RESEARCH AND INFORMATION SERVICES

Evaluation of Building Based Services and other rough sleeping programmes in Westminster

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Contents

1 Introduction 2
2 A profile of rough sleepers in Westminster 3
3 The design of BBS 5
4 The implementation of rough sleepers programme 7
5 Summary of conclusions and recommendations 23
Appendix 1 Tables 27
Appendix 2 Research methods 28
BBS group meetings 29
References 29

Quotations
Extracts from the service user interviews are quoted verbatim, followed by the interviewee’s gender, age and the type of agency where they were interviewed in the form: [m/36/d]. Assessment centres are abbreviated as ‘a’, day centres as ‘d’, hostels as ‘h’ and street rescue service as ‘s’.

In the case example, the service user’s name has been changed.
1 Introduction

New programmes to help rough sleepers in Westminster

Westminster has always had the highest number of rough sleepers of any local authority area in England: in 2006 they had around a third of the national total. It has proved particularly difficult to secure the same level of reduction in the numbers as has been achieved elsewhere.

In July 2005, Westminster City Council introduced a new service for people sleeping rough, known as Building Based Services (BBS). The main purpose was to provide services for rough sleepers inside buildings rather than on the streets, in the hope that this would remove any incentive for people to appear on the streets as rough sleepers in order to access services.

At the same time, three new services were introduced to tackle particular features of rough sleeping in Westminster:

- a Street Rescue Service (SRS) to work with long term rough sleepers who were not engaging with services
- reconnection services to help the substantial number of newly arrived rough sleepers return to their home areas
- services to help the significant numbers of rough sleepers from the eight Eastern European states which had recently joined the EU (known as A8 states) and who had acquired rights to work in the UK.

The evaluation

Westminster City Council commissioned Research and Information Services to carry out an independent evaluation of these new services for rough sleepers.

The research consisted of:

- analysis of data from regular street counts of rough sleepers in the area
- analysis of data from the database (CHAIN) of all known rough sleepers
- a review of monitoring documents produced by agencies working with rough sleepers
- interviews with staff in 16 key agencies, including strategic partners and both management and front line staff in the agencies delivering the new services
- in-depth qualitative interviews with 55 service users.

Further details can be found in Appendix 3, Research methods.

Chapter 2 outlines the number and profile of rough sleepers in Westminster and how this has changed over recent years.

Chapter 3 describes the design of the BBS.

Chapter 4 examines how BBS and other related services have worked in practice.

Chapter 5 is a summary of conclusions and recommendations which considers possible future developments in the rough sleepers’ services in Westminster.
A profile of rough sleepers in Westminster

This chapter examines the number of people sleeping rough in Westminster and their characteristics, drawing on:

- the experience of the City Council and service providers
- street counts of the number of rough sleepers on a particular night
- the CHAIN database of all known rough sleepers
- qualitative interviews with 55 rough sleepers in 2006.

Rough sleeping in Westminster: why are the numbers so high?

The City Council and agencies providing services to rough sleepers have identified a number of long term features in Westminster that have led to continuing high levels of rough sleeping, including:

- national and international rail and bus termini (particularly Victoria coach station) make Westminster the arrival point for many low income people coming to London. A recent example has been the large number of A8 nationals arriving in the area.
- the magnet effect exerted by large cities and particularly capital cities.
- a relatively large number of hostel beds, so that in the past homeless people have moved into the area to access hostels and stayed for months or years, before moving out of the borough into long term accommodation.
- high quality services provided by day centres for vulnerable people have attracted some people to the area, sometimes referred there by agencies in other areas, including outer London, which did not have these facilities.
- an active drugs market which attracts homeless people who are drug users.
- high levels of street handouts (often known as soup runs) with over 50 different services visiting the borough every month.

How many rough sleepers?

A major means of monitoring the number of rough sleepers in Westminster and other areas is through street counts on single nights. The benefits and limitations of assessing the numbers of people sleeping rough through counts on a single night have been examined in detail in the evaluation of the Government’s Rough Sleepers Unit (RSU) (Randall and Brown, 1999). In summary, such counts represent a snapshot on one night. They miss some people who move in and out of rough sleeping. Single night counts are, of course, subject to some fluctuations over time. The RSU evaluation concluded that street counts are a valid means of measuring the relative scale of problems between areas and of changes over time, within acceptable margins of error. The great majority of agencies interviewed for that evaluation also agreed that single night street counts were a useful and reasonably accurate method of measuring trends over time.

Since November 2001 the number of rough sleepers recorded on Westminster street counts has fluctuated around an average of 149 (Appendix 1, Table1).

A8 nationals, who have no recourse to public funds, are recorded separately because they are not able to claim benefits until they have worked continuously for 12 months in the UK and so local services are not able to provide accommodation for them.
Between June 2005 (just before the introduction of BBS) and September 2005, the street count (excluding A8 nationals) increased from a relatively low level of 130 to 160, above the long term average level. It stayed at that level over the next six months to May 2006. In September 2006, the count was reduced to the relatively low level of 108. This 30 per cent reduction since May appears to show the impact of BBS, but there have been fluctuations in the past and it is too early to be certain that this is a long term outcome. There were large reductions in West area (50 per cent) and Central (37 per cent) with a small increase since the previous count in South. It might be that the factors creating new rough sleeping listed above are stronger in South than in the other areas.

In the September 2006 count, one in six (18 people) were new and not recorded on CHAIN. A quarter (27 people) had appeared on two or more Westminster counts. Both the numbers who were new and those who had appeared on two or more counts were reduced from the previous year.

For the year April 2005 to March 2006 the number of rough sleepers identified by CHAIN was 1859, an increase of 15 per cent on 2004/5, which had not shown any significant increase on 2003/4. The proportion of new rough sleepers increase from 40 to 48 per cent. However, CHAIN notes that some or all of the increase might be due to more efficient identification and recording of rough sleepers.

Service users’ profile
Interviews were carried out with 55 service users who had a history of sleeping rough in Westminster. These were qualitative interviews with a small sample of rough sleepers, so the interviewees were not necessarily representative of all rough sleepers in Westminster. However, they do give an insight into their needs and experience of services. All but three had slept rough within the last six months and half had done so the night before they were interviewed. Two thirds had a substantial history of sleeping rough, for at least two years or more, and a third had slept rough for five years or more. Only six people were relative newcomers, having been on the streets for less than three months. This relatively low proportion of newcomers is attributable to the fact that most of the interviews took place in BBS and hostels, and most new arrivals in Westminster are now offered reconnection to their home area.

One in five of the sample (11 people) had first slept rough in central London at least ten years previously and seven of these had done so 20 or more years ago. However, they had not been sleeping rough throughout this time. All had experienced a period of housing stability but, for various reasons, had returned to the streets relatively recently. They had gravitated to Westminster because they remembered the services and sites available for rough sleepers.

A substantial minority (four in ten) had only ever slept rough in Westminster. Around a third had also slept rough in other parts of London and a further third had done so in different parts of the country or abroad.

While there has been a recent reduction in the number of rough sleepers, many of those remaining on the streets have high support needs including mental health, drug and alcohol problems.

There were high levels of support needs among the service users interviewed. Two thirds (37) reported having at least one symptom of mental ill health when given a prompt list of possible symptoms. These ranged from anxiety, panic attacks and depression to suicidal thoughts, self harm, hallucinations and psychotic illness. The most common problems were depression
(over half), suicidal thoughts (over a third) and anxiety (just under a third). One fifth described four or more different types of symptom. Of those reporting mental health problems, a third (11 people) had been in a psychiatric hospital or unit at some stage in their lives; four out of ten (15 people) were currently receiving help for their problems, ranging from seeing a day centre counsellor or hostel mental health worker, to longer term psychiatric help from a mental health professional.

Almost a third of interviewees reported having a current problem with drinking. One sixth were current drug users and a similar proportion had been problematic users in the past. Five people were both alcohol and drug users. These problems were self reported and so may be underestimates.

Two thirds had experienced living in at least one form of institution. Half had been in prison or a young offenders’ institution or both, and a third had been in care.

Among those who reported not having any support needs there appeared to be a shared view that they would not be given priority for finding accommodation.

### 3 The design of BBS

This chapter outlines the rationale behind BBS and how they were planned to operate.

BBS were introduced in Westminster from July 1 2005. They were developed from recommendations in a report commissioned by Westminster and the ODPM in 2003 (Vantagepoint, 2003). The street counts of rough sleepers in Westminster had been reduced by a half since 1998, to 128 in November 2002. But numbers had then stabilised and the target of a two thirds reduction which had been achieved nationally had not been reached, despite Westminster operating similar programmes to those that had been effective in other areas.

The report recommended a two stage approach. The first stage was the commissioning of a single provider to operate a Rapid Intervention Team (RIT) which would undertake intensive outreach work to reduce the numbers by assertive and persistent intervention. The RIT started work in October 2003 by which time the street count had increased to 191. This had been reduced down to 130 when they ceased operation in June 2005. So they achieved a reduction of a third over a 20 month period, but this was still not sufficient to reduce it below the historically low level of early 2003 on which the Vantagepoint report based its recommendations.

The second stage was the commissioning of BBS. The building based model involved replacing street work with rough sleepers with the provision of services in buildings, usually day centres or night centres, where there would be a rapid and assertive needs assessment and support planning for rough sleepers. Most outreach staff would work from within the buildings. Instead of detailed contacts on the streets, rough sleepers would be “signposted” into services by a variety of agencies already providing street...
services such as the police and City Guardians. These agencies would also provide intelligence for the BBS on where rough sleepers were located.

There were a number of reasons for introducing BBS. It was thought that:

- street based services provided for homeless people (particularly street handouts, also known as soup runs) could attract people onto the streets to receive help
- the current outreach services created a perverse incentive for clients to sleep rough in visible areas so as to contact outreach staff and access services
- working from a building was safer for staff and meant that resources, such as the CHAIN and Hostels on Line databases, and specialist support workers were readily accessible
- it would provide certainty on where and when they could meet workers and extended opening hours meant these services were open for longer
- service users could be treated with more dignity by giving them time and space in day centres, including through special sessions for people who avoided the usual busy services.

Outreach workers would still have to verify that service users were genuine rough sleepers by observing them bedded down in the streets.

It was intended that the specialist police in the Safer Streets Homelessness Unit (SSHU) would take the lead on street work, identifying rough sleepers and hotspots and responding to complaints. The reduced street outreach work by BBS would work closely with SSHU and consist of:

- responding to reports of vulnerable rough sleepers who would not use BBS
- verifying that service users were rough sleepers
- targeting entrenched rough sleepers who were unwilling to use BBS
- working with a limited number of named entrenched and vulnerable individuals who would not engage with BBS and where possible escorting them into specialist sessions,
- tackling “hotspots” – concentrations of four or more rough sleepers
- undertaking street counts.

In addition there would be a specialist Street Rescue Service (SRS) for a limited number of identified, long term and entrenched rough sleepers who were not engaging with services.

It has been seen in Chapter 2 that a relatively high proportion of rough sleepers in Westminster are newly arrived in the area. Westminster is one of the highest cost housing markets in the country and has a severe shortage of affordable housing. There is no prospect of offering affordable homes to large numbers of newly arrived rough sleepers. It is also usually in their own interest to access housing and support in their home communities. Westminster increased the emphasis on reconnections work to help these newcomers, who are not eligible for BBS or hostel accommodation in Westminster, to return to their home areas.

New arrivals would be informed that services were not available for them in Westminster. If they were vulnerable, they would be offered help to return to their home areas. Ten dedicated beds were introduced in Look Ahead Victoria Hostel for rough sleepers who could not return immediately and who needed short term accommodation while arrangements were made. Westminster also took the lead in establishing a pan-London protocol for reconnections services.
4 The implementation of rough sleepers programmes

This chapter examines how the programme was implemented and developed and the outcomes of the new services. It examines:

- the structure of the new services
- signposting of rough sleepers into services
- verification of rough sleepers
- access to BBS
- services provided by BBS
- new arrivals
- street work, including the work of other street based agencies
- case management
- other rough sleepers services
- assessment centres and hostels
- EU nationals
- management of the programmes
- performance measurement.

The structure of BBS

It was decided to base the services in three localities:

- **Central** area was based at Connection at St Martin’s Day Centres which had a long history of providing services to rough sleepers in London’s West End.
- **South** area was based at The Passage Day Centre, which was the major facility for rough sleepers in the Victoria area.
- **West** area was based at St Mungo’s Rough Sleepers Assessment Centre which provide both an office base and a rolling shelter providing short term accommodation for assessment purposes.

The Street Rescue Service was provided by Thames Reach Bondway which had long experience of outreach work and which had operated the Rapid Intervention Team which preceded the BBS.

In addition, there was a BBS Co-ordination Unit based at the Passage and Westminster City Council played an active role in managing the programme.

The strength of basing services with such well established agencies was that it drew on their long experience of the needs of rough sleepers in their areas and of previous attempts to help them off the streets. It also meant that existing buildings and staff could be used.

While all agencies interviewed were fully committed to making a success of the programme, there were initially varying views both within and between organisations as to its effectiveness. One agency was enthusiastic and said it had transformed the way they worked for the better, although the process had been difficult. Another doubted whether it really represented a radical break from previous practice, apart from a reduction in outreach work which it regretted. However, there is no evidence that such scepticism affected the effectiveness of the programme and indeed it contributed towards a continuing critical appraisal of it. It was recognised from the start that BBS was an experimental programme and there would need to be flexibility in its implementation, as the impact of its changes became apparent.

Signposting

Before the introduction of BBS there were concerns that a reduction in street outreach work might lead to people continuing to sleep rough because they did not know how to access services. To tackle this, it was envisaged that agencies working on the streets, in particular the police and City Guardians, would signpost people into services by giving them information about BBS.

In practice, agencies, including the police, reported that the great majority of people sleeping rough already knew, or rapidly found out about services and signposting only played a very small role.
Over half the service users interviewed had been in contact with the agency where they were interviewed for at least six months and eight had been either intermittent or regular users for ten years or more. Most commonly (four in ten), they had first found out about the agency from friends or other people they knew on the streets, or from an outreach worker (a quarter) before BBS had been introduced. A sixth had heard about it, or been referred by a day centre. Only three interviewees had been introduced to the service by a police officer since BBS were launched and for one of them, it had been a welcome surprise:

[They] could have just moved me on – they didn’t have to tell me about this place. I thought it was really good, it really helped… They said you could get showers, a drop-in centre and [help to find] hostels [m/25/d]

The great majority (47) thought the agency was easy to find and two thirds had made their own way there.

In the three months of January to March 2006, there were only seven people who were not already known to BBS and who were successfully signposted into services by City Guardians. However, the City Guardians did have extensive contact with rough sleepers and some other useful functions in the programme, which are discussed below.

Verification

Agencies reported that BBS had not affected the process of verifying that service users were genuine rough sleepers, since it was still necessary for them to be seen bedded down either by the Metropolitan Police SSHU or by an outreach worker. All agencies reported that there was a good exchange of information between agencies. However, the need for verification meant that one of the original objectives of BBS, that it would remove any incentive for people to be seen to sleep rough so as to access services, was not in fact achievable. In all service models there is a possible motive for abuse if rough sleeping is seen as a short cut to social housing and therefore a need for verification that they have been observed sleeping rough. The exception is former rough sleepers registered on CHAIN who have come out of prison and who can go direct to BBS so that they do not have to return to the streets. Where BBS are notified in advance of a prisoner’s release date, they will visit them to ensure they do not return to the streets.

Access to BBS

The agencies interviewed agreed that it was best to provide services to rough sleepers within a building rather than on the streets, wherever possible. One said that this had in any case always been the objective of outreach workers in their agency.

Opening hours varied between services, they were all open for new users on weekday mornings and either mornings or afternoons at the weekend. They were open on weekday afternoons for support work with existing users. Agencies did not believe that longer opening hours would be necessary or cost effective.

The BBS localities operated different policies over delaying access to services as a means of gatekeeping and discouraging new arrivals, possibly reflecting the number and nature of new arrivals in the different areas. West area encouraged new arrivals to find their own solutions, or return to their home area, rather than providing them with an instant service. Every one who came to the BBS was offered a service in the form of an initial assessment and general housing advice. It may also involve reconnection to their home area. If the
The client said they were sleeping rough then it was made clear that the BBS were working with many rough sleepers in the area and it could take a considerable period of time before they were able to work with new clients. In practice, this was between three to five weeks, although they endeavoured not to give a timescale to the client as this might encourage the expectation that housing would be offered after that time. They made it clear that if someone had no Westminster connection they may not be able to offer accommodation even then.

If the client had been signposted as someone who was sleeping rough, or they were extremely vulnerable, they would attempt to access accommodation immediately. The aim was to provide an assessment for all, but to target the resources at the most needy, rather than provide a housing service on a first come, first served basis.

The September 2006 street count found that only half (54) of rough sleepers reported they were using BBS and 51 were confirmed to be doing so by the agencies. If these figures were accurate, they suggest there were over 50 rough sleepers not using the services provided by BBS, although 14 were SRS clients and another ten had accommodation available on the night but were sleeping out. Outreach workers would have been in contact with most of these people on the streets.

Services provided by BBS

BBS provide access to the full range of support services needed by rough sleepers including:
- comprehensive needs assessments
- access to accommodation
- health services
- mental health services
- drug and alcohol services
- counselling
- help with benefits
- employment and training opportunities
- other meaningful occupation.

A common, comprehensive needs assessment had been introduced.

Examination of a random sample of 30 in all three BBS indicated they are being used successfully to identify and meet support needs. It was useful to have a history from the CHAIN database attached to the case file, which showed that in some instances people had been using local services and entering and leaving hostels for years. The most frequent gap in the recorded information was whether the user was newly arrived in the area and what action was being taken as a consequence. This issue is examined below (see New arrivals).

A gap identified by some agencies was in support for people with common mental health problems such as anxiety, post-traumatic stress disorder and depression. There is a range of services for people with mental health problems including the Great Chapel Street Medical Centre and the Health Support Team, both of which provide primary health care for homeless people and the Joint Homelessness Team, which gives priority to severe and enduring mental health problems, including schizophrenia and bipolar affective disorder, also known as manic-depression.

Two thirds of service users interviewed reported mental health problems, most commonly depression, suicidal thoughts and anxiety. Such mental health problems, especially if they occur in conjunction with drug and alcohol use or personality disorders, can make it difficult for rough sleepers to settle unless they are treated.

Consideration might be given to additional funding to extend specialist mental health services to people with these common mental health problems.

Just over half of the service users (30) interviewed were in the two BBS day centres. Around a quarter of them (eight people) were relative newcomers, having first started using...
the centre within the previous month. Around a half had been in contact for up to 18 months, if not every day, and a further quarter had been long term users, in five cases, dating back twenty years or more. Four of these, however, had at least one period of housing stability in the interim.

Three quarters (22) of these day centre interviewees were currently sleeping rough and most of them (14) were looking for accommodation.

Eight service users interviewed were sleeping rough but not currently interested in help to find accommodation. Two of these had extensive histories of sleeping rough and were content with their lifestyle, making use of day centre facilities and street handouts. Another user was also unwilling to consider any form of accommodation until he had job prospects. One man had been on the streets for 16 months and was choosing to sleep rough rather than risk claiming benefits, which he feared might encourage a return to his gambling habits. Two interviewees were ineligible for accommodation at present and a third was expecting a custodial sentence after appearing in court the next day. One young man was planning leave Westminster shortly.

There was only one man who was sleeping rough because he did not want the hostel accommodation on offer, saying he did not want to share accommodation with drinkers and drug users. He reported having no support needs and felt capable of moving straight into a tenancy from the streets with little or no resettlement support, preferring to sleep rough in the meantime.

All those currently looking for accommodation were receiving help to find it from the day centres.

Among other services people were receiving, the most common were help with sorting out benefits (13 people), problems with ID (12) employment advice (11) and making use of training or education facilities (11).

Nine people reported having drink problems, four of whom were getting help from a specialist worker at the day centre and four had also been referred to outside specialist agencies for help with their drinking. Nine interviewees were drug users, three of whom had recently been through detox, arranged by the day centre. Two were seeing the centre’s specialist worker and four were receiving help from external agencies. Six day centre users were currently receiving help with physical health problems, either at the day centre or another agency.

Most people (20) found the services they had received either very helpful or fairly helpful. An important feature for some was the opportunity for socialising, which encouraged them to use the other services provided:

Excellent. They’ve given me choices of hostels, come to interviews with me, come to court with me when I’ve had trouble with the police. It’s somewhere to socialise – they don’t like you hanging around the streets… Even when I’m in a hostel, I come here to socialise – all my friends come here. [m/47/d]

Others felt they had tackled a range of problems through the services available:

They got me into accommodation, they’ve kept me off the drugs and alcohol. The computer services have been very useful – I’ve set up an email address, got a CV. I’ve applied for 18 jobs already. [m/31/d]
Those who had been referred to specialist agencies were often especially grateful:

I went to [detox]. It was fantastic. The first time I went there I had to go to meetings – the ‘feelings check’ boosted my confidence so much. They referred me from here. I see a drug worker every day and I’ve gone to AA and NA meetings twice a day. It’s good to know help is there when you need it. [m/25/d]

However, a quarter (seven) of the day centre interviewees appeared to be not engaging with accommodation or support services but were simply using them for food, clothing, shower and laundry facilities.

The agency interviews and the needs assessments also indicated that there were still a significant number of people who were using BBS, but were not accepting offers of accommodation, or who were moving in and out of hostels without resettling.

New arrivals
It has been seen that around a third of rough sleepers in Westminster were recent arrivals. Services have increasingly focused on helping these people to return to their home areas, rather than to accommodate them in the borough. This policy is not inherent to BBS, but is common in other areas which act as a magnet for rough sleepers. Westminster have actively promoted this work and cooperation between authorities to achieve successful reconnections.

The most common reasons service users gave for coming to Westminster were: they had heard about services for rough sleepers, such as day centres, food and other hand outs (16 people), they did not know where else to go (15), they used to live in central London (14) or they just liked it (12).

One interviewee wanted to avoid the prevalence of drug and alcohol use in his home town and ended up in Westminster:

It was the first stop off the coach. I came to get away from drink and drugs and try to get back on my feet. I was hoping to get work. [m31/d]

More commonly, people had heard of the facilities for people on the streets:

If you’re in Westminster they have a lot of connections. They can help with clothes, travel, 2 meals a day, training and accommodation. [m/36/d]

Or simply, that there were known sites for sleeping rough:

I needed somewhere to sleep – there’s nowhere in [my home area] where people sleep rough so I came to the West End [m/52/d]

Reconnecting people to their home areas formed an important and growing part of the work of BBS, with 224 individuals in April to June 2006 receiving some help in this way, compared to 204 who were booked into accommodation. However, not all of these would have moved back to their home area: around 60 per cent had been advised on returning and 40 per cent had a confirmed move, typically by the provision of a coach ticket. The number helped had increased substantially from 77 in July to September 2005, although some of this increase might have been due to better recording of this work.
Westminster had taken the lead in producing a draft Reconnections Protocol for rough sleepers in London and DCLG were considering a national protocol. The programme was still in its early stages and continuing to develop. However, it seemed from interviews with agencies that there was no clear shared definition of a new or recent arrival between agencies in Westminster, let alone between boroughs. The section on the BBS common assessment form which was designed to identify new arrivals was often not completed and some people who appeared to be new arrivals had no reconnection work recorded on the form.

The draft Reconnections Protocol did not include a tight definition of home area, stating that:

“3.1 Home area is not necessarily where a person originates from, but where they have most recently had sustained attachments to a local community.

3.2 It is not practical to establish a tight definition for what constitutes the area to which someone has most recently had a sustained attachment, establishing this requires an element of judgement.

3.3 The key criteria in making this judgement are identifying where they have had stable accommodation or employment, where they have been claiming benefits or where they have been engaged with health, probationary or social services.”

This definition did seem to be open to quite wide differences of interpretation. For example, a person might have been claiming benefits and receiving health services in an area where they had only been a short time.

As there is no provision for adjudicating on disputed cases, differences of judgements between authorities could leave some people without an entitlement to help. There is a procedure for establishing local connection under the homelessness legislation which has worked well for many years. One possibility could be to apply these definitions and procedures to reconnecting people sleeping rough, possibly with some amendments. However, Westminster City Council believed that a more flexible interpretation might be more appropriate to the complex needs of rough sleepers. It would be worth monitoring whether disputes over local connections do arise between different local authority areas.

Some service users interviewed who might have considered a reconnection had not been offered the service. Over a third (20 people) were willing to consider returning to live in the area of their last home, although most (two thirds) of these had no definite or immediate plans to do so. Only four were actively in the process of arranging to return. One interviewee, who had been sleeping rough in Westminster for less than a week, was returning to his last home later that day, having had his travel costs paid by a BBS:

They’ve been absolutely brilliant. I can’t praise them enough. I’ve been trying to get back to [home town]. I was trying to get the social fund [to pay] but I couldn’t because I’ve no medical certificate. [m/42/a]

Another was returning the next day, having already been helped to return on a previous occasion. For two people, both in hostels, the arrangements to return and get help with resettlement were more protracted.

Five people were willing to consider returning to their home area but for various reasons were not ready to do so yet, usually associated with wanting to tackle substance use or mental health problems first.

Six people reported they would need help with finding accommodation and work if they were to return, but none of these reported having been offered any help to do so.
Case example

Michael was willing to move back to his home area, with support, but had not been offered any help. He was aged 49 and had moved into a hostel three weeks previously. He had arrived at Victoria Station three months before with nowhere to stay, having become severely depressed following a bereavement. He left the private rented tenancy he had held for 10 years:

I walked away from everything a year ago … [after that] I was staying with friends in one city after another, but they soon got fed up. No-one wants to know you when you’re down.

He slept rough in the Victoria area, using the facilities at various day centres before being referred by outreach workers into the hostel for assessment. Before moving in, he had started seeing a day centre counsellor regularly for his emotional problems and was also receiving treatment there for depression. At the hostel he had talked to an employment and training worker about work and re-training possibilities. However he was unsure about whether he wanted to move into the hostel’s second stage accommodation:

I don’t know whether to go along with what’s on offer here … you are assured the minimum to survive here, but you can’t thrive here. I want to feel stronger and then see my options.

He was finding the counselling helpful and his physical health was improving after coming off the streets:

Every day is better. I only started to eat properly 10 days ago.

Michael would willingly consider returning to his former home town where he still had social contacts, but acknowledged he would need help to find work and accommodation:

Yes, it’s constantly on my mind … if I could find a job and a place to stay … I know a lot of people in the area, but can’t rely on them to help me.

However he was also clear he was ready to put his experience of homelessness behind him:

Some people want to be on the streets forever. Some people have no alternative. Some people want to move on quickly – I’m one of those.

Interviewees who had left their last home following a relationship breakdown, or family disputes, or to look for work, were less inclined to contemplate returning to their home area. One very vulnerable young man, for example, was adamant he would not return because of the abusive family relationships he had experienced, although he had a girlfriend whom he saw regularly still living in the area:

I’m never going back there to live. People round there just use me. I go back to see my girlfriend – she lives with her mum and dad, but I’m not going back there, ever. I told Westminster City Council I’d rather be homeless than go back there. They won’t give me accommodation because I have no connection with the area. I’ll probably sleep rough when I have to leave [short stay hostel] [m/17/d]

He reported having mental health problems, including depression and suicidal thoughts but had not sought help with them.

Some agencies thought that more could be done on reconnections. For example one major hostel reported they had no links with the reconnection work.
Suggestions for improvements to the system included:

- it was more effective to reconnect people quickly than place them in a hostel and then try to move them
- hostels should be able to question referrals where it appeared a person could be reconnected to their home area
- all service users and hostel residents could be reviewed for possible reconnection and offered the service.

There are already available substantial information resources for reconnections work including the Homeless UK and Homeless London websites, the Emergency Accommodation Directory and the Supporting People Directory of Services.

However, ensuring that service users have appropriate accommodation and support to return to their home area can involve time consuming casework. It also involves establishing information on, and working relationships with, agencies around the country. One agency reported it was developing its own directory of services. There would be duplication of work if this was undertaken separately by several different agencies. Expanding the service in the ways suggested above would certainly involve significant extra resources. It would be worth considering funding a separate dedicated reconnections project to which newcomers would be referred. This would clearly separate the function of local resettlement from reconnection to another area. Possible models might be for a Westminster agency or a central London agency covering inner London boroughs which wished to participate.

Street work

**BBS street work**

The initial strict limitation on BBS street outreach work was gradually eased in response to the need to contact some rough sleepers who were not coming into the buildings. The emphasis remained on encouraging rough sleepers into BBS. Agencies varied in their estimates of how much this had affected their operations, with current hours of street work ranging from 50 per cent to between 70 and 100 per cent of previous levels.

BBS agencies were subsequently given the lead role on street work and enabled to determine the amount of work necessary, in agreement with Westminster City Council. They took the lead on:

- compiling information on individual rough sleepers in their area
- verifying rough sleepers’ status
- facilitating communication and joint work between the various agencies
- agreeing actions on hotspot areas
- providing a service for vulnerable entrenched rough sleepers who were unwilling to use BBS and who were not clients of the Street Rescue Service.

One former rough sleeper described how assertive outreach work had persuaded him to come off the streets:

> [Outreach worker] has visited me on a few occasions to give me a kick up the backside – to get me to get a move on. I thought about my circumstances – I’m 52 and it’s a bit ridiculous to be sleeping in a doorway. He’s been very good. I had doubts about the rolling shelter because of shared rooms, but now I’ve got my own room and it’s very quiet there. [m/52/a]

Street work by BBS was limited to no more than four sessions a week, although there did seem to be some flexibility in practice. Despite the increase in assertive street work, several agencies thought that there was a
need for more intensive outreach. For example, one agency said that they were still concerned that there had been a reduction in their level of knowledge of individual rough sleepers who were not engaging. It was pointed out that it was not outreach work in itself that might sustain rough sleeping, but the wrong type of street work. Indeed by reducing assertive street work, entrenched rough sleepers were enabled to use BBS while continuing to sleep rough.

A key change under the successful national programme to reduce rough sleeping was to introduce a much more assertive and interventionist approach. Although the model varied in different areas, key elements were:

- the sole purpose of street outreach teams was assertive work to persuade and help people sleeping rough into accommodation;
- where people sleeping rough had recently arrived from another area, they were offered help with returning to their home area;
- agencies tendered for area contracts for outreach work with a target of a two thirds reduction in rough sleeping in their areas;
- other local agencies with knowledge of rough sleepers, including the police, were involved in outreach work;
- there was a case management approach with entrenched rough sleepers, with action plans drawn up for individual clients.

Not all of these were implemented in all areas, but the switch to a target-driven, assertive model was central to the successful national two-thirds reduction in the number of rough sleepers. The same principles were applied in Westminster with a resultant 50 per cent reduction. The possible reasons why this was lower than the target set nationally were discussed in Chapter 2. BBS were based on the recognition that a different approach might be required.

Agencies interviewed thought that there had initially been some confusion over the different street work roles of police and outreach workers. The police had sometimes taken on a role more akin to outreach workers than law enforcers. It was agreed that these roles had now been clarified and that outreach workers and police operated together very effectively, especially on joint operations to deal with rough sleeping hotspots. Enforcement action by the police helped to strengthen assertive outreach work. However, some agencies thought that there was still some inconsistency of practice and an absence of agreed definitions about what was involved in assertive street work. It might be helpful to clarify further the work methods expected of outreach staff and the police.

Westminster had a bid with the Home Office for a team to tackle other street activities. It would operate separately from BBS outreach work, although it would liaise with them.

If the number of rough sleepers does not continue to reduce, it might be worth considering whether a more assertive and interventionist style of street work, aimed both at rough sleeping and other street activities, might be introduced.

The Police

Initial plans had been for the Metropolitan Police SSHU to take the lead on street work. However, the July 7 bombings at the start of BBS led to the police being transferred to security duties.

All of the agencies thought that law enforcement had a role to play in challenging entrenched rough sleeping and encouraging people into services. The agencies all said that they had very good working relationships with the police and that they had provided very useful information on individual rough sleepers. They were seen as essential in managing hotspots of rough sleepers. It was very helpful for the Joint Homelessness Team to have specialist police who reported on people with possible
mental health problems and participated in Mental Health Act assessments on the streets. The police also played a key role in tackling street drinking.

There was a high level of SSHU activity: In the quarter April to June 2006 they made 91 arrests, accompanied 32 Mental Health Act assessments, helped 12 people to return to other areas of the UK and 57 A8 nationals to return to their home countries. However, it was reported that courts in Westminster had been less willing to grant ASBOs than, for example, in some neighbouring areas and that there might be scope for using them more often.

The service users interviewed generally accepted the role of police in relation to street homelessness A substantial minority (four in ten) had found the police ‘helpful’ or ‘very helpful’. The most common response was neutral, usually recognising they had a job to do. Only five, who had been in trouble with the police, were unreservedly critical. Among those who had positive experiences of the police, was an interviewee who had been helped into a hostel:

As long as we were tidy, they never really bothered us… The Community Police were very good to us – she practically helped me off the streets…. I’m still in contact – she often asks how I am. [m/57/h]

and a woman who was currently sleeping rough and felt reassured that the police regularly checked on her:

They’re quite nice with me, very caring the community police. They’ve known me for years. I don’t give them any grief and they don’t give me any. If they ask me to move on, I do. They come and check on me when I get my head down. [f/53/d]

Some approved of police action to deal with other street activities:

Every morning they waken you, move you on. They’re OK. They’re not rude. They don’t like seeing people drinking on the streets and they take it off them, which is quite right. [m/39/d]

The Street Rescue Service (SRS)

The SRS worked with vulnerable rough sleepers who were not engaged with BBS. They prioritised people who had three or more of the following support needs:

• vulnerability due to being very young or old or infirm
• at risk due to physical or mental health problems
• chaotic substance misuse
• repeatedly appearing on street counts and are hard to engage
• excluded or disengaged from BBS.

The dividing line between SRS and BBS became less clear as BBS started to do more street work. SRS received fewer referrals from BBS than initially expected, although extra referrals from other sources meant they carried more than their target caseload. There appeared to be a lack of clarity about how their work fitted in with other services and a widespread view that communication between BBS and the SRS had been poor. SRS were not involved with the Service User Update Meetings (SUUM) which was the forum for joint case management.

SRS were commissioned to work with 60 active cases at any one time and started with a core group of 57. Over the year to June
2006 they took on 35 new cases. They had a target of 39 per cent of sustained moves off the street with this difficult to help group and achieved 44 per cent with the core group and 46 per cent with the new referrals.

One interviewee explained how continuing work with long term rough sleepers can pay off. He had recently moved into hostel accommodation with the help of the street team, after three years’ sleeping rough:

Until 3 months ago I was quite happy being on the streets – I had no hassles, stresses all went, everything. [My outreach worker] introduced me to [hostel] I went and looked and that was it. That’s where I am now. It was just a spur of the moment thing. I don’t know why it happened, just like that. [m/48/srs]

City Guardians
The City Guardians (CGs) are employed by Westminster City Council to patrol neighbourhoods. Their role in relation to rough sleeping was seen as:

- identifying people sleeping rough
- signposting rough sleepers into BBS
- providing continuing intelligence on rough sleepers to BBS and the SSHU
- reassuring local residents and businesses that action was being taken on rough sleeping.

Each CG team had a designated link officer to act as a channel for information on rough sleepers.

It has been seen above that the signposting role in practice has been very small, because the great majority of rough sleepers already knew about the services available. However, the CGs had a number of other useful functions, they had:

- identified some emerging hotspots of rough sleeping before the other teams were aware of them.
- regularly passed on useful information about the location of individuals who were being targeted by the rough sleeping teams
- helped to gather evidence for potential ASBOs which were agreed as the best route for encouraging some rough sleepers into accommodation.

It was reported that the involvement of CGs was most developed in the West area where they attended the fortnightly SUUM meetings (see below) and contributed useful and detailed information on rough sleeping activity. By contrast, in the South area, it was reported that their daytime working hours meant that they typically encountered street activity rather than rough sleeping.

Street handouts and soup runs
There has been concern for several years that the large number of soup runs in Westminster helps to maintain a street lifestyle and draws people out of accommodation and back into street culture. Since 2000, Westminster City Council had made several attempts to tackle this problem, including meeting with soup run providers and media campaigns to highlight concerns. The Salvation Army’s Soup and Clothing Run Co-ordination Project achieved a reduction of 71 per cent by June 2002, but this still left 67 groups operating. In January 2005, it was estimated that there were around 65 soup runs operating in the borough.

A further mapping project by Westminster City Council in December 2004 only received 12 responses from a request for information to 65 projects. Eleven projects were observed in operation by outreach workers and the SSHU. Average numbers attending the three main sites (Victoria, Strand and Temple) were 129 per night, but only 17 per cent were either recognised rough sleepers or thought to be sleeping rough. The
remainder of users of the Victoria soup runs were A8 nationals and they aroused considerable hostility from other service users. Some A8 users were destitute, with little hope of obtaining work, no entitlement to benefits and could not access accommodation. It was noted that the usual arguments against soup runs do not carry as much weight in relation to this group. Westminster was considering attempting to establish a preferred provider so that this service could contribute to, rather than work against, reducing rough sleeping.

Case management
All the agencies interviewed found that joint work had been greatly enhanced by the discussion of individual cases at fortnightly Service User Update Meetings (SUUM). A meeting of the West area SUUM was observed at which all targeted individuals were discussed in detail by the BBS, police and City Guardians. They also exchanged updated lists of service users every week and kept in regular contact on the telephone. They had the discretion to decide on appropriate actions on cases between themselves. By contrast, it was reported that at the Central SUUM each agency put forward two or three clients at each meeting who were discussed in detail.

In addition, there were monthly Target and Tasking (T&T) meetings attended by BBS managers and the Co-ordination Unit, SRS, HARRT and Westminster City Council. These reviewed area activity, but again practice varied in different areas, while the West T&T received written reports on individual clients but did not discuss them in detail, the Central T&T examined a number of individual clients.

There are benefits in regularly reviewing all continuing rough sleepers and agreeing actions on them, but there appears to be some duplication between SUUM and T&T meetings, with different reporting systems for each. It appears that joint case management might be most productively implemented at the frontline level of SUUM where staff have detailed day to day knowledge of rough sleepers, rather than by managers and Westminster officers at T&T meetings.

Other rough sleepers services
The Joint Homelessness Team (JHT)
The JHT continued its well established service for rough sleepers with mental health problems. They specialise in working with people who would not present to a mental health service and who are sleeping rough. Team members reach out to people in day centres and on the street to provide them with mental health care. They work with service users for as long as it takes to get them into treatment and suitable accommodation. At the end of June 2006 they had 124 service users of which 24 had a dual diagnosis. There were around 50 new cases each quarter. The other agencies thought that the JHT played an essential role in helping the substantial number of rough sleepers with severe mental health problems in Westminster.

Homeless Arrest and Reach Out Team (HARRT)
HARRT provides an intensive casework service for rough sleepers with histories of high risk offending and include some street work in their support activities. They also work with people identified for ASBOs and Acceptable Behaviour Agreements. Their services were remodelled in April 2006 and during the quarter to June, they worked with 38 rough sleepers and achieved 12 actions booking people into accommodation.

Assessment centres and hostels
Few staff interviewed thought that there was a numerical shortage of hostel beds in Westminster, indeed some thought there were too many. However, there were sometimes shortages of particular types of accommodation and difficulties of access.
Assessment centre and rolling shelter
Both Passage House assessment beds and the St Mungo’s rolling shelter provided very useful quick access to beds, assessment and move-on. However, some agencies thought that care was needed about offering too rapid access to a bed for people with low needs, especially if they were new arrivals. It was thought better to make a rapid assessment and reconnection before they entered the rough sleeping accommodation system.

It was recognised that the dormitory beds in the Passage House assessment centre were outdated and that single rooms would enable them to help people with higher needs. However, it had a high success rate in moving people on. In April to June 2006, 20 out of 26 leavers (77 per cent) made a planned move with only two evictions and four abandonments.

The rolling shelter also had a high success rate with 44 out of 54 leavers (81 per cent) in January to March 2006 making a planned move or into hospital detoxification or custody. There were only four evictions and three abandonments.

The night centre
In addition to the assessment centre and rolling shelter, there was a night centre operated by Connection at St Martin’s. It ensured there was 24 hour access to a service and a stepping stone off the streets, where users were assertively encouraged to access day services and accommodation. It was often used for a night or two while reconnections were facilitated. They also had five assessment spaces where the night centre staff assessed people’s needs. This work was usually done by the referral agency, but the night centre took on this role for SSHU referrals.

Hostels
While there is a sufficient number of hostel beds in total, agencies reported that some beds were occupied by people who did not need the level of support on offer while, at the other end of the spectrum, there was a shortage of places for people with very high support needs.

For people who do not need support, it was suggested that direct access to the private rented sector would be more appropriate, perhaps with some initial limited support to settle in. The very high cost of housing in Westminster means that access to private rented homes in other areas will be necessary. The City Council were working on a scheme with Broadway to help hostel residents access the private rented sector.

Westminster City Council had planned a rough sleepers’ pathway through local hostels. It was recognised that some rough sleepers with high support needs can be difficult to place.

King George’s hostel had given access to people with high support needs and had a good rate of successful resettlement (see below). It had a staff/resident ratio of 1:5 and specialist beds for drug users and people with mental health problems. They had a policy of accepting all referrals wherever possible, with needs assessments done in advance before a bed was available. Staff were trained in the necessary support skills and, unlike some hostels, low staff turnover enabled them to provide consistency of care.

The design of the hostel makes it more suitable for residents with high needs. It has a core and cluster design, with self contained rooms and no communal areas. Self-catering means a low service charge and more disposable income for residents.

The lessons of King George’s could usefully be applied to hostels which do not accept residents with such high support needs and which have lower resettlement rates.

However, the ability to provide these levels of support does depend on a high staffing ratio, as well as the best management practices.
There were reported to be problems with some hostels in placing individuals with very high risk behaviour including arsonists, sex offenders and some people with personality disorders.

A review of hostel provision for young people in London carried out by Westminster City Council and DCLG found that 25 per cent of residents said they had slept rough in the past, but only two per cent were verified as rough sleepers. There appears to be no shortage of potential beds for young rough sleepers.

Hostels varied in their success at retaining and resettling residents. Taking together planned moves, with transfers into detoxification, hospital or custody, hostels with 45 or more leavers in 2005/06 fell into two groups: King George’s, Harrow Road and Passage House achieved over a half of residents moving on in these ways, while in Edward Alsop Court and Look Ahead Victoria hostels only around a third of residents made such moves. Both of the latter had relatively high levels of abandonments and Victoria Hostel also had a high level of evictions for rent arrears (Appendix 1, Table 2). They were taking action to reduce evictions and abandonments.

A shortage of move-on accommodation is a serious problem for hostels in Westminster, as in other London boroughs. Look Ahead hostels in Westminster were participating in the Homeless Link Move on Plans Protocol Project (MOPP) which was aiming to increase move-on from hostels and supported housing. It was testing a protocol for the development of move-on plans through joint work by local authorities and hostel and supported housing providers. Lessons learnt from the project may be applied to other hostels in Westminster.

Just under half (23) of the service users interviewed were currently staying in a hostel, night shelter or rolling shelter. All but two of these residents reported having symptoms of mental ill health, the most common being depression (17 people) suicidal thoughts (11 people) and anxiety (ten people). Half (11 people) were currently seeing a mental health professional. A third (7 people) reported having problems with drinking and three were in contact with a specialist alcohol agency. Five residents were drug users and four were receiving specialist drugs services.

All but three of those who were interviewed at the hostel where they were staying had found the services provided there as either helpful or very helpful.

EU nationals

Westminster’s location in central London and the presence of international rail and coach termini, means that it is the point of arrival every day for large numbers of foreign nationals. In the case of EU nationals, they have the right to stay and to seek employment in the UK. It was reported that there had for several years been a number of EU and other foreign nationals among rough sleepers in Westminster with a high proportion of people with mental health problems. It was also reported that the numbers of such people appeared to be increasing. In April to June 2006 the ethnicity of 35 per cent of referrals of people with mental health problems to the JHT was recorded as White Other, nearly as high as the White British category (37 per cent) and much higher than any other group. By comparison 15 per cent of all rough sleepers recorded on CHAIN were White Other and 57 per cent were White British.

The problem of rough sleeping EU nationals had been exacerbated by arrivals from the A8 states which joined the EU in May 2004. They, too, are allowed to stay and seek employment in the UK, but cannot claim any public funds until they have been in registered work for at least a year. This means that if they are sleeping rough, they cannot access most hostels for homeless people. Between May 2004 and March 2006...
nearly 400,000 A8 nationals came to the UK, the vast majority of whom found work and accommodation (Homeless Link, 2006). However, a small but significant minority have failed to find work or accommodation and are sleeping rough or in squats. It is feared these problems would be exacerbated if citizens of Romania and Bulgaria have a similar status when they join the EU in 2007.

There has been a concentration of such problems in Westminster. It is estimated that over a year around 300 A8 nationals slept rough in Westminster. In the September 2006 street count, 33 A8 nationals were identified, 24 per cent of the total and more than the total number of rough sleepers in any other local authority.

From December 2005 to October 2006, over 900 individual A8 nationals were recorded as being in touch with the three principal day centres in South Westminster (The Passage, The Connection at St Martin’s and Rochester Row). This is likely to be an underestimate of the true number. The majority used The Passage, where they made up 33 per cent of users of general day centre services and 40 per cent of employment and training services. The largest group were Polish.

An analysis by Westminster City Council concluded that the high volume of A8 users had put serious strains on local homelessness services to their key client group of rough sleepers. Many of the A8 users did not have high support needs.

Westminster City Council secured Home Office funding to create a multi-disciplinary project team to tackle the problem of rough sleeping by A8 nationals. The team consisted of seconded officers from the Home Office’s Immigration and Nationality Directorate (IND) and Job Centre Plus to identify and resolve any barriers within their respective departments, additional PCSOs to help the police’s SSHU and a translator to help with casework at The Passage, SSHU and in Job Centres.

Westminster City Council, who were coordinating the project, concluded that:

- Since A8 nationals are economic migrants whose one right is to seek work, Job Centre Plus should be the lead agency and develop specialist services for this group.
- There is a need for some short term reception facilities able to offer advice on employment and accommodation in the UK, with practical assistance with National Insurance registration, bank accounts, language skills and small scale help, for example with travel costs and work clothing. These services should be dispersed and not concentrated in Westminster. They should also be detached from existing homelessness services in Westminster, as they target a fundamentally different client group with different needs.
- There is a need for better information in the home countries about the practicalities and problems of finding work and accommodation in the UK and practical advice on how to tackle these problems.
- Funding should be available for people to return home if they have failed to find work and accommodation and are destitute. The home countries should play a major role in this and other aspects of the proposed programme.

Interviews indicated that there was widespread agreement over these conclusions among the different agencies working with rough sleepers in Westminster.
Programme management

Most agencies thought that BBS had greatly enhanced joint work between them. For example, staff had been exchanged between agencies to help with intensive work at particular times. One practical suggestion for improving this joint work still further was that each client should have a single integrated action plan that would follow them through their pathway off the street and into housing. The common needs assessment forms should facilitate such an information exchange.

The current management structure for the programme appeared to be complex, with up to ten different groups meeting regularly. The membership and functions of these groups are summarised in Appendix 2. It will be seen that there appear to be overlaps and duplication between the different groups, for example between the Service User Update Meetings and the Task and Targeting meetings and between the Silver Group, Gold Group and Steering Groups.

In addition to these co-ordinating groups, there was a BBS co-ordination unit, although it had no management responsibility and depended on the co-operation of the individual agencies. The co-ordinator aimed to encourage joint work including common training, monitoring, operational procedures, inter-agency service reviews and minimum service standards. Some agencies thought that there was an overlap between these functions and the management role of the City Council and the various co-ordinating meetings. Not all agencies were convinced that a separate co-ordination function was necessary.

Performance measurement

The street counts, CHAIN data and returns to Westminster City Council provide very effective performance measurement of outcomes of the programme. It has been seen that the total number of rough sleepers identified on the streets and of new rough sleepers increased in the year 2005/6.

In 2005/6 CHAIN recorded that 46 per cent of rough sleepers had never been booked into accommodation by either BBS or outreach workers, including 109 people who had had over ten street contacts. During the year 27 per cent of rough sleepers were booked into accommodation, compared to 35 per cent in the previous year and 39 per cent in London as a whole.

However, BBS were only operating for nine months of 2005/6 and their performance improved substantially during the year. Returns from BBS agencies (which include rough sleepers who might not yet be recorded on CHAIN) show that in the last quarter, April to June 2006, there were 204 people booked into accommodation compared to 165 people who were booked in during the same period in 2005 by the previous Rapid Intervention Team.

It appears that, after a slow start, BBS performance are improving but, in the context of increased numbers of new rough sleepers, the improvement only began to show up in the street count in September 2006.
5 Summary of conclusions and recommendations

This chapter draws on the experience of the partner agencies to identify ways in which the BBS programme might sustain the progress it has made in reducing the numbers of rough sleepers and make further reductions.

Targets
A key factor in the success of the national programme to reduce rough sleeping by two thirds was the existence of an exact numerical target within a specific timetable. Partner agencies interviewed did not appear to have such a number and date to which they were working and it would be helpful if an exact target were set and incorporated in contracts.

Precise targets were set for each locality in the September count and this will be repeated in future counts, ensuring that agencies are focused on clear outcomes.

Should the BBS model be maintained?
There appears to be broad support for the core elements of BBS that are based on providing help and support for rough sleepers in buildings rather than on the streets. After a slow start it appears to be showing results, so now would not be the time for further organisational upheaval.

There is less agreement on what action is necessary to encourage rough sleepers into buildings so that they can access services.

The evidence indicates that the signposting function (providing rough sleepers with information about BBS) plays a very small role, since the great majority are already aware of services and are often using them. This suggests that although signposting should continue in the small number of cases where it is helpful, it need not be regarded as a significant part of the programme and does not need to be monitored.

There are still two key gaps in the coverage of BBS:
- some rough sleepers are not using BBS, although they are generally known to outreach workers
- some people are using BBS, while continuing to sleep rough and engage in other street activities.

For both these groups, more intensive and assertive intervention on the streets might be necessary.

Street work
As the programme developed, it was agreed that the BBS needed to undertake a limited amount of street work to encourage some clients into services. The point was made by one agency that it was not street work as such which encouraged or discouraged people from remaining on the streets, but the nature of such work.

Westminster has increased the role of assertive and interventionist street work in the programme, which has been shown in other areas to play a key role in encouraging rough sleepers to access accommodation and services. It might be worth considering further expanding this function, which is currently more limited than in some other areas. The emphasis on providing services within buildings would remain, but be combined with a more interventionist approach on the streets. There might be some scope for further clarifying what is expected of outreach staff in implementing an assertive approach, for example on the number and nature of contacts with rough sleepers who are resistant to accepting accommodation and support and what messages are given to them.
There is a strong view among BBS that they should also undertake street work to provide a seamless service. However, if further progress towards meeting targets is not maintained, it might be worthwhile considering whether such an assertive role can be combined with the support provided by the BBS, or whether it would be more effectively carried out by a separate team. There might be benefits in a single, borough-wide contract to provide a consistent message and impact and to deter rough sleepers moving between localities. Ideally this team would tackle all street activities and be combined with the proposed team for which Home Office funding is being sought, as they will inevitably be dealing with people who are rough sleepers. It would replace the current street work undertaken by the BBS and SRS and some of the work of the SSHU and City Guardians. There could therefore be some offsetting cost savings. Other possible savings on meetings are suggested below.

**Support**

The BBS are undertaking detailed needs assessments of clients and providing a wide range of high quality support, with access to other specialist services when necessary.

The one gap identified was in comprehensive support and treatment services for rough sleepers with common mental health problems such as anxiety and depression, which can affect their ability to resettle successfully. At present the limited resources are concentrated mainly on those with severe and enduring mental health problems. There are some services for others, but consideration could be given to extending support to the wider group, possibly by expanding one or more of the existing services. This would require additional resources.

**Reconnection**

There has been a substantial increase in the amount of reconnections work with new arrivals and this is likely to have had an important impact on the number of people sleeping rough. However, there appear to be differing and unclear definitions of what constitutes a new arrival. This results in an inconsistent service. There is a need to monitor whether this causes problems in helping people to move and whether there is a need for a clearer definition.

There would be scope to expand the reconnection service. Some rough sleepers interviewed, not all new arrivals, would consider a move to another area but had not been offered assistance. In addition to reconnecting new arrivals, the possibility of resettling in another area could be suggested to all rough sleepers and hostel residents.

Developing knowledge of and links with agencies in other areas is a specialist task. However, apart from the reconnection project in Victoria Hostel, other staff have limited time to develop such work. It might in any event be inefficient for staff in different agencies to develop parallel systems. It would be worth considering the case for establishing a specialist reconnection project to which all new arrivals (in accordance with the Reconnections Protocol) and longer term residents with an interest in moving to another area would be referred. Building on the Homeless UK and Homeless London websites, the Emergency Accommodation Directory and the Supporting People Directory of Services, the project could collate information on projects nationwide and develop arrangements with them for referring clients, so as to ensure the reconnection was successful. It might be worth considering a central or inner London project jointly commissioned with other boroughs.
The police and law enforcement

The police play a very active role in Westminster’s rough sleeping programme which is much appreciated by the other participating agencies. There is support locally for the selective and creative use of ASBOs, although it has proved more difficult than in some other areas to obtain these. While not suggesting that their widespread use is a solution to rough sleeping, it would be worth investigating further how ASBOs might be more successfully used in specific cases.

A8 nationals

There is wide agreement among Westminster agencies that local homelessness agencies should not normally be involved in providing support for A8 nationals, except in short term emergencies or where there is a serious mental health problem. Alternative proposals have been made to the Government for meeting the employment and support needs of this group and these could be pursued in alliance with other agencies and local authorities with similar problems.

Hostels

Westminster has a large supply of hostel beds and there is no evidence of a need for an increase in the total supply. However, it is recognised that there are difficulties in accommodating some very high needs or high risk people. Westminster is reviewing its current provision as part of the Supporting People programme to identify any gaps which might be filled by the reprovision of existing accommodation.

It is also thought that some people in hostels have low support needs and do not require that type of supported accommodation. Rapid access to other accommodation, for example in the private rented sector, would free up beds for those who do need them.

As in other areas of London, improvements in move-on opportunities would increase the supply of vacancies (see below).

Some hostels are more successful than others at accommodating rough sleepers with high needs and at helping them to resettle. The CHAIN reports identify the varying performance of hostels and Westminster City Council will be working to bring the performance of all up to the highest standard. This could have an important impact on reducing the numbers returning to the streets.

Move on accommodation

Westminster is an area of very high housing costs and high demand for social housing. Work is in hand to develop schemes to help with access to the private rented sector and there might also be scope to secure access to other types of housing in lower demand areas by further developing the reconnections work.

Management

The management and co-ordination structures for BBS appear to be complex, with at least ten different groups meeting in addition to Westminster City Council’s management and the BBS Co-ordination Unit.

A simplified structure might be:

- Westminster City Council: commissioning and contract management, programme co-ordination.
- Steering Group: an advisory and co-ordinating group attended by Westminster City Council and managers from all partner agencies.
- Task and Targeting meetings: attended by staff from frontline agencies to co-ordinate integrated plans for area actions and for every rough sleeper.

A simplified structure would release staff time to devote to service delivery, including an enhanced street intervention service.
The successful development of joint work between the different agencies has been an important success of the BBS programme and was thought to be key to the reduced street count in September 2006. Service User Update Meetings which regularly agreed coordinated actions on each service user were a particularly useful aspect of this joint work.

Conclusion
The BBS and other local rough sleeping programmes have achieved improvements in joint work and the support offered to rough sleepers. The September 2006 street count suggests that these improvements are resulting in reductions in the numbers of rough sleepers, although further counts will be necessary over the following months to assess whether this reduction is sustained and further progress made.

A number of possible further improvements to the programmes have been identified, including:
- more assertive and interventionist street work
- support for people with mental health problems such as depression, anxiety and personality disorders
- extending the reconnections services
- ensuring suitable accommodation and support is available for some people with very high needs or who present high risks
- improving move-on opportunities, including into the private rented sector.
# Appendix 1 Tables

## Table 1 Westminster street counts of rough sleepers 2001/6

<table>
<thead>
<tr>
<th></th>
<th>2001</th>
<th>2002</th>
<th>2003</th>
<th>2004</th>
<th>2005</th>
<th>2006</th>
</tr>
</thead>
<tbody>
<tr>
<td>Victoria</td>
<td>32</td>
<td>53</td>
<td>73</td>
<td>50</td>
<td>69</td>
<td>57</td>
</tr>
<tr>
<td>West</td>
<td>47</td>
<td>54</td>
<td>50</td>
<td>45</td>
<td>58</td>
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<td>46</td>
<td>63</td>
</tr>
<tr>
<td>Central North</td>
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<td>16</td>
<td>33</td>
<td>18</td>
<td>17</td>
<td>17</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>120</td>
<td>169</td>
<td>200</td>
<td>145</td>
<td>197</td>
<td>191</td>
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</tbody>
</table>

<table>
<thead>
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<th></th>
<th>Jan</th>
<th>Feb</th>
<th>Apr</th>
<th>Sept</th>
<th>Nov</th>
<th>Jan</th>
<th>Mar</th>
<th>Jun</th>
<th>Sept</th>
<th>Nov</th>
<th>Mar</th>
<th>Sept</th>
</tr>
</thead>
<tbody>
<tr>
<td>Victoria</td>
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<td>69</td>
<td>60</td>
<td>60</td>
<td>37</td>
<td>41</td>
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<td>38</td>
<td>44</td>
</tr>
<tr>
<td>West</td>
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<td>41</td>
<td>47</td>
<td>53</td>
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<td>37</td>
<td>55</td>
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<td>27</td>
<td>37</td>
</tr>
<tr>
<td>Central North</td>
<td>27</td>
<td>17</td>
<td>23</td>
<td>25</td>
<td>25</td>
<td>16</td>
<td>19</td>
<td>31</td>
<td>35</td>
<td>32</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>214</td>
<td>166</td>
<td>175</td>
<td>193</td>
<td>146</td>
<td>136</td>
<td>127*</td>
<td>160</td>
<td>156</td>
<td>152</td>
<td>108</td>
<td></td>
</tr>
</tbody>
</table>

* Total excludes A8s, but their locations are not known, so are included in the figures above the total

## Table 2 Reasons for leaving hostel accommodation – selected hostels

<table>
<thead>
<tr>
<th>REASON FOR LEAVING (NUMBERS)</th>
<th>Accommodation</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Abandoned</td>
</tr>
<tr>
<td>ECHG King George’s</td>
<td>12</td>
</tr>
<tr>
<td>Look Ahead, Victoria</td>
<td>27</td>
</tr>
<tr>
<td>SA Edward Alsop Court</td>
<td>11</td>
</tr>
<tr>
<td>St Mungo’s Harrow Road</td>
<td>2</td>
</tr>
<tr>
<td>Passage House</td>
<td>27</td>
</tr>
<tr>
<td><strong>All hostels</strong></td>
<td>138</td>
</tr>
</tbody>
</table>
Appendix 2

Research methods

The first stage was a review of internal documents from Westminster and partner agencies on the policies and work methods of the three BBS projects.

Monitoring data from the BBS and other partner agencies were reviewed quarterly. A key source was the database (CHAIN) of all known rough sleepers operated by Broadway.

Two Target and Tasking meetings and one Service User Update Meeting were observed.

There were semi-structured interviews with staff in 16 partner agencies.

The interviews covered:
- The impact of the projects in helping rough sleepers to move off the streets.
- Work methods which have proved most effective.
- The role of specialist work with people with mental health problems, substance abuse and multiple needs.
- The impact of different types of service provision and which have proved most accessible for rough sleepers.
- Numbers of rough sleepers who are still refusing services and why.
- Proposals for more effective work with the rough sleepers remaining on the streets.
- Street management policies.
- The role of other services, such as day centres and offstreet drinking facilities in reducing both rough sleeping and street living.
- The connections between rough sleeping and street living, the extent to which they overlap and reinforce each other.
- The role of the police in identifying rough sleepers and referring them to helping services.
- The role of police enforcement activity in reducing street living and rough sleeping.
- The role of WCC in strategic planning and in supporting agencies.
- Monitoring and evaluation systems.
- Proposals for future developments.

There was an analysis of a random sample of 30 needs assessments to assess:
- The range of needs of service users.
- How effectively these needs have been assessed.
- The range of services which have been provided.
- The outcomes of these services.

There were in-depth qualitative interviews with 55 service users covering:
- Histories of homelessness and rough sleeping.
- Support needs, including mental health, drug and alcohol problems.
- Why they came to Westminster.
- The extent to which their needs have been met by the projects.
- If they have refused the offer of services, why and what would encourage them to take up services.
- Their future plans.
- How services could be improved.

Thirty service user interviewees were day centre users; 13 were interviewed in hostels; a further 12 were in contact with the Assessment Centre and the Street Rescue Team.
BBS group meetings

Service User Update Meeting
- Fortnightly
- Building Based Services (BBS), Safer Streets Homeless Unit (SSHU), City Guardians, Safer Neighbourhood Teams, West London Day Centre
- Devises the plans for individuals and areas.

Target and Tasking meetings (West, South and Central areas)
- Monthly.
- BBS Managers, BBS Co-ordination unit, SSHU, Homeless Arrest Reachout Team (HART) manager, Thames Reach Bondway Street Rescue Service (Westminster) (WSRS) manager, Westminster City Council (WCC) rough sleeping team.
- Overview of BBS performance, area action plans, multi count clients, team activity etc.

Silver Group
- Every two weeks
- SSHU Inspector, WCC (management level), BBS Co-ordination unit, Dept for Communities and Local Government (DCLG)
- Pan-Westminster issues – counts, SSHU pro active operations, SWEPS, media issues, ad-hoc problems

Gold Group
- Every two months
- WCC Director of Housing (Chair), DCLG, Chief Superintendent (Met Police), Chair of WCC Drugs Alcohol Action Team (DAAT), Assistant Director Community Protection, Rough Sleeping Manager, SSHU
- High-level Westminster and commissioning issues.

Steering Group
- Every six weeks
- BBS Chief Execs / service managers, Chair of DAAT, Community Protection, Primary Care Trust, Homeless Link, Joint Homelessness Team.
- Tends to be more of an information group for BBS and other agencies rather than a true steering group.

Multi-agency meeting
- Every six weeks
- BBS managers, Hostel managers, WCC rough sleeping team
- More service delivery focused. Sharing of best practice, identifying gaps in service provision, common problems, for information items.

The following meetings do not involve Westminster:

BBS Managers meeting
- Fortnightly
- Heads of BBS teams
- Co-ordination, operational leadership

Hostel Managers meeting
- Every six weeks
- To co-ordinate hostel and BBS policies / activities

Consortium meeting
- Bi-monthly
- BBS Chief Executives
- Strategic overview meeting

BBS Peer meetings
- BBS front-line staff meetings to share best practice, discuss issues

References

Homeless Link (2006) A8 nationals in London homelessness services
Randall, G. and Brown, S. (2002) Helping rough sleepers off the streets, ODPM,
Vantagepoint (2003) Street outreach services review