


MANCHESTER EMERGENCY ACCOMMODATION EVALUATION – FOLLOW UP RESEARCH



**ENDING
HOMELESSNESS
TOGETHER**

Research completed by:
John Harrison
john@impact-limited.co.uk

 For further information about
this research please contact:
E: endinghomelessness@riverside.org.uk

Contents

1. Background	4
2. Residents	5
3. Residents follow up interviews	6
Residents	6
Overall	6
Health	7
Mental Health	7
Substance Misuse	7
Family	7
Staff	8
Distraction/Activities	8
Rough Sleeping	8
Moving On	9
4. Service Manager Follow Up Interview	10
Aims and Objectives	10
Reasons for Success	10
Support	10
Lockdown Easing	11
Partners	11
New Residents	11
5. Learning Points	12

1. Background

Background

On 26th March 2020, the Minister for Local Government and Homelessness (MHCLG) wrote to local authorities asking them to urgently accommodate all rough sleepers. Greater Manchester Combined Authority (GMCA) announced it would spend £5 million in order to house 1,000 rough sleepers and individuals living in emergency accommodation in hotels. The Holiday Inn Manchester East (the focus of this evaluation) was contracted to Manchester City Council. Provision was planned for an initial 45 rooms out of the 100-room hotel. Residents were in 'Category 1' of Greater Manchester's emergency planning, that is people sleeping rough or housed in unsuitable emergency accommodation and night shelters.

Our initial evaluation was conducted between 28th April and 19th May 2020 (four to six weeks into the contract). This found that the emergency accommodation appears to be delivered in an efficient and effective manner. The project has been very successful and very warmly received by residents. We observed positive benefits to all the residents interviewed and few, if any, negative outcomes.

Between the 28th July 2020 and the 6th August, a small number of follow up interviews were conducted with the Service Manager and some of the residents who had participated in the first wave of research.

2. Residents

Residents

Initially there were 45 residents in the hotel, this has risen to 55 residents. Up to the point of the follow up research, 79 residents left the hotel and 55 moved on to other accommodation. A third of residents that left the hotel abandoned. Of these, a third abandoned in the first three weeks. A quarter of residents were evicted for smoking in their rooms (a contravention of the hotel's rules). In the early days of the hotel, six residents were also evicted for not observing Covid-19 guidelines and putting other residents at risk.

Half the residents who have moved on have moved to supported accommodation. 11% had moved to private rented accommodation and a further 9% had moved on to shared accommodation. Nine percent of residents had also moved to low needs supported accommodation. 35% of residents moved on from early to mid-July, this included many of the initial intake.

79 residents have since left the hotel

55 residents have moved on to other accommodation

1/3 of residents abandoned the hotel in 3 weeks

6 evicted for not following Covid-19 guidelines

Of the residents that have moved on:



11% moved on to private rented accommodation



9% moved on to shared accommodation



9% moved on to low needs supported accommodation



50% moved to supported accommodation

Residents

We wanted to use the follow up research to reconnect with those residents we interviewed in the first wave of the research. Three residents were unreachable, one had been evicted, one had abandoned and one had moved on but was unable to be contacted by telephone. This left two residents who were still living in the hotel and two who had moved on but were able to be interviewed by phone.

The four interviewees were:

- Resident 1 – Male, mid-twenties
- Resident 2 – Male, age unknown, probably mid fifties
- Resident 3 – Female, early forties
- Resident 4 – Male, age unknown, probably mid-forties

Overall

All four residents were well. The two residents still living in the hotel had been there since it opened. Whilst they had continued to improve physically and mentally, they all seemed to feel that much of the progress they had experienced had occurred by the time of the first interview.

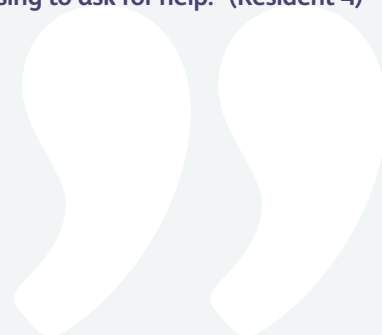


“It was alright, it was like a holiday really.” (Resident 1)

“Everything is up and running now, with the housing, and I’m much more sorted now.” (Resident 2)

“Things are brilliant now, I’m just getting things sorted and getting my bearings in my new flat. It has been life changing.” (Resident 3)

“This has been an amazing experience. I’ve met some amazing people (and some idiots as well). I found out that it’s not embarrassing to ask for help.” (Resident 4)



Health

Three of the residents felt that their health had improved whilst living in the hotel. However, the level of improvement varied considerably depending on their pre-existing conditions. One resident felt that his health hadn’t improved because he was “pretty healthy” to start with.

“My health definitely improved, I put weight on, I started to feel more active and energetic. I didn’t really want to wake up every day so I didn’t have the energy to go to the housing or anything like that. By the end I was getting up and doing all the things I needed to do.” (Resident 3)

One of the residents had just completed a course of treatment for Hepatitis C and was recovering well. He was currently awaiting a liver scan. He had been diagnosed a couple of years ago but until he entered the hotel he hadn’t been in a situation where he could access all the help and support he needed.

Mental health

One resident described his mental health as being “up and down”. He experiences depression and has medication which he had run out of. The resident who had her own accommodation mentioned that both her health and her mind were “not totally right yet” but that they would improve.

Reflecting the comments of the Service Manager (see below), none of the residents currently had a mental health worker despite their apparent needs.

Substance misuse

Three of the residents had drugs dependency issues and had scripts. One resident had come off his script but “panicked” and resumed it. This resident felt that the script had led to him becoming much calmer. The other two were still on their scripts and felt that it helped to stabilised their life.

One resident had a drugs worker who had visited the hotel a number of times and was available should an emergency arise.

Family

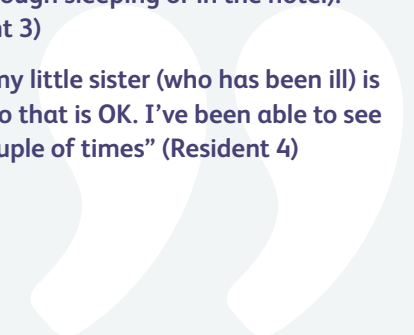
All four residents had reconnected with family.

“I’ve sort of been in contact (with his daughter), mostly Face Timing really but I have seen her” (Resident 1)

“I’m in contact with all my kids again now.” (Resident 2)

“I am in touch with my kids now, I didn’t want them to see me in the situation I was in (rough sleeping or in the hotel).” (Resident 3)

“I know my little sister (who has been ill) is alright so that is OK. I’ve been able to see her a couple of times” (Resident 4)



“ Staff

Opinions on staff have not changed since the initial interviews. Residents feel that they are very helpful, knowledgeable, committed and professional people. One of the residents mentioned recently getting help with benefits and with bidding for houses.

“They are always there to help, you can’t knock ‘em mate. I’ve not had to hand a sick notes in for years but I had to (for Universal Credit) and I sat down with Sandra and we sorted it in minutes.” (Resident 2)

Residents feel that, largely, they have received all the help they needed.

“All the staff at the Holiday Inn were perfect and lovely. I really do appreciate everything they did for me.” (Resident 3)

Distraction / Activities

One of the hotel residents mentions that they have been looking for odd jobs to do. This has included watering and tending the flower displays outside the hotel.

“I try to tire myself out so that I can get my head down and sleep well.” (Resident 4)

The other hotel resident has a more circumspect approach, limits his socialising and appears to be biding his time until he moves on.

“I keep myself to myself me. I get up, do my daily things, go and pick up my prescription and just come back to my room.” (Resident 2)

Rough sleeping

All four interviewees were insistent that they would not return to the streets. They regarded their time in the hotel as an opportunity to move on with their lives and had no intention of wasting it.

“It (rough sleeping) opens your eyes doesn’t it. Like the cleanliness side of it, that’s what got to me.” (Resident 2)

One of the residents was now a regular on TV and radio, having appeared on local news (on both channels), national news and a Radio 4 documentary.

“That’s why I do all these interviews, I want to show that even someone like me can change. I’m not going back on the streets and if I can do it anyone can. Also, these people (the staff) have done their best to help us and people need to know about that.” (Resident 4)

Moving on

Two residents had moved on. One was in private accommodation and the other was in low needs supported accommodation.

The former resident who has been rehoused is living in a one bedroomed flat. She had received a furniture package to allow her to set up home.

“I got a fridge freezer, a microwave, a washing machine, a single bed, kitchen pots and pans, cutlery and other things.” (Resident 3)

This resident felt that there could have been more support with her rehousing. For instance, she felt that she needed help with registering with a GP. This may relate to delays in providing floating support, this support is now available.

The other two residents were on the brink of moving on. They had required more intensive support and support workers had wanted them to be able to make a successful transition when they left.

“If they say just stay a bit longer so that we can get the right place then I just say yes. They are the experts, I trust them.” (Resident 4)

One of the residents was currently going through the process of applying for shared accommodation.

“I’ve been offered two places but some other guy got it. One interview, a scenario and because his scenario was different to mine he got the place.” (Resident 4)

Another was bidding on properties on Manchester Move. He is happy to remain in the hotel until he secures an appropriate property.

“I don’t know how long its going to take, it’s just a waiting game. I just want to get somewhere so I can call it home.” (Resident 2)

The resident who was now in low needs supported accommodation had been there for three weeks. He expected to be there for a few more weeks and then move into shared accommodation. He said that he had not received any help with securing accommodation since he left the hotel.

“It’s OK (the low needs supported accommodation), pretty good to be fair.” (Resident 1)

The two residents in the hotel and the former resident in low needs supported accommodation all wanted their own place. All three felt confident that they could look after themselves and make a success of independent living. However, the two hotel residents both accepted that a transitional arrangement may be necessary. Three of the four residents were looking to secure employment in the future. One resident felt that his medical conditions would make finding work very difficult. One resident also mentioned a desire to undertake voluntary work with medical charities.

“I’m hoping to get a job, see my daughter more, that’s about it really.” (Resident 1)

“I’m hoping to work on my flat, get myself fit, socialise and make a new circle of friends.” (Resident 3)



² Manchester Move is a partnership between Manchester City Council and around 20 not-for-profit landlords. It’s a single access-point for people looking for a home



We were interested in understanding what has changed for residents in the intervening 2-3 months and what new challenges have emerged for the hotel.

Aims and objectives

The Service Manager felt that the project had met (or even exceeded) its aims. One of the key reasons for the success of the project was that partners were engaged very early in the life of the project and continued to work with the hotel. There is contact with partners on a daily basis.

“I think it has gone well. Really, really very well. But it is only because the agencies are so tight and we have been working extremely closely together with City Council, GMP and some of the charitable agencies.”

Reasons for success

Staff have taken a tailored approach to support. The Service Manager also mentions that the diverse background and experience of the staff has contributed to their ability to meet specific needs of residents. The role of security staff in supporting residents is acknowledged as a key element of the success of the model.

“We realised that one size does not fit all.”

The success of the hotel resulted in the Service Manager receiving an award (on behalf of the team) from the High Sheriff of Greater Manchester.

“I know we are appreciated by the City Council. They know that we can be flexible and adapt to changing circumstances and do what we can to bring people indoors.”

The Service Manager feels that there is still a great deal of pride in the hotel amongst the residents. This is helped by the presence of longer-term residents who provide continuity.

The hotel has still not had a case of Covid-19.

Support

Initial activity (described in the section above) has been described as the triage or intensive care phase. The Service Manager mentioned that a number of activities have been developed since the initial few weeks of the service. With the initial intake the focus was on keeping residents in the accommodation and avoiding them abandoning or returning to the streets. She describes staff as “tactfully pushy” in efforts to involve residents in activities to aid their recovery.

“The message was still stay at home for the first couple of months of provision. As a result, we initiated lots of engagement and support sessions.”

The final element of the support for the initial intake was accommodation. As options for moving on materialised the support team focused on finding places for residents. There are now only a small number of residents from the initial intake.

“We are mindful of the need to ensure that these individuals do not end up in the wrong sort of accommodation that could undermine the immense progress they have made.”

Amongst the new intake, some residents have few or no needs. This creates a certain tension (or disconnect) with those residents with multiple and complex needs. This has led to extra care and attention being paid to the allocation of rooms.

“The absence of needs does not necessarily make these residents easier to manage. We are trained to deal with complex needs, some of the new residents offer a different challenge.”



The Service Manager still feels that providing support on the scale of the hotel is viable. However, she does feel that a couple of extra staff would be put to good use. Alternatively, increased use of permanent (rather than agency) staff would offer greater continuity of support. Although the roles are demanding, it is clear that staff derive great job satisfaction from their work.

“There is always someone to engage with here, there is always a case to work on, nobody is twiddling their thumbs.”

As previously mentioned, the Service Manager feels that the success of the support provided is partly a result of the security team.

“Having 55 people to look after is why we need the security staff day and night. They do the rounds, their sweeps, welfare checks, there are corners here that they can keep their eye on.”

Lockdown easing

Lockdown had provided the opportunity to monitor residents' behaviour, provide support to a captive audience and limit the time spent outside. The easing of lockdown presented challenges.

“When the pubs and shops reopened on the 4th July this place was like a ghost town for a couple of days.”

Staff had to remind residents that they should not return to the city centre, not resume street activities such as begging and continue to socially distance. There was a feeling that many residents just wanted to revisit old haunts to see what they were like. However, some have abandoned since the city centre reopened.

Partners

The hotel continues to access support from a wide range of partners (mentioned above). There are also new partnerships being forged (see migrant support mentioned below). There are still challenges with accessing some support such as mental health.

There is a concern that some of the charitable agencies who have offered support may struggle to continue the levels of support they have offered. Meals are provided by Barnabus and this is greatly appreciated. However, the Service Manager feels that if it were possible to provide meals inside the hotel it would benefit residents.

New residents

The Service Manager felt that most of the people sleeping rough identified when lockdown was introduced have been rehoused in hotels. Some abandoned (or were evicted) and went back to the streets. Some of those that abandoned (or were evicted from other hotels) have been offered a second chance and have been rehoused again.

Some of the newer residents have approached Manchester City Council for a housing assessment because they are homeless. As a result, the hotel is now providing accommodation for people who have become homeless since the Covid-19 lockdown. This includes sofa surfers who may have overstayed their welcome, people who have been thrown out by relatives, women who have fled their partner and those made homeless due to job losses and other financial consequences of Covid-19 (e.g. people in tied accommodation). There have been increasing numbers of new residents who are economic migrants who came to the UK for work. Some of these residents were living in HMOs and their landlords have evicted them.

“There is a new breed of homeless now. Some are the hidden homeless but others have been deeply affected by Covid. In fact, it is a much more diverse group of residents whose circumstances vary but have homelessness in common.”

Some of the referrals are people who are furloughed. This is a challenge because they would be expected to pay rent for their accommodation although, ultimately, they may not have a job to go back to.

There are a significant number of new residents (up to 20) who are economic migrants.

Learning Points

The interim report contained a number of learning points and challenges for the future. All of these points were still relevant. However, the follow up research also highlighted learning points that had emerged since the initial research. Key learning points include:

- The increased scale of provision (from 45 to 55 residents) has worked and not provided as any additional challenges.
- Whilst lockdown was in place, staff felt that its peculiar constraints and regime may have contributed to the project's success e.g. limited time outdoors. As a result, staff acknowledge that large scale provision of this type in the post-Covid world would need more activities, more distractions and, possibly, a similar security presence to that in the hotel. These activities have increased since lockdown was eased and there appears to be little evidence that abandonments have increased or access to support by residents has been reduced.
- The follow up interviews showed that the role of security staff is still vital in supporting residents and is acknowledged as a key element of the success of the model.
- Follow up interviews show that there are still challenges with accessing some external support. For instance, mental health services are inundated and do not have the capacity to meet all the needs of residents (and the wider community). This is a concern because the Service Manager feels that this is a key area where support is needed.
- There is much greater diversity amongst new residents and the hotel is now providing accommodation for people who have become homeless since the Covid-19 lockdown. This diversity will require the delivery model to be adapted to ensure that residents get the intensity and range of support they require. If possible, the Service Manager feels that it is important to balance the referrals that are accepted. Specifically, she would like to have a mix of people with different needs and experiences. Referrals are made by the outreach team of Manchester City Council, Greater Manchester Police, Housing Solutions and a couple of charitable agencies. The Service Manager is wary of accepting referrals with no issues (from Housing Solutions).
- The increase in new residents who are economic migrants presents a new challenge for staff. Many need support or advice relating to immigration law, EU law, No Recourse to Public Funds (NRPF) and applying for settled status. Staff have quickly familiarised themselves with these issues and sought out new partners to help their residents. In particular, an arrangement made by Manchester City Council allows residents to seek support from experts at the Booth Centre in Manchester. Residents have also been receiving advice and support from the Greater Manchester Immigration Aid Unit.
- The hotel will stay open until 31st December 2020. This would need to be effectively managed as ending provision in the midst of winter would present many problems for residents and support services. As such, there are discussions about the possibility of extending the provision until the end of March 2021.
- There are clearly some unknown aspects of the future role of the hotel (even over the next few months). A second wave of Covid, flu season, a harsh winter, more (possibly inevitable) economic hardship may all prompt new or different demands on the accommodation and its staff.
- Eventually, there will have to be an exit strategy. This is likely to entail residents not being replaced when they leave (over the course of the last two or three months of the service's life).