

# **Bristol City Council**

# **Reducing Rough Sleeping**

**Draft Commissioning Plan** 

Dec 2019

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### Section A – Introduction and context

#### Purpose of this document

This plan describes how we propose to commission services that prevent and reduce rough sleeping in the Bristol for the next 5-7 years and what these services will look like. We will use this document as part of the consultation with people who find themselves rough sleeping, providers of services and other stakeholders to inform our final commissioning plan.

These services will play a crucial role in working towards the Governments Rough Sleeping Strategy aims of halving rough sleeping by 2022 and ending it by 2027. To some extent we can commission services that can prevent and alleviate some of the personal circumstances of people who end up rough sleeping in Bristol; however, future government policy also needs to address structural factors to assist us in achieving this aim.

#### What we are trying to achieve

#### Aims of the commissioning process

This process seeks to deliver services that achieve the following:

- a. Effective, quality service, delivering good outcomes
- b. Value for money
- c. good procurement practice (including ability to flex service to meet changing needs/budget)
- d. Contributes to coherent system
- e. Enable a good mix of providers but with system leadership active across the services

In consulting on this document we are seeking to test the following areas derived from both the Needs Analysis and discussions with people using services, providers and stakeholders:

#### Person Centred approach

Throughout this commissioning process we have identified a 'golden thread' – a greater focus on the needs of the individual - running throughout the process and influencing the final commissioned services. We will endeavour to maximise engagement with people using services to review their experiences and determine their priorities for change. This will also link to identifying system blockages for people and seek to ensure that co-production with people using the services can help mitigate blockages or improve access. We will also adopt any learning around this from the Golden Key programme.

We also recognise that there may be constraints in this approach and that it may not always be possible to effect all system changes identified. We are exploring integrating into this approach the greater use of *navigators* to assist people to access the services they need to assist in their recovery and seek to ensure that people only need to *tell their story once* encouraging services to overcome any communication barriers within the constraints of GDPR.

#### Trauma informed approach

It is now widely recognised that a significant number of people who end up sleeping rough in Bristol will have experienced significant trauma in in their early lives as a result of adverse childhood experiences. Research has highlighted neurodevelopmental damage caused by ACEs, the connection with attachment theory (and resilience), the impact on physical and mental health and the risk behaviours in later life.

This research informed Menschner and Maul's (2016) trauma-informed model of care, this plan is seeking to adopt this approach into all services that support people who have slept rough, linking to the Psychologically Informed Approaches in our supported housing pathways. The benefits of this approach for people using services will be that they:

- feel safe and supported;
- increase their engagement;
- understand that symptoms may be linked to childhood trauma;
- receive support experiences that do not add to previous trauma;
- start on a recovery journey; and as a result have
- improved outcomes and build a level of stability and resilience.

#### Outcomes

The commissioning process will seek to achieve the following outcomes:

- 1. Reduces levels of people sleeping rough in the city measured through detailed analysis of the flow of people onto the streets and off the streets, not just reliant on 'snapshots' of information such as nightly counts.
- 2. Minimises returners / increases resilience what is it that people need to sustain their accommodation and well-being, and avoid returning to street homelessness?

We are looking to deliver a real change in outcomes for people who end up rough sleeping in the city. It is recognised that this can only be achieved through working in partnership with the wider community that is already concerned and involved in helping people sleeping in the city. This commissioning plan and the associated procurement processes can be a valuable tool - rather than barrier - to help achieve this and enable the selection of partners with skills, expertise and the desire to work collaboratively in order to deliver these outcomes together.

#### Prevention

In line with the aims of the Homeless Reduction Act 2017, the governments Rough Sleeping Strategy and Bristol City Council's Preventing Homelessness and Rough Sleeping Strategy 2019-24, we are seeking to put in place services that look 'up-stream' and seek to prevent people ending up sleeping on the streets.

As set out in the governments Rough Sleeping Strategy we will be aiming to halve the number of people sleeping rough by 2022 and end rough sleeping by 2027, but acknowledge that there will need to be

wider system changes that need to happen alongside this and future commissioning approaches in order to achieve this.

#### Increased Wellbeing

People who end up sleeping rough often experience barriers in accessing both health and care services and it is well documented that they experience poor health outcomes in comparison to the rest of society. Crisis have found that Homeless people are more likely to die young, with an average age of death of 47 years old and even lower for homeless women at 43, compared to 77 for the general population, 74 for men and 80 for women<sup>1</sup>.

People who become street homeless often have high and complex support and treatment needs as a result of trauma experienced in their childhood. The Kings fund is currently undertaking a piece of work assessing the effectiveness of existing initiatives in achieving the following outcomes:

- that people sleeping rough can access health services of equal quality to others, and the impact of rough sleeping on health is minimised;
- that ill health does not prevent people moving off the streets or sustaining a settled lifestyle.

We will adopt learning from this study when it is published and incorporate local data and learning from BCC's Needs Analysis of the health needs of people sleeping rough through the Health and Wellbeing Working Group.

Those who experience rough sleeping can have high and complex support and treatment needs. Effective health and care services should address these needs but could also play an essential role in providing a solution to entrenched homelessness. This also links to building the *confidence and skills* of people who end up sleeping rough to strengthen their recovery and build resilience to prevent repeat homelessness.

#### Local & national strategic context

**Corporate Strategy 2018-23<sup>2</sup>** – The strategy contains a number of priorities relevant to this plan, including:

- Decent affordable homes, providing the springboard to achieving a high quality of life.
- Getting involved early to reduce risks later.
- Leading and championing learning and skills keeping Bristol working and learning.
- Reducing health inequalities by focussing on prevention and early intervention and the causes of ill health.
- Promoting good mental health in the wider community, emphasising early intervention, especially for children and young people and those at greatest risk.
- Key commitment to reduce the overall level of homelessness and rough sleeping, with no-one needing to spend a 'second night out'.

<sup>&</sup>lt;sup>1</sup> https://www.crisis.org.uk/media/236799/crisis homelessness kills es2012.pdf

<sup>&</sup>lt;sup>2</sup> https://www.bristol.gov.uk/documents/20182/33620/Bristol+City+Council+Corporate+Strategy+2018+to+2023.pdf/3e7d7377-ed1f-5d67-c6abaf49b7159a5e

**The National Rough Sleeper Strategy 2018<sup>3</sup>** was published in August 2018. A new feature of government policy has been the growth in collaboration and use of homelessness charities including Crisis, Homelessness Link and St Mungo's to adopt a new role particularly in terms of leading national homelessness policy and development. The action plan provides resources to halve rough sleeping by 2022 and eradicate it by 2027.

**Homelessness and Rough Sleeping Strategy, 2019–24<sup>4</sup>** - The review noted that the annual rough sleeping count in November 2018 in Bristol reported 82 people sleeping rough, which is the fifth highest return nationally. Reducing rough sleeping is priority one in the strategy, **key objectives**:

- Will focus maximum efforts and resources to halve rough sleeping by 2022 and eradicate it by 2027.
- We will develop effective services to address rough sleeping, using evidence-based approaches that have been proven to work with existing and emerging client groups and specifically target clients with complex multiple needs.
- We will build on existing work with our partner organisations to develop a 'Housing First' approach for homeless people with the highest level of need.
- We will evaluate and adapt housing pathways (including supported housing) to ensure they meet the needs of those living with complex needs as well as new/emergent client groups.
- We will increase supply of move-on accommodation available to people who have slept rough.

More than a roof – Bristol Housing Strategy 2016-2020<sup>5</sup> - Emphasises how good quality, suitable housing is essential in helping people to thrive and achieve a high quality of life.

## Bristol's One City Plan outlines a shared vision for 'Homes and Communities' and by 2022 reiterates the govt rough sleeping target that:<sup>6</sup> -

Rough sleeping in Bristol has decreased by 50% since 2018

**The Homelessness Reduction Act 2017** - The Homelessness Reduction Act came into force in April 2018, key measures in the act include:

- An extension of the period 'threatened with homelessness' from 28 to 56 days.
- A new duty to prevent homelessness for all eligible applicants threatened with homelessness, regardless of priority need.
- A new duty to relieve homelessness for all eligible homeless applicants, regardless of priority need.
- A new 'duty to refer' public services will need to notify a local authority if they come into contact with someone they think may be homeless or at risk of becoming homeless.

The Act has prompted a comprehensive review of how homelessness prevention services are delivered.

#### Budget

The Council's Corporate Strategy aims to make £92m savings, required because of a mixture of government cuts and increasing demands for services. Consequently, the level of funding available from Bristol City Council that funds the core Rough Sleeper Service was reduced by 10% in 2017 and is now £521,553 in 2019-20. For 2020-21 we have identified a slight up lift on the current level to bring it up to £557,680.

<sup>&</sup>lt;sup>3</sup> <u>https://www.gov.uk/government/publications/the-rough-sleeping-strategy</u>

<sup>&</sup>lt;sup>4</sup> https://www.bristol.gov.uk/documents/20182/3719704/Homeless+Strategy+2019+to+2024.pdf/cd7349fe-ea02-7081-08ae-b2fc5bd31bc4

<sup>&</sup>lt;sup>5</sup> https://www.bristol.gov.uk/housing/housing-strategy-and-supporting-strategies

<sup>&</sup>lt;sup>6</sup> https://www.bristolonecity.com/one-city-plan/

In addition Bristol City Council has been successful in applying for a number of different funding streams from the Ministry for Housing, Communities and Local Government (MHCLG). The overall spend on services that prevent or reduce rough sleeping are set out in the table below (this excludes for the Social Impact Bond for 125 rough sleepers with complex needs 2017-21):

Project	Funding 2019-20	Funding source
Rough Sleeper Service	£521,553	Bristol City Council
Rough Sleeper Initiative funded services	£517,000	MHCLG
Rapid Rehousing Pathway	£1,063, 501	MHCLG
Total	£2,102,054	

For 2020-21, MHCLG have indicated that the funding levels will be at the same level as 2019-20, with a share of an additional £54 million for English Local Authorities that the Government has made available to reduce rough sleeping in 2020-21. Therefore Funding for 2020-21 will be a *minimum of £2,138,181* (including the slight uplift for BCC funding).

The recent Government spending review was only for one year due to the impact of Brexit and uncertainty around who will be in government next year. Despite the commitment to reducing rough sleeping being endorsed by all the political parties, longer term spending commitments may not be announced in time to give certainty for our procurement timetable.

There may be an early longer term Spending Review in Spring 2020; or this thinking could change and may be held at the more usual time (late Autumn 2020); alternatively, a future government may announce another one year settlement. We are therefore proposing to recommission - but retain some flexibility to alter the contract part way through if funding necessitates this - rather than extending existing services beyond the agree contract period.

#### Methodology

#### Pre-consultation - Staff and client feedback - 17<sup>th</sup> October to 31<sup>st</sup> October 2019

We are keen to keep the client and staff voice at the heart of our recommissioning. We set-up an intensive pre-consultation process as well as the current consultation as we want to hear what staff and service users feel is working and what is not working, in relation to preventing and reducing rough sleeping in Bristol and to find out what does or could make a real difference to them.

#### Feedback methods and mechanisms

Over the course of two weeks in October the homelessness commissioning team carried out a range of group and 1-2-1 sessions with a variety of staff teams and service users in order to inform this draft commissioning plan. Service user sessions took the form of focus groups, drop-ins and prearranged 1-2-1s via phone call or in person. We spoke to staff at team meetings and though 1-2-1's. Overall in the region of 35 staff and 70 service users, from a range of services for people rough sleeping, gave feedback in different ways during the two weeks.

This is a summary of the responses received from people. The full staff and client feedback report can be found in Appendix 1.

#### Key Themes emerging from the pre-consultation that have informed our thinking

#### (i) Feedback from service users

#### Key reasons for rough sleeping

The responses to this broadly reflected the main reasons causing rough sleeping recorded from the Rough Sleeper Service clients, of which the top three were eviction, relationship breakdown and leaving prison/remand.

#### How to prevent returning to R/S when housed

Feedback focussed on the need to have longer term ongoing support that links to the proposal to commission navigators to guide people through services and to provide a person-centred focus rather than a one-size-fits-all approach. Other responses covered practical help to cover rents and benefit advice, as well as help to give up alcohol and drugs, establishing a support network and help to access education, training and employment opportunities.

#### What prevents people leaving the streets?

Again, the lack of a person-centred focus was raised here alongside access to the right services and time to engage and build trust with people that echoes the need to establish a cohesive navigator approach. Not feeling safe in shelters and hostels was also highlighted.

#### Which people/services stand out as important?

A wide range of services were mentioned here that reflect the wider partnership of organisations that work in the city of commissioned and voluntary services.

#### What hasn't worked well for people?

The responses again reflected the need for a person centred-approach and the need for navigators to help people through a complexity of services with more or longer access to day and night shelter services. Difficulty finding or having enough services for people with multiple issues and for women were also highlighted. "I need mental health supported housing, but often with a drink problem they don't want to take you on"

#### What matters most to those sleeping rough?

Again, feedback was for clear support planning and help to access services reflecting the person – centred approach and the need for navigation. Services that can aid recovery and improve confidence and self-esteem were highlighted: "Doing volunteering helps me a lot, I feel proud".

#### (ii) Feedback from staff

#### What's working?

Generally good staff teams, partnership work and the ability to offer flexible solutions to individuals.

#### **Barriers and Challenges**

On the downside access and affordability of accommodation is an issue. Other barriers were KPIs distracting from a wider system approach which is more person-centred, limited communication around

services available, high staff turnover, a lack of women specific services and need for improved training to work with clients.

#### Which services do staff feel are having the most impact?

Again as with service-users, no one service dominated responses. A wide range of services were mentioned here that reflect the wider partnership of organisations that work in the city of commissioned and voluntary services.

#### Where do we currently have gaps?

Summary of responses:

- Lack of preventative services,
- support and specialist support (especially around mental health),
- lack of access to housing (including accessible housing and for those people with pets).
- need for personalised support and
- ongoing support or navigation.

#### What one change in our services do you think would help to reduce rough sleeping?

- staff and clients to have more influence,
- better sharing of information about services,
- staff to have the right competencies, skills and behaviours,
- services to focus on the needs of the individual,
- review Pathways accommodation & create more guardianship accommodation,
- services to have a greater emphasis on prevention with longer term funding.

#### How to spend time more valuably?

A number of changes to improve the system were suggested (see Appendix 1)

#### What motivates and demotivates you?

Again, valuable insight was given by staff of system approaches and the approach to services provision (more info in Appendix 1).

#### Staff and wellbeing

Staff work in a difficult environment and resources are stretched; however there is clearly a significant amount of satisfaction in obtaining outcomes for the people they are supporting.

The information from the pre-consultation has given us a valuable insight from both people using services and staff supporting them. Further consultation on this draft commissioning plan with service users, staff, providers and stakeholders will be conducted from 13<sup>th</sup> December until 31st January 2020.

#### Content final version:

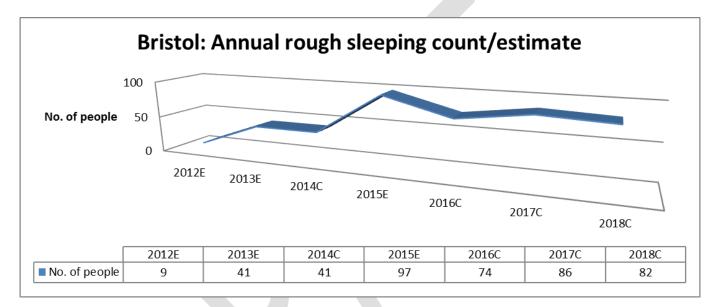
- 1. Details of pre-consultation
- 2. Details of consultation mid Dec to Mid Jan
- 3. Approval process for final plan

## Section B - Analysis

This section sets out a synopsis of the findings from the draft Needs Analysis that is also available as part of the consultation for this commissioning plan.

The information below sets out the information we have on levels of rough sleeping in the city including information on the profile of people using the Rough Sleeper Service.

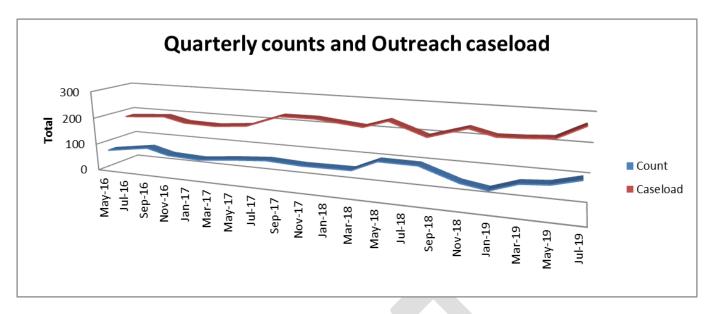
#### Demand/information on the extent of rough sleeping in the city



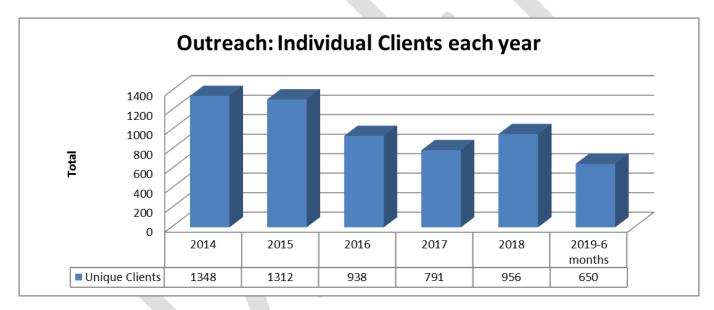
Annual rough sleeping counts/estimates

The number of people sleeping on the streets has risen significantly in Bristol since 2013 in a similar way to all parts of the country. The government has adopted annual 'snapshot' counts or estimates on any one given night in the autumn - prior to December - as their preferred methodology, but this does not give the full picture of the levels of people sleeping rough in the city.

Other data gives us a more accurate picture of the true scale of the number of people who end up rough sleeping in Bristol. Since May 2016, the Outreach team (Rough Sleeper Service) have conducted regular counts on a quarterly basis using the govt. count methodology. The graph below shows the information from these counts alongside the caseload of the Outreach team.



The information in the graph below shows the levels of individuals that have been worked with in each year since 2014. The overall figure began reducing after 2015 but has begun to increase again. It is anticipated that the Rough Sleeper Service will have contact with 1,300 people in 2019-20.



#### Needs of people sleeping rough in the city

This section summarises the key findings from the Needs Analysis.

#### **Bristol Population (Background information)**

- There is significant variance for life expectancy rates in different areas of the city reflecting lower life expectancy in the most deprived areas of the city.
- Significant population increases with further increases predicted particularly in central and Lawrence Hill wards.
- The city is increasingly diverse. Around 16% of the population are from BME backgrounds but Inner City & East has a much larger proportion of BME population (31%) however amongst children it is 28%.
- Almost 72,000 people in Bristol 17% of the population suffer from income deprivation.

#### Housing (Background information)

- There is a serious shortage of affordable housing in the city and rising homelessness.
- Between 2016 and 2036 the emerging target for Bristol is around 33,000 homes and the need for affordable homes in Bristol is projected to be an additional 18,800 between 2016 and 2036.
- In 2016 the cost of the cheapest homes in Bristol were over 9 times the annual earnings of lower income households
- The private rental sector is becoming particularly unaffordable to those on benefits or on low incomes.
- Social housing lets have reduced in the city to 1,800 per year, down from 3,000 per year 10 years ago.

#### **Client profiles**

- In 2018-19, 40% of people coming onto the streets were 'returners'<sup>7</sup>
- In 2018-19 the top 3 reasons for people rough sleeping were eviction, relationship breakdown and leaving prison/remand.
- 50% of people who have contact with the Outreach team have a verified local connection with Bristol between 2016-19.
- Mental health, drugs, alcohol, physical health and offending are the top five areas that people identified as needing support around in 2018-19.
- The majority of people (over 70%) who were sleeping on the streets and had contact with the Rough Sleeper Service were between the ages of 26-50.
- Women represent 18% of people rough sleeping in the city in 2018-19.
- There are higher levels of Black/African/Caribbean/Black British people and white other engaging with the service compared to the Bristol population.
- Aside from the UK, a significant number of people using the service in 2018-19 from Europe were from were from Poland, Romania and Portugal; there are high levels of people from Somalia.
- A significant number of people stated they had no religion, other or did not wish to disclose. 13% of people said they were Christian with 4% of people saying they were Muslim.
- The majority of people on entry to the service responded to say that they did not have a disability. There is clear evidence that the true level is likely to be in excess of 50% (see profiles of clients in Pathways and the Health Needs section).
- Information on sexual orientation does not reflect the level of 4% for Bristol Quality of life Survey 2016 and there is evidence that this level is likely to be higher.

#### Rough Sleeping and Single Homelessness (see section above on counts and estimates)

- The number of people sleeping rough in snapshot counts in Bristol has increased by 811% between 2010 and 2018 (from 9 to 82) and has risen by 165% nationally (from 1768 to 4677).
- It is estimated that there will be more than 1,300 people who end up rough sleeping in Bristol in 2019.
- The caseload for the Rough Sleeper Service is currently in excess of 250 people.

#### Health Needs

- People who end up sleeping rough often experience barriers in accessing both health and care services and experience poor health outcomes in comparison to the rest of society.
- The average age of death of men is 47 years old and even lower for homeless women at 43.
- *Lifestyle:* A national audit found that 77% of homeless people said they smoke, compared to 21% of the general population. 35% did not eat at least two meals a day.
- *Physical health:* 41% said that this was a long term problem, the most common longstanding physical health problems were musculoskeletal in nature, followed by respiratory and dental.

<sup>&</sup>lt;sup>7</sup> Defined as someone who has slept rough before but returned to the streets after a gap of at least 12 months

- Sexually transmitted infections and blood borne viruses: research that is available suggests that this patient group is at increased risk of acquiring STIs and BBVs compared to the general population.
- Substance misuse: Drug and alcohol addiction represent a significant health problem amongst homeless people, and it accounts for just over a third of deaths<sup>8</sup>. A national study found that 39% of homeless people said they take drugs, or are recovering from a drug problem and 27% said they have or are recovering from an alcohol problem<sup>9</sup>.
- *Mental Health:* 80% of homeless people report some form of mental health issue and 45% have a diagnosed mental health condition compared with 25% for the general population.
- *Suicide:* Homeless people are over nine times more likely to commit suicide, and a report by the Salvation Army found that 53% of homeless women and 34% of homeless men had attempted suicide at least once.
- Use of health services: Homeless people are heavy users of health services. A&E visits and hospital admissions are four to eight times higher than for the general public at a cost of an estimated £85 million per year.

#### **Client needs in accommodation Pathways**

- Mental Health: 73% of adults and 43% of young people have mental health needs.
- Physical Health: 42% of adults and 9% of young people have physical health needs.
- Drug and alcohol issues: 60% of adults and 21% of young people have drug & alcohol needs.
- *Exploitation & violence:* 17% of adults & 14% of young people have support needs relating to domestic violence, sexual violence, child sexual exploitation or trafficking and forced marriage.
- Sex work: 6% of adults and 1% of young people have support needs relating to sex work.
- Debt: 35% of adults and 33% of young people raised having debts as a major issue.
- *Benefits & sanctions:* 12% of adults and 10% of young people have no income due to delays in benefit payments or sanctions at the time of entering the services.

Further detail is included in the Needs Analysis.

#### **Current services**

The current Rough Sleeper Service was commissioned during 2013/14 and began on the 1<sup>st</sup> October 2014. At that time the number of people who were sleeping on the streets in Bristol – although increasing – was far less than the level of people who currently end up on the streets today. St Mungo's were successful in being awarded the tender. The original service based at the Compass Centre (Jamaica St) and 1 New St, St Jude's consisted of the following elements:

- Outreach and engagement with rough sleepers;
- Lease and management of the ground floor of the Jamaica Street hostel;
- Education, training and employment activities (ETE), including volunteering;
- Direct access and additional support to clients in 16 Extra Support Beds (OABs);
- Coordination of the Severe Weather Emergency Protocol (SWEP).
- Lease and management of 1 New Street premises in St Judes;
- Delivering a No Second Night Out service;
- Delivering a pre-employment support programme.

<sup>&</sup>lt;sup>8</sup> Crisis 2011

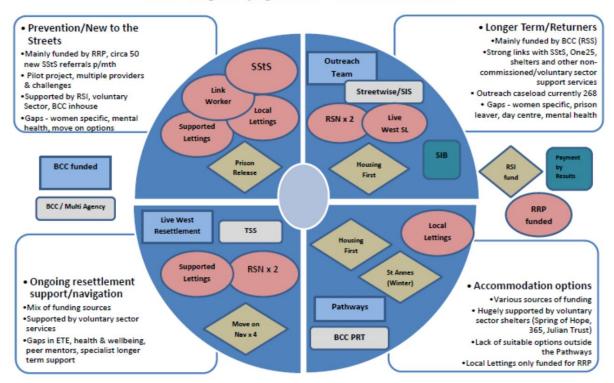
<sup>&</sup>lt;sup>9</sup> <u>https://www.homeless.org.uk/sites/default/files/site-</u> <u>attachments/The%20unhealthy%20state%20of%20homelessness%20FINAL.pdf</u>

As the number of people rough sleeping in the city has increased and new funding streams from the Ministry for Housing Communities and Local Government and BCC have been introduced the service has reduced ETE resources and shifted to provide more street outreach and engagement. There has been little time to procure new services – so waivers and a range of variations to existing contracts across the sector have been necessary.

#### **Additional services**

- MHCLG Entrenched Rough Sleeping Social Impact Bond 2017-21 (3.5 years)
- MCCLG Rough Sleeper Initiative Funding 2018-20 to fund the following projects in 2019-20:
- > 24 hour Winter Shelter in St Anne's House;
- Move-on team Supported Housing Pathways;
- Psychological support to assist move-on from Supported Housing Pathways;
- Extending the Golden Key Housing First programme (14 units);
- Working with prison leavers to prevent rough sleeping;
- Rapid Rehousing Pathway 2019-20:
- Somewhere Safe to Stay (SStS) service
- Local lettings project
- Supported lettings
- Navigators

As part of this re-commissioning process we have set out a map of Bristol rough sleeping services which also includes links with the Distinct Accommodation Pathways for adults (supported housing) and other associated services not mentioned above:



#### Bristol Rough Sleeping Services - Current Service Model

## Section C – A new 'whole system' approach

#### **Recommendation 1**

We are proposing to commission two main services that work directly with two different client groups set out below and will also set out these details in the Prior Information Notice (PIN). We are proposing that any bidder can only be awarded one of the two lots below:

#### **<u>1. A Prevention/New to the streets Service.</u>**

This service will be aimed at preventing rough sleeping or working with those people who are new to the streets. It will include the provision of a Hub where people can stay for a short period of time until a route off the streets is found for them e.g. Reconnection, a room in a private sector property or where there are significant support needs into supported housing. Private sector properties will be sourced through a commissioned service and access to the BCC PRS private sector team.

Currently we consider that functions such as prison release work and coordination will be shared between the prevention/new to the streets service and the longer term/returners service.

We are also seeking to develop a more outward facing service – e.g. a regular engagement/presence in the prisons, queues for open access hostels, active links with hospital discharge alongside the Homelessness Prevention Team, not necessarily a 9-5 building-based assessment service that is the current model.

The current pilot for the Somewhere Safe to Stay (SStS) Hub is at the Compass Centre at 1 Jamaica St. We are proposing to re-locate this service to 1 New St, St Judes (as the current preferred location).

There are currently two options regarding the Lease at 1 New St, St Judes (a property held in trust by Bristol City Council):

- (i) The lease is held by the successful provider of this contract for the duration of the contract.
- (ii) The lease is held by St Mungo's who continue to base their Recovery College there and the Recovery College dove-tails with the element of this service that focusses on recovery, confidence and improving skills.

A further option is to consider whether Bristol City Council, in line with the new approach to preventing rough sleeping through the Homelessness Reduction Act 2017, could consider delivering some or all of this service in-house.

#### 2. A longer term/returners service

The Longer term/returner services for those people who have spent many years rough sleeping, often moving in and out of accommodation and services or for people who return to rough sleeping after a gap of at least twelve months since they last left the streets.

Current thinking is that the service will have the following elements:

• Outreach and engagement with rough sleepers;

- Lease and management of the ground floor of the Jamaica Street hostel;
- Education, training and employment activities linked to the Bridge the Gap programme (subject to a review of the service);
- Direct access to Outreach Access beds;
- Some weekend 'day centre' provision to support and engage with those people waiting for supported accommodation;
- Coordination of the Severe Weather Emergency Protocol (SWEP);
- Coordination of quarterly and annual rough sleeper counts in the city;
- The provider of this service will take a lead in ensuring that all rough sleeper services work coherently and effectively and has strategic oversight of rough sleeping within the city.

This service is seen as our core service requirement and this would be prioritised in circumstances of reduced overall funding.

In recognition that a significant number of rough sleepers are known longer term rough sleepers/returners we are proposing to set bid evaluation criteria that reward a more personalised approach. This will entail agreeing outcome measures /monitoring that reflects this more person focussed service expectation.

#### TUPE

Work of a similar nature to the proposed new services is currently undertaken by another organisation on behalf of the Council. As a bidder can only be awarded one of the two lots in the new service it is possible that TUPE will apply. The Council will endeavour to provide the relevant staffing information with the bid documents. However it will be for each bidder to seek independent advice and to reach its own view on the application of TUPE.

#### Recommendation 2

#### **Ongoing resettlement support/navigation**

<u>Flexible in house resettlement support/navigation</u> – We currently fund some in house provision that we propose to retain and to consider whether there is also in-house involvement in delivery of a wider navigation service.

In addition/alternatively, we propose to develop a Framework of providers who are able to provide resettlement support/navigation services.

This will then lead to call offs for one or more contracts to include:

- (i) Floating support and resettlement to people moving into accommodation (private and social housing) outside of commissioned Pathways process.
- (ii) Navigation service that help engage with people who are rough sleeping and help to guide them through often complex and disparate services e.g. out of prison and into accommodation, from engagement on the streets and into accommodation. This service will also be involved in identifying system failures/gaps and blockages for both commissioners and strategic meeting groups to address. We are considering creating one navigation service/team which could potentially have TUPE implications.

This framework will also enable us to respond quickly to future funding opportunities, for example:

- (iii) Services that can deliver longer term support when current programmes end e.g. Housing First & Street Impact Bristol.
- (iv) New initiatives/interventions for clients who require longer term support and facilitated access to specialist services e.g. any future Housing First programmes.
- (v) Support services for longer term supported housing initiatives e.g. for those with enduring needs/end of life care.

All the services above will use personal budgets with clients to assist people to move through systems and pathways towards recovery and unlock any blockages.

#### **Recommendation 3**

#### Accommodation Options

**PRS coordination** – We recognise that there is a need for coordination in the city in relation to access the private rental sector. Coordination of this will remain with Bristol City Council.

In addition, we propose to develop a Framework of providers who are able to provide accommodationtype services and also enable us to respond quickly to future opportunities. This could include one or more contracts for the:

- (i) Provision of overnight or 24 hour shelter provision in the city whilst people have to wait to secure accommodation to move off the streets.
- (ii) Local lettings agency that secures access to private sector accommodation options.
- (iii) Securing accommodation within the social housing and Private Rental Sector for Housing First type schemes that require longer term accommodation and a tolerant approach from the landlord.
- (iv) Longer term supported accommodation for those with enduring needs
- (v) Developing effective shared housing models in the city in social housing either with Registered Providers or within Bristol City Council housing stock.

#### Draft recommendations not included in this plan/whole system improvements

#### Access to health services

A continued focus on improving access to health services in the city – physical health, mental health and drug and alcohol services - building on the work of the Homeless Health Service and the Homeless Support Team (hospital discharge) and the ACE Team, as well as access to dental and optician services.

#### Prevention

Improve prevention of homelessness in the city by ensuring that services link into community based organisations and services throughout the city.

Seek to reduce evictions from all tenures, particularly focussing on social housing as an area that we can exert a certain amount of control over.

#### Welfare Benefit Advice

Improve access to welfare benefit advice for people who are in rough sleeping or are in services and in recovery to reduce the impact Universal Credit and other welfare reforms for those who are homeless or at risk of homelessness.

### Section D – Recommissioning Intentions

#### What we are proposing to buy

The suggested proposals in this plan will lead to the following homelessness prevention and recovery services:

- A prevention/new to the streets service for people likely to end of sleeping rough or preventing a second night on the streets.
- A longer term/returner service for people sleeping rough (with outcome measures recognising a more person-centred approach).
- A Framework for resettlement, longer term support and navigation
- A Framework to provide and source suitable accommodation such as night shelters, PRS, shared and longer term accommodation.

#### **Process for recommissioning**

Service	Process	Timescale
Prevention/new	This lot will be through a competitive tender.	Competitive process
to the streets		<ul> <li>– Spring /early</li> </ul>
service	The current SStS service will be provided by St Mungo's at the	summer 2020
	Compass Centre until the current contract comes to an end on	
	30 <sup>th</sup> September 2020.	New service in place
		– 1 <sup>st</sup> October 2020
	Contracts are proposed to be for five years with the option to	
	extend for up to a further two periods of one year each.	
A longer	This lot will be through a competitive tender.	Competitive process
term/returner		– Spring /early
service for	The current Rough Sleeper Service will be provided by St	summer 2020
people sleeping	Mungo's at 1 New St until the current contract comes to an	
rough.	end on 30 <sup>th</sup> September 2020.	New service in place
Baseline		– 1 <sup>st</sup> October 2020
contract if	Contracts are proposed to be for five years with the option to	
funding reduces	extend for up to a further two periods of one year each.	
Resettlement,	This will be a Framework of providers with competitive call-	Current services
longer term	offs for the following services (and any similar types of	extended/varied
support and	services that may be needed):	potentially to 31 <sup>st</sup>
navigation		March 2021 (this
	<ul> <li>Floating support and resettlement</li> </ul>	could be earlier e.g.
	Navigation	31 <sup>st</sup> December

	Longer term support	2020)
	The Framework will be in place for five years with the option to extend for up to a further two periods of one year each. Contract lengths will be determined by the Framework.	Framework established and call- offs – Autumn 2020
		New service in place at the latest – 1 <sup>st</sup> April 2021 (this could be earlier e.g. 1 <sup>st</sup> Jan 2021)
Accommodation Framework	<ul> <li>This will be a Framework of providers with competitive calloffs for the following services (and any similar types of services that may be needed):</li> <li>Shelter provision</li> <li>Local lettings agency</li> <li>Longer term accommodation</li> </ul> The Framework will be in place for five years with the option	Current services likely to be extended/varied to 31 <sup>st</sup> March 2021 (this could be earlier e.g. 31 <sup>st</sup> December 2020)
	to extend for up to a further two periods of one year each. Contract lengths will be determined by the Framework.	Framework established and call- offs – Autumn 2020 New service in place
		$-1^{st}$ April 2021 (this could be earlier e.g. $1^{st}$ Jan 2021)

All contracts will have variation and termination clauses which allow for changes over time.

## Section E – Appendices

Appendix 1 – October Staff and Service User feedback Analysis