

NORTHAMPTON BOROUGH COUNCIL

Overview and Scrutiny

Report of Scrutiny Panel 3 – Homelessness (Pre Decision Scrutiny)

1 Purpose

- 1.1 The purpose of the Scrutiny Panel was to review how the Borough Council and its partners prevent homelessness and to respond to those without homes in the borough.

Key Lines of Enquiry

- To gain an understanding of the work currently being undertaken by Northampton Borough Council (NBC), partnerships, statutory and voluntary organisations to address homelessness
- To assess the extent of homelessness and rough sleeping in the borough assess the initiatives currently in place to tackle homelessness
- To examine the Council's Severe Weather Provision
- To gain an understanding of the effect on the health, wellbeing and the safety of homelessness people, including rough sleepers
- To gain an understanding of the causes and barriers to support homelessness
- Identify any specific groups that are not accessing services

- 1.2 A copy of the scope of the review is attached at Appendix A.

2 Context and Background

- 2.1 The Overview and Scrutiny Committee, at its work programming event in April 2016, agreed to include a review around how the Borough Council and its partners prevent homelessness. An in-depth review commenced in May 2016 and concluded in March 2017.
- 2.3 This review links to the Council's corporate priorities, particularly corporate priority 3 - Housing for Everyone - Helping those that need it to have a safe and secure home
- 2.4 The Scrutiny Panel established that the following needed to be investigated and linked to the realisation of the Council's corporate priorities:

- Background data, including:
 - Presentation to set the scene: To identify the prevalence of the problem locally
 - Relevant national and local background research papers
 - Definitions – Homelessness and Rough Sleepers
 - Homelessness Legislation
 - Causes of Homelessness, including Rough Sleeping
 - Relevant Council Policies and Strategies
 - Statistics:
 - Rough sleeper data
 - Homelessness data
 - Relevant Legislation:
 - Welfare Reform Act 2012
 - Localism Act 2011
 - Homelessness Act 2002
 - The Health and Social Care Act 2012
 - Relevant published papers on homelessness and rough sleeping
- Best practice external to Northampton
- Internal expert advisors:
 - Cabinet Member for Housing, NBC
 - Housing Options and Advice Manager, NBC
 - Head of Revenues and Benefits, LGSS
 - Cabinet Member for Community Safety, NBC
 - Chair of the Community Safety Partnership (CSP) and the Community Safety Team
 - Case Managers, Anti-Social Behaviour Unit

- External expert advisors:
 - Head of Protecting Vulnerable Persons, Northamptonshire Police
 - Director of Public Health, Northamptonshire County Council
 - Manager, Hope Centre
 - Manager, Maple Access
 - Manager, NAASH
 - Drug and Alcohol Challenge Officer, the Bridge
 - Operations Manager, Midland Heart Housing Association
 - Service Manager, Salvation Army
 - Chief Executive, Central Northamptonshire CAB
 - Emmaus, Homelessness Charity
 - Shelter
 - Crisis
 - Healthwatch Northamptonshire

- Site visit to temporary accommodation(s) and Oasis House

2.5 Statutory Homelessness

2.5.1 Households that meet specific criteria of priority need set out in legislation and to whom a homelessness duty has been accepted by a local authority. May not literally be living without a roof over their heads.

2.6 Rough sleeping

Sleeping, about to bed down or bedded down in the open air (streets, tents, doorways, parks and bus shelters, etc.). Living in places that are not designed for habitation (stairwells, barns, sheds, car parks, boats, stations, cars, etc.)

For counts and estimates, Officers do not include:

- People who are living in hostels or shelters
- Squatters, travellers or people who are living in campsites or other sites for recreational purposes or organised protest

3 Evidence Collection and Desktop Research

3.1 Evidence was collected from a variety of sources:

3.2 Background reports

[Presentation to set the scene](#)

Statistics

Homelessness in Northants as at July 2016:

- 705 homelessness acceptances in 2015/16 (up 28% on 2014/15)
- Northampton had 45% of County's acceptances
- Kettering, Wellingboro and Corby had 40% of County's acceptances
- Increased most in Corby (219%) & Kettering (94%)

Homelessness in Northampton as at July 2016:

- 321 homelessness acceptances in 2015/16 (up 11% on 2014/15)
- Around three quarters of 'accepted' families are lone parents
- One third of the decisions made were that applicant was 'not homeless' or was 'intentionally homeless'
- During a borough -wide 'count' on 24/03/16, 21 rough sleepers were found
- Approximately half of the rough sleepers are East European

Homelessness statistics, month by month, in Northampton (April to August 2016):

Measure	Average 2015/16	April	May	June	July	August
Total number of households living in temporary accommodation	76	74	82	97	106	111
Number of households living in B&B accommodation	32	35	32	36	55	49
Number of households that are prevented from becoming homeless	42	86	73	112	61	82
Number of households that make a homelessness application	38	63	63	49	55	69
Number of households for whom a full homelessness duty is accepted	26	34	39	41	27	46

Published Papers and Reports

House of Commons - Statutory Homelessness in England (October 2016)

It is reported that the House of Commons Library briefing paper provides statistics on statutory homelessness in England and explains local authorities' duties to assist homeless households. The paper includes an overview of, and comment on, Government policy in this area.

The report states that Local authorities in England have a duty to secure accommodation for unintentionally homeless households who fall into a 'priority need' category. There is no duty to secure accommodation for all homeless people. For example, there is no statutory duty to secure housing for homeless single people and couples without children who are not deemed to be vulnerable for some reason. Official statistics on statutory homelessness are published quarterly by the Department for Communities and Local Government (DCLG) in March, June, September and December. The Department also publishes annual statistics on Homelessness Prevention and Relief work.

It is noted in the report that the financial year 2010/11 saw a 10% increase in homelessness acceptances by local authorities, representing the first financial year increase since 2003/4. Homelessness acceptances continued to rise over the next three years but fell by 3% between 2012/13 and 2013/14. The 2014/15 financial year recorded a further increase, with acceptances 36% higher than in 2009/10 (but 60% below the peak in 2003/4). The 2015/16 financial year saw acceptances increase by a further 6% on 2014/15.

The report goes on to state that Organisations such as Shelter and Crisis argue that the official statistics do not give a full picture of homelessness in England. The figures exclude those who are homeless but who do not approach a local authority for assistance and those who do not meet the statutory criteria. Local authorities are increasingly adopting informal responses to tackling homelessness, which can result in households falling outside the official quarterly monitoring process. In December 2015 the UK Statistics Authority published [an assessment of compliance with the Code of Practice for Official Statistics](#) in relation to DCLG's homelessness and rough sleeping statistics. The assessment found that the Homelessness Prevention and Relief statistics "do not currently meet the standard to be National Statistics."

Homelessness arising from parents/friends/relatives being no longer willing or able to provide accommodation remains significant, as does homelessness

arising from the breakdown of a violent relationship. However, the most frequently cited reason for loss of the last settled home is now the ending of an assured shorthold tenancy in the private rented sector. In the second quarter of 2016 this reason was behind 41% of all statutory homeless acceptances in London.

The report concludes that the increase in statutory homelessness since 2009/10 is attributed to a number of factors, of which the most important is identified as the continuing shortfall in levels of new house building relative to levels of household formation. Housing Benefit reforms are also viewed as a contributory factor, particularly in London.

Homeless Link – Young People and Homelessness (2015)

Each year, Homeless Link publishes a paper regarding young people and homelessness.

The latest report was published in 2015. The purpose of the report is to explore the reasons young people become homeless, the support available to them, and areas that need to be improved.

The report details key findings:

“Young people are now the most likely group to be living in poverty. Whilst youth unemployment is at its lowest level since the recession, this is still over three times the rate of the older adult working age population. Young people have been adversely impacted by changes to the welfare system, there are increasing challenges to accessing affordable and suitable housing, and there have been significant cuts to youth services in the past five years.

Based on the experiences young people shared with us, it is now more and more difficult for young people to access the temporary help they need if things go wrong. Nearly half of people living in homeless accommodation services are aged between 16 and 24 and without adequate support or early intervention, homelessness can go on to impact education, employment, health and wellbeing and is more likely to lead to homelessness in older age. Our fifth annual report on youth homelessness focuses on young people accessing both local authorities and voluntary sector providers. It explores who is becoming homeless and the reasons for this, and the provision of homelessness prevention and

support services available to you. It goes on to examine the accommodation options young people have at the point of crisis, and longer term move-on from homelessness services. The research is based on two surveys administered to providers of homelessness services and local authorities in September 2015, as well as fourteen interviews with young people living in homelessness services. Scale and profile of youth homelessness.

There is a contrast between the scale of youth homelessness reported by homelessness providers and local authorities. Providers report seeing more young people who are homeless (68% reported an increase) whereas local authorities report seeing fewer young people (20% of people presenting as homeless were under 25, compared to 31% last year). . These changes support evidence that from elsewhere which suggests that declines in official statutory homelessness may have been offset by increases in other forms of homelessness. One explanation is that fewer young people are approaching their local authority for support and are approaching providers, or that young people are being signposted to providers as part of their local authority's advice or prevention .

Parents or carers no longer willing to accommodate continues to be the leading cause of youth homelessness, a causal factor in nearly half of cases (47%) compared to 36% in 2014. A large proportion of young people in homelessness services are aged 18-21 and non-care leavers (44%), and would be potentially affected by the proposed changes to end automatic entitlement for housing support for those aged 18-21.. The proportion of young women in homelessness services was higher than previous years at 46%, compared to 40% in 2014. Despite being homeless, large proportions of young people (65%) are studying, employed or on a work/apprenticeship scheme, including 22% of young people in paid employment. The proportion of young people sleeping rough has decreased slightly –17% had ever slept rough compared to 19% in 2014 Joint working and provision of prevention services.

Compared to 2014, both local authorities and providers were more likely to report the use of a Positive Pathway –64% of local authorities and 78% of providers report there is a Positive Pathway in their area. This has increased from 49% and 48% respectively last year. . The proportion of cases where youth homelessness was prevented or relieved increased to

23%, up from 19% last year. . The availability of prevention tools remained steady for local authorities, but four in ten (42%) still report they do not have an adequate range of tools to prevent youth homelessness. There are signs of improvement in joint working between Housing and Children's Services - 64% report that joint working is 'very effective' or 'effective' which has increased from 58% in 2014. The Positive Pathway' is the result of research and consultations undertaken with charities, organisations and young people by St Basils in 2012 and updated in 2015.

Young people without recourse to public funds or without a local connection are finding it increasingly difficult to access support as they are more likely to be turned away by services. This year 57% of services turned away young people because they had no recourse to public funds (compared to 24% last year) and young people with no local connection were turned away by 40% of services (compared to 25% last year). . There is a lack of youth appropriate emergency accommodation in many areas – half of areas (49%) do not have Nightstop or a similar scheme, 43 % do not have a youth specific assessment centre or short stay supported accommodation. Local authorities are more likely to have provision of longer term supported housing options for young people compared to emergency accommodation. However there have been some reductions; 29% of areas report that hostels and foyers are either not available or there is less availability and 34% of local authorities report the same for shared housing with floating support.

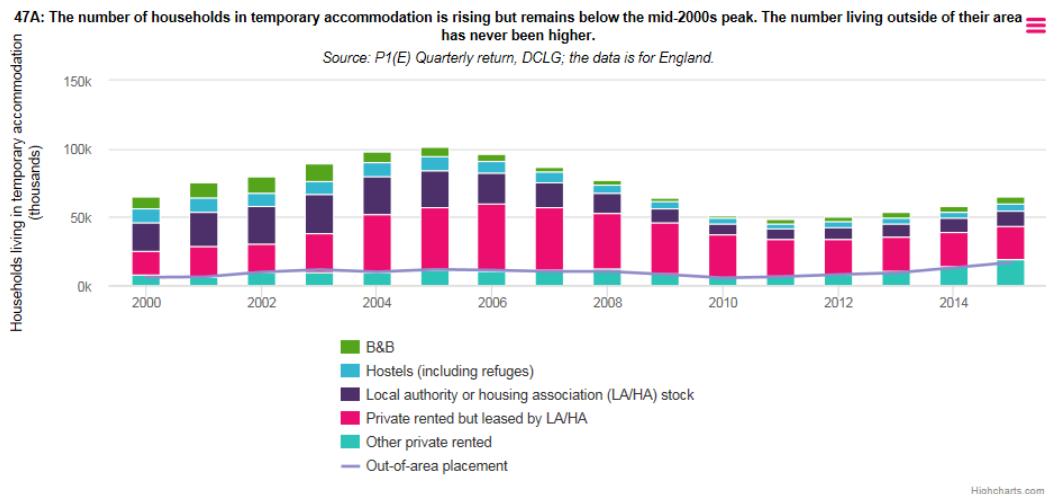
Bed and Breakfast usage for 16 and 17 year olds does not occur in 41% of local authorities. Yet 59% of local authorities still report rarely or occasionally using B&Bs for this age group. . Whilst slightly lower than last year, 55% of young people living in homelessness accommodation have complex needs and 34% have mental health issues (an increase from 23% in 2014). . Homelessness providers continue to provide a range of support services for young people. There has been an increase in the proportion of providers offering mediation services 73% compared to 41% in 2014. Homelessness providers report that on average young people spend 16 months in homelessness organisations before they move on, nearly double the length of time in 2014. The most common outcome for young people leaving homelessness providers is the private rented sector

(28%). Returning home to family or friends is now the least common outcome for young people leaving homelessness organisations –one in twenty (5%) providers reported this is the most common outcome compared to one in four last year.

Schemes to assist access to the private rented sector varied. Local authorities report that availability of shared accommodation options developed with private landlords and relationships developed with private landlords to let to young people has decreased. The availability of rent deposit or cashless bond schemes has stayed fairly constant (87% of local authorities have one). Sanctions, changes to the Shared Accommodation Rate (SAR) and reductions in Local Housing Allowance (LHA) continue to have a negative impact on young people’s ability to access accommodation; providers were more likely than local authorities to report young people are impacted ‘a great deal’ or ‘quite a bit’ “

Joseph Rowntree Trust (JRT) – Temporary Accommodation details (2015)

In November 2015, JRT published a graph detailing the number of people living in temporary accommodation:



Albert Kennedy Trust

The Albert Kennedy Trust (AKT) reports that it supports young LGBT 16-25 year olds who are made homeless or living in a hostile environment.

In 2008 AKT undertook research examining mainstream providers approach to supporting LGBT young people, focusing on 12 national, regional and local housing and homelessness services.

A summary of the research report:

“Research shows that young LGBT people are at risk of discrimination which directly impacts on their life chances. Negative reactions to a young person’s sexual orientation or gender identity may result in homelessness or housing vulnerability, or may exacerbate an existing housing crisis.

Mainstream housing and support providers need to be equipped to work sensitively and effectively with those young LGBT people. More importantly, they should also be creating a welcoming environment where young LGBT people are willing to present themselves, express their needs and access support and advice in the first place. This is about ensuring services are accessible and fair, but also legally compliant.

It is evident that a number of mainstream housing and support providers are showing an awareness of LGBT equality and the need for inclusive services. The majority of organisations polled for this research had inclusive policies, included sexual orientation and, to a lesser extent, gender identity equality in their training and in some cases had even consulted with LGBT service users and staff. There are clearly pockets of good practice within the housing sector which should be celebrated and shared.

However, AKT’s experience suggests that this type of good practice is the exception rather than the rule. LGBT-specific services and projects are still needed. The number of young LGBT people accessing AKT’s services is increasing, yet across the UK such specialist services are rare. This is in part due to the lack of statistical evidence of the problem, and the failure to monitor LGBT issues at a national level.

The report has prompted AKT to develop in partnership with young people a quality mark ‘Making a Difference’ which comprises training, audit and the provision of resources which is now available to mainstream providers. “

In 2014/2015 AKT produced a report “LGBT – Youth Homelessness, A UK National scoping of cause, prevalence, response and outcome.

AKT reports that it examined the causes of youth LGBT homelessness as well as the longer term repercussions of family rejection.

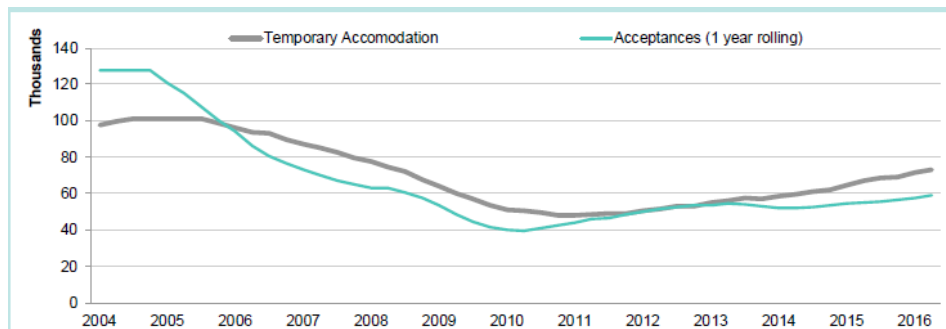
As a result of the study AKT reports that it made a number of recommendations to local and national government, housing providers and those working in the LGBT sector:

- the government to hold local authorities and housing providers accountable for the accurate and consistent collection, monitoring and application of sexual/gender identity data, using standardised assessments administered by trained staff.
- local authorities to conduct a thorough review of their housing options, policies and procedures to ensure services are appropriate for, and inclusive of, homeless LGBT young people.
- all housing Providers to provide training to staff to understand the unique needs of homeless LGBT youth.
- housing providers to provide staff with LGBT-specific training to ensure that practitioners understand the unique needs of this population of homeless young people.

Department of Communities and Local Government – Statutory homelessness and prevention and relief, April to June 2016: England

The reported purpose of the report is to provide information on the number of households that reported being homeless (or threatened with homelessness) to their local authority and were offered housing assistance.

- Local authorities accepted 15,170 households as being statutory homeless between 1 April and 30 June 2016, up 3% on the previous quarter and 10% on the same quarter of last year.
- These households that are owed a main homelessness duty to secure accommodation as a result of being unintentionally homeless and in priority need.
- The total number of households in temporary accommodation on 30 June 2016 was 73,120, up 9% on a year earlier, and up 52% on the low of 48,010 on 31 December 2010.



- Local authorities took action to prevent homelessness for 50,990 households in April to June 2016, up 4% from 48,820 in April to June 2015.
- A further 3,910 non-priority households were helped out of homelessness (relieved) by local authorities in April to June 2016, up 10% from 3,570 in April to June 2015.

HOMELESS REDUCTION BILL 2016-2017

Background to the Bill

Conservative backbench MP Bob Blackman introduced a Private Members' Bill aimed at reducing homelessness, based on a report commissioned by the charity Crisis. The aim of the Bill is to reform the homelessness duties placed on local authorities to ensure that at-threat households receive better help quicker.

The Bill was committed to a Public Bill Committee. The Public Bill Committee met on 30 November 2016. The Bill had had its Second Reading debate on 28 October 2016.

Bob Blackman MP welcomed the Government's support for his Bill and said:

"I welcome the government's decision to support my bill to reduce homelessness. Throughout my 24 years in local government prior to becoming an MP, I saw the devastation that can be caused by homelessness first hand, with too many people simply slipping through the net under the current arrangements.

By backing this bill, the government is demonstrating its commitment to an agenda of social justice and also shows that it is willing to listen. I look forward

to working with Ministers going forward in order to bring about this important change in legislation.”

Aims of the Bill

The reported aims of the Bill is to refocus English local authorities on efforts to prevent homeless. The Bill is seeking to amend Part 7 of the *Housing Act 1996*. Its measures include:

- An extension of the period during which an authority should treat someone as threatened with homelessness from 28 to 56 days.
- Clarification of the action an authority should take when someone applies for assistance having been served with a section 8 or section 21 notice of intention to seek possession from an assured shorthold tenancy.
- A new duty to prevent homelessness for all eligible applicants threatened with homelessness.
- A new duty to relieve homelessness for all eligible homeless applicants.
- A new duty on public services to notify a local authority if they come into contact with someone they think may be homeless or at risk of becoming homeless.

It is reported that several provisions have financial implications for local authorities for which a money resolution will be required. The Government has stated that an impact assessment and new burdens assessment will be published in due course.

Government support

The Government supported the Bill's progress through Parliament on 24 October 2016. It is reported that Local authorities and their representative organisations had said that they could not support the draft Bill in the absence of an effective long-term national strategy.

The Local Government Association (LGA) said: *“There are further risks that, in areas where council resources are already particularly stretched, legislative change in isolation could affect their capacity to deliver good outcomes for groups of vulnerable people that they are successfully helping now.”* The most controversial clauses from the local authority perspective have been removed from the final version of the Bill and, as a result, the LGA is reportedly close to supporting the Bill. There is certainly widespread support in the sector for a preventative approach to homelessness backed by adequate funding.

The Chartered Institute for Housing (CIH) is reported to have said “*CIH is supporting the campaigning of Crisis and others for a change in the homelessness legislation in England. The campaign has now reached a crucial point with the Homelessness Reduction Bill, a private member’s bill, tabled by the Conservative MP Bob Blackman, due to be debated in parliament on 28 October. The Homelessness Reduction Bill will change the current law to make sure that councils have a duty to prevent and relieve homelessness irrespective of someone’s priority status, which is the way the current system works. The Bill would extend the time that households are considered at risk of homelessness from 28 to 56 days and would require councils to provide emergency accommodation to people who have nowhere safe to stay to emergency accommodation.*”

Pressure for change

The Government reports that although a statutory framework has been in place to provide a safety net for homeless people in England since the enactment of the *Housing (Homeless Persons) Act 1977*, there has never been a comprehensive duty to secure accommodation for all homeless people.

In the summer 2015 Crisis established an Independent Expert Panel to consider the strengths and weaknesses of the homelessness legislation in England. In [The Homelessness legislation: an independent review of the legal duties owed to homeless people](#) (April 2016) the Panel said that the current safety net has a particular impact on single homeless people who “have no right to accommodation or adequate help to prevent or relieve their homelessness, even if they are sleeping rough.” The Panel favoured changes to place more emphasis on preventative work within a statutory framework, particularly in relation to single people and childless couples.

Select Committee inquiry into homelessness

The CLG Committee launched an inquiry into homelessness in December 2015 in response to evidence that homelessness, particularly rough sleeping, was increasing. The Committee concluded that the service offered to homeless non-priority need applicants is “unacceptably variable.” The Committee is supporting the *Homelessness Reduction Bill* and has called for a “renewed cross-Departmental strategy” to tackle homelessness.

New approaches in Scotland and Wales

For the Scrutiny Panel’s information, both Scotland and Wales have legislated in recent years to address the longstanding lack of support for homeless

single people has added to the pressure for change in England. In Scotland, there is a statutory duty on local authorities to find permanent accommodation for all applicants who are unintentionally homeless or threatened with homelessness. In Wales, local authorities have a duty to prevent all those threatened with homelessness from becoming homeless. Statistics covering the first full year of implementing the new statutory provisions in Wales indicate some success in the prevention of homelessness.

Homelessness is increasing

The Government reports that statutory homelessness in England has increased since 2010. The financial year 2010/11 saw a 10% increase in statutory homelessness acceptances by local authorities, representing the first financial year increase since 2003/4. Homelessness acceptances continued to rise over the next three years but fell by 3% between 2012/13 and 2013/14. The 2014/15 financial year recorded a further increase, with acceptances 36% higher than in 2009/10 (but 60% below the peak in 2003/4). The 2015/16 financial year saw acceptances increase by a further 6% on 2014/15.

The Government goes on to state that the estimated number of rough sleepers in England has also increased each year since 2010. The autumn 2010 total was 1,768 while the autumn 2015 total was more than twice as high at 3,569. The number of rough sleepers increased by 30% between 2014 and 2015, the biggest year-on-year increase since 2011.

Why is homelessness increasing?

The Government reports that the rise in homelessness is due to:

- failure to ensure a sufficient supply of affordable housing.
- the termination of assured shorthold tenancies in the private rented sector,
- Housing Benefit restrictions introduced since 2010 which, it is argued, have made it difficult for claimants to secure housing at rents which Housing Benefit will cover.

Tackling Homelessness

On 17 October 2016 the Government announced a £40 million programme to provide an innovative approach to tackling homelessness. This includes:

- a new £10 million rough sleeping prevention fund to help individuals who might be struggling to get by from ending up on the street; it will also provide rapid and targeted interventions for new rough sleepers, such as helping them to access employment and education opportunities
- also announced were details of £20 million for local authorities to trial new initiatives, responding to the specific needs in their communities and focusing on prevention at an earlier stage; these areas will work with a wider group of at risk people to help families and individuals before they reach crisis point – including through new resident advice services and outreach work with landlords and private sector tenants
- a further £10 million Social Impact Bond programme has also been launched to help long-term rough sleepers who may be bouncing chaotically through the housing system – to address underlying issues such as poor mental health or substance abuse to help stop them from living on, and returning to, the streets

The Government goes on to state that it recognises that homelessness is not just a housing issue, and that for many people complex needs, such as mental health needs, provide a real barrier to improving their life chances. That is why the Government is working across government, including with the Department of Health, through the Ministerial Working Group on Homelessness.

3.3 Core questions

- 3.3.1 The Scrutiny Panel devised a series of core questions that it put to key witnesses over a cycle of meetings (Copy at Appendix B).
- 3.3.2 Key witnesses provided a response to these core questions at the meetings of the Scrutiny Panel held on 22 September 2016, 24 November and 26 January 2017.
- 3.3.3 Salient points of evidence:

Cabinet Member for Community Safety, Northampton Borough Council, Chair, CSP, and Community Safety Manager, Northampton Borough Council

- Rough sleepers are generally highly vulnerable individuals with very complex needs, more often than not also involved in street drinking and begging. Some rough sleepers do have, or have at some point, also had substance misuse problems, mental health problems, and may have suffered a traumatic childhood. It is also often found that there is

a history of homelessness. Therefore, when dealing with this group it is important to recognise that enforcement on its own is not the answer, and their wider health issues need to be taken into consideration. Due to their complex needs, and the chaotic lifestyle of most rough sleepers, a multi-agency case management approach is adopted in addressing individuals.

- The services, assistance and support that are available to people who are homeless, including rough sleepers.-
 - BC Homelessness Team (outreach, support and housing)
 - Street Community Multi-agency Group (holistic case management approach)
 - Oasis House (NAASH and Hope Centre, initial support re addiction and housing)
 - No Second Night Out project (NAASH, initial support re housing)
 - Maple Access Medical Centre (health support) – Bridge Project (intervention and support)
 - C2C Social Action (intervention, support & housing)
 - S2S (substance misuse agency - treatment)
 - Can (substance misuse agency – treatment & housing)
 - Women’s Aid (support and intervention)
- Due to the complex needs, and chaotic lifestyle of most rough sleepers, a multi-agency case management approach is adopted in addressing individuals. Due to increasing concerns about health, welfare and anti-social behaviour, a Multi-Agency Rough Sleepers, Street Drinkers & Beggars working group was established in 2011. Recently this meeting has been reviewed and retitled Street Community Working Group. The main aim is to address health, welfare and dependency issues and provide support to enable rough sleepers to leave the streets, finding suitable accommodation. Cases can be referred by any of the agencies involved. At the meetings cases are discussed with relevant officers, issues identified and a support plan developed which ranges from intervention through to enforcement, if required. It is important to note that agencies, in the first instance, will always try to engage and provide support to the individual to address their health issues, drug & alcohol dependency problems and housing needs. However, if it is abundantly clear that they will not engage, and they are causing issues

on the streets, the enforcement process will be followed. All cases are managed through the ECIN's case management system.

- Community Safety takes the lead on the Killing with Kindness campaign that is run 2 -3 times a year. This sees a multi-agency publicity campaign to raise awareness on begging and rough sleeping to discourage the public from giving directly to those begging, together with the provision of donation boxes at awareness raising events - proceeds are passed to local homelessness charities. The campaign also raises awareness around the complex needs of rough sleepers, beggars and street drinkers.
- Over the past 10 years we have seen a change in the demographic of rough sleepers, with an increase in people from Europe. The main difficulties experienced are that the majority are rough sleeping by choice and do not want to be housed. However, a number of them also have drug and alcohol issues. In some cases they do not have any recourse to public funds, and may also not be exercising their Treaty Rights. There are also some entrenched rough sleepers who do not want to, or find it very difficult to engage due to their long term drug/alcohol dependency issues and anti-social behaviour.
- Over the years there have been varying levels in engagement from agencies. However, the Street Community Working Group has seen a great improvement in joined up working between agencies, both statutory and voluntary over recent months. The introduction of the Outreach workers has also seen an increase in the engagement of rough sleepers with support agencies. There is however, always room for improvement in the approaches taken by agencies, and in providing a more co-ordinated approach
- Awareness of the services, assistance and support available to people who are homeless, including rough sleepers can be increased by:
 - Place more general information on NBC webpages. i.e. what rough sleeping is; how it can be reported; support services available etc.
 - Consider creating a reporting hotline or joining a national hotline such as 'Street Link' - this has been done in other areas, and enables members of the public to report rough sleeper's locations and concerns.
 - Continue to lead on the Killing with Kindness campaign to raise general awareness on rough sleeping, associated issues and support agencies.

- Action that is being taken to ensure that all agencies and members of the public know what to do if they know that someone is homeless or sleeping rough:
 - Implementations of Rough Sleepers Strategy
 - Multi-Agency seminars held
 - Outreach Workers have been promoted with frontline services
 - Multi-agency reviewed and refreshed

**Cabinet Member for Housing and Housing Options and Advice Manager,
Northampton Borough Council**

- Homelessness takes many forms and, although people who are sleeping rough on the streets or living in temporary accommodation are literally homeless, people do not need to be roofless to be classified as 'homeless'. Someone who is sofa surfing or living in unreasonable conditions may still be 'homeless', and someone who is likely to become homeless within the next 28 days may be treated as being 'threatened with homelessness'. There are many causes of homelessness. In Northampton, the main causes are:
 - Termination of an Assured Shorthold Tenancy (AST) because the landlord wants to sell the property or let it to someone else who is able to pay a higher rent;
 - Relationship breakdown (violent / non-violent); and
 - Family or friends no longer able or willing to accommodate. Other causes of homelessness include illness, bereavement, the loss of employment, a sudden reduction in income, harassment and unlawful eviction, tenancy breakdown, unmet support needs, mental health problems, substance misuse, leaving prison or hospital in an unplanned way, and difficulty in accessing private and social housing. Homelessness can have a significant impact on people's health, wellbeing and safety:
 - Disrupting schooling, healthcare, employment and support networks;
 - Placing a strain on budgets (meals, transport, removals and storage);
 - Limiting space and privacy (affects relationships, friends and homework);
 - Causing a deterioration in physical and mental health;

- Reducing self-esteem, confidence and personal hygiene; • Increasing isolation and the risk of physical assault; and
 - Increasing the misuse of alcohol; and drugs
- The Council's Housing Options and Advice Team provides comprehensive advice and assistance to everyone who is homeless or threatened with homelessness. 2 It will work proactively and collaboratively with other services and organisations, as appropriate, to ensure that people receive the help and support that they need in order to avoid becoming homeless or to recover from a period of homelessness. The primary focus of the Council's Street Outreach Team – which works with a wide range of services and organisations – is to provide people who are sleeping rough with the necessary advice and assistance to leave the streets as quickly as possible. The Street Outreach Workers help people who are sleeping rough to access the support they need to address their health needs, alcohol and substance misuse issues, secure an income, and access volunteering, training, employment and suitable accommodation. Reconnection will also be an option where someone is stuck in an area that they do not want to be in and requires help in moving to another area where they will be able to benefit from being closer to their family, friends and support networks.
 - Multi Agency Rough Sleepers Strategy 'TOGETHER we change lives', the borough's ambitious, 3 year multi-agency strategy for ending the need for people to sleep rough in Northampton, was launched in July 2016 and was informed, developed and agreed after a Rough Sleepers Count in March 2016 and a series of workshops attended by more than 30 services and organisations. 'TOGETHER we change lives' sets out 10 strategic objectives that Northampton's multi-agency alliance will achieve by working together. Most of the objectives will be achieved within the next 12 months, with the following 2 years being used to ensure that the new ways of tackling, preventing and reducing homelessness is embedded across all services and organisations in Northampton. The 10 strategic objectives include setting up a temporary emergency night shelter, establishing a multi-disciplinary Street Services Team, working with hospitals, prisons, supported housing schemes and social landlords, developing individual multi agency support plans for individuals sleeping rough, and developing a comprehensive programme of volunteering, training and employment to improve people's life chances. Housing Allocations Policy. The Council is reviewing its Housing Allocations Policy, to ensure that it is fit for purpose and meets its strategic objectives in relation to the allocation of affordable housing. Consideration will be given to the ways in which the Housing Allocations Policy can be amended to support everyone's efforts to prevent homelessness, tackle severe overcrowding, safeguard children and vulnerable adults, facilitate move-on from hospital and

supported housing, and assist the future growth of Northampton. Countywide Housing Protocols for Young People The Council's Housing & Wellbeing Service took the lead in the development and implementation two Countywide Housing Protocols: a Housing Protocol (Homeless 16 & 17 Year Olds) and a Housing Protocol (Care Leavers). 3 The Housing Protocol (Homeless 16 & 17 Year Olds) is designed to ensure that, in Northamptonshire, everyone works together to provide a consistent and co-ordinated response to 16 and 17 year old young people (including teenage parents and pregnant teenagers) who present as homeless and are in need of accommodation or accommodation-related support. It seeks to prevent homelessness and promote and safeguard the wellbeing of 16 and 17 year olds. The Housing Protocol (Care Leavers) is designed to ensure that 'looked after' children are prepared for independent living, leave care when they are ready and move on to settled housing (which may include social rented housing) in a planned way. As well as setting out the roles and responsibilities of Children's Social Care, the Leaving Care Team, the seven local Housing Authorities and the social housing providers, the Housing Protocol (Care Leavers) describes the action that the young person needs to take to apply for social rented housing and what each Housing Authority will then do to ensure that the young person receives an offer of suitable housing when they are ready to leave care and are able to sustain their tenancy when they are rehoused.

- One of the priorities in this year's Housing and Wellbeing Service Plan is to carry out a review of the Council's use of temporary accommodation and reduce its use of Bed and Breakfast (B&B) accommodation. It is hoped this will reduce the number of families and vulnerable people placed in B&B and keep them in Northampton, so as to minimise any disruption to their employment, schools and support networks. For those who are placed in temporary accommodation outside of the borough, every effort is made to ensure that appropriate support is provided and that they are transferred to temporary accommodation in Northampton as soon as possible.
- The Council is planning to undertake a comprehensive Homelessness Review and produce a new 3 year Multi Agency Homelessness Strategy in April 2017. Following publication of the Rough Sleepers Strategy, we are finalising the Action Plan that will set out how Northampton's multi agency alliance will achieve the 10 strategic priorities in the Strategy. 'Task and finish' groups are being established to ensure the successful and timely implementation of the Action Plan. Performance and progress against the 10 strategic priorities and the Action Plan will be monitored quarterly by a multi agency Rough Sleepers Strategy Steering Group and reported to the Council's Cabinet annually.
- In recent years, emergency shelter has been provided for people who are sleeping rough in Northampton when the temperature is forecast to be below

freezing for at least 3 consecutive nights. Shelter has been provided in the Hope Centre (part of Oasis House) and, during their stay, rough sleepers received a hot meal and drinks, and the chance to engage with services that can help them access support and accommodation. 4 As the Council is opening an emergency nightshelter in November 2016 – to end the need for people to sleep rough in Northampton – this winter’s severe weather project (known as SWEF) will operate from the new nightshelter.

- The Street Outreach Workers undertake several outreach sessions each week, where they will go out and look for people sleeping rough in known ‘hot spots’ and town centre locations. They will respond to intelligence provided by members of the public and other services and organisations. Recording every person they find ‘bedded down’, they will continue to work with them to get them off the streets as quickly as possible. Councils are required by Government to complete an annual count of rough sleepers in their area, and submit their findings. This can be done in the form of an actual count, or an estimate. Government prescribes who should and shouldn’t be counted. On 24 March 2016, the Council – assisted by 32 volunteers from a wide range of services and organisations – completed a comprehensive, borough-wide count. Between Midnight and 3.00am, a total of 21 people were found ‘bedded down’. It is believed that only 4 of these 21 people are now sleeping rough in Northampton. The next rough sleepers count is scheduled to take place in November 2016. It is hoped that, as a result of the work undertaken to date and the opening of the emergency nightshelter, less than 10 people – and as close to zero as possible – will be found ‘bedded down’ on the night of the count.
- Some people who are sleeping rough refuse to access local services or take up offers of advice, support and assistance. There are predominantly 2 groups: • Eastern European nationals who are not exercising their treaty rights, a group of which are refusing help and refusing to come off the streets. Reasons cited are mostly an unwillingness to pay rent. The Council is working closely with the Police and Immigration Service to tackle this issue. • Entrenched rough sleepers will often take a long time to gain trust in services before they will start to work with them. They often require a specially tailored, multi-agency solution to make the very difficult transition from the street into a home. As it will often take several attempts to get an entrenched rough sleeper off the streets, it is important that the person sleeping rough and the agencies involved persevere and do not regard unsuccessful attempts as failure. It is important, also, 5 that the person sleeping rough knows that the support will still be there for them when they are ready to try again.
- It would be helpful to have Countywide Protocols for victims of domestic abuse and for offenders, in order to ensure that people are able to move on

from refuges, prisons and probation hostels into settled accommodation in a planned way, avoiding a crisis. Despite Northamptonshire's Housing Protocols for homeless 16 and 17 year olds and care leavers, Children's Services do not always comply with their obligations under the Protocols, leaving the Council to deal with them on its own. The sharp increase in rents, together with lack of access to the private rented sector, is making it extremely difficult for the Council to prevent homelessness by helping people to remain in their existing accommodation or to move to alternative private rented accommodation that they can afford. This reduces the lack of options available to people and, in common with other parts of the country including Northamptonshire, it is contributing to a sharp increase in homelessness in Northampton. In order to prevent homelessness, reduce the Council's use of B&B, improve local housing conditions, increase choice and make it easier for people to access good quality, well managed private rented accommodation, the Council is in the process of setting up a not-for-profit Social Lettings Agency. Although there is still a lot of work to do to link services together, and to get them to work more effectively with one another in partnership, 'TOGETHER we change lives' has acted as a catalyst for change and led to a notable increase in flexibility and willingness to work collaboratively to get the best outcomes for people who are homeless.

- When implementing 'TOGETHER we change lives', Northampton's multi-agency alliance of services and organisations will work together to agree common messages that will be used in literature to promote the wide range of services that are available to end the need to sleep rough in Northampton. It has been agreed, also, that Northampton's multi-agency alliance will develop a comprehensive guide to local services and organisations that offer advice, support and assistance to homeless people, in order to help everyone understand what help is available and to encourage joined-up working and solutions.
- Through a series of workshops – attended by people representing more than 30 services and organisations operating in Northampton – the Council has been able to raise awareness of the work undertaken by the Street Outreach Workers and how people can get in touch to report someone who is homeless or sleeping rough. 6 The Council's website has contact details for the Street Outreach Team, and a link to 'Streetlink'. Streetlink is a web based service that aims to offer the public a means to act when they see someone sleeping rough, and it is the first step someone can take to ensure rough sleepers are connected to the local services and support that they need. The Council is also considering how social media can be used to enable agencies and members of the public to alert it to people who are in need of housing support.

- As part of its plans to establish a Social Lettings Agency, the Council is proposing to appoint an Empty Homes Officer who will work proactively to encourage the owners of empty properties to sell, lease or let their accommodation. It is hoped that the Empty Homes Officer will persuade many owners to lease their accommodation to the Social Lettings Agency or to allow the Social Lettings Agency to manage their accommodation on their behalf. In some instances, the Council will organise and pay for essential works for the owner on the understanding that the cost of those works will be reimbursed from future rent / lease payments. Although most of the work that the Empty Homes Officer undertakes will involve negotiation and persuasion, the Officer will also pursue enforced sales (where the Council is owed money) and compulsory purchase.

Head of Protecting Vulnerable People, Northants Police

- Police attend Rough Sleeper Strategy Workshops, support Outreach events and attend multi agency enforcement days. Police will also deal with various Anti-Social Behaviour issues that are sometimes associated with rough sleeping.
- A Beggars Strategy has been produced. If there is ASB the Police liaises with the Anti-Social Behaviour Unit.
- Police Officers will signpost people to appropriate services
- Some homeless people, albeit it a minority, do chose rough sleeping as a lifestyle choice. Some also suffer from mental health issues.
- Recent evidence shows good joint approach, especially with the NBC Outreach Workers. E-Cins is also available as a tool.
- There are a couple of very vulnerable rough sleepers who are proving difficult to place. They have mental health issues along with drug and alcohol dependency. The Police has a good relationship with the rough sleepers.
- The Police often act as intelligence gathers.
- The Police is instrumental in the Multi-Agency Strategy and the Council's vision for tackling rough sleepers is embraced by the Police.

Case Manager, Anti Social Behaviour Unit

- Homelessness is caused by a variety of factors, as is rough sleeping. Relationship breakdown, unemployment, the inability to manage debt, finances and responsibility are other factors in homelessness. It has increased as the cost of privately rented accommodation has risen. Mental ill-health is a very common factor in rough sleeping. Childhood neglect or abuse is common, as is a history of institutional care, and therefore some rough

sleepers distrust authority figures which makes it hard to engage them in services. Drug and alcohol misuse and offending behaviour are also common factors. Homelessness is quite extensive, with many people having no place to call home and so 'sofa-surfing' with friends, and the extent of that is very difficult to measure. Rough sleeping is easier to measure, although we may never have a completely accurate count of people sleeping rough, for example in squats, cars, communal areas, garages and so on, where it is harder to see them and count them. Rough sleeping is extremely poor for the health, wellbeing and safety of these vulnerable individuals. We see too many of them die young, often associated with drug and alcohol misuse. They can also be a risk to each other and to the community. We know of rough sleeping sex offenders, who enjoy the freedom of their independence and absence of supervision. Their victims are often those who are most vulnerable, are rough sleeping with mental health problems, and substance misuse problems, which make them unable to defend themselves or to be credible witnesses in prosecutions.

- The main service for rough sleepers in Northampton is the NBC Outreach Team directing clients to Oasis House and No Second Night Out. Neither provide emergency accommodation, so there is currently no 'night shelter' provision in Northampton. The NBC Housing and Wellbeing Team provides a wider level of support to homeless people who are eligible for support by meeting the strict criteria. This department is always keen to assist people to re-patriate to areas where they are eligible for support, whether nationally or internationally. Recently, the Outreach Team has started to help people into other accommodation facilities as well as Oasis House, and includes Emmaus facilities, a network of communal homes (none in Northants). This approach is much needed as Oasis House is not suitable for everybody, and other options are essential. 3 Some faith organisations and humanitarian organisations provide different types of assistance and support to the homeless, mostly around food provision and the provision of sleeping bags, blankets and tents. There are other housing providers such as CAN, Maplyn, Womens Aid, Eve (formerly Nene Valley) and C2C Social Action, which are for homeless people who actively engage with the relevant services and meet their particular criteria, level of risks and vulnerabilities. Bridge provides support and activities to service users, and Maple Access provides medical services.
- The Northampton Anti-social Behaviour Unit is a joint NBC and Police Unit which I manage, and which sits under the NBC management of Community Safety Manager Debbie Ferguson. The Unit set up the Rough Sleepers, Beggars and Street Drinkers Working Group several years ago, and has been trying to coordinate the multiagency responses to rough sleeping for several years. Our Unit does not have access to accommodation and does not have

outreach workers, so our success has been determined by the participation and support of other agencies and teams. We have recently refreshed this group, now called the Street Community Working Group, which I chair. We have been promoting the use of E-CINS which is a database on which we can all share information about rough sleepers, amongst the partners, which is essential to enable a joined up partnership response. We tackle the anti-social behaviour caused by this cohort, but always seek to tackle the causes and not just the symptoms, and rely on the local Police (mostly on the Central Sector) to provide the evidence needed for us to tackle the problems. Sometimes our enforcement powers can be used to directly tackle rough sleeping, for example by imposing legal requirements for offenders to work with the NBC team to tackle their homelessness, or with other support organisations.

- The Street Community Working Group which is chaired by the Case Manager is a partnership group, with some partners whose responsibility is to address their health and wellbeing. I base the list of people we discuss on risk, so it's on risk to themselves or to others, and safety is very much on our minds. All rough sleepers are automatically on our case list, because we consider rough sleeping to be a risk to the safety of them all.
- There has been an increase in Eastern Europeans who are sleeping rough in our town. It can be difficult to engage with these people due to language differences, but also because often they do not have any recourse to public funds, and may not be exercising their Treaty Rights. There are a few individuals who do not engage because they do not want to face the responsibilities required for engagement: people who refuse to pay rent, or who refuse to address their drug/alcohol addictions. Some struggle with social interactions particularly with authority figures, often because of traumatic childhood experiences.
- There are some significant gaps in services which need to be addressed: There are some rough sleepers who are not suitable for Oasis House because they are too vulnerable to live amongst the general population there, and who need supported accommodation. We have some especially vulnerable women with complex issues who are homeless, even sleeping rough, and their housing options are limited, because of the risks they would present to other residents. Homelessness is not a universal problem with a universal solution. Each individual has their own reasons for being homeless, and will have their own mix of risks, vulnerabilities, health and wellbeing problems, and each will have a different relational network and history of family breakdowns etc. The emergency night shelter may be unsuitable for some of the more vulnerable people who sleep rough. The provision of supported accommodation is essential. In summary the gaps in services are mostly for the following: For women: female victims of domestic abuse who

are excluded from existing housing options with complex needs and/or certain types of offending history. For men: men excluded from existing housing options, single men with no dependents; sex offenders; male victims of domestic abuse. For young people: those with parents who have addictions or MH problems; careleavers. Generally: people with dual diagnosis (e.g. mental ill-health and addictions); those who are suicidal or self-harm, those with mental health problems which do not fit the criteria for MH services' supported accommodation. Those with a history of arson. Emergency provision. People with no local connections anywhere. Need for better links between services: patients released from hospitals who are homeless; prison releases where this is often at short notice. Improvements have been seen and we need this to continue.

- Awareness of the services, assistance and support available to people who are homeless can be increased by: including rough sleepers? Improve web info, and make leaflets available.
- An option well worth considering is the Housing First model. More information is available :
http://england.shelter.org.uk/data/assets/pdf_file/0008/145853/GP_Briefing_Housing_First.pdf

Director, Children's Services, Northamptonshire County Council

- In July 2016, Northamptonshire Safeguarding Children Board, together with partners, convened a Task & Finish group in order to gain a clear understanding of activity being undertaken in the county to support families and young people facing homelessness
- Representatives from key partners include:
 - Northamptonshire Safeguarding Children Board
 - Northamptonshire County Council – Children's Social Care and Early Help
 - Northampton Borough Council
 - Borough Council of Wellingborough
 - Northampton Women's Aid
- The Safeguarding Children Board Business Manager is a member of the Chief Housing Officers Group which meets bi-monthly. This ensures the NSCB are aware of key issues facing the county's housing departments. Data shows us that for 2015/16, 103 homeless families become homeless

‘intentionally’ (households containing a dependent child or someone who is pregnant) within the meaning of the homelessness legislation.

- This figure is broken down as follows:
 - Northampton – 57
 - Corby – 13
 - Daventry – 12
 - Kettering – 9
 - East Northamptonshire – 7
 - Wellingborough – 3
 - South Northamptonshire – 2
- A further breakdown of the analysis will be undertaken via the Chief Housing Officers Group to understand specific reasons for those becoming intentionally homeless and this will include the number and age of children in the household. The NSCB collects data on the number of initial contacts for 16-17 year olds reporting homelessness. The figure of Q1 2016/17 is 28 to 30th June 2016. A number of joint protocols are in place or being developed: A Housing Protocol for the assessment of 16 and 17 year old young people who present as homeless has been in place since November 2015 and whilst commonly used by partners. The Task & Finish group will review and update the Protocol by March 2017. Northamptonshire Housing Protocol for Care Leavers who are in need of housing and tenancy related support has been effective from 4th April 2016. A Joint Protocol between Northamptonshire County Council and Local Authority Housing Services to address the needs of intentionally homeless families with children is currently in draft format and is being driven by the Task & Finish group. A multi-agency case audit on young people facing homelessness is being undertaken on 23rd September 2016.
- Ongoing priorities for the Task & Finish group are:
 - To understand the data and the impact of homelessness on wellbeing.
 - To understand any deficits across the county.
 - To understand the scale of those facing homelessness with no recourse to public funds
- There is a lot of collaborative working and a lot of impetus to get the Protocol working well.

- A Homeless Family Protocol is being developed, along with a Pre Eviction Protocol and Care Leavers' Protocol. Good progress is being made
- Children's Services, NCC, and Housing and Wellbeing, NBC, are working closely regarding intentionally homeless families. There is a good working relationship. There is a multi-Agency approach. There is a need to look at preventative measures.
- Children cannot be allowed to sleep rough. If a young person is found to be sleeping rough, the appropriate action must be taken to make a referral through the MASH.
- Action is required to ensure that there are clear and robust procedures in place regarding families with no recourse to public funds.
- Legislation "Staying Put" is in place where a young person can stay in care, if in full time education until the end of the academic year that they are 18.
- New Legislation "Staying Close" means young people living in children's homes, and have to leave the accommodation at 18, will be placed in accommodation near to the children's home so that they can maintain links
- The majority of 18 year olds move into independent, supported accommodation. The accommodation has to be 100% suitable for the young person.
- The housing process is complex. It is a legal process that has to be followed. Individuals have to explain how they became homeless.
- Rough sleepers had increased by 20%
- The Night Shelter will open on 6 February 2017, 60 volunteers will be recruited and trained. A co-ordinator and an assistant for the Night Shelter have been recruited. Both have a wealth of experience in managing volunteers.
- The Night Shelter will be open every day until September 2018. There are different arrangements for women.
- People are placed in temporary accommodation outside the borough as there is genuinely no spaces within the borough.
- Rising private sector rents is a key reason for homelessness

Head of Revenues and Benefits, LGSS

Revenues and Benefits, as a service, supports the homeless agenda in a number of ways:

- There is a KPI specifically aimed at dealing with the most vulnerable people - 95% of all Discretionary Housing Payments (DHPs) are review within 14 days.
- The team reach out to NPH and other Housing Associations when there are additional funds encouraging them to get customers who may be struggling to apply.
- There is a fast track process to ensure claims that are subject to eviction are processed immediately
- The Housing & Wellbeing team have direct access to a Housing Benefit Team Leader. They review cases together discuss the issues and work through the best solution for the customer.
- The revenues and benefits service has a dedicated officer to liaise with 3rd sector partners and attend cross party meetings to better understand the wider picture and relay the Revenues & Benefits perspective. Specific meetings of note relevant to the review are:
 - a. Citizen Advice Bureau (CAB) & community Law Service (CLS) group
 - b. Northampton Agency Partnership (Multi agency forum)
 - c. Northampton Financial Inclusion Forum
- There is a regularly updated register of Stakeholders should communications or contact need to be made with specific bodies.
- LGSS chair a Welfare reform Steering group that involves key stakeholders from Northampton Borough Council, Northampton Partnership Homes, LGSS Revenue & Benefits and the Department for Work & Pensions. The group meet fortnightly to discuss upcoming reforms and their impact on individuals, services and finances working together to find mutually agreeable resolutions to the issues the reforms bring.
- When recovering monies owed rent and council tax and considered priority debts and debts are deferred where a customer can show they are already facing hardship that could lead to homelessness. CAB & CLS are able to propose payment plans for customers based on the work they have done with the customer and their understanding the financial circumstances, the customer only has to go through a debt management process once and due to close

liaison with these organisation Revenues and Benefits are happy to accept their recommendations.

- There are various considerations and concessions made when a customer has been identified as vulnerable; these are broadly used when a customer is looking like they may lose their home.
- The service has both a discretionary discount scheme and write off policy that can be utilised should all other methods have been considered and rejected.
- All the Council Tax paperwork has reference to debt and getting professional debt advice, this is replicated on the website and the team are also encouraged to deliver this message when they encounter someone who may benefit from this type of support.
- The team are also empowered to look at other solutions to help customers by checking potential benefit availability or finding out why they haven't moved from a house they can't afford, clearly this has to be done with some sensitivity but it helps to form a picture of the customer, their circumstance and any potential vulnerability.
- The policy to charge Council Tax on empty homes and the premium charge on homes that have been empty over two years would be seen as an incentive to encourage individuals to place their properties back on the housing market.

Director of Public Health, Northamptonshire County Council

- The Public Health team commissions the drugs and alcohol services and through this work has specific services to support homelessness.
Homelessness – Drugs and Alcohol projects:
 1. PHaSE project run by Bridge – 20 housing units for recovering clients of drug or alcohol addictions [partnered with ORBIT Housing]
 2. Outreach worker working with homeless and street drinkers [following blue light – Alcohol Concern principles] working from the Bridge 3.
Work with NBC on the homeless strategy
- Nature of Homelessness Types of homelessness Although the term 'homeless' is often applied in everyday language to people who sleep rough, the legal definition is much broader, encompassing anyone who has no home in the UK or anywhere else in the world available to occupy. This not only

includes people without a roof over their head but people whose accommodation is insecure; those facing eviction, living in temporary accommodation, squatting, people at risk of violence, those housed in property potentially damaging to their health, and those who cannot afford their current accommodation. The range of circumstances denoting homelessness means that there are several categories of homelessness, defined and measured in different ways. These are outlined below. Statutory homeless Households deemed to be homeless, eligible for support from their local council and in priority need. Single homeless Those who are homeless but do not meet the priority need criteria to be housed by their local authority under homelessness legislation. They may live in supported accommodation, e.g. hostels and semi-independent housing projects, sleep rough, sofa surf or live in squats. They may also be referred to as non-statutory homeless. Vulnerably housed People without accommodation, people in temporary, insecure or poor quality accommodation including overcrowding, or those who are threatened with homelessness. Street homeless People sleeping rough. Hidden homeless People not recorded in official statistics, who tend to reside in squats, on the floors or sofas of friends and families, or sleep rough in concealed locations. People experiencing homelessness may move in and out of these categories as their circumstances change and their needs change accordingly. The only people who by law are entitled to be provided with housing are the 'statutory homeless' who meet the criteria for 'priority need'⁵. In these circumstances, local authorities have a statutory duty to find accommodation for the applicant. When homelessness applications are declined Causes of homelessness Shelter divide the causes of homelessness under three distinct categories these are

1. Personal causes of homelessness

2. Structural causes of homelessness are social and economic in nature, and are often outside the control of the individual or family concerned.

These may include:

- unemployment
- poverty
- a lack of affordable housing
- housing policies
- the structure and administration of housing benefit
- wider policy developments, such as the closure of long-stay psychiatric hospitals. These problems require long-term policy

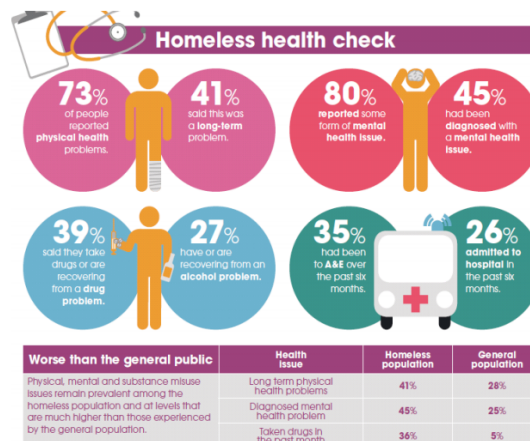
solutions such as changes in the housing benefit system, the building of more affordable homes, and ensuring that a wider cross-section of society benefits from the fruits of economic growth.

3. Reasons given by homeless people for being homeless. The three main reasons for having lost a last settled home, given by applicants for homelessness support from local councils are:

- parents, friends or relatives unwilling or unable to continue to accommodate them
- relationship breakdown, including domestic violence
- loss of an assured shorthold tenancy. However, these reasons are only the catalysts that trigger people into seeking assistance, and not the underlying issues that have caused the crisis to build up in the first place. For many people, there's no single event that results in sudden homelessness. Instead, homelessness is due to a number of unresolved problems building up over time. [1] Statutory homelessness statistics, CLG, 2008 Structural and individual factors are often interrelated; individual issues can arise from structural disadvantages such as poverty or lack of education. While personal factors, such as family and social relationships, can also be put under pressure by structural forces such as poverty. Extent of homelessness and rough sleeping
- A number of different personal and social factors can contribute towards people becoming homeless. These may include one or more of the following:
 - individual factors including lack of qualifications, lack of social support, debts - especially mortgage or rent arrears, poor physical and mental health, relationship breakdown, and getting involved in crime at an early age
 - family background including family breakdown and disputes, sexual and physical abuse in childhood or adolescence, having parents with drug or alcohol problems, and previous experience of family homelessness

- an institutional background including having been in care, the armed forces, or in prison. Tackling these problems is a complex business and normally requires support from public bodies, friends and family, combined with a lot of hard work from the individual or family in trouble. Public support might include intervention, advice, counselling, training or provision of alternative accommodation by a local authority where appropriate. However, in all instances Shelter believes these problems can be best resolved when the person or family in question has a decent and secure home.
- Public Health currently do not have enough intelligence and insight to determine the true extent of homelessness, however plan to do so through a homelessness needs assessment. Impact of homelessness on health, wellbeing Using information supplied by over 2,500 people, 'The unhealthy state of homelessness' report highlights the extent to which people who are homeless experience some of the worst health problems in society. The report uncovers the barriers many individuals face accessing treatment, as well as the impact of ill health on NHS A&E, hospital, mental health and substance misuse services. Homeless Link first published national data in it's 2010 Widespread ill-health report The new 2014 report makes clear that we are yet to see a real improvement in reducing the scale of health problems faced by those who have experienced homelessness. Those with experience of homelessness are also more likely to have unhealthy lifestyles, which can cause long term health problems or exacerbate existing issues. Analysis of the latest data found that 77% of homeless people smoke, 35% do not eat at least two meals a day and two-thirds consume more than the recommended amount of alcohol each time they drink. Despite 90% of those surveyed reporting they are registered with a GP, a significant number of homeless people report they are not receiving help with their health problems.

Diagram 1 below illustrates health problems experience by those who are homeless:



- In summary those experiencing homelessness of any sort have poorer access to health services and worse health outcomes.
- Public Health is planning to complete a Health needs assessment for homeless in 2017/18, this should contribute to the insight and intelligence required to inform future commissioning intentions for homelessness.
- A needs assessment would help to identify gaps. Further intelligence and insight could be provided through the providers of the service
- The Making Every Contact Count (MECC) is a programme to raise awareness and opportunistically delivery of consistent and concise healthy lifestyle information. Enabling individuals to engage in conversations about their health. People working with the homeless could be included as a group to train informing the wider workforce

Manager, Maple Access Centre

- The perception of the Maple Access Centre is that there is inadequate housing provision and also housing support in Northampton, with over-rigorous exclusion of the patients of Maple Access requesting housing.
- Homelessness and the threat of it destabilises patients with existing mental health problems and increased the workload of the Maple Access Centre
- There is lack of liaison between prisons and the Council, often patients are released from prison without anywhere to live, or these housing is reallocated where they were sentenced.
- Homelessness increases physical health problems too. Patients attend A&E more for example.

- Patients who are mentally unwell and are rough sleeping are vulnerable and at risk of physical and sexual assault on the streets.
- Medical and psychological therapeutic treatments have limited success until a patient is adequately housed.
- Support, services and assistance that is available to homeless, including rough sleepers:
 - Oasis House, Hope Centre, No Second Night Out, Jesus Fellowship, Salvation Army, Maple Access GP Service.
- The homeless service is difficult to access. Homelessness and rough sleeping can only be reduced by the provision of housing.
- The Maple Access Centre is open access and on the day appointments for patients to address physical and mental health problems at the surgery. There are 3 x weekly sessions at Oasis House with a Mental Health Nurse and Clinical Support Co-Ordinator, outreach visits, mental health team and support worker, weekly clinic with GP with Special Interest in complex mental health needs and substance misuse.
- The Maple Access Centre records homelessness as no fixed abode (NFA) and as of 24 November 2016, this was 218 patients registered in this way. This figure underestimates the extent of homelessness as many patients are “sofa surfing” and have “care of” addresses.
- Patients with severe psychological problems or addictions are often barred from services as their behaviour can be very challenging and anti-social.
- Homeless people are vulnerable and need advocacy via sympathetic and accessible outreach workers.
- In the opinion of staff at the Maple Access Centre, homelessness has increased since the DWP Benefit Reforms. Some patients are incorrectly completing medical assessments and losing their benefits.
- There is awareness of services, assistance and support available to people who are homeless but there is a lack of services and inadequate support to cope with the volume of homelessness in Northampton.
- Members of the public and agencies are frustrated, little is done for homeless people.

General Manager, Hope Centre

- The Hope Centre does not cover homelessness amongst those with statutory entitlement.
- Homelessness is complex and there is no single group of people with common characteristics who are homeless in fixed circumstances. Their

circumstances are often fluid. It is most important that homelessness is not conflated in the minds of either policy makers nor the public with rough sleeping as these are different things. The Hope Centre estimates that at any one time, based on the numbers attending the centre, that there are up to 200 people who are single or couples without children who are homeless in the broadest sense at any one time.

- Homeless people vary from a core of regular rough sleepers – perhaps up to 35, with a further group of up to that 200 total who whilst generally not street homeless, may include some who will sleep rough from time to time, as circumstances arise. In the main this wider group are sofa surfers, staying with others, but between such places and after rows etc some people will sleep rough for short periods, sometimes just for a night. Therefore although on a specific night the numbers may be no more than 15-20 counted, this masks a much larger number of people who are functionally homeless in the sense of not having anywhere permanent to live, nor the means to get housing, who will dip in and out of street homelessness.
- Causes are similarly wide. Street homelessness is often associated with problems like mental ill-health and substance misuse and up to 80% of all street homeless are substance misusers, sometimes with very significant problems. However the degree to which the one causes the other are variable, with the life on the street always accentuating previous, less entrenched substance use, to the degree it is not easy to generalise. However amongst longer term street or sofa surfer homeless, substance misuse and mental health issues are hugely prevalent.
- About 20% of the Hope Centre service users are Eastern European and they have a similar pattern of demography and behaviour, but are nearly all men.
- Many of these bouts of substance misuse are in turn brought on by relationship breakdown, by redundancy or unemployment, which start a spiral towards homelessness, especially in men who make up $\frac{3}{4}$ of the 200 total (a quarter of whom are under 25). Other factors include the bedroom tax, as parents have nowhere to put up children; the unavailability of social or affordable housing, landlord practices (evictions to raise the rent, unwillingness to keep people in housing who have lost their jobs or let to them in the first place), and the stagnation of wages against housing costs. Many of these causes are rooted in successive policies of government of all types who have failed to take a strategic approach to housing which fails to make available enough affordable housing with support. Support is crucial and Hope does not support a simplistic Housing First approach which implies that support is not needed for the client group described above. People need support to stay and survive in tenancies.

- The effect of homelessness in the broad sense I have described above is well known; homeless people have poor mental and substance health, poor physical health, malnutrition, poor teeth, poor eyesight (both by inattention, substance misuse and diet) poor foot health, lice and poor health from smoking. Whatever their state when they became homeless, without help these problems magnify and entrench them in homelessness, along with offending too, and for some women, sex work. Their confidence to seek work and keep work is massively eroded making their chances of getting it or keeping it slimmer.
- Hope does not supply housing nor offer supported housing. Other providers offer this, such as NAASH, Mayday, CAN (Richmond Fellowship) etc. There are also various religious organisations that provide street outreach to people on the street and also a couple of other centres that offer food, like the Jesus Centre. The Maple Access clinic offers mental health and some substance misuse help specifically for the client group
- Hope offers two areas of support: a day centre and support to get training and work.
- **The day centre:** Each year the Hope Centre sees over 1000 individuals within its day centre, on average seeing about 100+ people each day. They are largely single adults and couples: staff do not work with young people under 18 in the day centre although about a quarter of its service users are 18-25. Not all are homeless; many have been housed but come to us for continuing support, which helps prevent future homelessness, alongside work to get people housed.
- Each month the Hope Centre provides around 1400 meals, 3,500 cups of tea and coffee, 700 hours of computer access, 350 hot showers and around 300 items of clothing (all provided with donated food and clothing).
- Daily activity and educational workshops are run, which help staff to engage in different ways with its clients, such as Cookery sessions, Art and Creative Writing classes, gardening at the community gardens, as well as practical support such as free access weekly to a Chiropodist and hairdressing. We are based in Oasis House, within short walking distance of the town centre and nearby railway station. This is a purpose built centre, opened in May 2012 with the aim of providing a co-ordinated support service to help the homeless and disadvantaged in Northampton. We work with a number of other agencies e.g. Northampton Borough Council, Midland Heart, NAASH, Maple Services (local authority, social housing provider, supported accommodation provider and GP surgery respectively) all based within the building to ensure we can provide 'wrap-around' care service to its clients.

- Each day, staff provide support to around 100 vulnerable and disadvantaged people. These individuals come to us destitute and broken, individuals who for a range of reasons are leading chaotic lives, characterised by offending, homelessness, drug abuse and long term unemployment. We work with hundreds of people each year who have learning difficulties but who have never been assessed or received the support they need.
- As a day service, the Hope Centre makes a huge impact in terms of addressing the immediate needs of its service users – The Hope Centre can provide hot showers, a decent meal, and access to a dentist, podiatry, befriending and encouragement. By working with people at risk of more serious street homelessness, and overcoming their problems, staff act to prevent homelessness and minimise harm. Staff help people access accommodation and support them through into getting and settling into a home, such as classes on how to buy food and cook a meal. Although not funded to do so, our staff and volunteers help people to maintain those tenancies with support through our day centre, and skills, confidence and work related activity.
- **Training and Work:** Whilst our day care support is incredibly important and necessary, staff work hard to enable service users to achieve a long term and sustained recovery and escape acute poverty and homelessness. The Hope Centre has adopted a simple slogan to say what the Hope Centre does : offering a hand-up, not a hand-out.
- Staff help the clients to access support for the complex health related issues, particularly drugs, alcohol, gambling and mental health, that prevent them getting work. This comes through developing referral links to substance misuse services, but also through accessing funding to provide some of these services itself. However, the Hope Centre does not see itself as a therapeutic service providing a high degree of counselling and therapy. Rather, the Centre deploys counselling skills to motivate people to access such services elsewhere, and through providing activities, offer ‘therapy’ in a looser sense through diversionary and relaxing activities, including its gardening projects and reflexology; and more practical support to help people get jobs, focused on improving their confidence and skills.
- The most effective means of moving out of destitution is through employment, and the Hope Centre sees itself as playing an increasing role within this sector, building on its pedigree as a social enterprise and its Big Lottery funding.
- The Big Lottery grant provides the Hope Centre with five years of funding to develop a pathways to independence project, identifying people who could benefit from work to help them get work ready, finding them training,

volunteering, work experience or actual jobs, and then supporting them within those jobs to avoid failure. Staff work closely with local businesses to support this project and to provide opportunities, and through its related social enterprise, staff are able to directly provide work to clients as part of their rehabilitation.

- **Pathways to Independence Project.**

- This is a transformational programme, funded by the Big Lottery over five years, which seeks to support individuals with complex and multiple needs on a path towards recovery, economic and social independence and resilience.
- Individuals begin the programme receiving low-level support to deal with their immediate needs – a hot shower, a change of clothes, a cup of a tea and a chat with a befriending volunteer. The aim at this stage is to engage and build trust, encouraging individuals to keep visiting the centre and develop the confidence to participate in activities.
- Those who are ready to participate in more formal support will be provided with weekly keyworker sessions, where their needs and goals will be assessed and a support plan developed with them. It is through these sessions that their support will be directed, with the keyworker making appropriate referrals to external specialist provision and facilitating the individual's inclusion on its wellbeing and learning programmes where they will receive the support they need to address issues relating to mental health, addiction and personal care alongside confidence building and soft skills development through activities such as arts and craft, creative writing, IT and sports.
- As each individual progresses, they will be supported to undertake more structured and work focused personal development activities. These will include volunteering in its programmes and for those ready to take up the challenge, undertaking training with its social enterprise, Hope Enterprises, or with other supportive local businesses.
- The ultimate aim of its programme is to have enabled its service users to have moved closer to or into employment. Staff know that this will be easier for some than others, and for some people, moving into a regular volunteering role is more achievable and desirable. Success will look and feel different for each individual, and they will experience many intermediate outcomes before they move into the destination of their choice.
- The Hope Centre operates a related social enterprise which gives skills, training and work to people leaving its services and also those from other services who are looking for training. This provides two trades: catering and

tool repair. In catering people receive up to Level 2 catering training (City and Guilds). In tool repair people are placed for a four week block where they learn to repair, recycle and sell garden tools. In a year the Centre has trained up to 100 people.

- In the past the SWEP protocol has meant that in successive nights of extremely cold weather the day centre opens at night to provide immediate, basic care for very short periods. The Hope Centre is not sure how this will be affected by the new night shelter. It has not been discussed.
- The rough sleeper count is a snapshot of people visible on that night but it fails to identify the larger numbers of people who are effectively homeless .
- The Hope Centre works closely and co-operatively with all other charities working in this field, with substance misuse agencies and with the Maple Access GP service.
- There is a shortage of suitable hostel provision and staff believe the Centre could be funded to do more work with street drinkers who are homeless from substance misuse funding. More detoxes need to be available and rehabilitation.
- There is a need to do more with young people at risk of becoming part of the 200 group above prior to the point they enter this, which the Hope Centre would be interested in working on. The same is true of offenders in custody. Prison and Probation services link very badly with services outside, an historic, national problem that has never been solved.
- More can be done to prevent tenancies breaking down. Hope staff provide support for some people in this category but could do more if funded. Some supported housing provision could be improved to reduce breakdowns and renewed homelessness. These services are not well integrated- for example the Hope Centre has training places available, which would help people stabilise in new tenancies and in treatment, for example but get few referrals from such services.
- It needs to be ensured that the general public is made aware through more campaigns when it is appropriate and how to help this client group..
- Homeless people do not need education about available services. The client grapevine flawlessly lets people know what is available
- Of the 100 people a day that come to the Hope Centre, approximately 30 say that they have slept rough. There is a need to understand the difference between not-housed (including so-called sofa surfers) and rough sleepers.

- Sometimes the only way that rough sleepers can keep warm is by drinking a lot of alcohol; some do this.
- The Hope Centre provides a range of services including food, shelter, clothing, haircuts, and foot care.
- A national funded project is in operation that trains clients.
- The Hope Centre works closely with the Maple Access Centre.
- An Outreach Service is provided by NBC. These officers are the prime link to the Street Community, as are the Community Wardens and the Police.
- Just because an individual is sitting in a shop doorway it doesn't necessarily mean they are always homeless. The Outreach Workers regularly come into contact with Rough Sleepers, many of which are known to staff at Oasis House. When intelligence is received it is always acted upon.
- Housing an individual is just part of the solution, organisations such as the Hope Centre provide assistance and support.
- It is crucial that vulnerable people are housed with supportive housing.

Manager, NAASH

- Homelessness has many causes some we have encountered are: a change to benefits with sanctions, PRS landlords selling houses, relationship breakdowns due to addictions, lack of PRS, customers with Complex needs unable to maintain a tenancy, crack house closures, accrued rent arrears.
- Large amounts of EUs sleeping rough with no recourse, no specific support to access documents, support back to work (as what used to happen).
- Rough sleepers from other areas sleep in the borough as there is no provision in their own LA for non priority homeless or substance misuse services. Northampton has these services.
- Organisational concern that rough sleeping has become underground, although not visual in town centre many sleeping where not seen / outside of town centre.
- Rough sleeping has a negative effect on both physical and mental health. If customers are not picked up in a timely manner their wellbeing deteriorates and they can also become used to rough sleeping and therefore difficult to engage and house. The longer someone rough sleeps the worse any addiction gets and also high percentage gain another addiction. Rough sleeping is very unsafe for anyone numerous rough sleepers have been assaulted, abused and bullied. The longer someone rough sleeps the more complex their needs become
- NAASH provides the support within Oasis House and subsidises this service to ensure a high level of support is provided to each customer. NAASH works

as an advocate for the customers and partnership works with the landlord to sustain their tenancies and address any issues which have prevented them from maintaining a tenancy previously.

- NAASH manages a no second night out service which has 11 beds in a manned project and an additional 51 units of accommodation within Northampton, to whom 2 tenancy sustainment officers are allocated to the units. NAASH recently leased 14 properties from a private landlord who was going to sell them and evict the tenants. NAASH took on the tenants along with the properties. These customers have a mix of issues including substance misuse, mental health, no access to LA housing register, rent arrears, workers with no deposits for PRS, couples who cannot access other supported housing projects, customers with no recourse can be taken in for a fixed period to enable them to find work, those evicted from other NAASH projects (where the risk is manageable)
- NAASH initially subsidise the rents for workers on low income and assist them to access affordable long term housing, NAASH has a budget to undertake community events to benefit both the community and give customers a sense of purpose. Gardening and clearing projects have been undertaken in local church grounds regularly,
- NAASH currently NAASH works closely with the Police to reduce ASB and street drinking from its customers, S2S to engage those with an addiction, The Bridge Substance Misuse Programme to enable customers to fill their time productively, The Police / probation to refrain customers from street drinking, offending, private rented landlords to provide additional properties where needed, NPH to access long term housing for those eligible
- NAASH regularly moves customers around the services to prevent eviction and ensure appropriate placements are completed.
- NAASH has also worked to house customers on release from prison where they had accessed services before their sentencing.
- NAASH uses their ability to move people around their services to ensure a timely placement is offered. NAASH works in partnership with a local GP surgery, who provides both mental health and physical support on site at Oasis House for all NAASH customers to use. This GP surgery also supports NAASH staff within their work, this enables NAASH staff to refer in at an early opportunity for concerns around someone mental health, physical health or substance misuse.
- NAASH has contact within the PRS and supports landlords who in turn provide some accommodation to the customer group NAASH deals with. NAASH is working with PRS landlords to encourage more to work in partnership and hopefully provide additional accommodation / move on from the hostels.

- NAASH is proactive around exclusions with its customers living within its No second night out project to prevent evictions. This enables customers to keep their tenancy but gives flexibility to staff to prevent anyone in an unmanageable state from entering the manned project.
- Anyone who has been in NAAH services are made aware that they can always access for advice at any point.
- There is a gap where someone has complex needs as hostel environments' are not conducive to their support needs.
- More outreach during the day and night and clear information given on what is provided where. Information posters at strategic points in the borough
- NAASH is an active part of Killing with Kindness held yearly in the town centre. NAASH undertake public education around this alongside the Police and NBC

Chief Executive, HealthWatch Northants

- There had been a lot of pressure on HealthWatch recently. He went on to advise that a draft report was currently available and when in final format it would be sent to the Scrutiny Panel for its information.
- As part of its evidence gathering, HealthWatch spoke with 25 homeless people of which 9 were from Northampton. They also spoke with five support Agencies and the Hope Centre. A lot of positive comments were received.
- The draft report recognises the value of the Hope Centre, access to Mental Health and other signposting. It was felt that provision in Northampton was very good, in fact a lot better than elsewhere in the county.
- A number of rough sleepers sleep during the day as they feel safer, but by doing this they can miss out on food. Mental health is an issue. 70% of all clients sleep rough. Alcohol use is a barrier to accessing mental health support.
- The draft report consists of a number of recommendations around:
 - The appointment of assertive outreach workers to avoid the duplication of provision of service
 - Surgeries should be on a theme basis, for example, dental provision model
 - A community psychiatric nurse is based in the Night Shelter.
 - Alcohol and drugs support services for homeless people is holistic. Homeless people interviewed confirmed they want to be treated holistically.

4 Desktop Research

- 4.1 Desktop research was undertaken regarding organisations and Local Authorities noted for their best practice procedures in tackling homelessness.

SHELTER - Homelessness: Early Identification and Prevention - A Good Practice Guide (2007)

- 4.1.1 SHELTER reports that its guide aims to assist local authorities and local agencies in their ability to identify people who are at risk of becoming homeless. The guide highlights current good practice examples of how to identify these vulnerable groups and individuals, and offer support to prevent homelessness occurring.

- 4.1.2 It is reported in the Guide that there are a number of groups that research, over many years, has identified as being at a greater risk of homelessness than the general population. These include:

- Young people
- Care leavers
- Ex-offenders
- People with mental health problems
- Refugees
- Gypsies and Travellers (housed and on sites)
- People with drug or alcohol addictions
- People leaving hospital
- Ex-members of the Armed Forces

- 4.1.3 The Guide also provides details of good practice undertaken by Local Authorities.

Homeless Link – Transatlantic Practice Exchange (2014)

- 4.1.4 Homeless Link published a report in 2014 that details reports from 10 frontline professionals on an international exchange of knowledge and practice.

4.1.5 The report details that exchange took place between May and July 2014 with participants spending up to two weeks on placement with their hosts and other local organisations.

4.1.6 The report states that the nature of public services is changing and the perception of and the public value that they create is being challenged. Welfare Reform, funding changes, increased localism and changing demographics have produced significant challenges to the way things are done.

DEPARTMENT FOR COMMUNITIES AND LOCAL GOVERNMENT – MAKING EVERY CONTACT COUNT (2012)

4.1.7 It is reported that the aim of the report is to make sure every contact local agencies make with vulnerable people and families really count:

- Tackle troubled childhoods and adolescence – through interventions to turn around the lives of the most troubled families, and by promoting innovative approaches to youth homelessness
- Improve health – including improving outcomes for homeless people with dual drugs/alcohol and mental health needs
- Reduce involvement in crime – Support to Police and Crime Commissioners, improving offender access to private rented accommodation
- Improve skills, employment and financial advice – new housing demonstration projects helping claimants budget and manage rent payments
- Pioneer social funding for homelessness

The report details ten challenges for Local Authorities.

4.1.8 Full details of the desktop research undertaken are provided at Appendix C.

5 Site Visits

5.1 The Chair of the Scrutiny Panel, together with members of the Scrutiny Panel, Housing Officers and the Scrutiny Officer.

5.2.1 Site visits were scheduled :

- Two representatives of the Panel to visit the Hope Centre based at Oasis House
- Representatives of the Scrutiny Panel to visit a variety of temporary accommodation around the borough

5.2.2 HOPE CENTRE

5.2.1 Councillors and Officers visited the Hope Centre on Monday, 12 December 2016 between the hours of 10am and 11:30am. .

5.2.2 Councillors visited the day centre and observed a number of clients eating breakfast. Porridge is provided free of charge, as are cups of tea. Should individuals require a cooked breakfast a small charge is made. There is also a small charge for cereals.

5.2.3 Lunch is also provided at the centre. There is a small cost for the lunch. Individuals can also use the showers.

5.2.4 Clothes are donated and individuals can buy items for a small cost. There is a real need for underwear.

5.2.5 Various groups and sessions are put on during the day such as foot care, cookery, art, life skills, sport, Internet café (free of charge for 90 minutes use).

5.2.6 Councillors also visited Hope Enterprises. Hope Enterprises is a social enterprise and community interest company set up by Northampton's Hope Centre, a charity, with more than 40 years' experience working with the town's homeless, poor and excluded.

5.2.7 Through giving training and work, at a fair rate of pay, in a supportive environment, we help people to re-join society and stand on their own two feet

5.2.8 Hope Enterprises has three elements: -

Hope Catering - contract catering and buffets for business meetings, parties and events.

Hope Tools - a recycling and training social enterprise, refurbishing second-hand garden tools

Hope PAT Testing - routine safety checking for all electrical appliances

5.2.9 Councillors had sight of the refurbished tools that had been refurbished by Hope Tools. Staff work alongside Hope Centre clients to recycle and refurbish tools and build products for gardens.

5.3 TEMPORARY ACCOMMODATION

5.3.1 On Wednesday, 14 December 2016 between the hours of 2pm and 4pm, Councillors, along with Officers, visited a variety of temporary accommodation.

5.3.2 The site visit started with a visit to one of the units at County Chambers in the town centre. Councillors met with a woman who was temporarily living here. The flat was airy and spacious. It had one bedroom with two single beds and bed settee in the lounge area. She had been at the flat since August 2016 and had recently bid successfully for a property. Councillors were informed that on one occasion the woman had observed a rough sleeper sleeping inside the doorway of the shop next to the temporary accommodation. The Management Team at County Chambers are aware and are monitoring the situation, individuals temporarily residing at County Chambers have been advised to ensure that the main access door is kept closed.

5.3.3 The site visit then went to an 8 bed and breakfast property in Abington. The proprietor will only take couples and families. The property is spacious. Three of the rooms have the provision of an en-suite and there are also two shared bathrooms and a kitchen that can be used. Free Wi-Fi is provided.

5.3.4 The site visit went on to a recently acquired temporary accommodation flat in Blackthorn. It had been recently decorated and furnished. The flat has one bedroom, with two single beds. The lounge area has a sofa along with a dining table and chairs. The kitchen had been recently refurbished which consisted of Electric Cooker, Washing Machine and Fridge, the bathroom consisted of a bath, over bath shower, toilet and wash basin.

5.3.5 The site visit concluded by driving to another location observing a couple of houses that are designated temporary accommodation, from the outside.

6 Community Impact Assessment

6.1 This Scrutiny Review investigated how the Borough Council and its partners prevent homelessness and respond to those without homes in the borough.

6.2 The Scrutiny Panel, in having regard to the general equality duty, was mindful of the protected characteristics when undertaking this scrutiny activity; so that any recommendations that it made could identify disproportionate and unintended potential positive and negative impacts on any particular sector of the community, including any potential mitigation required. This was borne in mind as the Scrutiny Panel progressed with the review and evidence is gathered.

6.3 In order that the Scrutiny Panel obtained a wide range of views, a number of key witnesses provided evidence as detailed in section 3 of this report.

6.4 Any recommendations regarding homelessness would consider impact and potential mitigation as appropriate and relevant across all protected characteristics. Impact assessments are integral to any reports including actions plans.

6.5 Details of the Community Impact Assessment undertaken can be located on the Overview and Scrutiny [webpage](#).

7 Conclusions and Key Findings

7.1. After all of the evidence was collated the following conclusions were drawn:

Causes of homelessness

7.1.1 Evidence received highlighted Homelessness takes many forms and, although people who are sleeping rough on the streets or living in temporary accommodation are literally homeless, people do not need to be roofless to be classified as 'homeless'. Someone who is sofa surfing or living in unreasonable conditions, for example, may still be 'homeless', and someone who is likely to become homeless within the next 28 days may be treated as being 'threatened with homelessness'.

- 7.1.2 There are many reasons why people become homeless. In Northampton, the main causes of homelessness are as follows:
- Termination of an Assured Shorthold Tenancy (AST) because the landlord wants to sell the property or let it to someone else who is able to pay a higher rent;
 - Relationship breakdown (violent / non-violent); and
 - Family or friends no longer able or willing to accommodate.
- 7.1.3 Other causes of homelessness include illness, bereavement, the loss of employment, a sudden reduction in income, harassment and unlawful eviction, tenancy breakdown, unmet support needs, mental health problems, substance misuse, leaving prison or hospital in an unplanned way, and difficulty in accessing private and social housing.
- 7.1.4 Homelessness can have a significant impact on people's health, wellbeing and personal safety by:
- Disrupting schooling, healthcare, employment and support networks;
 - Placing a strain on budgets (meals, transport, removals and storage);
 - Limiting space and privacy (affects relationships, friends and homework);
 - Causing a deterioration in physical and mental health;
 - Reducing self-esteem, confidence and personal hygiene;
 - Increasing isolation and the risk of physical assault; and
 - Increasing the misuse of alcohol and drugs.
- 7.1.5 The Scrutiny Panel emphasises that homelessness can happen to anyone and an individual does not have to be roofless to be homeless.
- 7.1.6 Homelessness can be damaging on people's health and wellbeing. Help and assistance is available from a number of Agencies. The Scrutiny Panel welcomed the work that is ongoing regarding the 'TOGETHER we change lives' strategy for ending the need for people to sleep rough in Northampton.
- 7.1.7 The Scrutiny Panel highlights the fact that, just because someone is sitting in a shop doorway with a sleeping bag doesn't necessarily mean they are homeless. Evidence received highlighted the fact that most of the people who are begging in Northampton are not homeless; most are living in supported

housing or social rented housing, and some travel into Northampton from other areas. The Scrutiny Panel felt that if non rough sleeping beggars could be tackled, it would help rough sleepers.

7.1.8 The Government prescribes the way in which Rough Sleeper Counts and Estimates are carried out, and people who are staying in shelters, hostels and squats are not included in the figures.

7.1.9 The Scrutiny Panel was pleased to note that the Police have a good relationship with rough sleepers and the agencies that are helping rough sleepers to come off the streets.

Multi Agency working to support homelessness and rough sleeping

7.1.10 The evidence received highlights the good work that is being undertaken by Authorities and organisations and there is a need to ensure there is no duplication of efforts. Joint working and multi agency working is key in tackling, preventing and reducing homelessness and rough sleeping.

7.1.11 The Scrutiny Panel was pleased to hear that, in July 2016, the Northamptonshire Safeguarding Children Board, together with partners, convened a Task and Finish Group in order to gain a clearer understanding of the activity that is being undertaken in Northamptonshire to support families and young people who are facing homelessness.

7.1.12 The Scrutiny Panel felt that there is a need for the Council to produce an advisory leaflet (that can be distributed to all agencies and services) which sets out very clearly how the homelessness and housing advice services are organised and managed in the borough and how people can access them. This will make it easier for customers, but also the groups that refer them.

Health and Wellbeing of homeless people, including rough sleepers

7.1.13 Rough sleepers can be very vulnerable and have complex needs. Many have (or have previously had) substance misuse issues, mental health problems and/or suffered a traumatic childhood.

7.1.14 The Scrutiny Panel welcomed the establishment of the Emergency Nightshelter and the fact that this winter's severe weather project (known as SWEP) will operate from the building (for men only).

7.1.15 Those experiencing homelessness of any kind have poorer access to health services and worse health outcomes.

7.1.16 As part of its evidence gathering, the Scrutiny Panel received preliminary details regarding the findings of the HealthWatch report. The Scrutiny Panel welcomed the HealthWatch report and the precis of the recommendations contained within it. The Scrutiny Panel recognised that a number of rough sleepers sleep during the day as they feel safer, but by doing this they can miss out on food, accessing support services and gaining assistance. The draft report consists of a number of recommendations:

- Assertive outreach workers should be appointed in order to avoid unnecessary duplication of services
- Surgeries should be theme based, like dental provision
- A community psychiatric nurse should be based in the Nightshelter.
- Alcohol and drugs support services for homeless people should be holistic. The homeless people who were interviewed confirmed that they want to be treated holistically.

Effects of homelessness

7.1.17 Evidence presented to the Scrutiny Review highlighted the effects of homelessness:

- Disruption of schooling, healthcare, employment and support networks
- Lack of space and privacy (affects relationships, homework and friends)
- Reduced self-esteem
- More financial strain (meals, transport, removals and storage)
- Physical / mental health
- Self-esteem, confidence and personal hygiene

- Isolation, risk of assault, loss of support networks
- May abuse alcohol and drugs
- May commit petty crime / anti-social behaviour
- Nowhere safe to store personal possessions

Temporary accommodation

7.1.18 The Scrutiny Panel was concerned that, sometimes, families that are placed in temporary accommodation outside of the borough. By placing families in temporary accommodation some distance from their children's schools, and expecting families to meet the transport costs, it puts additional financial burdens on the family. Although there is a severe shortage of temporary accommodation in Northampton, every effort needs to be made to ensure that anyone who is placed in temporary accommodation outside of the borough is brought back to Northampton as soon as possible.

7.1.19 The Council's temporary accommodation includes self-contained council housing, self-contained privately managed housing and Bed & Breakfast.

7.1.20 Evidence received detailed that on 11 January 2017, Cabinet approved the establishment of Guildhall Residential Lettings, an in-house social lettings agency. The social lettings agency will manage and let properties that are leased by the Council or owned by individuals and businesses. If landlords want to manage the property themselves, it can find them suitable tenants.

7.1.21 The Housing & Planning Act 2016 strengthens local authority powers to tackle criminal, rogue and irresponsible landlords with the introduction of Banning Orders, a tougher 'fit and proper person' test and Civil Penalties of up to £30,000, together with changes to Rent Repayment Orders. The Scrutiny Panel supported the establishment of the Guildhall Residential Lettings, an in-house social lettings agency.

7.1.22 Whilst undertaking site visits to temporary accommodation in the borough, the Scrutiny Panel was pleased to note the high quality accommodation that was offered. One bed and breakfast accommodation in particular provided free Wi-Fi which was felt to be an important facility to be offered.

Extent of homelessness and rough sleeping in the borough

7.1.23 Evidence received showed that as of July 2016, homelessness in Northants consisted of 705 homeless acceptances in 2015/16 (up 28% on 2014/15.) As

of July 2016, homelessness in Northampton consisted of 321 homelessness acceptances in 2015/16 (up 11% on 2014/15). This is consistent with the Government findings¹ that homelessness in England has increased since 2010. The 2015/16 financial year saw acceptances increase by a further 6% on 2014/15.

8 Recommendations

- 8.1 The purpose of the Scrutiny Panel was to review how the Borough Council and its partners prevent homelessness and respond to those without homes in the borough. Scrutiny Panel 3 therefore recommends to Cabinet that:

Multi Agency Working

- 8.1.1 The Council undertakes a comprehensive review of homelessness in the borough and develops a new 5 year Homelessness Strategy that is designed to substantially reduce the number of households that become homeless and the number of homeless families that are living in temporary accommodation.
- 8.1.2 The Council establishes a Homelessness Strategy Implementation Group to direct, co-ordinate and monitor the action that the Council and its partners take to tackle, prevent and reduce homelessness in the borough.

Improving access to homelessness services

- 8.1.3 The Council publishes an information leaflet, (electronic, paper copy and in languages commonly known to be spoken by rough sleepers), for distribution to all Agencies, services and more widely available to members of the public, which sets out very clearly how its homelessness and housing advice services are organised – together with details of the services provided by other organisations and services – and how people can access them.
- 8.1.4 A comprehensive review of rough sleeping services is carried out to ensure that all services are operating efficiently and effectively, and that there is no unnecessary duplication of effort between the Nightshelter, the Hope Centre, Oasis House, NAASH and other services.

¹ Department of Communities and Local Government – Statutory homelessness and prevention and relief, April to June 2016: England

- 8.1.5 A Homeless Forum is established that engages with other statutory and non-statutory Agencies.
- 8.1.6 The Council carries out an annual review of rough sleeping in the borough that goes beyond the limitations of the Statutory requirements, for example personalised Development Plans are produced for each rough sleeper and that these continue to be implemented even after they have moved into permanent housing.
- 8.1.7 There is active and meaningful involvement of individuals who have lived experience or service users with the development and delivery of services, and the implementation process.
- 8.1.8 The Council considers its approach to assisting individuals with multiple and complex needs.

Improving access to health services

- 8.1.9 The existing arrangements for meeting the health needs of homeless people (including rough sleepers) are reviewed and strengthened – informed by a Health Needs Audit - to ensure that rough sleepers and people who are living in temporary accommodation are not only aware of, but are also helped to connect with, local support services.
- 8.1.9 Details of the medical advice and treatment available to people who are homeless and/or sleeping rough – at various locations, including Maple Access and Oasis House – are communicated to all organisations and services in order that they can be shared with people who are homeless or at risk of becoming homeless.

Temporary accommodation

- 8.1.9 The Council develops an ambitious plan, using SMART outcomes, for minimising its use of Bed & Breakfast accommodation and out-of-borough temporary accommodation.

8.1.10 The Council works imaginatively and collaboratively with Northamptonshire County Council, and other Agencies and organisations, to provide more support for homeless families in temporary accommodation and mitigating any adverse effects on the families' finances and the children's schooling and healthcare.

8.1.11 All nightly-purchased temporary accommodation that is used by the Borough Council should provide free Wi-Fi facilities.

Overview and Scrutiny Committee

8.1.12 The Overview and Scrutiny Committee, as part of its monitoring regime, reviews the impact of this report in six months' time.

8.1.13 It is recommended to the Overview and Scrutiny Committee that when monitoring takes place, a previous service user is asked to attend the meeting to provide information.