City of London Rough Sleeping and COVID-19 Recovery

Next steps for rough sleepers placed in emergency accommodation by the City of London

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Executive summary

- 1.1. In March, plans were put in place by the Government, Greater London Authority (GLA) and London boroughs to protect London's rough sleepers on the streets, in assessment centres and in shelters from COVID-19 and limit wider transmission. These involved the swift mass procurement of safe accommodation, primarily hotels, and working with charities, the NHS and public health the provision of wraparound and specialist support.
- 1.2. The purpose of this approach is to reduce the impact of COVID-19 on people sleeping rough and, ultimately, to prevent deaths during this public health emergency. Its basic principles are to:
 - focus on people with a history of rough sleeping who are on the streets or in emergency accommodation where it is difficult to self-isolate or socially distance, such as shelters and assessment centres
 - make sure that these people have access to the facilities that enable them to adhere to public health guidance on hygiene or isolation, including en-suite facilities and no shared sleeping spaces – to prevent and reduce infection
 - utilise powers and funding in place as a result of the COVID-19 emergency to assist, where appropriate, those with no recourse to public funds (NRPF) who require shelter and other forms of support
 - provide support to those accommodated, to both enable them to remain protected from COVID-19 and meet their wider needs.
- 1.3. At the same time, the City of London, through the Outreach service delivered by St Mungo's, was able to place rough sleepers sleeping in the Square Mile into the GLA procured provision, as well as City of London procured provision.
- 1.4. In May, the GLA working with London councils, Public Health England, the NHS and supported by MHCLG produced a next steps strategy setting out broad principles and responsibilities to support future accommodation and well-being plans for all those in the emergency accommodation (see Appendix 1). The delivery and oversight of the plan will be via a central Rough Sleeping Strategic Group which will report into the Government's Taskforce on the COVID-19 response to rough sleeping and next steps led by Dame Louise Casey.
- 1.5. This document is the City of London's own plan and should be read in conjunction with the overarching regional next steps plan.



Principles

2.0. The City of London plan will support the regional plan and ensure that:

Principles aligned to the Rough Sleeping Strategic Group

- No-one who has been placed in emergency accommodation by the City of London in response to the COVID-19 public health crisis is asked to leave that emergency accommodation without an offer of support to end their rough sleeping. We will work hard to ensure the offer of support is safe and suitable given individual needs and circumstances
- 2. There is capacity and capability to deliver and implement In For Good offers of support for all City of London rough sleepers
- 3. Continued protection from COVID-19 is provided for those City of London rough sleepers who need it, using a cohort approach to care, protect and prevent
- 4. The City of London will work with London boroughs, so that no boroughs, including the City of London, are disproportionately impacted as a result of hosting rough sleepers from outside their boroughs during the emergency
- 5. The City of London supports the London-wide approach which will complement the efforts of individual boroughs and providers, and vice versa
- 6. There is an integrated approach with City and Hackney health and social care to secure access to services and continuity of care
- 7. The roll out of the plan is gradual, to avoid a 'cliff edge' and overload of services as lockdown is lifted

City of London Specific Principles

- 8. Some rough sleepers may choose to refuse their offer of support. The City of London will work hard to prevent this but, ultimately, the public health emergency does not bestow upon the City of London the power, or the responsibility, to keep accommodating rough sleepers in emergency accommodation once an offer of support more suitable to the rough sleeper's needs and circumstances has been made and refused
- 9. Enable the transition from recovery plans to long term capacity development



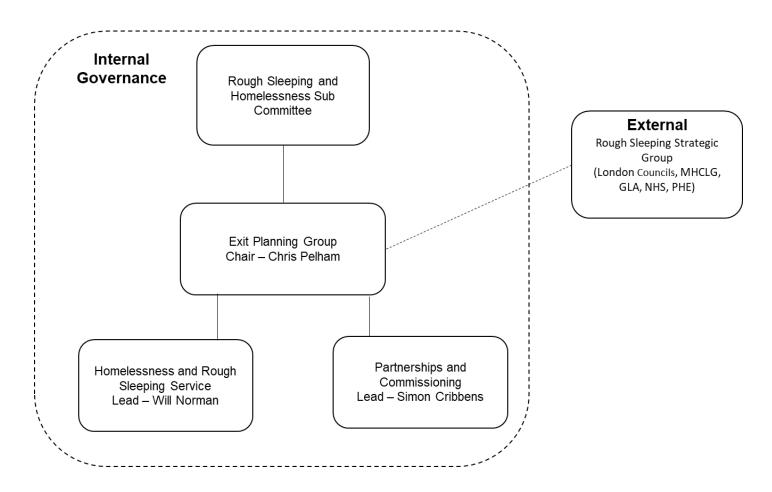
Scope

- 3.0. This planning document reflects the City of London's specific plans, which have been designed in collaboration with a larger effort being steered by Rough Sleeping Strategic Group (London councils, MHCLG, GLA, NHS, PHE) to ensure the safe recovery of rough sleeping population following the COVID-19 health crisis. In addition to ensuring safe recovery from COVID-19, this plan will also include actions specific to developing new interventions that will increase the long-term capacity of the service, as endorsed by members March 2020. The scope of this recovery plan extends to the cohort of rough sleepers that the City of London has a responsibility for, which is determined by those individuals with a local connection and those who were present in the City of London prior to March 1st 2020. On this basis, analysis of our client data anticipates that the City of London will be responsible for an estimated 61 individuals (56 of those are known, see 5.1) as part of the recovery plan and our goal will be to secure an accommodation or reconnection outcome for those individuals. In addition, an estimated 13 rough sleepers who remain on the street will require additional support and inclusion within service planning.
- 3.1. The scale and type of support required for this cohort will be determined by individual clients' personal support needs, their vulnerability to COVID-19 and their longer-term accommodation or reconnection requirements. To achieve this, it is anticipated that a range of accommodation, reconnection and support options will be necessary, which will include a combination of the following:
 - a) Intensive and assertive casework,
 - b) Private rented sector accommodation,
 - c) Supported accommodation, such as hostels,
 - d) Reconnection services to locations outside of the City of London (and outside of the UK) where clients have a local link and entitlement to services,
 - e) Tenancy support for those who require it,
 - f) Health services to continue to care, protect and prevent with respect to COVID-19 (and those issues that are a barrier to move on or life away from streets).
- 3.3. To avoid duplication of effort with the wider London approach, the Recovery Planning Group will liaise with the Rough Sleeping Strategic Group to ensure that the scope of our Recovery Planning does not overlap with theirs, and also in combination ensure that our combined effort provides offers of support to all individuals within our responsibility.
- 3.4. Finally, the Recovery Planning will include in its scope the longer-term proposal set out by City of London prior to the COVID-19 health crisis. We will explore options that help join up the outcomes of this plan with the ongoing ambition set out in the City of London growth proposal to ensure that there is long term capacity being development as part of the recovery plan.



Working together in the City of London to deliver the plan

4.0. This planning document provides an overview of the governance in relation to the plan. The delivery of the plan will be overseen by the Recovery Planning Group and report into the City of London's Rough Sleeping and Homelessness Sub Committee and Health and Well Being Board.





Group	Responsibility
Rough Sleeping and Homelessness Sub Committee and Health and Well Being Board	To provide governance oversight and member input to support and monitor delivery
	To design and develop the Recovery plan
Recovery Planning Group	To ensure implementation of the plan through resources attached to the Exit Group and in liaison with the CoL service
	Monitor success against the 8 principles within the scope of the plan and mitigate risks and issues
	To raise issues and challenges to the Life off the Streets Taskforce and Rough Sleeping Strategic Group
	To provide strategic public health leadership via Directors of Public Health.
	To commission relevant accommodation, reconnection and public health services, including drug and alcohol treatment services.
	To provide regular communication updates on progress against the plan to key stakeholders
Homelessness and Rough Sleeping Service	To advise the Recovery Planning Group on best practice
& Partnerships and Commissioning	To implement activity within the plan where required
External to City of London – Rough Sleeping Strategic Group (London councils, MHCLG, GLA, NHS, PHE)	To seek mitigations and solutions to risks and challenges that could impede the effective delivery of the strategy. To monitor and oversee delivery. Reporting into the Rough Sleeping COVID Response and Recovery Taskforce.

Where are we now?

Overview

- 5.0. In the first phase of the COVID-19 pandemic the majority of rough sleepers have been accommodated from the City's streets. Of this cohort, a number of individuals have some form of local connection to the City and need a new longer-term solution. In addition, many were rough sleeping in the City pre-March 1st, and though they may have an unclear connection to the City, they also require a new longer-term service offer. It is anticipated therefore, that all those who remain rough sleeping in the City at this time, and those who have a local connection or were rough sleeping in the City prior to March 1st and were offered emergency accommodation fall within the scope of this Recovery plan.
- 5.1. A detailed needs assessment has been completed on the whole cohort, which will be kept up to date to help ensure the most suitable pathway and support for each individual. The needs assessment provides information related to the following:



- a) Current accommodation
- b) Pre COVID-19 situation
- c) Local connection and reconnection needs
- d) Needs and Risks (Physical/Mental Health, substance dependency, mobility, known behaviours)
- e) Accommodation needs short and long term
- f) Support needs

Based on the needs assessment (as of June 3rd) it is anticipated that the following provision will be required to support the cohort currently within emergency accommodation:

Pathway	Number of individuals anticipated to require pathway
Assistance to reconnect to family and friends/return home	4
PRS/social housing tenancy with start-up floating support	8
Supported housing or housing led with floating support	31
Housing First/Supported Housing with intensive support	13

- 5.2. Within the cohort it is expected that just under half are NRPF (No Recourse to Public Funds). It is acknowledged by the external Rough Sleeping Strategic Group that these cohorts will present an additional challenge, and therefore the City of London Recovery Group will work with colleagues internally and externally to develop offers of support. Though the needs assessments may indicate that a particular rough sleeper needs a PRS move on offer or a supported accommodation place, nationality and lack of recourse to public funds might mean that this is not possible. The City will, in such circumstances, either make sure a safe and supported reconnections offer is made or will work with individual rough sleepers to achieve settled status and access to public funds dependent on whether the individual is likely to qualify.
- 5.3. From April, street surveys have increased to fortnightly, 13 individuals remain on the street (as of May 21st). Outreach teams are working to support those still rough sleeping, to support them into accommodation.

Provision of accommodation

- 5.4. The current supply of emergency accommodation is only secure in the short term (until the end of June). Recent pronouncements by the GLA suggest they are keen to avoid creating a cliff-edge for boroughs around withdrawal of the accommodation they are providing and that they are exploring the use of student accommodation if hotels begin to reopen and want to end their involvement in the scheme. We are writing to the Rough Sleeping Strategic Group (which includes the GLA) to ask for clarification on whether extension of provision is available where individuals are awaiting move on accommodation options. It is also intended that a planned extension of the 16 City of London funded hotel beds is explored as more time will certainly be needed to secure suitable reconnection or accommodation outcomes.
- 5.5. In addition to emergency accommodation already occupied, the Recovery Planning Group is in the process of developing more capacity of move on accommodation. A 20-bed supported accommodation hostel has been leased through the YHA within the City of London with 8 clients already moved into the site. The lease for the YHA currently runs until the 21st July 2020 and can therefore provide immediate capacity. An increase in the number of beds available is being explored at the YHA and there is positive dialogue with the YHA regarding an extension of the lease for at least 6 months.
- 5.6. Alongside the lack of access to public funds for many rough sleepers, one of the key challenges identified by the Recovery Planning Group will be City of London's ability to develop enough capacity of move on



accommodation for the cohort of rough sleepers identified as in scope. For the longer term capacity will be required to prevent clients from moving back onto the streets. Below is a summary of additional pathways where capacity is recommended to be explored:

- a) Spot purchasing of supported accommodation from other Local Authorities
- b) Procurement of a medium to long-term City of London owned supported accommodation site
- c) Additional PRS through networks such as No First Night Out.
- d) Resource to ensure reconnection services have the right capacity to deliver
- e) Moving on of existing clients in existing accommodation to create availability
- f) Housing First scheme capacity

Provision of welfare support and health services

- 5.7. Support to those in the GLA-procured accommodation (mainly hotels) is being overseen by St Mungo's, with Depaul, Thames Reach, Single Homeless Project and Look Ahead also directly supporting people in several hotels and Change Grow Live along with other substance misuse providers providing specialist support and coordination. A similar approach is being adopted for emergency support provided by the City of London, with Providence Row, Westminster Drug and Alcohol Project, Doctors of the World and outreach team providing support to residents through regular check-ups.
- 5.8. All the hotels and other buildings used by the GLA have 24-hour cover, and City of London has commissioned a 24-hr service through Providence Row Housing Association.
- 5.9. A set of primary care standards were developed for Sustainability and Transformation Partnerships (STPs) to provide full coverage of health provision to all rough sleepers in emergency accommodation. A pan-London substance service has been commissioned by the GLA, procured by City of London, for those in the accommodation provided by the GLA and borough-commissioned hotels.
- 5.10. The NHS is also providing outreach COVID-19 testing to hostels and hotel accommodation and secured a triage connection for registration to primary care, medication, mental health, community health, GPs and drug and alcohol services. In addition to this public health screening is taking place for blood-borne communicable diseases.

Key Risks, Issues and mitigations

The recommended mitigations will be included in the ongoing activity of the Recovery Planning Group

- 6.1. The Recovery Group will lead on developing delivery plans (see 7.0) for next steps for the City of London cohort in emergency accommodation. Those who come in off the streets will also be supported through the recovery plan. The capacity and options available to provide solutions for such large numbers of people within such a short timetable are extremely limited.
- 6.2. It is recognised that securing an accommodation or reconnection solution often takes a considerable time, particularly for those rough sleepers who have no recourse to public funds or whose vulnerability to COVID means they require self-contained supported accommodation. Capacity will therefore be needed to be maintained, either within the emergency accommodation currently procured or through other interim solutions to allow time for this complex work to take place.
- 6.3. **Private rented sector (PRS)**: the PRS will provide the accommodation solution for some of those accommodated. Key challenges will be securing this level of accommodation within a short timescale, within



LHA rates. In addition, those moving into the PRS will need tenancy support for a limited period to ensure that they can maintain their tenancy and do not return to rough sleeping. The GLA is exploring a large expansion of their current PRS floating support service. I will be important to establishing whether the GLA approach is going to have enough capacity to provide support for the City of London cohort who are accommodated in the PRS.

6.4. **Non-UK nationals:** a large proportion of those accommodated are non-UK nationals, some of whom are ineligible for benefits and, in many cases, wider support. Most are EEA nationals, while others' immigration status means they have No Recourse to Public Funds (NRPF).

Work is underway to understand in more detail the circumstances and immigration status of this cohort, to inform possible solutions. However, their options once they leave the hotels and other emergency accommodation are likely to be extremely limited. Some may wish to go home and could be supported with voluntary reconnection. However, for many this will may not be possible or desirable. Others may be supported into employment. Those with NRPF may need support to resolve their complex immigration status, and EEA nationals may need support with settled status applications. But these options are challenging to implement unless people can be accommodated. With the ongoing public health risk, there is a case for considering whether support (including accommodation) could continue to be provided where there are no other sustainable options and decisions need to be made about what the City does is people refuse a reasonable reconnection offer

6.5. **People with high support needs:** a significant number of those currently accommodated will need hostels or other supported accommodation - accommodation which is in very short supply and which may not be suitable for those who are COVID-vulnerable given the shared setting. Consideration will need to be given to securing self-contained supported accommodation (including Housing First) and to how hostel spaces could be freed up for this group where this is safe and discussions are underway with the YHA to secure capacity for the medium term. One possibility being considered by the Rough Sleeping Strategic Group would be to create hostel capacity by providing independent accommodation – potentially through the Clearing House - to people currently in hostels who are ready to move on. It is acknowledged however, that vacancies will be limited, and several Local Authorities will have a similar requirement. Providing more supported PRS move on offers to hostels may also work to create valuable vacancies for those in hotels.

Ensuring access to appropriate and consistent mental health and substance misuse support, including residential detox and rehab, is also critical for this group. This may be more challenging once the cohort is dispersed away from the hotels and the additional support from GLA is not available.

- 6.6. Vulnerable people with ongoing medical risks: rough sleepers are significantly more likely to have underlying health conditions and poor overall health that make them more vulnerable to COVID-19. A significant number of those accommodated are medically vulnerable to COVID-19, some of whom require shielding. Their accommodation on leaving the temporary accommodation must therefore be suitable for shielding, and self-isolation. COVID-protect facilities that support those sleeping rough who are vulnerable are already under pressure. Accommodation options are constrained by the type of support needed and the ability to place people into shared accommodation whilst social distancing and social isolation measures are in place.
- 6.7. **New rough sleepers and returners:** the COVID-19 emergency has increased the number of new rough sleepers and returners to rough sleeping coming onto the streets. This includes people who have lost employment (including EEA nationals), those fleeing domestic abuse and those with NRPF. This situation looks set to continue and may worsen as the economic impacts of COVID-19 increase. This is putting additional pressure on services and accommodation now and will continue to do so.
- 6.8. **Visibility:** Ensuring there is visibility with external groups such as the Rough Sleeping Strategic Support Group who hold plans that are interdependent with that of the Recovery Planning Groups. The risk of duplication



and/or missed activity could undermine efforts. Health and social care services will be under considerable pressure and may need encouragement to view this work as a priority. We also need to work well to communicate with key local stakeholders – businesses, residents, council staff, Members etc. – so that the work being undertaken, the outcomes achieved and the challenges of securing an outcome for everyone is fully understood.

- 6.9. **Return of local workers:** As the gradual return to work progresses, we could see increased numbers of rough sleepers? on the streets. The risk is that when people are coming back to work, rough sleepers still living in hotels near the City may start to return to the street and establish a street lifestyle in the City because of the opportunities for begging.
- 6.10. **Reconnection challenge:** Reconnections might be difficult not just due to resourcing but travel restrictions, therefore additional temporary accommodation capacity is recommended to be developed to increase the planning time available for those in need of a reconnection.
- 6.11. **Budgetary risk:** Continuing to provide emergency accommodation for a second wave and predicted winter peak is likely to impact the budget. Therefore, additional income is to be identified early to enable appropriate contingency planning.

Action plan based on delivery principles

- 7.0 The delivery and oversight of the strategic plan for all boroughs will be via a central Rough Sleeping Strategic Group which will report into the Government's Taskforce on the COVID-19 response to rough sleeping and next steps led by Dame Louise Casey. To ensure that the local City of London recovery plan is aligned to the broader approach as set out by the Rough Sleeping Strategic Group, the following principles have been adopted from their strategy:
 - **Principle 1:** To seek to ensure that no-one who has been placed in emergency accommodation in response to the COVID-19 public health crisis is asked to leave that emergency accommodation without an ongoing offer of support to end their rough sleeping
 - **Principle 2**: To ensure there is the capacity and capability to deliver and implement In For Good offers of support
 - Principle 3: To ensure continued protection from COVID-19 for those who need it
 - **Principle 4:** The City of London will work with London boroughs, so that no boroughs, including the City of London, are disproportionately impacted as a result of hosting rough sleepers from outside their boroughs during the emergency
 - **Principle 5:** The City of London supports the London-wide approach which will complement the efforts of individual boroughs and providers, and vice versa
 - **Principle 6:** To ensure an integrated housing approach with health and care to secure access to services and continuity of care
 - **Principle 7:** Ensure that the roll out is gradual, to avoid a 'cliff edge' and overload of services as lockdown is lifted
 - Principle 8 (specific to City of London): Some rough sleepers may choose to refuse their offer of support.
 The City of London will work hard to prevent this but, ultimately, the public health emergency does not
 bestow upon the City of London the power, or the responsibility, to keep accommodating rough sleepers in
 emergency accommodation once an offer of support more suitable to the rough sleeper's needs and
 circumstances has been made and refused
 - **Principle 9 (specific to City of London):** Enable the transition from recovery plans to long term capacity development



7.1. The following activity outlines the responsibilities of other key partners, as represented in the Rough Sleeping Strategic Groups May 2020 strategy paper. See Appendix 1 for full report

Rough Sleeping Strategic Group

- Collect and disseminate good practice to local authorities and other organisations
- Escalate significant pan-London issues where there are barriers to this approach being implemented.
- Work with authorities to get an agreed approach for those for whom no borough or other local authority is responsible, including developing pan-London or sub-regional responses
- Ensure that partners can share data where needed
- Work across partners, to ensure that where specialist step down/step up provision is needed at a subregional or regional level that this is a shared responsibility
- Continue to support authorities with implementing next steps by raising issues that are not resolvable at a borough/regional level via appropriate escalation routes
- Work to seek agreement from authorities on an approach to new arising need
- Have sight of GLA and borough plans for scheduling the move on from emergency accommodation

GLA

- Seek to extend the availability of emergency accommodation GLA has procured beyond end of June where possible to help stagger the release of individuals from emergency accommodation.
- Seek to increase the supply of Clearing House properties, both for those in hotels to move on to and to create capacity in hostels for those with support needs in hotels
- Explore other options for increasing the supply of accommodation
- Explore the scope to expand pan-London services to meet the needs of those moving on from emergency accommodation
- Provide capital funding to enable hostels to be remodelled so that that residents can adhere to social distancing and social isolation guidance
- Mobilise the Life off the Streets Taskforce to support the delivery of the strategy
- Continue to provide a hub for data through CHAIN
- Ensure that data is available to be shared with partners to support with strategic decision-making on health and housing integration across London

NHS

- Carry out prevention and screening in hotels to screen for and treat blood-borne health needs
- Work with boroughs and the GLA to ensure that those who need them have health needs assessments
- Develop plans to meet the gaps in health requirements that are identified through the health needs assessment
- Deliver a health needs audit
- Work with boroughs and the GLA to ensure continuity of care as people move between services or pathways
- Explore how COVID-care provision will be continued
- Continue to provide assessment and testing of symptomatic cases, working closely with the London Response Centre (LCRC)
- Explore options with boroughs for joint commissioning of services where appropriate.
- Work with boroughs and the GLA to ensure that plans link with local and regional NHS pla



Planning Assumptions and Constraints

8.0. The following have been considered

- Recovery Planning Group activity planned up to end of March 2021, assumed transition into business as usual and growth proposal activity will be complete by this date
- GLA continue to provide emergency accommodation until move on is secured/offered
- MHCLG/GLA will deliver on their responsibilities as outlined in section 7.
- Assumed budgetary availability to cover 100% of costs, from income sources highlighted in section 8.
- Plans to procure new local services assessment hub and high support hostel will continue as planned
- Local authorities will work collaboratively to accept responsibility for rough sleepers with a local connection to their area
- Travel restrictions will be lifted gradually enabling reconnection overseas
- Private rented sector affordability and availability with short term demand causing a shortage/spike in rents
- Existing pathway accommodation is mostly shared and may not be considered safe for those who are vulnerable to COVID

Monitoring

- 9.0. **Recovery Planning Group Chaired by Assistant Director People, Chris Pelham:** Actions and decisions are agreed and logged. Both commissioning services and homelessness services are represented on the group to ensure activity is complimentary to business as usual activity.
- 9.1. **Measuring success:** The Recovery Planning Group will measure success against the principles outlined in section 7.
- 10.2 **Reporting:** It is recommended that quarterly reports be submitted to the Rough Sleeping Homeless Sub Committee whilst the Recovery Planning Group activity remains open.

Appendices

1. Rough Sleeping Strategic Group Strategy Paper – See attached document

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