



Report to Policy Committee

Author/Lead Officer of Report:

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Manager**

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Report of: Director of Housing Janet Sharpe

Report to: Housing Policy Committee

Date of Decision: 21st March 2024

Subject: Rough Sleeping Programme- Extension of Health Interventions – Grant funding to Primary Care Sheffield

Has an Equality Impact Assessment (EIA) been undertaken?	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
If YES, what EIA reference number has it been given? 2631				
Has appropriate consultation taken place?	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
Has a Climate Impact Assessment (CIA) been undertaken?	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
Does the report contain confidential or exempt information?	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
If YES, give details as to whether the exemption applies to the full report / part of the report and/or appendices and complete below:-				
<i>“The (report/appendix) is not for publication because it contains exempt information under Paragraph (insert relevant paragraph number) of Schedule 12A of the Local Government Act 1972 (as amended).”</i>				

Purpose of Report:

In support of delivering the Government’s strategy to End Rough Sleeping, Sheffield City Council was awarded £4,259,194 by the Department of Levelling up, Housing and Communities (DLUHC) to fund the Rough Sleeper Initiative’s Programme 5 for a 3-year period (April 2022 – March 2025) An additional uplift to the grant of £429,000 was awarded by DLUHC and approved by Sheffield City Council in the sum of £429,000.

The programme was approved in November 2022 by the Finance Sub Committee. This included approval to spend grant allocation specifically on Health Interventions, in line with conditions and agreement with DLUHC.

This report proposes that £77,563 of the grant income funds an NHS Nurse post, specifically for the Rough Sleeper Cohort, in line with the agreed Health Interventions. This funding will ensure Primary Care Sheffield can continue providing the NHS Nurse provision for a further 12 months from July 2024.

Recommendations:

The Housing Policy Committee approves the expenditure of £77,563 grant funding (from the Rough Sleeper Initiative grant funding) to Primary Care Sheffield to fund an NHS nurse to deliver outreach healthcare and treatment services to people rough sleeping in Sheffield for a further 12 months until July 2025.

Background Papers:

(Insert details of any background papers used in the compilation of the report.)

[Finance Sub-Committee Report, 07/11/2022 14:00](#)

Lead Officer to complete:-		
1	I have consulted the relevant departments in respect of any relevant implications indicated on the Statutory and Council Policy Checklist, and comments have been incorporated / additional forms completed / EIA completed, where required.	Finance: Helen Damon
		Legal: Richard Marik
		Equalities & Consultation: Ed Sexton
		Climate: N/A
	<i>Legal, financial/commercial and equalities implications must be included within the report and the name of the officer consulted must be included above.</i>	
2	SLB member who approved submission:	Executive Director- as per initial report in 2022
3	Committee Chair consulted:	Councillor Bryan Lodge- as per initial report in 2022
4	I confirm that all necessary approval has been obtained in respect of the implications indicated on the Statutory and Council Policy Checklist and that the report has been approved for submission to the Committee by the SLB member indicated at 2. In addition, any additional forms have been completed and signed off as required at 1.	
	Lead Officer Name: Laura Costa	Job Title: Commissioning and Partnerships Service Manager
	Date: 21st March 2024	

1. PROPOSAL

- 1.1 The proposal is to approve spending of £77,563 from the Rough Sleeper Programme Grant. This allocation will come from the 2023/2024 grant budget and will be paid by the Council to Primary Care Sheffield to enable Primary Care Sheffield to continue providing the NHS Nurse Post and deliver outreach healthcare and treatment services to people rough sleeping in Sheffield for a further 12 months until July 2025.
- 1.2 The current NHS Nurse Post is provided by Primary Care Sheffield under a grant agreement and there is no funding currently allocated to fund the outreach healthcare and treatment service beyond this arrangement.
- 1.3 Research and Government policy, including those detailed in section 2 below, and feedback regarding the current service, inform us that extending the funding of the NHS Nurse post, will improve access to health services, address health inequalities and support positive outcomes for people sleeping rough.

1.4 Background

- 1.4.1 The Rough Sleeper Initiative grant was allocated to the Council by DLUHC in 2022, following a successful bid to fund the Rough Sleeper Programme. The purpose of this programme is to provide resources and support to people sleeping rough, or at risk of sleeping rough, in line with the Governments Ending Rough Sleeping Strategy. The Council commission and work in partnership with a variety of services to deliver the programme. This includes Health Services, Framework Housing Association, Roundabout Homeless Charity and the Department for Work and Pensions.
- 1.4.2 The grant, of £4,259,194, was awarded to fund the Rough Sleeper Initiative 5 programme for a 3-year period (April 2022 – March 2025). The original allocation of £4,259,194 allows the Council to plan for a long-term strategic approach to end rough sleeping. The project focuses on prevention, intervention, and recovery work, alongside improved joined-up systems, and was allocated as below:

Year 1 (2022-2023)	Year 2 (2023-2024)	Year 3 (2024-2025)	TOTAL (2022-2025)
£1,476,626	£1,413,900	£1,368,668	£4,259,194

- 1.4.3 This was agreed by the Finance Sub-committee on Monday 7th November 2022. The grant is ringfenced for delivery of the Rough Sleeping Initiative programme, with the aim to intervene in, prevent or reduce Rough Sleeping from 2022-2025. The grant allows for a continuation of already successful initiatives, such as the Council's Rough Sleeper Initiative team, the innovative Housing First team and a range of accommodation options for people who have slept rough. It also allows for an expansion of multi-agency work with colleagues in external

agencies such as Salvation Army, Roundabout Homeless charity, NHS colleagues, and the Department for Work and Pensions. Services provided include employment support, flexible surge accommodation, outreach and in-reach and health interventions.

1.4.4 An additional uplift to the 2022-2025 grant was awarded by DLUHC in September 2023 in the sum of £429,000. The initial Rough Sleeper Programme terms and conditions for spending and delivery applies to the uplift.

1.5 **Proposed grant funding to Primary Care Sheffield**

1.5.1 An underspend of the 2023-2024 grant is forecasted for approximately £240,228. The underspend is predominantly due to problems encountered in recruiting additional staffing resources, which has now been resolved. However, Sheffield City Council are required to submit a proposal to DLUHC to advise of how underspend can be repurposed to fund activity in line with the Rough Sleeper Programme. The proposal to repurpose funding for £240,228 was approved by DLUHC in February 2024. This includes the proposal to use £77,563 to fund the NHS Nurse post. for a further 12 months until July 2025.

1.5.2 The 2023-2024 grant budget must be spent by the end of March 2024. Failure to do so will result in the loss of unspent grant, in line with the grant terms and conditions. This will subsequently result in the loss of services, to the detriment of the Rough Sleeper cohort in Sheffield. Should the proposal be refused, it is highly likely that there will be a grant loss of £77,563.

1.5.3 The Council is not legally obliged to commission activity from the grant income, however in doing so it supports the delivery of the Rough Sleeper Programme and enabling a range of specialist provision to people rough sleeping.

1.5.4 It is therefore proposed that the Council pay £77,563 of the Rough Sleeping Initiative Grant in the form of grant funding to Primary Care Sheffield to continue the NHS Nurse post and provide street outreach treatment and healthcare services to people rough sleeping in Sheffield for a further 12 months. This will contribute to the Government's vision and the Council's commitment to end Rough Sleeping in line with the Sheffield Homelessness Prevention and Rough Sleeping Strategy 2023-28.

1.5.5 Subject to the approval of this proposal, the Council will enter into a grant agreement with Primary Care Sheffield to govern the grant funding arrangements.

2. **HOW DOES THIS DECISION CONTRIBUTE ?**

2.1 The proposal will have a positive impact for our customers and the city, and will contribute to the ambitions of the city, within the one-year delivery plan, in the following ways:

2.2 **Communities and Neighbourhoods and Education, health and care**

2.2.1 The NHS Nurse will help to support our local communities and neighbourhoods by supporting this very vulnerable group of people with access to healthcare, helping to reduce health inequalities and enhance health and wellbeing for people who sleep rough in Sheffield.

2.3 **Climate change, economy and development**

2.3.1 The NHS Nurse role is outreach based, largely on foot with little, or close to zero carbon contribution. In the absence of the role, it is likely that rough sleepers will attend emergency services, including Accident and Emergency departments in hospitals, and are more likely to be admitted to hospitals as medical conditions progress. This will not only create an additional draw on the resources in the city, but it would also increase the carbon emissions associated with treatment and attending follow up appointments. The role therefore aids the ambition to be a net zero carbon city by 2030.

2.3.2 The role also creates employment for a skilled worker in the city, which would not occur in the absence of the proposed funding. No alternative funding is available for the role.

2.3.3 Impacts of funding of the NHS Nurse on the city's Rough Sleeping cohort are expanded on below:

2.4 **Rough Sleeping Engagement**

2.4.1 The NHS Nurse post is a valuable starting point of engagement for many Rough Sleepers, who can have a distrust of any form of establishment. The NHS Nurse will engage with people Sleeping Rough in a place and environment where they feel more comfortable, on the streets and at community outreach centres, such as The Archer Project, and Ben's Centre. Feedback from the current service informs us that interacting with and receiving healthcare in this less formal environment promotes trust, encourages openness, and creates conduits to engagement and other essential rough sleeping services.

2.5 **Access to Health Care**

2.5.1 Research confirms that "Access to health care for this population is different to that of the general population, with one-third of people who

experience rough sleeping not being registered with a GP. Those who are registered may choose not to access the service.”¹ and “People who sleep rough face a range of barriers to accessing health and care, so services need to reach out proactively to find and engage them.”² Providing access to immediate care needs and signposting to specialist healthcare services will be a key element of the NHS Nurse’s street outreach treatment service, which is tailored to the needs of these vulnerable customers.

2.5.2 The NHS Nurse will provide invaluable access to basic physical health treatment and advice for some of the most vulnerable citizens of Sheffield, who often suffer multiple disadvantages, including mental and physical disabilities, substance abuse and domestic violence. Rough Sleepers often lack the organisational and prioritisation skills, as well as the self-awareness to manage their own health needs via traditional primary care pathways. The NHS Nurse will engage with people Sleeping Rough, on outreach, across the city centre to conduct basic health screening and minor illness / injury management, assist with the citywide GP registration for people Rough Sleeping and advise and signpost to harm reduction and other healthcare services.

2.6 Healthcare Outcomes and Homelessness

2.6.1 People who Sleep Rough experience some of the most severe health inequalities and report much poorer health than the general population. Many have co-occurring mental ill health and substance misuse needs, physical health needs, and have experienced significant trauma in their lives. The DLUHC strategy document, Ending Rough Sleeping for Good³, focuses on prevention, intervention, and recovery as core strategies to tackle Rough Sleeping. The link between meeting healthcare needs and reducing homelessness is also noted by the Local Government Association, “Where good practices are introduced though it makes a difference. People on the streets are being engaged and given vital treatment and care, which in turn is helping them transform their lives and get off the streets. If Rough Sleeping is going to be eradicated, addressing basic health needs will be an essential part of that.”⁴ By creating customer focused access to basic health services and facilitating routes to more specialised health services, the NHS Nurse’s Street outreach treatment service will help to reduce inequalities for this very

¹ Guidance - Health matters: rough sleeping, Public Health England, Updated 11 February 2020.

² Delivering health and care for people who sleep rough, Cream et al, February 2020.

³ Ending Rough Sleeping For Good, Department of Levelling Up Housing and Communities, September 2022.

⁴ Supporting the health needs of those who are experiencing rough sleeping, Local Government Association,

vulnerable group of people and contribute to improving rough sleeper's homelessness outcomes.

3. HAS THERE BEEN ANY CONSULTATION?

3.1 The Council is not required to consult on this funding and spending proposal, but through good relationships with providers across the city and our internal teams, we understand the challenges that people Sleeping Rough experience. From this insight and feedback, we can confidently propose spend for this provision. The proposal has been discussed and approved by the DLUHC specialist Rough Sleeping adviser as being in line with the purposes of the grant.

4. RISK ANALYSIS AND IMPLICATIONS OF THE DECISION

4.1 Equality Implications

4.1.1 There are no direct equality impacts on any protected groups with protected characteristics. Improving services and outcomes for people who are Rough Sleeping will positively impact on people with mental and physical health concerns and disabilities.

4.2 Financial and Commercial Implications

4.2.1 The 2023-2024 grant allocation must be spent by the end of March 2024. Failure to do so will result in the loss of unspent grant, in line with the grant terms and conditions and the grant returned to DLUHC.

4.2.2 An underspend of the 2023-2024 grant was forecasted totalling around £240,228. The underspend is mainly due to problems encountered in recruiting additional staffing resources, which have now been resolved.

4.2.3 Sheffield City Council have submitted a proposal to DLUHC to advise of how this underspend can be repurposed to fund activity in line with the Rough Sleeper Programme. The proposal to repurpose funding for £240,228 was approved by DLUHC in February 2024.

4.2.4 The agreed repurposing proposal included using £77,563 to fund the NHS Nurse post. for a further 12 months until July 2025. It is therefore proposed that the Council pay £77,563 of the Rough Sleeping Initiative Grant, in the form of grant funding, to Primary Care Sheffield to continue the NHS Nurse post and provide street outreach treatment and healthcare services to people rough sleeping in Sheffield for a further 12 months.

4.2.5 Should the proposal not be agreed, it is highly likely that there will be a

grant loss of £77,563 for 2023/24 and the grant clawed back by DLUHC.

4.2.6 Subject to the approval of this proposal, the Council will enter into a grant agreement with Primary Care Sheffield to govern the grant funding arrangements.

4.2.7 The remaining underspend on the 2023/24 grant will be spent as agreed with DLUHC, in the repurposing proposal by the end of the financial year, on internal resources within the Council and will reduce the risk of grant clawback.

4.3 **Legal Implications**

4.3.1 The Council has a variety of powers and duties under the Housing Act 1996 to address, prevent and relieve homelessness in the City. Under the Care Act 2014 the Council also has a duty to:

- promote the individual wellbeing of its constituents;
- provide or arrange for the provision of services, facilities or resources, or take other steps to prevent needs for care and support;
- promote integration of care and support with health services.

4.3.2 The Council has a general power under Section 1 of the Localism Act 2011 to do anything that an individual may generally do provided it is not prohibited by other legislation and the power is exercised in accordance with the limitations specified in the Act which enables the Council to allocate the grant funding as set out in this report via grant agreements.

4.3.3 The Council also has the power under s111 Local Government Act 1972 to pay the grant funding where it is calculated to facilitate, or is conducive or incidental to, the discharge of any of its duties above.

4.3.4 There are no subsidy control implications arising from the expenditure of grant funding to the recipient in this report – there is no “economic activity” for the purposes of the Subsidy Control Act 2022.

4.3.5 The Council must ensure that it enters into back-to-back arrangements with the recipient to ensure that its acts or omissions do not put the Council in breach of its grant agreement with DLUHC.

4.4 **Climate Implications**

4.4.1 N/A other than as detailed at paragraph 2.3.1

4.4 **Other Implications**

4.4.1 N/A

5. ALTERNATIVE OPTIONS CONSIDERED

- 5.1 The options available to spend grant allocation are limited by the extremely short timescales involved in agreeing the purposing of the funds with DLUHC, and working through the legal, approval and potential procurement and contractual processes required. All processes must be complete, and funds paid for the proposed services by 31st March 2024. Failure to comply with the required timeline will result in the loss of funds (to be returned to DLUHC) and the associated services.
- 5.2 The option of returning the unspent grant to DLUHC was considered but was discounted, due to the reputational impact to the Council, loss of funds and loss of provision for the cohort.

6. REASONS FOR RECOMMENDATIONS

- 6.1 The preferred option is to agree to the suggested use of the funding available, as agreed by DLUHC, so that the Council can extend the NHS Nurse Street outreach treatment and healthcare services to people Rough Sleeping in Sheffield until July 2025. The current service provider is well placed to deliver the service, as the existing teams are already in place to continue this work.
- 6.2 Rough Sleeping is the most visible form of Homelessness, and this cohort of customers in the city are the most vulnerable. Our Homelessness Prevention and Rough Sleeping Strategy lists 'tackling Rough Sleeping' as a key priority. The Council is committed to working towards an end to Rough Sleeping and this repurposing proposal allows us to continue this work.

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