Report to Cabinet Item

14 March 2018

Report of Head of city development services

Meeting complex needs and the prevention of rough

Subject sleeping innovation funding award decision

KEY DECISION

Purpose

To seek approval to award the funding for the meeting of complex needs and the prevention of rough sleeping.

Recommendation

That Cabinet agrees to award funding for a three year period starting on 1 April 2018 to the consortium bid led by St Martins, as recommended by the Making Every Adult Matter (MEAM) evaluation panel on the 09 February 2018.

Corporate and service priorities

The report helps to meet the following corporate priorities:

- A safe, clean and low carbon city
- A prosperous and vibrant city
- A fair city
- A healthy city with good housing
- Value for money services

Financial implications

The service will cost £901,808 and will be funded from grant-aid to Norwich City Council of £91,000 a year for three years from the Ministry of Housing, Communities and Local Government for homelessness prevention activities; £458,808 from Norfolk County Council over 3 years; £70,000 from the Norwich Clinical Commissioning Group for 1 year and £100,000 from Norfolk public health.

Ward/s: All wards

Cabinet member: Councillor Maguire - safe city environment

Contact officers

Chris Hancock, Housing strategy officer 01603 212852

Paul Swanborough, Strategic housing manager 01603 212388

Background documents

None

Report

Background

- The council currently funds St. Martins Housing Trust to provide an outreach service to rough sleepers in Norwich (known as the Contact Assessment Prevention Service (CAPS team).) This is on a contractual basis at the cost of £91,000 per annum which is funded through a Government homelessness prevention grant.
- 2. The current three year contract will come to an end in April 2018, and following a review and discussions with St. Martin's Housing Trust, it is considered by both parties that the current service needs to change to meet the challenge of increasing numbers of rough sleepers and people with complex and multiple needs. It has been decided that a wider strategic and operational approach is needed.
- 3. In addition, recent cuts to the supported housing budget by Norfolk county council have reduced the options available to the CAPS team to help people move on from rough-sleeping. This combined with earlier budget cuts to for example the mental health outreach team, housing related floating support services, combined with the impact of austerity measures has compounded the issue with fewer services available to support these complex needs.
- 4. As part of the emerging work from the Norwich Tackling Rough Sleeping Strategy 2017-22, the Council in partnership with Safelives (a domestic abuse charity) was successful in an application for Norwich to become a Making Every Adult Matter (MEAM) approach area.
- 5. MEAM is a coalition of three charities, Clinks, Homeless Link and Mind formed to improve policy and services for people facing multiple needs (For further information please see Appendix A). The approach is a framework to help local areas develop effective, coordinated services for people facing multiple disadvantage, and promote lasting, embedded change to local systems. Norwich is now one of 25 local areas across England using the MEAM approach. The network of areas will help to increase individual's wellbeing, reducing costs to public services and improving people's lives by providing people with complex needs with flexible and personalised support to help them move towards independence.
- 6. The issue of increasing numbers of people with complex and multiple needs is an increasing national problem. In England, there is an estimated 58,000 people who are living with multiple needs. Services can at times struggle to meet the needs of people whose situation does not fit into a neat solution or service offer response. This is recognised in our work to combine the resources available to the council with those of other statutory sector providers to look at innovative ways to create better, more rounded services for people who are homeless and those who have complex and multiple needs. The following partners have contributed to the innovation fund:

Agency	Amount	Period
Norfolk County Council – Public Health	£100,000	Initially for first year
Norfolk County Council – Adult Social Services	£106,899 per year	For three years
Broadland District Council	£46,037 per year	For three years
NHS Norwich Clinical Commissioning Group (CCG)	£70,000	Initially for first year
Norwich City Council	£91,000	For three years

- 7. These contributions to pooled funding shows the shift from traditional methods of procuring services through one statutory provider towards a partnership led approach. This should reduce duplication and make best use of what resources we have collectively available.
- 8. With agreement of the above partners the council's commissioning framework was used to advertise the service requirement, the funding available and the outcomes required which sought interested parties to come forward with ideas and suggestions.
- 9. The council received four applications which were assessed by a panel which included representatives from the funding partners These were:
 - A person with lived experience (former rough sleeper)
 - Head of integrated commissioning manager, NHS Norwich CCG
 - Housing options manager, Norwich City Council
 - Single homeless and rough sleeper co-ordinator, Norwich City Council
 - Public Health Officer, Norfolk County Council Public Health
 - Housing strategy officer, Norwich City Council
- 10. The applications were assessed against the following criteria:
 - Does the proposal provide value for money?
 - Organisational sustainability.
 - Matched funding availability.
 - Alignment to Norwich City Council outcomes

- Eligibility, and capacity for success
- 11. The panel recommended that the award is made to a consortium of organisations led by St Martins which is comprised of the following organisations:
 - St Martins
 - YMCA Norfolk
 - Salvation Army
 - NHS City Reach Health Service
 - Mancroft Advice Project
 - The Feed
 - Shelter
 - Future projects
- 12. The consortium proposes the development of a housing advice and support service to maximise the combined strength of its members by offering a more collaborative model than currently exists. The consortium members will take the innovative approach of stepping out of their individual organisations to form one team that will take the service to those people who need it most. The service will be delivered by 10.5 full time equivalent (FTE) Pathway support workers delivering the following services from a centrally located hub:
 - Rough sleeper outreach service with a unique worker identified for MEAM approach clients.
 - Specialisms including health services to the street, criminal justice liaison, welfare and housing advice, younger persons advice and support services.
 - Tailor one-to-one support according to an individuals need.
 - Improve capacity and variety of services provided at the Pottergate ARC drop-in centre run by the Salvation Army.
 - A Housing First specialist service supporting homeless people with high needs and histories of entrenched or repeat homelessness to live in their own homes. This approach has been widely adopted in Scandinavia, France and Canada and is growing in popularity in Europe including the UK.¹
- 13. As part of the delivery of the above services the consortium is also contributing additional resources to their proposal including the following:

¹ The philosophy of Housing First is to provide a stable, independent home and intensive personalised support and case management to homeless people with multiple and complex needs.

Item	Cost (£)	Source
4.5 FTE staff (St Martins)	£129,739 (per annum)	St Martins
In kind contributions from consortium members	£130,000 (per annum)	All agencies and budgets
Training and development	£31,000 (per annum)	Under 1 Roof
Refurbishment of day centre	TBC (one-off cost)	Pottergate ARC (Salvation Army)

- 14. The above funding brings together a total of over £1.5m over the three year period to tackle rough sleeping and help people with multiple and complex needs in Norwich (this does not include the refurbishment of the Pottergate ARC). This is from Norwich City Council's initial investment of £91,000 per annum.
- 15. Appendix A provides more detailed information on the services that the consortium will deliver.

Recommendation

- 16. It is recommended that Cabinet agrees to award funding for a three year period to the consortium led by St Martins, as recommended by the evaluation panel.
- 17. The award will be managed by a project team consisting of staff from the council's housing strategy and housing options team. Payments will be staged, and progress will be regularly reported to relevant portfolio holders and senior council officers.
- 18. This work will also be closely monitored and evaluated locally and as part of the national complex needs work led by the MEAM Coalition. Work is currently been undertaken by the housing strategy team to set up performance measures and methods of evaluating the impact of these interventions with the MEAM Coalition. The wider benefits of this partnership approach will also be measured, monitored and reported.
- 19. Overall governance of the project will be provided by a core funder group and an overall strategic MEAM partnership board consisting of Norwich City Council and the following organisations:
 - Norfolk County Council Public Health
 - Norfolk County Council Adult Social Care
 - NHS Clinical Commissioning Group
 - Norfolk and Suffolk Foundation Trust
 - Norfolk Police

- Police and Crime Commissioner Office
- Representatives from the consortium
- Persons with lived experience (former rough sleepers)
- Norfolk Probation
- Norfolk and Suffolk Community Rehabilitation Company
- Change Grow Live (New Norfolk-based drug and alcohol service)
- Norwich Prison
- Faith organisations representatives

Integrated impact assessment



The IIA should assess the impact of the recommendation being made by the report

Detailed guidance to help with the completion of the assessment can be found here. Delete this row after completion

Report author to complete				
Committee:	Cabinet			
Committee date:	14 March 2018.			
Director / Head of service	David Moorcroft/Andy Watt			
Report subject:	Meeting complex needs and the prevention of rough sleeping innovation funding award decision			
Date assessed:	27 February 2018.			

	Impact			
Economic (please add an 'x' as appropriate)	Neutral	Positive	Negative	Comments
Finance (value for money)				
Other departments and services e.g. office facilities, customer contact				
ICT services				
Economic development				
Financial inclusion				
Social (please add an 'x' as appropriate)	Neutral	Positive	Negative	Comments
Safeguarding children and adults				
S17 crime and disorder act 1998				
Human Rights Act 1998				
Health and well being		\boxtimes		

	Impact			
Equality and diversity (please add an 'x' as appropriate)	Neutral	Positive	Negative	Comments
Relations between groups (cohesion)				
Eliminating discrimination & harassment				
Advancing equality of opportunity				
Environmental (please add an 'x' as appropriate)	Neutral	Positive	Negative	Comments
Transportation				
Natural and built environment				
Waste minimisation & resource use				
Pollution				
Sustainable procurement				
Energy and climate change				
(Please add an 'x' as appropriate)	Neutral	Positive	Negative	Comments
Risk management		\boxtimes		

Recommendations from impact assessment	
Positive	
Negative	
None.	
Neutral	
Issues	

Making Every Adult Matter (MEAM)

- People with multiple needs face a combination of problems including homelessness, substance misuse, contact with the criminal justice system and mental ill health. They fall through the gaps between services and systems, making it harder for them to address their problems and lead fulfilling lives.
- 2. The Making Every Adult Matter (MEAM) coalition is made up of the national charities Clinks, Homeless Link and Mind.
- 3. The MEAM Approach is a framework to help local areas develop effective, coordinated services for people facing multiple disadvantage, and promote lasting, embedded change to local systems.
- 4. Twenty five local areas across England are using the MEAM Approach. Together they form a network that is increasing individuals' wellbeing, reducing costs to public services and improving people's lives.
- The approach draws on shared knowledge and practical experience to change systems, services and policy so that everyone experiencing multiple needs can reach their full potential and contribute fully to their communities.
- 6. It is estimated that 58,000 people face problems of homelessness, substance misuse and offending in any one year. Within this group, a majority will have experienced mental health problems. Women are under-represented in these figures, but despite this face significant and distinct challenges which need to be met. Similarly, people from black, Asian and minority ethnic communities experience a range of social inequalities which contribute to their experience of multiple needs.
- 7. People's likelihood of experiencing multiple needs is increased both by growing up in circumstances of material deprivation, and experiencing abuse or neglect in early life.
- 8. This group tend to be known to everyone, but often are served by no one as they are perceived to be 'hard to reach' or 'not my responsibility.' This can make services seem unhelpful and uncaring to someone experiencing multiple needs who is seeking help.
- 9. National and sometimes local policy decisions have created an environment where it is more difficult than it should be for services to work together to address multiple needs.

- 10. The MEAM coalition's belief is that central government should develop a cross-departmental approach to multiple needs, ensuring that funding, accountability and outcomes structures prioritise recovery and rehabilitation and allow local areas to develop a flexible response.
- 11. People with multiple needs should receive appropriate, flexible and personalised support to help them move towards independence.
- 12. The most powerful advocates for changing policy and practice around multiple needs are people with lived experience of these issues.
- 13. Government and decision-makers should listen to the voices of people with multiple needs and the frontline staff who support them, to ensure that policies properly reflect their experiences and meet their needs.
- 14. For further reading you may want to explore the following document produced by the MEAM Coalition, please see link:

 http://meam.org.uk/policy/time-for-political-leadership-on-multiple-needs

Further information regarding winning consortium bid (excerpts from application)

Aims and objectives

- 15. The Pathways service will bring together the combined expertise of a range of organisations to drive innovation and creative response to addressing the homeless situation in Norwich. Our vision is to take a 'no wrong door' approach that will provide a comprehensive and seamless service, building on the strength of a Making Every Adult Matter (MEAM) approach to all activities. The Pathways Team will be located at suitable locations identified as Hubs, that will act as a place the Pathways Team can meet and interact easily both with each other and the service user.
- 16. Our aim is to incorporate the following models to create a holistic, inclusive and user informed service.
- 17. 'Making Every Adult Matter' (MEAM); an approach that helps local areas design and delivers better coordinated services for people with multiple needs. The Pathways service pledges to work collaboratively and seamlessly to reach the end goal of supporting people with multiple needs to live independently in the community. Using the MEAM approach we will offer a coordinated programme of support, a 'one stop' service with a simplified access point. This will streamline support making it easier for people with complex and challenging lifestyles to navigate. Service users will be able to build a positive

- working relationship with their named support worker who will be a consistent anchor offering stability and reassurance.
- 18. As a result of our interventions we aim to address the priorities set out in Norwich City Councils Tackling Rough sleeping Strategy 2017-2022 and in particular the following:
 - To the reduction of begging and other offending behaviours
 - Improve pathways for patients in hospital who are ready for discharge in order to reduce the delayed transfer of care.
 - Clinical interventions to those being assessed for their housing needs and avoid the need for escalation, as the client is less likely to need to access other health services unnecessarily resulting in ambulance call-outs, A&E attendances, and subsequent hospital admissions.
 - Improve quality of life for people in their homes and community, by providing the best integrated health and social care.
 - Targeted services for the provision of housing and welfare advice
 - Access to health care provision in a planned way; by addressing
 the health issues of clients at the earliest opportunity the
 Pathways service is promoting the importance of making every
 contact count. A health practitioner based within the service will
 be able to carry out reviews on medication, identify complex
 health needs, create care plans and ensure the client is
 accessing the most appropriate health services.
 - Strong links to all healthcare professionals including City Reach and other GP practices, playing an integral part in providing ongoing support and eventually introducing clients into mainstream services when they are ready.
 - Improved access to services for people experiencing mental health issues, including treatment and support pathways by providing a seamless experience that uses Psychologically Informed Environments (PIE) and Trauma Informed Care (TIC). This increases the likelihood of sustained engagement, avoiding peaks and troughs of crisis.
 - Reduction in or prevention of rough sleeping by delivering a Housing First model solution to housing need.

- Reduction in the number of individuals that are leaving prison with no accommodation to go to by providing a criminal justice liaison within the team.
- Will work with partners to provide a co-ordinated and effective approach to the provision of food.
- Identified pathway for younger people.

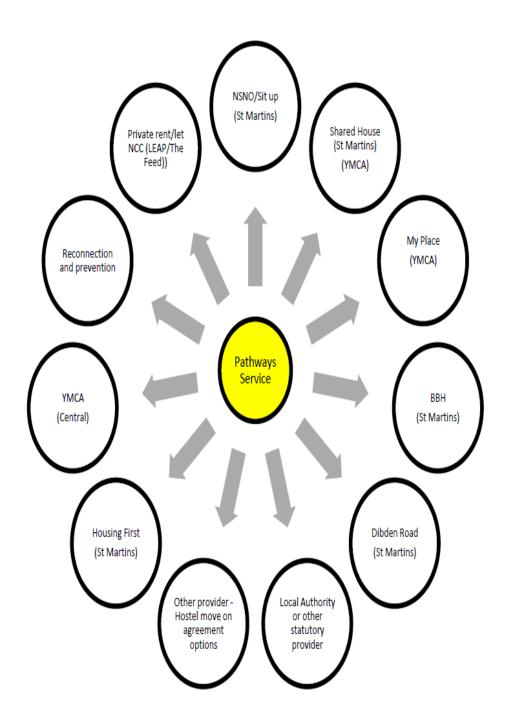
The proposal

- 19. The team will consist of six support workers, employed by members of the consortium to ensure a cross section of specialisms that will cover health (Health Practitioner), criminal justice liaison, welfare benefit and housing, younger person's advice and support services. In addition to the posts funded by the grant, St Martins will also recruit an additional 4.5 FTE Pathway Support Workers who will be able to provide additional support to individuals placed into accommodation by the Pathways Team.
- 20. Team members will be part of the Pathways Team with links to their specific organisation that will enhance the service through training, mentoring and access to the existing recourses and services of their employer. Beneficiaries of the service will be service users of the Pathways Team and not of the individual organisation that employs the team member. Therefore, the Pathways Service and team members will have a unique identity and offer their employer an enhancement to their existing services and vice versa. See illustration below:



Referral routes from pathways team

21. The following graphic shows the referral routes available from the proposed pathways team:



Referral routes into service

- 22. Our primary focus would be to deliver our service at Pottergate ARC but service users will be able to access the service in MAP, Under 1 Roof and City Hall. This would be managed on a scheduled timetable of drop in events, ensuring the service user is always aware of the team's location through extensive promotion of the service. The Salvation Army will remodel the existing drop in facility at Pottergate Norwich, to provide an office space with private interview rooms in order to carry out assessments.
- 23. There is no referral required to access the Pathways Service, all access points will be at venues that offer open access and a central hub location. The wide reach of the consortium will extend the arm of prevention, increasing scope for pre-assessment and improving homeless prevention. The Pathways Service will:
 - Monitor the street population and rough sleeping a minimum of twice per week
 - Carry out daily outreach to engage people who are entrenched in street activities associated with homelessness
 - Be located at venues where people with a housing need visit
 - Deliver a weekend service, based at the direct access hostel/s
 - Join the regular soup run with the salvation army to support service users when they move to an indoor venue
- 24. Each member of the team will be supplied with a tablet and these will be used to record individual case data "on the move". Use of St Martins client record system triggers the Housing Assessment Form (HAF). The data recorded is subsequently uploaded onto the client data base (salesforce/inform). Consolidating the data will enable us to supply Norwich City Council with the required performance indicators and outcomes. Our proposal includes full access to the shared data using one system for all partner members.

Improving health outcomes for rough sleepers

- 25. We propose 'taking medicine to the street' which will improve planned access to health care for many patients, eliminating barriers.
 - Clinical interventions to those being assessed for their housing needs and avoid the need for escalation, as the client is less likely to need to access other health services unnecessarily

- resulting in ambulance call-outs, A&E attendances, and subsequent hospital admissions.
- Improve the quality of people's lives in their homes and community, by providing the best integrated health and social care.
- Enable access to health care provision in a planned way; by addressing the health issues of clients at the earliest opportunity the Pathways service is promoting the importance of making every contact count.
- The health practitioner will be able to carry out reviews on medication, identify complex health needs, create care plans and ensure the client is accessing the most appropriate health services at the hub locations.
- Strong links to all healthcare professionals including NHS City Reach and other GP practices, playing an integral part in providing ongoing support and eventually introducing clients into mainstream services when they are ready.

Oversight and project management

26. We propose our partnership will operate a steering group who will lead both strategically and operationally throughout the term of the contract, members will include people with lived experience. Operationally there will be a weekly meeting to collaborate and manage the project with a full member meeting on a monthly basis with quarterly reviews.

Who will benefit from the service?

- 27. Collectively the consortium partners have several thousand contacts per year, when this is broken down into individuals there is likely to be some crossover. For example in 2016/17 the CAPS Team worked with 865 individuals, actual contacts were significantly higher and the Pottergate ARC had 13,757 visits for the same period. Predominantly this would be the same population and would be matched across our range of services.
- 28. With rising incidents of homelessness and reduced services as a result of cost savings, services across the sector are likely to see an increase in footfall. We would anticipate that this service would benefit approximately 2,000 people in a year with an average of 70% being local to Norwich.

Meeting complex needs and the prevention of rough sleeping innovation fund

1. Introduction

Norwich City Council's role is to support the city in the best way we can with the resources we have available. Using an evidence based approach we know that certain people struggle to access help and services that are available throughout the city. We want to work in partnership with organisations to find innovative solutions to the growing problem of people with complex and multiple needs who are often homeless (sometimes rough sleeping) and can face social exclusion from mainstream society. The issues that lead to them being excluded are complex in their nature and are often inter-connected and cannot (and should not) be dealt with in isolation. These issues include:

- Increasing homelessness and rough sleeping
- Increasing poverty
- Increasing numbers of people with physical and mental ill health
- Increasing levels of crime

1.2

The issue of increasing numbers of people with complex and multiple needs is not just a local problem. In England, there is an estimated 58,000 people who are living with multiple needs. Sometimes services can struggle to meet the needs of people whose situation does not fit into a neat solution or service offer response. We have recognised this in our work to combine what resources we have with other statutory sector providers to look at innovative ways to create better, more rounded services for people with complex and multiple needs and the growing number of people who are homeless and rough sleeping in the city. The following partners have contributed to the innovation fund:

- Norwich City Council
- Norfolk County Council Integrated Commissioning Team
- Norfolk County Council: Public Health
- NHS Norwich Clinical Commissioning Group

The fund of £761,000 is available over a three year period from 2018/19 (with £367k in year one, £197k in years two and three). We are interested in organisations who can bring additional funding to their delivery solutions and are committed to working in partnership for any other funding opportunities as and when they become available.

1.3

The key outcomes we would like to see as a result of this funding are:

Overall	For the individual
Reduction and prevention of street	Pathways to accommodation
homelessness	Sustained tenancies
Reduction in	Pathways to employment
begging/offending/arrests	Engaging in meaningful
	activities/purpose
Reduction in A&E visits	Accessing community or primary
	care services
Reduction in Mental Health crisis	Self-efficacy
call outs	
Evidence improved access to health	Accessing community or primary
services	care services
Reduction in the delayed transfers	Pathways to accommodation
of care from hospital	
Increase in the proportion of people	Pathways to accommodation
who remain out of hospital 91 days	Pathways to employment
after discharge	Engaging in meaningful
	activities/purpose
	Accessing community or primary
	care services
Reduction of permanent admissions	Accessing community or primary
of over 65s to residential/nursing	care services
care	Sustained tenancies

1.4

As well as the funding available we are interested in proposals that meet the following principles:

- Making Every Adult Matter (MEAM)
- Housing First
- New techniques to reduce rough sleeping and engage with entrenched rough sleepers
- Improve capacity of day centres and bring evening food provision indoors

Where relevant bids meet the criteria and outcomes for funding the council itself also has at its disposal (non-monetary) resources and expertise that can help support an approach.

2. Outcomes based approach

The council intends to use an outcomes based approach to the commissioning of any services that are supported by the funding being made available. We want to encourage innovation; not stifle it.

The principal outcome we want to see as a result of the investment is a decrease in the number of people with multiple and complex needs; and prevent, and reduce the numbers of people rough sleeping in Norwich. We know that the longer someone is sleeping rough or homeless it increases the likelihood that a person can and will develop complex and multiple needs.

The awards that the council will provide for the three year period from 2018/19 are:

Lo t no.	Outcome	Target group	How
1.	Overall reduction in numbers of rough sleepers in Norwich	All age groups	Working in an integrated way with alcohol and drug, mental health, primary care and sexual health services.
	Former rough sleepers with multiple and complex needs sustaining accommodation beyond 3,6,9,12 months or more		This could include the following types of housing: • Supported housing • Housing First • Other specialist accommodation
	Numbers of people prevented from rough sleeping		Signpost to alternative accommodation/stay in their own home, current housing situation
2.	Helping sustain former rough sleepers with complex and multiple needs in	All age groups	Working in an integrated way with alcohol and drug, mental health, primary care and sexual health services.
	their own accommodation with support for as long as they need it		Day centre provision can support this work Supporting people to claim benefits that they are entitled to
			We would expect a caseworker to support an individual through the pathway of services in Norwich to help them live as independently as possible

Lo t no.	Outcome	Target group	How
3.	Improving the quality of day centre provision for rough sleepers and people who are vulnerably housed	All age groups	Working in an integrated way with alcohol and drug, mental health, primary care and sexual health services. Help engage people in day centre activities and help people shape the services they use Build capacity in the system
4.	Enable rough sleepers and people who have experienced homelessness to give back to services who helped them and assist the design of existing and new services	All age groups	Working in an integrated way with alcohol and drug, mental health, primary care and sexual health services. People should be able to contribute and give their valuable experience to help improve services Where suitable people with lived experience should have work based/training opportunities in services

2.1 Additional information

The council welcomes bids from single agencies or consortiums, but will expect a single organisation to act as the lead agency for any consortium bid for each lot.

No specific service delivery model has been designed for each lot but we would expect an offer that supports individuals from first engagement (using a single caseworker approach) through their resettlement period to help provide continuity for the person. We know that building a relationship with a single caseworker helps build trust especially with people who have been damaged by homelessness and that this helps prevent people from becoming homeless again in the future.

Any successful agency or consortia would be expected to engage in the MEAM approach. Norwich City Council and its partners were successful in their application to be nationally recognised as one of the new MEAM approach areas. In these chosen areas local authorities, statutory agencies and the voluntary sector are working together to transform the lives of people experiencing a combination of homelessness, substance misuse, contact with the criminal justice system and mental ill health. These local areas will use a framework called the MEAM Approach to help shape their work and receive support and advice from MEAM coalition staff based across the country. All providers who receive funding would be expected to measure outcomes and take part in any national or local evaluation of MEAM.

3. For further information please contact:

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¹ http://meam.org.uk/a-coordinated-response-to-multiple-needs/