

Appendix Seven: Safeguarding adults who sleep rough in London

Background

In 2016/17 over 8,100 people were seen sleeping rough at some point in London. This is virtually unchanged from the total of 8,096 people seen in 2015/16, but is more than double the figure of 3,673 in 2009/10¹.

Help with housing for someone who is homeless

The nature of the help available will depend on the detail of the individual's circumstances, so it is important to support people who are sleeping rough to give as much information as they feel able to.

If the person has a connection with a Local Authority, then the individual or the staff supporting them should seek advice from the Housing Options service in that Local Authority. Details can be found on each Local Authority's website.

[Shelter](#) have a free helpline that can be called 8am-8pm Monday to Friday and 8am-5pm weekends – 080880044

In April 2018 a new Homelessness Reduction Act will be implemented. The Act will establish new duties for public authorities who come into contact with people in housing need.

Care Act responsibilities

People who sleep rough may have tenuous links with the locality where they sleep rough and if they have been moving around for some time, or are non-UK nationals, may not be able to evidence that they are ordinarily resident in any particular local authority.

Local Authorities are reminded that this does not detract from their responsibilities under the Care Act to make safeguarding enquiries irrespective of ordinary residence.

It is important that the risks of living on the streets are not compounded by agencies failing to provide a timely and appropriate service response in the locality where a person is sleeping rough and is at risk of harm or abuse.

It is unlawful to refuse to assist a person who for reasons of immigration status may not be eligible for Local Authority services without undertaking a human rights assessment.

Local Authorities are also reminded that the requirements of The Care and Support (Disputes Between Local Authorities) Regulations 2014 must be followed, namely that

“If no local authority is meeting the needs on the date on which the dispute arises—

(a) the local authority in whose area the adult needing care is living; or

¹ <https://data.london.gov.uk/dataset/chain-reports>

(b)if the adult needing care is not living in the area of any local authority, the local authority in whose area that adult is present,

must, until the dispute is resolved, perform the duties under Part 1 of the [Care] Act in respect of the adult or carer as if the adult needing care was ordinarily resident in its area.”

Wellbeing

Wellbeing is a broad concept and there is a more detailed explanation of what it can mean at **section 1.2 (pg.17)** of this document.

The wellbeing of people who live and sleep on the street is at significant risk.

Homelessness may be a consequence of health problems, and is very commonly a cause of worsening health. Many people who sleep rough will have significant needs in relation to physical health, mental health and substance misuse. Homeless people are more likely to die young, with an average age of death of 47 for men and even lower for homeless women at 43². A recently published international study identifies that that the mortality rate among social excluded groups including homeless people was nearly eight times higher than the population average for men and nearly 12 times higher for women.³

Risk factors

There are a range of risks experienced by people living on the streets that expose them to a higher level of vulnerability to harm and abuse. A risk assessment tool designed to support frontline practitioners can be found on pages 12 & 13 of

<http://www.pathway.org.uk/wp-content/uploads/2015/05/MHRS-updated-guidance.pdf>

² https://www.crisis.org.uk/media/236799/crisis_homelessness_kills_es2012.pdf

³ [http://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(17\)31869-X/fulltext](http://www.thelancet.com/journals/lancet/article/PIIS0140-6736(17)31869-X/fulltext)

Types of abuse

Section 2.3 (pg. 25) above sets out the types of abuse identified in the Care and Support statutory guidance. People who live on the street may have become homeless as a consequence of abuse; they may also face abuse in their lives on the street.

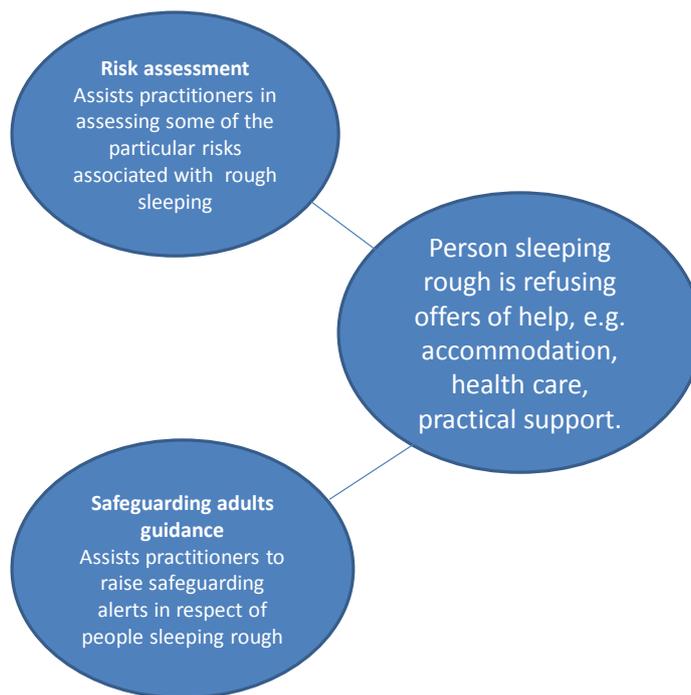
Self-neglect

Amongst the population of people who sleep rough there are significantly higher prevalence rates of organic and functional mental illness, substance use, acquired brain injury, autistic spectrum conditions and learning difficulties, and some communicable diseases. Any of these conditions can contribute to behaviours which result in self-neglect. The requirements set out in **Section 2.6 (pg. 31)** above **Self-neglect** also apply to people who sleep rough.

Human trafficking and modern slavery

Agencies must also be alert to the possibility that individuals living on the streets may be fleeing human trafficking and modern slavery.

Overview (risk assessment and safeguarding people who sleep rough)⁴



Raising concerns about someone who is sleeping rough

⁴ Reproduced from Mental Health Service Interventions for Rough Sleepers
<http://www.pathway.org.uk/wp-content/uploads/2015/05/MHRS-updated-guidance.pdf>

It is important that people who are sleeping rough are supported to access the housing, health and adult social care services for which they are eligible. Encouraging and supporting people who are sleeping rough to access support should be the first step in helping people in these circumstances to be safe.

Anyone who is concerned about someone sleeping rough who is in imminent danger should alert the relevant emergency services immediately.

If the situation is less acute but may still need a rapid response, anyone who is concerned about someone sleeping rough can make an immediate referral to street outreach services via <http://www.streetlink.org.uk/> or seek immediately necessary treatment from a GP practice. Anyone witnessing someone who is sleeping rough and is experiencing abuse and neglect as set out in the criteria in **section 2.2 (pg. 21)** above **Who do adult safeguarding duties apply to?** should make a safeguarding referral to the Adult Safeguarding referral line in the Local Authority where the person is sleeping rough.

It is especially helpful to provide as much detail as possible including

- A description of the person and their belongings
- Their sleep site location and description
- Times of day they are at that location
- Any communication needs, such as whether an interpreter or other support is needed

Mental Capacity

There are situations where somebody sleeping rough refuses to accept help to reduce significant risk to them, for example by accessing medical attention or being removed from immediate danger. Where an adult who is sleeping on the street is at risk, assessing and determining the individual's capacity to make decisions to live on the street must be carried out in accordance with the requirements of the Mental Capacity Act (2005) and the Code of Practice and the guidance on **Adult Safeguarding Practice** at **section 3 (pg. 43)** above.

There is published guidance on mental health service interventions for people who sleep rough, with practical screening and assessment tools, available at

<http://www.pathway.org.uk/services/mental-health-guidance-advice/>

Advocacy and engagement

The guidance on **Advocacy and Support** in **section 3.2 (pg. 49)** above sets out a range of advocacy options which are in themselves important interventions to support the adult at risk who is rough sleeping.

People who sleep rough may be mistrustful and evade engagement. Homelessness street outreach workers are experienced in this field and are an important resource to safeguarding colleagues as well as a potential advocate for the adult at risk.

Duties under the Care Act in relation to people with no recourse to public funds

One of the major challenges that face agencies working with people who sleep rough is that a significant protection that could be offered is safe accommodation. Many people who sleep rough may have extremely limited statutory rights to safe accommodation as a result of their immigration status.

53% of the people seen sleeping on the streets were not UK nationals, many of whom would have no recourse to public funds.⁵ Local Authorities are reminded that this does not detract from their responsibility to offer an assessment for services under the Care Act, and that it is unlawful to refuse to assist a person who for reasons for immigration status may not be eligible for Local Authority services without undertaking a human rights assessment.

Further detail about Local Authority rights and responsibilities can be found at

<http://www.nrpfnetwork.org.uk/information/Pages/Social-Services.aspx>

The legal and regulatory framework in this area is complex and Local Authority practitioners should always seek detailed advice within their Local Authority when seeking to determine an individual's rights under the Care Act.

Multi-agency panels

The locality mechanisms to support adult safeguarding set out at **2.10** in this document are all potentially relevant to people who sleep rough. In particular localities should consider convening **Community Multi-Agency Risk Assessment Panels (or High Risk Panels) [see 2.10.4] (pg. 42)** to manage on-going risk in relation to individual people sleeping rough who maintain high levels of risk in their choices and actions.

Pregnant women and children

Amongst those who sleep rough there will from time to time be children (including 16 and 17 year olds) and pregnant women.

The duty to protect children is everyone's business and children's welfare must be safeguarded.

Any safeguarding risks and needs in relation to children must be referred to Children's Safeguarding. Details can be found on each Local Authority's website.

People who sleep rough who perpetrate harm

People who sleep rough may be the instigators or perpetrators of harm to vulnerable people and where frontline professionals have reason to suspect that they are, referral to the police must be made urgently.

⁵ For more information about statutory duties to migrants with care needs who have no recourse to public funds see the information provided by the network of local authorities and partner organisations

<http://www.nrpfnetwork.org.uk/Pages/Home.aspx>

Circumstances which may result in a Safeguarding Adult Review [SAR]

The circumstances in which the Safeguarding Adult Board might arrange a SAR are set out in **section 2.9 (pg. 34)** of this document and apply equally when someone who was sleeping rough. Local SABs should ensure that homelessness and rough sleeping agencies are aware that Safeguarding Adult Reviews are focused on learning and enable the system to consider the events, learn from them and implement changes that prevent future occurrences.

Learning from deaths

From April 2017 NHS Trusts are required to collate data on all deaths judged as likely to have been caused by problems in care – along with actions taken to learn and prevent such deaths in future. From October 2017 NHS Trusts are required to provide quarterly data and summarised this data in each organisation's annual Quality Accounts from June 2018.⁶ NHS Trusts are reminded that this requirement will need to be considered when people in their care who are sleeping rough die whilst sleeping rough.⁷

⁶ <https://www.england.nhs.uk/publication/national-guidance-on-learning-from-deaths/>

⁷ The first edition of [National Guidance on Learning from Deaths for Trusts](#) was published by the National Quality Board (NQB).