

Rough Sleeping Commission Literature Review

For a borough that is trying to reduce Rough Sleeping to zero, are there good examples of this elsewhere

This paper provides an overview of interventions which have worked well in the past to help identify what could be replicated in Hammersmith and Fulham to help reduce rough sleeping. It also outlines the current response to rough sleeping in London to highlight some of the gaps in provision of services. The final section of the paper examines examples of new interventions in London, the UK and internationally to reduce rough sleeping.

1. What has worked well in the past

Over the last thirty years there have been numerous successful interventions to reduce the number of people sleeping rough throughout the UK. The Rough Sleepers Initiatives (RSIs), introduced in England and Scotland in the 1990s, and the Housing Action Programme (which replaced the RSI in England in 1999), were extremely successful. Key learnings from these interventions will be useful in helping to develop a successful plan to end rough sleeping in Hammersmith and Fulham.

The Rough Sleepers Initiative

The RSI was originally set up as a short term response to the growing number of people sleeping rough in London. Initiatives focused on providing advice and outreach work, creating new emergency hostel places and permanent accommodation in the private rented sector and housing association stock. During this time 3,300 bed spaces in permanent accommodation were created. Between 1990 and the end of 1992, the number of people sleeping rough in London halved. Evaluations of the schemes have stressed the importance of the high levels of support and a multi-agency approach which coordinated housing support services, drug and alcohol services, mental health services and employment support services. An evaluation of the RSI in 1996 found that 40% of rough sleepers would not accept an offer of a hostel bed even if one was available. The most common reasons cited were the behaviour of other residents and feeling unsafe. Similarly, an evaluation of the RSI in 1999 found that a substantial proportion of people only used hostel accommodation as respite from sleeping on the streets.

With regards to areas for improvement, the 1999 evaluation found that: no areas had detailed estimates of the supply of hostel beds and permanent accommodation needed to meet targets on the reduction in numbers of rough sleepers; a lack of clarity was found in some areas in the aims and objectives of street outreach work; a need for a wide range of hostel provision to meet different needs and to ensure access for people sleeping rough; there was a need to ensure effective resettlement services for all former rough sleepers; whilst there was a supply of permanent

Rough Sleeping Commission Literature Review

accommodation, the appropriate support was not always in place; and whilst the RSI had improved inter-agency co-operation, there were still problems to be resolved.

Key reading

- Jones, A & Pleace, N (2010), *A Review of Single Homelessness in the UK*, London: Crisis
http://www.crisis.org.uk/data/files/publications/ReviewOfSingleHomelessness_Final.pdf
- Wilson, W (2015) *Rough Sleepers Initiative (RSI) 1990-1999*, London: Housing of Commons Library.
<http://researchbriefings.parliament.uk/ResearchBriefing/Summary/SN07121>
- DETR, *Homes for Street Homeless People: An evaluation of the Rough Sleepers Initiative*, December 1999

Rough Sleepers Unit

Following the end of the RSI in 1999, the Rough Sleepers Unit was set up with the ambitious target of reducing rough sleeping in England by at least two-thirds by 2002. This target was met a year early. It should be noted however, that this was not met in London. Rough sleeper counts between 1998 and 2009 showed a fairly consistent reduction in the number of people recorded sleeping rough.¹ One criticism of the programme however, was that there was less focus on creating a steady supply of affordable accommodation for rough sleepers in the longer term.²

The work of new Contact and Assessment Teams (CATs) was deemed to be key in reducing the number of rough sleepers. It was also found that many local authorities were working closely with homelessness agencies and the police to reduce rough sleeping and other anti-social activities. This work was only successful however, if positive alternatives were on offer to people sleeping rough, including good quality hostels and day centres. There was also found to still be a lack of provision for people with higher support needs and concerns were raised about the ability of rough sleepers to access permanent housing stock, particularly for people who had been excluded from local housing registers.

Key reading

- Randall, G & Brown, S (2002) *Helping rough sleepers off the streets*, London: Office of the Deputy Prime Minister.
<http://webarchive.nationalarchives.gov.uk/20120919132719/www.communities.gov.uk/documents/housing/pdf/137995.pdf>
- Jones, A & Pleace, N (2010), *A Review of Single Homelessness in the UK*, London: Crisis

¹ Wilson W (2015), *The Rough Sleepers Initiative 1990-1999*, London: House of Commons.

² McNeil C & Hunter J, *Breaking boundaries, Towards a 'Troubled Lives' Programme for people facing multiple and complex needs*, London: Institute for Public Policy Research (IPPR), 2015.

Rough Sleeping Commission Literature Review

http://www.crisis.org.uk/data/files/publications/ReviewOfSingleHomelessness_Final.pdf

Rough Sleepers Initiative Scotland

An RSI was established in Scotland in 1997 following the success of the RSI in England. It ran until the early 2000s. The interim evaluation found that the integration with mental health services and drug and alcohol services was often poor and there were examples of underdeveloped joint working with NHS and social work services, limiting the effectiveness of the service. Following the interim evaluation, a greater focus was placed on mainstreaming rough sleeping services into wider homelessness strategies to ensure that social housing, social work, Supporting People and NHS Scotland services were better orientated towards the needs of people sleeping rough.

The RSI was viewed as a highly successful initiative by all of the main types of stakeholders interviewed for the 2005 evaluation. It was seen as a catalyst for increased joint working and joint planning. Crucial to the success of this programme was the flexibility within RSI funding, which helped in developing specific services for people sleeping rough.

Key reading

- Fitzpatrick, S., Pleace, N. & Bevan, M. (2005) Final Evaluation of the Rough Sleepers Initiative, York: University of York.
<http://www.gov.scot/Resource/Doc/37428/0009585.pdf>

Veteran Homelessness

Another notable area of improvement has been the reduction in rough sleeping and homelessness among ex-armed forces staff. A Crisis commissioned report in 1994 found that approximately a quarter of single homeless people had served in the UK armed forces.³ In 2008 a report from the University of York found that among London's hostel and rough sleeper population, only 6% had served in the UK armed forces.⁴ The reduction in homelessness amongst ex-armed forces personnel was the direct result of increased political will, which resulted in a highly-targeted strategy embedded within the MoD to prevent homelessness for this cohort, alongside increased mobilisation from voluntary sector organisations working on this issue.

Key reading

- The Royal British Legion, Literature review: UK veterans and homelessness, London: The Royal British Legion, (undated)
http://media.britishlegion.org.uk/Media/2283/litrev_ukvetshomelessness.pdf

³ Randell G & Brown S, Falling Out: A Research Study of Homeless Ex-Service People, London: Crisis, 1994

⁴ Jones A, Quilgars D, O'Malley L, Rhodes D, Bevan M and Pleace N, Meeting the Housing and Support Needs of Single Veterans in Great Britain, York: University of York, 2008.

Rough Sleeping Commission Literature Review

- Jones A, Quilgars D, O'Malley L, Rhodes D, Bevan M and Pleace N, Meeting the Housing and Support Needs of Single Veterans in Great Britain, York: University of York, 2014.
https://www.york.ac.uk/media/chp/documents/2014/VETERANS%20REPORT_2014_WEB.pdf

2. Current interventions

No Second Night Out

No Second Night Out (NSNO) was launched in April 2011 as a pilot project aimed at ensuring that those who found themselves sleeping rough in central London for the first time do not spend a second night on the streets. It was subsequently rolled out across London and is now running in Bath and North East Somerset, Brighton, Devon and Cornwall, Liverpool, Mendip and Oxford. In 2014, Homeless Link published an evaluation based on data from the schemes and surveys with local authorities and service providers.⁵ They found that:

- 67% of rough sleepers were taken off the streets after the first night that they were found to be sleeping rough, and the majority of these rough sleepers (78% of this group) did not return to the streets once helped. In London, 86% of rough sleepers helped by NSNO services in 2012/13 did not sleep rough again.
- The most important outcomes identified by respondents were improved services for rough sleepers (cited by 67% of respondents as the 'biggest success'), followed by strengthened or improved partnership working between local authorities and voluntary sector providers.
- 90% of respondents reported a strong commitment to the principles of NSNO in their area. In 95% of areas there was agreement with the efficiency and effectiveness of the approach. The main reason for this was due to the versatility of the NSNO principles and the ability to adapt it to meet local need.
- There were concerns raised about the ability of NSNO to meet the needs of entrenched rough sleepers. Respondents noted that while NSNO services are particularly helpful for those who are new to the streets, there remained a lack of provision for long-term rough sleepers.

Crisis has observed the following areas that could be improved in order to maximise the success of NSNO:

- **Better data collection:** Longer term outcomes of people picked up by NSNO are rarely recorded, making it difficult to measure the overall success of the scheme. Broadway conducted a very basic internal evaluation of the original pilot and found that no outcomes were recorded for 75% of the people who had been reconnected to other local authorities.

⁵ Homeless Link (2014), No Second Night Out across England, <http://www.insidehousing.co.uk/journals/2014/02/12/q/x/m/NSNO-England-report.pdf>

Rough Sleeping Commission Literature Review

- **Addressing broader systematic problems:** There is a serious shortage of accommodation within London for people to move onto from the NSNO hub. This includes in particular emergency out of hours temporary accommodation, short term accommodation and private rented sector accommodation. This can lead to hub clients being inappropriately housed, for example people with no support needs being housed in supported accommodation such as hostels, or spending longer periods of time in the hub.
- **Referral from local authorities:** Another consequence of the lack of emergency temporary and permanent accommodation is that local authorities are frequently referring single homeless people to NSNO. These people are then re-referred to local authorities for emergency accommodation.

Key reading

- Evaluation from 2014 (Homeless Link)
<http://www.homeless.org.uk/sites/default/files/site-attachments/20140211%20NSNO%20England%20Wide%20Report%20FINAL.pdf>

Reconnections

Local authorities and No Second Night Out services will often attempt to reconnect a rough sleeper back to their last settled based where they can establish a local connection. Outcomes are only recorded in a small minority of cases. The limited data available suggests that reconnection experiences and outcomes vary dramatically, from positive (e.g. accessing accommodation and re-engaging with support services) to negative (e.g. sleeping rough in the recipient area because the services offered are of poor quality or are time limited).

In May 2016 the Home Office issued updated guidance about powers available to issue administrative removals of EEA nationals. This gave enforcement agencies the right to serve administrative removals to any EEA national who is rough sleeping, regardless of whether they are otherwise exercising treaty rights or even have permanent residency. This means people who are in employment or who are otherwise exercising treaty rights can now be served papers. The CHAIN rough sleeper database shows a decline in the number of CEE nationals recorded as sleeping rough since the guidance has been updated. Outreach teams are reporting that CEE nationals are moving away from areas of Home Office activity rather than returning home, and are now more likely to be in dangerous or hidden circumstances.

Key reading

- Johnsen, S & Jones, A (2015), The reconnection of rough sleepers within the UK: an evaluation, London: Crisis.
http://www.crisis.org.uk/data/files/publications/Reconnections_FINAL_web.pdf

Rough Sleeping Commission Literature Review

Clearing House

The Clearing House was established in 1991 to coordinate the lettings for rough sleepers under the Rough Sleeper's Initiative. It has now been running for over 25 years. St Mungo's manage the programme on behalf of the GLA and the properties are provided by over forty housing associations throughout London who are signed up to the goals of the programme. There are now more than 3,750 flats across London ring-fenced for rough sleepers

A recent report from St Mungo's found that Clearing House tenants spent more than 110,000 nights on the streets of London before moving into an RSI property. Once housed, 92% never returned to rough sleeping. During its 25 years, the programme has been responsible for more than 13,500 tenancies. It works across every London borough and in partnership with hundreds of organisations including homelessness services, support teams and housing associations.

In 2000, coordinated support from Tenancy Sustainment Teams (TSTs) was introduced to all new tenants and those already in tenancies who required support. Since that time the teams have supported more than 7,500 people.

Key reading

- St Mungo's (2016), *The Clearing House, Finding homes for rough sleepers for a quarter of a century*, London: St Mungo's.
<http://www.mungos.org/documents/7403/7403.pdf>

3. Potential new interventions

Housing First

Housing First is an evidence-based approach to supporting homeless people with high needs and histories of entrenched or repeat homelessness, including rough sleeping, to live in their own homes. It has been widely adopted across the U.S. and is central to national homelessness strategies in Canada, Denmark, Finland and France, and is growing in popularity in countries including Italy, Sweden, Spain and, increasingly, the UK.

Housing First prioritises rapid rehousing into permanent accommodation for those in the greatest housing need. Rather than going through the hostel system, which can often place requirements on a rough sleeper to demonstrate that they are 'housing ready', Housing First supports someone into their own tenancy as a first step with no conditions attached. Importantly, participants will hold their own tenancy agreement, either in the private or social rented sector. As far as possible, participants should have choice over the type of home they live in.

As well as permanent housing, participants are provided with a robust and wraparound package of support to help address their key needs to help ensure that the root causes of their homelessness are addressed so that they do not return to

Rough Sleeping Commission Literature Review

the streets. Access to housing and support are separated however, and if someone stops engaging with these services they will not lose their home.

Housing First projects in England have adopted an Intensive Case Management (ICM) approach to provide support. Participants have a key support worker from the Housing First project who helps them coordinate access to a range of services. This could include, for example: drug and alcohol services; mental health teams; and criminal justice agencies

Compared to more traditional floating support services, Housing First case workers have a much smaller case load (5-7 people compared to 20-40 people).⁶ This allows them to work more intensively with an individual and have the flexibility to work in a number of ways to help them engage with support services. Support is provided for as long as an individual needs it. This could be adjusted however for people with lower support needs, or people who are identified as needing a shorter time critical intervention (e.g. prison leavers).

International evidence

International evidence demonstrates the success of Housing First in achieving high levels of tenancy sustainment rates from 70% to over 90%.⁷

- **U.S** - One study in New York reported that 88% of chronically homeless people using Pathways to Housing's model were stably housed after five years.⁸ This compares to only 30% to 50% of people who used the staircase model in America, which required them to demonstrate that they were 'housing ready' before moving into permanent accommodation.⁹
- **Finland**- In 2008, the Finnish Government announced a new four-year strategy to reduce long term homelessness and improve prevention services. Housing First is now a central feature of Finland's homelessness strategy. The strategy was followed in 2012 by a second programme which focused more heavily on developing scattered sites for Housing First, rather than congregate sites, alongside intensive floating support and prevention services. According to FEANTSA, the European Federation of National Organisations working with the Homeless, Finland is the only EU country in which homelessness continues to decrease.¹⁰ The strategy in Finland has virtually eliminated rough sleeping.
- **Denmark**- Denmark has one of the largest Housing First programmes in Europe. The Danish National Strategy, which was adopted in 2008 and ran until 2013, included Housing First services which were targeted at over 1,000 homeless people with high support needs. Between 2009–2012, 17

⁶ <http://www.homeless.org.uk/sites/default/files/site-attachments/Housing%20First%20in%20England%20The%20Principles.pdf>

⁷ Pleave N & Quilgars D (2013), *Improving Health and Social Integration through Housing First: A Review*, York: Centre for Housing Policy.

⁸ Tsemberis S (2010), 'Housing First: Ending Homelessness, Promoting Recovery and Reducing Costs', in Gould E & O'Flaherty B, *How to House the Homeless*, New York: Russell Sage Foundation.

⁹ Pleave N et al. (2013), *Improving Health and Social Integration through Housing First: A Review*, York: Centre for Housing Policy.

¹⁰ Ministry of Environment (2016), *Action Plan for Preventing Homelessness in Finland 2016–2019: Decision of the Finnish Government 9.6.2016*, Ministry of Environment: Helsinki.

Rough Sleeping Commission Literature Review

municipalities were involved in implementing the strategy. In the eight municipalities with the most extensive programme, homelessness increased by an average of 4%. In the 81 municipalities that did not implement the strategy, homelessness increased by 43%.¹¹

- **France-** France has carried out one of the largest trials of Housing First in Europe. The Un Chez-Soi d'abord programme (2011-2016) piloted in four cities: Lille, Paris, Toulouse and Marseilles. It is led at a national level by the inter-ministerial body responsible for the national homelessness strategy. Reports show that 13 months into the programme 80% of participants had sustained their housing.¹² There was also strong evidence of a significant reduction in the use of hospitals, sleeping rough, imprisonment and staying in emergency accommodation when the group using Housing First were compared to those using existing homelessness services. Health, well-being and social integration results were more mixed.
- **Canada-** The *At Home/Chez Soi* project is the world's most extensive examination of Housing First. They conducted a randomized control trial where 1000 people participated in Housing First, and 1000 received 'treatment as usual'. Over 80% of those who received Housing First remained housed after the first year. For many, use of health services declined as health improved. They also saw a reduction in interaction between participants and criminal justice agencies.¹³

What evidence do we have from the UK on the success of Housing First in reducing rough sleeping?

In 2015, the University of York published findings from a study of nine Housing First services in England.¹⁴ They found that 74% of current service users had been successfully housed for one year or more. Data collected from 60 Housing First participants showed that:

- 43% reported 'very bad or bad' physical health a year before using Housing First, this fell to 28% when asked about current health;
- 52% reported 'bad or very bad' mental health a year before using Housing First, falling 18% when asked about current mental health;
- 71% reported they would 'drink until they felt drunk' a year prior to using Housing First, falling to 56% when asked about current use;
- 66% reported drug use a year prior to using Housing First, falling to 53% when asked about current use; and

¹¹ http://www.centreforsocialjustice.org.uk/core/wp-content/uploads/2017/03/CSJJ5157_Homelessness_report_070317_WEB.pdf

¹² <http://housingfirstguide.eu/website/wp-content/uploads/2016/04/France.pdf>

¹³ <http://homelesshub.ca/solutions/housing-accommodation-and-supports/housing-first>

¹⁴ <https://www.york.ac.uk/media/chp/documents/2015/Housing%20First%20England%20Report%20February%202015.pdf>

Rough Sleeping Commission Literature Review

- 62% reported they were 'very satisfied' with their housing, with an additional 26% reporting they were 'fairly satisfied.' Only 13% reported they were dissatisfied with their housing.

The study attempted to compare the costs of delivering Housing First versus 'treatment as usual' which was defined as 'the entire process of resettlement for long term homeless people which might include outreach services, supported housing and low intensity floating support for tenancy sustainment.' The study found that:

- Compared to low or medium intensity supported housing, Housing First is not always cheaper. However, for those people who have extremely high support needs it was.
- Housing First costs worked out cheaper when compared to a stay in any form of supported accommodation for nine months or more.
- There would be savings of between approximately £4,000 (the lowest cost Housing First service) to approximately £2,600 (the highest cost Housing First service).

An evaluation of the Camden Housing First (CAMHF) pilot, also undertaken by the University of York, also found very positive results.¹⁵ The project used scattered, ordinary private rented housing and a mobile team of two specialist support workers providing an Intensive Case Management (ICM) service. CAMHF closely followed the operational principles of the original Pathways to Housing (PtH) Housing First developed in New York in 1990.

CAMHF supported thirteen people during the research period who had extremely high rates of problematic drug and alcohol use and mental health problems. They had either never lived independently in mainstream housing or had not done so for many years.

It took CAMHF an average of 75 days to re-house someone after they had been referred. There were indications that as relationships between the CAMHF team and estate agents/letting continued to develop, the re-housing process was becoming faster. The research results did not suggest that the delays between referral and re-housing created operational difficulties for CAMHF.

Progress in promoting greater social and economic integration among the people using CAMHF could be slow. While this was a group of people who sometimes had been in paid work at earlier points in their lives, they were all some distance from the labour market. There was a marked reduction in anti-social behaviour among those people using CAMHF.

¹⁵ Pleace, N & Bretheton, J (2013), Camden Housing First A Housing First Experiment in London, York: The University of York.
<https://www.york.ac.uk/media/chp/documents/2013/Camden%20Housing%20First%20Final%20Report%20N M2.pdf>

Rough Sleeping Commission Literature Review

The evaluation found that CAMHF was slightly cheaper than the approximate average cost of funding support for 10 hostel bed spaces in a hostel designed to resettle single homeless people for one year. CAMHF appeared to deliver better outcomes in terms of housing sustainment and health, well-being and anti-social behaviour.

Examples of Housing First in the UK

Threshold Manchester (working with female ex-offenders)

Threshold is a housing advice and support charity, which is part of New Charter Group housing association. They have established a Housing First pilot for persistent and prolific women offenders in three local authority areas in Greater Manchester: Tameside; Stockport; and Oldham.

The project follows a high fidelity model based on the international 'Pathways to Housing'. The project is currently working with 12 women, offering them a choice of where to live and an intensive support package, which focuses on individual needs. The eligibility requirements for this pilot are that women have had an offending history. However, all the women are victims of domestic violence and many have been subject to childhood abuse. Since the project started a year ago it has: helped to reduce the number of offences carried out by women using the service; achieved up to 80% sustained tenancies with minimal reports of anti-social behaviour; helped women to rebuild relationships with their families; and helped reunite women with their children through close links to children's services.

The work of Threshold's Housing First project helps fulfil the 'Transforming Justice and Rehabilitation' work-strand of the Greater Manchester Combined Authorities Public Sector Reform programme. A priority for this aspect of the Manchester Devolution Deal is the development of 'New Delivery Models' that are effective in 'switching-off' the demand (and escalating costs), in this case by women who offend and re-offend, that would otherwise be brought to public service partners in the City Region. The Greater Manchester Combined Authorities cost benefit analysis found that since the beginning of the project, every £1 invested in the Housing First project has realised outcomes worth of £2.51.

Fulfilling Lives Camden (Housing First in the private rented sector)

Fulfilling Lives Islington and Camden (FLIC) Housing First project FLIC works with people who have complex, unmet needs in all of the following four areas: homelessness; drug and alcohol use; mental health problems; and offending behaviour. As well as providing intensive, flexible and creative support to connect people to the services they need, they provide support to help people navigate the pathways to their recovery. FLIC's Private Rented Sector officer is responsible for sourcing properties from across London. This includes building relationships with

Rough Sleeping Commission Literature Review

agents and landlords to procure properties and continuing to act as the point of contact throughout all stages of a client's tenancy. A frontline worker provides intensive support to Housing First clients in a variety of ways – from supporting them with life skills, helping them to budget and manage bills and linking clients to local treatment services and social activities.

To dates FLIC has housed eleven clients in the private rented sector using the Housing First model. 100% of clients in PRS accommodation have sustained their tenancies. One of these clients has had their tenancy for 18 months, two for 16 months, one for 15 months, one for 12 months, one for 10 months, one for nine months, two for six months and one for four months. All the clients are now registered with GPs and linked in with treatment services, either around their substance and alcohol use, their mental health, or both. Many are now involved in some form of training which could help move them into employment.

Turning Point Glasgow Housing First project

Turning Point's Housing First project has received 202 referrals since its inception in August 2010. Sixty-four individuals have gone on to assessment for the service. The first tenancy was gained in December 2010. Currently there are 34 individuals in permanent Scottish secured tenancies throughout Glasgow. In total, 26 individuals are no longer being supported by Housing First. Of this group, only one was evicted from their tenancy.

Twenty six of the thirty four service users that are housed have registered with local GPs and dental practices. This will have made a significant difference to their presentations to A&E. Service users are much more likely to, and do use mainstream follow on treatment, attending hospital appointments once they are registered with their GP.

Twenty four of the service users have reduced or stopped their substance use. Six of the residents have had no change in their substance use. Only two have increased their substance use since moving into their own tenancy. Peer support workers help service users to deal with utilities, furniture and housekeeping. Peer support workers will also assist service users to attend recovery events, recovery cafes, Alcoholics Anonymous and Narcotics Anonymous. They will also often signpost or refer service users to other day services within Glasgow. Regular reviews are held with service users, care managers, housing associations, accommodation and support providers and health services. All individuals report feeling more settled now that they have their own home and are no longer part of the homeless 'scene'. They report a sense of belonging and feeling valued in society because they have their own home and have reduced their substance misuse.

Rough Sleeping Commission Literature Review

Key reading

- Housing First England (2016), *Key principles*, London: Homelessness Link
<http://www.homeless.org.uk/sites/default/files/site-attachments/Housing%20First%20in%20England%20The%20Principles.pdf>
- Pleace, N & Bretheton, J (2013), *Camden Housing First, A Housing First Experiment in London*, York: The University of York.
<https://www.york.ac.uk/media/chp/documents/2013/Camden%20Housing%20First%20Final%20Report%20NM2.pdf>
- Centre for Social Justice (2017), *Housing First: housing led solution to ending homelessness and rough sleeping*, London: Centre for Social Justice
http://www.centreforsocialjustice.org.uk/core/wp-content/uploads/2017/03/CSJJ5157_Homelessness_report_070317_WEB.pdf
- Pleace, N & Bretheton, J (2013), *Housing First in England, An Evaluation of Nine Services Camden Housing First A Housing First Experiment in London*, York: The University of York
<https://www.york.ac.uk/media/chp/documents/2015/Housing%20First%20Engl and%20Report%20February%202015.pdf>

No First Night Out

No First Night Out – Help for Single Homeless People is a tri-borough project, working across Tower Hamlets, Hackney and The City of London. The project, which is funded by the GLA, is working to develop new approaches to prevent individuals from sleeping rough for the first time. An important element of the pilot is the collection of detailed data from people who use the service and information on their journeys into homelessness. Using this data, the borough has been able to create typologies of new rough sleepers, which have been used to determine the most appropriate response to help end their homelessness. Last year St Mungo's produced an interim evaluation of the project.¹⁶

Key findings:

- Those who go on to sleep rough represent a small (albeit significant) proportion of the overall number of presentations of single homeless people who present at Housing Options (for example, 2,171 presentations were made to Housing Options during 2014/15 compared to 246 new rough sleepers contacted by outreach teams in Tower Hamlets during this period)
- For 24% of people, their primary need was access to accommodation
- For 24% of people, their homelessness was linked to support needs including drug use, offending, often combined with mental health
- For 6% of people their homelessness was linked to mental health and family problems

¹⁶ http://www.mungos.org/homelessness/publications/latest_publications_and_research/2513_no-first-night-out-help-for-single-homeless-people-interim-report

Rough Sleeping Commission Literature Review

- The likelihood of presenting but not going on to sleep rough appears to be higher for the following groups: younger and older people, women and people from a Bangladeshi background.

They identified three main tipping points into rough sleeping:

- 1) When staying with friends or family in a 'hidden homeless' situation ends.
- 2) Having to leave the family home/ partner's house where they were staying on a long term basis
- 3) Being evicted or knowing the eviction was pending and moving straight to rough sleeping as a result.

Key conclusions from the evaluation that would be useful for H&F to consider:

- Ensuring a streamlined pathway to divert people from or move them out of rough sleeping, which does not require going back-and-forth between services.
- Creating a client friendly approach so that people feel less defensive and challenged, for example, considering a review of the terminology of 'non priority need'.
- Empowering staff to support rather than just advise clients.
- Considering options for helping more people move directly from Housing Options to accommodation if they are assessed to be sleeping rough already or imminently at risk of sleeping rough.
- Establishing a programme of work which informs services in the statutory and voluntary sector about risk factors and vulnerable groups, and suggests the best course of action according to the stage someone is at in their housing journey.
- Harnessing public awareness – the community could play a greater part in highlighting people they think are very vulnerably housed or at risk of homelessness.
- Considering the role of places where people go but typically do not attempt to access housing advice including mosques, libraries, GPs and advice services
- Improving access to the Private Rented Sector where possible. This could include enabling quicker access to rent deposit schemes and regularly reviewing lists of eligible landlords
- Reviewing use of some temporary accommodation projects which elicited particularly poor feedback

Key reading

- St Mungo's (2016), *No First Night Out – help for single homeless people*, interim report, London: St Mungo's
http://www.mungos.org/homelessness/publications/latest_publications_and_research/2513_no-first-night-out-help-for-single-homeless-people-interim-report

Rough Sleeping Commission Literature Review

The European End Street Homelessness campaign

The European End Street Homelessness Campaign, developed by the Building and Social Housing Foundation (BSHF) the European federation of national organisations working with homeless people (FEANSTA), is a pan European movement of cities, working together to end chronic street homelessness by 2020. The campaign supports cities across Europe in a growing movement that aims to gain public support and mobilise action to end street homelessness. Croydon and Westminster are early adopters of the campaign in the UK.

There are two main aspects of the campaign

- 1) The City Self-Assessment Tool- use of street volunteers to get to know every person sleeping rough
- 2) Building a coalition of the willing, in which all members of the community can play an active role in identifying solutions and putting them into practice.

Key learnings from the campaigns for H&F

- *Westminster*- Efforts to rehouse the most vulnerable must be redoubled through setting targets and making sure that services are fit for purpose, including a Housing First approach and being prepared to change the way partners work to be even better in supporting and housing people.
- *Westminster*- Continuing to support the engagement of the whole community including residents, businesses, experts by experience and a broader range of stakeholders to understand the problem and develop new solutions and help get the perspectives of other agencies that may not always be involved through traditional methodologies.

4. Conclusions and next steps for the group

With regards to key learnings from successful past interventions, the creation of emergency and permanent accommodation, combined with a package of wraparound support for rough sleepers, which requires good joined up working between agencies and within the council, is vital for the reduction of rough sleeping. Housing First provides a model of housing and support which could meet this need. Removing barriers to permanent accommodation for rough sleepers will be vital. With regards to prevention, the NFNO pilot provides an example of how teams within H&F could work to create typologies of rough sleeper to help design preventions services and target early action work. +

At current, there is a lack of suitable provision for EEA nationals and people from other countries outside the UK who are sleeping rough. The current reconnection package for these people (as well as people reconnected to other parts of the UK) has not been successful in reducing the number of people who sleep rough in the long term. Similarly, the NSNO approach does not cater for people who have complex and multiple needs.

Rough Sleeping Commission Literature Review

Based on this desk based research the commission would benefit from taking oral evidence from:

- A borough running the No First Night pilot- Riad Akbar- Riad.Akbur@towerhamlets.gov.uk
- Housing First projects in Deptford and Camden- Lucy Watson (Operations Manager), Fulfilling Lives Camden- LWatson@shp.org.uk
- Someone from Westminster and Croydon to talking about the European End Street Homelessness campaign- Lee Buss (Director of Operations), Evolve Housing lee.buss@evolvehousing.org.uk/ Janice Gunn (Director), Crisis Croydon Skylight, Janice.gunn@crisis.org.uk

**Rough Sleeping Commission
Literature Review**