Re-thinking Persistent Entrenched Rough Sleeping in Leicester

Leicester City Health and Wellbeing Board 12th July 2018

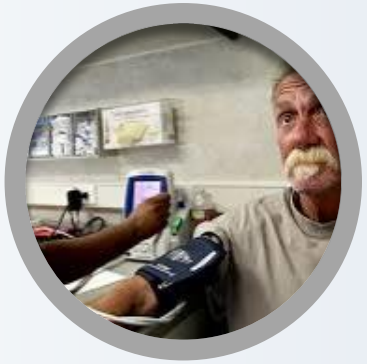
Service provision for homeless/rough sleepers: the current picture

Housing

-LCC Revolving Door floating support
-Dawn Centre
-Temporary accommodation (YMCA/Action Homeless/Home Group/Adullum Homes)
-Heathfield House
-Community of Grace Hunters Lodge
-Accommodation Assist/ Plus

Substance misuse

Turning Point
5 Hill St
(former Anchor Centre)

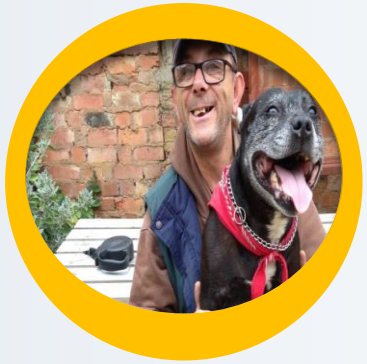


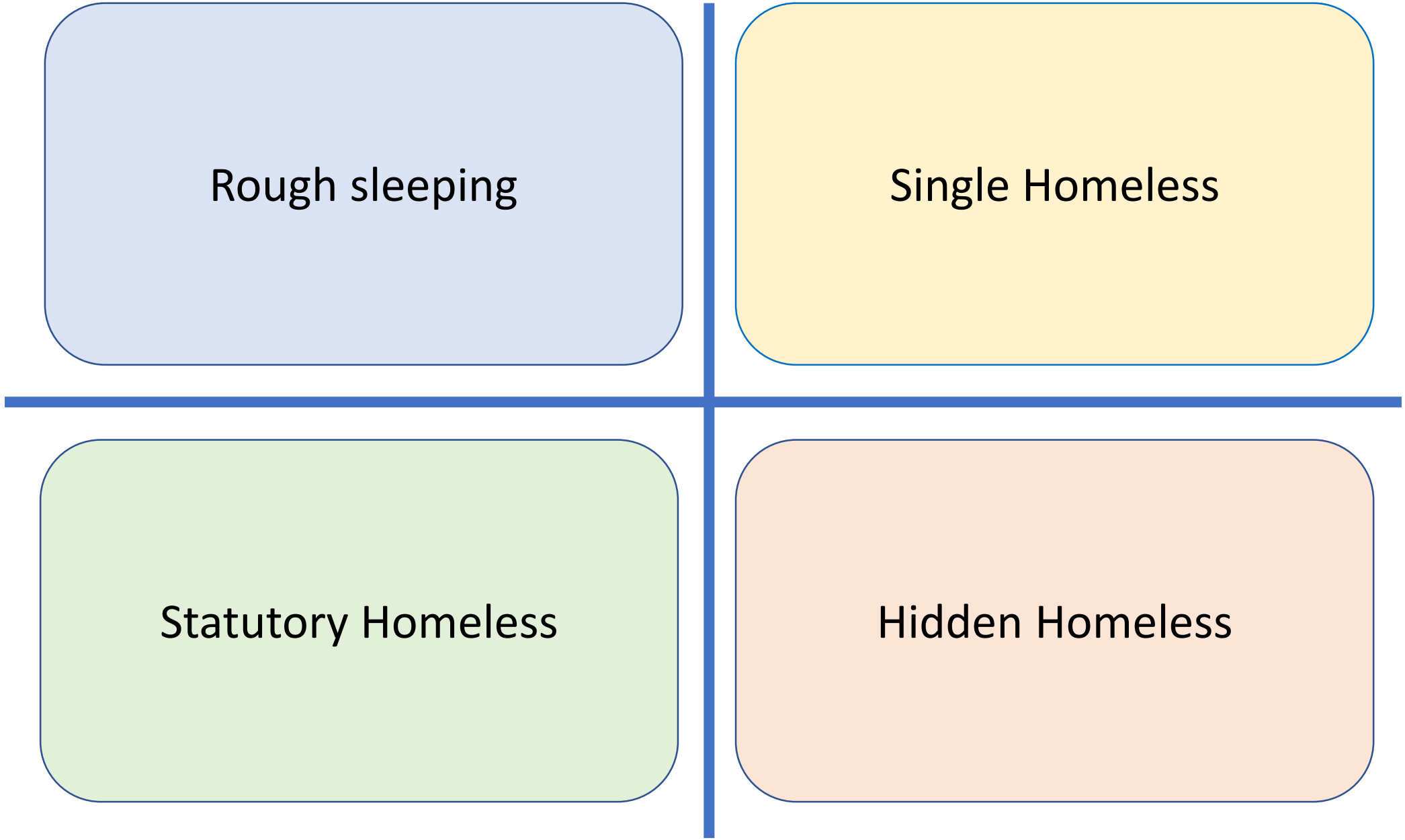
Physical & mental health

Homelessness Health services – Dawn Centre/ Charles Berry House (Inclusion Healthcare)
Homeless Mental Health service (LPT)
TB service (PHE/UHL)

Advice, support & outreach

The Y support project
Saturday Stop-by
The Bridge Homelessness to Hope
SoundCafe
LCC outreach workers

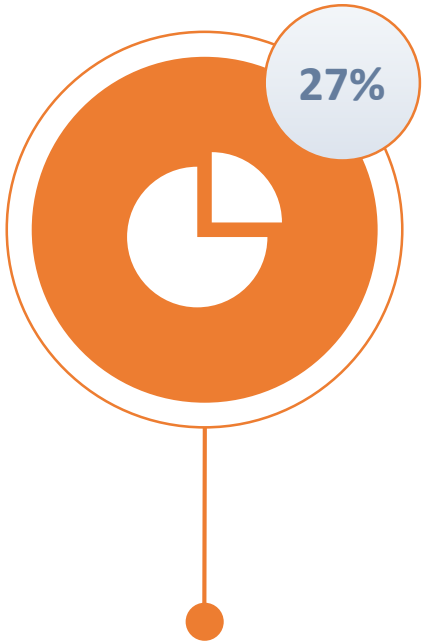



Rough sleeping
Single Homeless
Statutory Homeless
Hidden Homeless

What's the need?

Local census of 91 homeless people found that....

Had been evicted from hostel for drug/ alcohol abuse



Had trouble maintaining tenancy / been evicted because of underlying mental health issue

Said current episode of homelessness triggered by traumatic experience

Reported long term physical health

.... pointing to small **cohort** with very complex patterns of need: the focus for this work.

Characteristics of local entrenched rough sleepers (from SLOG Case Histories)

- Appear to have difficulty managing their emotions
- Have self-harm issues
- Have an uncontrolled drug and/or alcohol problem
- Appear to be impulsive, withdrawn or socially isolated and reluctant to engage with help which is offered
- Exhibit anti-social or aggressive behaviour
- Lack any structure or regular daily routine
- Have not have been in work or education for significant periods of time
- Have come to the attention of the criminal justice system due to offending.

Identifying Cohort

Homeless/rough sleeping > 6months with a lack of engagement, or with failure of services to find an appropriate solution, or history of repeat engagement/disengagement

With one or more of the following

- Ongoing drug and/or alcohol issues
- History of mental health issues
- Long term physical health issues
- History of being institutionalised (prison, mental health hospital, looked after children)
- History of trauma including abuse

Making it happen: project governance & delivery

City Health & Well-being Board
Chair: Cllr Clarke

To provide multi-agency leadership for the project across key partners (LA/ NHS/ PCC)

PIE Steering Group
Chair: Cllr Myers

To provide oversight, steer and endorsement for the development/ assessment of the PIE/Housing First Model

Project Board
Chair: Ruth Tennant, DPH

To oversee the delivery of the feasibility study for a PIE / Housing First model in Leicester & to take forward implementation of recommended option

To ensure wider stakeholder & community input and buy-into the project in liaison with the PIE group

Project team
Project lead: Julie O'Boyle, LCC

To Identify and work with key stakeholders at operational level to deliver the feasibility study

To undertake the feasibility study

To provide regular updates to the Project Board, PIE group, Health and Well-being Board and other key stakeholders

Key lines of enquiry

A new model for entrenched rough sleepers/ complex cases in Leicester: can we do this in Leicester?

1

What are PIE models?

What do they look like and how do they work?

2

Who is our target group?

Who do we need to get to & why?

3

What services have we got now?

How can we build on what's in place across our agencies?

4

Appetite for change?

Are we ready to work differently in how we commission/ provide services?

5

What would need to change?

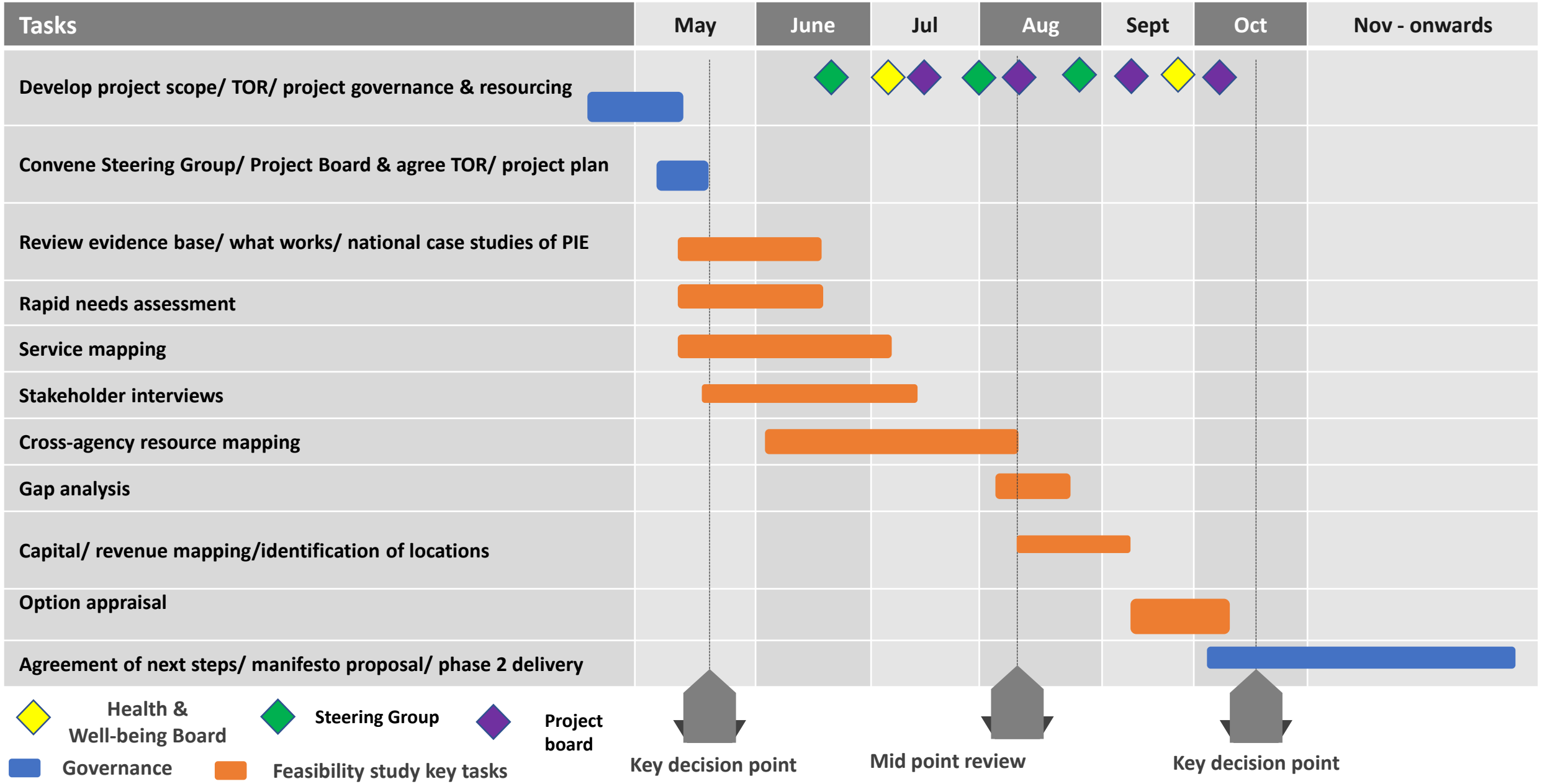
New building, changes to how services work or both?

6

Resources?

How do we use existing or available resources to support implementation?

Key high-level milestones



So what works?

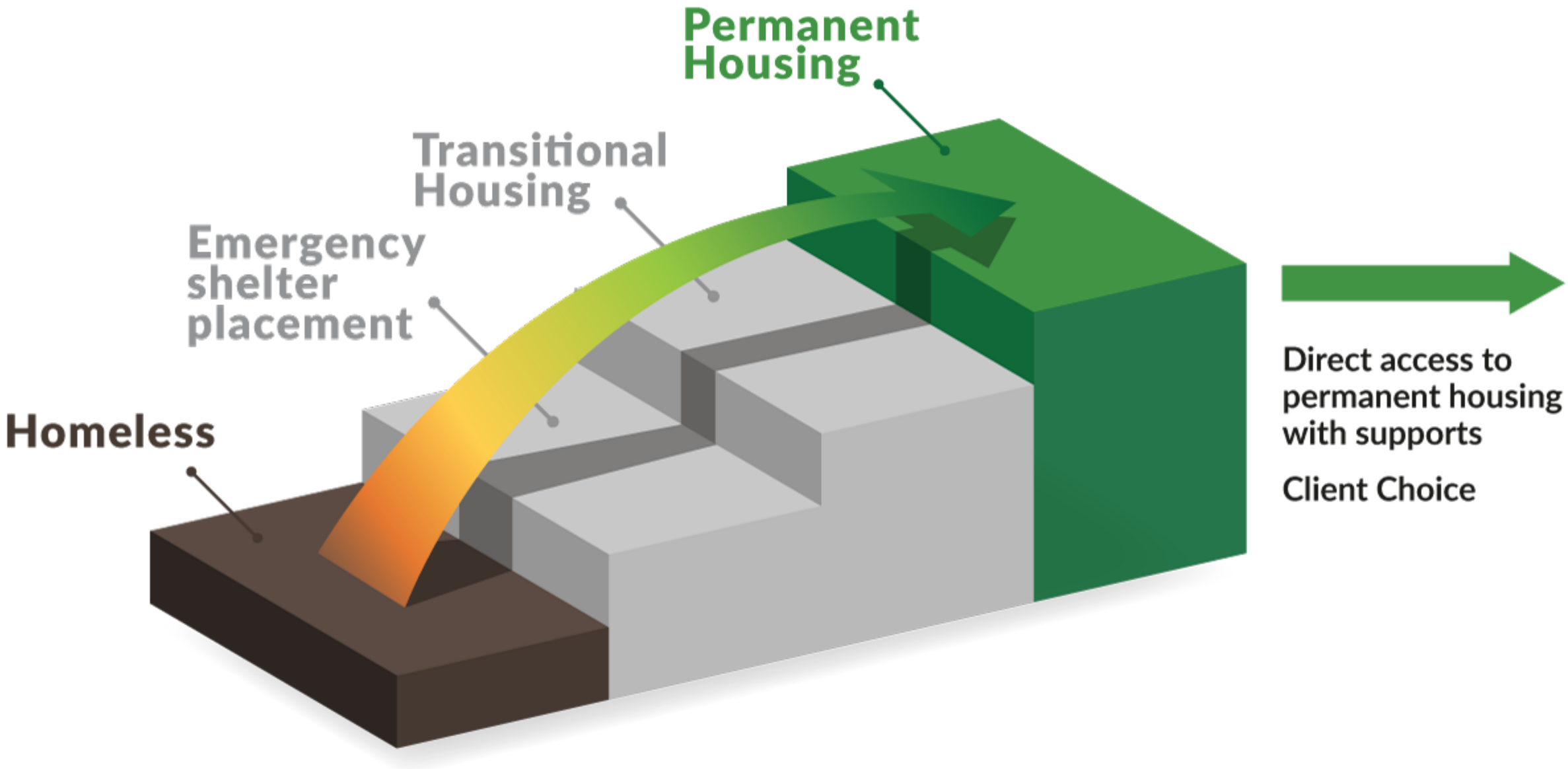
Results of Literature Review

Housing First

- strong evidence from UK and international trials, showing high (>60%) retained housing at 1 year
- Economic modelling shows potential cost savings in UK (up to £15,000)
- Fidelity to the model varies across interventions

Psychologically informed Environments (PIE)

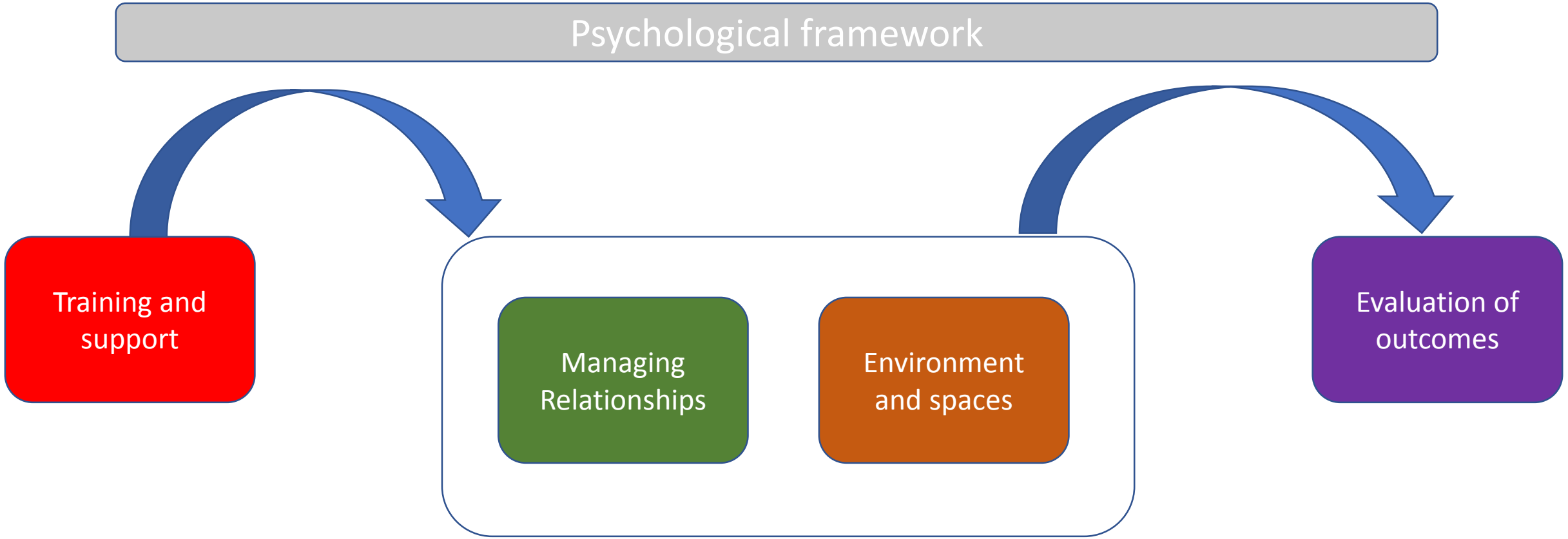
- Less weight of evidence than Housing First, but some promising results in early evaluations
- Best results appear to be in services that have direct psychologist involvement with clients
- Unclear in literature when this is best used with Housing First or as alternative in same group of people



Recovery Oriented Support and Treatment Service

PIE

A psychologically informed environment, or “PIE”, is a place or a service in which the overall approach and the day-to-day running have been consciously designed to take into account the psychological and emotional needs of the service users.



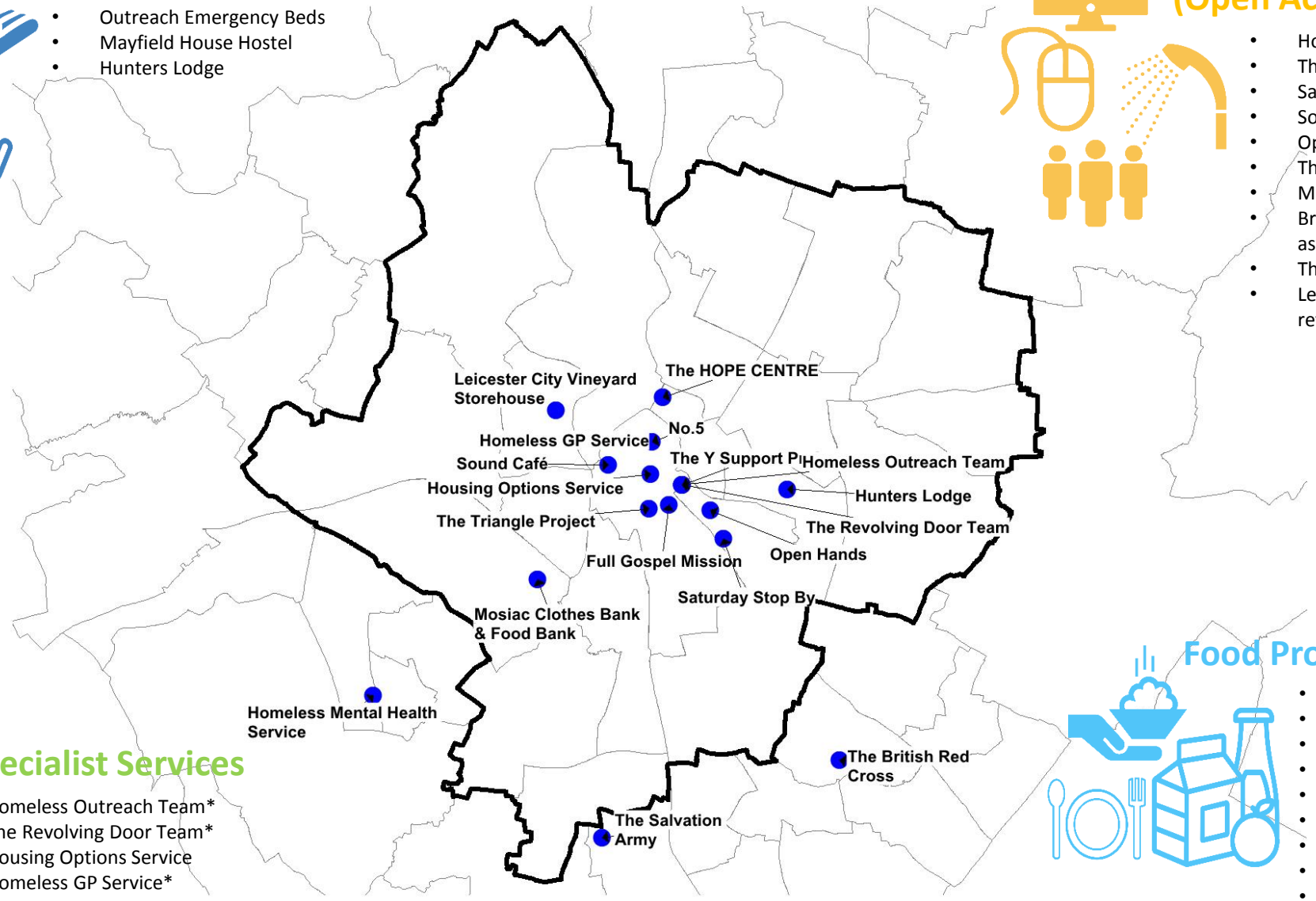
Current Service Provision

Accommodation

- The Dawn Centre
- Outreach Emergency Beds
- Mayfield House Hostel
- Hunters Lodge

Drop In Service (Open Access)

- Hope Centre
- The Y Support project
- Saturday Stop By
- Sound Café
- Open Hands
- The Triangle Project
- Mosaic Clothes Bank and Food Bank
- British Red Cross – for refugees and asylum seekers
- The Salvation Army
- Leicester City Vineyard Storehouse – referral only



Food Provision

- Hope Centre
- The Y Support project
- Saturday Stop By
- Sound Café
- Open Hands
- The Triangle Project
- Mosaic Clothes Bank and Food Bank
- Full Gospel Mission
- The Salvation Army
- Leicester City Vineyard Storehouse
- No.5

Targeted/Specialist Services

- Homeless Outreach Team*
- The Revolving Door Team*
- Housing Options Service
- Homeless GP Service*
- No.5
- Turning Point Substance Misuse
- Homeless Mental Health Service*

**Services available at Dawn Centre*

Stakeholder Interviews

- Action Homeless
- Homeless Out Reach Team,
- Homeless Mental Health outreach team
- Steering Group Members
- National and local PIE experts
- Council officers (ASC/housing/ enforcement/substance misuse)
- GPs
- Inclusion Health Care
- Turning Point
- Rough sleepers
- ? Anyone Else