

The Way Home
Homelessness
response to COVID-19

*ending homelessness **TOGETHER/***

INTRODUCTION

The Housing Executive has adopted a co-ordinated response to address the impacts of COVID-19 in terms of homelessness in Northern Ireland. The actions taken since early March 2020 have mirrored much of our existing strategic commitments but the pandemic has forced faster progress on key fronts. We need to protect this progress while also considering the wider strategic impacts. This Reset Plan provides the framework to do so.

The Coronavirus presented huge challenges to us all. For the Housing Executive, a key focus was delivering services for some of the most vulnerable in our society and those most in need; those experiencing homelessness. The current pandemic does not pose equal risks to all parts of society. People experiencing homelessness are at an increased risk of infection due to the shared nature of homeless accommodation settings and barriers to preventive behaviours such as regular handwashing and avoiding contact with others.

Our aims from the outset were to safeguard as many homeless people as possible and ensure the continued operation of homelessness services in an effective and safe way.

The scale of the challenge we faced and continue to face is unprecedented. Many people previously unable to engage with services are now benefitting from temporary accommodation and support, including rough sleepers and households who were ineligible for housing assistance as persons from abroad.

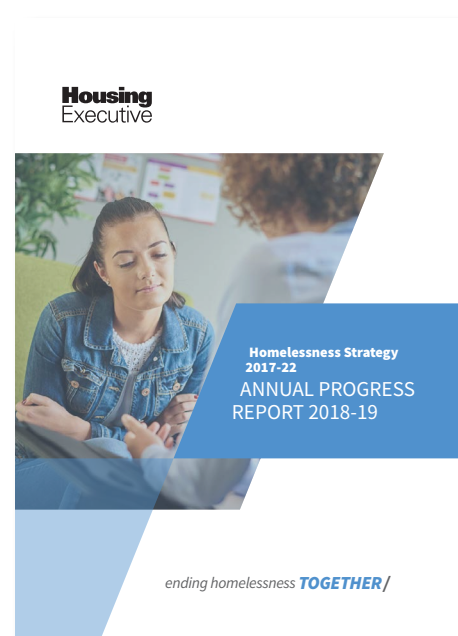
Partnership and planning has been key to the response so far. Close working with sectoral partners, our sponsor department; the Department for Communities, the Department of Health and the Public Health Agency have allowed us to quickly put plans and measures in place to protect and safeguard individuals. We strongly believe that this co-ordinated approach has saved lives.

To date there have only been a small number of positive cases within services but we cannot afford to be complacent. We continue to work collectively to ensure arrangements are in place to respond should a larger scale outbreak occur.

The real challenge though is ensuring that this collaborative approach which has been so effective to date and the speed and flexibility adopted during the emergency response phase can be built upon and maintained going forward. In terms of exit planning we view it as a reset rather than a rewind.

Furthermore our response to the pandemic is active and ongoing. The full extent of the longer term impacts of the pandemic remain to be seen however the Housing Executive expects that the impacts will be significant and long lasting. In addition both the environment we operate homeless services in and how these services are delivered will change permanently post COVID-19.

Many of the challenges which have been presented over the initial stage of the pandemic were already acknowledged in our Homeless Strategy **‘Ending Homelessness Together’** but the pandemic has brought into sharper focus the need to more effectively link housing, health and wellbeing at both strategic and operational levels.



Within this document we have set out a summary of the response so far; highlighted the challenges evident; but more importantly we have outlined the key priority areas which we, in conjunction with our sectoral partners, must consider as part of our review of strategic and operational plans to tackle homelessness. Putting these plans into operation will also require a considerable commitment across organisations from a resource and funding perspective. The impacts of the pandemic continue to unfold and will be long lasting. We will also have to respond to these impacts while in tandem dealing with any further waves in the pandemic.

Our vision for our Homeless Strategy was to end homelessness together; during these unprecedented times, we've proven what can be done collaboratively. It is collaboratively that we will plot the route through this changed environment to identify long term sustainable outcomes to the issue of homelessness.

AIM OF RESPONSE

The overall aims of our COVID-19 Homeless Response are:

- To safeguard as many homeless people as we can against COVID-19 ensuring they have the same chance as other vulnerable people to self-isolate and receive care, protection and treatment where necessary.
- To enable homeless services to work effectively and respond safely during the COVID-19 pandemic.

It was recognised from the outset that the pandemic could potentially impact on all aspects of the homeless system including how the Housing Executive delivers its statutory duties, how services operate and fundamentally on demand, supply and throughput in services. To achieve its aims the Housing Executive has sought, in conjunction with statutory partners and the provider sector, to introduce measures aimed at protecting the health of homeless people and reducing

wider transmission by assisting in ensuring social distancing guidelines can be applied. This approach aims to reduce the impact of COVID-19 on people facing homelessness and ultimately to prevent deaths during this public health emergency.

The adoption of these aims has led to such decisions as the 'Everyone In' approach to rough sleepers, the lockdown of night shelters and shift in focus from in-reach to outreach services, all to reduce the risk of the transmission of COVID-19 within the homeless and general population in Northern Ireland. In order to ensure homeless services can operate effectively and safely, decisions have been taken, for example, to provide our statutory homeless services by staff working remotely from home and the temporary suspension of Supporting People (SP) contract performance requirements, so that occupancy of accommodation services could be reduced in order to adhere to social distancing guidelines.

TIMELINE OF RESPONSE & KEY ACTIVITIES

We consider our response to be in 5 main stages with the key activities undertaken outlined in the tables overleaf.

In reality, the phases overlap with each other reflecting the need to have plans in place for the next phase in addition to committing to the associated actions, as we deliver on the current phase. In addition stage

4 has an indicative end date of 31st March 2021 as this reflects the current confirmed funding window. However, there is no doubt that the transition to new operating arrangements will extend well into 2021/22 and a further stage has recently been added to reflect the expected long-lasting impacts of COVID-19. The Housing Executive will need to make appropriate funding submissions to finance these plans.

Table 1: NIHE 5 Stages of response – Dates, Descriptions & Key Actions

| | Key Dates | Description & Key Actions |
|----------------|--|---|
| Stage 1 | Early March - NI in Containment Phase | <p>Contingency planning & Surge Plan development</p> <ul style="list-style-type: none"> NIHE Emergency planning arrangements commenced and dedicated project team established Work with statutory partners commenced to develop contingency plans in the form of a Homeless Surge Plan Identification of key services to be maintained throughout the pandemic – including: <ul style="list-style-type: none"> Statutory Homeless Assessments Out of Hours Service Homeless Accommodation Based Services Day Centres Rough Sleepers Services Young People’s Services (included in generic homeless) Approved Premises Floating Support Services |
| Stage 2 | March – July | <p>Phase 1 of NIHE response - Crisis response & management</p> <p>NIHE sudden onset of emergency response. Various key actions were delivered across the following key priority themes with a focus on temporary accommodation (further details on each are provided in Table 2 below):</p> <ul style="list-style-type: none"> Ensuring the provision of statutory homelessness and Out of Hours services Ensuring Sufficient Supply of temporary accommodation Development of IT tools to help improve our understanding of temporary accommodation supply, demand and throughput Providing Support to Rough Sleepers Supporting the Sector to enable homeless services to work effectively and respond safely Protecting homeless individuals New arrangements for multi-agency consultation and collaboration including with DoH, DfC, PHA and the provider sector Bidding for funding, ensuring effective payment processes and monitoring of expenditure |
| Stage 3 | August - November | <p>Phase 2 of NIHE response - Maintenance of services & Protection of homeless during lockdown</p> <p>Many of the measures introduced in Phase 1 (as outlined in table below) have continued into Phase 2. While the primary objective in Phase 1 was securing temporary accommodation and support to the sector, the focus in Phase 2 has extended to ensuring the necessary support is in place both for those individuals placed in that accommodation and to try and prevent homelessness where possible. A range of new measures have already been introduced as a result including:</p> <ul style="list-style-type: none"> The extension of the Phase 1 measures adopted in terms of additional temporary accommodation and support to the sector until the end of the financial year The introduction of shared housing options for young people moving from supported accommodation while ensuring social distancing guidelines are implemented The development of a Bespoke Facility for Temporary Accommodation in Belfast with appropriate support arrangements The approval of a range of housing led measures including wraparound support, support to those in the private rented sector and Housing First Assistance in dealing with small number of positive cases in conjunction with colleagues in Public Health Agency Ongoing consideration of the need for a dedicated isolation facility/units Work with the Public Health Agency on a COVID-19 Surveillance project to test staff and service users for COVID-19 and antibodies in 3 homeless accommodation projects |

| | Key Dates | Description & Key Actions |
|----------------|---|--|
| Stage 3 | August - November | <p>Phase 2 of NIHE response - Maintenance of services & Protection of homeless during lockdown</p> <ul style="list-style-type: none"> Process in place for the supply of Personal Protective Equipment (PPE) to homeless funded services where needed The distribution of reusable face-coverings for service users in conjunction with the Department for Communities Work commenced on plans in the event of localised or national lockdown arrangements as a result of the risk of further waves of the pandemic or local spikes In conjunction with the Public Health Agency assessments of health needs commenced for those over 55 living in hostels |
| Stage 4 | December 2020 – initially March 2021 | <p>Phase 3 of NIHE response – Post COVID-19 planning & Transition to ‘new normal’</p> <p>Whilst we are still focussed on maintaining services and protecting homeless individuals as lockdown restrictions ease we have already begun to consider the transition to the next stage of our response. Stage 4 will take us to the end of this financial year initially but it is important to note that many of the measures introduced will need to be extended into 2021/22 and therefore a further stage has been added. In the longer term we will also seek to make revisions to our key plans. These include the Homelessness Strategy, the Chronic Homelessness Action Plan and the Strategic Review of Temporary Accommodation. Significant resources will be required to finance these plans and we have commenced work with our Finance and Departmental colleagues on budgets to the end of the current financial year and also for next year.</p> <p>Our focus going forward will be to:</p> <ul style="list-style-type: none"> Support those who became homeless during lockdown or who become homeless in the period following lockdown Ensure clear transition and contingency plans are in place Reflect impacts of the pandemic in our longer term plans for example the Homeless Strategy, both in terms of the review of the existing strategy and the formulation of the next 5 year plan and the Strategic Review of Temporary Accommodation Ensure there is commitment to financing these plans |
| Stage 5 | April 2021 to March 2022 | |

Table 2: Summary of Phase 1 of NIHE response - Crisis Response & Management

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| <p>Ensuring the provision of statutory homelessness services & Out of Hours (OOH) Service</p> <ul style="list-style-type: none"> Systems put in place to ensure the continued delivery of statutory duties, while implementing government guidance on social distancing from early March 2020. Remote working arrangements in place for all Housing Executive staff providing homeless statutory services from 16th March. Delivery of homeless assessments either over the phone or in exceptional/emergency situations by appointment in our offices (from the implementation of lockdown arrangements on Monday 23rd March to Friday 9th August a total of 6,575 households presented as homeless (7,444 households over the equivalent dates in 2019; representing a 12% decrease in homeless presentations). Temporary accommodation continued to be provided where applicable with screening questions re COVID-19 symptoms to ensure appropriate placements. Guidance and training to support staff in the delivery of services during the COVID-19 period. Review of staffing levels and exploring use of Demand App for OOH service. Business Review of OOH service commissioned. | <p>Providing Support to Rough Sleepers</p> <ul style="list-style-type: none"> Provision of temporary accommodation and support to those rough sleeping ('Everyone In' approach). We identified and engaged with 61 rough sleepers; placing 44 in temporary accommodation. Development of a Memorandum of Understanding (MoU) with Departments for Communities and Health to assist those persons from abroad/ineligible for housing assistance who are rough sleeping. Mechanisms developed to monitor the provision of support to the individuals accommodated under the MoU. Work commenced with DfC in respect of potential legislative changes in respect of rough sleepers who are ineligible for housing assistance to continue to support those requiring it who were accommodated during lockdown, beyond the end of the financial year. This will also include the exploration of the issues related to extending this support beyond the current provisions specifically triggered as a result of a health pandemic. The issue of assisting repatriation was raised with DfC, who in turn have been liaising with Health, MHCLG and the Home Office. |
| <p>Ensuring Sufficient Supply of temporary accommodation</p> <ul style="list-style-type: none"> Increased supply of single lets - It was anticipated that there would be an immediate requirement for 100 additional properties for at least 18 weeks (subsequently increased -224 were acquired during Phase 1). Explored options to gain access to Single Lets outside normal business hours. Increased supply of Dispersed Intensively Managed Emergency (DIME) accommodation at Queens Quarter Housing - from 77 to 92 units. Increased supply of furnished NIHE stock as temporary accommodation - furniture and essential household items acquired to facilitate - 100 units. Increased supply/access to non-standard accommodation - either through block booking or retainer arrangements - 79 units acquired to date. Maximise availability and usage of standard accommodation and ensure effective throughput - ongoing liaison with SP and operational teams to maximise access to SP funded accommodation. Households who had accepted an offer of permanent accommodation were supported to move out of temporary accommodation. Temporary accommodation provision to over 3,000 households with staff proactively managing cases to ensure continued assistance to allay any fears and concerns associated with COVID-19. | <p>Supporting the Sector to enable homeless services to work effectively and respond safely (NB - some overlaps with Protection of homeless individuals theme)</p> <ul style="list-style-type: none"> Temporary suspension of contract performance management arrangements linked to occupancy, throughput and support provision under the Supporting People (SP) programme to allow providers to focus on implementing contingency plans and essential service delivery. Weekly multi-agency meetings (Mid-March to June) with officials from the Departments for Communities and Health, Public Health Agency, PSNI, Probation Board NI and Housing Executive (Homelessness & Supporting People) as well as representatives from across the sector. The development of Guidance for Homeless Providers (v1 issued 20th March; v2 issued 17th April, v3 issued 26th June). Homeless nursing team input (Health Trusts) and sharing of expertise on matters such as infection control (training material from the NI Social Care Council shared with providers 23rd March); guidance and advice on PPE requirements (issued in sector newsletter 10th April). Twice weekly conference calls are in operation with the PSNI in relation to domestic abuse. We are also linked in to the PSNI Preventing Harm teams. |

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| <ul style="list-style-type: none"> Development of IT tools to enable regular analysis of temporary accommodation demand, supply and throughput: Demand App - records all homelessness contacts including requests for temporary accommodation including household profiles, reasons for requests, outcome of requests and COVID-19 factors. Hostel Tracker App - updated with Provider information on occupancy of accommodation based services including service user details, support needs, length of stay and COVID-19 factors. | <ul style="list-style-type: none"> Liaison with the Departments of Justice and Housing Rights Service in relation to the 'Temporary Release of Prisoners Under Rule 27' (COVID-19 early release scheme) to ensure no-one is discharged into homelessness. Support for a Coordinator role to work on behalf of the sector acting as a vital bridge between Homeless Sector Providers and Statutory agencies primarily NIHE, the Public Health Agency, Health and Social Care Board and Department for Communities. Establishment of lessons learned - sector operations group. Support for an Emergency Relief Panel for recruitment of staff. Testing arrangements introduced for staff and service users (PHA). Support to access PPE. |
| <p>Protection of homeless individuals</p> <ul style="list-style-type: none"> Development and issuing of guidance for the sector (as outlined in supporting the sector theme) Testing for staff and service users (PHA) Homeless nursing team input (Health Trust) <p>Following guidance from PHA on the need for social distancing and social isolation a number of additional measures were approved and introduced including:</p> <ul style="list-style-type: none"> Temporary reconfiguration of 2 Night shelters - to minimise risk both services, as an emergency measure, were asked to extend their current services to provide longer-term bed spaces and provide additional support to individuals currently within their services. Emergency transport via the Welcome Organisation for homeless service user who may need to be moved from current location to self-isolation accommodation as taxi providers are reluctant to transport those symptomatic or isolating. <p>Of particular note has been the appointment by the Health and Social Care Board of a Regional Co-ordinator to oversee the COVID-19 response for the Homeless Sector. This has been coupled with dedicated Nursing Resources for Homeless being identified in each Trust area (NB this model is well developed in Belfast and less so outside of Belfast). This approach has facilitated:</p> <ul style="list-style-type: none"> Advice and guidance for the sector on infection control, social isolation requirements and PPE requirements Monitoring of homeless individuals for any symptoms and rapid response / advice where required Provision of necessary PPE Testing of symptomatic individuals which commenced w/c 30th March Testing for symptomatic key workers (or members of family) The development of specific health-led guidance for the homeless sector. | <p>Bidding for funding, ensuring effective payment processes & monitoring of expenditure</p> <ul style="list-style-type: none"> Provision of additional interim funding to SP providers for expenditure associated with implementing contingency plans. Interim £240k SP funding distributed across the sector. Wider bids for both Homelessness and SP were also developed and submitted to the Department of Finance on the 18th March. 3 separate bids made: <ul style="list-style-type: none"> 16th March £3.7m 27th March £388k 14th April £3.36m Of these £3.3m confirmed 6th April + £4.029m on 20th June (including £290k from DoH) Robust and timely payment processes introduced. Mechanisms put in place to report and monitor expenditure. |

PRINCIPLES

As we move through the stages of our response we want to assess the effectiveness of the emergency measures put in place as part of our initial response, identify any areas of weakness and learn from our experience so far to continue to evolve and improve the services and measures we have put in place. The following principles will help to guide the next steps and balance rapid responses with the right ones:

- **Evidence and Analysis** – improving our information base in order that decisions can be better informed by facts and data; throughout the Housing Executive’s COVID-19 homelessness response we have used detailed data analysis to ensure decision making and priority setting is informed by experiential evidence and relevant contextual evidence. We will continue to build on this evidence base to understand the impact of COVID-19 on the risk of homelessness for particular groups.

- **Person-centered approach** – treating each person as an individual and seeking to put in place the right response tailored to individual needs; seeking to adapt our services when needs change, new needs emerge or where there are gaps in service provision.
- **Expert-led** – we will be led in terms of public health responses by our colleagues in the Public Health Agency and by service user needs, by professionals working in the sector, including those working at the ‘coal face’ of service delivery.
- **Responsiveness** – ensuring that we are able to act quickly and positively to changes in need, supply and throughput in homeless services.
- **Collaboration** – building on the progress that has been made and ensuring effective structures are in place to deliver collectively.
- **Housing-led** - to provide accommodation and support as quickly as possible to people that are homeless or at risk of it.

IMPACTS OF COVID-19

AND HOMELESSNESS RESPONSE ON HOMELESSNESS TRENDS AND SERVICES

Homelessness trends have changed dramatically as a result of the pandemic and the measures adopted to contain and delay its transmission, particularly during lockdown. From 12th May with the publication of the NI Executive’s recovery plan and the commencement of the relaxation of social distancing measures, these trends continue to change. However the requirements to have in place crisis response arrangements remain. Over the course of the last 6 months we have seen changes in:

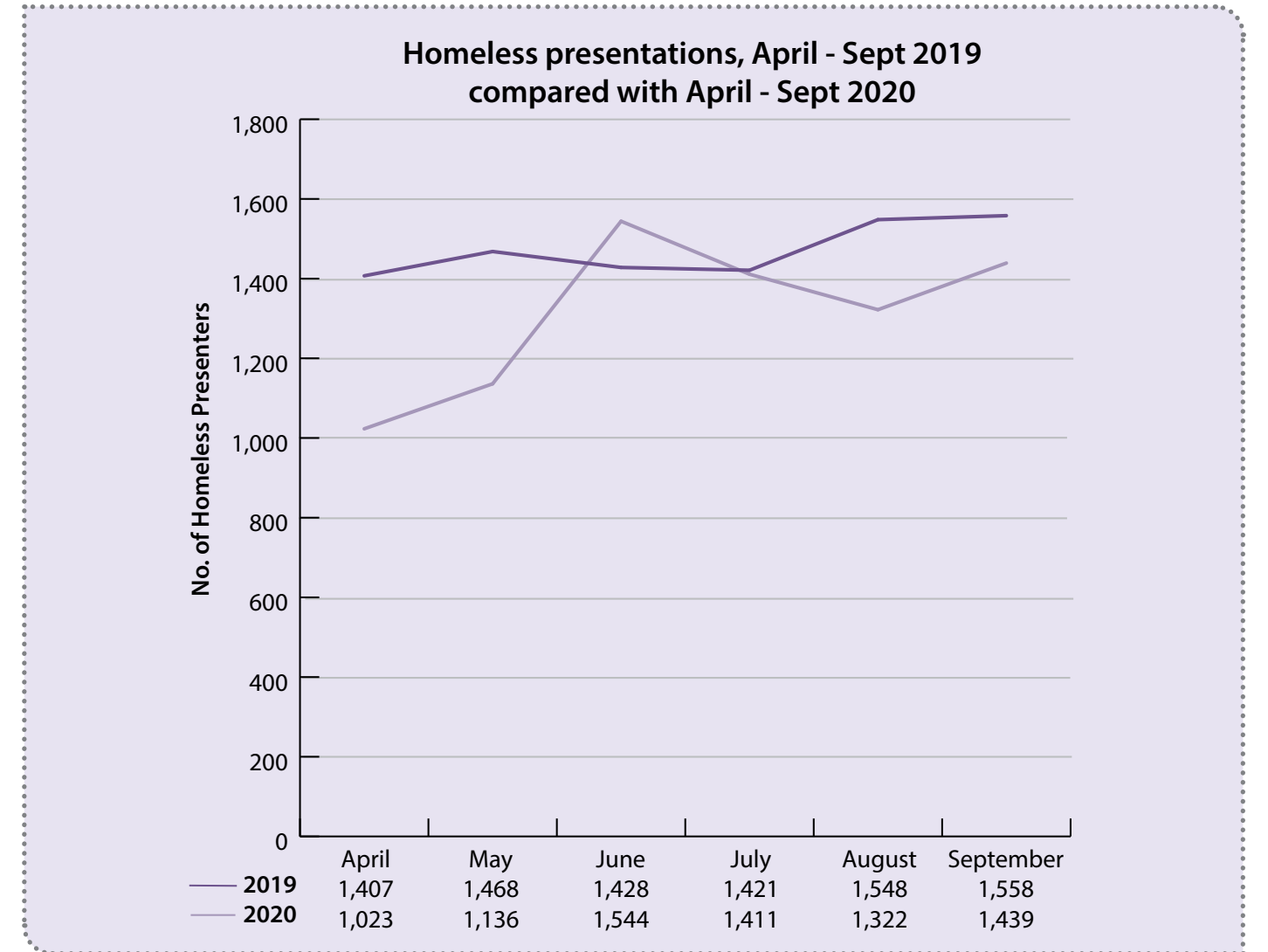
- The numbers and types of households presenting as homeless
- Reasons for homelessness
- The numbers and types of households requiring temporary accommodation
- The availability and throughput in temporary accommodation

We expect that some of the changes will be temporary, for example as support to mitigate the impacts of COVID-19 are removed or reduced; other changes will be longer lasting or permanent. Others remain uncertain as they are linked to any increases in the rate of infection of COVID-19 or in the event we experience further waves of the virus.

Critical to developing our Reset Plan has been an analysis of trends so far and an attempt to project how these will change over time and in turn how these changes will impact on the demand for homeless services. Planning our continued response will include prevention or mitigation measures where possible, securing of existing COVID-19 homelessness response measures in the longer term where required and the identification and implementation of additional measures to respond to new emerging priorities. This will include reflecting these priorities in our longer term strategic plans. It is stressed these plans are based on our current understanding of the impact of COVID-19 on homelessness and on modelling how this is likely to develop in the future, therefore this plan will be subject to continuous review.

The numbers and types of households presenting as homeless

“Overall numbers of presenters has reduced but is now returning to similar levels of previous years”



Overall the number of households presenting to the Housing Executive has reduced during and following lockdown when compared to the equivalent period last year. This reduction was at its most pronounced in April and May of this year. Overall presentations have decreased by 10.82% when 2020 is compared with 2019 (1st April-30th Sept). The difference was 27% and 23% in April and May respectively. The numbers presenting monthly are now returning to similar levels experienced in previous years.

It would appear that the numbers presenting were directly correlated with the announcement of lockdown and the specific measures introduced at that time. As these measures have been relaxed presenter numbers have started to increase again. Assuming we do not enter into a further national lockdown we expect presentation numbers to return to similar levels as in previous years and we may actually see a spike in presentations for particular categories of homelessness. This is the experience and/or forecast of many other European countries.

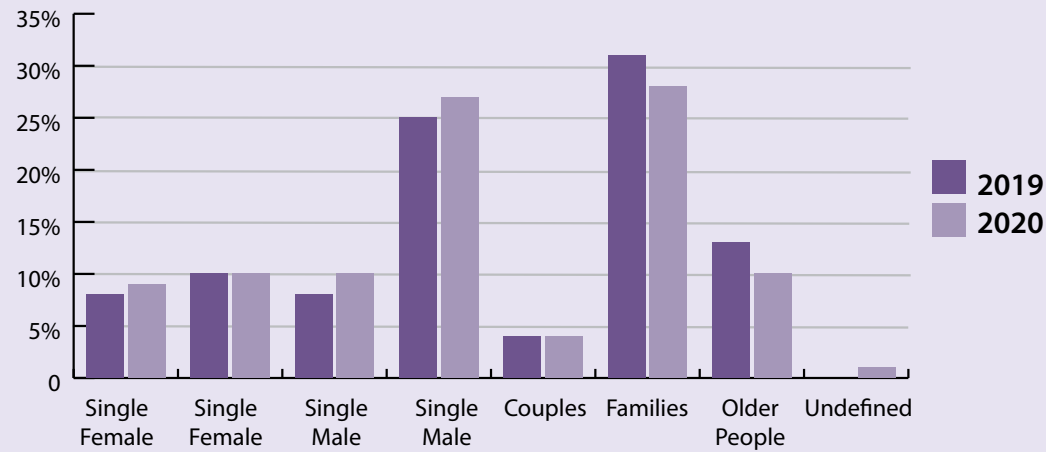
Whilst overall presentations have decreased the number and proportion of presentations across household groups has varied.

“A reduction in the number of presenters across household groups with the exception of young people where there has been an increase”

The proportion of presentations of families, couples and older people (60+) has decreased; in 2019 families accounted for 31% of all presentations in 2020 they accounted for 28% and accordingly older people (60+) presentations has decreased from 13% to 10%. Conversely there has been an increase in presentations from young people; in 2019 young people (16 – 25 year olds) accounted for 16% of all presenters in 2020 this increased to 19%. The proportion of males aged 26 – 59 has also increased from 25% in 2019 to 27% in 2020. It should also be noted that the actual number of presenters across all household groups decreased from 2019 to 2020 except for young people aged 16 to 25 years where an increase occurred; from 1,419 in 2019 to 1,544 in 2020.

In terms of actual numbers, as already highlighted already the number of presentations has decreased and this has been reflected across all household groups with the exception of young people aged 16-25 years, where there has been an increase for both single females and single males; with the increase being greater for single males.

Presentations by household group as a percentage of all presenters April - Sept 2019 compared with April - Sept 2020



The data suggests that young people have been significantly impacted by COVID-19 from a homelessness perspective. Young people have different experiences of, and ways into, homelessness than adults. They are frequently in ‘hidden’ homeless situations – staying with family, friends or other shared living arrangements – and lockdown measures, alongside loss of income, have seen many of these arrangements break down. Family tensions – always a key driver of youth homelessness – have also been exacerbated.

We expect that these impacts on young people will continue and be potentially further compounded as some of the measures such as the Coronavirus Job Retention Scheme (furlough scheme) and protection for private renters (Private Tenancies (Coronavirus Modifications) (Northern Ireland) Act 2020) are removed or reduced. Now and in the longer-term, the Reset Plan will prioritise youth-specific responses to address the major repercussions of COVID-19 on young people experiencing, or at risk of, homelessness.

Reasons for homelessness

“The top reasons for homelessness since lockdown have been the breakdown of sharing and family dispute”

The reason for homelessness has changed during the pandemic, **whilst the top 5 reasons remain the same the order and proportion of these has changed.** The primary reason in 2019 was accommodation not reasonable but in 2020 the primary reason for presentation is sharing breakdown /family dispute.

The most significant changes in terms of the percentage of presenters has been in respect of accommodation not reasonable which in 2019 accounted for 25% of all presenters and in 2020 this accounts for only 19% of presenters. Loss of private rented has also seen a significant drop from 14% to 10%. Conversely sharing breakdown / family dispute has increased from 22% of presentations in 2019 to 27% of presentations in 2020. Neighbourhood harassment proportions have also increased during the pandemic; in 2019 they accounted for 9% of presentations and in 2020 this has increased to 11%.

Top 5 Reasons for Presentation April - Sept 2019



- 25% Accommodation not reasonable
- 22% Sharing Breakdown/Family Dispute
- 14% Loss of Rented Accommodation
- 10% Marital Relationship Breakdown
- 9% Neighbourhood harassment

Top 5 Reasons for Presentation April - Sept 2020



- 19% Accommodation not reasonable
- 27% Sharing Breakdown/Family Dispute
- 10% Loss of Rented Accommodation
- 11% Marital Relationship Breakdown
- 11% Neighbourhood harassment

“The number of rough sleepers in Northern Ireland is significantly less than in other jurisdictions of the UK although NI also adopted the ‘Everyone in’ approach to accommodate these individuals”

NI has historically had lower levels of rough sleeping than in other jurisdictions of the UK, at the NI street estimate; which includes street counts in three locations conducted in November 2019 and estimations from elsewhere, the rough sleeper count for 2019/20 was 36; it is accepted that this is a snapshot at a point in time. It should also be noted that this methodology from Homeless Links is the same as that used in other jurisdictions. Our core objective of protecting and supporting all people experiencing homelessness included those who at the commencement of the pandemic were rough sleeping (including those ineligible for housing assistance). The ‘Everyone In’ approach sought to minimise the risk of those individuals contracting or spreading COVID-19. In conjunction with sector partners, including assertive outreach in Belfast, all identified rough sleepers were engaged with; 46 of whom have been accommodated in temporary accommodation, including 37 who were ineligible for housing assistance. As at the end of September 16 former rough sleepers remain in temporary accommodation. The vast majority of these individuals were identified at the outset of the pandemic with only a small number being identified since. There were a number of individuals who wished to return home and were supported to do so by Housing Executive staff, who liaised with various consulates and the Red Cross to access funding; to facilitate their repatriation. These rough sleepers have been provided with a range of support including practical support to meet their basic needs, temporary accommodation and advice and assistance to explore longer term housing options, as applicable.

The numbers and types of households requiring temporary accommodation

“At its peak the demand for temporary accommodation was double that of 2019”

Despite the decrease in homeless presenters, the numbers requiring **temporary accommodation placements** during the pandemic has increased significantly. There has been an overall increase of 52% in the number of households placed between April and September in 2020 (2,316) compared with 2019 (1,521). The increase in placement of young person (16-25 year olds) households is even more significant with the percentage increase between April and September 2020 and 2019 being 110% (2020: 614 and 2019: 293).

The availability and throughput in temporary accommodation

“Availability and throughput in standard temporary accommodation has been reduced due to social distancing and self-isolation requirements, necessitating an increase in the use of non-standard accommodation”

The availability of standard temporary accommodation provision has not increased in line with the increased demand for temporary accommodation. In fact the number of available units of temporary accommodation within SP funded hostels has decreased; with the requirements to safely comply with social distancing and to facilitate self-isolation within buildings. The supply of DIME accommodation has increased by 32% (from 77 to 102 units); single let provision has increased by approximately 280 units and 100 additional units of furnished NIHE stock has been added to the temporary accommodation portfolio. However despite these additional units of temporary accommodation demand is greater than the supply of temporary accommodation and so it has been necessary to use non-standard accommodation (hotels and B&Bs). In order to ensure access to non-standard accommodation booking arrangements both in the form of block bookings and booking on a 20% retainer basis if rooms are unoccupied have been used.

Throughput has also been significantly impacted by COVID-19 as a result of a decrease in allocations within social housing; this has resulted from a range of factors including a pause in Change of Tenancy (COT) repairs during lockdown, the introduction of new maintenance contracts within the NIHE and the longer time period required to safely facilitate inspections and viewings. Terminations have also decreased which again has had an adverse impact on the ability to facilitate access to a social tenancy from temporary accommodation.

LESSONS LEARNED

Reflecting on the pandemic to date and the homeless specific response in Northern Ireland it is clear that there are a number of lessons. Whilst our response to the pandemic continues and it is inevitable that with the benefit of hindsight other lessons may become apparent we have sought to reflect on learning and tailor our approach in subsequent phases based on learning from earlier phases.

As well as a Multi-Agency Group, an Operational Working Group was also formed from representatives of homeless service providers and a series of meetings held through May and June. This group discussed how the sector responded to COVID-19, how operations had to adapt and what changes they would like to see moving forward. Views were also gathered from the wider sector through a series of surveys. Learning from this feedback was pulled together into a short report (COVID-19 Homeless Sector Experiences and Responses). The main areas evident from both our internal reflections and from the sector to date are summarised below under broad headings:

Initial response:

- The commitment of all stakeholders involved was critical in terms of the speed and consensus of approach developed during our collective initial response. There was early consensus on the key actions that needed to take place and a willingness of all involved to act in a flexible and responsive manner.
- A dedicated regional lead from PHA was appointed to coordinate the response across homeless services across all of NI. This single point of contact was fundamental in being able to deliver a consistent approach across all Trust areas. Ensuring consistency across Trusts has been an issue in the past given their differing structures, processes and resources in each area.
- The measures implemented and actions taken collectively had a positive impact in reducing the risk of transmission in the homeless sector – for example via measures such as the ‘Everyone In’ approach; the focus on outreach services; the flexibility of service delivery and the reconfiguration of day centres and night shelters.
- Dedicated and timely funding was crucial to the response.
- The value of homeless services as part of the wider health and social care system should be recognised. In particular the impact this initial response had on preventing outbreaks and hospital admissions at a critical time for the NHS.

Services:

- Adapting services to comply with social distancing and self-isolation requirements has been a significant challenge in some services particularly accommodation based services with shared rooms/ facilities. Reduced capacity to reflect social distancing requirements has impacted on income levels for some services and this is likely to remain a challenge so long as social distancing remains in place.
- Some providers are considering permanent changes to the physical layout of accommodation based services as a result and the pandemic has brought into question the suitability of some types of accommodation and arrangements in an environment with highly contagious pathogens. Moving forward it will therefore be important for providers, in conjunction with commissioners and with Health input, to work collectively on any re-provisioning/remodelling plans.
- The necessity to place people in non-standard accommodation has meant that suitable support has not always been in place for some individuals as early as we would have liked. The need for tailored support for those placed in dispersed and non-standard accommodation has become increasingly apparent.
- The necessity to ensure the continued delivery of support to vulnerable individuals in alternative formats has been apparent throughout the pandemic. Providers have tailored many in-reach services to a model of assertive outreach allowing valuable support to continue to be delivered. Ongoing support to those in dispersed accommodation remains a key priority.
- The development and updating of tailored Guidance for Homeless Providers has proved valuable throughout the pandemic – it is important that this continues to be updated to reflect changing guidance – for example the opening up of Day Services, testing, etc.

Staff:

- Staff, both in the NIHE and across the sector, have been flexible and adaptable in adopting new work patterns, working from home and dealing with the additional pressures and challenges brought about by the pandemic.
- There are concerns around response fatigue and the impact of the pandemic on staff wellbeing and

resilience to deal with the prolonged period of the pandemic. We are considering what support we can provide internally for staff in this regard and also what funding we can make available across the provider sector to assist in supporting staff wellbeing.

- The provider sector has highlighted concerns re pay and benefits in the sector and the ability to retain staff in the sector with a key ask that there is an acknowledgement that homelessness services are providing an essential public health role and that staff terms and conditions should reflect this.
- Challenges were evident in terms of continuity of access to PPE however these have now been resolved. The issue however did highlight inconsistencies across different Trust areas.

Service users:

- The collective efforts to accommodate all rough sleepers through the ‘Everyone In’ approach, has been rightly praised.
- In terms of referrals the pandemic has also reinforced the importance of the central access project which had been a priority before the emergence of COVID-19. A streamlined referral process with a central access point with a comprehensive assessment of need and appropriate placements are a shared priority from both the NIHE and the provider sector.
- In terms of support needs, with the ‘Everyone In’ approach and other new referrals, providers and Housing Advisors are reporting that customers are increasingly presenting with very complex needs. This had been a trend even before the pandemic, with some hostels refusing referrals when individuals’ needs were too complex for them to manage. A key issue is that many of these individuals struggle to access statutory mental health and addiction services. This reiterates the need for closer links with health and nursing services to respond to these service users, particularly as demand from people with complex needs is likely to continue throughout the pandemic and beyond. We welcome the extension of the dedicated Homeless Nursing resource across other Trust areas and view this as an acknowledgement of the value of this model of support.

Structures & partnership working:

- The emergency arrangements implemented in response to the COVID-19 situation proved more effective than some of the existing inter-departmental structures. Consideration needs to be given to the most effective structures for delivery going forward.
- Partnership working has been key; the ability to respond and early engagement with stakeholders was crucial; throughout the pandemic responses that included internal and/or external stakeholders have been the most effective and there is a desire all round to continue the efforts of the cross-sector working group.
- Communication has been paramount in responding to the situation, this includes communication with customers, providers, internal and external partners and with staff.
- Internally the need to formalise arrangements became apparent and a formal project structure was initiated in June. The intention of this approach being to ensure effective governance and compliance with established approval mechanisms (including delegated limits of authority) whilst at the same time allowing rapid decisions to be made given the fast changing environment. The Public Health Agency is represented on the project steering group and we hope to maintain and build on these close working relationships.

Data & technology:

- Existing data has not always been available or sufficiently accurate/reliable in order to make informed decisions; for example, it has been necessary to create two additional IT systems (Demand and Provider Apps) in order to furnish the team with sufficient data on supply and demand for temporary accommodation to facilitate decision making. We will seek to build on these and mainstream them to reduce bureaucracy for providers and improve our data going forward.

MODELLING ASSUMPTIONS

It is clear that the impact of COVID-19 on the homeless system and the wider housing system will be long lasting and in some cases permanent. Our main assumptions are set out below and relate to:

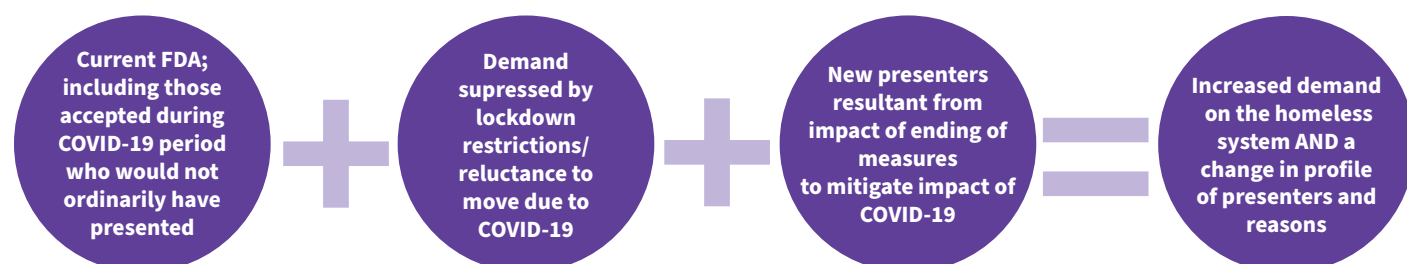
- Homelessness trends
- Temporary accommodation
- Delivery of other homeless services
- Contingency arrangements for uncertain events

In terms of our current assumptions on how the pandemic is likely to progress we are working closely with the Public Health Agency to understand the latest thinking from a health perspective. Initially it had been felt that a second wave would present in October/November. In September we began to experience small localised outbreaks. The number of positive cases to date has been relatively low – with 22 positive cases in homeless services (both accommodation and floating support) as of 8th October. Positive cases have been more prevalent among staff (15 of those positive cases) than service users (7 positive cases). Tragically there has been one death of a member of staff in a homeless accommodation service. As the numbers in the general population testing positive begins to rise and hospital admissions and deaths increase we anticipate a similar impact in homeless services. A recent testing pilot undertaken by PHA in 3 homeless hostels also indicates a low level of COVID-19 antibodies in the homeless population in Northern Ireland (<1% against 3-6% estimated in the general population at that time). While the low number of cases is a testament to the effectiveness of the measures taken to reduce the risk of transmission in the homeless sector, it also indicates that the homeless population remains highly vulnerable to any future exposure to the virus and therefore the continued potential risk for service level outbreaks. In addition, the continued operation of individual services could be placed in jeopardy by any impacts of COVID-19 on staffing levels. In the medium to long term we assume that it will only be when a vaccine is available to the wider public that services will be able to return to normal and consideration given to removing the measures introduced. We envisage that even when a vaccine becomes available this will be initially prioritised for health care staff and there will be some time delay in availability to the wider population including the homeless.

In terms of demand for homeless services we anticipate an increase, as learning from other countries indicates that those who may have temporarily not presented due to specific reasons (e.g. as a result of domestic abuse) or others households protected due to the measures introduced (e.g. those living in the private rented sector) will present at a later date. The wider societal impacts of COVID-19 will also lead to an increase in new presenters (new into homelessness). It is also expected that the current most common reason, of breakdown in sharing will remain prominent, as there will be a reluctance to share, as social distancing measures remain and until a vaccine is developed.

The following section outlines the assumptions relating to homeless presenters; both in respect of levels of demand and the profile of those presenting. This is based on the trends to date, our current understanding of anticipated pandemic impacts and the experiences from elsewhere. Obviously, these assumptions may change as both the pandemic itself and national responses to it continue to evolve.

Homelessness trends



Homeless presentations

As outlined earlier in this document, the numbers of those presenting and the reasons for homelessness are different from previous years and it is assumed that these changes are as a direct result of COVID-19 and the specific measures put in place to contain the virus. Assumptions are that homeless presentations will continue to be directly influenced by the infection rates of COVID-19 and specifically the measures adopted to contain the transmission of COVID-19. Furthermore, the impact of the pandemic is likely to be substantial, long lasting and will result in a general increase in homeless demand and a changed profile of presenters and reasons for presentations, even once containment measures have been relaxed and a vaccine developed against the virus.

Presentation numbers and the reasons for homelessness will continue to be influenced by the progression of COVID-19 and the responses adopted to contain its transmission.

Homeless presenters dropped during the initial lockdown period, with the lowest levels being during April and May, the level of homeless presenters in June and July returned to levels similar to pre-lockdown; in tandem with the start of the relaxation of social distancing measures. It is expected that the number of homeless presenters will steadily increase to levels equal or greater than pre-COVID-19 but with potential reductions in numbers linked to any further lockdowns.

It is assumed that if there are further waves of COVID-19 and lockdown/restrictions implemented that the impact on presenters is likely to be similar to the initial lockdown period; thus a significant decrease in the number of presenters on pre-COVID levels. It is also possible that levels may not reduce as low as during the initial lockdown period, as this will be impacted by public perception of the severity of the virus and their assessment of the associated risk to them of transmission. Evidence would suggest that the numbers in the general population not adhering to social distancing measures has increased over time and within the homeless population specifically we have seen an increase in street activity as individuals return to pre-lockdown behaviours.

It is assumed that if there are localised lockdown/restrictions that the impact on presenters is likely to be similar to the initial lockdown period; thus a significant decrease in the number of presenters on pre-lockdown levels. Where lockdown is localised this impact will not be felt across the entire homeless system but rather within the geographic area impacted.

The number of presentations due to loss of private rental decreased during the pandemic but it is assumed this is a temporary impact and that these will increase to above pre-COVID levels when mitigation measures are ended i.e. when the protection in respect of NTQ for private rented tenants is ended.

The number of presentations and acceptances due to accommodation not reasonable significantly decreased during the lockdown period but it is assumed this is a temporary impact and that these will increase to reflect trends in previous years. It is also assumed that presentations linked to accommodation not reasonable may take longer to return to pre-lockdown levels than with other presentation reasons; this assumption is based on the fact that those presenting due to accommodation not reasonable are predominantly older people or those with physical health vulnerabilities and the perception of risk of moving is likely to be greater within these groups.

The number of presentations due to domestic abuse has increased during the COVID-19 period and it is likely to continue to increase to above pre-lockdown levels, as it is assumed that some victims of domestic abuse may have been reluctant to move or felt prohibited from moving during lockdown, but as measures have been lifted presentations have increased as a result. Domestic abuse helplines have noted that incidents have become more frequent, more severe and more dangerous during the Coronavirus pandemic. They have also noted that a perceived loss of control can be a trigger for abusive behaviour and that during lockdown perpetrators are likely to have experienced an increased sense of control and that this could be threatened by the easing of lockdown, resulting in increased abuse which could result in subsequent homeless presentations.

Break down in relationships and breakdown in sharing has increased during lockdown and it is assumed that this will remain high.

Neighbourhood harassment as a presentation reason also increased significantly during the lockdown and it is expected this will remain high for quite some time, as households are spending more time at home; due to furlough, being encouraged where possible to work from home and restrictions on travel, etc.

Whilst the number of rough sleepers was initially reduced due to the 'Everyone In' approach and the efforts of assertive outreach services (in Belfast) and NIHE staff to get those individuals into temporary accommodation, recently there has been an increase in street activity and a return by some to rough sleeping. It is assumed that, as perceptions of risk change, there will be a continued increase in street activity and rough sleeping and small numbers of additional rough sleepers will continue to be identified.

Homeless groups

The impact and trends in regards to the number and proportion of those presenting and being accepted as homeless during the pandemic has varied across all household groups. The most variation from the general trend is in respect of young people; presentations have decreased overall during the pandemic, however the level of presentations of young people has increased. The pandemic has also had an impact on presentation reasons and this correlates to the varying impact on different household groups; with some household groups being more likely to present linked to the presentation reasons that have been noted as increasing during the pandemic.

Whilst presentations generally have decreased during the pandemic, this has not been the case for young people; this household group has seen a significant increase in presentations.

It is assumed that young people will continue to be disproportionately affected, as the trend to date would suggest they are more likely to be impacted by the ending of the furlough scheme and/or become unemployed due to the pandemic. They are also the group most likely to be sharing and thus impacted by breakdown in sharing or unable to find sharing arrangements in the current climate.

It is assumed that older people (60+) presentations will remain low in the short to medium term, but longer term will return to pre-lockdown levels, as older people were identified as a vulnerable group in respect of COVID-19 and so the risk / perception of risk of moving is greater within this group.

It is assumed that presentation of females (in terms of singles and small females with 1 adult) is likely to increase; linked to the anticipated increase in domestic abuse cases; it is acknowledged that both males and females are victims of domestic abuse however the incidence of those presenting for this reason is more prevalent amongst females.

It is also anticipated that there will be an increase in families presenting for a period when mitigation measures are ended i.e. when the protection in respect of NTQ for private rented tenants is ended and when the furlough scheme ends (31st October 2020). These may then return to pre-lockdown levels after a period of time.

It is assumed that single households will continue to be the most significant and growing customer group, as this group is likely to be impacted by financial hardship, rising unemployment and growing social problems, including worsening mental health issues, addictions and offending behaviours, to a greater degree than other household groups.

Whilst the number of rough sleepers was initially reduced due to the 'Everyone In' approach and the efforts of assertive outreach services (in Belfast) and NIHE staff to get those individuals into temporary accommodation, recently there has been an increase in street activity and a return by some to rough sleeping. It is assumed that continued efforts will be needed to engage with these individuals to ensure they elect to access accommodation and support services to meet their needs.

Temporary accommodation

At the point in time when COVID-19 started to impact on homeless services, temporary accommodation provision was already under pressure. An analysis produced as part of the Housing Executive's Strategic Review of Temporary Accommodation baselined the supply and demand position at the end of 2019. This indicated a very clear increasing usage of *non-standard accommodation* suggesting a need to increase the supply of *standard* temporary accommodation in order to meet the demands from homeless households. It also highlighted a mismatch between the placements service users were occupying and their support needs. This analysis particularly pointed to an undersupply of 'less supported' dispersed accommodation for service users to move on from Supporting People funded accommodation as well, of course, as the shortages of permanent accommodation options for people to move to. Evidence showed a significant proportion of service users occupying supported accommodation who now had no or low support needs, while other customers with a higher level of support needs were increasingly occupying non-standard accommodation. It also pointed to an inadequate supply of accommodation for chronic complex service users who may benefit from a Housing First model. In summary, the approach to temporary accommodation placements appeared to be limited to meeting accommodation needs rather than aligning accommodation and housing support needs.

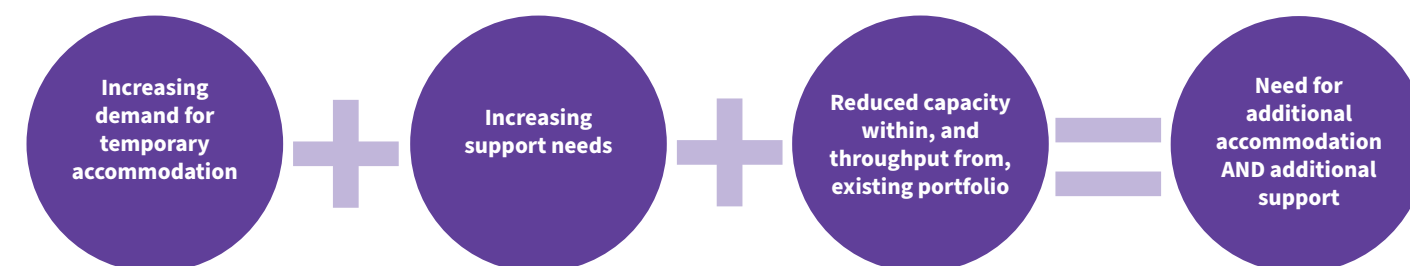
COVID-19 response plans for temporary accommodation made in mid-March were made modelled on the following assumptions:

- Demand for temporary accommodation would increase
- Supply of temporary accommodation would decrease. It was anticipated that capacity within voluntary sector hostels would reduce if staffing levels reduced and also that restrictions would be introduced to safely facilitate social distancing and self-isolation within buildings
- Throughput would be impacted by the reduction in social housing relets (the main destination for households leaving temporary accommodation)

A Temporary accommodation data review and summary report was completed in June 2020 to provide a COVID-19 baseline position on demand, supply and throughput. The report showed a huge impact as a result of the COVID-19 pandemic on the homelessness landscape and that the planning assumptions were correct; temporary accommodation placements trebled during the first quarter of 2020 compared with the same period in 2019.

The goal should not be, to go back to the pre-COVID position; it should be to work towards a better position. This better position would ultimately offer **the capacity to provide all customers with accommodation which meets both their accommodation and support needs at the point of that need.** It would see less reliance on non-standard accommodation and a temporary accommodation portfolio which better matches the needs of homeless households. Additionally, it would offer improved information and systems to make both frontline delivery and strategic planning easier. A Strategic Review of Temporary Accommodation was commenced in January 2019 with a view to mapping an action plan towards the above goal. Many lessons have been learned as a result of the pandemic which must be factored into future plans. The pandemic has highlighted the need to accelerate the changes needed to achieve the best possible outcomes for homeless households.

This section outlines modelling assumptions relating to temporary accommodation demand, supply and throughput based on our current understanding of anticipated pandemic impacts.



It is clear that in the course of the pandemic to date, those presenting to the Housing Executive as homeless with reasons which are typically correlated with a need for temporary accommodation have increased (such as breakdown of sharing/relationships, neighbourhood harassment, domestic abuse, etc.) whilst other presentations which do not normally require emergency accommodation, such as 'accommodation not reasonable', have decreased. The assumptions, therefore, which have been described as applicable to homeless presenters have informed the assumptions on temporary accommodation demand.

Demand for temporary accommodation

Having peaked in April and May, demand for temporary accommodation reduced in June but has remained fairly static since then and continues to exceed pre-lockdown levels. It is expected that this elevated demand will continue with some fluctuations linked to localised lockdowns, further waves and/or COVID-19 outbreak clusters.

It is expected that demand will continue to be primarily from single person households and that young people (under 25) will continue to be disproportionately impacted.

Demand is also expected to be linked to protective measures implemented by government such as the furlough scheme and the restrictions on evictions. While the measures remain in place demand will be suppressed, when lifted demand will increase again.

The 'Everyone In' approach will continue to be our aspiration thereby increasing demand for temporary accommodation.

Housing First and Housing Led approaches will reduce repeat demand and multiple temporary accommodation placements.

It is assumed that targeted prevention initiatives offering intervention and personal development models will continue to be supported and will suppress some demand for temporary accommodation.

Society is bracing itself for difficult times over the coming months and years as the longer term impacts of this public health crisis become clearer. Along with financial hardship, rising unemployment is likely to bring with it growing social problems, including worsening mental health issues, addictions and offending behaviours. These issues often go hand in hand with homelessness. It can therefore be predicted that the challenges facing our customers and partners across the sector may well grow.

Supply of temporary accommodation

Transmission of the virus is currently on the rise again following a short period of relative stability. There has been an increase in positive cases within the staff population of accommodation based services. Increasing numbers of staff are having to self-isolate either because they have contracted the virus or because they have been in contact with someone who has. This means we are currently experiencing a reduction in/or closure of some services and also have had to relocate some service users where services have closed down for a period. It is expected that these types of scenarios will feature repeatedly over the coming months.

It should be noted that the majority of funding secured for the Housing Executive's COVID-19 homelessness response was in relation to expanding the temporary accommodation supply and has only been secured until end of March 2021. However, a funding tail through 2021/22 is expected to be required to reflect both the continued crisis response assuming that measures are still required to limit the transmission of the virus and the lasting impacts of the pandemic on the homelessness system including the need to provide additional temporary accommodation to meet demand.

Restrictions in hostels/supported accommodation in terms of the number of available units are expected to continue to fluctuate linked to localised outbreaks, staff absences and requirements for social distancing and self-isolation. It is also important to note the impacts on staff resilience if the pressures experienced during these last six months are sustained or increased. This could also impact on the capacity of services in terms of staffing levels.

It is expected that the 100 Housing Executive properties which were furnished and made available for temporary accommodation will continue to be available. However, the scope to increase this supply is limited due to a return to allocations of 'permanent' tenancies.

The use of Housing Association vacant stock to meet temporary accommodation needs is being considered and may add to the supply options during the pandemic.

Any further increase of Dispersed Intensively Managed Emergency (DIME) accommodation will require procurement; the intention is to seek to provide this type of accommodation in North and South Regions.

The Housing Executive has acquired 25 units of additional bespoke temporary accommodation via a social enterprise in Belfast which is linked with in-reach support. To deal with expected continuing demand we will explore the acquisition of further additional accommodation via leasing and/or purchasing. Small units in appropriate locations will be prioritised rather than large united facilities in order to minimise housing management issues. Priority will also be given to ensure that appropriate support arrangements are aligned to the accommodation provision.

It is intended that we will gradually reduce our reliance on non-standard hotel/B&B accommodation although it is noted that in order to respond to localised fluctuations it is likely that this supply option will continue to be needed in the medium term. Again preference will be given to smaller united facilities and in locations where wraparound support can also be provided to residents.

Reflecting the increased demand from young people, provision of shared single lets and/or tenancies for young people will need to be expanded to meet the needs of pairs of young people moving on from supported accommodation on their path to independent living. This will free up spaces within supported accommodation for those with greater support needs. Work towards community hosting (taking account of COVID-19 impacts), Housing First and Flexible Outreach services for young people will continue to be progressed.

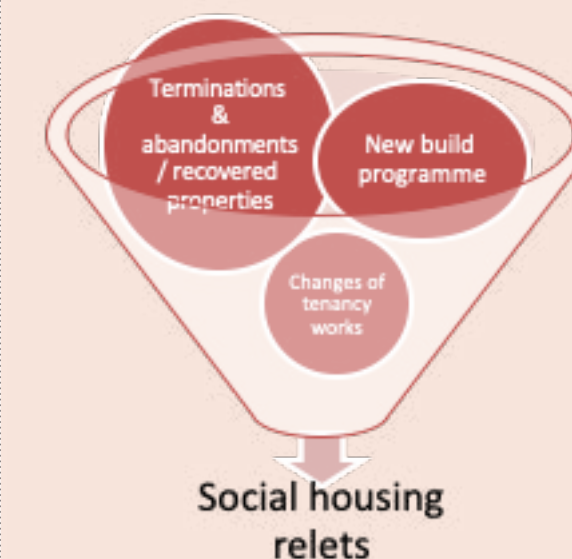
Acquisition of additional single lets will continue until 315 have been secured. Beyond March 2021, it is expected that these will be mainstreamed. It will be important to ensure the availability of floating or wraparound support which can be tailored to service user needs in order to sustain placements within this accommodation.

Night Shelters will remain locked down in order to minimise community transmission of the virus throughout the pandemic.

Throughput from temporary accommodation

Reduction in social housing relets - it has been estimated that 70% of households leaving temporary accommodation move on to permanent social housing. When lockdown was introduced in March this year, a huge reduction in social housing relets followed. Due to restrictions, contractors could not complete new build schemes, change of tenancy works and terminations by tenants substantially reduced. All of this contributed to an 85% reduction of social housing relets in April and May 2020 when compared with the same period in 2019. Gradually as restrictions lifted in June relets have been increasing again but remain at substantially lower levels than 'normal'. Terminations of tenancies have remained low suggesting that reduced relets can be expected for the short to medium term. It is only to be expected that tenants will choose to remain in their homes during this period of uncertainty rather than actively seek to move to another tenure or location. The knock on of this reduction is a reduction in turnover of temporary accommodation. This is one of the contributing factors to the reduced availability of accommodation within the existing temporary accommodation portfolio, necessitating the acquisition of additional properties to meet the demand. It is anticipated that it will be some months before relets reach 'normal' levels again. Localised lockdowns or further waves of the virus could result in further stalling of the housing system.

Options to support customers into the private rented sector will be explored to enable move on to a more permanent housing solution where possible. Projects offering this type of service will be expanded for all service user groups. Longer term leasing options in the private rented sector will be explored so that housing capacity can be increased in order to improve throughput in temporary accommodation.



The newly developed IT tools will help us to move service users through the temporary accommodation portfolio in line with their support needs. Where a customer in supported accommodation no longer requires support, efforts will be made to move them on to single let type accommodation. This will then free up spaces within supported accommodation for service users presenting with greater support requirements.

Delivery of other homeless services

The COVID-19 pandemic has had a significant impact on how we support people experiencing homelessness; this includes the Housing Executive's own statutory homeless services, our broader Housing Solutions and Support service as well as the range of vital services provided by our sectoral partners.

The Housing Executive and its partners moved quickly to get people off the streets and into safe accommodation to protect people's health. In services where it was difficult for people to practice social distancing or self-isolation, such as night shelters and day centres, these organisations quickly took action to alter how they delivered their services. Advice and floating support services were also reconfigured to enable this to happen. We sought to ensure our services were able to operate safely including from the perspective of those staff delivering the services. This has included changing working practices, provision of PPE and support to staff from a personal resilience perspective.

In the Stage 2 of our homelessness response, we sought to ensure that all homeless people and in particular those provided with emergency accommodation during the pandemic also have access to the right support. Our longer term plans must now consider how we make the most of current opportunities, to consider how we create more long-term housing options for people.

Day centre services had to adapt their services to reduce the risks of transmission with services largely being unavailable in the first 6 months of the pandemic. Providers have adapted their services from largely in-reach models to outreach support. Additional funding has been provided to ensure wraparound support can be made available based on need and given that many support providers are providing support above and beyond what they normally do – e.g. providing food to those self-isolating, delivering medication and making mobile phones available so service users can keep in touch. It is anticipated that there will be a phased relaxation of the day centre restrictions (subject to guidance and any local restrictions) and demand for services will remain high.

There has been additional demand on outreach services from those placed in non-standard / dispersed accommodation / single lets with support needs given the pressures on supported accommodation. Support is likely to need to remain in place for these individuals until more permanent solutions are found. Assertive outreach in Belfast has been of great success in engaging rough sleepers to access temporary accommodation and support. This is likely to need to remain in place to tackle an increase in rough sleeping and a return to street activity in some areas.

Night Shelters, due to the risks associated with the service model, have been reconfigured since the start of the pandemic and are operating more akin to traditional hostel models. Our assumption is that they will remain in this format for the foreseeable future.

Financial hardship and rising unemployment is likely to bring with it growing social problems, including worsening mental health issues, addictions and offending behaviours. These issues often go hand in hand with homelessness. It can, therefore, be predicted that the challenges facing our customers and partners across the sector may well grow. As a result we anticipate that demand will increase for support around financial hardship, family and community breakdown, domestic abuse and mental health/addictions issues.

Demand for housing support is likely to increase across all tenures – social sector, private rented sector and home owners are all likely to be impacted, particularly around financial hardship. Support will be needed to assist people to remain in their homes, sustain tenancies and prevent evictions due to arrears. Adequate funding must be made available for homelessness support services.

The 'Everyone In' approach whilst initially focussed on providing emergency accommodation now needs to shift focus to developing clear routes to permanent housing for those individuals, as appropriate. As lockdown restrictions ease and individuals perception of risk reduces initial indications suggest some individuals will gravitate back to the streets and we are beginning to see evidence of increased street activity. We anticipate this will increase and that ongoing and continual dialogue and efforts will be needed to seek to encourage people back off of the streets and to engage with the appropriate support services.

It is likely that we will continue to see some return to rough sleeping and street activity, including those who are ineligible for housing assistance. The DoH have indicated that the current MoU is an action required in response to a global health pandemic but that this provision will not be supported post pandemic, support will therefore need to be sought from elsewhere in order to be able to continue an 'Everyone In' approach.

Support from the PHA and the Homeless Nursing team in Belfast has been critical to the safe operation of homeless hostels to date and the benefits of this approach have been particularly evident throughout the pandemic. Maintaining this support will remain critical in seeking to reduce transmission levels and safeguard as many homeless people as possible for the foreseeable future. It has been acknowledged that there is merit in extending the homeless nursing service outside of Belfast and PHA have secured additional funding for the appointment of 3 additional nurses – one for Northern, Southern & South Eastern Trust areas.

Statutory services including both our day service and Out of Hours homeless services have had to adapt, initially delivering services on a remote basis. As restrictions have eased some services have been made available face-to-face, initially on an appointment only basis. Our assumption is that our staff will continue to work remotely, with some provision available via appointments in our offices where it is safe to do so and in keeping with social distancing guidance. We envisage a phased return to full public access, guided by national and any local restrictions. We are currently reviewing our Out of Hours service model and giving consideration to extending our full day service beyond 5pm.

The best way to tackle homelessness is to prevent it happening in the first place. Our homeless prevention work has never been more important. Funding has been made available to re-run the homeless prevention initiative this year and demand has been high. Projects will be prioritised which reflect the pressure areas we anticipate as a result of COVID-19. We envisage the programme will be targeted at initiatives offering intervention and personal development models.

A MoU was agreed between the NIHE, the Department for Communities and the Department of Health in order that all rough sleepers, irrespective of eligibility, could be provided with temporary accommodation (this ratified the previous decision of the Board of the NIHE to do so on humanitarian grounds). The MoU was initially to last 12 weeks but has subsequently been extended twice; current extension is until 1st December. We envisage the MoU being required so long as social distancing measures are in effect and as such have requested an extension of the arrangements until the end of the financial year; however this will require Department of Health agreement and potentially further funding. In the longer term legislative change would be required to allow the NIHE to assist in such circumstances.

The pandemic has again reinforced that homelessness is not just a housing issue – it is a public services issue. Success in the future is dependent on customers being able to access all necessary services where and when they need them – this may include services to tackle substance misuse, mental health issues, primary care and community safety. It is assumed that housing and health will continue to seek to strengthen the links between services.

Contingency arrangements for uncertain events

Our crisis response to the pandemic remains in place and is ongoing. In considering the arrangements which are required to deal with the ongoing emergency created by COVID-19 it is critical that we make contingency plans to deal with uncertain events and provide for these plans in terms of securing resources and funding now in advance of these events occurring.

Specific contingency arrangements have been identified to respond to homeless demands which arise from:

- COVID-19 outbreaks (2 or more positive cases) in individual services which require the reduction/closure of these services and/or the relocation of service users to alternative accommodation (including if required for them to socially isolate)
- Staff absences in the Housing Executive's statutory homeless service which impact on service delivery specifically homeless assessments and provision of statutory services
- Staff absences in homeless services as a result of COVID-19 which impact on service delivery and as a result require the suspension of referrals to the service, or a reduction in the unit capacity of the service or ultimately the temporary closure of the service
- High risk / severe weather conditions likely to impact on individuals both in terms of COVID-19 and other seasonal health risks, which may result in those who have returned to rough sleeping, again seeking emergency accommodation

The contingency arrangements will be secured now so that they can be activated as part of a co-ordinated response in the event of an increase in demand as a result of one or more of these uncertain events.

This Reset Plan outlines the specific contingency activities which will be undertaken but broadly they will include provisions which will help to secure additional staff resources both in the Housing Executive and the broader sector in the event of staff capacity pressures and the retention of additional accommodation and support which is available and can be utilised at short notice.

PRIORITY AREAS

This document has been designed to be iterative and it will be revisited to ensure it reflects experiential evidence and relevant contextual evidence. Our priorities in this Reset Plan will be further developed as our homelessness response to COVID-19 evolves, to reflect the latest guidance from the Department of Health and the Public Health Agency, the input of our sectoral partners and the deliverability of actions linked to the availability of funding.

As we progress through Phase 2 our focus remains on maintaining services and protecting the homeless, but our attention has also begun to shift to post-COVID-19 planning and transition to 'new normal'. The sections below include the priority areas which have been identified for the continued action as part of the Housing Executive's COVID-19 homelessness response in collaboration with our sectoral partners. In identifying these priorities we have considered the following:

- What needs to be in place right now in order to continue to respond to the ongoing emergency? This potentially includes actions required beyond the current sunset date of our existing funding for COVID-19 of 31st March 2021.
- What needs to be done in the longer term to both reflect the lessons learned from the COVID-19 response and minimise its longer term impacts? This includes considering what needs to change in our strategic plans to end homelessness, to recognise the changing circumstances caused by the COVID-19 pandemic and how we make the most of current opportunities.
- What contingency arrangements do we need in place to deal with events which may or may not happen? This includes considering the provisions which must be in place to deal with the impacts on homelessness of further waves of the virus, localised outbreaks and further local or national lockdowns.

THEME 1 ROUGH SLEEPING

Our ambition is to ensure everyone has access to somewhere safe and appropriate to stay regardless of their immigration status. We will seek to prevent a return to previous levels of rough sleeping experienced before the COVID-19 pandemic.

| Immediate & Medium Term (including potentially beyond the current funding sunset date of 31st March 2021) | Longer Term (to be reflected in strategic plans or priority setting) | Contingency (for uncertain events which may or may not happen) |
|--|--|---|
| <p>Continue the Everyone In' approach to ensure safe accommodation for anyone sleeping rough. This needs to remain a priority for as long as the pandemic is having an impact.</p> <p>Extension of MoU to provide for accommodation and essential support to rough sleepers who are ineligible for housing assistance throughout pandemic response.</p> <p>Retention of assertive outreach approach throughout pandemic response to ensure every effort is taken to engage with individuals on the street to offer them somewhere safe to stay.</p> <p>Ensure everyone placed in emergency accommodation is provided with appropriate advice and support including those ineligible for housing assistance.</p> <p>Retain additional temporary accommodation secured during current phase of response to ensure accommodation options continue to be available for all rough sleepers.</p> <p>Further extend Housing First provision both in terms of duration of support and number of units provided for as part of the response to the pandemic.</p> <p>Develop severe weather emergency protocol which considers multiagency response to high risk weather conditions as well as COVID-19 impacts and other seasonal health risks.</p> <p>Conduct street audits to determine levels of street activity as our response to pandemic continues to evolve and consider post pandemic impacts.</p> <p>Consider repatriation arrangements for those PFA who are ineligible for housing assistance wishing to return to their country of origin.</p> <p>Ensure research commissioned into day centre provision and the experiences of chronic homelessness for women includes consideration of COVID-19 impacts.</p> | <p>Consider what needs to be done to ensure people move forward from emergency accommodation and not back to the streets; this should include taking a case management approach with the aim of rapid rehousing for all into suitable permanent accommodation with support.</p> <p>Work with other partners on the longer term accommodation and support provision to people with no recourse to public funds including other devolved nations.</p> <p>Review and deliver Chronic Homelessness Action Plan including identifying COVID-19 impacts and prioritising key actions for earlier delivery in the context of these COVID-19 impacts.</p> <p>Develop strategic outline case for the expansion of Housing First across Northern Ireland including housing supply options. Our response to COVID-19 has highlighted the need to scale up Housing First in Northern Ireland more rapidly.</p> <p>Consider long term arrangements, including any requirements for legislative change, to enable continued support to those rough sleepers who are ineligible for housing assistance beyond the lifespan of the current MoU with DoH and DfC.</p> | <p>No specific contingency arrangements required other than extension of MoU and extension of broader contingency arrangements for temporary accommodation and support for general homeless population which will include rough sleepers.</p> |

THEME 2 ENSURE THERE IS AN ADEQUATE SUPPLY OF ACCOMMODATION

Our ambition is to ensure we create the capacity to provide all customers with accommodation which meets both their accommodation and support needs at the point of that need. Our focus initially is on immediate accommodation needs but ultimately must include how we improve the long term housing options for homeless households.

| Immediate & Medium Term (including potentially beyond the current funding sunset date of 31st March 2021) | Longer Term (to be reflected in strategic plans or priority setting) | Contingency (for uncertain events which may or may not happen) |
|---|--|---|
| <p>Retain additional temporary accommodation secured during current phase of response to ensure accommodation options continue to be available for all who require it.</p> <p>For anyone with support needs placed in emergency accommodation without support provision, seek to secure appropriate wraparound support. This type of support provision has been secured in the current phase of our response but it is expected that this will need to be extended further.</p> <p>Work with supported accommodation providers to sustain placements as far as possible and reduce the number of exclusions from temporary accommodation, thereby minimising the number of service users having to move between placements during the pandemic.</p> <p>Maximise capacity, both in terms of the number of available units and throughput in these units, in all forms of temporary accommodation whilst continuing to manage the risks of Coronavirus transmission.</p> <p>Acquire additional temporary accommodation units, particularly for single households (for which demand has been greatest during the pandemic) and particularly in areas of greatest need such as Belfast and Derry/Londonderry.</p> <p>Stepping back our use of hotels, it is accepted that their use is necessary as part of the pandemic response but they should not inadvertently form part of our core accommodation portfolio at current levels.</p> <p>Support homeless sector to review COVID-19 contingency arrangements to ensure as much resilience within the homeless system as possible to respond to changes in homeless demand, capacity of services and the risks associated with COVID-19.</p> <p>Consider a range of leasing arrangements for single let properties both in terms of lease duration and management responsibilities which increases flexibility in terms housing options both temporary and longer term in this type of accommodation.</p> <p>Complete roll out of the Hostel Tracker App to enable continued monitoring of pandemic impacts on accommodation based services.</p> <p>Extend use of Homeless Demand App to Out of Hours service to ensure continued understanding of demand levels.</p> | <p>Ensure that the continued work on the Strategic Review of Temporary Accommodation reflects the learning from our COVID-19 response and its future impacts. This will include but is not restricted to:</p> <ul style="list-style-type: none"> Reviewing long term suitability of accommodation which has had to restrict services because of physical characteristics of buildings (e.g. shared rooms) during the pandemic. Working with sector to remodel/reconfigure services to meet changing or new service user needs as a result of the pandemic. Considering the commissioning priorities for new services or service reconfiguration to meet homeless demand including new or changing demand as a result of COVID-19. Prioritising our objective to remove the reliance on non-standard accommodation (this was both a pressure and a priority pre-COVID-19 and has been reinforced in our response). Prioritising new models of temporary accommodation including modular housing, shared tenancies for young people, community hosting, and new models for utilising stock in the private rented sector. There is a need to ensure adequate and appropriate provision for young people who have been significantly impacted by the pandemic. <p>Review the current use of social housing stock in meeting the needs of homeless households, including the use of social housing for Housing Led and Housing First provision. Our response to COVID-19 has highlighted the need to scale up Housing First and Housing Led provision in Northern Ireland more rapidly. Consider acquisition and leasing arrangements in the private sector in order to secure accommodation to meet our statutory duties in terms of accommodation.</p> | <p>Block booked/retained units to be held as contingency option in order to respond to an emergency scenario. This should include a small number of units in each of Belfast, South and North Regions.</p> <p>Ensure accommodation acquisition includes units which can facilitate clients needing to self-isolate.</p> <p>Accommodation retained for contingency purposes should also be linked to support provision arrangements.</p> |

THEME 3 PREVENTION

Our ambition is to prioritise prevention to create as much capacity as we can and make a long term commitment to the extension of Housing Led and Housing First provision (and the associated housing supply requirements).

| Immediate & Medium Term (including potentially beyond the current funding sunset date of 31st March 2021) | Longer Term (to be reflected in strategic plans or priority setting) | Contingency (for uncertain events which may or may not happen) |
|--|---|---|
| <p>Prevention Fund 2020/21 applications prioritised to award funding to those applications with a COVID-19 focus particularly for those groups which are at greatest risk of homelessness as a result of COVID-19.</p> <p>Work with Housing Rights and other advice services to identify opportunities for further prevention work targeted at those at risk of losing their private rented accommodation as a result of the pandemic.</p> <p>Consider opportunities for the extension of the work of the Housing Executive's Financial Inclusion officers to Housing Solutions and Support customers.</p> <p>Work with relevant mediation services to identify how this support can be targeted at those at greatest risk of homelessness due to a breakdown in sharing during or as a result of the pandemic.</p> <p>Ensure continued focus by Patch Managers in their role to implement the NIHE's tenancy sustainment strategy and ensure earlier intervention in respect of potential causes of homelessness; including, ASB and affordability. This should include how this can be achieved through a combination and safe delivery of remote and face to face support.</p> <p>Continue promotion of discretionary housing payments to sustain tenancies within the private rented sector.</p> <p>Consider opportunities (including funding) to pilot new ways of working e.g. intensive tenancy support service for previously homeless individuals to aid homeless prevention.</p> | <p>The response to COVID-19 has reinforced the need to mainstream the Housing Led approach to tackling homelessness. Our ambition is to see a significant increase in these types of homeless services. This will remain a strategic and funding priority and opportunities identified for specific service provision as an extension to the current Prevention Fund.</p> <p>Develop strategic outline case for the expansion of Housing First across Northern Ireland including housing supply options. Our response to COVID-19 has highlighted the need to scale up Housing First in Northern Ireland more rapidly.</p> <p>Ensure homeless prevention is recognised as a priority for a range of public services and that protocols are developed as part of homeless prevention pathways. During the pandemic it has been further highlighted that effective homeless prevention is not primarily a housing issue and is critical to create as much capacity as we can in homeless services through effective prevention.</p> <p>There continues to be a requirement to identify ways in which access to the private rented sector can be improved and financially supported for those exiting homelessness. This should remain a priority from a strategic perspective.</p> <p>Shared housing projects have been supported as part of the COVID-19 homelessness response. We will seek to evaluate the effectiveness of shared tenancies as a mechanism to prevent youth homelessness.</p> <p>It is widely acknowledged that the pandemic has had a significant negative impact on mental health. This is more pronounced for those who are homeless or at risk of homelessness. We are therefore committed to engaging with mental health specialists to consider what needs to be done to provide effective mental health interventions in the development of initiatives aimed at homeless prevention.</p> <p>Consider the need for targeted approaches in respect of prevention for specific groups at particular risk e.g. youth homeless; including former care leavers, victims of domestic abuse and intergenerational repeat homeless.</p> <p>Development of a prevention and relief strategy which considers the lessons learned during COVID-19 and its future impacts.</p> | <p>No specific contingency arrangements required on this theme.</p> |

THEME 4 HOMELESS SERVICES

Our ambition is to ensure that our statutory homeless services and homeless services generally continue to be delivered safely and effectively. This includes the continued application of measures to reduce the risk of COVID-19 transmission, targeting of services to meet the needs of particular vulnerable groups and appropriate combination and safe delivery of remote and face to face support.

| Immediate & Medium Term (including potentially beyond the current funding sunset date of 31st March 2021) | Longer Term (to be reflected in strategic plans or priority setting) | Contingency (for uncertain events which may or may not happen) |
|--|---|---|
| <p>Statutory Homeless Assessments & Support Ensure the ongoing delivery of statutory homeless services via remote service delivery and on an appointment basis where it is safe to do so and taking into account any guidance/restrictions. Ensure an adequate supply of temporary accommodation to meet demand (as per theme 2). Support Housing Solutions and Support staff in their work with people experiencing homelessness by funding training to aid staff resilience and wellbeing. This should reflect the additional complexity of providing services remotely and without direct support of peers and managers during the pandemic response. Review our Out of Hours service model in the context of sharp increases in demand as a result of COVID-19 and the emergency response requirements in the event of localised outbreaks. This will include consideration of extending our full day service beyond 5pm and or additional emergency protocols.</p> <p>General Homeless Services Ensure night shelters in their previous format remain locked down – continuing to operate more as a conventional hostel to limit transmission throughout the pandemic response. Ensure continuation of the ‘Everyone In’ approach (per theme 1). Continue delivery of assertive outreach services to engage with rough sleepers/former rough sleepers and encourage uptake of accommodation to safeguard individuals and reduce risks of transmission. In conjunction with PHA and providers consider the reopening of day centres where it is safe to do so and incorporating social distancing requirements. Via Housing Solutions teams seek to ensure that those individuals placed in non-standard and dispersed accommodation can access appropriate support services where required. Assist, where possible, to ensure the ongoing operation of accommodation, floating support and outreach services through for example additional financial resources (homeless and/or Supporting People) for staffing, cleaning materials, etc. Ensure appropriate combination and safe delivery of remote and face to face support in line with statutory guidance. In conjunction with PHA and other stakeholders ensure guidance is updated to reflect changing working practices, infection control, staff bubbles, cleaning guidance, etc. Support frontline staff delivering support and accommodation services in their work with people experiencing homelessness by funding training to aid staff resilience and wellbeing. Ensure funding is in place to allow the continued operation of outreach and wraparound support services. Consider the requirement to further extend these provisions in the context of assumed demand during the pandemic. Seek to increase, where funding permits, support services to assist in tackling financial hardship, family and community breakdown, domestic abuse and mental health/addictions. Work collaboratively with PHA to prioritise homeless nursing team input to homeless services (Health Trusts) and expertise on matters such as infection control, particularly in instances of outbreaks in services. Streamlined referral process and facilitate direct access to Hostel Tracker App.</p> | <p>Consider strategic priorities in the context of both our statutory homeless service provision and broader service provision to those who are homeless in the context of lessons learned during COVID-19 and its future impacts. This will include but not be restricted to:</p> <ul style="list-style-type: none"> Reflect the impacts of the pandemic in terms of the review of the existing strategy and the formulation of the next 5 year plan Our review of our Out of Hours emergency service. The 2nd phase of Housing Solutions Assessment and Access project. Critical to ensuring we can respond quickly and effectively during the pandemic to homeless demand has been accessing information on demand for and availability in homeless services. This has reinforced the need for common assessment tools and central access to services. <p>Review of accessibility and channels for service delivery including digital opportunities reflecting on lessons learned from new working practices adopted during the pandemic response. Seek long term security of funding for homelessness services to allow organisations to recruit and maintain high quality staff and long term programmes of intervention (reinforced by lessons learned by the provider sector). Consider the future role of in-reach and outreach services and night shelters specifically in the context of how these models are currently operating.</p> | <p>Ensure sufficient NIHE resources (both in normal hours and Out of Hours) are in place to deal with emergency response in event of service closure /requirement to move service users from homeless services. Consider an on-call rota of available Housing Solutions staff. Consider arrangements whereby NIHE staff with previous experience of front-line service delivery can be redeployed to ensure maintenance of statutory functions. Formalise protocol with Public Health Agency in the event of an outbreak in homeless services including case conferencing approach of all stakeholders (as with theme 5). Work with the sector to consider redeploying staff from back-office roles and floating support services to accommodation based services where safe staffing becomes a risk to the continued operation of the service.</p> |

THEME 5 COLLABORATIVE WORKING

Our ambition is to maintain the momentum of multi-agency collaboration which has been established to support homeless households. Homelessness is rarely just a housing need and our priority is to ensure the increased cross-sector working between housing, health and the homeless sector continues and is embedded long term.

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|---|--|---|
| <p>Ensure multi-agency meetings and operational task force meetings continue during the course of the pandemic and NIHE are represented on these.</p> <p>Conduct weekly meetings with PHA and develop protocol for responses to outbreaks in services.</p> <p>Provide financial support for the administration of the Operational Taskforce.</p> <p>Ensure the provision of PPE for services where required (either via SP for SP funded services or via Homeless Services for Homeless funded services).</p> <p>Continue to work collaboratively with PHA and other stakeholders to ensure guidance is updated and available for the provider sector and reflects any changes in approach.</p> <p>Ensure continued liaison with the Departments of Justice and Housing Rights Service in relation to the ‘Temporary Release of Prisoners Under Rule 27’ (COVID-19 early release scheme) to ensure no-one is discharged into homelessness.</p> <p>Work with PHA to ensure ongoing access to testing and flu vaccines for staff and service users.</p> <p>In conjunction with Supporting People, ensure information is shared with providers on additional funding availability e.g. for staff cover and deep cleaning and that bids for additional funding are considered and processed in a timely manner to facilitate ongoing operation of services.</p> | <p>Build, embed and maintain partnership approaches to prevent and respond to homelessness and ensure delivery structures enable rapid responses and quick decision making.</p> <p>Seek to align funding streams for jointly funded initiatives e.g. Housing First to enable longer-term planning and delivery of jointly funded initiatives. Ensure joint priorities are reflected in commissioning plans.</p> <p>Ensure reviews of homeless strategies and commissioning plans are collaborative and reflect learning from COVID-19 response.</p> <p>Assist in making the case for longer-term dedicated health resources for homelessness to reflect the interconnected nature of homelessness, drug and alcohol addictions and mental health issues.</p> <p>Consider the need for specific collaboration for particular client groups e.g. youth homelessness, female homelessness, former rough sleepers and work with relevant stakeholders to develop these into commissioning plans.</p> <p>Consider opportunities to think about service delivery models more fundamentally – e.g. consider opportunities to build on digital delivery models.</p> <p>Review existing multi-agency structures for homelessness to ensure they are fit for purpose and reflect any learning from the pandemic.</p> <p>In relation to services for young homeless initiate work with Health to produce a strategic outline case for the continuum of service provision.</p> | <p>Formalise protocol with Public Health Agency in the event of an outbreak in homeless services including case conferencing approach of all stakeholders.</p> <p>Consider, in conjunction with PHA, the necessity for additional units for social isolation for COVID-symptomatic service users. Bring on additional units as required. NB it should be noted that additional units brought on for this manner may or may not need to be utilised but are required as contingency.</p> <p>Consider mechanisms to support additional staff resources including feasibility of stepping up the Quality Matters initiative; bank/relief staff and consider a ‘call out’ for homeless support workers for those with previous experience in the sector. Ensure funding made available as required from Supporting People.</p> <p>Consider opportunities for collaboration across the provider sector – e.g. in terms of sharing isolation beds as a crisis response in the event of outbreaks or sharing staff resources where levels get critical.</p> <p>Consider temporary suspension of contract performance management arrangements under the Supporting People programme to allow providers to focus on implementing contingency plans and essential service delivery.</p> |

FUNDING THE RESET PLAN

To date the Housing Executive has received confirmed additional funding from DfC of £7.387m to fund our Homelessness response including £290k under the Memorandum of Understanding with the Department of Health for those who are persons from abroad who are ineligible for housing assistance and are rough-sleeping. This funding has been secured for the remainder of the current financial year and based on current budgetary estimates linked to our understanding of homeless demand as a result of COVID-19 is expected to be in line with requirements to fund our Homelessness response until the end of 2020/21.

However, it is now anticipated that not only will some or all of the emergency measures currently in place be required beyond the end of the current financial year but the response to the longer term impacts of COVID-19 will have financial consequences. The Housing Executive will therefore need to make funding submissions to central government for further funding to finance this Reset Plan.



REVIEWS OF THE PLAN

The Housing Executive will Review key data on homeless trends in the context of COVID-19 at least monthly and the document itself will be updated where there is a material change in the modelling assumptions and/or the proposed required actions.

This document is available in alternative formats.

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