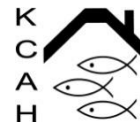


Kingston Churches Winter Night Shelter

Summary Report



The aim of this pilot night shelter was to provide accommodation for up to 8 “entrenched” rough sleepers per night during the month of February 2016. Shelter guests were identified in advance of the shelter opening. Time was spent with the clients prior to them being accepted to the scheme so that expectations were properly managed. This was a volunteer-led shelter co-ordinated by two paid workers. Training was given to volunteers and it is estimated that 150 volunteers participated in the project.

The criteria was that guests were likely to have an addiction – drug, alcohol or dual diagnosis – and/or a mental health illness (of varying degrees) would be encountered. Although a zero tolerance approach was taken over drugs at the shelter venues, guests were allowed to hand over up to four cans of alcohol; they could consume three cans in a supervised part of the shelter venue with the fourth to be held back until they left the shelter in the morning.

The shelter was run with a recognition that the guests may not be in a position to stay at the shelter each and every night. The guests were aware that if they were heavily under the influence of drink or drugs, they should not attend the shelter venue for that night. However, they would not lose their place for the next night unless it became a regular pattern.

In summary:

- 13 rough sleepers made use of the shelter during the period 1st February – 29th February
- 5 rough sleepers turned down the invitation to use the shelter scheme
- All the guests were male
- The age range was from 28 years to 64 years
- 77% of the guests were UK Nationals with the others either coming from Poland or Romania
- 62% of guests declared a dependency on alcohol, 15% declared a dependency on drugs and 15% a dependency on both drugs and alcohol. Only one guest did not suffer with drug or alcohol misuse. 46% of guests declared having some element of mental health illness. This ranged from being medicated for depression to a diagnosis of schizophrenia.
- During the time that the shelter ran, two guests stopped using the shelter and one was banned
- One guest is currently on remand for an assault charge; one guest has since died.

Outcomes

Seven of the thirteen guests (representing 54% of guests) took part in an ‘Outcomes Star’ evaluation over the course of the shelter scheme. They rated changes in certain aspects of their lives over the course of the month. Of those that took part:

- 100% of guests reported an improvement in personal safety and security.
- 100% of guests reported an improvement in their physical health.
- 86% of guests reported an improvement in their mental and emotional health
- 100% of guests reported a reduction in their substance misuse (where applicable)
- 43% of guests reported a reduction in re-offending due to an improvement in their circumstances.

Guest Feedback

Most of the guests made it clear that their dignity was important to them. It is hard to focus on ‘self-care’ while living rough on the streets. One guest commented “I have been washing more regularly, brushing

my teeth and going for a shower". It is recognised that managing money as a rough sleeper is difficult, particularly when they have an addiction. But they are still usually aware of their appearance. Another guest commented, "I need a new set of clothes as people are beginning to look at me."

The guests were generally very appreciative of the volunteers, praising them as "wonderful people", "very helpful/understanding" and thanking them for their "kindness and encouragement". This was a positive aspect to developing social networks and relationships. Amongst themselves, some guests did develop good relationships with one another but at the same time there were also frictions.

All guests with an alcohol misuse issue were grateful that there was supervised drinking of alcohol and felt it allowed them to manage their drinking and without this option, few said they would have coped with staying in the shelter. One guest was extremely positive that the Night Shelter "helps me to reduce my drinking" and others guests reiterated this belief. Similarly, a guest with a drug addiction said it helped him to stop "taking for the sake of taking" in the evenings. He admitted to having his "fix" earlier in the day but having a place in the shelter meant that he broke the routine of meeting others in the evenings and taking drugs just because they were available. It lessened the behaviour of taking cocktails of alcohol and drugs. The general consensus of the guests, however, is that it is not possible to beat their addictions while they are homeless on the streets. The overriding message from them is that there needs to be a pathway from the shelter into further suitable accommodation to help them address their addictions properly – if they are ready to address their addictions.

For most guests, they recognised that the shelter scheme facilitated an improvement in their physical and mental health. As one put it, it gave him "breathing space". For most, that was all it was. One guest was "on top of the world" for being in the shelter, another said it "helped emotionally" and "immediately makes a difference". Another guest said it was "a great weight off my mind to have somewhere to stay". For those with addictions, it was very apparent that their appetite was small when they first attended the shelters but during their stay, they regained a healthy appetite.

The guests spoke of the monotony in their lives on the streets and a desire to have something to do which may help them to address their substance misuse, physical and mental health. During the course of the Night Shelter, they had the opportunity to be involved in a Garden Project (organised by Lifeline) and a Homelessness Exhibition (organised by Kingston Healthwatch and Kingston RISE). A trip to the cinema and an Outdoor Events Day including go-karting and quad-biking was also arranged.

Housing Outcomes and Opportunities since the end of the shelter

- one guest was accepted into the Joel Project, a permanent night shelter. Due to his vulnerabilities, KCAH asked SPEAR's Healthlink to submit a Safeguarding Alert and this was duly done. KCAH then co-ordinated professional meetings and the 64 year old, who was in extremely poor health, is now in residential care.
- one guest was working while in the shelter. He found more secure work and was able to save enough money so that he has been able to secure private rented accommodation for himself.
- KCAH's Senior Housing Adviser identified a residential rehabilitation centre and, in partnership with Kingston Council/Public Health/Kingston Wellbeing, funding was made available for one guest who met the criteria and a place was secured in June 2016. On successfully completing rehab, the client will be offered a place in KCAH's Access Project. This is a pilot exploring new pathways out of homelessness for clients with complex needs. The work achieved with this client will unequivocally have had a positive impact for the health services, police, probation and the courts by reducing time spent dealing with this client because he is now getting the help that he needed – and wanted.

- one guest is in the Joel Project having continued to engage with KCAH and reduced his alcohol consumption to the extent that he met the permanent night shelter's criteria.
- one guest had a Mental Health and a Care Act Assessment as a result of advocacy by KCAH and SPEAR's Healthlink Service. KCAH continues to press for the Mental Health Service to commit to funding for appropriate supported accommodation for this client who remains homeless on the street.

Move-on options for this group of clients were always known to be very limited and this is reflected in our housing outcomes. At present, 4 are now in suitable accommodation (representing 33%). Of the others, 6 are still homeless but far more engaged with either KCAH, Kingston Wellbeing than before the shelter. For one of them, KCAH is currently challenging a decision by the mental health services not to assist with supported accommodation after a Care Act Assessment took place. Of the remaining 3 guests, two are in prison and one has died – often inevitable consequences of the lifestyle of living on the streets.

Conclusions:

The Shelter Scheme was a success in itself, simply for providing shelter, warmth, food and respite for a short period of time. Equally inspiring was how it worked in parallel with events and activities that were taking place in Kingston at the same time. Key communication between KCAH, Lifeline, Healthwatch and RISE in particular meant that the guests were able to participate in the Garden Project and Homelessness Exhibition. However, it was recognised that both the Shelter and the activities/events ended at the same time, leaving the majority of the guests feeling 'back to square one'. Although the guests are still engaging with KCAH, contact with most individuals is much more limited and the outreach teams report similar reduced contact.

Recommendations

- A closer co-ordinated, multi-agency approach involving statutory and voluntary partners is needed in order to achieve successful outcomes for entrenched rough sleepers who want to get help and to help themselves. In particular, 'pathways' relating to their housing and health needs must be planned prior to the opening of any shelter scheme so that a seamless approach is taken to try to prevent the client from returning to living on the streets.
- A greater focus on an asset-based approach needs to be taken so that clients are given opportunities to use their skills-sets during and after the term of a night shelter. Similarly, tapping into activities and events that are already available in the borough plus stand-alone activities for the clients can make a difference to motivation, confidence, engagement, well-being and recovery.

A future for a night shelter for entrenched rough sleepers in Kingston

A meeting with church leaders and shelter co-ordinators took place at the end of March. There is a desire to run another Winter Night Shelter next year, probably for a six week period between January and March 2017 and continue establishing the project in this way.

Funding proposals will be submitted by KCAH to charitable trusts to make sure that this project can be managed in 2017. In May 2016, Kingston Council made an award under the New Initiatives Grant Aid to help fund the running costs for this shelter scheme - this goes a long way in helping to make this an established scheme.

Night Shelter Photographs



Podiatry in a night shelter



Dentistry at a night shelter



Sleeping space in a night shelter



Chess game between guest and volunteer



Guests took part in RBK/Lifeline's 'Garden Project'



An activities day included go-karting



Guests involved in planning of The Homeless Exhibition organised by Healthwatch



Identifying health issues is a key component of the night shelter