

Bristol Rough Sleeping Services Recommissioning - Staff and Service User feedback 17th October – 31st October 2019

Background and Context

Bristol City Council is currently recommissioning its rough sleeping homelessness services – to enable us to have remodelled services in place by October 2020. We are keen to keep the service user and staff voice at the heart of our recommissioning. We want to hear what they feel is working and what is not, hear their ideas, and find out what does or could make a real difference to them – both in the context of *what* services we should be providing and also the way in we deliver those services. 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 gather their feedback.

Feedback methods and mechanisms

Overall, in the region of 35 staff and 70 service users from a range of our rough sleeping services gave feedback in different ways during the two weeks.

Service user sessions took the form of focus groups, drop-ins and prearranged 1-2-1's via phone call or in person. We spoke to staff at team meetings and through 1-2-1's.

There was also an online questionnaire for staff and service users to complete independently, or in the case of some service users, with the help of a support worker. Paper versions of the questionnaire were made available for those who preferred this method or who found the online version inaccessible to them in any way. The survey was sent to a wide range of commissioned and non-commissioned services/organisations who work with people in Bristol who are rough sleeping, are at risk of rough sleeping or who have formerly rough sleept.

What did we ask?

A set of 6 questions for Service Users and 8 questions for staff were put together and these same questions formed the basis of the questionnaire and all 1-2-1 and group sessions.

See Appendix 1 to view the two sets of questions.



Group and 1-2-1 feedback sessions undertaken:

Staff: Outreach Team (team session), Somewhere Safe to Stay (team session and 1-2-1's with operational Service Manager and Deputy Manager).

Service Users: St Annes House (drop-in session), Somewhere Safe to Stay (focus group), Methodist Centre (drop-in session), Spring of Hope (drop-in session), One25 (drop-in session).

- 15 service users attended the focus group at Somewhere Safe to Stay/Compass Centre.
- 8 women attended the drop in at Spring of Hope.
- 10 service users attended the drop in at the Methodist Centre.

Other drop-ins (at One25 and St Annes) were less well attended, but still produced some quality feedback from a handful of services users.

Responses to the questionnaire

In total 53 service users completed feedback questionnaires, via a range of services as follows:

Service/Organisation	Number of returns
St Annes Shelter	3
Somewhere Safe to Stay/Compass Centre	4
Prison Release worker	8
Supported Lettings (BCC)	2
Supported Lettings (Live West)	2
Move On Navigator	3
365 Shelter	1
Methodist Centre	10
Recovery College	5
One25	3
Spring of Hope	8
Anonymous/Not known	4
Total	53

This feedback was given either by completion of the online questionnaire, completing a paper form with or without a support worker or completing a form with a member of the commissioning team at a drop-in session.

Bristol City Council Homelessness Commissioning team would like to thank all service users and staff who submitted feedback and to all staff and managers who supported us with obtaining service user feedback.



Findings based on feedback collected from Service Users

From analysis of the feedback collected from services users, we have been able to see there are consistent themes across the six questions asked, as highlighted in the table below.

Key reasons for rough sleeping How to prevent returning to R/S when housed Eviction (hostels and PRS) Ongoing support to maintain housing Relationship breakdown Ongoing support to "stay on track" and keep moving forward Losing job Not feeling or being alone **Rent Arrears** Someone to call when there are issues, Benefits issues - new or escalating struggles or when things go wrong Prison Release - nowhere to be released Someone to keep checking in and for this to or being recalled and losing to be available longer term accommodation Services "sticking with" clients rather Old contacts or old way of life "pulling than just evicting or discharging from the them back in" service Abandoning housing Support to manage rent/rent paid direct Stress/Mental Health decline to landlord Returning to substance misuse Finding work, volunteering having Not knowing who to contact/turn to for structure and something to do help. Lack of information about services Support network, relationships and Fleeing Domestic Violence relationship connections Not returning to alcohol or drugs Nb. In most cases the underlying reason was a combination of factors above What prevents people leaving the streets? Which people/services stand out as important? (Most commonly mentioned in feedback, no particular order) Being "stuck in a rut" and not able or ready to engage immediately. Need Resettlement/Supported Lettings more regular and consistent contact Rough Sleeping Navigator from services to build trust & break Outreach down barriers Prison Release Worker Alcohol/drug dependency One25 Lack of good and easily accessible Spring of Hope information about services and what to ARA do/where to go **BDP** Lack of housing and accommodation SIB options (speed of access and range) ACE Services don't (or can't) sufficiently take Health Services, Homeless Health Centre into account each person's individual set Friends and family of needs, circumstances and wants. Places for daytime, shower, food, wet Too much "one size fits all" approach clinic, shelter: No phone – difficulty in reaching or Wild Goose contacting/staying in contact with Julian Trust services

Probation



- Feeling that our hostels & shelters generally negative and risky environment to be. Chaotic and noisy, especially Compass Centre, Level 1 hostels
- Fear and past experience of services
- It's where their 'friends and family' are
- Soups and clothes runs
- St Annes things to do, 24hour
- Somewhere Safe to Stay
- Recovery College

What hasn't worked well for people?

- Lack of good and easily accessible information about services and what to do/where to go
- Feeling alone and hopeless. Not enough regular and consistent (same person) contact from Outreach/other Rough Sleeping services
- Not being able to find or contact Outreach worker (or to be found)
- System is too complex. No one to guide people through it.
- Nowhere for people to go in the day. No structure, routine. People are bored and feeling useless and unvalued
- Not enough provision (or not aware of provision) for staying clean and welldressed to able to maintain some pride
- Lack of phones/ways to contact support, services, family, friends (phones get stolen a lot, lost chargers, nowhere to charge, no credit)
- Unkindness/cruelty from public
- Feeling that main focus is on those with highest needs and "who shouts loudest"
- Sanctions/deductions from benefits when homeless and rough sleeping
- Restrictive opening hours of shelters, late opening/early kick out
- Nowhere for you if you need mental health support and are drinking or taking drugs at the same time
- Not enough provision for "women only" e.g. SOH not 7days, One25 drop in not able to be open everyday

What matters most to those sleeping rough?

- Finding and keeping housing
- Stability and security "putting down roots"
- Feeling like there is a clear plan. Knowing at each stage what's next and feeling like there is movement forward and hope.
- "Getting and staying clean" alcohol and drug recovery and abstinence
- Relationships and connections (pets, establishing or re-establishing family relationships and friendships)
- Keeping busy, having something to do to stop boredom
- Getting some routine and structure
- Feeling useful and valued
- Finding and keeping work
- Getting some proper help with mental and emotional health
- To have more regular and consistent communication
- To not feel so alone or disconnected.
- Someone to be a "constant" and to guide through the services and system.
- Support to see/have contact with children
- Going to college and training
- Being able to keep faith and "on the right path" when difficult times hit
- Not having to rough sleep again
- Feeling safe
- To be able to feel proud
- To feel important and noticed
- To have somewhere to call home



Client Feedback - In their own words.....

"I need mental health supported housing, but often with a drink problem they don't want to take you on"

"I came out of jail and there was no help quick enough for me on the outside"

"Being on the streets with your mate is like being home or being with your family"

"My main concern is my dog being alright, I have to make sure she is safe and secure. She means so much to me"

"I am worried about being in housing again as in the past people have found out where I am and beat me up"

"Doing volunteering helps me a lot, I feel proud"

"I still feel stressed from living on the streets; sometimes I sleep with the light on and am worried about noises I hear"

"everything works for me here in a hard way, because I am used to it. But I would rather be indoors"

"It's important I keep a roof over my head, to keep my home"



Feedback from Staff

Whilst we are not able to list every single idea and piece of staff feedback here, we have been able to see there are consistent themes and feedback across the eight questions asked, as highlighted in the table below. All feedback however has been reviewed with a view to taking forward as many of staff ideas & feedback to the appropriate forums, in order to improve and develop existing services.

What's working?

- Good city wide recognition of the issue
- Overall a good wide range of rough sleeping services, and linked support services, easier to be person centred
- Good relationships, joint working and partnerships between rough sleeping services – particularly supports and facilitates client engagement
- Multi-agency approach good and growing links with police, GP's, prison/probation, hospitals
- Good team morale and support
- Good diversity of staff
- Being able to be flexible and creative in the way we deliver services and work with clients
- Services that have smaller caseloads per worker/team and are able to give more time and focus on clients
- Having access to HSR as an information source and way to make referrals for housing
- Having access to money for client welfare/personal budgets
- Prompt assessment and response for people who are new to the streets
- Appropriate referrals between services
- Innovative solutions e.g. Doctor going out with Outreach Team
- An increasing focus on the taking of services and support to where the client is at – Assertive Outreach
- Regular and bigger street counts missing less people and covering a wider area of the city
- Changes to the way Outreach works. Not being based in compass centre means they are out more and more assertive

Barriers and Challenges

- Not enough accommodation (temp or long term)
- Cost and availability of Private Rented
- Too much focus on meeting own service KPI's/targets. Not enough consideration of wider picture and impact
- Mixed messages/unrealistic expectations given to clients by different services.
- Criteria for entry into services too restrictive and generic. Is not always person centred, nor takes into account people with more complex needs. Same with clients being discharged or closed from services due to non-engagement.
- Stretched resource everywhere. A lot of firefighting. No time to sit back and take time to consider what is best for the client. Can lead to poor decisions and more work later on
- Too many evictions from supported housing pathways
- Some inadequate communication and sharing of information about clients between organisations and services
- Hard to keep up with all the services and resources available for clients – and not easy to find the information about what is available
- Not having the right tools to aid effective & smart working (laptop, tablet, phone, systems)
- High turnover of staff in sector. Impacts clients, communication, consistency
- Lack of places to deliver women specific support. Not always being able to cater for or be flexible enough to meet needs of women
- Knowledge, skills and confidence of



outreach into services (e.g. Methodist Centre)

Outreach Access Beds

some staff – particularly when working with harder to reach or more chaotic/complex needs clients

Management/inter-agency politics and battles

Which services do staff feel are having the most impact?

(A wide range of services were mentioned in the feedback. The following are the services that were mentioned a number of times so stand out as being the ones staff feel are most important out of everything available)

- SStS
- Outreach
- Recovery College
- Night Shelters (e.g. 365, Julian Trust)
- St Annes
- Rough Sleeping Navigators
- Housing First
- SIB
- Spring of Hope and One25 for women
- Methodist Centre
- Homeless Health Centre
- Supported Lettings/Resettlement
- BCC Private Rented Team

Where do we currently have gaps?

- Prevention services. "Catching people before they fall"
- Lack of specialist (and quick) support around mental and emotional health
- Specific services for those with Learning Difficulties (and skills, knowledge, expertise)
- Not enough resources in Outreach team
- Affordable housing not enough, limited range, not available quickly enough.
- Lack of housing for people with pets and specific needs (e.g. prison leavers, MAPPA, vulnerable women, Asylum Seekers, Care Leavers)
- Lack of immediate access housing (e.g. for people leaving hospital, prison, Rehab, NAS)
- Training gaps especially for frontline staff in relation to complex needs and trauma
- Places for people to go in the day that provides routine, structure and activities/things to do
- Inadequate Resettlement and ongoing Tenancy Sustainment services. Current provision too generic, too short term
- Support for clients on Outreach Team caseload who are in OAB's
- Personalised support for clients wanting to train to work and help for client to transition to work
- Ongoing contact "keeping in touch" and monitoring of clients who leave our services. Both to see longer term impact and help prevent issues and people returning to rough sleeping
- Wet clinics/safe injection sites



One change

- Staff and clients voices to be at more of the strategic and partnership meetings so they have more influence on the way we do things as a city
- Better sharing of information, updated and outcomes with staff. Often feel out of touch and "last to know"
- The right people recruited into all rolesconsistent attitudes, behaviours and competencies. Someone that oversees this or set guidelines for all services to meet when recruiting. One poor experience for a client can have a huge impact and unravel a lot of good work.
- Base system and services on person's individual needs rather than length of rough sleeping
- Move SStS from Compass Centre
- More Level 3 and 4 accommodation
- Review Pathways model is not working
- Fewer large hostel sites (e.g. Logos/Ron Jones) in favour of more sites with smaller number units.
- More money spent on and focus on prevention and ongoing resettlement and tenancy sustainment support
- A de-concentration of services. Too much located in the same area of the city
- Less reliance on volunteers, more focus on recruiting and maintaining a quality and consistent staff base
- More use of empty buildings/guardianship scheme (but needs support and further move on element attached else will just fill up and block up)
- Less short term funded services that come and go. Better to have fewer, longer term and consistent services than lots of temporary ones.
- Spend some money on revamping and renovating our buildings and hostels to make them more uplifting and positive places for clients and staff to be

How to spend time more valuably?

- More resource/staff in service. Always stretched
- Move SStS from Compass Centre
- Less time having to deal with incidents and managing behaviour
- More admin support roles in services
- Being able to have more focussed 1-2-1 time with clients and lower caseload
- Better systems and ways to share information across services and organisations. Less duplication of data input and recording. A one city, one system approach.
- More regular review of staffing structure and processes. Letting staff lead more in the design or feed into staffing structures in services. Feel powerless to make changes that could have a huge impact.
- Review and/or put in place a fair, clear and consistent policy and procedure regarding referrals and nominations on HSR.
- Making sure all staff across all services have had sufficient training to work with our clients – someone to monitor this
- More fast track ways into certain services and departments for those who are rough sleeping (or the person working with them) to quickly resolve key issues such as ID, benefits, bank accounts
- Not spending so much time in meetings
- A regularly updated resource to help determine exactly who to go to in each service and how to obtain the support you need for your client (or to be able to signpost them for the right support).



What motivates?

- The cause people should not be homeless and sleeping on our streets
- Service Users seeing positive changes and people's lives moving forward
- Making a difference
- Feeling like (and knowing i.e. having access to more stats and successful outcomes) the work is actually having an impact
- Colleagues and having a great team around to work with and get support from.
- Positive environments to work in
- Giving people chances. Not giving up on someone too quickly and the moment you feel a breakthough with someone, however small or large
- Seeing a client housed and off the streets
- Effective multi-agency working
- Success and positive outcomes for clients – being able to get and see result for people
- Feeling valued in the work
- Feeling supported by manager and team
- Feeling appreciated when someone (client, colleague or manager) says thank you
- Being and feeling trusted to make own decisions and not always having to ask permission or for authorisation
- Being able to try new things
- Being the service that sees positive outcomes happen for clients knowing other services have failed them in the past. Changing clients views of services
- Seeing the commitment of the team and successes. As a manager it's nice to be part of that and see people develop.

What demotivates?

- Decisions made by management which staff feel are not good for delivering services or for clients. Not being able to influence these decisions enough
- Feeling that decisions are made for staff and clients not with.
- Lack of housing and move on options
- Too much admin and paperwork
- Buildings that are run down, dated, not fit for purpose, depressing environments and atmospheres. Brings everyone down and impacts wellbeing service delivery/positive outcomes
- Seeing/feeling we are letting clients down with poor and outdated provision, lack of communication, systems and policies that don't yet properly provide enough flexibility for those with complex needs.
- Too many evictions rather than a focus on resolve
- Lack of funding and longer term/permanent roles for staff. Poor job security
- Unreachable targets/KPI's and/or impact of external factors out of control
- Seeing great services start, get going, start having an impact and then disappear as not funded anymore
- Poor salaries for front line staff who are taking the brunt of the impact of client work
- Rushed way of services being set up. No time to plan, implement ideas, and improvements. Feeling on a back foot from the outset.



What do staff say about their wellbeing?

The majority of staff fed back that their feeling of wellbeing at work can range between 2 and 5 depending what is happening on any given day or week, the average score being 3.5.

The key things that were reported as driving wellbeing down were:

- Feeling stretched and under resourced
- Erratic or tiring shift work and work patterns
- Backlogs of work
- Stress and firefighting. Having to be reactive, not proactive
- Seeing managers stressed and/or not seeing managers and feeling unsupported
- Feeling that we are failing some clients
- Seeing how things could work better, but feeling powerless to make changes or not being involved in decision making
- Not feeling valued (both in a monetary sense but also being not thanked for work or feeling hard work is noticed)
- Seeing the issue (rough sleeping) get worse, feeling like we are not having an overall impact

The key things that were reported improving wellbeing were:

- Seeing successful and positive outcomes for clients
- Feeling of making a difference
- Positive work environment
- Feeling supported by managers and team
- Seeing staff develop and flourish
- Flexible working
- Time out team socials, away days, being able to work from home
- Time off



Appendix - Client Feedback Questions

Sleeping on the streets	Why are we asking?	
What led to you to sleep on the streets and do	How can we better help prevent people from rough	
you think there is anything that could have	sleeping?	
been done either by you, support services or		
anyone else to prevent you from rough		
sleeping?		
When you are housed or (or now you are	What helps or hinders people sustaining housing?	
housed) what do you think would help prevent		
you from returning to sleeping on the streets?		
What prevents you or other people you know	How can we better help prevent people from rough	
who are sleeping rough from wanting to or	sleeping/leave the streets?	
being able to leave the streets?		
What has worked well/not so well?		
Are there any particular people or services that	What is working? What services have most impact?	
stand out for you as being really important to		
you right now? Who/what are they and why?		
What didn't work/hasn't worked so well for	What is not working?	
you?		
What's most important to you right now? Or	What matters most to Service Users at different	
what matters most to you right now? (this may	stages of their journey?	
not relate to housing)		

Staff Feedback Questions

Clien	t work	What do we want to know?
Q1	What is working that enables you to do the right thing for the person you are trying to help?	What's working?
Q2	What are the barriers and challenges that prevent you?	What's not working?
Q3	Thinking about our range of services for people who are rough sleeping -which do you think are having the most positive impact?	Where are we getting it right?
Q4	Where do you think we currently have gaps in the services we provide?	Gaps in provision
Q5	What one change in our services do you think would help to reduce rough sleeping?	Creative ideas – 'right placement and support first time' ethos
Staff efficiency, wellbeing and morale		
Q6	What could be changed to enable you to spend more time on the things you feel are important and valuable to your role and your clients?	Valuable work versus non-valuable work
Q7	What motivates and demotivates you in your role?	Staff motivations and morale
Q8	How would you rate your wellbeing at work? (rate 1-5, 1 being low, 5 being high) Why?	Staff resilience and wellbeing to deliver our services.