

### Homelessness and Rough Sleeping Sub Committee (Late Supplementary)

Date: THURSDAY, 10 JULY 2025

**Time:** 11.00 am

Venue: COMMITTEE ROOMS, GUILDHALL

Part 1 - Public Agenda

#### 7. HOMELESSNESS & ROUGH SLEEPING STRATEGY UPDATE REPORT

Report of the Executive Director, Community & Children's Services.

For Information (Pages 3 - 26)



#### **City of London Corporation Committee Report**

Committee:	Dated:
Homelessness and Rough Sleeping Sub-Committee	10/07/2025
Subject:	Public report:
Homelessness and Rough Sleeping Strategy 2023–2027	l abilo roporti
Update Report	For Information
This proposal:	Links to Corporate Plan
delivers Corporate Plan 2024–2029 outcomes	outcomes 1,2,3,4,10
Does this proposal require extra revenue and/or	No
capital spending?	
If so, how much?	NA
ii so, now much?	INA
What is the source of Funding?	NA
Has this Funding Source been agreed with the	NA
Chamberlain's Department?	
Report of:	Judith Finlay – Executive
1.00011 011	Director, Community and
	Children's Services
Report author:	Will Norman – Head of
-	Homelessness Prevention
	and Rough Sleeping

### Summary

This report provides Members with a summary of progress against the aims set out in the Homelessness and Rough Sleeping Strategy 2023–2027. Strategy delivery is administered through a Homelessness and Rough Sleeping Strategy Delivery Plan (SDP). The first part of the report offers members a high-level summary of SDP actions underway and completed. Appendix 3 provides Members with a summary of completed actions to date from the SDP.

The second part of the report provides Members with a commentary on the Homelessness and Rough Sleeping Strategy 2023–2027 Performance Scorecard and Dashboard (appendices 1 and 2).

This report references the following priorities from the Homelessness and Rough Sleeping Strategy 2023–2027:

- Priority 1 Providing rapid, effective and tailored interventions
- Priority 2 Securing access to suitable, affordable accommodation
- Priority 3 Achieving our goals through better collaboration and partnership
- Priority 4 Providing support beyond accommodation.

#### Recommendation

Members are asked to:

Note the report

#### **Main Report**

#### **Background**

- 1. This report provides Members with an update on our progress in meeting the objectives set out the Homelessness and Rough Sleeping Strategy 2023–2027. The update forms part of a regular reporting cycle to every Homelessness and Rough Sleeping Sub-Committee meeting.
- 2. This report presents the progress of the strategy at Q1 2025/26 which is reporting period 7 of 16.

#### **Current Position**

#### Service Delivery Plan (SDP) Update

	Priority 1 Providing rapid, effective and tailored interventions	Priority 2 Securing access to suitable, affordable accommodation	Priority 3 Achieving our goals through better collaboration and partnership	Priority 4 Providing support beyond accommodation	Total
Yet to begin	0	2	2	2	6
Risk	0	0	0	0	
Underway – issues	2	0		0	2
Underway – no issues	7	5	4	3	19
Complete	5	4	11	3	23
Total	14	11	17	8	50

- There are currently 50 actions on the SDP
- One new action has been added in the period
- 44 actions have commenced four more than in the last period
- 21 actions are currently live (underway with/without issues) three more than the previous period.
- 23 actions are now completed one more than the last period.

- No significant risks have been identified at this stage.
- 3. The actions (identified by their unique SDP reference) completed in the period are:
  - ✓ 3.12 Establish missing persons/high risk rough sleeper protocol with CoLP a revised process flowchart has been prepared by CoL and presented to the Homelessness and Rough Sleeping Strategy Group on 31 March 2025. Insp. Bullimore confirmed that officers are trained in and will consider vulnerability when making and closing missing persons reports for rough sleepers.

#### General commentary

- 4. The Ministry of Housing, Communities & Local Government (MHCLG) Homelessness Advice and Support Team visited the City of London in January 2025 for a diagnostic visit. The advisors retuned and provided written feedback in March 2025. A new action has been created to track delivery of a new service improvement plan (1.14) which Members will be updated on periodically.
- 5. The SDP has progressed steadily across the seven reporting periods to date. As the strategy moves into the middle part of its lifespan, the number of actions has increased from 41 (in its original form in reporting period 1) to 50.
- 6. The number of actions yet to begin is steadily decreasing and the number of actions closed/complete continues at a comparable rate. This suggests that, while new actions are being added to the SDP, it remains achievable, on track and the SDP reflects emerging challenges and opportunities.

#### Performance Scorecard and Dashboard Commentary

7. The scorecard and presentation slide dashboard can be found at appendices 1 and 2 respectively. Due to the date of the July subcommittee falling early in July, Q1 data from external sources was not available ahead of Town Clerk's deadline for reports, therefore the report has been circulated separately.

#### Quarter 1 (Q1) Commentary

This section is designed to be read alongside the Performance Scorecard (Appendix 1).

#### Priority 1 – Providing rapid, effective and tailored interventions

- 1.1 Quarter 1 (Q1) saw an increase in the number of prevention and relief outcomes achieved by the Statutory Homelessness Team increase from three to five. This change is within a range comparable to quarter-on-quarter fluctuations recorded last year.
- **1.2** The number of unique individuals recorded sleeping rough in the quarter dropped slightly from 257 in Q4 2024/25 to 244 in Q1. The figure for Q1 2025/26 is also lower than the 298 recorded in the same period last year.

- **1.3** The number of 'T1000' priority rough sleeping cohort seen rough sleeping in the quarter decreased from 20 to 16. This is lowest number recorded since T1000 has been used as a performance metric (2 years).
- **1.4** There were 33 accommodation outcomes achieved in the period, significantly fewer than the previous quarter. Q1 data does not include Severe Weather Emergency placements, although a comparable number of accommodation placements (41) were made in the same period in 2024/25.

#### Priority 2 – Securing access to suitable, affordable accommodation

- **2.1** The average length of stay in temporary accommodation decreased from 497 days to 244 days in the period. This ends a period of three consecutive quarters where this figure increased.
- **2.2** The number of supported accommodation beds at our disposal remains the same at 89. At the May Subcommittee, Members were informed of an increase in 5 beds through block booked Temporary Accommodation, taking our total to 94. While this is the case, this data was included in metric 2.2 in error. The performance scorecard has been amended accordingly.
- **2.3** There were no placements into the private rented sector in the period.

#### Priority 3 – Achieving our goals through better collaboration and partnership

- **3.1** There were eight referrals received through the 'Duty to Refer' (S.213b of the Housing Act 1996), three fewer than Q4. This change is within a range that we might expect to see quarter-on quarter.
- **3.2** The number of individuals sleeping at high-impact rough sleeping sites (HIRSS) and encampments increased from 35 to 44 in Q1. Despite monthly multi-agency operations at three high impact rough sleeping sites, the locations themselves remain active, and the encampments are notable for the high turnover of individuals using them. The outreach team secured 11 accommodation placements and assisted with one long-term hospital admission for individuals rough sleeping at HIRSS's.

#### Priority 4 – Providing support beyond accommodation

- **4.1** A total of 32 rough sleepers with an assessed substance misuse need were referred to a specialist organisation. This is the same number as in the last period.
- **4.2** The number of rough sleepers registered with a GP increased from 30% in Q4 to 49% in Q1. Although further quarterly data in 2025/26 will help to confirm, we put part this positive change down to the impact of the nurse led Health Inclusion Team establishing a clinic at Snow Hill Court and the continued efforts of the Clinical Outreach Van operated by City & Hackney Public Health and East London Foundation Trust (ELFT) at rough sleeping hotspots.
- **4.3** Twelve individuals across our rough sleeping and accommodated cohorts accessed some kind of structured employment, training or education (ETE) offer,

three more than in the last period. This metric includes individuals who access an ETE offer across consecutive quarters.

#### **Options**

8. There are no options for Members to consider.

#### **Proposals**

9. There are no proposals for Members to consider.

#### **Key Data**

10. Metrics data can be found in appendices 1 and 2.

#### **Corporate & Strategic Implications**

- 11. Financial implications none
- 12. Resource implications none
- 13. Legal implications none
- 14. Risk implications none
- 15. Equalities implications none
- 16. Climate implications none
- 17. Security implications none

#### Conclusion

- 18. One action on the SDP were completed in the period. This brings the total of completed actions to 23. One new action was added. A total of 21 further actions remain underway, and 6 are yet to commence.
- 19. Rough sleeping numbers decreased for the second consecutive quarter from 257 to 244 and this figure is higher than the same period in 2024/25. However, Q1 2023/24 recorded 180 individuals indicating a higher baseline now than two years ago.
- 20. The number of accommodation outcomes achieved decreased significantly in the period from 106 to 33. This is largely due to high number achieved in Q4 due to Severe Weather Emergency Placements. The Q1 figure is comparable to that seen in the same period in 2023/24 and 2024/25.
- 21. The percentage of rough sleepers registered with a GP increased from 30% to 49%. This is partly due to the mobilisation of a nurse led health inclusion surgery at Snow Hill Court and the mobile health delivery model operated by City and Hackney Public Health and ELFT.

#### **Appendices**

- Appendix 1 Homelessness and Rough Sleeping Strategy Performance Scorecard (table)
- Appendix 2 Homelessness and Rough Sleeping Strategy Performance Dashboard (charts)
- Appendix 3 Strategy Delivery Plan Completed Actions

#### **Will Norman**

Head of Homelessness, Prevention and Rough Sleeping

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			HRS	Me	trics	- Sc	orec	ard												
		202	3/24			202	4/25			202	5/26						Draviou	. Voors		
	С	uarter	ly tota	ıls	Q	uartei	rly tot	als	C	Quarte	rly tot	als			Previous Years					
	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Change from previous quarter	YTD	2019/20	2020/21	2021/22	2022/23	2023/24	2024/25
1. Providing rapid, effective and tailored interventions																				
1.1. Statutory homelessness is prevented and relieved (Pt7 Housing Act)	7	7	1	2	1	4	6	3	5				2	5	11	8	15	19	17	14
1.2. Reduction in the number of individuals sleeping (R1)	180	190	279	260	298	256	332	257	244				-13		434	350	372	482	656	878
1.3. Decrease in City T1000 cohort seen rough sleeping	37	25	18	17	23	21	17	20	16				-4							
1.4. Total number of accommodation outcomes	30	24	78	107	41	49	84	106	33				-73	33	185	305	201	245	239	280
1.5. Annual total of unique individuals seen rough sleeping in Greater London (additional)															10,726	11,018	8,329	10,053	11,913	13,231
1.6 (a). Nights under SWEP activation (additional)																42	15	34	18	27
1.6 (b). Number of individuals acepting SWEP offer (additional)																21	21	50	64	94
2. Securing access to suitable and affordable accommodation																				
2.1. Reduction in the average length of statutory temporary accommodation stays (days)*	132	273	137	488	406	373	452	497	320				-177							
2.2. Increase in the supply of properties available to individuals facing homelessness or are rough sleeping	89	89	89	89	89	89	89	89	89				0		58	70	72	74	89	89
2.2 (b). Increase in the supply of properties available to individuals facing homelessness or are rough sleeping - Total															78	90	117	102	123	115
2.3. Increase in the number of people accessing private rented sector tenancies	2	4	1	3	0	2	4	3	0				-3	0	7	12	8	8	10	9
3. Working collaboratively																				
3.1. Increase in the number of referrals received under S.213b Duty to Refer	9	12	9	10	12	9	12	11	8				-3	8	29	16	19	28	40	44
3.2. Reduction in the number of individuals rough sleeping in high impact rough sleeping sites (HIRSS)	34	34	57	55	23	42	49	35	44				9							
3.3. Increased satisfaction reported through service user feedback																				
4. Support beyond accommodation																				
4.1. Individuals with an assessed substance misuse need are referred to a specialist agency	49	54	50	66	35	25	21	32	32				0	32					219	106
4.2. Increase in the number of rough sleepers registered with a GP	36%	44%	18%	28%	27%	27%	24%	30%	49%				19%	49%					32%	27%
4.3. Increase in the number of service users accessing education, employment or training	15	17	12	14	18	15	15	9	12				3							
4.4. Reduction in the number of people rough sleeping who had previously moved into settled supported accommodation	6	5	6	4	2	3	3	3	1				-2	8						

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# HOMELESSNESS AND ROUGH SLEEPING STRATEGY 2023-2027

Department of Community and Children's Services



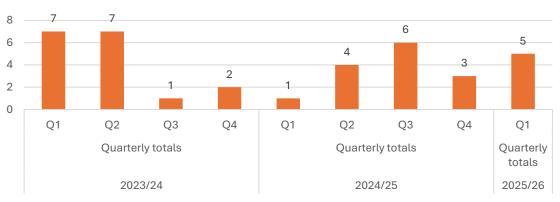
## Performance Metrics

Year 2025/26 - Q1

## Priority Area 1: Providing rapid, effective and tailored interventions

### **☆** Statutory homelessness is prevented and relieved (Pt7 Housing Act)

### Cases closed in period - Main duty accepted, successful offers of accommodation or S.198 referral to another LA

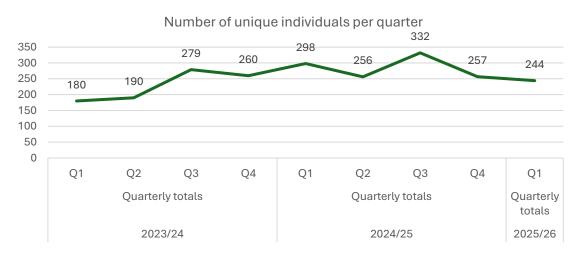


Source: Jigsaw

#### 1.3. Decrease in City T1000 cohort seen rough sleeping

#### Number of long term and complex needs rough sleepers [T1000] 37 23 21 20 18 20 10 Q2 Q1 Q3 Q4 Q1 Q2 Q3 Q4 Q1 Quarterly totals Quarterly totals Quarterly totals 2023/24 2024/25 2025/26

#### 1.2. Reduction in the number of individuals rough sleeping (R1)

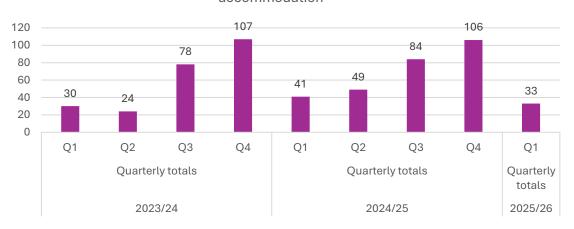


Source: Chain

Source: SITRS

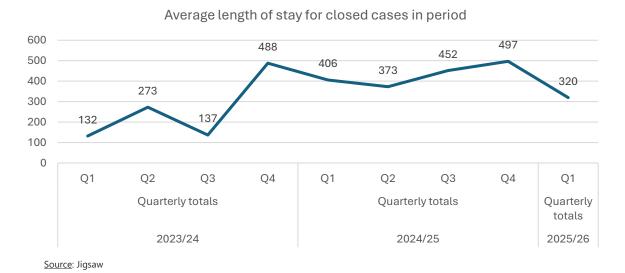
#### 1.4. Number of people rough sleeping who have moved into accommodation

### Number of people rough sleeping who have moved into accommodation

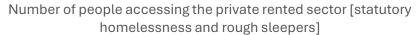


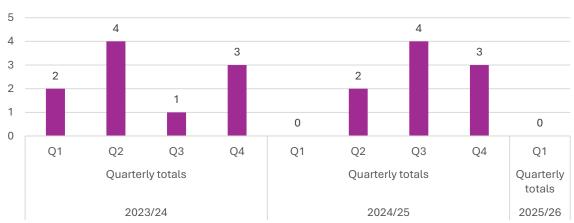
## Priority Area 2: Securing access to suitable and affordable accommodation

#### **23**. Reduction in the length of statutory temporary accommodation stays



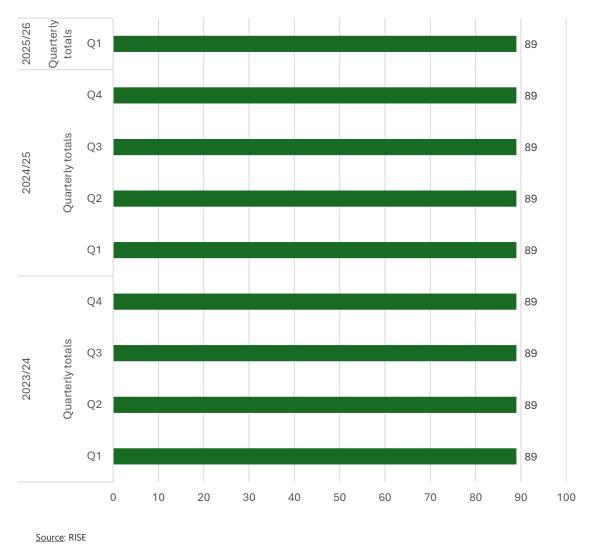
#### 2.3. Increase in the number of people accessing private rented sector tenancies





### 2.2. Increase in the supply of properties available to individuals' facing homelessness or are rough sleeping

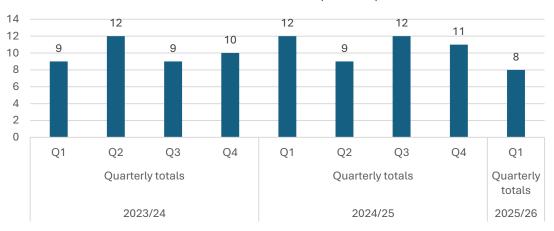




Source: RISE and H-

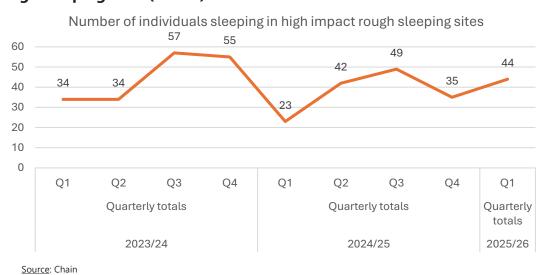
#### 3.1. Increase in the number of referrals received under S.213b Duty to Refer

#### Number of referrals received from specified public bodies



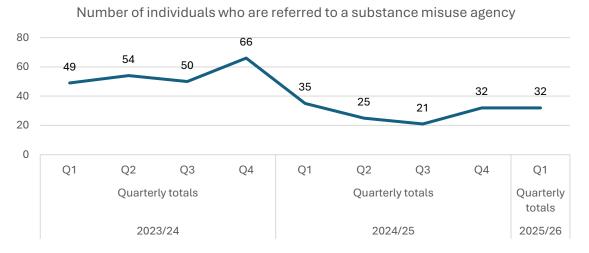
Source: Jigsaw

### 3.2. Reduction in the number of individuals rough sleeping in high impact rough sleeping sites (HIRSS)



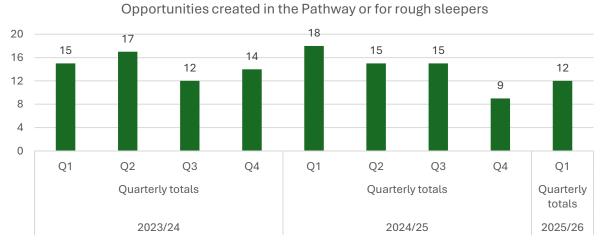
## Priority Area 4: Support beyond accommodation

## 41. Individuals with an assessed substance misuse need are referred to a specialist agency



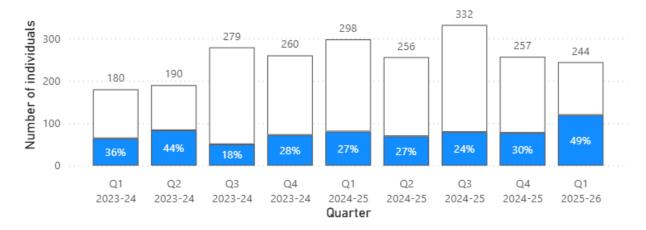
Source: CHAIN, Rise

## 4.3. Increase in the number of service users accessing education, employment or training



#### 4.2. Increase in the number of rough sleepers registered with a GP

Proportion of rough sleepers known to be registered with a GP [as a proportion of 1.2]



# HOMELESSNESS AND ROUGH SLEEPING STRATEGY 2023-2027

Department of Community and Children's Services

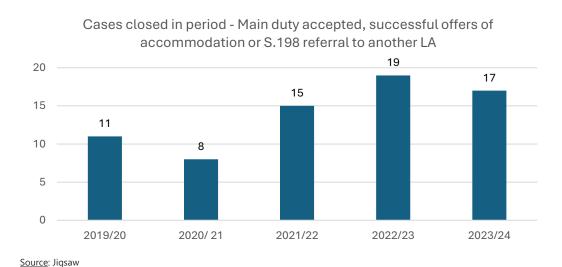


### **Annual trend data**

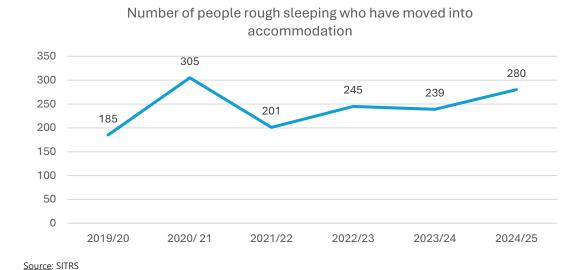
Year 2019 to 2024

## Priority Area 1: Providing rapid, effective and tailored interventions

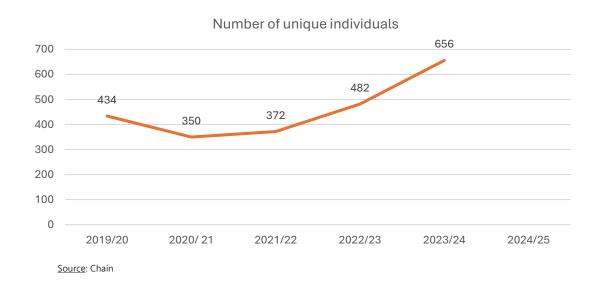
### 1.1 Statutory homelessness is prevented and relieved (Pt7 Housing Act)



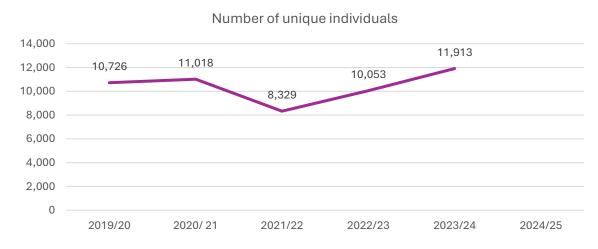
#### 1.4. Number of people rough sleeping who have moved into accommodation



#### 1.2. Reduction in the number of individuals rough sleeping (R1)

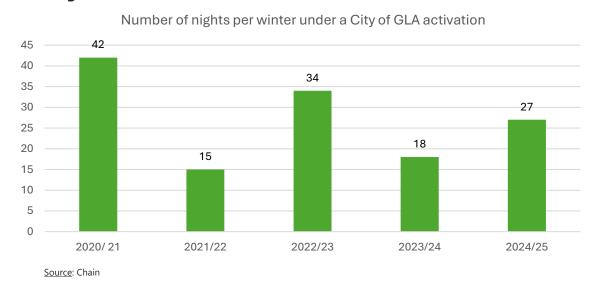


## 1.5. Annual total of unique individuals seen rough sleeping in Greater London (additional)

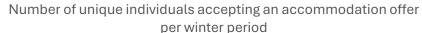


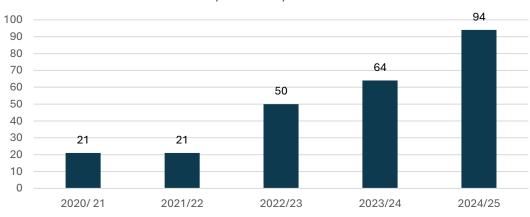
# Priority Area 1: Providing rapid, effective and tailored interventions

#### 1.6a. Nights under SWEP activation (additional)



#### 1.6b. Number of individuals accepting SWEP offer (additional)

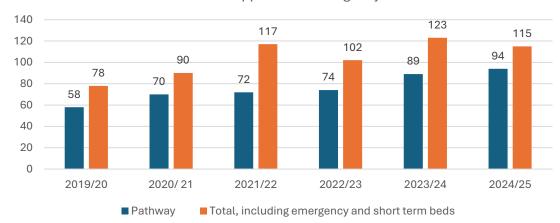




# Priority Area 2: Securing access to suitable and affordable accommodation

### 2.2. Increase in the supply of properties available to individuals' facing homelessness or are rough sleeping

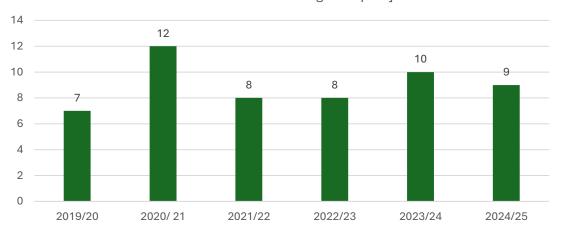




Source: RISE

#### 2.3. Increase in the number of people accessing private rented sector tenancies

Number of people accessing the private rented sector [statutory homelessness and rough sleepers]

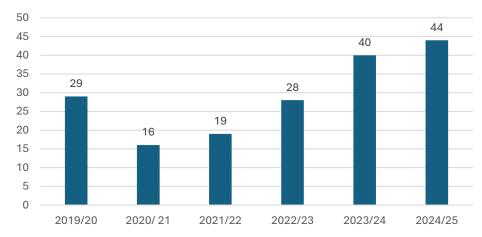


Source: RISE and H-

# Priority Area 3: Working collaboratively

#### 3.1. Increase in the number of referrals received under S.213b Duty to Refer

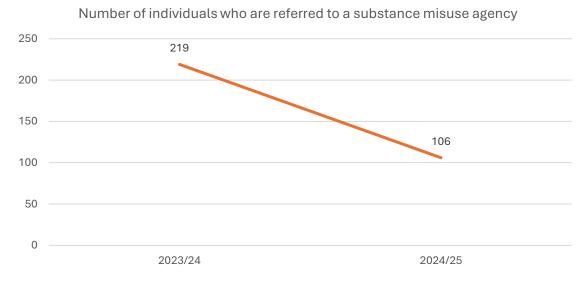
Number of referrals received from specified public bodies



Source: Jigsaw

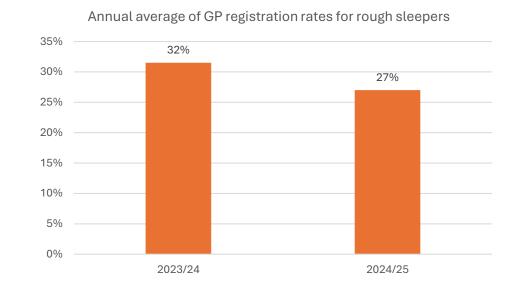
# Priority Area 4: Support beyond accommodation

# 4.1. Individuals with an assessed substance misuse need are referred to a specialist agency



#### Source: CHAIN, Rise

#### 4.2. Increase in the number of rough sleepers registered with a GP



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### Priority 1: Rapid, Effective and Tailored Interventions

Lead Area	Unique	Activity or Intervention	New this RP?	Who?	Does what?	With who?	By when?	Evidence/Audit	Success Measure or Service User	RAG rated	Comments on progress
v	ID 🕶	v	~	v	·	v	<b>*</b>		▼ Experience ▼	progress 🔻	▼ The state of th
Cross-cutting	1.6	Implement safe access to online information	No	HoS	Review of cookie policy to ensure web based information is safe for DA victims to access	НО	31-Dec-23	Cookie policy	Accessing CoL webpages poses no risk to anyone seeking advice	Complete	DA web content updated and exit button built in to page.
Rough Sleeping	1.8	Improve safety at rough sleeping hotspots	No	HoS	Creation of new meterials utilising various media to explain service offer	RSSM, PC, RSC	31-Mar-25	Resources/media/feedback	Improved outcomes and safety		October 24 - Encampments Policy/Protocol/Position in draft. December 2024 - policy progressinbg to CCS in Januray for approval. January 2025 - JWG set up to replace CM as pprinciple multi-agency planning forum for hotspots and encampments. Protocol agreed at 16 January CCS. Joint Working Group meeting established to monitor and manage HIRSS and encampments.
Rough Sleeping	1.10	Mobilise new RSAC	No	HoS	Coordinate partners and internal stakeholders to ensure new servce opens by end of January 2024	RSSM, CM, providers	31-Jan-24	Mobilisation plan	Service open according to plan and specification		Preliminary stages of CSO review underway. FHM to include in handover for KL to pick up in April. Provisional launch pushed back to 13/03 due to delay with PC and lease sign-off. Service opened 13 March 2024.  Aug 2024 - KPI's are outstanding, need to be revised, this is underway. Oct 2024 - new KPI's in place.
Cross-cutting	1.11	Develop Rough Sleeping KPI framework	No	HoS	Design set of KPI's which offers long- term trend information to inform evaluation, communications and decision making	RSSM, RSC, SHO, PC	31-Dec-23	KPI framework	More constructive conversation with RSSG, HRS Subcommitee and within service area. Clarity of purpose.	Complete	In draft. Will be incorprated into HRS Strategy metrics approach. July 2024 - now incorporated into HRS metrics and dashboard. Wider discussion needed with officers who chair CMM to align and format KPI's the same for all newly commissioned services from 2025. August 2024 - dashboard redesigned as a scorecard in lign with ASC/CSC reporting
Statutory Homelessness	1.12	Review statutory processes	No	HoS	Commissions independent review of statutory process to test resilience, quality and effectiveness	SHO	31-Mar-25	Review report	Homelessness is prevented and releived with accuracy and consistency. Staff have the support and resources they need.		October 24 - review to be carried out by MHCLG HAST advisor by end of FY. December 24 - HAST visit scheduled for 21/1/25. January 2025 - HAST feedback being actioned.

#### Priority 2: Securing Access to Suitable, Affordable Accommodation

Lead Area	Unique		New this RP?	Who?	Does what?	With who?	By when?	Evidence/Audit	Success Measure or Service User	RAG rated	Comments on progress
Pathway	2.1	Deliver ETE targets across residental settings	No	PC	Use existing KPI frameworks to improve access to ETE	RSSM, PLO	31-Mar-27	KPI frameworks, CMM minutes	Increased resettlement out of the pathway and sustained within pathway		Targets not being met in residential settings or through EPS. August 2024 - new KPI's drafted in collaboration with supplier. 11/11 adjusted to underway/no issues as new KPI's in place. Still question mark over mid/long-term effectivceness. StW project ended at FYE 24/25.
Pathway	2.7	Reduce impact of service charge and rent arrears process on Pathway stays	No		Liaise with providers to explore measures and system adaptations which increase sustainablity of stays	PC, PLO, providers	31-Mar-25	Service specifications, KPI's	Avoidable evictions and abandonments due to arrears are minimised		issues remain locally. Strategically - contribution to survey created by LB Camden and pushed through supported housing commisemers group. Aim is to influence DWP policy direct deductions. August 2024 - potential collaboration with LSE. December 2024 - Col. signs letter from London Councils lobbying Govt. for change. Situation much improved as evidenced by Grange RD CMM minutes. Direct deductions being used te good effect and residents with PSC arrears over £300 dropping.
Cross-cutting	2.9	Implement new TA framework	No		Roll out procurement framework, direct purchasing vehicle or approved provider list to enable agile procurement	CM, SHO, stakeholders	31-Mar-24	Framework, APL, DPV	Quicker access to safe and suitable accommodation. Compiant procurement.		Report proposing APL in governance system and under review by legal. Tender documentation being agreed. Expected to go live March 2024. Finaliased and in mobilisation phase. First placements expected in August/September. Oct 2024 - all mobilised.
Statutory Homelessness	2.10	Develop TA quality assurance framework and approach	No			SHO, CM, providers, stakeholders	31-Mar-24	QA framework, WFD records	Reduced complaints and premises related incidents in TA		Working group set up to progress actions. Proving difficult to establish skill set in TSO allocated to role. Consider brining CoL Envinmental Health on board to consult. September 2024 - Systems now in place to track and record inspection outcomes. Demand needs to tracked to monitor resource implications.

#### Priority 3: Achieving our Goals Through Better Collaboration and Partnership

Lead Area	Unique	Activity or Intervention	New this RP?	Who?	Does what?	With who?	By when?	Evidence/Audit	Success Measure or Service User	RAG rated	Comments on progress
Health	3.2	Deliver clinical mobile outreach service	No	ННС	Coordinate with local health and rough sleeping network to increase engagement with primary care	RSSM, RSC, stakeholders	01-Sep-23	Health outcome data - GP registrations, attendance etc	Experience Improved health outcomes, redcuced inequalities, better access points. Data to inform future health commissioning	progress Complete	Van is delivering but question mark over quality of emerging data for business case purposes. P/T Health Coordinator role through DHSC funding planned for Q4 2023/24. 29/01/2025 Health van now well estabished and delivering to rough sleepers and SHC. Review of mobile interventions complete.
Cross-cutting	3.4	Develop dashboard approach to communicate perfomance and demand pressures	No	HoS	Bring together LOTI data sets with 'ending rough sleeping' framework indicators to create easily accessibe dashboard	RSSM, EW	31-Mar-24	Dashboard	Data informed presentations, reports, commissioning strategies	Complete	Links to KPI framework which is in hand. IG officer has approved SIT DSA and DPIA sign-off from DCCS BST. August 2024 - Scorecard replaces metrics framework.
Rough Sleeping	3.6	Review multi-agency meeting arrangements	No	HoS	Use MAM action plan devleoped as a response to the Homeless Link review report	RSSM, RSC, stakeholders, providers	31-Mar-24	MAM action pan, ToR's, Sharepoint	Clearer planning and more decisions made through consensus and with user voice	Complete	August - review complete and confirmed with HRRSG
Rough Sleeping	3.7	Establish key skills/competence audit for commissioned providers	No	HoS	Set up system to audit existing skills and competence and schedule annual review mechanism going forward	RSSM, RSC, CM	31-Mar-25	Audit and schedule, MAM action plan	Increased confidence in provider skill level, legal literacy and compentence in areas such as ASC, mental health, immigration etc	Complete	Now being landed through Pathway Review and QAF.
Rough Sleeping	3.8	Establish clear procedures with Community Safety Team for hotspots and ASB perpetrators	No	HoS	Implement new MOU and refine approach to cleansing and hotspot action planning	RSSM, RSC, VC	31-Dec-24	MOU, protocols	Individuals are safeguarded and risk is managed. Community interests are represented.	Complete	Draft MOU with CST in place. Referral process into CST IN PLACE. Cleasing protocol needed. On hold pending outcome of new ASB legislation passing through parliament. New action needed once legislation through Parliament.
Statutory Homelessness	3.9	Review Sanctuary Scheme	No	HoS	Work with CST and CoLP to review referral process, published materials and payment mechansim	VC, CoLP	31-Mar-24	Sanctuary Scheme materials	Increased homelessness prevention interventions and effective safeguarding actions	Complete	Working group set up and led by Jenna Stanley in CST. New process clarified.
Rough Sleeping	3.10	Establish information sharing agreement with CoLP and CST regarding Op Luscombe	No	RSSM	Link in with Op Luscombe review to ensure new working arrangements are coordinated and supported by MOU	HoS, VC, SC, CoLP	31-Mar-25	MOU, Op Luscombe review	Better outcomes derived through Op Luscombe. More measurable success.	Complete	SC leading Op Luscombe review. Any MOU, protocols or info sharing agreements should stem from that. January 2025 - CoL Rough Sleeping service pulling back from direct engagement with Op Luscombe in favour of a CoLP liaison role to link clients in with services.
Rough Sleeping	3.12	Establish missing persons/high risk rough sleeper protocol with CoLP	No	HoS	Widen existing MISPER protocols to make them more useful for safeguarding vulnerable and missing rough sleepers	RSSM, RSC, CoLP	31-Mar-25	Protocol	Missing and vulnerable rough sleepers are re-egaged with outreach services faster. More effective safeguarding practices.	Complete	CST making enquiries with CoLP on behalf of Challenge Group. Aug 2024 - RSSM made direct request to CoLP to discuss process. CoLP have confirmed reporting process through flowchart provided to April HRSSG. Rachel Bullimore confirmed CoLP are trained to consider vulnerability when making/closing MiSPERS but limit to what further can be done - must remain aligned with College of Policing guidelines
Cross-cutting	3.14	Increase number of peer-led activities	No	HoS	Utilise coproduction workstream to introduce lived experience to activity across service area	RSSM, HHC, NB, CM	30-Apr-25	Coproduction outcomes framework	Better outcomes for service users.  More innovation and progression from commissioned services	Complete	Mayday Trust/Groundswell commissioned to deliver coproduction workstream.  KPI's confirmed. January 2025 - Advisory Panel and Coproduction Champions roles now in place.
Rough Sleeping	3.15	Develop protocol/policy approach to tents and/or rough sleeping hotspots (HIRSS)	No	RSSM	Utilise internal/external stakeholders to develop a consistent approach to tents and HIRSS	HoS, RSC, CST, CoLP	31-Mar-25	Protocol/policy	Fewer tents and less rough sleepers using HIRSS	Complete	October 24 - Encompments Policy/Protocol/Position in draft. Progressing through committies November/December 2024. Policy/protocol agreed at 16 January CCS committee. JWG meeting established.
Cross-cutting	3.16	Collaboration with LSE to explore problem solving opportunities through the LSE entrepreneurship programme	No	HoS	Consisider and potentially deliver a programme with the LSE to team which focuses on practical problems withing the HRS sector	RSSM, PC, HC, SHO	31-Mar-26	LSE documentation	Implementation of practical measures which mitigate or remove barriers to progress/change/positive outcomes	Complete	Introductory meeting held. Oraft sugestions sent by WN to LSE. LSE provided initial proposal - 'Bridging Gaps. Building Futures' Not token forward by LSE.

#### Priority 4: Providing Support Beyond Accommodation

Lead Area	Unique	Activity or Intervention	New this RP?	Who?	Does what?	With who?	By when?	Evidence	Success Measure or Service User	RAG rated	Comments on progress
Statutory Homelessness		Implement 'one step beyond' approach when discharging statutory duties	No	SHO	Draft Discharge of Duty guidance for Housing Officers and implement principle of going 'one step beyond' regulated expectations	HoS, stakeholders	01-Nov-23	0 ,0	Safer discharge of duty processes and better outcomes for statutory applicants	progress of Complete	DoD guidance document signed off by ASMT (11/09/23) and CSMT (26/09/23)
Cross-cutting		Review clinical outreach delivered by HIT to Grange Rd	No		Review at first year end and consider replicating to other residential settings	HoS, PC, providers	31-Mar-24	Review	Improved health outcomes and reduced health inequalities over GP based offer		HIT delivering to Grange Rd and data coming in to CMM. Review carried out March 2024
Cross-cutting	4.8	Implement client death protocol	Yes	HoS	Develop a decision making process for actions after the death of any client actively open to our HRS services	ASC, CP, RSSM, RSC, PC	31-Mar-25		Learning is gathered and used after the deaths of clients open to our services. Services are improved as a result.		First draft of decision making flow under review. July 2024 - HRSSG consulted and second draft in review. August - final draft going to HRSSG in September. In place an dbeing piloted.