# **GMHAN Covid Events Log**

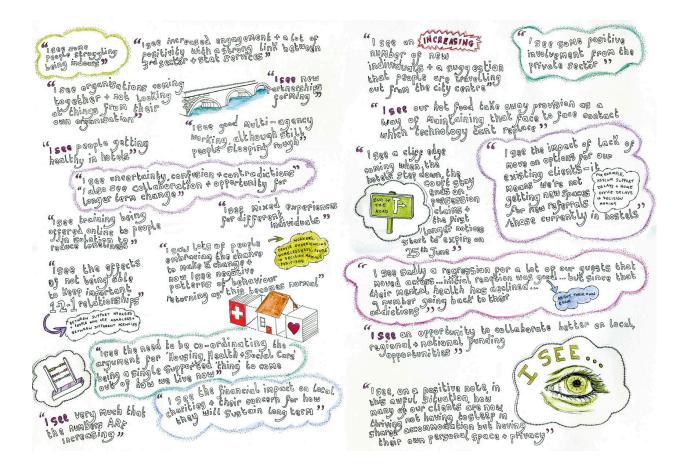
The following are full (raw) notes from the GMHAN events on 20th & 21st May, alongside relevant notes from the GM Programme Board and GMHAN joint meeting on 1st June.

## I see...

- I see some people struggling with being inside
- I see increased engagement here in Tameside and a lot of positivity with a strong link between third sector and stat services with our RSI team.
- I see new partnerships forming
- I see organisations coming together and not looking at things from their own organisation
- I see people getting healthy in the hotels
- I see good multi agency working although still people sleeping rough
- I see uncertainty, confusion and contradiction. I also see collaboration, and opportunity for longer term change
- I see mixed experiences for different individuals
- I see training being offered on-line to people in isolation to reduce loneliness great idea to link in with
- I saw lots of people (workers, people experiencing homelessness, people in decision making positions)
   embracing the chance to make a change, and now I see negative patterns of behaviour returning as this becomes normal
- I see the affects of not being able to keep important 121 relationships (between support workers and people who are homeless, and between diff agencies)
- I see lots of people volunteering to try and do good locally but the system struggling to use them
- I see the need to be co-ordinating the argument for 'Housing, Health, and Social Care' being a single supported 'thing' to come out of how we live now
- I see very much that the numbers ARE increasing.
- I see the financial impact on local charities and their concern for how they will sustain longer-term
- From private sector perspective, I seems hard to find out how we could help and support. How can our skills help in the current environment, whew e might have normally done some vounteering and fundraising.
- I see the impact of lack of move on options for our existing clients (eg asylum support delays /Home Office delays in decision making)- means we're not getting new spaces available for new referrals / those currently in hostels
- I see an increasing number of new individuals and a suggestion that people are travelling out from the city centre into Bury
- I see our hot food take away provision as a way of maintaining that "face to face" contact which technology can't replace
- RBH have now signed up 7 residents into social housing with a complete support package we used a panel
  to choose which residents as we want these clients to succeed as we did not want to set the up to fail...this
  is in response to Neil from Narrowgate concern around tenancy sustainability
- These 7 clients were moved on from hostel accommodation which then freed up places at the hostel to move on from B&B
- I see some positive involvement from the private sector
- I see a cliff edge coming when the hotels step down, the court stay ends on possession claims and the first longer notices start to expire on 25 June.

- I see sadly a regression for a lot of our guests that moved across. The initial reaction was good as they got their own room, but since that their mental health has declined substantially with a number going back to their addictions.
- I see an opportunity to collaborate better on local, regional & national funding opportunities. Tap into Trustee capacity, create a team to drive & lead funding bids supporting each member of
- We really are getting a spike in new people out there those are including people released from custody and some incredibly vulnerable, as well as completely new people who were sofa surfing and who are scared to death having never faced this level of homelessness before.
- I think on a positive note this awful situation has seen how many of our clients are now thriving not having to sleep in shared accommodation but having their own personal space and privacy.
- Run the risk of ABEN being used very much like hostels, need to think about this!
- I see lack of funding
- I've seen everyone helping each other, I'm getting my head sorted (from a chap who was sleeping rough who is now in a hotel)
- We see incredible partnership working and cross sector collaboration
- I see a reduction in the uncertainties Facing the Narrowgate Shelter
- I see a focus on planning around covid hotels but not people in B and Bs under statuary duty not being considered
- I see significant increased demand, a lot of which is from service users that we have not had contact with before. Alongside that, I see lots of great work from a range of partners and a real "can see" approach
- I see people from different sectors working together
- I see a rise in poverty, and newly homeless people as unemployment rises
- I see variety pf experiences. My recent view lack of charity shops and libraries as community hubs to meet and find resources
- I see concerns from people in emergency accommodation about what the next steps will be for them as accommodation shuts
- I see "Everyone In" was a success in the main although step down is a little uncertain.
- I see huge changes and a great response to the crisis we see empty city streets although there is still a cohort who are rough sleeping. Lots of our clients are in hotels
- Everyone asking, how long? Everyone frustrated about lockdown and some expectation that now things are being relaxed a little more. What are the next steps for people coming out of I see a focus on crisis responses, but not enough focus on addressing the underlying causes of I see a need to address the fact that this has had a detrimental effect on mental health. People feeling very vulnerable and unsafe.
- I see a great deal of positive partnership working, but worry about the long term sustainability of doing so with a strategy to deliver across the region.
- We see great opportunities in being invited to work with the public sector that weren't previously open to us that can open up long term opportunities to help people with making changes to their lifes
- I see the on going disparity in power and legal protection for tenants that who are facing shortfalls in income and facing eviction post-June
- mortgage repossessions will start to occur once the mortgage holidays are over and they can't meet the new higher payments.
- Thankfully I have seen the residents we are working with remaining relatively well in spite of living in shared accommodation and all the associated risks with this
- We will see a rise in evictions in the next few months as soon as landlords are able to evict in September this year
- I see that the massive impact is that the lack of face to face support, our vulnerable people cannot cope with, they feel abandoned. clients with existing conditions are getting worse and their mental health issues are worse now. I also work with refugees who are struggling with social distancing, and inviting asylum seekers into their houses. we are seeing a massive influx of new clients with very complex needs.

- I see an increase in demand for bereavement counselling, and have also seen some great partnership work during a very difficult time, people really pulling together to support the most vulnerable.
- I see a lot of opportunities and ways that technological solutions could be used to improve the charity sector
- I do feel that many of the statutory funded support organisations have seen the lock down as a message
  that no face to face support is allowable, even with appropriate safeguarding, so that is left to a few to
  provide this
- the ban of evections effects social housing too and they will be evicting people too in September! its not just
  private landlords.
- loss of income for families with children, safeguarding issues ...
- I see floating support to prevent homelessness and support people to sustain tenancies
- I see high risk to sustainability of frontline support (VCSE sector)
- I see promise of extra funding but no clarification of how and to whom it will be provided
- I see confusion as lockdown 'lifts' amongst patients and professionals. generally but also applies to those experiencing homelessness. increased risk of deterioration clinically through Covid
- I see partners moving quickly to practical solutions
- GMHP members have provided emergency accommodation during Covid, seconded staff to work in the Hotels, seconded staff to volunteering work
- some amazing partnership work that has made a real difference to the lives of vulnerable people, but I also see a lot of fear and uncertainty around the future from both frontline organisations, and from people who are currently accommodated around what the future holds.
- real opportunity for collaboration here....let's not miss that
- - risk of families in temp accommodation and single people in UTA becoming more hidden/invisible, due to lack of physical/face to face support from services and (albeit necessary) focus on 'step down' from hotels
- that we need any follow-on from 'Everyone In' to go far beyond people who are in the hotels. Often people who are the most vulnerable are the ones who are still on the streets
- big danger of people becoming out of sight out of mind
- financial strain on key stakeholders; LAs, VCSE, RSLs
- progressive delivery models that we can continue to improve and sustain
- great partnership work
- GMHP looking to direct accommodation to support step down but need support and
- moved on to poor quality shared accommodation and just left there with no ongoing support
- repurposing of workforce working to a joint strategy
- precarity of situation for many people in hotels
- more understanding from public and organisations eg Housing providers. People wanted to help
- great partnership, huge efforts, people very tired, and sense of precarity, fear of future, jobs as well as housing
- I think we've succeeded in making ending rough sleeping a national priority. But we've not yet got people to wake up to the scale of change that will entail.
- a bigger need than ever for prevention and systems change strategies that look at changing how it's done
   (e.g. coproduction and more efficient processes) as well as what is done e.g. outcomes
- completely disagree that if 10 people need drug and alcohol treatment it makes sense for them to live in the same shared accommodation - it never works, people get stuck there and it is virtually impossible to stop using when surrounded by people with the same problem as you
- worried about move on, no vacancies, nowhere for people to go to, worried about second wave of people left homeless with end of eviction moratorium, end of furlough funding/additional redundancies



## I want to see...

#### 0-2 months

#### Session 1

- 1. Not evicting until suitable safe accommodation secured and with a wrap around support plan. including from asylum accommodation as well as private sector and from hotels. "It would be devastating" to see people now inside and doing well losing that. And from someone inside currently: "We want definition, certainty, some kind of future security."
- 2. Support for people with mental health and drug addictions, including for people who haven't got into the hotels or were evicted and have complex needs. Want same day scripting. (NB ICM finishing soon too)
- 3. Need funding for services dealing with both known and new people becoming homeless.

## Notes:

- need to look again at prison leavers ending up homeless, issues with employment inc for big issue sellers
- this is why it is so important to jump on mental health as Dimps said people have had so much trauma in their lives to evict them from the hotels they currently are in would be criminal
- I thought that it would be a great time to get people healthy?

- Same day scripting is imperative for people
- Really hear that Risha will make sure Rachel Brennan and #HealthNow hear that.
- It seemed to stop for a while and not sure if now back as policy?
- I agree with stopping the right to buy as it helps keep the social housing stock for other people to live
  cheaply. what would be a good idea is to create another stock of housing that people get help to buy. This
  makes it easier for other people to be able to move on from overcrowded properties. xx
- thank you Dual diagnosis is also imperative for people to move forward to see the change in so many people
  who have been able to stay at the hotels has been incredible please we can not waste the hard hard work
  that so many services have put into this
- Rising unemployment means a lot more people at risk so need prevention stuff there
- cohort of perpetrators
- Housing Providers to change their policies
- Complex needs need new supported housing schemes including wet houses and pathway through
- UTA not appearing as clearly and need to plan a different future for them with their input
- JL and SH navigating duty and no duty but pleased they are recognised
- NRPF policy change
- Change no local connection
- Get rid of distinctions rough sleeping and UTA when it is the same person
- High level of support within the mix
- Chaotic in a sporadic way who move between services (additional needs)
- the challenge on local connection people will be moved to places where they don't have any support network
- Use redundant religious buildings
- Community support alongside
- Technical innovation. Track and tracing. Digital inclusion
- Lose barriers to support
- Commissioning of new housing
- Changes in perception
- Low barriers to access and availability of accommodation. Alongside the whole package of holistic support.
   This needs to incl. more flexibility of mental health support directly linked to services (PIE).
- Build on food infrastructure from this period, learn form what's worked and provide flexible support based on
  what facilities people have and what food they need. Should be nutritious and good quality.
- Funding/commissioning needs to sustain orgs throughout the next 12 months and beyond so charities can find the best response going forwarD

## Session 2

- 1. Not evicting until suitable safe accommodation secured and with a wrap around support plan. including from asylum accommodation as well as private sector and from hotels. "It would be devastating" to see people now inside and doing well losing that. And from someone inside currently: "We want definition, certainty, some kind of future security."
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#### Notes:.

- people with mental health and drug addictions need more support, including new people coming
- money needs to cover both existing people and people new to homelessness and services need funding
- good quality accommodation for people moving on from hostels and other situations
- extend stopping evictions

- advice on how big issues vendors can start working and earning again
- im concerned about people coming out of hotels but also the people who either have not gone into hotels due to their complexities and the people evicted from the hotels Risha
- supporting people to access the services they need during lockdown
- Be great to frame what you want to see happen so we can make those as recommendations.
- keep people in safe accommodation until safe alternatives, including asylum accommodation (government and gm need to be onto this)
- Do you think that maybe we may need to be looking at paying the arrears maybe? so they do not have to go
  into temp accommodation. in the long run it would be cheaper. xx
- GM lobbying
- employment support and asylum accommodation both important, raised with home office
- need a clear exit strategy from home office around asylum
- Do we not need to be thinking about getting people healthy? xx
- In our submission to the Inquiry we're also calling for: "A package of humanitarian support for people with No Recourse to Public Funds to meet the minimum public health requirement that everyone has self-contained accommodation during the COVID-19 pandemic"
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- this is why it is so important to jump on mental health as Dimps said people have had so much trauma in their lives to evict them from the hotels they currently are in would be criminal
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## 0-12 months

## Session 1

- focus on wellbeing/transparency throughout the transition and rehousing process. How can we manage these changes as well as possible for people?
- knowing that we're expecting a lot more people to become homeless, bring in prevention strategy as soon as possible
- keep pressure on the need for social and affordable housing (local collaboration and national campaigning)
- I'd like to see more and clearer support pathways for people with different needs (our focus would be those needing support around asylum and immigration advice and support)
- I'd like to see greater coherence / consistency across GM in terms of how people with NRPF are supported.
- deas; regional/ local rent deposit or guarantee schemes specific to homeless people
- wonder if anyone knows of this happening and can contact tyler with info?
- Rent deposit scheme in every borough
- we actually run a scheme available across GM
- people experiencing homelessness xx
- please let us know any feedback or requests for formats for working on strategy and plans and developing the network - there aren't 'staff' for gmhan but we are all committed and will do what we can
- We will feed all of this feedback into the Programme Board wider strategic meeting on 1 June
- the cost of HB does not cover private sector. Ideally more social housing or cheaper more affordable private rentals
- perhaps GM work with national charities such as centrepoint and others as part of a regional fundraising campaign
- access to ongoing outreach support is key to sustaining new tenancies, without this it is a revolving door of homelessness
- We need a wrap around service that is so hard whilst supporting remotely
- Is there a pressure to house people before they are ready and this is why they comeback into the system?

#### Session 2

- abandoned and evicted properties are largely due, imo, to poorly identified plans giving properties to those not ready
- an enhanced personal housing plan, person centred, taking into account background and what they need
  from an accommodation offer. Sustainable for the longer term. Without making people jump through hoops.
  appropriate accommodation for peoples needs particularly in relation to their health.
- People are placed in acc that is not suitable to their care needs. Needs acknowledgement that recovery isn't
  an option for a small number of people, needs to be taken into account when planning their housing and
  care.
- more coproduction between housing & health. Any new "customer" gets the very best start, that meets the need, that they feel comfortable living in long term.
- Cath Stirling: on going support once someone has been rehoused is really important, both with loneliness etc. and with practical things.
- Also helps prevent people becoming homeless again in the future.

- Craig: Bolton at Home introduced a "tenant ready process" identifies exactly where someone is and what support they need, and who can be brought in to help if things go wrong. Everyone goes through this process, without it being a barrier. If things go wrong we know who to contact.
- Linking with other charities and agencies is really important.
- lots of positives in terms of what has happened, really strong offer. In 3 weeks of outreach we've put 5 people into accommodation (or back into accommodation) never been able to do this before. Knowing when we do outreach that we have rooms we can offer people is great. Low barrier, strong offer, ease of access. A lot of the people still on the streets have high barriers, but chipping away at people to explain how easy it is to access. Gives people a chance to make a different choice after trust was built but if the offer isn't there that couldn't happen.
- What we don't want is people to go back on the street.
- Low barriers to be sustained. And moving people in quickly.
- Still another group who won't go in need to work really hard on this.
- Low barriers and availblility of accommodation
- Bricks and mortar is just a part of the jigsaw.
- Keeping it easy and quick to access accommodation helps with trust. But then develop the holistic piece alongside that for the people who still won't go in.
- some work done in Mcr around mental health awareness in skilling up the frontline staff. Continuing with this
  important. If we're all working from a psychologically, mental health, trauma informed point as practitioners
  then that helps.
- Always room for more staff members.
- Can offset this by working better together.
- Piloting a PIE model in some hostels. Basing a psychologist in a hostel available to residents and staff, and can make links with other services. Speeds the process up.
- Ideal: mental health practitioners based in accommodation, reduce barriers to services.
- Consistent, regular meals has a great impact on both physical and mental health.
- Lily food that LAs are now leading and providing 'triage' for food is excellent
- · food is a human right so this central service should continue
- needs investment and consideration of how people will access food in different ways dependant on your cooking and storage facilities
- What is needed to sustain this? Using a lot fo redeployed workers. Who will do this going forward?
- How do we put infrastructure in to allow this food support to continue without having to jump through hoops?
- Niamh: importance of staff support
- Always focused on the client, and it is rare that we ask how the staff are. This is a collective trauma and this needs to be acknowledged for staff. But also needs to be integrated into our collective future practice.
- Not just a coronavirus thing.
- chaplaincy, particularly concerned about their spiritual aspects of peoples needs. Many homeless and vulnerable people are seeking spiritual input as well, which needs to be addressed. Staff too.
- Spiritual and religious support.
- Barnabus are looking at trialling prayer in some of the hotels in a few weeks.
- spiritual support goes hand in hand with mental health support.
- we have been providing emergency access to provision, and I'm interested in finding out how the medium term need can be meshed into the longer term provision. We've seen people come to us completely bewildered, stuck on the streets with lots of obstacles. Making them feel safe prepares them for the next step quickly. For some people straight into homes isn't necessarily the right way forward.
- wants to know where the GM Mayors Charity can fit and support everyone. Where can they help with the next stage? Taking what I've heard today forward.
- Terry: great number of us that are going through a period of uncertainty, help to maintain the provision of essential services on the other side of this crisis would be a great use of the GM charity's support.
- Commissioning needs to be longer term, short term commissioning traumatises staff.

- Commissioning should be multi-year, give organisations a chance to bed into the work, but also see what actually works.
- ACTION: Follow up around section 21

## 0 - 12 +

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- cohort of perpetrators
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- Commissioning of new housing
- Changes in perception
- why don't we learn the lessons from previous schemes, like no second night out, housing first, or entrenched rough sleepers projects and there have been many more good work done that we could learn from
- We will work with you attitude -proper support
- Home Office notice period to be extended and increase in support and scrap Nrpf
- Health is not in the room
- Person centred approach
- Health and Mental Health integrated

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