Sefton Council's Homelessness and Rough Sleeper Strategy 2024 - 2029



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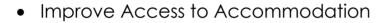


1 Foreword from Cabinet Member

I am pleased to introduce Sefton Council's Homelessness & Rough Sleeping Strategy 2024-2029.

This Strategy builds on all of the good work achieved from the previous Strategy.

The Strategy for the next five years sets out our approach for tackling homelessness and rough sleeping across the borough with three key priorities being:



- Increased Prevention of Homelessness and Rough Sleeping
- Focus on Support

Tackling homelessness needs all agencies to work together and the priorities within this Strategy will ensure that these agencies will work in partnership closer than they have ever done in order to address the issues that Sefton is facing.

The increase in the cost of living than the country is seeing is affecting people across Sefton too, but we feel we are in a strong position to meet the challenge to reduce homelessness over the next five years.

Councillor Trish Hardy

Cabinet Member for Communities & Housing



Executive Summary 2

In 2023, researchers from Imagen Blood & Associates were asked to review Sefton's Homelessness services. In July and August 2023, the researchers:

- visited twelve different homelessness services.
- spoke in depth to around 40 people who had used these services.
- spoke to 32 professionals, and another 27 professionals filled in a survey.
- looked at lots of information about homelessness in Sefton.

Imogen Blood & Associates developed the Homeless Review from their research and produced the Strategy. The Strategy sets out the priorities recommended to Sefton Council and organisations it works with to tackle homelessness over the next 5 years.

The Strategy was also subject to a 12-week consultation period to gain the views from organisations and the public.

The following table summarises the priorities and key actions:

1. Improve Access to Accommodation

- Develop alternative housing models and pathways for those who are in or close to work, including younger people.
- Improve access to affordable housing, with housing strategy and development decisions to be informed by intelligence and priorities from the review.

2. Reduction of Homelessness and Rough Sleeping

- Improve coordination of homelessness prevention activities across sectors, to include a focus on 'hidden' homelessness, tenancy sustainment and pre-eviction protocols.
- Continue to implement, evaluate and develop new approaches to delivering Housing Options services across the whole system.



3. Focus on Support

- Improve accommodation and the provision and coordination of specialist support for people with high health and/or care needs.
- Implement housing-led oversight within the supported housing pathway and improve data reporting so this can be used to monitor whole system performance.
- Improve the quality of emergency bed and temporary accommodation provision and associated support.
- Sustain, further promote and seek to expand floating support, tenancy sustainment and dispersed schemes, especially where there is potential to convert to general needs.

3 Introduction and key Achievements from the 2018-2023 Strategy

Since the <u>last review of homelessness in Sefton in 2018</u>, Sefton Council and its partners have responded to wider changes, including the Covid-19 pandemic, when we brought Everyone In from the streets; additional migration from Ukraine and Syria; and the ongoing impacts of welfare reform, austerity and the cost-of-living crisis.

During this period, there have been a number of significant improvements to the approach to preventing and responding to homelessness in the borough, led by the 2018-23 Action Plan. This has, for example, included:

- Successfully commissioning an alliance of providers to deliver and continuously improve a pathway of supported housing for single households through a 10-year contract.
- Implementing a shared and centralised system for assessing and placing individuals in supported housing, in close partnership with the Housing Options Team (HOT) and using Liverpool City Region's MainStay case management system.
- Building strong working relationships across the system to implement the Homelessness Reduction Act 2017 and Duty to Refer processes so that partner agencies can refer those at risk of homelessness into Housing Options.
- Proactively and successfully seeking additional funding and resource from central government and the combined regional authority to test innovative approaches to preventing and tackling homelessness, including:
 - Appointing a dedicated lead for homelessness commissioning
 - o Embedding a clinical psychologist within the supported housing group
 - o Expanding the award-winning Riverside Dispersed Families project to benefit a further twenty families over a two-year contract extension.



- Developing a hospital in-reach initiative in Southport through Light for Life
- Funding a range of specialist and dedicated roles, including through HOT (Domestic abuse, Prison release, Homes for Ukraine, outreach worker) and through Light for Life (hospital discharge initiative in Southport).
- Commissioning assertive outreach/ 'navigator' services and significant emergency bed provision to tackle rough sleeping in the borough, which has helped to bring visible and officially counted rough sleeping in the borough to zero for the past two years.
- Over this period, the council's voluntary and statutory partners have also invested in and developed their response to homelessness. For example,
 - Light for Life has developed a Health hub in Southport, with funding from Rough Sleeper Initiative, Big Lottery funding, donations and the Integrated Commissioning Board
 - o Department of Work and Pensions has appointed specialist homelessness workers and launched a partnership with Beam.



Key Findings of the 2023 Homeless Review 4

Sefton Council commissioned a comprehensive review of homelessness services to better understand how the whole system is working together and where it should focus efforts over the next five-year period.

Sefton commissioned independent researchers Imagen Blood & Associates to carry out extensive engagement with people using as well as working in services and to collect new and analyse existing datasets.

The findings of this substantial activity are summarised in the accompanying evidence base.

These findings highlight:

- Increasing incidence of homelessness, including both 'hidden' homelessness and demand for services
- Lack of supply of affordable social housing
- Impact of changes within the private rented housing market, which are placing more households at risk of homelessness, and making it very difficult for those facing homelessness to access new tenancies.
- High levels of multiple health and support needs amongst those facing homelessness
- Lack of sufficient housing, care and support options for those with the most complex needs, which increases safeguarding risks for individuals, workers and other citizens.

This is resulting in:

- High usage of Temporary and Emergency Accommodation, with people staying much longer than intended in sometimes unsuitable settings.
- Unmet demand for supported housing, with 177 people waiting for a placement at the end of July 2023, and less than half those assessed for supported housing being placed within the year.



- A significant cohort of local people with long histories of homelessness or housing instability who are effectively circling the system, leading to deterioration of health.
- Vulnerable adults being discharged from hospital (including psychiatric hospital) with inadequate provision of care, support and accommodation.
- Inefficient use of existing supported housing provision due to lack of move-on: with the majority of those in supported housing felt by their keyworkers to be ready to move on, and many over-staying because longer-term supported options are not available.
- People losing general needs tenancies due to a range of personal, health, social and economic challenges.

The council and its partners have already started to implement changes to better respond to these challenges, including:

- Re-structuring and expanding the Housing Options service to improve access - by phone, online and through specialist, colocated officers working in prisons, with survivors of domestic abuse, young people leaving the care system, and Ukrainian refugees, and a "not in priority need" officer visiting emergency beds and hubs.
- Creating some self-contained emergency bed provision in the form of 'pods' within existing hostels
- Improving the use of managed moves between accommodationbased services, to reduce the number of evictions from supported housing.
- Drafting a pathway of services for women with complex needs and working with LCRCA to consider options for a Housing First model within this.
- Working with Children's Services to improve housing pathways for young people leaving local authority care – to date this has included a dedicated housing post within Children's Services, agreement of Band A access to Property Pool Plus for this cohort, and the drafting of a cross-departmental protocol.



- Working to make the best use of Council owned land to deliver new affordable housing, including the direct delivery of homes for social rent through the Council Housing Programme, and via our housing company Sandway Homes.
- Market engagement with strategic Registered Provider partners to facilitate new social housing developments, including helping them to access brownfield grant funding.
- Working to encourage professional private landlord investors into the borough, particularly those who provide a 'mid-market' product at less than market rents.



5 Our Priorities

Having systematically analysed the views and experiences of professionals and people with lived experience, the review team has proposed the following set of strategic priorities for Sefton and its partners over the next five years.

1. Improve Access to Accommodation

- Develop alternative housing models and pathways for those who are in or close to work, including younger people.
- Improve access to affordable housing, with housing strategy and development decisions to be informed by intelligence and priorities from the review.

2. Reduction of Homelessness and Rough Sleeping

- Improve coordination of homelessness prevention activities across sectors, to include a focus on 'hidden' homelessness, tenancy sustainment and pre-eviction protocols.
- Continue to implement, evaluate and develop new approaches to delivering Housing Options services across the whole system.

3. Focus on Support

- Improve accommodation and the provision and coordination of specialist support for people with high health and/or care needs.
- Implement housing-led oversight within the supported housing pathway and improve data reporting so this can be used to monitor whole system performance.
- Improve the quality of emergency bed and temporary accommodation provision and associated support.
- Sustain, further promote and seek to expand floating support, tenancy sustainment and dispersed schemes, especially where there is potential to convert to general needs.



Detail and recommended actions 6

Imagen Blood & Associates have recommended the following actions for each of these priority areas. Details of potential learning from other areas are included in the Evidence Base report, section 5.

1. Improve Access to Accommodation

Develop alternative housing models and pathways for those who are in or close to work, including younger people.

The consultant interviewed several supported housing residents who were working or wanted to work and potentially save for a deposit for a private rented property but were restricted in this because of supported housing funding models.

There are examples of affordable sharer models being run elsewhere (see S.5 of Evidence Base Report). The consultant would encourage partnership working between DWP, employability and homelessness services to develop and agree pathways and options for this diverse group.

- Scope, adapt as necessary for local context and seek to introduce one or more of the suggested models to provide transitional or longer-term sharer models for those who are in or close to work.
- Work in partnership across housing, employment and benefits agencies to develop and coordinate this offer.
- o Identify and divert individuals from the supported housing pathway into such models at the earliest opportunity to free up supported bedspaces, reduce the risk of avoidable deterioration in people's circumstances, and provide an exit route from homelessness for this group.



 Improve access to affordable housing, with housing strategy and development decisions to be informed by intelligence and priorities from the review.

Bold action is clearly needed in relation to housing supply in Sefton as elsewhere and a business case could be made based on potential cost savings to homelessness services. Detailed recommendations in this area are beyond the scope of our review, and we understand some of the following activities are already planned or underway.

Recommendations

- Review Property Pool Plus policies and processes in relation to their impact on the effective running of homelessness services, and to streamline procedures as far as possible to make best use of staff time.
- o Continue with the HMO licensing scheme to tackle the very poor conditions and harassment from some PRS landlords we heard about in the engagement, especially within Southport.
- Ensure that as Sefton makes plans for its Council Housing Programme (CHP) that models which can provide more permanent housing options for people experiencing homelessness are considered, alongside more cost-effective forms of temporary accommodation (this might, for example include concierge/ extra care type models aimed at this client group).
- Invest more in developing partnerships with and attractive offers to private sector landlords. Given the current state of the market, this may need to include the council or other providers leasing from landlords or providing insurance or incentive.

2. Reduction of Homelessness and Rough Sleeping

• Improve coordination of homelessness prevention activities across sectors, to include a focus on 'hidden' homelessness, tenancy sustainment and pre-eviction protocols.

The consultant observed the impact of strong multi-agency operational relationships developed in Southport between CVS, council, criminal justice, health and others, and heard how colocation, trauma-informed training, champion schemes and joint projects had contributed to this. Interviewees recognised the different landscape and resources in Bootle for replicating this approach, and the potential benefits which this could have. They were also struck by the breadth of activity across sectors which was contributing to the prevention of homelessness: the consultant heard that people did not always know about these resources and that those running them were sometimes operating in isolation from the rest of the system.

- Review learning from Light for Light hub model in Southport, and consider how the council, its statutory and voluntary sector partners might coordinate efforts to develop a similar approach in Bootle.
- As part of this process, review the delivery of outreach surgeries to homelessness hubs and hostels by drug and alcohol, Probation and other specialist services – this is greatly valued in some settings, but appears to be missing from others, with individuals sometimes having to make long and expensive journeys to appointments in other parts of the borough.
- o This should be part of a wider strategy to better involve the community, voluntary and faith sector, alongside HOT and commissioners in the delivery of the homelessness strategy. For example, lack of white goods/ furniture, storage of belongings, daytime warm spaces/ activities for people in emergency beds were all highlighted as key challenges and could be addressed through greater coordination of and with community-led resources. These agencies can play a key role in generating intelligence on 'hidden' homelessness. See examples from s.5 of the Evidence Base Report on approaches taken in other areas.



- Ensure that social landlords, DWP and social care are also part
 of this strategic approach, so as to implement a clear multiagency approach to early intervention and pre-eviction
 protocols: at the moment there is a sense that Housing Options
 are only relevant where there is a risk of homelessness within 56
 days.
- Sustain and more widely promote the Homelessness Forum, or other methods to share information and coordinate activity across statutory and voluntary sectors.
- Continue to implement, evaluate and develop new approaches to delivering Housing Options services across the whole system.

The HOT team are in a process of transition, with new roles and direction - though positively received across stakeholders we spoke to, these are yet to bed in across services. It will be key for HOT to play a pivotal and outward-facing role in this, though there may also be opportunities to sub-contract elements of their statutory role to trusted partners.

- Continue to develop and evaluate the model of developing specialist roles within HOT to act as link workers across the system, recognising these relationships can take time to develop (as in Leaving Care).
- Finalise the protocol which is being developed with the Leaving Care team to reduce the risk of homelessness at this key transition.
- Adult social care and children's social care (beyond the Leaving Care team) require a similar model with a link worker and protocol – for adult services, this could be achieved via the dedicated social worker already proposed.
- Continue to develop the drafted pathway for women with complex needs, exploring the opportunities for commissioning Housing First as part of this, in partnership with Liverpool City Region Combined Authority.



3. Focus on Support

• Improve accommodation and the provision and coordination of specialist support for people with high health and/or care needs.

There is evidence within the review of a small but significant group of people with high healthcare/ care needs (including palliative care needs), alongside complexity arising from substance use, mental health, long-term homelessness. Some of these people are currently accommodated within supported housing schemes. Others are bouncing between hospital and emergency accommodation, leading to significant safeguarding risks.

Recommendations

- Fund a specialist social worker to work alongside homelessness services to engage, assess and review housing, care and support options for these individuals.
- Complex needs panel, reporting to Safeguarding Adults Board to enable operational joint working and monitoring of the most multiply disadvantaged individuals.
- The Strategic Housing Commissioning Group and the proposed Strategic Housing Partnership to develop alternative, longer term (including palliative) housing and care models for those with high levels of complexity.
- Implement housing-led oversight within the supported housing pathway and improve data reporting so this can be used to monitor whole system performance.

The consultant recommends a personalised approach to identifying and advocating for settled housing options for those within the supported housing pathway. Given the huge diversity of residents' circumstances and the considerable challenges around affordable housing supply in the borough, this requires a range of coordinated measures, involving support workers, Housing Options, Property Pool Plus, and Rapid Rehousing Pathway staff, with good links to Housing Strategy, and a range of resources to access PRS properties.



- o Identify who in the system is best placed to provide specialist, personal housing planning and review to residents of supported housing. This might be through further developing and coordinating existing approaches, such as Property Pool Plus surgeries, the Rapid Rehousing Pathway and the HOT Not In Priority Need (NIPN) worker, so this offer is consistent and sufficient.
- Ensure there is sufficient expertise and authority within this role, and structures in place to which operational blocks and strategic priorities can be escalated.
- Review the current use of Band B for supported housing residents and consider whether the personal housing planner can be given/ will have authority to propose or make personled banding decisions.
- Ensure this role has expertise and resource to develop creative responses to individuals' circumstances, as well as advocate for access to social housing, for example identifying naturally formed groups of residents who might want to share, perhaps in the private rented sector with some support, individuals who might be suitable for Homeshare, Emmaus or other live-in volunteering roles, Property Guardianship etc.
- Develop and implement suitable oversight mechanisms to ensure progress on personalised move-on planning, whilst also highlighting early on those who are likely to have longer term care and/or support needs.
- Ensure that Mainstay is used to maximum effect to flag and monitor move-on needs and blockages, providing reliable intelligence to inform further commissioning and strategy. Review reports from MainStay so these focus less on the outputs/ throughputs of individual services and more on the movement of individuals through the whole system, also focusing on those who drop out or lose contact at key points (e.g., whilst awaiting placements) our initial recommendations are detailed in section 5 of the Evidence Base document.



- Look to develop across HOT the current approach in which Property Pool Plus workers work through cases directly with a dedicated worker (e.g., used in Homes for Ukraine and with some commissioned providers)
- Improve the quality of emergency bed and temporary accommodation provision and associated support.

Waiting lists for supported housing placements mean that some people are spending much longer than intended (e.g. several months) in emergency beds. All of these are offered on a nightly and night-time only basis which is having a clear impact on people's mental and physical health, safety and offending. There is still some dormitory provision (mixing people of different ages with varied needs and backgrounds, despite stated aspirations to move away from this in a post-Covid era. Meanwhile, families and those in priority need are spending longer in temporary accommodation and there is high use of nightly-paid and Bed & Breakfast accommodation which, for longer stays, is associated with poor outcomes and value for money.

- Remodel remaining dormitory provision to create individual sleeping spaces.
- Review daytime provision for those accessing emergency beds, drawing in wider resources where necessary/ valuable (churches, community and voluntary groups, libraries, etc) to provide a daytime and early evening offer.
- Continue the Not in Priority Need (NIPN) outreach worker from HOT into emergency provision for singles.
- Work proactively with private as well as social landlords to identify high quality lease-based models of temporary accommodation.
- Explore alternatives such as for young people with lower support needs.



 Sustain, further promote and seek to expand floating support, tenancy sustainment and dispersed schemes, especially where there is potential to convert to general needs.

From the review it was evident that too many tenancies were failing, and that additional support would help to ensure that people could sustain their tenancies.

- Ensure staff in HOT and supported housing services understand what floating support is available, for whom and how to refer into this.
- Collect outcomes on floating support/ hub services which are consistent with HO terminology and can be included in statutory reports, i.e., prevention secured by sustaining existing OR securing alternative accommodation, and which record whether duty was accepted where referral made to HOT.
- Review whether and how existing provision does or should link to social landlords' own tenancy sustainment offers and influence the further development of these as necessary.
- The Review found that Riverside's Intensive Support models were well regarded, enabling tenancies to be converted to general needs to prevent further movement where people have settled. Look for opportunities to extend and replicate this approach, recognising the risks for different cohorts from a time-limited support offer.

