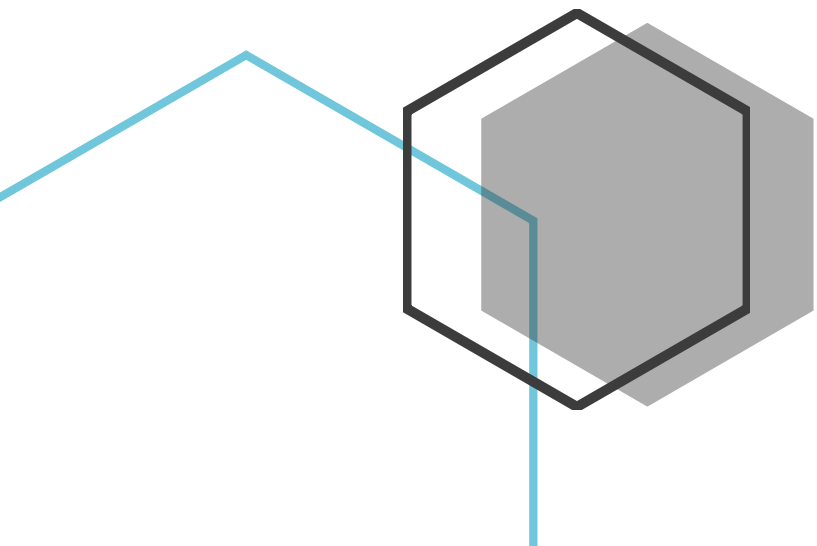


Homeless Families

The Gold Standard: A Proposal

Exploring the difficulties facing homeless families and the agencies supporting them. This report sets out to highlight the issues and summarises the changes which need to be implemented.





An Insight In To The Problem

The 10 Boroughs of Greater Manchester

The number of homeless families across Greater Manchester currently exceeds 1500¹, with evidence showing hidden homeless and hidden households equate to 10 x higher than official statistics³.

In the last three years, the number of homeless families in Manchester has risen from approximately 144 to 1250¹⁻² and falls within the top 50 local authorities in England by rate of children who are homeless. Statistics indicate 1 in 59 children in Manchester are homeless or in temporary accommodation⁴.

Oldham has seen the second largest increase in the number of homeless children over a five-year period – with a 1400% increase.⁵

These figures provide only a glimpse in to the current extent of this growing issue.

With levels reaching crisis point, Shared Health Foundation has been working with agencies and council teams, as well as families with lived experience of homelessness, to investigate the difficulties being faced.

This report sets out to highlight our preliminary findings and a proposal for next steps requiring the support of Greater Manchester's communities, council decision makers and central policy providers.



2742

HOMELESS CHILDREN

are living in temporary accommodation across GM⁴



2 years is considered an average 'temporary' placement

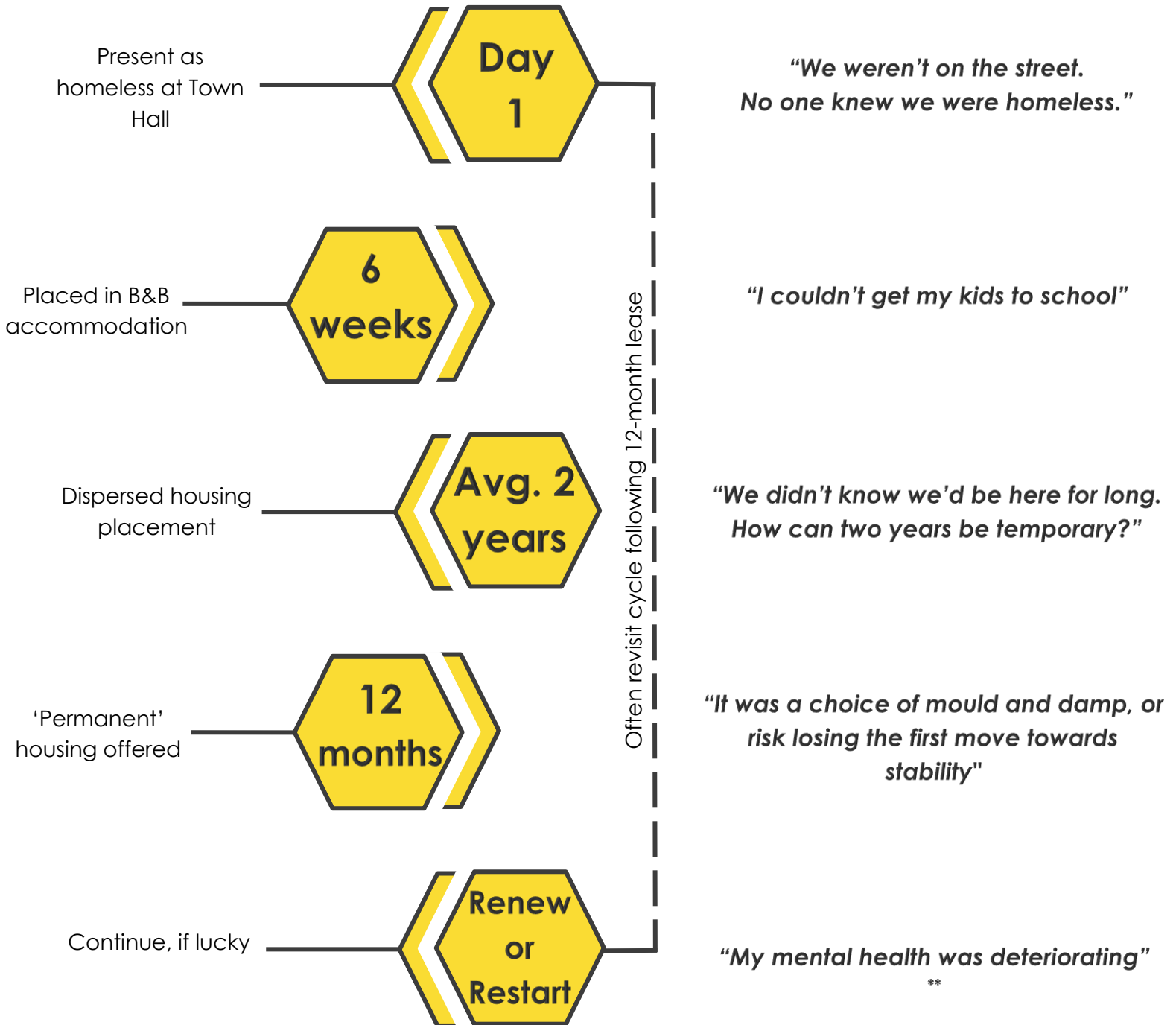


Number of homeless families across GM has risen by 1000%^{4,6}





A Journey Through The Homeless System





Bed and Breakfasts

Families are typically placed initially in a bed and breakfast (B&B). The expectation is this stay does not exceed 6 weeks. However, in other parts of the UK stays of up to 2 years have been seen. ⁵

*At the end of 2018, there were an estimated **1,071** single mothers with children living in temporary accommodation, including B&Bs, across GM. ⁴*

Despite the Association of Greater Manchester Authorities (AGMA) setting out a 'Code of Conduct & Minimum Quality Standards' for hotel/B&B accommodation for the homeless, we know the provision and standards at these establishments varies widely.

Case Study: A Survey of 13 Bed and Breakfast accommodation providers in GM...

0

**HAVE ACCESS TO
SAFE COMMUNAL
PLAY SPACES**

2

**HOTELS HAVE NO
KITCHEN OR PROVISION
TO HEAT FOOD**

5

**DO NOT
PROVIDE
BREAKFAST**

11

**MIX SINGLES WITH
VULNERABLE
FAMILIES**

Whilst the minimum standards are wide ranging and robust, our initial scoping has identified a lack of policing of core standards, as a result of capacity – not disinterest, which has seen some B&B placements not meeting the minimum standards with no consequence.

Additionally, we have found some key areas not covered by minimum standards which, if implemented, would have a significant positive impact on family health, wellbeing and safety.

Below sets out the standards, we believe should be highlighted for families in hotel accommodation.

Key:

- Those with an arrow are part of the Minimum Quality Standards (as laid out by AGMA).
- Those with a bullet are what our scoping research identifies as additional standards that we feel need to be implemented in addition to improve outcomes.

Living in bed and breakfast (B&B) accommodation can be particularly detrimental to the health and development of children. Housing authorities should, therefore, use bed and breakfast hotels to discharge a duty to secure accommodation for applicants with family commitments only as a last resort"⁷

Bed and Breakfasts: Minimum Standards For Families

Safeguarding and Child Safety

- Single homeless and homeless families should not be mixed in any B&B establishment.

The safeguarding risk in mixed accommodation cannot be ignored. Child sexual exploitation (CSE) is of significant concern⁸ and should be at the forefront of minds, especially in light of the recent scandals which underline the dangers for vulnerable young people in mixed environments.

Food and Nutrition

- A breakfast must be supplied. *
- Provision for making tea and coffee with an adequate supply of well-presented materials. If facilities are not provided, services of hot beverages should be made available.
- Each guest must be supplied with, or have easy access to a mug, plate, bowl and cutlery. Plastic cups/plates/bowls/cutlery must be provided for children under the age of 6.
- Each family must have access to at least 1 shelf in a fridge. Labels should be provided to enable clear marking of food ownership. Or a mini fridge should be provided in each room.
- A minimum of 1 microwave should be available per 10 families and should always be available for use.
- A kettle must be provided in every bedroom
- Breakfasts should be provided daily for every guest and consist of toast, cereal with milk, plus tea and coffee as a minimum.
- Water should always be available.

*And only where Local Authorities have agreed

With limitations in income, minimal access to nutritious foods and no provisions to plan and cook meals, entire families living off instant food products – resulting in diets high in fat, sugar and salt. This impacts on both short term and long-term health outcomes, inappropriate acute hospital admissions, as well as performance and behavior.⁹



Space and Environment

- Dining/breakfast room to be available.
- Adequate wardrobe or hanging space and adequate drawer or shelf space to be available.
- Communal spaces must be made available to families during agreed daytime hours. As a minimum this should be for at least 3 hours per day and should be clearly communicated to all guests.
- Where outdoor spaces are available, they should be maintained, safe and available for the use of families.
- Travel cots must be provided for children under the age of 2.
- Dining/breakfast room to be available at all mealtimes, if not all day.

Children who were being moved from place to place or those that were living in B&B's tended to struggle to keep track of their uniforms and possessions¹⁰

Hygiene and Health

- Clean hand towels and bath towels to be provided for every new guest and changed as required or on request.
- A washing machine and dryer must be available for the use of all families free of charge. This can either be managed by staff or made available in a communal area.

Due to lack of regular access to washing machines (particularly in B&B's) and as a result of being moved from place to place, teachers report that children experiencing homelessness were more likely to turn up to school in dirty, unwashed uniforms or wearing the wrong uniform. ¹⁰

Information and Process

- Landlords, managers and staff employed by B&Bs will ensure the health and wellbeing of residents.
- On arrival, each family must be provided with an information pack, including wellbeing support.
- Up to date information regarding local services and facilities such as food banks should be displayed clearly in the reception area and updated as necessary.
- Families must be allowed a minimum of 3 hours to vacate a room and should not be expected to leave the hotel before new accommodation is available.

Dispersed Housing and Process Transitioning: Minimum Standards For Families

Following a stay in B&B accommodation, most families are moved to dispersed housing, also known as temporary housing. However, families can reside in 'temporary' housing for an average of two years or be moved frequently before a more suitable permanent solution is found.

We have found families in dispersed housing are less likely to integrate into their communities, are less likely to register with a local GP and have difficulty with school attendance. Transfers to a new school results in disruption to education yet remaining in the same school requires further travel. Additionally, when families do try to access local services, barriers are encountered often as a result of moving outside of area/borough and the conflict of borough responsibility. This has a negative impact on both physical and emotional health of parent and child.

The causes and impact of homelessness leaves families vulnerable to multiple and complex issues, which must be identified and recorded in order to develop appropriate interventions and resources.

The sooner interventions are made, the more likely the results are to be positive.¹¹

We therefore propose the following standards be implemented throughout the transitional process.



Education

- Children who are homeless should have the same education rights as Looked After Children (LAC).
- Identification process to alerting schools to changing family situations.
 - This would allow support systems to be put in place early and awareness of potential child anxiety, hunger and behavior changes.
- Standardised offer of parental support and understanding.
- Expectation of cross school communication if children are displaced into new education environment.

Children lose an average of

55 days

due to the disruption caused by living in temporary accommodation.¹²

Transport

- Financial aid and concessional public transport for children and families going through the transitional homeless processes to enable school attendances and facilitate access to services required.

Security and Standards

- Standards to be enforced for families in privately rented accommodation.
- Category 2 Hazards (local authorities *may* take action) found through the Housing Health and Safety Rating System (HHSRS) to see similar enforcement as Category 1 (local authority *must* take action)¹³. This will support the change in section 21 notice to prevent retaliatory evictions.¹⁴ Note: HHSRS is currently under review and it is hoped this will support the above.

Boroughs and Barriers

- All local authority provided services to be accessible, irrelevant of regional duty of care.
- Access to early help, free school meals and healthcare providers irrespective of postcode technicalities.
- Support to be consistent as families transition from B&B accommodation through to permanent housing. It is suggested the 'Focused Care Model'¹⁵ would be appropriate.

Adverse Childhood Experiences

Adverse Childhood Experiences (ACEs) describe a wide range of stressful or traumatic experiences that children can be exposed to whilst growing up. 85% of people in touch with criminal justice, substance misuse and adult homelessness services experienced some form of traumatic event in childhood.³ The experience of being made homeless and being homeless must be considered as a ACE and the long-term impact this trauma has on social and health outcomes recognised.

Case Study



I am Helen*. I am a qualified teacher who has lived, studied and worked in Manchester my entire life. I have three beautiful children. My journey through the homelessness system began in April 2018.

Following an attack on my home by a neighbour, I was forced to flee my home. With no other options, I presented at the town hall as homeless, my youngest was 18 months at the time.

We were placed at a B&B, where we stayed for one week. This was my lowest point – the room was dirty and the bathroom broken, I requested a room move. I had to source myself a travel cot for the youngest. The things I witnessed that week – men on drugs wandering the hotel, late night door banging and an unwelcome male visitor trying to access the room we were in.

There was no fridge space available, no communal area and no provisions for drinks. My children ate dry cereal and plain dry snacks from the local shops. I couldn't eat. I was isolated and alone.

I received minimal support. It wasn't until I summoned the courage to inform my children's school about our situation that I was able to get help. Breakfast clubs, after school clubs, and an open-door policy was invaluable both for me and my kids.

After one week I was given my next location, in a different borough, miles away. I was given 1 hour to vacate my room. I was lucky, I had a car.

My next battles were just beginning. Having been moved out of borough, I was initially denied access to Early Help. I was told, if I wanted my new borough to take duty of care for me and my family, I would have to surrender my address, the address where we finally found a bit of safety, and then present again as homeless in the new town. Luckily, I don't know how to give up, after repeated referrals, I was finally able to access the services my children needed.

I feel ongoing guilt for what my children have had to go through – I have seen the emotional and physical impact on them; behavioural changes and bed wetting. They are nervous and reluctant to invest in friendships, ever waiting on the next move. I had to move the kids to a new school closer to Oldham to be able to get them to school on time. I didn't receive the same support there.

Our current location has become unsafe and we are facing a further move.

My mental health has taken a beating but I'm a fighter. I have learnt a lot along this road and have a fire inside to help make a difference in the lives of those going through similar situations.

*Named changed.



The Conclusion:

Below summarises the key points of what should be implemented:

- 1.** New B&B standards implemented with repercussions for failure to do so.
- 2.** Focused Care Worker (or equivalent) specific to homeless families to be appointed. The worker will support families during their transition through all housing stages. Worker capacity will allow the unpicking of problems exacerbated by homelessness.
- 3.** Increased clarity for HHSRS assessment and expectations. Standards charter and actioning of HHSRS Category Two Hazards in privately rented accommodation, to minimize likelihood of retaliatory evictions.
- 4.** Homeless children to have the same rights as Looked After Children. This encompasses; smooth school transition, a process of alerting schools, continued provision of free school meals and transport and standardised support.

The key to safeguarding homeless families is a 'whole systems' approach, incorporating multiagency/multidisciplinary working. Collaborative working within both service delivery and commissioning is more likely to result in seamless and integrated services.¹¹

The benefits of all Greater Manchester boroughs working together and sharing information will support the safety and improvement in homelessness services.



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**Quotes taken from interviews during initial scoping research with families who have lived experience of the homeless system in GM.