

## **Kerslake Commission evidence submission**

Liverpool City Region Combined Authority in conjunction with The Whitechapel Centre  
(commissioned assertive outreach service)

**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?**

Everybody In has worked extremely well for the Assertive Outreach team and resulted in rough sleeping being the lowest ever numbers in some areas of the City Region. Clients who refused to go into local hostels would be placed in a B&B and have moved on successfully to other accommodation. Joint working between housing options / homeless services and commissioned outreach services improved to enable the transition and stabilisation of rough sleepers in accommodation. Rough sleepers that had not been able to be accommodated in hostels have been placed in hotels and supported to move on into other accommodation. Prison release improved practices between statutory services and homeless services; this was facilitated by regular weekly meeting with prisons, probation and the assertive outreach service. Not evicting for rent arrears has reduced the numbers of rough sleepers. The Assertive Outreach having a nurse and community psychiatric nurse (CPN) has been vital to provide health and mental health support to rough sleepers, those in temporary or hostel accommodation. In one area the outreach team nurse (in partnership with a local GP and Public Health) facilitated the vaccine roll out to the homeless population in hostels, day centres and B&Bs. This was extremely successfully resulting in 70%+ take-up rate of the vaccine. An outreach team nurse (in partnership with a local GP) was able to support a hostel who experienced a Covid outbreak. They supported with Covid testing, supporting staff and providing medical care to those who were unwell – hospital admissions were planned and coordinated by the GP which resulted in the less need to call ambulance. The hostel found this to be extremely helpful and supportive at a time which was very stressful for residents and staff. The Assertive Outreach team being commissioned to be a needs-led flexible service has worked well for the team and local authorities (LA). Discussions at the beginning of the pandemic involved us asking each LA what they needed. In St Helens the need was for a traditional model of outreach daily and in Wirral they required support in B&B to clients placed by the LA.

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

Joint working was different in each local authority. When localities were close to each other, this meant clients in neighbouring boroughs were offered different levels of support and accommodation offers depending on postcode. Not evictions for rent arrears have left hostels with significant rent arrears and left a culture of not paying service charges as normal expectations for clients. Client being moved into a new area from authorities not within the city region has meant that some individuals were left without support or food provision. In order to meet demand, hotels were occasionally sourced in locations that were not close to shops, chemists and other services making it difficult for individuals to easily maintain health and wellbeing.

**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.**

Challenges of the next phase in moving people on e.g. onto other commissioned services when options locally are limited or into social housing where there is a lack of supply. Challenges for clients moving away from hotel provision (with food and support on site) to independent living has been a difficult transition to manage in terms of budgeting and life skills.

**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?**

Joint working between a range of agencies including homeless services, adult social care and health providers to name a few needs to be everyday practice. The level of trust and autonomy given to outreach to make decisions to be continued. Everybody In should be an ethos of all services. The response during the pandemic has shown the importance of nobody being street homeless and agencies working together to get the right outcomes for individuals. Flexibility of services to adapt and change to need should be everyday practice. Lots of different agencies have quickly changed the way they work at a great benefit to services user and joint working practices, if this was to suddenly stop at the end of the pandemic this would be a detriment to all the good work and hardship encountered during 2020-21.