

Councillor Peter Black  
Convener  
Homelessness Scrutiny Working Group

**BY E MAIL**

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*Our Ref:* AL/CM  
*Your Ref:*  
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Dear Councillor Black

## **HOMELESSNESS SCRUTINY WORKING GROUP**

Thank you for your letter dated the 5th July 2018, following the meeting with the Homelessness Scrutiny Working Group held on 12<sup>th</sup> June 2018. The following response seeks to address the issues raised in your letter, provide the working group with assurances that Swansea is leading the way in preventing homelessness and sets out how the Council and its partners intend on tackling homelessness over the next few years.

The Working Group I know are fully aware that homelessness can be a challenging environment and that external factors, such as welfare reform, can have a direct impact on the levels of homelessness. In addition, it is important to note that those faced with homelessness can often suffer with mental health or substance misuse issues and therefore we need to take a multi-agency approach if we are going to ensure that the needs of the most vulnerable in the City are met.

For ease of reference I have addressed each of the comments in the order they have been raised in your letter.

### **Accommodation**

***The working group believe that it is important that the lack of specialist accommodation [for people with complex needs] is addressed as part of the work on the strategy and would like more information on what is planned.***

Swansea already provides a wide variety of supported accommodation through its Supported Housing Programme. However it is recognised that for the more entrenched rough sleepers a more innovative approach needs to be taken. The review of homelessness supports the need for a *Housing First Project* to be introduced in Swansea and officers from Housing and Supporting People are currently working to develop this project. *Housing First* in Swansea should be implemented towards the end of 2018/19.

***We heard the council is looking at reducing the number of evictions and better recording them so they can look at the causes. We would be grateful for more detail as to what this involves and the timescale for such measures to be put in place.***

As you are aware officers are currently developing the Homelessness Strategy and within the review of homelessness it has been identified that we need to work with all our partners in reducing the number of evictions from all types of tenures. The draft Strategy has included this in its action plan and through the recruitment of a Gateway Officer in 18/19 we aim to improve the way we collate and monitor this information.

***In your letter you have identified that there are gaps in the provision of supported accommodation, particularly for women, under 21's and for those with no recourse to public funds. The Working Group heard that the Homelessness Strategy will try to deal with all gaps in provision with this approach. We would like more information on specific proposals for these groups.***

As stated there is a wide variety of supported housing projects that meet the needs of the most vulnerable households. These include a number of Direct Access Hostels, a Cross Borders Women's Project, as well as a number of homeless projects for young persons under the age of 21 and therefore there is no clear evidence that there is a gap in this type of hostel accommodation.

We do recognise that couples can sometimes be limited in accessing certain types of accommodation. The *Housing First Project* will be able to address this issue and, in addition, the Council is currently working with the Voluntary Sector to extend the number of emergency bed spaces which will be suitable for couples who are sleeping rough.

***On the issue of 'no recourse to public funds' we were told that this is a real challenge for housing as these people fall outside the criteria for eligibility to council housing. The voluntary sector will be involved to assist with housing people from outside the UK who don't meet the criteria for council housing. This could be a bigger problem when we leave the EU. We would like some reassurance that the housing strategy will seek to address this problem.***

Despite the restrictions that the Council faces to assist households with no recourse to public funds, the Homelessness Strategy will seek to ensure that there is a clear understanding within the sector of the resources available to assist non-eligible households, which will be predominately from the third sector or Social Services for households with children. For example, it is intended to develop a training plan for housing and support providers and "no recourse to public funds" has been identified as one of the topics that should be covered. The Council will seek to work in partnership with key third sector organisations on this matters such as the Welsh Refugee Council.

In addition, the draft Strategy has also identified a need to prepare for the implications of the Immigration Act 2014 and Britain's exit from the EU, in order to ensure that appropriate advice is in place for housing and support providers.

***In your letter you state that Caerlas have concerns about the long waiting lists for access to move-on panel. The witnesses at the meeting did not believe that this was a problem. Nevertheless, as the perception exists we would like a more***

***detailed assurance that Caerlas' concerns have been heard and that a dialogue has been opened up with them to deal with any issues they have identified.***

I am pleased to be able to confirm that the Chair of the Move-On panel has spoken directly with Caerlas on this matter and no major issues have been identified. However, an action within the Homelessness Strategy will be to review the Move-On process as a whole so we can ensure that waiting lists are kept to a minimum.

***The Working Group was informed that Housing Options is our 'Front Door'. A gap in provision has been identified on weekends and working with Wallich has helped to close this gap. We heard the Council is looking at providing information to businesses so they know how to direct people to help. The challenging part is getting people to engage. We would like more information on what is planned and how this is being addressed in the draft housing strategy.***

The Council has been working closely with the Rough Sleeper Intervention Team to ensure that the needs of rough sleepers and those vulnerably housed are met. Recently we have extended this service to include a weekend provision. In addition to this the Homelessness Strategy will have a clear objective of ensuring service users are at the centre of service delivery. As part of this objective a Homelessness Charter will be co-produced, and this will focus on trying to ensure that we have engagement from service users, the general public, businesses and the community as a whole.

***In your letter you state that there is concern about support for people with learning difficulties who have moved into housing. We were informed that if people are assessed to have a social care need then social services could potentially support them. It is looked at on an individual basis. We would like more information as to how this group fit into the housing first project and what further support will be available for them once this is underway.***

*Housing First* is designed to assist those service users who are long term entrenched rough sleepers and/or find it difficult to reside in a hostel type environment. This may include some service users who have a social care need and in these circumstances bespoke, intensive support will be available for as long as is required. However, it is important to remember that for many with a social care need they may only require generic tenancy support and be able to live independently, without the need to be referred through the *Housing First Project*.

***In your letter you state that you would like to have more information on the tenancy support service and how support needs are identified and monitored in terms of outcomes.***

The Council's Tenancy Support Unit (TSU) offers housing related support to all residents of Swansea. The TSU supports households in all forms of accommodation, including council tenants, housing association tenants, private rented tenants as well as owner occupiers. There is no upper or lower age limit on the housing support. The majority of referrals are made by the individual, however professionals from many different sectors and organisations will also seek help on behalf of the household.

The TSU in-house team provides support to approximately 150 households at any one time and a further 600 are supported through more specialist commissioned services with partner agencies. The initial assessment of support needs for every case is completed at the TSU offices.

The referrals, assessments and outcomes are collated by the TSU for the cases supported in-house team as well as by the partner TSU agencies. The outcomes and data are returned to the Supporting People Team to be included in the annual Homelessness Review which feeds into the annual spending priorities for the Supporting People Plan.

## **Social Service and safeguarding issues**

**In your letter you comment that the thresholds for homeless and vulnerable adults being accepted for social services involvement are too high. Agencies work with some of the most complex and challenging individuals and yet it is almost impossible to get additional specialist support for them especially if they have not been in the system before. *Social Services stated that the mental health team is a secondary care service so there will be a gap in provision and confirmed that there is difficulty in accessing support for lower level need. We would like details on actions being put in place through the draft housing strategy and housing first, by social services and ABMU to ensure that this group do not miss out on much needed support.***

Officers from our Adult Social Services team have confirmed that if someone feels they may have care and support need or know someone they feel may have care and support needs they can refer to the Common Access Point for Health and Social Care.

<https://www.swansea.gov.uk/commonaccesspoint>

When a person is assessed as having care and support needs it will be identified whether each need can be met through signposting to preventative services, or met in another way, OR whether a Care and Support Plan is required. If the identified need can be met through signposting the need will NOT be eligible. If the identified need can only be met through a Care and Support Plan the identified need will be eligible.

Where this relates to needs around Mental Health, the General Practitioner (GP) within primary health care services is the initial assessment and access point to specialist mental health services. Where the GP considers the needs are such that an assessment by the Community Mental Health Team (CMHT) is required, within secondary mental health services, a referral will be made. The CMHT is an integrated health and Social care assessment and support service. Further information can be found here

<https://www.swansea.gov.uk/article/3941/Mental-Health>

Adult Social Services does not currently provide any services to those who are not care managed by the CMHT. These are provided or commissioned by ABMU Primary Health Services. However the Council does commission some specialist mental health services within Tier 1 of the Adult Services Model from the third sector e.g. specialist mental health housing related support services within the Tenancy Support Unit, Connect Day service and carers respite service, and counselling service for young people. Individuals can self-refer to these services and do not require a care manager.

These services along with Tier 2 and 3 commissioned services are part of the Adult Service Commissioning review.

The ABMU fund SCVS to support and promote the range of Mental Health Services in Swansea. Information on this can be found here; <https://www.scvs.org.uk/mhsupport>

The review of homelessness undertaken in drafting the new Homelessness Strategy has identified Mental Health as a significant care & support need amongst homeless people both as a cause and as a result of.

An action will be to improve the engagement between agencies working with homeless people and the Mental Health Services provided and commissioned in primary care and secondary mental health services.

**In your letter you comment that dual diagnosis remains an issue and that people with mental health needs are unable to access the Community Mental Health Team support because of drug dependency issues. *We heard that Social Services do provide provision but they agree that it may not be enough support. However ABMU confirmed there is going to be a Dual Diagnosis Strategy developed to map need across dual diagnosis as dealing with dual diagnosis is something that has not been done well in the past. We would like more detail on the implementation of this strategy including resources, timescale and proposed support.***

The Council does not provide or commission specialist services to individuals around their Alcohol or Drug dependency as these are commissioned by the Area Planning Board for substance misuse. However, we are required to provide care and support to individuals whom may have these dependencies which can be very complex and challenging. This is particularly so where individuals do not engage in abstinence or harm reduction. An action for the Strategy will be to engage with the Substance Misuse Area Planning Board to focus on this group who are low in number but challenge health, homeless and social care service existing models of provision.

The action to develop a *Housing First* service in Swansea will need specialist input from both primary and secondary health and social services as well as substance misuse services.

**In your letter you state that the homelessness nurse has identified that there is an issue with data sharing between health and social care. *We were told by Social Services that there is no issue with the sharing of data as far as they are concerned. Nevertheless, we felt that as the homelessness nurse works in a primary care environment that there may be difficulties in them accessing data on clients. We would like some reassurance that data sharing protocols enable primary care providers to work seamlessly with other agencies including the council and secondary care providers.***

The Homeless & Mental Health Outreach Nurses are based within Primary health services and currently are outside the Council's information sharing agreements with secondary health services that exist. Therefore, at present the identified ABMU staff are unable to have lawful access to the Social Services Paris IT system where we hold personal and sensitive information.

The Council has sought advice and clarity on the specific requirement and need for this access from the NHS Information Governance Unit to progress this issue without compromising privacy laws.

However, Social Services officers have confirmed that they do not feel this lack of access to the Paris IT system itself impedes seamless work between the Council Homelessness and Social Services and Health and commissioned providers.

Information is already shared as required between professionals when it is necessary to support an individual to achieve their outcomes.

## **Health Service issues**

**In your letter you stated that the Working Group would like to see increased flexibility to services provided to those who suffer with substance misuse issues. Witnesses recognised that there is a problem and having more flexibility in the system to deal with people who are chaotic is something that will be explored in the future. We would like more detail as to what actions are being put in place to deal with this issue.**

I have requested that the appropriate officers take these issues forward and raise your concerns with the ABMU.

**Witnesses confirmed that they hope there will be a joint approach taken with the Housing First project. We would like more information as to what that joint approach will entail.**

*Housing First* will provide a bespoke package of support for each client. To be successful this will require a flexible and responsive approach from all relevant agencies, which will include Housing, Social Services, Health, Police and Probation.

## **Learning Disabilities**

**In your letter you state that there is an increasing number of homeless people with borderline Learning Disabilities who have no access to Learning Disability services but are unable to read (or have limited reading and language skills), write, manage money or maintain a tenancy and are either homeless or at risk of becoming homeless. We would like information as to how this group will be supported as part of the draft housing strategy.**

The Council commissions a range of generic/multidisciplinary floating support services all of which would be able to offer housing related support to those with border line learning disabilities, having difficulties with literacy and numeracy. In addition it commissions a self-referral day service. Additionally there are specialist learning disability supported accommodation and floating support service for those supported in secondary care.

Homeless and Supporting People commissioners are continuously working to raise awareness of these services, to facilitate early referral and intervention and prevention. An action of the draft Homelessness Strategy is the development of a pre eviction and abandonment protocol with general needs and supported housing providers. Additionally it will look at pre-tenancy preparation, and different ways of engagement with individuals to further reduce evictions.

## **Housing First**

**We were reassured by the health board representatives at the meeting that they are fully engaged with the housing first process but would like more detail on the work that is on-going to deliver a cross-agency service once housing first gets underway.**

As stated earlier, officers from a range of services are in the process of developing the *Housing First Project* and it will be essential that when the project is up and running that all agencies work together to ensure that every service user has a bespoke and intensive range of support.

## **Ex-Offenders**

***We would like to see detailed statistics on the number of ex-prisoners who are released and return to Swansea. What percentage are referred to housing and social services and how quickly are they resettled and found accommodation?***

I have been advised that the Council would not be informed of the total number of ex-offenders who are returned to Swansea. We do work however work closely with the relevant resettlement teams from various prisons, in line with the Prisoner Pathway. In 17/18, 196 ex-offenders were either referred from prison or presented themselves to Housing Options. We were able to directly accommodate 50 of these cases into supported accommodation, social housing accommodation and private rented accommodation.

A number of the ex-offenders referred to the Council did not contact us for assistance on their release from custody, or subsequently lost contact with us during the application process, or were able to find accommodation themselves. We are aware that 12 out of the 196 referrals returned to custody.

## **Day Centre**

***We heard that good work is being done by Access Point but that they need better accommodation to provide better services. You implied that as part of the Homelessness Strategy you are looking to bring providers together under one roof and provide some of the day services previously available at St, Matthew's centre. You said that you recognise that there is a gap and the Council, with partners, is looking at what can be done. We would like more detail on these proposals together with some idea of timescale.***

We are currently in the early stages of developing proposals for a multi-agency solutions centre and this will be an action within the Homelessness Strategy. As part of the development of this we will involve all relevant agencies to ensure that a collaborative approach is taken.

## **Gateway**

***In your letter you comment that the homelessness service would benefit from an improved and effective Gateway referral system. We heard the Council recognises there is a problem and hope to put such an officer in place in the next few months. We would like some indication as to when that officer is likely to take up post.***

As previously stated, the Housing Service recognises that this needs to be prioritised and we are hopeful that the Gateway Officer will be in post by October 2018.

## **Evictions from supported accommodation due to rent arrears**

**In your letter you comment that there are a number of evictions from supported accommodation due to rent arrears, particularly as a result of budgeting difficulties.**

***The Council is aware that it is an issue but that people have to take responsibility. However, they are looking at the number of evictions and the reasons for them. We would like more detail on the conclusions of this study.***

The Homelessness Strategy will ensure that evictions from supported accommodation due to rent arrears will be reviewed. The appointment of a Gateway Officer will also assist in ensuring that evictions are kept to a minimum.

## **Out-of-hours support**

***We were given confirmation that the rough sleeper's team provision has been extended and there is therefore support at the weekend. An offer was made by the Operations Manager of Community Housing to meet with Matthew's House to discuss the matter further if they still think that there is a gap. We would appreciate more detail as to the hours this provision now works and how it is being advertised to various third sector agencies working with rough sleepers.***

The Rough Sleeper Intervention Team are available between 7 a.m. – 3 p.m. from Monday to Friday and 8 a.m. – 12 on weekends. We are currently in the process of updating our Rough Sleeper resource cards and we are also looking at improving how we communicate to third sector organisations and it is hoped that the co-production of the Homelessness Charter, which will include all the relevant agencies, will improve channels of communication. In the meantime, as stated the Operations Manager for Community Housing will discuss these issues further with a representative from Matthew House.

## **Co-ordination**

**In your letter you comment that there are many small groups that have established themselves on Facebook etc. and want to help homeless people. The Council says that for assistance people should contact Housing Options in the first instance, then Access Point and then the rough sleeper's team. Could the council better publicise these arrangements for these groups?**

As previously stated we are always looking at ways to improve our communication with members of the public. Recently, I met with some volunteers who wanted to find out more about ways they could help with those who are faced with homelessness and we found this particularly useful in terms of sharing information about what outreach services are already available.

Despite our best efforts however, it is sometimes difficult for the Council to influence volunteers who are looking to assist homeless households; we will of course continue to ensure that the Housing Service is there to provide whatever advice and assistance we can to any volunteer(s) to ensure a coordinated and joined approach to tackle homelessness.

## City Centre

***It was confirmed that a City Centre Street Vulnerability Group has been set up by the police. It has only just started but it will look at the issues. We would like some details as to the instructions and training issued to City Rangers as to how to deal with rough sleepers and beggars in the City Centre. We would also like details of any discussions that the council has had with the police on this issue.***

I have liaised with the Cabinet Member for Investment, Regeneration & Tourism in relation to this issue and offices have confirmed that key Performance Indicators show that the team of three Rangers deal on average with over 2,000 separate incidents each month in the City Centre with homelessness being one of a broad range of activities that they are involved with. This research shows that customer service is at the heart of the Rangers job role which is ambassadorial led. Nevertheless, the Ranger team, who each have more than a decade experience in the job, have over this time developed an understanding of the personal and complex issues associated with those who make up the homeless community in the City Centre. This has been achieved through a combination of formal training and working closely with the local Rough Sleepers Co-ordinator and the various outreach services that offer support to the homeless. For example, the Rangers have had specialist drugs training to understand the issues around drugs and substance misuse together with training on Equalities and Human Rights, Customer Service Skills and Emotional Intelligence.

As a result of working closely with the Rough Sleeper Intervention Team and colleagues in Housing, the Rangers are also very knowledgeable of the support services that are available to homeless households and will often advise and direct vulnerable individuals to access suitable support as well as highlight those at risk of harm to members of the Rough Sleepers Intervention Team so that the appropriate intervention can be arranged.

There are also occasions where the Rangers take a more direct role. For example, one of the Rangers recently assisted a long term homeless couple to obtain a birth certificate to enable them to open a bank account and access benefits. The Rangers have also accompanied the NHS Outreach Nurse on several occasions to engage with those on the street who may be suffering health issues. The Rangers were also integral to the establishment of the *Have a Heart- Give Smart* initiative in the City Centre. This diverted giving scheme, which forms part of a national initiative lead by the Association of Town Centre Management (ATCM) has been running locally for approximately 6 months and nearly 50 businesses in the City Centre, across both day and evening economies, have signed up. The main objective of the scheme is to encourage the public to donate within the designated premises rather than give directly to those begging on the street. The funds raised are then matched by Santander and awarded to a designated homeless charity to fund support services.

Historically the Rangers have enjoyed a productive working relationship with Big Issue Cymru and have engaged with them over many years to help manage the designated Big Issue pitches across the City Centre. There is no longer a Big Issue office located in Swansea which impedes the proactive on-site management of local vendors by Big Issue and communication with the Rangers although regular contact with the Head

Office is undertaken and the Rangers are often called upon, for example by businesses, to arbitrate conflict regarding the use of sites popular among vendors and other users e.g. charitable collectors, buskers, canvassers etc. The Rangers also continue to help enforce the terms of the Big Issue badge. For example, if a vendor is deemed to be under the influence of alcohol, to ensure the reputation of Big Issue and to minimise complaints, the Rangers have the authority of Big Issue to instruct them to leave the pitch and return when sober.

Whilst these examples show the Rangers to be empathetic to those who are homeless and supportive of those in genuine need, many of the individuals that the Rangers deal with on the streets are in fact housed and choose to frequent the City Centre to either socialise and source drink/ drugs with like-mind people and/ or beg for funds from the public.

The subsequent anti-social behaviour of some of these individuals, including those that are homeless, can unfortunately at times escalate. On such occasions, the Rangers will take proactive action to manage this behaviour and mitigate any potential alarm, distress or intimidation caused to the parties involved as well as to users of the City Centre. City Centre Management, which is the Service that is responsible for the City Centre Rangers team, has within the previous 12 months received only one complaint from a member of the public regarding the alleged treatment of a persistent and prolific beggar in the City Centre by the Rangers– an individual who is not known to be homeless. De-escalation techniques, engaging with the Police and sign posting individuals to outreach services are among the measures that are taken by the Rangers. The team have also referred over 30 individuals to the new Street Vulnerability MARAC (Multi-Agency Risk Assessment Conference) since March 2018.

I trust that my response addresses all the comments and issues raised in your letter on behalf of the Homelessness Scrutiny Working Group. Can I thank you for the opportunity to talk to the group, and for the positive comments and acknowledgment of the efforts being made by all partners to tackle homelessness and the causes of homelessness in the City. I will ensure that the issues raised by the Working Group are taken into account when finalising the Homelessness Strategy and action plan for 2018-2022.

Yours sincerely



**COUNCILLOR ANDREA LEWIS**  
**CABINET MEMBER FOR HOMES & ENERGY**