



# **East Sussex RSI : 2020 - 2021**

## **Covid Rough Sleeping Delivery**

# Pre-Covid - Rough Sleeping Provision

The 5x East Sussex local authorities commissioned

- RSI support for verified rough sleepers with complex needs
- RRP support for individuals at risk of rough sleeping with low-moderate needs

Delivery partners have staff seconded within the service:

- SPFT Mental Health Trust
- ESHT Health Trust
- CCG Primary Care
- ESCC Adult Social Care
- CGL Substance Dependence Services
- NPS Probation Services

Additional pathways are in place with Sussex Police and the DWP

- Each LA fund a dedicated Housing Options Specialist to link in with the 2 services and to ensure statutory homelessness duties have been met
- Collaborative Housing bids to ensure uniformity of delivery and holistic expansion across county

# Pre-Covid – Service model

Services are designed to improve rough sleepers ability to access

- Statutory support services
- Temporary accommodation
- Long term housing solutions

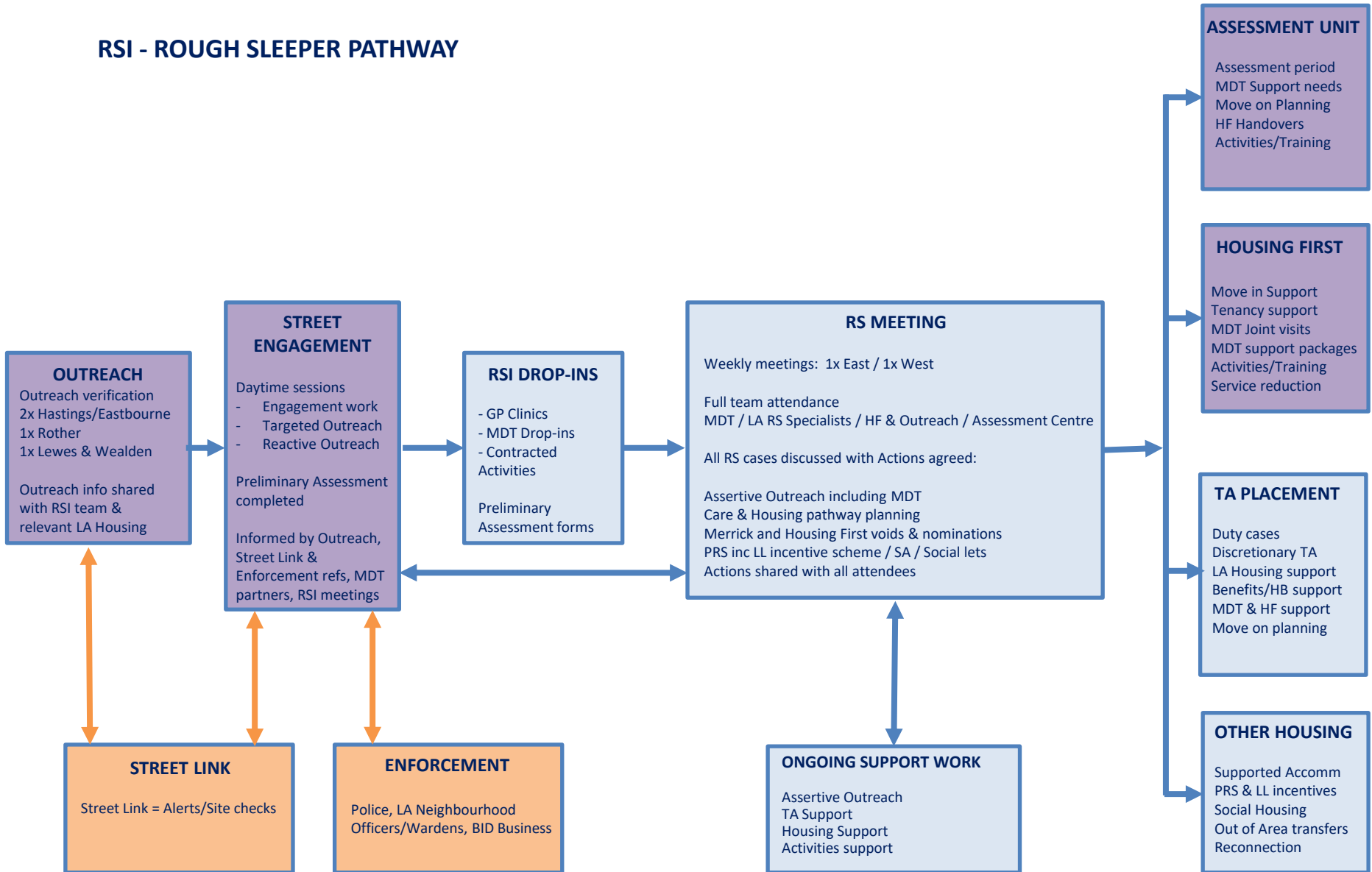
The RSI is countywide with an East/West delivery model

- Outreach & Housing First teams on each side of the county
- Multi-disciplinary (MDT) covering the county
- 12 bed Assessment Unit in St Leonards
- Housing First flats on either side of the county

**Pre-Covid (Feb 2020) there were**

- 100 former rough sleepers across county in Temporary Accommodation
- 24 in specialist accommodation (Assessment Unit & Housing First flats)

# RSI - ROUGH SLEEPER PATHWAY



# Covid 'Everyone In' – Challenges

March 2020 government issued the 'Everyone In' directive

## Challenges

- Staff service delivery. Multi-agency agreements required
- PPE shortage. ESCC ordering system / private ordering
- Shortage of temporary accommodation, particularly for higher risk groups
- Mix of high need clients and families (observation of Covid guidance)
- Local authorities previously reliant of Out of Area placements to meet needs
- Capacity gap with substance dependence and mental health needs support
- Trauma element (impact if having to stay in / accommodation break down)
- Changes in terms of Winter Night Shelter provision (were not allowed to open)
- Food provision (day centre closures / Public Health requests re: lockdown)
- Access to primary health care e.g. tests and vaccinations

# Covid 'Everyone In' – How addressed

- **'Everyone in' mobilisation and delivery**

Staff & organisation consent / PPE / Intensive Outreach / Covid safety on visits

Triaging high risk cases (Nurse, Psychiatric Nurse, Substance Dependence)

CCG partnership with Care & Protect Service

Voluntary Sector meal provision / HUB support pack deliveries

- **Recognition that a Public Health issue**

Public Health funding for additional roles (mental health & substance dependence)

Diversionary activities and future training / employability schemes

- **Homeless Cell**

Weekly meetings with key service leads (Housing, ASC, Public Health, CCG)

Communication and collective action plans

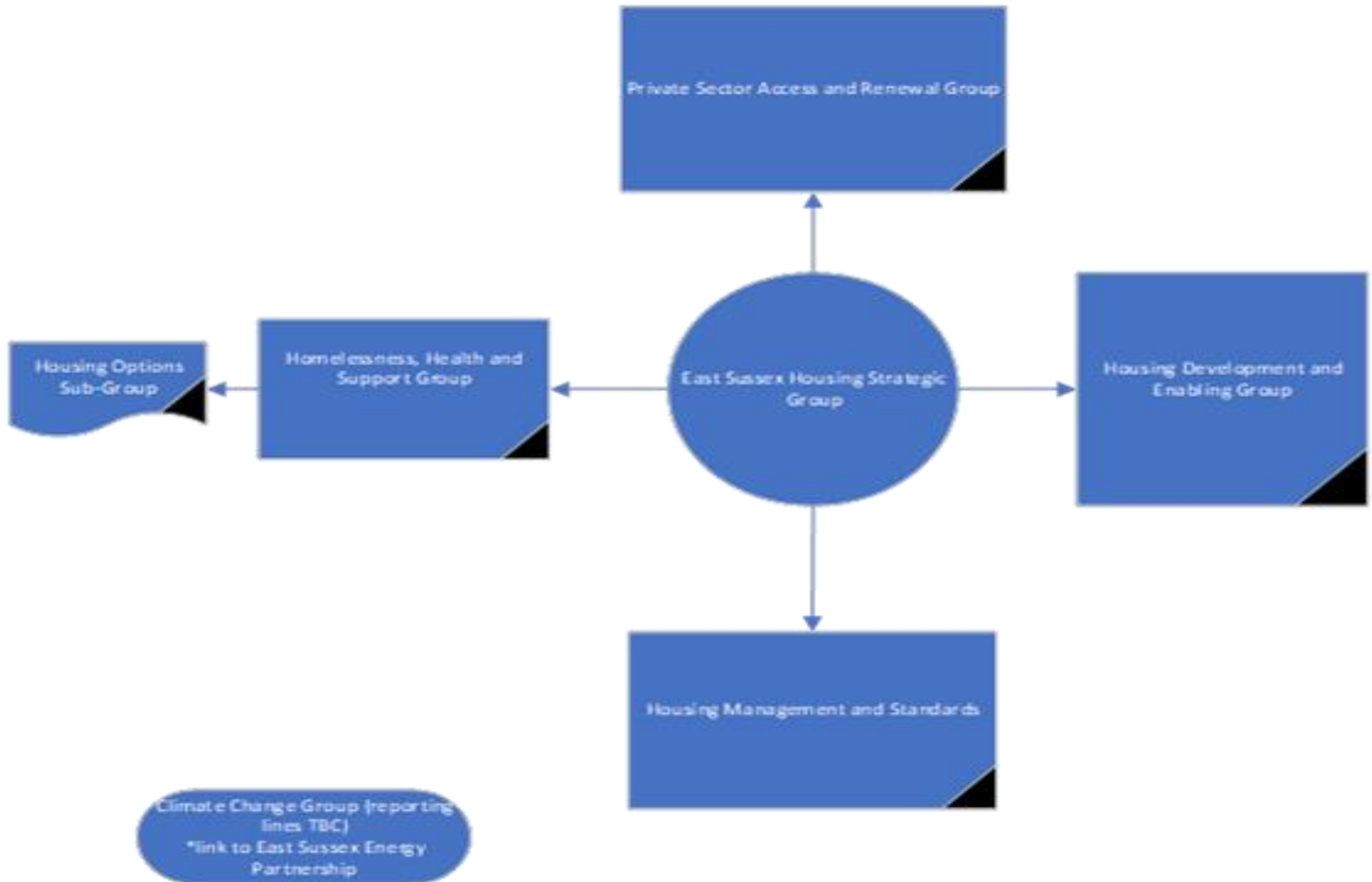
- **NSAP Temporary Accommodation, Capital and Revenue funding streams**

MHCLG to funding to improve temporary accommodation and move on offers

# Post Covid – Housing legacy

- **Restructuring countywide partnerships**  
Joint homelessness strategy (cross county)  
ESHOG restructure inc subgroup 'Homelessness, Health & Support Group'
- **Multi-disciplinary Team expansion**  
Exploring long term funding of posts with county commissioners  
Expanding MDT approach to wider homeless need
- **Exploring funding collaborative funding opportunities**  
Focus to enable better prevention services  
Domestic Violence and Respite Rooms  
Prison release: Trailblazers / LLIF / Prison based Housing Options role  
LGA Peer Support. NSAP bid - HBC Lead authority (Michael Courts) attended
- **Collaborative working cross sector**  
Homeless & Street Community meetings / ADDER / IOM  
Supported Accommodation pathways and link to complex homelessness  
CCG investment in primary care delivery  
Public Health involvement across a range of support – ESTAR / RSI / COMF

# ESHOG (EAST SUSSEX HOUSING GROUP) – Restructure



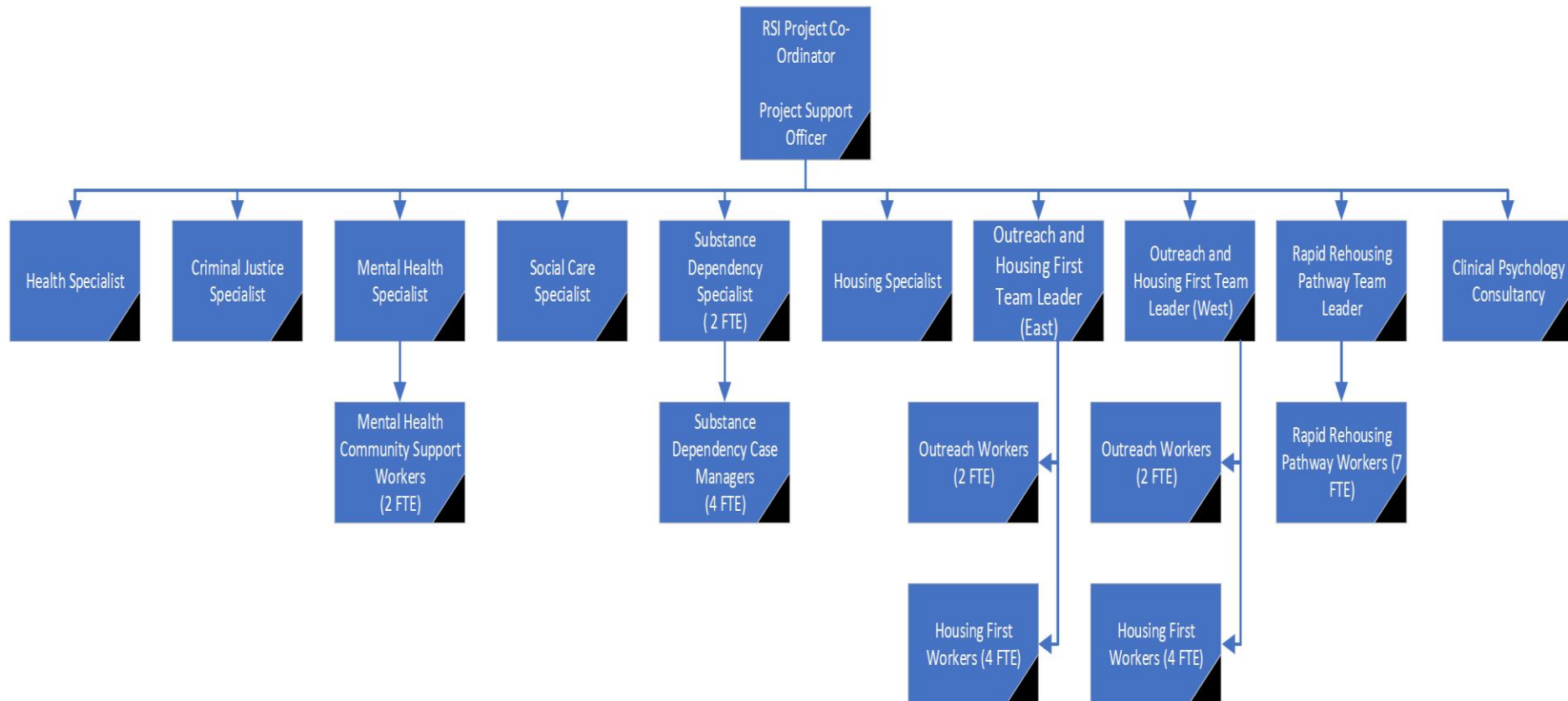


# RSI – Multidisciplinary Team

18 Multi-disciplinary team = Housing x1 / ASC x1 / MH x5 / SMS x6 / Nurses x2 / Probation x2

14 Outreach & Housing Officers = Teams 7x each side

6 Assessment Unit staff = daytime/evening shifts



# Post Covid – Ongoing challenges

- **Temporary Accommodation & Specialist Housing numbers**

Since 23/03/2020 – 491 placed in TA (107 statutory / 384 discretionary)

Currently - 195 in accommodation (38 statutory / 157 discretionary)

36 in specialist accommodation (Assessment Unit & Housing First flats)

- **Resources**

Funding to continue temporary accommodation placements

Uncertain funding for support provision – Outreach, Housing First and MDT

- **Shortage of move on options**

Difficulties securing NSAP properties due to market

Difficulties with PRS and thresholds (deposits / security / availability)

Specialist accommodation e.g. supported accommodation / transitional models

- **Bids that create duplication**

Cross service bids create duplicate provision

Joint bids and longer term funding for cross county cohesive, strategic planning

- **Communication**

Public perception - To raise awareness of services and best ways to support

Cross sector working – Improve links and partnerships with voluntary sector

# RSI – Current and Future developments

- **Current numbers**

RSI has supported 439 individuals since Oct 2019. Current caseload is 138

RRP has worked with 474 individuals since Oct 2019. Current caseload is 120

- **Mobile Health Unit and GP Provision**

Mobile Health Unit being built to cover the county (Public Health funded)

CCG exploring East / West long term provision with centre/mobile hours

- **Covid Vaccinations**

RSI supporting CCG programme with 2x Care & Protect federations

- **CGL Temporary & Street Community Caseworkers**

CGL caseworkers supporting TA in order to prevent evictions

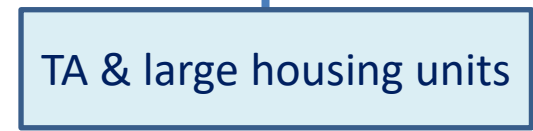
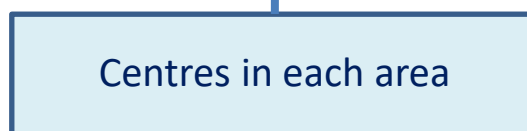
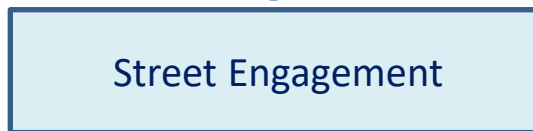
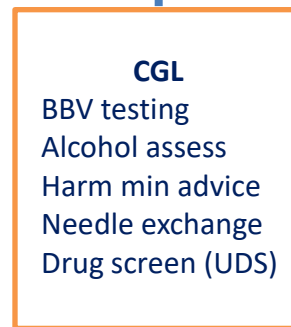
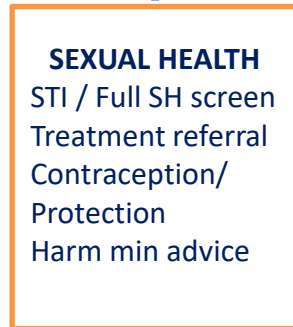
- **Clinical Psychology & Trauma Informed Care**

Trauma development within the Assessment Unit and across the service

Clinical Psychologist supporting development, training and case consults

Dedicated MH/Dual diagnosis Practitioner for Assessment Unit proposed

# MOBILE HEALTH UNIT



## RSI DENTAL SERVICES

### **DENTAID (Public Health funded)**

- Fully equipped dental surgery
- Dental checks
- Oral cancer checks
- Fillings
- Extractions
- Dentures

Park at designated sites  
Room for interviews provided  
Data stored internally & by provider

#### **EASTBOURNE**

Hosted Salvation Army  
x2 pmnth

#### **HASTINGS**

Hosted Seaview Centre  
x1 pmnth