



**MILTON  
KEYNES** | HOMELESSNESS  
PARTNERSHIP

# The Impact of COVID-19 on Homelessness in Milton Keynes

Full Report

September 2021

## About Milton Keynes Homelessness Partnership

Milton Keynes Homelessness Partnership (MKHP) is a network of 35 public, private and voluntary sector organisations who connect to prevent and end homelessness in Milton Keynes. We do this by facilitating innovative ideas on how to end homelessness, focussing on prevention rather than cure. We encourage engagement, share good practice, advocate for change and champion a joined-up approach to achieve better outcomes for people who are homeless or are at risk of homelessness

## Acknowledgements

This report was produced on behalf of Milton Keynes Homelessness Partnership by Emma Spring, Research Consultant.

Without the support and involvement of key local and national organisations this research and report would not have been possible. Milton Keynes Homelessness Partnership would therefore like to thank all partners who contributed to this report including: Aspire Oxford; Healthwatch; MK ACT; Milton Keynes Council; Depaul; Emmaus; P3 Charity; SMART; My Milton Keynes (MKBID); Thames Valley Police; The Bus Shelter MK; YMCA; Public Health England; Winter Night Shelter Milton Keynes; Citizens Advice; Milton Keynes GP Federation

Funding from the Coronavirus Community Support Fund, distributed by The National Lottery Community Fund, has helped us to produce this report. Thanks to the Government for making this possible.



## Contents

Introduction .....	4
Methodology.....	5
Section 1: Homelessness within Milton Keynes before COVID-19 .....	6
Section 2: The need for COVID-19 policies .....	12
Section 3: The impact on public perception .....	15
Section 4: The impact on those who are homeless or at risk of homelessness .....	18
Section 5: The impact on service providers .....	36
Section 6: The future.....	47
Section 7: Conclusions and reflections .....	52
Section 8: Recommendations .....	57
Glossary of terms .....	61

## Introduction

Milton Keynes Homelessness Partnership (MKHP) are keen to ensure it can provide the best service to its partners and end users. To do this we need to understand the true reflection of homelessness within the Milton Keynes area. Especially at the current time, where the COVID-19 pandemic has disrupted usual working patterns. MKHP therefore commissioned research to provide, ourselves and our partners, with a baseline understanding of the current state of homelessness within Milton Keynes.

The initial plans were to conduct a secondary data review to collect evidence of the impact COVID-19 on homelessness within Milton Keynes. However, most reports only provided the national picture, with limited detail at a more local level. Therefore, to capture the local knowledge, several interviews were conducted with key partners involved in homelessness support within Milton Keynes to determine the extent to which national findings were reflected within Milton Keynes.

This report contains the findings from that research. It provides an overview of a very complex area and is designed as the first step in understanding how Milton Keynes is currently supporting people who are homeless or are at risk of homelessness, and ways in which that could be improved. It looks at the historical homelessness situation within Milton Keynes, then assesses what impact the COVID-19 pandemic has had. It provides an insight into changes that have occurred nationally and then focusses on the impact at a local level within Milton Keynes. It then considers the long-term implications of the pandemic on homelessness and suggests areas of focus for MKHP moving forward.

The research was conducted between March and April 2021.

## Methodology

The contents of this report are based on primary and secondary research conducted between March and April 2021, looking at things that had happened before and during this time. The situation was constantly changing and not all relevant content may have been captured due to this. Findings in this report do not capture changes post April 2021.

### 1. Secondary data review

A review of relevant reports and evaluations, which showed the impact of COVID-19 and associated policies and guidelines on homelessness within the UK, was conducted.

This also included identifying relevant national data sources that allowed a comparison of national and regional data. The hope was also to gain access to more detailed regional data to fully understand the impact within Milton Keynes, but despite multiple attempts to access this, it was unavailable. Therefore, all data used in this report is taken from national data sources and may have gaps.

### 2. In depth qualitative interviews with key partners within Milton Keynes

Using information gathered from the secondary review, questions were developed to support in depth discussions with key local partners across a range of services and provision within Milton Keynes. These were designed to assess the extent to which the impact experienced at a national level was also seen within Milton Keynes.

MKHP reached out to partners asking for their input into the research. Overall 16 took part.

- Aspire Oxfordshire
- Healthwatch UK
- MK-Act
- Milton Keynes Council
- DePaul
- Emmaus
- My Milton Keynes (MKBID)
- P3
- SMART
- Thames Valley Police
- The Bus Shelter
- YMCA
- Public Health
- Winter Night Shelter
- Citizens Advice Bureau
- Milton Keynes GP Federation

This report uses the secondary data to demonstrate the overall impact of the pandemic at a national level and then uses feedback from local partners within Milton Keynes to determine the extent to which similar outcomes were experienced in the city.

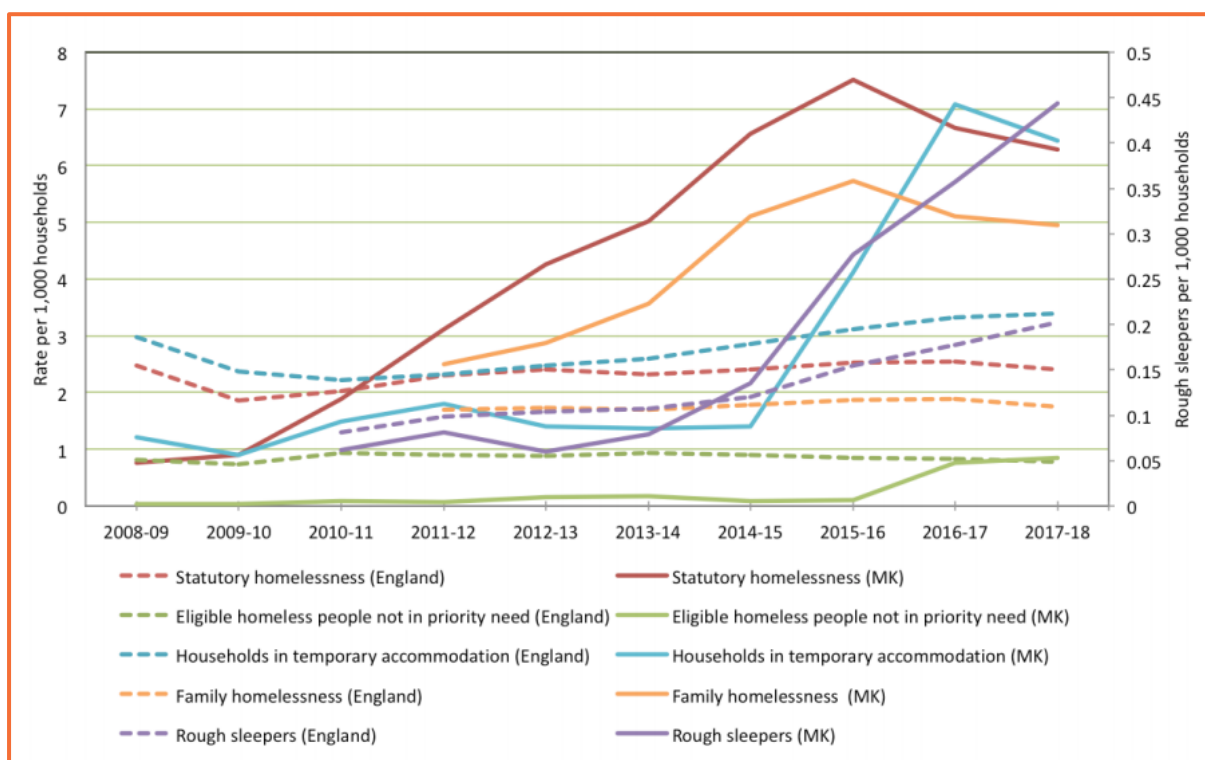
Throughout the report quotes from interviewed partners have been included to demonstrate the impact of COVID-19 on homelessness within Milton Keynes. These quotes have been kept purposefully anonymous to protect identities.

## Section 1: Homelessness within Milton Keynes before COVID-19

Homelessness is an ongoing issue in England, with numbers continuing to increase year on year. The total number of households in temporary accommodation in England increased by 75% between 2010 and 2019<sup>1</sup> with rough sleeping numbers increasing by 141% between 2010 and 2019.<sup>2</sup>

Homelessness levels in Milton Keynes are particularly concerning. Data shows that since 2008 homelessness in Milton Keynes has increased at a much greater rate than the national average, especially after 2014 where there was a steep increase in numbers of people in temporary accommodation and rough sleeping.

Figure 1: National and local homelessness trends before COVID-19<sup>3</sup>



<sup>1</sup> Ministry of Housing, Communities and Local Government (2020) Statistical data set: Statutory homelessness live tables

<sup>2</sup> Ministry of Housing, Communities and Local Government (2019) Rough sleeping snapshot in England: Autumn 2019

<sup>3</sup> Milton Keynes Council (2018) Director of public health report: Homelessness and Health. Available at: <https://www.milton-keynes.gov.uk/social-care-and-health/2016-2017-joint-strategic-needs-assessment/director-of-public-health-reports>

As of December 2019, it was estimated that one in every 137 people were without a home in Milton Keynes, compared to one in every 200 people in England.<sup>4</sup> Milton Keynes is ranked 37<sup>th</sup> nationally for its homelessness levels among the 343 local authorities in England. The majority of those ranked ahead of it are areas of London, Manchester, and Birmingham.<sup>5</sup>

*“We actually have quite a high level of homelessness overall, as if we are a big city.”*

There are many factors which act together to cause Milton Keynes to have such high homelessness levels.

## 1. History and reputation

Milton Keynes is a relatively new town, born from an Act of Parliament in 1967 built to ease the housing shortages in London. Its founding principles were for an "attractive" town that enshrined "opportunity and freedom of choice."<sup>6</sup>

It has been ranked in the top 5 places to live in the UK<sup>7</sup> and scores highly on jobs, health, new business start-ups, income, skills, and the environment. It is also a hotspot for business, featuring as one of the best performing places in the UK for jobs growth, earnings, and economic success.<sup>8</sup>

This makes the city an appealing place to relocate to and is now one of the fastest-growing cities in the UK. Its current population is around 230,000, a growth of 15% in the last 15 years. With some estimates suggesting it could be a city of 500,000 by 2050.<sup>9</sup>

However, despite its prosperity, many areas of Milton Keynes are classed as deprived. Based on the index of deprivation of 2019 eight areas of Milton Keynes are within the 10% most deprived in England, with two areas among the 2% most deprived<sup>10</sup>. It ranked 23rd out of all 317 local authorities in England for barriers to housing and services.

Whilst Milton Keynes has a thriving job market, there is also a lot of unstable jobs with people relying on factory work and hospitality jobs, based on zero-hour contracts. Salaries which limit people from meeting the local house prices or rents.

---

<sup>4</sup> Big Issue (2021) How many people are homeless in the UK? Available at: <https://www.bigissue.com/latest/social-activism/how-many-people-are-homeless-in-the-uk-and-what-can-you-do-about-it/>

<sup>5</sup> Shelter (2019) This is England: A picture of homelessness in 2019. Available at: [https://england.shelter.org.uk/professional\\_resources/policy\\_and\\_research/policy\\_library/this\\_is\\_england\\_a\\_picture\\_of\\_homelessness\\_in\\_2019](https://england.shelter.org.uk/professional_resources/policy_and_research/policy_library/this_is_england_a_picture_of_homelessness_in_2019)

<sup>6</sup> Cawley, L (2017) Milton Keynes: The middle-aged new town. BBC News. Available at: <https://www.bbc.co.uk/news/uk-england-beds-bucks-herts-38594140>

<sup>7</sup> PricewaterhouseCoopers and Demos (2021) The good growth for cities index. Available at: <https://www.pwc.co.uk/industries/government-public-sector/good-growth.html>

<sup>8</sup> Property Investment UK (2021) Areas of Milton Keynes. Available at: <https://www.propertyinvestmentsuk.co.uk/milton-keynes-buy-to-let/>

<sup>9</sup> Property Investment UK (2021) Areas of Milton Keynes. Available at: <https://www.propertyinvestmentsuk.co.uk/milton-keynes-buy-to-let/>

<sup>10</sup> Ministry of Housing, Communities and Local Government (2019) English indices of deprivation. Available at: <https://www.gov.uk/government/statistics/english-indices-of-deprivation-2019>

The increase in population has not been matched in available housing. There is not enough affordable housing stock to meet the demand. House and rental prices are high, with houses valued at £25,000 above the national average (Milton Keynes average £269,826, UK average £244, 523<sup>11</sup>) and average monthly rental prices £900 a month compared to £695.<sup>12</sup>

*“Accommodation is very expensive. It's a commuter area, so lots of people live in Milton Keynes and commute to London. So, accommodation is very expensive. So, unless you got very good salary you know the possibility of getting into accommodation is really difficult.”*

There is a significant lack of social housing. The legacy of ‘free’ council housing still attracts people to the city. However, the amount of supported housing available in Milton Keynes is far below the levels that are needed. While data shows that 187 households were deemed unintentionally homeless and in priority need of housing during October to December 2019, only 19 were provided with a social housing offer by Milton Keynes Council.<sup>13</sup>

*“People think that the house building going on is council housing, which it isn't. There's a very high expectation of what was given when Milton Keynes was started that everybody's children's children will have a council property and that was in the 70s. But it's very clear that that expectation is still out there. So, despite all the numbers in the local press about temporary accommodation and the lack of council housing there still is very high expectation that Milton Keynes is a place to get social housing.”*

*“The biggest thing I see Milton Keynes is different from other areas is that the lack of move on accommodation, supported accommodation.”*

Some also claim that the housing stock that is available is below standard, being poorly maintained. Some social housing that is still being used, when built was only ever meant to be temporary.

*“Milton Keynes, you know it's 50 years old. A lot of the earlier estates that were built here, the quality of the housing on the on those estates is terrible.”*

---

<sup>11</sup> MacLeod, L (2020) Milton Keynes house prices increased more than across the South East in September. Available at: <https://www.miltonkeynes.co.uk/business/consumer/milton-keynes-house-prices-increased-more-across-south-east-september-3040188>

<sup>12</sup> Office for National Statistics (2020) Private rental market summary statistics in England: April 2019 to March 2020. Available at: <https://www.gov.uk/government/statistics/private-rental-market-summary-statistics-in-england-april-2019-to-march-2020>

<sup>13</sup> Ministry for Housing, Communities and Local Government (2020) Statutory Homelessness in England: October to December 2019. Available at: <https://www.gov.uk/government/statistics/statutory-homelessness-in-england-october-to-december-2019>



## 2. Location and landscape

The location and design of Milton Keynes also plays a significant role in the levels of homelessness. Its proximity to London, and easy transport links to other areas of the country encourages people who are homeless to travel to the city.

*“Someone had come down from Scotland and someone had come up from Southampton. Both said they'd been advised to come to Milton Keynes. By other homeless people.”*

The city landscape with its numerous underpasses and parks provides sheltered spaces for rough sleeping.

*“We have a city landscape that is ideal for homelessness because of the warm dark underpasses in which they can live. Keeps them dry particularly in the winter.”*

## 3. Progress

The city had started to make progress in improving the homelessness issues. Through the implementation of the Homelessness Reduction Act 2017, funding from the Rough Sleeper Initiative 2018 and the introduction of the Housing First initiative (2018) the council and other supporting services have become more aware of and ready to support homelessness and rough sleeping. This in turn has helped improve services, support, and resources to reduce numbers over the last two years.

*“There was a real push to do something about it before covid.”*

*“Prior to Covid we had something like 25 in Milton Keynes, who were verified rough sleepers. Two or three years ago we had over 100. So, we've steadily brought numbers down between different initiatives.”*

The council have invested time, money, and resources to their team. They have developed a good knowledge of the issues facing homelessness in Milton Keynes and implemented processes to help and improve those issues.

They have spent time building up relationships with external organisations within the city as well as building up rapport and their reputation with the government. This has meant that when a response was needed to COVID, relationships already existed making the implementation of plans more efficient and streamlined.

*“We were very fortunate because of the good work we've done over the last few years. Under our Rough Sleeper initiative funding, we had a good channel into our ministry advisors.”*

They had started looking at more preventative measures with regards to homelessness, recently commissioning new services from DePaul and Citizens Advice Bureau to support those at risk of homelessness.

The council are currently in the process of embedding homelessness within the adult social care remit, bringing key services closer together and enabling more joined up working with a person-centred approach. Whilst this is a relatively new change, improvements have already been seen. Different teams within the council now have a greater awareness of what is happening and the needs of individuals making their services more efficient.

*“What has actually happened is Adult Social Care are now understanding more about what we do and understanding there are more vulnerable people out there that they need to support that fell through the statutory gaps. We now have a community support team. They offer more sort of wrap around social care support for the vulnerable people that we've always worked with under housing because of our priority need that have not ever before met a social care criteria”.*

*“What has grown up from my perspective is a much, much better joined up relationship and a much, much better understanding of the vulnerable people that we work with.”*

With the increase in funding and focus on homelessness, connectivity between key organisations and services across the city have also improved in recent years.

*“Information sharing has definitely improved. Which is good. Because what we don't want to be doing is duplicating things and, we don't want somebody who is particularly vulnerable having to repeat their story over and over and over again when it's not necessary.”*

This has been further strengthened with the establishment of Milton Keynes Homelessness Partnership. Although it has taken us some time to find our feet, we have made significant improvements in defining our role and responsibilities. However, we acknowledge more needs to be done to further improve and strengthen our position.

*“The MK Homelessness Partnership model has become far more outcomes focused and I think that's it still got a way to go, but it's definitely broken down some of the barriers and the isolation between organisations, so I think if we can keep that going, we will be in a good place to keep the momentum going to work together.”*

## 4. Frustrations

Despite there being a large network of support organisations for people who are homeless or at risk of homelessness within Milton Keynes, and improvements in how they work together, some feel that supporting homelessness in the city can still be challenging.

Although relationships have been strengthened, collaboration is still not as effective as it could be. Some blame the transparency of some services and their willingness and openness to working with others.

Also, many partners talked of their frustration with the bureaucracy involved in trying to achieve support for people who are homeless or are at risk of homelessness. The process is felt to be very complicated and inflexible and not at all in line with the reality of being homeless.

*“You can’t go into a location and say I’ve just been made homeless. Can you please help me? You must send in an online form. You must wait for a phone call. You must stay in the same place so someone can prove that you’re homeless. You know those things are extremely difficult, especially if you don’t have a phone, no credit or whatever.*

*Even we, people who are working in this sector, I don’t think really understand what the process is. Or what we are supposed to advise people if they haven’t got a phone.”*

Things have also been further complicated due to the COVID-19 pandemic with additional challenges and barriers put in place, impacting how services work and the support they can offer.

## Section 2: The need for COVID-19 policies

The COVID-19 pandemic has brought new challenges to the homelessness plight. The disease put immense strain on health care systems and countries were struggling to manage the impact.

In answer to the crisis, national governments brought into place several rules, regulations, and policies to try and reduce the transmission of the virus and protect the most vulnerable people.

On 16th March 2020 the UK Government announced that all adults who meet clinical criteria for influenza vaccination and those aged over 70 years of age (classified as clinically vulnerable) should stay at home without contact with others for a twelve-week period. In addition, as the crisis developed, further guidance was given:

- Stay at home where possible.
- Socially distance by keeping at least one (later updated to two) metres apart.
- Wash your hands regularly.
- Work from home where possible.

Key organisations lobbied to include people experiencing homelessness in one of the key vulnerable groups, as they typically have much poorer health than the general population due to a lack of access to quality health care and social care.<sup>14</sup> The average age of death for people experiencing homelessness is 45 for men and 43 for women.<sup>15</sup> Many have various comorbidities and therefore have a higher risk of becoming ill with COVID-19. Data suggested 41% of people who are homeless or are at risk of homelessness fulfilled the clinically vulnerable criteria<sup>16</sup>

Alongside this, their circumstances make it difficult to follow government advice:

- Where do you go when you are told to stay home if you don't have a home?
- Where do you wash your hands?
- How do you self-isolate and stay socially distant if your living circumstances force you to shelter with many people?
- How do you get critical supplies like masks and face coverings?

---

<sup>14</sup> Local Government Association (2017) The impact of homelessness on health: A guide for local authorities. Available at: [https://www.local.gov.uk/sites/default/files/documents/22.7%20HEALTH%20AND%20HOMELESSNESS\\_v08\\_WEB\\_0.PDF](https://www.local.gov.uk/sites/default/files/documents/22.7%20HEALTH%20AND%20HOMELESSNESS_v08_WEB_0.PDF)

<sup>15</sup> Crisis (2021) About homelessness. Available at: <https://www.crisis.org.uk/ending-homelessness/about-homelessness/>

<sup>16</sup> Story, A and Hayward, A (2020) COVID-19 Homeless Sector Plan. Available at: <https://www.pathway.org.uk/wp-content/uploads/COVID-19-Homeless-Sector-Plan.pdf>

The key public health messages around social distancing, staying indoors and washing hands regularly failed to recognise the barriers people experiencing homelessness face to doing so:

- Difficult to social distance / self-isolate /shield
- Limited access to masks / tests (need for address)
- Track and trace unsuitable (no access to phone / email)
- Need for social distancing led to greater isolation.
- Access to facilities to stay clean.

The government acknowledged that people who are homeless were at significant risk of catching and transmitting the virus. Government policies and interventions were therefore put in place solely to minimise the risk to them. These policies have impacted provision, services and support for people who are homeless or at risk of homelessness for over a year and are likely to have a long-term impact.

## 1. Key policy timeline

Outlined below is some key policy and government announcements from the start of lockdown in March 2020 until March 2021. This is not an exhaustive list but some of the key things which had a notable impact on people who are homeless or are at risk of homelessness.

Month	Date	Policy
March 2020	17 <sup>th</sup>	<i>Everyone In</i> – accommodation for rough sleepers (see appendix 1 for details)
	18 <sup>th</sup>	Eviction ban (initially until Jun 2020, but now maintained until end of May 2021)
	19 <sup>th</sup>	Public Health England (PHE) release guidance for providers of services for people experiencing homelessness. Frontline staff for homelessness confirmed as key workers
	26 <sup>th</sup>	<i>Everyone In</i> remit expanded to people in shelters, assessment centres and rough sleepers including those with no recourse to public funds (NRPF)
	27 <sup>th</sup>	Deportation of asylum seekers suspended until Jun 2020 (deportation commenced in August 2020)

April 2020	8 <sup>th</sup>	Treasury announces £750 million support package for charities to maintain support during COVID
	18 <sup>th</sup>	MHCLG pledges £1.6 billion extra funding for local councils
	20 <sup>th</sup>	NHSE/I release Homeless Staffing Approaches and COVID-19 Homeless Health Oversight Implementation

May 2020	2 <sup>nd</sup>	MHCLG specialist task force created to lead next phase of support for street homeless. Those facing homelessness through fleeing domestic abuse considered priority need
	7 <sup>th</sup>	MHCLG announces £6 million ringfenced funding for frontline homelessness services
	24 <sup>th</sup>	MHCLG announces plans to produce 6000 new supported homes backed by £433 million government funding. 3300 new homes available in next 12 months

	29 <sup>th</sup>	Minister for rough sleeping and housing requests initial move on plans from local authorities during update on next step in rough sleeping response
June 2020	5 <sup>th</sup>	Eviction ban extended to 23 <sup>rd</sup> August
	24 <sup>th</sup>	MHCLG announces £105 million to keep rough sleepers safe and off the streets
July 2020	18 <sup>th</sup>	Launch of Next Steps Accommodation Programme – new housing for vulnerable people
August 2020	18 <sup>th</sup>	Eviction ban extended for 4 weeks
Oct 2020	13 <sup>th</sup>	£10 million cold weather payment for councils to help rough sleepers and £2 million for faith and community groups to support rough sleepers into accommodation
	31 <sup>st</sup>	4-week lockdown announced in England
Nov 2020	5 <sup>th</sup>	4-week national lockdown announced Eviction ban extended to January 2021. 'Protect Programme announced to support rough sleepers
Dec 2020	16 <sup>th</sup>	Tier 3 measures due to Kent Variant imposed
	20 <sup>th</sup>	Tier 4 measures due to Kent Variant imposed Stay local message conveyed, Christmas plans reduced
Jan 2020	4 <sup>th</sup>	National Lockdown announced
	8 <sup>th</sup>	Additional £10 million in funding announced. A directive that all councils in England must redouble their efforts to help accommodate all those currently sleeping rough and ensure they are helped to register with a GP so that they can access the vaccines. evictions ban extension until 21 <sup>st</sup> Feb
Feb 2020	10 <sup>th</sup>	Announcements to funds available in the coming year - councils have access to £51.3 billion next year, a £2.3 billion increase on this year
March 2020	8 <sup>th</sup>	Lockdown easing commences
	11 <sup>th</sup>	Joint Committee on Vaccination and Immunisation (JCVI) recommends homeless people are aligned with people in priority 6 group for vaccinations and should be offered the vaccine without the need for GP registration

This report looks at how different policies and guidelines impacted people who are homeless or are at risk of homelessness at a national level and within Milton Keynes.

## Section 3: The impact on public perception

### 1. Raising awareness of homelessness

One of the main benefits of the COVID-19 interventions is the extent to which they have raised the profile of homelessness, increasing the recognition, and understanding of the issues to record levels.

- People are now more aware of the range of causes of homelessness.
- People understand that homelessness applies to more people than just those who are rough sleeping.
- The Government now have a better understanding of the vastness of the problem.

#### In Milton Keynes:

Partners within Milton Keynes also agreed that the pandemic has been instrumental in raising awareness of homelessness:

*“The pandemic has been good for the homeless population in that they have risen up the political agenda at all levels of national and local public health.”*

*“Covid has actually helped open up understanding of the hidden homeless and their vulnerabilities.”*

*“From the government level I think there's been a recognition that if you put resources in early on and get people into housing and put the culture around it, you are going to get much better outcomes.”*

### 2. Accuracy of data

However, it has also identified issues with data collection, which have been underrepresenting the homelessness situation for a long time.

For the first time, the scale of the rough sleeping population in England has been made clear and it far exceeds the government's previous estimates.<sup>17</sup> The numbers that were housed through *Everyone In* were nine times higher than the last official Government estimate of people sleeping rough in autumn 2019.<sup>18</sup>

---

<sup>17</sup> National Audit Office (2021) Investigation into the housing of rough sleepers during the COVID-19 pandemic. Available at: <https://www.nao.org.uk/wp-content/uploads/2021/01/Investigation-into-the-housing-of-rough-sleepers-during-the-COVID-19-pandemic.pdf>

<sup>18</sup> lancet

For those on the ground supporting homelessness this was not a surprise. For years they have argued that the national rough sleeper count figures are collected through a methodology which is deeply flawed and leads to misleading and under representative figures of rough sleeping. A significant proportion of rough sleeper data is predicted, shown in the official data as 'estimated' rather than actual counts.

### In Milton Keynes:

Partners in Milton Keynes agreed with the misrepresentation of figures.

*"Organisations have been saying for years that it's not an accurate picture of what homelessness is, and I think the 'Everyone In' program has just shown it's deeply flawed."*

The data for the city also replicated national figures, showing much higher numbers compared to those that are reported. Data provided from Milton Keynes council showed that in total, between March 2020 and May 2021, 208 people were given accommodation through *Everyone In*.

Alongside the poor methodology used for the Rough Sleeper Count, when asked why they thought the numbers were so misaligned, partners identified two other main reasons.

#### **1. Who could be included in the numbers?**

*Everyone In* showed a higher number of people because of who could be included in the emergency accommodation offer.

Whilst the initial remit covered rough sleepers only, this was soon expanded to cover more groups which included people with no recourse to public funds amongst others.

*"So, we went from having our known rough sleepers in, to anybody that found themselves homeless. Had they lost their job? Had they split up with their partner? Is it a 19-year-old that isn't abiding by his moms rules? Is it somebody that stays with grandparents and they're vulnerable and she needs to come into the hotel?"*

This led to a significant greater number of people being housed, who would not be visible or included in the annual rough sleeper count but are officially homeless such as:

- People who are usually transient moving between areas and were now unable to move around because of government restrictions, who may have previously fallen out of a rough sleeper count
- Those no longer able to sofa surf because of isolation
- People who could no longer stay in hostels as they were closed.
- People with no recourse to public funds (NRPF), such as asylum seekers, who typically were not included in local authority responsibilities with regards to homelessness.



## **2. The offer of hotel accommodation**

The offer of safe accommodation in hotels was very appealing. It offered a safe, warm dry independent space. Therefore, more people were encouraged to come forward who previously would not have engaged with homelessness services.

*“We are offering somewhere that is safe and warm and dry with support. This made a massive benefit.”*

Partners had experienced similar incidences in previous years when hotel accommodation was offered as an alternative to ‘sit up’ accommodation as part of SWEP (severe weather protocol) provision.

*“During our SWEP accommodation about four years ago we only had hotels and we housed about 180 people. When we only had our somewhere safe to stay hub to offer, which was a sit up space, they didn't want that, so suddenly they weren't rough sleeping anymore and they found somewhere else to go. A hotel is an attractive prospect.”*

Some people also felt the numbers were still not truly representative of all rough sleepers. When asked why, partners identified two main reasons.

### **1. Issues with the verification process**

The way in which the verification process worked led to some people being missed.

*“You just needed to be verified as homeless and to do that you have to be on the street when somebody comes to check that. We have so many examples of why that doesn't work. Drug addicts who collect their script from a pharmacy a 2 hour walk away so you can't stay waiting to be verified. People suffering with paranoia who won't have a mobile phone, but part of the verification process if they can't find you is to try and reach you by phone. The other challenge is it assumed that homeless people had access to the things that we needed to get hold of people like phones.”*

### **2. Rejection of accommodation offer**

Some rough sleepers did not want to be housed as the conditions would be too restrictive on their lifestyle.

*“A large percentage would not go. They were not allowed to leave the hotel and so were not able to obtain their drugs to feed their habit. We believed it was also because they could not beg for money to get the funds to buy their drugs”.*

## Section 4: The impact on those who are homeless or at risk of homelessness

### 1. Minimising COVID infection rates and deaths

The COVID-19 interventions were successful in meeting the Government's primary goal of preventing people who are homeless from dying from COVID-19. At the end of June 2020, only 16 people whose deaths were registered as involving COVID-19 in England were identified as having been homeless, equally less than 3% of all COVID-19 recorded deaths.<sup>19</sup>

In addition, it was estimated that between February and May 2020, the measures prevented:

- 21 092 infections,
- 266 deaths,
- 1164 hospital admissions
- 338 ICU admissions.<sup>20</sup>

Impressive figures compared to outcomes in other countries. Data from Paris showed 50% of the 543 people living in homeless shelters in the city had contracted the virus<sup>21</sup>

Whilst these are positive results, emerging data from the second wave of the pandemic suggest a sharp rise in cases of COVID-19 among the rough sleeping population in London in December 2020 and January 2021 potentially driven by an apparent rise in the use of and occupancy rates within hostels with communal facilities.<sup>22</sup>

#### In Milton Keynes:

We were unable to find specific data for Milton Keynes around deaths and infections linked to COVID-19 in among people who are homeless. The partners involved in the research also did not mention any known outbreaks.

*"I am not aware that there's been any particular kind of outbreaks of covid among homeless communities anywhere. I don't think they have been in MK. I guess that's a positive."*

<sup>19</sup> House of Commons Public Accounts Committee (2021) COVID 19: Housing people sleeping rough. Available at: <https://publications.parliament.uk/pa/cm5801/cmselect/cmpubacc/934/93402.htm>

<sup>20</sup> Lewer, D et al (2020) COVID-19 among people experiencing homelessness in England. The Lancet. 8 (12) 1181-1191. Available at: [https://www.thelancet.com/journals/lanres/article/PIIS2213-2600\(20\)30396-9/fulltext](https://www.thelancet.com/journals/lanres/article/PIIS2213-2600(20)30396-9/fulltext)

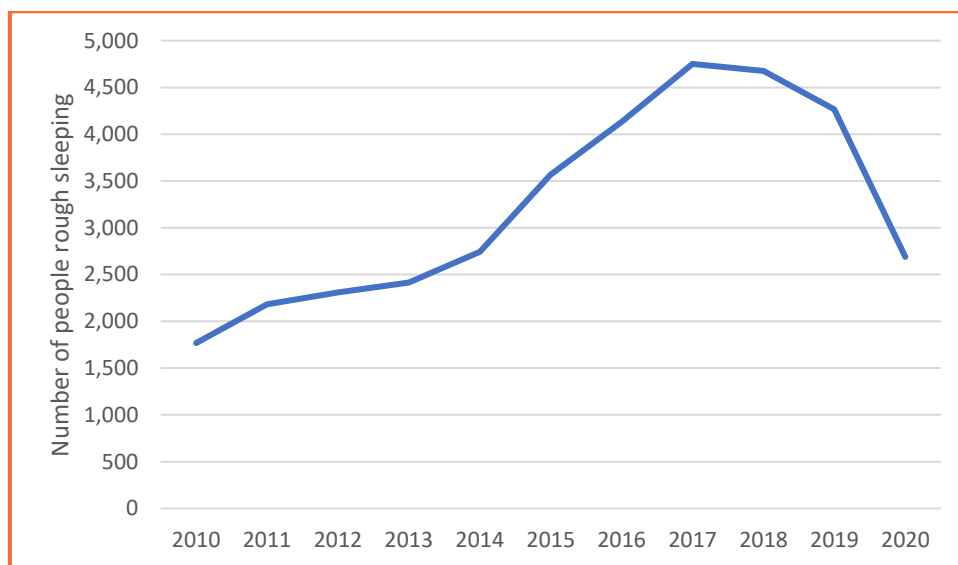
<sup>21</sup> Heath, L (2020) Rough sleeping in lockdown 2.0: Is the government's Everyone In policy on the way out? Inside Housing. Available at: <https://www.insidehousing.co.uk/insight/insight/rough-sleeping-in-lockdown-20-is-the-governments-everyone-in-policy-on-the-way-out-68594>

<sup>22</sup> House of Commons Public Accounts Committee (2021) COVID 19: Housing people sleeping rough. Available at: <https://publications.parliament.uk/pa/cm5801/cmselect/cmpubacc/934/93402.htm>

## 2. Reducing rough sleeping: *Everyone In*

Data shows that the *Everyone In* campaign was very successful in its aim of getting rough sleepers off the street. The annual MHCLG Rough Sleeping Snapshot shows a dramatic drop in numbers between 2019 and 2020.

Figure 2: Number of people recorded as rough sleeping in England from 2010-2020<sup>23</sup>



By January 2021, 37,430 people had been put into accommodation across the UK through the programme.<sup>24</sup> *Everyone In* was felt to have benefited 90% of rough sleepers and those in unsuitable sheltered accommodation.<sup>25</sup>

However, there are questions around how long the policy will last. By April 2021, ministers insisted that *Everyone In* had not ended, however many in the sector said this was far from the reality on the ground. Changing definitions of who should be accommodated is impacting the consistency of the current provision. Charities are reporting that councils have begun reinstating pre-pandemic criteria which sees them only responsible for housing families with children or those with a specific ‘vulnerability’<sup>26</sup>

<sup>23</sup> Ministry for Housing, Communities and Local Government (2021) Rough sleeping snapshot in England: Autumn 2020. Available at: <https://www.gov.uk/government/statistics/rough-sleeping-snapshot-in-england-autumn-2020>

<sup>24</sup> House of Commons Public Accounts Committee (2021) COVID 19: Housing people sleeping rough. Available at: <https://publications.parliament.uk/pa/cm5801/cmselect/cmpubacc/934/93402.htm>

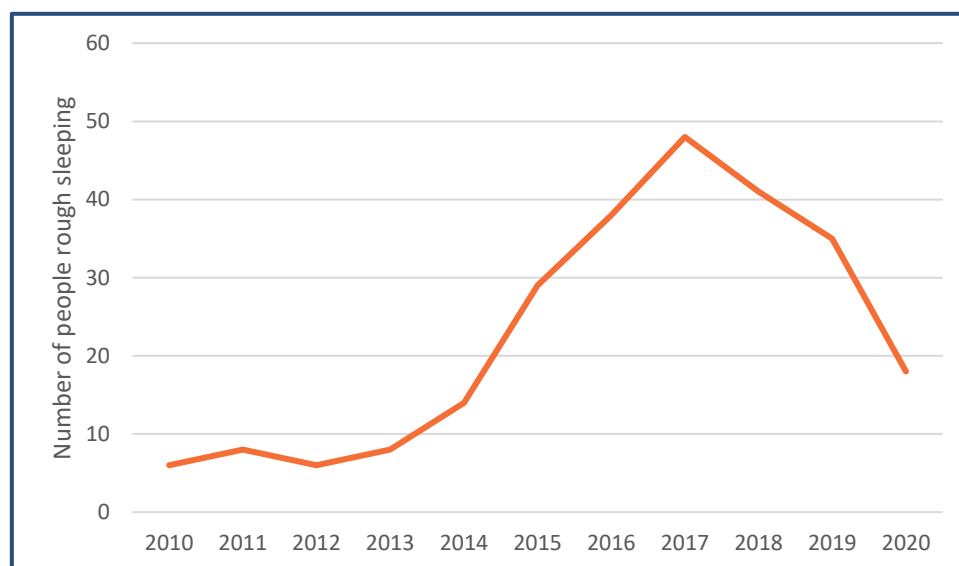
<sup>25</sup> British Medical Association (2020) Written evidence submitted to the Housing, Communities and Local Government Committee: Impact of Covid 19 on homelessness and the private rented sector. Available at: <https://committees.parliament.uk/writtenevidence/17648/pdf/>

<sup>26</sup> Heath, L (2020) Rough sleeping in lockdown 2.0: Is the government’s *Everyone In* policy on the way out? Inside Housing Available at: <https://www.insidehousing.co.uk/insight/insight/rough-sleeping-in-lockdown-20-is-the-governments-everyone-in-policy-on-the-way-out-68594>

### In Milton Keynes:

The impressive figures with regards to the reduction in rough sleepers was also replicated in Milton Keynes, where there was a significant drop in numbers between 2019 and 2020.

*Figure 3: Number of people recorded as rough sleeping in Milton Keynes from 2010-2020<sup>27</sup>*



*“Numbers [of rough sleepers in the city centre] have gone down dramatically from 125 tents to one from 40 people in bags to four.”*

By June 2020, Milton Keynes Council had supported 127 people that were either rough sleeping or at risk of rough sleeping into emergency accommodation. This included rooms at a centrally located hotel, which also included additional support services on site such as mental health support and drug and alcohol services, working with other organisations to provide this<sup>28</sup>

*“It was incredible how organisations came together and made things happen in a space of weeks. Everybody was scooped off the street and put into temporary accommodation, which was fabulous.”*

Everyone In also has a positive impact on other services such as A&E, which people who are homeless may previously have used as a way of gaining shelter.

*“We noticed they're generally not going into A&E as much because they've got a B&B.”*

<sup>27</sup> Ministry for Housing, Communities and Local Government (2021) Rough sleeping snapshot in England: Autumn 2020. Available at: <https://www.gov.uk/government/statistics/rough-sleeping-snapshot-in-england-autumn-2020>

<sup>28</sup> MK Community Foundation (2020) Vital Signs. Available at: <https://www.mkcommunityfoundation.co.uk/about/vital-signs-2020>

### 3. Suitability of Accommodation

Whilst the process has indeed been successful at getting people in off the streets, there are questions around the suitability of that process, and the accommodation offered.

*Everyone In* was announced and implemented in an extremely tight timeline. Amazing things were achieved, but the speed at which it was done meant there was not enough time for accurate planning, which often led to certain needs not being met: lack of food; limited medical support and lack of access for those that are alcohol dependant.<sup>29</sup>

The staff implementing the changes did an outstanding job, achieving what they did in the time allowed, but many acknowledged that things could have been much better if more time had been allowed for planning and implementation.

Many felt that the accommodation offered was not suitable for the complex needs of some people who are homeless or are at risk of homelessness. These people need more than just accommodation, but also require additional support and guidance.

*“On the face of it, moving people from the streets into accommodation. I guess generally is a good thing. But the realities and the complexities of it are ongoing.”*

*“The Government put some more money out to get accommodation, but it's combinations up to two years again. Why should people who are homeless be treated differently. You've only got it for two years. They want security. They want to say this is my home for as long as I want it and to have self-respect to have that.”*

*“The policies around getting everyone in, it's working well. But there is not enough work being done to look at the wider determinants of why this person is homeless? Is that their mental health? Is that their addiction? Is it the budgeting? What is it that caused them to be on the streets in the 1st place? What is it that's stopping them? It's all very well giving people a roof over their head, but nobody has actually stopped to ask the homeless people what's important to them. What they need to know? Do they want a home? And if they do, what needs to happen to keep them in it?”*

---

<sup>29</sup> Crisis (2020) The impact of COVID 19 on people facing homelessness and service provision across Great Britain. Available at: [https://www.crisis.org.uk/media/244285/the\\_impact\\_of\\_covid19\\_on\\_people\\_facing\\_homelessness\\_and\\_service\\_provision\\_across\\_gb\\_2020.pdf](https://www.crisis.org.uk/media/244285/the_impact_of_covid19_on_people_facing_homelessness_and_service_provision_across_gb_2020.pdf)

## **In Milton Keynes:**

Partners identified several reasons why accommodation was not fully suitable for all people who needed it.

### **1. Issues with rules and regulations**

People who are homeless or are at risk of homelessness sometimes struggled with the rules and regulations that came with the accommodation. The need to self-isolate within the room did not work for some. They struggled with lack of interaction with others and access to their normal lifestyles.

Support was needed to manage risks and make the accommodation sustainable. It was hard to keep people in when they were experiencing a total change in their lifestyles without adequate support.<sup>30</sup>

*“Many who had been rough sleeping had issues keeping to the rules, particularly smoking in the rooms, and a number were either evicted from the hotel or left of their own accord.”*

*“There have been a significant number of people who have ended up back on the streets just because they couldn't conform.”*

*“You're stuck in a hotel room. You don't know where any of your friends have gone. The impact has been huge on them, especially when they've already been suffering with mental health, and they just become more and more isolated.”*

*“Minor infractions like you know, hanging a shirt off of fire alarm so it dries means immediate eviction into another hotel.”*

### **2. Location**

The level of availability was also restrictive, often with some people having to move to different areas. Use of hotel rooms was far less feasible outside of the main urban centres, leading to some geographical displacement towards the cities<sup>31</sup> or movement between cities. This alienated people by moving them away from their support network.

*[Due to changing government guidance and hotels having to close] “MK Council moved a lot of the homeless people who were in centre MK out to Fenny Stratford, which meant that there was now a community of homeless people who were away from the centre where all the support services are pretty much set up.”*

The lack of availability could also lead to people being moved around to release availability for others, with little or no notice as to when this might happen.

<sup>30</sup> National Housing Federation (2020) Written evidence submitted to the Housing, Communities and Local Government Committee: Impact of Covid 19 on homelessness and the private rented sector. Available at: <https://www.housing.org.uk/globalassets/files/resource-files/the-impact-of-covid-19-on-homelessness-in-the-private-rented-ector---nhf-submission.pdf>

<sup>31</sup> Crisis (2020) Homelessness monitor England 2020: COVID 19 crisis response briefing. Available at: [https://www.crisis.org.uk/media/242907/homelessness\\_monitor\\_england\\_2020\\_covid19\\_crisis\\_response\\_briefing.pdf](https://www.crisis.org.uk/media/242907/homelessness_monitor_england_2020_covid19_crisis_response_briefing.pdf)

*“They're told from week to week if they can stay in that hotel where they might be shifted over to another hotel.”*

Some people even said that people were being kept in hospital as the policy says they cannot be discharged homeless.

*“There's so much pressure to get people off the street etc. We're finding that that people say they're being admitted into hospital, whether it's mental health, inpatient, or into hospital. Or their discharge is being delayed because the policy is you shouldn't be discharged homeless.”*

### **3. Lack of adequately trained staff managing the accommodation**

The hotels themselves sometimes struggled with their new roles in housing and managing people who are homeless. The hotel staff were not adequately prepared for some of the complications and issues that might arise.

*“I'm not sure that it was necessarily explained all that well to the hotel staff either 'cause I don't think they dealt with some of the issues terribly well.”*

*“One of the first things that we identified, and we had to sort out very quickly was security because a lot of the people that were coming in have various different issues generally around mental health or substance misuse, drug and alcohol, and putting all of those people in one place is going to cause problems.”*

### **4. Temporary nature of accommodation**

The uncertainty linked to the temporary nature of the accommodation was also off putting for some people who are homeless. There was no clarity of the ‘what next’ so some were unwilling to change their lifestyle for an unknown, potentially short period of time.

*“Having time limited accommodation is not helpful. It becomes that revolving door thing again. Human beings, we want stability. We should be giving homeless people that same opportunity to have somewhere which is settled for as long as they need it.”*

*“The policies are very short sighted is probably the best way to put it. Because there only they're only focusing on the right now.”*

*“Obviously, that's quite stressful for somebody knowing that that could be pulled out from them at any moment.”*

## **4. ‘Move On’ planning**

Official data shows by January 2021, 26,000 people nationally had been moved on to longer term accommodation<sup>32</sup> with some experiencing a faster time to permanent accommodation than would have been seen previously.<sup>33</sup>

However, due to lower levels of housing turnover as people stay put due to restrictions on movement and ability to conduct relevant housing checks<sup>34</sup> there has been a bottle neck for most councils in being able to move people on.

### **In Milton Keynes:**

Data suggests this is more of a concern in Milton Keynes. Comparing quarterly data from two years, before and after Covid 19, shows the number of people accepting housing (row B) is significantly lower than the number of people identified that quarter who require housing support (row A).

*Figure 4: The number of people owed a main duty and the number of people who accepted housing in England and Milton Keynes<sup>35</sup>*

		Apr – Jun 2019		Oct-Dec 2019		Apr – Jun 2020		Oct-Dec 2020	
		England	Milton Keynes	England	Milton Keynes	England	Milton Keynes	England	Milton Keynes
<b>A</b>	Number of people owed a main duty in quarter*	8860	129	9,890	187	9930	165	9,670	93
<b>B</b>	Number of people who accepted housing in quarter+	6040	16	5,710	19	3940	30	5,440	34

\* Number of households assessed for main duty and classified as homeless + priority need + unintentionally homeless (acceptance)  
+ number of households whose main duty ended as they accept social or private rented accommodation.

<sup>32</sup> House of Commons Public Accounts Committee (2021) COVID 19: Housing people sleeping rough. Available at: <https://publications.parliament.uk/pa/cm5801/cmselect/cmpubacc/934/93402.htm>

<sup>33</sup> Groundswell (2020) Monitoring the impact of COVID 19 on people experiencing homelessness. Available at: [https://groundswell.org.uk/wp-content/uploads/2020/12/Monitoring\\_Impact\\_COVID\\_Groundswell-FINAL-REPORT.pdf](https://groundswell.org.uk/wp-content/uploads/2020/12/Monitoring_Impact_COVID_Groundswell-FINAL-REPORT.pdf)

<sup>34</sup> National Housing Federation (2020) Written evidence submitted to the Housing, Communities and Local Government Committee: Impact of Covid 19 on homelessness and the private rented sector. Available at: <https://www.housing.org.uk/globalassets/files/resource-files/the-impact-of-covid-19-on-homelessness-in-the-private-rented-escor---nhf-submission.pdf>

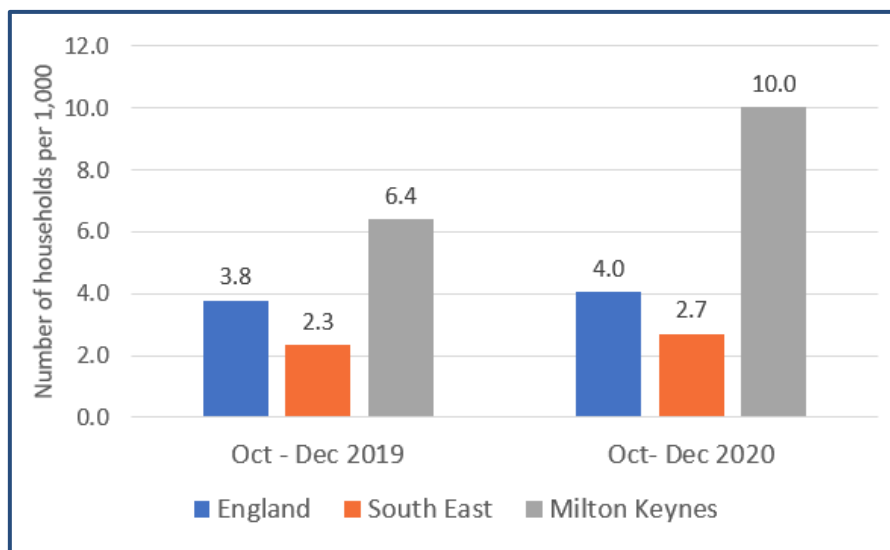
<sup>35</sup> Ministry of Housing, Communities and Local Government (2020) Statutory homelessness detailed local authority level tables: April to June 2019. Available at: <https://www.gov.uk/government/statistical-data-sets/live-tables-on-homelessness>  
Ministry of Housing, Communities and Local Government (2020) Statutory homelessness detailed local authority level tables: October to December 2019. Available at: <https://www.gov.uk/government/statistical-data-sets/live-tables-on-homelessness>  
Ministry of Housing, Communities and Local Government (2021) Statutory homelessness detailed local authority level tables: April to June 2020. Available at: <https://www.gov.uk/government/statistical-data-sets/live-tables-on-homelessness>  
Ministry of Housing, Communities and Local Government (2021) Statutory homelessness detailed local authority level tables: October to December 2020. Available at: <https://www.gov.uk/government/statistical-data-sets/live-tables-on-homelessness>



Whilst the data is only a snapshot of time, and shows an improvement in the last year, it still suggests a problem that needs to be addressed.

This is further outlined when looking at the data for the number of people in temporary housing. This shows that numbers have increased in during COVID, specifically in Milton Keynes.

Figure 5: Number of households per 1,000 living in temporary accommodation in England, South East and Milton Keynes <sup>36</sup>



## 5. Eviction bans and welfare changes

In addition to the *Everyone In* policy to help rough sleepers, the government implemented several policies to offer try and minimise the impact on people most at risk of homelessness.

- A pause on evictions from social and private rented sectors extended to be in place until May 2021.<sup>37</sup>
- A change in the way in which Local Housing Allowance (LHA) rates are calculated, realigned to cover the bottom third of rents for 12 months.<sup>38</sup>
- A weekly uplift of £20 to universal credit in March 2020, extended in the 2021 budget until the end September 2021.

<sup>36</sup> Ministry of Housing, Communities and Local Government (2020) Statutory homelessness detailed local authority level tables: October to December 2019. Available at: <https://www.gov.uk/government/statistical-data-sets/live-tables-on-homelessness>  
Ministry of Housing, Communities and Local Government (2021) Statutory homelessness detailed local authority level tables: October to December 2020. Available at: <https://www.gov.uk/government/statistical-data-sets/live-tables-on-homelessness>

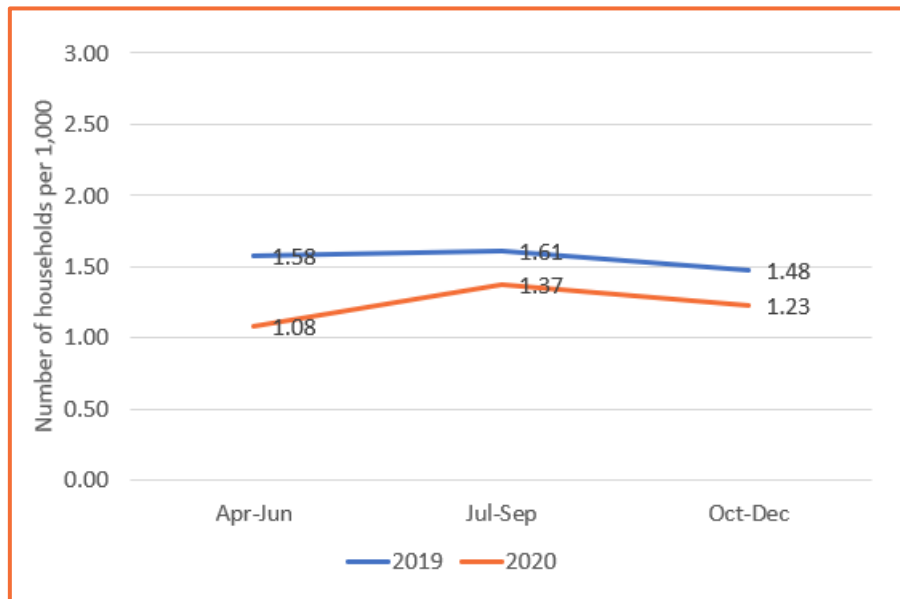
<sup>37</sup> Ministry of Housing, Communities and Local Government (2021) Guidance for landlords and tenants. Available at: <https://www.gov.uk/government/publications/covid-19-and-renting-guidance-for-landlords-tenants-and-local-authorities/coronavirus-covid-19-guidance-for-landlords-and-tenants>

<sup>38</sup> The Stationary Office (2020) The social security (coronavirus) (further measures) regulations 2020. SI 2020/371. Available at: <https://www.legislation.gov.uk/uksi/2020/371/contents/made>

These policies had some positive impact, with the eviction ban credited with holding levels of family homelessness to unprecedentedly low levels.<sup>39</sup>

This can be seen in the data which shows a reduction in the number of people owed a prevention or relief duty by the local authority between 2019 and 2020 because they are at risk of homelessness.

*Figure 6: Number of households per 1,000 assessed as being threatened with homelessness and owed a prevention duty in England.<sup>40</sup>*



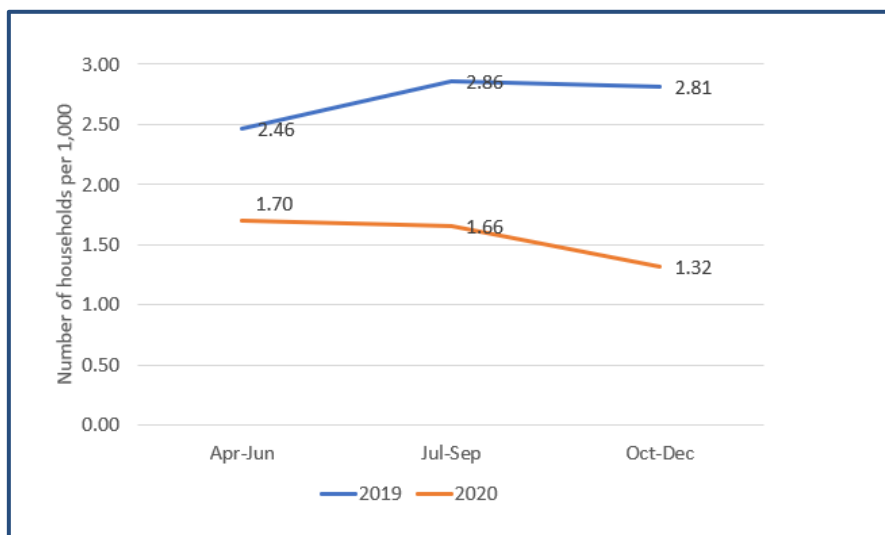
<sup>39</sup> Crisis (2020) Homelessness monitor England 2020: COVID 19 crisis response briefing. Available at: [https://www.crisis.org.uk/media/242907/homelessness\\_monitor\\_england\\_2020\\_covid19\\_crisis\\_response\\_briefing.pdf](https://www.crisis.org.uk/media/242907/homelessness_monitor_england_2020_covid19_crisis_response_briefing.pdf)

<sup>40</sup> Ministry of Housing, Communities and Local Government (2020) Statutory homelessness detailed local authority level tables: April to June 2019. Available at: <https://www.gov.uk/government/statistical-data-sets/live-tables-on-homelessness>  
Ministry of Housing, Communities and Local Government (2020) Statutory homelessness detailed local authority level tables: July to September 2019. Available at: <https://www.gov.uk/government/statistical-data-sets/live-tables-on-homelessness>  
Ministry of Housing, Communities and Local Government (2020) Statutory homelessness detailed local authority level tables: October to December 2019. Available at: <https://www.gov.uk/government/statistical-data-sets/live-tables-on-homelessness>  
Ministry of Housing, Communities and Local Government (2021) Statutory homelessness detailed local authority level tables: April to June 2020. Available at: <https://www.gov.uk/government/statistical-data-sets/live-tables-on-homelessness>  
Ministry of Housing, Communities and Local Government (2021) Statutory homelessness detailed local authority level tables: July to September 2020. Available at: <https://www.gov.uk/government/statistical-data-sets/live-tables-on-homelessness>  
Ministry of Housing, Communities and Local Government (2021) Statutory homelessness detailed local authority level tables: October to December 2020. Available at: <https://www.gov.uk/government/statistical-data-sets/live-tables-on-homelessness>

### In Milton Keynes:

The data for Milton Keynes shows a significant reduction in the number of people at risk of homelessness, notably increasing the gap between 2019 and 2020 figures.

*Figure 7: Number of households per 1,000 assessed as being threatened with homelessness and owed a prevention duty in Milton Keynes<sup>41</sup>*



Although the reduction in figures is positive and has narrowed the gap between Milton Keynes and the national figures, the numbers of people at risk of homelessness in Milton Keynes is still higher. The worry among partners is what will happen when the policy ends, and the welfare benefits are removed.

So far, the country has seen a record increase in Universal Credit claims.<sup>42</sup> The number of people being made redundant in the UK is rising at the fastest pace on record with unemployment at the highest level for four years.<sup>43</sup>

<sup>41</sup> Ministry of Housing, Communities and Local Government (2020) Statutory homelessness detailed local authority level tables: April to June 2019. Available at: <https://www.gov.uk/government/statistical-data-sets/live-tables-on-homelessness>  
Ministry of Housing, Communities and Local Government (2020) Statutory homelessness detailed local authority level tables: July to September 2019. Available at: <https://www.gov.uk/government/statistical-data-sets/live-tables-on-homelessness>  
Ministry of Housing, Communities and Local Government (2020) Statutory homelessness detailed local authority level tables: October to December 2019. Available at: <https://www.gov.uk/government/statistical-data-sets/live-tables-on-homelessness>  
Ministry of Housing, Communities and Local Government (2021) Statutory homelessness detailed local authority level tables: April to June 2020. Available at: <https://www.gov.uk/government/statistical-data-sets/live-tables-on-homelessness>  
Ministry of Housing, Communities and Local Government (2021) Statutory homelessness detailed local authority level tables: July to September 2020. Available at: <https://www.gov.uk/government/statistical-data-sets/live-tables-on-homelessness>  
Ministry of Housing, Communities and Local Government (2021) Statutory homelessness detailed local authority level tables: October to December 2020. Available at: <https://www.gov.uk/government/statistical-data-sets/live-tables-on-homelessness>

<sup>42</sup> National Housing Federation (2020) How housing associations are supporting tenancy sustainment and income collection through the coronavirus crisis. Available at: <https://www.housing.org.uk/resources/housing-associations-tenancy-sustainment-coronavirus/>

<sup>43</sup> Partington, R (2021). The UK's Covid 19 unemployment crisis in six charts. The Guardian. Available at: <https://www.theguardian.com/business/2021/feb/03/the-uks-covid-19-unemployment-crisis-in-six-charts>

Data suggests even with the current support in place, as of November 2020, over 700,000, private renters on Universal Credit were unable to cover their rent, an increase of nearly half from February 2020.<sup>44</sup> With many worried about what will happen once the eviction ban is lifted

### In Milton Keynes:

It is particularly worrying in Milton Keynes where residents were already struggling to buy homes or pay rent.

Even though the increase in LHA applied in Milton Keynes considered this higher rent level, with payments increasing from £698.41 in 2019/20 to £824.99 in 2020/2, this is still short of the median monthly private rental price for a 2-bedroom home of £895.<sup>45</sup>

Between March and May 2020, the number of people in Milton Keynes claiming Job Seekers Allowance or Universal Credit because they were looking for work rose from 4,495 to 10,520, 100% increase.<sup>46</sup> Expected to rise further as furlough ends.

There is therefore an underlying sense of dread from partners of the level of people who may face homelessness in the coming months.

*"It's difficult not to think it's going to be worse if economics are worse than before we started."*

## 6. Access to support

COVID-19 and the associated restrictions, guidelines and policy have had a significant impact on the daily lives of people who are homeless and those at risk of becoming homeless.

For many, access to key services has been restricted or removed completely. Communal night shelters were closed along with libraries, day centres and other amenities which often host outreach and support activities.<sup>47</sup> This not only restricts people's access to support and guidance, but also to sanitation and public facilities as well as limiting their social interaction.

There has also been a knock-on effect on food security with less money to buy food and reduced access to the services providing food. Often, when food is now available it can be a random mix and of bad quality. This was a particular issue at the start of lockdown with bulk buying issues within supermarkets impacting access to food. In addition, the accommodation provided often limits people's ability to cook food due to lack of facilities.

<sup>44</sup> Savills (2020) Impact of Covid 19 on social housing supply and residential construction. Available at: [https://assets.ctfassets.net/6sxvmdnnpn0s/5gv79wNlfOdWxHvJ4dqkiP/e53c6f04a2380037bc9c7e8bf496f798/Impact\\_of\\_Covid-19\\_on\\_social\\_housing\\_supply\\_and\\_residential\\_constuction\\_....pdf](https://assets.ctfassets.net/6sxvmdnnpn0s/5gv79wNlfOdWxHvJ4dqkiP/e53c6f04a2380037bc9c7e8bf496f798/Impact_of_Covid-19_on_social_housing_supply_and_residential_constuction_....pdf)

<sup>45</sup> MK Community Foundation (2020) Vital Signs. Available at: <https://www.mkcommunityfoundation.co.uk/about/vital-signs-2020>

<sup>46</sup> MK Community Foundation (2020) Vital Signs. Available at: <https://www.mkcommunityfoundation.co.uk/about/vital-signs-2020>

<sup>47</sup> Smart (2020) Understanding the homeless and rough sleeper community and Covid 19. Available at: Understanding the Homeless & Rough Sleeper Community and COVID-19 SMART – helping people to help themselves April 2020

There is particular concern for people with no recourse to public funds. The initial *Everyone In* guidelines allowed them to be included in the emergency accommodation provision. However, changes to the guidance makes it less clear as to local authorities' responsibility for these people. Supporting these people is often more expensive, as there are less free services for them.

### **In Milton Keynes:**

The ramifications on daily life have been seen in Milton Keynes too.

#### **1. Access to facilities**

*"All the offices all closed. Citizens Advice Bureau, Library where the homeless use computers and Wi-Fi. The Council offices shut."*

*"That's had such a huge impact on the mental health of the homeless who haven't been able to get the social interaction that they need. They are so isolated. When you've not got phone, a laptop and you're stuck in a hotel room. You don't know where any of your friends have gone."*

#### **2. Changes to service provision**

Due to the restrictions imposed, some providers were no longer able to offer their services.

*"Some of the charities had to give up. They didn't feel able to keep going because of Covid. That is a real loss for MK".*

*"The Winter Night Shelter, the support they used to offer has changed. They've offered a lot of support during the winter with regards to food support. They've also managed to help people reconnect, but they haven't been able to offer the room spaces they had in previous years".*

The Winter Night Shelter reported that they had helped approximately 15 people each day at its Unity Park Station hub since March 2020. Providing a wide range of support, such as hot meals, laundry facilities, benefits advice, and housing guidance<sup>48</sup>

#### **3. Reduction in begging**

Partners perceived that there had been a reduction in the level of begging in Milton Keynes due to a lower footfall on the streets. Whilst this is seen as a positive outcome for the town, reducing visible homelessness and antisocial behaviour linked to aggressive begging, there are concerns for those who rely on begging to survive.

*"If a homeless person has been relying on begging, the impact on them versus any other year has been absolutely dramatic. There is just not be on the people on the streets to get the money."*

---

<sup>48</sup> MK Community Foundation (2020) Vital Signs. Available at: <https://www.mkcommunityfoundation.co.uk/about/vital-signs-2020>

*“The begging opportunities are almost gone. You're not making any money down here. No, you're not getting anything to eat.”*

*“Because Milton Keynes is quite compact, they could get off the train and then sit outside the railway station and beg. People are fairly generous and caring on the whole”.*

*“It is a hot bed of beggars who can make £300 a day.”*

#### **4. Access to food sources**

In Milton Keynes, pre-COVID, there was somewhere in the city where people who were homeless or are at risk of homelessness could get food every day. Due to reduction in services this is no longer the case.

*“What we always used to say to people, there is always somewhere open in MK where you can get food every day. My understanding is they all closed.”*

## **7. Access to healthcare and wrap around support**

Although the interventions mean that the impact in actual infections of COVID were minimised there has been a knock-on effect on overall health care of people who are homeless or are at risk of homelessness.

The pandemic has illuminated and, in some cases, perpetuated the existing health inequalities. It has led to a worsening in circumstances whereby health, wellbeing and access to appropriate support has been even more problematic. It has become harder to access health support due to restrictions imposed because of redeployed resources to support the pandemic, leading to a higher level of cancelled appointments.<sup>49</sup>

Some people are having difficulties in accessing primary care. Some have a perception that services are not open or available. Others are limited due to the new focus on digital access. Also, the way in which the emergency temporary accommodation was provided has left to some people moving out of the area to emergency housing, but away from their health provision.<sup>50</sup>

This lack of access to healthcare and support could already be having a detrimental impact on people who are homeless or are at risk of homelessness. Data shows there has been 37% increase in deaths among people who are homeless in 2020, compared to 2019. Overall 36% related to drug and alcohol use, whilst 14% died from suicide.<sup>51</sup>

It is not all bad news, however. For some people who are homeless or are at risk of homelessness, the interventions linked to the pandemic have had a positive impact, helping

<sup>49</sup> Groundswell (2020) Monitoring the impact of COVID 19 on people experiencing homelessness. Available at: [https://groundswell.org.uk/wp-content/uploads/2020/12/Monitoring\\_Impact\\_COVID\\_Groundswell-FINAL-REPORT.pdf](https://groundswell.org.uk/wp-content/uploads/2020/12/Monitoring_Impact_COVID_Groundswell-FINAL-REPORT.pdf)

<sup>50</sup> Groundswell (2020) Monitoring the impact of COVID 19 on people experiencing homelessness. Available at: [https://groundswell.org.uk/wp-content/uploads/2020/12/Monitoring\\_Impact\\_COVID\\_Groundswell-FINAL-REPORT.pdf](https://groundswell.org.uk/wp-content/uploads/2020/12/Monitoring_Impact_COVID_Groundswell-FINAL-REPORT.pdf)

<sup>51</sup> Museum of Homelessness (2020) Dying homeless project. Available at: <https://museumofhomelessness.org/wp-content/uploads/2021/02/Museum-of-Homelessness-report-of-findings-on-homeless-deaths-in-2020-FINAL-2.pdf>

to improve their general health.<sup>52</sup> The interventions offered a safe sheltered environment with access to some health care provision.

Many areas have provided wrap around care services alongside the temporary accommodation, giving people access to primary care services as well as mental health and addiction support. There has also been an improvement in frequency of prescription services.

*“In Bedford they put people into hotels, but they gave them 24/7 support and access to medical care, mental health services, drug and alcohol services. More people had successful outcomes than those in another area, for example, Northampton, where they would just put into a room with no support. Far more people failed and went back on the street.”*

Whilst not a recommended provision within government guidance, often services were added in by local organisations and charities who identified that the additional support was needed and that having a ‘captured’ audience of people could lead to better engagement and outcomes.

#### **In Milton Keynes:**

Milton Keynes has seen the positive and negative impacts on healthcare and wider wrap around support.

Some services have been negatively impacted, such as the twice monthly outreach medical clinics offered at Unity Park and the Salvation Army which were suspended.

There was also some concern among partners that the reliance on digital provision of healthcare would be detrimental for many people experiencing homelessness or risk of homelessness, limiting their ability to access relevant service.

However there have been positive outcomes. For some people, having a safe place to stay has led to overall health benefits.

*“Those who are traditionally rough sleepers and homeless, there’s probably been improvement in health because they’ve had somewhere to stay, and they’ve had that support available and food available.”*

*“I can definitely think of some long-term rough sleepers who have for the first time ever come in and got themselves in a state where their hygiene is improved, and their mental health is better because they’re able to sleep at night and they’ve had access to services, and they’ve engaged.”*

<sup>52</sup> Groundswell (2020) Monitoring the impact of COVID 19 on people experiencing homelessness. Available at: [https://groundswell.org.uk/wp-content/uploads/2020/12/Monitoring\\_Impact\\_COVID\\_Groundswell-FINAL-REPORT.pdf](https://groundswell.org.uk/wp-content/uploads/2020/12/Monitoring_Impact_COVID_Groundswell-FINAL-REPORT.pdf)

There were also some additional support services provided at some accommodation which had positive effects on some.

*“ARC (Addiction Recovery Community) was present two times a week at the hotel and a small number of individuals we had been dealing with began to engage and went into the hotel.”*

*“We had some GP’s coming out to talk about like mental health and do you know where you can go if you’re suffering with mental health, you know that kind of thing.”*

*“Wrap around support has been really beneficial because you can engage with them and really follow on and see what the impact is.”*

*“I hope it has given some insights into possible future policies and directions that would be more positive. it’s not about accommodation, that’s literally just the very first small step with all the other things that are needed.”*

The existence of the MKHP Health and Well Being Strategic Group has been helpful in ensuring timely and relevant response to health care challenges such as:

- Using the knowledge from the GP Federation to explain key changes to primary care provision such as online consultation and telephone triage and discussing potential projects to minimise impact e.g., partners offering internet clinics
- Working to re-establish the health outreach program, and adapting it to meet changes to primary care provision
- Using established networks to set up and implement the vaccination programme for people who are homeless within Milton Keynes. Public Health were able to come to the group and ask what the process would be, and because of the existing relationships and knowledge of partners, the setup was easier and more streamlined.

## 8. Types of people who are homeless or are at risk of homelessness

Whilst policy and interventions were brought in to try and minimise the impact on people who are homeless or are at risk of homelessness, services have seen a continued flow of people experiencing homelessness since the start of the pandemic.

53 per cent of services across the country reported an increase in homelessness in their area. Driven by those already experiencing homelessness through sofa surfing, living in dangerous and transient accommodation and domestic abuse. People became more visible as their living situations forced them to access help. The increase was initially driven by single males, who



may have not historically have been entitled to main duty support as they were not deemed a priority need,<sup>53</sup> but under *Everyone In*, could be included.

As the pandemic continued people experiencing homelessness changed, with many people experiencing it for the first time for several different reasons:

- Financial hardship / loss of stability due to furlough or unemployment.
- Relationship breakdown between partners / wider family
- Domestic abuse
- Health impacts and care responsibilities

### In Milton Keynes:

The partners in Milton Keynes also saw the shift in people experiencing homelessness for the first time.

*“We've seen quite a lot of newly homeless people who've never expected to be homeless.”*

*“We were starting to see a different type of homelessness. People who always had jobs and worked, but now find themselves in situations where they couldn't afford things.”*

*“We've had much older people with a marriage breakdown who work full time and their partners kick them out, you see how quickly someone's life can be turned upside down.”*

*“A lot of people that we're seeing are accessing welfare benefits for the very first time. They're not the people we would normally deal with in an average year. ”*

The data for Milton Keynes also suggests that homelessness seen during the pandemic was more prevalent in certain groups, such as people who experienced domestic abuse.

It also highlights that compared to the national numbers, levels of homelessness due to domestic abuse were historically higher in Milton Keynes, and now even more so due to the COVID-19 pandemic.

---

<sup>53</sup> Crisis (2020) The impact of COVID 19 on people facing homelessness and service provision across Great Britain. Available at: [https://www.crisis.org.uk/media/244285/the\\_impact\\_of\\_covid19\\_on\\_people\\_facing\\_homelessness\\_and\\_service\\_provision\\_across\\_gb\\_2020.pdf](https://www.crisis.org.uk/media/244285/the_impact_of_covid19_on_people_facing_homelessness_and_service_provision_across_gb_2020.pdf)

Figure 8: Proportion of households owed a homelessness duty who have experienced, or are at risk of, domestic abuse <sup>54</sup>

	ENGLAND		MILTON KEYNES	
	2019	2020	2019	2020
Apr-Jun	8.9%	10.5%	8.6%	11.9%
Jul-Sep	9.4%	10.9%	11.5%	12.3%
Oct-Dec	9.6%	11.1%	11.4%	12.3%

This was further supported by input from MK-ACT, the Milton Keynes based charity who supports domestic abuse victims. They saw an increase in people calling who had experienced domestic violence in the past and the lockdown had triggered their previous trauma i.e., being locked down, isolated, wearing facemasks. They also saw a shift in the way in which their clientele came to them for support and the type of support that they needed.

*“Those approaching us had often already left rather than a planned leave, which meant high levels of risk and immediate crisis work to be undertaken – this is different than before the lockdown. We saw an increase in the complexity of cases and level of risk”.*

*“People were in more desperate situations when they left. Before people would contact us and plan to leave, whereas we got more calls from people saying they're walking around, and they weren't going home. So obviously you must work with that slightly differently.”*

Data also suggests an increase in homelessness among disabled people.

Figure 9: Proportion of households owed a homelessness duty who have physical ill health and disability <sup>55</sup>

	ENGLAND		MILTON KEYNES	
	2019	2020	2019	2020
Apr-Jun	13.9%	13.7%	11.8%	20.5%
Jul-Sep	14.2%	14.7%	15.4%	17%
Oct-Dec	15%	15.6%	17.8%	17.3%

<sup>54</sup> Ministry of Housing, Communities and Local Government (2020) Statutory homelessness detailed local authority level tables: April to June 2019. Available at: <https://www.gov.uk/government/statistical-data-sets/live-tables-on-homelessness>  
 Ministry of Housing, Communities and Local Government (2020) Statutory homelessness detailed local authority level tables: July to September 2019. Available at: <https://www.gov.uk/government/statistical-data-sets/live-tables-on-homelessness>  
 Ministry of Housing, Communities and Local Government (2020) Statutory homelessness detailed local authority level tables: October to December 2019. Available at: <https://www.gov.uk/government/statistical-data-sets/live-tables-on-homelessness>  
 Ministry of Housing, Communities and Local Government (2021) Statutory homelessness detailed local authority level tables: April to June 2020. Available at: <https://www.gov.uk/government/statistical-data-sets/live-tables-on-homelessness>  
 Ministry of Housing, Communities and Local Government (2021) Statutory homelessness detailed local authority level tables: July to September 2020. Available at: <https://www.gov.uk/government/statistical-data-sets/live-tables-on-homelessness>  
 Ministry of Housing, Communities and Local Government (2021) Statutory homelessness detailed local authority level tables: October to December 2020. Available at: <https://www.gov.uk/government/statistical-data-sets/live-tables-on-homelessness>

<sup>55</sup> As footnote 54

However, our conversations with partners did not identify any specific reasons for why that might be. The numbers could perhaps be linked to earlier comments around job losses and financial pressures.

It should be noted that the figures group disabled people under a large overarching category, which will include many variations of impairment. So, understanding why numbers have increased in this group could be varied.

## Section 5: The impact on service providers

The COVID-19 pandemic and associated policy and guidance not only had an impact on people experiencing homelessness, but also the service providers who support them. Again, the impact was both positive and negative.

### 1. Poor communication

The overall communication of the policies and guidance has been somewhat frustrating for those involved in implementing it.

People acknowledge that situation is unprecedented, and continually changing, but generally feel the speed at which the UK government has responded to issues and released guidance has been sluggish.

Although the initial guidance around *Everyone In* was extremely clear with regards to purpose, goal and responsibility, the ongoing policy and guidance has been rather vague and opaque. It lacks clarity and focus, leaving individuals to interpret and implement it in different ways. The government expect services to respond quickly to very complex problems.

There is also frustration around the changes to the usual homelessness eligibility and entitlement criteria over time, and clarity about how these should be applied with local authorities applying the rules differently.<sup>56</sup>

The need to communicate at a time of crisis is paramount to the safety and wellbeing of individuals and it was felt that communications which clearly and appropriately addressed the needs of people experiencing homelessness were often lacking.<sup>57</sup>

#### In Milton Keynes:

Partners mirrored the national reaction that the communication was substandard. Whilst initially what was being asked of people was very clear

*“The early part of the pandemic was actually much easier because the world closed down. The guidance was quite clear.”*

The extent of the ask and the timeframe in which to achieve it was extremely tight.

*“So, I think the policy is very effective, but how local authorities were expected to carry that out? We did because we had to, because that was what we were directed to do. But it wasn't easy “*

<sup>56</sup> Crisis (2020) The impact of COVID 19 on people facing homelessness and service provision across Great Britain. Available at: [https://www.crisis.org.uk/media/244285/the\\_impact\\_of\\_covid19\\_on\\_people\\_facing\\_homelessness\\_and\\_service\\_provision\\_across\\_gb\\_2020.pdf](https://www.crisis.org.uk/media/244285/the_impact_of_covid19_on_people_facing_homelessness_and_service_provision_across_gb_2020.pdf)

<sup>57</sup> Groundswell (2020) Monitoring the impact of COVID 19 on people experiencing homelessness. Available at: [https://groundswell.org.uk/wp-content/uploads/2020/12/Monitoring\\_Impact\\_COVID\\_Groundswell-FINAL-REPORT.pdf](https://groundswell.org.uk/wp-content/uploads/2020/12/Monitoring_Impact_COVID_Groundswell-FINAL-REPORT.pdf)

*"I think it was very, very difficult at the beginning when suddenly they said they wanted everyone in now and every local authority was looking at how they were going to provide that accommodation. And of course, when you're doing that overnight, that is going to bring on a lot of problems."*

*"So, they kind of dropped it on you expecting you to do it, not giving you enough information at the right time."*

As the pandemic progressed, more guidance was released, but often with limited clarity and delivered in an untimely manner.

*"What has been very difficult is the urgency with which they need to be acted upon."*

*"It was constant and still is constant and to be honest it's how it should be. But managing it in quite a complex environment is hard."*

*"The government are unrealistic because they want change, and they want it yesterday. They've implemented things and said right to do this tomorrow."*

*"It didn't come out until the end of April beginning of May, so we already had done, you know, five or six weeks before the guidance came. So that wasn't necessarily helpful."*

For some the main frustration of this lack of clarity through communication was the inconsistent application of the guidance and regulations.

*"It depended on your working patterns and policies and who you work with in different areas as to what was delivered. It was inconsistent."*

*"We had the same service and we operated our service in the same way, but what I had was two very different things and that was based on what the councils were prepared to put in. It is very much based on who was in that area."*

Working through the policies and implementing the guidance was very time consuming. Homelessness service provision often fell into many categories, making the policies frustrating to navigate and apply.

*"It's been quite administrative trying to deal with it. You were looking to adapt buildings and try and get COVID secure in a world where no one knew what COVID secure was. There was not any real guidance on what would meet the criteria, it was on each charity to develop their relationships with public health."*

*"A homeless service can be a Community Centre, a café, a place of work. It's also offering adult services, close contact services like hairdressing. It also has shared facilities like a campsite. I had to read guidance from six different sectors to work out what I thought was appropriate. And at the same time, make sure public health were happy with how we were doing things."*

## 2. Increase in demand

Due to restrictions in movement during lockdown and various policies, there was initially a reduction in demand for some services (such as domestic abuse support). However, once lockdown lifted, demand increased exponentially.

Nationally, 73 per cent of homelessness services stated demand for their services had increased since the start of the pandemic.<sup>58</sup> Local authorities and voluntary sector services reported both an increase in need for their services such as emergency basic needs, lack of food and digital exclusion, rent arrears, loneliness and isolation, and mental health issues.

Support services found themselves providing support over and above what they would normally do such as providing food for people self-isolating, delivering medication, making mobile telephones available so clients can keep in touch, trying to buy PPE.<sup>59</sup>

### In Milton Keynes:

This was replicated by the services in Milton Keynes.

The Milton Keynes Foodbank provided 11,400 food parcels in 2019, equivalent to 950 per month. Between March and July 2020, they gave out over 12,400 food parcels, an average of 2480 every month<sup>60</sup>

Comments from other providers also support this where numerous different partners acknowledge increase in demand:

*"I'd say we saw a dip to start with, but we did see a 65% increase on people accessing our website, so we knew that people wanted to our services, but were locked down. We did get an increase in calls as people were able to exercise. We saw an increase in complexity and risk."*

*"The number of people we've had through this year is just phenomenal. It's something that we've never seen before in terms of the people that we've had access to services."*

*"Initially there was a reduction in demand but there was a gradual increase as lock down eased with a 35% increase by August on the previous year."*

*"We were at 35 people in January. We're now over 75. In an average week we get 60 visits at our door, and some of those people we're needing to spend 4,5,6 hours with them to work through their needs."*

<sup>58</sup> Crisis (2020) The impact of COVID 19 on people facing homelessness and service provision across Great Britain. Available at: [https://www.crisis.org.uk/media/244285/the\\_impact\\_of\\_covid19\\_on\\_people\\_facing\\_homelessness\\_and\\_service\\_provision\\_across\\_gb\\_2020.pdf](https://www.crisis.org.uk/media/244285/the_impact_of_covid19_on_people_facing_homelessness_and_service_provision_across_gb_2020.pdf)

<sup>59</sup> National Housing Federation (2020) Written evidence submitted to the Housing, Communities and Local Government Committee: Impact of Covid 19 on homelessness and the private rented sector. Available at: <https://www.housing.org.uk/globalassets/files/resource-files/the-impact-of-covid-19-on-homelessness-in-the-private-rented-escor---nhf-submission.pdf>

<sup>60</sup> MK Community Foundation (2020) Vital Signs. Available at: <https://www.mkcommunityfoundation.co.uk/about/vital-signs-2020>

*“Our demand for referrals has gone up by 68% in the last year.”*

*“The demand has increased hugely, so we're seeing the same kinds of issues and people, but on a wider scale. We are busier because people are struggling to find their way into those services and support and need some help.”*

### **3. Impact on engagement and interaction with people who are homeless or are at risk of homelessness**

The pandemic had both a positive and negative outcome on engagement with people who are homeless or are at risk of homelessness.

For some, engagement became more challenging. The move away from face-to-face interaction and toward digital provision was excluding. Some people prefer and react better to face to face interaction.

Despite the reduction in face-to-face interaction, most services have been able to maintain engagement with users

One of the benefits of the pandemic for some services is the ability to gain better access to some people who are homeless. Giving them accommodation and having regular interaction with them has provided an opportunity to establish a relationship, build trust and connect them to support services that can help meet their needs.<sup>61</sup> Some people are now engaging with local authorities for the first time since becoming homeless.

The pandemic offered services an opportunity to engage with individuals and assess their needs in a way that we may not have had previously.<sup>62</sup> It allowed services to bring provision together into one place, enabling people experiencing homelessness to access all that they needed easily, without having to repeat their issues and story multiple times.

The National Housing Federation identified that they have achieved increased engagement with residents by engaging with residents outside of the formal legal process, building interaction and trust.<sup>63</sup>

---

<sup>61</sup> British Medical Association (2020) Written evidence submitted to the Housing, Communities and Local Government Committee: Impact of Covid 19 on homelessness and the private rented sector. Available at: <https://committees.parliament.uk/writtenevidence/17648/pdf/>

<sup>62</sup> Homeless Link (2020) Covid 19 transition: Planning local homelessness provision and move on. Available at: [https://www.homeless.org.uk/sites/default/files/site-attachments/COVID19\\_HomelessnessTransition\\_LocalPractice\\_v2\\_1.pdf](https://www.homeless.org.uk/sites/default/files/site-attachments/COVID19_HomelessnessTransition_LocalPractice_v2_1.pdf)

<sup>63</sup> National Housing Federation (2020) How housing associations are supporting tenancy sustainment and income collection through the coronavirus crisis. Available at: <https://www.housing.org.uk/resources/housing-associations-tenancy-sustainment-coronavirus/>

### In Milton Keynes:

Service providers in Milton Keynes said that whilst changes in provision were challenging to apply, it did often offer them a chance to change the way in which they were interacting with service users.

Knowing the location of the service users made it easier for services to take provision to them, instead of relying on the users coming to the services.

*“Being put in specific locations so you know where they are, so it's easy to go to them and take what they need to them rather than expect they're going to come to you. I have three guys in one hotel so I can meet all three of them in a couple of hours which is useful.”*

Having access to service providers in one place for a prolonged period has enabled a greater level of general interaction, allowing service users to become more comfortable with providers and providers to become more aware of the habits and needs of the users. It has given providers a better chance to build trust and rapport and really learn what the service users need.

*“We're not just somebody coming in shaking their tent now. They know who we are by our faces, and it breaks down that barrier.”*

*“I think it was really good to get everybody under one roof to really understand these clients.”*

*“We're on site, so even if it's to begin with just saying ‘Good morning, how are you?’ That repetitive nature of us being there means that even if it takes some little while we were constant presence.”*

*“That continuity between services has been really important for those who struggle on a day-to-day basis with filling time or holding themselves in between appointments.”*

For users, having access to different service providers in one place has allowed them to get access to support in a much more efficient way, and led to greater interaction.

*“It's meant that there's some key people in different services in one place. A one stop shop model that has meant that, especially for the more complex service users you do not expect them to go and repeat their needs over and over and over again. Or access different buildings constantly. They get familiar in one environment and access all support from that one place.”*

It has enabled services to learn more about the needs and wants of the people who are homeless or are at risk of homelessness.

*“The ‘Everyone In’ policy was a very good idea. I think it gave people a better idea of who people were and why they were homeless. I think it may have just given a much better steer on how to approach the problem.”*

*“A mystery shopping exercise. They actually need to understand what it was like for someone to find themselves on street.”*



*"It was really interesting to see that a lot of our clients decided to sleep on the floor supposed to in the bed because they couldn't sleep very well as it was too comfortable." "It was really clear to see that their nights are their days. Maybe they don't want to engage with you during the day because that is when they sleep. It's safer to be awake at night."*

And whilst there are many negatives with the focus on digital provision, for some services their interaction with users was easier over the phone versus face to face as people were more focused on the point of the conversation

*"For those with a lack of basic literacy or basic financial skills, there are some significant gaps there, even if they're able to FaceTime. It's about the access point at which they seek help, because people won't be able to just walk in and see us anymore."*

*"When you are on the phone, they are quite focused. That's what we have found. So, you deal with the issue more effectively."*

It has also helped people who are homeless or are at risk of homelessness help each other, by bringing them together to share knowledge and learning.

*"I've seen some good practice going on in terms of ex-offenders supporting one another. Giving each other ideas for proactive activities for work, for volunteering, and things like that. So, I think that's sort of an unintended positive consequence of them being put together into hotels."*

These changes have seen some significant benefits for some people who are homeless or are at risk of homelessness and service providers are anxious that the progress that has been made is not lost. People are worried that connections that have been made will be lost as changes are made to the guidelines and provision that is available.

### **In Milton Keynes:**

Partners are concerned about what will happen to the service users once the increased provision is no longer available. They have made progress with so many people, new and old, and are keen not for that progress to be lost.

*"It's been really beneficial. The number of people we've had through this year is just phenomenal. It's something that we've never seen before in terms of the people that we've had access to services".*

*"Moving forwards when the funding stops, I can only see the rough sleeping increasing as those who are currently accommodated will need to go somewhere and if no accommodation is available then they will have no option but to sleep rough."*

*"We are expecting a bit of an explosion to be honest. I'm very worried that what will happen is funding is just stopped. Those 120 people or however many it is by then there is no longer any service for them 'cause not enough has been done to make sure things will follow that along."*

## 4. Impact on working practices

The COVID-19 pandemic has been a catalyst for change for service providers in terms of what they offer and how they offer it. There was a need to adapt provision very quickly in response to social distancing and safety measures. For many this meant a change in working practices that had been in place for years, if not decades, developing completely new systems of working.

For some, they have had to stop providing key services, which were important and critical to the users. For others, they have had to adapt their provision and deliver things in a new and different way.

The pandemic has made people move away from processes that were used because ‘that is how they have always been done,’ and gave people the opportunity to try new things that would previously not have been considered. Whilst most changes were driven by necessity and were not all ideal, there have been some positive outcomes.

- New working styles have been adopted.
- People have been more flexible.
- Volunteers and employees have been given more responsibility or new roles.
- More collaborative working has taken place.
- Cross-sector groups worked together to ensure the needs of the homeless population were met.
- There was improved collaboration at a local level between Clinical Commissioning Groups (CCGs), public health, local authorities, and housing departments in England.<sup>64</sup>

Due to the speed at which changes were needed, there was an element of flexibility in how funding could be used, which service providers were grateful of. However, although funding was by far the most amount ever ringfenced for homelessness to date, it was still not enough to cover actual costs of everything that was required and provided.

Money was not always clearly ring-fenced for specific work. Given the range of challenges facing local authorities during this crisis, not all are making more funding available for support. This means services providing support over and above what they normally provide, may be doing so without extra funding.<sup>65</sup> In addition there has been a perceived Governmental retreat over ‘full cost recovery’ for local authorities accommodating people whom they wouldn’t normally have a duty to rehouse<sup>66</sup> adding further financial pressure. Those people with no recourse to public funds.

---

<sup>64</sup> Dorney-Smith, S (2020) Pathway Covid 19 reflections: London hotels. Available at: <https://www.pathway.org.uk/blog/pathway-covid19-reflections-london-hotels/>

<sup>65</sup> National Housing Federation (2020) Written evidence submitted to the Housing, Communities and Local Government Committee: Impact of Covid 19 on homelessness and the private rented sector. Available at: <https://www.housing.org.uk/globalassets/files/resource-files/the-impact-of-covid-19-on-homelessness-in-the-private-rented-escor---nhf-submission.pdf>

<sup>66</sup> Crisis (2020) Homelessness monitor England 2020: COVID 19 crisis response briefing. Available at: [https://www.crisis.org.uk/media/242907/homelessness\\_monitor\\_england\\_2020\\_covid19\\_crisis\\_response\\_briefing.pdf](https://www.crisis.org.uk/media/242907/homelessness_monitor_england_2020_covid19_crisis_response_briefing.pdf)

*“I know the Council are struggling with the government funding. It is very much; this is a pot of money, and you can do this. You have to be spent by then and it's very short termish. I know the Council is trying to make the best possible use, I'm sure they are I'm convinced of that.”*

People feel there is a lot to be learned from the changes that were made, most notably more joined up working and quicker referral processes.

### **In Milton Keynes:**

Partners felt the interaction and collaboration that was already in place in Milton Keynes had a positive impact on the response to COVID. As relationships were already established, it made planning and implementation a little easier.

*“I think the fact that there was already a team in place meant that it could. It could be reacted to quite quickly. If we hadn't had that team in place who knew and understood the cohort that would have been a much more difficult operation to manage.”*

**Services came together well to ensure provision continued**

*“Fantastic work was done to get people off the streets. It was incredible how organisations came together and made things happen in a space of weeks and everybody was skipped off the street and put into temporary accommodation, which was fabulous.”*

*“It was a real multi agency approach.”*

*“I think they're doing a great job of making sure everybody is communicating better with one another and being clear who's doing what and how does it connect with the other forms of supportive guys are getting. There is better coordination.”*

*“People have had to start working differently and I think they are realising that they can't do it on their own. So, so in a way, I do think that Covid has made it better.”*

*I know the joint working between the local authority and health around discharging people and then getting the social care side of things married up with the healthcare side of things has come along leaps and bounds because it's had too.”*

*“Everything was really, kind of parochial before. But throughout COVID, it has changed the culture. It feels like a partnership, people are coming together with an understanding that nobody is trying to steal your role or take your funding or what have you. But if we actually work together, the people at the end of it get a far better outcome.”*

*“This project has actually given us a chance to work very closely with the homelessness prevention team so we can support clients in a better manner. Now we have that close relationship with them. You can send an email or pick up a phone and call the homelessness prevention Officer and have a discussion about the case rather than having to wait for the client to come back and give their account of the story.”*

There were lots of changes to working practices. Providers had to be more creative and adaptable. Offering flexibility in their provision.

*"I think there's a lot of stuff that you just do it a certain way because it's always been done a certain way, and this is kind of allowed us to try some different things and perhaps be a little bit more flexible. We've had to be proactive, and we've had to kind of adapt to new ways of working with technologies, it's allowed us to look at how we manage the demand on our service. If we're not traveling around all day visiting people, we've been able to help more people without changing our resource, that's been a big success for us."*

*"We changed the way we worked to fit with our clients and how they were accessing services: offering appointments when they were able to talk e.g., on an evening / on their 1-hour exercise; triaged referrals to make sure they were in the right place and if not were referred to the correct agency."*

*"It's just being delivered in a more remote way than we envisaged. We thought we would be based within the local authority offices. The reality is we haven't done that because it's not open, so we're delivering a lot of this stuff remotely via phone and video and email."*

*"We've taken all the resources that would have sat in our face-to-face operation and put them in the phone. Our telephone service is the best resource it's ever been and it's more reliable as you get through on the 1st ring. The number has also become free."*

*"We're in a city centre location, with premium parking all around, for a lot of people who see us, parking is a concern. Some people don't want to fit into our Monday to Friday 9 to 5 model, they'd like an appointment in the evening when the kids are in bed. So, the technology lets us do that much more easily because we don't have to worry about staffing a building with a minimum staffing level until 7 at night or 8 at night."*

*"We couldn't use the bus, so we managed to lease the Youth Hostel building. It increased that cost, but it meant we could give everyone a separate bedroom and we kept going. Some charities we're just not able to. They either stopped or completely changed what they're doing."*

*"We had a team that suddenly had to work remotely. They had to do all of their assessments with people on the phone or by email and text because nobody is coming into the actual offices."*

*"The night shelter had to shut early from its normal 19-20 season. They pivoted into doing food parcels from Unity Park Station."*

*"We don't normally open up spring and summer, but we're staying open over spring summer if we can get the funding because of the need. But it means we've got no downtime for planning into the new season".*

*"The pandemic makes people think 'You know what we've had in the past hasn't always necessarily worked.' People go into accommodation, and they go back on the street, and we try and get them into accommodation again and then they fail again' It's not working, so we need to start thinking about what does work and asking people who are homeless what they want. What would they prefer?"*

For many, due to the ongoing work over the last few years, there were several support plans already in place that were yet to be implemented, COVID-19 just sped up the process.

*“Prior to covid there were plans to increase those anyway, COVID just supercharged them.”*

*“The plans were already available we just pulled them forward.”*

Many were surprised as the ease at which services had been adapted and how successful the changes had been.

*“It was easier than we thought. A lot of what we needed to do can be achieved by phone. We've still been able to build up good rapport and have a good relationship with the people that we're supporting. Not traveling in between different people's houses has enabled us to meet that increasing demand because it's saved time in terms of travel.”*

Although they did also agree with the limitations to the funding there was no specific figures or reactions to allocation shared through the research.

## 5. Impact on workforce

The pandemic has had a notable impact on the workforce within services, both paid and volunteer. They have worked tirelessly throughout the last 12 months to ensure that the service providers are still supported as much as was possible.

For some this generated a level of responsibility which was extremely stressful. There was an underling moral obligation to keep service up and running, knowing how vital the service was and that often it may be the only interaction some people had. Many felt a pressure to continue wherever possible, often at detriment to their own health.

Managers are worried about burnout, especially with the concerns of things becoming even more challenging as the policy and support are reduced in the coming months.

There was also a financial burden. Some services reported 15-25% of workforce absent due to ill health, with some organisations modelling for absences of up to 70%. This meant some organisations no longer being financially viable.<sup>67</sup>

---

<sup>67</sup> National Housing Federation (2020) Written evidence submitted to the Housing, Communities and Local Government Committee: Impact of Covid 19 on homelessness and the private rented sector. Available at: <https://www.housing.org.uk/globalassets/files/resource-files/the-impact-of-covid-19-on-homelessness-in-the-private-rented-escor---nhf-submission.pdf>

### In Milton Keynes:

All the providers we spoke to talk about how proud and impressed they were of the staff and volunteers within the services that had shown relentless resilience and flexibility.

*"I think for a manager I've stepped back reflected on the team and how adjustable they are. They had 24 hours' notice of going into that hotel. They went from working nine till five to doing over a 24-hour shift, working weekends, working bank Holidays, cancelling holiday."*

Many voiced their concerns about the changes to working practices and how they have affected staff.

*"You get that worry about isolation. It might be affecting people's mental health. Have they got the right equipment and family surroundings that enables them to work from home?"*

*"The additional pressure on our volunteer network. We needed a completely different operating model. We needed volunteers to do something entirely different. They had to work in a socially distanced way. We had to keep them in their own bubbles. It took us a month to the point where we could have a fortnightly rotation of volunteers."*

Some were concerned about expecting staff to continue to work in such circumstances, unsure if it was safe for them.

*I think there was a point in time when certainly when we stopped and said just because we can, should we?*

For some, there was a sense of obligation, feeling that they must continue because the service users needed them.

*"We felt an obligation to keep going. I think a lot of us felt and still feel enormous pressure to continue to provide the services".*

And there is a sense of worry and dread linked to expectations of the future and continued increases workload, levels of responsibility and burn out.

*"I've been working since the 1st of September. I've had three days holiday and I was on call for those three days holiday. And I can't see the end".*

## Section 6: The future

The future for homelessness is uncertain nationally and within Milton Keynes. Whilst COVID-19 policy and guidance and associated interventions have led to some positive outcomes, there is a general pessimism of what the future will hold.

The continued changes in the policy, fluctuating end dates and unclear boundaries on funding makes it incredibly hard for local authorities, services, and charities to plan effectively.

There is an underlying sense of anger and frustration at the lack of communication and general implementation of long-term planning. This is restricting people from preparing for changes in demand and service need.

### 1. The impact on public perceptions

Although the initial interventions with Everyone In increased overall awareness of homelessness, there is a concern that as the pandemic continues, and the overall economic fallout is fully realised, the focus given to homelessness will be redirected to other areas.

The government has announced future funding for homelessness which includes:

- £266m Next Steps Accommodation Programme, with £105m for interim accommodation, to support people moving into the private rented sector, and £161m to fund the delivery of 3,300 new supported homes by March next year.<sup>68</sup>
- Rough sleeper Accommodation Programme 2021-2024 - fund announced March 2021 – 6000 new homes pledge, councils share of funding, specialist staff to offer mental health and addiction support.

However, how this will be implemented is unclear, and as time moves on there is a concern that the Government's focus on relevant policy and investment toward homelessness will reduce as their political agenda shifts. In addition, local authorities are expecting reduced overall budgets and in turn reduced focused funding on homelessness due to economic issues, impacting service provision and delivery.

This reduction in focused funding will have a knock-on impact on the overall exposure of homelessness within the public domain, leading to reduced awareness and support. This in turn could lead to lower quality provision, negative outcomes for service users and bad public perception of the homelessness support sector being fit for purpose, undoing any good achieved through the pandemic.

---

<sup>68</sup> Heath, L (2020) Rough sleeping in lockdown 2.0: Is the government's Everyone In policy on the way out? Inside Housing. Available at: <https://www.insidehousing.co.uk/insight/insight/rough-sleeping-in-lockdown-20-is-the-governments-everyone-in-policy-on-the-way-out-68594>

### In Milton Keynes:

Partners in Milton Keynes mirror concerns about the reduction of focus on homelessness support and the on-going implications of that.

*“One thing that had given me hope is that the government found money to invest in the most vulnerable groups, seen it as a priority, which I think has been a wonderful thing to observe whereas in the past funding has been very piece meal, very hit and miss / hand to mouth. But whether that will be sustained? I don't know. A lot of uncertainties remain.”*

*“[a reduction in funding] has a direct impact on capacity. We see less people if the organisation is smaller. And the people that we do see don't get a quality service because services are eroded by a lack of funding in general. And I don't mean that just to be community involved sector, I mean statutory services as well. Social work, social care stuff.”*

## **2. The impact on people who are homeless or are at risk of homelessness:**

Expectations are that the COVID pandemic will lead to a rise in the number of people at risk or experiencing homelessness. Modelling suggests an 80% rise in 2021, continuing above that level for several years, reaching national figures well above 300,000.<sup>69</sup>

There are many factors which come together to drive this increase:

- The full extent of the impact on the economy yet to be realised, which is expected to lead to higher levels of homelessness. An example of this is when the furlough benefit ends in September 2021, unemployment is expected to spike with 6.5% of all workers unemployed at the end of the year.<sup>70</sup>
- The policy, guidance and funding brought into protect people who are homeless or are at risk of homelessness is expected to end imminently (such as the Eviction Ban and Everyone In) with a significant lack of clear plans moving forward.<sup>71</sup>
- Whilst the government has pledged additional funding to enable continued support, it is felt to be inadequate, and it is unclear at a local level how it will be used.
- Local authorities face a double-edged sword of reduced focused funding for homelessness and reduced overall budgets due to economic issues.
- The structural barriers that existed before the pandemic preventing moving people from emergency accommodation into permanent and secure housing, including a lack of housing supply and a welfare system that does not address the underlying causes of homelessness, have been exacerbated during the pandemic. Forecasts suggest that the gap between demand and supply will substantially increase over the coming years,

<sup>69</sup> Crisis (2021) The homelessness monitor: England 2021. Available at: <https://www.crisis.org.uk/media/244702/crisis-england-monitor-2021.pdf>

<sup>70</sup> King, B (2021) Unemployment rate: How many people are out of work? BBC News. Available at: <https://www.bbc.co.uk/news/business-52660591>

<sup>71</sup> Groundswell (2020) Monitoring the impact of COVID 19 on people experiencing homelessness. Available at: [https://groundswell.org.uk/wp-content/uploads/2020/12/Monitoring\\_Impact\\_COVID\\_Groundswell-FINAL-REPORT.pdf](https://groundswell.org.uk/wp-content/uploads/2020/12/Monitoring_Impact_COVID_Groundswell-FINAL-REPORT.pdf)



as the longer-term effects of Covid-19 take hold<sup>72</sup> This will be further exacerbated by and expectation that Covid-19 may cause rental prices to rise. Forecasts have predicted they will potentially increase by up to 5.5% in 2021<sup>73</sup> pricing some people out of the rental market.

### In Milton Keynes:

Given the disproportionate level of homelessness, the expected increase in homelessness is of particular concern in Milton Keynes, reflected in the views of the partners.

*“Come November December, we expect to be phenomenally busy from the income security, job insecurity and housing insecurity which will be increased because the benefits have gone from central government.”*

*“It's the sense of stuff just being stored up. And the anxiety of dealing with the aftermath of this stuff. At what point does all that stuff come to a crashing end and within a weekend we were completely overrun. What we expect to see is a steady week on week increase in demand and inquiries and a slow sinking feeling that your capacity won't be enough to deal with it.”*

*“I think it's going to get much worse. I think there are a lot of people who have moved and now are in unsuitable housing situations. We're going to see that really explode when the furlough finishes, and people can actually get out.”*

*“Landlords are going to be trying to make up the loss of income by increasing rents. And I just think we're going to see a bit of a bubble of issues.”*

*“Everyone you talk to says that there's not going to be a mass exodus on the 31st of March, but hotels are going back to normal, so those 60 people have got to come out of hotels. Where are they going?”*

*“What I'm not clear on which I feel could be kind of communicated, is what the plans are for those people. What is going to happen next. Because you'd think that that would be being planned for or should have been by now.”*

*“It will do an enormous amount of psychological damage to people if they just go completely back to square one after a year of having somewhere safe to sleep.*

*“We have a high rate of reoffending, the second highest after Oxford in Thames Valley, and I have to believe that you know insecure housing plays a big role in that. So, the fear with the high unemployment rate, made even worse for ex-offenders who are often at the back of the queue for work, means they will be even less likely to pay rent so the circle of reoffending continues / increases.”*

<sup>72</sup> Joseph Rowntree Foundation (2020) Build, build, build social housing: to stimulate our economy and unlock people from poverty and homelessness. Available at: <https://www.jrf.org.uk/report/build-build-build-social-housing>

<sup>73</sup> Savills (2020) Impact of Covid 19 on social housing supply and residential construction. Available at: [https://assets.ctfassets.net/6sxvmndn0s/5gv79wNIfOdWxHvJ4dqkiP/e53c6f04a2380037bc9c7e8bf496f798/Impact\\_of\\_Covid-19\\_on\\_social\\_housing\\_supply\\_and\\_residential\\_construction\\_....pdf](https://assets.ctfassets.net/6sxvmndn0s/5gv79wNIfOdWxHvJ4dqkiP/e53c6f04a2380037bc9c7e8bf496f798/Impact_of_Covid-19_on_social_housing_supply_and_residential_construction_....pdf)

### 3. The impact on service providers

The main concern for service providers moving forward is having clear guidance on what help, and support will be available, so that they can plan their provision more effectively to ensure that what they provide is relevant, robust, and efficient.

#### In Milton Keynes:

Partners mirror these concerns. The lack of information and guidance on what the future holds is frustrating and impacting their ability to plan effectively. They are calling for the government and local authority to be open and honest with their future strategy so services can effectively prepare in a timely manner.

*“There's not a lot of joy. Everything is reactionary, anticipating what's going to happen. You can't be proactive because you don't know what you're planning for, so you can only ever be reactive, which is always the worst-case scenario.”*

*“There's more fears than happiness about the future because we don't know what it is. It comes back to communications, to the local authority moving things forward and clearly laying out their plans.”*

*“What is their aim and what is their intention with funding bids in terms of accommodation or support? Are they going to continue to bridge this gap? When is that going to stop? And if not that then what are we going to be back into supporting people on the street? If we are what's going to open for them to be able to access? Are we going to have to still support on the street? What's going to happen?”*

*“We're waiting on the MHC LG Transformation fund for this season, which we understand would get announced in April and you can open for applications in May and June. So ideally you need a steer from government about what they're going to allow before you're submitting an MHC LG bid for funding. Otherwise, we're going to end up in the same position as we were this year.”*

*“We need time to be able to do that because then we can say OK, well we know this is going to come to an end. So, let's make a plan how. Who can you access? What can you access? How can we continue to support you?”*

Although levels of frustration are high in relation to future planning from the council, some people are optimistic of what can be achieved. A restructure within the council, moving housing into adult social care, is seen to be a positive step in improving collaborative and streamlined working.

*“Housing is going to become part of adult social care I think it's absolutely the right move. Housing was in the place directorate. It was like there are two separate councils. They didn't ever talk across the directorates, so I think it just gives a far better access to social care by having housing in that team. So hopefully making it more efficient”*

*“There's going to be a good join up of work between the homeless prevention team the rough sleeper team.”*

*“Moving over into adult social care changed things quite dramatically for us. We've now got additional help from legal teams, commissioning teams, IT. Now we've got additional support from those that know what they're doing, so it makes it means that we can get on with offering a prevention service to it to the best of our ability rather than have to worry about things that really are not our Forte.”*

*“I do think it's going to be. We're going to be able to manage people's expectations better. I think we're going to have a more streamlined way of support for people.”*

Whilst the constant changes to policy and guidelines have been challenging, they have been positive outcomes in terms of changes to working practices and levels of collaboration. Many people are hopeful these positive outcomes will continue moving forward.

### **In Milton Keynes:**

Many positive things were achieved, and improvements made with partners keen to see these continuing and adapted further to ensure better provision and outcomes moving forward.

*“We're going to look at this moving forward, and also to keep the partnerships that we've got to him and just keep showing up. And in those, because we've built up some really good partnership working, and I think the whole team moving forward wants to keep that. “*

*“I don't think they'll ever go back to what they for several reasons. One is, I think there will be a long shadow after this initial period is done, with people's anxieties about being around lots of other people. Two, I think people have got used to the convenience of not having to leave home to talk to my GP or my son's school or my whatever.”*

*“I think we are probably passed the point where it's reasonable to say to people oh, don't expect that to be the long term. I think people now do expect this way that we interact just be part of life from now on at some level.”*

*“A lot of our service normally would be different with volunteers. We had 80 volunteers. We've now got 30 because many were older, retired people with all sorts of other worries and anxieties about their health and whether they've been vaccinated or not. They don't want to put themselves in the position where they're at risk. Or don't want to move with developing technology. So, this is a natural jumping off point. That's another reason why we can't really put it back the way it was.”*

*“I think what we're looking at is a much more blended approach. Our old service model was 8000 people a year, 17,000 inquiries. 80% of that work was dealt with face to face and the remaining 20% was a bit of phone, a bit of webchat, bit of email. We've now said, when it's safe to do so, maximum of 25% face to face. The remaining  $\frac{3}{4}$  will be telephone, video conferencing, video calling, web chat, email. And sort of self-help.”*

## Section 7: Conclusions and reflections

The current state of homelessness within England and Milton Keynes is in a state of flux, reacting to ongoing COVID-19 policy, guidelines and interventions. A lack of communication and planning means that the future of the sector is uncertain.

The overall feeling is a sense of dread and panic, with expectations of a significant increase in the number of people experiencing homelessness or at risk of homelessness. This is expected to lead to an increased demand on services at a time when funding may also be cut, leading to a worrying long-term outcome.

Forward planning is needed to ensure that the risk to service users is minimised. The interventions put in place because of COVID-19 have provided some positive outcomes that could significantly improve the homelessness support sector and partners within Milton Keynes are eager to see these advantages not lost as things move forward.

The following observations for Milton Keynes are set out across three key themes:

1. The impact on public perceptions
2. The impact on people who are homeless or at risk of homelessness
3. The impact on service providers

### 1. The impact on Public Perceptions

#### Observations on the impact of COVID-19

COVID-19 has raised awareness of homelessness, helping people understand the scale of the issue and the breadth of reasons behind homelessness. COVID-19 showed what could be achieved if enough resources were made available to the sector. It also helped to identify that data collection is not fit for purpose. The data available under represented the true scale of homelessness within the country and Milton Keynes.

#### Looking to the Future

Expectations are that the focus on homelessness in policy and funding will reduce as the government and local authorities struggle to manage the economic fallout of COVID-19. Right now, there is a spotlight on the homelessness issue, but how long will that remain? As the focus shifts, this will reduce awareness and impact again on public perception of homelessness. It will also make it less likely to achieve the levels of change required, or maintain the momentum behind some of the interventions that did work and were new during the height of the pandemic. Raising awareness of the issues will only carry weight if the spotlight and focus remains.

## 2. The impact on people who are homeless or are at risk of homelessness

### Observations on the impact of COVID-19

There have been mixed outcomes for people who are homeless or are at risk of homelessness based on the interventions, policies and guidelines put in place to navigate the challenges that COVID-19 presented.

There were many negative outcomes highlighted:

- There were questions over the timing of *Everyone In*, its longevity, and the suitability of accommodation provided.
- It is unclear what the learnings from *Everyone In* will be and how that can be preserved, enhanced and acted on across the sector.
- There is a distinct lack of 'Move on' planning, reducing the overall impact of the policy.
- There are concerns over the long-term implications when the eviction ban and welfare changes are removed.
- Restricted access to key services, such as night shelters and day centres, which host outreach and support programmes has had a detrimental impact on many people at risk or experiencing homelessness and there is uncertainty on what may be possible going forward.
- There has been a knock-on effect on food security with less money to buy food and reduced access to the services providing food.
- Provision of food relief and services came to the forefront across the sector to those in need, but these are likely to reduce and taper off.
- There is particular concern for people with no recourse to public funds who were captured within *Everyone In*, but moving forward will fall outside the remit of most support services.
- The pandemic has illuminated and, in some cases, perpetuated the existing health inequalities.
- Types of people who are homeless have shifted, meaning that services providers may need to change their provision to support new cohorts of people.
- Raising expectations of those who have received support through *Everyone In* and other policies whilst positive, can also be seen as a risk if there is no change in how services run in the future and how individuals are supported to move through the pathway.
- There is real concern at the lack of opportunity for those with lived experience to influence provision and be really listened to.

But also, there were many positive experiences:

- It seemed that the *Everyone In* policy was effective in reaching its main goal of minimising COVID-19 transmission rates and deaths within the homelessness sector.

- It also reduced rough sleeping numbers through *Everyone In* providing safe spaces, and in some cases, well received, structured support.
- In some cases there was engagement from individuals for the first time and this presented opportunities to build trust and relationships.
- The eviction bans and welfare changes have helped many people at risk of homelessness remain housed during the crisis.
- For some, the pandemic helped to improve general health, with interventions providing a safe sheltered environment with access to health care provision.
- Having services present at central accommodation locations made it easier for homeless people to access help and advice.
- There was considerable and practical learning that can be carried forward to achieve better outcomes.
- It demonstrated how change can be achieved quickly and without high levels of bureaucracy, which all helped to focus on the individual.

### Looking to the Future

Most people are feeling pessimistic. Expectations are for homelessness to increase exponentially over coming years. Given the disproportionate level of homelessness within Milton Keynes, partners are especially concerned for the future.

Despite the pessimism, people are optimistic that the improvements that have been seen in the sector due to COVID-19 interventions could lead to long term benefits for those who are homeless or at risk of homelessness. Partners are keen that these positive changes are maintained and built upon to improve provision and outcomes moving forward. Most notably there is an ambition to involve the wider homeless sector and those with experience of homelessness themselves in service design.

There is a hope that things will be done differently in the future with better communication; improved tracking and understanding of an individual's journey through to independence. An affordable, safe and stable home for all must be at the forefront of minds.

## 3. The impact on service providers

### Observations on the impact of COVID-19

For service providers, there have been many negative outcomes of the pandemic.

- Working in the sector during COVID-19 has been stressful for the workforce, both paid and voluntary. Poor communication has led to stressful working situations. Organisations are mindful of the need to provide effective support to their workforce and are keen to develop practises to achieve this.

- A lack of guidance on how to implement government policy for different settings and the lack of uncertainty in whether the provider has achieved the 'right' interpretation has left a mixed and inconsistent approach in some places.
- There has been an increase in demand from new cohorts of people, requiring different types of support, adding to pressure on services and their workforce.
- Ways of working have had to be adapted and changed in short time frames adding stress and frustration.
- There have been reductions in the number of volunteers being available due to everchanging personal circumstances, fear or reticence of the COVID-19 environment.
- Organisations have suffered financial and resource challenges with a large proportion being channelled to COVID-19 provision, whilst leaving other areas of work behind for different periods of time.

However, despite the negative impact service providers have also seen many positive outcomes. The pandemic has:

- Offered services an opportunity to implement new ways of working.
- Encouraged increased levels of collaboration, leading to more effective and efficient outputs.
- Supported people see what can be achieved if enough resource is available and people are working towards a common goal.
- Helped reach out to and build relationships with services users, giving them unprecedented interaction with people to build rapport and understanding of needs.
- Shown that organisations can be nimble and agile in decision making and delivery, cutting out unnecessary delays and bureaucracy.
- Demonstrated how resilient the sector is, despite the enormity of challenges that have been faced, and will continue to be faced in the future.
- Reaffirmed the level of expertise available in the sector and shown new ways of harnessing this expertise to benefit people who are homeless or at risk of homelessness and service providers across the sector.

### Looking to the Future

The lack of long-term planning is incredibly frustrating for services providers as it limits their ability to organise and prepare for future demand. This is impacting now, but was evident before COVID-19 too. However, the sector is adamant that the progress made in tackling homelessness raising awareness of homelessness and interventions to tackle it should not be lost. Moving forward, partners have also asked for policy to be released in a timely manner so they can plan an effective response. Another learning from the pandemic is how difficult it was to implement policy without adequate time to do so. Providers need time to plan what their response will be and what resource will be needed.

Longevity of resource is an issue, as government funding is usually of a short, fixed term nature. This makes any provision extremely fragile. It makes it difficult to plan long term as well as provide security and stability to staff and service users. It can also lead to a high

turnover of delivery partners as commissioned services are allocated to new organisations, losing key corporate knowledge and connectivity. The investment in the COVID-19 response showed the government had a commitment to tackling homelessness in the short term, but service providers are calling for more durable investment to allow them to really have an impact on reducing overall numbers.

It has always been acknowledged that collaboration is a key ingredient for success and services have highlighted an aspiration to develop this further. Going forward it will be ever more important to pull together, using a structured approach to share data to underpin work and measure success. There is a recognition that this will need continued commitment to achieve the best outcomes.

Service providers were united in their concern around the need for consistent, accessible and local data. Many highlighted reservations about the systems and processes in place now, suggesting work needs to be done to ensure it is useful and reliable.

One of the shining lights that came from the pandemic response was the way in which the sector worked together to achieve the goals. Maximising resources and minimising overlap in work is always at the forefront of the sector's mind, however there appears to have been an undercurrent of distrust amongst organisations, often competing for time and money. As economic circumstances are expected to worsen, making funding scarcer, there is an acknowledgement that it's even more important now to pool knowledge and resources to achieve the best outcomes. Progress has been made toward this during the pandemic, but more time and effort needs to be applied to build upon those relationships.



## Section 8: Recommendations

Based on the findings from this research on the impact of COVID-19 on the homelessness sector, the Milton Keynes Homelessness Partnership advise the following key recommendations

### 1. Improve cross sector communication

There was a strong sense from statutory and voluntary organisations of the need to improve cross sector communications, although acknowledging where progress has been made.

Establishing a systematic approach to open communication as a golden thread and priority from the outset to underpin all work should be treated as organisational priorities and appropriate resources applied to deliver this change. A significant improvement in cross sector engagement was seen as critical to building real trust from the beginning and ensuring better outcomes for those experiencing or at risk of homelessness. The sector should focus on establishing a communication framework with action plans that are proactive, relevant internally and externally to foster and underpin real collaborative approaches.

### 2. Maintain and enhance public awareness, through a co-ordinated approach

There is a need to ensure regular, consistent external communication through multiple mediums is externalised to the public, businesses and organisations across and the wider population in Milton Keynes. Importantly, there needs to be work to ensure there are clear messages owned by the network within the sector to minimise confusion, maximise public understanding and continue to dispel outdated misconceptions about homelessness.

Stakeholder messages should complement each other, recognising the power of collective messaging. Messages should highlight the expertise and service that each organisation brings and their unique place within the sector, but equally identifying the commonalities to show a united approach. Showing a united public facing approach will not only help to bring the sector together, but add weight and moment to changing public perception and maximise the impact that engagement with the public could bring.

### 3. Listen and learn from people with lived experience

Cultivating an environment where people with lived experience can have their voices heard to influence policy and delivery was seen as fundamental. To ensure future provision is as effective as it can be, specific actions to ensure people with lived experience have a meaningful role in shaping policy and provision across statutory and voluntary providers, should be established. Organisations should lead by example, auditing and publishing how their organisations engage with and listen to those with lived experience. They should demonstrate how their involvement has influenced practice. Organisations should share good

practice to enable the creation of action plans to involve people with lived experience where none exist. Organisations should embrace the principles of ‘Nothing about us, without us’ establishing it as the norm across Milton Keynes.

#### **4. Create a learning culture, implementing evaluation and monitoring as the norm**

All services, voluntary or statutory, should have monitoring and evaluation at the heart of their services. A wide variety of tools to monitor outcomes and evidence the impact of work is available. Agreeing some common outcomes and monitoring tools could give unique intelligence across Milton Keynes and help stakeholders truly evaluate and share what is working and what is not. Acknowledge good practice where it exists and extract the learning for others to consider.

Being flexible in measuring success is important so as not to only focus on the ‘end goal’, but to recognise success also as the steps that are taken along the way whilst working towards this.

Establishing research plans identifying areas to spotlight to fill gaps will all help increase sector intelligence, engagement and understanding. In an ever-changing environment that impacts community need, research not only helps to validate the case for funding but also allows new programmes to be implemented with confidence whilst maximising the chance of success and better outcomes for those in need.

#### **5. Improve data, by establishing a sector wide framework and joint action plan**

Challenges around data is particularly prevalent in Milton Keynes where local data is often not available in national statistics. Local service providers often look to use data and figures for planning, which means an inconsistent view of the needs of service users. Partners need to work together to improve data collection methods to ensure availability, accuracy, and consistency so that everyone is working from the same baseline. These changes can be achieved by using innovative digital solutions to develop the right approach for Milton Keynes. Improving the collection and use of individual pathway data is needed as part of the solution, as is a shared understanding of terminology, methodology and how data can and should be used.

#### **6. Build on collaborative working, by establishing a ‘Charter for Change’**

Work needs to be done to maintain the momentum behind collaborative working established from the pandemic response. A set of core values and principles need to be produced, together with working practices and action pledges for partners to commit to. This will help build further relationships and trust across the sector.

There needs to be a greater understanding of the needs and aspirations of organisations across the sector. A co-ordinated and comprehensive mapping of the sector and its sub sectors

is required to clearly establish the expertise that each organisation brings to the table. This will help to identify overlaps and explore gaps. An openness and greater understanding around the strengths and weaknesses across organisations is required. Importantly where weaknesses exist, establishing actions plans, in a supportive environment to enable organisational development and improvement will strengthen the sector and delivery of positive outcomes across Milton Keynes.

Understanding the resources required within the sector is critical to enable the sector to respond efficiently and effectively. This will require exploration of joint funding opportunities, shared back-office support and creative solutions to maximise the sectors' ability to make real and lasting change.

Building a stronger system infrastructure will enable better coordination and deeper collaboration.

## **7. Influence local systems and policy change**

Identifying and influencing change to key policies that are adversely impacting the population in Milton Keynes, or conversely could transform the outlook across Milton Keynes, needs to be prioritised. Change should be sought through a co-ordinated and collective approach. Whilst the focus should be local, there is a need to contribute to wider discussion and influence national policy change. This is particularly relevant to welfare changes, such as the calculation of LHA rates and the temporary uplift of Universal Credit amongst others.

## **8. Focus funding on prevention**

Partners were quick to emphasise that support is not just about giving people housing. It needs to focus on the overall care and support package, ensuring support is available to really get to the route of why each person is homeless and putting in place actions to prevent it from continuing to happen.

A fully person-centred and holistic approach to homelessness, in its widest sense beyond just statutory homelessness is critical, according to all if homelessness is truly going to be tackled and individuals supported to get back on track. Moving the individual from high dependency on services to low dependency and eventual independent living will require a different approach than currently exists, whilst acknowledging that some will be in and out of the pathway for the long-term.

## **9. Focus on the wider housing market**

The provision of more appropriate social housing across Milton Keynes was highlighted. It was recognised that the Next Steps Accommodation Programme is a positive step toward improving the situation, but much more needs to be done to ensure a more robust response to the issue. A co-ordinated engagement programme with private landlords, social landlords,

investors, and developers were all part of the solution to understand and break down barriers, and create more and truly affordable properties, secure lets and appropriate tenancies.

A recognition that housing is an issue for those for whom the Local Authority has a duty but also for those who do not fall within the Local Authority duty. There is a limited supply of housing across Milton Keynes, that requires an open, transparent, and co-ordinated approach to meet the needs of service users that both the statutory and voluntary partners operating in this space support.

## **10. Achieve clarity on future planning**

It is important to seek the support and influence of local government to achieve clarity, information and understanding on likely national plans, but also an understanding around local considerations for the Next Steps Accommodation Programme, and the Rough Sleeper Accommodation Programme.

Despite the Government's commitment to end homelessness, there is no clear plan nationally or locally as to how these funds will be used to achieve the government's targets of ending rough sleeping by 2024. To effectively deliver known or potential national priorities locally, leaders, decision makers and policy makers in Milton Keynes need to come together to navigate the uncertainties that exist to achieve the collective ambition of achieving better outcomes for people who are homeless or are at risk of homelessness in Milton Keynes.

## Glossary of terms

Term	Definition
Homelessness	A range of people who lack a home for a multitude of reasons, often due to a combination and culmination of structural and individual factors such as: <ul style="list-style-type: none"> <li>• A lack of affordable housing</li> <li>• Poverty, unemployment</li> <li>• Leaving prison, care, or the army</li> <li>• Experiencing violent or abusive relationships</li> <li>• Family breakdown</li> <li>• Poor mental and physical health</li> <li>• Drug and alcohol addiction</li> </ul>
Everyone In	In March 2020 the government announced the <i>Everyone In</i> initiative. Led by the Ministry for Housing, Communities and Local Government (MHCLG), it instructed all local authorities in England to move everyone sleeping rough and in communal shelters into a safe place, ideally in self-contained accommodation. Backed by £3.2 million targeted funding to local authorities, alongside £3.2 billion overall for councils to assist people classed as vulnerable. <sup>74</sup>
MK	Milton Keynes
MKC	Milton Keynes Council
MKHP	Milton Keynes Homelessness Partnership
PHE	Public Health England
NRPF	No recourse to public funds
MHCLG	Ministry and Housing, Communities and Local Government
NHSE/I	NHS England/Improvement
JCVI	Joint Committee on Vaccination and Immunisation

<sup>74</sup> Ministry of Housing, Communities and Local Government (2020) Coronavirus: Letter from Minister Hall to local authorities on plans to protect rough sleepers. Available at: <https://www.gov.uk/government/publications/letter-from-minister-hall-to-local-authorities>

**Milton Keynes Homelessness Partnership**

The Ridgeway Centre, Featherstone Road, Wolverton Mill South, Milton Keynes, MK12 5TH

Registered Charity 1181232

[www.mkhp.co.uk](http://www.mkhp.co.uk)