from the '25% of nett income' calculation)). Basically sufficient decent affordable social rented housing, with adequately-trained and paid professionally-qualified (medical and social-work etc.) staff to provide well-tailored support to those in need. Possibly also small (15 to 30-person) fully-staffed and serviced 'Residential Communities' for those unwilling and/or unable to operate a dwelling for themselves, even with moderate support.</p>												
<p>4. Managing the Street Communities</p>	<p>4.1 Do you agree with the approach to this priority?</p> <div data-bbox="635 1055 1161 1305" data-label="Figure"> <table border="1"> <caption>Survey Results for Question 4.1</caption> <thead> <tr> <th>Response</th> <th>Count</th> <th>Percentage</th> </tr> </thead> <tbody> <tr> <td>Yes</td> <td>22</td> <td>61%</td> </tr> <tr> <td>No</td> <td>10</td> <td>28%</td> </tr> <tr> <td>No response</td> <td>4</td> <td>11%</td> </tr> </tbody> </table> </div> <p>4.2 What do you think the city does well in its approach to this priority?</p> <p>15 consultees responded</p> <p>The services who work on the ground with people, like equinox, are very good. Those services need more resources to really be effective.</p> <hr/> <p>I don't know enough about the effects of moving people on</p> <hr/> <p>Not very well, why are they sleeping in tents? We have several Companions who were previously street homeless who have had their tents stolen, damaged or even burnt. This stigmatises the homeless again, perhaps having more night shelters open to the homeless community? Work more with Project Antifreeze who have a real understanding of the street homeless community.</p> <hr/> <p>Very little, if they have no money what choice do they have but to beg? Imposing this law is cruel and will ultimately raise the level of crime.</p> <hr/> <p>Addressing the multiple and complex needs of people for whom</p>	Response	Count	Percentage	Yes	22	61%	No	10	28%	No response	4	11%
Response	Count	Percentage											
Yes	22	61%											
No	10	28%											
No response	4	11%											

Theme	Feedback from respondents																						
	homelessness is an entrenched problem. Acknowledging that resolving these issues will be very difficult. Tackling antisocial behaviour.																						
	Anti-social behaviour forums where professionals can share information and work holistically to meet the client's needs.																						
	How much does all this cost, you don't say																						
	Great Community safety SOS and Police partnership																						
	Not sure																						
	None of the objectives are really that new are they and what have they achieved to date?! What's the point of 'outreach' when the service itself waits to be contacted? The approach needed is dedicated and active actions actually patrolling and strong discouragement also from proper policing																						
	In practice I don't think the police have the time to monitor "anti social street behaviour" unless it becomes very visible and very unacceptable. The softly softy approach has made Brighton very attractive to rough sleepers and those who like to live on the streets. The impression is that Brighton tolerates this sort of lifestyle and this unfortunately appears to encourage more people to do it.																						
	Not a lot.																						
	The contact and coordination between the different support groups and agencies is excellent.																						
	The Day and Street Services Working Group																						
	Hardly anything - too much money spent for barely any positive outcome.																						
	<p>4.3 How successful do you think this approach will be? (On a scale of 1-10, 10 is best)</p>  <table border="1"> <caption>Data for 4.3: How successful do you think this approach will be?</caption> <thead> <tr> <th>Rating</th> <th>Number of responses</th> </tr> </thead> <tbody> <tr><td>1</td><td>2</td></tr> <tr><td>2</td><td>2</td></tr> <tr><td>3</td><td>6</td></tr> <tr><td>4</td><td>1</td></tr> <tr><td>5</td><td>9</td></tr> <tr><td>6</td><td>3</td></tr> <tr><td>7</td><td>4</td></tr> <tr><td>8</td><td>1</td></tr> <tr><td>9</td><td>0</td></tr> <tr><td>10</td><td>0</td></tr> </tbody> </table>	Rating	Number of responses	1	2	2	2	3	6	4	1	5	9	6	3	7	4	8	1	9	0	10	0
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10	0																						
	<p>4.4 What do you think the city could do better to achieve this priority?</p> <p>20 consultees responded</p> <p>The number of people sleeping in shop doorways is appalling! I'd like to see sleep "pods" which would give a bit of safety for the rough sleeper. I worry how people manage to sleep on a busy</p>																						

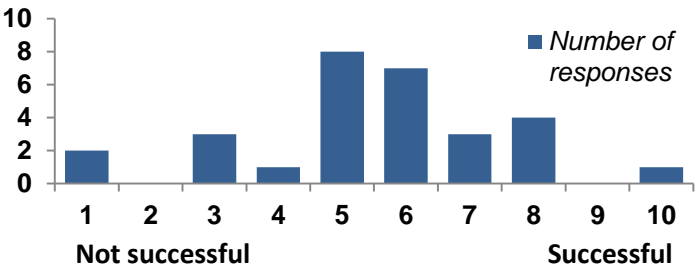
Theme	Feedback from respondents
	<p>street night after night. Some system would need to be introduced so that rough sleepers did not make the pod a permanent home, maybe hand a key out in the evening from a hostel and give a reward the next day for the return of the key. Doesn't need to be a financial reward, could be a voucher for a meal or something.</p>
	<p>More funding for outreach services and more places to accommodate people after early intervention.</p>
	<p>Not use phrases like " the law-abiding majority"</p>
	<p>Not all homeless are drinkers, drug takers or involved with anti social behaviour. Brighton used to have a safe space for drinkers in the city by the Pavilion where it was a staffed and controlled environment with support staff at hand. You cannot just move these people on and hope they will go away. You need to understand why they are street homeless.</p>
	<p>Specifically around mental health - often as people begin suffering - they have support from friends and family - as the cycle continues, they tend to lose this support. Eventually, as their mental health leads to difficulties sustaining tenancies, they find that the only support they can find is amongst the street community. This leads to escalating drug use, exacerbating MH issues. If someone being discharged from psychiatric hospital is placed in a hostel - the chances of them maintaining a routine involving healthy eating, regular sleep patterns, exercise, abstention from substances that affect MH, are pretty minimal, as they are fighting their environment as well as their MH.</p>
	<p>Regular prescriptions for drug users, rehabilitation programs for all forms of addiction with immediate access for those on the street, access to emergency cash and the ability to claim income support despite not having a permanent address.</p>
	<p>Working with the organisations it already proposes to do.</p>
	<p>Better provision to allow people to move off the streets and into accommodation where support is provided by highly skilled professionals at any hour of the day.</p>
	<p>Rigid, iron fisted enforcement. Laws are pointless without enforcement.</p>
	<p>Make a by-law stating that its an offence to sleep on the pavement and parks</p>
	<p>Provide spaces where people can congregate without feeling they are unwelcome.</p>
	<p>Without sufficient people - helpers and Police on the street it will not succeed</p>
	<p>It comes back to early intervention. People coming to the city need to understand straight away that rough sleeping, van dwelling etc. is not tolerated and is not an acceptable way of living in Brighton.</p>
	<p>Stop paying private landlords extortionate amounts of money to house people in grim, substandard accommodation. Stop other councils sending their homeless to be housed in the same grim "B&B" accommodation. This is part of the problem, not part of the solution and costs a ridiculous amount of money along the</p>

Theme	Feedback from respondents
	<p>way.</p> <hr/> <p>Must put the settled community ahead of the street sleepers/beggars/campers. Phrases like "proportionate and reasonable" have ZERO meaning as they are totally subjective to the person deciding what to do. There needs to be very clear and distinct written rules to follow.</p> <hr/> <p>Where are the appropriate places within the city for rough sleepers to go during the day especially if it is raining or cold? Rough sleepers come under our church portico, but they block the church entrance, create noise and disturbance and sometimes leave their needles or defecate. Recent gatherings of groups of rough sleepers under our portico are causing increasing concern. At times it is becoming impossible to work quietly and safely at the church, particularly on your own. It is stressful to operate in a noisy distracting environment and not possible to provide pastoral care services at the church when there are rough sleepers congregating outside. A small group of 1 or 2 may act reasonably at first, but when it becomes a larger group (it has been 18 people, alcohol and 2 muscle dogs) it can be intimidating even if there is no personal aggression. Hirers are having to face these concerns too. There is particular concern for the safety of children e.g. in the nursery school and [name deleted]. It is also affecting the hirability of our premises and the state of repair of our historic pillars and steps.</p> <hr/> <p>Most rough sleepers are drug addicts and substance misusers. This has to be addressed for any long term solution to be achieved. I have been running MBCT courses for these people for the last 5 years, with some spectacular results</p> <hr/> <p>Not all groups are invited to meetings and these meetings are not advertised well, real time needs to be spent in contacting every individual or group, regulate to some degree and co-ordinate, allow access to council support and facilities, I am convinced all we need is co-ordination.</p> <hr/> <p>Actively promote the most effective intervention (abstinence-based residential rehabilitation) for members of the street community with addictions Ensure that abstinence-based residential services are clearly signposted on Council's, Pavilions and other websites, rather than as an afterthought Ensure that current services offering an enabling role for outreach services and that are evidenced to be effective, to be supported to be financially viable</p> <hr/> <p>Not necessarily ".. this policy ..", but overall BHCC needs to have central Gov't declare a form of 'Housing Action Zone (HAZ)' for the City (for about 25 years), on the broad principle of an HAZ Authority having 'First Refusal' (at open market prices) to buy all land and buildings capable of being made suitable for residential use (through new-build and/or conversion or renovation where needed) to achieve a final stock of 'Social Rented Housing' in B&H of about 48,000 dwellings (with a greater total of bedrooms to be calculated according to the demographic situation and trends in the City). Self-evidently the work of the HAZ would also act to find ways to 'discourage' incomers to the City (of any</p>

Theme	Feedback from respondents
	<p>income level) except under exceptional and clearly-defined provisions and exemptions (basically a policy of 'One out - One in' until the population and housing stock of the City has been brought into such equilibrium that all with an acquired 'right' to live here can do so in a 'Decent Home', and at a cost not exceeding 25% of their nett income (for owner-occupiers adjusted so that the capital element of mortgage repayments is EXCLUDED from the '25% of nett income' calculation)). Basically sufficient decent affordable social rented housing, with adequately-trained and paid professionally-qualified (medical and social-work etc.) staff to provide well-tailored support to those in need. Possibly also small (15 to 30-person) fully-staffed and serviced 'Residential Communities' for those unwilling and/or unable to operate a dwelling for themselves, even with moderate support.</p> <p>4.5 What changes would you like to make?</p> <p>21 consultees responded</p> <hr/> <p>Strengthen powers to curb aggressive begging!</p> <hr/> <p>More funding for outreach services and more places to accommodate people after early intervention.</p> <hr/> <p>More nuanced approach. Those rough sleepers who do so purely due to inability to find affordable housing (a growing number) should be helped by prioritising house building. Those with MH / family breakdown need help much earlier in their lives. Driver of family breakdown often economic factors (unemployment). Alcohol issues? Is it really worse amongst rough sleepers compared to the non rough sleeping community?</p> <hr/> <p>A better working between the police and the street homeless charities which work in the city. A plan to open more night shelters and support stations and day centres so they know where to access support.</p> <hr/> <p>Specialist emergency/temp accommodation for those discharged from psychiatric hosp.</p> <hr/> <p>Common sense, if a person doesn't have money in todays society they have two choices crime or begging. Create a third choice for them, that's your role.</p> <hr/> <p>Happy to see how the current plans progress.</p> <hr/> <p>Better pathways off the street for people with medium to low support needs.</p> <hr/> <p>Not to see beggars and sleepers</p> <hr/> <p>Take this out of the strategy. Create a separate strategy for street communities if one does not already exist. Focus on rough sleeping.</p> <hr/> <p>More helpers, volunteers if need be</p> <hr/> <p>Proper and enforced by laws!</p> <hr/> <p>Stop the drinking.</p> <hr/> <p>It comes back to early intervention. People coming to the city</p>

<i>Theme</i>	<i>Feedback from respondents</i>
	<p>need to understand straight away that rough sleeping, van dwelling etc. is not tolerated and is not an acceptable way of living in Brighton.</p>
	<p>Mandate 24 hour supervision for all "Temporary" "B&B" accommodation where three or more people are housed (by BHCC or other councils).</p>
	<p>Better support for alcohol and drugs misuse, and far better support for mental health. At the present most services and support for mental health issues are not available for homeless people.</p>
	<p>How would it work if rough sleepers had places they could go during the day? Out of the rain?</p>
	<p>Teach people to be more aware, by commissioning more Mindfulness Based Cognitive Therapy (MBCT) 8 week courses,</p>
	<p>More transparency in groups and meetings to discuss what we all do.</p>
	<p>Actively promote the most effective intervention (abstinence-based residential rehabilitation) for members of the street community with addictions Ensure that abstinence-based residential services are clearly signposted on Council's, Pavilions and other websites, rather than as an afterthought Ensure that current services offering an enabling role for outreach services and that are evidenced to be effective, to be supported to be financially viable</p>
	<p>1 - Not necessarily ".. this policy ..", but overall BHCC needs to have central Gov't declare a form of 'Housing Action Zone' for the City (for about 25 years), on the broad principle of an HAZ Authority having 'First Refusal' (at open market prices) to buy all land and buildings capable of being made suitable for residential use (through new-build and/or conversion or renovation where needed) to achieve a final stock of 'Social Rented Housing' in B&H of about 48,000 dwellings (with a greater total of bedrooms to be calculated according to the demographic situation and trends in the City). Self-evidently the work of the HAZ would also act to find ways to 'discourage' incomers to the City (of any income level) except under exceptional and clearly-defined provisions and exemptions (basically a policy of 'One out - One in' until the population and housing stock of the City has been brought into such equilibrium that all with an acquired 'right' to live here can do so in a 'Decent Home', and at a cost not exceeding 25% of their nett income (for owner-occupiers adjusted so that the capital element of mortgage repayments is EXCLUDED from the '25% of nett income' calculation)). Basically sufficient decent affordable social rented housing, with adequately-trained and paid professionally-qualified (medical and social-work etc.) staff to provide well-tailored. Especially given that I disagree with the propositions in this section 4, and:: 2 - Much, much, stronger police and criminal justice application of the raft of legislation about 'Vagrancy and Public Nuisance' going back over the centuries. Expensive to be jailing people for 'bad public behaviour'? yes, in the beginning, BUT; what a wonderful opportunity to conduct a meaningful rehabilitation, and a</p>

Theme	Feedback from respondents												
	<p>maximum resolution of peoples 'issues' whilst incarcerated (which will require a much greater effort from the Prison and Probation services, who appear to be very short of funding, and largely lacking the ability and culture, to rehabilitate the 'Lame Ducks' who will always be with us until adequate help and rehabilitation, and/or appropriate residential institutions are provided in England. BHCC cannot solve all of these issues on its own - central Government input is also needed!</p>												
<p>5. Improving Health</p>	<p>5.1 Do you agree with the approach to this priority?</p> <div data-bbox="630 638 1165 884" data-label="Figure"> <table border="1"> <caption>Survey Results for Question 5.1</caption> <thead> <tr> <th>Response</th> <th>Count</th> <th>Percentage</th> </tr> </thead> <tbody> <tr> <td>Yes</td> <td>29</td> <td>81%</td> </tr> <tr> <td>No</td> <td>2</td> <td>5%</td> </tr> <tr> <td>No response</td> <td>5</td> <td>14%</td> </tr> </tbody> </table> </div> <p>5.2 What do you think the city does well in its approach to this priority?</p> <p>12 consultees responded</p> <p>Projects like the Pathway Plus scheme have been shown to work well, but the amount of help they can offer is limited by the poor quality, condition and regulation of emergency accommodation in the city. The condition of emergency accommodation in Brighton is impacting on people's physical and mental health in very negative ways.</p> <p>Morley Street do a great job for GP and dentist access. It would be nice to have mobile dental and GP stations around the city for the street homeless. Better training for the police service in mental health and apply for more funding for the mental health teams, more CPNs to go around with the police to help support and advice with people with a mental health diagnosis.</p> <p>Not enough currently</p> <p>Health and social care services working together.</p> <p>Good investment in health and joined-up working with NHS.</p> <p>Integrated Health & Care Board again. No resident. The more you do the more sleepers will come to the town. We should also ask the question what would happen to all the Multi-disciplinary agents o if the problem was sorted out. No profit in clearing the streets</p> <p>The Morley Street GP practice, the MDT hub being developed. The amazing hostels nursing team.</p> <p>First Base is good</p> <p>Yes...but, it seems from this survey there are more support services available to the street community than other poor low</p>	Response	Count	Percentage	Yes	29	81%	No	2	5%	No response	5	14%
Response	Count	Percentage											
Yes	29	81%											
No	2	5%											
No response	5	14%											

Theme	Feedback from respondents																						
	<p>paid workers living in substandard housing who are just overlooked! Perhaps the real problem is there is so much support and advice available for living on the streets in Brighton that's it's perhaps the best city to be homeless in! And it is a party town!!</p>																						
	<p>First base is excellent and does far more than the limited description given above. The Homeless Healthcare is also excellent and if I had such support from my previous GP I may not have had ended up on the streets in the first place. Mental health support is a issue from my own experience and I am quite shocked how people with mental health issues are allowed to stay on the street many turning to drugs and alcohol to handle there situation.</p>																						
	<p>Plenty support</p>																						
	<p>The range of support services available, especially those that direct their interventions to moving people off the streets</p> <p>5.3 How successful do you think this approach will be? (On a scale of 1-10, 10 is best)</p>  <table border="1" data-bbox="550 1086 1252 1355"> <caption>Number of responses by rating</caption> <thead> <tr> <th>Rating</th> <th>Number of responses</th> </tr> </thead> <tbody> <tr><td>1</td><td>2</td></tr> <tr><td>2</td><td>0</td></tr> <tr><td>3</td><td>3</td></tr> <tr><td>4</td><td>1</td></tr> <tr><td>5</td><td>8</td></tr> <tr><td>6</td><td>7</td></tr> <tr><td>7</td><td>3</td></tr> <tr><td>8</td><td>4</td></tr> <tr><td>9</td><td>0</td></tr> <tr><td>10</td><td>1</td></tr> </tbody> </table> <p>5.4 What do you think the city could do better to achieve this priority?</p> <p>13 consultees responded</p> <p>Better regulate emergency accommodation. Improve the conditions with them and the individuals will have better outcomes. There is also still not enough emergency accommodation and affordable housing.</p> <hr/> <p>Increase what the council defines as "severe "</p> <hr/> <p>Mobile health centres and better mental health access and training.</p> <hr/> <p>More investment in joined up working with mental health services. A provision for dual-diagnosis clients who have both mental ill health and substance misuse problems.</p> <hr/> <p>Stop sleepers coming to town</p> <hr/> <p>Improve mental health services for rough sleepers and improve links to other MH services. Probably needs a complete review as</p>	Rating	Number of responses	1	2	2	0	3	3	4	1	5	8	6	7	7	3	8	4	9	0	10	1
Rating	Number of responses																						
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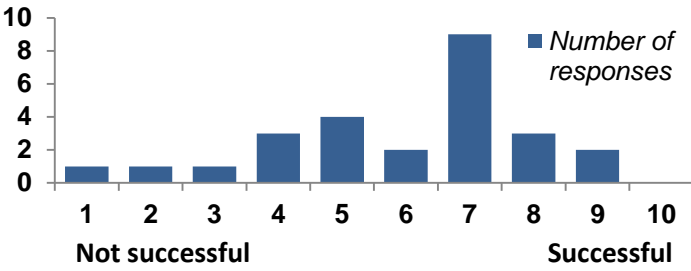
Theme	Feedback from respondents
	is based on a client meeting appointment etc. so not flexible.
	More volunteers with appropriate training
	House them in decent, modern, well equipped accommodation of a quality that any of us would live in ourselves and put a focus on ensuring neighbours and communities do not suffer. The impact of housing the homeless on the community is never addressed. It is as important as considering the impact of NOT housing people.
	Find out how they came to be on the streets and try to prevent. Their mental health issues must have been known before they became a street person.
	Get more healthcare workers out on the streets.
	Solve the crisis in primary care, as stated in papers mentioned above. There is an empty building behind Boundary Rd, which could be converted to a hostel for up to 4 residents.
	Organise and co-ordinate
	Recognise that abstinence-based residential alcohol and drug treatment is the intervention that is most likely to result in a sustained move from the streets for men and women with addictions, and consequentially promote such services and create an expectation that such interventions are to be actively promoted by staff in all services Ensure that there is no loss in the number of units in shared accommodation, not least for those under 35 years of age
	5.5 What changes would you like to make?
	11 consultees responded
	Better regulate emergency accommodation. Improve the conditions with them and the individuals will have better outcomes. There is also still not enough emergency accommodation and affordable housing.
	To work closely with a housing first idea.
	Mobile health centres and better mental health access and training.
	More programmes, more money to support these programmes
	A dual diagnosis service which allows people with mental health problems to access substance misuse services.
	More policing in London Road and New road with arrest for begging and drinking.
	Create greater awareness of the problem amongst the general public and look for help through voluntary action
	Stop using the outrageously priced temporary "B&B" accommodation to dump people in.
	Get more healthcare workers out on the streets.
	Teach people to be more aware, by commissioning more Mindfulness Based Cognitive Therapy (MBCT_) 8 week courses,. Solve the crisis in primary care, as stated in papers mentioned above. There is an empty building behind Boundary Rd which could be converted to a hostel for up to 4 residents.

Theme	Feedback from respondents												
	<p>License and list all helpers, make sure DBS certificates are explained so at least someone in each group is checked and is responsible, First aid courses should be available through council for free.</p> <hr/> <p>Recognise that abstinence-based residential alcohol and drug treatment is the intervention that is most likely to result in a sustained move from the streets for men and women with addictions, and consequentially promote such services and create an expectation that such interventions are to be actively promoted by staff in all services Ensure that there is no loss in the number of units in shared accommodation, not least for those under 35 years of age</p>												
<p>6. Safe Reconnection</p>	<p>6.1 Do you agree with the approach to this priority?</p> <div data-bbox="651 808 1165 1055" data-label="Figure"> <table border="1"> <caption>Survey Results for Question 6.1</caption> <thead> <tr> <th>Response</th> <th>Count</th> <th>Percentage</th> </tr> </thead> <tbody> <tr> <td>Yes</td> <td>25</td> <td>69%</td> </tr> <tr> <td>No</td> <td>6</td> <td>17%</td> </tr> <tr> <td>No response</td> <td>5</td> <td>14%</td> </tr> </tbody> </table> </div> <p>6.2 What do you think the city does well in its approach to this priority?</p> <p>8 consultees responded</p> <p>I am not sure that having a local connection is really the fairest way of prioritising need. It seems to me that people fleeing their families or abusive situations may just get sent back to those situations. Perhaps it would be better to look at someone's situation more holistically to determine their need, local connection could be one of those areas looked at, but so could health, are they victims of crime etc.</p> <hr/> <p>Recognising the dilemma between spending time and resources challenging a rough sleeper's bid to stay on the basis of a local connection or instead using the time and resources helping them access health and social care services.</p> <hr/> <p>As the numbers of sleepers seem to be growing, the answer is not much</p> <hr/> <p>Generally good reconnections</p> <hr/> <p>First Base</p> <p>Reconnection arrangements have worked well in recent years. Street outreach services have not only recently started, as stated above, but have been delivered by CRI for many years until the contract was won by St Mungo's Broadway. Such a fundamental change comes with risk, [comment deleted but passed to commissioner for review]. Such destabilisation of the market</p>	Response	Count	Percentage	Yes	25	69%	No	6	17%	No response	5	14%
Response	Count	Percentage											
Yes	25	69%											
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Theme	Feedback from respondents																						
	<p>erodes confidence of other providers and, inevitably, sets back working relationships. <i>[comment deleted but passed to commissioner for review]</i></p> <p>6.3 How successful do you think this approach will be? (On a scale of 1-10, 10 is best)</p>  <table border="1" data-bbox="558 627 1244 896"> <caption>Number of responses by rating</caption> <thead> <tr> <th>Rating</th> <th>Number of responses</th> </tr> </thead> <tbody> <tr><td>1</td><td>2</td></tr> <tr><td>2</td><td>0</td></tr> <tr><td>3</td><td>1</td></tr> <tr><td>4</td><td>3</td></tr> <tr><td>5</td><td>6</td></tr> <tr><td>6</td><td>6</td></tr> <tr><td>7</td><td>5</td></tr> <tr><td>8</td><td>2</td></tr> <tr><td>9</td><td>0</td></tr> <tr><td>10</td><td>1</td></tr> </tbody> </table> <p>1.4 What do you think the city could do better to achieve this priority?</p> <p>13 consultees responded</p> <p>People from outside the area should get less help, except in cases where they are fleeing abuse, for example.</p> <hr/> <p>I am not sure that having a local connection is really the fairest way of prioritising need. It seems to me that people fleeing their families or abusive situations may just get sent back to those situations. Perhaps it would be better to look at someone's situation more holistically to determine their need, local connection could be one of those areas looked at, but so could health, are they victims of crime etc.</p> <hr/> <p>Letting third sector agencies know about what is happening, why haven't Emmaus Brighton & Hove been given any knowledge of these services.</p> <hr/> <p>If rough sleepers have access to the services they need in Brighton they may also feel better able to search for accommodation and possible employment in an area better known to them.</p> <hr/> <p>A respect for the knowledge and expertise of the current service providers. This local knowledge is invaluable to providing needed services in the city.</p> <hr/> <p>Send people who are not local back to where they come from. Brighton is the UK holiday camp for rough sleepers... just ask First Base.</p> <hr/> <p>As the numbers of sleepers seem to be growing, the answer is not much</p> <hr/> <p>Sign up across all agencies, plan reconnections well.</p> <hr/> <p>Lobby for continued funding for SHORE</p>	Rating	Number of responses	1	2	2	0	3	1	4	3	5	6	6	6	7	5	8	2	9	0	10	1
Rating	Number of responses																						
1	2																						
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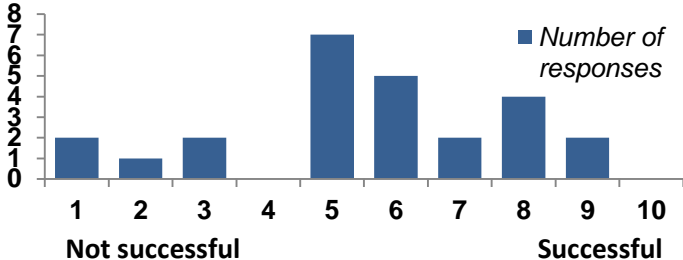
Theme	Feedback from respondents
	<p>Most have a reason to have left a safe 'world' - so why should they go back...</p> <hr/> <p>Family breakdown is the cause of most homelessness. MBCT courses help this.</p> <hr/> <p>Suggesting we move these people back to their "routes" will not work, most are running from their past any suggestion to return them will not work, this is a massive task that has been brought about by many social reasons B&H must step up and it is worth noting many of the rough sleepers go on to become workers and assets to the city, we cannot claim comparison unless we show it to all.</p> <hr/> <p><i>[comment deleted but passed to commissioner for review]</i></p> <p>Fortunately, the staff who were TUPE'd to the new provider have good working relationships on the front line. Other services, particularly First Base Day Centre, need to be supported to retain the confidence of the parent organisations regarding their role in delivery, and to remain financially viable.</p> <p>6.5 What changes would you like to make?</p> <p>8 consultees responded</p> <p>I am not sure that having a local connection is really the fairest way of prioritising need. It seems to me that people fleeing their families or abusive situations may just get sent back to those situations. Perhaps it would be better to look at someone's situation more holistically to determine their need, local connection could be one of those areas looked at, but so could health, are they victims of crime etc.</p> <hr/> <p>Better communication from Brighton Council would be a good start.</p> <hr/> <p>Decisions to be made by experts in the field who know the needs of the city.</p> <hr/> <p>Move them on to home towns and if returned sent to prison, then the prison service can hopefully sort out health issues</p> <hr/> <p>More Money :)</p> <hr/> <p>Teach people to be more aware, by commissioning more Mindfulness Based Cognitive Therapy (MBCT_) 8 week courses,</p> <p>Think out the box, get some meetings going with people who have lived rough and got out of it, as well as have worked with rough sleepers.</p> <hr/> <p><i>[comment deleted but passed to commissioner for review]</i></p> <p>Fortunately, the staff who were TUPE'd to the new provider have good working relationships on the front line. Other services, particularly First Base Day Centre, need to be supported to retain the confidence of the parent organisations regarding their role in delivery, and to remain financially viable.</p>
<p>7. Pathways to Independence</p>	<p>7.1 Do you agree with the approach to this priority?</p>

Theme	Feedback from respondents												
	<div data-bbox="638 324 1165 582" data-label="Figure"> <table border="1"> <caption>Survey Results</caption> <thead> <tr> <th>Response</th> <th>Count</th> <th>Percentage</th> </tr> </thead> <tbody> <tr> <td>Yes</td> <td>28</td> <td>78%</td> </tr> <tr> <td>No</td> <td>5</td> <td>14%</td> </tr> <tr> <td>No response</td> <td>3</td> <td>8%</td> </tr> </tbody> </table> </div> <div data-bbox="523 660 1356 739" data-label="Section-Header"> <p>7.2 What do you think the city does well in its approach to this priority?</p> </div> <div data-bbox="523 784 861 824" data-label="Text"> <p>12 consultees responded</p> </div> <div data-bbox="534 828 1276 869" data-label="Text"> <p>It at least recognises the need for more accommodation</p> </div> <div data-bbox="534 869 1356 1108" data-label="Text"> <p>Many people on the street have had successful careers in the army and a range of private business, a few people will have literacy problems but not the majority. Until the issues behind homelessness are dealt with it will be hard to effectively train people, people need to be ready to learn which means fundamental issues such as housing, good sleep, good food, reasonable clean living, all these need to be in place first.</p> </div> <div data-bbox="534 1108 798 1146" data-label="Text"> <p>Housing first model</p> </div> <div data-bbox="534 1146 1404 1415" data-label="Text"> <p>Again you are spending money on people who have made no contribution to the city , kicking out old resident's to house drunks and beggar's now you talk of kicking out OAP who may well have lived whole life in Brighton so that YOU can house drunks and drug users "under-occupy their homes particularly a growing older population". what about the 23,000 on the waiting list "renovate a former health services building" you could use this for local housing</p> </div> <div data-bbox="534 1415 1173 1456" data-label="Text"> <p>Good basic skills, Step by Step - Friends Centre</p> </div> <div data-bbox="534 1456 1085 1496" data-label="Text"> <p>The new supported housing sounds good</p> </div> <div data-bbox="534 1496 885 1536" data-label="Text"> <p>Education and prevention.</p> </div> <div data-bbox="534 1536 718 1576" data-label="Text"> <p>Housing First</p> </div> <div data-bbox="534 1576 1212 1617" data-label="Text"> <p>This is good proving it is more than just PC words...</p> </div> <div data-bbox="534 1617 758 1657" data-label="Text"> <p>Many resources</p> </div> <div data-bbox="534 1657 1404 2031" data-label="Text"> <p>The Integrated Support Pathway, while in need of updating, has been a successful model. The peer support model that existed through Peer2Peer was effective and cost efficient, but was decommissioned during 2014, losing infrastructure and expertise. It is a shame that there is no mention of the range of remaining peer support models in the City, with reference only to models in other areas of the country which suggests either a lack of knowledge or local models having been pre-judged to be ineffective. The current range of self-contained and shared accommodation provides a range of appropriate accommodation and a flexible support pathway, including in services for men and</p> </div>	Response	Count	Percentage	Yes	28	78%	No	5	14%	No response	3	8%
Response	Count	Percentage											
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Theme	Feedback from respondents																						
	<p>women with mental health problems and with addictions.</p> <hr/> <p>Very little - lots of money going into seemingly well-meant activities, instead of into buying City-owned bricks-and-mortar!</p> <p>7.3 How successful do you think this approach will be? (On a scale of 1-10, 10 is best)</p>  <table border="1" data-bbox="550 604 1244 873"> <caption>Number of responses by rating</caption> <thead> <tr> <th>Rating</th> <th>Number of responses</th> </tr> </thead> <tbody> <tr><td>1</td><td>1</td></tr> <tr><td>2</td><td>1</td></tr> <tr><td>3</td><td>1</td></tr> <tr><td>4</td><td>3</td></tr> <tr><td>5</td><td>4</td></tr> <tr><td>6</td><td>2</td></tr> <tr><td>7</td><td>9</td></tr> <tr><td>8</td><td>3</td></tr> <tr><td>9</td><td>2</td></tr> <tr><td>10</td><td>0</td></tr> </tbody> </table> <p>7.4 What do you think the city could do better to achieve this priority?</p> <p>15 consultees responded</p> <p>More accommodation</p> <hr/> <p>I feel that we need more innovation to tackle this issue. The Big Issue was so successful because it enabled the public to support people in need directly. We need more initiatives that give the public opportunities to provide direct support, rather than simply donating to a charity. The council could provide seed funding for a local initiative that crowd sources donations in a similar fashion to Handup.org in San Francisco. It could also provide seed funding for an initiative to provide smart cards to homeless charities to give to their service users - enabling local people and businesses to donate money for food directly to people in need.</p> <hr/> <p>More partnerships with local employers to provide jobs to homeless people. Work so important. Provides more than just a wage packet</p> <hr/> <p>Deal with the fundamental issues first. See this as the final stage.</p> <hr/> <p>Looking at various types of accommodation that can be made available to former rough sleepers who no longer need hostel accommodation to move into. More homes to be built for older people who wish to downsize, making larger houses available.</p> <hr/> <p>Better allocation of housing through using the expertise of hostel managers to decide on best placements for clients. Listening to the needs of the city from people managing services. Is there a need for women only accommodation- this model has been tested within current service provision and there has been no demand for this</p> <hr/> <p>More work in hostels to develop skills, develop activities, links to</p>	Rating	Number of responses	1	1	2	1	3	1	4	3	5	4	6	2	7	9	8	3	9	2	10	0
Rating	Number of responses																						
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Theme	Feedback from respondents
	community resources
	Seek out more under utilised buildings
	If problems are multiple and so entrenched then perhaps better they are housed outside the city
	Stop using grim temporary B&B accommodation and paying private landlords ridiculous amounts of money for accommodation that none of us would live in.
	Since having a floating support worker assigned to me I feel I have very little support and can not see how I will progress from my present accommodation. So while this approach may look good on paper the actual effect on the client base is patchy. To improve the service I think some monitoring is needed with feed back from us on the receiving end. A lot of my issues with all the proposals. Appears more how you want to control a problem and not about helping individuals deal with the issues in their life.
	What about paying them a bit for some basic community work? Or even a free bed for the night and an evening meal if they go and do a days work helping one of the council outdoor depts.
	Homeless people need employment. My company <i>[name deleted]</i> have been providing this for the last 3 years. We have asked for the support of the council and CCG, but in vain to date
	Think out the box with regards to temp housing, mobile homes, caravans and even tents on approved sites or spaces. I have given 300 rucksacks, 200 sleeping bags, 30 tents and even a caravan in the past 3 years.
	Stabilise the supplier market, recognise the effectiveness of current provision, and validate existing models of working in the City. Ensure that there is no loss in the number of units in shared accommodation, not least for those under 35 years of age. Fully appraise the implications of the Autumn Statement on the rent cap in social housing, especially specialist support services, before any further changes are made to current provision (including contracts that are currently out to tender)
	7.5 What changes would you like to make?
	10 consultees responded
	More accommodation
	Small grants (£500 to £5,000) to support new initiatives that provide decentralised solutions - linking people in need with people and businesses who want to make a positive difference.
	A needs based approach to commissioning services which is informed by those who know the city best.
	DO NOT involve private landlords who provide overpriced grotty temporary "B&B" accommodation.
	<i>[comment deleted]</i>
	Flexible personalised services, recognising some people need support longer term
	Stop using grim temporary B&B accommodation and paying private landlords ridiculous amounts of money for accommodation

Theme	Feedback from respondents												
	<p>hat none of us would live in.</p> <hr/> <p>Cooperate with the third sector. Teach people to be more aware, by commissioning more Mindfulness Based Cognitive Therapy (MBCT) 8 week courses,</p> <hr/> <p>Meetings to discuss all this</p> <hr/> <p>Stabilise the supplier market, recognise the effectiveness of current provision, and validate existing models of working in the City. Ensure that there is no loss in the number of units in shared accommodation, not least for those under 35 years of age. Fully appraise the implications of the Autumn Statement on the rent cap in social housing, especially specialist support services, before any further changes are made to current provision (including contracts that are currently out to tender)</p>												
<p>8. Working with the City</p>	<p>8.1 Do you agree with the approach to this priority?</p> <div data-bbox="638 873 1165 1120"> <table border="1"> <caption>Survey Results for Question 8.1</caption> <thead> <tr> <th>Response</th> <th>Count</th> <th>Percentage</th> </tr> </thead> <tbody> <tr> <td>Yes</td> <td>25</td> <td>70%</td> </tr> <tr> <td>No</td> <td>3</td> <td>8%</td> </tr> <tr> <td>No response</td> <td>8</td> <td>22%</td> </tr> </tbody> </table> </div> <p>8.2 What do you think the city does well in its approach to this priority?</p> <p>10 consultees responded</p> <hr/> <p>The app is great</p> <hr/> <p>Street link sounds like a good idea.</p> <hr/> <p>Involving residents who wish to help rough sleepers in planning and implementation.</p> <hr/> <p>[comment deleted]</p> <hr/> <p>Not done this well until the winter campaign</p> <hr/> <p>StreetLink sounds good</p> <hr/> <p>Yes education is vital if the council is to get the support of the local population. People think that giving beggars money is doing a good deed. More needs to be done to stop people giving money to steer beggars</p> <hr/> <p>Developing an on-going strategy. Contact phone number(s) for support. Coordinated approach between the different agencies and groups within the City.</p> <hr/> <p>Loads of assets and kind people.</p> <hr/> <p>The public are generous in its support for local homelessness organisations. [rest of comment is incorrect and inflammatory so has been deleted]</p>	Response	Count	Percentage	Yes	25	70%	No	3	8%	No response	8	22%
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	<p data-bbox="523 324 1393 405">8.3 How successful do you think this approach will be? (On a scale of 1-10, 10 is best)</p>  <table border="1" data-bbox="560 499 1246 757"> <caption>Number of responses by rating</caption> <thead> <tr> <th>Rating</th> <th>Number of responses</th> </tr> </thead> <tbody> <tr><td>1</td><td>2</td></tr> <tr><td>2</td><td>1</td></tr> <tr><td>3</td><td>2</td></tr> <tr><td>4</td><td>0</td></tr> <tr><td>5</td><td>7</td></tr> <tr><td>6</td><td>5</td></tr> <tr><td>7</td><td>2</td></tr> <tr><td>8</td><td>4</td></tr> <tr><td>9</td><td>2</td></tr> <tr><td>10</td><td>0</td></tr> </tbody> </table> <p data-bbox="523 831 1393 911">8.4 What do you think the city could do better to achieve this priority?</p> <p data-bbox="523 960 858 992">11 consultees responded</p> <p data-bbox="539 999 1393 1099">Better promotion of the app and there is a risk that this will make all rough sleepers 'professional beggars' in the eyes of the public. The wording of the advertising needs to be carefully thought out.</p> <hr/> <p data-bbox="539 1108 1053 1140">Letting people know about these things</p> <hr/> <p data-bbox="539 1149 1276 1180">Clear all the blankets and bags from the street. Litter act</p> <hr/> <p data-bbox="539 1189 1356 1249">Clarify what activities help rough sleepers and those that don't. Donations for local campaigns.</p> <hr/> <p data-bbox="539 1258 1332 1290">More publicity link with the local press to get the story across</p> <hr/> <p data-bbox="539 1299 1061 1330">Stop talking and act to stop the begging</p> <hr/> <p data-bbox="539 1339 1380 1469">Constructive and meaningful dialogue ... ACTION is needed. Enough of the wishy washy stuff. Put roofs over people's heads, get them mental health care and get them working. Hard work is what people need to do to help themselves.</p> <hr/> <p data-bbox="539 1478 1204 1509">Just PC - needs something that is more real world.</p> <hr/> <p data-bbox="539 1518 1404 1579">More publicity. Tell the general public how they can help and what doesn't help.</p> <hr/> <p data-bbox="539 1588 1396 1850">Again more registration, organisation, and meetings to discuss assets and help each other. I see the begging every day and I know many are not rough sleepers at all, but I also see rough sleepers not thinking about begging so the balance seems wrong, I also know many beg to pay for hostels and in summer those hostels are expensive, I would like to see a breakdown of room costs and transparency in this, I have heard from homeless they are paying 25 a night for a room with 4 people in it..</p> <hr/> <p data-bbox="539 1859 1396 2018">The City Council should recognise that, notwithstanding a recent improvement in its standing with the public (in all areas of activity, not just homelessness), it enjoys comparatively low levels of confidence compared to charities and community-based organisations. The Council should do more to validate the role</p>	Rating	Number of responses	1	2	2	1	3	2	4	0	5	7	6	5	7	2	8	4	9	2	10	0
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	<p>played by charities and other community groups. It should ensure that locally-based organisations are supported, not least because of the added value they bring by their local infrastructures, local knowledge, long-term commitment to the area, and established relationships</p> <p>8.5 What changes would you like to make?</p> <p>10 consultees responded</p> <p>Better promotion of the app and there is a risk that this will make all rough sleepers 'professional beggars' in the eyes of the public. The wording of the advertising needs to be carefully thought out.</p> <hr/> <p>Better communication from Brighton Council about these services.</p> <hr/> <p>Street Link is not effective - the money spent on developing the app needs to be redirected into emergency response. What's the point of "reporting" a rough sleeper if there is no-one to help to help them and no shelter for them to spend the night?</p> <hr/> <p>All sleepers moved on</p> <hr/> <p>Make begging illegal - enforce the bye laws and make it apply to the public - like buying alcohol or cigarettes to minors</p> <hr/> <p>Include an element of mandatory work.</p> <hr/> <p>I support a more active drive against begging as there is no need for it. Apart for weekends food is available and you do not need to go hungry. A awareness campaign discouraging people giving money to beggars should be carried out and perhaps a phone app could be set up where donations could be made to somewhere like First-base for food vouchers and clothing. This would make more people interact with services and I know for a fact some of the street beggars are in accommodation and beg to feed there drug habit.</p> <hr/> <p>Teach people to be more aware, by commissioning more Mindfulness Based Cognitive Therapy (MBCT) 8 week courses, Transparency and organisation, Brighton people are caring and considerate, they should be allowed to help with this issue we all face and they will. I have heard of people with spare rooms wanting to offer them to rough sleepers but have no way of knowing how to do this safely.</p> <hr/> <p>The City Council should recognise that, notwithstanding a recent improvement in its standing with the public (in all areas of activity, not just homelessness), it enjoys comparatively low levels of confidence compared to charities and community-based organisations. The Council should do more to validate the role played by charities and other community groups. It should ensure that locally-based organisations are supported, not least because of the added value they bring by their local infrastructures, local knowledge, long-term commitment to the area, and established relationships</p>
9. Final Thoughts	9.1 Now you have read the proposals, how successful overall

Theme	Feedback from respondents																						
	<p data-bbox="523 282 1393 360"><i>do you think the city's strategy, priorities and approach will be? (On a scale of 1-10, 10 is best)</i></p> <div data-bbox="547 450 1246 719"> <table border="1"> <caption>Number of responses by rating</caption> <thead> <tr> <th>Rating</th> <th>Number of responses</th> </tr> </thead> <tbody> <tr><td>1</td><td>2</td></tr> <tr><td>2</td><td>0</td></tr> <tr><td>3</td><td>4</td></tr> <tr><td>4</td><td>3</td></tr> <tr><td>5</td><td>11</td></tr> <tr><td>6</td><td>5</td></tr> <tr><td>7</td><td>5</td></tr> <tr><td>8</td><td>3</td></tr> <tr><td>9</td><td>0</td></tr> <tr><td>10</td><td>0</td></tr> </tbody> </table> </div> <p data-bbox="523 786 1382 909">9.2 Is there anything else you would like to tell us about the city's approach to make sure no-one has the need to sleep rough in Brighton & Hove by 2020?</p> <p data-bbox="523 958 858 992">25 consultees responded</p> <p data-bbox="536 996 1394 1164">I think each time this questionnaire said what do we do well, I couldn't answer! I have lived here over 10 years and there are more people sleeping rough than ever! Clearly there is a need for change, but when services everywhere are being cut I don't see how you will be able to deal with this crisis!</p> <hr/> <p data-bbox="536 1171 1080 1205">Build more affordable accommodation!!!!</p> <hr/> <p data-bbox="536 1209 1394 1341">A focus on helping people in need manage their money. For instance someone wishing to spend less money on alcohol and budget £5 a day for food could have a smart card that has a daily limit of £5 - that can only be spent on food.</p> <hr/> <p data-bbox="536 1346 1386 1478">More awareness raising campaigns. So often people get used to seeing homeless people sleeping in doorways. The council can help raise awareness and involve the people of Brighton and campaign groups, residents associations.</p> <hr/> <p data-bbox="536 1482 1340 1547">Hope it is successful. Also hope that if not it is not 'spun' as a success as often happens</p> <hr/> <p data-bbox="536 1552 1399 1883">We at Emmaus Brighton & Hove are one of 26 Communities in the Country with an ethos of self funding, no state benefits and giving the homeless a place to work and a home. Why were we not included in your Summit in December. Bad communication from Brighton Council, if you want your plan to succeed, perhaps more open and inclusive communication between the people who work with the homeless would work better (that's Emmaus) as we work with Project Antifreeze, Probation, Prisons, and many other agencies in the city. I am deeply disappointed we have been ignored.</p> <hr/> <p data-bbox="536 1888 1399 2020">I think get the public and the homeless really involved at the early stages so you can tackle the problem coming from a place of real understanding. I admire the ambition but it needs to be implemented with compassion otherwise it is destined to fail. All</p>	Rating	Number of responses	1	2	2	0	3	4	4	3	5	11	6	5	7	5	8	3	9	0	10	0
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<i>Theme</i>	<i>Feedback from respondents</i>
	<p>you will do is move the misery on.</p> <hr/> <p>1. Every homeless person is vulnerable and should therefore be considered in priority need, including those in temporary accommodation. 2. The Housing First model should be expanded to offer housing to all of the city's homeless people, offering adequate support to suit each individual's needs. 3. The Severe Weather Emergency Protocol (SWEP) should be activated immediately, in any weather which threatens rough sleepers' health, particularly the wet. 4. The council should activate the Extended Winter Provision of the Severe Weather Emergency Protocol immediately. The emergency shelters should be opened every night, over the winter and beyond. 5. Affordable social rents should be imposed on private landlords and property investors, prioritising the provision of permanent homes until everyone is securely housed. 6. Reform the LASPO act, to make squatting empty properties safe and equitable for property owners and otherwise homeless people. 7. Because of the so-called 'first mover loses' phenomenon, it will be necessary for local authorities around the country to work together, in order to implement these measures nationally.</p> <hr/> <p>Plans seem comprehensive.</p> <hr/> <p>There needs to be a provision of suitable supported accommodation to ensure adults with complex and multiple needs have access to support services and a chance to make positive changes. Cutting hostel provision will increase rough sleeping.</p> <hr/> <p>Deal with people who are not from the area and chose to come here because it is one of the best places in the country for rough sleepers... some come here for holidays in the Summer. Provide good quality, supervised, modern, decent temporary accommodation to be the stop gap until permanent accommodations can be found. No more using the dreadful "B&B"s that cost the city so much money and are almost dehumanising they are so awful.</p> <hr/> <p>Some people like sleeping on the street</p> <hr/> <p>I believe nowadays that best practice sharing between cities, experts and specialists is the best way to bring knowledge. Is anyone doing a PHd in this field as research to look at what other cities undertake?</p> <hr/> <p>Without accommodation and resources, which include no more cuts to existing resources, this approach won't work for the entrenched long term complex rough sleepers, who will always need a longer time to engage and a personalised support plan. Also without joint working with all services, including Housing, ASC, SOS, this group will keep getting passed between services unless there is proper sign up, that everyone plays a part to get people off the street. See MEAM as a good approach, and Lankelly Chase research on system change.</p> <hr/> <p>I wish the initiative well but I fear that success might just make the town a more attractive place</p> <hr/> <p>If you can't build more houses, you need to limit the size of the population. -Prevent teens from becoming parents, especially</p>

Theme	Feedback from respondents
	<p>unintentionally. People who become parents early in life tend to end up having larger families. People who have their first child in their 30s tend to have smaller families and this means that A) the parents are likely to have a more stable situation compared to 16-year-olds who get pregnant unintentionally, and B) the smaller family has a smaller housing requirement. Encourage families to restrict their family to 2 kids or less. 5 kids means 5 kids who will grow up and require housing of their own. -Make adoption a viable and ethical choice for infertile people, gay or straight. Get rid of the taboo of choosing adoption over hormonal fertility intervention or artificial insemination. -Talk openly about contraceptives, adoption and sterilisation options in schools, GP surgeries, on TV etc. Offer FREE vasectomies to any male over the age of 18 who doesn't want kids. It's a relatively safe and minor procedure and society will benefit in the form of fewer unwanted children. For the council, this means less demand on the housing stock among other things.</p>
	<p>If the objective to prevent the problem then stop trying to empathise and take a firmer approach - and also sort the drug dealers!</p>
	<p>Too much washy washy talk and not enough concrete actions. PSH is a hindrance, not a help. Private landlords who provide grim, temporary "B&B" accommodation are part of the problem, not part of the solution.</p>
	<p>Good Luck, no money to spend on the issue you are going to need it</p>
	<p>Enforcement and hostels away from city centre</p>
	<p>Well done so far and keep at it! <i>[name deleted but passed to commissioners]</i> will aim to work/coordinate with you and the other agencies to 1. ensure the safety of the people using our church appropriately 2. help those in the street community 3. prevent reputational damage to businesses and the church</p>
	<p>Hold a public meeting for providers of services to rough sleepers</p>
	<p>Think out the box, I slept on the beach, then into a hostel and onto better things, I do not think I could do it as easy today as I did it 35 years ago. I run the <i>[name deleted but passed to commissioners]</i> look on Facebook, I also work in Portslade Foodbank and kitchen and move tons of food round Brighton every week from a number of sources to a number of projects.</p>
	<p>Over the past ten years we have had a very stable range of services, incredible co-operation between partners, notwithstanding competitive tendering, and we have managed to contain the number of rough sleepers. Without this partnership we would have 300 or 400 people sleeping rough today. Earlier this year BHT published a 'call to arms', to ensure that by 2020 no one would have to sleep rough in Brighton and Hove. The ambition in the Council's strategy echoes that, and it is something I warmly welcome. A year ago I really believed that the 2020 ambition could be achieved. If I was responding to the consultation a year ago it would have been a very different response, focusing as I would have on innovation and good practice, ideas that would</p>

<i>Theme</i>	<i>Feedback from respondents</i>
	<p>inspire, and opportunities that we had. But over the last year various decisions have been made, locally and nationally, which will impact on pathways to independence, and I question now whether the 2020 ambition is realistic. The decision over the summer to change provider for the street outreach service, welcoming St Mungos Broadway into the City, was a brave one, not least following on an earlier decision to change providers in substance misuse services by bringing in another organisation also without a base, or established relationships, or knowledge of the situation locally. I have long been an admirer of St Mungos Broadway but I am still waiting to hear from them about their plans for Brighton and Hove, how they will achieve the 20% reduction in rough sleeping year on year, and what progress has been made to date. I appreciate it takes time to settle into a new contract in a new town, but time is not a luxury we have when faced with the crisis in rough sleeping that we have. But it is not just down to St Mungos. I think it is important that we all ask how we can support St Mungos to achieve the great challenge they have committed themselves to. It is in everyone's interest that they succeed, not least the men and women who are sleeping rough on the streets of our City. We need to challenge politicians to do their bit in what is very challenging times. I feel there is a danger that this strategy is being developed in a vacuum. Lots is going on around us that will impact on our collective ability to deliver the ambition. Decisions being made at a national level make our task harder. For example, the announcement in the Autumn Statement to cap from April 2018 all rents in social housing at Local Housing Allowance levels will make unaffordable much accommodation in the City, including the new homelessness project being proposed by the City Council together with many hostels, rehabilitation services, and mental health projects, particularly for those under the age of 35. From April 2018, the exemptions that are currently applied to much supported accommodation will no longer apply to anyone moving into those services after April 2016 unless the government changes its stated policy. This will apply to the very services that are central to moving people off the streets and which provide pathways to independence. BHT's own review found that from April 2018 there will be affordability issues for those under 35 in 70% of our 404 bed spaces in Brighton and Hove. For those over 35, there will be affordability issues in 47% of our accommodation - and we offer amongst the most affordable accommodation in the City. I hope the City Council will consider how to use its commissioning function address this affordability issue in the very services that provide pathways to independence. There is some uncertainty over the future of some of the accommodation that is affordable, not least shared accommodation. If, for example, the City Council does not commission a substantial quantity of shared housing in the mental health tender that is currently out, we might as well give up any pretence of wishing to tackle rough sleeping for those under 35. Wrap around services such as those provided in shared accommodation can and do offer an appropriate environment for</p>

Theme	Feedback from respondents
	<p>some, and for those under 35, from 2018, there will be nothing else that they will be able to access. The contribution of the third sector should not be underestimated. Rather than the £1 million quoted in the Position Statement document, BHT alone levers in over £4.5 million into the city, and that does not include the value of volunteering, peer support and client involvement. My hope is that the City Council, at all levels, particularly those preparing tender specifications, is to return to the partnership approach that until a year ago characterised the relationship between us. Without us, the providers, particularly colleagues who know and understand the client groups and who have a successful record in delivering change, any hope of retaining pathways to independence will be lost, and once lost we won't be able to get them back. There are some excellent examples of commissioning but it feels as though commissioning is, at times, being done in a vacuum without appreciating the consequences on the ambitions of politicians. If politicians don't get their way, if commissioners get it wrong, and if St Mungos does not manage to deliver the 20% year on year reduction it is being funded to achieve, this Rough Sleeping Strategy will be little more than of academic interest. In practical terms, our time would be much better spent discussing how we will support 300 or 400 men and women on the streets, how their health needs can be met, how they will be fed, what happens in extreme weather. I don't want that future. It is the opposite of what I have worked and campaigned for 30 years. I hope we will return to the local spirit of partnership that we have had. We can still achieve the 2020 ambition and those rough sleeping can move off the streets and into housing, training, work experience and employment. Let's not lose our ambition.</p> <hr/> <p>I think the fine detail and implications of my responses above, when considered by BHCC with an open mind, and then adequately implemented, constitute a sufficient approach to this (albeit with the caveat made above that there first has to be a clear definition provided by BHCC of who exactly falls into the category of ".. no-one ..").</p>

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Brighton & Hove
City Council

Equality Impact and Outcome Assessment (EIA) Template - 2015

EIAs make services better for everyone and support value for money by getting services right first time.

EIAs enable us to consider all the information about a service, policy or strategy from an equalities perspective and then action plan to get the best outcomes for staff and service-users¹. They analyse how all our work as a council might impact differently on different groups². They help us make good decisions and evidence how we have reached these decisions³.

See end notes for full guidance. Either hover the mouse over the end note link (eg: Age¹³) or use the hyperlinks ('Ctrl' key and left click).

For further support or advice please contact the Communities, Equality and Third Sector Team on ext 2301.

1. Equality Impact and Outcomes Assessment (EIA) Template

First, consider whether you need to complete an EIA, or if there is another way to evidence assessment of impacts, or that an EIA is not needed⁴.

Title of EIA⁵	Brighton & Hove Rough Sleeping Strategy 2016	ID No.⁶	HS66
Team/Department⁷	Housing Strategy Team, Environment, Development & Housing		
Focus of EIA⁸	<p>The issue of people sleeping rough has become more acute with a visibly increased presence on the streets. This not only impacts on the individual's life chances, but also the city's reputation and costs to public services and business.</p> <p>The city's current approach to rough sleeping is being re-assessed in partnership with stakeholders including commissioners, service providers, advocates and using research with those who are sleeping rough or have previously slept rough, to develop this strategic plan which shows how we can come together as a city to improve lives.</p> <p>The Brighton & Hove Rough Sleeping Strategy details the approach to making sure that no-one has the need to sleep rough in Brighton & Hove by 2020.</p> <p>It has being developed in phases to give stakeholders opportunity to help shape the city's priorities and future action:</p> <ul style="list-style-type: none"> • Position Statement was published in November 2015 and summarised the city's current approach 		

to rough sleeping. The Paper was used as the basis for consultation in December 2015.

- Stakeholder Summit (December 2015) and additional consultation: this brought together a range of stakeholders to review the city's approach to rough sleeping.
- Rough Sleeping Strategy 2016 which built on the Position Paper and options developed in the summit (additional consultation will take place on the draft strategy)
- Implementation 2016/17: Delivers the city's strategy and remodelling or redesigning services where necessary.

The strategy is not just about those living and sleeping on the city's streets but all those, predominantly single people, who are homeless where there is not likely to be a statutory housing responsibility. For the purposes of the strategy, we will be defining people sleeping rough as:

- Those sleeping rough within Brighton & Hove
- Squatters who were previously or are at risk of sleeping rough
- Sofa surfers who were previously or are at risk of sleeping rough
- Those living in motor vehicles (not including Travellers)
- Those living in tents (not including campers, protesters or Travellers)

As the prevention agenda and supported accommodation are an important part of the pathway to preventing and minimising rough sleeping, the city's strategy also covers those considered to be at risk of rough sleeping and those currently supported in hostels who were previously sleeping rough.

We have considered the measures to prevent people sleeping rough, services provided to support people on the streets and approaches to help people move on from rough sleeping in a sustained way that will reduce rough sleeping in the city and improve outcomes for those at risk or sleeping rough.

If the city does not reduce rough sleeping there will be:

- More health problems and early deaths
- More suffering and hardship
- Crisis pressure on the Police, hospital accident and emergency and other services
- Crime and anti-social behaviour associated with rough sleeping and street drinking
- Increased costs to the local authority, Police and NHS
- Reputation damage as a caring city
- Tourism impact from street begging

Update on previous EIA and outcomes of previous actions

What actions did you plan last time? (List them from the previous EIA)	What improved as a result? What outcomes have these actions achieved?	What <u>further</u> actions do you need to take? (add these to the Action plan below)
No previous EIA as this is a new strategy		

2. Impacts Identified in this Assessment

Protected characteristics groups from the Equality Act 2010	What do you know⁹? Summary of data about your service-users and/or staff	What do people tell you¹⁰? Summary of service-user and/or staff feedback	What does this mean¹¹? Impacts identified from data and feedback (actual and potential)	What can you do¹²? All potential actions to: <ul style="list-style-type: none"> • advance equality of opportunity, • eliminate discrimination, and • foster good relations
Age¹³	The 2014/15 Rough Sleeper Annual Report recorded 1,129 cases of rough sleeping (involving 775 people). Of these 12% (136 cases) were aged 17-25; 7% (83 cases) were over 55. The majority of people sleeping rough are aged between 25 and 49 years old and this has not changed over the years ¹ .	Lack of accommodation across all tenures, with younger people encountering more barriers to finding housing e.g. landlords not wanting under 25's, affordability etc. Young people choosing to sleep rough rather than use youth hostels because the environment is chaotic and also not	Having no local connection is a barrier to accessing help and support for people sleeping rough across all age groups Need to work to help people to reconnect, where it is appropriate e.g. family mediation Lack of accommodation	Deliver new supported scheme for older people with complex needs Provide each person with their own Multi-Agency Plan that will outline who is responsible for co-ordinating their care, which services are working with them and the support available. Continue to develop the

¹ Rough Sleeper Annual Report and the Rough Sleeper & Single Needs Assessment 2014

Protected characteristics groups from the Equality Act 2010	What do you know ⁹ ? Summary of data about your service-users and/or staff	What do people tell you ¹⁰ ? Summary of service-user and/or staff feedback	What does this mean ¹¹ ? Impacts identified from data and feedback (actual and potential)	What can you do ¹² ? All potential actions to: • advance equality of opportunity, • eliminate discrimination, and • foster good relations
	<p>There is a group of older people in supported accommodation who used to sleep rough who would benefit from more tailored accommodation suitable to their needs.</p> <p>The average age of death for a homeless person nationally is estimated to be 47 years old compared to 77 for the general population</p> <p>Nationally, it is estimated that the use of inpatient hospital care by people who are sleeping rough or living in insecure accommodation (such as hostels) is eight times higher than in the general population aged 16-64</p>	<p>engage with services and therefore putting themselves at more risk</p> <p>Parental eviction and having no local connection are issues for young people Young people are more likely to be amongst the hidden homeless – living in squats</p> <p>Need to actively encourage the retention and increase in shared accommodation, particularly for men and women under 35</p> <p>There is cohort of older people sleeping rough with health issues</p>	<p>and support for younger people</p> <p>Lack of accommodation and support for older people</p>	<p>Young People's Accommodation and Support Pathway</p> <p>Ensure Care Act assessments are carried out for older and frail people sleeping rough</p> <p>Commission Housing First accommodation with units for young people</p>
Disability¹⁴	<p>Brighton & Hove Homeless Health Needs Audit 2014 reported that 84% of people sleeping rough had at least one physical health issue.</p> <p>The Brighton & Hove</p>	<p>A high percentage of homelessness can be linked to mental health disorders</p> <p>There are examples good practice and joint working between the different</p>	<p>Housing, health and social care need to work together to provide a holistic approach to improving people's health and wellbeing</p> <p>Health service reports</p>	<p>Allow flexibility for those with complex needs when making nominations to supported accommodation</p> <p>Develop integrated joint assessments and support</p>

Protected characteristics groups from the Equality Act 2010	What do you know⁹? Summary of data about your service-users and/or staff	What do people tell you¹⁰? Summary of service-user and/or staff feedback	What does this mean¹¹? Impacts identified from data and feedback (actual and potential)	What can you do¹²? All potential actions to: <ul style="list-style-type: none"> • advance equality of opportunity, • eliminate discrimination, and • foster good relations
	<p>Better Care Plan has highlighted that many people face multiple disadvantages, including mental and physical health issues, drug and alcohol misuse and experience of violence and abuse while sleeping rough. Many will have complex needs and in addition to physical health issues can have any combination of additional needs such as severe mental illness, learning disability, problems with substance misuse, etc.¹</p> <p>The City's Joint Strategic Needs Assessment² highlights a high prevalence of mental and physical ill-health and drug and alcohol dependency amongst people sleeping rough.</p>	<p>agencies e.g. health and homeless services, outreach services and regular meetings</p> <p>Improve services – joined up working across all agencies, build in peer support models, mental health services more flexible, more training and engagement and more healthcare workers on the streets e.g. mobile health centres, multi disciplinary teams to assess people and clear service pathways after assessment, which includes accommodation</p> <p>Clients are identified as needing accommodation when being discharged from institutions, such as prison and hospital</p>	<p>high levels of service need caused by rough sleeping</p> <p>There is a waiting list for the city's hostel beds and mental health hostel beds</p>	<p>planning across housing, care and health</p> <p>Implement a scheme to target those entrenched / complex rough sleepers based on bespoke responses to individual needs through a multi agency response</p> <p>Review access to, and support for, assessment of rough sleepers under the Mental Capacity Act and Care Act to ensure that access is timely and supported by clear protocols and staff training</p> <p>As part of the Better Care initiative overseen by the Health and Wellbeing Board, develop an integrated health and care model for the single homeless.</p>

¹ Homelessness Scrutiny Report 2014

² Joint Strategic Needs Assessment 2014: Rough Sleeping and Single Homeless: <http://www.bhconnected.org.uk/sites/bhconnected/files/jsna-6.4.3-Rough-sleepers2.pdf>

Protected characteristics groups from the Equality Act 2010	What do you know ⁹ ? Summary of data about your service-users and/or staff	What do people tell you ¹⁰ ? Summary of service-user and/or staff feedback	What does this mean ¹¹ ? Impacts identified from data and feedback (actual and potential)	What can you do ¹² ? All potential actions to: <ul style="list-style-type: none"> • advance equality of opportunity, • eliminate discrimination, and • foster good relations
	<p>Other common problems include physical trauma (especially foot trauma), skin problems, respiratory illness and infections (including hepatitis).</p> <p>Nationally, it is estimated that the use of inpatient hospital care by people who are sleeping rough or living in insecure accommodation (such as hostels) is eight times higher than in the general population aged 16-64</p>	<p>Core funding for homeless GP practice is low compared to other areas with comparable service/need</p> <p>Quality of accommodation - emergency and temporary accommodation and move on accommodation options – need to be healthy / health aware Ensure attention on how improving health is part of individuals' plans to support move on and independence</p>		<p>Provide a primary care led hub with a multidisciplinary team delivering services in a number of settings in the city.</p> <p>Provide a new permanent Assessment Centre with a number of temporary (sit-up) beds to enable service providers to assess the needs of people sleeping rough in a stable environment.</p> <p>Provide each person with their own Multi-Agency Plan that will outline who is responsible for co-ordinating their care, which services are working with them and the support available.</p>
Gender reassignment¹⁵	The JSNA 2014 reported that 2% people who were rough sleeping or single homeless identified as Trans*, an increase in the number reported 2013	The Brighton & Hove Trans* Needs Assessment 2015 reported that Trans* people experienced discrimination and/or abuse from other homeless people when	<p>Trans* people find there are more barriers in accessing services</p> <p>Trans* people are more unlikely to engage and to at greater risk</p>	Provide each person with their own Multi-Agency Plan that will outline who is responsible for co-ordinating their care, which services are working with them and the support available.

Protected characteristics groups from the Equality Act 2010	What do you know ⁹ ? Summary of data about your service-users and/or staff	What do people tell you ¹⁰ ? Summary of service-user and/or staff feedback	What does this mean ¹¹ ? Impacts identified from data and feedback (actual and potential)	What can you do ¹² ? All potential actions to: • advance equality of opportunity, • eliminate discrimination, and • foster good relations
		rough sleeping and felt that hostels were felt not to be safe spaces for trans* people particularly in respect of appropriate male/female sleeping arrangements and discrimination from other hostel users.		Robust enforcement action where necessary to reduce the risk and harm to Trans* people
Pregnancy and maternity ¹⁶	The instances of pregnant females sleeping rough – the annual count was 8 in 2013/14. Although the numbers are small it is important to engage with and support them at the earliest opportunity.	No specific feedback received relating to this	Once pregnant females are identified, they are offered accommodation under the homeless duty	Provide each person with their own Multi-Agency Plan that will outline who is responsible for co-ordinating their care, which services are working with them and the support available.
Race ¹⁷	A total of 296 people (98%) indicated their ethnicity during the Brighton & Hove Homeless Health Needs Audit 2014. Out of these, 212 were White British (72%) and 84 were from Black and Minority Ethnic (BME) groups (28%) which includes all individuals who classified their ethnic group as	Sleeper Annual Report recorded 1,129 cases of rough sleeping (involving 775 people). Of these 19% (212 cases) were not from the UK with the largest group from central or eastern Europe (86 cases, a 50% increase from this region on 2013/14)	Although no specific impacts identified from data and feedback for Race, when looking at nationality, many are not British citizens and therefore not have a local connection and not be entitled to access some services provided in the city.	Provide each person with their own Multi-Agency Plan that will outline who is responsible for co-ordinating their care, which services are working with them and the support available.

Protected characteristics groups from the Equality Act 2010	What do you know⁹? Summary of data about your service-users and/or staff	What do people tell you¹⁰? Summary of service-user and/or staff feedback	What does this mean¹¹? Impacts identified from data and feedback (actual and potential)	What can you do¹²? All potential actions to: <ul style="list-style-type: none"> • advance equality of opportunity, • eliminate discrimination, and • foster good relations
	something other than White British. These figures suggest that the homeless population is more ethnically diverse than the general population in Brighton & Hove.			
Religion or belief¹⁸	The Brighton & Hove JSNA 2011/12 data suggests that of the rough sleepers and single homeless people in Brighton & Hove - 52% had no religion with 20% self classifying as Christian, 3% Muslim, 2% Buddhist and less than 1% Jewish.	No specific feedback received relating to this	No specific impacts identified	Provide each person with their own Multi-Agency Plan that will outline who is responsible for co-ordinating their care, which services are working with them and the support available.
Sex/Gender¹⁹	The 2014/15 Rough Sleeper Annual Report recorded 1,129 cases of rough sleeping (involving 775 people). Of these 83% were male and 17% were female	Homeless Link ¹ found that, rather than sleep on the streets, many, especially women, described staying out of sight and moving around because they felt vulnerable. Many had been or knew someone who had been a victim of	Single males are less likely to be accepted as unintentionally homeless and in priority need and therefore at greater risk of becoming street homeless. The is a smaller number of women but they are	Provide each person with their own Multi-Agency Plan that will outline who is responsible for co-ordinating their care, which services are working with them and the support available. Consult women and other

¹ Repeat Homelessness in Brighton, Homeless Link, 2015: <http://www.homeless.org.uk/sites/default/files/site-attachments/Picture%20the%20Change.Repeat%20Homelessness%20in%20Brighton.pdf>

Protected characteristics groups from the Equality Act 2010	What do you know ⁹ ? Summary of data about your service-users and/or staff	What do people tell you ¹⁰ ? Summary of service-user and/or staff feedback	What does this mean ¹¹ ? Impacts identified from data and feedback (actual and potential)	What can you do ¹² ? All potential actions to: • advance equality of opportunity, • eliminate discrimination, and • foster good relations
		violence and/or abuse, including robbery, intimidation and rape.	more likely to feel isolated and vulnerable therefore at risk of becoming a victim of crime or becoming involved in inappropriate relationships to feel safer on the streets	groups about delivery of service which best meet their needs
Sexual orientation ²⁰	The findings of the Stonewall Housing Finding Safe Spaces project identified that, for LGBT* sleeping rough in the city, more often than not, rough sleeping was related to their sexual orientation or gender identity, having a detrimental and often irreversible effect on their support systems of people who care such after coming out to friends or family. Many LGBT* people sleeping rough do not have a local connection and therefore are not entitled to some services provided in the city.	The findings of the Stonewall Housing Finding Safe Spaces project identified that, for LGBT* sleeping rough in the city, many did not feel safe in hostels or on the streets. Drugs, alcohol, sex work or sex in exchange for accommodation was used as a way to secure a place to sleep, despite the great risk to safety as well as to their mental, physical and sexual health. The requirement to have a local connection is not always the fairest way of prioritising need. People fleeing their families or abusive situations may	LGBT* fleeing homophobia can find it more difficult to access services as they do not have a local connection and are at greater risk of becoming street homeless	Ensure providers implement recommendations of Stonewall Housing LGBT* report Provide each person with their own Multi-Agency Plan that will outline who is responsible for co-ordinating their care, which services are working with them and the support available.

Protected characteristics groups from the Equality Act 2010	What do you know⁹? Summary of data about your service-users and/or staff	What do people tell you¹⁰? Summary of service-user and/or staff feedback	What does this mean¹¹? Impacts identified from data and feedback (actual and potential)	What can you do¹²? All potential actions to: <ul style="list-style-type: none"> • advance equality of opportunity, • eliminate discrimination, and • foster good relations
		have no alternative but to return to those situations or end up rough sleeping. Perhaps it would be better to look at someone's situation more holistically to determine their need, local connection could be one of those areas looked at, but so could health, are they victims of crime etc.		
Marriage and civil partnership²¹	<p>Bedsit and studio flats are more affordable for couples on local housing allowance however there may be a challenge securing advance rents, deposits, fees and a guarantor</p> <p>The number of couples sleeping rough on the streets is relative low and as this is a transient population relationships are often not long-term. Although there is some accommodation available in the city for couples and services providers will try to accommodate couples</p>	<p>Relationship breakdown is a known reason for people ending up sleeping rough</p>	<p>Without robust assessments the placement of couples together may be detrimental to their wellbeing</p>	<p>Provide each person with their own Multi-Agency Plan that will outline who is responsible for co-ordinating their care, which services are working with them and the support available.</p>

Protected characteristics groups from the Equality Act 2010	What do you know⁹? Summary of data about your service-users and/or staff	What do people tell you¹⁰? Summary of service-user and/or staff feedback	What does this mean¹¹? Impacts identified from data and feedback (actual and potential)	What can you do¹²? All potential actions to: <ul style="list-style-type: none"> • advance equality of opportunity, • eliminate discrimination, and • foster good relations
	in the same hostel, there are risks that need to be assessed e.g. potentially violent relationships, relationships that do not support positive outcomes for either one or both partners.			
Community Cohesion²²	Those sleeping rough are more likely to be the victim of crime than the general population. Whilst the street population is often associated to crime and anti-social behaviour, it is estimated that only half of those on the streets are sleeping rough, with the other half housed. The street population is a diverse collection of groups and can be defined as people having one or more of the following attributes: rough sleeping; street drinking / begging; antisocial behaviour; insecurely housed (e.g. hostel or temporary accommodation) and	People who have been housed in hostels often congregate outside and annoy other resident in the area Residents can feel intimidated or reluctant to go into the city centre and can have potential on tourists who feel the same and stay away from Brighton	Police and prisons report high levels of service need caused by rough sleeping People sleeping rough are at more risk of having a crime perpetrated against them. Antisocial behaviour is damaging both to residents, to people sleeping rough and to the city's tourist economy Measures to reduce rough sleeping will decrease the level of crime and perception of crime and increase the availability of the emergency services making the city a safer	When necessary and proportionate, use place based enforcement to protect the public realm and reduce risk and harm to people Support people into appropriate treatment services where possible as an alternative to enforcement Take robust enforcement action where necessary to reduce the risk and harm caused to people Use tenancy/residency enforcement action where appropriate to manage behaviour on the street

Protected characteristics groups from the Equality Act 2010	What do you know ⁹ ? Summary of data about your service-users and/or staff	What do people tell you ¹⁰ ? Summary of service-user and/or staff feedback	What does this mean ¹¹ ? Impacts identified from data and feedback (actual and potential)	What can you do ¹² ? All potential actions to: • advance equality of opportunity, • eliminate discrimination, and • foster good relations
	spending a high level of time in street based activities, which may have a negative impact on other members of the public.		place for residents and visitors alike.	Take robust enforcement/disruption action against persistent or intimidating begging
Other relevant groups ²³	<p>Armed Forces: There is no evidence to suggest there is a local issue with rough sleeping amongst former armed forces personnel. The Rough Sleeping & Single Homeless Needs Assessment 2013 recorded a snapshot of hostel residents on the 11th March 2013 which showed that 6 out of 307 (2%) residents had previously been in the armed forces.</p> <p>Health: The Brighton & Hove Homeless Health Audit 2013 reported that 72% of rough sleepers reported needs around alcohol use and 47% of rough sleepers reported needs around drug use The Brighton & Hove</p>	<p>Armed Forces: A request was received to make sure Armed Forces support groups are linked to the new strategy</p> <p>Health: Issues about drug use in hostels – not safe places</p> <p>People with multiple and complex needs need more options, rather than just being kept alive Need a multi disciplinary team</p> <p>Training in understanding people with multiple complex needs</p>	<p>Armed Forces: Maintaining strategic links will enable them to respond rapidly when the need arises</p> <p>Health: Pressure on services with those services unable to meet the need expediently</p> <p>People with complex needs will require more tailored support</p>	<p>Armed Forces: Service commissioners are linked with the Sussex Armed Forces Network should a need for targeted work be required in future.</p> <p>Health: Ensure substance misuse services are aligned with the new service model</p> <p>Allow flexibility for those with complex needs when making nominations to supported accommodation</p> <p>Develop integrated joint assessments and support planning across housing, care and health</p> <p>Implement a scheme to target those entrenched /</p>

Protected characteristics groups from the Equality Act 2010	What do you know⁹? Summary of data about your service-users and/or staff	What do people tell you¹⁰? Summary of service-user and/or staff feedback	What does this mean¹¹? Impacts identified from data and feedback (actual and potential)	What can you do¹²? All potential actions to: <ul style="list-style-type: none"> • advance equality of opportunity, • eliminate discrimination, and • foster good relations
	Better Care Plan has highlighted that many people faced multiple disadvantages, including mental and physical health issues, drug and alcohol misuse and experience of violence and abuse while sleeping rough. Health service reports high levels of service need caused by rough sleeping. There is a waiting list for the city's hostel beds and mental health hostel beds			complex rough sleepers based on bespoke responses to individual needs through a multi agency response Provide each person with their own Multi-Agency Plan that will outline who is responsible for co-ordinating their care, which services are working with them and the support available.
Cumulative impact²⁴	People rough sleeping have complex needs which can only be met through multi-agency working	There is not a 'one size fits all' approach as street community not one group with the same needs or wants The street community issue is wider than homelessness	Reducing services in any of the identified areas will impact on other services Police, prisons and health service already report high levels of service need caused by rough sleeping	Ensure all services work together element effective solutions to reduce the number of people sleeping rough to zero

Protected characteristics groups from the Equality Act 2010	What do you know ⁹ ? Summary of data about your service-users and/or staff	What do people tell you ¹⁰ ? Summary of service-user and/or staff feedback	What does this mean ¹¹ ? Impacts identified from data and feedback (actual and potential)	What can you do ¹² ? All potential actions to: • advance equality of opportunity, • eliminate discrimination, and • foster good relations
Assessment of overall impacts and any further recommendations²⁵				
All	<p>The budget for Housing Related Support and Better Care linked to rough sleeping services was £4.8m for 2015/16 The Community and Voluntary Sector is estimated to contribute many more millions from other funding sources and in-kind support such as through volunteering.</p> <p>Lack of information for many of the hidden homeless e.g. whose living in squat, sleeping on sofas, staying with friends and family</p>	<p>More quality accommodation across the different types – emergency, supported, move-on</p> <p>Extend the use of the severe weather shelter</p> <p>Joint working across all the different agencies with well trained staff and resources</p> <p>Affordability of housing in the city</p> <p>Work with the private rented sector and actively encourage the retention and increase in shared accommodation</p> <p>Look at directing people to affordable accommodation outside the city</p> <p>More prevention work</p>	<p>No information on some homeless people and how to engage with them</p> <p>Lack of funding will impact on resources and therefore impact on the lives of people sleeping rough</p> <p>Lack of affordable accommodation contributes to street homelessness</p> <p>Living on the street impacts negatively on people's health and wellbeing</p> <p>Lack of employment increasing the likelihood of becoming homeless</p>	<p>More research</p> <p>See actions above</p>

Protected characteristics groups from the Equality Act 2010	What do you know⁹? Summary of data about your service-users and/or staff	What do people tell you¹⁰? Summary of service-user and/or staff feedback	What does this mean¹¹? Impacts identified from data and feedback (actual and potential)	What can you do¹²? All potential actions to: <ul style="list-style-type: none"> • advance equality of opportunity, • eliminate discrimination, and • foster good relations
		<p>e.g. more support to people at risk of losing their accommodation</p> <p>Provide guidance to residents and visitors as to how to help homeless people</p> <p>More partnerships with local employers to provide jobs to homeless people</p> <p>Van dwellers need to be considered</p>		

3. List detailed data and/or community feedback which informed your EIA

Title (of data, research or engagement)	Date	Gaps in data	Actions to fill these gaps (add these to the Action plan below)
Annual Update on the Scrutiny Panel on Homelessness	September 2015	None	
BHT Impact Report 2015	2015	None	
Brighton & Hove Community Strategy		None	
Brighton & Hove Homeless Health Needs Audit	February 2014	None	
Brighton & Hove Homelessness Review 2013	2008-2013	None	
Finding safe spaces - Understanding the experiences of lesbian, gay, bisexual and trans* rough sleepers	2014	None	
Homelessness Strategy 2014 – 2019	June 2014	None	
Hostels and Homeless Provision	December 2014	None	
Housing and Support for Young People aged 16-25: Needs Assessment	October 2012	None	
Housing Related Support Commissioning Plan	January 2015	None	
Housing Strategy 2015	2015	None	

Joint Strategic Needs Assessment 2014: Rough Sleeping and Single Homeless	2014	None	
Repeat Homelessness in Brighton, Homeless Link, 2015	2015	None	
Report of the Homelessness Scrutiny Panel	February 2014	None	
Research into the Financial Benefits of the Supporting People Programme, Department of Communities and Local Government 2009	2009	None	
Response to Scrutiny Panel on Homelessness	December 2014	None	
Rough Sleeper & Single Homeless Needs Assessment	June 2013	None	
Rough Sleeper & Single Homeless Needs Assessment Steering Group	June 2015 - ongoing	None	
Rough Sleepers Street Services and Relocation Team: Annual Report 1st April 2014 to 31st March 2015	2015	None	
St. John's Ambulance Homeless Service Annual Report 2014	2014	None	
Supported Accommodation Panel Review & draft recommendations	August 2015	None	
The government's new rough sleeping strategy: No One Left Out – a new goal to ending rough sleeping	December 2008	None	
The Hidden Truth about Homelessness – Experiences of Single Homelessness in England, May 2011	2011	None	

The reconnection of rough sleepers within the UK: an evaluation	March 2014	None	
The reconnection of rough sleepers within the UK: an evaluation	March 2015	None	
Update on Better Care Homeless Programme	March 2015	None	

4. Prioritised Action Plan²⁶

Impact identified and group(s) affected	Action planned	Expected outcome	Measure of success	Timeframe
NB: These actions must now be transferred to service or business plans and monitored to ensure they achieve the outcomes identified.				
Disability Other relevant groups	Allow flexibility for those with complex needs when making nominations to supported accommodation	Incorporated into the Multi-Agency Protocol	Successful outcomes for people nominated to supported accommodation	June 2016
Disability Other relevant groups	Provide temporary beds for those with complex needs to ensure engagement before reconnection assessment	Permanent assessment centre(s) with temporary (sit-up) beds set up	Reduction in people sleeping rough who have complex needs	March 2017
Disability Other relevant groups	Develop integrated joint assessments and support planning across housing, care and health	All clients to have their own Multi-Agency Plan	Better support for people health and care need	Pilot late 2016 to go live March 2017

Impact identified and group(s) affected	Action planned	Expected outcome	Measure of success	Timeframe
Disability Other relevant groups	Implement a scheme to target those entrenched / complex rough sleepers based on bespoke responses to individual needs through a multi agency response	Scheme implemented	Reduction in people sleeping who are entrenched and/or have complex needs	Scheme late 2016
Sexual orientation	Ensure providers implement recommendations of Stonewall Housing LGBT* report	Recommendations included in Multi-Agency Protocol	Recommendation of Stonewall Housing LGBT* implemented	March 2017
Sex/Gender	Consult women and other groups about delivery of service which best meet their needs	Develop women only accommodation provision	Accommodation commissioned that will reduce the vulnerability of women	Commissioning by March 2017
Age	Continue to develop the Young People's Accommodation and Support Pathway	Young people's bed spaces in the Housing First	Accommodation provided	Jan 2016 (complete)
Age	Ensure Care Act assessments are carried out for older and frail people sleeping rough	Include in integrated joint assessments across housing, care and health	Successfully integrated	March 2017
Disability Other relevant groups	Commission new integrated health and social care model for homeless	New integrated health and social care model commissioned	Model commissioned	April 2016 – March 2017
Disability Other relevant groups	Review access to, and support for, assessment of rough sleepers under the Mental Capacity Act and Care Act to ensure that access is timely and supported by clear	People sleeping rough are able to access the service and support provided	Review completed and access and support improved	December 2016

Impact identified and group(s) affected	Action planned	Expected outcome	Measure of success	Timeframe
	protocols and staff training			
Other relevant groups	Ensure substance misuse services are aligned with the new service model	Improved service provision	Successful alignment of services	March 2017
Other relevant groups	Support people into appropriate treatment services where possible as an alternative to enforcement	Increase in the number of street community people accessing treatment	Improved health for people sleeping rough	To be determined as part of final strategy development
Community Cohesion	When necessary and proportionate, use place based enforcement to protect the public realm and reduce risk and harm to people	Reduced ASB reported perpetrated against, and by, street community people	Reduction in ASB activity against and by street community people	To be determined as part of final strategy development
Community Cohesion	Take robust enforcement action where necessary to reduce the risk and harm caused to people	Those causing the most risk and harm identified through the High Impact Case Forum	Reduction in incidences of crime perpetrated against and by the street community people	To be determined as part of final strategy development
Community Cohesion	Use tenancy/residency enforcement action where appropriate to manage behaviour on the street	Reduced crime and disorder reported against, and by, street community people	Reduction in incidences crime and disorder on the streets	To be determined as part of final strategy development
Community Cohesion	Take robust enforcement/disruption action against persistent or intimidating begging	Increase in the number of convictions for begging	Reduction in the incidences of persistent or intimidating begging	To be determined as part of final strategy development
Age	Deliver new supported scheme for older people with complex needs	Accommodation to be sourced and developed	Reduction in the number of older people with complex needs who are street homeless and	March 2017

Impact identified and group(s) affected	Action planned	Expected outcome	Measure of success	Timeframe
			potentially becoming street homeless	
Age	Commission Housing First accommodation with units for young people	Provision of accommodation for young people	Reduction in the number of younger people who are street homeless or threatened with becoming street homeless	Contract live January 2016 (action complete)
All	Develop a Multi-Agency Protocol for Brighton & Hove	Improved services to people sleeping rough or potentially becoming street homeless	Agencies working together to eliminate street homelessness	June 2016 (to include data sharing agreement)

EIA sign-off: (for the EIA to be final an email must sent from the relevant people agreeing it or this section must be signed)

Lead Equality Impact Assessment officer:

Sue Garner-Ford

Date: 11 February 2016

Directorate Management Team rep or Head of Service:

Andy Staniford

Date: 18 February 2016

Communities, Equality Team and Third Sector officer:

Clair Hopkins

Date: 16 February 2016

Guidance end-notes

¹ The following principles, drawn from case law, explain what we must do to fulfil our duties under the Equality Act:

- **Knowledge:** everyone working for the council must be aware of our equality duties and apply them appropriately in their work.
- **Timeliness:** the duty applies at the time of considering policy options and/or before a final decision is taken – not afterwards.
- **Real Consideration:** the duty must be an integral and rigorous part of your decision-making and influence the process.
- **Sufficient Information:** you must assess what information you have and what is needed to give proper consideration.
- **No delegation:** the council is responsible for ensuring that any contracted services which provide services on our behalf can comply with the duty, are required in contracts to comply with it, and do comply in practice. It is a duty that cannot be delegated.
- **Review:** the equality duty is a continuing duty. It applies when a policy is developed/agreed, and when it is implemented/reviewed.
- **Proper Record Keeping:** to show that we have fulfilled our duties we must keep records of the process and the impacts identified.

NB: Filling out this EIA in itself does not meet the requirements of the equality duty. All the requirements above must be fulfilled or the EIA (and any decision based on it) may be open to challenge. Properly used, an EIA can be a tool to help us comply with our equality duty and as a record that to demonstrate that we have done so.

² Our duties in the Equality Act 2010

As a council, we have a legal duty (under the Equality Act 2010) to show that we have identified and considered the impact and potential impact of our activities on all people with 'protected characteristics' (age, disability, gender reassignment, pregnancy and maternity, race, religion or belief, sex, sexual orientation, and marriage and civil partnership).

This applies to policies, services (including commissioned services), and our employees. The level of detail of this consideration will depend on what you are assessing, who it might affect, those groups' vulnerability, and how serious any potential impacts might be. We use this EIA template to complete this process and evidence our consideration.

The following are the duties in the Act. You must give 'due regard' (pay conscious attention) to the need to:

- **avoid, reduce or minimise negative impact** (if you identify unlawful discrimination, including victimisation and harassment, you must stop the action and take advice immediately).
- **promote equality of opportunity.** This means the need to:
 - Remove or minimise disadvantages suffered by equality groups
 - Take steps to meet the needs of equality groups
 - Encourage equality groups to participate in public life or any other activity where participation is disproportionately low
 - Consider if there is a need to treat disabled people differently, including more favourable treatment where necessary
- **foster good relations between people who share a protected characteristic and those who do not.** This means:
 - Tackle prejudice
 - Promote understanding

³ EIAs are always proportionate to:

- The size of the service or scope of the policy/strategy
- The resources involved
- The numbers of people affected
- The size of the likely impact
- The vulnerability of the people affected

The greater the potential adverse impact of the proposed policy on a protected group (e.g. disabled people), the more vulnerable the group in the context being considered, the more thorough and demanding the process required by the Act will be.

⁴ **When to complete an EIA:**

- When planning or developing a new service, policy or strategy
- When reviewing an existing service, policy or strategy
- When ending or substantially changing a service, policy or strategy
- When there is an important change in the service, policy or strategy, or in the city (eg: a change in population), or at a national level (eg: a change of legislation)

Assessment of equality impact can be evidenced as part of the process of reviewing or needs assessment or strategy development or consultation or planning. It does not have to be on this template, but must be documented. Wherever possible, build the EIA into your usual planning/review processes.

Do you need to complete an EIA? Consider:

- Is the policy, decision or service likely to be relevant to any people because of their protected characteristics?
- How many people is it likely to affect?
- How significant are its impacts?
- Does it relate to an area where there are known inequalities?
- How vulnerable are the people (potentially) affected?

If there are potential impacts on people but you decide not to complete an EIA it is usually sensible to document why.

⁵ **Title of EIA:** This should clearly explain what service / policy / strategy / change you are assessing

⁶ **ID no:** The unique reference for this EIA. If in doubt contact Clair ext: 1343

⁷ **Team/Department:** Main team responsible for the policy, practice, service or function being assessed

⁸ **Focus of EIA:** A member of the public should have a good understanding of the policy or service and any proposals after reading this section. Please use plain English and write any acronyms in full first time - eg: 'Equality Impact Assessment (EIA)'

This section should explain what you are assessing:

- What are the main aims or purpose of the policy, practice, service or function?
- Who implements, carries out or delivers the policy, practice, service or function? Please state where this is more than one person/team/body and where other organisations deliver under procurement or partnership arrangements.
- How does it fit with other services?
- Who is affected by the policy, practice, service or function, or by how it is delivered? Who are the external and internal service-users, groups, or communities?
- What outcomes do you want to achieve, why and for whom? Eg: what do you want to provide, what changes or improvements, and what should the benefits be?
- What do existing or previous inspections of the policy, practice, service or function tell you?
- What is the reason for the proposal or change (financial, service, legal etc)? The Act requires us to make these clear.

⁹ **Data:** Make sure you have enough data to inform your EIA.

- What data relevant to the impact on protected groups of the policy/decision/service is available?⁹
- What further evidence is needed and how can you get it? (Eg: further research or engagement with the affected groups).
- What do you already know about needs, access and outcomes? Focus on each of the protected characteristics in turn. Eg: who uses the service? Who doesn't and why? Are there differences in outcomes? Why?
- Have there been any important demographic changes or trends locally? What might they mean for the service or function?
- Does data/monitoring show that any policies or practices create particular problems or difficulties for any groups?
- Do any equality objectives already exist? What is current performance like against them?
- Is the service having a positive or negative effect on particular people in the community, or particular groups or communities?
- Use local sources of data (eg: JSNA: <http://www.bhconnected.org.uk/content/needs-assessments> and Community Insight: <http://brighton-hove.communityinsight.org/#>) and national ones where they are relevant.

¹⁰ **Engagement:** You must engage appropriately with those likely to be affected to fulfil the equality duty.

- What do people tell you about the services?
- Are there patterns or differences in what people from different groups tell you?
- What information or data will you need from communities?
- How should people be consulted? Consider:
 - (a) consult when proposals are still at a formative stage;
 - (b) explain what is proposed and why, to allow intelligent consideration and response;
 - (c) allow enough time for consultation;
 - (d) make sure what people tell you is properly considered in the final decision.
- Try to consult in ways that ensure all perspectives can be considered.
- Identify any gaps in who has been consulted and identify ways to address this.

¹¹ Your EIA must get to grips fully and properly with actual and potential impacts.

- The equality duty does not stop decisions or changes, but means we must conscientiously and deliberately confront the anticipated impacts on people.
- Be realistic: don't exaggerate speculative risks and negative impacts.
- Be detailed and specific so decision-makers have a concrete sense of potential effects. Instead of "the policy is likely to disadvantage older women", say how many or what percentage are likely to be affected, how, and to what extent.
- Questions to ask when assessing impacts depend on the context. Examples:
 - Are one or more protected groups affected differently and/or disadvantaged? How, and to what extent?
 - Is there evidence of higher/lower uptake among different groups? Which, and to what extent?
 - If there are likely to be different impacts on different groups, is that consistent with the overall objective?
 - If there is negative differential impact, how can you minimise that while taking into account your overall aims
 - Do the effects amount to unlawful discrimination? If so the plan must be modified.
 - Does the proposal advance equality of opportunity and/or foster good relations? If not, could it?

¹² Consider all three aims of the Act: removing barriers, and also identifying positive actions we can take.

- Where you have identified impacts you must state what actions will be taken to remove, reduce or avoid any negative impacts and maximise any positive impacts or advance equality of opportunity.
- Be specific and detailed and explain how far these actions are expected to improve the negative impacts.
- If mitigating measures are contemplated, explain clearly what the measures are, and the extent to which they can be expected to reduce / remove the adverse effects identified.
- An EIA which has attempted to airbrush the facts is an EIA that is vulnerable to challenge.

¹³ **Age:** People of all ages

¹⁴ **Disability:** A person is disabled if they have a physical or mental impairment which has a substantial and long-term adverse effect on their ability to carry out normal day-to-day activities. The definition includes: sensory impairments, impairments with fluctuating or recurring effects, progressive, organ specific, developmental, learning difficulties, mental health conditions and mental illnesses, produced by injury to the body or brain. Persons with cancer, multiple sclerosis or HIV infection are all now deemed to be disabled persons from the point of diagnosis.

¹⁵ **Gender Reassignment:** In the Act a transgender person is someone who proposes to, starts or has completed a process to change his or her gender. A person does not need to be under medical supervision to be protected

¹⁶ **Pregnancy and Maternity:** Protection is during pregnancy and any statutory maternity leave to which the woman is entitled.

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- ¹⁷ **Race/Ethnicity:** This includes ethnic or national origins, colour or nationality, and includes refugees and migrants, and Gypsies and Travellers
- ¹⁸ **Religion and Belief:** Religion includes any religion with a clear structure and belief system. Belief means any religious or philosophical belief. The Act also covers lack of religion or belief.
- ¹⁹ **Sex/Gender:** Both men and women are covered under the Act.
- ²⁰ **Sexual Orientation:** The Act protects bisexual, gay, heterosexual and lesbian people
- ²¹ **Marriage and Civil Partnership:** Only in relation to due regard to the need to eliminate discrimination.
- ²² **Community Cohesion:** What must happen in all communities to enable different groups of people to get on well together.
- ²³ **Other relevant groups:** eg: Carers, people experiencing domestic and/or sexual violence, substance misusers, homeless people, looked after children, ex-armed forces personnel, people on the Autistic spectrum etc
- ²⁴ **Cumulative Impact:** This is an impact that appears when you consider services or activities together. A change or activity in one area may create an impact somewhere else
- ²⁵ **Assessment of overall impacts and any further recommendations**
- Make a frank and realistic assessment of the overall extent to which the negative impacts can be reduced or avoided by the mitigating measures. Explain what positive impacts will result from the actions and how you can make the most of these.
 - Countervailing considerations: These may include the reasons behind the formulation of the policy, the benefits it is expected to deliver, budget reductions, the need to avert a graver crisis by introducing a policy now and not later, and so on. The weight of these factors in favour of implementing the policy must then be measured against the weight of any evidence as to the potential negative equality impacts of the policy,
 - Are there any further recommendations? Is further engagement needed? Is more research or monitoring needed? Does there need to be a change in the proposal itself?
- ²⁶ **Action Planning:** The Equality Duty is an ongoing duty: policies must be kept under review, continuing to give 'due regard' to the duty. If an assessment of a broad proposal leads to more specific proposals, then further equality assessment and consultation are needed.