

**JOINT STRATEGIC NEEDS ASSESSMENT**

**REPORT OF THE DIRECTOR OF HEALTH, HOUSING AND ADULT  
SERVICES**

**STRATEGIC PRIORITIES: SP2: Healthy City; SP3: Safe City; SP5:  
Attractive and Inclusive City**

**CORPORATE PRIORITIES: CIO1 Customer focused services; CIO2 One  
Council; CIO3 Efficient and effective council; CIO4 Improving  
partnership working**

**1. PURPOSE OF THE REPORT**

- 1.1 To brief the Committee on the Joint Strategic Needs Assessment in relation to Homelessness, Hostels, Rough Sleeping and Migration.

**2. BACKGROUND**

- 2.1 Housing is one of the strategic issues that falls within the remit of the Sustainable Communities Scrutiny Committee. The Committee has considered the issues around housing on an ongoing basis over several years.
- 2.2 At the beginning of this municipal year, and in response to a number of issues surrounding hostels within the city, the Committee requested a detailed report outlining the strategy for the city going forward in respect of this issue.
- 2.3 The context and the proposed approach to the hostels is now contained within the wider Joint Strategic Needs Assessment and the Committee will be briefed on the wider needs assessment. This JSNA forms part of a wider comprehensive JSNA covering a range of topic areas and will form the basis of evidenced based commissioning in the future.

***Homelessness***

- 2.4 Homelessness can affect anyone at any time for many reasons. Nationally tackling homelessness is at the centre of the Coalition Government's commitment to protect the most vulnerable in society and promote social justice. People living on the streets are some of the most disadvantaged people in society – at risk of severe illness, violence and early death.
- 2.5 Typically homeless households are thought of as those who are sleeping rough. From a legislative perspective however, local authorities have a duty to assess and provide assistance to households who are threatened with homelessness within 28 days. In deciding whether people are homeless, the council has to look at any accommodation they have access to. People should be considered homeless if they:-

- have no home in the UK or anywhere else in the world;
- have no home where they can live together with immediate family;
- can only stay where they are on a very temporary basis;
- don't have permission to live where they are;
- have been locked out of home and they aren't allowed back;
- can't live at home because of violence or abuse or threats of violence or abuse, which are likely to be carried out against them or someone else in the household;
- it isn't reasonable for them to stay in their home for any reason (for example, if the house is in very poor condition); or
- they can't afford to stay where they are

2.6 Households can become homeless for a number of reasons. On average, 3,400 households approach the Local Authority per year for assistance relating to homelessness and housing advice. Over recent years the number of cases accepted as unintentionally homeless and in priority need have been reducing as the Council has embraced a more preventative agenda.

### ***Supported Housing and Hostel provision***

2.7 The Council and other agencies provide support to vulnerable households through contracting arrangements for supported housing schemes and services. Previously, this was through the Supporting People programme. The Council also has a strategic oversight role, which includes a duty to evaluate local housing requirements and the appropriateness of existing accommodation based upon locally identified need. As part of this strategic role a hostel plan has recently been produced to address emerging issues in inappropriate private hostels that are not part of the supported housing programme where safeguarding issues have been raised. There are a number of private hostels within the city, particularly in the Sunnyside area, that have a large number of clients with substance misuse and alcohol addictions, in addition to mental health issues that receive minimal levels of support. As part of the Hostel plan it is proposed that these households will be transitioned into more appropriate and supported accommodation. The last year has seen increased activity and engagement with those living in the hostels and on the basis of the intelligence that we have gathered a more bespoke strategy for the hostels will be developed.

### ***Rough Sleeping***

2.8 Homelessness is about more than just providing housing. Homeless people often have complex underlying problems that can be worsened by living on the streets or in insecure accommodation. When most people think of a homeless person they tend to think of someone sleeping rough on the streets

2.9 The figures for rough sleeping published on 17 February 2011 by the Department for Communities and Local Government (DCLG) showed a total of 1,768 people sleeping out across England on any given night. In London, rough sleeping, the most visible form of homelessness rose by 8% last year. In Sunderland the level of rough sleeping is relatively minor compared to other cities. Several recent rough sleeper counts suggest that up to 3 people sleep rough per night in Sunderland. Regional work suggested that this may be higher but it is felt that this is not the case in Sunderland.

- 2.10 However, the issue outlined above in relation to the unregulated hostels could potentially mask a hidden rough sleeper problem. Currently the Council are in the process of developing a pilot to use Personal Budgets for rough sleepers. This will use Regional Homeless funding and has been agreed as a pilot for the north east.
- 2.11 The Council is working very closely with Homeless Link, a homeless charity who have been given an increasing role by the government in relation to homelessness; and who are now responsible for verifying Rough Sleeper counts in relation to carrying out a single homelessness survey carried out over a month long period to estimate how many people are sleeping rough in Sunderland on any given night.

### ***Migration and Asylum Seekers***

- 2.12 A national study published by Migration watch on 1 September 2011 found that immigration was responsible for almost 40% of the growth in households between 2001 and 2008 nationally. Looking ahead, 36% of new households will, according to official projections, be a result of immigration. Sunderland has experienced a declining population over several decades, and continues to be a net exporter of residents to other areas, particularly Newcastle and Durham.
- 2.13 As part of the process of assessing asylum seekers applications, asylum seekers are dispersed around the country and temporarily housed whilst the Home Office decides on the asylum application and whether a person can stay in the country. On average there are 170 households (single people and families) awaiting the outcome of their asylum application.

## **3. KEY ISSUES AND GAPS**

- 3.1 Homelessness is beginning to rise. As the impacts of the economic downturn continue, the turmoil in global financial markets linked to historical toxic debt widens, and as the long-term housing shortage takes hold housing advice and accommodation services are now seeing greater demand for help from people having lost or are under threat of losing their home.
- 3.2 Official statistics are now showing an increase in the number of homeless people including a rise in street homelessness and the use of temporary accommodation. The cuts to affordable housing budgets, proposed changes to housing benefit entitlement and the introduction of the 'Universal Credit' are likely to make things worse for those people at risk of homelessness. All made more acute by the reductions in public sector funding putting advice and support services at risk in the future too.

### ***Key issues***

- 3.3 Homelessness:-
- Homelessness is rising nationally, but not currently in Sunderland;
  - Lack of suitable move on accommodation in Sunderland;
  - The need to implement a new allocations policy focusing on need;

- The need to identify 'hidden' homeless households and provide support and advice; and
- Nationally homelessness acceptances have increased by 17% between June 2010 – June 2011. Although having not experienced this trend in Sunderland there is a real risk with the Welfare Reform changes that acceptances could increase.

### 3.3 Hostel provision:-

- Inappropriate private sector hostels – especially in the Sunnyside area;
- Lack of support services (methadone clinics/needle exchanges/drop-in centres citywide/additional rehab spaces);
- A co-ordinated approach to the placement of clients in temporary/hostel accommodation incorporating a clear understanding of their needs and the suitable vacancies available in the city; and
- Pressure is being placed on A&E due to a lack of options for move on leading to bed blocking at a high cost.

### 3.4 Rough sleeping:-

- Rough sleepers have an average life expectancy of just 42 years, compared with the national average of 74 for men and 79 for women; and
- People who sleep rough are 35 times more likely to commit suicide than the general population

## 4. RECOMMENDATIONS FOR COMMISSIONING

4.1 It is vital that all support services recognise the complex lives of homeless people. We need more flexible, personal services which reflect the complexity of individual's lives so that we can achieve the vital ambition of ending rough sleeping and homelessness in Sunderland – no first night!

4.2 Therefore based upon locally identified need the following is required :-

- Develop contracted supported accommodation for homeless clients – ideally 2 projects for about 10-15 clients in each – one in the east of the city and one in the Coalfield area;
- Develop contracted supported accommodation for hostel residents - ideally 2 immediate access units (one for 15 people aged 21+, and one for 8-10 people that is gender specific);
- Develop a citywide outcome focussed move-on scheme for all potentially homeless people;
- Chronic exclusion resource for most chaotic cases, targeted at the hostel population;
- Develop a contracted 12 unit refuge for women and children at risk of domestic violence. There is a need to consider the revenue implications of developing such accommodation; and
- Increase the number of temporary family accommodation by 5 places.

## 5. WHO IS AT RISK AND WHY?

### ***Threat of homelessness***

- 5.1 Any household or person could potentially become homeless, either due to circumstance or through their own or other's actions. Homelessness has many different causes and often can be viewed as symptomatic of deeper underlying problems. Those who suffer physical and mental ill health, substance misuse, social exclusion and poverty, domestic violence and relationship breakdown and those who are offenders are more likely to become homeless. Nationally, people from ethnic minority backgrounds are around three times more likely to become homeless than their white counterparts. Such over-representation is found across all regions in England.
- 5.2 On average 3,400 households approach the Housing Options service in Sunderland every year, a rate of 28 households per 1,000 households in the city, claiming to be homeless or needing advice.
- 5.3 The majority of households that present to the service are under the age of 45, accounting for 82% of all cases, and over 90% of homeless acceptances cases. Applicants aged between 16 & 24 accounted for 38% of all applicants and 44% of homeless acceptance cases in the last 5 years.
- 5.4 Lone parent households and single young people are the most likely household types to present to the service as homeless. The largest potential causes of homelessness in Sunderland are:-
- Parents, relatives or friends no longer willing to accommodate (31%);
  - Termination of existing tenancy (10.7%);
  - Relationship breakdown (Non-Violent) (8.36%);
  - Domestic violence from partners or associates (8.4% of all presenting cases, 24.5% of homeless acceptances); and
  - Overcrowding (7.4%).
- 5.5 Crisis published a report in May 2011 about the experiences of single homeless households in England. Typically, such households are not classed as in priority need, which means local authorities have no legal duty to re-house them. The study found that:-
- The majority are 'hidden', staying in squats, sofa surfing, or sleeping rough and with no statutory entitlement to housing; and
  - 62 per cent of respondents were hidden homeless on the night they were surveyed and 92 per cent had experienced hidden homelessness.
- 5.6 The key conclusion to emerge from the study is that single homelessness and hidden homelessness are synonymous. In other words, to be a single homeless person in England in the main is to be 'hidden' (from support, advice and statistics). The study suggests that single homeless people are hidden due to:-
- Not meeting the priority need criteria;

- Leaving local authority offices without receiving meaningful advice and assistance;
- Not being given the opportunity to make a homelessness application.
- Being deterred from approaching local authority due to previous negative experiences or low expectations;
- Being misinformed about their entitlements or lack of knowledge; and
- Those that do meet the priority need criteria (due to mental health, formerly in care) do not approach local authorities

5.7 As a result of being 'hidden', people who could have promptly exited homelessness, had they received support, join a population of long-term homeless people with increasing support needs.

5.8 The report found that of the households that were hidden homeless on the day of the survey many were vulnerable with potentially significant support needs.

Potential Support Needs	%
Has spent most of their adult life unemployed	36
Has mental ill health	34
Has experienced drug dependency	32
Has a physical health problem or disability	35
Has experienced alcohol dependency	34
Was excluded or suspended at school	29
Has experienced violence/ abuse from a partner	23
Has experienced violence/ abuse from other family members or family friends	25
Has been in local authority care	25
Has children being looked after by someone else	26
Has literacy problems	21
Sometimes self harms	17
Has suffered the death of a long term partner	6
Has been in the armed forces	7

*The hidden truth about homelessness, Experiences of single homelessness in England,(2011), Crisis*

### **Supported Housing and Hostels**

5.9 The Local Authority funded supported housing schemes and support for 28,048 households in December 2010. There are a range of client groups. They are older people with support needs; physical/mental disabilities; young people; single homeless households; homeless families with dependents and victims of domestic violence. There are also cross cutting services to various client groups.

5.10 There are 14 hostels/supported housing units in the Sunnyside area and the surrounding locality, with 334 bed spaces. Specifically in the Tavistock area there are four privately run hostels with 146 bed spaces. The client profile is varied and the concern is that the needs of clients are becoming more varied and complex requiring more personalised services. In these hostels the clients receive a minimal level of support but there are serious safeguarding concerns. These 'risks' have been further highlighted to the Council by the Care Quality Commission and the DCLG.

- 5.11 According to the No Health without Mental Health Strategy 2011, 60% of hostel residents suffer from some form of personality disorder. Much earlier research into the issues faced by single homeless people found that over a third of people in hostels and B&Bs, and well over half of people sleeping rough, reported more than one health problem compared to a quarter of the general population.
- 5.12 Such problems as depression, anxiety and nerves were amongst the most common for those who lived in hostels and B&B's. In comparison to the general population, it was found that residents in hostels and B&B's were eight times more likely to suffer from some form of mental health problem. The research further found that people living in hostels were also more likely to have some form of digestive problems relating to poor diets as well as other issues related to alcohol and drug use.

### ***Rough Sleepers***

- 5.13 In July 2011 the Government launched the vision to end rough sleeping: "No Second Night Out Nationwide". The focus of the vision is to help single homeless people who are not in 'priority need', including those who are living on the streets and those who are at the greatest risk of rough sleeping because they have lived on the streets or are living in insecure accommodation, such as hostels or shelters.
- 5.14 The No Second Night Out document found that in London, 52% of rough sleepers have alcohol support needs, 32% drug support needs, and 39% mental health problems. Many have had extensive contact with the state: 37% had previously been in prison, 12% in care and 3% in the UK Armed Forces. These factors can often be linked to social disadvantage. For example, family breakdown, debt and a lack of skills or qualifications. Many have experienced some form of trauma in their life.
- 5.15 Earlier studies by the Social Exclusion Unit considered the issue of rough sleeping in 1998. On the subject of who sleeps rough the Unit found:-
- There were very few rough sleepers aged under 18;
  - Around 25% are between 18 and 25;
  - Six per cent were over 60; and
  - Around 90 per cent were male.
- 5.16 The report confirmed findings of earlier studies on the main causes of rough sleeping. The single most common reason given for the first episode of rough sleeping was relationship breakdown, either with parents or a partner. Research by Centrepoin with homeless young people across the country found that 86 per cent had been forced to leave home rather than leaving out of choice. Homeless agencies continue to report that physical or sexual abuse lies behind a significant minority of family conflicts.
- 5.17 Older homeless people have also identified family crises as a key factor in their situation. Widowhood and marital breakdown figure largely as causes of homelessness as do eviction, redundancy and mental illness.

- 5.18 A disproportionate number of rough sleepers have experienced some kind of institutional life such as being in local authority care, prison or the armed forces.
- 5.19 Around 30-50% of rough sleepers have been found to suffer from mental health problems, although very few of these people have ever been in a long-stay hospital and have become homeless upon discharge. A high percentage of rough sleepers (around 50%) have been found to have a serious alcohol problem. Drug problems are more prevalent amongst younger rough sleepers; the Unit noted that research carried out in 1996 found that 39% of people sleeping rough under 26 had a drug problem

### ***Asylum Seekers***

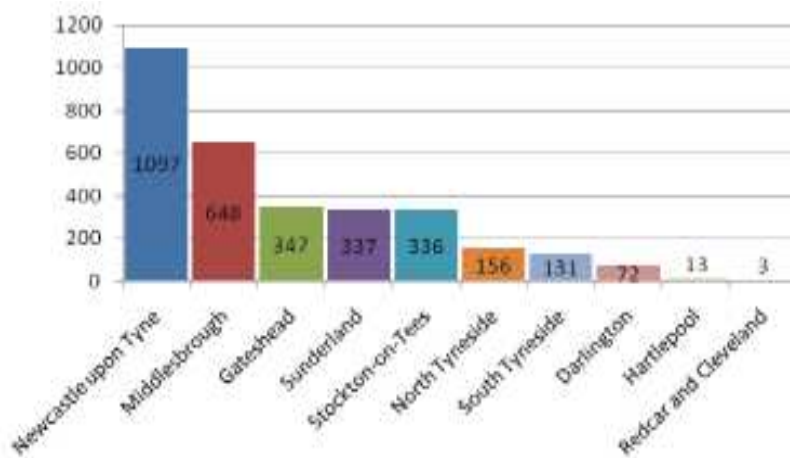
- 5.20 Asylum is protection given by a country to someone who is fleeing persecution in their own country. It is given under the 1951 United Nations Convention Relating to the Status of Refugees. To be recognised as a refugee, a person must have left the country and be unable to go back because they have a well-founded fear of persecution. The Refugee Council published a report, 'Chance or choice? 2010', which looks at the reasons why asylum seekers came to the UK. It found that:-
- There is clear evidence that conflict is the single biggest reason why asylum seekers come to the UK and that most asylum seekers are primarily concerned with escaping from persecution or war. It is these 'push' factors that are decisive in the decision to migrate, rather than the 'pull' of any particular destination country;
  - The majority of respondents (over 80 per cent) had very little time to plan their journey and left within a matter of days or, at most, weeks of deciding their safety was at risk if they did not leave the country;
  - Most people fleeing for their lives were helped to leave by an external party or agent, who made the key decisions about their destination and helped to facilitate the journey to safety;
  - Around a third came from countries which had previously been British colonies or under British administration. For the minority who made choices about where to claim asylum, historical and colonial links appear to play an important role;
  - Very few asylum seekers had any detailed or meaningful knowledge of the UK asylum or welfare system. Most respondents had been working in their home country and expected they would be able to and need to work in order to support themselves and their families when they came to the UK; and
  - Three quarters had no knowledge of welfare benefits and support before coming to the UK and most had no expectation they would be given financial support. There is no evidence that respondents consider the UK welfare system to be more generous than that of other countries.

<http://www.refugeecouncil.org.uk/Resources/Refugee%20Council/downloads/chancechoice.pdf>

- 5.21 As at the end of June 2008 there were 3,181 asylum seekers in the North East receiving either subsistence only support or in National Asylum Seeker



Service (NASS) accommodation. This is a decrease of 12.49% or 454 from the end of March 2008 (3635).



North East Refugee Service, June 2008

\*The current figure for asylum seekers in the city is 170, almost half of the reported figure in 2008.

## 6. LEVEL OF NEED WITHIN THE POPULATION

### **Homelessness**

- 6.1 Of the 3,400 applicants that approach the service per annum only a small fraction of cases undergo a full homeless assessment. The outcome of cases in 2010/11 was 6.2% homeless decisions, 25.6% prevention cases, 58% advice cases and 10.1% other. Historically the level of homeless acceptances has been declining in Sunderland since 2005/6, after the government shifted the focus from assessing homelessness to a more preventative agenda in 2002/3. This has resulted in the number of acceptances falling from 894 in 2003/4 to 168 in 2010/11.
- 6.2 The statistics however only show the number of cases that present to the council for homeless assessments. A recent study by ANEC, *Filling in the Picture: Homelessness in the North East and Learning What Can Be Done About It?*, 2010, suggested that a conservative estimate of the number of hidden homeless households, those that do not approach the authority, is approximately 1.5 times the number of homeless cases and prevention cases in the region. If these figures are applied to Sunderland this would equate to 1,341 additional homeless households, or 2,235 households in total per year.

### **Supported Housing and Hostels**

- 6.3 The council currently provides support to vulnerable adults through four main services types. They are accommodation based, community or social care alarm, floating support and the Home Improvement Agency services. In December 2010 Sunderland provided support to 28,048 vulnerable households. The largest client group supported was older people with support needs. The largest type of support provided to this group was the provision of

community or social care alarm services, followed by Home Improvement Agency Services and accommodation based services.

Client Groups	Supported Individuals/ Households
Older people with support needs	27,066
Young People at Risk	171
People with Learning Disabilities	160
People with Mental Health Problems	140
Single Homeless with Support Needs	139
Young People Leaving Care	129
People with Drug Problems	64
Homeless Families with Support Needs	46
Offenders or People at risk of Offending	44
Women at Risk of Domestic Violence	27
Generic	24
People with a Physical or Sensory Disability	20
Teenage Parents	18
<b>Grand Total</b>	<b>28,048</b>

Supporting People data, DCLG December 2010

### ***Rough Sleeping***

- 6.4 Successive rough sleeper counts have found that on a given night 3 people sleep rough in Sunderland. The latest was conducted in May 2010. However it is believed that formal rough sleeping counts underestimate the true level of rough sleeping. The ANEC study suggested regionally that 659 people slept rough in 2008/9, higher than what local counts suggested. Consultation with service providers and local agencies suggests that whilst this implied significantly higher figure does not apply in Sunderland, the number of people in supported housing accommodation that previously slept rough may suggest a higher figure that the count suggests.

### ***Migration and Asylum Seekers***

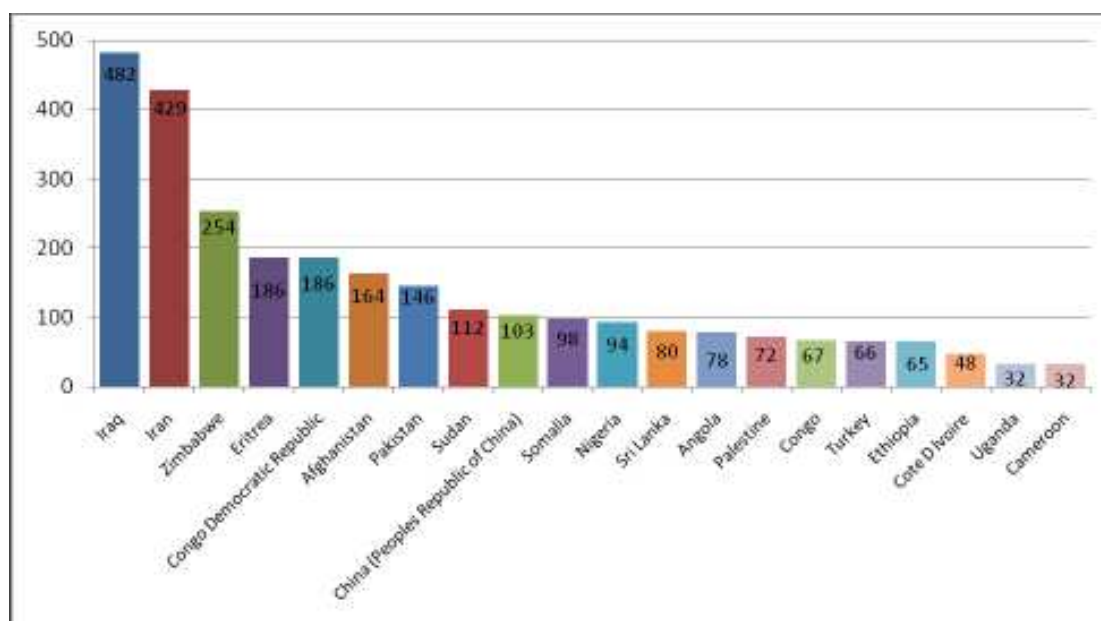
- 6.5 In September 2011 the number of asylum seekers in the city was 170. There were 100 single households and 24 families. The country of origin for families is as follows:

Country	Number
Pakistan	5
China	3
Nigeria	3
Democratic Republic of Congo	2
India	2
Sri Lanka	2
Afghanistan	1
Chad	1

Eritrea	1
Libya	1
Sudan	1
Uganda	1
Zimbabwe	1
<b>Total</b>	<b>24</b>

Source: Jomast, 2011

6.6 In 2008 the North East Refugee Service produced the latest report for the country of origin for all household types in the North East. It shows that largest number of refugees were from Iraq, Iran and Zimbabwe.



Source: North East Refugee Service, 2008

6.7 There are a number of former failed asylum seekers living in the city who are supported by voluntary/ charitable agencies. Although these cases should be considering returning to their place of origin there may be a hidden population that needs identifying. A number of asylum seekers have medical issues, such as post traumatic stress disorder and physical issues.

## 7. CURRENT SERVICES IN RELATION TO NEED

### ***Homelessness***

7.1 The Council's Access to Housing Service provides advice and help to 3,400 households per year. In addition there are some specialised roles within the team working with Substance Misuse Clients, Offenders, considering financial assistance and also a successful floating support scheme that supports on average 100 cases.

### ***Supported Housing & Hostels***

7.2 In December 2010 Sunderland council had contracts to provide 117 types of services under the old Supporting People contracts. The largest number of services was provided to older people with support needs;

Client Type	Number of Services
Older people with support needs	57
People with Learning Disabilities	18
People with Mental Health Problems	13
Young People at Risk	8
Single Homeless with Support Needs	4
Women at Risk of Domestic Violence	3
People with a Physical or Sensory Disability	3
Young People Leaving Care	2
Teenage Parents	2
People with Drug Problems	2
Offenders or People at risk of Offending	2
Homeless Families with Support Needs	2
Generic	1
<b>Total number of services</b>	<b>117</b>

- 7.3 Within the city there are a number of accommodation based services and hostel provision. Overall there are 407 bed spaces in the city, 214 of which are in private hostels that provide minimal support to clients.

Hostel/Supported Housing Scheme	Number of bed spaces	Private or Council contracted
Norfolk Hotel	44	Private
Camrex House	79	Private
Tatham House	26	Private
Tatham Lodge	15	Private
Abbeyfield	15	Private
17 – 20 Murton Street	35	Private
Norcare	18	Council contracted
TZ Project	12	Council contracted
YMCA Toward Road	24	Council contracted
Mental Health Matters	12	Council contracted
Salvation Army hostel	65	Council contracted
Centrepoint	15	Council contracted
Ashkirk	16	Council contracted
Holmewood	32	Council contracted
Beechwood	5	Council contracted
Cherry Tree Lodge	6	Council contracted
<b>Total</b>	<b>407</b>	

### Asylum Seekers

- 7.4 Asylum seekers are supported by the North East Refugee Service, the Council education department and Children's Service, the PCT and police.

## 8. PROJECTED SERVICE USE AND OUTCOMES IN 3-5 YEARS AND 5-10 YEARS

## ***Homelessness***

- 8.1 National trends indicate that homelessness is beginning to increase for the first time since 2003, although this has not occurred locally. This may in part be explained by the fact that those most likely to be impacted by the recession are in a better position to benefit from the prevention initiatives that have expanded in recent years. A contraction in public finance and, in particular, the Area Based Grant is likely to result in a reduction in the types and number of services available in the city and this may result in increased levels of homelessness if replacements can not be found.
- 8.2 A refocusing of service and improved performance with regard to homeless prevention has reduced the level (and proportion) of those with low needs from entering the temporary accommodation system. All indications are that this trend will continue into the future. The lack of suitable move-on accommodation however has meant that households that do enter temporary accommodation are staying for longer periods of time. In March 2009 the average number of weeks in temporary accommodation was 3.5 weeks for homeless households. In March 2011 this had risen to 6.3 weeks, although the main reason for this is that those living in temporary accommodation are excluded from mainstream housing due past issues with their previous tenancies and are therefore difficult to place.
- 8.3 The number of applicants approaching the service depends upon the availability and accessibility of housing in the wider housing market. Current conditions suggest that availability is likely to remain constrained, if not becoming more difficult to acquire in future. The level of new affordable housing provision within the next five years is likely to be very low, although the majority of neighbourhood clearance in the social housing sector has occurred so numbers should remain fairly static.
- 8.4 Changes to housing benefits & local housing allowance (LHA) rates may reduce the level of affordable housing in the private and socially rented sector in 2012. Local housing allowance rates will be set to the 30<sup>th</sup> percentile of local rates, down from the 50<sup>th</sup> percentile. On average this change alone will cause LHA rates to fall by £5.64/week for the 1 room/shared room rate, £7.73 for a 1 bed property, £9.60 for a 2 bed, £13.33 for a 3 bed and £24.26 for a 4 bed.
- 8.5 48% of people on LHA already face shortfalls between their benefit and their rent nationally, with the average shortfall £23/week. As these changes will come in abruptly rather than being phased in, many tenants will suddenly find that their rent is now unaffordable. Many more people will face shortfalls and/or find it very difficult to find and sustain a tenancy.
- 8.6 The changes to local housing allowance rates also have an impact on the local authorities' ability to prevent people from becoming homeless. In 2010/11 146 households were prevented from becoming homeless by finding alternative accommodation in the private rented sector. If the private rented sector becomes less affordable due to reductions in local housing allowance then more households may be accepted as homeless and there may be a corresponding increase in the use of temporary accommodation.

- 8.7 In addition there are also plans to lower the Shared Accommodation Rate (SAR) to households under the age of 35. Currently the rate applies to single people aged under 25 on housing benefit in the private rented sector. These claimants are restricted to the rate for a single room in a shared house, rather than the rate for a self contained one bedroom property.
- 8.8 For vulnerable people who have been homeless, are leaving supported accommodation, care or prison, even if a property is available and affordable, sharing is often inappropriate and can be particularly detrimental to their well being.
- 8.9 The Department of Work and Pensions estimate that 62,500 people will be affected by this change nationally, with the average loss being £41 per week and some people seeing their benefit entitlement halved. In July 2011 the Government announced two limited exemptions to the SAR extension. Those aged 25-34 who have lived for three months in a homeless hostel and received resettlement support will be entitled to Housing Benefit to cover a self contained flat. This will also be the case for offenders who pose a risk to others and who are aged 25-34

### ***Migration and Asylum Seekers***

- 8.10 The level of asylum seekers in the area is difficult to predict due to the unpredictable nature of the number of asylum seekers entering the country. Currently, the numbers are falling nationally, but due to the dispersal process this may not lead to a reduction in the number of asylum seekers coming to the area. In 2012 the contracts between the Home Office and providers will be renegotiated which may increase or reduce the number of asylum seekers in a given area. It is likely that in the North East that the contract will go to a consortium from Yorkshire & Humberside, and then be sub-contracted out to local providers.

## **9. EVIDENCE OF WHAT WORKS**

- 9.1 Early intervention in preventing homeless has been proven to reduce the threat of homeless. Examples of this include a high number of prevention cases due to early contact linked to Mortgage Rescue / Financial assistance, which resulted in 75 households being able to remain in their existing home in 2010/11. In addition, the greater use of the private rented sector by working in partnerships with private landlords resulted in 146 households finding alternative accommodation in 2010/11.
- 9.2 Evaluation undertaken on behalf of DCLG (2008) suggested that reducing the number of rough sleepers successfully is largely down to a very focused and targeted approach, such as assertive and constant outreach work by trained officers as well as investment in accommodation specifically for former rough sleepers, such as those developed by the places of change programmes
- 9.3 Places of Changes – now the Homelessness Change Programme - funding was introduced to try to improve the physical quality of buildings and the type of support available in private hostels. Places of Change hostels are designed to be centres of engagement and empowerment with a focus on activity, employment, education or training, or meaningful activity as is more

commonly known. The idea is that the buildings themselves will be places that support people to make positive changes in their lives and move on to independent or more appropriate supported accommodation. Another key feature of any place of change accommodation is that it should be a welcoming building with motivated staff and where service users can and do engage with the local community. The new accommodation for young people in Dundas Street, to be managed by Centrepoin, has been funded by Places of Change funding. Due to open in January 2012, the building is an excellent example of how supported accommodation should be designed and is a fantastic addition to the city's supported housing portfolio.

9.4 A staged approach, floating support, independent living and a multi agency approach in reach.

## **10. USER VIEWS**

10.1 User views have been listed below:-

- Some good engagement about housing options for people with disabilities, but continue to be issues with engagement with those with mental illness in the city across a range of services;
- Some concerns from 2010 MORI Survey about reduction in proportion of residents aware of housing options function compared to 2008; – with +7% net satisfaction (=satisfied – dissatisfied);
- Although this reduction may be associated with differences between customer expectations & experience of Housing Options, there's a need to more consistently manage expectations at the first point of contact;
- Satisfaction levels higher amongst targeted groups – 16 – 24 years (+16%) & aware of function;
- Satisfaction with homelessness/housing advice high among residents in deprived areas (28% v. 16% for city); deprived residents more likely to have opinion, suggesting successfully targeted approach; same general trend true of satisfaction levels with debt management & advice services;
- RSL tenants more likely to be satisfied than owner-occupiers or private residents (+6%);
- Geographical variation in results needs to be explored further with Team, e.g. West Sunderland and (particularly) Washington have lower satisfaction with homelessness than city. Yet, satisfaction with debt management higher in these areas (& lower in East Sunderland). This supports observation of limited evidence of effective integration of housing-related advice in strategic advice;
- Some evidence individuals satisfied with advice & information they receive, and this is true for some disadvantaged groups, e.g. those with substance misuse problems. However, other groups, such as those with learning disabilities and their carers, report less satisfactory outcomes;
- Through the research done with clients who had previously used the service and some choice based lettings consultation with young people, it was also suggested that partner organisations should have some information on signposting to help with Housing Options Advice;
- Research in to the quality of private sector hostels and the level of support provided showed that many residents considered themselves homeless. Many felt abandoned and discarded, that the council don't care and that they don't help. Despite the fact that there is council funded support worker that

goes into private hostels, he was not very well known. (*Living in a Hostel: Do Homeless Hostels Meet the Housing and Related Needs of Homeless People in Sunderland*, May 2011, McGowan); and

- In addition, many of those surveyed felt that had no involvement or say in how hostels were run, the activities provided or even the type of food provided. Living in a hostel – whether private or not for profit – does have a negative impact on people’s health and increases the risk of depression and low self-esteem amongst other issues. Sharing facilities such as toilets and bathrooms with a lot of other residents makes some people feel dirty and they cannot relax in the facilities. People in private hostels in particular do not feel safe, even when they are in their own room and despite the size of hostel and number of residents, many people experience loneliness and boredom.

## **11. EQUALITY IMPACT ASSESSMENTS**

11.1 Equality impact assessments undertaken by the council have revealed that;

- Individually tailored service exists to support those needing re-housing – often those socially disadvantaged – & includes home visits. Customers reported Service was “good” or “excellent”;
- Evidence of good outcomes with specific groups for people engaged with Housing Options, including those leaving care, ex-offenders, those with substance misuse & domestic violence;
- CQC & CLG both identified significant concerns about quality of support – and safeguarding-related issues - for vulnerable people living in hostel and poor quality B&B accommodation;
- Support for people with mental illness remains an issue in the city, including in terms of their accommodation needs – Mental Health Teams focussed on those with severe, psychotic mental illness, and practitioners remain unsure about pathways for these individuals;
- In particular, issues identified with housing and debt/financial management weren’t as significant as one would expect (12% of their cases). This highlights the nature of MH caseload – dominated by individuals in supported accommodation rather than living independently in the community;
- Black & ethnic minority groups, including asylum seekers, and other groups are well supported in the Housing Options Team, including in terms of communication needs. However, there is anecdotal evidence of over-crowding in specific areas of the city with high levels of BME populations; and
- The new proposed allocations scheme will be focused on need to assist the most vulnerable in Sunderland. As part of the process in creating the policy extensive consultation was undertaken with a number of different client groups. A full INRA was carried out and the identified actions will be incorporated with the monitoring and early review of the scheme.

## **12. UNMET NEEDS AND SERVICE GAPS**

12.1 Although many improvements have been made in relation to homelessness in Sunderland one of the key issues continues to be that of access, not of only access to front line services but that of access to supported accommodation within the City – based upon locally identified need.



- 12.2 Sunderland, when the Supporting People programme was on-going, had a third less of accommodation based and floating support services than in Newcastle, which has a similar sized population.
- 12.3 Sunderland was always a 'net exporter' of vulnerable service users due to the lack of services provided within the city and it still does not have the required level of accommodation based and floating / outreach services for vulnerable people for the size of the city.
- 12.4 In relation to accommodation provision for women and children at risk of domestic violence, which is one of the key reasons for homelessness, there is still a need to develop at least one new refuge within Sunderland as to achieve the 1974 baseline figure of 1 unit of accommodation per 10,000 head of population as detailed in 1975 at the first Government Select Committee on 'Violence and Marriage'.
- 12.5 Sunderland has embarked upon an ambitious programme in relation to hostel accommodation and is proactively working with the Homes and Communities Agency (HCA) in developing exemplar Homelessness Change Programme immediate access project for homeless young people aged 16-21. The need within the City is to develop at least a further 2 projects in line with the Homelessness Change Programme criteria. This should then begin to address the acute and chronic needs of residents in inappropriate private sector hostels where no support is provided and there are serious concerns about safeguarding vulnerable people:-
- Chronic exclusion service for the most entrenched homeless clients;
  - Evidence emerged that single homeless people who may be entitled to accommodation are deterred from applying, many are misinformed about their entitlements, not all are given the opportunity to make a homelessness application, local authorities do not always fulfil their duty to 'advise and assist' homeless people, and that when advice or signposting is offered it is of little or no use;
  - Alternative hostel provision meeting the Homelessness Change Programme;
  - Increased family supported accommodation to remove the need of temporary accommodation use; and
  - The partners work closely together to ensure areas of support are provided, these include move-on advice and support once refugee status has been recognised.

### ***Recommendations for Commissioning***

- 12.6 The following are recommended for future commissioning:-
- Supported Accommodation Gateway;
  - Ensure the inclusion of the homelessness health needs audit with commissioned providers;
  - Chronic exclusion resource for most chaotic cases, targeted at the hostel population;
  - Continuing funding reductions in relation to Supporting People (Area Based Grant) are likely to result in the decommissioning of some accommodation

based provision accessed through the homeless route and/or a reduction in the level of service available;

- Develop contracted supported accommodation for homeless clients – ideally 2 projects for about 10-15 clients in each – one in the east of the city and one in the coalfield area;
- Develop contracted supported accommodation for hostel residents - ideally 2 immediate access units (one for 15 people aged 21+, and one for 8-10 people that is gender specific);
- Develop a citywide outcome focussed move-on scheme for all potentially homeless people; and
- Develop a contracted 12 unit refuge for women and children at risk of domestic violence.

### ***Recommendations for needs assessment work***

12.7 The following are recommended for future needs assessment work:-

- Gather further evidence on chronically excluded to understand health & housing needs;
- Look at the impact of whole family approach in relation to homelessness
- Examine the impact of failed asylum seekers on the city;
- Evaluate the benefits of personalised budgets for rough sleepers;
- Implementation of new outcomes framework;
- Evidence gathering in relation to the impact of Welfare Reform; and
- Inform the Strategic Housing Market Assessment (SHMA) of the known housing needs within the city of this client group and also help inform the SHMA in relation to the overall housing requirements of specific household groups such as families, older people, homeless, gypsies and travellers, black, asian and minority ethnic issues.

## **13. RECOMMENDATION**

13.1 The Committee is recommended to consider the Joint Strategic Needs Assessment and comment on the information provided.

## **14. BACKGROUND PAPERS**

- Joint Strategic Needs Assessment - Homelessness, Hostels, Rough Sleeping and Migration
- Sustainable Communities Scrutiny Committee Work Programme; Agendas and Minutes

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