

## **Kerslake Commission evidence submission**

Kettering Borough Council

### **1. Thinking about the response to rough sleeping during the pandemic, which measures, policies, practices or joint working do you think worked well and why?**

Our approach was to act fast, intervene and reduce the spread, by providing safe and secure accommodation for verified rough sleepers. The key to the success of our response to “Everyone In” was having a multi-agency approach. Working closely with Accommodation Concern, our local homelessness prevention charity and winter night shelter colleagues we were able to quickly identify who was rough sleeping and required a housing solution. Due to the nature of our housing supply, we were able to utilise council own stock and provide self-contained accommodation on discretionary 7-day licence agreements in one-bedroom flats, or nightly paid facilities for all verified rough sleepers. Prior to the pandemic, Accommodation Concern were already conducting our outreach service, however due to the change in service provision, we adapted the service on offer to include an in-reach service to all of those that had been placed within our rough sleeper accommodation to ensure they were supported. Outreach measures were enhanced, to increase the presence and knowledge of who may be rough sleeping, due to the night shelters closing and due to the health risk of sleeping rough during the pandemic. A verification process was implemented, which ensured that true verified rough sleepers were supported, and twice weekly sweeps were conducted to check for any new rough sleepers. In the initial stages of Everyone in, once all known rough sleepers had been verified and placed within accommodation, working with Accommodation Concern and the voluntary sector we provided emergency accommodation packs for each rough sleeper consisting of cooking facilities, bedding, toiletries and food parcels and also produced an information pack in plain English to explain the risks of Covid and the new guidelines that needed to be followed, the provision of local food banks and services along with offering this information in a variety of languages. In addition, keep safe packs were offered to anyone that was reported as rough sleeping, which consisted of a sleeping bag, hand sanitiser, face masks, and water. Part of the Rough Sleeper Initiative money was utilised to help provide entertainment items such as TV's, and books to help with isolation. Partnership working has been key throughout the response and in recent

weeks we have worked with Public Health and a local Medical centre to provide Covid vaccinations to all known rough sleepers/homeless and volunteers, and now when verifying a rough sleeper, we have prioritised GP registrations as part of the initial assessment. Although Covid brought many challenges to our country, our rough sleeping community have seen the most benefit from the pandemic, which has forced us to evaluate the service on offer and drive forward the Government's commitment to end rough sleeping by 2027. It has allowed us as a local authority to ensure that no one spends nights on the streets unnecessarily and has provided an opportunity to engage with rough sleepers and gain a greater understanding of their needs.

**2. In contrast, which measures, policies, practices or joint working do you think have not worked well and why?**

Due to the pandemic a lot of support services were not open for business as usual and operating remotely. This was a barrier for many individuals who required the face-to-face support of mental health, drugs, or alcohol assessments. As the lockdowns progressed, we became more aware of the pandemic and the time scales we were presented with and did see changes within those service providers and some crisis clinics were re-opened but with limited numbers being able to access them. Having limited access to these highly important services had a negative effect on this most complex group of individuals, and delays were present in the referrals that were made and hence delayed the move on process for them. We experienced challenges with partnership working within some sectors. It was identified that coordinating a seamless approach would be the key to the success of the "Everyone In" initiative.

**3. Please describe the specific challenges, and opportunities, in the next phase of the Everyone In programme and helping people to move on from hotel accommodation.**

It has been identified that supporting an individual with no recourse to public funds (NRPF) is a challenge. Some of the partners we have worked with have faced difficulties understanding eligibility for housing and benefits, along with applying for their EU status. Having a greater understanding of the EU settlement scheme is paramount to being able to provide the correct advice and support these individuals. We feel we now have a robust and assertive response to rough sleeping which results in timely assessments and rapid response where possible to ensure people do not sleep rough any longer than necessary and the next phase and focus for us is to ensure timely access to specific support services to help and support rough sleepers to move on from emergency accommodation. Kettering Borough Council aligned on the 1st of April 2021 with three other sovereign councils

(Wellingborough, Corby and East Northants) to form one unitary council, called North Northamptonshire Council and this transition will enable closer working between teams and in particular with Adult Social Care all being within one team and therefore is a great opportunity to enhance multi-agency support for individuals. As part of this year's Rough Sleeper Initiative bid, we have secured funding for a Help to Work Officer. The role will offer a range of support from submitting benefits claims to getting suitable work and could involve volunteering, training, education, applying for settled status, and repatriation (where desired). We have also secured funding for a Key Health Worker for North Northants. The role will specialise in providing the experience and advice necessary with drugs and alcohol misuse, making relevant referrals, along with having a greater understanding of mental health diagnoses and support services on offer. To date this level of understanding of an individual's support needs has been a challenge particularly during the pandemic, along with the lack of understanding and access to the levels of support required and also awareness of treatments available locally. Having this valuable post in place will help to provide a seamless approach and support our in-reach tenancy support teams, ensuring that this complex vulnerable group of people receive the right care required to progress to sustain a more permanent tenancy and overcome any addictions.

**4. And finally, what do you think needs to be put in place to embed the good work that developed during the pandemic, or improve upon it?**

The rough sleeping response to the Covid-19 pandemic has provided an opportunity to entirely rethink our approach to rough sleeping. Local housing authorities have powers to accommodate anyone who is homeless, and in many cases utilising resources and exercising that power to provide a 'housing led' response at an early stage can be a more cost-effective approach than multiple crisis interventions over time not only for Housing but also for Adult Social Care and our partners in Health, and Criminal Justice. The continuation of a multiagency approach is key to the success of the rough sleeper pathway, along with the continuation of the Everyone In initiative, exercising our discretionary powers to accommodate genuine and verified rough sleepers to support them to move-on and transition from emergency accommodation and ultimately end their rough sleeping.