

Subject:	Single Homeless & Rough Sleeper Accommodation & Support Remodelling & Tender		
Date of Meeting:	Housing & New Homes Committee 21 st September 2016 Policy, Resources & Growth Committee 13th October 2016		
Report of:	Executive Director Adult Services		
Contact Officer:	Name:	Jenny Knight	Tel: 293081
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Ward(s) affected:	All		

FOR GENERAL RELEASE

1. PURPOSE OF REPORT AND POLICY CONTEXT

- 1.1 Given the changing demand for services and the increased complexity of need, it has now become essential to have a new model of accommodation and support for single homeless people and rough sleepers.

A new model would respond to this changing need by seeking to provide improved outcomes for individuals and better value for money. It would also provide an opportunity for experienced service providers to bring new ideas and ways of working to the city.

The current accommodation and support model for homeless people and rough sleepers has been in place since 2007. The needs of homeless people in the city have changed over the past 9 years and the city is seeing increased numbers of rough sleepers, an increase in demand for supported accommodation services and increasing numbers of homeless people with multiple and complex support needs. This paper details the proposed remodelling and retendering of services to meet the changing needs of homeless people, target resources and improve the outcomes for this section of the population.

- 1.2 This remodelling proposal includes

- Commissioned accommodation and support services for homeless people and rough sleepers.
- Hostel accommodation and support services which are directly provided by Brighton & Hove City Council.

2. RECOMMENDATIONS:

That the Housing & New Homes Committee agrees to the following:

- 2.1. That the information provided within the report to remodel and procure accommodation and support services for single homeless people and rough sleepers be noted;
- 2.2. That the commissioning and procurement plans from October 2016 should be aligned with priorities within the Rough Sleeping Strategy 2016, the Council's Housing Strategy 2015, the Homelessness Strategy 2014-19, and the Council's priorities for the integration of social care and health through Better care;
- 2.3. That ASC Commissioning be delegated authority to review the infrastructure, including the working groups that support services for single homeless people and related strategies;

That the Policy, Resources & Growth Committee agree the following:

- 2.4. That the commissioning and procurement plans from October 2016 should be aligned with priorities within the Rough Sleeping Strategy 2016, the Council's Housing Strategy 2015, the Homelessness Strategy 2014-19, and the Council's priorities for the integration of social care and health through Better care;
- 2.5. That the procurement and remodelling process outlined in the report for 2016-17 and 2017-18 be agreed;
- 2.6. That the directly provided (in-house) services which are identified in Section 4 of this report be included within the tender for the new accommodation and support model;
- 2.7. That Policy, Resources and Growth Committee agree to the extension of existing contracts that are included in the service re-model to ensure continuity of service whilst procurement activity is being completed;
- 2.8. That authority be delegated to the Executive Director for Health, Adult & Social Care to procure and enter into any contract to secure effective delivery of support services for vulnerable people as outlined in Section 3 of the report, having consulted with the Executive Directors for Economy, Environment & Culture, Neighbourhoods, Communities & Housing, Families, Children & Learning and the Monitoring Officer.

3. CONTEXT/ BACKGROUND INFORMATION

3.1 Background

Housing Related Support Services (previously Supporting People) are commissioned to provide accommodation and support to vulnerable people. This report deals solely with the procurement of services designed for single homeless adults and rough sleepers.

The majority of accommodation and support services for people who are homeless are provided in the independent sector. The services currently provided as part of the pathway are included in **Appendix 1**.

The current accommodation and support service for single homeless people and rough sleepers is referred to as the Integrated Support Pathway. The services within the pathway include outreach services, hostels and supported accommodation and were designed to move individuals from rough sleeping and homelessness towards independent living. This group of people tend to be non-statutory homeless.

The contracts for the majority of single homeless and rough sleeper services come to an end on the 31st March 2017. Some services such as the Rough Sleeper Outreach Service, Housing First Service and the Floating Support Service for those in independent accommodation have already been re-procured.

3.2 Significant work has been undertaken to ensure that the new model will address the changing needs and demographics of people who are homeless. This has been based on analysis of needs, national good practice and consultation with partners and stakeholders. This includes the:

- Rough Sleeper & Single Homeless Needs Assessment 2013
- Homeless Health Audit 2014
- Homelessness Strategy 2014-19
- Overview & Scrutiny Report on Homelessness & Rough Sleeping 2014
- Rough Sleeping Strategy 2016

3.3 The work identified a number of gaps in service delivery and indicated the following areas for development:

Need Identified	Development Required
Lack of appropriate facilities to assess the needs of rough sleepers	Develop a Safe space for people to have an assessment within 72 hours to ensure their needs are met in a timely way, and individuals can be supported to reconnect to areas where they can access accommodation and support.
Lack of flexibility in the pathway meaning service user needs are not met	Develop a more flexible referral and hostel allocations system to make sure people are supported in the right accommodation that meets their needs
Difficulty for service users moving from high 24 hour support services to low support services.	The introduction of medium support accommodation. This will ensure that provision for people with higher needs is appropriately targeted.
The needs and safety concerns of women could be better met in women only accommodation.	Women only accommodation
Cohort of older long term residents whose needs could be better met in a more appropriate accommodation service.	Development of a specialist service for older individuals with physical health and substance misuse needs
The need for peer support for vulnerable women and those with	Develop a new model of peer support.

complex needs.	
High levels of unmet physical and mental health needs	Ensure the new services are integrated with the Better Care model to reduce health inequalities for single homeless people.
High levels of substance misuse	To ensure that services support people in their recovery from substance misuse
High levels of trauma and other mental health needs in the homeless population.	People get access to Psychologically Informed Environments (see 5.(c))

3.4 Aims

It is important to address the gaps in the services above to ensure that:

- Rough sleeping in the city is reduced.
- Single homeless people receive personalised multi agency support.
- Outcomes for homeless people are improved and that they are supported to develop the skills for independent living.
- Health outcomes are improved, and deaths are prevented.
- People are supported to recover from homelessness, substance misuse, ill health and mental ill health.
- The number of people experiencing revolving door (repeat) homelessness will reduce.
- The efficiency of accommodation and support services is improved.
- Services are aligned with the Better Care Integrated Homeless Health Model.

3.5 Proposal for Retendering Services

As contracts for current services for single homeless people are coming to an end and gaps in our current provision have been identified it is the right time to address these issues through the procurement of new services.

Timetable for Retendering

A procurement plan including three distinct procurement projects has been designed and is recommended to minimise the disruption to service users and support the move to the new way of working as follows:

- Stage 1: tender assessment and high and medium supported accommodation. These services are integral to the success of the model and involve large accommodation services which may have complex mobilisation arrangements.
- Stage 2: tender women's service and low support accommodation. Potential providers may wish to apply as a consortium or a partnership and will need time to develop and explore the options available to them.
- Stage 3: tender for support services including the provision of education, peer support and lifeskills as well as the service for those with long term physical health needs. These services have been placed in stage 3 to

enable time to develop the models of support for these services in consultation with partners.

- It is proposed Stage 1 will be tendered at the end of October 2016 subject to committee approval; Stage 2 in February 2017 and Stage 3 in May 2017 with a view to all new services being in place and operational by November 2017. These stages are detailed in the table at 3.6.



3.6 Accommodation & Support Services Tender Timetable

The following table is an outline of the services due to be tendered. An overview of the full model of accommodation and support including existing services is attached as **Appendix 2**. The Services related to in house provision and with properties will be tendered for 5 years with an extension of up to 2 years. Other services will be 4 years with an extension of up to 2 years.

Tender	Description	Units / Beds
Tender Stage 1		
Assessment Beds	<p>Assessment Beds:</p> <ul style="list-style-type: none"> Assessment Beds will enable people to access short term accommodation for up to 6 weeks. The service will provide level access for those with disabilities or health needs, facilitating hospital discharges where appropriate. The service will be scaled up from around 12 beds initially as the model is mobilised and developed to a possible 24 beds dependent on evaluation of the model. <p>The Assessment service will also provide up to 5 safe spaces (nightly emergency sleeping facilities in the form of a sit up chair or fold out bed) either within the hostels common area or a separate building as emergency provision for rough sleepers. This safe space acts as a place of safety for up to 72 hours to enable the assessment of rough sleepers and facilitate reconnections for non locally</p>	12 assessment & 12 hostel beds + 5 safe space places

	connected rough sleepers.	
High & Medium Support Accommodation	<ul style="list-style-type: none"> • Services will provide accommodation for people who have a mixture of high and medium support needs, allowing service users to move through an internal pathway which reduces the levels of support they require. • The services will provide personalised asset based key work support and day time activities. • The services will operate Psychologically Informed Environments. The services will make space available and encourage external services (e.g. community groups/ counselling/ food projects) to come in and offer groups and activities to improve health and wellbeing, lifeskills and education and training opportunities. • Services will focus on recovery from substance misuse, mental and physical ill health and homelessness. 	160-200 (80 high / 80 – 100 medium)
Tender Stage 2		
Women's Service	<ul style="list-style-type: none"> • Trauma informed specialist accommodation service for women with multiple and complex needs. • Offering strength based and personalised key work support and case coordination. • Accommodation that allows women to move on as independence grows and their support needs reduce. 	20-25 (approx 10 high / 10 -15 med)
Low Support Accommodation	<ul style="list-style-type: none"> • Short term accommodation for those with low support needs who are reaching readinesses to move on to independent accommodation. • The service will offer low level floating support in independent or shared accommodation. • The Accommodation will offer support to move on and sustain independence, including work, learning and employment, resilience and building links within the community. 	80-100
Tender Stage 3		
Substance Misuse & Physical Health	<ul style="list-style-type: none"> • Specialist support for older people with alcohol issues and long term physical health needs. • The service will operate from a council owned HCA funded building subject to committee approval. • The service will allow a longer term stay than other hostel accommodation but will have a focus on recovery from substance misuse and reintegration into the wider community. 	12 TBC

Peer Support / Work & Learning / Lifeskills / Education	<ul style="list-style-type: none"> • Model still being developed through evaluation of service needs and gaps and feedback from Stakeholders. • We will commission a peer support model to work with individuals with multiple and complex needs to look at recovery and reintegration within the community, accessing services as well as community groups and activities. • We intend to procure services which offer personalised education, lifeskills and employment service to support people to live independently and move away from homelessness. 	TBC
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4. Internally Provided Council Services

4.1 Brighton & Hove City Council currently provides a number of accommodation and support services within the Integrated Support Pathway. These services are included in the remodelling proposal.

It is proposed that external providers are sought for New Steine Mews Hostel, The West Pier Project (which is part of the Mental Health Pathway), Lifeskills and Business Action on Homelessness as part of the tender process. The market for providing accommodation and support services for homeless people both within the city and nationally is diverse. There are a range of services currently operating within the voluntary sector which specialise in training, development and innovation in the delivery of homeless services and have a proven track record of running specialist assessment services, hostels for people with multiple and complex needs and support services for the homeless. These organisations have infrastructures which focus on developing expertise, innovation and improving services for homeless people. They have a knowledge and skills base in homelessness which the local authority cannot match within its current resources.

4.2 Specialist providers in the independent sector can offer added value which includes opportunities to explore and expand funding sources. They can provide a quality service based on a clear service specification, supported by a robust contract management function through the Adult Social Care Commissioning team.

4.3 The remodelling proposal detailed in this paper includes the provision of services for homeless people which are directly provided by Brighton & Hove City Council. These services are detailed below:

Service	Service Description	Staffing (July 16)
New Steine Mews Hostel	24 beds of 24 hour supported hostel accommodation	10.2 FTE (full time equivalent)
Glenwood Lodge Hostel	47 beds of 24 hour supported male only hostel accommodation.	13 FTE

West Pier Project	25 beds of 24 hour supported accommodation with those with mental health & substance misuse needs within the mental health pathway.	12.3 FTE
Lifeskills Project	Offering one to one and small group work with hostels residents to develop the skills needed for independent living	2 FTE
Behaviour Support Service	Psychology service offering case work support to individuals, and support to staff within adult and youth homeless services.	2 FTE
Business Action on Homelessness	Support into work service – currently not staffed.	0 FTE

4.4 The proposals for the services are as followings:

New Steine Mews Hostel

It is proposed that New Steine Mews is subject to an external tender as part of Stage 1. The building is owned by the council can provide mobility accessible rooms, food and has an additional building suitable for the safe space places and its use by the successful Provider will form part of the tender package.

West Pier Project

It is proposed that the West Pier Project is subject to a joint external tender with the CCG who joint fund the service. The service would remain part of the mental health pathway as a service for those with severe and enduring mental health needs and substance misuse issues. It is proposed that the West Pier Project be tendered as part of Stage 2.

Lifeskills & Business Action on Homelessness

It is proposed that these services are included as part of a wider education and work and learning tender which is still in development. The tender for this service would be included in phase 3 of the tender process.

It is proposed that **Glenwood Lodge Hostel and the Behaviour Support Service** remain as council provided services pending further work on the future model of these services.

Staff and Managers within these services have been made aware of the proposals and will be kept up to date with ongoing developments.

We are commissioning outcome focused services, so only the minimum requirements are set out in the specification. The detail of the model will be developed as part of the quality evaluation of the tenders, based on the proposals submitted by bidders. This means that the required staffing structure, roles and numbers to deliver the new model of support have yet to be determined and the impact and implications for existing employees delivering current services are not yet known. At this stage existing employees may see their employment and role either TUPE transfer to a new provider and/or be retained & reviewed by their current employer and/or ended as existing services cease. The

implications for existing staff will be communicated in due course as they emerge in the procurement process.

4.5 Feedback from Staff & Trade Unions

Unison and the GMB are being consulted on the proposed changes to in house homeless services provision.

5. The new model will require changes in 3 key areas:

5.1 Change of approach to providing accommodation

The new model of accommodation and support will require a significant shift in working practices for all providers as we move towards a psychologically informed, personalised, asset based model of support which minimises evictions and reduces the number of 'revolving door' clients (people who move between services without reaching a positive sustainable outcome), increases multi agency and integrated working. The Commissioning Team intends to work closely with providers as part of the transition and on an ongoing basis to create flexible services which are able to change and adapt based on needs and emerging good practice.

The new accommodation services are being developed in order to increase flow and enable more individuals to be helped away from rough sleeping and homelessness towards independent living or to access services that best meet their needs. This means that more people will be able to access accommodation. The total number of beds in the new model will be dependent on the winning tenders; however a minimum number of beds will be specified for each tender to ensure value for money.

Current model:

Service	Beds in Current Model	Beds in New Model (pending award of new contracts)
24 Hour Supported Accommodation	273	161
Medium Support Accommodation	0	102-127
Low Support Accommodation	157	80-100
Other High Risk Offenders & Housing First	13	13
Total:	443	356 – 403

In addition to this a further 53 beds of low support accommodation was commissioned in June 2016 which supports move on from single homeless accommodation and the mental health pathway.

5.2 Infrastructure that supports Homeless people in the city

As the Integrated Support Pathway is being remodelled, a review of the working groups and infrastructure which has supported the Integrated Support Pathway will be undertaken. This will enhance the integration of services and expand multi agency working in line with new models of working in homeless services, new strategies and the Homeless Better Care programme.

5.3 Innovation in Service Delivery

As part of the new service model a number of developments are already taking place in line with national good practice and locally identified need these include:

- A bespoke IT system to support referrals and client data collection is in development. Subject to data and information governance legislation. This will enable Commissioners to closely monitor services, trends, client journeys and identify gaps. It will also enable services to quickly share information and prevent service users having to repeatedly tell their stories to different services.
- Working with staff to embed Psychologically Informed Environments (PIES); PIES were developed as a way of working with individuals who have experienced trauma to give them a route out of homelessness. PIES concentrates on staff support and training, personal relationships, the physical environment and the psychological needs of both staff and service users. Further information on PIES can be found at <https://www.mentalhealth.org.uk/sites/default/files/pies-literature-review.pdf>
- Working with Housing and Voluntary Sector partners to support access into private rented sector accommodation.
- To pilot the safe space 72 hour assessment service within a current accommodation service with the St Mungo's rough sleeper outreach service. This pilot will take place over 4 weeks in two, two week periods.
- Embed service user consultation and involvement through work with the Fulfilling Lives service user action group and the CGL Peer Mentors. Fulfilling Lives is a lottery funded project to work with homeless people with multiple and complex needs. The service works with Commissioners around whole system change and has a service user group available to support commissioning and service development. CGL provides a group of Peer Mentors who work across the city including in hostel accommodation. The aim of this work is to consult with service users on the development of services and the assessment and referral process.
- To develop partnerships and support integrated working and 'in reach models' which will expand the services which are on offer in supported accommodation such as leisure activities, staff training, health care, health promotion, healthy eating and substance misuse services. This work will be aligned with the Better Care Model.

6. Links to Better Care

- 6.1 ASC and local health services have been working together since 2014 to integrate and align services for homeless people with health needs. A new

model of service provision is in development and will be in place from 2017. This will be a healthcare hub with co location of services. The aim is for these services to deliver an integrated and specialist health and care service for the city's homeless population to address health inequalities and reduce unplanned admissions to hospital and attendance at A&E.

Central to the model is a specialist primary care led multidisciplinary team (MDT) including:

- Specialist Homeless General Practice
- Community health services (nursing, OT, physiotherapy, mental health)

The community health services have been 'in reaching' into hostels since 2014 delivering health care, Occupational Therapy and physio services to residents. They have uncovered a large amount of unmet health needs and work with hostel staff to ensure people access their GP and other mainstream services.

7. Referral and Assessment

- 7.1 Placements into supported accommodation are currently managed through the Allocations Team within Housing. This team assess an individual's needs through a matrix system and makes placements via a weekly panel meeting. The proposed new model of accommodation will require a review of the referral & assessment process in line with the Rough Sleeping Strategy to ensure the delivery of effective support planning for individuals.

8. ANALYSIS & CONSIDERATION OF ANY ALTERNATIVE OPTIONS

- 8.1 The development of the new model has been consulted on with stakeholders and consideration has been given to a number of options of types of accommodation and support. Through this process the model most suitable for the needs and demographics of Brighton & Hove has been developed. The aim of the newly tendered services is that they will be flexible and adaptable to changing demands, good practice and new innovations so they can continue to develop as the city changes.
- 8.2 Consideration has been given to developing the directly provided council services proposed to go out to tender in this paper in house, however as explained in section 4 this was discounted as an option. External providers of accommodation services for single homeless people nationally have been building their expertise in this area over many years. It is becoming increasingly difficult for local authorities to secure resources and develop the expertise to develop more specialist homeless services.

9. COMMUNITY ENGAGEMENT & CONSULTATION

- 9.1 Full consultation was undertaken as part of the development of the Housing, Homelessness and Rough Sleeper Strategies which included service users and stakeholders.
- 9.2 Consultation was undertaken with partners, stakeholders and providers prior to the development of the model to identify service demand, gaps and barriers.

This consultation has continued through working groups and with individuals on the new model and on the proposed tender process.

- 9.3 Consultation and engagement is part of an ongoing process and will continue after the tender process as services mobilise and develop.
- 9.4 We are working with the Fulfilling Lives Service User Group and CGL (formerly CRI) well established Peer Mentors to ensure we have ongoing structures in place to consult with service users on the development of the new services. The Fulfilling Lives group is part of the group developing referral and assessment forms and will be providing support with the tender evaluations.

10 CONCLUSION

- 10.1 The remodelling of current accommodation and support services is integral to improving outcomes for single homeless people, reducing rough sleeping and meeting changing needs.
- 10.2 The contracts for the externally provided services contained in the remodelling proposals terminate with effect from the 31st March 2017 and retendering is required under procurement regulations and in order to comply with the Council's Contract Standing Orders.
- 10.3 It is imperative that single homeless accommodation and support services are aligned with key strategies within the city including the Better Care integrated model for Homeless People and the recently approved Rough Sleepers Strategy.
- 10.4 In order to develop a new model of accommodation and support the infrastructure surrounding these services needs to be reviewed including the working groups and the referrals and allocations processes. These structures are integral to the success of the proposed new model.
- 10.5 This report proposes the external tender of a number of current directly provided council services. Specialist providers in the independent sector can offer added value. This includes opportunities to explore and expand funding sources that are not available to services that are directly provided by the council.
- 10.6 This report recommends that authority be delegated to the Executive Director for Health, Adult & Social Care to procure and enter into any contract to secure effective delivery of support services for vulnerable people as outlined in Section 3 of the report, having consulted with the Executive Directors for Economy, Environment & Culture, Neighbourhoods, Communities & Housing, Families, Children & Learning and the Monitoring Officer.

11. FINANCIAL & OTHER IMPLICATIONS:

Financial Implications:

11.1 *The external contracts for providing Single Homeless and Rough Sleepers Accommodation Support Services noted within this report are included within the Housing Related Support budgets. The revenue targeted budget management (TBM) net budget for the Integrated Support Pathway contracts is £2.678m in 2016/17 and £7.945m across 2016-2019 which includes savings identified in the 4 year Integrated Service Financial Plan and a 2% inflation year on year.*

The revenue TBM net budget for the in-house service identified for external tenders noted in this report is £0.758m in 2016/17. The potential financial implications of the re-model will develop in line with the procurement process making sure that we provide value for money across the services.

Where the contracting-out of a service to another provider involves a transfer of staff covered by the Transfer of Undertakings (Protection of Employment) (TUPE) regulations (as may be the case here for some / all staff), there are likely to be pension-related costs of transfer. Consideration will need to be given to:

- i) An assessment of the current pension liabilities for any transferring staff and any pension deficit on the fund (this information is provided by the pension fund) – any pension deficit is normally payable by the awarding authority and will be taken into account in assessing savings potential and value for money;*
- ii) Whether or not a 'bond' will be required from the provider – this is normally the case to insure against outstanding pension liabilities in the case of business failure/insolvency. Tender invitations can therefore ask for prices with or without a bond;*
- iii) Whether or not the council will act as a 'guarantor'. This can be considered in addition to a provider bond to offer additional assurance to the pension fund. There is no direct financial implication.;*

Given the uncertainty as to whether the TUPE Regulations will apply to some / all of the staff involved in this service (as the commissioning is for outcome focused services rather than replicating the current model), and the potential impact for the tender process, the considerations identified above will need to be made clear to potential bidders at the outset as an integral part of the overall procurement exercise. The procurement process will therefore obtain the necessary confirmation from potential bidders that they are willing to comply with the council's requirements

Finance Officer Consulted: Neil J Smith Date: 31/08/16

Legal Implications:

11.2

The purchase of services by a public body is subject to the Public Contracts Regulations 2015 (PCR) where they meet the applicable threshold and unless they are expressly excluded from the regulations. Certain services are excluded from the full procurement regime and those services, which include health and social care, are listed in Schedule 3 to the PCR. The services described in this report fall with Schedule 3 and are therefore subject to a "light touch" process. This requires the services to be procured transparently and without discrimination and where their value exceeds the threshold of Euros 750,000 or the sterling

equivalent of £589,148.00 the opportunity must be advertised by the placing of a Prior Information Notice calling for competition or a Contract Notice in the Official Journal of the European Union. The award of a contract without prior advertisement will render the contract open to challenge by an economic operator which as a result suffers or risks suffering, loss or damage.

Contracts below the threshold must be awarded in accordance with the Council's Contract Standing Orders. Contracts valued in excess of £250,000 to comply with Contract Standing Orders must be in a form approved by the Head of Law and shall be given under the Common Seal of the Council.

Lawyer Consulted: *Name Judith Fisher* *Date: 12/08/16*

12. Equalities Implications:

An Equalities Impact Assessment has been completed and is under regular review in relation to the tender and remodelling process. The tender and remodelling of services aims to tackle a number of equalities issues including the lack of women only accommodation and specialist services for those with physical health issues.

The client group for these services tends to experience multiple exclusions, and have multiple and complex needs and the aim of the newly commissioned services is to improve service models and ensure they provide better outcomes for the most vulnerable.

The full Equalities Impact Assessment is available as additional information.

13 Sustainability Implications:

Procurement processes are taking into account the sustainability of housing stock and the principles of social value in order to achieve best value for money and sustainability of services.

14 Any Other Significant Implications:

14.1 With the retendering of single homeless and rough sleeper accommodation comes the risk that a large number of individuals will need to move between accommodation services. The potential impact of this risk is being mitigated by additional time being given to the mobilisation of new services and by continued communication with service providers and partners as the process continues.

14.2 Single homeless people are subject to multiple disadvantages in terms of mental and physical health, substance misuse and worklessness. As part of the new assessment model we will be working with partners to ensure health, substance misuse, mental health and social care assessments are undertaken at an early stage so that service users are provided with the support that they need to recover and move towards independence. Some of this work is already in

progress with the development of the Homeless Better Care programme. In the short term this process of assessment may increase the demands on health, substance misuse and social care services through increased assessment, identification of needs, and engagement in services. However in the long term it will prevent the worsening of physical and mental health conditions, reduce the demand of crisis intervention services and prevent deaths.

Other implications include

- The possible loss of current accommodation within the integrated support pathway.
- The possible loss of employment for staff members through the remodelling of services and TUPE process.
- The risk of the loss of bed spaces and decanting of people in services. This risk is mitigated longer term through the remodelling of services to ensure better outcomes for services users.

SUPPORTING DOCUMENTATION

Appendices:

1. Appendix 1 – Current Service Provision
2. Appendix 2 – Model Graphic

Documents in Members' Rooms

1. Equalities Impact Assessment

Background Documents

- Rough Sleeper & Single Homeless Needs Assessment 2013
- Homeless Health Audit 2014
- Homelessness Strategy 2014-19
- Overview & Scrutiny Report on Homelessness & Rough Sleeping 2014
- Rough Sleeping Strategy 2016