

HOUSING SOLUTIONS, COMMUNITY CONNECTIONS

I. EXECUTIVE SUMMARY

The Ministry of Housing, Communities and Local Government (MHCLG) has awarded Plymouth City Council an additional allocation of £856,501 through the Rough Sleeping Prevention and Recovery Grant (RSPARG) for 2025/26. This funding is intended to strengthen the local health, housing and homelessness response to individuals experiencing multiple disadvantage.

This aligns with the *Fit for the Future: 10-Year Health Plan for England* by promoting integrated, community-based care for individuals experiencing multiple disadvantage, ensuring that health, housing and support services work collaboratively to address the complex needs of people who are homeless or at risk of rough sleeping.

Recent engagement with our central government Rough Sleeping Lead has provided clear guidance on the expected outcomes and impact of this investment. Locally, there has been a rise in long-term rough sleeping, alongside increasing recognition that chronic homelessness is not solely a housing issue but also a challenge for health and social care services.

The one-year pilot aims to deliver a more integrated, community-based, co-located and assertive response to individuals experiencing chronic homelessness and rough sleeping, including those at risk of rough sleeping. Funded through the Rough Sleeping Prevention and Recovery Grant, the pilot will enhance the city's "One Team" approach by formalising a multi-disciplinary partnership approach across health, housing and support services. An embedded researcher will build a case for sustainability during the term of the pilot.

The key objectives of the "One Team" pilot are to:

- Improve outcomes through personalised, trauma-informed whole system joined up case co-ordination and management.
- Boost existing services via co-located, community-based interventions that address health, housing, support and social care needs
- Reduce reliance on nightly paid accommodation and decrease levels of chronic homelessness
- Test and evaluate a joined-up model of system delivery to build the case for long-term, sustainable funding
- Embed integrated, co-located multi-disciplinary working to reshape system delivery for those furthest from services

This pilot presents a strategic opportunity to expand holistic joined up service interventions and develop a more agile and responsive system for some of the city's most marginalised residents.

The Health Inclusion Partnership Plymouth (HIPP) plays a central role in strengthening the city's response to homelessness by delivering specialist healthcare to individuals who are homeless or sleeping rough. Currently the HIPP lacks the capacity and scope to deliver intensive, tailored

healthcare in the community for individuals with the most acute and multiple needs. The RSPARG funded “One Team” brings together Adelaide Street and St Levan’s GP surgeries, University Hospitals Plymouth, Plymouth City Council, Livewell Southwest and the Plymouth Alliance into a formal multi-disciplinary joined up partnership response.

This one-year pilot will also be used to build the case for long-term, sustainable funding to:

- Enhance existing services to provide a more assertive, agile and personalised response for individuals experiencing multiple disadvantage, who are homeless and/or rough sleeping
- Launch an innovative “test and learn” pilot to deliver an integrated, multi-agency health, housing and homelessness response

This funding provides a strategic opportunity to expand and strengthen a holistic and integrated response for those with the most acute needs. The One Team approach offers a chance to reshape system and service delivery for individuals experiencing chronic homelessness and complex health challenges, who are often the furthest away from services.

The briefing paper outlines the proposed service interventions to be funded through the additional Rough Sleeping Prevention and Recovery Grant for 2025 to 2026, and the associated decisions regarding its allocation to the Plymouth Alliance and direct awards to partner organisations.

It is recommended that the Strategic Director:

- I. Approve the transfer of the revenue funds of £478,649 to the Plymouth Alliance Via deed of Contract Variation to the Complex Needs Alliance Contract Reference PEO 16175:

Livewell Occupational Therapist	£62,570
Livewell Mental Health Interventions	£51,285
Livewell Clinical supervision/reflective practice/therapeutic interventions	£35,803
PATH Street Outreach c. 12 Night Shelter Spaces	£124,000
Shekinah Day Centre Officers	£85,000
Hamoaze House -Day Centre Posts	£34,991
BCHA Housing First Officers	£85,000
Total to the Plymouth Alliance	£478,649

Approve the direct awards:

- a. Adelaide Surgery – £217,532
- b. Trevi - £34,000
- c. Plymouth Community Homes - £63,750
- d. Plymouth University - £62,570

2. KEY AREAS OF ACTIVITY

The additional RSPARG funding will boost our current work to prevent and relieve rough sleeping and chronic homelessness. This will focus on: -

- a. Early intervention and prevention, including tackling complex homelessness and rough sleeping as a health issue as well as a housing issue
- b. The Target Priority Group (rough sleeping and at risk of rough sleeping)
- c. Those who are long term rough sleepers in the City
- d. Those at risk of multiple disadvantage, chronic homelessness and rough sleeping.

The proposal is to bring together and boost our current response into “One Team” - Health, Housing and Homelessness a multi-disciplinary response with the Plymouth Alliance setting up a formal partnership with HIPP to deliver the proposed one-year pilot and to work collectively to build the business case for sustainable funding.

One Team (community based, co-located, assertive and integrated)	Organisation/ Service-Type	One year Cost Profile (£)
<u>Centralised Co-ordinated Team Around Me (TAM)</u>	<u>Adelaide Surgery</u> <ul style="list-style-type: none"> • Lead co-ordinators will facilitate the multi-disciplinary TAM process, strengths-based plans tailored to each individual/s unique needs, aspirations and circumstances. • Personalisation/ Flexible Budget, including for bespoke health related and other assessments <p>Has a key role in supporting people experiencing homelessness and those with complex needs through its involvement in the Health Inclusion Pathway Plymouth (HIPP) and collaboration with the Plymouth Alliance</p>	72,648 55,000
<u>Health, Treatment and Therapeutic Support:</u>	<u>Adelaide Surgery</u> Drug and Alcohol Treatment Hours	31,285
	<u>Plymouth Alliance -Livewell</u> 1 x FTE Occupational Therapist	62,570
	<u>Plymouth Alliance - Livewell</u> .5 FTE Mental Health Interventions	51,285
	<u>Plymouth Alliance - Livewell</u> .5 FTE Clinical supervision/reflective practice/therapeutic interventions	35,803
<u>Street Outreach and Case Support Expansion</u>	<u>Plymouth Alliance - PATH</u> 2 x FTE Street Outreach c. 12 Night Shelter Spaces	124,000
	<u>Trevi</u>	34,000

<ul style="list-style-type: none"> • Expand night shelter provision in partnership with community and faith-based organisations • Strengthen local networks to support emergency accommodation and engagement • Gender specific outreach 	<p>.6 FTE Women's Street Outreach Worker</p> <p>Provides support to access housing, therapeutic, and support services for women and children.</p>	
Boosting Day Centre-Based Support	<p>Plymouth Alliance - Shekinah 2 x Day Centre Officers</p>	85,000
<ul style="list-style-type: none"> • Key engagement hubs offering accessible, wraparound services • Enhanced, co-ordinated casework and welfare support 	<p>Plymouth Alliance - Hamoaze House 2 x .25 Day Centre Posts</p>	34,991
Bespoke Housing Solutions	Plymouth Alliance - BCHA 2 x Housing First Officers	85,000
Implementing Housing First and other personalised housing interventions.	<p>Plymouth Community Homes 1.5 x Housing Management/ Welfare Support</p> <p>Adelaide Surgery 2 x Housing Placement/ Homelessness Assessment Officers</p>	63,750 58,599
Building a case for sustainability:	<p>Plymouth University 1 x Evaluation Project/ Report – systemic inquiry model</p>	62,570
Total Additional RSPARG Funding (25/26)		£856,501

3. OUTCOMES AND BENEFITS

Financial outcomes and benefits:	Non-financial outcomes and benefits:
---	---

<ul style="list-style-type: none"> • To decrease the use of nightly paid emergency accommodation for this cohort • To reduce the level of rough sleeping and those at risk of rough sleeping and chronic homelessness 	<ul style="list-style-type: none"> • Integrated, multi-disciplinary Health, Housing and Homelessness “One Team” for people experiencing multiple disadvantage will deliver a joined-up response and better outcomes • Boosting existing services to provide a more assertive, agile and personalised response for individuals at risk of or experiencing rough sleeping which reduces the numbers of those rough sleeping or at risk of rough sleeping
---	--

4. KEY RISKS AND RECOMMENDATIONS

There are minimal risks to PCC as agreed funding is allocated through PCC to the Plymouth Alliance and direct awards can be made to partner organisations that comply with the Council's Procurement Standing Orders

- PCC will co-ordinate the reporting to MHCLG
- This is 100% externally funded and as such there is no impact on existing PCC budgets

RECOMMENDATION

1. To Approve the transfer of the revenue funds of £478,649 to the Plymouth Alliance Via deed of Contract Variation to the Complex Needs Alliance Contract Reference PEO 16175.
2. To Approve the direct award of the revenue funds to:
 - a. Adelaide Surgery – £217,532
 - b. Trevi - £34,000
 - c. Plymouth Community Homes - £63,750
 - d. Plymouth University - £62,570