Coming in from the cold: the Government's strategy on rough sleeping

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Foreword by the Prime Minister

On the eve of the 21st century, it is a scandal that there are still people sleeping rough on our streets. This is not a situation that we can continue to tolerate in a modern and civilised society. That is why, in a report last year by the Social Exclusion Unit, I set the tough but achievable target of reducing rough sleeping in England by at least two thirds by 2002.

The SEU Report recognised the complexity of the problem. It provided a thorough analysis of the causes of rough sleeping and set out the way forward in relation not only to support for rough sleepers but also prevention.

This national strategy builds on the SEU Report and on the progress that has already been made. It has been prepared by the new Rough Sleepers Unit which is developing an integrated approach to tackling rough sleeping. And it sets out specific proposals for meeting the target.

Many of the proposals set out in this strategy will build on and refine the valuable work that has been going on for many years. But some will require radical change.

The Rough Sleepers Unit has taken a long hard look at everything being done to help rough sleepers. It is clear that some things work, and others do not.

In the long term, we can only make a lasting difference on the streets by stopping people from arriving there in the first place. That is why prevention is a key part of this strategy, and why more will be done to address the reasons why particular groups such as careleavers, ex-servicemen and ex-offenders are disproportionately likely to end up on the streets. The strategy also sets out support for new temporary and permanent beds, better help in finding
jobs and a more focused approach to helping people off the streets. Above all, it focuses on how a real difference can be made to the lives of the most vulnerable.

Too many people are still coming onto the streets. And too many people who were sleeping rough five or ten years ago are still out there. That is why we need a new approach, with services to help people come in from the cold, and support to help them rebuild their lives.

Government will provide the tools, and the funding. But we know that this approach will only succeed as part of a genuine partnership between central and local government, the voluntary sector, statutory bodies, businesses, community groups and rough sleepers themselves.

I believe that this strategy sets out a way forward which can deliver our vision a vision of a society where no one needs to sleep in doorways, and where rough sleeping has become a thing of the past.

Tony Blair

Introduction

A top priority for the new Government when it came into office in May 1997 was to offer a fresh chance to the most excluded members of our community. And there is no doubt that among the most vulnerable of these are the people who sleep rough each night on our streets. In recognition of this the Prime Minister asked the Social Exclusion Unit to make its first task a study of rough sleeping. The SEU report, published in July 1998 (Cm 4008), recommended the setting up of the Rough Sleepers Unit, with the target of reducing rough sleeping in England to as near zero as possible, and by at least two thirds, by 2002.

This strategy builds on the analysis and findings of the SEU report, and puts into action its recommendations. It marks a step change in the way Government tackles rough sleeping. The strategy reflects a further six months of discussions and consultations with a wide range of individuals and organisations, including rough sleepers themselves. It delivers a new joined-up approach which, building on the excellent work that the voluntary sector, local authorities and others have begun, aims to develop and focus efforts, to give the key organisations new tools to do their job, and to promote a constructive partnership approach to tackling rough sleeping and its causes. The result will be a better deal for rough sleepers, and better value for the taxpayer.

Background

Since 1990, Government has spent over £250 million through the Rough Sleepers Initiative alone on services to help rough sleepers off the streets. This money has funded outreach and resettlement work, around 1300 hostel places and 3,500 units of permanent accommodation.
There are still, however, around 1600 people sleeping out on the streets of England on any one night. In London alone, where the majority of this money has been spent, there are some 635 people sleeping rough on any one night. A large number of these are part of a steady population of long term rough sleepers who have not been helped effectively by previous initiatives. Therefore a new, braver approach is needed: it is neither realistic nor sufficient simply to rely on increasing the number of hostel beds. We need to do more. We need to change our approach. The balance in the system must be tipped towards the most vulnerable rather than making the streets a fast track for the most able.

In the past, Government has not adequately addressed the reasons why people sleep on the streets, and how to prevent the problem occurring in the first place. Some services have in practice sustained people in a street lifestyle, rather than helping them off the streets. Moreover, daytime street culture has become an increasing problem. Some services funded through previous Rough Sleepers Initiatives, including hostels, daycentres and permanent accommodation, have not been tightly focused on rough sleepers, and places have been taken up by others, such as daytime street users and the wider population. Responsibility for services has often been fragmented between a number of different organisations statutory and voluntary with a wide range of objectives. We have not concentrated enough on long term and sustainable solutions, nor have we been discerning enough in offering help to those who most need it. We have not focused effectively on occupation for people. The result has often been that human beings have fallen through the intended safety net of support.

The Government has given the Rough Sleepers Unit a very clear remit to focus its energies and resources on offering help to rough sleepers, in particular those whom previous initiatives have not succeeded in helping. We believe that people should not in the 21st century have to sleep on the streets, and that the most vulnerable among them need our help, and sometimes specialist support, to give them a lasting solution.

The reasons why people sleep rough are many and complex. But we know\textsuperscript{[1]} that in broad terms that the rough sleeper population comprises:

- 75% who are over 25
- 90% who are male
- between one quarter and one third who have at some time been in local authority care
- 50% who are alcohol reliant
- 20% who are drug users
- 30-50% who have a serious mental health problem
This strategy recognises the complexity of need that we must respond to, and aims to offer rough sleepers options which acknowledge their atypical and frequently chaotic lifestyles. Our long-term objective is to provide services which ensure that sleeping on the streets is never the preferred option.

The key to successful delivery of the strategy will be partnership. At its most basic, this is a partnership between the taxpayer and rough sleepers themselves. But in practical terms, it means partnership between Government and those who are charged with working with rough sleepers, or who have chosen to do so: the statutory agencies, local authorities, the voluntary and volunteer sectors and the wider community such as business and the public at large.

**Six Key Principles**

In developing this strategy, we have had the following six key principles in mind:

**Tackle the root causes of rough sleeping.**
We need to understand what causes people to sleep rough, and prevent it from happening.

**Pursue approaches which help people off the streets, and reject those which sustain a street lifestyle.**
Our aim is to reduce the numbers of rough sleepers, and to do everything in our power to persuade people to come in for help.

**Focus on those most in need.**
We want this strategy to help those whom other initiatives have failed. There is not a bottomless pool of resources, and it is crucial therefore that we target our help on those who are least able to help themselves.

**Never give up on the most vulnerable.**
It is inevitable that some rough sleepers, especially those who have been on the streets for many years, will have difficulty in coming back in. They will need specialist help and support if they are to succeed.

**Help rough sleepers to become active members of the community.**
We need innovative and pragmatic approaches which build self-esteem, bring on talents, and help individuals to become ready for work and occupation away from the streets.

**Be realistic about what we can offer those who are capable of helping themselves.**
We should be using our resources to help the most vulnerable and not to provide a fast track into permanent housing for healthy and able individuals.

**Overall Approach**
Local authorities will continue to be the strategic authority with responsibility for housing and homelessness. They are therefore clearly best placed to think strategically both about preventing and tackling rough sleeping. In many cases through co-ordinated efforts, authorities have achieved a great degree of success in recent years. It is evident that in the vast majority of local authority areas the numbers of rough sleepers are relatively low. The key issue in these areas, therefore, is preventing homelessness whether or not it manifests itself as rough sleeping. However, the Unit will provide leadership and support focusing our attentions very clearly on the areas where rough sleeping is most prevalent and working with the relevant authorities to review and sometimes refocus their strategies for tackling rough sleeping.

At the table below is a list by local authority of the 30 areas in the country with the highest current concentrations of rough sleepers.

| Table 1: Highest concentrations of rough sleepers in England, as at June 1999 |
|---------------------------------|-----|
| Westminster                     | 234 |
| Camden                          | 66  |
| Oxford                          | 52  |
| Lambeth                         | 46  |
| Manchester                      | 44  |
| Birmingham                      | 43  |
| Brighton and Hove                | 43  |
| City of London                  | 36  |
| Bristol                         | 32  |
| Nottingham City                 | 31  |
| Stoke-on-Trent                  | 31  |
| Liverpool                       | 30  |
| Kensington                      | 28  |
Central London has always seen higher levels of rough sleeping than elsewhere in England, and, in view of that, our strategy proposes a more interventionist approach in the centre of the capital than outside and we will be working closely with partners to deliver the target. The Government is aware of the pressures on some central London Boroughs in relation to their statutory homeless duties to families and vulnerable single people and also in relation to asylum seekers. This has been taken into account within the strategy.
Outside London we will initially want to review the strategies of the 10-12 areas with the most severe problems. By definition this group will not be constant and we will keep it under review as the numbers change over time. We are clear that successful local strategies for tackling rough sleeping problems are the key to bringing numbers down in high concentration areas and that simply providing additional resources to an area is not always the right answer: effective and co-ordinated action by key partners is essential.

We will be working through local authorities outside London to adopt some of the approaches we are proposing for the centre of the capital. In particular we will encourage greater integration at the local level of the voluntary and statutory sector efforts, so that those efforts are fully focused on rough sleeping and achieve a more co-ordinated, better targeted use of resources.

Key Proposals for Change

A: To make more bedspaces available for rough sleepers in London, with the right sort of help for those who need it most, especially the most challenging individuals who have found it very difficult to get help through previous initiatives.

Our starting point in relation to accommodation is that, while we clearly need to ensure that there are more bedspaces available to rough sleepers in central London, we must be more imaginative about how we address rough sleepers’ needs. The strategy aims to look more discerningly at what those needs are and to create more flexible options for people coming off the streets. If an individual essentially needs to re-establish home relationships, offering them a hostel bed or a flat may not be the solution.

We are spending new money on capital investment in bedspaces, but are also looking closely at what we have funded in the past and at how we can make better use of existing resources. We need to be sure that the new bedspaces made available are focused on those in most need on the streets and not people who are more able to find their own solutions. This includes ringfencing provision specifically for rough sleepers, creating new bedspaces where necessary and possible. It also includes work with other funders in supporting schemes (such as rent deposit schemes) to help less vulnerable people move out of hostels, and into other accommodation, so as to free up valuable hostel beds. We are working closely with London Borough Grants and the Housing Corporation to ensure a focused and coherent approach to future funding and provision.

Accommodation will be provided on 3 levels:

- **direct access hostels and shelters**, the first port of call for many on leaving the streets and a focus for assessment of people’s needs;
- **specialist hostels and special supported schemes**, designed to meet specific and higher or multiple support needs; and

- **permanent move on accommodation**, into which people can move when they are ready to sustain a tenancy, with tenancy support if necessary.

In London our aim is to fund over 850 additional hostel bedspaces for rough sleepers over the next 18 months to 2 years. We are also providing for additional specialist help which will address the particular needs of those rough sleepers with substance abuse and mental health problems. The additional accommodation will include short term "rolling" shelters that will provide around 120 bedspaces of basic accommodation throughout the year. These "rolling shelters" will build on the most constructive elements of the winter shelters and, we anticipate, will eventually replace them.

A further 1000 new housing association homes will be made available in London during the life of the Unit. Many of these are already in the pipeline and the focus is on single bedspace units designated for this client group. These will be targeted on people who have come either from the street or via the special supported hostels.

In addition, across the country over 4,000 bedspaces formerly funded by the DSS will be brought more directly into use for those living on the streets. This accommodation is a mix of direct access hostels and supported housing. The Unit is working with providers to ensure that maximum use is made of this pool of accommodation for housing rough sleepers. We are also working with London Borough Grants to make an additional 250 high support hostel bedspaces available for rough sleepers. We will do this by ensuring that all existing residents who are ready to move on have access to appropriate alternatives.

We must ensure that accommodation funded by the taxpayer for rough sleepers goes to rough sleepers, focusing on the most vulnerable, and that those moving into permanent accommodation are ready and able to deal with independent living and supported to do so. We will therefore put in place more rigorous gatekeeping systems, to ensure that both hostel vacancies and permanent tenancies go to those who need them most, who are ready to benefit from having them and who can sustain them. And we will be introducing new arrangements to test whether individuals are ready to move on to independent living.

The table below shows the profile of accommodation that will be funded by the Unit:

<table>
<thead>
<tr>
<th></th>
<th>Existing</th>
<th>Additional</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rolling Shelters</td>
<td>0</td>
<td>120</td>
<td>120</td>
</tr>
<tr>
<td>Hostels</td>
<td>270</td>
<td>550</td>
<td>820</td>
</tr>
</tbody>
</table>
**B:** To develop a focused, more targeted approach to street work, so as to give priority to helping people off the streets; to ensure clear lines of responsibility and accountability for those working with rough sleepers; and to ensure that we are not, in seeking to help, reinforcing street lifestyles rather than providing opportunities for ending them.

The SEU report made clear that a more strategic approach, with more focus and better co-ordination, was needed. We will from April 2000 fund a wholly new approach to street work in London, building on the experiences of smaller scale projects in Victoria and Savoy Place. We will fund a small number of ‘Contact and Assessment Teams’ (CATs) to take responsibility for discrete and limited geographical areas, where we have the highest concentrations of rough sleepers. They will be in the driving seat for managing the change to empty doorways.

Outside the central London area we will expect daycentres to take responsibility for their own geographical areas, adopting a ‘Contact and Assessment Approach’, helping people off the streets and into centres to receive the help they need. This same emphasis on helping people to come inside for help will be adopted in all areas where the Government is currently funding outreach work and will be actively promoted as part of the new approach.

Learning from the success of the Savoy Place pilot in central London we envisage that each CAT will be the responsibility of a single agency, through which Government funding will be channelled. Our aim is that they will bring together the full range of necessary experience and expertise. We will want them to encompass the work of different disciplines, for example dealing with young people, mental health and other specialist forms of care, treatment and support.

It will be important that the CATs take a robust, positive and discerning approach in persuading people to accept help. We will ensure that the teams have the tools they need to help people in flexible funding, exclusive referral rights to hostel accommodation, access to shelter beds and 24 hour facilities, priority access to specialist provision including mental health, drug and alcohol treatment, help with family mediation and returning to their home area.

**C:** To provide services when rough sleepers need them most.
Rough sleepers are those who sleep on the streets from very late at night to the early hours i.e. from midnight to 5 or 6 a.m. It will be crucial to the success of the strategy that services in all high concentration areas are clearly aimed at helping rough sleepers to come inside. It is likely they will be more receptive to offers of help overnight. It is anticipated that all services to rough sleepers must focus effort on the most effective ways of helping people in, once inside assistance to the individual can tackle some of the underlying causes of their problems.

Experience across the country has shown that some of the most effective outreach work can be done both in the very early hours of the morning as rough sleepers are waking up after a night on the streets or very late at night as they are going to sleep. We will in central London be funding daycentres via the Contact and Assessment Approach to become more responsible for rough sleepers in their areas.

Some rough sleepers in central London want and need, in the short term at least, somewhere to go that makes relatively few demands on them but provides them with shelter and support, when other services are not open. This is a gap in present provision. As a result, some of the most entrenched rough sleepers effectively have nowhere to go to begin the process of coming off the streets. We are exploring the options for a new nightcentre in central London, including joint funding with other organisations, and business sponsorship. This new resource will help both the CAT teams and the police, whose options for helping rough sleepers are at present limited by the lack of a free facility of this kind. The nightcentre will also provide a focus for public help and volunteer effort.

Also, as already mentioned, we will be building on the most successful elements of winter shelters, to establish in central London, basic, safe shelters, with the minimum necessary rules and constraints. These should be able to deal with people who are under the influence of drugs and alcohol. Indeed, we would wish to see, in every area with a high number of rough sleepers the facility to be able to offer some help to rough sleepers, whatever their needs, when they need it most.

D: To help those in most need, such as those with mental illnesses, or who misuse drugs and alcohol.

It is quite clear that the complex mental and physical health needs of those on the streets are not currently being met. Addressing these needs is central to helping people to come inside, and we are committed to doing that.

For those rough sleepers with drugs, alcohol or mental health problems, or multiple needs, we will be funding 60 new permanent specialist workers to help rough sleepers at all stages during their move off the streets from CATs and night and day centres, through to hostels and tenancy sustainment teams. We know how successful specialist workers are both in helping people day to day and in providing a bridge back into mainstream services.
The level of drug misuse on the streets is one of our toughest challenges. But the Unit, in partnership with the UK Anti Drugs Co-ordination Unit, is committed to tackling it. We are also working with local health authorities to aid access to prescribing services, and with hostel providers to enable access to beds for continuing drug users. We will be working together with the UKADCU to develop a new assessment scheme for chaotic rough sleepers with drug misuse problems who are in crisis, by October 2000.

We are also concerned about people with alcohol problems, and would like in central London a day centre or other facility where people can drink inside, an approach which has been used successfully in other parts of the country. It must be better to have rough sleepers drinking inside where they can get help, rather than out on the street, with no prospect of reaching them. And to build on this, we will be funding greater provision of "home" detox in hostels delivered by GPs.

There are people on the streets with severe and enduring mental illness. There should be no reason for someone who is severely mentally ill to be out on the streets. We will be working with the NHS Executive, social services departments and other health partners to ensure that people sleeping rough who have severe mental illness get the help and treatment they need. As a first step some members of Homeless Mentally Ill Initiative teams in London will be integrated into the contact and assessment teams.

Sometimes rough sleepers are either in dire situations or are extremely unwell and they require crisis intervention. We will, therefore, pilot an emergency special needs response team to bring together the staff, resources and powers of the statutory bodies responsible for rough sleepers with acute medical problems and mental illness on the streets. We know we are currently failing these people and that we urgently need to address their problems. We are working with local authorities and health authorities to develop the pilot team.

Primary Care Groups have a duty to ensure that rough sleepers have equal access to primary health care as the rest of the population and must incorporate the needs of rough sleepers into their planning. In addition we will ensure that the key daycentres and the nightcentre in London and all other high concentration areas of the country have access to GPs and on site nursing facilities.

NHS Direct, a 24 hour nurse-led information and advice service, should also assist in improving access to health services for rough sleepers. There is currently a pilot site in the Lambeth, Southwark and Lewisham health authority area, which, since the beginning of November, has had two freephone access points for homeless people in the North Lambeth day centre and at the Broadway Project, Borough. The results of the pilot will be scrutinised carefully to see if it needs to be extended to other facilities for homeless people.

**E: To ensure a continuum of care, so that there is a clear route from the streets to a settled lifestyle, with the right number of organisations and individuals involved.**
The lack of focus and co-ordination on the streets is often mirrored in the current resettlement process. Our aim will be to streamline the services we provide for rough sleepers. A major advantage of the multi-disciplinary, focused contact and assessment approach is the scope it will give for continuity of care and assessment once a rough sleeper has accepted help and come inside.

We envisage that the CATs will have a continuing role in the move-on process, and that they will be responsible for referring people on to permanent accommodation. They will also take a continuing interest in their former clients, making periodic checks on their progress towards a permanent tenancy. We will be putting in place a new integrated information system that will monitor progress made with rough sleepers, bringing together information about people and accommodation. This will assist key delivery organisations in tracking their success with rough sleepers as they move from the streets to a permanent home, allowing them to ensure that they are getting the help and support they need. We also need to know what situation people were in prior to sleeping rough to help implement our prevention agenda.

Some former rough sleepers moving on to permanent accommodation have special and individual support needs. Experience shows that we have not in the past got this right.

We know that many former rough sleepers in permanent housing are still using the street during the day, sustaining a street lifestyle.

DETR currently gives over £3 million of funding to support and resettlement services for former rough sleepers. The Unit, the voluntary sector and housing associations are all agreed however that this is not making the impact we need. A new approach to tenancy sustainment is needed that gives support flexibly to people, and concentrates on occupation away from the streets.

Tenancy sustainment services in London will be organised geographically, with an individual agency responsible for each area of the city. We have set ourselves the target of achieving this by July 2000. We will establish six Tenancy Sustainment Teams to work in partnership with other organisations. We will review resettlement services in areas outside London. And we will be looking separately at the challenging issue of how to provide people with the occupation they need to help them sustain a lifestyle away from the streets.

**F: To provide opportunities for meaningful occupation, to help give people the self-esteem and lifeskills needed to sustain a lifestyle away from the streets.**

Years of working with rough sleepers has shown us that resettlement support alone is not enough to help people back into mainstream society. We need to find ways to help people build self-esteem, develop their skills, and reconnect into social networks away from the streets.
A key objective of all strands of provision will be to encourage rough sleepers to find daytime occupation, to help people find and sustain a settled lifestyle. Our expectation is that immediately on moving into a permanent home, a former rough sleeper will have taken up appropriate training, education, volunteering, or some form of meaningful occupation to help them adjust to their new lifestyle. We hope that many will be in employment shortly after they move into permanent accommodation and certainly within 12-18 months. We will be developing a range of schemes for providing meaningful occupation for rough sleepers at all stages after their move from the streets, both to develop life and work skills, and to avoid the loneliness and boredom that can sometimes lead them back to the streets.

For many former rough sleepers, the ultimate objective will be a return to paid employment. But we know that many rough sleepers are likely to need pre-vocational training covering basic lifeskills, literacy and numeracy and personal motivation before they can undertake any form of vocational training. Those suffering from mental illness, drug or alcohol problems need individually tailored activity to assist their rehabilitation. We are piloting some approaches to this as part of the current winter shelter programme, including lifeskills, creative writing, art and photography classes. We are also working closely with the Department for Education and Employment (DfEE) on three pilot projects aimed at meeting the pre-vocational needs of rough sleepers through three different models professional mentoring; peer mentoring; and pre-vocational training courses. In addition DfEE and the Employment Service have relaxed the criteria for entry to the New Deal by allowing rough sleepers immediate access.

Many people currently give their time and money to help rough sleepers, and we very much hope that they will ensure that in future they do so in a way which supports and reinforces our aim of bringing people in. We will be encouraging more members of the public to volunteer to give their time to former rough sleepers, through befriending and peer mentoring schemes. A number of voluntary organisations are already piloting such schemes, and organisations such as Business in the Community and the Prince’s Trust are working to engage the energies, experience and resources of the business community in this area.

Several positive giving schemes are operating around the country. These provide a way for the public to ensure that the money they give goes to help rough sleepers. We will review these schemes with a view to establishing good practice. We are also working with the Charity Commission to promote its Safer Giving Campaign launched in early December which establishes good practice for the public when they donate to charity.

We are very keen to explore the possibility of new social businesses, aimed specifically at providing employment opportunities for rough sleepers and former rough sleepers and are working with a number of organisations, including the Big Issue and Business Action on Homelessness, to this end.
G: To improve the incentives to come inside, both by offering provision which meets people's specific needs and by refocusing services away from those that sustain a street lifestyle.

Many of the actions flowing from the strategy will create options for rough sleepers to come inside on their terms. Therefore there will be from next April a greater incentive for long term rough sleepers to review their lifestyles and take the opportunity of a more settled life.

By the same token, the Government believes that, if their needs can be provided through one or other of the accommodation, treatment or support routes that we are funding, rough sleepers themselves have a responsibility to come in. Once we are satisfied that realistic alternatives are readily available, we and the public at large are entitled to expect those working on the streets to seek to persuade people to take advantage of them. This includes the police, who sometimes have not been able to use their powers because of a lack of options to move rough sleepers on to.

We will be asking services to review whether their arrangements for taking help to the streets sustain rough sleeping rather than encouraging people to come inside. If soup and clothing runs are still perceived to be needed when this strategy starts to bite, they need to be properly co-ordinated so as to focus on areas of real need. We will fund a project to look at this difficult area, as a first step to achieving a more strategic approach to help those on the streets. We hope that those volunteers who have helped rough sleepers in this way will find other ways of doing so, perhaps by volunteering to help at day or night projects, or in tenancy support and life skills work. We will fund a voluntary organisation to develop good practice in how the public can help rough sleepers.

Making appropriate benefits available to those coming in off the streets will be crucial to re-balancing the incentives, making life off the streets more attractive. The Westminster Housing Benefit Verification Pilot has been successful. Once this has been fully evaluated DSS will consider the possibility of rolling it out nationally. We have also extended this pilot to examine possible ways of simplifying the initial Housing Benefit claim for those in direct access hostels.

It is crucial that we make it as simple as possible for rough sleepers, who often have chaotic lifestyles, to access the benefits system. In principle all rough sleepers are entitled to benefits but many are too overwhelmed by the system to take up the help. The Benefits Agency, in conjunction with the Unit and others, are therefore proposing the establishment of a unique one stop shop to deal with benefits claims for rough sleepers in central London. This will be effective in both helping people off the streets and in preventing future homelessness among former rough sleepers. It will take a casework approach to each claimant, meaning that a rough sleeper will be able to deal with a single person for all their benefits issues, including Housing Benefit, the Social Fund, Jobseekers Allowance and Income Support. The intention is that the caseworker will make links with the other relevant statutory and voluntary agencies...
to smooth the process of claiming Housing Benefit. The Unit and DSS will continue to work together and with others to develop ways of reducing the numbers of rough sleepers.

**H: To put in place measures to prevent rough sleeping, so that new people do not see the streets as the only option. Prevention is the only means of ensuring a lasting and sustainable end to the problem of rough sleeping.**

While the immediate measure of the Unit's impact will be the progress we make in reducing the numbers of people sleeping rough by 2002, our fundamental aim is to sustain that reduction and prevent vulnerable people from arriving on the streets in the first place. We are approaching this from two perspectives firstly, working across Whitehall to put in place the measures needed to make a critical difference and, secondly, putting in place practical projects that will make an immediate difference.

For the long term, efforts must be targeted on those groups that we know are particularly vulnerable to homelessness and to rough sleeping: young people leaving care; people leaving prison; people who have experienced family breakdown; and people leaving the armed forces. There is a central role here for Government, both in what we can achieve directly, and what we can achieve through the work of others, especially local authorities. This is a crucial challenge for us all. We must ensure that those who have been in our care as children, as prisoners or as servicemen, are properly equipped for and supported towards independent living. Rising to this challenge must be a major component not only of our work to tackle rough sleeping, but also our efforts to deal with social exclusion more widely.

Work is already underway in several Government departments to meet this challenge.

The Government's Children (Leaving) Care Bill introduced in the House of Lords in November will improve the arrangements for young people living in and leaving care and is based on the proposals set out in the Department of Health's consultation paper "Me, Survive, Out There?". £375 million is being made available to local authorities over 3 years as part of the Quality Protects programme, one of the aims of which is to increase the support offered to care leavers and to prevent the inappropriate discharge from care of 16 and 17 year olds. This programme will be backed up by new legislation which is intended to ensure that local authorities assess and meet the needs of 16 and 17 year olds living in and leaving care, including ensuring that they are in suitable accommodation. Local authorities will also have to oversee and support the transition from care to independence up to the age of 21, and up to the age of 24 if still receiving help from the local authority with education and training.

More immediately, the Department of Health is undertaking jointly with the Rough Sleepers Unit, an audit of careleaving packages in all London boroughs. We want local authorities across the country to move quickly to improve their careleaving service, building on the current best practice. The audit, which is due to report by April 2000, will be a method of
getting to grips with the authorities in London who are doing it less well and thereby helping to improve practice both in London. The good practice will be disseminated.

The Unit, in partnership with the **Prison and Probation services**, has commissioned a pilot project to look at what is or is not being done to help prisoners prior to release, that will reduce their likelihood of sleeping rough on release from custody. The study is taking place in three institutions Wandsworth, Brixton and Feltham. The first interim results are due by the end of the year, but we can already see that support is not always effective and that there are examples of both good and poor practice. As a result of the project we will be urgently examining within the prison service more effective ways of providing help to prisoners at the point of release. The Prison Service is working on key performance indicators for the success of resettlement and expects to have interim targets in place by April 2001. The Benefits Agency will lay more emphasis on benefits advice for prisoners and ex-prisoners and we will be monitoring its effect.

In conjunction with Centrepoint, who specialise in work with homeless young people, **DfEE** are about to issue guidance to schools on preventing homelessness among vulnerable young people, and will be monitoring its effect. But, important as this is, we will need to do more to prevent rough sleeping amongst the most vulnerable. We know that children respond well to the advice and help of people who have first hand experience of their problems and have overcome them. We therefore support work being done by Centrepoint and the Depaul Trust to pilot peer education projects in 3 areas. These will be in operation from April 2000.

And as part of their "policies for people" initiative, the **Ministry of Defence** are working to reduce the vulnerability of current service personnel to future homelessness and rough sleeping, through initiatives to develop better life and work skills to help them resettle following discharge. The Unit and the MoD are also investigating the role of the benevolent organisations in helping existing rough sleepers who have been in the services reconnect back into their social networks.

**DETR** are working on the prevention of rough sleeping at the local level. The 1996 Housing Act promotes the prevention of homelessness by local authorities through advice and assistance. Early in the new year DETR will issue revised statutory guidance to local authorities which will include guidance on the development of local single homelessness strategies. The needs and the solutions to address them will vary from area to area. But they are likely to include:

**Rent deposit schemes.** We know that giving people access to the security of a rent deposit or bond scheme can be extremely successful in preventing homelessness. These schemes provide a safety net for both landlord and tenant, and encourage landlords to take on tenants who have formerly been rough sleepers. We will be asking every local authority in England to
consider putting in place a rent deposit or bond scheme, and in London the Unit will work with London Borough Grants to support schemes across the capital.

'Nightstop' schemes have been very successful, particularly in rural areas, in giving young people a short breathing space, so that they can consider their options in their own time, without leaving their local area. Such schemes provide a real alternative to homelessness. They have a crucial role to play in giving young people an opportunity to take stock without gaining the label "homeless" and we will want to encourage more schemes of this nature.

Returning home schemes. We are keen to give those who need it a way to reconnect with somewhere they consider to be home. Family mediation may, in some cases, be a more effective response to an individual's homelessness than a hostel bed. While for some this will never be a solution, it must always be an option and we need to ensure that the advice they need is there. There is an excellent opportunity here for volunteers to help people reconnect to family or social networks and we would be willing to consider proposals for funding.

We must give people the tools to help themselves and to help each other. The Unit is therefore commissioning a feasibility study into mutual aid schemes, which we believe have the potential to make an impact not only on rough sleeping, but on a whole range of areas which involve people who are socially excluded.

Bidding and Resources

The Government has given the Rough Sleepers Unit a budget of £160 million to carry out its work and implement this strategy in London. Outside London the Homelessness Action Programme is £34 million of which £8 million remains to be allocated. This money will be channelled into high concentration areas of rough sleeping outside London and into new proposals for prevention and meaningful occupation.

It will be a key principle of our approach to funding that we will support proposals which build on success in tackling rough sleeping. We will shortly be issuing a document explaining how we intend to take forward and finance the various initiatives which will deliver this strategy. It will include arrangements for evaluation and monitoring. In some cases we will be asking voluntary organisations to tender to run projects; in others we will invite bids in a more conventional way. We will, both in the case of tendered projects and straightforward project funding, be developing new approaches to contracting, building on our experience in letting the Savoy Place project and in this year’s winter shelter programme. We will also be setting aside an initial £4 million as a Special Innovation Fund to promote good practice in prevention and to develop approaches to meaningful occupation.

Conclusion
Rough sleeping is at the sharp end of social exclusion. It affects a relatively small number of people, but those people are often amongst the most vulnerable. We believe that by working in a real partnership across the whole community we will be able to meet our target of reducing rough sleeping in England by at least two thirds by 2002. This is a target to which the overwhelming majority of the public have given their support.

Over the years a great deal of money has been spent, many hostels have been built, and many permanent homes are now available to former rough sleepers and single homeless people. And yet there remains a small but steady number of people out on the streets every night. This must change. We cannot allow the problem to be ignored. So, working closely with our partners we must look at everything we do, scrutinising it carefully, and, where we have to, making the real and lasting changes that will ensure that we can deliver. This will not always be easy and will require courage. But, meeting our target is not just about numbers it is about making a difference to people’s lives. The strategy outlines action that will help those currently out on the streets exposed to danger and ill-health, and it puts in place measures to stop new groups becoming tomorrow’s rough sleepers. We must work together so that we can be proud of living in a country that does not have rough sleepers on the streets at night.

1: Geoffrey Randall 'Rough Sleeping, A Review of the Research,' DETR, April 1998