

# **EXETER BOARD**

**28 April 2015**

## **Devon County Council contribution to homelessness prevention**

### **1 Purpose of Report**

- 1.1 To describe the homelessness prevention services commissioned by Devon County Council (Social Care)

### **2 The Role of Social Care**

- 2.1 The primary function of Devon's Social Care services is to protect vulnerable people, support independent living, and provide improved life outcomes for children and young people. Devon County Council has a statutory responsibility for planning and commissioning social care services, as well as a duty to safeguard individuals through a range of partnerships. The Council has well-established and well publicised referral pathways into the assessment procedures for these functions. Any child or adult that meets the eligibility threshold for Social Care can therefore expect to be offered an individually tailored care package based on their agreed needs.
- 2.2 In all but the highest levels of assessed need for Social Care (for example children at risk, or adults requiring residential care), the council does not have a direct role in the accommodation side of a person's needs. Responsibility for the provision of housing and help with housing costs (for those individuals eligible) rests with Housing Authorities and Housing Benefit Departments.

### **3 Ensuring children with housing problems are kept safe**

- 3.1 The response to any child in need under the age of 16 is always the duty of Children's Social Care. However, responses to the housing problems of 16/17 year olds (if they aren't already in Care) can fall either into the duty of Housing Authorities if the need is just for housing, or into the duty of Social Care if the need is for both housing and Social Care. In order to make sure that the needs of these young people doesn't fall between the different responsibilities of Housing and Social Care, Devon operates a joint protocol and delivers some shared services for specifically preventing homelessness in 16/17 year olds.

### **4 Helping adults with housing problems to independence**

- 4.1 Devon County Council does not have any statutory responsibilities for responding to homelessness in adults – this sits with Housing Authorities. Nevertheless, Social Care does make a significant contribution towards homelessness prevention, and in 2014 it published a 5 year plan for the services it commissions with its' resources. The plan is based upon the principle of a multi-agency collaboration through which practitioners work together towards the same outcomes, but with different responsibilities for the different elements of provision that homeless people need (See Diagram 1 below).

### **5 Commissioned Services**

- 5.1 In June 2014, the Council completed a two-phased homelessness prevention tender. The first phase awarded 9 contracts for people aged 18 and over, and the second phase awarded a further 5 contracts for 16/17 year olds. This total of 14 contracts was awarded to 12 different local Charitable and Voluntary Sector providers - effectively the same market that had established itself across Devon to do this type of work over the years preceding the tender.
- 5.2 As a result of the tender, Devon County Council now commissions approximately 3,375 support hours per week of specialist worker time. This supports entrenched homeless people towards getting help with substance and mental health related problems and engages younger homeless

applicants in a negotiated return home to family, or towards Supported Housing, training and employment opportunities.

**5.3** The contracts awarded for the support hours, required providers to prove that they had (or had access to) suitable accommodation available to house the people that they are supporting – even though Devon County Council does not administer or pay for this accommodation. This approach has meant that the Council's 14 contracts secured 288 bed spaces, and can help around 450 people affected by homelessness at any one time.

**5.4** The commissioning exercise has been careful to take account of the high levels of need in Exeter. 2,300 of the total available 3,375 Devon weekly support hours (i.e.68%) are delivered into the Eastern area of Devon, which in practice is predominantly within the City. Equally, 182 of the total 288 bed spaces available (i.e. 63%) are located in the Eastern area, with again, most of these being located in the City.

## **6 Monitoring and Improvements**

**6.1** The outcomes from this investment are carefully monitored by Devon County Council officers, to ensure a continued focus on the efficiency, effectiveness and quality of service delivery.

### Evidenced areas of success include:

- Support workers are becoming increasingly skilled at engaging clients who have tended to keep themselves to themselves and refuse offers of help.
- Contract holders have developed their understanding of higher needs homeless people, and adapted their services to meet these specific needs
- Support workers have introduced activity plans for homeless people being supported, and these have been implemented as a key part the client engagement process
- More hostel residents than ever before now have agreed move on plans and meaningful occupation targets – which has led to the majority of hostel residents successfully moving within the specified nine month period
- The eviction rate from hostels/supported accommodation has substantially reduced and this is now only used in exceptional circumstances
- More people are choosing to complete recovery programmes at hostel/supported accommodation services and this is felt to be because services have re-designed their provision around the needs of the residents.

### Areas of challenge/development include:

- One of the main barriers for hostel residents moving on is still the lack of diversity and quantity of affordable accommodation for them to move on to. Private sector landlords will often not accept ex-rough sleepers.
- The majority of rough sleepers accepted as in 'priority need' have alcohol and substance misuse issues, and it is often difficult to provide the right type of community based treatment options for people that either cannot or will not use the normal referral pathways or client engagement approaches.
- GPs are the main gatekeepers for the mental health services which can be a barrier for rough sleepers or hostel residents. Residents are often told that they need to fully engage with RISE (Public Health's substance treatment contract holder) before a mental health assessment can be carried out and services provided.

## **7 Other Improvements and Next Steps**

**7.1** In November 2014 Devon County Council commissioned Exeter Community Initiatives to undertake independent service user feedback on the homelessness provisions that the Council has commissioned - to help shape services around what homeless people say works for them. The final draft of the report is due in April 2015, and will be used to discuss with partners how

Devon County Council contracts might need to be reviewed in ways that will make services even more accessible to those that use them.

- 7.2** In December 2014 Devon County Council invited all of its successful contract holders to submit applications for additional resources to deliver homelessness winter pressures initiatives. One of the aims was to mitigate the additional harm that homelessness people can experience during the cold weather and over the Christmas and New Year period. Another of the aims was to build better commissioning intelligence for Public Health and NHS/DPT partners, with a view to informing better multi-agency planning during winter holiday periods. An extract from a feedback report of one of the successful providers reads:

‘Snowflake’ consisted of day centre hours on a Saturday and a Sunday from the 20th December 2014 to the 29th March 2015. It was held in the basement at Gabriel House (GH) and was a partnership between the Street Homeless Outreach Team (SHOT) and the Gabriel House Support Team.

The Snowflake Daycentre was staffed by two staff, from the Support Team, SHOT, and St Petrocks. A number of people had physical health needs and so a general nurse attended a few of the sessions each week. However, as there is no medical room at GH the nurse was only able to provide assessment and treatment.

A breakfast for each rough sleeper and refreshments were purchased each week and cooked by staff and volunteers, including current GH residents.

The approach was very informal and clients engaged in social activities and breakfast. Sessions were also geared towards providing housing, life skills, welfare rights and health advice.

Clients accessing Snowflake also were able to use the telephone and have access to the internet at GH.

A specialist mental health and substance misuse consultant has been attending the Sunday Snowflake sessions in order to compile a snapshot of mental health needs and substance misuse issues.

- 7.3** Devon County Council’s Social Care Commissioning Team is one of the partners currently supporting Devon Partnership Trust (DPT) plans for the re-commissioning of a Devon Dual Diagnosis service. Although the plans for the new service have yet to be finalised and agreed, the aim will be to offer accommodation and care to people that have problems with both mental health and substance use. The initiative is already providing a practical forum for Health, Housing and Social Care commissioners to work more closely together on the delivery of better services for people with complex needs – who are typically at greatest risk of rough sleeping.

Max Sillars, Senior Commissioning Officer, Devon County Council, April 2015

Diagram 1: Devon County Council as one contributor in a multi-agency partnership

