

Petrus Roughsleepers Pilot Project First Year Report

Introduction

The Petrus Roughsleepers project was commissioned in August by Rochdale Supporting People in partnership with Rochdale MBC Homelessness in summer 2008 to address issues relating to rough sleeping in the Borough. Rochdale Petrus started the contract in mid-September 2008. By seconding staff to the project Petrus were able to have a full staff team in place from day one of the contract.

A steering group of commissioners and stakeholders has had oversight of the project since that time and has met on a bi-monthly basis. The steering group was actively made up of staff from Supporting People, RMBC Homelessness; RMBC Adult Care and the Salvation Army.

In terms of the contract, day to day support was delivered by two full time members of staff. They were required to provide support at any one time to 10 service users. It was agreed that five of these would be actual roughsleepers and that five would be resident in supported accommodation but at high risk of roughsleeping. The contract required a period of 13 weeks support for service user, at the end of which accommodation should be found.

One of the key issues in the pilot project was being explicit about barriers faced in addressing the needs of service users effectively.

The Outcomes Report

In the course of the project to 15 September 2009, we worked with 21 service users – of which 5 were female

The consolidated outcomes report to 16 June confirms what many would have believed to be true in any event. In most cases the figures speak for themselves. Some points are worth highlighting:

- 15 individuals were moved from roughsleeping to accommodation on 33 occasions. Most of these outcomes would have been impossible without the Salvation Army
- 12 people with whom we work have staggering rent arrears
- A significant number (10) of individuals proved difficult to engage for a significant length of time, but in a number of cases the service did eventually engage with them and have an impact.
- A large part of the issue about engaging had to do with the number of individuals who had issue with peer group involvement whether wanted or otherwise.
- Good contact with one specific Doctors surgery, ADS and CRI helped us with addressing key issues.

- Key interventions in relation to health quite possibly prevented death in a couple of cases.
- In terms of statutory orders good contact was made with the courts and this has led to the courts beginning to work explicitly with the service.
- Learning/work figures are not that high but they hide at least one spectacular piece of unexpected development on the part of one service users. This suggest an obvious area for future development.
- In terms of personal development, family/relationships and challenging behaviour, important individual outcomes are reflected in the figures.

Case Studies

3 case studies have been provided with this report and can be found as Appendix 2. Where information has been provided above which is of a more quantitative nature, we felt that these case studies would be indispensable in giving more of a feel of what the project has achieved.

Each case study has been chosen, not particularly to demonstrate the success of the Project, though we do believe that the case studies do demonstrate that success. As important is how the case studies give a rounded picture of the issues that need to be addressed in helping service users to move forward, and in a sense the ‘mountains’ they have to climb to make a significant change in the circumstances that have led to them being homeless.

Strengths of the Project and areas for improvement

An internal review of the project was undertaken in February/March, involving staff and the steering group to take stock of issues to that point and to look at strengths and areas for improvement. The following were identified as significant issues, some more obvious than others.

- Service users continue to be RoughSleepers rather than At Risk and support is characteristically going beyond the three month period, reducing the overall numbers supported –
- The majority we are a complex group with deep seated needs. Work continues to be intensive – much handholding; court work.
- Outcomes in terms of enduring accommodation have been limited –
- Limited success thus far in terms of service user involvement/ maximising choices
- We do not have a clear statement of aims
- Some indications of requirement for more immediate/emergency type interventions by staff – importance of work with groups/couples
- Indications of the value of the Day Centre as a base including positive activities. Involvement of student very positive –
- Mixed involvement with agencies – some excellent, some needing to improve
- Inadequate re BME/immigrant issues

Service Development

By way of addressing the above the following plan was developed:

- The Steering group agreed to continue to be flexible about client group and extending period of support
- We worked to increase support as below by increasing the use of the Day Centre and staff there.
- There has been some success in addressing enduring accommodation need, but the majority of staff effort has been around maintaining short term accommodation
- Service user involvement has been increased by involvement of Day Centre staff – this led to the creation of an active user group
- Aims statement was produced
- Clarify proportion of (prevention/ emergency/ structured support interventions) – Steering Group
- Consolidate involvement of DayCentre in service – including structured support - consider other ways of enhancing staffing element of service (volunteers/people with first hand experience/DC service) - Petrus Man Team
- Attempts to improve agency relationships go on in the network
- The biggest succes of the service was to pursue employment opportunities for people who have used homelessness support services

Service User and Stakeholder views of the service

The service has worked intensively with a significant number of services as mentioned above. From Homelessness, ADS and the Salvation Army, feedback has been uniformly positive. The only suggestion or improvements came from Brentwood Day Centre from which it was indicated that there was a lack of support in Brentwood and the nature of the service in terms of formal referral processes and working with emergencies had not been clearly understood/communicated. This issue has now been addressed by the Project Manager and we are looking to work more closely with Brentwood. Informal feedback from service users has been very good however, over the next year more fromal processess need to be developed in this area.

Philip Foster
Deputy Coordinator

October 2009

Appendix 1 - Petrus Roughsleepers Project – Outcomes Report

Report Period – 15 September 2008 to 15 September 2009
Service users supported to date: 21

Outcome	Number	Comments
1 Accommodation accessed		
Moved from Roughsleeping to accommodation	33	Represents work with 15 individuals
2 Accommodation maintained		
• At risk – maintained existing accommodation	17	10 individuals – mostly roughsleepers
• Supported to long term accommodation	13	8 still waiting/have declined places
3 Service user choices maximised	8	Still mainly Day Centre activities
4 Barriers addressed		
• Rent arrears	12	£30,174 originally owed as arrears
• Legal barriers/involvement in crime	7	
• Barred from supported housing	8	
• Barred from social housing	5	
• Failure to engage	10	Significant efforts made to engage this group
• Peer group involvement	11	
5 Services Accessed		
• Doctor	8	Mainly engaging/registering with Triple H
• Hospital	3	
• Alcohol Support	10	
• Substances Support	7	
• Debt negotiation/Economic wellbeing	2	
• Engage with statutory orders	5	
• Child protection/support	5	Continues to be significant area
• Domestic violence	6	Significant increase in this area on last report
6 Learning and Work		
• Training(short)	4	
• Training (long)	0	
• Education/accessing information	1	
• Paid work	1	Recruited as Roughsleeper trainee
• Voluntary work	3	

Petrus Roughsleepers Project – Outcomes Report

Report Period – 15 September 2008 to 15 September 2009

7 Move-on

• Planned	11	10 individuals
• Unplanned	10	9 individuals

8 Other Outcomes

• Independent accommodation	2	2 Bond Board
• Personal development	5	
• Family/Relationships	5	
• Managing challenging behaviour	5	

Appendix 2: Case Studies

Case study 1

AF is a 50 year old male who has a history of alcohol misuse, AF became homeless after losing his RBH tenancy due to antisocial behaviour and has a history of short stays in various hostels and supported accommodations in the borough, his places in the various accommodations have been lost due to his behaviours when intoxicated and he is now barred from all direct access accommodation with the current exception of the Salvation army who are being very generous and allowing AF to stay on a rescindable notice. AF came to the rough sleeper's service after losing a hostel place, the weather was extreme and he was in very poor health, he is an extremely vulnerable person. AF is currently in the Salvation army. Since engaging with the Rough sleepers project AF's

- Risk of harm & personal safety has improved and is continuing to improve
- Health & physical appearance improved & continuing to improve
- Alcohol misuse became minimised – from approx 5ltrs to 2ltrs daily
- Appointments were 100% attended – RSP
- Accommodation was obtained at Salvation Army
- Support given to access detox assessments & programmes
- Support to access ADS & GP
- Accommodation referrals completed – accepted onto heavy drinkers project waiting list– awaiting vacancy
- Support to address behaviours to prevent exclusion

The Rough sleepers project continues to support AF alongside his keyworker at the Salvation Army to help him address his alcohol misuse and his anti social behaviour in an attempt to keep him accommodated until his move to the heavy drinkers project, which is more suited to his current support needs.

Case study 2

KD is a 26 year old female who has a history of alcohol misuse, there has been a history of negative influences in her life and a history of abuse both physical and verbal. When KD first approached the Rough sleepers service she was street homeless after losing her previous RBH tenancy. Initially she was keen to accept the support offered to her but due to negative peers in her life she was reluctant to.

KD accepted support on 10.09.08 however the engagement was sporadic until November when 2 extreme negative influences were removed.

At this point KD moved into the home of her partners mother, with support from the Rough sleepers service and her partners mother KD's lifestyle changed dramatically for the better.

- Risk of harm & personal safety improved & continuing to improve
- Health & physical appearance improved & continuing to improve
- Alcohol misuse became minimised – from approx 5ltrs to 1.5ltrs daily
- Budget plan has been put in place and debts are being addressed
- Basic life skills were taught and improved – ie cooking, cleaning & continues to improve in her own accommodation
- Appointments were 100% attended – RSP
- Accommodation was obtained via bond board
- Access to children who are in local authority care has been increased due to changes and turn around in lifestyle
- Has accessed agencies to help with addiction and is complying with support plan to reduce alcohol intake and then complete community detoxification & rehabilitation
- Is complying with social services requests surrounding contact with children
- Managing tenancy with no areas of concern

KD continues to engage with the Rough sleepers group and is now waiting to enrol on basic literacy skills courses and basic parenting classes. She is also waiting to enrol on self esteem and confidence building classes with the domestic violence forum to help build her confidence to be able to recognise negative factors and relationships to prevent relapses in the future.

Case Study 3

KM is a 46 year old male with a history of alcohol misuse and anti – social behaviour. KM was referred to the Rough Sleepers project on 12.01.09. KM has never had his own tenancy and has spent the last 26 years or so staying with friends and drinking peers. KM has an ASBO due to causing anti social behaviour with his partner whilst under the influence of alcohol. He has a long history of convictions including a schedule one offence and an arson conviction. The latter two of his offences are high barriers to accommodation. KM is barred from all direct access and supported accommodation in the borough. This is due to his behaviours when intoxicated. Since having been engaged with the Rough Sleepers project KM has:

- Obtained accommodation with the Salvation Army on cold weather provision
- Obtained accommodation with the Salvation Army on a permanent basis – now lost due to behaviours
- Been helped to engage with staff from ADS to increase his support network & to get support around his alcohol misuse
- Appointments were 100% attended – RSP, ADS, Offender manager
- Supported to be assessed and accepted for detox programme at Smithfield project

- Referred and accepted for supported accommodation in Oldham to coincide with a planned move to Smithfield
- Received support to address his behaviour to prevent exclusion.
- Access to health professionals to improve general physical health
- Support to access day centre facilities to help support around vulnerability.
- Support to attend courts and reports given to magistrates on KM's behalf
- Support to obtain legal advice

The Rough Sleepers project continues to support KM alongside ADS and his offender manager to help maintain his well being and support around his accommodation needs and alcohol and offending behaviour. KM is a complex needs service user who is now street homeless again , the rough sleepers project are awaiting news of a move in date to Oldham so that KM can then access his detox programme,, support will continue throughout this period.