

# Rough Sleeping Grant Funding

Helping those new to the streets, or at imminent risk of sleeping rough to get the rapid support they need

**Funding Bid Application Form** 

## **Application Form**

This document should be read in conjunction with the Rough Sleeping Programme Bidding Prospectus - available on the GOV.UK website.

#### 1. Introduction

We are inviting funding bids interventions to help new rough sleepers, or people at imminent risk of sleeping rough, get the rapid support they need to recover and move-on from a rough sleeping crisis. We want local authorities to demonstrate how they will:

- reduce the flow of new rough sleepers to the street, through more targeted prevention activity,
- ensure that people have a safe place to stay while services work with them to resolve the homelessness crisis.
- help new rough sleepers off the street and into independence, through more rapid crisis interventions and support to access and sustain move-on accommodation.

To do so, we expect to see local authorities building on the success of and learning from innovative approaches such as the No First Night Out pilot and the No Second Night Out programme. Where local authorities are targeting those new to the streets, they must also demonstrate how they will ensure that nobody has to sleep rough to access the support they need.

We are inviting bids that help people access the multi-agency support they need to exit rough sleeping rapidly. This may include permanent rough sleeping assessment hubs, tenancy sustainment support, employment and education support for ex-rough sleepers, or specialised support for groups with different needs (such as rough sleepers with mental health needs, or those leaving prison).

This funding is about targeted prevention and early intervention. In bidding in, we expect authorities to demonstrate how they will prevent or reduce rough sleeping in their local area. This includes assessing the scale of rough sleeping, and setting out how their proposed intervention will respond to this need in innovative ways. This response must include strengthening or building partnerships with other agencies who play a crucial role in helping those at risk of, or already, sleeping rough exit homelessness.

Applications will be evaluated as set out in the specification, with those successful notified in December 2016.

#### Name (each Funding Bid needs a lead, named contact):

Angela Haye

## **Local Authority/Strategic Regional Authority:**

Waveney District Council

Job title, address & contact details (including e-mail address):

Housing Needs Manager, Waveney District Council, Riverside, 4 Canning Road, Lowestoft, Suffolk NR33 0EQ. <a href="mailto:angela.haye@eastsuffolk.gov.uk">angela.haye@eastsuffolk.gov.uk</a> 01502 523134

Are you representing a coalition of commissioners or partners? If yes, list all organisations below:

Lowestoft Rising, Great Yarmouth & Waveney CCG, Health East, Suffolk Police, Access Community Trust, Suffolk County Council,, Anglia Care Trust, Genesis Housing Association, Orwell Housing, Homegroup Turning Point, Waveney District Council Housing Needs/Options, Waveney District Council Active Communities

# Amount of funding requested, and indicative profile over the four financial years:

#### Profile of bid:

	16/17	17/18	18/19
Support			
Staff costs	105,000	105,000	105,000
Other	10,000	10,000	10,000
(Emergency			
Fund)			
Total	115,000	115,000	115,000

How many individuals do you expect to provide interventions for? 180

## Geographic area to be covered:

Lowestoft, Suffolk. However, referrals will be accepted from across the Waveney District

#### Criteria A – Need

Outline the existing and expected demand for rough sleeping services in your area, and how your proposal will provide an additional response to meet these demands in innovative ways.

You should make reference to the sources of your estimates of current and projected scale, and expected reach. [500 words]

This will be scored out of 5, with 5 points awarded for strong proposals with very good evidence of how the proposal meets the criteria; 3 points for good evidence of how the proposal meets the criteria; and 1 point for very limited or no evidence provided on how the proposal meets the criteria.

59 single households presented themselves to Waveney District Council (WDC) Housing Needs as sleeping rough between Jan-Dec 2015. The Rough Sleeper Estimate (17/18<sup>th</sup> November 2016) identified 16 Rough Sleepers compared with 6 Rough Sleepers for the previous year. There has also been a 20% increase in single people presenting to the Council because they have either been "sofa surfing", living in unsecure accommodation, evicted from hostels or evicted from parents and friends (hidden homelessness). This is likely to increase to over 700 by the end of the year compared to 594 for the same period in 2015. Some of these individuals will get to a point where all options have been exhausted ultimately resulting in sleeping rough or living a chaotic way of life leading to further risks associated with rough sleeping.

Of the 16 Rough Sleepers identified on the 17/18<sup>th</sup> November, 4 individuals were not previously known to services and have been sleeping rough on the streets for less than 5 days. Conversely, other individuals identified were already known to services but either refused to engage or cooperate with support agencies or have been banned from entering supported accommodation. Given that the numbers of rough sleepers have doubled over the last year our projected figures are at least double this figure going forward to next year. This extrapolation is linked to future and current trends in homelessness (increase of 20-25%), the negative impact of Universal Credit Full Service roll out in Waveney and the resulting lack of suitable private sector accommodation in Lowestoft. The data sources are derived from Housing Options Housing Register/ Advice and Prevention and Homelessness Data, Rough Sleeper Estimate, data from the key provider of hostel accommodation in Lowestoft and ECINs. A snapshot of the numbers of households in emergency accommodation (28th November 2016) equals 2 families compared with 7 single households (a reverse of the ratios of 5 years ago).

Whilst we have been able to target the high level of street drinkers in Lowestoft (many of whom were homeless and sleeping rough), through the pilot Interventions Programme for Lowestoft, it is now essential that we build in enhanced resources and resilience to tackle a much larger issue for Lowestoft, those which are on the edge of homelessness which we are keen implement through an enhanced programme for Lowestoft.

The enhanced programme will build additional staffing capacity to tackle the more complex and chaotic cases within the town, thus reducing demand and therefore cost on services such as A&E.

Over the next 3 years, the enhanced interventions programme will help 180 of the most challenging cases to live normal lives, within sustained accommodation. The programme will cover the town of Lowestoft and its parishes, with a combined population of 71,010. The multi-agency partnership (detailed within the partnership section), which is already in place and delivering is robust and resilient and allows for a streamlined approach to referrals onto the programme.

## Criteria B – Value for Money

Please demonstrate how your intervention will deliver additional provision and outcomes, over and above current provision, and how this demonstrates value for money and savings on a minimum of a one-to-one basis. [500 words]

This will be scored out of 5, with 5 points awarded for strong proposals with very good evidence of how the proposal meets the criteria; 3 points for good evidence of how the proposal meets the criteria; and 1 point for very limited or no evidence provided on how the proposal meets the criteria.

As a result of the work funded through the DCLG Single Homeless Fund (Norfolk & Waveney), which included funding for a MEAM worker for both Lowestoft and Great Yarmouth in 2014/15, we have conducted a detailed study and fully calculated the costs to the entire system of those cases which have the most chaotic lifestyles. The study included tracking specific 10 cases over the course of a year to compare system-wide costs pre and post intervention through our pilot interventions programme. This resulted in measuring a whole range of interactions using the Manchester University New Economy Model to attribute standard costs. Data was collected on A&E attendance, GP attendance, Police interventions, court appearances, homelessness applications, hostel accommodation costs, ambulance use, and drug and alcohol treatment. Both local and national findings identified that someone living within a chaotic lifestyle was costing the system an additional £36,000 to £42,000 a year. Some of our local cases surpassed £100,000 per year of additional demand to the system. The recognised MEAM project cost has now been set at £41,000 nationally as the additional cost per annum that a chaotic homeless complex needs individual will cost the entire system.

To date, the interventions programme in Lowestoft has managed to move 52 of 70 cases to a position classed as 'stabilized normal' and no longer creating high level of demand. Taking the 52 cases and using even the minimum average cost of £36,000 per year per case we have estimated that a total of £1.872 million of demand has been removed across the system through the pilot programme. This has been achieved by all organisations working in a holistic way and pooling existing

resources to work collaboratively. The only additional cost for the programme has been £35,000 a year to fund a single MEAM worker for Lowestoft as all other costs already exist in the system.

Applying that model to the enhanced programme, we can demonstrate that for £115,000 investment per year over a 3 year programme period, acknowledging all other costs currently being funded through commissioning or funded services, that this intervention would present a cost benefit ratio of 9.39:1.

This calculation is based on a minimum of 30 cases per year being resolved and applying the £36,000 demand reduction figure taken from the pilot programme (1 MEAM worker), creating a demand reduction of £1,080,000 for an investment of £345,000 over 3 years. This would represent a 50% success rate against the targeted 180 for the enhanced programme, however, during the pilot phase it was closer to 80% success so potentially the 9.39:1 ratio could be significantly higher for the enhance programme as we move forward. The groundwork, systems and multiagency approach is already in place to support the growth of the programme. It important to note that these figures do not take into consideration the potential demand reduction in future years once someone is stable.

The figures given above demonstrate the significant impact and value for money that the Interventions Programme can realise.

## Criteria C - Approach

Please outline the types of intervention and support that will be offered to people, and demonstrate how they will prevent them from sleeping rough, or help them rapidly exit rough sleeping. [500 words]

This will be scored out of 5, with 5 points awarded for strong proposals with very good evidence of how the proposal meets the criteria; 3 points for good evidence of how the proposal meets the criteria; and 1 point for very limited or no evidence provided on how the proposal meets the criteria.

Lowestoft Rising, working closely with Waveney District Council and other public and voluntary sector partners has created "Interventions", which is a place-based multiagency case conference system. The programme was designed to tackle Lowestoft's entrenched problems surrounding street drinking, which is invariably linked to homelessness and rough sleeping, and was putting significant pressure on all service areas. Partners included police, health,, social care, mental health, housing providers, the voluntary sector and others, who had all come together to holistically address these issues.

The pilot period, which has been running over the last 18 months, has seen a significant reduction in the number of street drinkers, 35 down to 2 or 3 cases. All partners contribute time/resources to the process. To date the only additional funding has been used to employ a MEAM Support Worker. In year 1 this was funded through the National Homeless Fund scheme led by MEAM. The role was so

important to the overall process that 7 local commissioners co-commissioned funding for a second year for both Lowestoft and Gt Yarmouth (who we work closely with on the Interventions Programme).

The Interventions Programme has helped to quantify the costs associated with someone living a chaotic lifestyle, revealing the true demand cost across the system locally. The key element to success was to deal with every case on its own merits and to use the MEAM worker to effectively co-ordinate resources. Early learning from the programme was that accommodation was a key element in stabilising the lives of these chaotic cases. Almost every case presented was either homeless or on the edge of becoming homeless.

The programmes approach addresses the barriers this group faces and once stabilised they are offered a wide range of partner support including treatment, detox, medical support and well-being support.

The case conference process is led by an independent chair from Lowestoft Rising and administered by Suffolk Police using the ECINs multi-agency case management system to effectively manage the sharing of relevant data and information across partners.

Learning from the pilot has identified a much wider client group of people who are either homeless or at risk of becoming homeless in Lowestoft. The enhanced programme will allow us to build in extra resource capacity to engage and intervene before escalation, allowing the programme to speed up interventions. The MEAM workers are a key component to the process and if we are to effectively address the homelessness need then we need to build in extra capacity. The enhanced programme would consist of 2 MEAM workers. We have also identified that mental health concerns are evident in the vast majority of cases seen through the pilot and feel it's essential that the programme includes a mental health support worker to work closely with the MEAM posts, helping people quicker and to avert crisis intervention.

An emergency fund will be created to provide aid until services kick in. This would include covering emergency travel and accommodation costs to prevent rough sleeping, especially during the winter months.

## Criteria D - Partnership Working

Outline how you will deliver your intervention across local authority boundaries and/or with other local partner agencies and/or the homelessness sector. [500 words]

This will be scored out of 5, with 5 points awarded for strong proposals with very good evidence of how the proposal meets the criteria; 3 points for good evidence of how the proposal meets the criteria; and 1 point for very limited or no evidence provided on how the proposal meets the criteria.

Whilst this bid is being submitted by Waveney District Council as lead partner, Lowestoft Rising, which comprises of a group of 5 statutory public sector partners – Suffolk Police, Suffolk Police & Crime Commissioners Office, Waveney District Council, Suffolk County Council and NHS Great Yarmouth & Waveney, supported by a vast number of voluntary sector organisations facilitates a robust multi-agency approach across Lowestoft called Lowestoft Interventions Partnership. This partnership has driven forward the initial pilot phase of the interventions programme and is critical in taking it forward to address the current and emerging need identified in Criteria A.

The programme is fully supported by the Great Yarmouth & Waveney Systems Leadership Partnership (SLP) which provides strategic partnership oversight as the Health and Wellbeing Board for Waveney and Great Yarmouth and is chaired by the Clinical Commissioning Group.

Access Community Trust (ACT), who operates a number of frontline services including supported and hostel accommodation has secured funding to operate a drop-in centre (Bridgeview) for people with drug/alcohol or other social problems. ACT has agreed to continue to host the MEAM worker and will house the additional MEAM and mental health workers through the enhanced programme. ACT has also recently launched a 'Soup Kitchen', which will run for 2 nights a week over the winter months. This project will allow our programme to directly engage with those who use it quickly and effectively to offer wider support through the programme. 42 soups were issued on the opening and the subsequent night, illustrating the need on the ground.

The programme will also work closely with Trussell Trust Food Bank Scheme, which can provide, through voluntary partners, food and emergency bus travel which is vital during the early stages of intervention.

The partnership model is moving feast and as the programme expands its remits, new partners will come on board. Church and faith groups are already stating to come forward, offering support in terms of places to go and well-being provision.

Co-commissioning has already taken place in year 2 of the pilot project, through the co-commissioning of the MEAM worker posts across Great Yarmouth and Lowestoft. Even though Great Yarmouth and Lowestoft will be submitting individual, place-based bids, we will look to maintain close working relationships to explore jointworking opportunities and to share learning and best practise.

In terms of programme sustainability beyond the funding period, we are working closely with the Big Lottery Fund, looking at future investment for Lowestoft, ensuring that provision is joined-up, strategic and value for money. The evidence case in terms of overall savings from the intervention programme would be used to attract funding from the 5 commissioning organisations that have already shown commitment to the process. The Chief Executives from these will be kept fully informed of the progress and benefits of the programme for the whole system, with a view to securing funding for the roles on a recurring basis.

## Criteria E – Strategic Fit

Describe how this intervention contributes to your wider local strategy to tackle homelessness, and set out your longer term plans for the sustainability of the intervention once funding ends. [500 words]

This will be scored out of 5, with 5 points awarded for strong proposals with very good evidence of how the proposal meets the criteria; 3 points for good evidence of how the proposal meets the criteria; and 1 point for very limited or no evidence provided on how the proposal meets the criteria.

The Interventions Programme directly supports ambitions within Waveney District Council's Homelessness Strategy by specifically focussing on a wider client group of single people who are either at risk of becoming homeless The homeless strategy sets out 5 key priorities of which the following 2 fit well with the programme:

## **Priority 1 WDC Housing Advice**

The key actions include planning for increased demand, redesign of advice services in line with future demand, more effective joint working and more in depth housing advice

## **Priority 5 Non Priority Single Homeless**

- Work with strategic partners to develop a shared housing model and emergency beds.
- Delivery of NSNO Model or equivalent in Waveney
- Partnership working to increase the housing advice and provision
- Addressing the Housing Needs of People with long term complex need

The homelessness strategy is due to expire in March 2018 and work is underway to refresh the strategy, which will take into account the Homeless Reduction Bill becoming legislation. This will bring its own challenges as the net will be cast wider. 600 single households presented to the Council in 2015, with approximately a 50% success rate of prevention or relief. The Council has been specifically challenged by the roll out of Universal Credit (Full Service).

The Suffolk Health & Well-being Board Housing Charter and Poverty Strategy sets out Suffolk's commitment to tackling homelessness and social exclusion and this specific area of housing need will be the focus of further action. The Charter forms part of the evidence relating to strategic fit.

A vast amount of resources has been committed to this work from across the multiagency partnership, through individual budgets and in-kind support through staffing resources. Additionally, over the last 18 months, £70,000 has been invested through an external grant (year 1) and co-commissioned by public sector partners (year 2) to fund a MEAM worker role and an emergency fund.

Suffolk Police undertake the administration to the system and fund the ECINs License, which is shared amongst partners as part of a wider data sharing agreement. Additionally, Lowestoft Rising provides independent chairing for the partnership and is responsible for connecting additional partners as the need/opportunity arises. Estimated value of both contributions is £10,000 per annum. This commitment will be an ongoing contribution to the programme.

Waveney District Council as a member of the Gateway to Homechoice CBL Partnership of Local Authorities has also supported a Trailblazer bid for funding to refine and improve the "Enhanced Housing Options Self Assessment Tool". The tool could also be used to notify each Local Authority of households threatened with homelessness at an earlier stage in the process with a view to working towards prevention being activated at the 56 day trigger.

In terms of future sustainability, the wider Systems Leadership Partnership is overseeing the work and believes that with Lowestoft and Great Yarmouth working closely together, overall demand in the system can be reduced during the 3 year programme. Learning and outcomes from the programme will be captured and presented to commissioners to demonstrate the impact and cost savings which are being made as a direct result of the intervention. A robust evidence case will be built to secure future investment.

#### Criteria F – Data and Evidence

Successful bidders will be expected to work with us to develop a comparable and robust method of evidencing the impact of their proposals in practice, and should be willing to share their findings both locally and nationally.

Please provide detailed evidence of how your project will contribute to an improved evidence base on what works in homelessness interventions, including how you will use data to target your new service. [500 words]

This will be scored out of 5, with 5 points awarded for strong proposals with very good evidence of how the proposal meets the criteria; 3 points for good evidence of how the proposal meets the criteria; and 1 point for very limited or no evidence provided on how the proposal meets the criteria.

The data and evidence sources on rough sleepers in Lowestoft are listed in Annex A. The Lowestoft Interventions Partnership has also recently taken part and submitted a return to the annual Homeless Link Rough Sleepers Audit for DCLG.

The project will continue to use the nationally recognised MEAM Risk Matrix to identify those suitable for adoption onto the programme. This can be completed by

any partner making a referral onto the scheme. The pilot project work to date has also made extensive use of the New Economy Manchester model. A high amount of data has been captured through detailed case studies across a wide range of partner's, with those interventions fully costed out using the model. We have previously contributed to the national research project led by MEAM to establish an average demand cost on services. Our local average cost per case was very similar to the national average.

We have recently taken part in DCLG's Delivery Differently Programme and have completed both the case study document and the cost benefit analysis return under the new economy model for our Out of Hospital scheme. The partnership has a good track record in the application of cost benefit ratio's and collecting/reporting data.

The enhanced programme will collect new data looking at how the interventions made can reduce A&E admissions for our existing cohort. Through our work to date we have identified that rough sleepers who are not registered with a GP, will make excessive visits to A&E. The ambition is to compare this against case's which have registered with GP's and use those services.

Through the partnership, data on rough sleepers is collected daily by partners delivering on the ground and managed through the ECINS Case Management System, where data is shared with each partner. The system holds details of all the cases worked on.

The data and evidence captured throughout the project will help to build a robust case for future intervention and funding. It will be used to present to commissioners to demonstrate the value of the intervention and the savings which have been realised within the system.

We are fully committed in working closely with DCLG to collect case level housing options data, capturing the service provided to those sleeping rough and at risk of sleeping rough and working in partnership with the Suffolk County wide trailblazer project that will be more focussed on the early preventative predictor data capture.

Completed forms to be submitted by 5pm 28<sup>th</sup> November 2016 to: <a href="mailto:roughsleeping@communities.gsi.gov.uk">roughsleeping@communities.gsi.gov.uk</a>

## Annex A - Data Sources

Information	Available	Source
Number of single homeless people	У	WDC Housing Needs Abritas Database. Suffolk Coordination Service. ACT Bridgeview Drop In Housing Register
Number of single homeless people approaching Housing Options, and their outcomes	У	WDC Housing Needs Abritas PIE/E.10
Number of rough sleepers	у	WDC Rough Sleeper Estimate 17/18 <sup>th</sup> Nov
Number of people hostels	у	Suffolk County Council ACS/HRS
Flow of rough sleepers/those in hostels	У	Suffolk Coordination Service/ Access Community Trust Lowestoft Interventions Group WDC Housing Needs
Names of those rough sleeping and in hostels	У	WDC Rough Sleeper Estimate Exercise. Lowestoft Interventions Group
Demographic profile of those rough sleeping and in hostels	У	Suffolk Coordination Service Access Community Trust WDC Housing Needs
Support needs of those rough sleeping and in hostels	у	Suffolk Coordination Service Suffolk County Adult Community Services/HRS
Length of time rough sleeping or in hostels	у	Suffolk Coordination Service Suffolk County HRS
History of time without secure accommodation	Limited	The coordination service only records the presentation address ( difficult to report on)
Use of other services by rough sleeping and hostel dwelling cohorts. Please list. This could include physical or mental health, substance misuse, A&E attendance, interactions with police, the criminal justice system, social services, education, and the benefits system including employment records.	y	The Junction (Under 24 year olds). Salvation Army. Bridgeview Drop-in. Homegroup (Tenancy Support) Drop-in. Lowestoft Interventions/ECINs (records contact with other agencies).