

# Brighton & Hove Rough Sleeping Strategy 2016

*Making sure no-one has the need to sleep  
rough in Brighton & Hove by 2020*



Brighton & Hove  
City Council

## About this Strategy

The issue of rough sleeping has become more acute recently with a visibly increased presence on the streets. This not only impacts on the individual's life chances, but also the city's reputation and costs to public services and business.

The city's approach to rough sleeping has been re-assessed to ensure commissioners, service providers and those supporting people sleeping rough are working in partnership to a clear strategic plan. This plan will reduce rough sleeping in the city and improve outcomes for people sleeping rough and those at risk of rough sleeping.

The Rough Sleeping Strategy has been developed in phases to give stakeholders the opportunity to help shape the city's priorities and future action:

1. **Position Paper (Nov/Dec 2015):** This was published in November 2015 and summarised the city's current approach to rough sleeping. The Paper was used as the basis for consultation in December 2015 which included a stakeholder summit attended by 78 professionals from a wide range of services across the community and statutory sector representing specialisms such as housing, health, care, community safety and advocacy.
2. **Draft Rough Sleeping Strategy 2016 (Mar/Apr 2016):** The results of the Position Paper consultation were used to write our draft strategy which was published for additional consultation.
3. **Final Strategy (June/July 2016):** This document. Stakeholders are encouraged to formally Pledge to the vision, aims and objectives of the strategy to ensure a unified and consistent approach across the city.
4. **Implementation 2016/17:** Delivery of the city's strategy and remodelling or redesigning services where necessary.
5. **Monitoring and review 2016/2020:** Action against the 12 goals within the strategy will be monitored and reviewed at regular interval to ensure that satisfactory progress is being made.

As the strategy has a far-reaching impact across all sectors, local people, and most importantly, those sleeping rough, it has been adopted on behalf of the city by:

- Brighton & Hove City Council Housing & New Homes Committee
- Brighton & Hove City Council Neighbourhoods, Communities & Equalities Committee
- Brighton & Hove Strategic Housing Partnership
- Brighton & Hove Health & Wellbeing Board
- Brighton & Hove Connected

Representatives and organisations from the statutory, community and voluntary sectors are encouraged to Pledge their commitment to working in partnership to deliver the vision of the strategy.

# Introduction from the Lead Member for Rough Sleeping

I would like to welcome you to our new Rough Sleeping Strategy 2016.

Whilst this strategy is giving us the opportunity to refocus and reprioritise services within the available funding to better meet the needs of those at risk, it is fundamentally about improving and saving lives. Those sleeping rough die, on average, 30 years younger than the rest of the population and we must take steps to prevent this happening in our city.

We have worked with partners across Brighton and Hove to develop the strategy and together we have agreed key priorities and goals that will build on the good practice we already have within the city. To make these goals a reality for people sleeping on our street we will need all the efforts of the council, NHS, police, voluntary and faith groups and local charities to put our plan into action. I am therefore delighted to see the endorsement of the strategy by so many of these key organisations.

Amongst the range of actions in our new strategy, we will see:

1. A new shared agreement, a **Pledge** backed up with a **Multi-Agency Protocol**, between the council, service providers, and other groups supporting people sleeping rough aimed at making sure we are all promoting the same consistent message, a single offer of support focussed on moving away from rough sleeping and street life.
2. A new permanent **Assessment Centre** with a number of temporary (sit-up) beds to enable service providers to assess the needs of people sleeping rough in a stable environment.
3. Each person having their own **Multi-Agency Plan** that will outline who is responsible for co-ordinating their care, which services are working with them and the support available. A key part of the Plan will be to outline the client's housing options to help them make an informed choice about their future.
4. A **primary care led hub** with a multidisciplinary team delivering services in a number of settings in the city. This will to support homeless people to access primary and community healthcare services and include outreach to street settings where appropriate, day centres and hospitals to support care and discharge planning.

5. **New accommodation** for older homeless people with complex needs following a successful bid to the Homes & Communities Agency for £569,000. The accommodation which will offer at least eight en-suite rooms adapted for people with physical disabilities, they will be able to get the extra support they need to improve their lives. This will also free up hostel space for others in need.

We are fortunate that Brighton & Hove is a caring city and I am constantly amazed at the kindness and generosity shown by local people to those in need. Residents that want to help can do so by:

- Letting services know where people can be found sleeping rough (through the StreetLink smartphone app, website or phone number)
- Donating money and useful items to a local charity
- Volunteering to work for one of the local charities

I urge you to pledge your support to this strategy and help people move away from the streets, making sure no-one has the need to sleep rough in Brighton & Hove by 2020.



Councillor Clare Moonan  
Lead Member for Rough Sleeping



**Don't walk by if you see someone sleeping rough.**

Available on iTunes  
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Connecting rough sleepers to local services  
**StreetLink** | **0300 500 0914**  
**www.streetlink.org.uk**

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# 1. The City's Strategy

Rough sleeping and the impact of the wider street population affect everybody in Brighton & Hove.

People sleeping rough die younger<sup>1</sup>, suffer ill health and are more vulnerable to violence than those in the wider population. It impacts on businesses, residents and tourists through shoplifting, begging, street drinking and other anti-social behaviour. These place additional demands on the council, police and health services yet the cost of preventing rough sleeping or supporting someone back into independence is much less than the cost to the individual and society than a life on the streets<sup>2</sup>.

## The City's Vision

Through this strategy, all those with a stake in Brighton & Hove need to work together to prevent homelessness and rough sleeping, and to support those affected into regaining their independence so we can deliver our vision:

***“To make sure no-one has the need to sleep rough in Brighton & Hove by 2020”***

## The City's Strategic Priorities

To help us come together as a city and deliver the strategic vision, we have focussed our strategy on five priority areas:

- 1. Preventing Homelessness and Rough Sleeping** – to provide a consistent message about housing options that helps services prevent homelessness and moves people away from sleeping rough
- 2. Rapid Assessment and Reconnection** – outreach to assess the needs of people sleeping rough to plan support, and where appropriate, reconnect people with friends, families and support networks, before they are fully immersed in street life
- 3. Improving Health** – to ensure people sleeping rough are supported by health and social care services that help them to regain their independence
- 4. A Safe City** – making sure people sleeping rough, residents and visitors are safe and free from intimidation
- 5. Pathways to Independence** – making sure supported accommodation offers solutions appropriate to residents needs

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<sup>1</sup> Homelessness Kills, Crisis, 2012

<sup>2</sup> Research into the Financial Benefits of the Supporting People Programme, DCLG, 2009

Our vision and priorities acknowledge that some people may initially choose to remain on the city's streets. We will make sure that services continually engage with all those sleeping rough to support them into a position where ultimately they do decide to move away from street life.

### **The City's Strategic Principle: Working together, a partnership**

Within these priorities there is an underlying principle that, as a city, whether service commissioner, provider, community group, or individual with the desire to help, **we need to work together** to provide a consistent message and response to rough sleeping to support people to turn a corner and improve their lives.

The city's strategy needs to harness this expertise, energy and goodwill to enable all those with a stake in the city to work together as partners to deliver the shared vision:

- Street Outreach Services (St. Mungo's)
- Brighton Housing Trust (including First Base Day Centre)
- Brighton YMCA
- St John Ambulance
- Community and Voluntary Sector
- Faith based groups
- Churches Winter Emergency Shelters
- Pavilions Drug and Alcohol Services
- Private landlords
- Brighton & Hove Business Crime Reduction Partnership (BCRP)
- Brighton City Centre Business Improvement District (BID) (City Centre Ambassadors)
- YMCA DownsLink Group
- Stopover (Impact Initiatives)
- Sanctuary Housing (The Foyer)
- Night Stop Plus
- Clocktower Sanctuary
- Emmaus
- Synergy
- Soup Run
- Sussex Armed Forces Network
- British Legion
- Help for Veterans
- Brighton & Hove City Council (BHCC) including Adult Services, Children's Services, Housing, CityClean, Community Safety, Public Health
- NHS organisations including Brighton & Hove Clinical Commissioning Group (CCG), Sussex Partnership Foundation Trust, Brighton & Sussex University Hospitals Trust, South East Coast Ambulance Service, Sussex Community Foundation Trust

- Sussex Police (Street Community Neighbourhood Police Team)
- Kent, Surrey and Sussex Community Rehabilitation Company
- HM Prison Services
- Sussex Homeless Outreach, Reconnection and Engagement (SHORE) Partnership
- Homeless Link
- People with experience of sleeping rough
- The residents and visitors of Brighton, Hove, Portslade and Sussex

A constructive and meaningful dialogue is needed with those groups working in the city to support people sleeping rough who are not connected to the city's formal partnership structures. This will help all groups collectively understand what they want to achieve and make sure this good will and our combined efforts are not keeping people on the streets, but are focussed on getting people off the streets.

### **Implementing and Monitoring the Strategy**

Whilst the strategy's success requires the commitment of a wide range of groups across the statutory, community and voluntary sector, ultimate responsibility lies with the council. Progress on implementing the strategy will be reported to the relevant Council committee(s).

In addition, a set of five partnership **Homeless Strategy Working Groups** are tasked with developing action plans to implement the priorities of the Homeless Strategy 2014. These are focussed on the Integrated Support Pathway; Work & Learning; Youth Homelessness; Homeless Prevention; and Day & Street Services. These groups are being reviewed to develop stronger links with health and other support services to encourage the shared ownership of actions which relate to improving services and improving the outcomes of service users. This model will include wider representation from service users and be implemented by March 2017.

Strategically, we will report on a number of indicators, including:

- Number of people sleeping rough
- Number of people sleeping rough (with a local connection)
- Number of people on the waiting list for supported accommodation

To help monitor and recognise the vast amount of work carried out by service providers and voluntary groups on a day to day basis, a number of workflow measures will be developed as part of the work to develop a Multi-Agency Protocol to support frontline services. This will include measures such as:

- Number of people prevented from becoming street homelessness
- Number of people sleeping rough worked with
- Number of rough sleeping cases
- Reconnections
- Positive moves from hostels

## 2. Rough Sleeping in Brighton & Hove

### What do we mean by People Sleeping Rough?

This strategy is not just about those living and sleeping on the city’s streets, but all those, predominantly single people, who are homeless where there is not likely to be a statutory housing responsibility.

For the purposes of the strategy, people sleeping rough have been defined as:

- People sleeping rough within Brighton & Hove
- Squatters who were previously or are at risk of sleeping rough
- Sofa surfers who were previously or are at risk of sleeping rough
- Those living in motor vehicles (not including Travellers)
- Those living in tents (not including campers, protesters or Travellers)
- Those currently supported in hostels who were previously sleeping rough
- All others considered at risk of rough sleeping

### The City’s Challenge

People sleeping rough are a transient population and the city’s street services work with more than 1,000 cases each year, 20 every week. Around a third of these relate to people being seen more than once (in 2014/15 there were 1,129 cases involving 775 people). In November 2015, a snapshot of a single night estimated there were 78 people sleeping rough in Brighton & Hove:

People living on the streets	2010/11	2011/12	2012/13	2013/14	2014/15	2015/16
Street service cases (year)	588	732	1,163	1,066	1,129	Awaiting data
Official street count (people on a single night)	14 (Nov’10)	36 (Nov’11)	43 (Nov’12)	50 (Nov’13)	41 (Nov’14)	x
Street estimate (people on a single night) <sup>3</sup>	x	76 (Nov’11)	90 (Mar’13)	132 (Mar’14)	x	78 (Nov’15)

There are concerns that numbers could increase further over the next year with the natural draw of Brighton & Hove as the place to be, the impact of welfare reforms and the high cost of accessing and sustaining accommodation in the city’s private rented sector.

Supported accommodation is generally prioritised for those in need with a local connection<sup>4</sup>. As of May 2016, the city has 272 hostel beds and 25 mental health

<sup>3</sup> The Rough Sleeper Estimate is a different methodology from the official count and records the number of rough sleepers known to services in the city on a particular date.

hostel beds which are full. There are also 215 local people on the waiting list for supported accommodation (82 of which are considered a high priority):

- 151 for hostel places with 24 hour support (43 high priority)
- 24 for young people's services with 24 hour support (20 high priority)
- 40 for mental health accommodation (19 high priority)

On average, it costs around £10,000 each year to support someone in a hostel, temporary accommodation or Housing First arrangement. We need services to focus on preventing homelessness and identifying housing solutions for those ready to move on from supported accommodation to increase throughput in the system and free up space for those newly in need where prevention has not been successful.

Information is not available for many of the hidden homeless in our city that may be living in squats, sleeping on sofas, or staying with friends and family. Nationally one study has shown that of 437 single homeless individuals, 62% were hidden homeless and a quarter had never accessed any accommodation provided by a homeless or housing organisation.<sup>5</sup>

### **Local Inequalities**

Rough sleeping is rarely a lifestyle choice, but usually driven out of desperation, poverty and ill health. As people become entrenched in street life and suffer the impact it has on their health and wellbeing, it becomes increasingly difficult for them to see or consider a viable alternative. Health services, police and prisons report high levels of service need caused by rough sleeping:

- People sleeping rough are more likely to be the victim of crime and also more likely to commit crimes.
- The city's Joint Strategic Needs Assessment<sup>6</sup> highlights a high prevalence of mental and physical ill-health and drug and alcohol dependency amongst people sleeping rough. Other common problems include physical trauma (especially foot trauma), skin problems, respiratory illness and infections.
- Nationally, it is estimated that the use of inpatient hospital care by people who are sleeping rough or living in insecure accommodation (such as hostels) is eight times higher than in the general population aged 16-64.
- The average age of death for a homeless person nationally is estimated to be 47 years old compared to 77 for the general population.

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<sup>4</sup> Local Connection: The statutory definition of local connection is heavily shaped by case law stemming from the Housing Act 1996, Part 7, Section 199(1) which provides that a person has a local connection with the district of a housing authority if he or she has a connection with it: i) because he or she is, or was in the past, normally resident there, and that residence was of his or her own choice; or ii) because he or she is employed there; or iii) because of family associations there; or iv) because of any special circumstances. <http://www.legislation.gov.uk/ukpga/1996/52/section/199>

<sup>5</sup> Crisis, K Reeve with E Batty, The Hidden Truth about Homelessness – Experiences of Single Homelessness in England, May 2011

<sup>6</sup> Joint Strategic Needs Assessment 2014: Rough Sleeping and Single Homeless: <http://www.bhconnected.org.uk/sites/bhconnected/files/jsna-6.4.3-Rough-sleepers2.pdf>

The rough sleeping and single homeless population is not representative of the wider city with the **2014/15 Rough Sleeper Annual Report** showing that of the 1,129 cases (involving 775 people):

- 83% were male; 17% were female
- 12% (136 cases) were aged 17-25; 7% (83 cases) were over 55
- 81% (917 cases) indicated that they were UK nationals
- 19% (212 cases) were not from the UK with the largest group from central or eastern Europe (86 cases, a 50% increase from this region on 2013/14)
- 39% (438 cases) had a local connection. Where known, the main reasons given for rough sleeping amongst those with a local connection in 2014/15 were: eviction from hostel or temporary accommodation (31%); abandoning own accommodation (13%); relationship breakdown (13%); prison release (12%), left rehab (11%). However, this does not identify the underlying cause, just the most recent trigger. For example, those evicted from hostels were already homeless.

### Local Causes of Rough Sleeping

Homeless Link carried out a qualitative research project in partnership with the Coordinated Agency Interventions to End Rough Sleeping (CAIERS) group, who work with people sleeping rough in Brighton & Hove<sup>7</sup>. The research was based on 29 in-depth interviews with clients using the city's homeless services 2014.

The research identified that the causes of homelessness and repeat homelessness are divided into two main areas:

- Structural - which included poor and unsuitable housing, insecurity in the private rented sector, transitioning/leaving accommodation or institutions (especially prison) and loss of employment; and
- Personal reasons - which included mental health issues, experience of trauma, relationship breakdown, and fleeing domestic violence or abuse.



There is a strong pull for people coming and returning to the city because they consider the city to be a place of diversity and acceptance. Many people had happy memories of Brighton & Hove, which stemmed from childhood or previous relationships. While people were positive about the homelessness services available, they were more likely to talk about how much they liked the town rather than its services.

There was a lack of understanding about local connection policies in Brighton & Hove. Many people travelled back to the city on the basis that they had previously held a local connection, only to find out that they were no longer eligible.

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<sup>7</sup> Repeat Homelessness in Brighton, Homeless Link, 2015:  
<http://www.homeless.org.uk/sites/default/files/site-attachments/Picture%20the%20Change.Repeat%20Homelessness%20in%20Brighton.pdf>

Some of those who had been helped to reconnect and move, either by the local authority or support services had returned to Brighton & Hove because they had been unable to access the support they needed. For others, the pull of Brighton & Hove meant that they were prepared to remain homeless if this meant remaining local to the area.

The recommendations made by this research have been used to help shape the strategy.

### **Rough Sleeping Amongst Lesbian, Gay, Bisexual and Trans\* People**

The Stonewall Housing Finding Safe Spaces<sup>8</sup> project was commissioned by the Homelessness Transition Fund to understand the experiences of Lesbian, Gay, Bisexual and Trans (LGBT\*) people who have been street homeless.

Stonewall Housing spoke directly with LGBT\* people who had experienced, or were experiencing, rough sleeping during summer 2014 in Manchester, Brighton and east London.

Whilst there were a wide range of reasons for rough sleeping amongst this group, the research found that more often than not, rough sleeping was related to their sexual orientation or gender identity. This had detrimental and often irreversible effect on their support systems of people such as after coming out to friends or family.

Stonewall Housing research with LGBT\* people sleeping rough in the city found that many did not feel safe in hostels or on the streets. Drugs, alcohol, sex work or sex in exchange for accommodation was used as a way to secure a place to sleep, despite the great risk to safety as well as to their mental, physical and sexual health.

The research made a number of recommendations and Brighton & Hove City Council has committed (as part of the Trans Scrutiny Report) to reviewing these for the Rough Sleeping Strategy. These have been included in the strategic actions listed under the five strategy priorities.



<sup>8</sup> Finding Safe Spaces: Understanding the experiences of lesbian, gay, bisexual and trans\* rough sleepers, Stonewall Housing, 2014: <http://www.stonewallhousing.org/>

## 3. The City's Connected Approach

### Care Act 2014

The Care Act 2014<sup>9</sup> recognises housing as a health related service, and places a duty on local authorities to integrate care and support provision with health services and health related services. This strategy shows how the city's health, care and housing services are working together and in partnership with the wider statutory, community and voluntary sector to prevent and minimise rough sleeping and supporting those affected back to independence where possible.

### Housing Strategy 2015 & Homeless Strategy 2014

The Housing Strategy 2015<sup>10</sup> is a key stand alone chapter of the city's Community Strategy<sup>11</sup>, and through the strategy:

*"We want Brighton & Hove to be an inclusive city with affordable, high quality, housing that supports a thriving economy by offering security, promoting health and wellbeing and reduces its impact on the environment. We want to help bring about integrated communities in a society that values everyone to recognise and tackle the inequality faced by families, the poor and the vulnerable."*

The Housing Strategy 2015 incorporates the priorities of the Homelessness Strategy 2014<sup>12</sup> to prevent homelessness through early intervention, and the timely provision of advice and support. When homelessness is unavoidable, there is a need to ensure that people receive appropriate housing, care and support, with a clear pathway towards living independently.

The Homeless Strategy 2014 has five strategic objectives:

1. Provide housing and support solutions that tackle homelessness and promote the health and well-being of vulnerable adults
2. Provide 'whole families' housing and support solutions that tackle homelessness and promote the well-being of families and young people.
3. Develop access to settled homes
4. Reduce inequality and tackle homelessness amongst our communities of interest
5. Provide integrated housing, employment and support solutions as a platform for economic inclusion

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<sup>9</sup> Statutory guidance to support local authorities implement the Care Act 2014 (Section 15.5): <https://www.gov.uk/guidance/care-and-support-statutory-guidance>

<sup>10</sup> Housing Strategy 2015: <https://www.brighton-hove.gov.uk/sites/brighton-hove.gov.uk/files/Housing%20Strategy%202015%20%28FULL%20COUNCIL%20FINAL%29.pdf>

<sup>11</sup> Brighton & Hove Community Strategy: <http://www.bhconnected.org.uk/strategy/strategy>

<sup>12</sup> Homelessness Strategy 2014-19: [http://present.brightonhove.gov.uk/Published/C00000709/M00005185/AI00040396/\\$HomelessStrategy2014CommitteeVersion.docx.pdf](http://present.brightonhove.gov.uk/Published/C00000709/M00005185/AI00040396/$HomelessStrategy2014CommitteeVersion.docx.pdf)

### **Housing Related Support Commissioning Strategy 2015**

Accommodation and support services for single homeless people are provided by the Housing Related Support team in Brighton & Hove City Council's Adult Services (Adult Social Care). These services aim to prevent homelessness and rough sleeping amongst vulnerable people and provide support to help individuals move towards or maintain independent living.

The team is redrafting service specifications to ensure services are flexible. This is to provide a more personalised response to need, reducing dependency, avoiding duplication with other services across the city and meeting local priorities such as reducing admissions to more intensive services, as well as in response to budget reductions.

Those with the most complex needs, who receive a range of services, will be supported into independence where this is achievable or will have a suitable service in place to support them to maintain accommodation and prevent homelessness. A focus will also be on people who have been in homeless services for some time to offer them sustainable support and accommodation packages.

### **Brighton & Hove Better Care Plan**

The Brighton & Hove Better Care Plan describes how services for our frail and vulnerable population will be improved to help them stay healthy and well, will be more pro-active and preventative, and promote independence.

In Brighton & Hove improving health and care outcomes for homeless people has been identified as a priority. A Homeless Integrated Health & Care Board was established in 2014 with the vision:

*“To improve the health and wellbeing of homeless people by providing integrated and responsive services that place people at the centre of their own care, promote independence and support them to fulfil their potential.”*

The Board includes representatives from BHCC (adult social care, housing and public health), the CCG and NHS Trusts, a GP, community and voluntary sector, Sussex Police and service user representation. The Board has developed an integrated health and care model with a multi disciplinary team approach focussing on the single homeless people in the city that will be implemented in 2017.

### **Housing Related Support Cost Benefit Analysis**

In 2009, the Department of Communities and Local Government commissioned Capgemini to produce a cost benefit analysis of housing related support services<sup>13</sup>.

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<sup>13</sup> Research into the Financial Benefits of the Supporting People Programme, Department of Communities and Local Government 2009

In Brighton & Hove the local cost benefit analysis in 2013 showed savings of £4.90 for every £1 spent on housing related support services for single homeless clients.

The study found the financial benefits of housing related support to be:

- Costs relating to housing and homelessness are reduced, because the risks of sleeping rough and failure to move into settled accommodation are reduced
- Health service costs are reduced through improvements in the general health of clients. These result in fewer admissions to Accident and Emergency, lower use of GPs and community mental health services, and fewer admissions to hospital for physical and mental health problems
- Health and social services costs are reduced because of a lower incidence of drug and alcohol problems
- Crime costs are reduced as clients are given advice to help them avoid burglary and street crime, and through reductions in their own re-offending

They also found non-financial benefits which included:

- Improved quality of life for the individual including greater independence, decreased vulnerability, improved health, and greater choice of options on where and how to live
- Greater stability, allowing single homeless people to deal with other issues in their lives, such as substance abuse, unemployment, mental health problems, offending and behavioural problems
- Decreased fear of crime
- Easier access to appropriate services
- Improved involvement in the community (benefiting both the individual and society)

### Resourcing the Strategy

The council is facing significant budget reductions which have seen £77m saved in recent years and a further £68m needing to be saved between 2016 and 2020. This represents around 30% of the council's non-school funding and means that all services require a radical rethink to determine what services, and how they operate. Similarly, financial pressures are affecting health services, the police and the community and voluntary sector. This is at the same time as high housing costs, welfare reform and an ageing population are increasing demands for services.

The council budget for Housing Related Support linked to rough sleeping services is £4.3m for 2016/17. In addition there is £0.6m funding from Better Care, in partnership with the NHS. The Community and Voluntary Sector is estimated to contribute many more millions from other funding sources and in-kind support such as through volunteering. In addition to expenditure on services to prevent rough sleeping and support people back to independence, the Police, criminal justice system and NHS spend significant sums of money on dealing with the impacts of crime, poor health and substance misuse attributable to people sleeping rough.

## 4. Strategy Consultation

The Rough Sleeping Strategy was developed in stages to give stakeholders the opportunity to help shape the city's priorities and future action:

- **Position Paper (Nov/Dec 2015):** This was published in November 2015 and summarised the city's current approach to rough sleeping. The Paper was used as the basis for consultation in December 2015.
- **Draft Rough Sleeping Strategy 2016 (Mar/Apr 2016):** The results of the Position Paper consultation were used to write our draft strategy which was published for additional consultation.

Findings from the consultation and engagement carried out in December 2015 and spring 2016 have helped to develop this strategy.

### Stage 1: Position Paper

A Position Paper was produced that summarised the city's current approach to rough sleeping and existing plans as well as highlighting the challenges we face. This included the draft vision and priorities for the new strategy and was the basis of the initial scoping consultation. This paper was emailed to all councillors, MPs and all stakeholders invited to the summit.

During the Position Paper consultation, a stakeholder summit was held which had 78 professionals attend. An online consultation received 36 detailed submissions covering all aspects of our proposals. The council's website, social media and press engagement was used to promote the consultation.

The Position Paper consultation resulted in a number of changes to the suggested priorities for the city's strategy:

- **Street Triage and Reconnection** were merged into a new priority on **Rapid Assessment and Reconnection** which is developing Multi-Agency Plans for people sleeping rough, where professionals work together with clients to agree the most effective course of action.
- **Managing the Street Communities** received criticism, particularly as people sleeping rough are more likely to be the victims of crime and around half of those in the city's street communities are not sleeping rough. There were also opposing views on the balance between support and enforcement. This priority was been rewritten to focus on making Brighton & Hove **A Safe City** – for rough sleepers, residents, businesses and tourists – and recognises that a life on the streets is not appropriate and should not be supported.

- **Working with the City** has been removed as a priority as it was very clear that partnership working needs to underpin the whole strategy rather than be a separate element. We recognise that not a single element of our strategy is achievable without the combined efforts of all those living and working in the city. **A Partnership Approach** is now the strategic principle of this strategy and underpins all of the work we do.

### Stage 2: Draft Strategy

The results of the Position Paper engagement were used to write our draft strategy which was published for additional consultation in March and April 2016. Again, this was promoted through social media, local organisations, councillors and MPs.

85 responses were completed on the consultation portal and we received some written responses concentrating on particular aspects of the strategy (from politicians, organisations and residents). We particularly wanted to encourage responses from those with an experience of rough sleeping and St Mungo's held a draft strategy consultation exercise over two days at The Synergy Centre that involved more than 30 people sleeping rough. In addition, 30 of those responding on the portal had an experience of rough sleeping or insecure housing:

- 6 had been or were living in a motor vehicle
- 5 had been or were living in a tent
- 12 had been or were sleeping rough
- 23 had been or were sofa surfing
- 12 had been or were squatting

Officers attended a number of stakeholder meetings to raise awareness of the consultation, stimulate debate and seek feedback on the draft strategy including:

- Health & Wellbeing Board
- Homeless Integrated Care Board
- Strategic Housing Partnership
- Civil Military Partnership Board
- Sussex Homeless Outreach Reconnection & Engagement (SHORE)
- Equality & Inclusion Partnership
- Better Care Board
- Day & Street Services Working Group
- Homeless Operational Services Forum

A petition<sup>14</sup> was presented to Brighton & Hove City Council on 16 April 2016 in relation to Sussex Police, rough sleepers and begging. Whilst the petition is to the Police, there was a request that it be considered as part of the consultation on the draft strategy and passed to the Police & Crime Commissioner.

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<sup>14</sup> <http://www.thepetitionsite.com/576/913/589/sussex-police-stop-fining-rough-sleepers/>

## **Responding to the Findings**

Those responding to the consultation recognised that homelessness and rough sleeping could happen to many of us with little warning, such as arising from the loss of a job or a relationship breakdown. These difficult times are compounded when other factors such as mental health, drug and alcohol, and other support needs may be present.

There was overwhelming support for the proposed vision and priorities of the strategy, with many suggestions for improvements to the way we work. Many respondents highlighted the significant challenges faced by the strategy from the fundamental issues arising from the shortage of high quality affordable housing and budget pressures. As these matters are picked up in plans such as the Housing Strategy 2015 and Homelessness Strategy 2014, this strategy has not replicated the actions needed to address these.

Other responses reaffirmed the need for the strategy to take into account the specialist needs of particular groups who may be more vulnerable and require a slightly different approach, such as young people, women and LGBT\* community.

As a result of feedback on the draft strategy, we have refocused our goals and strategic actions:

- **Preventing Homelessness and Rough Sleeping:** Whilst this document provides the vision and strategic framework, we need a more detailed review of the way statutory services and community and voluntary sector groups interact on a day-to-day operational level to prevent homelessness and support people to move away from the streets. Whilst there are a large number of organisations doing incredibly good work in challenging circumstances, some organisations may need support to refocus their efforts to achieve the best outcomes for those they work with. Consultation also highlighted the need for homeless prevention work to happen much earlier as professionals and support groups may spot the signs of risk in someone before they do themselves. We will make it easier for those at risk to get advice before they reach a crisis point.
- **Rapid Assessment and Reconnection:** There was support for the permanent assessment centre and multi-agency plan approach to assessing and supporting someone's needs. Concerns were raised around the use of sit-up beds, how many, where and how long they can be used. This is being examined as part of the Integrated Support Pathway Review through 2016/17. Understandably, people were also concerned that those from outside Brighton & Hove may be reconnected either without effective support plans for their return or into a potentially dangerous situation. Through our strategy, reconnection is only to be used when a robust assessment of an individual's needs and history has been made to provide the individual with a genuine and safe route away from rough sleeping.

- **Improving Health:** Respondents welcomed the multi-disciplinary approach to tackling health needs so that people do not get passed across services. Concerns were raised about the specialist GP practice provider giving notice on the contract and pressures on mental health and substance misuse services. Through the strategy, there is a commitment to a more proactive and integrated healthcare model to support homeless residents. In addition, the Brighton & Hove Health & Wellbeing Board has committed, through the Charter for Homeless Health, to ensuring that local health services meet the needs of people who are homeless.
- **A Safe City:** This priority received the most polarised responses, split between those who wanted the city to take a harder line with enforcement against anti-social behaviour and begging, and those seeking to understand the personal circumstances that may have driven people to the street community. This priority is about keeping everybody safe – those sleeping rough, those in the wider street community, businesses, residents and visitors. We want to work with the street community to encourage them to seek the support they need and make it clear that some behaviours are not acceptable. With half of those begging being housed, people wanting to help those sleeping rough are encouraged to volunteer or donate to charities.
- **Pathways to Independence:** Concerns were raised about the quality of the temporary accommodation used with suggestions that some people are choosing to return to the streets rather than stay in the accommodation offered. The council carries out regular inspections of premises and is working with providers to ensure they understand their responsibilities and can achieve the required standards. Residents are provided information on how to report issues with the management of the accommodation. Due to the strength of the concerns raised from a variety of sources, we are carrying out further reviews with stakeholders and will take any necessary action that results from this. Services also highlighted that some of those sleeping rough have been evicted from temporary, hostels or other supported housing, and whilst inappropriate behaviour, particularly that which puts others at risk cannot be tolerated. The council will review eviction protocols to make sure they are balanced with the right level of support.

The detailed consultation responses were shared with those responsible for the priorities within the strategy to develop the goals and strategic actions.

# Priority 1: Prevent Homelessness and Rough Sleeping

## To provide a consistent message about housing options that helps services prevent homelessness and moves people away from sleeping rough

As a city, we need to manage people's expectations about the availability of housing. Brighton & Hove is an expensive place to live and at the same time wages are relatively low, making housing affordability a challenge for many. There are approximately, 23,000 households on the housing register, with 1,500 in temporary accommodation and only around 700 properties becoming available each year.

Average rents are above housing benefit limits putting them out of reach of those not working. In September 2015, just two shared properties were available to rent in Brighton & Hove on rightmove.co.uk within the local housing allowance limit for single people under 35. For those aged 35 or above, 14 properties were available within the 1 bedroom limit available, mainly bedsits and studio flats.<sup>15</sup>

Many single homeless households do not fall into a priority need category and hence there is no statutory duty for the council to provide housing under Part 7 of the Housing Act 1996. For those where there is not a housing duty, the chance of someone being offered social housing is remote because of the extremely high demand against a very small supply.

The Homelessness Strategy 2014 seeks to link into a broader 'prevention agenda' to provide advice and assistance to any resident in danger of losing their home. The city wants to minimise rough sleeping for those who we cannot provide accommodation for and to look at the wider impacts homelessness can have, such as deterioration in mental health, risk of suicide, substance misuse, offending and increased hospital admission. This also minimises the impact on more costly crisis services provided by the council and health services.

To prevent homelessness, the city will:

- Goal 1: Develop a consistent citywide approach to housing, health, care and other support to prevent homelessness and rough sleeping
- Goal 2: Improve housing options for single person households

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<sup>15</sup> Brighton & Hove Housing Market Reports: <https://www.brighton-hove.gov.uk/content/housing/general-housing/housing-market-reports#RentLHA>

## **Goal 1: Develop a consistent citywide approach to prevent homelessness and rough sleeping**

Brighton & Hove is fortunate in that it has a caring and tolerant population and many people want to help people sleeping rough through supporting charitable work or personal donations. As a city, we want to make sure that all those seeking to help rough sleepers are doing so in a way that leads to sustainable solutions that help encourage people to engage with services to move away from rough sleeping.

Success in preventing homelessness and entrenchment depends on all service providers promoting the same consistent message; a single offer of support focussed on minimising the risk of those getting into crisis and spending time on the streets. All those involved with rough sleeping are asked to **Pledge** their support to the vision, partnership working and priorities of this strategy to move people away from the streets.

To make sure this happens, all of the city's organisations working with those sleeping rough will be brought together to review the way they work together to develop a **Multi-Agency Protocol**. This will build on the strengths of existing partnerships that have developed new ways of working with the street population, tackle health inequalities and prevent repeat homelessness as well as removing duplication through multiple assessments by different providers.

The Better Care programme to improve health and care services for homeless people (described in more detail under Priority 3) will also contribute to services adopting a consistent approach to preventing homelessness.

## **Goal 2: Improve housing options for single person households**

The city has a strong record in **preventing homelessness** or finding alternative accommodation where it has not been possible to sustain people's accommodation. Services provide advice and assistance, to those where there is not a statutory housing duty, on how to sustain their accommodation including their legal rights to remain in occupation. This often allows people some time to find an alternative home.

It is imperative that those in need seek advice as soon as possible, however, it may be professional bodies that recognise this need before the clients themselves, for example, someone losing their job, the Police responding to a domestic incident, or a GP recognising that their patient is unable to cope. Many other groups, particularly in the community and voluntary sector may recognise these or other signs in the people they work with. We need to improve referral mechanisms to ensure advice is given at the earliest possible opportunity.

A new service called **Community Connections**, provided by Southdown, will help people to stay in their accommodation by working with landlords and agencies to prevent eviction. A range of support services will be provided including wellbeing and mental health, and practical help to support people settle and sustain new tenancies.

Many landlords do not accept tenants on benefits, and those at risk of homelessness are less likely to have a deposit, advance rent, fees or a guarantor. Even if a home is available, there is a gap in providing people with start up funding for private sector tenancies. The current rent deposit assistance is aimed at preventing homelessness where there is a statutory duty to assist. Any change to this requires funding and resources before this could be extended to people where there was no statutory duty.

The council works with a wide range of agencies such as **Brighton Housing Trust** and the **YMCA DownsLink Group** to sustain accommodation or source alternatives. Incentives and support for private landlords will help increase the supply of low cost rented housing without high set up costs or guarantors. Landlords will often keep good tenants at lower rent rather than maximise rental values to unknown tenants. The council also works with the prison service and probation to source accommodation for people leaving the criminal justice system who are at particular risk of rough sleeping. Joint work with health and social care through the **Pathway Plus** project supports people leaving hospital to prevent them from being discharged onto the street.

The city needs to be open to innovative solutions to provide temporary affordable homes for single people and utilise initiatives, such as the credit union to provide a way for people to save money to cover the costs of moving on if the need arises. More affordable homes can be found in other parts of the country which may require people to make difficult choices about where they live.

### **Strategic Action Plan: Priority 1: Prevent Homelessness and Rough Sleeping**

<b>Strategic Action</b>	<b>Target</b>	<b>Resource Implication</b>	<b>Lead Partner</b>
<b>Goal 1</b>	<b>Develop a consistent citywide approach to prevent homelessness and rough sleeping</b>		
Encourage all partners to Pledge their support to the vision, partnership work and priorities of this strategy	Sign up event July 2016	Shared commitment to improve joint working and resource use	BHCC Adult Services
Review routes in/out of street life and how organisations work together to prevent homelessness and move people away from the streets	Process mapping with statutory and third sector groups 2016/17 to inform the Protocol	Within existing budget plans to 2019	BHCC Adult Services & St. Mungo's
Develop a Multi-Agency Protocol for Brighton & Hove	Protocol agreed by March 2017	Protocol will promote more effective use of existing resources	BHCC Adult Services & St. Mungo's

Strategic Action	Target	Resource Implication	Lead Partner
Ensure the Protocol is promoted and understood by staff, volunteers and residents	Roll out communications from April 2017	Communications Plan to be developed and costed (eg training, work shadowing, publicity etc)	BHCC Communications & St. Mungo's
Ensure a rolling communications programme on reducing rough sleeping that engages the general public	Roll out communications from July 2016	Media Campaign to be developed and costed	BHCC Communications & BHCC Adult Services
<b>Goal 2</b>	<b>Improve housing options for single person households</b>		
Publicise where to go for assistance and to seek help at an early stage	Incorporate into the Multi-Agency Protocol	Within existing budget plans to 2019	BHCC Housing
Develop an easy early referral mechanism so that other professionals (eg GPs, Police, social care) can direct clients to housing advice before crisis point	Review use of information prescriptions for housing advice	Within existing budget plans to 2019	BHCC Housing
All partners to be aware of the housing market and benefit rates	Circulate B&H Housing Market Reports to partners	Reports already produced and publically available	BHCC Housing & BHCC Adult Services
Investigate creative solutions to increase accommodation options (such as lodgers, temporary modular homes and rent deposit schemes)	March 2017	Subject to options developed	BHCC Adult Services & BHCC Housing
Improve access to housing information to raise awareness affordable housing options locally and in other parts of the country	IT approach to be developed	Within existing budget plans to 2019	BHCC Housing

## **Priority 2: Rapid Assessment and Reconnection**

### **Outreach to assess the needs of people sleeping rough to plan support, and where appropriate, reconnect people with friends, families and support networks, before they are fully immersed in street life**

If someone finds themselves faced with the prospect of sleeping on the streets, it is essential that services engage with them as quickly as possible to get people at risk off the streets and prevent additional health and wellbeing needs developing.

Different approaches within a shared Multi-Agency Protocol are required to effectively respond to the needs of different groups of people sleeping rough. The Protocol needs to quickly get new arrivals away from the streets; to develop sustainable plans for those who keep returning to street life; to get a commitment from organisations to holistically support chronic entrenched cases; and to deliver solutions for those with no recourse to public funds. Through assessment, each person sleeping rough will have their own Multi-Agency Plan, their single offer under the Protocol.

Around 4 in 10 rough sleeping cases are people with a local connection to Brighton & Hove. Of those who do not have a local connection, they are split roughly evenly amongst people from the rest of the South East, those from the wider UK and those from overseas. Reconnecting people with safe and stable support networks such as friends, families and services can bring about a sustainable move away from street life. We recognise that this is not appropriate in all cases, particularly if someone has fled abuse or in some instances where there may be overriding health needs.

To provide rapid assessment and reconnection, the city will:

- Goal 3: Provide rapid assessment, support planning and effective reconnection
- Goal 4: Target people sleeping rough with complex needs to ensure there is an integrated plan to move people into accommodation
- Goal 5: Ensure services are sensitive to the needs of all vulnerable groups including LGBT\* people, young, older, women and ex-service personnel

### **Goal 3: Provide rapid assessment, support planning and effective reconnection**

We will set up a permanent **Assessment Centre** with a number of **temporary (sit-up) beds** to enable professionals across a range of disciplines to assess the needs of people sleeping rough in a stable environment away from the chaos of the streets.

Each client will have their own **Multi-Agency Plan** that will outline who is co-ordinating that person's care, which services are working with them and what support is to be provided. A key part of the Plan will be to outline the clients housing options to help them make an informed choice about their future.

The **Street Outreach Service (SOS)** is contracted by the council and run by St. Mungo's to provide a rapid response and assertive outreach to people sleeping rough. This works through diversion and signposting, comprehensive assessment of individuals needs, reconnecting people sleeping rough to their place of origin in a structured way, and assisting people from homelessness into settled accommodation.

**StreetLink** is a website, mobile app and phone line which allows members of the public to send an alert with information about the location of someone sleeping rough. Once this alert is received, StreetLink will pass the information to St Mungo's Street Outreach Service to engage with the person sleeping rough. By providing a means to act when they see someone sleeping rough, StreetLink allows the local community to be part of the solution to homelessness.

As part of the St. Mungo's service, **No Second Night Out** targets those new to rough sleeping and offers them an alternative to a second night on the streets. This helps them move off the streets before they become entrenched. Sussex local authorities and their partners have come together to form the **Sussex Homeless Outreach Reconnection & Engagement (SHORE)** partnership to implement the No Second Night Out principles in Sussex to help those reconnect across the region.

If it is safe to do so, and provides the individual with a genuine route away from rough sleeping, those without a local connection<sup>16</sup> to Brighton & Hove are supported to reconnect to an area where they do have a local connection. This only used when a robust assessment of an individual's needs and history has been made. This strategy recognises that this is not appropriate in all cases, particularly if someone has fled abuse or in some instances where there may be overriding health needs. **First Base Day Centre** and **Project Antifreeze** reconnect clients that access their day centres which has seen the reconnection rate increase.

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<sup>16</sup> Local Connection: The statutory definition of local connection is heavily shaped by case law stemming from the Housing Act 1996, Part 7, Section 199(1) which provides that a person has a local connection with the district of a housing authority if he or she has a connection with it: i) because he or she is, or was in the past, normally resident there, and that residence was of his or her own choice; or ii) because he or she is employed there; or iii) because of family associations there; or iv) because of any special circumstances. <http://www.legislation.gov.uk/ukpga/1996/52/section/199>

#### **Goal 4: Target people sleeping rough with complex needs to ensure there is an integrated plan to move people into accommodation**

It can be a challenge to engage those with complex needs in a chaotic street environment, and have a meaningful dialogue about needs and support requirements.

To provide a more stable environment for assessing needs, the city has piloted an **Emergency Assessment Centre** that operated every few weeks through the night. This highlighted the need for space with temporary beds for rough sleepers to be assessed by a range of services.

A new **Housing First** service has been developed for people with complex needs, including young people, and services are expanding the use of personal budget and personalised support plans. St. Mungo's is developing a **Multi-Agency Plan** to target work around people who are entrenched in rough sleeping to move them into the most appropriate accommodation for their needs.

#### **Goal 5: Ensure services are sensitive to the needs of all vulnerable groups including LGBT\* people, young, older, women and ex-service personnel**

The **Stonewall Housing Finding Safe Spaces**<sup>17</sup> project spoke directly with LGBT\* people who had experienced, or were experiencing, rough sleeping during summer 2014 in Manchester, Brighton and east London and found that many did not feel safe in hostels or on the streets. Drugs, alcohol, sex work or sex in exchange for accommodation was used as a way to secure a place to sleep, despite the great risk to safety as well as to their mental, physical and sexual health. The research made a number of recommendations and Brighton & Hove City Council has committed (as part of the **Trans\* Scrutiny Report**<sup>18</sup>) to reviewing these recommendations for the Rough Sleeping Strategy.

##### ***Stonewall Housing: Finding Safe Spaces***

The council will implement the recommendations of the Stonewall Housing Finding Safe Spaces project:

1. Ask people about their sexual orientation and gender identity in an appropriate and consistent way
2. Never make assumptions on how someone defines their gender identity or sexual orientation
3. Be consistent in how you ask questions relating to gender identity and sexual orientation
4. Be able to provide safe spaces for LGBT\* rough sleepers using your services and working with your staff
5. Know how many LGBT\* people are experiencing rough sleeping in the area you work and are using your service
6. Be very clear about the long term harmful impacts of rough sleepers not being able to talk about their gender identity and/or sexual orientation
7. Make sure the first point of contact is trained with a clear awareness around LGBT\* people's needs and experiences as rough sleepers
8. For all LGBT\* organisations, who carry out needs assessments for support, to ask their service users about the security of their housing
9. A change in the verification protocol to fit the experiences of LGBT\* people

<sup>17</sup> Finding Safe Spaces: Understanding the experiences of lesbian, gay, bisexual and trans\* rough sleepers, Stonewall Housing, 2014: <http://www.stonewallhousing.org/>

<sup>18</sup> Trans Equality Scrutiny Panel: <http://www.brighton-hove.gov.uk/content/council-and-democracy/councillors-and-committees/trans-equality-scrutiny-panel-2013>

Supported housing needs to be sensitive to the needs of women; particularly those who may be fleeing domestic violence. Figures estimate that approximately 17% of rough sleepers are women. **Homeless Link**<sup>19</sup> found that, rather than sleep on the streets, many, especially women, described staying out of sight and moving around because they felt vulnerable. Many had been or knew someone who had been a victim of violence and/or abuse, including robbery, intimidation and rape.

Young people under 25 are one of the fastest growing groups of people sleeping rough. Consultation as part of developing this strategy has highlighted that it is felt that the **Young People's Accommodation and Support Pathway**<sup>20</sup> is working well but some services may not feel accessible to younger people where processes and procedures can seem off putting. Through the use of advocates such as **The Clocktower Sanctuary**, dedicated accommodation for young people at the new **Housing First** service, and crash pads to offer support in a crisis, young people are being helped to access the support they need.

The **Brighton & Hove Civil Military Partnership Board**, comprising Brighton & Hove City Council, NHS Sussex Armed Forces Network, Royal British Legion and other partners across has developed pathways that outline the support former service personal and their families can access by public, private and voluntary organisations. They include information on employment; social care; rough sleeping; physical health; mental health; housing and rough sleeping. These pathways are available on the **Sussex Armed Forces Network** website<sup>21</sup>.

### Strategic Action Plan: Priority 2: Rapid Assessment and Reconnection

Strategic Action	Target	Resource Implication	Lead Partner
<b>Goal 3</b>	<b>Provide rapid assessment, support planning and effective reconnection for those new to rough sleeping</b>		
Set up a permanent assessment centre(s) with temporary (sit-up) beds	Operational March 2017	Part of service recommissioning in 2016/17	BHCC Adult Services

<sup>19</sup> Repeat Homelessness in Brighton, Homeless Link, 2015:

<http://www.homeless.org.uk/sites/default/files/site-attachments/Picture%20the%20Change.Repeat%20Homelessness%20in%20Brighton.pdf>

<sup>20</sup> Brighton & Hove Young People's Accommodation and Support Pathway:

[http://www.google.co.uk/url?sa=t&rct=j&q=&esrc=s&frm=1&source=web&cd=2&cad=rja&uact=8&ved=0ahUKEwja-egwvb3KAhUECBoKHenQB4MQFggmMAE&url=http%3A%2F%2Fpresent.brighton-hove.gov.uk%2FPublished%2FC00000709%2FM00004769%2FAI00036300%2F%2420130916144749\\_004725\\_0018502\\_HousingandSupportforYoungPeopleJointCommissioningStrategyFinalSept.docA.ps.pdf&usq=AFQjCNHg8aH3tU49dEAJCP5SvnfCMhsQzw&sig2=C0kbD4PnxIlyUurlwkGJGQ](http://www.google.co.uk/url?sa=t&rct=j&q=&esrc=s&frm=1&source=web&cd=2&cad=rja&uact=8&ved=0ahUKEwja-egwvb3KAhUECBoKHenQB4MQFggmMAE&url=http%3A%2F%2Fpresent.brighton-hove.gov.uk%2FPublished%2FC00000709%2FM00004769%2FAI00036300%2F%2420130916144749_004725_0018502_HousingandSupportforYoungPeopleJointCommissioningStrategyFinalSept.docA.ps.pdf&usq=AFQjCNHg8aH3tU49dEAJCP5SvnfCMhsQzw&sig2=C0kbD4PnxIlyUurlwkGJGQ)

<sup>21</sup> Sussex Armed Forces Network: <http://www.sussexarmedforcesnetwork.nhs.uk/pathways/>

Strategic Action	Target	Resource Implication	Lead Partner
Develop integrated and coordinated joint assessments and support planning across housing, care and health (including primary care, SCT, SPFT, BSUH and community & voluntary sector)	All clients to have their own Multi-Agency Plan. Pilot late 2016 to go live March 2017	Within existing budget plans to 2019	BHCC Adult Services, BHCC Housing, St. Mungo's, NHS partners
Share client information across all partner organisations to ensure a consistent approach and improve interventions / outcomes	March 2017	Multi-agency IT system being investigated	BHCC Adult Services
Ensure a swift response to enable a No Second Night Out approach	Incorporate into Multi-Agency Protocol	Accommodation demand exceeding supply with waiting lists at present	BHCC Adult Services & BHCC Housing
Work with providers and charities to ensure safe and sustainable reconnections	Memorandum of Understanding to be developed relating to good practice	Part of service recommissioning in 2016/17	BHCC Adult Services & SHORE

#### Goal 4

#### Target people sleeping rough with complex needs to ensure there is an integrated plan to move people into accommodation

Provide temporary beds for those with complex needs to ensure engagement before reconnection assessment	Set up a permanent assessment centre(s) with temporary (sit-up) beds by March 2017	Part of service recommissioning in 2016/17	BHCC Adult Services
Implement a scheme to target those entrenched / complex rough sleepers based on bespoke responses to individual needs through a multi agency response	Scheme late 2016	Part of integrated joint assessments and support planning Possibly some resource implication regarding accommodation options	BHCC Adult Services & St. Mungo's

#### Goal 5

#### Ensure services are sensitive to the needs of all vulnerable groups including LGBT\* people, young, older, women and ex service personnel

Ensure providers implement recommendations of Stonewall Housing LGBT* report	Include recommendations in Multi-Agency Protocol	Within existing budget plans to 2019	BHCC Adult Services BHCC Housing St. Mungo's
Consult women and other groups about delivery of service which best meet their needs	Develop women only accommodation provision	Commissioning by March 2017	BHCC Adult Services

Strategic Action	Target	Resource Implication	Lead Partner
Continue to develop the Young People's Accommodation and Support Pathway	Young people's bed spaces in the Housing First Jan 2016 (complete)	As per the 2013 Joint Commissioning Plan	BHCC Adult Services BHCC Housing BHCC Children's Services
Ensure Care Act assessments are carried out for older and frail people sleeping rough	Include in integrated joint assessments across housing, care and health March 2017	Within existing budget plans to 2019	BHCC Adult Services
Maintain commitments to ex-Armed Forces personnel through the Armed Forces Covenant	Monitoring and reporting of rough sleeping amongst ex-forces personnel	Regular liaison between BHCC and Armed Forces Network to agree appropriate action when necessary	BHCC Adult Services & Armed Forces Network

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## Priority 3: Improving Health

### To ensure people sleeping rough are supported by health and social care services that help them to regain their independence

Homeless people often face multiple disadvantages, including mental and physical health issues, drug and alcohol misuse and experience of violence and abuse while sleeping rough<sup>22,23</sup>. Physical and mental health issues can increase people's risk of homelessness, including rough sleeping, and can also be a critical factor preventing their recovery from this situation. Rough sleeping leads to deterioration in individuals' health and wellbeing.

To improve health, the city will:

- Goal 6: Improve health and care outcomes through the delivery of integrated and flexible services
- Goal 7: Ensure those on the streets continue to have access to emergency shelter during extreme weather

#### **Goal 6: Improve health and care outcomes through the delivery of integrated and flexible services**

Homeless people have often relied on unplanned care such as accident and emergency services. National evidence and best practice<sup>24</sup> has demonstrated the benefits of adopting a more proactive approach to improve health and support recovery from homelessness.

Longstanding specialist services include:

- The specialist GP practice, **Brighton Homeless Healthcare, Morley Street**, for those who are homeless and not registered with a GP.
- **First Base Day Centre**, which offers a range of services to support people who are sleeping rough or insecurely housed in the city move away from rough sleeping. Healthcare services include nursing, podiatry, optometry, oral hygiene,

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<sup>22</sup> Brighton & Hove Homeless Health Needs Audit, 2014:

<http://www.bhconnected.org.uk/sites/bhconnected/files/Brighton%20and%20Hove%20Homeless%20Health%20Needs%20Audit%20FINAL.pdf>

<sup>23</sup> Repeat Homelessness in Brighton, Homeless Link, 2015:

<http://www.homeless.org.uk/sites/default/files/site-attachments/Picture%20the%20Change.Repeat%20Homelessness%20in%20Brighton.pdf>

<sup>24</sup> The Faculty for Homeless and Inclusion Health (2013) Standards for commissioners and service providers Version 2.0 The Faculty for Homeless and Inclusion Health <http://www.pathway.org.uk/wp-content/uploads/2014/01/Standards-for-commissioners-providers-v2.0-INTERACTIVE.pdf>

sexual health testing, a mental health worker and regular visits by St Johns Ambulance. First Base also provides employment and skills projects.

- More recently **substance misuse services** have been remodelled to be more recovery-focused. Access and Engagement workers are embedded within the **Pavilions** service to work with the street community, and to support them to enter into treatment services. Harm reduction support, as well as signposting to all relevant services, is essential, particularly for clients that are not currently engaged with substance misuse treatment providers. A hostel in-reach service aims to reduce the number of people leaving hostels through abandonment or eviction.

However, overall too many health and care services are organised around settings rather than individuals' needs.

The Brighton & Hove **Health & Wellbeing Board** has committed, through the **Charter for Homeless Health**, to ensuring that local health services meet the needs of people who are homeless, and that they are welcoming and easily accessible.

The local **Better Care Plan** sets out how health and care services for those with greatest needs (including vulnerable and/or frail) will help them stay healthy and well, will be more pro-active and preventative, and will promote independence. The needs of homeless people have been identified as key priority within the plan. The **Homeless Integrated Health & Care Board** has taken this work forward. The Board includes representatives of the CCG, GPs, Sussex NHS Partnership Foundation Trust (mental health services) , Brighton & Sussex University Hospital NHS Trust (hospital services), Sussex Community NHS Foundation Trust (community healthcare, including dental, services), housing, social care, public health and the third sector.



The Board reviewed current services and has developed a Hub and Spoke model that will provide a more proactive and integrated model of care. The key elements include:

- **A primary care led 'hub' with a multidisciplinary outreach team delivering services in a number of settings (or 'spokes') in the city.**
- Enhanced specialist primary care service for homeless people.
- Outreach, including street and day centre settings. Health professionals will work alongside related services, such as St. Mungo's Street Outreach Service, to deliver the city wide integrated approach to rough sleeping.
- Hospital in-reach to support care and discharge planning from hospital and mental health inpatient services.
- Proactive engagement model to support homeless people to access primary and community healthcare services and support care plans. Engagement workers will work alongside homeless clients and care managers to support care plans.

The model has been informed by a number of local pilot projects including:

- **Pathway Plus** has provided specialist care and discharge planning for homeless patients in Royal Sussex County Hospital delivered through GP in-reach, nursing, engagement workers and community transport.
- **Homeless Health Collaborative Project** (Sussex Community NHS Foundation Trust) has provided a specialist multi-disciplinary team to in-reach into the city's homeless temporary accommodation and hostel residents. In November 2015, the service extended its scope to include street settings.
- **Mental Health Homeless Team** (Sussex Partnership NHS Foundation Trust) service has provided a service to street homeless and those in emergency accommodation. In October 2015, a one year project was established to gain a greater understanding of mental health needs in hostels and consider how access to mainstream and specialist mental health services can be improved.
- **Multidisciplinary Team meetings for homeless people with complex needs**, led by primary care, were established in June 2015. They consider the care of people who would most benefit from coordinated proactive management, including those rough sleeping. Initial evaluation of the impact of this way of working has been very positive.

The full service model will be commissioned in 2016/17 and will be fully established in 2017. This will involve procuring some new services<sup>25</sup> and redesigning other established services.

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<sup>25</sup> This will include primary care services. The Practice Group, the healthcare provider that manages Brighton Homeless Healthcare, Morley Street has informed NHS England that they wish to stop providing this service in January 2017. NHS England will now work with the CCG to carry out a procurement process to secure a contract with another healthcare provider for a new service.

In addition, local **supported accommodation services** (including hostels and mental health supported accommodation) are being remodelled in 2016-17, and will include a strengthened focus on supporting the health and wellbeing of homeless people.

### **Goal 7: Ensure those on the streets have access to emergency shelter during extreme weather**

The **Severe Weather Emergency Provision** ensures that people sleeping rough are housed when there is extreme cold or storms forecast. The protocols and provision will be reviewed in 2016 to ensure that the provision is aligned with the new model for providing health and social care.

The service follows government and Homeless Link guidelines to operate when there is a weather forecast<sup>26</sup> of three consecutive nights of temperatures of 0°C or below, including the coming night. The service continues until a forecast predicts two or more consecutive nights of a temperature of 1°C.

In addition, the council funds the service to operate beyond national guidelines when there is a relevant Met Office severe weather Amber or Red warning. The decision is made on a case by case basis and considers how likely the weather is to affect the Brighton & Hove area, if the type of weather presents a risk to life for those sleeping rough, and the amount of notice given combined with staff availability. Where possible, services target known sleep sites and advise rough sleepers of impending weather conditions and shelter availability.

Between October 2015 and March 2016, the city had a relatively mild winter that saw the service opened for a total of 12 nights providing 385 bed-spaces for 118 different people. Of those accessing the service:

- 108 were male
- 10 were female
- 2 were under 25
- 16 were EU migrants
- 1 was a non-EU migrant
- 1 had no recourse to public funds

The service costs around £1,600 per night to open which includes the provision of things such as sleeping bags and mats.

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<sup>26</sup> The measurement is taken from the MET Office Website:  
<http://www.metoffice.gov.uk/public/weather/forecast/brighton>

## Strategic Action Plan: Priority 3: Improving Health

Strategic Action	Target	Resource Implication	Lead Partner
<b>Goal 6</b>	<b>Improve health and care outcomes through the delivery of integrated and flexible services</b>		
Commission services to deliver new integrated health and social care model for homeless	March 2017	CCG business case and NHS England primary care funding	Brighton & Hove CCG, BHCC Adult Services, BHCC Public Health
Review access and delivery to assessment (including Mental Capacity Act and Care Act) to ensure the needs of those who are sleeping rough, or at risk of rough sleeping, are identified	March 2017	Within existing budget plans to 2019	BHCC Adult Services, CCG and NHS Trusts (BSUH, SPFT, SCFT), Other services
Ensure professionals and staff are trained and skilled to deliver the model of care, including joint assessment and care planning	June 2017	Included in contracts and service plans	CCG and NHS Trusts, BHCC, Third sector providers
Align substance misuse services including co-location of workers, and joint assessments where possible	June 2017	Pavilions contract	Pavilions and Public Health
<b>Goal 7</b>	<b>Ensure those on the streets continue to have access to emergency shelter during extreme weather</b>		
Review Severe Weather Emergency Provision protocols	September 2016	Within existing budget plans to 2019	BHCC Adult Services

## Priority 4: A Safe City

### Making sure people sleeping rough, residents and visitors are safe and free from intimidation

People sleeping rough are more likely to be the victim of crime than the general population. 10 people sleeping rough have been murdered in the city during the past 13 years. Homeless Link<sup>27</sup> found that, rather than sleep on the streets, many, especially women, described staying out of sight and moving around because they felt vulnerable. Many had been or knew someone who had been a victim of violence and/or abuse, including robbery, intimidation and rape.

Brighton & Hove is a popular city with a significant street population. Many have multiple and complex needs and have moved in and out of homelessness for many years. Individuals who end up rough sleeping quickly become entrenched in a street lifestyle and this can be difficult to change. A proportionate response is required that encourages those in the street communities to seek the support they require and also takes action to prevent anti-social behaviour.

Whilst the street population is often associated to crime and anti-social behaviour, it is estimated that half of those on the streets are actually housed. The street population is a diverse collection of groups and can be defined as people having one or more of the following attributes: rough sleeping; street drinking / begging; antisocial behaviour; insecurely housed (e.g. hostel or temporary accommodation) and spending a high level of time in street based activities, which may have a negative impact on other members of the public.

To help make sure people sleeping rough, residents and visitors are safe and free from intimidation, the city will:

- Goal 8: Focus on managing risks, preventing harm and promoting appropriate behaviour
- Goal 9: Promote alternatives to discourage begging

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<sup>27</sup> Repeat Homelessness in Brighton, Homeless Link, 2015:  
<http://www.homeless.org.uk/sites/default/files/site-attachments/Picture%20the%20Change.Repeat%20Homelessness%20in%20Brighton.pdf>

## **Goal 8: Focus on managing risks, preventing harm and promoting appropriate behaviour**

This strategy recognises that support focussed on the needs and complexity of the individual is more likely to result in an effective solution and sustainable move away from street life rather than the blanket use of enforcement.

Whilst enforcement action to tackle street anti-social behaviour has a wide range of positive impacts, if not managed properly it risks a number of negative impacts:

- Whilst some people may choose to engage with support services, others can disengage and see services as being in opposition.
- Moving people on can resolve an immediate issue in one location, but is likely to result in people sleeping rough elsewhere, often still within the city area.
- Enforcement can have a damaging effect on people's wellbeing because it may further reduce their already limited options. It rarely resolves the underlying issues or causes of someone needing to sleep rough.
- It can take a long time to enforce legal action and this can potentially cost a significant amount; even then outcomes are likely to have a short term impact.

Through the **Substance Misuse Service**, the **Equinox Drug and Alcohol Outreach Team** provide outreach and engagement, working with street drinkers and drug users to support people into treatment and reduce their street presence and any associated negative behaviours.

As a last resort, where a supportive approach has been unsuccessful in helping the individual and prevent anti-social behaviour, the local authority and police can use Criminal Behaviour Orders and Civil Injunctions to require the individual to engage with appropriate support services.

The police have Dispersal Powers and can require groups and individuals likely to be engaged in causing harassment, alarm or distress or be in the locality of crime or disorder to leave an area for up to 48 hours. The decision must have regard to the European Convention on Human Rights which provide for the right for lawful freedom of expression and freedom of assembly where there is no anti-social behaviour.

The council, police and support services have developed an Engagement and Move-On Protocol to remove tents and encampments where there is a detrimental effect on the wider community, prevent the lawful use of council land, or they pose a community safety or public health risk. This is not done lightly, but only after extensive engagement, with support services present to offer advice and guidance on welfare issues to those affected.

### Goal 9: Promote alternatives to discourage begging

The generosity of local people and tourists may provide limited help to those in need. It is estimated that half of those begging are not homeless and it has been suggested that some lucrative begging spots in the city can net hundreds of pounds a week for those individuals. Such spots see competition between ‘professional’ beggars and the local street population with the money often used to buy drugs. It is an offence to beg in a public place under Section 3 of the Vagrancy Act 1824.

Solutions are required that offer alternatives for those who wish to help such as by donating to one of the charities supporting the strategy in helping people move away from the streets. Donations can be made to support a range of practical activities in Brighton & Hove such as by providing:

- A Rent Deposit Scheme to help move people from the streets into accommodation
- Start-up funding for a sit up bed service to bring people off the streets and assess their needs

### Strategic Action Plan: Priority 4: A Safe City

Strategic Action	Target	Resource Implication	Lead Partner
<b>Goal 8</b>	<b>Focus on managing risks, preventing harm and promoting appropriate behaviour</b>		
Work with partner agencies to ensure they are not inadvertently entrenching the street community	Number of agencies who have been briefed	Capacity to brief, planned rolling programme	Adult Social Care Council Housing Communities Team Third Sector
Engage the street community to understand their impact on others	Reduced ASB reported perpetrated against, and by, street community people	Briefing to relevant staff. Capacity to monitor relevant data	Sussex Police BHCC Community Safety Team
Support people into appropriate treatment services where possible Give advice on harm reduction including safe disposal of drug litter	Number of street community people accessing treatment Reduction in drug litter in public places	Ensuring those most at risk access treatment services as appropriate	BHCC Public Health
Take action where necessary to reduce the risk and harm	Reduced ASB reported perpetrated against, and by, street community people	Identify those causing risk and harm through the High Impact Case Forum. Management of PSPO, dispersal powers and move on protocol	Sussex Police BHCC Community Safety Team

Strategic Action	Target	Resource Implication	Lead Partner
Use tenant and resident support services where appropriate to manage behaviour on the street	Reduced ASB reported perpetrated against, and by, street community people	Specialist officer and legal officer time. Court costs	BHCC Housing BHCC Adult Services
<b>Goal 9 Promote alternatives to discourage street life and begging</b>			
Promote alternatives to giving to beggars focussed on helping people move away from street life	Use communications to sustain and embed alternative giving in the public psyche	Council Communications Team capacity	BHCC Communications Team

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# Priority 5: Pathways to Independence

## Making sure supported accommodation offers solutions appropriate to residents needs

Simply putting a roof over someone's head may not resolve their housing need. Physical health, mental health and substance misuse needs, and re-engagement with society through social skills, leisure activities, education and employment is needed to make sure the person is able to maintain accommodation and an active and engaged role in their community. Supported accommodation is generally prioritised for those with an identified need who have a local connection.

Homeless Link<sup>28</sup> found that there were particular barriers associated with the environment in hostel accommodation while trying to work, or if they were recovering from issues with alcohol or substance misuse. Other people spoke about the negative impact that living in hostel accommodation had on their health and wellbeing.

A further challenge is the lack of suitable and affordable alternative accommodation for people who have formerly slept rough to move on from hostels to more appropriate supported accommodation or independence. The move to independence frees up valuable supported accommodation for other service users in need.

Improving health and care service pathways is also required to help support recovery and independence. The new homeless health and care service model described under Priority 3 will ensure that services provide an integrated response to clients' physical and mental health and substance misuse needs.

To support people sleeping rough into regaining their independence through effective treatment and life skills training, the city will:

- Goal 10: Have a flexible accommodation pathway that responds to changing needs
- Goal 11: Develop bespoke supported accommodation options where appropriate
- Goal 12: Ensure timely move-on to independent accommodation

### **Goal 10: Have a flexible accommodation pathway that responds to changing needs**

Clients in need of supported housing may have to spend an initial period in **emergency or temporary accommodation** until a vacancy arises in a suitable

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<sup>28</sup> Repeat Homelessness in Brighton, Homeless Link, 2015:

<http://www.homeless.org.uk/sites/default/files/site-attachments/Picture%20the%20Change.Repeat%20Homelessness%20in%20Brighton.pdf>

hostel or other supported accommodation. The council has reviewed its emergency and temporary accommodation and carried out a large scale procurement exercise over the last two years to redefine standards of accommodation and management. However, this temporary accommodation is general needs emergency accommodation, and cannot provide the level of support available in supported accommodation. The city needs to focus on eliminating the waiting list for supported housing by creating opportunities for those to move on who are no longer in need of support.

Concerns about the quality of this accommodation have been raised and the council is working with providers to ensure they understand their responsibilities, can achieve the required standards and where they fall short, respond in a reasonable timeframe. There are regular inspections of premises to ensure compliance or identify where we need to raise concerns with providers. Residents are also provided with a pack of information including how to report repairs and how they report any failures to carry out reported repairs or issues with the management of the accommodation.

The **Integrated Support Pathway (ISP)** was set up in 2007 as a way of providing supported accommodation for single homeless people, people sleeping rough and ex offenders who require support. The intention of the Pathway was to move people from the streets, through a pathway of services with reducing support which would help them to develop greater independence and eventually move to independent living.

The Pathway is being remodelled in partnership across housing, social care, public health, children's services and the CCG. The aim is to ensure it meets needs, is flexible, services are personalised and asset based and fills identified gaps in provision. A Psychologically Informed Environment approach will make sure day-to-day running of hostels has been consciously designed to take into account the psychological and emotional needs of the service users recognising the emotional trauma that may cause, or arise from, an individual becoming homeless. To meet a gap in service provision, the council will be establishing a women only accommodation service for those with complex needs.

Eviction from temporary accommodation and hostels is a common cause of homeless clients returning to the streets. Whilst anti-social behaviour can not be tolerated, we need to review our eviction protocols to ensure that residents are getting the support they need and eviction is used as a last resort.

**Work and Learning** and **Peer Support** services are being remodelled and recommissioned. These support individuals' with literacy and numeracy, and accessing voluntary and paid work and also train people with experience of homelessness to support people who are on their recovery journey.

**Goal 11: Develop bespoke supported housing options where appropriate**

The council will make sure it takes advantage of opportunities to bid for funds to develop supported accommodation services which meet local needs. In December 2015, Brighton & Hove City Council was awarded government funding from the Homes & Communities Agency to develop new supported housing for older single homeless people with physical impairments who are currently living in hostel accommodation. Not only will this meet their needs more effectively in more suitable surroundings, it will free up hostel space for others in need.

**Housing First** is a new service to offer secure long term, self contained homes with intensive support to individuals who have multiple complex needs and a history of repeatedly losing accommodation, and/or are unable to live in hostels. A pilot ran for almost two years and was evaluated as a success by the University of York. The pilot has been converted into a permanent service run by St. Mungo's. This is the first Housing First project known to offer some spaces specifically for young people.

The council will continue to explore options to develop the most effective type of supported housing and services appropriate to clients needs (for example, extra care housing for those needing support but too young for older people's housing, Housing First or other models). As a part of this the council will look internationally to the European Union and beyond to identify good practice, funding or other opportunities as we learn from areas responding to similar challenges and share our knowledge.

**Goal 12: Ensure timely move-on to independent accommodation**

High costs in the private rented sector, with average rents above local housing allowance limits, mean few affordable properties become available. When they do, landlords may not accept tenants on benefits and those who have slept rough are less likely to have a deposit, advance rent, fees or a guarantor. A wide range of agencies such as **Brighton Housing Trust** and the **YMCA DownsLink Group** work to sustain accommodation or source alternatives however, the challenge is great.

Social housing is scarce with demand far in excess of supply and generally only available to those in priority need such as those with children or disabilities. This excludes most single homeless people; however, it is recognised that there may be complex cases where social housing may be an appropriate move-on solution.

More affordable homes can be found in other parts of the country which will require people to make difficult choices about where they live. Other services need to be aware of these pressures and deliver the same consistent message if we are to change perceptions and expectations.

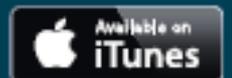
The city needs to consider innovative solutions to provide temporary affordable homes for single people and utilise initiatives such as the credit union to provide a way for people to save money to cover the costs of moving on if the need arises.

## Strategic Action Plan: Priority 5: Pathways to Independence

Strategic Action	Target	Resource Implication	Lead Partner
<b>Goal 10</b>	<b>Have a flexible accommodation pathway that responds to changing needs</b>		
Ensure emergency, temporary and supported accommodation is safe and a suitable quality	Regular monitoring and inspections of accommodation with action plans where necessary	Within existing budget plans to 2019	BHCC Housing Services & BHCC Adult Services
Ensure emergency, temporary and supported accommodation supports wellbeing	Introduction of Psychologically Informed Environments in all hostels by March 2017	Will be done as part of retendering within existing resources	BHCC Housing Services & BHCC Adult Services
Review eviction protocols in emergency, temporary and supported accommodation	Eviction protocols reviewed by March 2017	Within existing budget plans to 2019	BHCC Housing Services & BHCC Adult Services
Allow flexibility for those with complex needs when making nominations to supported accommodation	Incorporate into the Multi-Agency Protocol	Within existing budget plans to 2019	BHCC Adult Services
Remodel and recommission supported accommodation within the integrated support pathway	Remodel and recommission 2016, mobilise 2017	Within existing budget plans to 2019	BHCC Adult Services
Implement findings of review Homeless Strategy Working Groups	Implemented by March 2017	Within existing budget plans to 2019	BHCC Adult Services & BHCC Housing
Recommission Peer Support services	By March 2017	Within existing budget plans to 2019	BHCC Adult Services
Commission Work and Learning services	By June 2017	Within existing budget plans to 2019	BHCC Adult Services
Encourage social enterprise solutions between the Third Sector and business community that provide work and learning opportunities for service users	To be discussed as part of consultation	Within existing budget plans to 2019	BHCC Adult Services, Third Sector, Business Community

Strategic Action	Target	Resource Implication	Lead Partner
<b>Goal 11</b>	<b>Develop bespoke supported housing options where appropriate</b>		
Deliver new supported scheme for older people with complex needs	Accommodation to be sourced and developed March 2017	Government funding awarded December 2015	BHCC Housing
Commission Housing First accommodation with units for young people	Contract live January 2016 (action complete)	Within existing budget plans to 2019	BHCC Adult Services
Consult women and other groups about delivery of service which best meet their needs	Develop women only accommodation provision	Commissioning by March 2017	BHCC Adult Services
Explore options to develop the most effective type of supported housing or alternative solutions appropriate to clients needs	Ongoing review of local, national, government and international opportunities for good practice and funding	Subject to funding opportunities (whether BHCC, Third Sector, government, EU or other institutional funding)	BHCC Adult Services, BHCC Housing, BHCC Regeneration, BHCC International Team
<b>Goal 12</b>	<b>Ensure timely move on to independent accommodation</b>		
Ensure all those on the pathway to independence have a move-on plan developed at an early stage	Incorporated as part of the new model tender March 2017	Within existing budget plans to 2019	BHCC Adult Services
Work with third sector and landlords to source secure accommodation suitable for single people	Target to be developed in 2016	Within existing budget plans to 2019	BHCC Adult Services & BHCC Housing Third Sector
Ensure those ready for general needs accommodation are supported to manage their tenancy	Incorporate into the Multi-Agency Protocol	Within existing budget plans to 2019	BHCC Adult Services & Third Sector
Improve access to social housing where appropriate to meet needs of those ready	Allocations Policy Review in progress 2016/17	Social housing demand exceeds supply	BHCC Housing

Don't  
walk by if  
you see  
someone  
sleeping  
rough.



Connecting rough sleepers to local services

**Street**  
**Link**

**0300 500 0914**

**[www.streetlink.org.uk](http://www.streetlink.org.uk)**

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