

Lincolnshire Rough Sleeping Strategy

Lincolnshire Overview

Each area of Lincolnshire presents different homelessness challenges and none are immune from the complexities of homelessness and rough sleeping. Across Lincolnshire we have seen an increase in rough sleeping as a result of evictions, unplanned release and discharge from prison and hospital, difficulties in accessing affordable housing, changes to the Welfare Benefits system, and through barriers to accessing mainstream housing, health and support services including those non-UK nationals with no recourse to public funds. Historically there have been few specific services for those with the most complex needs.

There was a 358% increase in rough sleeping recorded in Lincolnshire between 2012 and 2018. The problem has been exacerbated in the past by the fact that there are 2 prisons and a number of hospitals where people have been discharged with no clear accommodation pathway. A 4 week study by a local hospital identified 55 A&E attendances from a total of 35 homeless people, all of whom were discharged back to the streets with no accommodation. The study acknowledged the prevalence of mental health issues alongside their physical health in these patients.

People who are rough sleeping can be found across Lincolnshire with the main concentrations being in Lincoln, Boston and Skegness.

Lincoln City is a particular hotspot for rough sleeping and attracts many individuals wanting to access services. A lot of people who find themselves sleeping rough in Lincolnshire gravitate towards Lincoln City because historically and currently there are a number of homeless services within close proximity including a direct access night shelter.

Although Lincoln City is a particular hotspot there are significant challenges across the county including a high number of people sleeping rough with no local connection moving to the coastal areas in the hope of seasonal work and a fresh

start; as well as Boston and South Holland because of the impact of inward migration which is often linked to the search for employment. The sparsity and widespread rurality of some parts of the county also present particular challenges in identifying and supporting those sleeping rough; leading to local innovative responses including a county wide 24hr Freephone number allowing the public and those sleeping rough to contact the outreach team directly.

A continued challenge to tackle rough sleeping in Lincolnshire

Rough sleeping is the most visible form of homelessness. It is also one of the most destructive forms of homelessness. The life expectancy of someone who has experienced rough sleeping is around 47 years compared with 77 within the general population.

Rough sleeping has risen substantially in recent years. Nationally rough sleeping rates have risen by 105% between 2012 and 2017, with a small reduction in 2018. However in 2018 the numbers were still 102% higher than the 2012 levels. Despite efforts of the homelessness services to reduce rough sleeping, there has been a year on year increase in rough sleeping levels across Lincolnshire (358% from 2012 to 2018, source: Autumn Rough Sleeper Counts).

The table below sets out the Annual Rough Sleeping Count figures for each District Council, Lincolnshire as a whole and the England total. These figures are a single night snapshot in accordance with the Official Government Annual Count.

Local Authority Area	2012	2013	2014	2015	2016	2017	2018
BBC	7	5	4	7	5	15	22
COLC	5	11	8	14	13	28	26

ELDC	3	2	1	6	7	9	18
NKDC	0	0	0	0	3	1	2
SHDC	1	2	6	3	4	5	6
SKDC	1	1	2	2	1	4	3
WLDC	0	0	1	0	1	3	1
Lincs Total	17	21	22	32	34	65	78
England Total	2309	2414	2744	3569	4134	4751	4677

The table below sets out the detailed Lincolnshire Rough Sleeping figures for 2017/18 (the latest full year of detailed information). These figures show all those sleeping rough who were found by the Street Outreach Team throughout the year.

Countywide Rough Sleeping 2017/18

<u>Gender</u>	
Male	333
Female	75
Transgender	2
TOTAL	410

<u>Age</u>	
Under 18	1
18 - 24	43
25 - 34	107
35 - 44	123
45 - 54	79
55 - 64	29
65+	2
Not Known	26

<u>Nationality</u>	
UK	345
Latvian	13
Lithuanian	13
Polish	18
Romanian	4
Other EEA	6
Non EEA	3
Unknown	8

<u>Local Connection</u>	
CoLC	92
ELDC	34
BBC	33
SHDC	22
SKDC	19
NKDC	16
WLDC	11
Outside Lincolnshire	54
Outside UK	58

No Local Connection	18
Not Known	53

The Recent Challenges Influencing Rough Sleeping Levels

Changes to the welfare entitlement of EEA nationals has been a contributing factor to increased levels of rough sleeping amongst this group across Lincolnshire and most particularly, those individuals assessed as ineligible for welfare benefits but considered by the Home Office to have permanent residency in the UK. These changes have had the impact of limiting the housing options available to those who experience a loss of employment whilst residing in the UK, resulting in some individuals who experience sporadic employment patterns which in turn leads to street homelessness. Such individuals can face being 'trapped' with no resources to return to their home country, no work and therefore no money and no home.

These challenges are likely to remain for a considerable time, and may well be exacerbated by Brexit, requiring authorities across Lincolnshire and their partners to consider how support is provided to those who have lost their employment and experience street homelessness. This includes support in re-accessing employment, in addition to support in returning to their country of origin.

Rough sleeping as a result of being vulnerable and/or having a chaotic lifestyle - significant numbers of people sleeping rough and those known as 'hostel hoppers' or 'sofa surfers' are vulnerable in the commonly understood sense of the word. This can include having a mental health problem, addiction to drugs and/or alcohol, being physically unwell or any combination of these. Many have had abusive childhoods or have had a sequence of major life traumas which have the consequence of an inability to form positive relationships and difficulty coping.

The fear of isolation and loneliness can act as a barrier for some to access and maintain settled accommodation where the 'street' represents a known quantity and familiar faces.

Historically there are examples where partner organisations involved in supporting people sleeping rough across Lincolnshire have expressed difficulties in accessing appropriate services for individuals. The Street Outreach Service, commissioned by Lincolnshire County Council and delivered by P3, frequently reported the difficulties in supporting those sleeping rough with mental health issues in accessing services to provide support and assistance with such issues. In addition to difficulties in accessing mental health services, many partners report difficulties in securing suitable accommodation for those sleeping rough, often as a result of their higher support needs, substance misuse and their tenancy history.

There is some evidence of individuals experiencing homelessness as a result of being discharged from hospital without suitable accommodation being available for them upon discharge.

More recently, a report commissioned by the Independent Anti-Slavery Commissioner considered the links between modern slavery and homelessness. The results were eye opening, showing that homeless people are at risk of being exploited when they are on the streets, but also that victims of modern slavery are at risk of becoming homeless if no long-term support is provided to them.

A recent national mental health benchmarking report reported that twice the national average of patients with no fixed abode are admitted to Lincolnshire's acute mental health ward, with LPFT being the ninth highest for 'no fixed abode' admissions, of sixty-eight providers.

Response to the Challenges so far

ACTion Lincs

Together with P3 and Lincolnshire County Council, the seven district councils were successful in securing funding from the (then) Department of Communities and Local Government's Homelessness Prevention Programme to expand our work with some of the most entrenched street homeless people across Lincolnshire. This funding presents an opportunity to build on strong foundations to try, in partnership, something new and more innovative than previous traditional service models. The service, ACTion Lincs, is based on the premise that traditional methods of engagement do not meet the needs of the most vulnerable and will incorporate the support and coordination of other key services including the Mental Health Trust, Addaction, Lincolnshire CCG's, the Police and Crime Commissioner, Health Watch and Credit Union to take an holistic approach to the needs of those people who are sleeping rough.

This is a £1.3m fund, one of just seven social impact bond projects across England and the first complex needs project in Lincolnshire. The project launched in September 2017 and supports up to 140 of the most entrenched and vulnerable homeless individuals intensively for a three and a half year period. The model adopts a Housing First approach, and is delivered through genuine collaboration and partnership. ACTion Lincs provides life changing support to the most entrenched people sleeping rough across the County.

The project is delivered by a team of specialists and initially included a seconded drug and alcohol recovery worker and a seconded mental health practitioner. Crucially, once someone is accepted onto the program, unlike traditional services, they will remain part of the program and support will be provided in any setting whether that be the street, hospital, prison or home. By offering support over a prolonged period of time, and by being flexible to meet the needs of the people that we are working with, we believe that it will give them the best opportunity of bringing about lasting change.

Partnership Working and a Countywide Approach to Tackling Homelessness

Lincolnshire has a strong history of partnership working and in recent years we have worked to develop services to help people who are sleeping rough.

- We developed and supported the implementation of a rough sleeping outreach service operating across Lincolnshire and Rutland, redirecting the lives of 1,395 individuals. Recognising the important contribution that this service made to vulnerable people who are rough sleeping, an extension for the funding for this service was secured for a minimum of three years through discussions with Public Health
- Lincolnshire received national recognition from Homeless Link for best practice when tackling rough sleeping across multiple local authority areas
- Our partnership working had a significant impact on reducing rough sleeping across Lincolnshire by 47% in the first year of the outreach service
- We encouraged members of the public to play an active role by reporting and referring people sleeping rough through implementation of a dedicated 0808 rough sleeping hotline and dedicated email address.
- 279 EU Nationals were connected back to their local communities and support networks
- Well established countywide strategic partnerships - Lincolnshire Homelessness Strategic Partnership and at a senior level, the District Housing Network (DHN), consisting of statutory and voluntary sector partners with a shared approach to preventing homelessness.
- Countywide Homelessness Strategy (since 2002) with rough sleeping as a main priority since 2012.
- Development of a Countywide Youth Homelessness Gateway for 16/17 year olds
- Lincolnshire County Council has maintained investment in service provision for the most vulnerable, whilst many parts of the country have redirected unring-fenced grants
- ACTion Lincs complements the Housing Related Support and rough sleeping model. The 'housing first' model creates additional accommodation and support for the most vulnerable with high needs. This gives additional time and

resource to work with people to stabilise their lives permanently rather than just the focus to get them off the streets.

Rough Sleeping Funding – Lincoln, Boston, East Lindsey and South Kesteven

The Ministry of Housing, Communities and Local Government (MHCLG) launched several bid rounds in 2018 and 2019, the Rough Sleeping Initiative and the Rapid Rehousing Programme. Within Lincolnshire, the City of Lincoln was successful in the first rounds of both programmes, securing funding of £1.4 million to March 2020. Boston Borough Council, East Lindsey and South Kesteven District Councils were successful in the second round of the Rough Sleeping Initiative and Rapid Rehousing Programme funding, securing £305,000, £142,813 and £35,000 respectively, to the end of March 2020.

Within the City, the funding is being utilised to provide a Somewhere Safe to Stay Hub with associated staffing, 15 units of accommodation for those with complex needs, extra Street Outreach, a Mental Health Worker, additional substance misuse work, extended opening hours at the Night Shelter/Day Centre, and two support workers for people who have a history of rough sleeping and are now housed, but whose tenancies are at risk due to the criminal activity of others.

In Boston, the funding has enabled a wider rough sleeping project to be established. This includes a project coordinator together with two dedicated street outreach workers alongside a tenancy sustainment officer, mental health navigator and addiction navigator. The accommodation concern has led to an innovative approach with reconfiguration of previous private rental sector HMOs to better support people away from the streets.

In East Lindsey, the funding enabled the recruitment of a dedicated Coordinator, an In-reach and Sustainment Officer as well as funding P3 to provide an additional Outreach worker. This has enabled the Council to create partnerships, increase outreach work, provide floating support to prevent people ending up on the streets

and gain a better understanding of the rough sleeping issues in its district. A service action plan is now in place as well as action plans for each person sleeping rough.

During June, July and August the service became aware of 140 people sleeping rough which was significantly higher than expected but the average number on the streets at any one time is usually between about 25 and 35. This clearly shows the numbers that are migrating in and out of the district each week which makes providing services more difficult. Approximately two thirds don't have a local connection to the district meaning reconnection is a key priority for the service before the person who is rough sleeping becomes settled.

Within South Kesteven the funding has provided a dedicated officer (in partnership with P3) to deliver intensive tenancy support for people who are, have a history or are a very high risk of rough sleeping. The aim is to work with individuals for up to 6 months to find, secure and maintain a tenancy. This can include looking at behaviour, how to claim housing benefit, budgeting and so on.

Controlling Migration Fund

From a countywide basis, funding of £245k has been secured to provide Lincolnshire Support & Reconnection, a 15 month project to specifically support those non-UK nationals who are rough sleeping. The project offers support to establish employment opportunities as well as offering reconnection (with temporary accommodation, travel document sourcing and travel, accompanied where necessary) where this is the preferable option. Further funding was also included to brief and communicate with appropriate workforces across the county.

Mental Health Funding

The City of Lincoln Council, Street Outreach Team and Health colleagues identified that the provision of timely access to mental health and/or substance misuse services and the ability to prescribe, particularly for people with a dual diagnosis is a particular issue in the city. This cohort of people is often passed between mental health and drug and alcohol services without their needs being fully addressed.

An allocation of funding from Public Health England allowed a proposal to be prepared to begin to address these issues. We will recruit a non-medical prescriber with experience of both mental health and substance misuse, who can bridge the gap between services for this cohort. The post will work flexibly to meet the needs of the service, supporting the Street Outreach Teams when they discover a suitable client who is sleeping rough.

A number of primary care sessions will also be provided, ideally by a GP who is section 12-approved, so that a Mental Health Act assessment can be carried out more easily. It is anticipated that the primary care input could also include dentistry, podiatry, ophthalmology, sexual health, etc., to help reduce the complexity of need and the impact of this on mental health and substance use. This resource could also be used to enhance the capacity for prescribing.

We will also employ a peer support co-ordinator, who will co-ordinate a group of volunteer peer support workers with lived experience of mental health, substance abuse and/or rough sleeping. These peer support workers will come from a range of third sector partners and will provide support, for example through befriending and accompanying to appointments to improve rough sleepers' engagement with a range of services. However, it is anticipated that services will go to the service user in the community, wherever possible, rather than the service user having to 'attend' the service.

What do we still need to do?

Tackling rough sleeping is accepted as one of the key priorities within the county in our work in tackling homelessness. There is a need to further build on relationships with key statutory and voluntary sector partners to address concerns and to tackle the barriers which prevent those people who sleep rough from moving away from the streets. It is recognised that tackling rough sleeping is not simply a matter of increasing housing supply. To tackle the broader causes and symptoms of rough sleeping in Lincolnshire, there is a need for coordinated action; bringing together housing, health, criminal justice and employment commissioners and partners. At a

time of increasing rough sleeping in Lincolnshire, there is a need to ensure that effective collaborative working is in place across each of these areas and that all partners and commissioners understand their roles and genuinely contribute to preventing rough sleeping.

At a national level the Homelessness Reduction Act includes a duty to cooperate for various public bodies to comply with efforts to prevent and relieve homelessness, particularly for vulnerable groups. We have made significant progress with partners, those with a statutory duty and those without, regarding the Duty to Refer, however there is further work to do to ensure no person is released/discharged/remains on the street despite their involvement with various agencies.

We will seek to engage with relevant strategic partners and commissioners, seeking to invite adoption of this Rough Sleeping chapter of the county homelessness strategy and actions therein.

Housing related support plays a vital role in preventing and relieving homelessness, particularly for vulnerable groups who are unable to access or sustain alternative housing options. It is important that the limited resources available are able to meet the needs of those customers in need, and that the services form part of a pathway to housing and independence. Lincolnshire County Council has provided an ongoing commitment to the provision of housing related support but this will be targeted to fewer service users with more complex needs resulting from mental health and/or substance misuse. This is likely to have serious implications for homelessness in general and in particular rough sleeping as it will leave a high number of people who will no longer be eligible to receive support. There are also implications for the provision of suitable accommodation for those who may be unable to sustain a tenancy without some level of support.

Current barriers and challenges to tackling entrenched rough sleeping in Lincolnshire;

Housing related support services – Current supported accommodation services rely on individuals being able to fit into a structured model of support. The model is transitional in nature, providing 'generic', time limited support. Traditionally, this client group have been unable to progress through this into their own accommodation. Clients are considered too 'high risk' and are declined/evicted from services due to them not being able to manage risk because of communal facilities and high support needs.

The Housing Related Support Services commissioned by Public Health are in the process of being retendered with a proposed contract commencement date of July 2020. The overall contract value will be reduced from £2.95 million to £2 million which will mean a lower number of both accommodation based and floating support units. The units will only be offered to those who are homeless or threatened with homelessness, with mental health and/or substance misuse issues and relatively high identified needs on the Chaos Index.

Street Outreach Team – Contracted to deliver brief interventions supporting people off the streets into accommodation. Restrictions include lack of specialist roles and limited capacity to deliver intensive, longer term support.

This service is currently commissioned by Public Health and it has been announced that funding for the service will not be available beyond the end of the current contract in March 2021. Partners across the county will need to review the value of the service and identify alternative funding if it is decided it continues to be needed.

Mental health services exist, but are inflexible to the needs of entrenched rough sleepers: Entry into services, unless detained under the Mental Health Act, is via GP referral or A&E presentation. Currently there is no countywide service that assertively engages in a community setting unless there is a statutory duty for aftercare. Individuals are reaching crisis point before interventions are offered. Sporadic client engagement leads to discharge when support is needed most.

Substance use services exist, but current support is offered by a single provider at limited locations/times

Inflexibility from GPs - Appointments are not offered in advance. Patients have to call at 8am on the day. Appointments are offered on a first come first serve basis.

No formal hospital/prison discharge pathways – Prior to the introduction of the Homelessness Reduction Act, individuals were revolving between homelessness, prison and hospital. This is now an improving situation but still requires further progress.

Adult social care – In general there are no timeframes for social care assessments to be carried out where the primary need is physical health. Progress has been made in respect of ACTion Lincs clients but this needs to be expanded across a wider range of vulnerable groups.

Enforcement – a mixed approach to enforcement is taken across the county. Appropriate enforcement may be required where rough sleepers continually refuse to engage with services, however this must be well managed and co-ordinated.

Conclusions

Lincolnshire has taken advantage of a number of funding opportunities over recent years to increase Rough Sleeping services. However, the number of people sleeping rough has continued to increase year on year and this trend must end.

Halving the number of people sleeping rough by 2022 will be very difficult to achieve unless there is continued funding and all organisations across Lincolnshire work together to ensure the core reasons for someone sleeping rough are tackled and this can only be achieved through partnerships.

County Priorities:

1. Ensure a partnership-wide approach which focuses on the prevention of homelessness and rough sleeping.
2. Undertake a review of the success and effectiveness of the current Street Outreach Service, then agree and implement an appropriate response across the county.
3. Undertake a review of the coverage and effectiveness of the existing rough sleeping services and provision across the county, identifying gaps and appropriate responses where required.
4. Monitor the impact of the recommissioned Housing Related Support Services.
5. Ensure a clear understanding of the health implications of sleeping rough and work across the partnership to deliver a robust response to address them.

Boston Borough Council

Current rough sleeper count from October 2018 is 22 (2017 = 15, 2016 = 5) with comment from the local police that they believe that it is closer to 40 given its intelligence (includes those who NFA/sofa surf and rough sleep on/off regularly).

The nationality split is broadly 60%/40% EU/UK national with a majority of the EU nationals not having recourse to public funds. Many of the rough sleepers are well known to the relevant authorities and continue their history of not taking advantage of opportunities (where these are available via public funds) from existing support/commissioned services.

P3 supplies the county commissioned street outreach and floating support service with our local resource shared with South Holland. I understand that demand outstrips resource and it is difficult for P3 to offer much support to NRPF cases. The Council supports P3 on reconnection.

Centrepoint Outreach, a locally based charity, offers day centre facilities (Monday to Friday and Saturday morning) with showering/clothes washing and drying available (only one shower and one washer/dryer). The centre is seeing up to 50 people per day (based on its definition of “homeless”, i.e. NFA) which has increased over the past 2 years from around 20 per day. Capacity is now a real concern and discussions are being undertaken across mainly faith-based organisations (Churches Together In Boston: CTiB) to agree a joint way forward.

SWEP provision has been via our links with CTiB and is within church premises with a maximum capacity of 20.

Food provision is not considered to be an issue locally. CTiB members have numerous free food offers and soup kitchens available as well as a foodbank.

We understand that the perception of many is that the “authorities” are doing nothing to support rough sleepers/homeless. One of the problems is that there is little infrastructure available locally to offer either overnight shelter or longer term

accommodation. This is allied to little resource to provide the in-depth and lengthy support (up to 3+years) needed to support entrenched rough sleepers into longer term tenancies and employment. Where supporting rough sleepers has previously been tried via normal homeless interventions, many of the rough sleepers have resorted back to their previous activity, leaving substantial refurbishment costs with the local authority or re-entering the support process again at the initial point.

Boston led the county bid for additional CMF funding to support non-UK nationals who are rough sleeping as well as a sole application for RSI & RRP funding for the Boston area. All of these applications have been awarded so the position is now:

- County: Lincolnshire Support & Reconnection project commenced on 1 September 2019 for a 15 month period:
 - 2 FTE support workers (P3)
 - 0.5 FTE manager (P3)
 - B&B accommodation
 - Document provision
 - Supported travel
 - Employment support (where applicable)
- Boston: Boston's rough sleeping project is now in place and consists of:
 - Rough Sleeping Project Coordinator (Centrepoint Outreach)
 - 2 FTE street outreach (P3)
 - Up to 9 accommodation places
 - Tenancy Sustainment Officer (Boston Borough Council)
 - 2 seconded specialist navigators (substance misuse and mental health)
 - 0.5 FTE manager (P3)
 - Personal budgets for up to 30 clients @ £500/client

Priorities for Action

1. Review and refine new and existing interventions to ensure ongoing effectiveness
2. Develop additional appropriate interventions, ensuring effective strategic links

3. Map new and existing support services in the borough, identifying gaps and developing appropriate responses
4. Develop innovative accommodation provision in the borough and develop appropriate responses to ensure a robust housing pathway for service users
5. Continue to strengthen new and existing collaborative working and develop new partnerships where appropriate

City of Lincoln Council

The City of Lincoln has had historically fairly low levels of rough sleeping, returning annual counts of around 5-10 people sleeping rough. Figures rose to the mid-teens in 2015 and 2016, then in 2017 the city experienced a significant increase to 28 rough sleepers, followed by a count 26 in 2018.

The reasons for this rise are many and complex and link to changes in welfare benefits and housing benefit eligibility, along with changes (predominantly reductions) to the provision of health services and supported housing.

In addition to this Lincoln has, for many years, been the main source of services within Lincolnshire and has acted as a magnet for many people from out of the area. The city also has a large hospital and a prison, which both discharge/release people into the area without suitable accommodation. The city is also an area which attracts significant wealth due to its vibrant tourism and student economies, which acts as a draw for those who rely on begging for their income.

Although the number of people rough sleeping within the city does not place the area amongst the highest in the country, the significant relative rise highlighted the need to find innovative solutions to helping people to move into accommodation. As a result the City Council submitted bids to both the Rough Sleeping Initiative and Rapid Rehousing Programme, run by MHCLG, and was successful in achieving funding totally £1.4 million from 1st October 2018 – 31st March 2020. In recognition of the extensive and successful partnership working across the city, the CCG has been awarded an additional £1.5 million over the next five years to improve access to mental health services for people who are, or are at risk of, sleeping rough.

In addition to very successful partnership working with other statutory agencies, providers and the voluntary sector, the Council has used the funding to implement a number of interventions:

- **Rough Sleeping Team** - A Rough Sleeping Co-ordinator plus 3 Rough Sleeping Officers (2 funded by CoLC)
- **Somewhere Safe to Stay Hub** - A sit up service for up to 8 people with a target average stay of 72 hours – to assess and begin to address housing and associated needs. Two Navigators (Support Planners) and two Support Workers who will also track service users into temporary accommodation and beyond where appropriate.
- **The Cornerhouse** - 15 units of supported accommodation for those with complex needs
- **Mental Health Nurse** - Based with the Rough Sleeping Team at City Hall, able to undertake initial assessments, begin work with service user and refer into appropriate services
- **Substance Misuse Services** - Provided by Addaction. A drop-in at the Baptist Church twice a week at Breakfast Club, twice weekly assessment appointments, a fast track service whereby clients will be comprehensively assessed within 48 hours (target) and then on the pathway to prescribing or other appropriate structured treatment pathways.
- **YMCA Day Centre** - Extended opening hours in the morning and evenings at the Nomad Night Shelter.
- **Street Outreach Worker**- An additional SOW to work within the P3 Street Outreach Team.
- **Criminal Activity Support Workers** - Two additional Support Workers based with P3 to work with people formerly rough sleeping but now housed, whose tenancies are at risk from criminal activity

- **Temporary Accommodation and Personalised Budgets** - Funding for CoLC to provide appropriate temporary accommodation and a small fund for 'incidentals' to help anyone who is sleeping rough.

Priorities for Action

1. Review and refine existing interventions to ensure ongoing effectiveness
2. Develop additional appropriate interventions, ensuring effective strategic links
3. Map existing support services in the city, identifying gaps and developing appropriate responses
4. Map existing accommodation provision in the city and develop appropriate responses to ensure a robust housing pathway for service users
5. Continue to strengthen existing collaborative working and develop new partnerships where appropriate

East Lindsey District Council

East Lindsey District Council (ELDC) is geographically one of the largest shire district councils in the country, covering some 700 square miles with around 140,000 residents. The district covers virtually the entire Lincolnshire coastline including key seaside resorts of Skegness, Sutton on Sea and Mablethorpe. East Lindsey's coastal population swells in the summer months and the seasonal influx also brings with it, a seasonal increase in rough sleeping. Overall, East Lindsey is one of the 20% most deprived authorities in England.

East Lindsey's districts varied geography includes coastal and seaside areas, smaller market towns and very rural areas including the Lincolnshire Wolds; designated as an Area of Outstanding Natural Beauty (AONB). Rough sleeping across the East Lindsey geography presents unique challenges and a more focussed and targeted effort to reduce rough sleeping is a key priority for the council; not least as part of its corporate commitment to support the most vulnerable. Most rough sleepers are found on the coastal strip but some will be in the more rural locations where they can be hidden which makes it hard to find them.

The East Lindsey rough sleeper cohort comprises predominantly UK nationals, however data collated by the countywide commissioned street outreach service (P3) showed that of the 84 rough sleepers who received outreach support during 2017/18, approximately 75% did not have a local connection to the district, and often had no local connection to Lincolnshire. The majority of rough sleepers in East Lindsey are single males who often have a drug/alcohol addiction. In addition, prevalent issues across this cohort include mental health issues, learning disabilities, criminal convictions or a combination of these issues. A reoccurring theme within the cohort is eviction from supported accommodation, often due to Anti-Social Behaviour.

The seasonal increase in rough sleeping attributed directly to the attraction of the coast in East Lindsey is a challenge not seen elsewhere in Lincolnshire. Reconnection of rough sleepers has been a challenge for a number of reasons including capacity for

targeted support and a local housing pathway that is currently not as joined up as it could be however the council is working towards over-coming these issues.

Priorities for Action

1. Shared vision and responsibilities
 - Address the destructive culture of Rough Sleeping
 - Establish multi-agency Countywide Protocol, Pathway, Staffing and Funding
2. Overcome the barriers to ending rough sleeping
3. Enable an appropriate range of accommodation
 - Housing First approach, SWEP, No second Night & Move on options
 - Enable non-complex and complex needs rough sleepers to be accommodated in separately
 - Residential Rehab
4. Provide appropriate support
 - Flexible timescales, Street Outreach, Accommodation based Support, Mental Health and Drug and Alcohol link workers, Team around the Adult.
5. Halve rough sleeping by 2022

North Kesteven District Council

Due to the predominantly rural nature within our District, and low numbers of Rough Sleepers, the main challenges faced are access to appropriate services. Direct access accommodation is not available within the area & resources situated in neighbouring areas including Lincoln City, Grantham & Skegness are main options utilised to secure appropriate provision. Due to geographical area, many of our residents have local connections to other neighbouring Authorities or dual local connection to more than one.

We have strong links to local Churches, Support Services, Job Centre, Town Council, Community larder & others who work with us to enable provision of support & services eg access to washing facilities, hot drinks & snacks etc, for those in emergency need.

Within the District we have active Support services including P3, & Nacro who have a number of supported bed spaces available but such being subject to waiting lists, specific eligibility criteria & risk assessment which can exclude some individuals. Provision of Supported accommodation in Sleaford is a distance for many and due to the location away from Central Services, it does not meet the needs of all individuals for the client group it covers.

Supported housing is not equipped to deal with persons with serious complex needs i.e., mental health, severe drug /alcohol addiction.

Floating support is also not suitable for such client groups.

These factors mean that those refused accommodation due to existing needs or risks are left with very limited alternative housing options & so gravitate to other areas within the District where there are additional options including hostel & nightshelter provision, this is reflected through the low rough sleeper figures for NK.

Relationships with partners & all relevant support services require continued development to ensure appropriate services & pathways are in place with effective links to required services.

It is important that all relevant agencies across the District have an awareness & understanding of demands, resources, needs & requirements to enable effective inter-agency working to support positive outcomes for these client groups.

Housing Options Teams rely upon the cooperation & support of providers to enable access to services & bed spaces for those in crisis & emergency need.

Priorities for Action

1. Ensure continued provision of Street Outreach Services with appropriate pathways/links to relevant, required services & support for those with both complex & non-complex needs
2. Identify gaps in appropriate accommodation options and look to develop to maximise availability
3. Continue effective partnership working to ensure identification & appropriate action in terms of gaps in service provision relating to rough sleepers
4. Build & further relationships with key statutory and voluntary sector partners to address concerns and to tackle the barriers which prevent those people who sleep rough from moving away from the streets.

5. Ensure provision of appropriate support – including Street outreach, accommodation based support. Mental health, drug & alcohol misuse, debt & benefits

South Holland District Council

District Overview Needed

Priorities for Action

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South Kesteven District Council

District Overview Needed

Priorities for Action

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- 5.

West Lindsey District Council

Rough Sleeping is an issue West Lindsey District Council is working hard to prevent with our partner Lincolnshire authorities. Whilst we recognise this is not our most prevalent issue of homelessness within the district we are working hard to develop appropriate and permanent options for persons who may find themselves at risk of rough sleeping. Due to the lower rents within certain areas of Gainsborough and Market Rasen it would be common for those people at risk of rough sleeping to find accommodation with no funds needed for move in. The council is also working very hard to identify persons at risk of rough sleeping early to prevent this happening. Affordable accommodation, better links with landlords and support agencies have meant we have been able to prevent rough sleeping and also have been able to relieve it very quickly when it is presented to us. Working jointly with our enforcement team means we can continue to proactively target rogue landlords and raise property standards within the district but assess the needs of residents at the same time.

The rurality of some areas of West Lindsey such as Market Rasen and Caistor means that availability and access to services such as Probation, Addaction and DWP cause people to travel to Lincoln and Grimsby. These services coupled with more rough sleeper outreach services in these areas would then mean that persons from West Lindsey would “settle” and present as rough sleepers to the appropriate council. In acknowledging this, it is important we support these authorities in sourcing appropriate accommodation within the district. The “Duty to Refer” should ensure we are now informed of such people.

Priorities for Action

1. To work with our partner agencies to identify and report those at risk of eviction who could become rough sleepers.
2. To proactively engage with rough sleepers within our communities and ensure rough sleepers are treated as a priority for advice and assistance
3. To ensure continuous training for appropriate West Lindsey staff on how to identify rough sleeping and ensure they know where to report.

4. To actively work with health providers and prisons to establish protocols to refer persons
5. To actively review our practices to ensure we have appropriate accommodation options for those who have been rough sleeping