

Title	<b>Draft Rough Sleeping Strategy</b>				
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# **Rough Sleeping Strategy 2018**

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## **Cabinet Member foreword (INSERT)**

I am pleased to introduce Haringey Council's Rough Sleeping Strategy 2018.

London's housing crisis is keenly felt by many people, but none more so than those who find themselves with no home at all. Tackling homelessness and the harms associated with it is one of the greatest challenges we face as a society. This is particularly the case in Haringey, where levels of homelessness and rough sleeping are unacceptably high.

Meeting this challenge will require a radical change in how we work; simply carrying on as we did before will not deliver the reduction in homelessness that is necessary. We do not have enough social housing to meet demand from homeless people, and we will increasingly rely on the private rented sector to offer solutions. This will involve securing more affordable, decent homes and ensuring that the people moving in to them have the resources and support to manage them sustainably.

But we can no longer simply deal with the consequences of homelessness once a crisis has happened. Our new approach is underpinned by the same principles that drive the Homelessness Reduction Act, which represents a new statutory framework for local authorities and enshrines in law the requirement to intervene earlier and prevent homelessness wherever possible.

Homelessness is the symptom of a complex interaction between a person's specific situation and a range of structural and social factors that are often beyond their control. If we are to successfully tackle homelessness, we need to find new ways of addressing these root causes; poverty and disadvantage, unemployment, poor health and wellbeing and lack of access to affordable, decent homes.

Our focus on prevention will involve working more closely with people using services to understand their strengths, and support them holistically to achieve their goals. Over the life of this strategy, we will build on existing services and continuously improve service delivery. We will forge new relationships with our partners, encouraging them to identify people who may be at risk of homelessness at the earliest opportunity. We will bring our offer of help into the community, establishing place-based services using co-location and partnership working to increase prevention activity. And we will engage the wider statutory and voluntary sector to address the support needs that may otherwise contribute to homelessness, with a focus on systems change to deliver sustainability.

This is an exciting time, full of opportunity, and there is much to do. I would like to thank the many different organisations who have worked with us to develop this shared understanding of the issues we face, the role they can play in tackling homelessness and what our expectations and hopes are for the future.

## Executive summary

### OUR VISION AND OBJECTIVES

#### Haringey's Strategic Vision

Haringey is a place where we all work together to prevent and resolve homelessness and rough sleeping

##### Objectives

**Homelessness:** We will reduce the financial and human costs of homelessness through intervening earlier to prevent homelessness, increasing the supply of accommodation available and meeting the needs of those already in Temporary Accommodation.

**Rough Sleeping:** We will deliver an ongoing reduction in rough sleeping and address the multiple harms it brings to individuals and communities through rapid intervention to offer a route off the street for all, improving health, wellbeing and resilience and tackling street activity associated with rough sleeping.

Homelessness is a blight on communities and individuals, with significant human and financial costs. It is a problem that affects Haringey particularly severely; with the second highest level of homelessness in the country<sup>1</sup>. A radical new approach that drives systems change is needed to reduce the multiple harms that homelessness causes.

We have collaboratively developed our Homelessness and Rough Sleeping strategies with partners across the borough including statutory service providers, voluntary and community organisations, and people using our services. We will continue working closely with these groups and individuals as we develop our strategic delivery plan.

The main Homelessness Strategy sets out our broad strategic vision, objectives and the overarching principles that inform our approach to addressing homelessness in Haringey, as well as summarising the harms and costs to people and communities caused by homelessness and rough sleeping. Our commitment to preventing homelessness at an earlier stage applies equally to single vulnerable people who may be at risk of rough sleeping as it does to families. However, in recognition of growing numbers of rough sleepers in Haringey, and the particular harms to people and communities that sleeping on our streets causes, we have developed this standalone Rough Sleeping Strategy to accompany the Homelessness Strategy. In this strategy, we identify an additional three priorities that we think are essential if we are to effectively address rough sleeping in the borough.

#### HOW WE WILL CHANGE WHAT WE DO

In order to deliver this, we must work together to change the 'ecosystem' within which homelessness prevention and relief services exist. We have identified the

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<sup>1</sup> Shelter: Far from Alone Homelessness in Britain November 2017

following overarching principles to guide us in redesigning our systems to deliver these objectives:

### **Providing strategic leadership and building collaborative partnerships**

The Council cannot deliver the outcomes needed on its own. Its role is to act as a platform, building capacity, sharing information and providing direction, enabling all the players to come together to deliver change. This will require us to build trust and transparency and deliver consistent messages across the partnership.

### **Making prevention everyone's responsibility**

The best way to tackle homelessness is to prevent it from happening in the first place. All members of our partnership, including homeless people themselves, have a role to play and responsibilities in this. We must find new ways to integrate our homelessness prevention work with other services who also meet people in housing need, enabling us to intervene earlier and more effectively.

### **Commissioning more effectively to better meet local need**

We will use modern strategic commissioning practices to better understand local need, effectively manage resources and plan and deliver services. These practices will deliver improved value for money, a renewed focus on outcomes, quality and customer satisfaction and better integration with the local partnership.

### **Delivering in and with our community**

Our approach to addressing homelessness recognises the strengths and assets that individuals and communities already have within them. Our offer of help will build on these strengths, empowering individuals and communities to build their resilience and self-sufficiency so they are less dependent on services in the future.

## **WHAT WE WILL DELIVER - HOMELESSNESS**

### **Priority 1: Intervening earlier to prevent homelessness**

- We will identify the specific triggers, risk factors and causes of homelessness at different points in people's lives. Building on that, we will develop a range of interventions specifically targeted at addressing these.
- These interventions will take place at a universal, targeted and crisis prevention level and will be available to the general population, specific individuals in housing need and within the local community partnership.

### **Priority 2: Increasing the supply of accommodation available**

- We urgently need to access more affordable, safe and suitable homes for people in housing need.
- Our approach to increasing the supply of homes will include;
  - maximising the supply of social rented units available
  - securing more affordable tenancies in the private rented sector
  - increasing the length of tenure and quality of these homes.
- We will also review and modernise our supported housing provision in line with the Supported Housing Review

### **Priority 3: Meeting the needs of those already in Temporary Accommodation**

- We will develop a range of housing options tailored to the individual needs, aspirations and capabilities of the c3,000 households currently living in TA.
- We will build our understanding of what households in Temporary Accommodation want and need by;
  - undertaking research and developing better data on outcomes
  - focus on improving the health, resilience and wellbeing of people in Temporary Accommodation
  - ensuring that we work with everyone in Temporary Accommodation to develop a personalised, realistic ‘move on plan’

## **WHAT WE WILL DELIVER - ROUGH SLEEPING**

### **Priority 1: Rapid intervention to offer a route off the street for all**

- Rough sleeping is harmful to communities and individuals, and it is unacceptable for people to be sleeping on the streets. We will intervene quickly to offer everyone a route off the street
- Our approach will include; increasing our capacity to identify people earlier, improving the support we offer to help the person off the street and, as a last resort, taking co-ordinated enforcement action to prevent ongoing harm to individuals and communities
- There is no ‘one size fits all’ approach to which route off the street will be right; we will explore the full range of appropriate options and offer holistic support to address other, overlapping issues

### **Priority 2: Improving health, wellbeing and resilience**

- We will work with our partners to reduce the severe health inequalities faced by rough sleepers by improving data collection, increasing access to health services and refocusing on health, wellbeing and resilience outcomes
- We will undertake a health needs audit and create a health ‘passport’ to improve our understanding of and track outcomes for single homeless people in our supported housing pathway
- We will ensure our services meet the ‘Psychologically Informed Environment (PIE) standard

### **Priority 3: Tackling street activity associated with rough sleeping**

- We will develop a coordinated approach to tackling street activity associated with rough sleeping, such as begging, street drinking and drug-taking, ensuring that the harms this behaviour causes are minimised
- As a last resort, alongside ongoing support, we will take enforcement action against individuals or groups who persist in such behaviour

# 1. Introduction

## 1.1 BACKGROUND

Rough sleeping is the most visible form of homelessness and the most damaging. It causes significant harm to individual physical and mental health, and general wellbeing and reduced life expectancy. A woman sleeping on the streets has a life expectancy of 43 years and a man 47 years, lower than even the most poverty-stricken and war-torn countries in the world. Between 2010 and 2016 in London alone, an average of one person a fortnight died while rough sleeping, or within a year of rough sleeping<sup>2</sup>. Rough sleeping and the street-based behaviour often associated with it, such as begging, street drinking and other forms of antisocial behaviour are also highly damaging to communities.

We believe that nobody should be sleeping on the streets, and with appropriate support, everybody can move away from the streets and live a healthier and happier life.

Haringey has, over the past few years, seen a significant increase in the numbers of rough sleepers, including a growing number from Central and Eastern European (CEE) and European Economic Area (EEA) countries. The rising number of people sleeping rough in Haringey mirrors a trend seen across all London boroughs, and is due in part to welfare reform, most notably the benefit cap, the local housing allowance cap, the reduction in the amount of benefits that CEE and EEA nationals are eligible for, and increased sanctions for those on benefits. We know that poverty and deprivation are significant drivers of all types of homelessness, including rough sleeping.

Haringey has also seen an increase in the number of rough sleepers with a range of overlapping and multiple disadvantages, such as addiction, poor physical and mental health, contact with institutions as children or adults, offending histories and experiences of trauma. As a result, we are committed to improving the outcomes for rough sleepers in these areas. Over the life of this strategy, we will continue to adapt and be flexible in order to meet these complex needs; ensuring that our single homeless housing-related support services are sufficient to meet demand.

Rough sleeping is an area of priority for the Council, in terms of preventing people from sleeping rough, ensuring there are swift and effective routes off the streets for everyone and providing appropriate support to improve health and wellbeing. In 2017, the Council successfully bid for £397,875 funding from the Department of Communities and Local Government to deliver improvements to our provision for rough sleepers over the period 2017-2019.

Haringey's Rough Sleeping Programme, supported by this funding, includes the following strands:

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<sup>2</sup> St Mungo's Nowhere Safe to Stay

- A Rough Sleeping Strategy & Monitoring Coordinator to lead the programme,
- A Health Lead working in partnership with hospitals and substance misuse agencies to identify and support those at risk of homelessness or actually rough sleeping ,
- A Community Host scheme – to provide short term accommodation in the community, and
- Partnership work with organisations in the voluntary and community sector and faith-based communities.

In 2017, Haringey Council also commissioned a street outreach service to work alongside the GLA-commissioned London Street Rescue.

This Rough Sleeping Strategy was developed collaboratively by the Council, its partners and rough sleepers themselves. This commitment to partnership runs throughout the strategy. We recognise the assets within the borough: the voluntary and community sector, night and winter shelters, housing-related support providers, substance use agencies, Metropolitan Police and Community Safety and Enforcement Team, all of whom will continue to work together to improve the lives of those either currently or formerly living on the streets. We cannot do things alone.

This strategy sets out the key priorities for rough sleeping: ensuring every rough sleeper has an appropriate offer to move away from the streets, ensuring that the health and wellbeing needs of people sleeping rough are met and for a strategic approach to be taken to tackle anti-social behaviour and street-based activity associated with rough sleeping.

## **1.2 ABOUT THIS STRATEGY**

Unlike the Homelessness Strategy, this is not a statutory strategy. That is, the Council is under no duty to produce a Rough Sleeping Strategy.

Nevertheless, the Council has decided that it should produce this document, alongside the statutory Homelessness Strategy, and treat the requirements of that statutory strategy as if they applied – for example the requirement to develop the strategy with the assistance of social services authorities, and in consultation with other bodies including registered social landlords and voluntary organisations.

Section four of the Homelessness Strategy updates the Homelessness Review, which, taken together with section two of this strategy, sets out the evidence base on which this strategy is founded.

This strategy has been developed collaboratively with our Homelessness Forum and other key partners from across the sector and wider community. In 2016, the council published an initial draft alongside a Homelessness Review. A formal consultation with individuals and families in housing need, including residents in temporary accommodation and on the housing register, was undertaken between 14<sup>th</sup> November 2016 and 19<sup>th</sup> January 2017. A report on the outcomes was taken to Haringey's Housing & Regeneration Scrutiny Panel on 9<sup>th</sup> February 2017.



Following that, a decision was taken to pause development of any Homelessness and Rough Sleeping strategies, pending more detail on the Homelessness Reduction Act becoming available. The Homelessness Reduction Act received Royal Assent in April 2017. The Rough Sleeping has now been drafted to reflect its implications and other key changes since the draft Homelessness Strategy was initially published, including the new Supported Housing funding regime. During this time, we have undertaken further consultation events with key stakeholders from across the partnership and with people using homelessness services.

One of the four key ways in which we need to change the way we work to deliver this strategy (see section five) is our commitment to delivering in and with our community. Our 'asset-based'<sup>3</sup> approach means that, over the life of this strategy, we are committed to working more collaboratively with people living and working in our communities to better understand their needs and how they can be empowered to share ownership of, and contribute towards, achieving the vision set out here. This approach also creates a feedback loop to enable us to monitor the extent to which the strategy is being delivered and whether it needs to be reviewed in light of this.

The Public Sector Equality Duty (Equality Act 2010) requires public bodies to have due regard to the need to eliminate discrimination, advance equality of opportunity, and foster good relations between different people when carrying out their activities. As such, our approach has and will continue to be informed by the latest available intelligence when determining key actions associated with the delivery of our strategy vision

### 1.3 STRATEGIC VISION

This shared strategic vision will guide all our work with partners to tackle homelessness and rough sleeping. The full detail on the actions and initiatives that flow from this vision and its objectives is set out in chapters five and six of this document and in the Homelessness Strategy.

It is particularly important to read these two documents together to understand the full approach to Rough Sleeping. That is, work on homelessness prevention, which has to be central to any approach to tackling Rough Sleeping, is contained within the Homelessness Strategy. For brevity, it is not replicated in this document, but it is, of course, a key part of our shared approach.

## Haringey's Strategic Vision

Haringey is a place where we all work together to prevent and resolve homelessness and rough sleeping

### Objectives

**Homelessness:** We will reduce the financial and human costs of homelessness through intervening earlier to prevent homelessness, increasing the supply of accommodation

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<sup>3</sup> See <https://www.thersa.org/discover/publications-and-articles/rsa-blogs/2016/12/homelessness-in-oxford> and <http://www.altogetherbetter.org.uk/Data/Sites/1/5-assetbasedcommunitydevelopment.pdf> for examples of an Asset-based approach

available and meeting the needs of those already in Temporary Accommodation.

**Rough Sleeping:** We will deliver an ongoing reduction in rough sleeping and address the multiple harms it brings to individuals and communities through rapid intervention to offer a route off the street for all, improving health, wellbeing and resilience and tackling street activity associated with rough sleeping.

## 2. Rough Sleeping – The Policy Context and Evidence Base

### 2.1 DEFINING ROUGH SLEEPING AND STREET ACTIVITY

MHCLG defines rough sleeping as: *“People sleeping, about to bed down (sitting on/in or standing next to their bedding) or actually bedded down in the open air (such as on the streets, in tents, doorways, parks, bus shelters or encampments). People in buildings or other places not designed for habitation (such as stairwells, barns, sheds, car parks, cars, derelict boats, stations, or “bashes” which are makeshift shelters, often comprised of cardboard boxes)”*

Throughout this strategy, we refer to those who are currently rough sleeping, and to former rough sleepers currently in our single homeless housing-related supported services or otherwise being supported to stay off the streets and rebuild their lives.

A priority for this strategy is to address the street-based activity that is often associated with rough sleeping and former rough sleeping. ‘Street based activity’, as referred to in this strategy, includes begging, anti-social behaviour, street crime, street fouling, street drinking and street drug-use. This is not to say that everyone who engages in street behaviour is a rough sleeper; a large number of people seen begging on Haringey’s streets are not, and never have been, rough sleepers. However, this behaviour blights communities and individuals alike and we know makes it harder for people entrenched in a street lifestyle to break away and change their circumstances. Therefore, it is important that we work together to address this.

### 2.2 LEGAL DUTIES

The **Housing (Homeless Persons) Act 1977** requires local authorities to prevent as well as respond to homelessness and assist people under imminent threat of homelessness (and classed as ‘in priority need’) by taking reasonable steps to prevent them from losing their existing accommodation.

**Part VII of the Housing Act 1996**, as amended by the **Homelessness Act 2002**, sets out the duties owed by local housing authorities to someone who is homeless or threatened with homelessness.

The **Homelessness Act 2002** places a specific requirement for Local Authorities to produce and implement a Homelessness Strategy. The **Localism Act 2011** enables councils to discharge their duty permanently by making use of suitable accommodation in the private rented sector.

The **Homelessness Reduction Act 2017** places a duty on Local Authorities to provide anyone threatened with or at risk of being homeless (within a 56-day period) with advice and support to prevent them becoming homeless. It also requires specified public bodies<sup>4</sup> to refer (with the person’s consent) anyone they consider to be homeless or threatened with homelessness.

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<sup>4</sup> At the time of writing, the public authorities with a ‘duty to refer’ are yet to be determined. Regulations are expected to be laid in early 2018

## 2.3 WELFARE REFORM

There are increasing pressures on low-income single people following welfare changes that have both affected their incomes and limited the amount of benefit payable towards housing costs. Welfare Reforms with the most significant implications for homelessness include:

- Local Housing Allowance (LHA) reductions including total LHA caps and the limiting of LHA to 30<sup>th</sup> percentile of market rents. The Government has frozen increases in LHA rates for 4 years from April 2016 meaning fewer properties are available within these rates.
- The Overall Benefit Cap, limiting the benefit that someone living in London family can receive to a maximum of £15,410 for single people without children, with the benefit removed from the housing element.
- Single person private renters under the age of 35 are only entitled to the shared accommodation rate. This means that they can only receive housing benefit at the same rate for a single room in a shared house, even if they are living in a self-contained flat.
- Universal Credit will be implemented in Haringey in October 2018. It replaces the range of unemployment benefits and housing benefit previously claimed separately and paid weekly, rolling these into one monthly payment, made directly to the claimant. Whilst DWP data shows Universal Credit has had a positive impact on labour market outcomes for new claimants in the 10 pathfinder sites, other evidence shows tenants who have moved to Universal Credit have built up significant rent arrears, with the 6-week delay in making the first payment a particular cause for concern.
- In the 2017 Autumn Budget, the government announced the removal of the 7-day waiting period, a Housing Benefit run-on period to help claimants with the cost of renting in the period before they receive their first Universal Credit payment and measures to recoup 80% of the money local authorities spend on TA directly from DWP rather than the claimant. At the time of writing, further work to assess the impact of these changes is ongoing.

## 2.4 FUNDING FOR SUPPORTED HOUSING

In October 2017, the government announced that it was dropping plans to apply Local Housing Allowance to supported housing and launched a fresh consultation on funding arrangements from April 2020. The proposals outline a funding regime tailored to three different types of supported housing:

- Sheltered and extra care
- Short term supported housing (including refuges)
- Long term supported housing for those with ongoing support needs

The proposal for short-term supported housing would see the rental element (currently covered by housing benefit) funded through a ring-fenced grant to local authorities. This will require local authorities to have greater oversight of services in their area, including those not directly commissioned by them, and to undertake robust needs and provision assessments to determine how funding should be used.

## **2.5 THE MAYOR OF LONDON'S HOUSING STRATEGY**

The Mayor of London set out his vision for a new approach to tackling London's housing crisis in his draft 2017 Housing Strategy, which has 5 priorities:

1. Building homes for Londoners
2. Delivering genuinely affordable homes
3. High quality homes and inclusive neighbourhoods
4. A fairer deal for private renters and leaseholders
5. Tackling homelessness and helping rough sleepers

The Mayor of London is a key commissioner of Rough Sleeping services:

- £8.5m per year to 20/21 to fund pan-London rough sleeping services: No Second Night Out, London Street Rescue, CHAIN database, Clearing House, Routes Home scheme, StreetLink
- £4.2m from government to strengthen existing rough sleeping services and develop new ones including NSNO, a rough sleeping Social Impact Bond, a scheme with TfL to provide outreach provision on night buses and tubes.
- No Nights Sleeping Rough taskforce – dissemination of good practice and improving data collection

## **2.6 THE NORTH LONDON HOUSING PARTNERSHIP**

Haringey is part of the North London sub-region, along with Islington, Barnet, Westminster, Camden and Enfield. The purpose of the partnership is to work collaboratively across the sub-region to:

- lobby for the interests of the North London boroughs on housing issues,
- develop collaborative working across the sub region and between boroughs,
- improve provision of housing services in North London through sharing knowledge, expertise and resources, and
- develop an excellent understanding of housing demand, needs and conditions across North London, and an understanding of how this impacts on wider strategic issues affecting local authorities;

The six boroughs making up the sub region have a strong track record in successfully applying for funding to deliver frontline services where service gaps have been identified. Since 2011, the partnership has successfully applied for funding for ten projects to assist and prevent single homelessness. As a result of these projects, over 1000 single homeless people have been rehoused since 2012.

These include a proactive, community outreach-based service to identify and assist single people at risk of homelessness, a scheme to improve access to private rented accommodation for single 'non-priority' homeless people, a service offering street outreach and reconnection for Central and Eastern European rough sleepers, and additional support for transient female rough sleepers with complex mental health problems. Most recently, the partnership was successful in its Controlling Migration Fund bid to MHCLG. This will deliver employment and accommodation support for rough sleepers with no recourse to public funds who are primarily, but not exclusively living in encampments.

## **2.7 THE HARINGEY POLICY CONTEXT**

Haringey's Corporate Plan *Building a Stronger Haringey Together* describes the council's overall priorities and programme of work for 2015-18. It identifies housing as one of its five priorities, committing us over that period to 'Create homes and communities where people choose to live and are able to thrive'. A key objective is to: 'Prevent homelessness and support residents to lead fulfilling lives'. The council's role is to provide realistic and achievable options for people to find housing and proactively help people avoid eviction and sustain their tenancies.

Haringey's Housing Strategy 2017-2022 describes our local housing context and builds on the Corporate Plan, defining four strategic objectives:

1. Achieve a step change in the number of new homes being built
2. Improve support and help to prevent homelessness
3. Drive up the quality of housing for all residents
4. Ensure that housing delivers wider community benefits

In March 2017, the council completed a review of its supported housing which made a series of recommendations to transform Haringey's supported housing provision, with specific recommendations made regarding support for people with learning disabilities, mental health conditions, older people and vulnerable young people. The objectives of the review were to

- Maximise the reach and impact of council resources and actively contribute to financial efficiency and cost reduction
- To provide supported housing services that enable integrated housing, health and social care outcomes for the population in need

This five-year transformation programme will progress over the life of this strategy. The vision, objectives, principles and outcomes it hopes to achieve underpin our efforts to modernise and transform the help and support we offer to the some of the most vulnerable people in our society.

## **2.8 ROUGH SLEEPING IN HARINGEY**

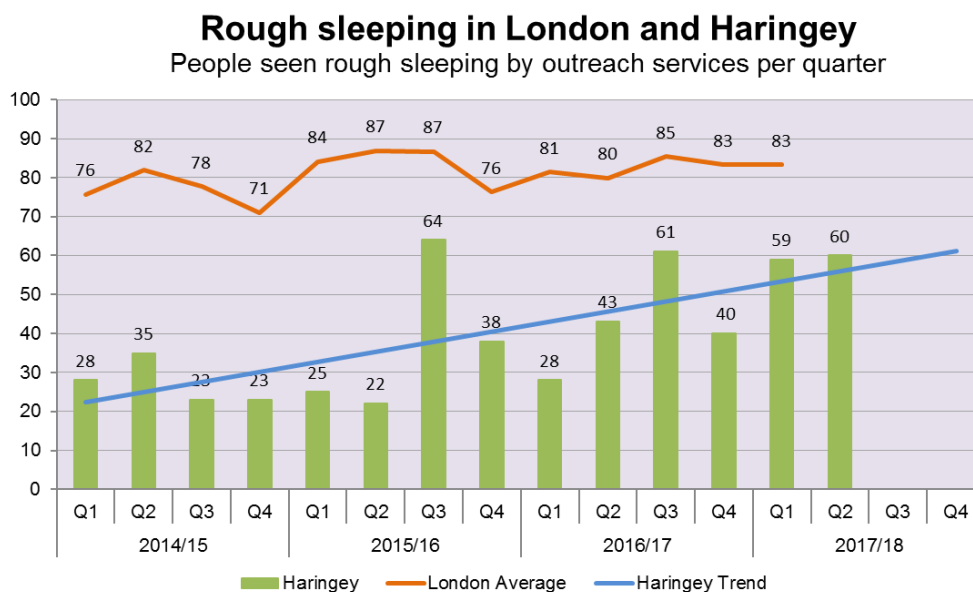
As with the policy context, the Evidence Base presented in this section, which is specific to the issue of rough sleeping, should be read alongside the wider evidence base on homelessness set out in the Homelessness Strategy.

Although rough sleepers in Haringey represent a relatively small percentage of the overall homeless population, they are by far the most visible, often the most complex, and can present with the greatest risks to both themselves and to the community.

The council uses the Combined Homelessness and Information Network (CHAIN) to monitor numbers of rough sleepers in the borough. CHAIN is a multi-agency database recording information about rough sleepers in London. We also undertake an annual street count or estimate. This entails completing a snapshot survey of the number of people known to be sleeping out on a 'typical night' between 1<sup>st</sup> October to 30<sup>th</sup> November each year.

According to CHAIN, 8108 people were seen rough sleeping in London in 2016/17, of which 146 were seen in Haringey. This is in comparison to 43 people seen rough sleeping in Haringey in 2011/12.

Numbers of rough sleepers have continued to increase, and in the first two quarters of 2017/18 were among the highest Haringey has ever seen; with 59 and 60 respectively. On the night of 23 November Haringey completed its official rough sleeper count and a total of 43 people were identified as sleeping rough on that night. This is an increase of 33% from 2016. The Haringey count figure for 2014 was a rather unlikely 1 solitary rough sleeper.



The majority, 108, of Haringey’s verified rough sleepers in 2016/17 were new to the street, and of these, 78% were seen only once.

Haringey has seen an increase in numbers of rough sleepers who are from either Central and Eastern Europe (CEE) or the European Economic Area (EEA) with 38% in 2011/12 and 52% in 2016/17. As a result of changes to welfare benefits for this group from 2014, they will now have no recourse to public funds meaning it is extremely challenging for them to access accommodation and employment.

The support needs of rough sleepers in Haringey have been consistently high over the past few years. In 2016/17, 79% of the 87 rough sleepers assessed identified having support needs around one or more of alcohol, drugs and mental health.

Alcohol:	Drugs:	Mental health:	Other:
49%	43%	48%	21%

Rough sleepers currently cost public services a disproportionate amount, due to the complexity of issues they face and their use of public services in an unplanned way. An entrenched rough sleeper has been estimated to cost the public an average of

£16,000 per year<sup>5</sup> through demands placed on public services (compared to £4,600 for the average adult). The current pressures on finances across all partners mean it is vital that we work together to reduce these costs.

The rising numbers of rough sleepers across London and in Haringey is likely to be due to a variety of reasons. These include ongoing welfare reforms, the buoyancy of the private rented market, increasing numbers of 'hidden homeless' people living in insecure, overcrowded and inappropriate housing and wider pressures on the public sector, in health and social care and the criminal justice system in particular. However, we currently lack sufficient data on patterns of rough sleeping in Haringey to really understand the complex set of circumstances that has led to the rises we are seeing locally. Developing this intelligence and data on rough sleepers' needs, aspirations and customer journeys will be a priority for us as we develop our approach to homelessness prevention, as set out in our Homelessness Strategy.

What we do know is that for some people, the complex and overlapping traumas and life experiences that have led them to sleep rough in the first place make it much harder for them to find and keep accommodation, even when this is available to them. Individuals entrenched in substance use, with severe and often poorly-treated mental health conditions or with other complex health problems, often struggle to navigate the pathways into accommodation. If accommodation is secured, it is often hard for them to maintain it, pay bills and break away from entrenched patterns of behaviour that have been developed over their lifetime.

Evidence<sup>6</sup> suggests that the triggers and experiences of female rough sleepers tend to be distinct from those of men. Although fewer in number, comprising around 11% of rough sleepers in London, they face particular barriers to accessing support. We know that many women avoid rough sleeping by sofa surfing, staying in abusive relationships or living in squats, 'crack houses' and brothels<sup>7</sup>. A higher proportion of women than men will have had specific traumatic experiences that led to their homelessness such as domestic abuse and perhaps having their children taken into care. Consequently, women who are homeless often have higher and more complex needs than men, including mental and physical health issues, substance use issues, offending histories and involvement in prostitution.

Entrenched rough sleepers experience very high levels of abuse and violence, which often tracks back to traumatic and violent childhoods, stays in institutional care, prison or other institutional settings as adults. Perhaps unsurprisingly, many have exceptionally low self-esteem or belief that their lives can change for the better and some may appear to give up on this altogether. Our challenge is to offer these most

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<sup>5</sup> DCLG <https://www.gov.uk/government/publications/addressing-complex-needs-improving-services-for-vulnerable-homeless-people>

<sup>6</sup> St Mungo's <http://rebuildingshatteredlives.org/theme/housing-and-homelessness-services-for-women-with-complex-needs/>

<sup>7</sup> London Assembly [https://www.london.gov.uk/sites/default/files/london\\_assembly\\_-\\_hidden\\_homelessness\\_report.pdf](https://www.london.gov.uk/sites/default/files/london_assembly_-_hidden_homelessness_report.pdf)



damaged members of our society assertive, person-centred, trauma-informed responses that allow for the possibility of hope and recovery.

Similarly, we know that among the population of Eastern European rough sleepers there are individuals who have No Recourse to Public Funds so cannot claim Housing Benefit. While such individuals may work in informal or low paid jobs, the money earned may well be sent to relatives in other countries rather than be used to pay for accommodation in the UK. This poses a long-term risk that such individuals get drawn into more dangerous behaviours while sleeping on the streets, such as problematic drinking or taking drugs, which can lead to long-term entrenchment.

This situation raises challenging issues. We are clear that the streets are not an appropriate accommodation option for people who come here without a realistic plan for where they are going to sleep. Choosing to sleep on the streets, in order to maximise earnings to be sent back to other countries, is not a legitimate choice. This is because of the dangers rough sleeping poses to the individuals themselves and the risk that they will be drawn into exploitative situations such as prostitution or modern slavery, anti-social behaviour and crime.

### **3. How we will change what we do**

In order to deliver our strategic vision, we must work together to change the 'ecosystem' within which services to tackle rough sleeping exist. We have identified the following four overarching principles to guide us in redesigning our systems to deliver these objectives:

#### **3.1 PROVIDING STRATEGIC LEADERSHIP AND BUILDING COLLABORATIVE PARTNERSHIPS**

Throughout this document, we refer to our partnership as being key to the delivery of our objectives and outcomes. Our partnership is diverse and multi-agency, and includes (but is not limited to) staff in our commissioned homelessness services including Homes for Haringey, charitable and third sector organisations such as St Mungo's, Thames Reach, One Housing Group and Solace Women's Aid, local voluntary and community groups such as Neighbourhood Watch and Bringing Unity Back into the Community (Bubic), colleagues from other statutory services such as police, Children's and Adults Social Care, Mental Health, Public Health, Job Centre Plus, Community Safety teams and the Department for Work and Pensions and perhaps most importantly, people with lived experiences of homelessness.

The financial challenge facing Haringey sets the context for this strategy and our role in delivery. In addition to our role as funders of homelessness prevention and relief services, we will also provide strategic leadership to the partnership, utilising and further developing existing relationships, influence and leverage.

We have collaboratively developed the actions and approaches we believe are necessary to realise our ambitions, and recognise that not all these actions will be directly within the gift or responsibility of the council to deliver. We are committed to working alongside and supporting those who are better placed to deliver, and encourage all partners to identify how their organisation can contribute to the ambitions and principles set out here.

As strategic leaders, we will provide direction, bring the partnership together around this shared set of objectives and hold it to account on delivery. As capacity builders and enablers, we will co-ordinate and support our partnership to deliver well integrated homeless prevention and support, providing information, building skills and knowledge and creating efficient pathways.

With a renewed focus on delivering excellent customer service and psychologically informed support that recognises the overlapping stresses and trauma that many people affected by the experience of rough sleeping, we will redesign services around the needs of rough sleepers. Underpinning this, we will work with community and partners to build a new culture of trust and transparency. Everyone in the partnership must work together to ensure the messages we deliver about rough sleeping in Haringey are honest, consistent, accurate and understandable. This will enable people in housing need to make informed choices about their housing options.

### **3.2 MAKING PREVENTION EVERYONE'S RESPONSIBILITY**

All members of our partnership have responsibilities and a role to play in preventing rough sleeping and the escalation of circumstances that can drive someone towards crisis point. We must all work together to recognise and address the underlying issues at the root cause of rough sleeping, such as poverty and unemployment, rent arrears, debt and benefit problems, poor physical and mental health, family breakdown, experiences of trauma and abuse and alcohol and substance misuse.

We will work with the community and local partnership to ensure that everyone is able to identify and understand these early homelessness triggers and help the person in need to improve their situation before things escalate to the point they have lost their home or suffered another kind of crisis.

People heading towards a homelessness crisis require holistic support that is tailored to their specific needs, with all agencies playing their part in finding the solution. This will involve partners referring the person on for specialist housing support at an earlier stage, co-ordinating assessments and creating joint support plans with our housing teams. It will also involve working closely with housing colleagues to ensure the options and help offered are appropriate and realistic, and that messages about what is and is not available are consistent.

Housing staff will need to be better trained in responding to domestic violence, abuse and safeguarding issues, delivering Mental Health First Aid and other initiatives to improve health and wellbeing, such as Making Every Contact Count.

Households themselves also have responsibilities when it comes to homelessness prevention; this means engaging with the help and support they are offered. Due to the shortages of supply, it also means recognising that an offer of social housing is unlikely, for most people, to be the solution to their housing problem.

### **3.3 COMMISSIONING MORE EFFECTIVELY TO BETTER MEET LOCAL NEED**

At a time of unprecedented change, with funding pressures set to continue over the life of this strategy, we must stretch the resources we have much further than they have in the past. This means being more innovative in how we deliver against our priorities, modernising and streamlining services to meet the challenges of the future and empower people to rebuild their lives so they are less reliant on services.

We will use modern strategic commissioning practices to better understand and evidence local need, effectively manage resources and plan and deliver a range of services that place self-sufficiency at the core, achieve improved value for money, a renewed focus on outcomes, quality and customer satisfaction and better integration with the local partnership.

### **3.4 DELIVERING IN AND WITH OUR COMMUNITY**

Haringey has a rich and vibrant community that cares deeply about homelessness and rough sleeping and wants to be involved in finding solutions to these issues. This is demonstrated by the range of peer and volunteer-led initiatives that are already delivering excellent work in this area. Without this community-led support,

many more people would suffer the harm caused by homelessness and rough sleeping.

Recognising that a 'one size fits all' approach to tackling rough sleeping is inadequate, we will be person-centred from concept to delivery. We will build on assets of people and place, actively involving, empowering and giving voice to people using services and providing a platform for local community groups and voluntary organisations to contribute towards the delivery of our outcomes.

We will focus on what people and communities can do as well as what they need help with and will offer holistic support appropriate to their specific needs and capabilities. The root cause of rough sleeping lies in poverty and disadvantage, so the solutions lie in empowering people to build their resilience and develop self-sufficiency. This could include helping people to find employment, manage their finances or access affordable childcare in order to get back to work, as well as more obviously 'housing-focussed' help.

We recognise and celebrate the strengths and capacity of our communities and individual community members to be co-producers of solutions to prevent or relieve homelessness. By working with 'experts by experience' who have used our services previously, we will strive to better understand individual customer journeys and experiences of homelessness, using this learning to reshape our services. This will include developing opportunities for people with lived experience of rough sleeping to become involved in supporting their peers to build resilience and find solutions to their homelessness.

## 4. Delivering our key objectives

### PREVENTING ROUGH SLEEPING

Our first priority is always to prevent homelessness, including rough sleeping, from occurring in the first place. Indeed Priority 1 in the Homelessness Strategy is “Intervening earlier to prevent homelessness”, which makes clear that “*The best way to tackle homelessness and rough sleeping is to prevent it from happening in the first place.*”

The Homelessness Strategy sets out in detail how we intend to deliver this priority for the various groups we know are at risk, including single vulnerable people who may be at risk of rough sleeping. From a prevention of rough sleeping perspective, it will be particularly important to ensure appropriate protocols are in place around prison and hospital discharge and people leaving other institutions, such as the armed forces, and that we ensure an ongoing dialogue with people who have experienced rough sleeping to ensure our approaches are co-produced.

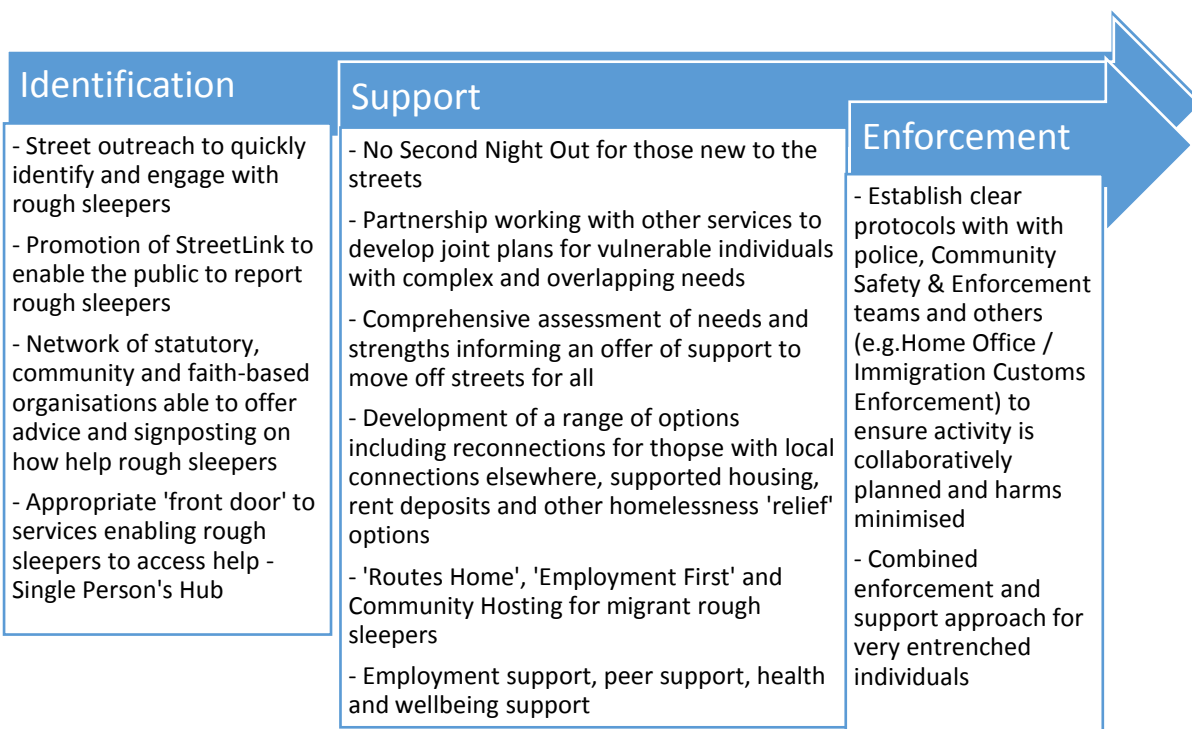
### PRIORITY 1: RAPID INTERVENTION TO OFFER A ROUTE OFF THE STREET FOR ALL

Rough sleeping is harmful and dangerous for the person sleeping on the streets, and the longer someone stays on the streets, the more harmful and dangerous it becomes for both the individual and the wider community. We are very clear that sleeping on the streets is always unacceptable and cannot be ignored or allowed to continue.

If we cannot prevent someone from rough sleeping, it is imperative that we address this as quickly as possible to prevent the harms and costs of this escalating. This will involve identifying appropriate support and options to enable the person to move off the street as quickly as possible. We know that a one-size-fits-all approach will not work here. Where appropriate and safe, we will, for example, support the person to return to accommodation and support networks that are available to them elsewhere, either in the UK or abroad, help them access private rented accommodation, or for those with additional support needs, our single homeless pathway.

We recognise that for entrenched rough sleepers, coming in to accommodation is likely to be the first step in a long journey of recovery and we will continue to work assertively with those individuals to help them maintain their accommodation. However, where problems with rough sleeping persist and, despite ongoing offers of help and support an individual refuses to engage with help to move away from rough sleeping, our offers of support may be combined with enforcement activity.

Evidence from our sub-regional borough colleagues suggests that a combined enforcement and support approach can be helpful to the individuals concerned in these circumstances. Our approach to this is as follows:



In January 2017, Haringey Council showed its commitment to tackling rough sleeping by commissioning an outreach service, Haringey Street Outreach Team (SORT). Haringey SORT works alongside the GLA-commissioned London Street Rescue to provide personalised assessment, advice and referral to specialist services on issues that include housing, welfare benefits, substance misuse, physical health and mental health. The current commissioned service consists of one worker for 23 hours per week. By looking at the increase in numbers, and taking into account feedback during the consultations with rough sleepers, we are clear that current services do not have sufficient capacity to meet the needs of all rough sleepers in the borough.

Feedback from our stakeholders, from rough sleepers themselves and evidence from innovative projects elsewhere in London (e.g. the Greenhouse in Hackney) indicates that individuals with severe and multiple disadvantages are often excluded from 'traditional' housing advice and support services and require a more flexible, person-centred approach that recognises their particular challenges and experiences of trauma and multiple exclusion. That is why we are committed to developing a community-based single person's housing and support hub. Our hub will reduce bureaucracy and offer a welcoming 'front door' to single people with housing and other complex health and social care needs, enabling them to access a range of related services in one location. This will include access to our Housing-Related Support provisions for single homeless people.

As set out in the Homelessness Strategy, under Priority 2, we are committed to undertaking a review of our Single Homeless pathway to ensure that the provision is fit for purpose and appropriate for the needs of vulnerable people, including rough sleepers. This will include:

- Reviewing the availability of our Assessment Centre, our 24-hour supported provision, women-only services and other options such as Housing First, to ensure the needs of people with severe and multiple disadvantages are met,
- Establishing procedures for minimising evictions and unplanned exits, and
- Ensuring that there is appropriate throughput within our services, including the availability of appropriate move on options.

This review will inform the development of a five-year commissioning plan for our single homeless support services.

The challenges presented by rough sleepers with No Recourse to Public Funds (NRPF) are significant and highly contentious. From May 2016, the Home Office designated EEA nationals who were rough sleeping as abusing their rights to free movement under EU Law. The Home Office then sought to deport them, regardless of whether they were working. In December 2017, the High Court ruled that this approach was unlawful. Those previously deported and subject to a 12-month re-entry ban under this policy may be entitled to have the ban lifted and be re-admitted to the UK.

We do not yet know what effect the result of the referendum on the UK's membership of the EU may have on this situation. In particular, we do not know what the future rules will be regarding the movement of EU nationals. Whatever the final outcome, there are limits to what a local authority can realistically do to help many non-UK nationals who sleep rough here.

Our position statement on working with rough sleepers with NRPF is set out below. This will be kept under review, in light of the issues described above.

Position Statement on rough sleepers with no recourse to public funds (NRPF)

Individuals with NRPF cannot be accommodated in our single homeless pathway or offered financial support to prevent or relieve their homelessness (e.g. rent deposits etc). Where capacity allows, we will offer rough sleepers with NRPF a place on our Community Host scheme; providing short-term, safe and stable accommodation alongside support to enable the person to make longer term plans for their future housing and employment options.

Again, where capacity allows, we will offer rough sleepers with NRPF 'Employment First' support; signposting individuals to third-sector partners including St Mungo's, Thames Reach and Crisis who will help them to prepare for and find employment.

We will work with the GLA-commissioned Routes Home Service to offer migrant rough sleepers a safe reconnection/connection option off the streets.

Haringey has a rich and vibrant community that cares deeply about homelessness and rough sleeping and wants to be involved in finding solutions to these issues. This is demonstrated by the range of peer and volunteer-led initiatives that are already delivering excellent work in this area.

These groups include two night shelters (All People All Places winter shelter and Highway of Holiness all-year shelter), soup kitchens, community centres and other

Voluntary & Community Sector (VCS) groups as well as members of the public and Neighbourhood Watch. During our consultation with these groups, many told us they are unsure of the best way to help rough sleepers and would appreciate support and direction. Others are operating with no real input from the council or our wider partnership, and would benefit from being included in, and recognised as part of, the solution to rough sleeping.

There is no doubt that one of the main causes of homelessness in all its forms is poverty, and that the use of food banks and soup runs has increased over recent years as a result. These services are often delivered by community organisations. We are very clear that without community-led support, many more people would suffer the harm caused by poverty, homelessness and rough sleeping.

As set out in Priority 3, street activity such as begging is harmful and goes hand in hand with drug taking and other problematic behaviour<sup>8</sup>. There is also an emerging school of thought<sup>9</sup> that, while obviously well intentioned, activities such as street-based soup runs and handing out of tents and blankets at best offer temporary amelioration of the effects of homelessness. At worst, particularly where the person lacks legal entitlement to the assistance they receive, these interventions can subvert a person's capacity to take control of their lives, leading to a feeling of life 'being on hold' during homelessness. This may result in them staying on the street for longer or not engaging with more empowering forms of support. Additionally, such services may act as a magnet for those not currently rough sleeping, drawing them into a pattern of street behaviour. They may also draw in rough sleepers from other areas, thus compounding the issue in Haringey and creating 'hot spots'<sup>10</sup>.

We need to find ways of channelling the huge generosity of our community and desire to be part of the solution in ways that are safe, ethical and which enable rough sleepers to rebuild their lives. We will take an asset-based approach to this. This means mapping out and building on the strengths and potential already within the community, and helping local groups, organisations and individuals to mobilise their efforts in a co-ordinated way.

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<sup>8</sup> Thames Reach <https://thamesreach.org.uk/what-we-do/campaigns/killing-with-kindness/giving-money-people-begging-frequently-asked-questions/>

<sup>9</sup> FEANTSA <http://www.feantsa.org/download/think-piece-17548219635943096840.pdf>

<sup>10</sup> [https://www.cege.ucl.ac.uk/teaching/MSc\\_Posters/201617%20GIS/GIS\\_FosterL.pdf](https://www.cege.ucl.ac.uk/teaching/MSc_Posters/201617%20GIS/GIS_FosterL.pdf)



## **WE WILL:**

- Increase our street outreach capacity, enabling us to meet more rough sleepers at an earlier stage and to develop individualised plans to support people off the street quickly and sustainably.
- Maintain our commitment to the Mayor of London's No Second Night Out initiative, which we will utilise where permitted to prevent new rough sleepers from spending a second night on the streets.
- Continue holding monthly multi-agency Task and Targeting Meetings to discuss complex rough sleepers and implement robust action plans.
- Undertake an asset-mapping exercise to better understand the community resources we already have, then use this to strengthen our relationships and build new partnerships that empower rough sleepers on their recovery journeys.
- Establish 'Communities of Practice' for local organisations and groups, enabling them to develop their offer to rough sleepers and ensure ongoing dialogue via our Voluntary and Community Sector Forum.
- Offer bi-annual training sessions to agencies that come into contact with rough sleepers e.g. Metropolitan Police, London Fire Brigade and London Ambulance Service, so that we can raise awareness of the rough sleeping pathway.
- Develop a wallet-sized information leaflet for the community and agencies including blue light services, giving advice on what to do if they come into contact with rough sleepers.

## **PRIORITY 2: IMPROVING HEALTH, WELLBEING AND RESILIENCE**

People who live on the streets have a much shorter life expectancy than those in the general population; 43 years for women and 47 years for men. Rough sleepers also often have complex physical health needs as a result of prolonged substance misuse, alcohol dependency and exposure to severe weather.

In order to ensure we fully support rough sleepers and those in our single homeless supported housing pathway with their health, we need to better understand their health needs. To address this, we will launch a health needs audit in partnership with Haringey's Public Health Team. This will cover health issues such as drugs and alcohol use, dentistry, opticians, foot care and mental health.

Where a rough sleeper has a suspected need around their mental health or a lack of mental capacity, there is currently no local mechanism for the necessary assessments to be completed by practitioners on the streets or in a non-clinical setting such as a 'crisis café'. This can lead to people spending longer on the streets than might otherwise be the case. This is a gap that is beyond the Council's direct control to resolve, so we will work with our partners in health and social care and alongside our outreach teams to find a solution. Our aspiration is that our new community hub may offer an appropriate space for such assessments to take place.

As part of our Rough Sleeping Programme partnership with St Mungo's and Thames Reach, a Health Coordinator is working with St Ann's Hospital and North Middlesex Hospital. The Co-ordinator is working alongside Haringey's range of substance use services (including The Grove, Haringey Advisory Group on Alcohol (HAGA) and the Haringey Recovery Service), to identify and support those who are either rough sleeping, or at risk of becoming homeless, in order to secure accommodation options. We are committed to ensuring this partnership work is effective and continues, so that people with complex health needs including substance and alcohol use are prevented from becoming homeless and sleeping rough, and are not prevented from accessing accommodation. Early results show that successes are being made with this client group.

Feedback from our consultations has indicated that rough sleepers have not always been able to access the medical support they require while on the streets. This often results in crisis and costly ambulance call-outs, frequent attendance at Accident and Emergency departments and admissions to hospital. MHCLG research<sup>11</sup> shows that rough sleepers are four times more likely to use Accident and Emergency departments than the general population. The research also shows that cost estimates range from £16,000 a year for the average entrenched rough sleeper to £21,180 a year for the average client facing substance misuse, offending and homelessness problems.

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<sup>11</sup> <sup>11</sup> MHCLG <https://www.gov.uk/government/publications/addressing-complex-needs-improving-services-for-vulnerable-homeless-people>

There is now extensive evidence<sup>12,13</sup> to show that peer support offers an effective alternative to more ‘traditional’ methods of helping people experiencing homelessness and health inequalities arising from their complex needs. Haringey already has Bringing Unity Back into the Community (Bubic) an inspirational peer-led outreach service working with people who have substance use needs. In addition, several of our supported housing providers include peer-support programmes within their service offer. Working with our partners across the sector, we will develop more opportunities for people with lived experiences of homelessness and the poor health we associate with rough sleeping to engage with peer-led services, both as recipients of support and as providers, and build this into our commissioning plans.

At the heart of promoting resilience for rough sleepers is enabling them to access volunteering opportunities and education, training and employment (ETE). Rough sleepers often face barriers to employment which include low self-confidence, few or no qualifications, poor literacy and numeracy, lack of suitable clothing, up to date CVs, access to online job search sites and discrimination. Our single homeless pathway providers help people to access ETE through the support planning process and have developed links with local colleges and third-sector ETE organisations, offering support and advice in this area.

## **WE WILL**

- Complete a health needs audit with everyone in our single homeless pathway to inform service design, future commissioning and opportunities for closer joint working and to improve outcomes for rough sleepers with complex health needs.
- Develop a joint working protocol with partners in mental health services, social care and our outreach team to ensure we are meeting the mental health needs of rough sleepers.
- Ensure that all rough sleepers are supported to register with a GP and dentist and have early access to primary healthcare; enabling them to access medical help in a way that is person-centred, taking into account their unique circumstances.
- Gather data from the NHS on the numbers of rough sleeper frequent attenders, and the numbers of ambulance callouts and missed appointments by rough sleepers, to build a thorough picture of the health needs of rough sleepers.
- Ensure that all single homeless services respond to the psychological and emotional needs of rough sleepers by ensuring every Commissioned service meets the Psychologically Informed Environment (PIE) standard and that this is monitored consistently.
- Develop services in a peer-led way; ensuring those with lived experience are given opportunities to develop themselves, and to support others in a similar position. This will include developing an ‘Expert by Experience’ group to co-produce our work on service development and commissioning.

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<sup>12</sup> FEANTSA [http://www.feantsa.org/download/peer\\_support\\_policy\\_paper2951723577548485776.pdf](http://www.feantsa.org/download/peer_support_policy_paper2951723577548485776.pdf)

<sup>13</sup> Community Mental Health Journal <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5438434/>

- Maintain our commitment to working in partnership with Public Health to support and develop services in relation to the needs of rough sleepers – e.g. around smoking cessation, diet and exercise, screening and vaccinations
- Ensure that rough sleepers, whether on the streets or in accommodation through the HRS single homeless pathway, are able to access appropriate, person-centred support to address their substance use and alcohol needs.
- Ensure rough sleepers have support to acquire the correct identification, make benefit claims and open a bank account.
- Support the development of relationships between colleges, local businesses and third-sector ETE organisations and our rough sleeper support services, linking in with Haringey's wider employment support offer.
- Ensure all commissioned support services promote ETE and empower people using services to seek and maintain employment or other meaningful activity.

### **PRIORITY 3: TACKLING STREET ACTIVITY ASSOCIATED WITH ROUGH SLEEPING**

Street-based activity that is commonly associated with rough sleeping in Haringey includes begging, street drinking and substance use, anti-social behaviour and prostitution. This is, in part, committed by rough sleepers or former rough sleepers. However, there are many occasions where those involved are not actually homeless. A key objective under this priority is to better evidence and understand the extent to which problematic street activity is actually being caused by Haringey rough sleepers and how much is associated with other groups. This will enable us to better target our interventions to address this.

There is no doubt of the harm and misery that such behaviour can cause to individuals and communities. It is unacceptable for people to have to walk past used syringes and condoms, through human urine or faeces or feel intimidated by beggars as they leave their buildings or walk through their parks, especially when they are with their children. It is unacceptable for people to live in street encampments in 21<sup>st</sup> Century Britain and we must do all we can to stop such behaviour when it arises.

Individuals engaging in behaviour such as begging or prostitution are often being exploited and are extremely vulnerable. We must ensure that our partnership is trained to identify where people have been victims of crimes such as trafficking or exploitation and that those coming into contact with them know how to respond appropriately. It is important that authorities are able to go after the individuals behind such crimes, and we will do everything possible to support the Police, National Crime Agency and others involved in tackling these issues.

Over recent years, Haringey and other London boroughs have been blighted by 'cuckooing' where a vulnerable person's home is taken over by a drug dealer or other criminal who then uses it for illicit purposes. These vulnerable people are at risk of losing their homes as a result, either driven away by fear of the perpetrator or evicted due to Antisocial Behaviour that they are deemed to be responsible for. It is essential that we work with local landlords and our enforcement partners to ensure the welfare of vulnerable people displaced as a result of this behaviour is protected and they do not end up rough sleeping as a result.

It is very important that when we do take enforcement action against people who are rough sleeping or engaging in other street based activity, we do so in a way that avoids simply moving the problem around. This will involve working collaboratively with partners, including those in neighbouring boroughs, to coordinate our activity and ensure that an offer of support to address the problematic behaviour is made alongside the enforcement action.

Haringey's Community Safety and Enforcement Team, alongside the Metropolitan Police, British Transport Police and the Home Office, leads on addressing these behaviours and taking action where appropriate. The team works in partnership with Haringey Street Outreach Team, accommodation providers and estate teams, drug and alcohol services and other community groups. To date in Haringey, enforcement action has been sought against individuals, but only as a last resort, where

absolutely necessary. Haringey also works in partnership with our neighbouring boroughs, Hackney and Islington, through quarterly tri-borough meetings, to take targeted action on shared hot spots.

Alongside offers of support, we see enforcement action as a tool to encourage rough sleepers and others who may be caught up in damaging lifestyles, to take positive steps to change their lives. Although ideally we would not have to take such action, we are prepared to do so as a last resort and will always attempt to place positive behavioural conditions on individuals, such as engaging with support, as part of any process.

### **WE WILL:**

- Recruit Community Champions through our existing networks in the community and encourage people to report street-based antisocial behaviour, to provide early intelligence and support interventions to tackle this behaviour.
- Develop protocols with housing partners, the Police and Community Safety and Enforcement teams around specific enforcement actions such as 'crack house' or brothel closures, immigration enforcement activity or the six antisocial behaviour powers set out in the Antisocial Behaviour, Crime and Policing Act 2014. This will aim to ensure that these interventions are well coordinated and minimise the risk that a vulnerable person may be made homeless or disengage from existing support as a result.
- Hold regular case review meetings across the borough to discuss and plan actions relating to complex rough sleeping and problematic street activity.
- Develop a targeted educational programme on what the public and key partners can do when they see people sleeping rough or engaging in other harmful behaviours on the street.
- Develop a campaign around the dangers and risks associated with giving money to people begging, offering alternative ways to give
- Maintain our focus on 'hotspot' areas within the borough and ensure enforcement action is implemented where required.
- Ensure that data is collated on street population anti-social behaviour, brothel and 'crack house' premises closures and Home Office operations.
- Establish links with local businesses to help them manage anyone found rough sleeping or begging outside their premises.

## **5. Action planning and outcomes**

This strategy and the objectives within it will form the basis for our ongoing engagement with our partners and the community to 2022. The key elements of an action plan to deliver the strategy's objectives are set out below, along with some headline outcomes. Following engagement with our partners and the community, we will formulate a detailed Strategy Implementation Plan that sets out responsibilities, timeframes, lead organisations and the resources available to meet the objective identified.

The multiagency Homelessness Forum will oversee delivery of the Strategy Implementation Plan. This will report in to the council's Housing Priority Board. More formally, as a strategy for which the council is responsible, it will be the responsibility of the Council's democratic scrutiny arrangements to hold the council to account for delivery of its aims.

### **5.1 HOW WE WILL CHANGE WHAT WE DO**

#### **Providing strategic leadership and building collaborative partnerships**

We will:

- Refresh the Homelessness Forum to lead the partnership
- Produce a detailed outcomes framework for the whole partnership
- Develop new training, information and other resources to support delivery

And this will deliver:

- An increase in trust and transparency
- An improvement in the quality of advice delivered across the partnership
- Clarity of vision and understanding of what we are trying to achieve together

#### **Making prevention everyone's responsibility**

We will:

- Embed homelessness prevention into the work-plans of partners
- Ensure housing staff are able to recognise and sensitively address other factors that may contribute to a person's vulnerability, signposting them on to appropriate support as required
- Provide training for frontline services on the prevention agenda and holistic support offer
- Develop personal housing plans for people at risk of homelessness, including actions for housing and other partners and for the person at risk
- Promote co-location, joint working and integration with key partners including single assessments

And this will deliver:

- A reduction in the costs associated with failing to get things right first time
- An increase in levels of personal responsibility taken by those who are potentially homeless and a commitment to prevention among partner organisations
- Joined up services that behave 'like a system' and manage expectations
- A better understanding of available options and increases in take up

- Earlier interventions to increase the chances of successful prevention
- A more coherent offer of assistance to those who need help from multiple agencies, to increase effectiveness and efficiency
- Cross-cutting outcomes to reduce poverty and exclusion, such as improved safeguarding, health and wellbeing, employment

### **Commissioning more effectively to better meet local need**

We will:

- Undertake a strategic review of all commissioned homelessness prevention services, building on the Supported Housing Review and making recommendations for service development and redesign
- Plan for the delivery of supported housing post the funding changes in 2020
- Develop 5-year commissioning plan based on outcome of review

And this will deliver:

- Evidence-led commissioning of 'what works', services better able to meet local need
- Increased quality, value for money and effectiveness of services
- 'Leaner' systems with reduced bureaucracy improving access and effectiveness
- Well planned services, 'future proofed' to meet changing population and funding landscape

### **Delivering in and with our community**

We will:

- Ensure support is person-centred, holistic, flexible and builds on strengths
- Embed the Supported Housing Tenant Charter at heart of all commissioning and service design
- 'Expert by Experience' research to better understand customer journey, triggers and inform service design
- Develop peer mentoring and befriending as part of support offer
- Find new ways to include and recognise the contribution of non-funded community projects in our response to homelessness prevention

And this will deliver

- Services designed in a 'psychologically-informed' way that are more likely to be effective
- Individuals and families empowered to build their self-sufficiency and reduce their reliance on services
- Communities helped to build their resilience and ability to find their own solutions to problems
- Services that are better designed, easier to access and more effective
- The root causes of homelessness; poverty, disadvantage and multiple exclusion, are addressed alongside the need for accommodation
- Addressing intergenerational disadvantage and reducing
- Reductions in 'revolving door' homelessness



## 5.2 DELIVERING OUR KEY OBJECTIVES

The table below sets out an initial set of aims headlines that will be developed, with our key partners, into a detailed action plan to deliver this strategy. The action plan will be accompanied by a set of measurable targets, but an initial headline indicator is identified for each priority.

This table should be read alongside the similar table in the Homelessness strategy with its own actions, outcomes and three headline indicators to provide the full homelessness and rough sleeping action plan.

<b>Priority 1: Rapid intervention to offer a route off the street for all</b>	
Headline indicator: Number of people seen sleeping rough within the quarter	
Action	Outcome
<ul style="list-style-type: none"> <li>• Increase street outreach capacity.</li> <li>• Maintain commitment to No Second Night Out.</li> <li>• Monthly multi-agency Task and Targeting Meetings.</li> <li>• Asset mapping to better understand community resources and build relationships.</li> <li>• Establish 'Communities of Practice' enabling local organisations to develop their offer to rough sleepers.</li> <li>• Bi-annual training for agencies on rough sleeping issues</li> <li>• Wallet-sized information leaflet for community and agencies including blue light services, giving advice on what to do if they meet rough sleepers.</li> </ul>	<ul style="list-style-type: none"> <li>• People get help quicker, before their problems escalate</li> <li>• A reduction in the costs associated with not getting it right first time (ie 'failure demand')</li> <li>• Access to holistic help for chronically excluded single people is improved</li> <li>• Personalised support is more effective at resolving rough sleeping</li> <li>• Services are better designed, easier to access and more effective</li> <li>• Joined up services that behave 'like a system' and manage expectations</li> <li>• Better quality of advice delivered across the partnership</li> <li>• Clarity of vision and understanding of what we are trying to achieve together</li> </ul>

**Priority 2: Improving health, well-being and resilience**

Headline indicator: The number of service users who report an improvement in their health and wellbeing

Action	Outcome
<ul style="list-style-type: none"> <li>• Health needs audit with everyone in single homeless pathway</li> <li>• Joint working protocols</li> <li>• Support all rough sleepers to access primary healthcare</li> <li>• Gather data from the NHS on numbers of rough sleeper frequent attenders, ambulance callouts and missed appointments</li> <li>• Psychologically Informed Environment (PIE) standard in commissioned services.</li> <li>• Develop 'peer-support' offer</li> <li>• Public Health initiatives– e.g. around smoking cessation, diet, exercise, screening vaccinations</li> <li>• Appropriate, person-centred support to address substance use and alcohol needs.</li> <li>• Support rough sleepers to acquire identification, claim benefits &amp; open a bank account.</li> <li>• Develop ETE offer</li> </ul>	<ul style="list-style-type: none"> <li>• Better access to health care reduces risks to health of rough sleepers</li> <li>• Improved health and wellbeing of rough sleepers leads to increased resilience and ability to recover from rough sleeping</li> <li>• Evidence-led commissioning of 'what works', services better able to meet local need</li> <li>• Services designed in a 'psychologically-informed' way are more likely to be effective</li> <li>• Cross-cutting outcomes to reduce poverty and exclusion, such as improved safeguarding, health and wellbeing, employment</li> <li>• Clarity of vision and understanding of what we are trying to achieve together</li> <li>• People are empowered to build their self-sufficiency and reduce their reliance on services</li> <li>• Savings to partner agencies achieved through reducing 'failure demand' and</li> </ul>

**Priority 3: Tackling street activity associated with rough sleeping**

Headline indicator: The number of recorded incidents of problematic street activity

Action	Outcome
<ul style="list-style-type: none"><li>• Recruit Community Champions to report street-based ASB, provide intelligence &amp; support interventions</li><li>• Data collection &amp; protocols on enforcement action</li><li>• Case review meetings to discuss &amp; plan actions relating to complex rough sleeping and problematic street activity.</li><li>• Targeted educational programme on what people can do when they witness rough sleepers and other harmful behaviours on the street.</li><li>• 'Alternatives to begging' campaign</li><li>• Focus on 'hotspot' areas &amp; ensure enforcement action is taken</li><li>• Establish links with local businesses to help them manage anyone found rough sleeping or begging outside their premises.</li></ul>	<ul style="list-style-type: none"><li>• Well-coordinated interventions minimise the risk that a vulnerable person may be made homeless or disengage from existing support as a result of enforcement action</li><li>• A more coherent offer of assistance to those who need help from multiple agencies, to increase effectiveness and efficiency</li><li>• Earlier interventions to resolve the issue more quickly</li><li>• Interventions that address the root causes of the behaviour more likely to resolve it, rather than simply move the problem around</li><li>• Communities build their resilience and ability to find their own solutions to problems</li></ul>