



# Unlocking the door

A roadmap for supporting  
non-UK nationals facing  
homelessness in England



# Acknowledgements

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Firstly, the authors would like to thank our project partners NACCOM - The No Accommodation Network, for their continuous support and expert contributions. In particular, we have appreciated the input of the NACCOM Community Researchers team, Geo, Nico, Kas, J.A., Ann and Sarah.

We are grateful for the time and expertise given by our partners and informants in Manchester, particularly Paul Newcombe at Manchester City Council and Alison Bacon of Greater Manchester Combined Authority; in Haringey, especially Gill Taylor and Maddie Watkins of Haringey Council; and in Bedford, particularly Tabitha Resta of Bedford Council and Sarah Blakey and Joe Beaty of the King's Arms Project.

Our Advisory Group provided guidance, constructive critique and essential insights throughout. We thank Bridget Young, NACCOM, Annie Dell, The Salvation Army, Nathan FitzPatrick, The Law Centres Network, Maria Iglesias, Praxis, Jean Demars, Public Interest Law Centre, Gisela Valle, Latin American Women's Rights Service, Barbara Drozdowicz, East European Resource Centre and Catherine Houlcroft, NRP Network.

We are grateful for advice and formative input from colleagues at Islington Council, City of Wolverhampton Council, Birmingham City Council, Sandwell Council, Walsall Council, Hackney Council, Redbridge Council, Newham Council, Bradford Council, Lewisham Council, City of London, Lambeth Borough Council, Reading Borough Council, the Greater London Authority, London Councils, and the Local Government Association.

Our members and the wider homelessness voluntary sector have been crucial contributors and advisors throughout. In addition to those mentioned above, we would like to thank colleagues at Glass Door, NOAH Enterprise, Connection Support, Oxfordshire Homeless Movement, St Mungo's and Arts & Homelessness International.

We also extend thanks to Helen Lewis, Crunch Consulting, Derek Bernardi, Camden Community Law Centre, Matthew Howgate, Matthew Howgate Consulting and Southwark Law Centre.

Lastly, we gratefully acknowledge our funders, Lloyds Bank Foundation for England and Wales.

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## Funded by:



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**Homeless Link, June 2022**

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## List of abbreviations

<b>ABEN</b>	A Bed Every Night (Greater Manchester)
<b>EEA</b>	European Economic Area
<b>EU</b>	European Union
<b>EUSS</b>	European Union Settlement Scheme
<b>GDPR</b>	General Data Protection Regulation
<b>GLA</b>	Greater London Authority
<b>GMCA</b>	Greater Manchester Combined Authority
<b>GMIAU</b>	Greater Manchester Immigration Aid Unit
<b>HRA</b>	Homelessness Reduction Act 2017
<b>LASPO</b>	Legal Aid, Sentencing and Punishment of Offenders Act 2012
<b>NRM</b>	National Referral Mechanism
<b>NRPF</b>	No Recourse to Public Funds
<b>NABA</b>	Nationality and Borders Act 2002
<b>NIAA</b>	The Nationality, Immigration & Asylum Act 2002
<b>OISC</b>	Office of the Immigration Services Commissioner
<b>RSI</b>	Rough Sleeping Initiative
<b>RSSS</b>	Rough Sleeping Support Service
<b>UC</b>	Universal Credit

# Foreword

The gaps in basic safety nets for non-UK nationals with immigration-based restrictions are among the most urgent and prominent issues that Homeless Link members raise with us. For many years, solutions to this challenge have felt like missing pieces of the puzzle in national plans to end rough sleeping. Policy choices that allow immigration control to overshadow and undermine good social policy have compounded this, making it even harder for local homelessness systems to deliver the change we need.

In this difficult context, we are proud to publish this report. In the pages that follow, we lay a challenge at the feet of local authorities and their partners by offering an ambitious roadmap for building-over time-inclusive and equitable homelessness systems. Doing so means looking beyond statutory duties and confronting the complexities of our immigration and asylum systems, as well as operationalising anti-racist, trauma-informed and person-centred principles.

Of course, we lay this challenge in full knowledge of the deeply difficult financial and operational environment that local government is currently working in, as well as the legal restrictions on statutory support and welfare benefits that exacerbate the problem. Local authorities, immigration advice providers and homelessness organisations cannot deliver the change needed alone. Nor should they carry all the financial risk for supporting people waiting on Home Office decisions or resolving vulnerabilities driven by national policy and practice.

Delivering a minimum level of universally accessible accommodation is not only a humanitarian imperative, but our research shows it is also a game-changer for the successful resolution of immigration cases and homelessness. This is why we are asking for additional investment from Government in accommodation options for non-UK nationals with undetermined or restricted eligibility facing homelessness; expedition of Home Office decisions on their cases; and a full review of all immigration-based restrictions on public funds to mitigate their role in driving homelessness, among other things.

Our research describes impressive and exciting progress made since COVID-19, which shows the way forward. However, as we approach the 2024 target year to end rough sleeping, we need ambition and a new approach. It is clear that—for non-UK nationals with restricted eligibility—the status quo will not get us there.

The passing of the Nationality and Borders Act 2022 and rising numbers of Ukrainian nationals facing homelessness also point to a challenging path ahead. To achieve our shared goals, we cannot exclude any group from the umbrella of local homelessness support. In partnership with the immigration advice sector, and with the funding and leadership of national and local government, the homelessness sector is eager to rise to this challenge.

**Rick Henderson**  
**CEO, Homeless Link**



# Foreword

Having worked for many years supporting the effective implementation of social services' 'safety-net' duties, the NRPF Network welcomes this report which takes forward efforts to address the impact of immigration-based restrictions and the 'no recourse to public funds' condition on non-UK nationals.

For the NRPF Network, the need to utilise responsibilities under the Care Act 2014 and Children Act 1989 to safeguard and protect families and adults with care and support needs is of upmost importance. Local authorities can enact these defined duties effectively and efficiently to reduce destitution and make use of guidance and best practice resources to achieve this.

Equally, the report expands beyond established social services' responsibilities highlighting the link between immigration-based exclusions, the challenges of operating homelessness responses outside of the social services' safety net and the solutions that can be deployed. In its analysis, the report correctly emphasises an inclusive response since 'ending rough sleeping' will never be achieved by omitting people from this ambition because of their nationality or immigration status.

Readers anxious about the funding and legislative environment framing the homelessness response to non-UK nationals will benefit from the practice examples that can help inform best-use of available resources. Lessons learned from COVID-19 - a time of exceptional housing responses - must be implemented to avoid a return to high rough sleeping counts and accumulating levels of need.

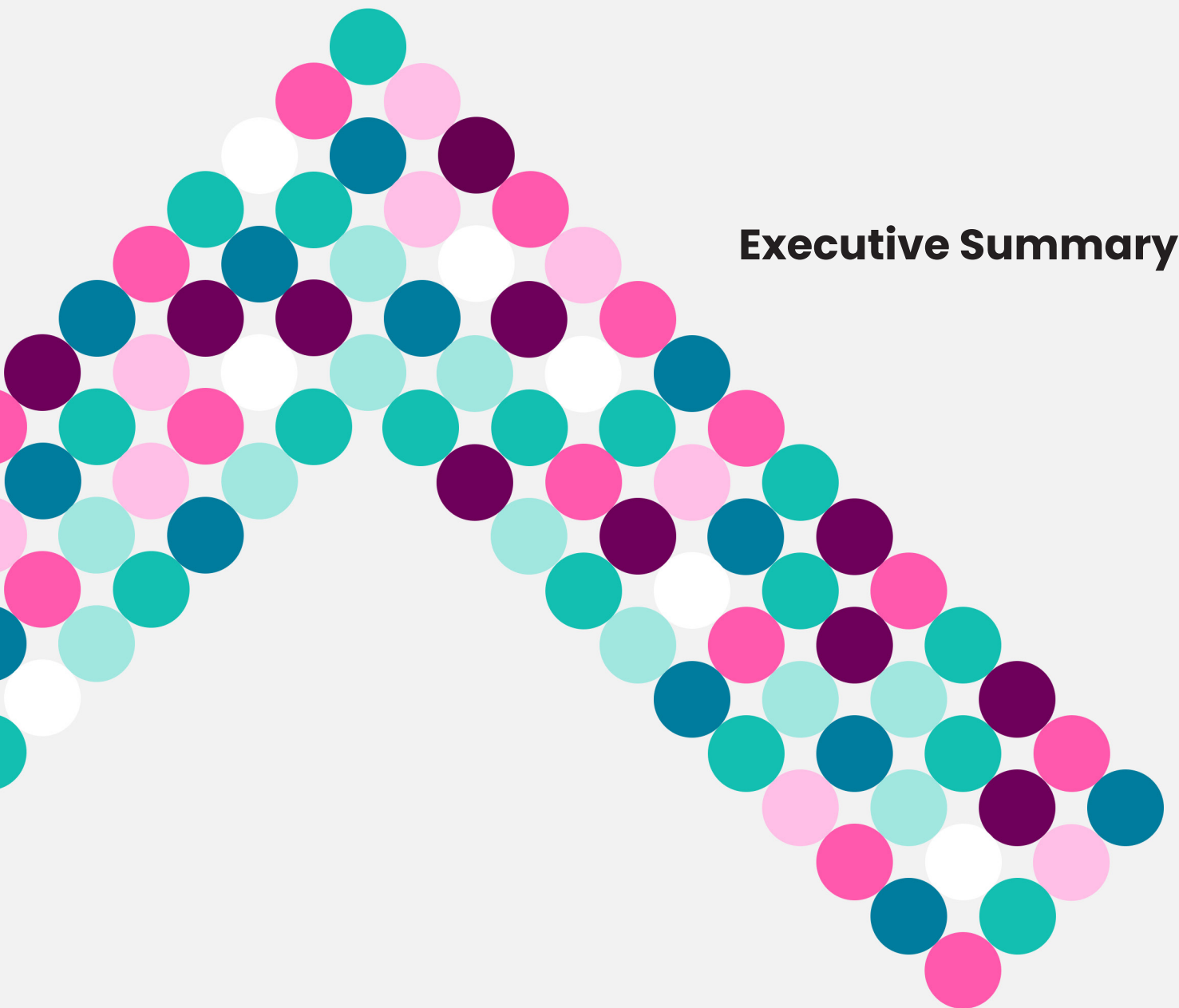
Local authorities will continue to have an important role in managing the impact of national immigration policies on communities and services, even if this role is not always fully understood or funded. The recommendations for national government are therefore of upmost importance to support solution-focused best practice responses through meaningful policy and funding change. We hope that government will act on the recommendations made in this report; recommendations that also reflect key asks being made by local government colleagues.

The NRPF Network would like to thank all those people who work day-in and day-out to provide expert help and assistance to people in very challenging circumstances, many of whom are described in the report. We look forward to continuing to work in partnership with colleagues across sectors to deliver the accommodation and support responses that make such a positive difference to people's lives.

**Henry St Clair Miller**  
**Head of NRPF Refugee and Migrant Services**  
**NRPF Network and Islington Council**



**NRPF** | No  
Recourse  
to Public  
Funds  
**NETWORK**



## **Executive Summary**



Non-UK nationals are more vulnerable to homelessness than people with UK citizenship, and those with restricted or undetermined eligibility for public funds even more so.<sup>1</sup> This challenge is driven by complex factors at national and local levels. In this report, we present findings from research and consultation with local authorities, voluntary sector stakeholders and people with lived experience of restricted eligibility and homelessness in England. We offer a roadmap to tackling this challenge at the local level and highlight the national policy changes needed in order to end rough sleeping and homelessness for everyone, for good.

## Building services that work for all

Our findings provided insights into the design and delivery of homelessness services that work for non-UK nationals with restricted eligibility. Research participants highlighted the remarkable benefits for services and individuals delivered by a stable, universal accommodation offer, including expediting immigration cases and improving engagement in support. Local authorities should act more confidently to fully utilise available powers to accommodate this group and work in partnership with the local voluntary sector to unlock additional options. Rent-free 'assessment beds' within rough sleeping pathways are one example of a model that could be more widely adopted, to facilitate immigration resolutions and move people on.

Access to quality immigration and welfare benefits advice was crucial to resolving non-UK nationals' homelessness and should be core to local authorities' multi-agency support offer. Restricted eligibility is rarely a fixed state and should be treated as a support need to be assessed and addressed. Increased commissioning and embedding of independent immigration advice improved access in homelessness settings; however, challenges around access, capacity, complexity and quality persist. In addition to continuing to improve models, local authorities and Government must tackle the shortages of funding, staffing and capacity across the immigration advice and legal aid systems. The value of meaningful partnerships between local authorities and homelessness and immigration advice organisations at both operational and strategic levels was also highlighted, as a key way to improve case management, better understand community needs, find joint solutions and unlock local resources.

To address intersecting health and drug and alcohol issues, our research underlined the applicability of lessons we have already learned from other groups facing multiple disadvantage, with some adaptations. Multi-agency, person-centred support, facilitated by stable accommodation, quality immigration advice and a trauma-informed understanding of cultural and immigration backgrounds, delivered impressive success. However, it was important that this was facilitated by measures to address language barriers, including access to quality interpreters and native language staff.

Providing equitable and accessible services also meant addressing the fear, distrust and discrimination that have sometimes characterised non-UK nationals' experiences. Closure of in-person services, lack of onward referrals for those refused support and knowledge gaps among homelessness staff all served to compound access barriers and reinforce individuals' reluctance to seek help. Our research highlighted the need for staff training, targeted prevention work, and local authority leadership to embed a welcoming, solutions-oriented and anti-racist culture in frontline services.

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1. Boobis, S., Jacob, R., and Sanders, B. (2019). *A Home For All: Understanding Migrant Homelessness in Great Britain*. London: Crisis

## Creating the foundations for inclusion

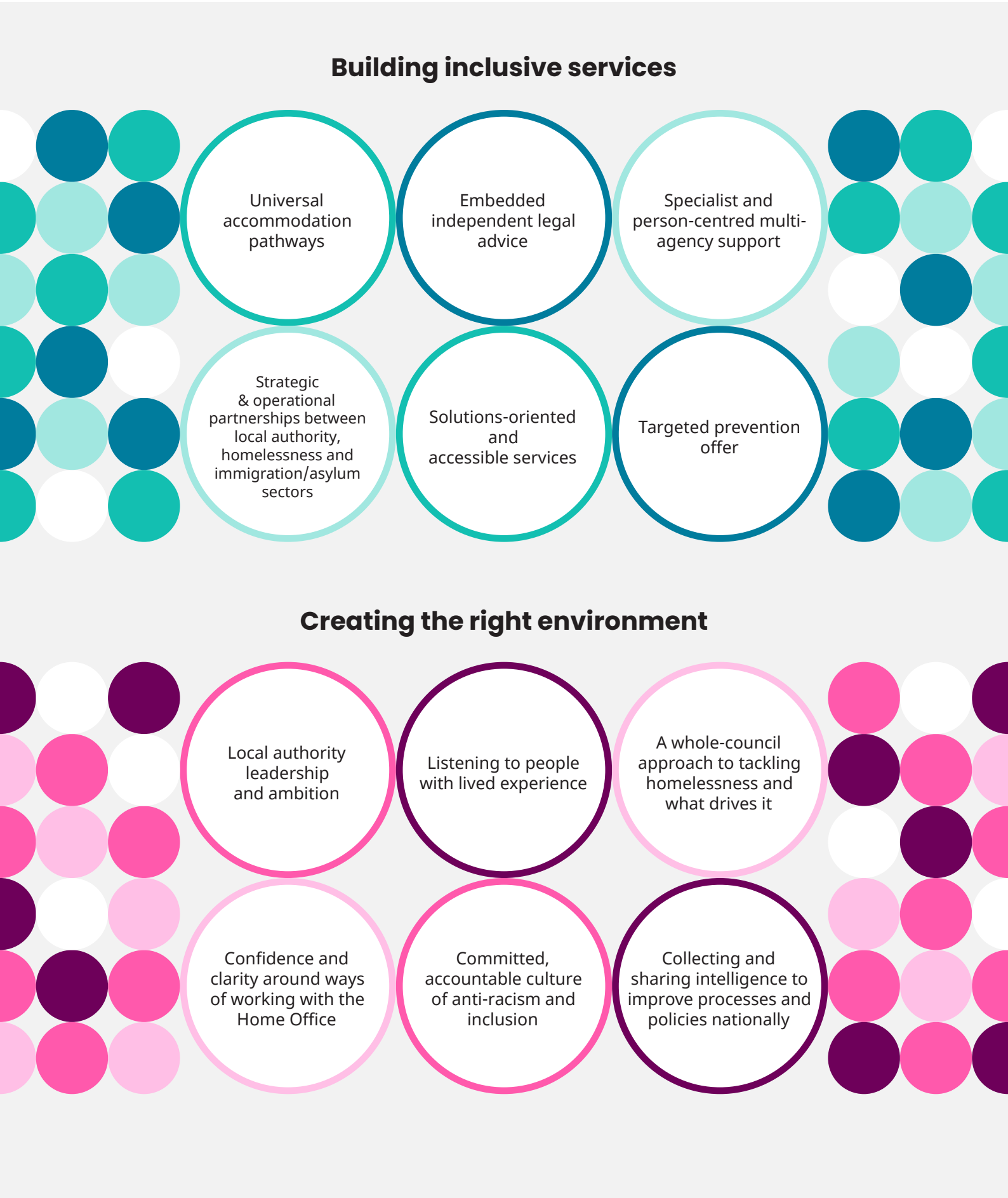
Overarching local authority commitment and leadership was crucial to building trust with local partners and creating the right environment for inclusive services. Setting explicit ambitions and commitments around the inclusion of non-UK nationals with restricted eligibility within local strategies had concrete knock-on benefits for services and staff. Local policy and practice development in this space should be informed by lived experience, and confront the risks of racism and discrimination in services. Homelessness teams must also take account of the shared responsibility for non-UK national homelessness and vulnerability across council functions, especially social care. In order to rationalise budgets and improve consistency, local authorities should aim take a corporate approach to commitments to inclusion.

The development of transparent local authority policies and procedures around the sharing of service user data with the Home Office is also crucial, both to ensuring the integrity of services and availing of valuable opportunities to progress immigration and asylum cases. Local authorities should ensure policies emphasise transparency and informed consent and prioritise the involvement of immigration advisors.

## Facing the national challenge

In a number of key areas, Government policy has hampered local efforts to tackle non-UK national homelessness. To end rough sleeping, we must begin to balance the funding gap left by immigration-based restrictions on welfare benefits, frequently patched over by local authorities and the voluntary sector. We must address the vulnerabilities created by asylum and immigration policy, improve access to early legal advice and continue to work towards effective and efficient ways of working within and between the Home Office and homelessness systems, so that people can move on from homelessness as quickly as possible.

Figure 1 – Elements of an inclusive local homelessness system



## Recommendations for change



Local authorities should:

1. Integrate **commitments to the inclusion of non-UK nationals** into homelessness strategies and corporate strategies in order to set the direction for collaborative, person-centred joint-working both across local authority teams and with the voluntary sector.
2. Explore all possible avenues to **unlock access to accommodation** for non-UK nationals with undetermined or restricted eligibility up to the limits of the law. Consider where the local authority may have a funding role, as well as a facilitative role in partnership with the voluntary and faith sectors.
3. Facilitate operational and strategic **partnership-working** with the immigration advice sector, migrant community organisations and homelessness organisations, in order to identify gaps, emerging issues and rationalise provision (particularly accommodation).
4. Increase access to quality, independent **immigration and welfare advice** across homelessness and prevention settings by commissioning advice on a multi-year basis.
5. Facilitate equitable access to **person-centred and trauma-informed support** for non-UK nationals with restricted eligibility by investing in training, informal, peer-led support, and measures to mitigate language barriers.
6. Address barriers to access that reinforce **fear and reluctance** to seek support and leave people stuck in dangerous living situations by investing in training and clarifying the role of Housing Options teams.
7. Develop a targeted approach to **preventing** non-UK national rough sleeping through community-based awareness raising and outreach.
8. Develop and communicate local policies that ensure the safe, minimal and consent-based **sharing of service user data with the Home Office**, in close collaboration with the immigration advice sector.
9. Work to **improve Government processes and policies** by highlighting, with evidence, where they are having a detrimental effect on tackling homelessness.

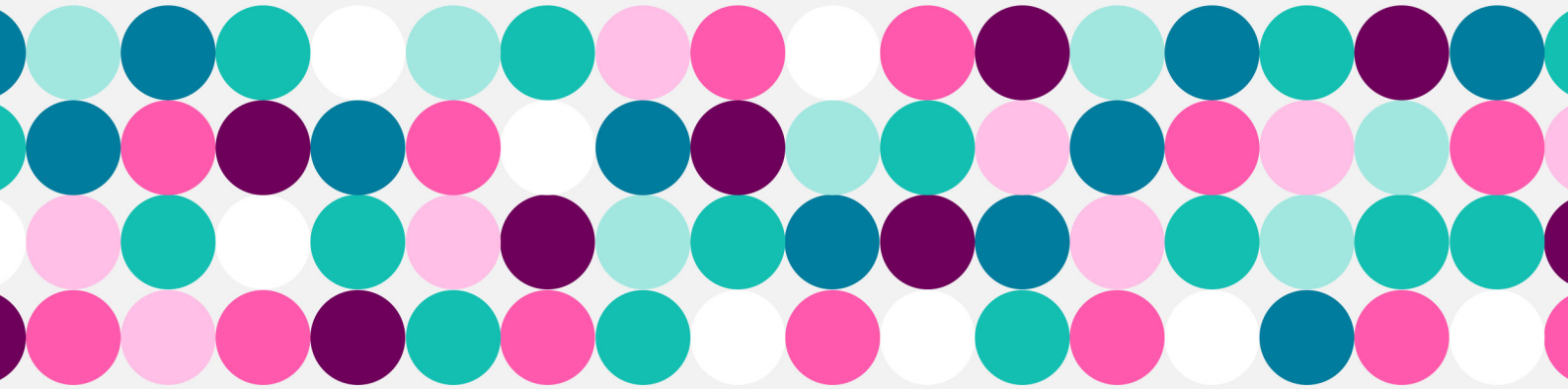
National Government should:

1. Deliver on a **cross-departmental approach** to tackling rough sleeping as a public health issue, which facilitates joint funding and working across health, social care and homelessness to increase accommodation options for non-UK nationals with restricted eligibility. This should include provision of a discrete fund to local authorities to ensure a minimum level of accommodation provision, regardless of immigration status and commitment to review and monitor all immigration-based restrictions on public funds to mitigate their role in driving homelessness..
2. Address the **financial burden on local authorities** and delays to move-on by increasing central Government support and accommodation options for people facing homelessness while waiting for a Home Office decision and; investing in training, staff capacity and escalation pathways to accelerating compassionate and quality Home Office decision-making.
3. Extend eligibility for benefits to all EEA nationals with **pre-settled status**. At a minimum, provide a route to lifting eligibility restrictions for people with pre-settled status facing homelessness and reduce the evidence requirements for converting to settled status.
4. Further **clarify the legal powers and expectations** on local authorities to accommodate and support non-UK nationals with undetermined or restricted eligibility.
5. Improve access to **free immigration and welfare benefits advice** by funding and promoting the expansion of advice provision in homelessness settings and restoring legal aid for early legal advice to

pre-LASPO (Legal Aid, Sentencing and Punishment of Offenders Act 2012) levels for immigration, welfare benefits and housing law.

6. Prevent homelessness among people leaving the **asylum system** by:
  - a. allowing 56 days following an asylum decision before cessations of support, in line with the Homelessness Reduction Act 2017 (HRA);
  - b. extending the HRA Duty to Refer to the Home Office;
  - c. giving people seeking asylum and their adult dependants the right to work from six months after their initial asylum claim or further submission.
7. Amend section 12 of the **Nationality and Borders Act 2022** (NABA) so that refugees are not treated differently simply because of how they arrived in the UK and the NRPF condition cannot be applied to tier 2 refugees and their families. At a minimum, commit to review, monitor and report on the impact of NABA on homelessness in an effort to mitigate unintended consequences.

# 1 Introduction





Non-UK nationals are more vulnerable to homelessness than people with UK citizenship, and those with those with restricted or undetermined eligibility for public funds even more so.<sup>2</sup> Since the advent of the COVID-19 pandemic and the 'Everyone In' initiative brought greater visibility to this challenge, the policy and practice barriers exacerbating it have moved up local and national agendas.

Prior to the COVID-19 pandemic, the scale of the challenge had been increasing, with non-UK nationals disproportionately represented in rough sleeping figures for a number of years.<sup>3,4,5</sup> The profile of those accommodated during the pandemic reflected this trend: Government data showed that 32 per cent of people in emergency and short-term accommodation in December 2020 were non-UK nationals or people with unknown nationality, with this proportion rising to 56 per cent in London.<sup>6</sup>

In this report, we present findings from research with local authorities, voluntary sector stakeholders and people with lived experience of the pandemic homelessness response and make the case for a more inclusive homelessness system for this group in the longer-term.<sup>7</sup> We distil lessons from the COVID-19 pandemic and pre-existing good practice, to offer an achievable roadmap to tackling non-UK national homelessness at the local level.

Our findings highlight how delivering on commitments to end rough sleeping for non-UK nationals means taking account of the specific advice, language and cultural needs of non-UK nationals, as well as applying lessons we have already learned from other groups. Multi-agency, person-centred support, facilitated by stable accommodation, quality immigration advice and a trauma-informed understanding of cultural and immigration backgrounds, delivered impressive success in the areas covered by this research.

Providing equitable and accessible services also means addressing the fear, distrust and discrimination that have sometimes characterised non-UK nationals' experiences. Our research highlighted the need for staff training, targeted prevention work, and local authority leadership to embed a welcoming, solutions-oriented and anti-racist culture in frontline services.

Our findings also demonstrate the impact of current Government policy and practice on local efforts to tackle non-UK national homelessness. To achieve our shared goal of ending rough sleeping, we must begin to balance the funding gap left by central Government for non-UK nationals with restricted eligibility, currently patched over by local authorities and the voluntary sector. We must also continue to work towards effective, efficient and safe ways of working within and between the Home Office and homelessness systems, so that people can move on from homelessness as quickly as possible.

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2. Boobis, S., Jacob, R., and Sanders, B. (2019). *A Home For All: Understanding Migrant Homelessness in Great Britain*. London: Crisis
  3. MHCLG. (2021). *Rough sleeping snapshot in England: autumn 2020*. London: MHCLG.
  4. GLA. (2022). *Rough sleeping in London (CHAIN reports)*. London: GLA
  5. Boobis, S., Jacob, R., and Sanders, B. (2019). *A Home For All: Understanding Migrant Homelessness in Great Britain*. London: Crisis
  6. DLUHC (2022). Annex A: Support for people sleeping rough in England, 2021. [NOT OFFICIAL STATISTICS]
  7. The focus of the report is on single adults with restricted (or undetermined) eligibility for public funds due to their immigration status. This group includes people with No Recourse to Public Funds (NRPF), i.e. 'subject to immigration control', as well as EEA nationals with pre-settled status or who have not applied to the EUSS. For more detail on definitions, see our previous briefing: 'Facing up to homelessness among non-UK nationals: The challenge and opportunity since 'Everyone In'' (Homeless Link, 2022)



Despite the absence of long-term changes to national policy, Everyone In prompted ambitious new approaches. In many areas across England, this shift highlighted the need and desire for inclusive future homelessness systems that, in partnership with the immigration advice sector, can deliver a solutions-oriented, person-centred and transparent offer to everyone, regardless of their immigration status. We hope that this report contributes to the continued progress of this important movement - a necessity if we are to end homelessness, for good.

This report presents findings and recommendations across five chapters:

- Chapter two explores challenges, opportunities and good practice in the design and delivery of services for non-UK nationals facing homelessness at the local level.
- The third chapter addresses the environment in which these services are delivered, exploring the structural and strategic factors that enable effective and inclusive responses to non-UK national homelessness.
- Next, we look at the challenges rooted in national policy that lie beyond the immediate influence of local government and systems, tracing their impact and considering the role of local actors in advocating for national change.
- In the final chapters, we present the research conclusions and policy implications. Based on our findings, we put forward recommendations for both local and national Government.

## Research approach

We took a mixed approach to gathering the views and insights of homelessness and migration professionals and non-UK nationals with lived experience of homelessness and restricted eligibility. Research and consultation exploring local homelessness responses to the COVID-19 pandemic, as well as challenges and enablers experienced by services and the individuals affected. Data collection was carried out between July 2021 and March 2022.

This report builds on the January 2022 briefing, 'Facing up to homelessness among non-UK nationals: the challenge and opportunity since 'Everyone In'', that presented early findings and recommendations based on our review of the recent published literature on non-UK national homelessness in England.<sup>8</sup>

### Data collection and consultation in case study areas

Following a national mapping and engagement exercise with a range of local authorities in Spring 2021, we selected three local authority case study areas that provided variation in geographic location, non-UK national population and approach, in addition to a commitment to improving their provision for non-UK nationals facing homelessness. The areas selected were: Bedford, Haringey and Manchester City. Further information on these areas is presented in the next section.

These areas were the focus of data collection and consultation activity. Local authority contact points in each acted as key informants on the rapidly changing homelessness landscape throughout the project period and where possible, shared anonymised routine service data. In addition to continual consultation and validation with local authorities, we completed 49 interviews with local stakeholders, including homelessness charities (commissioned and non-commissioned), legal and immigration advice, drug and alcohol services, NHS mental health services and NHS primary care. Within local authorities, we spoke to stakeholders from Housing Options teams, adult social care and homelessness commissioners and strategic leadership.

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8. Homeless Link. (2021). Facing up to homelessness among non-UK nationals: the challenge and opportunity since 'Everyone In'. London: Homeless Link. Available at: <https://homeless.org.uk/knowledge-hub/local-solutions-to-non-uk-national-homelessness/>



**Table 1 - Local interview stakeholder categories**

	Homelessness charity; commissioned	Homelessness charity; non-commissioned	Refugee/migrant services	Drug & alcohol service	NHS	Local authority
Manchester	3	1	3	1	1	5
Bedford	4	0	1	1	0	3
Haringey	2	3	3	1	1	6
<b>Total</b>	<b>9</b>	<b>4</b>	<b>7</b>	<b>3</b>	<b>2</b>	<b>14</b>

Following thematic analysis of interview data and circulation of draft findings, in February-March 2022 we conducted validation workshops with stakeholders in Manchester City, Haringey and Bedford, respectively, to test and build on initial findings and co-develop recommendations for local change.

### Voices of lived experience

NACCOM's Community Researchers are a group of six people with lived experience of homelessness and immigration control. Following basic training in research methods, in June 2021 they designed and facilitated an online focus group with lived experience of the asylum system to gather experiences of accessing homelessness services during 'Everyone In'. The focus group had eight participants and two facilitators. Community Researchers conducted thematic analysis of the findings.

In addition, we conducted interviews and collected case studies from six individuals with experience of restricted eligibility and homelessness during COVID-19, including four face-to-face interviews with EEA nationals. Workshops were then run with Community Researchers to review the interviews, identify themes and highlight areas of good practice. These interviews, together with the focus group data, formed the basis of our understanding of lived experience of the homelessness system for non-UK nationals with restricted eligibility.

**Table 2 - Characteristics of participants with lived experience**

	Focus group	Interviews	Community Researchers
Male	4	4	3
Female	4	2	3
EEA national	0	4	0
Non-EEA/non-UK national	8	2	6

### National examples of good practice

Finally, in order to capture the range of innovation across the country, we collected short case studies of good practice approaches outside of our three case study areas. Potential case studies were identified during ongoing engagement with Homeless Link members and local government nationally, and selected to represent a range of intervention types addressing differing challenges. A selection of these were published previously, and all are drawn on in the chapters that follow.<sup>9</sup>

9. Homeless Link (2021). Supporting non-UK nationals facing homelessness: Case studies of local responses. London: Homeless Link. Available at: <https://homeless.org.uk/knowledge-hub/local-solutions-to-non-uk-national-homelessness/>



## Overview of case study areas

### Bedford

Prior to COVID-19, Bedford was facing increasing numbers of people sleeping rough and at a high point in 2017, about half were EEA nationals with restricted eligibility. Legal restrictions were reported to be the fundamental barrier to addressing this. Stakeholders reported that there were 25-30 EEA nationals consistently sleeping in encampments who were reluctant to take up offers of communal accommodation. The Council had used Rough Sleeping Initiative (RSI) funds to employ specialist caseworkers for this group and 'Suspension of Derogation' funding to provide short-term accommodation; however, it was the Everyone In offer of self-contained units and greater stability, that made the difference with this group.

Following Everyone In, Bedford's direct access and communal services for people sleeping rough - a day centre, multi-agency hub and a communal shelter - were closed and staff were redirected to deliver in-reach services in the newly-established hotel and self-contained emergency accommodation. Bedford Council remained committed to continuing its Everyone In offer for as long as possible. From March 2020-November 2021, 398 people were accommodated, the overwhelming majority of whom were EEA nationals. Stakeholders reported that the EEA national cohort changed over multiple times, indicative both of the remarkable success of EU Settlement Scheme (EUSS) and support work, as well as continued need. Stakeholders reported large numbers presented following job losses, relationship breakdowns and later, from out of area. A particularly large increase was seen in Romanian nationals, who were rarely seen rough sleeping before COVID-19.

The King's Arms Project (KAP) was the main provider of support to EEA nationals in the hotel, in addition to maintaining eight dedicated 'NRPF' bedspaces in their 36-unit low-medium needs supported housing project. KAP were supported by specialist EUSS advice from the Polish British Integration Centre, who were commissioned to do so for the first time. SMART managed the hotel provision and was the main support provider to UK nationals. Other hotel in-reach services included Pathway to Recovery dual diagnosis workers and regular GP- and nurse-led clinics.

Service data from KAP provides greater detail about the demographics and support needs of EEA nationals in the hotel. From March 2020-September 2021, KAP provided support to 93 EEA nationals, the vast majority of whom were male, with women making up just under one fifth (n=18). Over half the group were Polish (n=55), with Romanian (n=14), Lithuanian (n=12) and Latvian (n=6) the next most common nationalities. With regard to support needs, alcohol dependence (n=39) and mental health issues (n=30) were the most frequently reported, followed by physical health (n=14), dependence on drugs (n=13) and experience of domestic violence (n=6).

### London Borough of Haringey

Homelessness and rough sleeping statistics indicate that a significant proportion of people facing homelessness in Haringey are non-UK nationals. The largest group encountered by outreach teams has consistently been from Central and Eastern Europe, making up approximately one third since 2017-18, followed by people from African countries (14.7% in 2020-21).<sup>10</sup>

Across two hotels, Everyone In provision in Haringey grew from 23 people in the initial cohort to 460 people at its peak, the majority of whom faced immigration-based restrictions. The first of the two hotels was closed in April 2021, with move-on options identified for all of the majority non-UK national residents.

10. GLA. (2021). CHAIN Annual Bulletin Greater London 2020/21. London: GLA



The hotel cohort was diverse in terms of need and included EEA nationals requiring support to make EUSS applications; non-EEA, non-UK national professionals on five-year visa routes who had lost their income and UK national members of the Windrush generation, who were unable to prove their entitlements. However overall, Council stakeholders interviewed noted that fewer non-UK nationals presented than expected and most of the EEA national cohort were already known.

Following an initial universal Everyone In response, Haringey Council moved to a hybrid approach, still accommodating non-UK nationals with eligibility restrictions, but prioritising those with specific vulnerabilities. According to stakeholders, anyone with a local connection and support needs was likely to be accommodated, though people with low support needs may have remained on the street. However, council stakeholders indicated that they sought to offer more flexibility than before and find lawful solutions to accommodating as many people as possible.

In addition to hotel accommodation, greater visibility of need as a result of COVID-19 informed the development of a range of adaptations to the Haringey homelessness response. Though not all a direct result of Everyone In, a number of changes over the period were reported to have benefited the homelessness offer for non-UK nationals. These included:

- The establishment of Olive Morris Court, 31 self-contained modular homes including a small number 'rent-free' for people with restricted eligibility.
- Commissioning of an immigration advisor for four-days per week to provide advice to people facing homelessness, from January 2021.
- Temporary closure of night shelters: conversion of Cranwood Hub project to self-contained beds and Highway House to B&B units, with enhanced support and casework offer.
- Increase in outreach capacity, provided by Thamesreach.
- Commissioning of new Homeless Inclusion Health service, including GP clinical lead and outreach paramedic.
- New homeless drug and alcohol service from May 2021, to improve access to addiction services for those rough sleeping or in temporary accommodation.

## Manchester

Rough sleeping statistics indicate that approximately 10% of people sleeping rough in Manchester were non-UK nationals between 2018-2020, rising slightly to 16% (seven people) in 2021. While numbers counted on the street remain relatively small, evidence of non-UK national homelessness and groups at risk can be seen elsewhere. In September 2021, Manchester had 845 people seeking asylum in receipt of s95 destitution support, out of a total of 4,191 in Greater Manchester as a whole.<sup>11</sup> The Council also counted 105 unaccompanied children in its care in 2020/21, the second highest in England after Liverpool.<sup>12</sup>

Greater Manchester's A Bed Every Night (ABEN) service was introduced in November 2018 and provides low barrier access to emergency accommodation dispersed across various settings. Funded by the Mayor's Charity, ABEN provides 30 beds in Manchester dedicated to people with restricted eligibility. Accommodation partners include Supporting People in Need (SPIN), funded to provide 20-bed self-contained accommodation for EEA nationals (down from a 34-bed dormitory before COVID-19) and Stepping Stones, funded to offer 10 self-contained short-term units for people with restricted eligibility.

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11. Home Office (2022) Asylum and resettlement datasets. Available at: <https://www.gov.uk/government/statistical-data-sets/asylum-and-resettlement-datasets#asylum-applications-decisions-and-resettlement>

12. LG Inform (2022). Number of unaccompanied asylum seeking children looked after in Manchester.

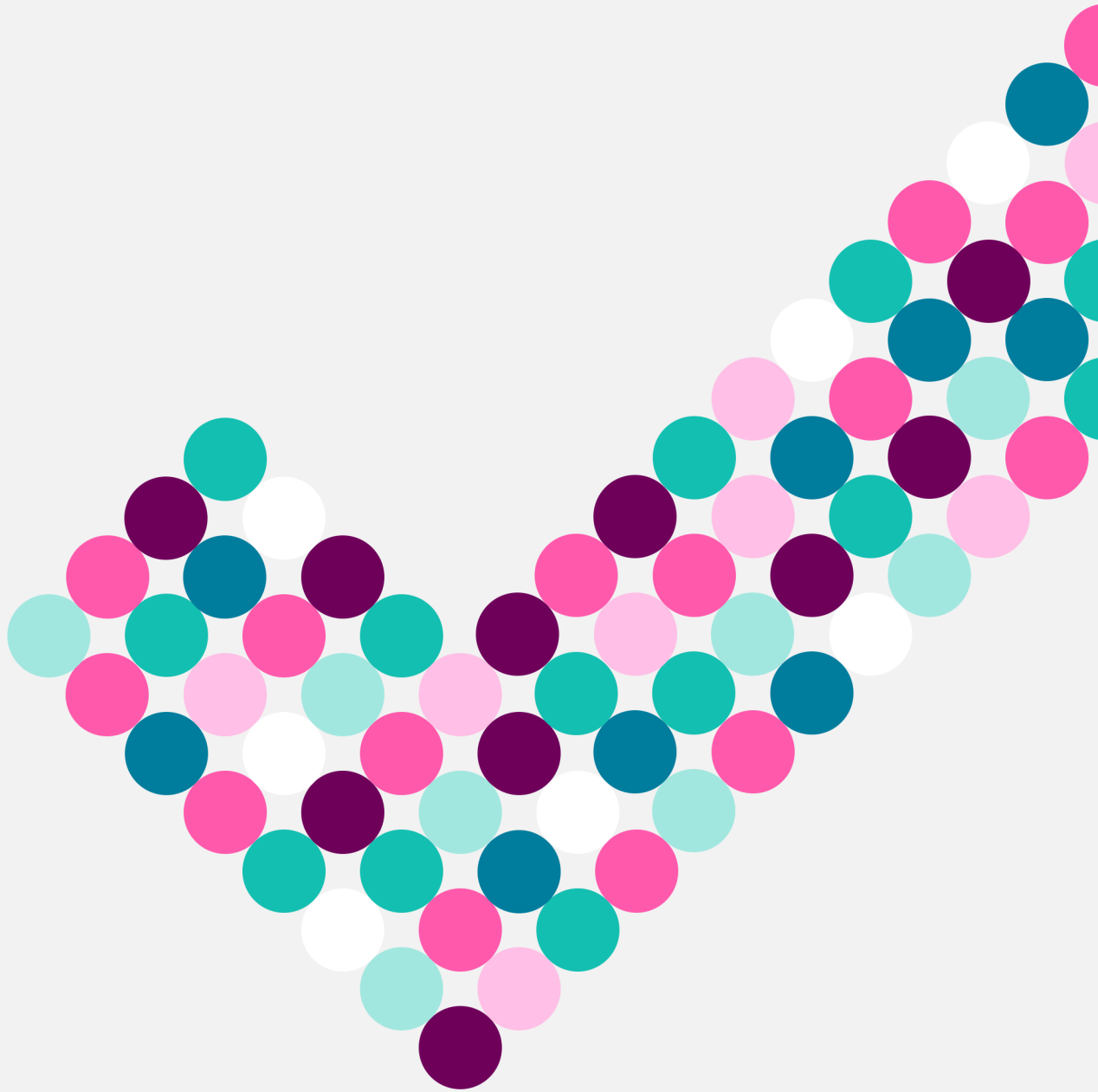


Specialist organisations are also commissioned to provide support to this group, including Greater Manchester Immigration Aid Unit (GMIAU) for immigration advice and training, the Booth Centre for holistic support to EEA nationals and the Boaz Trust, offering floating support to people who have been in the asylum system. ABEN has proven an effective way to reduce rough sleeping numbers in Manchester.<sup>13</sup>

In response to COVID-19, Manchester utilised hotels to provide additional bedspaces, eventually starting to stand these down in summer 2020. Existing ABEN partners' services were adapted to offer floating support, complemented by inreach from GPs, a homeless mental health team, the Change Grow Live drug and alcohol service and rough sleeping social workers. Stakeholders reported a diverse cohort of non-UK nationals seeking support during Everyone In, approximately balanced between EEA and non-EEA nationals. The cohort included people who had been refused asylum, refugees, people whose visas had expired and EEA nationals who had lost their jobs. The pause in Home Office cessations of support was widely reported to have taken pressure off Manchester's homelessness response during this period.

Manchester City Council used the legal clarification provided by the *Ncube v Brighton and Hove City Council* ruling in December 2020, to develop an Ncube pathway in consultation with local stakeholders.<sup>14</sup> This pathway attempted to maintain an 'Everyone In' offer during the pandemic by clarifying the council's legal position and offering an additional route into accommodation beyond ABEN provision, particularly for people who had complex needs.

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13. Watts B. et al. (2021). Greater Manchester's A Bed Every Night programme: An independent evaluation. Edinburgh: Heriot Watt University.
  14. Shelter. (2020). High Court rules councils can lawfully accommodate street homeless people with 'No Recourse to Public Funds' – will the government now provide proper guidance? London: Shelter.



## **2** Saying 'Yes': Building services that work for all



**“COVID came at the right time... we just said ‘Yes’.  
Imagine a world where the first answer isn’t ‘No.’”**  
local authority interviewee

Through discussion of experiences during Everyone In and the year that followed, research participants shared insights into the design and delivery of homelessness services that work for non-UK nationals with restricted eligibility. Key themes covered were: the importance of a stable accommodation offer; partnership-working across sectors; embedding immigration advice; providing appropriate support for those with multiple disadvantage; and addressing access barriers through culture change, training and targeted prevention work.

## Preserving universal accommodation pathways

Exploring all options to provide accommodation without immigration-based restrictions should be a priority, given the remarkable benefits it delivers to services and individual outcomes, including expediting immigration cases and move-on.

One of the clearest shared points of agreement across all interviews was the value - to staff, services and individuals accommodated - of a stable universal accommodation offer that does not exclude based on immigration status. While in Manchester, the A Bed Every Night (ABEN) accommodation offer for people with restricted eligibility was adapted and expanded for Everyone In, in Haringey and Bedford, this offer took the form of emergency accommodation in COVID-19 hotels.

In this section, we explore the benefits to services, outcomes and individuals as a result of the offer and consider the models and legal powers available to preserve accommodation pathways in the longer-term.

### The value of a universal accommodation offer

Interviewees across all areas reported that the provision of comfortable, self-contained accommodation improved health, wellbeing, immigration and housing outcomes, including for people who had been rough sleeping for many years, and facilitated improved multi-disciplinary working.

Importantly, the provision of a stable accommodation base - with key worker support - was particularly helpful to progressing immigration applications. This was especially visible for EU Settlement Scheme (EUSS) applications, given the prevalence of EEA nationals among rough sleeping cohorts and the relatively straightforward routes the EUSS offered.

Service data from the King’s Arms Project, the main provider of support to EEA nationals in Bedford’s COVID-19 hotel, demonstrate this. Between March 2020 and September 2021, almost one half (n=44) of those accommodated had achieved settled status and just over one third (n=32) had pre-settled status (PSS), ten of whom had an application for settled status (SS) in progress.



**Table 3 – Immigration status in Bedford hotel, Mar ‘20 – Sept ‘21**

No status / in progress		Pre-settled status		Settled status	
PSS in progress	7	PSS	22	SS	37
SS in progress	6	PSS, with SS in progress	10	SS, previously PSS	7
Not yet applied to EUSS	4				
<b>Total</b>	<b>17</b>	<b>Total</b>	<b>32</b>	<b>Total</b>	<b>44</b>
Total accommodated	93				

Moving people into self-contained hotels disrupted problematic drinking and gave people the chance to engage in wellbeing interventions, English classes and mental health support that they never would have accessed before. Aleksy, an EEA national who had been homeless for five years following illness and job loss, reflected on how the support he got during Everyone In was so different:

“[Before] the outreach workers would come to my tent to check on me and helped with sleeping bags or clothes but this was it. It was like ‘help for now’ but not proper help so 2 years I was just living in the bushes. Three years ago was the worst time and I did not expect this support. I slept in a tent. I didn’t believe that there was someone who could help me. I stopped asking, stopped trying, I gave up. I just thought what will be, will be. I didn’t care.”

He went on to describe what he has achieved since:

“Since COVID has happened there have been many changes for me. I had help with my mental health. It is one battle with myself that I won. It was much more last year than now. I don’t have problems with drugs and alcohol anymore. It is not easy. I had some friends on the street but I am trying to make changes in my life and I want to move away from them. I am now struggling with loneliness and I am trying to find new friends and stay away from drugs and alcohol. More than a year I am clear.”

Interviewees also saw the accommodation offer as a significant operational advantage for services - by allowing them to centralise provision rather than having to deliver services on the street, in encampments and across other settings - as well as a positive for staff satisfaction. Housing Options teams and charity providers described how much they valued being able to offer something to people, however limited, and remarked that it made them feel braver about pushing the system to find solutions.

“Used to be, ‘Oh my god, what do we do?’ when someone with NRPF came in. Now it’s compassion.” – homelessness charity interviewee

**Impact on housing outcomes**

Service data and interviews highlighted the successful housing outcomes achieved. In Bedford, the initial ‘Everyone In’ cohort of approximately 70 people were successfully moved on within months - including 25-30 EU nationals who had been consistently sleeping rough. In the face of continued flow, the primarily EEA national residents in Bedford’s hotel were reported to have changed over multiple times, with a total of 398 people accommodated up to November 2021.

When the first of Haringey’s hotels closed after one year in April 2021, move-on options were found for almost everyone and interviewees noted that the expected surge of people in need of support never came. By November 2021, a total of 344 people had been supported to move on to more stable housing through Haringey’s COVID-19 hotels. Monthly snapshots from July-November 2021 show the steady progress made, despite continued flow.



Table 4 – Non-UK nationals in emergency accommodation in Haringey

2021	Jul	Aug	Sep	Oct	Nov
Numbers in emergency accommodation	85	77	61	58	53
Numbers newly accommodated	3	2	0	1	13
Numbers moved-on (cumulative since Mar 2020)	311	318	326	329	344

Despite success, stakeholders in every area underlined the difficulties faced in moving people on, even after they have secured access to public funds and benefits. Barriers reported include: inappropriate, poor quality housing for families; shortage of affordable housing; and in some cases, landlord discrimination against non-UK nationals, which may have been exacerbated by the legal requirement for 'Right to Rent' checks. In Manchester, pressures on local housing as a result of prioritisation of newly arrived refugees was also seen to affect the options of other non-UK nationals moving on from homelessness.

### Beyond COVID-19

Despite the fact that an open accommodation offer — provided via the local authority — was considered effective and preferable for staff and service users in all three areas, uncertainty around legality and funding limited local authority commitments to it in the longer term. As Government restrictions loosened, this concern reflected wider confusion nationally around whether local authorities could legally continue to accommodate non-UK nationals who were otherwise ineligible. With Government messaging continuing to emphasise local authority discretion, councils sought innovative solutions to retain progress made. Some of the accommodation models being used nationally are presented in Table 5.

This was supported by developments like the *Ncube vs Brighton and Hove* ruling, ministerial communications to local authorities and guidance produced by housing lawyers, which brought to light the various lesser-known powers that councils can use to accommodate people with uncertain or restricted eligibility (see Figure 2), as well as the funding models that can enable it (see Box 1).<sup>15,16,17</sup>

15. Shelter. (2020). High Court rules councils can lawfully accommodate street homeless people with 'No Recourse to Public Funds' – will the government now provide proper guidance? London: Shelter.

16. Letter from Eddie Hughes MP to All Local Authority Chief Executives, 20 December 2021

17. Bernardi, D. (2021) Exhaust All Options: Local authorities' powers to accommodate beyond the Housing Act 1996. London: Law Centres Network.

18. This graphic is a simplified overview of possible legal options that local authorities seeking to accommodate people with restricted eligibility may use, depending on individual and wider local circumstances. Local authorities should take advice from their own legal teams on use of the powers and duties described.





Figure 2 – Local authority powers and duties to accommodate<sup>18</sup>

Social Care	Health	Safeguarding & asylum	Other powers
<p><b>Adults vulnerable due to illness or disability - Care Act 2014</b></p> <p>Duty &amp; power enabling provision of accommodation to adults with care needs relating to illness or disability, including pending an assessment (s19(3)) and were not doing so would breach their Human Rights</p>	<p><b>s2B National Health Service Act 2006</b></p> <p>Duty enabling provision of accommodation to improve health of people in area.</p>	<p><b>Victims of modern slavery</b></p> <p>Suspected victims of modern slavery should be referred to the NRM and can access specialist accommodation via the Salvation Army or partners</p>	<p><b>s1 Localism Act 2011</b></p> <p>Power to accommodate people with an NRPF condition on their visas. Applies to some refused asylum seekers and people here unlawfully only if not doing so breaches Human Rights.</p>
<p><b>Children in need &amp; their families - Children Act 1989</b></p> <p>Duty enabling provision of accommodation to children in need (s20, s23C) &amp; their families (s17)</p>	<p><b>s138 Local Government Act 1972</b></p> <p>Power to accommodate before, during or after an emergency involving danger to life.</p>	<p><b>People seeking (or refused) asylum</b></p> <p>Destitute people seeking asylum can access Home Office accommodation under Section 95 (pending claim/appeal or ARE families) or Section 4 (people who are ARE &amp; meet other criteria)</p>	<p><b>Funding &amp; facilitating charity provision - Section 180 Housing Act 1996</b></p> <p>Power to provide grants, loans, premises, goods &amp; staff resource to charities that facilitate the provision of accommodation</p>
	<p><b>s117 Mental Health Act 1983 (aftercare)</b></p> <p>If a person has been recently discharged after hospitalisation under MHA 1983, consider if they are entitled to accommodation under s117 (provided by NHS CCG/social care)</p>		

**Box 1 – Funding accommodation for people with undetermined or restricted eligibility: ‘rent-free’ beds**

In order to end rough sleeping, the guiding principle behind local authority decisions on accommodation should be that, if accommodation can be provided, then it will be. In order to do so, councils require a legal basis and access to funding.

For those who have been determined to have restricted eligibility, other publications have explored the principal powers that local authorities should consider to accommodate them beyond the Housing Act 1996.<sup>19</sup> Building on this, a briefing produced alongside this report clarifies the types of public funds that are available and unavailable to people with restricted eligibility, and proposes options to authorities who wish to continue to support this group while remaining within the law (see Appendix 3).

19. Bernardi, D. (2021) Exhaust All Options: Local authorities’ powers to accommodate beyond the Housing Act 1996. London: Law Centres Network.



Putting aside welfare benefits, perhaps the most relevant public funds restriction to homelessness provision is the one on 'homelessness assistance'. However, this is limited to assistance under Part VII Housing Act 1996, meaning that services provided outside of Part VII statutory pathways — including Rough Sleeping Initiative funding — do not constitute a public fund. In local homelessness settings, this could include support and accommodation provided parallel to or in advance of statutory thresholds, such as rough sleeping provision or early help and advice in community and outreach settings, for example.

Thus in planning provision for this group, local authorities should consider the allocation of enhanced funding within commissioning contracts to cover a number of bedspaces without the support of Housing Benefit (known as 'rent-free' bedspaces) within the rough sleeping pathway. These bedspaces are valuable as 'assessment beds', to enable individuals' entitlements to be determined, and as a stable place to stay while immigration applications are being processed. Local authorities should also consider the need to provide these bedspaces in supported settings for those with more complex needs. Two successful examples of such accommodation models being used in City of London and the London Borough of Lambeth are explored in detail in Table 5 and Appendix 2.

## Lessons from the longer-term: A Bed Every Night

**“We don't have that sense of impending doom we used to, but we're not sitting there thinking it'll be easy peasy.”**  
homelessness charity interviewee

The more established nature of the ABEN accommodation offer for people with restricted eligibility provided insights into the longer-term bedding down of pathways. While the system benefits seen in Manchester have been remarkable, challenges still remained, in particular related to the creation of a two-tiered homelessness system and defining prioritisation criteria in the face of limited capacity.

Before ABEN's 'NRPF beds', charities reported they were often forced to “trade on goodwill” and rely on what accommodation they could find in the faith and voluntary sectors, including church floors. ABEN was reported to have reduced gatekeeping, increased trust and partnerships and improved overall standards of provision for this group.

### **A two-tiered system?**

Following the Ncube vs Brighton and Hove ruling, Manchester City Council developed a new 'Ncube pathway', which operated alongside ABEN to provide beds for people sleeping rough with particular vulnerabilities who were otherwise ineligible. However, challenges with transparency and access demonstrate potential difficulties of delivering separate, discrete pathways for those with restricted eligibility, parallel to the statutory system.



Local authority interviewees expressed concerns about having created a two-tiered system, which meant people in ABEN were left for long periods in provision designed for the short-term, with fewer support options for complex needs and no opportunity to review. Unlike under statutory pathways, residents in ABEN or Ncube provision had no right to a review of the offer made and often no clear pathway to move on if immigration resolutions were not forthcoming. There were also particular shortages in supported accommodation places for people with more complex needs under these pathways. Though intended as a short-term emergency provision, there was no formal time limit on ABEN/Ncube beds and length of stay was an ongoing concern for those with restricted eligibility.<sup>20</sup> The council and partners made various adjustments over the years in an effort to address this, including grouping bedspaces across a small number of settings according to gender and complexity, in order to streamline the delivery of the specialist support needed.

### **Prioritising access to bedspaces: balancing clarity with flexibility**

In the context of limited bedspaces for people with restricted eligibility across ABEN and Ncube pathways, stakeholders emphasised the importance of transparency around inclusion and prioritisation criteria applied. Despite efforts by the council, interviewees reported that the criteria used were unclear and inconsistent, undermining their ability to provide reassurance or clarity to those they supported.

*“We knew we’d have to fight for every client, might not get same outcome, and might not know why.” – homelessness charity interviewee*

Indeed, in the context of overall scarcity of beds and the council’s reluctance to set explicit criteria, both local authority and charity stakeholders reported that access to a bed for a person with restricted eligibility often relied upon the threat of legal action. While avoiding excluding any group from the provision is beneficial, the current status quo presents obvious unfair disadvantages for those without a legal advocate and those ‘not in the know’, in addition to the resource inefficiencies of relying on adversarial approaches.

Overall these challenges were driven by demand outstripping the limited bedspace capacity available. However, despite these stakeholders reported that by offering a fixed and transparent pathway, ABEN “changed our confidence in the system” and “took the insecurity out of our work”. In addition, by showing local charities that the council was bought in, it enabled more productive conversations, where all partners could talk openly and transparently about risk with a shared goal in mind. Charity interviewees reported that this emboldened them to challenge the council more robustly and continue to work towards improved standards.

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20. It is worth noting that even though non-UK nationals tended to stay longer than UK nationals in ABEN, they were less likely to return.

Table 5 Selected accommodation models for non-UK nationals with restricted eligibility<sup>21</sup>

Model type	Description	Funding arrangements	Target cohort	Model in action
<b>The local authority has a funding role</b>				
Use of meanwhile premises by local authority	Unused land or properties owned by the local authority and earmarked for future development are made available rent-free for a specified period	Temporary development of site and support can be funded or part-funded by local authority budgets.	n/a	Used by Haringey and Redbridge councils to accommodate non-UK nationals with restricted or uncertain eligibility.  Redbridge Council made Malachi Place available to The Salvation Army on a 5-year lease to create a 'pop up hostel and workshop' prior to the Ilford town centre regeneration. It consists of converted shipping containers that can accommodate 42 people, including 15 with restricted eligibility. <sup>22</sup>
'Rent-free' bedspaces in local authority-commissioned accommodation	These bedspaces are provided and funded without the expectation of Housing Benefit. They are often utilised as short-term 'assessment beds' to bring people off the streets while their entitlements are being determined, but can also be used while applications are being made and processed.	Funded or part-funded by local authority pots that are not 'public funds', e.g. Rough Sleeping Initiative (RSI), or by charitable fundraising coordinated by the local authority, e.g. the Greater Manchester Mayor's Charity.	Often targeted at non-UK nationals with uncertain status or those expected to have positive immigration decisions, and therefore prospects of relatively speedy move-on.	A Bed Every Night, Greater Manchester, provides 60 bedspaces for people with NRPF and in 2021-22 accommodated 204 people with NRPF who were rough sleeping or at risk. It is funded by the Mayor's Charity and other statutory partners, and delivered by the region's constituent councils. <sup>23</sup>  Since 2011, the GLA has funded No Second Night Out hubs across London. They provide a rapid response assessment and triage, supported by emergency accommodation for people sleeping rough. The GLA's Holistic Assessment Service (HAS) also provides wrap-around assessment alongside emergency accommodation to rough sleepers with medium to high support needs and unclear entitlements. <sup>24</sup>  City of London provides three RSI-funded bedspaces within a larger hostel for rough sleeping EEA nationals who are work-ready and eligible to apply for the EUSS, with a move-on target of eight per annum. Elsewhere in London, Lambeth Council provides eight beds for non-UK nationals with a history of rough sleeping who are addressing their immigration issues and are work-ready.
Accommodation for public health purposes	Apart from COVID-19, some local authorities have long-used public health powers (and funding) to accommodate non-UK nationals with restricted eligibility in order to protect them and their communities from risk of infection.	Funded by the local authority (public health and/or housing budget)	Non-UK nationals with restricted eligibility being treated or protected from an infectious disease	Since 2009, Homerton Hospital TB team has worked with Hackney Council to house tuberculosis patients with restricted eligibility in temporary accommodation, rather than having them stuck in hospital. The project dramatically improved treatment adherence and, given the high cost of acute hospital beds, made significant savings for the system. <sup>25</sup>
<b>The local authority has a facilitative role, in partnership with the voluntary sector</b>				
'Peppercorn rent' or reduced fee schemes	Social landlords or private individuals can offer existing properties to charities for little or no rent. This is more likely in low rent areas.	The rent may be funded by RPs via grants, donations or rental surpluses from other properties. <sup>26</sup>	n/a	A number of housing associations fulfil their charitable mission in this way. These include Soha Housing's provision of 12 beds to the Oxfordshire Homeless Movement NRPF project and Arawak Walton's provision of two houses to the Boaz Trust for a discounted lease fee. <sup>27,28</sup>
Cross-subsidised housing schemes	Cross-subsidy models allow the provider to offer 'free' rooms to people with NRPF by covering their costs from other rental income or funding. Typically, this means providing rooms within a house or portfolio to refugees (who can work or claim Housing Benefit) or families being housed by social services.	The costs of accommodation for people with NRPF may be covered by rental income from other residents (e.g. refugees) or funding from social services.	n/a	The Boaz Trust runs a cross-subsidy model that houses 40 single adults with NRPF following refused asylum claims and 34 refugees separately across 20 houses in Greater Manchester. Open Door North East operates a similar model in partnership with Stockton on Tees Council.  Praxis and Commonweal Housing's NRPF project secured seven properties to offer to local authorities to house destitute non-UK national families who they have a duty to accommodate under Section 17 of the Children Act 1989. Income received is used to provide free rooms, either in a house shared with families or elsewhere. <sup>29</sup>
Hosting schemes	A range of formal and informal, emergency and long-term schemes where individuals make a room available in their home for a specified time.	Costs typically covered by associated charity, but support services may be provided by the local authority.	Often but not always aimed at refused or homeless asylum seekers.	Housing Justice's London Hosting Network, Hope at Home, Homes for Refugees and Positive Action in Housing all operate prominent and long-running hosting schemes. <sup>30</sup> Safeguarding, supervision and monitoring are crucial aspects of such schemes to protect hosts and hostees. <sup>31</sup>
Properties or bedspaces provided by charities or faith groups, e.g. non-commissioned shelters or hostels	Properties may be owned by the charity/faith-based organisation or provided to it	Costs typically covered by associated charity, but support services may be provided by the local authority.	n/a	A range of charities and faith-based organisations across the country make accommodation available to non-UK nationals with restricted eligibility, often in close collaboration with the local authority, e.g. The Salvation Army, St Mungo's.

21. Homeless Link (2018). Migrant Destitution Toolkit. London: Homeless Link.

22. London Borough of Redbridge. Malachi Place. Available at: <https://www.redbridge.gov.uk/regeneration-and-growth/regeneration-and-growth-areas/ilford/the-spark-ilford/project-malachi/>

23. GM Mayor's Charity. (2022). A Bed Every Night: Our Impact. Available at: <https://gmmayorscharity.org.uk/latest/a-bed-every-night-our-impact>

24. Mayor of London (2022). What the Mayor is doing to tackle rough sleeping. London: Mayor of London. Available at: <https://www.london.gov.uk/what-we-do/housing-and-land/homelessness/mayors-rough-sleeping-services#acc-i-50062/>

25. London Assembly. (2015) Tackling TB in London. London: London Assembly.

26. National Housing Federation (2021). Helping people with No Recourse to Public Funds avoid homelessness. London: NHF.

27. Homeless Link (2021). Supporting non-UK nationals facing homelessness: Case studies of local responses. London: Homeless Link.

28. NACCOM (2019) Housing Toolkit. Available at: [https://nacom.org.uk/wp-content/uploads/2019/10/NACCOM-HousingToolkit\\_FINAL.pdf](https://nacom.org.uk/wp-content/uploads/2019/10/NACCOM-HousingToolkit_FINAL.pdf)

29. Hutton, C., Lukes, S. & Petch, H. (2019). Housing destitute migrants: Lessons from a pilot project 2015-2018. London: Commonweal Housing & Praxis Community Projects.

30. NACCOM (2020). Hosting Toolkit. Available at: [https://nacom.org.uk/wp-content/uploads/2020/10/NACCOM-HostingToolkit\\_2020-03-11-final-digital.pdf](https://nacom.org.uk/wp-content/uploads/2020/10/NACCOM-HostingToolkit_2020-03-11-final-digital.pdf)

31. NACCOM (2022). Hosting Good Practice Guide. London: NACCOM.



## Strengthening partnerships with the voluntary sector

Local authorities must continue to strengthen meaningful partnerships with homelessness and immigration advice organisations at both operational and strategic levels, in order to improve case management, better understand community needs, find joint solutions and unlock local resources.

**“We need to focus more on shared goals within and across organisations.”**  
immigration advice interviewee

At the core of the successes achieved during Everyone In were expanded and strengthened partnerships between the local authority and local voluntary sector, homelessness and immigration advice organisations. Interviewees across sectors expressed deep mutual respect and appreciation for the contribution and expertise of partner organisations, particularly those that brought specialist knowledge around immigration and asylum.

In all three areas, the strategic leadership and coordination of the local authority was fundamental to the development of these stronger and braver partnerships. In some cases, this was the first time this group was brought into the mainstream homelessness system, rather than being supported by the voluntary sector alone, outside the local authority’s purview. Interviewees noted that by commissioning their services and accommodating people with restricted eligibility, councils built trust through the sharing of risk.

However, interviewees generally felt that meaningful partnership-working between the local authority, homelessness and migration sectors should be further improved in order to tackle non-UK national homelessness. Key barriers reported by voluntary sector stakeholders included: patchy information-sharing by the local authority; the absence of reliable contacts points in council teams; lack of joined up partnership structures between ‘new migration’ and homelessness forums and; superficial approaches to engagement. Crucially, local authority and homelessness organisations needed to work more closely on both strategic and case management levels with immigration advice and non-UK national community organisations in order to retain progress made.

### Building meaningful partnerships

Voluntary sector stakeholders were eager to engage in more meaningful partnership-working with the council and across sectors and were keen for the council to use their convening power to facilitate it. Stakeholders described key features of effective local authority-led partnership-working for this group, including:

- Regular forums for multidisciplinary case management, including immigration advice providers where relevant;
- Regular forums for strategic planning and discussion of emerging issues and solutions, bringing together homelessness organisations, migration/asylum organisations and relevant local authority teams (e.g. homelessness partnership forums or restricted eligibility subgroups);
- Timely and frequent information-sharing and consultation by the local authority about operational plans and strategic direction;
- Open communication between partners about risk, policy and gaps in support or accommodation provision for non-UK nationals with restricted eligibility;



- Known contact points for cases involving restricted eligibility in relevant local authority teams, including rough sleeping, housing and children’s/adult social care;
- Local authority commissioning of voluntary sector organisations to provide essential services for the resolution of homelessness, including specialist support and advice for non-UK nationals with restricted eligibility.

**Manchester’s NRPF working group**

The close partnership that developed around the restricted eligibility beds in Manchester’s ABEN offers helpful insights into how closer collaboration in this space can support learning, improve knowledge and practice in the local authority and deliver dramatically improved provision for non-UK nationals.

Initially formed as the ‘ABEN NRPF subgroup’ to coordinate casework between Manchester City Council’s ABEN Coordinator and commissioned ABEN partners, the group eventually expanded to include other local partners accommodating people with restricted eligibility (see Figure 3). Renamed the ‘NRPF working group (accom)’, the group met monthly to discuss cases, system gaps and emerging issues across local ‘NRPF’ provision, including, when relevant, Cold Weather provision. Over time, this close and focused partnership - backed by funding - facilitated the development of close relationships and massively improved pathways, where previously both were described as “strained”.

Figure 3 – Manchester NRPF working group (accom)





Interviewees from organisations in this partnership described a “shared mindset” among members and an environment that allowed them to think outside the box. Members spoke about being able to “just pick up the phone” to progress a case, including with contact points in the local authority’s Housing Needs, outreach and adult social care teams. Interviewees in Manchester City Council expressed appreciation for voluntary sector partners’ expertise, with Housing Needs regularly referring non-UK nationals to the Booth Centre if they had been refused statutory support, or to GMIAU for immigration advice.

However, while the small, focused nature of the working group may have helped to develop trust and good practice, wider system benefits were limited by minimal engagement and information-sharing outside the group. Manchester’s homelessness provision relied heavily on a small number of organisations for their expertise on non-UK national homelessness, making knowledge-sharing and practice development across non-specialist homelessness services all the more important. In addition, the absence of representation from the numerous small ethnic community organisations active in Manchester from homelessness partnership forums was also noted as a gap to be addressed in the future.

### Box 2 – Flexible partnership approach to tackling Modern Slavery

The links between homelessness and modern slavery are well-documented, and non-UK nationals are particularly at risk of exploitation.<sup>32</sup> The Passage Modern Slavery Service is the first of its kind in England, aiming to provide flexible partnership-based support and accommodation to survivors of modern slavery both pre- and post-National Referral Mechanism (NRM) referral, regardless of their immigration status.<sup>33</sup> A Modern Slavery Navigator—commissioned by Westminster City Council since 2020—supports survivors pre-NRM, aiming to source emergency accommodation and help victims stabilise and assess their options.

The pre-NRM service recognises the complexity of trauma and individual experiences of modern slavery, which mean that many survivors are unable or unwilling to enter the NRM. Indeed, among the 34 potential and confirmed victims supported by The Passage in April 2020-March 2021, almost 40% refused to enter the NRM.<sup>34</sup> Of the 15 who did, 11 received positive decisions.

The service is supported by Modern Slavery Multi-Agency Case Conferences (MACCs) that bring together Westminster City Council (Adult Social Care and Rough Sleeping) and NHS Homeless Teams. MACCs provide immediate homelessness relief and prevent (re)trafficking and (re) exploitation to potential victims already accepted to enter the NRM, until they are placed in a Government-funded safe house.

While housing is a continuous challenge for the Service, people with restricted eligibility benefit from two funding channels from the Council: the Rough Sleepers Team’s dedicated budget for hostel bedspaces, as well as an annual grant given to the Service to pay for emergency accommodation in hotels/B&Bs. In addition, the Salvation Army may provide accommodation under the Modern Slavery Victim Care Contract (MSVCC) at the point of referral to the NRM if the person is homeless.

32. The Passage (2017) *Understanding and Responding to Modern Slavery in the Homelessness Sector*. London: The Passage

33. Tomás, J. (2020). *Findings and Recommendations from the first two years of The Passage Anti-Slavery Project*. London: The Passage.

34. Tomás, J. (2021) *The Passage Modern Slavery Service Annual Report From April 2020 to March 2021*. London: The Passage.



## Unlocking solutions with quality legal advice

Access to quality immigration and welfare benefits advice is crucial to resolving non-UK nationals' homelessness and should be at the core of local authorities' multi-agency support offer. To achieve this, they must continue to improve partnership and commissioning models and—with Government—address shortages of funding, staffing and capacity across the immigration advice and legal aid systems.

**“We’re really good at finding solutions. It’s rare there’s nothing to be done.”**  
immigration advice interviewee

By increasing the local visibility of non-UK nationals with restricted eligibility to homelessness services, Everyone In also improved understanding of the distinct legal barriers they often face to moving on. In order to navigate both the immigration and welfare systems and move on from homelessness, access to specialist advice is crucial.

### Immigration advice access and capacity

All stakeholders spoke about the value of Office of the Immigration Services Commissioner (OISC)-regulated immigration advice providers as partners in their homelessness response and this was back by local authority investment in all areas. In Haringey, Everyone In prompted the council homelessness team to commission immigration advice for the first time and in Bedford, funding for specialist EUSS advice was increased. In Manchester, GMIAU was commissioned with ringfenced resource to provide advice to non-UK nationals accommodated in ABEN beds.

Despite this investment and, in Manchester, the longstanding council commitment to funding immigration advice, capacity limitations meant that not all referrals could be accepted and advisors were sometimes forced to prioritise based on risk, e.g. of violence, homelessness, or the involvement of children.

Concerns about access related both to resources in the system - including the availability of trained advisors and funding - as well as the service and geographic settings in which immigration advice was delivered. The lack of availability of advice in preventive, street outreach and community settings - to triage early and/or prevent people reaching crisis point - was noted by numerous stakeholders across the three areas.<sup>35</sup> Access to advice as part of councils' voluntary returns service was another concern, given the significant implications that return has on people's future options to live in the UK. Where advice was available as part of a more holistic reconnection service, this was valued (see Appendix 2).

In Bedford, as in many rural areas, geographic distribution was another challenge. With providers heavily concentrated in Milton Keynes and Luton, non-EEA nationals in particular often had to travel for hours for weekly drop-in sessions to access advice.

Even when a case was taken on by an immigration advisor, blockages would emerge if they needed an onward referral for more complex OISC Level 2-3 advice or to legal aid providers. Immigration advice stakeholders suggested that the development of more structured referral pathways and additional capacity to make Exceptional Case Funding applications might alleviate this block.

35. See Appendix 2 for some approaches to delivering immigration advice for homelessness prevention.





### Quality and effectiveness of immigration advice

Stakeholders emphasised the importance of ensuring that individuals had access to high quality and independent advice, with trained OISC-registered advisors or solicitors that were able to navigate the complex situations that people facing homelessness often presented with. Like for other types of support, advisors needed to be able to deliver person-centred and trauma-informed support, especially when an individual had complex intersecting needs resulting from experiences in their country of origin, their journey or life in the UK:

“It’s important that legal advice isn’t just about progressing people’s cases. Also that people understand the system, why they’re in this situation, and if there are no options, then why not?”  
– homelessness charity interviewee

Across all areas, interviewees noted the damaging impacts that unscrupulous or poor quality advice had had individuals’ lives. Private solicitors were often found to be providing inadequate advice while charging astronomical fees to people in homelessness accommodation. The impact that poor quality or unscrupulous solicitors could have on an individual was enormous, including forcing them into homelessness. In one case, an individual was unable to renew their leave to remain because they were unable to afford the fees and ended up losing their job and home. In another, a straightforward ‘change of conditions’ application had not been made, despite high sums paid. Even where private solicitors were practising fairly, effective joint working on cases was reported to be more difficult as homelessness staff struggled to engage with them.

### Partnership-working with homelessness organisations

The embedding of advisors within homelessness teams — whether via secondment in Haringey or commissioned partnership in Manchester — was deemed important for the relationships and ways of working it established over time. With client consent, immigration advisors worked on cases “hand in glove” with support workers, helping to progress cases effectively. Support workers would help gather the necessary documents for applications, attend embassy appointments and keep advisors in the loop if the person moved accommodation.

Interviewees also noted the value that immigration advice partners offered to homelessness staff. Noting how intimidating immigration matters could be to non-experts, one local authority stakeholder reported that working more closely with advisors facilitated more open conversations that served to improve legal literacy. Box 3 explores some models of partnership-working between homelessness and immigration advice providers in rough sleeping settings, based on GLA-funded work in London.

The learning curve for homelessness staff working with advisors was important, as inappropriate or referrals from homelessness staff sometimes affected immigration casework and the expectations of service users. Examples included people referred for pre-settled status applications who were eligible for settled status, not gathering crucial information about a person’s background or referring individuals who were already receiving legal advice elsewhere.



### Box 3 Lessons from delivering advice for people sleeping rough in London

The GLA-funded Immigration Advice for Rough Sleepers Fund — managed by Homeless Link — offered a useful opportunity to understand different approaches to increasing access to immigration advice in homelessness settings.<sup>36</sup> The projects were either led by homelessness charities or by immigration and asylum charities with homelessness partners as referring organisations.

The projects were designed to increase efficiency by releasing the capacity of specialist staff and improving the quality of referrals (e.g. creating link worker roles or training homelessness staff to deal with less complex cases), as well as to increase access to advice for complex cases through partnerships. The benefits of these approaches are documented elsewhere.<sup>37,38</sup> They included:

- Homelessness staff acting as immigration link workers (non-OISC);
- Homelessness staff providing initial advice (OISC Level 1);
- In-house homelessness staff providing coordination support to release the capacity of immigration partners;
- Streamlining access to and communication between homelessness and immigration advice staff, in-house or externally (OISC Levels 2-3, solicitors).

Interviews with the projects identified key lessons.

**A partnership approach works for services and service users.** Where the homelessness sector can coordinate access to advice, by playing a bridging or a holding role, immigration partners noted that communication with clients, attendance at appointments and efficiency and progress of casework all improved noticeably. Access to accommodation was also crucial to facilitating this.

**Effective commissioning requires a nuanced understanding of the complexity of need and distribution of capacity across OISC levels.** Capacity at OISC level 2-3 is most urgently required nationally, meaning that training staff at Level 1 will have limited benefits when onward referrals are blocked by an overstretched system.

**There is likely to be value in commissioning advice regionally across local authority boundaries,** especially in areas where demand fluctuates and people sleeping rough are likely to be mobile.

**Commissioners should be conscious of the need for long-term and committed investment in immigration advice** in order to enable the effective delivery of casework, especially for non-EUSS cases.

**Concerns around confidentiality and data-sharing with the Home Office can be alleviated with clear written organisational policies and agreements** between partners, as well as clear communication about what data is shared and when, with appropriate informed consent. Charities being commissioned by local authorities need to be able to negotiate contracts that preserve their independence and protect the confidentiality of their clients, as per OISC regulations.



### The importance of welfare advice

Interviews with frontline workers and people with lived experience also highlighted difficulties faced by non-UK nationals in accessing welfare benefits once their status had been regularised. Even when immigration applications had been successful, entitlements secured and people were ready to move on, they were sometimes unable to access the benefits needed to do so. They emphasised the growing need for access to expert welfare advice, both to prevent and move on from homelessness for this group.

Some interviewees with lived experience described how difficulty accessing Universal Credit (UC) following job loss was a factor driving their homelessness, which they were only able to resolve following expert advocacy:

“Before I signed the contract with [charity] I had many problems. Problems with applying many times for JSA while I was homeless and couldn’t get it. Usually when I applied myself it was cancelled... So they have helped me a lot with all paperwork. It is a big change for me because [...] I am trying to get a job so I can be responsible for myself.” - Aleksy, homeless on and off for five years before being accommodated during Everyone In

Homelessness staff raised particular concerns about people with pre-settled status, as the complexity of their entitlements was leading to confusion among support workers and perceived inconsistent decision-making by Jobcentres. The limited opportunities for partnership-working between homelessness and local Jobcentre staff likely exacerbated this confusion.

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36. Homeless Link (2022). Learning from 7 initiatives exploring models of immigration advice for rough sleepers in London. Homeless Link: London. Available at: <https://homeless.org.uk/knowledge-hub/learning-from-immigration-advice-programme/>
  37. London Funders (2021). A Strategy for Funding Immigration Advice in London. London: London Funders.
  38. Wilding, J. Mguni, M, Van Isacker, T. (2021). A Huge Gulf: Demand and Supply for Immigration Legal Advice in London. London: Justice Together



## Relearning old lessons: person-centred multi-agency support

To address non-UK nationals' intersecting support needs, we must adapt established approaches of person-centred, trauma-informed and multi-agency support for people facing multiple disadvantage. This means taking account of language and culture-specific needs, as well as understanding of their experiences of the immigration and asylum systems.

**“There’s a need for more person-centred support that accounts for culture, community and stigma, plus language.”**  
homelessness charity interviewee

In addition to accommodation provision and immigration advice, a number of stakeholders across areas emphasised the value of the enhanced investment they saw in targeted, specialist support work — across homelessness, drug and alcohol, mental health and social work — in moving non-UK nationals with restricted eligibility on from homelessness and improving their health and wellbeing outcomes. Stakeholders reported the significant difference this made during the pandemic, showing clearly that when the right agencies were around the table, it was possible to find solutions for people who had been ‘outside’ the system for years.

Stakeholders also welcomed the solutions-oriented attitude this mobilisation brought about, allowing them to “be unafraid” and support people based on need rather than entitlement. In some cases, they noted that this focus on support needs had been missing in the past, despite large cohorts of non-UK nationals sleeping rough. For example, in Haringey a lack of move-on planning or immigration advice with long-term EEA national shelter residents was reported to have led to a “slow start” once Everyone In was called, and delays to progress with EUSS applications. In this way, by prompting better and more targeted investment in EEA nationals support and advice needs, services reported that COVID-19 enabled a more person-centred approach than before.

It was clear across areas that old lessons about what works for supporting people with multiple disadvantage — delivering flexible, holistic, trauma-informed and person-centred support — could be applied to great effect to improve outcomes for non-UK nationals.<sup>39</sup> Like for others who find themselves ‘outside’ the system with intersecting needs, assertive support that enabled trusting relationships to build over time and took account of individuals' own goals was crucial for those facing complex barriers.

However stakeholders highlighted that, for non-UK nationals with restricted eligibility, some adaptations needed to be made. ‘Person-centred’ and ‘trauma-informed’ support had to include consideration of language barriers, fear and trauma produced by migration journeys or the immigration and asylum systems and experiences of discrimination based on ethnicity and race.

### Supporting non-UK nationals with multiple disadvantage

Stakeholders across all areas shared strong concerns about non-UK nationals suffering from mental health, physical health or drug and alcohol issues. For people who had been refused asylum, stakeholders in Manchester noted the prevalence of mental health, trauma and physical health issues, as a result of their

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39. Bramley, G. & Fitzpatrick, S. (2015). *Hard Edges: Mapping severe and multiple disadvantage*, England. London: Lankelly Chase Foundation



experiences in their country of origin, journey and difficulties in the UK. The mental health impact of these experiences was described as a “massive barrier” to developing trust and effective support.

For EEA nationals in particular, they noted difficulty engaging them in treatment or support pathways as a result of cultural stigma attached to mental health and addiction, as well as some individuals’ reliance on alcohol as part of their social lives and networks.

System barriers cited included a lack of native language support workers and peer support programmes, inadequate staff capacity to deliver intensive, assertive harm reduction support and eligibility restrictions on access to residential rehab or detox programmes. These restrictions created frustrating limitations for staff and left some struggling with lengthy detox in the community. Stakeholders also pointed to a lack of sufficient follow-on and tenancy sustainment support, especially for people stabilising from drug and alcohol issues and managing UC payments for the first time.

Many homelessness stakeholders worried that the pressure to move people on quickly and — for those with pre-settled status especially — to enter employment was counter-productive for those with the most complex challenges. For people with pre-settled status, the requirement to establish a ‘right to reside’ meant that there was pressure to make employment a priority straight away, whereas for UK nationals it would only be considered much later, after other support needs had been stabilised.

They noted a gap in more informal, peer-led support for both mental health and addiction, which they felt would address cultural barriers and improve engagement. In Manchester, the Boaz Trust’s Life Programme, which focused on wellbeing through varied volunteering and skills opportunities brought great benefits to people who had been in the asylum system and were unable to work. Harm reduction pathways were also noted to be particularly beneficial, as they offered a less structured format to build trust over time. By going to people in their accommodation and expecting small steps, engagement was reported to be greatly improved.

Mental health and drug and alcohol interviewees emphasised the value of having a safe and stable accommodation base to begin work on these issues after many years of disengagement. Where available, specialist link and outreach workers — like dual diagnosis workers, homeless mental health workers, drug and alcohol outreach and rough sleeping social workers — were crucial for access to appropriate support in all areas. Models that facilitated co-location and collaboration of these services were highly valued too, such as the Street Engagement Hub established in Manchester just months before the pandemic began.<sup>40</sup>

### Addressing language and cultural barriers

**“Solutions emerge when you talk to someone in their native language.”**

homelessness charity interviewee

Across all areas and stakeholder types, language was one of the most prominent barriers to person-centred, compassionate support for non-UK nationals. Interviewees were concerned that language barriers and cultural misunderstanding led to crucial pieces of information being missed and drove disengagement because of difficulties in creating rapport.

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40. For more information, see Cityco (2020). Innovative pilot scheme to support people out of begging in Manchester City Centre. Available at: <https://cityco.com/news/innovative-pilot-scheme-to-support-people-out-of-begging-in-manchester-city-centre/>



“You really want to directly communicate and show the right tone. As a service, we’re based on trust and it can be quite hard to show you’re being genuine.” – drug and alcohol service interviewee

A number of stakeholders across council teams and services underlined the need to prioritise recruitment of support workers from target communities in order to tackle both language and cultural barriers. Where a native language speaking support worker was available, impressive progress was often seen with individuals who had previously been considered “non-engaging” for a long period. The Bedford King’s Arms Project recruitment of a Polish outreach worker to engage with people sleeping in encampments was reported to have “changed everything” for the service, helping them understand people’s situations better and enabling trauma-informed practice.

#### Box 4 – Case vignette from Haringey – language barriers

A man from Poland had been living in the UK for seven years and working for most of this time. He became a victim of modern day slavery and was living in his workplace, when all of his possessions and documents were stolen. He left the job and began sleeping rough.

He was encountered and assessed by an outreach worker using Language Line, who found he had no support needs. As he had lost his documents, he didn’t know what immigration status he held. He stayed on the streets for a month, until a Polish-speaking outreach worker encountered him. After talking with him for 20 minutes, it was discovered that he had serious debilitating memory issues. He was accommodated by the Council and diagnosed with early onset dementia. He later gained settled status.

Additionally, stakeholders felt that improved access to interpreting services— both face-to-face and by phone — would help them to better support this group. It was reported that interpreting services were not widely enough used, and in some areas were not typically covered by commissioning contracts. As a result, staff would at times rely on family members or Google Translate.

Services and areas had a variety of approaches to accessing interpreters, including use of Language Line, pools of freelance interpreters, or a mix of in-house and telephone services. However, even where interpreting services were used, frontline staff reported difficulties, with interpreters varying in quality and sometimes adding to the stress of the interaction. Inevitably, non-specialist interpreters risk missing important indicators of support need that may be visible in the way a person communicates. Interviewees considered face-to-face interpreting preferable and noted that using the same interpreter across meetings was also helpful, but acknowledged this was not always practical or possible.

#### Pathways into employment

Difficulties moving into stable employment was a widely reported concern by services, especially for EEA nationals with pre-settled status whose entitlements may depend on their working status. In addition to any complex health needs they might face, they faced multiple barriers in their journey to work, including employer discrimination and uncertainty. People waiting on EUSS applications were also often stuck out of work too, as employers were often reluctant give out shifts until their status was confirmed.

Over-reliance on short-term agency placements, rather than seeking more stable employment, was another challenge cited across areas that prevented move on and left people in precarious positions. Indeed, in Bedford some agencies had been set up specifically to recruit Polish speakers, which was attractive as it offered more immediate benefits than going through an extended recruitment process elsewhere.



Drug and alcohol use and mental health issues frequently prevented people from entering or keeping work, but services reported some successes from long-term, flexible support and activities. Interviewees from a RSI-funded project in Bedford noted that employment support was often a long and involved process, requiring the building of trust with both employers and individuals. Placements required follow up, as if an individual began working too soon there was a high risk of relapse. Employment support offered to EEA nationals in Manchester's Supporting People In Need (SPIN) project also reported positive results and attendance, mainly from volunteer-led CV sessions, informal English conversation classes, a jobs club and other vocational training courses. Those not yet ready to work had the option of volunteering to build their skills and confidence.



### Box 5 Voluntary reconnection – a holistic approach to return

For some non-UK nationals facing homelessness, returning to their country of origin will be (or become) their desired or best option. A reconnection service is a support-led model to help people to consider their options and, if appropriate, return safely and voluntarily. It includes a number of related elements: immigration advice to understand rights and entitlements; sustainable accommodation in the destination country and support to link in with welfare, health and wellbeing services there.

As locally commissioned services, reconnection services are distinct from the Home Office Voluntary Return Service. The Home Office service provides more limited support options, focusing on financial assistance and travel arrangements, and only provides reintegration support in specific cases.

A short case study of St. Mungo's Routes Home service is provided in Appendix 2.

#### What works?

##### **Informed, timely and holistic intervention**

A support-led model and discussion of a range of options are crucial to maintaining a solutions-oriented approach and to ensuring that leaving the UK is not routinely seen as the only option, when others might exist. The involvement of independent immigration advice and employing staff with language skills both help to ensure informed decisions are taken. Routes Home's offer of accommodation was also considered invaluable to help people stabilise and understand the choices they are making. This is particularly important given that taking up a reconnection offer may prevent a person from returning to the UK in the future.

It is important to make the reconnection offer at the most timely moment, informed by the pace, preferences and 'headspace' of the individual. Often, an individual may prefer to try other routes first, but may return to the option of reconnection at a later stage.

##### **Reintegration**

Liaising directly with embassies and consulates to obtain ID and travel documents increases the likelihood that reconnection will be successful. Developing a reintegration plan for the destination country provides some continuity, ensuring service users have suitable accommodation and are linked to health and/or social services and friends/family, if possible. Having a budget for detox in the UK makes it easier for service users to access rehab in their home country. Accompanying service users with higher support needs on the flight assists with in-person handover to relevant support.

##### **Challenges**

The variation in the quality and availability of homelessness services internationally, combined with the absence of long-term follow up on outcomes for those reconnected, drive concerns for some people around reconnection practices and what 'successful' reconnection truly looks like. The likelihood of facing difficulties re-entering the UK, especially post-Brexit, complicates the decision to take up a reconnection offer. Some people sleeping rough fear the stigma of returning to their countries of origin without having 'made a success' of life in the UK, while others are keenly aware that the support services or accommodation they need may not be available.





## Tackling barriers to solutions-oriented and accessible services

Providing accessible services also means addressing the fear, distrust and discrimination that have sometimes characterised non-UK nationals' experiences. Closure of in-person services, lack of onward referrals for those refused support and knowledge gaps among homelessness staff all served to compound access barriers and reluctance to approach services.

**“I tried calling the council and they weren't very helpful. They told us we had to be rough sleeping in order for them to help. My boyfriend at the time stayed with me. He and I had to spend a night out on the street... The next day they moved me into the accommodation.”**

Adiah, lived experience interviewee

As noted, access to homelessness services was reported to have significantly improved for non-UK nationals with restricted eligibility as a result of the public health measures taken. However, stakeholders interviewed raised concerns about persistent system barriers — underpinned by national policy — that undermined this group's ability to get help and their willingness to present to services.

In all areas, charity stakeholders raised strong concerns about the problem of hidden homelessness, which was seen as a particular problem for non-UK nationals from outside the EEA and women. One immigration interviewee noted that Everyone In had “not scratched surface of need of our client group” and described individuals and families remaining in precarious, inappropriate or dangerous living situations rather than presenting for support. While lack of awareness of services and entitlements was often behind this, fear and distrust of the local authority and what might happen if they came forward was another key factor reported by stakeholders with lived experience and those working in services.

### System barriers to access

Charity providers in some areas described the difficulties they faced in making referrals, following up on cases or even getting in touch with social services, housing and homelessness teams on behalf of their service users. There was a shared sense that because of this group's (perceived or actual) restricted eligibility and complexity, council staff across different teams were reluctant to take responsibility for their cases and inclined to 'gatekeep' support, even when there may be options to help.

*“When I was homeless I was refused by the council. I have mental health issues. The Council wasn't interested... I'm a very well-educated person. I can manage myself. It's just that we need a good, relevant source to signpost us to where we can get help from. I contacted social services, and council many times. They said we don't help people with my status.” – focus group participant*

The absence of statutory homelessness services — as distinct from rough sleeping teams and outreach — as partners in the response to non-UK national homelessness was notable in most areas. This contrasts with Manchester, where the Housing Options team was reported to be frequently in touch with charity partners, easily contactable and routinely making onward referrals if people could not be supported under Part VII Housing Act 1996.



The closure of direct access services like shelters and day centres as a result of COVID-19 was reported to have compounded access barriers faced by non-UK nationals. Stakeholders with lived experience were concerned about the apparent long-term shift of in-person services to telephone — or online-only support, noting that this was often inadequate for people without English language skills or with other difficulties.

Like for UK citizens, the need for rough sleeping verification by outreach teams in some areas was another concern noted. Manchester was reported to sometimes take a more flexible approach to verification, where intelligence from charity partners could generally trigger a referral to emergency local authority accommodation without the need to sleep out. This approach was considered particularly important for non-UK nationals, given that they were known to routinely hide from outreach teams for fear of being identified by immigration enforcement.

### Immigration and cultural literacy among homelessness staff

**“[For homelessness support staff,] there’s the ‘ordinary’ homelessness and then ‘the asylum seekers’. A lot of subtleties and differences are lost.”**

immigration advice interviewee

Issues with access to appropriate support were closely linked to knowledge gaps and a lack of immigration literacy among homelessness staff, both in charities and council services. Focus group participants with lived experience highlighted how refusals of support extended beyond council services to charities, too:

“One time I went to the charity and they said, ‘Do you have a British passport?’ And they said, ‘No, we can’t help you.’ So it’s not just council, it’s everyone.” – focus group participant

Understanding of the specific risks and barriers faced by non-UK nationals and, in many cases, cultural considerations, are often vital for the provision of welcoming and solutions-oriented support in homelessness settings. In addition, as noted in previous sections, some knowledge of the immigration system helps to ensure staff ask the right questions and make effective referrals to immigration advice. Immigration advice providers interviewed indicated that more homelessness staff needed to see immigration issues as “their business”, similar to a health issue, and integrate consideration of it and how it affects people into their work, in partnership with specialist advisors.

In Manchester, recognition of this knowledge gap led to the commissioning of a Greater Manchester-wide cyclical training programme, available to all homelessness staff including the Housing Options service. In addition, in both Bedford and Manchester, an immigration advice line for non-expert professionals was made available by a local charity and Greater Manchester Combined Authority (GMCA), respectively.

### Fear and distrust

Fear of approaching local authority services and how they would be received was consistently referenced in the focus group by people with lived experience of restricted eligibility and homelessness. Participants were conscious that they might not have the documents required and feared how they would be treated as a result. The group agreed that racism and discrimination played a part in the perceived “lack of respect” they had encountered (see Chapter 3).

In particular, participants emphasised the impact of the first encounter with local authority services and how it made them feel unsafe, dehumanised and threatened. It was clear that frontline workers’ approach to questions about immigration status and presentation (or not) of options were impactful and potentially



re-traumatising, given the long and complex journey people had often been on in the immigration or asylum systems.

“When you don’t have that paper, that status, you don’t want anyone to ask that question [about immigration status], you don’t know why the person is asking that question, whether the person is going to help you or report you. It is terrifying to answer that question.” – focus group participant

“When I have been to the local authority they have asked me to provide information, they say, ‘Can we have this?’, ‘Can we have that?’. Straight away, they want your National Insurance Number, which I do not have. Then in the end, they say they cannot help you. When you ask for support you feel judged and you do not want to return.” – Jane, lived experience interviewee

The group expressed a strong desire to be seen and treated as human beings, rather than reduced to their immigration status:

“I don’t trust the council after these experiences. They only focus on immigration — they don’t treat you as a human being.” – focus group participant

Local authority staff interviewed were conscious of this fear and distrust, especially in relation to their sharing of personal data with the Home Office (see Chapter 3). Council staff noted how challenging it felt to reassure people, but noted the difference made when they tried to offer options or even just signposted to other support.

## Targeted prevention work

Overcoming fear, distrust and lack of awareness of services and entitlements among non-UK national communities means targeted homelessness prevention activities. These should reach communities where they are and include early immigration advice, as well as addressing risky transitions following cessations of asylum support.

**“People are used to ‘No’. We need to keep reminding them that there is some support.”**

local authority interviewee

In the context of these persistent access barriers, as well as the continued flow of non-UK nationals into emergency accommodation and on to the streets, stakeholders in all areas noted the lack of services aimed at homelessness prevention for this group. This was seen as symptomatic of the lack of active engagement with non-UK national communities and organisations and an excessive focus on rough sleeping, which was reported to leave people and families living in unsuitable and unsafe accommodation.

Interviewees and people with lived experience emphasised how a lack of awareness of the services available to them, including charity services, often delayed their seeking help for a very long time. Those who had been reliant on asylum support especially reported feeling cut off from community provision,



only discovering that charities might be able to help them almost a year after eviction from Home Office accommodation. A lack of awareness of UK renters' and other rights was another factor, with homelessness services reporting that often, private rented sector evictions that led to homelessness could have been challenged if the person had known or sought advice.

Charity stakeholders wanted to see a shift towards a more preventive approach in both social services and homelessness, with front-loaded independent immigration advice as a crucial part of this. Charity and immigration advice stakeholders felt passionately that making quality immigration advice accessible earlier on would save the system money and prevent homelessness, in addition to reassuring people of their options or entitlements to support, where applicable.

## **“People are on their knees by the time they get to us.”** homelessness charity interviewee

Such an approach should be designed to reach non-UK national communities, providing accessible and translated information and advice in generic and targeted community settings (e.g. schools, English for speakers of other languages (ESOL) classes, community centres, ethnic or nationality community groups, churches, mosques, etc.). It was suggested that a community champion model might be effective, by proactively engaging with existing community groups, building relationships and acting as a contact point for the 'system', where needed.

In Haringey, a version of the community champion model had been adopted by the council's Connected Communities team under their council-wide 'Welcome Strategy'. Though not specifically focused on homelessness, the 'community link workers' used their language skills and networks to connect people with services, combat COVID-19 misinformation and encourage applications to the EUSS.

### **Transitions from the asylum system**

Stakeholders also drew attention to the vulnerability and support gaps faced by many non-UK nationals in their transitions from Home Office asylum accommodation or children's services. They noted that the relatively short notice periods given for cessations of support following asylum decisions were extremely difficult for individuals who, having relied on Home Office accommodation during their claim, were often left without connections to local authority or charity support.

The lack of communication between the Home Office and local homelessness systems around upcoming cessations was another shared frustration, limiting their ability to plan or link in with individuals. This was a particular concern given that, people refused asylum frequently left the system with little understanding of next steps (e.g. possible appeals), mental health issues and a deep fear of 'the authorities' after having received a letter telling them they were liable for removal from the country. Unaccompanied Asylum Seeking Children who had aged out of council support were a particular group of concern in Bedford and were reported to often be picked up by the voluntary sector after leaving their accommodation with little or no support.

The steps needed to address the risks around these groups exemplify the need for joined up thinking and working on prevention across the council, homelessness, the migration/asylum sectors and central Government.

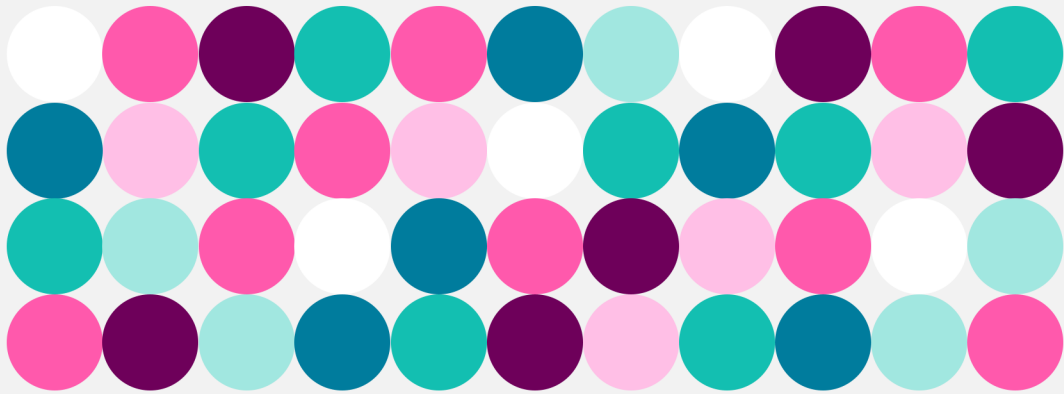


### Box 6 – Examples of immigration advice partnerships for homelessness prevention

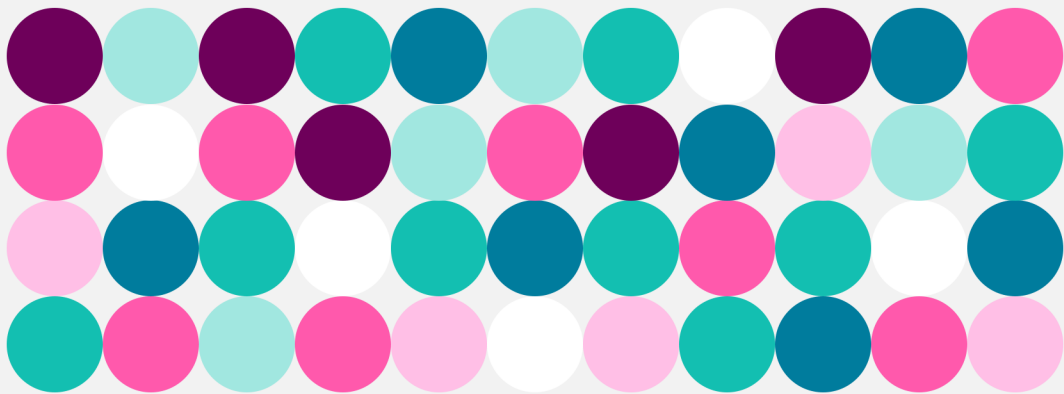
Since 2018, Praxis has managed the **Hospital Immigration Support Service**. This seeks to prevent homelessness and rough sleeping for people experiencing homelessness immigration issues and restricted eligibility who are receiving inpatient care at London hospitals supported by Pathway teams, typically at the point of discharge. Support is via a full-time OISC Level 2 advisor who assesses referrals, provides outreach support and attends multi-disciplinary team meetings. The service also provides training and second-tier advice to clinical and other hospital staff. The service helps to ensure safe discharge from hospital and also has benefits for the NHS in terms of preventing delayed discharge and repeat presentations. The hospital setting creates a degree of stability for service users and is an opportunity to advise people who have little or no other contact with support services.

The **No Recourse Early Action Model (NOREAM)** is currently being piloted in Hackney and in partnership with London Borough of Hackney Children's Services, seeks to improve outcomes for children and families with No Recourse to Public Funds. NOREAM identifies families at risk of homelessness at an early point and aims to provide a holistic targeted intervention, preventing the need for more intensive support later on. As a pre-statutory service, there is no legal obligation to report undocumented families to the Home Office. The team includes social workers, a housing officer and an immigration advisor. The model involves outreach to encourage engagement with local authority support and social worker sessions to identify needs and refer to other specialties or services.

See Appendix 2 for further information.



### **3** Creating the foundations for inclusion





In order to create the local environment needed to design and deliver accessible and effective services, research participants identified a number of system-level factors that required attention. The need for strategic leadership by the local authority, backed by explicit aims and commitments around the inclusion of non-UK nationals with restricted eligibility was highlighted. It was important that strategies were informed by the lived experience of local people facing homelessness and restricted eligibility, actively combatted racism and discrimination in services and clearly delineated the councils ways of working with the Home Office. It was also important that these activities were backed by corporate commitments to inclusion to address fragmentation and facilitate joined-up thinking across council services.

## Local authority leadership and ambition

Local authority commitment and leadership is crucial to building trust and a shared direction with local partners. Setting explicit ambitions and commitments to inclusion of non-UK nationals with restricted eligibility within local strategies has concrete knock-on benefits for services and staff.

**“It can’t just be a sticking plaster – [people should] not only regularise status, but do it and thrive.”**  
local authority interviewee

Across all areas and stakeholder types, the leadership and commitment shown by local authorities around the accommodation response to COVID-19 was valued and celebrated. Local authorities using their convening power, allocating resources, and setting a strategic direction to ‘get things done’ unlocked the ability of local services to achieve great things. Looking to the future, one of the main priorities of community stakeholders was to see this leadership continue, backed by explicit strategic direction for how to support this group in the longer-term.

Notwithstanding the limitations created by legislation, interviewees wanted to see whole-council written commitments to build more inclusive provision for people with restricted eligibility in partnership with the voluntary sector and integrated into local strategies. Even where these were long-term aims rather than commitments to immediate delivery, this was considered important to creating a focus for local partners, building trust and creating the foundation needed to work together as effectively as possible.

### Strategic commitments in Haringey and Greater Manchester

Haringey developed its Welcome Strategy following a council motion in 2018 that publicly reaffirmed its commitment to welcome migrant communities and those fleeing conflict abroad.<sup>41</sup> Across four objectives, the Strategy outlines whole-council commitments to building cohesive communities, delivering welcoming services, broadening opportunity and enhancing the safety of migrant communities in the borough. The delivery of the Strategy was supported by a Connected Communities team that, in addition to outreach work in the community, modelled good practice across council services and served as a focal point for staff seeking advice.

41. Haringey Council. (2019). Welcome Strategy Haringey: A Welcoming Borough for All. London: Haringey Council. Available at: <https://www.haringey.gov.uk/local-democracy/policies-and-strategies/borough-plan-2019-2023/priority-2-people/people-strategies-and-policies/welcome-strategy>



The Welcome Strategy and explicit policy positions taken by Haringey on immigration issues were reported to have made a substantive difference to frontline staff. Some cited Haringey's commitment to inclusion as their key motivator to work there and that it had served to improve local relationships and reassure fearful service users. However, council stakeholders agreed that there was still a long way to go to fully operationalise the Strategy, noting that many commitments still needed to be translated through to practice guidance for staff.

In Manchester, commitments set by the Greater Manchester Mayor's office — and associated funding from the GMCA — had also been crucial to progress made there.<sup>42</sup> By setting ambitions to support non-UK nationals with restricted eligibility within their Homeless Prevention Strategy, providing for them within ABEN services and bringing GMCA specialist staff into local conversations around homelessness, GMCA facilitated change in Manchester City and its services. However, interviewees within the council and outside noted that more explicit commitments from Manchester City Council was still needed to move this progress to the next stage.

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42. GMCA (2021) Homelessness Prevention Strategy 2021-2026. Manchester: GMCA





### Box 7 Ambitious agendas to ‘design-out destitution’

The Scottish Everyone Home Collective’s ‘Route Map’ — co-designed and endorsed by Scottish Government, local authorities and civil society — lays out ambitious and specific direction to “design-out destitution” among non-UK nationals with restricted eligibility.<sup>43,44</sup> Taking a Human Rights framework and developed under the Scottish Ending Destitution Together Strategy, the Route Map is clear about its “preferable future” and the accountabilities and steps required to get there.<sup>45</sup> Crucially, it is also explicit in its tolerance of uncertainty: its ambition is concrete, incremental and galvanising, despite remaining knowledge gaps and the fact that some of the funding and policy changes needed are not yet in place.

Back in England, the ‘Bristol Model’, developed through a partnership project between RAMP and Bristol Refugee Rights, echoes the Scottish approach with its vision for a fair and inclusive Bristol.<sup>46</sup> It is a framework for a city-wide approach and though only in the early stages of implementation, it has received endorsement from voluntary and statutory organisations across the city, including Bristol City Council and the Bristol Mayor. Based on consultation with professionals and people with lived experience, it has interpreted the Everyone Home Collective’s principles for the local context:

- **Design-out Destitution.** People have access to basic resources like food, medicine, sanitary and washing facilities, digital connectivity and public transport. In 2021 a partnership between Bristol City Council and voluntary sector organisations increased the distribution of destitution payments to people with restricted eligibility.
- **A Safe Place to Stay.** People have access to safe and secure accommodation that provides them with privacy and dignity. Since Everyone In, Bristol Council has worked closely with existing voluntary sector hosting/accommodation infrastructure to increase available capacity by advertising for new hosts and working with partners to ensure those accommodated receive the right support and advice.
- **Informed and Supported.** People have access to appropriate legal advice, as well as social, employment and welfare support where needed.
- **Included and Involved.** People can tell their story where they choose to, and can be actively involved in the design of the services that support them.

43. Everyone Home Collective (2020). Route-Map 2: Scotland’s Ambition to End Destitution and Protect Human Rights. Edinburgh: Everyone Home Collective

44. Homeless Network Scotland (2021). Fair Way Scotland. Glasgow: Homeless Network Scotland

45. Scottish Government. (2021). Ending destitution together: strategy. Edinburgh: The Scottish Government.

46. Bristol Refugee Rights and RAMP (2022). NRPF The Bristol Model: Bristol City Council Briefing Paper and Policy Recommendations. Bristol: Bristol Refugee Rights and RAMP



## A corporate response to a whole council challenge

Non-UK national homelessness and the factors that drive it have implications across multiple council functions, including public health, housing and children's and adult social care. In order to rationalise budget management and improve effectiveness and efficiency, local authorities should take a corporate approach to tackling the issue and committing to inclusive practices.

**“For most councils, you can't ask someone in social services to talk to someone in housing.”**

migrant support charity interviewee

Many stakeholders highlighted the challenge of fragmentation and a lack of joint-working across council homelessness, housing and social services functions, putting people at risk of falling through the gaps. At times driven by uncertainty among staff and at times a desire to protect tight budgets, stakeholders inside and outside of local authorities were left frustrated by the lack of a whole-council approach to tackling and preventing non-UK national homelessness.

The apparent absence of collaboration on cases across teams was reported to have led to fragmented pathways and disrupted support and subsistence for individuals, and stakeholders highlighted the need for more floating navigator roles to follow people through the extremely complex system.

### The role of social care

As noted, there were particularly strong concerns across interviewees about excessively restrictive practices by children's and adult social care, which sometimes prevented people accessing their entitlements. In some areas, there was also limited engagement on strategic and operational levels between homelessness and social services, despite the regular referrals for Human Rights or Care Act assessments.

This disjuncture was compounded by difficulties communicating with social care teams, including a lack of feedback and follow-up. Many stakeholders felt that Care Act 2014 and Children's Act 1989 duties were under-utilised for the support and accommodation of families and adults at risk and some support providers noted that they often resorted to legal action to challenge or secure assessments in the first place. Where they were absent, the lack of NRPF specialist roles within the adult social care teams was considered a key gap.

Among social care and homelessness stakeholders, there was a sense of agreement at both the strategic and frontline levels of what needed to change — less focus on thresholds and funding and more shared responsibility for individuals across services. However, they acknowledged that getting there would be a challenge:

*“The principles for how we want to work are there, but to get there is very complex.” – local authority interviewee*

However, some positive practice was noted in interviews. In Haringey and Manchester, rough sleeping social worker roles were appreciated for the greater flexibility and intensive outreach they provided. They were seen to improve links between homelessness and social care, and secured accommodation for a number of people. In Manchester, student social worker placements at the Booth Centre were another positive initiative.



## Confronting racism and discrimination

Given the likelihood that immigration-based restrictions will disproportionately affect people of colour, local systems must proactively confront risks of racism and discrimination (perceived or otherwise) in their services.

**“In the UK you have classes. Higher, middle and lower. Foreigners without status, they are underground class. It’s disturbing sometimes. You’re not treated as a human.”**

focus group participant

Across all areas and stakeholder types, interviewees were concerned about the structural and administrative barriers that non-UK nationals faced when seeking support. Where people faced inappropriate refusals, frontline workers expressed frustration at the apparent discrimination their service users were subject to, as well as the inevitable impact this had on their wellbeing and trust in services. The role of ethnicity, race and racism in these negative interactions (perceived or otherwise) cannot be overlooked given the likelihood that immigration-based restrictions disproportionately affect people of colour. Indeed, experiences of people from the Windrush generation are instructive of the risk of race-based discrimination even where entitlements should not be an issue.<sup>47</sup>

Experiences of racism were prominent in discussions with people with lived experience. Almost all focus group participants felt that the ‘hostile environment’ policies — which increased surveillance on non-UK nationals through immigration checks and placed restrictions on access to the necessities of life, according to immigration status — fed into and legitimised race-based discrimination in public services. Participants also drew particular attention to the intersectional disadvantages faced by women of colour, rendered vulnerable by precarious immigration status and homelessness:

*“Women, particularly women of colour face disadvantages. I had the vulnerability of not having my documents and I am defenceless because of this. Men can put you in situations where you are subjected to sexual assault and abuse.” – Jane, lived experience interviewee*

The perceived “culture of disregard” they faced when trying to access local authority support or help from the police — even during Everyone In — left focus group participants feeling dehumanised. As noted in Chapter 2, this undermined their trust that public services had their best interests in mind and felt inherently linked to their ethnicity.

*“When I have tried to get help through any statutory services it feels that if they do not know that someone has your back, you can be mistreated. As a woman of colour, it feels I am judged and not believed.” – Jane, lived experience interviewee*

*“If you don’t value a person, how can you safeguard that person?” – focus group participant*

Stakeholders with lived experience felt strongly that addressing this effectively required explicit senior local authority leadership, including commitments to anti-racism embedded in local strategies that are

47. Williams, W. (2020). Windrush Lessons Learned Review. London: House of Commons



backed by training and guidance for frontline staff. They felt that a culture shift was needed to combat bias, especially when restrictions in law created an increased risk of discrimination resulting from assumptions, misunderstandings and generalisations.

## Learning from lived experience

The development of practice, policy and strategy to tackle non-UK national homelessness must be informed by people with lived experience of navigating the system with restricted eligibility.

The necessity of involving people with lived experience of homelessness and the immigration system in the development of strategies and services was also emphasised by interviewees. In both Haringey and Greater Manchester, this need was recognised in the development of their rough sleeping and homelessness prevention strategies, which incorporated the voices of non-UK nationals through the Legislative Theatre approach (see Box 8).

### Box 8 - Legislative Theatre: coproducing local homelessness strategies with non-UK nationals with lived experience

Legislative Theatre is a coproduction approach that uses theatre to engage community members alongside policy-makers in shaping policy decisions. In Coventry, Greater Manchester and Haringey, the approach has been used to help develop new homelessness strategies and has proven an impactful way to include the voices of non-UK nationals with experience of homelessness.

In Manchester, a Legislative Theatre practitioner collaborated with GM Homelessness Action Network, Street Support Network and GMCA's homelessness team to produce three plays, focusing on multiple disadvantage, funding, commissioning and structural racism in homelessness services. The third involved the SAWN Network, working with a group of 12 migrant women to deliver a performance depicting experiences of racism within social services, including discrimination within temporary accommodation, that can lead to harassment and unsafe living environments.

All recommendations from the plays were included in GM's most recent Homelessness Prevention Strategy. These include: providing anti-racism training to frontline staff across Greater Manchester to address structural racism within systems and services; prioritising recruitment of a diverse and culturally competent workforce through a more inclusive recruitment process; safeguarding children within the asylum process; and providing access to good quality legal advice from the start. Many have already been acted on, including co-produced job descriptions.<sup>48</sup>

48. See Appendix 2 for more information.



## Working with the Home Office

With appropriate consent-based and transparent policies and procedures in place, progression of immigration and asylum cases can be supported by carefully considered engagement with the Home Office. Local authorities should prioritise the involvement of immigration advisors in these interactions.

Finding better and more efficient ways of working with the Home Office is crucial to advancing individuals' immigration cases as quickly as possible, so that they can move on from homelessness and thrive. However, in order to preserve trust and integrity of purpose, it is just as important that local authorities and homelessness services develop transparent, support-focused and consent-based policies to govern when, how and to what extent they share service users' information and importantly, find a way to communicate these.<sup>49</sup>

The question of how non-UK nationals' information should be safely managed and shared between the local authorities and commissioned services was a concern across all areas. Council, immigration and homelessness interviewees shared experiences of working with individuals who were reluctant to share their information for fear of it leading to immigration enforcement action against them. Other stakeholders noted a persistent legacy of mistrust among immigration organisations as a result of past practices that were perceived to have put people at risk, such as embedded Home Office officers in social service teams.

However, while all stakeholders sought to ensure that service users had consented to information sharing — between services or with the Home Office — they acknowledged the difficulties in gaining truly informed consent. People were often exposed to a variety of professionals, without fully understanding who they worked for and with an inherent power imbalance governing their interactions. Language barriers also played a role, as people were often given consent forms only in English. One council stakeholder noted how difficult telephone communication made it to reassure people and give them accurate expectations, especially when there was a risk of their information being passed on.

To address these issues, clarifying and defining a detailed local authority policy on data-sharing with the Home Office was considered a priority by homelessness and immigration stakeholders to facilitate more effective joint case management and ensure that opportunities to expedite Home Office decisions for the benefit of service users were taken. Stakeholders noted that, where possible, immigration advisors were the preferred contact point for Home Office engagement on individuals' cases, given their ability to gain truly informed consent by explaining options and possible outcomes.

'Immigration surgeries', the EUSS helpline, the Home Office homelessness team's case escalation pathway and the Rough Sleeping Support Service (RSSS) were all examples of Home Office initiatives that, if managed transparently and carefully by local authorities and organisations, had the potential to deliver benefits to non-UK nationals they supported. However, the case study areas reported limited or no use of these mechanisms and in at least one area, local stakeholders preferred to leave this engagement to immigration advice providers alone. Inevitably, the sharing of information even through these avenues can still carry risks for the individual. Truly informed consent — typically requiring the involvement of an immigration advisor — and policies that outline what that means is therefore a necessity.

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49. Homeless Link. (2021). Facing up to homelessness among non-UK nationals: the challenge and opportunity since 'Everyone In'. London: Homeless Link.



### Box 9 – Data-sharing between local authorities and the Home Office: legal analysis

The legal framework which governs local authorities' decisions and duties around the sharing of non-UK national service user data with the Home Office is complex. In seeking to assist individuals with housing problems, local authority staff need to gather personal data. In most cases, the sharing of personal data by local authorities will be voluntary. However there are some circumstances where it could be an obligation.

Paragraph 14 of Schedule 3 of the Nationality, Immigration & Asylum Act (NIAA) 2002 requires a local authority to inform the Home Office when a person requesting support is, or may be excluded from, receiving support or assistance because they are:

- a person suspected or known to be unlawfully present in the UK;
- a refused asylum seeker who has not complied with removal directions; or
- a refused asylum seeker with dependent children who have been certified by the Secretary of State as having failed to take steps to leave the UK voluntarily.

This provision can apply in the context of housing and homelessness matters, but it is also clear that arguments can be made about whether an individual being helped is "requesting support". For example it may not apply if support being provided is pre-statutory outreach support.

Article 6 of UK GDPR sets out the lawful bases for processing personal data. If a local authority seeks a legal basis for data sharing, "consent" (if the individual consents explicitly), "legal obligation" (if the conditions under Paragraph 14 Schedule 3 of NIAA 2002 are fulfilled) and / or "public task" might provide it. However, it is important to recognise that:

- These give a lawful basis for data processing (a power) but do not create an obligation.
- Local authorities need to be clear from the outset about what they consider their lawful basis for data processing is and how they will use the data.

Therefore, UK GDPR's transparency obligations require local authorities to be clear about why they are collecting a person's data and how it will be used.

Of course, where a local authority seeks to share data from non-UK nationals with uncertain or irregular immigration status with the Home Office, it's possible that doing so would instil fear that may lead them to disengage from homelessness support.

It is therefore arguable that seeking to share data with the Home Office generally (in response to Home Office requests or as a matter of policy) or in compliance with the NIAA 2002 may undermine the original basis that the local authority is working with that individual. The fear of information being disclosed to the Home Office may stop the person disclosing the very information that is necessary to allow the local authority to resolve their housing and other support issues.

In the past, Local Government Ombudsman decisions have criticised local authorities for not sharing data with the Home Office, where doing so would have helped more swiftly or appropriately resolve a person's housing and social care needs. These decisions remind us that blanket approaches are risky. For some migrants, liaising with the Home Office might be the most appropriate and proper way to resolve their situation.



It falls to each local authority to balance the competing legal requirements and powers in a way that best allows it to achieve the primary purpose(s) for which it is processing the data (in this case, resolving homelessness). Doing so demands a careful consideration of: the likely impact of data-sharing with the Home Office on non-UK nationals seeking support; when data-sharing is the best option; and how to communicate it transparently so that it is fully understood.

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50. Howgate, M. (unpublished, 2022) Data Sharing between Local Authority Housing Teams and the Home Office: An Analysis of the Legal Position. Commissioned by Homeless Link.

## **4 Facing the national challenge**







In a number of key areas, Government policy has hampered local efforts to tackle non-UK national homelessness. To end rough sleeping, we must begin to tackle the funding gap left by immigration-based restrictions on welfare benefits, frequently patched over by local authorities and the voluntary sector. We must address the vulnerabilities created by asylum and immigration policy, improve access to early legal advice and continue to work towards effective and efficient ways of working within and between the Home Office and homelessness systems.

Stakeholders were frustrated with how national policies created barriers to effective support and left local authorities in a difficult situation - both in terms of finances and legal risk - in accommodating and supporting non-UK nationals with restricted or uncertain eligibility.

Those in local authorities emphasised the need to delineate more clearly what was in the power of local government and what lay with national policy, as a way to improve pragmatic partnership-working and achieve more at the local level. Other interviewees felt it was important that the local authority to go further to challenge and take explicit stances on the Government policies they felt exacerbated non-UK national homelessness.

Participants with lived experience expressed frustration with the national policies that they felt threatened their Human Rights, as well as the wider shortages of affordable housing they recognised affected everyone, regardless of nationality.

## Filling the gap left by welfare benefits

As noted, across areas and stakeholder types interviewees were deeply concerned about the local authorities' ability to continue accommodating non-UK nationals with restricted eligibility. While legal uncertainty was key to this, approaching cliff-edges in short-term Government funding programmes were the other primary driver of concern.

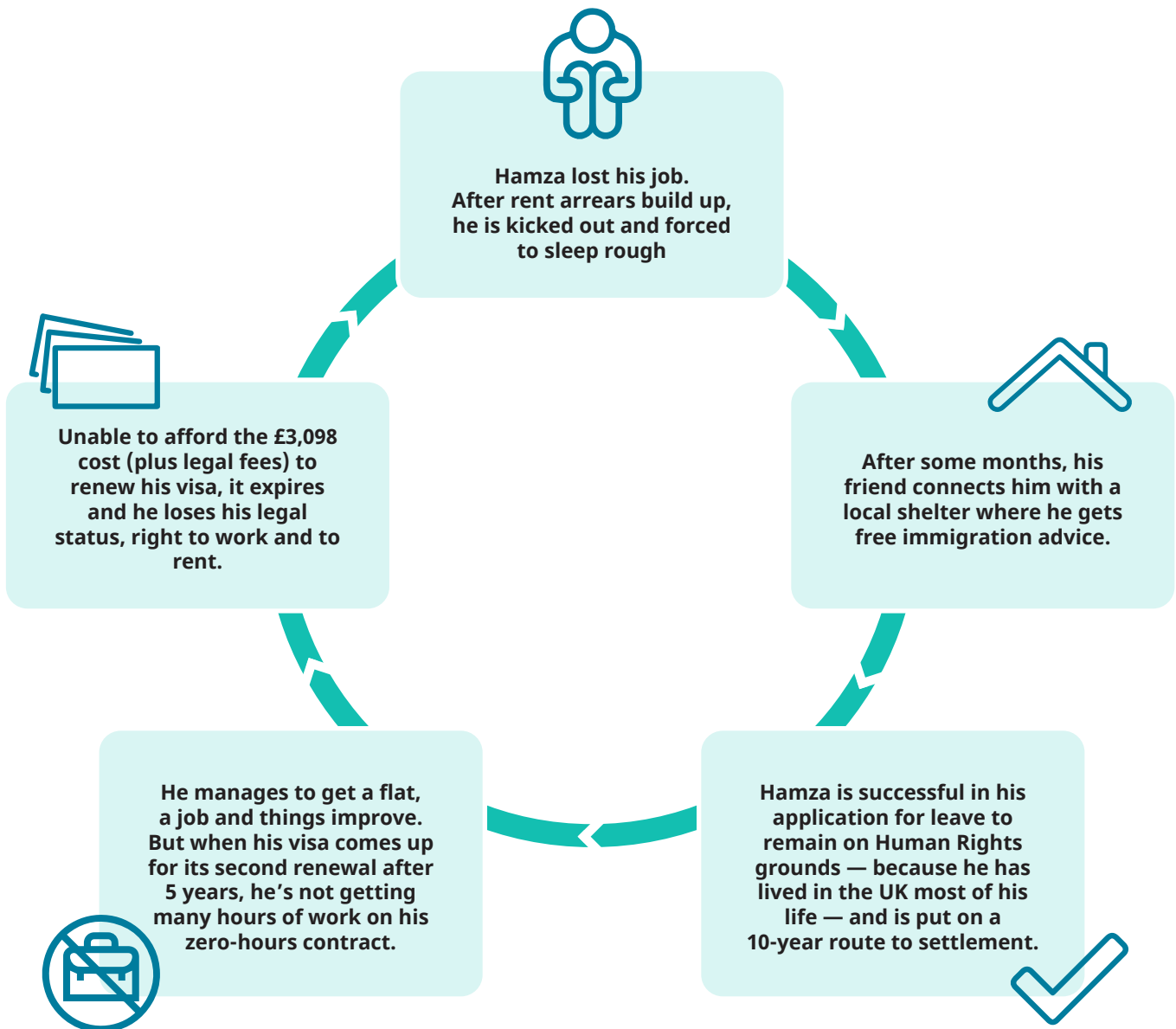
At the time of data collection, local authorities were funding their COVID-19 emergency accommodation with a patchwork of sources, shifting over time between Cold Weather funding, Protect and Protect Plus funding, public health budgets, RSI funds and corporate funding pots. As a result, a sense of uncertainty and insecurity pervaded, with the accommodation offer depending on the priorities and financial health of various local authority budgets and future Government allocations.

Without the support of welfare benefits, this local investment funded accommodation, advice and support for people in a range of situations, many of whom simply required short-term assistance to get back on their feet. This included people whose immigration status was being determined (including while waiting on information requests from the Home Office); people who had existing leave to remain, but needed help to remove their 'NRPF' condition due to homelessness; people who had previously had leave to remain but had failed to renew their visas or lost their status due to relationship or employment breakdowns; and people who had left the asylum system but were unable or unwilling to return to their countries of origin. Hamza's story illustrates how the costly administrative hurdles created by the immigration system can generate vulnerability and risk for people working and living legally in the UK, sometimes leading to homelessness.



Figure 4 Vulnerability on the 10-year route: Hamza’s story

Hamza, 24, moved to the UK when he was 12 but never got help to apply for a visa. He always managed to get by working informally and subletting from friends.





As noted, across all areas, EEA nationals with pre-settled status were a significant population of concern. Though their status offered a route to eligibility through work, for example, for those with health issues and other complex needs that prevented them from working remained excluded from any route to accessing Universal Credit. This left them under the auspices of local government budgets until a maximum of five years had passed and the option of settled status opened up to them.

Even where local authorities have legal duties to accommodate and support non-UK nationals with restricted eligibility, such as under the Care Act 2014 and Children Act 1989, they are not funded by Government to do so. This is a significant issue for overstretched authorities when we consider that NRPf Network report a spend of £57 million across 68 councils over one year for this support.<sup>51</sup>

## Vulnerabilities in the asylum system

Non-UK nationals also face heightened risk of homelessness while in the asylum system and after leaving it. While people with pending asylum claims facing homelessness can access basic assistance and accommodation from the Home Office, they can often be moved between cities, separating them from support networks. Whether their claim is refused or accepted, they receive little notice before they must leave the accommodation (21 days and 28 days, respectively), leaving minimal time to engage support or indeed secure work and housing.<sup>52</sup> Government statistics show that in 2019-20, 5,240 people evicted from Home Office accommodation were assessed as owed a homelessness duty. This decreased to 2,670 in 2020-21 due to the pause in cessations of support during the pandemic.<sup>53</sup>

Interviewees in or near dispersal areas noted that communication with the Home Office on asylum cases was limited, making it difficult to maintain support relationships with people who entered asylum accommodation or to ensure people being evicted were linked into services. It was reported that people whose claims were refused often did not present for support from local charities and were at high risk of entering into vulnerable or exploitative living and working situations.

*“Most people I know who are refused asylum then become homeless. It doesn’t matter if you women, with children whatever, I know one lady who was on the streets for weeks with her child.” – focus group participant*

Dedicated accommodation available to this group, for example via the Boaz Trust in Manchester, was reported to be continually operating at capacity. In addition, stakeholders noted that where council emergency accommodation was provided on condition of potential for swift immigration resolutions, this group were particularly unlikely to access it.

51. NRPf Network. 2021. NRPf Connect data report 2020-21. London: NRPf Network

52. Refugee Action and NACCOM. 2019. Missing The Safety Net. London: Refugee Action and NACCOM.

53. DLUHC (2022). Live tables on homelessness. Available at: <https://www.gov.uk/government/statistical-data-sets/live-tables-on-homelessness>



## Improving efficiency and effectiveness of Home Office decisions

A range of stakeholders highlighted the difficulties created by long delays caused by Home Office administration and decision-making processes. This was the case at every stage of an application - from initial Subject Access Requests for a person's existing records, to fee waivers and eventually, the decision itself - often leaving local government and charities to provide accommodation and support in the interim.

Another key challenge highlighted by immigration advice providers was the high evidence thresholds imposed by the Home Office. These were particularly demanding for people with histories of rough sleeping and informal work, and this was often compounded by health issues and histories of criminality. Immigration advice providers explained that gathering documentary evidence from NHS records, HM Revenue & Customs and other sources to prove every year of a person's 20 years' residency could take months before an application is ready to submit. They considered the requirements inappropriate and counter-productive for people with a history of rough sleeping, leaving them unable to work or rent property due to administrative barriers.

In terms of communication on cases and flexibility in evidence requirements, stakeholders commented that the approach taken for the EUSS was notably better than for other application types, and that this had made a substantial difference to progressing the immigration cases of people with a history of sleeping rough.

Additionally, as noted in Chapter 3, existing efforts to improve the prioritisation and speed of immigration cases for people facing homelessness - Home Office 'immigration surgeries' (online and in person), the Rough Sleeping Support Service and informal escalation pathways - should be improved and built upon, in collaboration with the immigration advice and homelessness sectors in order to begin to address these challenges.

## Improving access to justice

As discussed in previous chapters, capacity in the immigration advice and legal aid systems is currently unable to meet demand, creating serious barriers to access for people in need of advice.<sup>54,55,56</sup>

Government funding and local commissioning of immigration advice is clearly part of the picture, but lack of capacity was also linked to shortages of OISC-trained advisors. While it is likely that increasing the supply of trained advisors would be more efficiently and effectively achieved through investing in training and recruitment in existing OISC-registered organisations, local systems may also consider the registration of new ones (see Box 3).

Interviewees also echoed previous research in reporting that supply and demand were particularly mismatched for more complex OISC Level 2 and 3 advice, as well as for legal aid cases. This underlines the need for a nuanced understanding of the nature of need in local areas, as well as the impact of dramatic cuts to legal aid in recent years.<sup>57</sup> The limitations of the legal aid system also reflect the narrowing of its scope to exclude early legal advice for all areas of social welfare law (including welfare benefits, immigration and housing) since the Legal Aid, Sentencing and Punishment of Offenders Act 2012 (LASPO).<sup>58</sup>

54. Wilding, J. Mguni, M., Van Isacker, T. (2021). A Huge Gulf: Demand and Supply for Immigration Legal Advice in London. London: Justice Together

55. Wilding, J. (2021). The Legal Aid Market: Challenges for Publicly Funded Immigration and Asylum Legal Representation. Bristol: Policy Press

56. The Westminster Commission on Legal Aid (2021). Inquiry into the Sustainability and Recovery of the Legal Aid Sector. London: All-Party Parliamentary Group on Legal Aid

57. Boobis, S., Jacob, R., and Sanders, B. (2019). A Home For All: Understanding Migrant Homelessness in Great Britain. London: Crisis

58. The Westminster Commission on Legal Aid (2021). Inquiry into the Sustainability and Recovery of the Legal Aid Sector. London: All-Party Parliamentary Group on Legal Aid



## **5** Conclusions



The challenge of non-UK national homelessness is driven by complex factors at national and local levels. Restrictions enshrined in law prevent access to core welfare benefits and drive legal uncertainty around the provision of accommodation, while vulnerabilities created by the immigration and asylum systems place people at risk. At the same time, exclusionary service planning and processes, discrimination and misunderstanding by staff and fear and distrust on the part of those in need of support often compound statutory barriers.

Experiences in Bedford, Manchester and Haringey, as well as across the country, show that much can be achieved - and improved - at the local level. Exploiting all available options and opportunities to provide accommodation to people with uncertain or restricted eligibility must be a first priority, given the vast benefits it delivers to individuals and systems. Local authorities must act more confidently to fully utilise available powers to accommodate this group and work in partnership with local voluntary sector to unlock additional options, too. Rent-free 'assessment beds' within rough sleeping pathways are one example of a model that could be more widely adopted, to facilitate immigration resolutions and move people on.

Secondly, local systems must consider the support and advice offer. Restricted eligibility is rarely a fixed state and frequently, it should be treated as a support need to be addressed. Progress is visible in this space, with increased commissioning and embedding of independent immigration advice in homelessness settings. However, our findings show that challenges around access, capacity, complexity and quality persist. In addition to continuing to improve partnership and commissioning models, local authorities and Government must address the systemic shortages of funding, staffing and capacity across the immigration advice and legal aid systems.

Like for other groups facing homelessness, immigration issues often sit alongside other intersecting support needs, such as mental and physical health or drug and alcohol dependence. Here, our findings show that we must adapt and apply established good practice for people facing multiple disadvantage.<sup>59</sup> Services and commissioners should consider what person-centred, trauma-informed multi-agency support looks like for non-UK nationals in their communities, which could include the adoption of peer-led, flexible support work that consciously addresses language and cultural barriers. This must be underpinned by improved immigration literacy and understanding among homelessness staff, as well as broader explicit commitments to deliver welcoming services, free of discrimination.

Improved collaboration and partnership-working between local authorities' homelessness and social care teams and externally, with the voluntary sector, is also crucial. Local authorities must build meaningful partnerships with local homelessness and immigration advice organisations at both operational and strategic levels, backed by explicit commitments to find solutions for non-UK nationals previously excluded from the system, together. Integrating these commitments into local homelessness and rough sleeping strategies offers a key opportunity to build trust, unlock local resources, set the local agenda and to learn from people with lived experience of homelessness and restricted eligibility.

Of course, our findings demonstrated clearly where the limits of local action lay. Stakeholders' efforts were continually destabilised and undermined by legal uncertainty, funding gaps and delays, weaknesses and inefficiencies in the asylum, immigration and welfare benefits systems. Recent research has demonstrated potential net gains to society of £872 million over ten years from lifting NRPf restrictions for some groups on work and family visas.<sup>60</sup> This shows that, far from being a policy no-go area, reform should be on the table not only to reduce homelessness, but also to make pragmatic savings across public services.

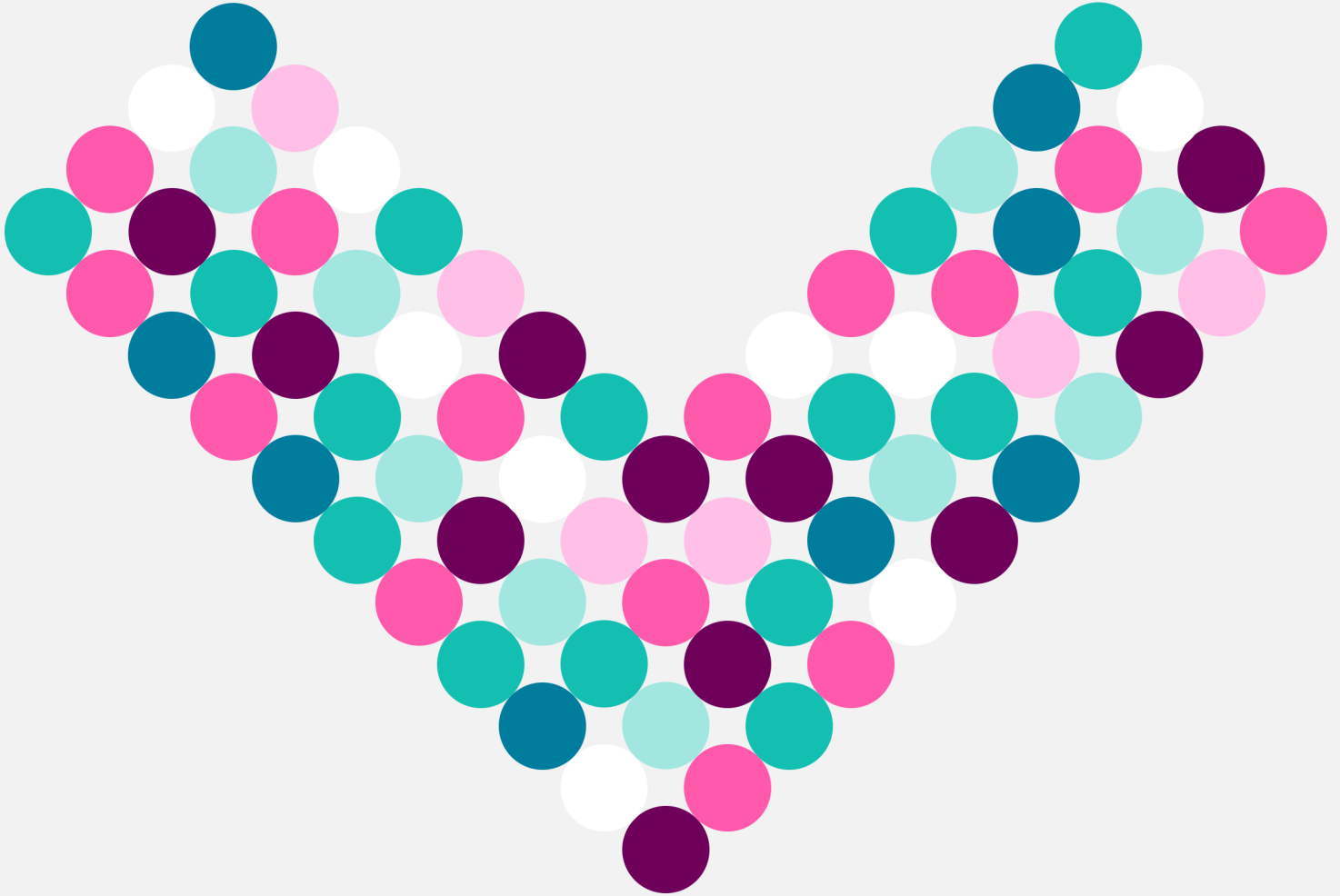
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59. Bramley, G. & Fitzpatrick, S. (2015). *Hard Edges: Mapping severe and multiple disadvantage*, England. London: Lankelly Chase Foundation

60. Benton, E., Karlsson, J., Pinter, I., Provan, B., Scanlon, K. & Whitehead, C. (2022). *Social Cost Benefit Analysis of the no recourse to public funds (NRPf) policy in London*. London: LSE



In order to deliver on our ambitions to end rough sleeping and build a homelessness system that enables people to thrive rather than just survive, local efforts must be supported by cross-departmental Government support, which facilitates the provision of a minimum accommodation offer and addresses the policies and administrative barriers that reproduce risk, vulnerability and homelessness among non-UK nationals in England.



## **6** Recommendations for change





Below we present our recommendations for change. For local authorities and national Government, they offer concrete and achievable ways to address the individual, service, system and policy factors driving non-UK national homelessness and preventing people from moving on to thrive. As noted, while much can be achieved at the local level, there are legal constraints that limit what local authorities can offer this group. The recommendations below take consideration of these limitations.

## Recommendations for local authorities

1. Integrate **commitments to the inclusion** of non-UK nationals into **homelessness strategies and corporate strategies**, in order to set the direction for collaborative, person-centred joint-working both across local authority teams and with the voluntary sector. Commitments and strategies should:
  - a. be co-produced with people with lived experience and voluntary sector partners, including local immigration advice providers;
  - b. integrate an anti-racist and gender-informed approach, promoting equality and standing explicitly against discrimination in all services; and
  - c. define measurable actions and aims at both the operational and strategic levels.
2. Explore all possible avenues to **unlock access to accommodation** for non-UK nationals with undetermined or restricted eligibility up to the limits of the law. Consider options where the local authority may have a funding and facilitative role in partnership with the voluntary and faith sectors.
  - a. **Funding:** use opportunities, such as RSI funds, to fund and commission 'rent-free' accommodation in rough sleeping pathways, in partnership with the voluntary sector and supported by embedded immigration advice.
  - b. **Facilitative:** ensure that local authority expertise, influence and property assets are utilised to support voluntary sector provision of accommodation, for example through engagement with housing associations, making empty properties available, supporting funding bids or convening partners to identify opportunities.
  - c. Provision should be gender-informed and suitable to meet diverse support needs, including bedspaces in supported youth- and women-only settings.
3. Facilitate operational and strategic **partnership-working** with the immigration advice sector, migrant community organisations and homelessness organisations to identify gaps and emerging issues and rationalise provision (particularly accommodation).
  - a. This could be achieved through the integration of migration sector into homelessness partnership forums, or the development of formal links between existing forums.
4. Increase access to quality, independent **immigration and welfare advice** across homelessness and prevention settings by commissioning advice on a multi-year basis. This should include:
  - a. assessment of need and existing capacity across different OISC Levels;
  - b. development of referral pathways to legal aid solicitors; and
  - c. training for homelessness staff to improve their understanding and ability to work effectively with the immigration advice sector.
5. Facilitate equitable access to **person-centred and trauma-informed support** for non-UK nationals with restricted eligibility by:
  - a. covering interpreting and translation in commissioning contracts;



- b. prioritising the recruitment of support workers who are members of target nationality or linguistic communities;
  - c. commissioning of peer-led and informal interventions for wellbeing, skills development, harm reduction and employment support; and
  - d. training for staff on barriers faced by non-UK nationals and specific cultural needs, where appropriate.
6. **Address barriers to access** that reinforce fear and reluctance to seek support and leave people stuck in dangerous living situations by:
- a. ensuring Housing Options staff provide advice and referrals – or at a minimum, signposting – to alternative specialist support when they cannot provide support under Part VII Housing Act 1996 to non-UK nationals, as per section 3.1 of the Homelessness Code of Guidance;<sup>61</sup>
  - b. promoting a culture of ‘welcome’ via training and communications to all frontline staff, including expectations of solutions-oriented and respectful interactions with all service users; and
  - c. ensuring provision of a minimum level of direct access, in-person support and advice services.
7. Develop a **targeted approach to preventing** non-UK national rough sleeping by:
- a. Commissioning community outreach to reach non-UK nationals with restricted eligibility where they are (e.g. places of worship, schools and community organisations), supported by immigration advice. This could include the recruitment of community champions to support people to navigate the system.
  - b. Raising awareness of available services, rights and entitlements through an accessible information campaign across community settings.
8. Develop local policies on the **sharing of service user data with the Home Office**, in close collaboration with the immigration advice sector. Policies should:
- a. specify that the sharing of service user data with the Home Office should occur only with their informed consent when strictly necessary to better support the individual;
  - b. specify that interactions with the Home Office on service user cases should be led by immigration advisors, rather than non-specialist staff; and
  - c. be communicated in writing to staff and service users in an understandable way.
9. Work to **improve Government processes and policies** by:
- a. working with the immigration advice sector to safely and appropriately escalate cases to the Home Office to speed up decision-making;
  - b. collecting and reporting anonymised intelligence on people awaiting decisions to highlight barriers that need to be addressed;
  - c. collecting and reporting spend on accommodating and supporting people with restricted eligibility;
  - d. collecting and sharing anonymised intelligence on successes with Government and local authorities nationally; and
  - e. highlighting, with evidence, where national policies are having a detrimental effect on tackling non-UK national homelessness.

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61. DLUHC (2018). Homelessness code of guidance for local authorities. Updated 1 June 2022.



## Recommendations for national government

1. Deliver on a **cross-departmental approach** to tackling rough sleeping as a public health issue, which facilitates joint funding and working across health, social care and homelessness to increase accommodation options for non-UK nationals with restricted eligibility. Measures should include:
  - a. **provision of a discrete fund** to local authorities to ensure — at a minimum — the provision of emergency accommodation, regardless of immigration status;
  - b. review and monitoring of all immigration-based restrictions on public funds to assess and mitigate their role in driving homelessness; and
  - c. review and monitoring of the impact of other immigration and asylum policies on homelessness and health.
2. Address the **financial burden on local authorities** and delays to move-on for people awaiting Home Office decisions by:
  - a. Increasing central Government support options, including accommodation, for people sleeping rough or in homelessness accommodation who are waiting for a Home Office decision.
  - b. Expanding and formalising, with additional investment, case escalation pathways with Home Office and DWP decision-makers for people facing homelessness. The Rough Sleeping Support Service may be an appropriate vehicle for this, with improvements to transparency, case follow-up and safeguards to ensure informed consent.
  - c. Accelerating compassionate and quality decision-making across immigration, asylum and asylum support applications through investment in staff capacity and training on trauma-informed practice and homelessness for Home Office decision-makers.
3. Extend eligibility for benefits to all EEA nationals with **pre-settled status**.
  - a. At a minimum, provide a route to lifting eligibility restrictions for people with PSS facing homelessness, akin to 'Change of Conditions' applications available to non-EEA nationals with limited leave to remain and reduce the evidence requirements for converting to settled status.
4. Further **clarify the legal powers and expectations** on local authorities to accommodate and support non-UK nationals with undetermined or restricted eligibility, including:
  - a. the provision of guidance emphasising a support-led approach, closer partnerships with the immigration advice sector and means through which local authorities should 'exhaust all options' to accommodate; and
  - b. amendments to the Homelessness code of guidance to further emphasise and clarify the advice and support that should be offered to non-UK nationals with restricted eligibility who approach Housing Options teams.
5. Improve access to **free immigration and welfare benefits advice** by:
  - a. funding and promoting the expansion of advice provision in homelessness settings; and
  - b. restoring legal aid for early legal advice to pre-LASPO levels for immigration, welfare benefits and housing law.
6. Prevent homelessness among people leaving the **asylum system**. Measures should include:
  - a. allowing 56 days rather than 28 or 21 days following an asylum decision before cessations of support, in line with the HRA;
  - b. extending the HRA Duty to Refer to the Home Office, defining their role in preventing and reducing rough sleeping; and



- c. giving people seeking asylum and their adult dependants the right to work from six months after their initial asylum claim or further submission.
- 7. Amend section 12 of the **Nationality and Borders Act 2022** so that refugees are not treated differently simply because of how they arrived in the UK and the NRPF condition cannot be applied to tier 2 refugees and their families.
  - a. At a minimum, commit to review, monitor and report on the impact of NABA on homelessness in an effort to mitigate unintended consequences.

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# Appendix 1

Case studies of non-UK nationals with lived experience of homelessness and restricted eligibility



# Appendix 1

The case studies and testimonies below are shared thanks to the generosity of ten individuals who faced homelessness and restricted eligibility to public funds during the COVID-19 pandemic. Their stories are shared to provide detailed insights into the complex and varied routes into homelessness experienced by non-UK nationals, their experiences of support, personal hopes and progress made.

Case studies 1-6 were collected by NACCOM with the support of their Community Researcher team in Autumn and Winter 2021. Case studies 7-10 were collected by Homeless Link, either as part of this project (7) or separate research conducted for Islington Council in November-December 2021 (8-10). Alex, Ivan and Elias were all being accommodated by Islington in their Everyone In accommodation at the time of interview.

## 1. Aleksy's story

**Themes: failure to prevent; employment; long-term homelessness; physical health; EUSS; recovery**

Aleksy, 47, is originally from Poland and has lived in the UK for 12 years. He has been homeless on and off for the last five years, after facing cancer and losing his job.

“Because of the cancer I couldn't work. I had problem with getting benefits. In this situation I asked my family to help and they sold my flat in Poland and sent it here. I was living with this money for five years. It was hard for me to get work. When the money finished I was confused because I got some help from the council but it was only 3 months. After I was sick from cancer I couldn't work as well. I was like half of a man ... I had hope it would be better – but it just got worse and worse.”

In that time, he has moved between his own accommodation, squatting, hostel accommodation and living on the street and had difficulty accessing other support other than for basic survival.

“The outreach workers would come to my tent to check on me and helped with sleeping bags or clothes but this was it. It was like ‘help for now’ but not proper help so 2 years I was just living in the bushes. 3 years ago was the worst time and I did not expect this support. I slept in a tent. I didn't believe that there was someone who could help me. I stopped asking, stopped trying, I gave up. I just thought what will be will be. I didn't care.”

During his time rough sleeping, Aleksy began to misuse alcohol and drugs and his mental health declined significantly.

“I have had some mental health problems. Which bothers me still. Not so much as before. On the street I used to do many things, sometimes stupid things. But I was concentrating on staying alive. Everything I did on the street, I don't want to judge myself, but it was things that weren't good. I started taking drugs. I thought it would make things better but it made things worse.”

As part of 'Everyone In' Aleksy was moved into hotel accommodation. While staying in the hotel, he was supported by a key worker to get settled status. This was a complicated, lengthy process because he was missing documentation needed. He was then moved into a shared house by a local charity working with the council. He is happy with his current accommodation and feels safe living there. Since moving into

accommodation, he has been supported around his physical and mental health and to access benefits.

“Since COVID has happened there have been many changes for me. Before I signed the contract with [charity] I had many problems. Problems with applying many times for JSA while I was homeless and couldn't get it. Usually when I applied myself it was cancelled... So they have helped me a lot with all paperwork. It is a big change for me because [...] I am trying to get a job so I can be responsible for myself.”

Aleksy feels that access to support has changed significantly since the COVID pandemic began and is more readily available to people who are non-UK nationals. He is currently working with his key worker to plan his move-on from the shared house. He is very grateful for the support he has received recently but also feels that if support is available sooner it can prevent people from suffering the ill effects of homelessness.

“Since COVID has happened there have been many changes for me... I had help with my mental health. It is one battle with myself that I won. It was much more last year than now. I don't have problems with drugs and alcohol anymore. It is not easy. I had some friends on the street but I am trying to make changes in my life and I want to move away from them. I am now struggling with loneliness and I am trying to find new friends and stay away from drugs and alcohol. More than a year I am clear.”

## 2. Matis' story

**Themes: precarious work; EUSS paperwork and delays**

Matis is 19 and is originally from Lithuania. He has lived in the UK for four years but for the last year has been homeless, having lost his job and then his accommodation during the pandemic. As it was cash in hand work, he did not have a National Insurance (NI) number.

“Before Corona I was working and renting a room in a house. I was working in a car wash. It was cash in hand work. In a week I would earn around £120. From that I could pay £90 for my accommodation. I had £30 a week to live on. Of course that was not enough. I had to hustle to look for ways to get food and clothes. You live day-to-day.”

Once he lost his job, he could not access any support and turned to crime to survive. He was arrested and sent to prison. Upon release, the probation service quickly arranged for him to move into COVID-19 hotel accommodation.

He no longer has any identification and is attempting to get this from the Lithuanian embassy. At the time of interview, he was being supported to get settled status and a NI number.

“I should find a new place to live [but...] I don't have any benefits. At the moment I can't get this [benefits] because I have to get my papers right... I had to go in person to London. I went alone, [charity] helped me to pay for the trains. I was not able to get my ID because the government think I am a deserter because I left when I was 16 and at 18 years old you have national service. At the moment I could not go back to Lithuania.... We hope we will get through this. We are stuck at the moment because I can't get my ID.”

He is still not registered with a GP, but has taken advantage of the GP visits to the hotel to get some support with his mental health for the first time, including a prescription for anti-depressants. Matis is hoping to

move into independent accommodation after leaving the hotel. He is not sure what options are available to him but is flexible as long as it is safe and secure.

“At the moment I am just waiting. Once I get this sorted I want to get a room somewhere. I need the insurance number to get the job. I don’t know what is available for accommodation. I would like to do some cooking work. I would clean dishes or anything. I have been practicing cooking by myself.”

### 3. Jan’s story

**Themes: precarious work; repeat homelessness; physical health; EUSS**

Jan, 39, is from Poland and has been in the UK for six years. Jan became homeless in winter 2019, when missing wages meant that he was forced out of his home. Jan slept rough for two weeks, during which time he received very little care or assistance and developed frostbite.

“I did not get paid from my work. I got kicked out from my house just before Christmas two years ago. I lost all hope and landed on the street...There was no real support when on streets. There was morning tea at the day centre but nothing special.”

He eventually moved into a shared house via a local charity, Jan was able to settle and find a new job.

“It has helped me to look to the future and feel safe. I can go through and do anything when I have a place to live in. I feel safe. I was able to start working every day. When you are on the street it is impossible to go to work every day”.

However, after five months Jan suffered another setback when he was the victim of a random assault at work. This event, which occurred just before the introduction of COVID-19 restrictions in March 2020, left Jan with a broken spine and in need of immediate treatment. After eventually getting medical support and returning to work, he lost his job and due to enduring injuries, has been forced to retrain in a different field.

Jan received settled status while staying with the charity. He is currently receiving Universal Credit and is waiting on a Personal Independence Payment. He hopes to move on to his own accommodation, once he is able to receive mental health treatment for PTSD, for which he has been waiting nearly a year. “I want to wait for that before I can think about what is next.” he said.

### 4. Adiah’s story

**Themes: pre-settled status; rough sleeping verification**

Adiah is 22, originally from Zimbabwe but with Portuguese citizenship, and has lived in the UK for three years. Adiah has pre-settled status until 2025, but faced difficulties claiming Universal Credit. She has been unstably housed since losing her job during COVID-19 and falling into arrears. Since then, she has been forced to ‘sofa surf’ with family and friends.

Adiah initially moved in with her uncle, and when their relationship broke down, she relocated to her current town to stay with a friend. However, eventually she was also asked to leave there. Adiah contacted various authorities requesting emergency assistance but was told that she would not be eligible for support unless

she could verify that she was street homeless. As a result, she and her boyfriend were forced to sleep rough, until Adiah was moved into hotel accommodation the following day.

“She [friend’s mother] got the police involved and they said there was nothing they could do about it. I tried calling the council and they weren’t very helpful. They told us we had to be rough sleeping in order for them to help. My boyfriend at the time stayed with me... It would be great if people did not have to sleep out in the cold in order to get supported. The police had to come pick us up. They took us to a café so they could call the council.”

She is frustrated at her treatment in the hotel, is confused about her rights and entitlements and reports that she only eats one meal a day.

“I have been here about a month and a half. It’s not too bad. There are a lot of feelings of not really getting enough help. They told me my rights and there are things I should have help with, but the case workers are telling me different... They are telling me not to use the lift, but I have to use the lift as I have problems with my knees. It feels like we are treated like second class citizens. We can’t go near the hotel desk.”

Caseworkers helped Adiah to successfully reapply for UC, which she was waiting on at the time of interview. She worries that her current immigration status will affect her housing options, and is frustrated by her limited agency in the situation, particularly as it remains unclear what type of accommodation she will be eligible for and where this may be:

“When it comes to things like local connection I keep being told about that. My local connection is in Nottingham so I don’t know how they are going to help me. Just to get help I feel I would need to go back to the start. I’m concerned about what type of place I might move into and who I will be forced to live with.”

In the meantime, Adiah is keen to use the support network available through the charity and at the hotel and evaluate her options until she can eventually access a one bed flat or studio for herself.

## 5. Ashu’s story

### Themes: complex immigration issues; physical health

Ashu is in his mid-30s and has been in the UK for over 20 years. In that time, he has faced challenges with regularising his immigration status and with homelessness. He initially had indefinite leave to remain, but this was then revoked leaving him with no recourse to public funds. He was not allowed to work and had little access to support. In 2018, he became homeless and was forced to live on the streets for two years.

“My health wasn’t great as I have underlying health conditions. I was drinking alcohol to help me to get through the night. I was struggling for food. I wasn’t able to find a solicitor to help me with my immigration case. I had nowhere to go and didn’t know what move I could make.”

When COVID hit, Ashu was concerned about his inability to isolate, given his health conditions, and sought support from charities to find accommodation.

“When COVID came I was panicking... I was referred to the council. The government had already announced Everybody In, but because I had no recourse to public funds the council still refused.

I went to another local council and they refused as well.”

After a month, and with help from charities, he was finally given a bed by the council. With it, came comfort, security, food and contact with a solicitor to help his immigration case.

“I was warm, I didn’t have to drink to get to sleep. I could wash every day. It meant I felt safe and could protect my health. Mentally it made a huge difference... It was a big change not to worry about eating. After that the council linked me with a solicitor to help me with my immigration case. I am still working through my immigration case. While it is not a problem solved it is going in the right direction. Personally, I also met my girlfriend and we have had a child together.”

Even though he knows his support could end at any time, Ashu is clear that Everyone In provided the opportunity he had needed for so long to progress with his life.

“If it wasn’t for ‘everyone in’ I would still be homeless and my health would have been getting worse. ‘Everyone In’ gave me options and hope.”

“I hope that COVID is near to an end. But with it also brings uncertainty for me and I hope that others in similar situations will be given the same level of support and opportunities.”

## 6. Jane’s story

**Themes: domestic violence; asylum system; fear and racism**

Jane came to the UK in 2002 after leaving her country for political reasons. She hoped to study in the UK until the danger had passed in her home country, so after arriving as a visitor she applied for a student visa. Even though she had preferred not to go the asylum route, when the student visa was refused she claimed asylum.

Soon after, she met her husband who was given discretionary leave to remain following his own asylum claim. The local authority accommodated them in a two-bedroom flat, but because her status was not settled, her husband had control of all of the paperwork. Unfortunately, he husband soon became abusive towards her. After looking for help from the police, she found that there were few options: because her name was not on the lease, she had to choose between staying or facing homelessness.

“[The police] told me that I needed to leave the flat. They made me dress quickly as I was wearing my nightgown. They took me to central station and left me there. I was so afraid and cold. I didn’t know what to do. I only had one bar of battery on my phone and there was no-one I could call. I had to call my husband again. I returned to our flat.”

Jane expressed distrust and frustration at the treatment she received whenever she sought help from the police and other statutory services during this period. She felt that her race was a factor in how she was perceived by the authorities.

“It is frightening and demeaning to be in the hands of the police and be left less safe than you were before contacting them. They could have taken me to a safe place or helped me get support – but they never did. They had left me on the street so I could not go back to them for help.

“When I have tried to get help through any statutory services it feels that if they do not know that someone has your back, you can be mistreated. As a woman of colour, it feels I am judged and not believed.”

She remained with her husband in the flat for a long time, enduring his abuse and sleeping on the floor behind the door in a separate room. Eventually, after telling her story to a charity support group, a support worker arranged for her to move into a hotel for four days – enough space to be able to consider her options.

Jane was then able to move in with a friend for a year, and is now staying in accommodation provided by a charity again. She described how vulnerable not having documents can make you as a women of colour and the stress she felt trying to navigate the system:

“I had the vulnerability of not having my documents and I am defenceless because of this. Men can put you in situations where you are subjected to sexual assault and abuse.”

“When I have been to the local authority they have asked me to provide information, they say, ‘Can we have this?’, ‘Can we have that?’ Straight away they want your National Insurance number, which I do not have. Then in the end, they say they cannot help you. When you ask for support you feel judged and you do not want to return.”

## 7. Anna’s story

**Themes: long-term rough sleeping; domestic violence; substance misuse; EUSS**

Having run her own cleaning business previously, Anna became homeless in 2015 and spent a number of years rough sleeping in a large town in the East of England. Anna was an EU national and due to the lack of provision for individuals with restricted eligibility, Anna was unable to be housed. For a few years, there was no outreach support readily available to her.

Anna was particularly vulnerable, living in an encampment with a partner who was abusive, and others who were mutually unhelpful towards one another, regularly spending any money they obtained on alcohol and expecting Anna to spend any of her finances to share amongst each other. This combination of heavy alcohol use and regular abuse meant that Anna was regularly in need of medical help, and police interventions were common too.

While interventions and respite housing helped, accommodation was time-limited, and Anna returned to her encampment after a brief stay at a local hostel. Alternative ‘No Recourse’ accommodation was not suitable at the time either, due to ongoing domestic abuse issues.

Finally, the dual opportunities of a path to regularisation and stable accommodation helped Anna to turn things around. Anna was supported by local agencies to apply for the EUSS, and while waiting for the outcome, she was able to be safely housed under the ‘Everyone In’ initiative away from her abusive partner. Anna took the chance to separate herself from destructive relationships, instead building up a positive support network around her. She stopped drinking alcohol, and was able to start caring for herself with access to necessary facilities, going from being dangerously underweight and unable to care for herself, to being healthy and able to have pride in herself again, with returned dignity and being able to live again as she once did.

Anna is still in the process of obtaining permanent accommodation. Practically, Anna now has housing and financial security from which she is keen to progress back into work, and personally, she is safe, happy and looking ahead with optimism.

## 8. Alex's story

**Themes: complex immigration issues; trauma; person-centred support.**

Alex has been in the UK for 22 years. He has ongoing immigration issues and has been in immigration detention twice, most recently for 18 months in 2012-2013. He describes this experience as extremely traumatic, with £5 a week to live on. His father died during this period of detention and he describes watching the phone ring at 2am and not answering, knowing it could only be bad news. His mother died just two years later.

When he was released, rather than being returned to London, he was moved to the North of England, away from all the places and people he knew. He became depressed and after two years decided to come back to London, despite having no accommodation there and no access to funds. Before the pandemic hit, Alex had been sleeping on the streets since 2015. He suffers with extremely poor mental health and has had no access to support or any options to end his destitution.

For the first time in five years, Everyone In meant that he had access to a stable home and much-needed immigration support. He describes being given access to immigration advice and lawyers immediately after being brought into accommodation; this has given him hope after so many years of insecurity. He has been in his most recent accommodation for four months and this is the third accommodation he has been in, but he describes them all as "excellent" and explains the importance to him of having a roof and people who care:

"They want to help"; "they're human"; "they're always here".

His future is still uncertain, but Alex is confident that the team supporting him are doing what they can and says that he must be appreciative of what he has, rather than wishing for things that are unrealistic. He explains the importance to him of receiving advice and support after so long: knowing that staff care and are trying, regardless of the outcome of immigration issues, "that is enough".

## 9. Ivan's story

**Themes: person-centred support; EUSS**

Ivan was sleeping on the streets when he was approached by an outreach worker from St. Mungo's. He had been sleeping rough since before the pandemic in a range of locations, including Haringey, Central London and Islington.

In Haringey, he was approached by outreach a number of times, but these conversations did not result in any support because without recourse to public funds, there were limited options available for him. After Everyone In was announced, contact with an Islington outreach worker led to him being taken to Everyone In accommodation. He describes a light touch initial assessment focussed on outlining rules and expected behaviours, which he was happy to sign up to. Ivan has been working on getting settled status with his support worker since he moved in.

He describes being happy with the support he has received and moreover being grateful to have somewhere to stay: a roof and a room, and that food has often also been available:

*“I’m very happy with the support. We have so much, actually. ... I’m happy with that”*

He works in construction and has worked in London previously. He has had some challenges with alcohol in the past, and this had led to him losing work. On his way into the interview, Ivan was given the good news that he has been granted Settled Status. Now that he has his status, his main aim is to find employment and a place to live, with a kitchen so that he can cook for himself.

## 10. Elias’ story

**Themes: trauma; mental health; person-centred support.**

Elias has been in the UK for several years. He was living with his partner and working as a patisserie chef but lost his accommodation after his relationship broke down. He stayed with a family member for a while but, before the pandemic began, this situation became untenable.

After attempting to take his own life, Elias was put in hospital and was referred to Everyone In accommodation after he was discharged. He was impressed at the speed with which he was put in touch with a support worker once he had discussed his situation with the doctor.

Elias’ visa lapsed when he was living on the streets, and his support worker has helped him to regain his status. He is unreservedly positive about the support he has received. Over the course of a year, his visa has been restored and he has now moved into his own flat. He explained:

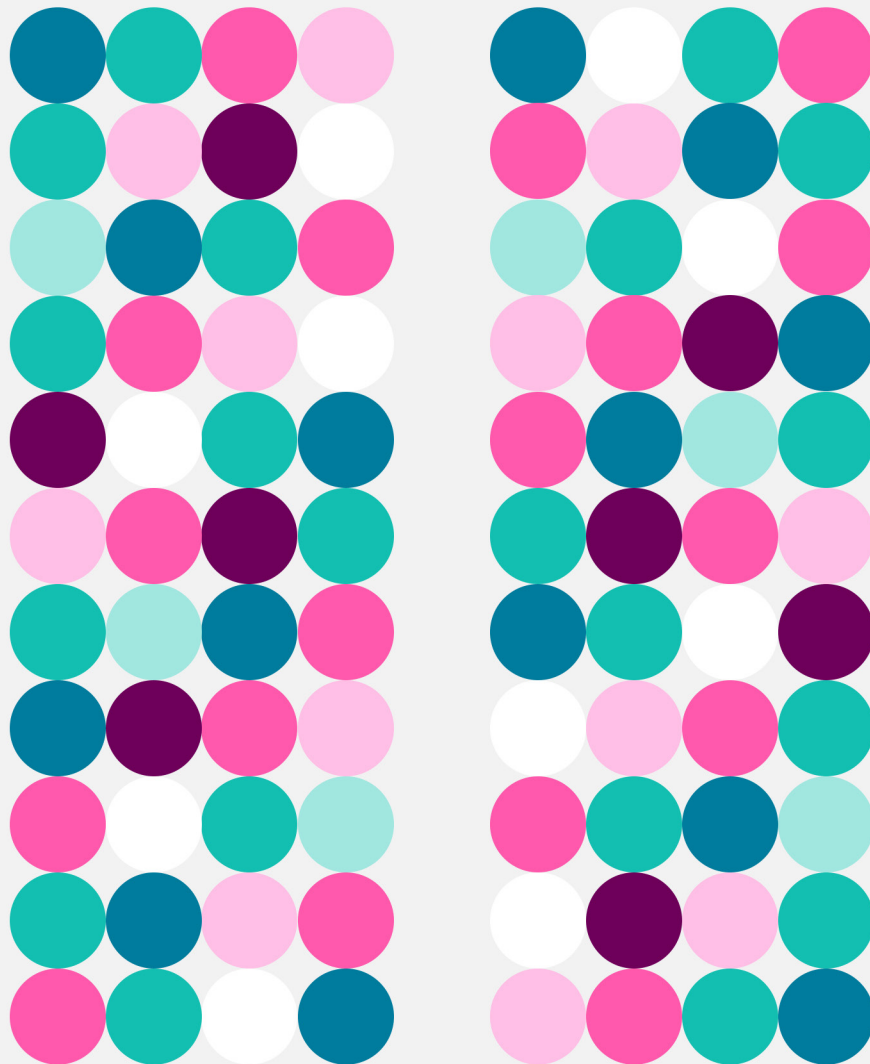
*“I’m very happy with the service and I couldn’t ask for more. I couldn’t ask for more. Got my place and I’m talking with my big daughter”.*

He describes experiencing trauma in his home country, including the loss of both of his parents when he was young. He has depression and other mental health issues as a result of this and in an effort to cope, he has preferred to keep to himself for many years. Through the support he received during Everyone In, he is now accessing mental health support for the first time; and is also determined to stop smoking.

*“By myself, I can’t do it myself, I need someone, ... like [my support worker]. He motivates me a lot and I feel motivated for a lot of stuff now. Before I wasn’t, but now I’m very motivated”.*

He has also made contact with his daughter and she has been helping him to settle into his new home. He is visibly proud of himself and positive about the future. He plans now to go back to work and is looking forward to proving to his uncle that he now makes the more refined patisserie!





# Appendix 2

Exploring approaches to accommodation and support for non-UK nationals: selected case studies

## Appendix 2

The following case studies describe a selection of approaches and service models, which may form important parts of local strategies to address non-UK national homelessness. They were collected through interviews with local authorities, homelessness and immigration advice organisations as part of our research into homelessness responses to non-UK nationals with restricted eligibility. They explore:

1. Examples of local authority funding for accommodation targeted at non-UK nationals with restricted or undetermined eligibility in London;
2. Lessons learned and challenges faced by voluntary reconnection services;
3. Services providing early or outreach immigration advice for homelessness prevention;
4. A creative approach to co-producing homelessness strategies with non-UK nationals with lived experience in Haringey and Manchester.

### 1. RSI-funded bedspaces for people with uncertain or restricted eligibility

**City of London** provides three RSI-funded bedspaces at Caritas Anchor House hostel in the London Borough of Newham.

The bedspaces are targeted at rough sleepers with restricted eligibility who are EUSS-eligible and potentially work-ready. Most referrals come via the local authority's Carter Lane hostel or COVID-19-procured hotel. The bedspaces are managed via a service-level agreement and overseen by the City's Pathway Coordinator. Total annual funding for the bedspaces is £100,000: this includes all accommodation and support costs and £10,000 for personalisation budgets, theoretically replacing the need for Housing Benefit.

Most service users are already receiving immigration advice when they move into the bedspaces and have either made an EUSS application, or are about to do so. Where this is not the case, immigration advice is available via local solicitors or Praxis, a specialist migrant and refugee organisation.

Service users have access to ESOL (English for Speakers of Other Languages) courses to develop their language skills and support around their health and drug and alcohol needs.

Intended length of stay is 12 weeks, with a move-on target of eight individuals per annum. During the past 12 months, there have been seven positive moves, including one into a private rented tenancy and several into the City's Accommodation Pathway for Rough Sleepers, after these service users obtained EUSS status.

**The London Borough of Lambeth** provides eight beds for non-UK nationals in dedicated accommodation, which was formerly a supported housing project. Total annual funding from the council is around £315,000. This covers all accommodation and support costs and there is no separate Housing Benefit arrangement in place.

The bedspaces accommodate homeless non-UK nationals who are addressing their immigration issues and are work-ready. All have a history of rough sleeping and most are EEA nationals, which reflects the profile of local rough sleepers. The project also accommodates non-EEA, non-UK nationals who are ready to engage

with support and likely to obtain UK immigration status.

Immigration advice is provided via Praxis and local law centres. Immigration advisors are involved in needs assessments. Thames Reach provides visiting support around employment and education, as well as discussion of move-on options. Service users with low support needs move into the private rented sector, whilst those with higher support needs and settled status can enter Lambeth's supported accommodation pathway. There is no target length of stay, reflecting that resolving immigration issues can be a lengthy process.

Lambeth has access to additional funding which enables it to place eligible service users in alternative temporary accommodation with support, until a dedicated non-UK nationals bedspace becomes available. People with low support needs are accommodated in B&Bs (utilising RSI surge accommodation, Winter Pressures and Protect and Vaccinate Funding), whilst those with high support needs can temporarily access Lambeth's supported accommodation pathway, via a spot-purchase arrangement involving RSI funding.

### **Key learning**

The examples of City of London and Lambeth indicate it is possible to provide a dedicated accommodation resource for non-UK nationals sleeping rough, with successful outcomes and at relatively low cost. Having an accommodation base facilitates service users' take up of support and this helps them resolve their immigration issues, move into work and longer-term housing. There are also likely additional benefits for local authorities around reducing substance misuse and anti-social behaviour associated with rough sleeping.

Carrying out a comprehensive needs assessment when service users join the service and which includes input from immigration advisers, is essential to identify their support needs and immigration status. Wraparound support is also needed, as many service users, including those identified as work-ready, may have additional needs relating to their health and/or substance misuse and which only fully emerge after move-in.

Adopting a multi-agency casework approach, which involves support services and local commissioners, is effective in identifying barriers to service delivery and can help improve move-on outcomes. Linking to the local authority's supported accommodation pathway provides an effective move-on route for service users with higher support needs.

Having access to additional flexible bedspaces, including B&B accommodation and spot-purchasing arrangements within supported housing projects, creates a valued pathway which enables non-UK nationals to begin their journey out of homelessness at an earlier point.

## **2. Voluntary reconnection**

For some non-UK nationals facing homelessness, returning to their country of origin will be (or become) their desired or best option. Reconnection services aim to support homeless non-UK nationals to return safely and voluntarily. A reconnection service is by definition supportive and as such includes a number of related elements: immigration advice to understand rights and entitlements; sustainable accommodation in the destination country and support to link in with welfare, health and wellbeing services there.

As locally commissioned services, they are distinct from the Home Office Voluntary Return Service. The Home Office service provides more limited support options, focusing on financial assistance and travel arrangements, and only provides reintegration support in specific cases.

**Routes Home** is a pan-London service managed by St Mungo's. Funding comes via the Greater London Authority and central Government and totals around £820,000 per annum. There is also a small budget for UK-based residential detox, which is typically not available to people with restricted eligibility.

Routes Home works with verified rough sleepers of all nationalities, although currently 85-90% are EEA nationals. Referrals come mainly via outreach, but also day centres, Turnaround Hubs and hospital discharge teams.

Reconnection is one of three strands offered by Routes Home - alongside independent immigration advice and employment support. Routes Home's in-depth needs assessment and options appraisal with service users helps them make an informed decision about reconnection.

Once service users have agreed to return home, staff work with them to develop a safe travel and reconnection plan. As well as accommodation, this includes making links with welfare, health and wellbeing support in the individual's home country. Whilst they are awaiting reconnection, service users can access accommodation and welfare interventions. For people with low support needs this involves Routes Home accommodation in South London, whilst those with higher support needs are accommodated in reconnection beds in St Mungo's hostels across London. Routes Home staff may accompany service users with higher support needs on flights home.

### **What works?**

#### ***Informed, timely and holistic intervention***

A support-led model and discussion of a range of options are crucial to maintaining a solutions-oriented approach and to ensuring that leaving the UK is not routinely seen as the only option, when others might exist. The involvement of independent immigration advice and employing staff with language skills both help to ensure informed decisions are taken. Routes Home's offer of accommodation was also considered invaluable to help people stabilise and understand the choices they are making. This is particularly important given that taking up a reconnection offer may prevent a person from returning to the UK in the future.

It is important to make the reconnection offer at the most timely moment, informed by the pace, preferences and 'headspace' of the individual. Often, an individual may prefer to try other routes first, but may return to the option of reconnection at a later stage.

#### ***Reintegration***

Liaising directly with embassies and consulates to obtain ID and travel documents increases the likelihood that reconnection will be successful. Developing a reintegration plan for the destination country provides some continuity, ensuring service users have suitable accommodation and are linked to health and/or social services and friends/family, if possible. Having a budget for detox in the UK makes it easier for service users to access rehab in their home country. Accompanying service users with higher support needs on the flight assists with in-person handover to relevant support.

### **Challenges**

The variation in the quality and availability of homelessness services internationally, combined with the absence of long-term follow up on outcomes for those reconnected, drive concerns for some people around reconnection practices and what 'successful' reconnection truly looks like. The likelihood of facing difficulties re-entering the UK, especially post-Brexit, complicates the decision to take up a reconnection offer. Some people sleeping rough fear the stigma of returning to their countries of origin without having 'made a success' of life in the UK, while others are keenly aware that the support services or accommodation they need may not be available.

Whilst services like Routes Home offer a positive example to learn from, further research will be needed to explore an optimal model.

### 3. Early immigration advice for homelessness prevention

Praxis provides immigration advice and other specialist support to migrants and refugees in the UK.

Since 2018, Praxis has managed the **Hospital Immigration Support Service**. This seeks to prevent homelessness and rough sleeping for vulnerable homeless people with immigration issues and no recourse to public funds (NRPF) who are receiving inpatient care at London hospitals supported by Pathway teams. The service is funded by Greater London Authority and the London Borough of Newham.

Support is via a full-time OISC (Office of the Immigration Services Commissioner) Level 2 advisor. The advisor assesses referrals from the Pathway team, provides outreach support and attends multi-disciplinary team meetings. Language support is provided by Praxis' in-house interpreting service and Language Line (funded by London Councils). The service also provides training and second-tier advice to clinical and other hospital staff.

Most work involves immigration advice, but the service also provides Section 98/Section 95 homelessness support to asylum seekers, support around Article 8 Human Rights Act and Care Act cases and to EEA nationals awaiting EUSS decisions. The advisor's involvement also helps identify existing immigration applications and speeds up the evidence-gathering process.

To date, advice has focused on supporting service users at the point of discharge. However, from May 2022, there will be a dedicated caseworker. This will enable the service to provide on-going support, including representation and applications to relevant services.

#### Key learning

Providing specialist advice within a multidisciplinary setting enables service users to resolve immigration issues and to access accommodation and support they need, including from social services. This ensures their safe discharge from hospital and also has benefits for the NHS in terms of preventing delayed discharge and repeat presentations. The hospital setting creates a degree of stability for service users and is an opportunity to advise people who have little or no other contact with support services.

Early needs assessment is essential to clarify service users' immigration status/eligibility. Pathway's multi-disciplinary meetings ensure immigration expertise is shared amongst the team and that all information needed for immigration applications is gathered in a timely way.

A dedicated caseworker role helps ensure continuity of support for service users after they have been discharged from hospital. It also enhances capacity for relationship building and information-gathering with clinical staff, to support Care Act and other applications on medical/health-related grounds.

The **No Recourse Early Action Model (NOREAM)** is currently being piloted in Hackney and seeks to improve outcomes for children and families with restricted eligibility, in partnership with London Borough of Hackney Children's Services.<sup>1</sup>

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1. For more information, see <https://www.noream.org/contact>

NOREAM identifies families at risk of homelessness at an early point and aims to provide a holistic targeted intervention, which prevents their need for more intensive support later on. The team includes social workers, a housing officer and an immigration advisor. The model involves outreach to encourage engagement with local authority support, social worker sessions to identify needs and refer to other specialties or services.

As NOREAM workers do not offer statutory support, there is no legal obligation to report undocumented families to the Home Office, which was seen to encourage trust and engagement with the project.<sup>2</sup> Despite this, early reflections from practitioners show that undocumented migrants were less represented among clients than expected, indicating potential persistent barriers to reaching this group.<sup>3</sup>

Multi-agency work is at the heart of the approach and includes monthly conferences involving Adult Services and Housing staff to advise on complex cases. The multi-agency approach is also intended to develop a transferable and scalable approach to 'migrant aware' practice for families with NRPF and to develop interdisciplinary practice within the borough.

Outcomes will be measured in terms of changes in adults' and children's reported wellbeing, access to education, GP and leisure services, immigration advice, and financial security.

## 4. Co-production with non-UK nationals with experience of homelessness

Legislative Theatre is a coproduction approach, which originated from Theatre of the Oppressed, first created in Brazil by Augusto Boal. The model uses theatre to engage community members alongside policy-makers in shaping policy decisions, including homelessness. It has been used to positive effect as part of the development of local homelessness strategies in Haringey and Greater Manchester (GM).

People with lived experience are recruited and trained to become facilitators or actors via homelessness organisations/networks and paid for their time. Local authority staff may work alongside facilitators/actors and access to interpreters is provided for facilitators who do not speak English easily.

In Manchester, a Legislative Theatre practitioner collaborated with GM Homelessness Action Network, Street Support Network and GMCA's homelessness team. This led to three plays, focusing on multiple disadvantage, funding and commissioning and structural racism in homelessness services. For the third strand, the partnership collaborated with the SAWN Network, working with a group of 12 migrant women, mainly from African countries. The performance depicted experiences of racism within social services, including discrimination within temporary accommodation, leading to harassment and unsafe living environments.

2. Ott, E., Albers, B., Bonin, E. & Mann, G. (2021) Pilot evaluation of the No Recourse to Early Action Model. London: What Works for Children's Social Care. Available at: <https://whatworks-csc.org.uk/wp-content/uploads/Pilot-Protocol-NOREAM.pdf>

3. Begum, K., Flint, T., Hunt, G., Jolly, A. & Stronger, A. (2022). Reflecting on Early Help with Migrant Families: A View from Practice. *Practice* 34(3), 197-205.

All recommendations from the plays were included in GM's most recent Homelessness Prevention Strategy. These include: providing anti-racism training to frontline staff across Greater Manchester, to address structural racism within systems and services; prioritising recruitment of a diverse and culturally competent workforce, with a more inclusive recruitment process; safeguarding children within the asylum process and providing access to good quality legal advice from the start. Many have already been acted on, including coproduced job descriptions.

In Haringey, the legislative theatre process involved Katy Rubin, Legislative Theatre practitioner and Arts & Homelessness International (AHI). A core team of council staff and people with lived experience of homelessness and rough sleeping worked to create original plays based on their real experiences. The performance and session were used as a starting point for co-creating Haringey's new Rough Sleeping Strategy. Policy proposals were developed through the improvisation of scenes by audience members. These were then voted on and policymakers in the audience were asked to make commitments based on these policy proposals.

The process led to a number of specific Strategy recommendations, which included: increasing representation of people with lived experience in homelessness services and forums; developing local hubs and other integrated services, which offer in-person and online support; improving the response for homeless people with NRPF via online resources and a local NRPF accommodation and support pathway.

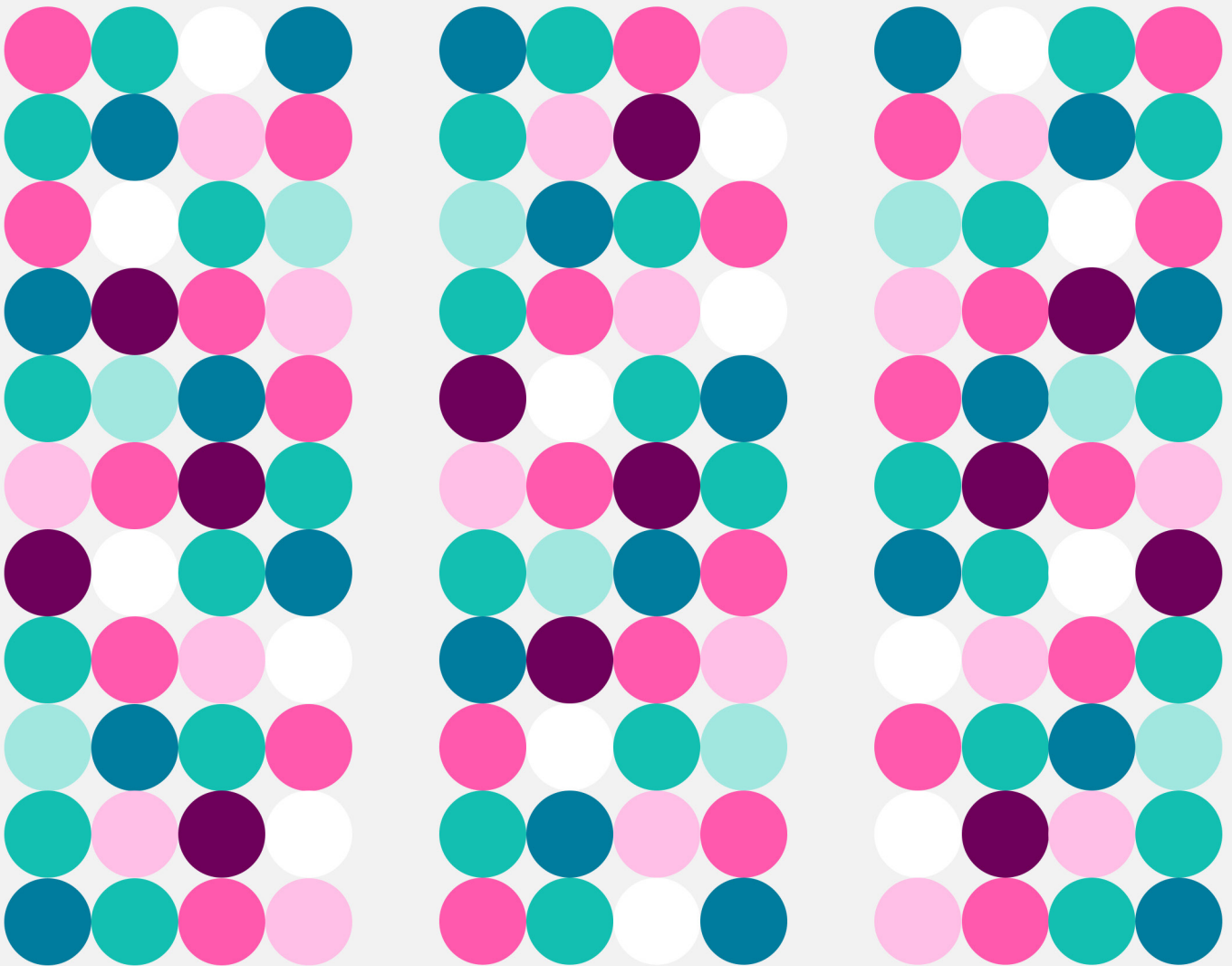
### **Key learning**

The fully co-produced nature of Legislative Theatre builds trust with vulnerable communities and encourages their participation. This is particularly important for non-UK nationals, who often face additional barriers to engaging with the system, including discrimination and structural racism.

The shift in power balance between people with lived experience and homelessness professionals, ensures people with lived experience are framing the problems and generating the proposals. This format delivers more equitable policies and enables local authorities to see new perspectives and new ways of working. This potentially creates a big impact, although the number of facilitators/actors is relatively small.

The Legislative Theatre process requires significant commitment from people with lived experience and inevitably, some participants do not feel able to complete the process. This is one reason why paying people with lived experience is important, to place a value on their time and contribution. The experiences shared by participants may include sensitive information. It is important that they feel safe to do this and that confidentiality is maintained at all times, with particular consideration for sensitivities related to immigration status.

The approach is replicable in other local authority services and homelessness organisations. For example, facilitators in Greater Manchester have designed theatre-led training to improve cultural appropriateness within trauma-informed practice and are delivering this in several local authorities in the north west of England.



# Appendix 3

Guidance note: Public funds and accommodation for rough sleepers with restricted eligibility

Briefing by Derek Bernardi, Camden Community Law Centre  
Produced with the support of the Law Centres Network on behalf of Homeless Link.



## Appendix 3

### Introduction

Providing accommodation to rough sleepers with restricted eligibility remains a significant challenge for local authorities. This guidance will explore the types of funds that are unavailable to such persons, and propose options available to authorities who wish to continue to support this client group while remaining within the law.

The government has continued to emphasise its goal of ending rough sleeping by the end of this Parliament. The experience of the Everyone In scheme during the COVID-19 pandemic showed that this should be an achievable goal. However, it also demonstrated that success depends on new ways of working, and utilising broad legal powers to accommodate vulnerable groups. This reality is even more fundamental where the aim is to end rough sleeping in the long-term, and not just for a finite period.

As such, rough sleeping should not be viewed solely as a housing problem, but as a public health problem. Doing so will serve not only to take into consideration the wider context of homelessness, but will also open up previously neglected powers that can be used to accommodate people with restricted eligibility.

Several such powers have been discussed in other recent guidance<sup>1</sup>, and those powers remain important tools for authorities. The present guidance will focus on two particular powers, namely section 2B of the NHS Act 2006 and section 180 of the Housing Act 1996 which, under certain broad conditions and circumstances, allow local authorities to fund and/or provide support and accommodation to non-UK nationals with restricted or unclear eligibility for public funds.

It is hoped that this guidance will help authorities understand what funding is or may be available for accommodation, and moreover, to encourage the adoption of new models for the provision of accommodation to people with restricted or unclear access to public funds.

### Homelessness and health

The link between homelessness in general, and rough sleeping in particular, and poor health has been well documented. A 2017 report published by the Local Government Association provides several examples, including the following<sup>2</sup>:

- Up to 70 per cent of homeless young people have mental health problems, and 33 per cent self-harm.
- Common mental health issues (eg depression and anxiety) are more than twice as prevalent amongst people experiencing homelessness, and psychosis is up to 15 times as common when compared to the general population.
- Infectious diseases including hepatitis C, HIV, and tuberculosis are significantly more common amongst people experiencing homelessness.

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1. Bernardi, D. (2021) Exhaust All Options: Local authorities' powers to accommodate beyond the Housing Act 1996. London: Law Centres Network.

2. Leng, G. (2017). The Impact of Homelessness on Health: A guide for local authorities. London: Local Government Association.

- Life expectancy amongst people experiencing homelessness is 47 years, as compared 77 years for the general population.

This in turn creates a greater burden on health and social care budgets and the NHS. By preventing and alleviating homelessness, authorities can help address these problems.

## What are 'public funds'?

Public funds are defined under section 115 of the Immigration and Asylum Act 1999<sup>3</sup>, and paragraph 6 of the Immigration Rules<sup>4</sup>.

Section 115 IAA 1999 includes the following:

- Universal credit
- Income-based jobseekers' allowance
- State pension credit
- Income-related employment and support allowance
- Personal independence payment
- Attendance allowance
- Severe disablement allowance
- Carer's allowance
- Disability living allowance
- Income support
- A social fund payment
- Health in pregnancy grant
- Child benefit
- Housing benefit

Paragraph 6 of the Immigration Rules includes the above, as well as the following:

- Housing under Part VI (allocations) and Part VII (homelessness) of the Housing Act 1996, and under Part II of the Housing Act 1985
- Council tax benefit and/or a council tax reduction
- Child tax credit and working tax credit
- A discretionary payment made by a local authority under section 1 of the Localism Act 2011, not including any payment made under the Energy Rebate Scheme 2022

This is an exhaustive list of all funds that are considered public funds, and accordingly any benefit or service

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3. Immigration and Asylum Act 1999, s.115. Available at: <https://www.legislation.gov.uk/ukpga/1999/33/section/115>

4. The Immigration Rules, paragraph 6. Available at: <https://www.gov.uk/guidance/immigration-rules/immigration-rules-index>

not listed in section 115 or paragraph 6 is not a public fund for immigration purposes<sup>5</sup>.

Accordingly, the restriction on homelessness assistance applies only to assistance under Part VII Housing Act 1996, and so services provided to people experiencing homelessness outside of Part VII (and not included in the above lists) will not constitute a public fund. In local homelessness and rough sleeping settings, this could include support and accommodation provided parallel to or in advance of statutory thresholds, such as rough sleeping pathways or prevention, early help and advice in community and outreach settings, for example. However, in order to provide these services, authorities must utilise existing powers set down in statute.

## Section 2B NHS Act 2006

All local authorities have a duty to improve the health of people in their area. Where an authority determine that a particular step is appropriate to improve public health, they must take that step.<sup>6</sup> The provision of accommodation, including to persons with restricted eligibility, is a valid step to be taken under section 2B.<sup>7</sup> Additionally, authorities can provide grants or loans, for example to local homelessness charities, for that same purpose.

This power has been used during the course of the COVID-19 pandemic, most notably under the Everyone In scheme. Such decisions were made in the context of a national emergency in order to save lives. In the longer-term, it will be necessary for local authority public health departments to make such decisions, even though it would likely be housing departments who provide the accommodation.

An example of this in practice may include a public health department completing a Joint Strategic Needs Assessment (JSNA) on the topic of homelessness. A JSNA is a report that looks at the specific health and social care needs of our local population and points out areas of inequality. It helps public bodies decide what type of local services to commission. If a JSNA, or other such report, were to recommend that accommodating the local rough sleeping population would improve public health in the area, then this could justify utilising section 2B to do so.

## Section 180 Housing Act 1996

This section of the 1996 Act empowers local authorities to give assistance by way of a grant or loan to voluntary organisations concerned with homelessness or matters relating to homelessness.

The term 'voluntary organisation' is defined within section 180 as 'a body (other than a public or local authority) whose activities are not carried on for profit'. This would of course include the charitable sector. The section applies not just to organisations concerned with homelessness, but also matters relating to homelessness. The fact that both terms are used suggests that the scope is broad. This may include, for example, charities whose work addresses common needs of rough sleepers, rather than (or in addition to) homelessness directly. In other words, this section would not be restricted to organisations that already

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5. Home Office (2021) Public Funds: Migrant access to public funds, including social housing, homelessness assistance and social care, v18. London: Home Office

6. Explanatory Note to the Health and Social Care Act 2012, section 12, para 130 (referring to s.2B NHS Act 2006). Available at: <https://www.legislation.gov.uk/ukpga/2012/7/notes/division/5/1/2/2>

7. R (Ncube) v Brighton and Hove City Council [2021] EWHC 578 (Admin) at para 74. Available at: <https://www.bailii.org/ew/cases/EWHC/Admin/2021/578.html>

provide accommodation for rough sleepers.

In addition to grants and loans, section 180 lists other forms of assistance that authorities can provide to voluntary organisations. These are:

- a. permitting them to use premises belonging to the authority,
- b. making available furniture or other goods, whether by way of gift, loan or otherwise, and,
- c. making available the services of staff employed by the authority.

The section 180 power is not subject to any immigration-based restrictions, and so assistance can be provided to voluntary organisations specifically for the purpose of providing accommodation to people with restricted or unclear eligibility.

## Conclusion

As can be seen, the above powers are broad and versatile. The section 2B power is qualified in the sense that it must be linked to public health, however it should not be difficult to justify its utilisation as described above. The section 180 power includes no such justification, and so it is open to local authorities to provide such grants and loans as they see fit.

Viewed in this way, it becomes clear that authorities have at their disposal the tools needed to take increasingly progressive approaches to homelessness and rough sleeping.



Homeless Link



This document has been produced as part of a partnership project between Homeless Link and the No Accommodation Network (NACCOM) with funding from Lloyds Bank Foundation for England and Wales.



### **About Us**

Homeless Link is the national membership charity for frontline homelessness services. We work to improve services through research, guidance and learning, and campaign for policy change that will ensure everyone has a place to call home and the support they need to keep it.

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