

Subject:	Rough Sleeping Update		
Date of Meeting:	Housing Committee 16/01/13		
Report of:	Director of Environment, Development & Housing		
Contact Officer:	Name:	Jenny Knight	Tel: 292960
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Ward(s) affected:	All		

FOR GENERAL RELEASE

1. PURPOSE OF REPORT AND POLICY CONTEXT

- 1.1 The purpose of this report is to provide an update on the current numbers of rough sleepers in Brighton & Hove and on changes in local provision to respond to increasing pressures on services. The report will also provide details of progress to date on new pilot services that the council has commissioned to target street drinkers and entrenched rough sleepers.

2. RECOMMENDATIONS:

- 2.1 This report is for information only and there are no recommendations arising from this report.

3. CONTEXT/ BACKGROUND INFORMATION

3.1 Rough Sleeper Street Count

The annual rough sleeper street count took place in the early hours of the morning on 28th November 2013. The count is verified by Homeless Link* (*national homeless organisation representing and supporting organisations working with homeless people in the UK) to ensure that national methodology to capture rough sleeper numbers is accurately applied. Following the street count and verification, 50 individuals were counted and verified as sleeping on the streets of Brighton & Hove. This is an increase of 16% on last years count which found 43 individuals rough sleeping in the city in November 2012.

The breakdown of the 50 rough sleepers are as follows:

Gender:
Female – 7
Male – 43

Local Connection:
• 3 (6%) Unknown

- 19 (38%) – Local Connection to Brighton & Hove
- 27 (54%) – No Local Connection (of which 6 individuals had Local Connections to areas in Sussex)
- 1 (2%) - A10 national

It is important to note that 11 of the individuals found rough sleeping were actually accommodated but for various reasons chose to sleep out. This is compared to 4 individuals in 2012. 8 of the 11 individuals were accommodated in Band 2 hostels and 1 in emergency placement accommodation. The other two had accommodation outside of the city. The reasons for sleeping out were varied but the main reason for those in hostel accommodation was to be with a partner. This particular issue has been examined with hostel providers, who will often accommodate couples in the same hostel to prevent them sleeping out. However it is clear from examining the names of those found on the count that it is not possible to accommodate these individuals together due to risk and safeguarding issues. There are also a number of other reasons why ex- rough sleepers may choose to sleep out. This client group can be very challenging and it takes time for an entrenched rough sleeper to settle in hostel accommodation. Providers also use temporary exclusions to manage behaviour and to prevent permanent exclusions onto the streets, this means that an individual may be excluded from the hostel for one night following a serious incident. The individuals found sleeping out on the night of the street count represent just 3% of the hostel population and providers are working closely with them to prevent them sleeping out in the future.

Of those with no local connection 6 of the 27 (22%) had local connections to local authorities in Sussex. Some parts of Sussex have limited or no services for rough sleepers. We are working with Sussex authorities to set up services for rough sleepers (where they currently do not exist) and to develop a relocation protocol for those individuals who gravitate to Brighton. This will enable us to more swiftly relocate people into Sussex authorities where they have a local connection.

3.2 Severe Weather Emergency Provision (SWEP):

At the time of writing this report (early December 2013) SWEP has not yet been activated. However there are four shelters in place and staff are on standby should the temperature be predicted to fall below 0 degrees for three consecutive nights in line with the policy for this provision. We will also be making use of Emergency Placement or Temporary Accommodation. Due to the high numbers of rough sleepers currently being seen within the city we have additional provision arranged via two extra shelter venues which can be brought into use if required. We have allocated additional funding for this provision during the financial year 2013-14 to ensure we can provide accommodation to rough sleepers in the freezing weather.

3.3 Single Homeless & Rough Sleeper Needs Assessment:

The Single Homeless & Rough Sleeper Needs Assessment was completed in July 2013 and the full document is available on the BHLIS website. These are some of the headline findings from the needs assessment.

Numbers:

- The number of rough sleepers worked with by the rough sleepers team has increased with a 59% increase between 2011/12 and 2012/13.
- The average number of people accommodated each night under the severe weather protocol was 26 in 2011/12 and 40 in 2012/13 with the highest number accommodated on one night at 36 in 2011/12 and 58 in 2012/13.
- As of April 2013 there were 60 homeless individuals awaiting hostel accommodation either in emergency placement accommodation, sofa surfing or on the streets. Approximately 67 vacancies arise in hostel accommodation per quarter.

Needs:

Rough Sleepers often have multiple needs with alcohol misuse being a particular issue within the city.

- Between 2010/11 and 2011/12 the percentage of service users in hostels with alcohol use and mental health issues increased by 9% with those with drug issues and physical health issues showing a slight increase. In recent years the rough sleepers team has seen the percentage of clients with mental health needs increase but those with substance misuse needs fall slightly.
- 72% of rough sleepers reported a need around alcohol use and 46% of hostel residents.
- 47% of rough sleepers and 39% of hostel residents reported needs around drug use.
- 40% of rough sleepers and 35% of hostel residents reported needs around mental health, with 12% of hostel residents displaying self neglect which was problematic to them maintaining their tenancy.
- 21% of rough sleepers worked with by the Rough Sleepers Team and 11% of hostel residents had a physical health issue.

Departures from Accommodation Services:

- 53% of those leaving Band 2 accommodation in 2011/12 moved to greater independence an increase of 3% on the previous year. 89% of those exiting Band 3 accommodation moved on to greater independence.
- 15% of departures from Band 2 in 2011/12 were evictions. Of the 95 individuals evicted the reason for eviction was violent behaviour in over half of cases.
- 60% of those evicted had alcohol issues, 48% drug issues and 41% offending behaviour (many had more than one).

- 8% of service users are 'stuck' in band 2, over half of these are older people and many have alcohol dependency and physical or mental health issues.

The needs assessment is currently being consulted on as part of both the Housing Related Support Commissioning Strategy and the Homelessness Strategy. The needs assessment along with feedback from service users, providers and partners will be brought together to inform commissioning recommendations for the future shape of the services within the integrated support pathway.

3.4 Homeless Link Health Needs Audit:

As part of our work to understand the needs of rough sleepers and single homeless individuals we have been working closely with Public Health colleagues to undertake the Homeless Link Health Needs Audit. This is a health questionnaire devised by Homeless Link and adapted for Brighton & Hove.

In August 2013 the survey was undertaken with 302 individuals within the integrated support pathway, it focused on access to healthcare, health behaviours, physical & mental health, substance misuse and immunisations.

At the time of writing this report the findings and the recommendations from the health audit are still being developed however some preliminary findings are included below:

- 92% of those questioned were registered with a GP but only 38% with a dentist.
- There was a considerably higher use of A&E, hospital inpatient and hospital outpatient services than in the general population.
- 73% were smokers compared with 23% of the general population
- 36% of individuals were eating less than 2 meals per day
- 84% reported at least one physical health issue
- 85% reported at least one mental health issue, 53% had a diagnosed mental health issue.
- 40% were currently taking drugs or recovering from a drug problem
- 26% were drinking alcohol four or more times per week.

We are working with Public Health colleagues to integrate health care services for homeless people and rough sleepers in line with proposals agreed by the Health & Wellbeing Board earlier this year.

3.5 Update on Current Provision:

At present a number of new innovations are being trialled in the city with partner agencies to tackle the numbers of rough sleepers. These are as follows:

Emergency Assessment Centre:

This is a pilot scheme bringing together a number of agencies to provide a 'one stop shop' for rough sleepers who are entrenched or hard to reach. The scheme set up by CRI, BHT and Sussex Police is supported by Housing.

The Emergency Assessment Centre (EAC) provides those in need with access to specialist workers from mental health, medical, substance misuse, accommodation and support teams. It has operated on four nights since launching in October 2013 and has to date has provided assistance to 53 individuals. For example during the first EAC eleven individuals were seen by a GP and two individuals were hospitalised with potentially life threatening conditions, 7 individuals were seen by mental health services with one subsequently being sectioned. On the 6th December 2013 this innovative scheme was awarded a Best Partnership award by Sussex Police.

Complex Cases Pilot:

Housing Commissioning in conjunction with CRI is piloting an accommodation scheme for entrenched rough sleepers who have been unable to manage in hostel accommodation. This scheme which commenced in September 2013 will house 8 individuals and provide them with intensive support to maintain their tenancy and address their support needs. It is too early for any firm conclusions to be drawn from this pilot, however it is being monitored closely by Housing Commissioning to assess whether this is the solution we need for those individuals with multiple needs that are excluded from accommodation.

Street Drinking:

A pilot programme to assess the street drinking situation in Brighton & Hove and look at innovative practice to support individuals has been in place since July 2013. The post managed by Equinox and funded by Housing Commissioning carries a caseload of high profile street drinkers as well as co-ordinating data collection on the street drinking population. A multi agency count of street drinkers took place over one week in July 2013 and found 93 individuals street drinking. Of these, 32 are high profile regular street drinkers, 26 had a lower street presence and 35 were only seen on the count. The highest number seen on a single day was 40.

Homeless Transitions Funding:

With the support of Housing Commissioning two services were awarded Homeless Transitions Funding in November 2013. The first was Equinox which has been awarded one years funding for three hostel link workers who will work with alcohol users within three hostels in the city. This work will link in with Equinox's current work to tackle street drinking and assist individuals to access treatment services and maintain their accommodation. The project is due to commence at the beginning of January following the recruitment of staff. The second organisation to be awarded funding was Stonewall who will be working in

a number of areas across the country including Brighton & Hove to support staff in homeless services to work with LGBT service users.

4. ANALYSIS & CONSIDERATION OF ANY ALTERNATIVE OPTIONS

4.1 This report is for information only

5. COMMUNITY ENGAGEMENT & CONSULTATION

5.1 Service user feedback is being gathered as part of the Single Homeless and Rough Sleeper Needs Assessment Consultation and the Housing Related Support Commissioning Strategy Consultation. This includes the use of the consultation portal, service providers gathering feedback questionnaires from service users and a hostel service user consultation currently being lead by the MIND Service User Involvement Worker and the peer mentoring service. The feedback gathered will be utilised to develop recommendations for the future of rough sleeping and accommodation services for single homeless people in Brighton & Hove.

5.2 Feedback has also been sought from providers and partner agencies through the consultation portal.

6. CONCLUSION

6.1 This report is for information only.

7. FINANCIAL & OTHER IMPLICATIONS:

Financial Implications:

7.1 There are no direct financial implications arising from this report. The costs associated with managing Rough Sleepers are met from existing resources.

Finance Officer Consulted: Neil Smith

Date: 13/12/13

Legal Implications:

7.2 As the report is only for note there are no legal implications.

Lawyer Consulted: Simon Court

Date: 12.12.13

Equalities Implications:

7.3 This report is for information only so there are no equalities implications arising from it.

However as demonstrated by the information contained in this report rough sleepers often have multiple needs such as learning disabilities, mental health, physical disabilities and substance misuse issues.

Sustainability Implications:

7.4 This report is for information only, there are no sustainability implications.

Any Other Significant Implications:

7.5.1 This report is for information only however there are implications from the increase in rough sleeping on crime and disorder within the city. Rough Sleepers are vulnerable to violence, abuse and injury while living on the streets. There are also crime and disorder implications for members of the public and implications for tourism and local business with increased numbers of often substance affected individuals residing on the streets.

7.5.2 Rough Sleepers have higher health needs than the general population in terms of physical health, mental health and substance misuse therefore putting increased pressure on health services.

SUPPORTING DOCUMENTATION

Appendices:

1. There are no appendices attached.

Background Documents

1. Single Homeless & Rough Sleeper Needs Assessment can be found on <http://www.bhlis.org/>