



**Single Homelessness and Rough Sleeper  
Accommodation Strategy – 2020 to 2027**

## Contents

	Page no
Introduction	2
Vision	5
Objectives	5
Equalities Considerations	7
Client groups and Accommodation Options	8
Overall Demand	10
Existing Breakdown of Need	11
Meeting the Demand	13
a) Early help	13
b) Commissioning	14
c) Creating a robust allocation and referral process	16
d) Units of accommodation – flexible approach	16
e) Mixing units of accommodation	17
f) Accommodation that needs to remain separated	17
g) Units of accommodation that need to be decommissioned	17
h) Location	18
i) Standard of accommodation	18
j) Replacing Canonsgrove and anticipating future demand – accommodation options	20
k) Move on	22
l) Floating support	23
Finance model	24
Timescales and delivery plan	25
Summary	25

## Introduction

SWT as the local housing authority has a statutory duty to prepare a homelessness and rough sleeper strategy. We prepare this in collaboration with the other district councils within Somerset. The current version of the countywide Homelessness and Rough Sleeper Strategy was prepared in 2019 and adopted by SWT during 2020. The adopted strategy covers all forms of homelessness and sets out a range of actions against the following six priorities:

- Provision of adequate affordable accommodation
- Provision and effective use of temporary accommodation
- Support the Government's commitment to end rough sleeping
- Support prevention and early intervention
- Enable specific client groups to access suitable accommodation
- Maintain strong relationships across partnerships

Monitoring and delivery of the strategy is currently coordinated through Somerset Housing Managers Group (HMG) although going forward this responsibility will pass to the newly created Somerset Homelessness Reduction Board (HRB).

The strategy can be viewed here:

[Housing strategy \(somersetwestandtaunton.gov.uk\)](https://www.somersetwestandtaunton.gov.uk)

*Why is there a need to focus on single homelessness?*

As the local housing authority we seek to help all who are homeless, whether they are singles, couples or families. By far the greatest numbers that we support are singles. And as a service responding to crisis, the significant majority of presentations are by singles. Many of these have suffered trauma and are struggling with a range of conditions such as poor mental health, poor physical health, and drug and/or alcohol dependency. Over the past five years we have seen a general worsening of case complexity. We work with several housing providers who support these individuals (over 90% are singles) in a range of accommodation settings. This is often paid for by enhanced housing benefits. In addition, there are a range of support services that seek to help such individuals – these range from mental health teams, General Practitioners (GPs), social care practitioners and specialist drug and alcohol teams. These services are all costly to provide.

A recent report by Faculty for Homelessness and Inclusion Health (2021) presented a summary of some of the health-related challenges facing those who are homeless / rough sleepers, together with challenges for those who are seeking to support them (extract below):

- *The annual cost of unscheduled care for homeless patients is eight times that of the housed population*
- *Homeless patients are overrepresented amongst frequent attenders in Accident and Emergency (A&E) departments.*

- *High costs are associated with multi-morbidity, but can mask the fact that many homeless people have poor access to healthcare, with less resource allocation than they need. Despite this expenditure, the average age of death for homeless patients is just 43 for women and 47 years for men and is associated with the reduced quality of life caused by multi-morbidity*
- *Standardised mortality ratios for excluded groups, including homeless people, are around 10 times that of the general population*

These statistics are a stark reminder of the health risks faced by those individuals (singles) who are most excluded from society. Much of this is rooted in trauma, and much of that can often be traced back to childhood trauma. However, there is hope. The recent success of the Canonsgrove facility at Taunton (60 bed singles homelessness campus) has demonstrated that, with the correct accommodation and person centred / wrap-around support, that it is possible to help people make the journey from a complex crisis to stability and independence. At the same time, we have evidenced a fall in presentations at hospitals, other health settings as well as a declining need for a variety of other support. Accordingly, we have the ability to improve peoples' lives and make significant savings in service delivery.

#### *Tackling single homelessness within SWT*

Accommodating single homeless is a significant challenge for any locality, especially when seeking solutions for individuals with multiple/complex problems. Over recent years this challenge has increased due to the repercussions of the recession and austerity. This has resulted in ongoing funding pressures, changes to benefit regimes, and worsening case complexity. The pressures across SWT are significant. SWT has a high number of complex homeless and rough sleepers. The ongoing Covid emergency, and the government's 'Everyone In' initiative, shined a spotlight on the challenges of accommodating and supporting complex clients. It also presented opportunities to find lasting solutions to this difficult problem.

To plan a way forward, multi-agency workshops (on-line, facilitated by Ark Consultancy) were held during the during Summer 2020. A range of partners were involved, from district councils, housing providers, and the commissioners and providers of support services. These workshops highlighted several important contextual considerations. These include:

- Locally, we have strong partnership arrangements (strategic, tactical and operational)
- There are not enough units of accommodation both in the social rented and private rented sectors
- The opportunity to improve commissioning and support arrangements through the Somerset Homelessness Reduction Board
- Increasing case complexity and the threat of Covid to worsening the current levels of homelessness

Partners agreed that now is the time to build on the pace and good will generated by the Covid response/'Everyone In'.

Commonly agreed ambitions are to:

- End rough sleeping
- Develop a prevention approach that is client centred
- Provide flexible pathways within a range of accommodation options
- Provide quick and easy access to support services
- Facilitate timely move on to secure and affordable accommodation with ongoing support available if required

The strategy that follows reflects these ambitions. It is also informed by *Better Futures for Vulnerable People in Somerset (Better Futures Programme – Somerset Strategic Housing Group (SSHG)/Ark Consultancy - 2020)*. This is a Local Government Association (LGA) sponsored multiagency programme that seeks to provide appropriate support to the most vulnerable in society. It also seeks to close the 'revolving door' that often traps customers in a perpetual 'toing and froing' between services. Ark have recently been re-appointed (July 2021) to help with the delivery of this programme.

## **Vision**

*Rough sleeping in Somerset West and Taunton will end by 2027. An active programme of Early Help and prevention will be established to proactively reduce the chance of homelessness and escalating need. For those requiring support, all single homeless people shall have access to a client centred service that will provide excellent coordinated support within a range of appropriate accommodation options that can flex according to changing demand*

## **Objectives**

The objectives for the Single Homeless and Rough Sleeper Accommodation Strategy (SHRSAS) are grouped under four themes: Accommodation, Support, Cost and Commissioning

Theme 1: Accommodation options will be improved:

- Suitable by reason of size, affordability, and accessibility
- Self-contained wherever possible
- Flexible
  - between level of need
  - between singles and families where appropriate
  - between licence and tenancy where appropriate
- In locations consistent with demand and access to services
- Sufficient by reason of numbers, including an availability of accessible units and move-on options

Theme 2: Support services will be enhanced:

- Early Help – a neighbourhood approach that includes 'no wrong door'
- Prevention first – seeking to stop the escalation of problems

- Improved working between housing options, the providers of accommodation and housing management, and support services to provide:
  - Improved initial assessment and placement
  - Person centred approach – right client, right place
  - The right level of housing management and support (wrap-around)
  - Timely and effective move on
- Provision of floating support – a service that goes with the client on their journey
- Working together to ensure tenancy sustainment
- Working together to develop customer skills and access to training and employment

Theme 3: Costs will be managed, and as far as possible:

- Ensuring affordability for the client
- Ensuring affordability for SWT and providers (accommodation, housing management, and support)
- Reducing the use of enhanced Housing Benefit
- Eliminating the need for Bed & Breakfast accommodation and other expensive leasing arrangements
- Working with partners on joint funding proposals to maximise the opportunities for collaboration

Theme 4: Commissioning will be enhanced:

- Support the Somerset Homelessness Reduction Board to
  - Develop strategic integrated commissioning arrangements across health, care and housing
  - Improve the coordination and effectiveness of multi-agency tactical and operational delivery
- Local (SWT) Service Level Agreements and associated partner performance will be improved by
  - Co-production
  - Flexible use of budgets
  - Focus on client wellbeing –physical and mental
  - Monitoring the right things e.g. client wellbeing, duration of stay, move on, nomination rights

The strategy that follows explains how the above will be delivered. However, it is important to note that a significant proportion of this requires a multi-agency response. Much of this is being coordinated through the *Better Futures* programme (BF) that sits within the remit of the Somerset Homelessness Reduction Board. The BF programme can be viewed here:

[Housing Advisers Programme - Better futures for vulnerable people, Somerset | Local Government Association](#)

## Equalities considerations

Equalities considerations are important to the provision of new accommodation options and support services. The recently adopted Somerset Homelessness and Rough Sleeper Strategy (2020) is supported by a comprehensive Equalities Impact Assessment which highlights a range of issues. These are highlighted below, together with a comment on how the delivery of the SHRSAS will help.

### Gender

- Currently no specific accommodation / service for females\*

\*other than for victims of domestic abuse, which is to be reviewed under the provisions of the Domestic Abuse Act 2021

SHRSAS: There is a need for female only provision. This matter will be actively explored with providers and appropriate provision will be made

### Age

- Significant issues for under 35s and young adults – rising incidence of case complexity, care leavers and access to supported accommodation and move-on accommodation, overcrowding, sofa-surfing, reluctance to use / lack of awareness of Homefinder
- Need to consider ageing population. We are seeing more presentations from older homeless clients with age related health issues

SHRSAS: The provision of more supported accommodation, together with additional move-on facilities, will actively help both young and elderly. As will enhanced support services including (importantly) tenancy support. Outside the remit of the SHRSAS, other work such as regulating HMOs and improvements to Homefinder (digital access) will also help

### Disability

- increasing complexity of mental health problems for rough sleepers/complex homeless, lack of accessible/adapted properties for physical and mental disabilities

SHRSAS: A key requirement is to improve the provision of support services, including mental health and drugs/alcohol. In addition, we understand that we require 8 units of accessible accommodation. We are working with providers to enable this provision.

### Armed Forces Veterans

- Case complexity, need for support services, access to Homefinder

SHRSAS: The accommodation requirements for armed service veterans are currently met at Victory House, East Reach (10 bed spaces). We consider that, at present, there is no need to increase this provision.

### Race and ethnicity

- Gypsy, Roma and Traveller community: There is no transit facility within Somerset, and there is a shortage of permanent accommodation\*
- BAME: Language barriers and a lack of understanding of the housing system are potential challenges in accessing support. BAME community are over-represented in the rough sleeper community (15%)

\*Note: this is an issue for the whole of the GRT community, and not specific to 'singles'

SHRSAS: Consideration of accommodation matters for the gypsy and traveller community is to be addressed within the Gypsy and Traveller Accommodation Assessment that is due for completion later in 2021. The CCG, districts and the county council currently fund Gypsy and Traveller Liaison Officers (GLO) that are available for advice and assistance. For the BAME community, we need to ensure that data is being captured within appropriate risk assessments, and that this information is used to identify appropriate accommodation and associated support

In addition to the above, SWT also recognises the following characteristics when developing policy: - Carers, Rurality, Low income, Economic and Social Disadvantage, Digital Exclusion. The people we are seeking to support with this initiative will all have one or more of these characteristics. All will benefit from the enhanced provision that the SHRSAS will deliver

## **Client Groups and accommodation options**

Client groups can be distinguished by their level of need. Each level of need often requires bespoke accommodation solutions.

### Low Needs

*Description:* Periods of rough sleeping and homelessness. Some needs that require support. Can move to independent living accommodation in 6-11 months

*Accommodation:* Private Rented Sector (PRS), Houses in Multiple Occupation (HMO), social housing, temporary accommodation (TA)

*Support:* Floating support, some support services

### Medium Needs

*Description:* Require intervention of 1+ statutory service, inconsistent engagement, with sustained support could move to independence in 12+ months

*Accommodation:* Low to medium supported accommodation

*Support:* Intensive Floating Support, coordinated and sustained support service engagement

### High Needs



*Description:* Entrenched rough sleepers, revolving door clients, multiple statutory services involved, minimal or no engagement, never/rarely been independent

*Accommodation:* Highly supported accommodation

*Support:* Intensive, coordinated and sustained support service engagement

The accommodation options as stated above need to be understood, as there is a need for nuanced provision:

- Short-term assessment accommodation for those believed to be in priority need including emergency assessment accommodation for rough sleepers
- Temporary self-contained accommodation for those owed a 'statutory duty' from the council's housing service
- Multi Agency Public Protection Arrangements (MAPPA) Accommodation for high risk offenders approved by police and probation
- Accommodation for those new to the streets
- Supported short/medium-term accommodation for medium/high risk individuals
- Trainer flats – to prepare individuals for independent living
- Accommodation for those escaping domestic violence
- Female only provision
- Veteran (armed forces) Accommodation
- Dry house / abstinence house
- Under 25's with additional support needs, including crash pads – Pathways to Independence (P2I) service
- Move-on (shared and self-contained)

In meeting the housing needs of young people (aged 18-25) we work closely with Pathways to Independence (P2I). P2I is a Somerset County Council commissioned service that provides 48 bedspaces across SWT (based in Taunton and Minehead). The service is provided by the YMCA Dulverton Group. SWT employs a P2I coordinator that is based within the Housing Options service. Their role is to work with statutory services and the YMCA (multi-agency panel) to identify the best option for the individual, including seeking (where possible) a return to their family. The current contract for the P2I service has been extended until April 2023.

There are other accommodation providers that we work alongside to help support vulnerable customers – some of these are listed below:

- Rethink – mental health support
- Second Step – mental health & drug and alcohol support
- Women's refuge – for victims of domestic abuse (often out-of-area placements)
- Life Project – 6- 8 units available for vulnerable women (pregnant and/or with children under 5 years of age)
- Julian House – 8 units for high risk offenders

## Overall Demand

Demand for a single person homeless accommodation by client group is shown in the table below.

<b>Table 1: Single homeless and rough sleepers Headline summary of demand for units of accommodation</b>	
All demand	374
Current provision	287
Current provision - unsuitable*	74
Gap	87
Need (unsuitable + gap)	161

\*Some of which can be reconfigured into more suitable accommodation

### Assumptions

We have modelled future need on the current need at May 2021 (i.e. after lockdown starting to ease). There are downward and upward pressures that we expect in the future:

- Downward – reducing demand: There will be a significant cultural shift in the Homelessness Service with a greater emphasis on early engagement and prevention. We shall also work collaboratively with partners to deliver neighbourhood based early help services
- Upward – increasing demand: Covid will have negatively impacted the economic fortunes of many, as well as people's mental health and relationships. We can expect to see upward pressures on demand through job losses, affordability and debt; evictions due to rent arrears and Section 21 (eviction) backlog being tackled, relationship breakdown, domestic abuse etc; plus reduced availability of B&B accommodation as 'normal' (e.g. tourism/business) client groups return

The above assumptions and figures have been tested and verified in consultation with local providers.

The analysis of demand includes those whom the council has a 'statutory duty' to support, together with those the council may offer a 'voluntary duty'. Those for which we have a 'statutory duty' include those with dependent children, pregnant women, homeless in emergency, prison leavers, members of the armed forces, and those who are vulnerable by reason of age (young and elderly), domestic violence or mental/physical disability.

The analysis indicates that there is demand for 374 units of accommodation for people who fall into the single homeless category of whom 287 have their accommodation needs met through the council or its partners.

There is an accommodation gap of circa 87 units for this client group. This gap is largely accounted for by the chronic shortage of move-on accommodation (see item j) below.

The analysis also identifies that some of the single homeless are housed in accommodation which is unsuitable for one of the following reasons:

- Bed and Breakfast – which is not ideal for the customer due to its very temporary nature, also the high cost to the Council
- Shared accommodation – which is unsuitable in some circumstances e.g. single people with complex needs, or when mixing different levels of need
- Accommodation where management practice and support services do not appear to be helping customers stabilise their lives and develop skills to sustain tenancies
- Accommodation which insufficiently reflects the diversity of the client group i.e. low, medium and high support needs, female and male customers, arson risk, registered sex offenders, drug and alcohol, mental and physical health needs
- Accommodation location that does not sufficiently match locations of need of customers
- To reflect anticipated loss of accommodation currently available (such as temporary units in Sneddon Grove, Taunton due for regeneration).

It is estimated that there are 74 units of accommodation that are deemed 'unsuitable' and that need to be decommissioned / considered for alternative use. See section g) below

In addition to the above, it is also recognised that there is often a failure of partner services to provide the necessary support to the customer. This impacts on the ability of the housing provider to stabilise and work with vulnerable clients. This is an issue for all accommodation settings, although good progress has been made at Canonsgrove and Lindley House with the development of hub arrangements. There are also good practices being developed where the service can flex and come to the client (physically/digitally).

### Existing Breakdown of Need

We have sought to assess current provision against whether clients have low, medium or high needs. For this exercise, we have discounted those currently in P2I provision, mental health provision and move on accommodation.

<b>Table 2: Existing breakdown of need</b>					
<b>Location</b>	<b>Total clients</b>	<b>No or very low needs</b>	<b>Low needs</b>	<b>Medium needs</b>	<b>High needs</b>
SWT B&B	17	0	2	7	8
SWT TA	7	1	3	2	1

At home	1	1	0	0	0
Lindley House	39	0	5	15	19
Arc Satellite inc Norie House	76	7	50 (inc: Norie 4)	19 (inc: Norie 6)	0
Veteran's house	8	0	5	3	0
The Beach Hotel	12	5	1	4	2
Canonsgrove	51	13	15	15	8
No First Night Out	4 (1 void)	0	3	1	0
RSI	5 (3 void)	0	3	2	0
Total need	220	27	87	68	38

## Meeting the demand

Below are described the essential elements that comprise this Single Homeless and Rough Sleeper Accommodation Strategy. The *Better Futures Programme* is an important reference point, as is the work of the *Somerset Homelessness Reduction Board*. Both will complement and support our local aspirations

The key components of the BF programme are shown below, and illustrate a solution that starts with early help and prevention, before moving to considering how we are to commission services, before then ensuring that clients are placed in the correct accommodation with appropriate supports. We then must consider access to more stable accommodation, and then understand how we can work with customers and landlords to deliver sustainable tenancies. All the while, we must continue to learn and provide leadership. All of these components can be developed simultaneously within an overall project framework.

Figure 1: BF programme – key components



(note: top left icon missing)

We have used the above as a framework. Below you will find the detail of how we intend to meet demand.

### *a) Early help*

Early help means taking action to support a person or their family as soon as a problem emerges. It can be required at any stage in a person's life and applies to any problem or need that the family can't deal with alone. It requires agencies (health, housing, education, social care, DWP, police etc) to be linked and to understand each other's role, and to understand the valuable contribution that can be made by the local community and voluntary sector assets, including sports,

leisure and recreation. The Better Futures Programme has established a working group that will define the approach, set direction, influence others and monitor impact. This early help initiative is critical. It will eventually work to stem the flow of people falling into homelessness

### *b) Commissioning*

By commissioning we refer to the process of analysing a problem, agreeing solutions, and identifying those who can provide or deliver the solution. The commissioner can also be the 'provider', or (more likely) this role is taken by a third party/parties. In this section we are concerned with our working relationships with the commissioners and providers of accommodation and support services.

Commissioning operates at three levels, strategic, tactical and operational

Strategic commissioning: The challenge here is to bring together the commissioners of support services (health, care and housing) to develop integrated commissioning arrangements. Often, these services work in silos and as services we are all dealing with the same customers, whether that be Accident & Emergency (hospital), mental health services, drug and alcohol teams, social care, General Practitioners (GPs) and housing. As a result, customers often bounce around the 'revolving door' or service provision. This must change. And there must be a greater focus on early help and prevention – intervening before problems escalate.

This issue is now recognised and will be addressed at a strategic level:

- Somerset Health and Wellbeing Board – resounding commitment to bring together health, care and housing
- Somerset Homelessness Reduction Board – recently established. This is the forum that will seek to drive the integration of health, care and housing (as well as other partners such as the Voluntary and Community Sector, Probation, DWP etc)
- Leading for System Change (LFSC - NHS pilot initiative within Somerset) – recently agreed to adopt 'complex homeless/rough sleepers' as one of its pilot projects for the Integrated Care System leadership programme
- Better Futures Programme – the action plan for seeking the integration of health, care and housing

Tactical and operational commissioning: Coordinating and directing operational working arrangements. This is currently undertaken via:

- Positive Lives Operational Board (multi-agency)
- Covid Homelessness Cell (multi-agency – and will soon merge with the Positive Lives Operational Board)
- Local assessment and referral panels (including that for the P2I service)
- Contractual arrangements between SWT and local providers of accommodation/housing management and support

Within this area of work, it is important to build on lessons learnt. E.g. the committed multi-agency approach at Canonsgrove allowed us to transition 22 high needs clients down to 8 (their needs lessened, or they moved to more independent accommodation). Lindley House has not had sustained support from agencies and has 17 clients that have been revolving door for between 3 and 7 years. Commitment from support services to work alongside housing providers is key to the success of individual clients.

It is also important to note the importance of housing management, alongside the provision of support services, in contributing towards positive outcomes for individuals. Housing management plays an essential role in maintaining the quality of the accommodation setting, developing person centred / supportive relationships with clients, providing the correct level and intensity of support, and encouraging progress towards independence.

The HRB is committed to delivering the following

- Pilot work (delivered at pace) to explore and deliver the necessary inter-agency working arrangements required at operational level
- Longer term work to bring together (integrate) the commissioning of services between health, care and housing (bringing together strategy, budgets and workforce). Commissioning arrangements that allow flex at operational level are essential, given the rapidly changing dynamic of this complex cohort. This longer-term piece of work will be a necessary aspiration of the Unitary council.

Going forward, contractual arrangements must be flexible, seeking to break down barriers between commissioners and providers. Co-production is essential, as is listening to the client voice. The metrics around contract management must be based on the client – their personal journey, their needs, and their aspirations. Again, the Better Futures programme is highly relevant (alongside best practice from Homeless Link / St Mungos etc). The Better Futures programme has devised a set of metrics that have been agreed among partners (see the diagram below). These are a key reference point, in helping to shape and monitor contracts.

Figure 2: Suggested individual and community metrics for future commissioning



*c) Creating a robust referral and allocation process*

Notwithstanding the Early Help project, there will be those who will be unfortunate enough to fall into homelessness and/or rough sleeping. For these individuals, it is essential that we develop an informed and consistent process of referral and allocation. Through the *Better Futures Programme* it has been agreed that the most effective way of ensuring that customers obtain the most appropriate accommodation and support is to form an 'allocations panel' comprising of representatives from housing providers, social care providers and support providers. This panel will assess a person's needs and identify the most appropriate accommodation solution having regard to the level of support required.

*d) Units of accommodation - flexible approach*

There is a limited supply of accommodation and, at present, clearly not enough. Adopting a flexible approach (flexing to client needs dependent on changing demand) is essential to meet the demand. This includes flexibility within the current stock, even that which is defined as 'suitable' within the current analysis.



*e) Mixing units of accommodation*

It is considered that the following accommodation types could be mixed within the same building

- Short term-assessment accommodation
- Emergency assessment accommodation
- Supported short/medium-term accommodation for medium/high risk customers
- Could also include Trainer flats, but these could also benefit from being dispersed

The above could be in one place and closely linked with support provision/hub arrangements. This would aid with specialist assessment and access to those services that are most needed by this client group.

*f) Accommodation that needs to remain separated*

The following need separate accommodation solutions and cannot be mixed with others

- MAPPA
- Under 25s – currently provided by the P2I service
- Dry house / Abstinence
- Women Only

Some women will actively benefit from female only accommodation options. At present we have none, other than the refuge for victims of domestic abuse. This matter needs active consideration to assess the level of need (including catering for the needs of pregnancy and children). As a broad estimate – of the 50 beds at Canonsgrove we have had between 5 and 10 women resident at any one time

*g) Units of accommodation that need to be decommissioned*

The following existing units are unsuitable and need to be decommissioned

- Arc crash pads
- B&B – to be minimised\*
- MAPPA – i.e. current provision which is 'out of area'
- Temporary Accommodation units (Wheatley Crescent/Sneddon Grove)
- Homes in Multiple Occupation i.e. Rough Sleeper Initiative (RSI)/No First Night Out (NFNO)

There will always be a place for some minimal use of B&B accommodation. For example

- to help stop silting (see section k) below)
- for 'move-on' use for some 'low needs' customers until something more suitable becomes available
- for 'on the night' and 'out of hours' referrals

#### *h) Location*

Convenient access to services is a fundamental consideration. Accordingly, provision will need to be met primarily in Taunton and its environs, with some also being met at Minehead and Wellington.

For any new provision, impact on adjoining neighbours / communities will be an important consideration.

#### *i) Standard of Accommodation*

Canonsgrove is a temporary facility at Trull on the south-west fringe of Taunton. It has capacity for approx. 60 individuals designated as complex homeless/rough sleepers. It was provided in response to 'Everyone In'. The Canonsgrove project reflects much of what is now regarded as best practice for hostel accommodation. There are a number of factors that have made it a success:

- Partnership working – all main services working collaboratively
- Self-contained units (and the ability for segregation in the presence of covid)
- On-site provision of housing management and support services (e.g. mental health, drugs and alcohol)
- An environment that offers green space providing opportunities for relaxation, recreation and sport
- Communal areas within the building
- Engaging activity
- A sense of community

Many of these features are replicated at other provision. For example, Arc have recently opened an on-site GP surgery at their Lindley House facility.

However, there are issues. It can be difficult to segregate the most challenging individuals from those who are less complex and require less intensive support. This can have the effect of holding back progress for some individuals. This raises questions over the size of the facility and the ability to segregate the different levels of need and complexity. These are problems that have challenged housing services for many years.

Hostels are the most common homeless accommodation projects in the country and will continue to have a role locally. However, the recent Covid situation has emphasised that we (providers and support services) need to enhance the quality of the offer. We have undertaken best practice research on Homeless Hostels. A useful summary of recent research in this area was provided by Homeless Link in their report 'The Futures Hostel (2018).

#### *Summary from Homeless Link "The Futures Hostel" (2018)*

- Hostels account for 90% of all homeless accommodation projects
- Most provide medium level support.

- Key metrics are successful move on; unplanned moves, plus other measures (e.g. Outcome Star); employment & training participation rates etc
- They are important to help develop skills, abilities, resources and personal development for independence

*Providers and commissioners should aim for:*

- *Supportive staff with positive, engaging culture who can build trust. Interventions to be personalised and responsive to individual needs, goals, and aspirations.*
- *Strong partnership working with agencies (housing, addiction services, mental health services, financial support, physical health, training etc). The more integrated these services are, the better.*
- *Accepting dogs (otherwise this becomes a barrier for some homeless)*
- *Good range of engaging activities for the tenants*
- *Support for tenants to engage with mental health support, including emotional support, counselling and advisory.*
- *Floating Support to follow tenants during and after Move-On is key. This needs to be part of local housing pathway*
- *Some flexibility around rules and regulations. Alternatives considered and residents involved in developing (e.g. communal space for visitors)*
- *Good quality and range of food offered*
- *A lack of affordable housing is the main issue and needs to be addressed.*
- *Hostels should see their role as time limited, and should focus on supporting people to move towards independence*
- *Consider the benefits of Trauma-informed care and Psychologically Informed Environment*

\*Homeless Link are the national membership charity for organisations working directly with people who become homeless in England

These aims are recommended for all future hostel provision across SWT.

It is worth noting that MHCLG, in an advisory capacity, recommend the provision of self-contained accommodation. This is something that we support, as we have seen the benefits of such provision at Canonsgrove and elsewhere. However, whilst we will adopt this as an aim, we are also mindful of the need to adopt a pragmatic approach. There is a place for HMOs. Also, we can be constrained by the Local Housing Allowance (LHA - for PRS options) and the provision of the shared room rate.

There is also a need to deliver accessible units of accommodation. Our analysis shows that we have a need for 8 units of accessible accommodation across the spectrum of single homeless accommodation. Financial assistance is available to help with the delivery of accessible accommodation (see Finances below).

A further factor to consider is climate change and the provision of homes that provide thermal comfort. Any properties that are purchased by SWT will be

compliant with legislation as it affects local authority land holdings. All partners will be encouraged to adopt 'best practice in the private rented sector' and achieve an EPC rating C by 2030.

The above aspirations are consistent with the *Better Futures Programme*. This will ensure that our future homeless provision complies with what is seen as best practice. We will require reporting and monitoring that evidences the outcomes and successes described. See item b) above.

- j) Replacing Canonsgrove and anticipating future demand – accommodation options

At any one time there can be up to 50 residents at Canonsgrove. Of this, approximately 30 can be regarded as having medium or high needs. Approximately 20 have low needs and should ideally be in other accommodation options including move-on, if there was capacity in the system.

The Canonsgrove facility will be stood down during the early part of 2023. At the point of adoption of this strategy (September 2021) this provides 18 months to find alternative capacity. It will be necessary to work closely with a range of partners to manage this situation.

All future provision (to meet overall demand i.e. demand over and above that within Canonsgrove) will seek to provide accommodation according to the level of client need (low, medium or high). It will be for the 'assessment and referral panel' (see *item c* above) to assess which clients are suitable for which accommodation.

Note: This strategy is supported by a detailed delivery plan (see 'Timescales and Delivery Plan' below). The delivery plan will be continually updated. As such, it is important to note that the delivery plan will reflect intelligence (on demand and need) that may differ slightly to that of the strategy.

Our current thinking / progress can be summarised in the tables below

(note: we are in confidential discussion with a range of providers regarding accommodation options – these are referred to Accommodation A, B, C etc)

<b>Table 3: Low Needs Clients – Accommodation Profile</b>		
Accommodation	No of Units	Comments
SWT TA	12	Shift to low over time
NFNO	5	Low needs (prevention)
Satellite – various (Arc)	66	Shift to all low
Veterans House (Arc)	5	(Flexible: others are medium)
Accommodation A	4	Lease to be negotiated
Lindley House	16	To be agreed
Accommodation B	10	To be agreed
Over-supply	(4)	Can reduce TA if required

Total	114	
-------	-----	--

<b>Table 4: Medium Needs Clients – Accommodation Profile</b>		
Accommodation	No of Units	Comments
Gascony (YMCA)	18	Minehead
Prospect House (YMCA)	10	Minehead
Lindley House (Arc)	24	To be flexible – longer term, some low
Veterans House (Arc)	3	(Flexible – others are low)
Accommodation C	4	(Offered 2-11 self-contained – to be negotiated)
Accommodation D	0	MHCLG failed bid for 15
Unresolved gap	9	To resolve
Total	68	

<b>Table 5: High Needs Clients – Accommodation Profile</b>		
Accommodation	No of Units	Comments
Accommodation E	10	Will need SWT revenue funding plus strong HRB commissioned services
RSI Houses	8	Can be scaled to zero
Accommodation F	8	Accommodation to be sourced. To be agreed.
Accommodation G	5	Provider to be commissioned. Can be scaled to zero.
Unresolved gap	7	To resolve
Total	38	

The above separation of clients with different levels of need is easier to support from a housing management perspective. The disadvantage is the difficulty of delivering support services to dispersed facilities. This will need careful consideration. Dispersed facilities in proximity may be a solution.

We expect the best practice aims (item (i) above) to be adhered to, and this will be established within commissioning / contractual arrangements.

It should be noted that the accommodation provision also needs to recognise turnover and void properties some of which are inevitable if supply is to be available through partner organisation and provide value for money. In addition, there will always be a number of customers with very low or no support need who are ready to 'move on' to settled accommodation but who are awaiting opportunities in the private sector or social housing sectors. Properties subject to these situations could be as high as 20% and require good management practices

and greater access for customers to affordable private rented or social housing to limit their number.

It would be sensible to 'stress test' the assumptions on future demand (e.g. +/-15% so that we have a broader range of numbers), however the accommodation would need to be flexible enough to be able to step up or down to accommodate these numbers.

Similarly, we need to do further work to ensure that we are creating the right geographical mix. We also need to be clear about which units need to meet accessibility standards.

Housing First – Pilot. 'Housing First' is a recovery-oriented approach to ending homelessness that centres on quickly moving people experiencing homelessness into independent and permanent housing and then providing additional supports and services as needed. The fundamental ethos of Housing First asserts that housing is not contingent upon readiness, or on 'compliance' (for instance, sobriety). Rather, it is a rights-based intervention rooted in the philosophy that all people deserve housing, and that adequate housing is a precondition for recovery. We see the potential for a pilot project. This option will only cater for a small number of people – possibly four to six in the first instance, as we would wish to test the application of the model before making any further commitments. Housing First is subject to wider pilot work within the *Better Futures* Programme and progress will be monitored by the HRB.

Ultimately, SWT want to eradicate / minimise B&B costs, which will release revenue funding to support high needs provision and fund floating support (refer to item (l) below).

A further solution is still required for overnight / very short-term assessment. Inevitably, this will include low, medium and high needs clients. This could be B&B, however some more intense support accommodation will be required.

The model needs to be flexible enough to transition to lower needs over time. For example, 31 clients with high needs (currently) should be able to shift to say 15 in 2-3 years. Similarly, Lindley House needs to be configured so that one third could be shifted from medium to low needs as support proves successful

Once the provision of accommodation is agreed, work will be required by all parties to steadily shift existing use to meet the future accommodation profiles (tables 3, 4 and 5 above). This will require significant move on, albeit this must be a client focussed decision for each case.

*k) Move on*

Lack of affordable single rented accommodation is a national problem and a key issue to resolve in this accommodation strategy. Simply put, without an adequate supply of suitable and affordable accommodation for single people, both supported housing accommodation and the council's temporary accommodation

becomes silted up. Our analysis suggests up to 28 bedspaces in the system are currently being used by customers able to sustain a tenancy in the social or private rented sectors with minimal or no support. The problem is exacerbated by average local rents that exceed local housing allowance (LHA). Accommodation for single households is circa 50% of registered Homefinder demand.

Homeless Link have published a report "Moving on from homelessness – how services support people to move on" which found that nationally 30% of people ready to move on are unable due to lack of supply. Lack of move-on accommodation was our main issue from the rough sleeping workshops held in Summer 2020.

Different housing providers and services refer to move on in a number of ways however for our purpose we mean a home to move into from supported housing, be that a room in a HMO or self-contained accommodation. An important element of move on is the ability of individuals to sustain accommodation and to ensure they are supported appropriately to avoid repeat homelessness.

Our strategy to increase move on includes the following:

- Increasing the capacity and focus in our homeless team to work with the private rented sector to increase supply for our client group
- Explore the case for a council owned Housing Company to procure units of single accommodation available for our client group
- Provision of floating support to increase supply from landlords (who would otherwise be reluctant from a risk perspective), and to improve sustainability of tenancy across all tenures.
- Encourage social landlords using schemes such as tenancy accreditation to take a greater proportion of homeless directly from supported accommodation
- Utilise shared HMOs with lower support e.g. Arc satellite accommodation
- Engage with supported housing, registered provider and other partners to increase supply locally through lease arrangements

#### l) Floating Support

Floating Support is key to improving the sustainability of a tenancy once homeless clients have moved on from supported accommodation. P2I in Somerset has adopted this approach and evidenced success. It was also raised as important by the supported housing providers at the rough sleeper workshops during Summer 2020. It is also a fundamental component of the *Better Futures* programme.

The St Mungo's research paper 'Home for Good: The role of floating support in ending rough sleeping (December 2018)' describes floating support (or tenancy sustainment) as helping people, who might otherwise struggle to cope, to live independently in their own home. It helps prevent vulnerable people from losing their home and can prevent a return to the street, for those who were rough

sleepers. Support is delivered by skilled case workers who visit people in their homes or meet them somewhere close by. Services can also be delivered digitally.

Benefits include improved outcomes for their customer group, increased independence and more homes available for vulnerable people to rent, by providing more reassurance for landlords. The St Mungo's report also highlights that funding cuts to 'Supporting People' has led to a reduction in this support across the country.

SWT regards floating support as an essential component of this single homeless accommodation strategy. It is as important as any other element and without it the strategy will fail. Ideally floating support should be provided in collaboration with partners, as all elements of the housing, health and care sectors have a vested interest in keeping clients secure and stable. The resourcing and commissioning of floating support will require cross sector conversations within the remit of the Homeless Reduction Board. However, this may take a couple of years to develop. Before then SWT will invest in the provision of floating support

## **Finance model**

The delivery of the strategy will require a significant financial investment, utilising external grants, SWT funding, partner funding and a review of current commissioning arrangements for support services. A mix of capital and revenue funding is required. Capital is required to secure additional supply, while revenue is critical for the maintenance and development of support services along with customer security and safety. Capital is much easier to secure as it is usually a one-off payment, and can sometimes bring a return on investment, Revenue funding is much harder to secure being a commitment to year-on-year financial investment. A strategic review of commissioning arrangements for support services (health, care and housing) should identify opportunities to develop holistic system-wide prevention-based services, with coordinated funding arrangements. This will be driven by the *Better Futures Programme* within the remit of the Homelessness Reduction Board.

An important component of the financial support to the strategy, and beyond the control of SWT and local partners, is the current housing benefit (HB) regime, including Local Housing Allowance (LHA). There is pressure on HB spend (particularly enhanced HB that is used to support tenants with complex issues), with MHCLG encouraging councils and their partners to deliver targeted and financially sustainable models of support. A complicating factor is that local rents exceed LHA rates, which presents an additional challenge when seeking to place / support customers within the private rented sector. Often, we require Discretionary Housing Payments (DHP) to bridge the gap. DHP is a finite resource, with budgets reducing.

The delivery plan for the strategy sets out the capital and revenue requirement by scheme. The preferred investment route of the service is through partners. Direct delivery by the council will only be used where it is economically advantageous



or where partners are unable to support. The total capital investment for 54 new bedspaces is estimated to be just under £5m with an anticipated Council contribution of up to £1.55m.

It is predicted that most of the additional revenue costs will be met after 2024/2025 through reduced bed and breakfast costs. At that point, it is envisaged that additional revenue costs for accommodating more single homeless responsibility will reduce to £0 being covered through existing budgets. However, the service needs to go through change to ensure customers are supported in the correct location and can progress towards sustainable tenancies. The following additional revenue forecasts is required in addition to the 2022/2022 base budget:

- 2021/2022 = £0
- 2022/2023 = £113,000
- 2023/2024 = £255,000
- 2024/2025 = £73,000
- 2025 onwards = £0

Existing voluntary sector partners and potential new partners have investment models which use their own borrowing strength to purchase accommodation. Each partner has its own business model. Sometime the voluntary sector would welcome capital grants to support their investment, however revenue costs tend to be a greater consideration. Existing partners are also being asked to consider their current provision to better achieve outcomes and in some cases this will divert capital investment away from new supply.

SWT's Housing Revenue Account and SWT Corporate Company will explore how they could invest to create more one bed opportunities to help meet the significant demand in the district

### **Timescales and Delivery Plan**

The Council has created a detailed single homeless accommodation delivery plan to support the ambitions of this strategy. The delivery plan outlines how the remaining 54 units (approx. figure) of accommodation will be achieved by 2027 and clarify the existing and new partners who will be engaged in delivery. The delivery plan seeks the early delivery of a significant proportion of the units given the need to decant Canonsgrove by March 2023. The delivery plan will be updated regularly and used by a panel of officers reporting to the Director of Housing and Communities and to the Portfolio Holder for Housing. The panel will prioritise and promote the most beneficial purchases and leases and will help to ensure new supply fits the needs of the customers. The panel will also allow the council to align grant opportunities through MHCLG and Homes England with new supply opportunities. The delivery plan will be supported by a live database of accommodation opportunities which has been set up. Revenue needs have also been addressed by scheme and need group.

## Summary

In summary there are several key elements to this strategy. We shall work with our partners to meet the demand for single homeless accommodation and to end rough sleeping by 2027. We shall do this in accordance with the *Better Futures programme* and by delivering the following:

- A more effective regime of early help and prevention
- To deliver effective local commissioning within an appropriate monitoring framework
- The successful establishment of a Homeless Reduction Board, working with partners to undertake a fundamental review of strategic commissioning arrangements
- A new assessment and referral panel and procedures
- Flexibility of provision within our accommodation choices
- Very high standards of accommodation
- The decommissioning of Canonsgrove and replacement with suitable alternatives
- The stabilisation of residents through working collaboratively with support services
- The provision of additional move-on accommodation through the activity of a SWT housing company. We shall also look to other providers to help with the provision of move-on accommodation
- The provision of enhanced levels of floating support
- The delivery of specialist accommodation
  - MAPPA
  - Trainer Flats
  - NFNO
  - Women only
  - Accessible units
  - Housing First – pilot
- A finance model that exploits all available resources, including that of SWT, the willingness and capital expenditure of our provider partners, grant opportunities made available from MHCLG, and the integration of budgets to deliver more effective support services.