



Northampton Borough Council Homelessness and Rough Sleepers review

Midland Heart response

March 2019



Top line

Midland Heart is committed to working with partners across the Midlands to end homelessness. In Northampton, we manage Oasis House, a unique service combining a range of facilities with supported accommodation. We are seeking to increase capacity here in recognition that initial support can make all the difference in enabling vulnerable adults to escape a cycle of homelessness.

Key points

- We value our close partnership with Northampton Borough Council and other local agencies, which enables us to pool resources to provide a broad range of specialist services to tackle homelessness. However, there is a lack of strategic commissioning across a number of statutory agencies.
- Viewing rough sleeping as a 'housing problem' overlooks support needs that can result in repeat homelessness. Well-coordinated specialist support services and a voluntary duty to prevent homelessness would help to address more effectively underlying problems preventing independent living.
- Whilst Housing First has achieved some notable successes, it is not always the right approach and can be hard to 'get right'. To prove effective, Housing First requires the right combination of suitable accommodation and tailored support.

Introduction

Midland Heart is a leading housing organisation, delivering homes and services across the Midlands that enable people to live independently. We own and manage 33,000 homes and are dedicated to providing decent, affordable homes combined with excellent services to over 70,000 customers. Founded in 1925, we are a trusted not for profit organisation whose social purpose drives us to reinvest all our surplus back in to our customers, staff and homes.

We have an expanding development programme with an ambition to deliver over 600 new homes a year. We build homes principally for low cost rent in line with our

social purpose. We are also committed to spending £100m over five years to improve the condition of our existing homes.

Detailed responses

1. Please provide details of what contact or involvement your organisation has with people who are homeless (sleeping rough or 'hidden') and the services and organisations that are able to address their needs.

Midland Heart manages Oasis House, a high-quality scheme that offers temporary accommodation and support to homeless people in Northampton. There are 48 units at the scheme: nine direct access beds and 39 move-on apartments. The scheme also has an IT suite, training rooms and onsite laundry.

Access to the service is via Northampton's homeless gateway team. If customers present themselves as homeless directly to the service, then they will be assessed by a member of the gateway team or out-of-hours NAASH staff.

Oasis House services are delivered in partnership with Northampton Borough Council, who have their gateway housing solutions team on site. These include advice and support with employment options and substance misuse. NAASH deliver accommodation-related support to the residents of Oasis House, making referrals to alternative accommodation in cases where this is more appropriate for individual needs.

Local charity the Hope Centre operates a day centre for the homeless and disadvantaged at the premises, offering food and supplies along with signposting and befriending initiatives. This facility is soon to move to another location nearby, enabling us to expand provision at Oasis House via conversion works to the ground floor, in order to assist larger numbers off the streets.

2. Please provide details of your understanding of the causes and extent of rough sleeping in the borough.

The most recent count of rough sleepers in Northampton indicated that numbers had increased from 13 in 2017 to 26 in 2018. These figures do not include those in emergency shelters on the night of the count.

Homeless Link has identified trauma, compounded by poverty, as a significant underlying cause of entrenched or repeat homelessness. Adverse experiences can result in personal problems affecting ability to sustain a tenancy, such as mental illness and substance misuse, which may in turn be linked to crime and antisocial behaviour.

3. Please provide details of your understanding of the impact that rough sleeping has on the safety, life expectancy and health of people who are

sleeping rough, and the implications that rough sleeping has for safeguarding and community safety.

The rough sleeper population is far more likely to suffer from chronic illness, and diagnosis of more than one long-term medical condition is not uncommon among this group. Whilst mental health problems and substance misuse may contribute to homelessness and make it harder to escape into permanent settled accommodation, homelessness can itself trigger or exacerbate these problems. According to Government data, rough sleepers are also 15 times more likely to fall victim to crime such as violent assault.

Research by Crisis and Sheffield University into the implications of rough sleeping has drawn sobering conclusions. Currently the typical life expectancy for a rough sleeper in the UK stands at 47, indicating that sleeping rough can reduce your lifespan by approximately 30 years. Among women, rough sleeping reverses the usual expectation of a longer-than-average life: female rough sleepers, on average, can expect to live to the age of 43.

4. Please provide details of your understanding of the nature of the work that is currently being undertaken by Northampton Borough Council and local groups, services and organisations to engage with people who are sleeping rough in the borough.

Northampton operates a homeless gateway team from several offices in the town. One of these offices is based at Oasis House, along with Outreach services. Local Outreach teams also encourage rough sleepers to use the Borough's Night Shelter and to seek treatment for any medical problems.

The Borough's permanent Night Shelter operates on a referral-only basis for single males. Service users receive wraparound support from a staffed facility, securing benefits and offering advice with the aim of building stable foundations from which to work toward independent living. Our own plans to work with the Council to expand provision in the Borough will enable females to benefit from the same support.

5. Please provide details of your understanding of how effective Northampton Borough Council and local groups, services and organisations have been in engaging purposefully with people who are sleeping rough and helping them to come off the streets.

The Outreach team based at Oasis House proactively engage with those sleeping rough within the Borough to increase use of the accommodation provided within the Night Shelter. This reduces the incidence of rough sleeping at a local and responsive level, and encourages uptake of support.

Recently, following perceived increases in local needs, Northampton Borough Council applied to central Government for additional funds for a Winter Shelter and increased numbers of outreach staff. The Winter Shelter operating until 31 March 2019 provides crucial accommodation for the Borough's rough sleepers

during the cold months. This offers a robust approach to addressing the risks associated with outdoor sleeping.

6. What changes would you like Northampton Borough Council and local groups, services and organisations to make in order to engage more effectively with people who are sleeping rough and to help them come off the streets, in a planned way, as quickly as possible?

Tackling homelessness is about much more than providing access to accommodation, as homelessness is a usually symptom of other deeper problems. A quick solution may therefore not be an effective one; securing a tenancy is not necessarily a successful outcome in itself, and in many cases, a tailored programme of support is required.

High quality support services are crucial but unfortunately, many of the specialist agencies relied upon to provide support for people with complex needs are under unprecedented strain. We would welcome further assurance about the long term funding arrangements for specialist support services, and in particular the role that health service providers will play in helping the housing sector to tackle this problem.

7. In what ways do you think the 'Housing First' model can be used most effectively to reduce rough sleeping in the borough, and in what ways (if any) could your organisation work differently to ensure its success?

Housing First has proven successful in other countries (notably Finland) and has the potential to succeed locally. However, it should not be considered a panacea. Where Housing First has been effective, it is because homelessness has been recognised as more than a housing problem and interventions have focused on addressing underlying issues. These may include problems relating to mental illness or substance misuse.

Housing First requires the right combination of a permanent, secure home in a positive community setting, coupled with intensive support. A failure to get the formula right could result in a 'drag' effect on recovery, or in the proliferation of antisocial behaviour in the surrounding neighbourhood. Where a Housing First model relies on scattered general-needs homes, the need for a robust network of effective long-term support services will be even more critical. Reassurances would also be needed that support will not be withdrawn after a fixed timeframe.

Our involvement with Housing First services is limited in contrast to our substantially larger support contracts. We do, however, have a small commissioned service in the Staffordshire area delivering support for up to eight entrenched homeless people at any one time. This is facilitated through a regular multi-agency meeting comprising of key agencies including NHS, specialist mental health and substance misuse, welfare rights, housing and employment. These meetings have seen a significant increase in levels of engagement from those on the programme.

As a landlord, our experience with Housing First has been challenging. Delivering our housing management function when service users disengaged with support was difficult, and affected the balance of our communities. In some cases, once customers received accommodation with a security of tenure, this resulted in a significant decrease in engagement.

In terms of successful outcomes, within the last year two of the eight people on our Staffordshire-based Housing First programme were so entrenched they were unable to sustain their accommodation and struggled with engagement. Five have been successfully housed, however, and continue to engage with services.

A recent example is an entrenched rough sleeper who historically had low levels of engagement with services. On attendance at the meeting, he was diagnosed with a mental health condition as well as substance addiction. His engagement continued, enabling him to sustain accommodation and address longstanding support needs successfully for the first time in 17 years.

8. Please provide details of your understanding of the nature and extent of 'hidden homelessness' in the borough, including the profile of the people affected and what contact (if any) they have had with Northampton Borough Council, Northampton Partnership Homes and/or other local advice and support providers.

Unless hidden homeless people such as sofa-surfers present to the council as needing accommodation, they would remain largely unknown. However, our figures show that our applicants for rehousing in the Northampton area are relatively likely to be experiencing overcrowding. Over 13% are seeking a larger home to better meet their needs.

This represents a higher proportion of our applicants than for most other local authority areas across the East Midlands. Although not all of these households could be classed as homeless on the basis of statutory overcrowding, we believe that in some cases there may be adults within the household who are struggling to access suitable accommodation of their own.

9. Please can you suggest ways in which services and organisations can connect with, and meaningfully engage with, harder to reach groups?

Charitable organisations with high levels of engagement may have different thresholds for acceptable behaviour for service users within their premises. Attempting to enforce a different standard of behaviour within a commissioned service, with robust policies and procedures relating to safety, can then prove challenging. Customers will ultimately go to the resource where they feel most comfortable, though this may not be the most effective for their individual needs.

A consistent approach to acceptable behaviours and safeguarding across all support providers (whether commissioned, specialist or chainable) would further

improve our ability to engage with people. Where failure to take up support services results in persistent antisocial behaviour, enforcement action should remain a last resort to discourage this adversely affecting the public.

Of course, the hardest to reach may be unwilling to advertise their presence at all. We are aware of encampments outside the main town centre area, which are not always easy to find. Records of Winter Shelter users indicate that around two thirds are unemployed A10 European nationals with no recourse to public funds, and this group may try to escape notice to avoid contact with immigration services for fear of removal to their country of origin.

Where unemployed EU nationals have no entitlement to assistance, NAASH will aim to reconnect individuals with friends either in the UK or elsewhere, or support them to access income and private-sector accommodation. There is therefore a helpline advertised that people can contact if they see rough sleepers anywhere, and the Outreach team will investigate.

10. How are data, statistics and demographics gathered and used to meet the needs of men and women who are homeless?

Two rough sleeper counts take place per year, for which the borough is divided into 10-15 sections for pairs of counters to check. Some local charities believe that this may underestimate the true number of rough sleepers, but this is a recognised problem with head counts and the method is accepted as best practice to gain awareness of changes to rough sleeper populations.

Following the rough sleeper counts the Night Shelter was brought into being. Very accurate statistics are recorded in relation to people using the Night Shelter and also for people using the Winter Shelter at Oasis House.

11. What do you think are the main reasons for hidden homelessness, and why do you think people sofa-surf and are without settled accommodation?

There are many diverse reasons that could lead to someone finding themselves without a permanent home. As mentioned above, we believe that hidden homelessness can in some cases be linked to overcrowding where sufficient affordable housing cannot be found. Research by Shelter and the WHO has shown overcrowding to impact upon mental health and educational attainment, but also to carry adverse effects for familial relationships. It can therefore also result in partners or adult children moving out to stay with friends or relatives on an informal basis.

Midland Heart believes that shortages of suitable housing stock contribute to this problem. This is reflected in the Borough's adopted local development plan. The plan acknowledges that within Northampton a need has been identified for more larger family homes, and also for smaller properties with one or two bedrooms. The recent freeze on Local Housing Allowance, and limitations placed

on entitlements for under-35s, may further limit existing housing options within the Borough.

We are keen to expand our development output across the Midlands, and are committed to playing our part in addressing the shortage of affordable homes.

12. How effective do you think the Council is at informing people and organisations about its homelessness policies and procedures, and in what ways could it improve its communication?

When Northampton Borough Council originally started the 'Together we change lives' strategy, many partner agencies, charities and local business were involved in forming the strategy and surrounding policies. At the time there were regular meetings to discuss its application, which we found very helpful. In recent years there has been less contact to discuss policies, though we received an update regarding central Government's recent new strategy. A return to regular contact meetings would be welcome.

13. Do you have any other information you are able to provide in relation to homelessness and rough sleeping?

Meeting the needs of our service users continues to be a challenge in respect of engagement with statutory services. A substantial number of our safeguarding requests are assessed as not being a priority, even when residents pose a threat to their selves or others.

Clinical intervention options remain limited and support providers continue to receive referrals for a higher level of need than the service is commissioned for, or able to deliver. Statutory multi-agency led accommodation-based services for higher needs and difficult-to-engage rough sleepers would provide a real opportunity to address key factors in homelessness, that cannot be met through nonstatutory support provision.

In cases of complex and multiple needs, such as undiagnosed mental health issues with substance misuse exacerbating the mental health condition, mental health teams are unwilling to engage without substance misuse crisis intervention. Conversely, specialist substance misuse services would prefer for mental health conditions to be addressed first. This approach in itself is a hindrance to addressing multi-faceted needs which cannot be addressed in isolation.

We would like to see the health service taking on a stronger lead in providing services that will help address the root causes of homelessness, along with increased collaboration with other agencies. A fully joined-up approach – whereby Housing, Adult Services, Probation and Public Health collaborate in pooling resources and jointly commissioning responses – would enable a greater impact on homelessness and rough sleeping. This should include efforts to

persuade statutory agencies to voluntarily sign up to a duty to prevent homelessness, over and above the duty to refer detailed in the Homelessness Reduction Act.

14. Do you have any other recommendations for the Scrutiny Panel to consider including within its final report?

We would support wider awareness and promotion to the public of the impact of donating cash to beggars, and how significantly this can hinder an authority's ability to address the issues of rough sleeping and substance misuse. However, this should of course be approached sensitively to avoid adverse effects on rough sleepers themselves.

Contact

For further information about Midland Heart or our Northampton Borough Council Homelessness and Rough Sleepers response, please contact Chris Luke, Head of Supported Living (christopher.luke@midlandheart.org.uk) or Vicky Mason, Policy Specialist (vicky.mason@midlandheart.org.uk).