

## Government response to homelessness and COVID-19

People experiencing homelessness, particularly those who are rough sleeping, are in severely vulnerable during the pandemic. They are three times more likely to experience a chronic health condition including respiratory conditions such as COPD. It is not possible to self-isolate or follow sanitation guidance if you are sleeping rough or living in shared homelessness accommodation.

This document sets out the suggested policy changes that remain necessary to provide a comprehensive response to people who are homeless, and those working to support them.

## 1. Progress to date

It has been extremely welcome to see a range of the government policy changes and initiatives that will have a positive and, in some cases, dramatically helpful impact. These include:

- Central leadership from Dame Louise Casey and her colleagues to coordinate the 'Everyone
  in' hotel and emergency accommodation operation. This will have undoubtedly saved lives,
  taking a public health approach, regardless of pre-existing arbitrary tests of who might qualify
  for statutory homelessness assistance
- £3.2million allocation of funds to local authorities in England to assist the efforts to protect people who are homeless from COVID-19
- Raising the Local Housing Allowance rate to the bottom 30<sup>th</sup> percentile of local rents. This is
  essential if we are to stem the tide of new homelessness cases, and in assisting councils to
  deal with people who are homeless now
- Suspending evictions from Home Office asylum accommodation
- Halting evictions from the private and social rented sectors

## 2. 'Everyone in'

The aim to ensure all rough sleepers and those with shared air space in homelessness accommodation are given 'safe harbour' is undoubtedly right. Combined with an assertive and supportive approach from MHCLG, we are seeing a real impact across the country. There are however, remaining barriers faced locally and nationally to achieving this ambition of 'everyone 'in, and too many people are still on the streets. Foremost amongst the issues to be resolved are:

- The removal of legal barriers to assistance that prevent people from qualifying for help. Over the last week we have seen repeated examples of councils denying help to people on the basis of 'local connection' criteria, alongside on-going confusion and denial because people are deemed to have no recourse to public funds. We recommend a clear public message to all local authorities making clear that everyone who is homeless is eligible for assistance, regardless of priority need, intentionality, local connection, or immigration status.
- Funding is still a concern for local authorities. In some areas, allocations to homelessness teams have been made from the wider pot of £1.6bn. In others, no such priority and certainty has been achieved. This directly impacts the ability and willingness of local authorities in paying for rooms in hotels and other emergency accommodation, but we also need to see councils commission the support arrangements for people who have been placed. In order to

- ensure funding is not a barrier to getting everyone in, we recommend MHCLG establish a dedicated funding stream to provide accommodation and support
- Discretionary Housing Payments (DHP) are used to help meet the emergency gaps in housing costs, and is particularly useful in areas of high rents where the increase in LHA will have a limited impact. We recommend DWP increase DHP allocations to local authorities for the duration of the COVID-19 emergency, especially in areas of high rental costs
- Councils themselves also face barriers to getting everyone into safe accommodation, and we would urge the government to address these. Firstly, people without recourse to public funds cannot access housing benefit, which is a vital tool for councils who are not block booking hotel accommodation. We recommend that for the period of the emergency housing benefit restrictions are lifted so that people with no recourse to public funds can access it. Secondly, when seeking to rehouse people in the private rented sector, landlords are increasingly reticent to let properties to people who are homeless, and the Right to Rent checks are an unnecessary barrier. We are asking the Home office to suspend the Right to Rent scheme for the duration of the COVID-19 emergency
- Once in hotel or other self-contained accommodation, the medical needs of those who are symptomatic need to be addressed. As stated above, the underlying health needs of the homelessness population (esp. respiratory conditions) put people at serious risk should they contract the coronavirus. In a number of hotels people have been 'cohorted' and we know who is symptomatic, yet no Covid-care plan is available, and nor is personal protective equipment (PPE) for those supporting individuals. This is why we need Covid-care for those in hotels, and PPE for those working there to be a priority for DHSC and the NHS.

## 3. Homelessness prevention

Up and down the country, local authorities are still taking homelessness applications as normal, and it is reasonable to suggest there may be an increase in new cases given the financial impact of the pandemic on households and businesses across the country. In order to prevent homelessness there are a number of measures that are necessary:

- For some new Universal Credit (UC) claimants, the five week wait for payments presents a severe risk of homelessness. This is why we recommend advanced non-repayable grants for people claiming Universal Credit
- Similarly, deductions from UC present a financial risk that can tip people into homelessness. We recommend a temporary suspension of deductions from Universal Credit payments
- Benefit sanctions can lead to homelessness. It is welcome that DWP has given more flexibility
  to Job Centre Plus staff in considering sanctions, but during the COVID-19 emergency it is
  inappropriate to sanction people, and we recommend a temporary suspension of all benefit
  sanctions for the period of the emergency.
- **4. Exit plan** finally, we would like to assist MHCLG in planning for an end to the hotel arrangements that sees all individuals provided housing and support. We look forward to helping model and plan this as soon as possible.