

Tuesday, 03 October 2023

**ADULT SOCIAL CARE AND HEALTH OVERVIEW AND SCRUTINY
SUB-BOARD**

A meeting of **Adult Social Care and Health Overview and Scrutiny Sub-Board**
will be held on

Thursday, 12 October 2023

commencing at **2.00 pm**

The meeting will be held in the Meadfoot Room - Town Hall

Members of the Board

Councillor Joyce (Chairman)

Councillor Johns (Vice-Chair)

Councillor Long

Councillor Maddison

Councillor Twelves

Together Torbay will thrive

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ADULT SOCIAL CARE AND HEALTH OVERVIEW AND SCRUTINY SUB-BOARD AGENDA

1. **Apologies**

2. **Minutes**

(Pages 4 - 7)

To confirm as a correct record the minutes of the meeting of the Adult Social Care and Health Overview and Scrutiny Sub-Board held on 14 September 2023.

3. **Declarations of Interest**

- a) To receive declarations of non pecuniary interests in respect of items on this agenda

For reference: Having declared their non pecuniary interest members may remain in the meeting and speak and, vote on the matter in question. A completed disclosure of interests form should be returned to the Clerk before the conclusion of the meeting.

- b) To receive declarations of disclosable pecuniary interests in respect of items on this agenda

For reference: Where a Member has a disclosable pecuniary interest he/she must leave the meeting during consideration of the item. However, the Member may remain in the meeting to make representations, answer questions or give evidence if the public have a right to do so, but having done so the Member must then immediately leave the meeting, may not vote and must not improperly seek to influence the outcome of the matter. A completed disclosure of interests form should be returned to the Clerk before the conclusion of the meeting.

(Please Note: If Members and Officers wish to seek advice on any potential interests they may have, they should contact Governance Support or Legal Services prior to the meeting.)

4. **Urgent Items**

To consider any other items that the Chairman decides are urgent.

5. **Spotlight Review on Homelessness in Torbay**

(Pages 8 - 10)

Introduction to the Spotlight Review by Councillor Patrick Joyce, Chairman of the Adult Social Care and Health Overview and Scrutiny Sub-Board.

6. **introduction and Overview of Services**

Introduction and overview of the linkages across services.

(Note: presented by the Divisional Director Community and Customer Services, Torbay Council).

- 7. The Council's Response to Homelessness** (Pages 11 - 24)
Detailing the Council's current response to homelessness with a specific focus on why people become homeless; prevention challenges and what temporary accommodation provision looks like in Torbay.
- (Note: presented by Head of Housing Needs, Torbay Council).
- 8. Video to demonstrate the work of the Hostel**
Video commissioned as part of the Safer Street grant funding. The purpose of the video is to raise awareness of the work undertaken at the Hostel and its aims, whilst also telling the story of those that it assists and increasing understanding of why people may become homeless.
- 9. Rough sleeping** (Pages 25 - 42)
Outlining the response to rough sleeping in Torbay including details of the partnership work currently undertaken to help reduce rough sleeping and how the service is currently funded.
- (Note: presented by Anti-Social Behaviour and Noise Lead Officer, Torbay Council).
- 10. Homelessness and substance abuse**
Exploring the link between some types of homelessness and substance abuse to include, how the service forms part of a wider and complex needs alliance and the types of interventions undertaken.
- (Note: presented by the Service Manager, Torbay Recovery Initiatives, Torbay Drug and Alcohol Service).
- 11. Mental Health and Homelessness**
Exploring the link between homelessness and impact on mental health and wider effects.
- (Note: presented by Locality Practice Lead (South), Adult Services Directorate, Devon Partnership NHS Trust).
- 12. Cost of living crisis and affordability impact on homelessness**
Exploring the impact of the cost of living crisis and affordability of housing as a cause of homelessness from a community and voluntary sector perspective.
- (Note: presented by the Chief Executive of Citizens Advice Torbay).
- 13. Question and Answer Session**
- 14. Settling Recommendations**

Minutes of the Adult Social Care and Health Overview and Scrutiny Sub-Board

14 September 2023

-: Present :-

Councillor Joyce (Chairman)

Councillors Johns (Vice-Chair), Long and Twelves

(Also in attendance: Councillors Steve Darling, David Thomas and Tranter)

7. Apologies

No apologies for absence were received.

The Chairman informed Members of the Sub-Board of a change of Membership as Councillor Billings had now become a Cabinet Member and Councillor Yvonne Twelves had agreed to take his place as a permanent member of the Sub-Board.

The Chairman welcomed Councillor Twelves to the meeting as a new member and recognised the valuable contribution she would make to the work of the Sub-Board.

8. Minutes

The minutes of the meeting of the Sub-Board held on 17 August 2023 were confirmed as a correct record and signed by the Chairman.

9. NHS Delivery - Building a Brighter Future Programme Update

The Deputy Chief Executive and Director of Transformation and Partnerships together with the Building a Brighter Future Programme Director, South Devon NHS Foundation Trust provided Members with an update and presentation on the delivery of the capital programme and re-design of Torbay Hospital together with an update on delivery of the new community diagnostic centre in Torquay.

Members were informed that 40 hospitals would benefit from the £20 billion investment in the new hospitals programme which included Torbay. The focus at present was on site enabling and it was confirmed that other site developments taking place included a new radiotherapy building; new endoscopy unit and new theatres.

In addition, Members were informed that the new community diagnostic centre would have a significant impact on the ability of the Trust to reduce waiting times for such areas as point of care testing, ultrasound, scans and other tests.

Members received responses to the following questions:

- Would a standardised supply chain limit opportunities for local suppliers to become involved?
- Would the new electronic patient records system improve the time taken to forward patient records to GP's?
- How long would it take to work through the business case for the site enabling plans?
- Would 150 more hospital beds be delivered?
- What does "de-conditioning" mean?
- By the end of 2026 would the programme be short of secure funds?
- Was the proposed opening of the new community diagnostic centre in 2024 feasible?
- Given the new mobile breast screening unit, had the old unit been decommissioned?
- Would the temporary endoscopy unit be retained once the main unit was built?
- Would lead in times for cancer diagnosis be reduced?
- How could communication with the public and communities be improved so that they understood what was happening?
- Would pressure on GP's be relieved?
- How long were the current delays in respect of GP's receiving patient records following patient discharge from hospital?
- Would the functionality of the electronic patient records system enable patients to book into the community diagnostic centre rather than going through the hospital call centre?
- Had the increase in work been mapped in terms of workforce development and had schools and colleges, for example, been approached and informed of plans so that they could work towards a clear training path?
- Had Torbay Hospital been considered potentially as a teaching hospital?

In accordance with Standing Order B4.1 Councillor Steve Darling addressed the Sub-Board and asked the following questions:

- When would treatment of the first patient on site happen?
- Had there been any slippage in delivery of the business case?
- How would Nightingale Park contribute to achieving Net Zero as a whole?
- What reassurances could be given that hospital staff would not be poached to work at the diagnostic centre?
- What reassurances could be given that hospital funding would be protected and not used against the Reinforced Autoclaved Aerated Concrete (RAAC) crisis affecting many schools across the United Kingdom?
- Was the diagnostic provider a not-for-profit company?
- What targets were there in place in terms of plans to support care experienced youngsters into work?

In accordance with Standing Order B4.1 Councillor David Thomas addressed the Sub- Board and thanked the Deputy Chief Executive and Director of Transformation

and Partnerships together with the Building a Brighter Future Programme Director for their update. He recognised that the huge investment was good news and presented a fantastic opportunity for Torbay.

Resolved (unanimously):

That the Adult Social Care and Health Overview and Scrutiny Sub-Board notes the update provided by South Devon NHS Foundation Trust in relation to the delivery of the capital programme and re-design of the hospital together with the update on the delivery of the new community diagnostic centre and recommends that:

1. South Devon NHS Foundation Trust be requested to provide details of potential new opening dates for the diagnostic centre together with time frames for transfer from the temporary diagnostic centre at Newton Abbot Hospital over to the new premises at Market Street in Torquay;
2. South Devon NHS Foundation Trust be requested to provide an update on the performance of the diagnostic centre within the next 12 months;
3. South Devon NHS Foundation Trust be requested to provide information regarding the follow up of diagnostic targets versus actual targets within the next 12 months;
4. South Devon NHS Foundation Trust be requested to provide an update around modelling to reduce lead in times for cancer diagnosis;
5. South Devon NHS Foundation Trust be requested to provide average statistical information as to the current delay between patient discharge from hospital and notification of discharge to the patient's GP (which can affect the timely prescription of ongoing medication);
6. South Devon NHS Foundation Trust be encouraged to further engage with local communities and Ward Councillors to publicise information concerning re-structuring of Torbay Hospital and any difficulties which may arise as a result of re-development works within the area;
7. South Devon NHS Foundation Trust be encouraged to raise awareness of Torbay community and healthcare job opportunities through engagement with local communities, including the voluntary sector and care experienced people;
8. South Devon NHS Foundation Trust be encouraged to expand the range of contractors who may tender for contracts to include smaller firms and local suppliers within Torbay; and
9. the Adult Social Care and Health Overview and Scrutiny Board Chairman writes to the Health and Social Care Minister seeking reassurance that the NHS re-building budget for hospital funding will be protected and not diverted towards the Reinforced Autoclaved Aerated Concrete (RAAC) crisis affecting many schools across the United Kingdom.

10. Adult Social Care and Health Overview and Scrutiny Sub-Board Action Tracker

The Sub-Board noted the submitted action tracker. The Senior Democratic, Overview and Scrutiny Officer provided the following updates:

- Update on Minute 30: The Medical Director for Devon Mental Health, Learning Disability and Neurodiversity Provider Collaborative would be attending the Sub-Board meeting on the 21 December 2023 to speak about psychiatric medication supervision;
- Update on Minute 25: Member Briefings had been arranged for 16 November 2023 (Adult Social Care Strategy) and 20 December 2023 (Governance with the ICO);

(Note: Prior to consideration of the item in Minute 9, Councillor Steve Darling declared a non-pecuniary interest as his wife previously worked for the NHS and his son currently works as a medic at Torbay Hospital).

Chairman

Adult Social Care and Health Overview and Scrutiny Sub Board

REVIEW SCOPING DOCUMENT/PROJECT PLAN

Scrutiny Topic Title:	Homelessness Spotlight Review
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Key Objectives of this Topic/Anticipated Value of this Work / Outcomes:

Key Objectives:-

- To establish currently what homelessness looks like in Torbay;
- To explore the depth of homelessness in Torbay;
- To recognise the types of homelessness in Torbay and the reasons behind it including:
 - Complexity
 - Numbers – how does Torbay compare nationally?
 - Response to homelessness in Torbay and what mechanisms and support the Council has in place particularly in terms of prevention and relief.
- Understanding Torbay Council's response to meeting its statutory obligations;
- Demand and waiting times on Devon Home Choice;
- The impact homeless can have on individuals and households.

Anticipated Value of Work/Outcome:-

- To better understand:
 - how homelessness can be prevented in Torbay;
 - how people can be helped;
 - how people are assisted into accommodation and the challenges;
 - how people are then supported when in accommodation.
- To identify whether existing pathways and systems in place to prevent homelessness can be improved in Torbay and how;
- To identify and target specific areas for more detailed scrutiny investigation.

Proposed Timescale for the work / Ongoing issue

Review to take place at meeting of the Adult Social Care and Health Overview and Scrutiny Sub Board on 12 October 2023. If key issues are identified at that meeting – discreet piece of work may follow.

How Does Review of this Topic link to Council aims and priorities?:

Housing Strategy 2023 – 2030:

Continue to protect homeless households and those threatened with homelessness, whilst putting an end to street sleeping.

Potential Witnesses (ie Stakeholders, Consultees, Interest Groups, Involvement of any Partners):

- Lianne Hancock (Head of Housing Need, Torbay Council) – general overview from Torbay (what homelessness looks like in Torbay (depth, breadth, types and complexities), reasons behind it, support, prevention and relief (what is our response?), how does Torbay compare nationally? Statutory obligations and demand on Devon Home Choice)
- Dave Parsons (Strategic lead Community Protection) – Response to Rough Sleeping and link between ASB and some types of homelessness;
- Simon Acton (NHS) – drug and alcohol/substance abuse and link with some types of homelessness – how they are supporting people and work that is undertaken.
- Robin Scoville (NHS) – homelessness and impacts on mental health
- Sue Julyan (CAB) - community and voluntary sector overview including affordability/individuals that CAB are assisting in terms of homelessness and cause).

<i>Do legislative requirements apply to the Topic?</i>	Yes/No
<i>If yes, provide details:</i> Housing Act 1996 Homelessness Act 2002 Homelessness Reduction Act 2017	

Briefing – Housing Options Torbay

A paper to aid the understanding of homelessness in Torbay, the current response, and demand.

Torbay Council

October 2023

1 Torbay, understanding the picture of homelessness.

This briefing paper aims to describe the picture of general homelessness in Torbay, our current response and the elements of the system that need to be in place to enable this to be undertaken effectively.

Housing Options are responsible for the statutory response to homelessness, the administration of the register for social housing in Torbay and collaboration in discretionary responses to homelessness.

People can become at risk of homelessness for many reasons, most people associate homelessness with rough sleeping which is the most visible form of homelessness, many people affected by homelessness do not find themselves rough sleeping and this is mostly due to the Council's duty to assist and sometimes provide temporary accommodation to the most vulnerable groups of people. Crisis define types of homelessness as;

- **Rough sleeping** - Rough sleeping is the most visible and dangerous form of homelessness. The longer someone experiences rough sleeping the more likely they are to face challenges around trauma, mental health, and drug misuse.
- **Statutory homelessness** - Local authorities have a duty to secure a home for some groups of people. This is often referred to as the main homelessness duty. Every year, tens of thousands of people apply to their local authority for homelessness assistance.

To be legally defined as homeless you must either lack a secure place in which you are entitled to live or not reasonably be able to stay. However, to receive assistance under the main homelessness duty, there are further strict criteria that you must meet. Local authorities may initially provide temporary accommodation to households who might meet these criteria, mainly families with children.

- **Hidden homelessness** - Many people who are not entitled to help with housing, or who don't even approach their councils for help, aren't counted in the official statistics. This is why Crisis carries out its annual study on core homelessness. Many stay in hostels, squats or B&Bs, in overcrowded accommodation or 'concealed' housing, such as the floors or sofas of friends and family.
- **At risk of homelessness** - Some people are more at risk of being pushed into homelessness than others. People in low paid jobs, living in poverty and poor quality or insecure housing are more likely to experience homelessness.

1.1 What responsibilities does the Council have to homeless households?

The Council has a statutory responsibility to provide advice and assistance to anyone who is homeless or at risk of becoming homeless. [Part 7 of the Housing Act 1996](#) is the primary piece of legislation which underpins the response local authorities in England are required to provide.

In 2002, the government amended the homelessness legislation through the [Homelessness Act 2002](#) and the [Homelessness \(Priority Need for Accommodation\) \(England\) Order 2002](#) to:

- (a) ensure a more strategic approach to tackling and preventing homelessness, by requiring a homelessness strategy for every housing authority district; and
- (b) strengthen the assistance available to people who are homeless or threatened with homelessness by extending the priority need categories to homeless 16- and 17-year-olds; care leavers aged 18, 19 and 20; people who are vulnerable as a result of time spent in care, the armed forces, prison or custody, and people who are vulnerable because they have fled their home because of violence.

The Homelessness Reduction Act 2017 significantly reformed England’s homelessness legislation by placing duties on local authorities to intervene at earlier stages to prevent homelessness in their areas. It also requires housing authorities to provide homelessness services to all those affected, not just those who have ‘priority need’. These include:

- (a) an enhanced prevention duty extending the period a household is threatened with homelessness from 28 days to 56 days, meaning that housing authorities are required to work with people to prevent homelessness at an earlier stage; and
- (b) a new duty (relief duty) for those who are already homeless so that housing authorities will support households for 56 days to relieve their homelessness by helping them to secure accommodation.

The Domestic Abuse Act 2021 amends Part 7 of the 1996 Act to strengthen the support available to victims of domestic abuse. The Act extends priority need to all eligible victims of domestic abuse who are homeless because of being a victim of domestic abuse.

1.2 What causes homelessness?

Households find themselves at risk of homelessness for many reasons, often through no fault of their own. Torbay has always had a high proportion of households presenting as homeless due to the loss of rented accommodation due to over reliance on this sector in Torbay. A temporary hold on evictions during the pandemic meant a drop in these cases.

Post pandemic the number of people losing rented accommodation increased dramatically due to the backlog of evictions from the pandemic, landlords selling or converting to holiday accommodation and rents increasing to levels even average income households cannot afford. The prevention or relief of homelessness is about either keeping a household in their own home or helping them find a new one before they need TA. The tools to achieve this are now very limited when faced with less accommodation due to landlords exiting the market and increased demand for accommodation in coastal areas pushing up rents to unaffordable levels.

Main Reason for loss of Settled Home - Condensed	2019-20	2020-21	2021-22	2022-23
End of private rented tenancy – AST	157	66	102	170
Other*	128	121	32	6
Family no longer willing or able to accommodate	91	87	56	45
Domestic abuse	78	70	84	79
Relationship with partner ended (non-violent)	50	73	29	20
Friends no longer willing or able to accommodate	20	22	6	7
Fire or flood / other emergency	16	9	20	4
Non-racially motivated / other motivated violence or harassment	16	23	25	14
End of social rented tenancy	15	9	9	8
Eviction from supported housing	13	22	10	5
Departure from institution	12	10	8	12
End of private rented tenancy - not AST	11	27	30	26
(blank)	4	3	10	9
Home no longer suitable due to disability / ill health	0	0	3	8
Property disrepair	2	4	4	3
Left HM Forces	1	0	0	0
Mortgage repossession	1	1	0	0
Total	615	547	428	416

Table 1: The number of homeless presentations each year by homelessness reason. (* Data quality issues identified in 2019 –21, which have been rectified)

What the data tells us:

- The number of family/friend evictions has reduced by 50% which is indicative of the proactive prevention work undertaken by the team to negotiate and broker alternative arrangements.
- Where there are limited options to try and prevent homelessness before the client must leave their home, there has been a significant increase in people losing private rented accommodation. Increased mortgage interest rates, Landlords exiting the market and concern over the implications for landlords following the Renters Reform Bill are resulting in landlords selling their properties.
- In 2021-2022 nearly 20% of presentations were as a result of domestic abuse, this remained consistent in 2022 – 2023 and for 2023.

2. Housing Crisis

2.1 Increasing Demand

The Council has seen continued high demand from households in housing need over the last few years. Prior to the Homelessness Reduction Act of 2017, there were roughly 60 households in temporary accommodation at any one time, following the introduction of the new 56 day relief duty, this increased to roughly 100 households.

The pandemic and the “Everyone in policy” in May 2020, created a step change in demand, at its peak reaching 267 households in temporary accommodation (TA). Numbers have never returned to pre-pandemic levels due to the pressures on households who continue to be adversely impacted by inflation, increases in interest rates and the cost-of-living crisis continues.

The demand for temporary accommodation (TA) has been further impacted by the reduction in the supply of new homes. There has been very little growth of new affordable homes, a fall in the number of private rented homes becoming available and open market homes have become less affordable for many.

Through a restructure and increasing capacity in the Housing Options team, we have been able to increase prevention work, which has helped stabilise the number of households needing TA at around 160 households. This is against a backdrop of a 13% increase in overall demand over the last 12 months.

We have also re profiled our supply of TA and are in the process of purchasing and repairing 34 properties to use as Council TA for families which will deliver significant savings on the cost of spot purchase TA and sufficiency of supply. This will also aid compliance with government targets and assist in removing the need to place families in B&B accommodation and out of area placements. As a result, we are no longer required by central government to have a B&B elimination plan that was reviewed monthly by the housing minister.

We have taken the Hostel back in house and are already seeing significant improvement in through put in our Hostel, with longer term residents moving onto permanent supported tenancies. The average length of stay has already reduced by more than 50%.

We are taking up DLUHC match funding grants to create specialist, supported provision working with the YMCA to deliver a SHAP scheme for young adults, as well as exploring options for a SHAP complex needs project. We aim to build on our existing capacity to make the very best use of specialist accommodation and create a “four stages” model to ensure through put and progression of vulnerable young adults to successful sustainable tenancies.

The impact of the significant progress the service has made is that temporary accommodation numbers have remained consistent, and the use of bed and breakfast accommodation has been eliminated for families. Against a backdrop of increasing demand and escalating costs, mitigating increase in TA number consistency will be our current focus along with reducing unit costs. continue to be our long-term aspiration, any hopes of reducing temporary accommodation requirements are unrealistic in the current climate. We will always have a pressing need for temporary accommodation, and it is vital that we have stock that is fit for the future and cost effective.

The following data analysis demonstrates the demand on the Housing Options Service, the need for temporary accommodation and type of accommodation required by the service to meet that need.

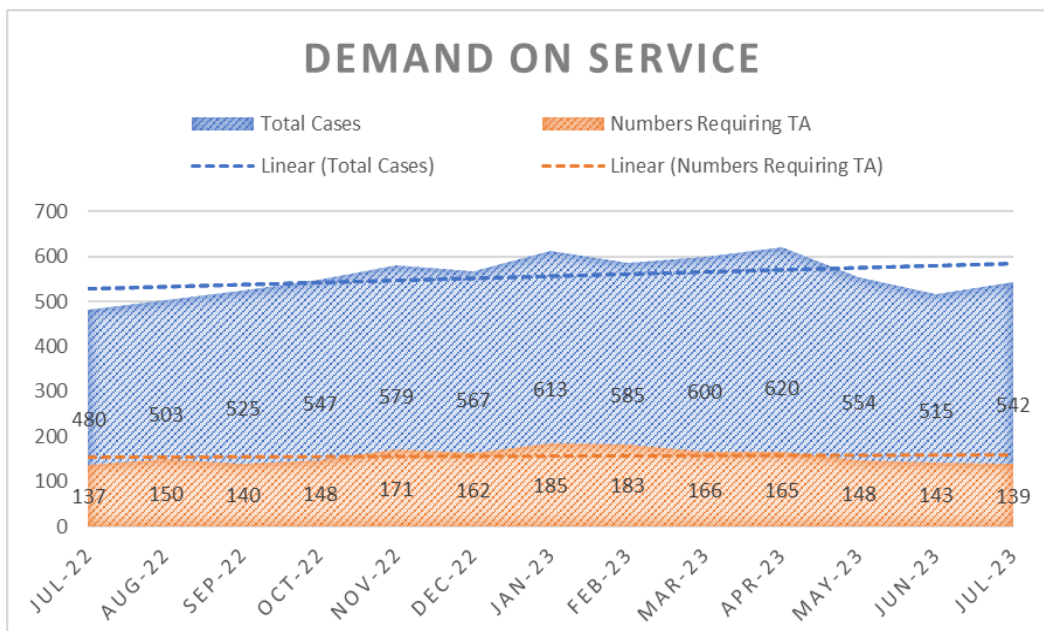


Figure 1: Total Number of cases held by the Service each month in 2022/23 and the number of these requiring TA . (N.B Data based on the average number of households across the month.)

What the data tells us:

- Presenting demand for homelessness assistance fluctuates across the year but has increased overall. Despite this, TA levels have remained consistent, and any increases have been temporary.
- In July 2022, 29% of all cases being managed by the service were in TA, compared with 26% in the same period in 2023, this is despite an overall increase in demand of 13%.
- With this in mind, a 13% increase would have meant 154 households in TA as opposed to 139 in July 2023.

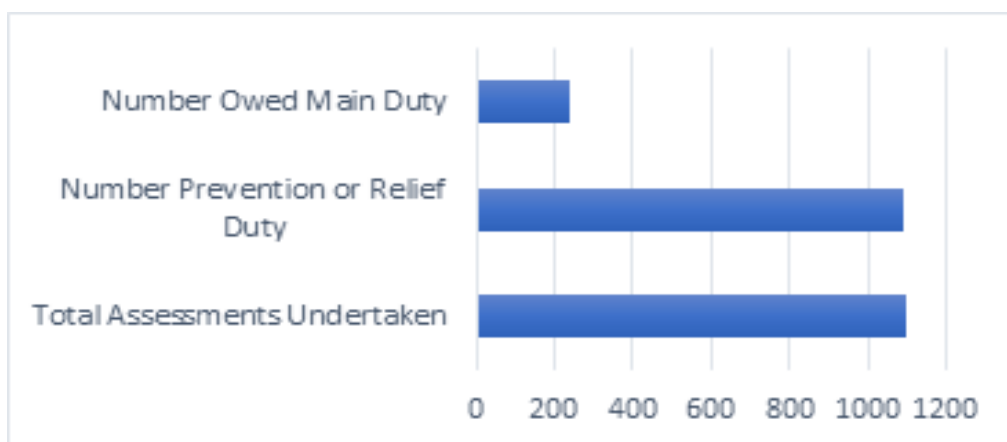


Figure 2: Total demand presenting to Housing Options 2021-2022 and outcome of presentation (HCLIC data 22/23 to be published by government Oct 23)

What the data tells us:

- A total of 1100 households were assessed by the team in 2022/23, of those 1092 (99%) were owed either the Prevention Duty or the Relief Duty.
- Only 21.7% of those households were accepted as being owed the main housing duty and it is these households that remain in TA the longest.
- This means that 78.3% of households are assisted and resolved at the prevention and relief stage, ensuring that stays in TA remain as brief as possible.

2.3 Temporary Accommodation

Where efforts to prevent or relieve homelessness are unsuccessful or do not happen quick enough, the Council must provide suitable TA to certain households who are considered vulnerable. Roughly one third of the cases held by the team are owed a temporary accommodation duty at any one time.

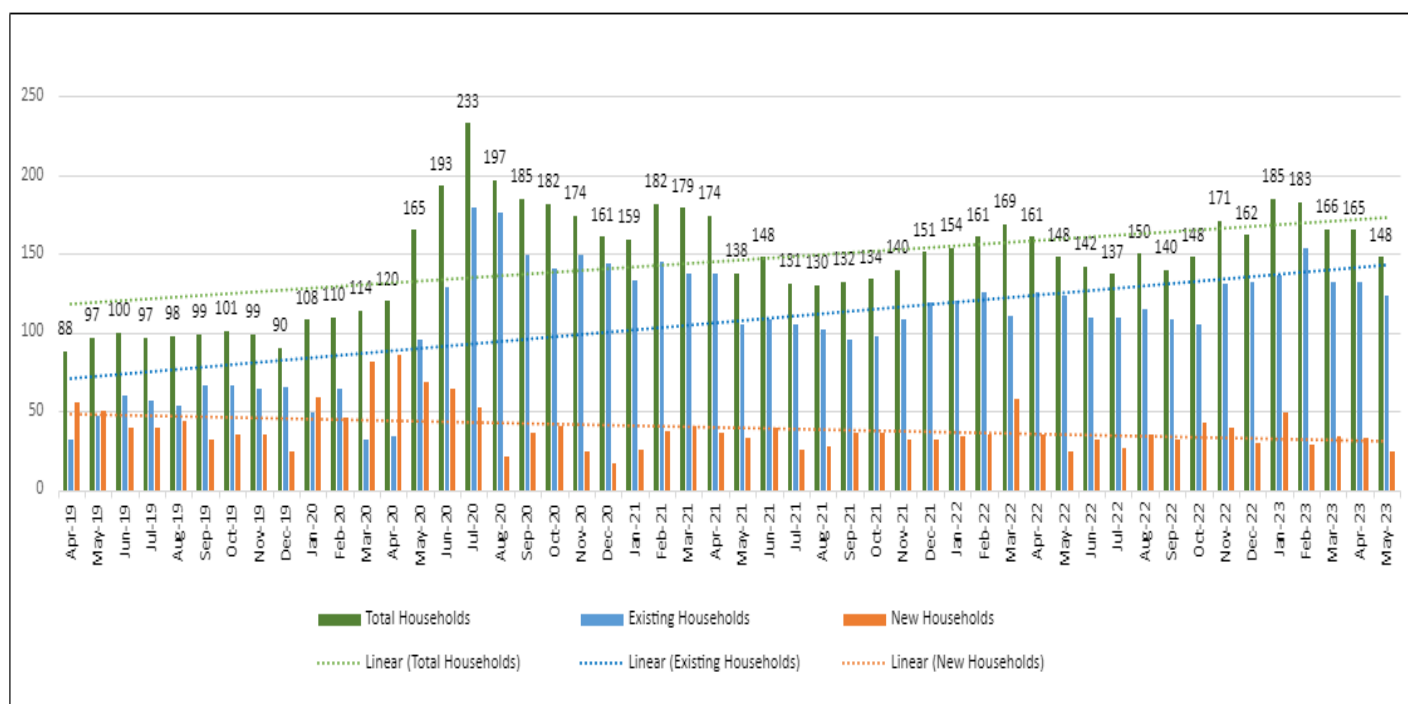


Figure 3: Total number of households in Temporary Accommodation each month over the last 4 years and proportion of which are existing and new placements. (N.B. Sudden increase May-Jul 2020 due to 'Everyone In' initiative in response to Covid 19 pandemic.)

What the data tells us:

- Numbers in TA have not reduced back to pre-pandemic levels. Overall total demand for TA has increased since 2019, by 68%
- Although approaches to the service are increasing, the number of new households entering TA (Figure 3 - orange line) is reducing which shows the team are preventing or relieving the need for new TA placements.
- Year on year, numbers peak in Feb/Mar, likely following notices served due to non-payment of rent in Nov/Dec. Numbers then gradually decline over the summer months before beginning to rise over winter. This can inform seasonal peaks and allow forward planning for short term increase in provision.
- The number of existing households in TA is increasing meaning people are getting 'stuck' – this is likely to be due to a range of factors including, landlords selling, increasing costs of private rental sector, lack of social housing to meet demand and pressures on staffing in housing options reducing the amount of support being able to be provided to help move people on. Use of DHP and other financial tools are also important.
- Through proactive prevention work, whilst approaches from households in need remain, the number of households in TA are consistent with the same period in 2022.

Time in TA (weeks)	Number of households in TA			
	2019-20	2020-21	2021-22	2022-23
0-4	150 (24%)	118 (22%)	114 (27%)	106 (25%)
5-6	47 (8%)	34 (6%)	36 (8%)	36 (9%)
7-10	81 (13%)	74 (14%)	42 (10%)	64 (15%)
11-20	159 (26%)	125 (23%)	85 (20%)	96 (23%)
21-25	44 (7%)	47 (9%)	30 (7%)	38 (9%)
26-52	89 (14%)	121 (22%)	84 (20%)	71 (17%)
>52	45 (7%)	28 (5%)	38 (9%)	6 (1%)
Total	615	547	429	417
Average Stay	18wk 3 day	19wk 1 day	19wk 3 day	14wk 3 day
Longest Stay	136wk 2 day	142wk 6 day	105wk 6 day	70wk *

Table 2: Amount of time household spend in temporary accommodation.

What the data tells us:

- The average length of time in TA has reduced from 19 weeks and 3 days in 2021/22 to 14 weeks and 3 days in 2022/2023 (26% reduction)
- Numbers of people that leave within the first 26 weeks is consistent.
- A large proportion of cases that leave TA within the first 10 weeks are likely cases that are not owed the main housing duty, such cases leave TA after the 56 day relief duty ends followed by a period of reasonable notice. Evidence that timely decision making has increased.
- The average length of time in TA is decreasing thanks to additional resource on temporary accommodation and the Final Offer's role. The number of cases in TA over 52 weeks was 9% for 21/22 and is now down to 1% for 22/23.
- The number of people leaving between 26 –52 weeks has increased, this illustrates that those who are owed the main housing duty and find themselves in temporary accommodation are stuck, due to a lack of suitable accommodation to move on to

	Room only	1 bedroom	2 bedrooms	3 bedrooms	4 bedrooms	4+ bedroom	Average Overall
Average Length of Stay	10wk 3 day	12 wk 1 day	15 wk	20 wk 2 day	26 wk 5 day	17 wk	14 wk 3 day
Min length of stay	1 day	1 day	1 day	1 day	4 days	6 wk 2 day	
Max length of stay	53 wk	56 wk 1 day	70 wk	68 wk 3 day	68 wk 1day	33 wk	

Table 3: Amount of time households spend in TA based on the size of the household and therefore bedroom need in 2022/23.

The above data in table 2 and 3 has been to inform the assessment of the quantity of accommodation required based on size and through put.

2.4 The household composition of people provided with TA

The numbers of households requiring temporary accommodation has changed over time, to meet statutory duties to homeless households, the Council must ensure that any accommodation it offers must be of a suitable size to accommodate the entire household. It is unlawful to separate a homeless household and so a varied portfolio of accommodation is required. At present the number of placements sourced by the Temporary Accommodation Officers (2 people) is over 1800 per year. This is due to households needing to be moved multiple times, especially in spot purchased accommodation. A fixed supply of quality accommodation will not only drive down costs but will also ensure a shift from sourcing temporary accommodation to sourcing move on accommodation.

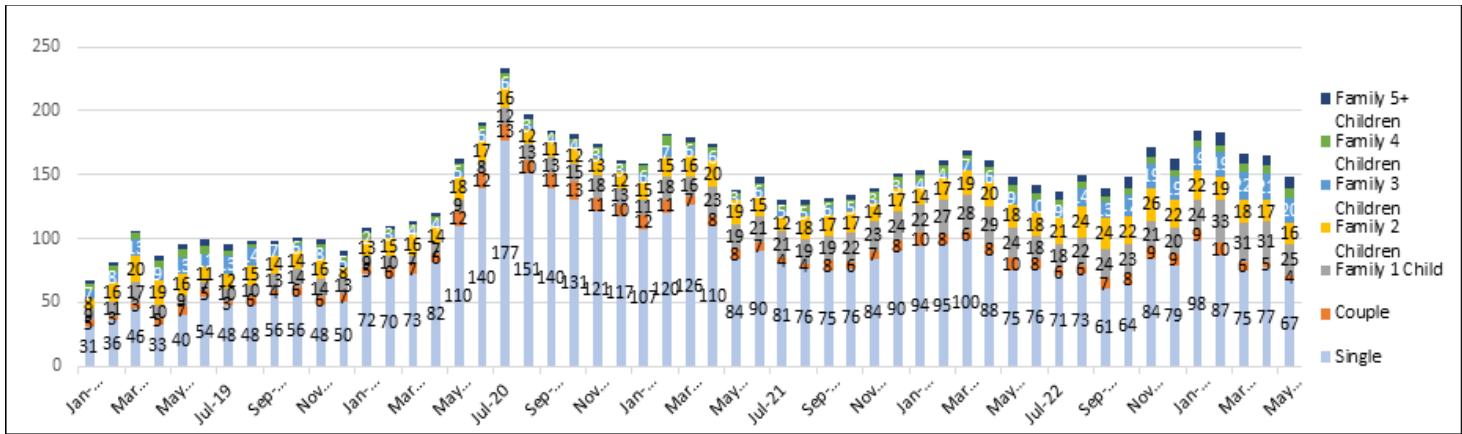


Figure 4: The size of households that are provided with TA since January 2019

What the data tells us:

- The number of families in TA has decreased overall since 21/22, due to proactive prevention work, however, remains at approximately 43% of the total households in temporary accommodation.
- We have a consistent need for larger units to accommodate families with four or more children. There was a gradual increase in the demand for 3 and 4 bed placements in 21/22 but this is more pronounced in 22/23 with four-bed demand more than doubling from 58 units in 21/22 to 165 units in 22/23.
- The number of single people in TA has not returned to pre-pandemic levels and although previous years this was the legacy of the everyone in initiative, we have continued to see increased numbers of single person households.
- The values are the total number of placements required throughout the year, the numbers are high because one household may be required to move multiple times, especially in spot purchase accommodation, this data is helpful to show the demand on the team in sourcing these placements.
- In Figure 4, the numbers of single person households have increased overall but volume fluctuates throughout the year, indicating a need for flexible accommodation that can flip between single person households and small families or couples.

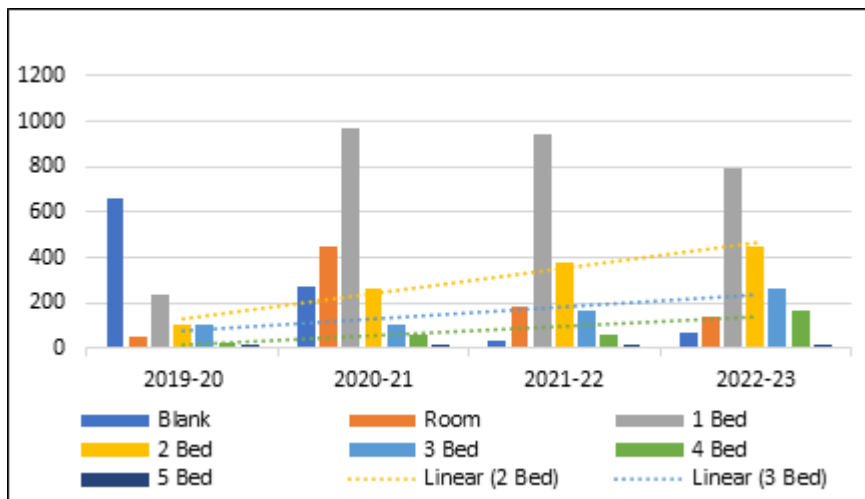


Figure 5: The number of units of TA provided each year by household composition.

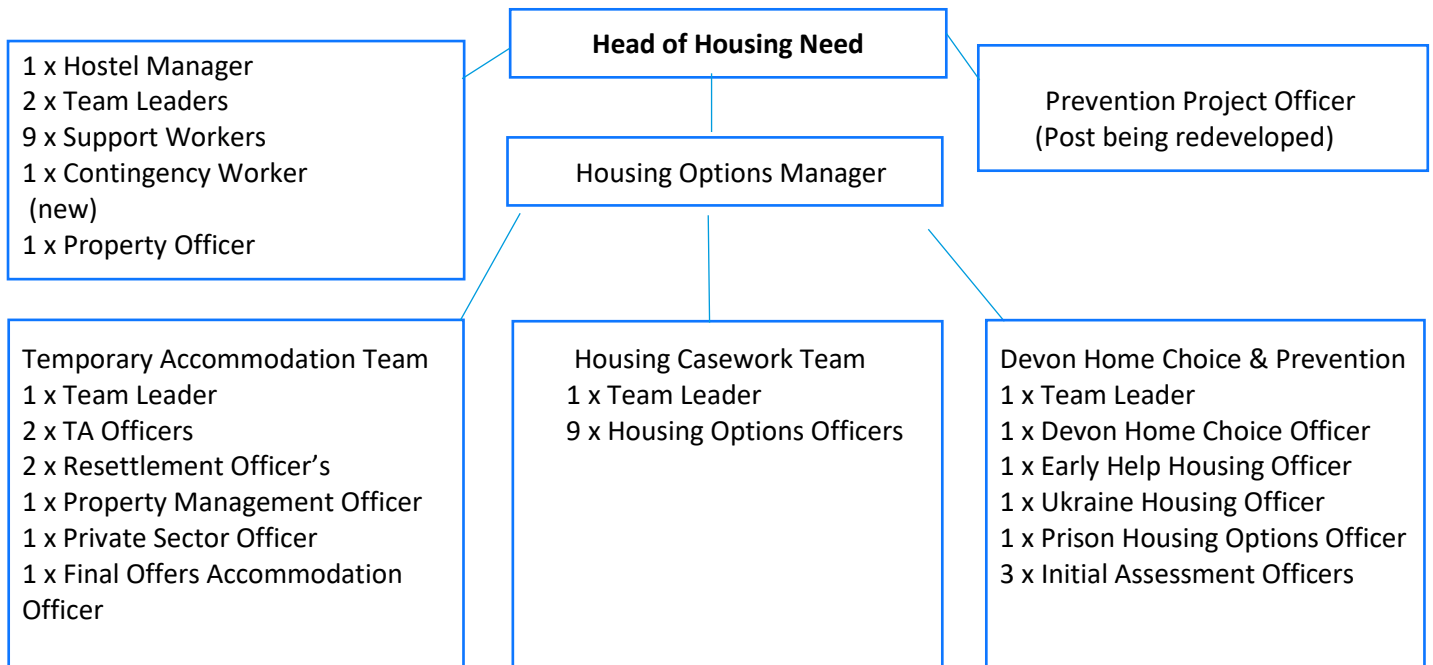
Note: - It is important to note that Bedroom need does not fully equate to family composition. Depending on the needs of the family and size of accommodation it is possible to accommodate larger families e.g., Family 3 Children, in a two bed or 3 bed properties.

- There is a significant increase in the demand to have access to accommodation for two bed TA placements for families, reducing the need for multiple moves. This was included in the purchase and repair program, but affordable properties could not be sourced due to supply and demand. A decision was made to purchase 3 bed properties. These properties are being used to accommodate larger families.

3 Our Response to Homelessness

The Council funds the Housing Options Service and Leonard Stocks Centre Hostel. We receive an annual Homelessness Prevention Grant (HPG) from the Government which requires monthly data returns, HCLIC.

The Housing Options Service consists of the following:



The team has grown significantly since 2018 from a team of 12 to the structure above, in response to increased duties introduced by the Homelessness Reduction Act and increased demand over recent years. This includes several new posts and the insourcing of the Hostel.

3.1 Prevention Team

There has been significant development in our efforts to prevent homelessness. The Initial Assessment Officers are the front door to the service and aim to prevent homelessness at the first point of contact and give quality advice that enables clients to self-serve. Many people can resolve their own situation with basic support from the service. Those who require higher level assistance or where efforts to prevent homelessness on the same day have failed, are then allocated to a Housing Options Officer.

The Early Help Housing Officer works across Housing Options and Children's Social Care to provide early support to families that have a housing issue. This post has proven very successful, having prevented numerous complex families from becoming homeless and the cost shunting from housing to children's services and their s17 budget.

The Ukrainian Refugee Officer works with households in host placements to prevent those placements from breaking down by either matching to an alternative host or by assisting the household to secure accommodation of their own. As a result, few Ukrainian families have become homeless and needed temporary accommodation. This work will continue and be expanded to cope with and homelessness as a result of asylum seekers receiving positive decisions either in dispersed or contingency hotels.

The Prison Navigator post is a new post funded from the Rough Sleeper Initiative and aims to ensure that ex-offenders have somewhere to go when they are released from prison. This is proven to reduce rough sleeping and re-offending.

3.2 Housing Casework Team

The Housing Casework Team case manage all active homeless applications from the triage stage where there is reason to believe someone may be at risk of homelessness right through to those owed the main housing duty. The lifetime of a homeless application can span several months with many weeks of complex statutory investigations required, the application of housing law, case law and decision making required. Throughout this investigation period the team are collaborating to try and either prevent or relieve homelessness.

3.3 Temporary Accommodation Team

When there is a duty to provide temporary accommodation, the two Accommodation Officers are responsible for sourcing a suitable placement that considers risk and finance. The two officers currently source over 1800 placements per year due to households having to move around spot purchased accommodation multiple times due to availability of accommodation.

Households in temporary accommodation are visited weekly by the Property Management Officer whose role it is to ensure that properties are appropriately maintained and remain legally compliant.

The two Resettlement Officers carry out visits to households in temporary accommodation and hold weekly surgeries to assist households to find alternative accommodation. This includes maximisation of income, employability, accompanied viewings and referrals to support and housing providers.

The Final Offers Accommodation Officer ensures proactive use of the housing register to ensure that homeless households are bidding on every available property that they can, failure to bid on properties will result in the officer placing managed bids on suitable properties, enabling the Council to discharge their duty on offers of suitable accommodation.

The Private Sector Officer acts as a point of contact for private landlords and agents to prevent homelessness by problem solving challenging tenancies. The officer has developed many successful relationships with landlords and is able to match our clients to suitable rented properties to prevent and relieve homelessness.

3.4 Leonard Stocks Hostel

Torbay Council took over the running of the 29 bed Hostel in February 2023. The service was not meeting our or the needs of the community, with minimal throughput, reducing the capacity in the wider system to assist.

Aims of the Hostel is to:

- Provide the initial off the street offer of accommodation.
- Length of stay 3 months and successfully moved on to other accommodation (ambitious target date March 2024)
- Providing capacity to assist 112 people per year.
- Facility that provides a holist support offer to give people the tools to move on with their lives.

Since the transfer of the hostel contract, performance has improved, with an initial length of stay target of 6 months. Throughput to date has been achieved due to the following:

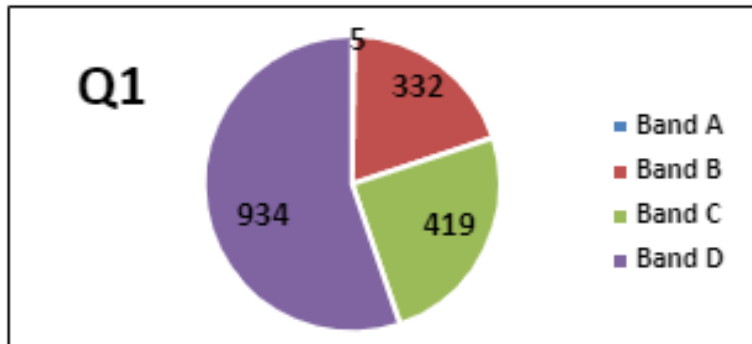
- Trained and supported workforce and dedicated Hostel Manager
- Coordinated action planning for move on including treatment, accommodation, and support.
- Working with residents to prepare them for moving and expectation that they will move.
- Housing options drop in which runs alongside breakfast club on a Tuesday.
- All residents (providing they are eligible) are now active on Devon Home Choice.
- Working hard to change the culture of the Hostel

Table 2 Length of stay of residents at the Hostel and position compared to same time last year.

4. Access to accommodation

4.1 Social Housing – Devon Home Choice

Social housing in Torbay is delivered by Devon Home Choice, a partnership across Devon to deliver a Choice Based Lettings. In 22/23, 218 properties were advertised for let in Torbay. Currently there are over 1600 people on the housing register who are all recognised by the allocations policy as having a need to be rehoused. Social housing cannot meet the needs of our community as there is not enough accommodation available.



In Q1, there were 39 allocations of social housing to those on the waiting list.

Table 4: Q1 23/24 – Number of people on the Housing Register by Band.

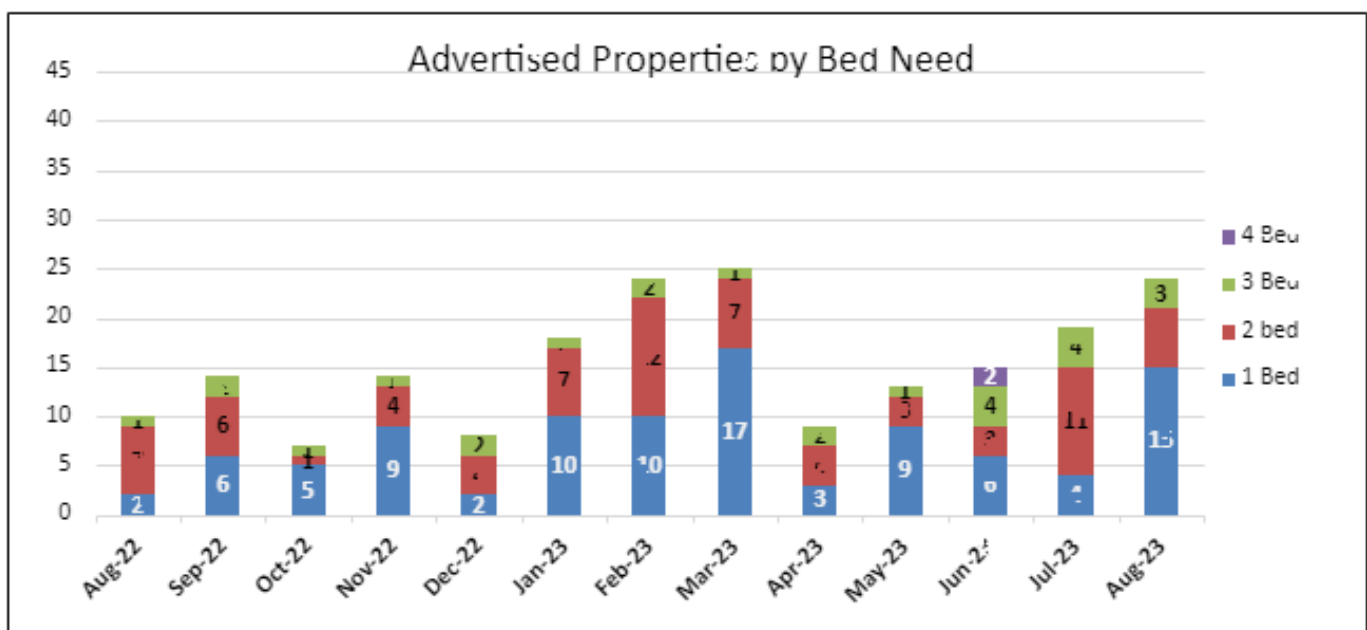


Figure 6: Number of properties advertised on DHC in last 12 months by number of bedrooms.

In a 12-month period, Aug 22 – Aug 23 there were only two 4 bedroomed properties advertised. This means that households in temporary accommodation with a 4 bedroomed need are waiting a significant period of time to access social housing.

4.2 Private Sector Housing

The cost of renting from a private landlord has increases significantly in recent years and has made private rented accommodation unattainable for not only low-income families but also average earners. Reduced supply of properties and high demand in the area has driven prices higher in Torbay and neighboring areas. The difference between rental costs and local housing allowance can be as significant as £600-£900 per month for a 4 bed property and £150-£300 for a 1 bed property.

Local authority	May-19	May-20	May-21
Brighton and Hove	26.8	37.6	42
Eastbourne	38.6	48.8	51.3
Exeter	21.1	30.7	33.1
Hastings	48.1	57.5	59.7
Plymouth	37.2	47.7	49.9
Thanet	51.7	62.3	65.5
Torbay	56.8	66.8	68.3
Southwest	30.9	40.9	43.5
England	32.1	43.2	48.2

Table 4 – Percentage of private rented households receiving housing subsidy.

In Torbay there are a disproportionately high number of people in receipt of some form of housing subsidy in the private rented sector. As such any increases in rent are disproportionately felt compared to other geographical areas.

Limited supply of social housing and a lack of affordable rented accommodation means the prevention of homelessness is extremely challenging. The team do all they can to negotiate and broker alternative arrangements with landlords to enable clients to remain in their homes, previously this was very successful and to some degree it still is. Sadly, many landlords have been forced to increase the rent they charge due to their mortgage increasing due to increased interest rates. There are also early indications of increased approaches due to mortgage arrears and repossession, this is a trend that we think will emerge over the next couple of years as current fixed deals begin to end.

5 Benchmarking and how we compare to others.

In 2019/20 and 2020/21 Torbay saw the highest proportion of households per thousand population assessed as homeless, compared to coastal and local benchmark authorities. This is over twice the national and regional averages.

Figure 7 below, illustrates the performance data submitted to government via HCLIC returns that are published and offers a comparison both regionally and nationally. There is six-month lag in publication and at the time of writing the latest data available is for Q4 22/23.

This shows that across England the loss of rented accommodation is the highest cause of homelessness, closely followed by friend/relative evictions.

Regionally the impact of loss of rented accommodation accounts for a much higher percentage of households becoming homeless. This not only reflects the higher-than-average level of private rented sector accommodation in Torbay but also the impact of this being a popular coastal area and many landlords shifting towards the more lucrative holiday market.

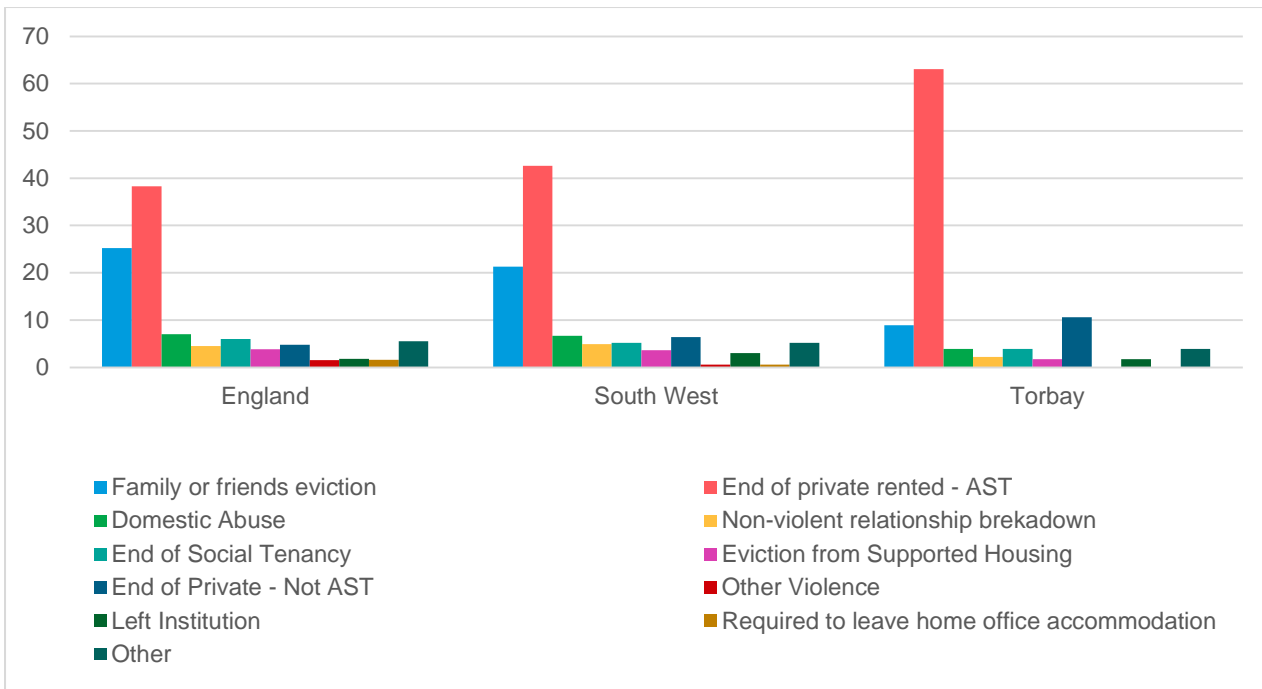


Figure 7: Reason for loss of settled home, percentage of those owed a prevention duty. (HcLick)

Significantly, figure 8 below illustrates that across England more than 43% of prevention cases are resolved by securing social housing. In Torbay only 7.5% of prevention cases are resolved into social housing compared with over 73% into rented accommodation.

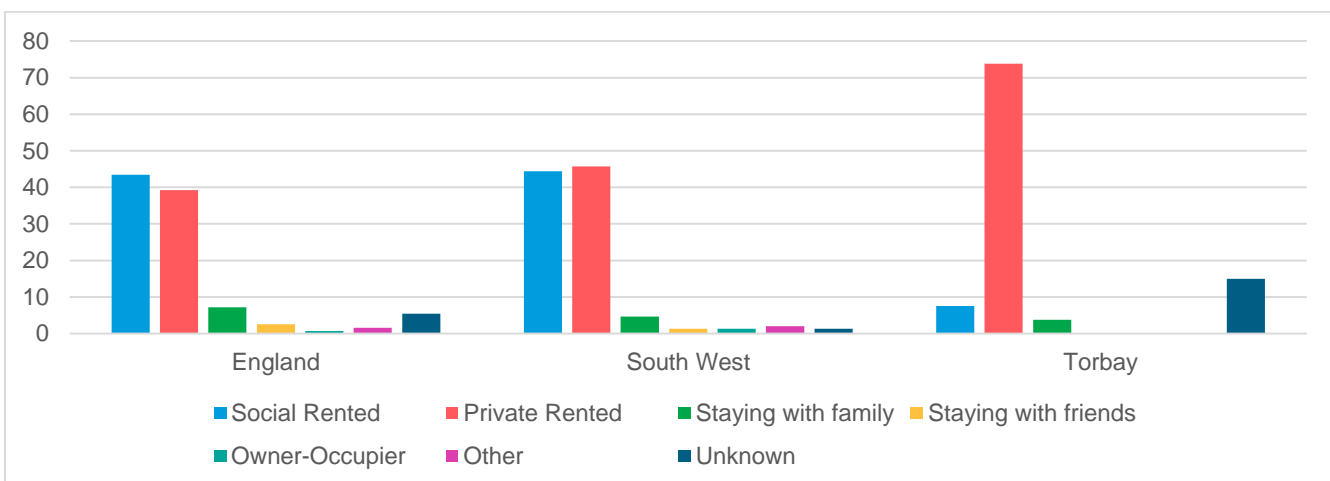


Figure 8: Type of accommodation secured at the end of duty

In other areas the majority of prevention activity is into social housing and private rented. Increasingly in Torbay, neither are attainable for homeless households and so once in temporary accommodation, people can become stuck, due to lack of options.

6 Multiple and Complex Needs Alliance

Homelessness is becoming increasingly complex and accommodation is seldom the only need of the households that apply for assistance. HCLIC data for Q4 22/23 shows that across England, homeless households have a multitude of support needs. At present, 100% of people in the hostel are struggling with addiction and or mental health. Whilst there is an excellent offer of support for people in the hostel, there is a lack of supported accommodation available to help them transition back to independent living. The length of time people are in both temporary accommodation and the hostel, means that people are can potentially deteriorate and become institutionalised.

Support needs of households owed a prevention or relief duty	Number people (Torbay)	Torbay	England
History of mental health problems	174	46.8%	27.0%
Physical ill health and disability	111	29.8%	18.4%
At risk of / has experienced domestic abuse	85	22.8%	12.0%
Offending history	58	15.6%	8.8%
History of repeat homelessness	61	16.4%	7.3%
Drug dependency needs	23	6.2%	6.1%
History of rough sleeping	52	14.0%	5.7%
Alcohol dependency needs	22	5.9%	4.7%
Learning disability	54	14.5%	5.9%
Young person aged 18-25 years requiring support to manage independently	2	0.5%	4.0%
Access to education, employment, or training	10	2.7%	4.2%
At risk of / has experienced abuse (non-domestic abuse)	20	5.4%	3.1%
At risk of / has experienced sexual abuse / exploitation	36	9.7%	2.4%
Old age	15	4.0%	1.7%
Care leaver aged 21+ years	18	4.8%	1.5%
Care leaver aged 18-20 years	5	1.3%	1.3%
Young person aged 16-17 years	8	2.2%	0.9%
Young parent requiring support to manage independently	0	0.0%	1.1%
Former asylum seeker	0	0.0%	1.8%
Served in HM Forces	9	2.4%	0.7%

Table 5: Support needs of people owed a prevention duty in Torbay compared to England average.

The data shows that Torbay has a higher-than-average number of people requiring support (66.7%) when compared with the rest of England (53.5%). Mental health and physical health are of particular concern.

Through the opportunities afforded by the creation of the MCN Alliance pulling together drug and alcohol services, domestic and sexual violence, and the homeless hostel there is now the prospect to develop a strategic approach to the coordination and optimisation of resources. This will increase efficiency and deliver integrated support to those most in need., which in turn will benefit both the individuals and the wider community. The Alliance can also work towards ensuring its services are flexibly accessible to populations such as rough sleepers who services historically fail to engage productively.

7 Next Steps

Work has recently taken place to update the temporary accommodation sufficiency plan to ensure adequate supply of suitable, good quality accommodation to meet duties to home households. Further work is required to understand our longer-term accommodation options to be addressed in the Housing Strategy.

The production of a new Homeless and Rough Sleeping Strategy is required within the next 12 months, with work needing to commence in the very near future.

Prevention remains the priority for the service but progress in this area is limited due to the lack of supply of affordable housing both in the social and private sector. A holistic needs and gap analysis is necessary to understand organisational accommodation needs for the Council to make a tangible difference to its response to homelessness.

Briefing - Rough Sleeping in Torbay

A paper to aid the understanding of rough sleeping in Torbay, the current response, and gaps in the system.

Torbay Council

August 2023

1 Torbay, understanding the picture of homelessness.

This briefing paper aims to describe the picture of rough sleeping in Torbay, our current response and the elements of the system that need to be in place to enable this to be undertaken effectively.

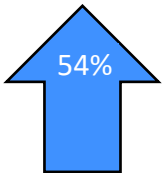
Rough sleeping is the most visible and damaging form of homelessness. It rightly causes the most concern among the public, decision makers, and advocates for homeless people in the charity sector. Rough sleeping is not usually the first form of homelessness people experience. However, tackling it must be central to any plan to end homelessness, given the extreme dangers posed to people living on our streets. Below are the main points that attempt to describe rough sleeping in Torbay:



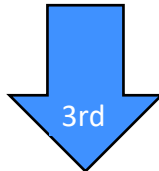
35 people rough sleeping in Torbay tonight.



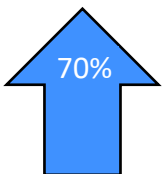
54 different people sleeping rough in Torbay in June.



Rough sleeping has increased by 54% in the last 12 months in Torbay.



Torbay is ranked 3rd worst compared to its CIPFA Group (Bournemouth was top) and 3rd worst in Devon (Nov 22). Exeter next then Plymouth.



New faces – 70% increase from May to June of people sleeping rough that are new to Torbay.



RSI Funding from Government (£1.9m over 3 years) – funds our entire response, end 31 March 2025.



Outreach team of 4 people.



Tenancy sustainment team from May 2023 of 4.



To date in 2023 7 people are known to have died that were known to our housing system. Mortality rates among homeless people are higher than the general population. Those affected by homelessness are ten times more likely to die than those of a similar age in the general population. The average age of death for homeless people is just 47.



In Torbay it is estimated that 55% of homeless adults have a substance misuse problem. Local data and intelligence suggest this could be a lot higher. Conversely, 27% of those experiencing substance misuse problems also have a homelessness issue.

1.1 How many people are rough sleeping in Torbay.

Over the last 3 months there has been a changing picture of those rough sleeping in Torbay. This has not only seen an increase in numbers, but also those that are new to Torbay.

Data is provided to government monthly as well as the annual national count under the terms of our Rough Sleeper Initiative (RSI) grant funding. It includes data on numbers of people seen across the month on outreach and a snapshot single night figure. These figures are generated by outreach visits and numbers of people engaged across the various sessions – but do not include other people that the team are in contact with and aware of, that may not have been seen on an outreach visit (data including all individuals is included below).

Each year, Local Authorities must provide a snapshot count of people rough sleeping on a single night. This typically takes place in November and is coordinated with neighbouring authorities to reduce likelihood of double counting. Results are verified by Homeless Link. Figure 1 shows the official annual count data for Torbay since 2010.

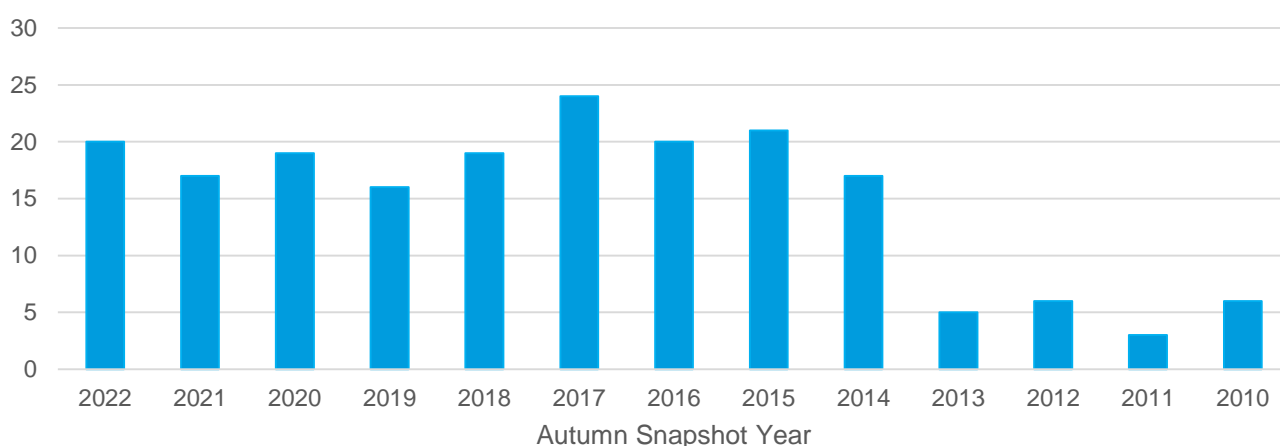


Figure 1: Annual autumn snapshot (Annual Count) of number people sleeping rough in Torbay over last 12 years.

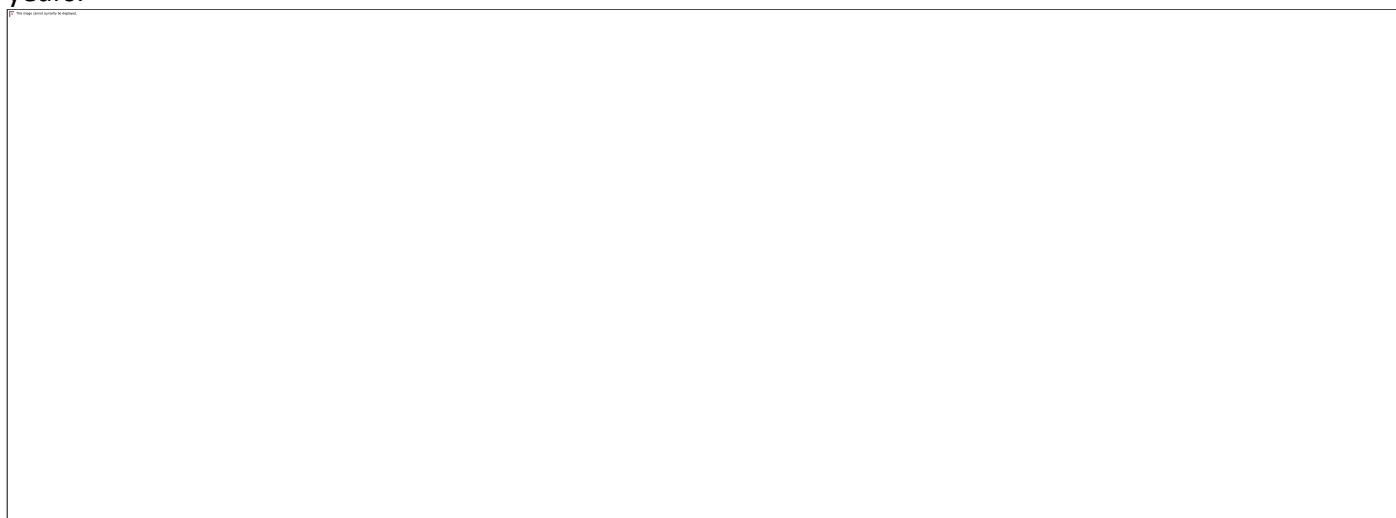


Figure 2: Number of People Sleeping Rough in Torbay on One Night

The number of people sleeping rough has increased from June mainly due to people that are new to Torbay.

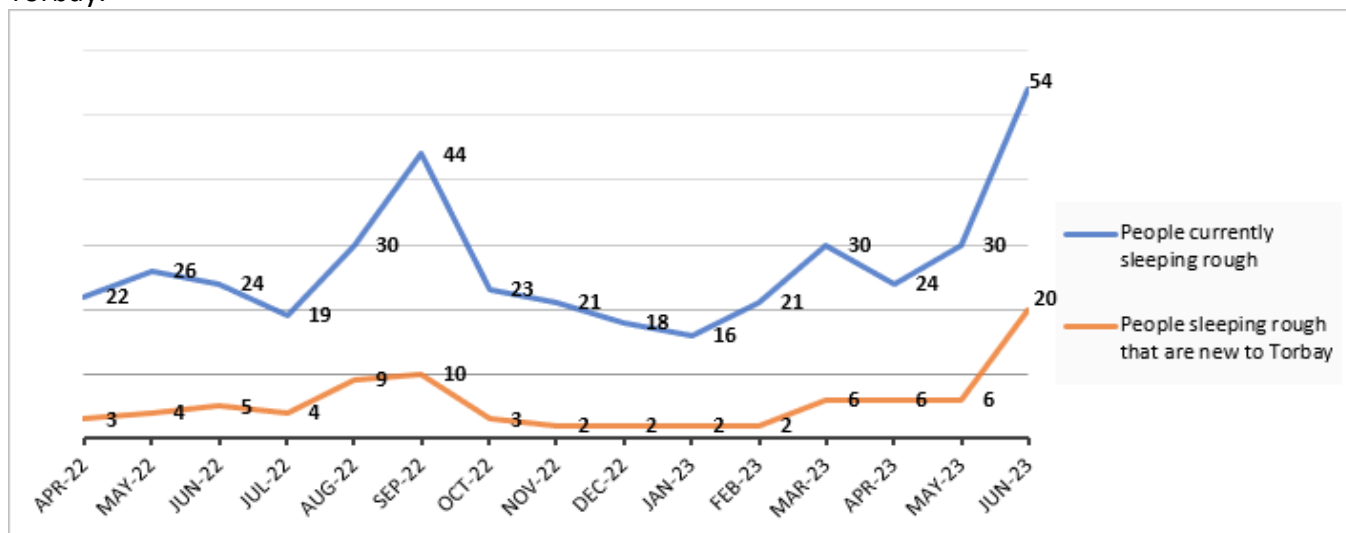


Figure 3: Total number of people that are sleeping rough in Torbay each month and of those that are new to the area.

The picture of street homelessness is also always evolving. There is a common misconception that people are static. Although there will always be those that sleep on the streets for a period of time in an area, the number of different people over a month will be far more than that on any one night. This reflects the true picture of street homelessness and the transient nature of locaion or sofa surfing that is part of the hidden picture.

1.2 Profile of people who sleep rough in Torbay

Looking across each year, most people experiencing street homelessness in Torbay are from or have a connection to Torbay. However, there are seasonal changes whereby more people from out of area are present from April through to the end of the summer. Most transient people do stay for a short period of time before moving on, typically seeking no local assistance from our housing system. A smaller category may seek to establish a local connection. In recent months there has been a noticeable increase in people from out of area sleeping rough in Torbay. One identifiable part reason for this has been the placing of people from elsewhere, 11 of whom lost the accommodation abruptly and have remained in Torbay, many of which being present in Factory Row.

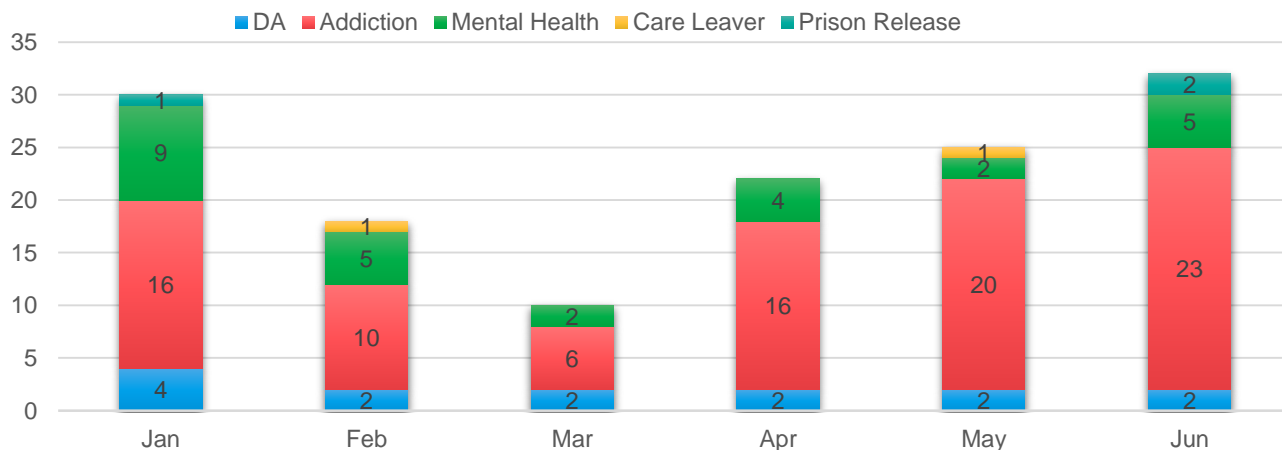
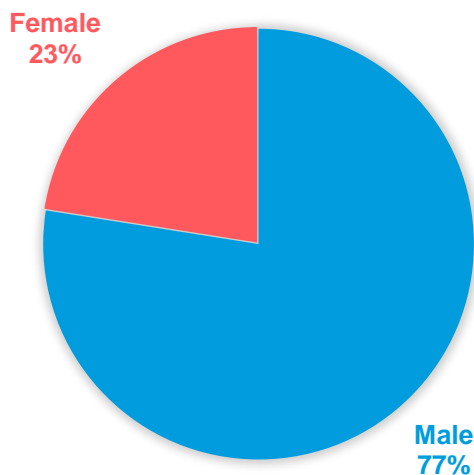


Figure 4: The Competing Needs of those Rough Sleeping who are from Torbay.

As per Figure 4 above, Torbay’s rough sleepers frequently have several co-morbidities with substance misuse a prevalent experience. It is evidenced that people experiencing various forms of homelessness have higher mortality rates than the average population, with average age of deaths for rough sleepers being in the mid to late 40s (nationally). In 2021, 17 people known to our housing system were known to have died, with people largely between their 30s – 40s. For those where circumstances of death were known, substance use was prevalent across the individuals (but not necessarily the cause of death). To date in 2023 we are aware of 7 deaths of people known to our housing system.

Most Torbay’s rough sleepers are males, which has been consistently true throughout our data collection. In more recent times, females rough sleeping have tended to be in a couple with a male.



Female rough sleepers tend to experience higher levels of both domestic abuse and sexual violence, making them a particularly high risk group, having additional vulnerabilities on top of those associated with rough sleeping. Visibility and knowing where females are rough sleeping enables a degree of monitoring for safety – acts of moving females in relationship on from various locations may increase their risk and place further distance from assistance. The gender breakdown of people sleeping rough who come from Torbay or elsewhere, is very similar.

Figure 5: Breakdown by gender of People Sleeping Rough in Torbay in 2023 who are from Torbay.

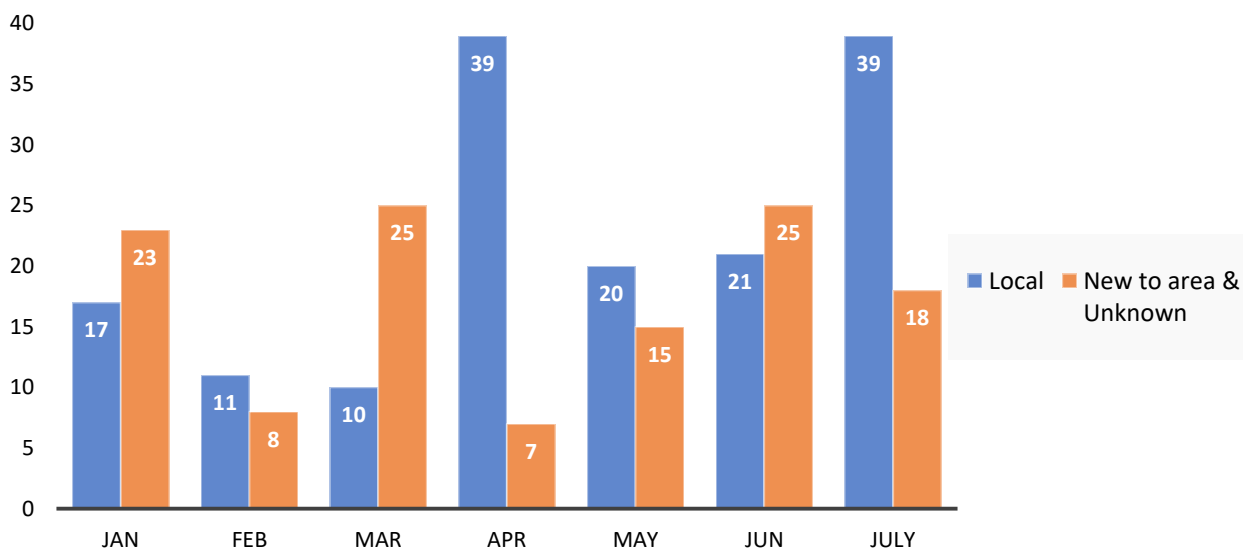


Figure 6: Number of People Sleeping Rough each month are working with in Torbay in 2023 and if they were local or from out of area.

In July, the RSI team were working with 57 different individuals. A 30% increase since the start of the year.

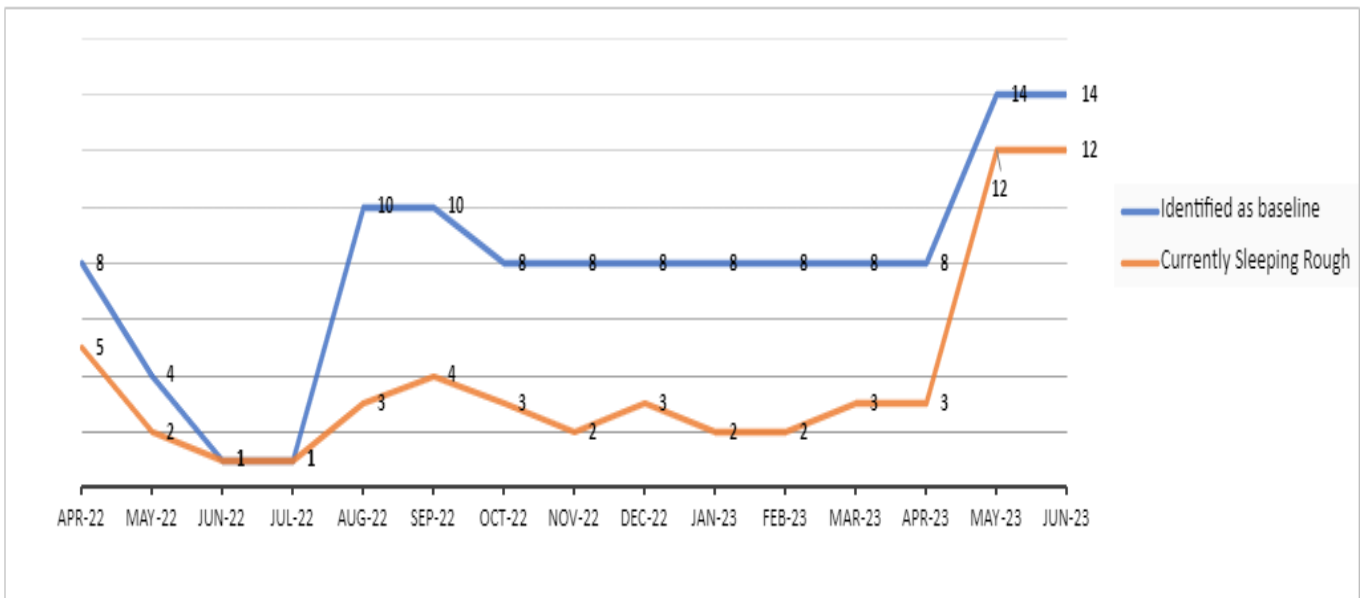


Figure 7: Number of People in Target Priority Group who are furthest away from having their rough sleeping resolved. (Note this forms part of Gov monthly return)

The target priority group are those sleeping rough and who are furthest from having their rough sleeping resolved. They are a specific cohort identified under the RSI programme using DLUHC’s definition, which seeks to ensure that people who are most entrenched in their rough sleeping receive targeted efforts. This can include people currently sleeping rough, or those currently in off the street settings who are most likely to return to rough sleeping.

The criteria to identify these target groups is people who have been seen sleeping rough in two or more years out of the last three and in two or more months out of the last 12. Currently we have 14 identified individuals that we report on, the reporting criteria has recently changed, whereby we used to report on 8 such people. At the end of June 2023, 12 of these individuals were rough sleeping and 2 had been accommodated. 2 of the 12 individuals sleeping rough have a tenancy with a social landlord.

4 of the 6 people in the 5 case studies below relating to rough sleepers are part of this cohort (see appendix).

1.3 Why do people become street homeless in Torbay

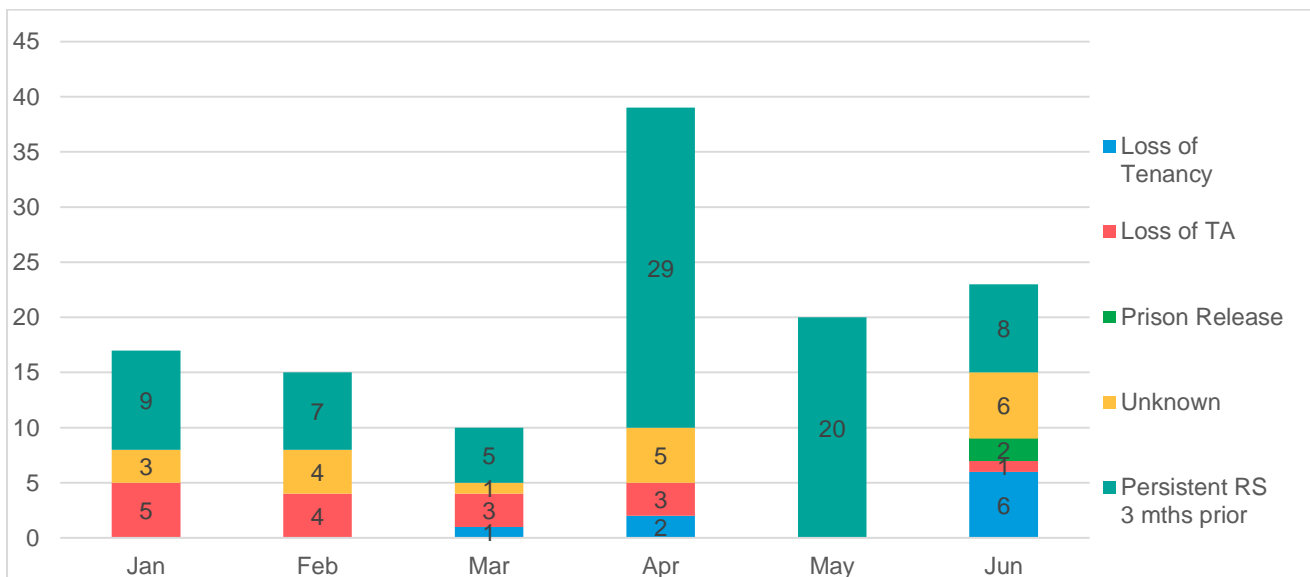


Figure 8: Reasons why people in Torbay are Street Homeless in 2023

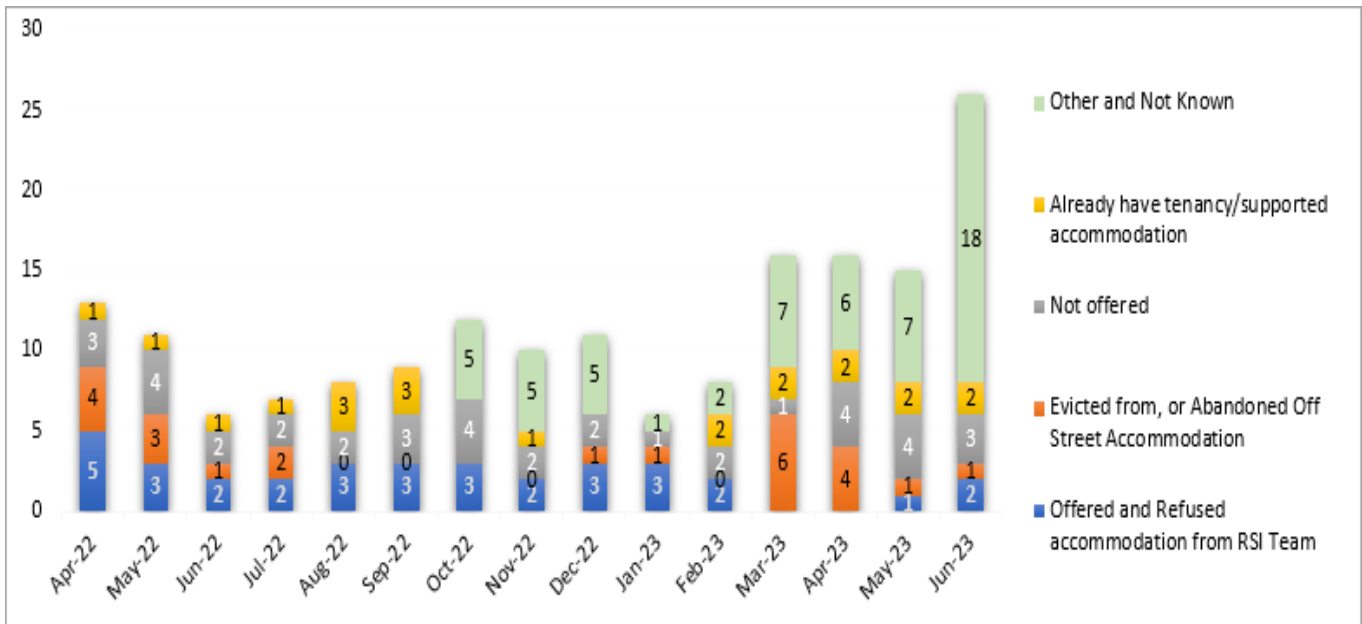


Figure 9: Single Night Assessment of those Sleeping Rough and why they are not accommodated in our off the street offer of accommodation.

This data from the charts above comes from the government returns and categorises why people who have been identified as rough sleeping on a single night have not been accommodated.

The primary reason for this as discussed elsewhere in this report is that there is a lack of both off the street (emergency) and medium / long term accommodation. However, it does highlight an increasing recent trend that more peoples’ circumstances are not known. This in part reflects seasonal flow through Torbay, where there may be initial engagement but no information forthcoming, but then move on and out of Torbay – but are still recorded in these figures.

A significant proportion of the ‘other’ category is due to relationship breakdown, exasperated by the cost of living crisis and is reflected in approached to wider homeless services.

2 Our Response to Rough Sleeping

There are multiple layers to our rough sleeper response. The Council funds the Housing Options Service and Leonard Stocks Centre Hostel. We have been in receipt of RSI funds since 2018. Typically, these have been single year grant funds confirmed in March for the following year, until 2022 when a 3 year funding arrangement was agreed. The total funding allocation for the 3 years was £1.9m. With allocation of £556,256 for 24/25.

It was agreed at a time when the Government had committed to ending rough sleeping by the end of the election period – which accounts for why there is a drop off in funding for various elements as they expected to see a reduction in rough sleeper numbers due to the investment. Conversely, numbers are increasing as referenced elsewhere in this report. Government has since revised its aim for rough sleeping, still intending to end it but ensuring that it is rare, brief and non-recurrent where it cannot be prevented.

The RSI grant funds a range of elements that: engage and support rough sleepers from street to accommodation, lease property, provides flexible funds to pay for winter provision and access to accommodation and provides strategic / development support within the Council. If the Council were not in receipt of these funds we would have no outreach function, specialised roles within the Hostel nor identified resource or budget to provide SWEP.

2.1 Resettlement Team

Four Officer with one senior. Team size will reduce by 1 Officer from 24/25, leaving 3 in post. Team conduct outreach work with any and all rough sleepers across Torbay, attempt to connect people with services and find accommodation.

They have access to the personalised budgets which can pay for rent in advance, deposits, emergency accommodation, furnishings, reconnection travel expenses, provision of phones to enable contact and welfare items. The Resettlement Team are typically the first point of contact with our housing system for rough sleepers and maintain engagement throughout the duration of a persons period of street homelessness. They also conduct preventative work when notified of a potential risk to someone's housing situation, to avoid repeat instances of street homelessness. Intelligence comes to the team usually by a range of colleagues across the Council and SWISCo, or police or public through the Streetlink reporting system. They also facilitate both the hot and cold weather SWEP offers. Despite immense challenges in sourcing accommodation, since April 2022 the team have accessed 45 tenancies and 117 licence agreements for clients

2.2 Tenancy Sustainment Team

Four Officer with one senior. This is a relatively new service within the Council, brought in house and formed from previous tenancy sustainment and housing first services provided externally. Now fully staffed, recruitment had been a significant issue. The team provide flexible support to people once in accommodation to help sustain it, particularly focussed with people who have multiple experiences of accommodation loss. The team currently assist with building rapport with hostel clients to help them move on and then provide ongoing support once in longer term accommodation.

2.3 Step up / step down Accommodation.

We are currently leasing a 6 bed property and discussion are at an advanced stage regarding another property which is funded through RSI grant. Any lease entered into now or in near future will end March 2025, unless further grant funding announced by government.

Full occupation of the 6 bed property has remained constant with a surprisingly consistent flow through it, enabling some move on from the Hostel which in turn frees up space for rough sleepers.

2.4 Substance misuse worker / Community Psychiatric Nurse

Specialist roles for pro-active engagement with rough sleepers who have disproportionately high levels of mental health and substance misuse issues and difficulty in accessing mainstream health provision. Both work from Leonard Stocks Centre, complimenting the wider health offer on site and both roles due to cease in 24/25 under current funding arrangements. CPN is a new role that has just been recruited to, the substance misuse worker role has been in post for a number of years and been engaging predominantly hostel residents given prevalence of substance use across client base.

2.5 Next Steps Accommodation Programme (NSAP)

DLUHC scheme from 2021 enabling us to purchase 14 properties and procure a support contract for some of Torbay's people who have experienced most challenges in sustaining accommodation historically. Support is provided by Bournemouth Churches Housing Association (BCHA) and management functions provided by Tor Vista.

2.6 Severe Weather Protocol (SWEP) / Cold Weather periods

Local Authorities must provide emergency accommodation in instances of severe weather as a means to preserve life. In cases of cold / wind / rain this will mean the provision of accommodation and typically occurs in the winter months. Severe heat includes the provision of water and suncream.

The way in which SWEP has been delivered has changed over the years due to varying reasons. Post covid, there has not been any regular winter night shelter provision due to Torbay Winter Night Shelters (ToWNS) having been disbanded. SWEP is typically delivered via two methods, sometimes in combination. Booking of hotels / B&Bs or running a congregate setting such as a church hall. A 6 week night shelter was provided from late January 2023, accommodating up to 14 people a night, but it looks unlikely that this will be replicated for 2024.

2.7 Access to accommodation

Over the last few years, the ability to access and therefore offer emergency accommodation has reduced significantly. Prior to the escalation of the national housing crisis we would often be able to make an offer of a short stay in a hotel or B&B whilst medium to long term accommodation was sought, as this was generally a relatively brief period of time.

Whilst access to the privated rented scetor has shrunk to almost unobtainable levels, access to hotels and B&Bs has also shrunk. As such, we have limited means of offer to the majority of people who are sleeping rough that the Council does not hold a housing duty towards. These factors also impact on flow through thr Hostel and any leased accommodation we acquire for short term use.

2.8 Third Sector support

There are 3 main small organisations that offer assistance to rough sleepers in the form of welfare supplies, two of which are in Paignton and one in Torquay. Food is generally well provided for, but places to be in the day or night are not. There is a consistent lack of places across Torbay that either rough sleepers or street attached individuals are welcome – exasperating presence in public spaces.

2.9 Multiple and Complex Needs Alliance

Through the opportunities afforded by the creation of the MCN Alliance pulling together drug and alcohol services, domestic and sexual violence and the homeless hostel there is now the prospect to develop a

strategic approach to the coordination and optimisation of resources. This will increase efficiency and deliver integrated support to those most in need., which in turn will benefit both the individuals and the wider community. The Alliance can also work towards ensuring its services are flexibly accessible to populations such as rough sleepers who services historically fail to engage productively.

2.10 Housing Options

Several duties are owed to homeless households, firstly the prevention duty; to stop homelessness occurring by either ensuring a household can remain where they are or by helping them find alternative accommodation before homelessness occurs.

Where homelessness cannot be prevented, the relief duty is owed; to help the household to secure suitable accommodation. During the relief duty period, the Council must decide if a temporary accommodation duty is owed. This duty is only owed if there is reason to believe that the household may be vulnerable and therefore considered to be what is known as 'in priority need.' Those not in priority need are not owed an accommodation duty and must make their own arrangements unless there are discretionary services such as the Rough Sleeper Team, that can help instead.

Against a backdrop of greater demand for housing in Torbay alongside accommodation itself being more costly to rent, those whose lives are characterised by complexity are the most disadvantaged and least likely to secure stable and suitable accommodation. Also, this cohort of the population finds it more difficult to sustain a tenancy, often requiring support to do so. Unfortunately, the support offer is very limited.

2.11 Lenard Stocks Hostel

Torbay Council took over the running of the 29 bed Hostel in February 2023. The service was not meeting our or the needs of the community, with minimal throughput, reducing the capacity in the wider system to assist.

Aims of the Hostel is to:

- Provide the initial off the street offer of accommodation.
- Length of stay 3 months and successfully moved on to other accommodation (ambitious target date March 2024)
- Providing capacity to assist 112 people per year.
- Facility that provides a holist support offer to give people the tools to move on with their lives.

Since the transfer of the hostel contract, performance has improved, with an initial length of stay target of 6 months. Throughput to date has been achieved due to the following:

- Trained and supported workforce and dedicated Hostel Manager
- Coordinated action planning for move on including treatment, accommodation and support.
- Working with residents to prepare them for move on and expectation that they will move.
- Housing options drop in which runs alongside breakfast club on a Tuesday.
- All residents (providing they are eligible) are now active on Devon Home Choice.
- Working hard to change the culture of the Hostel. Evictions have taken place due to drug dealing, criminal damage, or threatening behaviour. Behaviours that were previously tolerated are no longer accepted and to ensure that when people are offered a placement, they want to accept it.

The proximity to the hostel of non-residents taking drugs and consuming alcohol is extremely challenging. This articulates the complexity of the issues and solutions, in that people present in the area have varying

reasons to do so, such as being a local resident, place for social connection amongst peers, through to dealing opportunities. This is exacerbated by perception and reality within the wider community where members of the public automatically link the street-attached people who gravitate to Castle Circus to the hostel, when in fact it is now very rare to see a hostel resident in these crowds.

2.12 Enforcement

As rough sleeping becomes more visible across Torbay and the country, the issue can become more contentious with often polarised views on what is appropriate. As a Local Authority, the Council has to seek to balance the right approaches in keeping people as safe from harm as possible, maintaining community safety and ensuring confidence in our ability to address complex social challenges appropriately.

Rough sleeping is not an offence (in law), it is a housing need. Government policy around ASB recognises that legislation should not be used to target rough sleeping but can be used for behaviour of rough sleepers where necessary. For example, statutory guidance for PSPOs references how they should not be used for rough sleeping. Numerous local authorities have provoked public outcry when actually or being perceived to target rough sleeping when considering orders to restrict, ultimately leading to decisions to rescind or not progress. Formal enforcement measures can work to help address anti-social behaviour associated with rough sleeping but as a last resort and should not criminalise or punish the experience of being street homeless. These measures should only be used with careful consideration and generally when all other options to help someone who is rough sleeping have failed. Torbay does take action when appropriate – but always balances enforcement and support as the Council has responsibilities to both the individuals and wider community. See case study 1 (Appendix) involving couple sleeping rough in doorways and hoarding. This involved the issuing of Community Protection Notices and subsequent Criminal Behaviour Order for breach of notice banning from the area.

In some areas of England and Wales enforcement measures are used without access to wider help. Research undertaken by Crisis found that eight in ten rough sleepers' most recent experience of enforcement did not result in advice or support being administered.

[an examination of the scale and impact of enforcement 2017.pdf \(crisis.org.uk\)](#)

Any contact with someone rough sleeping is an opportunity to help them off the streets. The police, local authorities and homelessness services should work together to provide rough sleepers with advice, accommodation and referrals to other services. If formal enforcement measures are used, they must always include accommodation and social care support. In Torbay we have a significant lack of accommodation to be able to provide this effectively. Forcibly moving someone from one location, guarantees they will appear in another.

3 Benchmarking and how we compare to others.

Rough sleeping is just one element of homelessness. Wider demand on core homelessness services (Housing Options) will ultimately impact on rough sleeping as there are fewer affordable options for all. Cornwall have already seen an emerging trend of people sleeping in cars due to the lack of affordable accommodation, providing a new cohort of people that do not have a roof over their head, but in essence are still sleeping rough.

In 2019/20 and 2020/21 Torbay saw the highest proportion of households per thousand population assessed as homeless, compared to coastal and local benchmark authorities. This is over twice the national and regional averages.

In Q3 22/23, 79.8% of the relief cases taken were from single person households. The average for England was 68%. Of the cases considered for the main housing duty in this period, 52% were single person households who were found to not be in priority need and so the Council has no statutory accommodation duty. Some people are forced to sleep rough due to a lack of suitable, affordable accommodation.

This is a national picture and Torbay is not unique in experiencing increased numbers as illustrated in figure 10. An increase in rough sleeping was experienced in all regions of England. Numbers nationally increased by 26% in 2022 and are estimated to increase again in 2023.

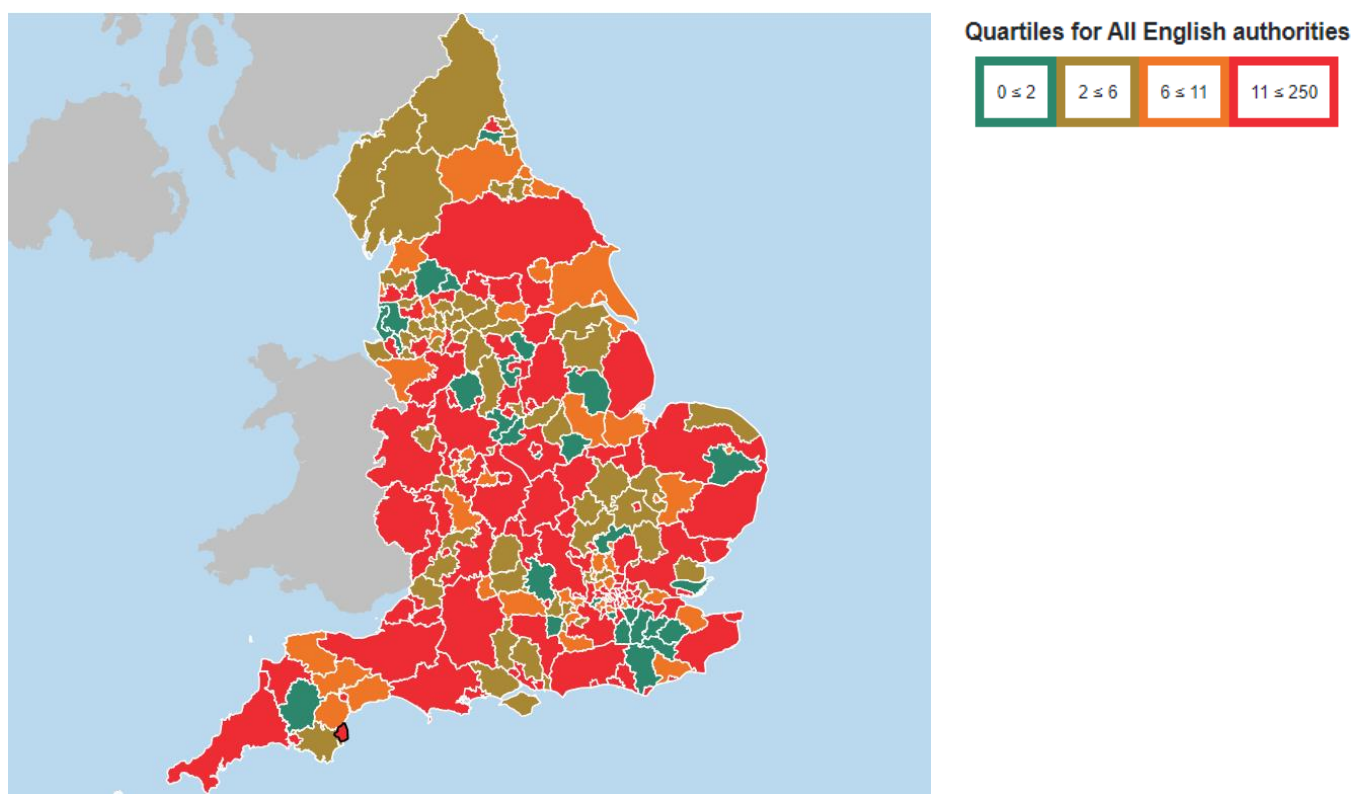


Figure 10: Total number of people sleeping rough (snapshot Autumn 2022) for all English authorities.

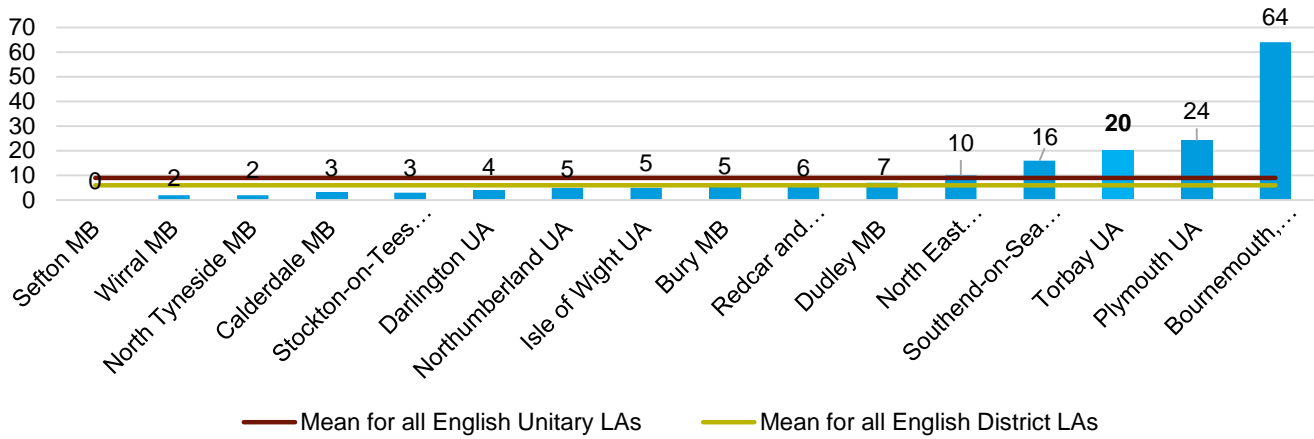


Figure 11: Total number of people sleeping rough in Torbay – Devon comparators 2022

When compared with our neighbouring authorities in Devon (Autumn 22) Torbay was ranked third behind Exeter and Plymouth. We believe that the annual count this Autumn will increase, but so will our neighbours.

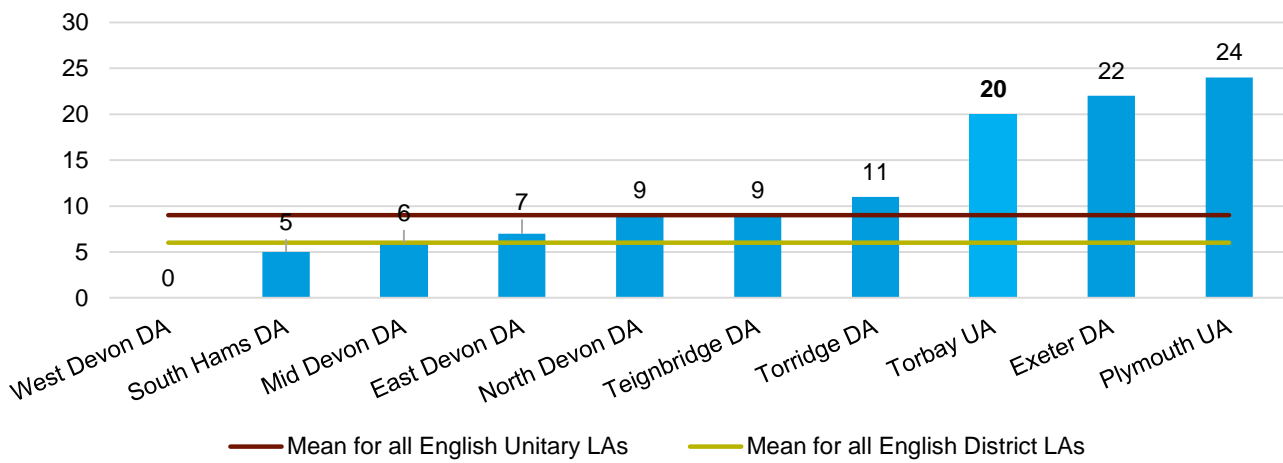


Figure 12: Total number of people sleeping rough in Torbay – CIPFA comparators 2022

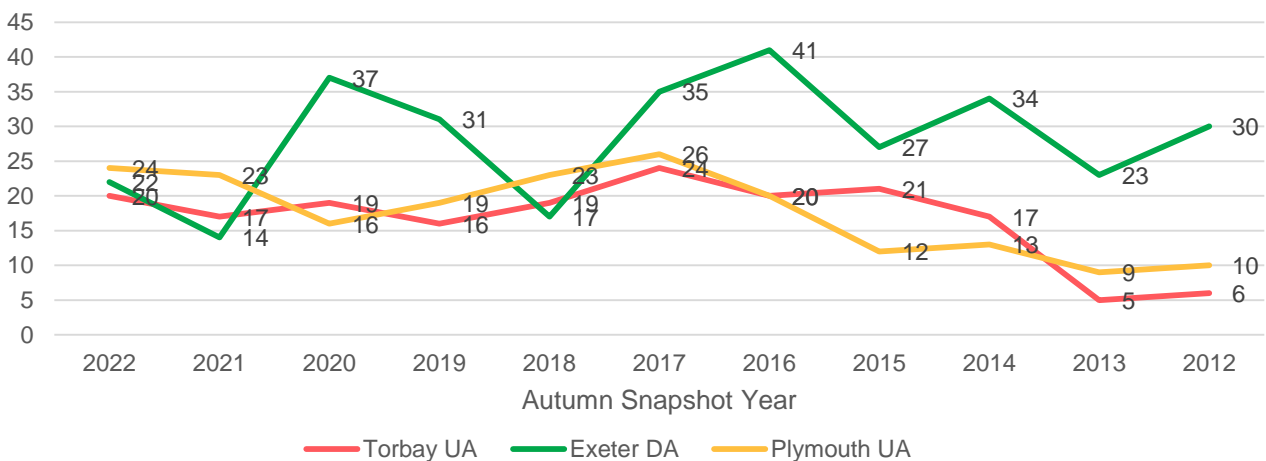


Figure 13: Number of people sleeping rough per year with nearest comparable neighbours.

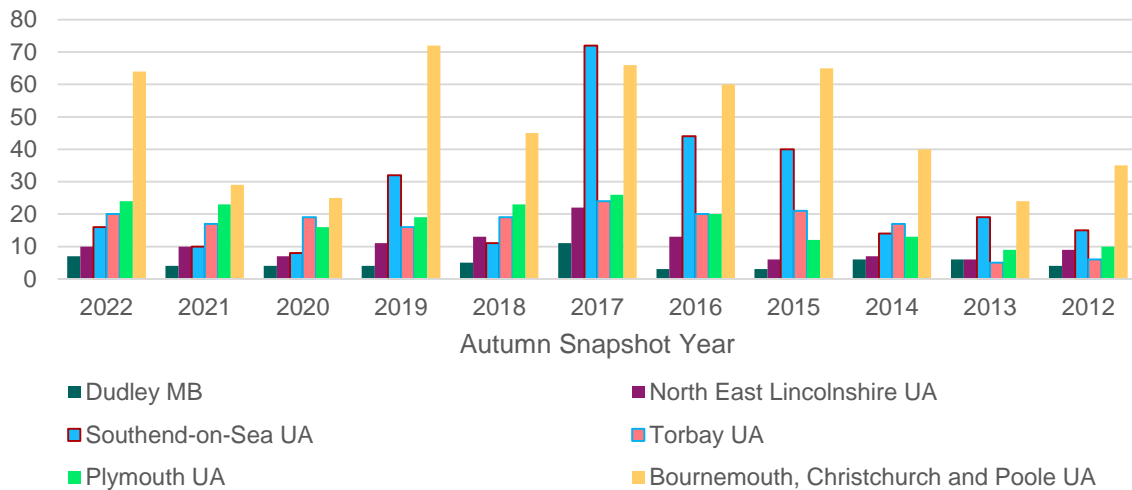


Figure 14: Number of people sleeping rough (Autum snapshots) over last 10 years for highest CIPFA comparators.

Our wider comparator group are also seeing similar trends based on the snapshot assessment.

4 Next Steps

Work continues to develop the Hostel and increase the off the street offer with the support of a fully operation outreach and tency sustainment team. The work to establish these 3 elements should not be underestimated in the current recruitment environment and level of complexity the staff are managing.

The production of a new Homeless and Rough Sleeping Strategy is required within the next 12 months, with work needing to commencement in the very near future.

A good working environment is in place with DHCLU, enabling effective funding opportunities to be discussed. This will include the codesign of SHAP funding proposals.

Enforcement activity will be progressed where appropriate in line with support measures. Regular cross boundary operational meeting are in place with relevant agencies e.g. IOM or other LA to reduce the number of placements or placement breakdowns.

Accommodation requirements remain the priority, both from a physical building perspective, affordability, and support. Accommodation provsion is not affordable for tenants and DHP funds are such that ongoing support will also be limited.

If Torbay want to end rough sleeping rapidly it needs more accessible affordable accommodation as part of a wider model of support and permeant homes for clients that will not be usually within an extremely costly private rented sector.

Prevention is a longer term strategy addressing some of the underlying issues that people are living with each day, in a stretched system.

5 Case Studies

Case Study 1 (SF & AB)

Couple (male and female) who are in their 20's and both identified as being within the Target Priority Group cohort. Female is a care-leaver who has had several pregnancies where the child has been taken into care and has no contact with the female. Female is a user of substances, and hoards items found on the street. She is supported by a support agency and has been for a few years – supported through the loss of her children. She has some family connections locally. The male is the father of some of the children who have been removed. He is also a user of substances. He also has family connections locally. The couple found themselves homeless after losing their temporary accommodation in Torquay some 3 years ago. The loss of accommodation was caused through drug activity and hoarding within the property. During their time in the TA property there were considerable concerns for the movement of substances in and around the location, with the male being identified (along with his family) as being a significant player. The relationship has an element of dependency and domestic abuse, where he is the predominant perpetrator. There are concerns around the females vulnerability, especially given her attachment / loss of children.

Since losing the TA accommodation the couple have slept rough in several doorways within Torquay town centre, have both accessed Leonard Stocks Centre and he has also spent time within prison. They currently have a tenancy with Sanctuary Housing (and have done for the last 12+ months), although have preferred to sleep on the street. It is assumed that the desire to sleep on the street has given them access to money from begging, access to the local drug market and access to retail units for shoplifting purposes. Whilst sleeping on the street the couple have continued to hoard items including food matter. There have been considerable complaints about their rough sleeping status and the 'visual' distress this has caused. There have been at least 4 retail unit doorways that have been boarded to restrict their encampments.

They are not involved with drug and alcohol services despite the offer of access. They are supported by Tenancy Sustainment services in an attempt to encourage them to reside at the tenanted property. There have been numerous multiagency meetings to support them wherever possible.

Currently they have both been issued Community Protection Notices, which have been breached. The male is now restricted in his access to the town centre by virtue of a Criminal Behaviour Order for the next 3 years. The female is due to attend court within the near future to be heard for the breach of CPN, with the request for a Criminal Behaviour Order – as both have been responsible for a significant amount of resource usage.

Case Study 2 (SJ)

Middle aged male (SJ) who lost his 20-year tenancy after a relationship breakdown. Found himself rough sleeping in a tent on the main road at Hamlyn Way for several months after the loss of tenancy. He found himself with no apparent support needs and without access to affordable accommodation. Referral into RSI team and enabled access to RSI run HMO at Victoria Road. Male was in Victoria Road property for in the region of 4 months before RSI provided a reference for him and he secured a private rental tenancy. No ongoing support needs. No Tenancy Sustainment support needed.

Case Study 3 (GN)

Male in mid 30's, who has local connection to Torbay with family currently living in the local area. Good support network. This male is identified as a persistent rough sleeper within the Target Priority Group cohort. This male has been known to the RSI team and other homelessness services for several years. He has ongoing difficulty with sustaining his mental health and prefers the isolation of sleeping away from others. For some years this male slept out of the town centre and encamped himself in and around Gallows Gate area of Torquay on the ring road.

Whilst sleeping in the camp he sustained a lifestyle of self-sufficiency without the need to access wider society. He was approached regularly by members of the public who would often check his welfare and provide him with food. During his time sleeping at Gallows Gate the RSI team would undertake regular welfare checks and on occasion provide him with food parcels. Members of staff from the Hostel would also visit him. During that time there was an ongoing offer of access to accommodation – either the hostel or via SWEP / Night Shelter / HMO. This male preferred the solitude of his camp.

Some 3 months ago the camp where the male was sleeping was destroyed by a fire, and the understanding is that this fire was not recklessly caused by the male, but by others. Once the camp had been destroyed the male left the camp site and has since become a regular presence in and around Lawes Bridge in Torquay, quite often seen at Asda, or McDonalds. He continues to rough sleep although has on occasions come into provision. The route into homelessness is unknown, although the most significant known competing need is his emotional health. He is not under the care of the mental health services at this time.

Case Study 4 (SB)

Female in her late 20's who is often referred to as 'hard to reach'. This female is a persistent rough sleeper and has been the victim of a domestic abuse relationship recently with a male from out of the area and was known to be heavily involved in the supply of drugs. It is understood that she has previously been involved in abusive relationships. This female is well known within the area and is often challenging to work with as her presentation is aggressive and confrontational. As she is well known there are limited options to accommodate her as many providers will not accommodate her given previous episodes of housing. She continues to struggle with addiction issues and has sporadically engaged with drug and alcohol services.

She has worked well with some female members of the wider team, including RSI, drug and alcohol services. The routes into homelessness are unclear, however, her ability to secure and maintain tenancy are evident. Her aggressive behaviour is often deemed reasons for being unaccommodated. It is unknown if she has family locally but does have a local connection.

Case Study 5 (AT)

Male in his late 20's who is a known persistent rough sleeper in and around Torquay and identified as being within the Target Priority Group cohort. Working with the RSI team. This male is a care leaver and has struggled with addiction and health concerns for some time. He has been rough sleeping on and off within the area for the past few years, he has a local connection to Teignbridge and has on occasion been street sleeping there. This male is in a relationship with a female of similar age, who has also struggled with addiction issues and a history of unstable tenancies. There is a domestic abuse dynamic between the couple, and he has received convictions for assaults towards her.

The male has accessed drug and alcohol services sporadically but has not been able to maintain a prescription for long and has been unable to reach abstinence. The route into homelessness is unclear although there is evidence of an unstable childhood. This male continues to rough sleep in and around the area and has been a very difficult individual to place. He is known to many housing providers including Hostel and as such there have been barriers to accommodating him. He remains street homeless and in relationship with the female – who also continues to street sleep.

Case study 6 (Barry S) (this is a pseudonym)

60-year-old man, known to LSC prior to moving in as he was married to one of our previous residents and would come to visit her here at LSC.

Staff became increasingly concerned for Barry's welfare as his general appearance and mental health appeared to be deteriorating. Barry was referred to Social Services and Tenancy Sustainment by staff at LSC, as there were concerns that he wasn't coping in his flat at the Braddons, Torquay and was now facing eviction there was also a particular concern as he was partially sighted.

Barry was evicted and became homeless on 10 April 22, he was referred into LSC and was prioritised to move into the hostel due to his vulnerability and physical and mental health needs. Barry was assisted to move in one day after the referral. On arrival Barry completed a Needs and health assessment, this enabled staff to get a better insight into his current situation and background.

Barry is ex-military, he had also been an IT specialist, he was a musician and was often seen busking with his guitar in the town centre.

Barry presented as very paranoid believing that people were following him and talking about him, he was convinced that there were people outside his room talking about him in a derogatory manner. His eyesight was poor, and he was wearing dark glasses and using a white stick to walk, he was reluctant to leave his room and isolated himself, he had all the curtains across and would sit in his darkened room. Barry had a medical history of schizophrenia, history of lung cancer, COPD, light sensitivity, heart murmur, arthritis. Barry was allocated a support worker at the hostel to work with him and support him with his Physical and Mental Health needs. He was registered with our G.P service on site. Barry was happy to see the GP and started to see them on a weekly basis initially, he was referred for a 24hr portable ECG, which staff supported him to. He was referred and introduced to Dr Tom Scott-Gatty, psychiatrist, Dr Tom started to do weekly meetings with Terry, in his room at LSC, he commenced Terry on new anti-psychotic drugs and staff started to notice a slight improvement in his presentation. He was less paranoid and was coming out of his room more, engaging with staff.

Barry was referred to the onsite, visiting Dental Nurse from Castle Circus Health Centre, and he was supported to the Dentist by staff to get dentures as he had no teeth. Barry's teeth were made, this had a massive impact on his self-esteem and confidence was growing steadily, he felt he could smile again and also eat a better diet.

Barry requested help to stop smoking due to his COPD he was referred to the Healthy Lifestyle Team, Smoking cessation and he was commenced on Nicotine Replacement Therapy, supported by Clare Heron. Barry gave up smoking and even won a competition for the person that had stopped the longest. This had a significant improvement on his COPD.

Barry was improving socially; he was no longer using his white stick he had pulled his curtains across no longer sitting in a darkened room and was attending more social events at LSC. At the residents Christmas party, he sang on the karaoke, staff and volunteers were so moved by his voice, Martin Harris from Unleashed theatre company persuaded him to join the choir which he did, this seemed like a turning point. Barry's general appearance and demeanour was so improved, he was now, taking pride in his appearance, smartly dressed in a shirt and tie. His confidence had grown, and he was now being asked to attend concerts with the choir and engaging with the community.

Housing Options bid on DHC for Barry, he had a successful bid and was offered a flat in Watcombe. A referral was made to Tenancy Sustainment to support him in his new flat. Staff applied for a bus pass so that he could get about and do his shopping. He was put in touch with Blind Veterans UK for extra support. Staff hired a van and sourced furniture for the flat which they picked up and then helped to move Barry in. He moved into his new flat on 31/03/23. An application was made to welfare support for a cooker, Friends of Factory Row paid for the cooker to be connected and a £300.00 move in package was given to Barry to set up home, staff supported him to get what he needed for his flat and assisted him in setting up utilities.

Barry is now doing well and enjoying his flat and his independence, he is part of Co-Production group and attends regularly. He also volunteers at the hostel assisting with the breakfast club once a week and is a valued member of our team.

Case study 7 :

Male resident, 61 years old, living in the hostel since 11/04/2022. When this resident arrived, his mental health had deteriorated and his eyesight was poor – he was struggling to get around independently and was not engaging with services. Once he moved in, he began to engage, saw the hostel Psychiatrist and received a diagnosis and medication. Engaged with GP services to receive treatment for his eye condition. He was then offered a property with a social landlord which he accepted. Alongside a Household Support Grant, he received a number of donated items and was able to fully furnish his new property. He is now living independently and returns to the hostel to volunteer at the breakfast club every Tuesday.