

SWEP and winter provision toolkit

Practical guidance for local
authorities and providers of SWEP
and winter provision

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Why is winter provision/SWEP accommodation needed?

There is no universal offer of accommodation mandated for people sleeping rough in England. The provision of accommodation from a council is not a statutory duty unless a person is considered homeless and in priority need of assistance, even during cold or severe weather when conditions may be life threatening. Despite this, there is a widely recognised humanitarian obligation on LAs to do all they can to prevent deaths and serious harm on the streets, and for their partners and the public to support these efforts. This has meant that for many years, LAs and local partners including faith and community groups, work together to provide emergency provision during periods of cold or severe weather. This can sometimes be limited to provision of support only in severe weather but is increasingly offered throughout the winter period. Winter and severe weather beds can be 'commissioned' and funded by the LA, but in other areas they are funded in other ways.

There is no single definition of severe weather for the purposes of triggering emergency accommodation – any conditions that increase the risk of harm to people sleeping rough can be classed as severe. This includes extreme cold, wind, snow, rain and heat. With climate change making weather more and more unpredictable, LAs should be prepared for extreme weather all-year round.¹

Cold: extreme cold can cause serious health problems and death for those who are exposed overnight or for long periods of time. Historically, SWEP provision was triggered when the forecast was zero degrees or below for three days. It is now best practice to take a common-sense approach, where any forecast approaching zero is considered; the impact of rain, snow and wind chill are taken into account, and the 'feels like' temperature is checked, along with conditions underfoot (e.g., ice). There are benefits to opening provision for temperatures that are above freezing as this can be just as harmful, and for maintaining this provision over longer periods.

Wind: high winds can lead to an increased risk of injury through uprooted trees, falling walls, dislodged pieces of roofing, and other debris. LAs should consider the location of local rough sleeping sites and the potential for harm from gale-force winds. This is a particular issue for rural areas where people are, for example, sleeping in tents.

Rain: heavy or sudden prolonged rain can lead to flooding and landslides. People sleeping under bridges, on riverbanks, or near the sea, streams or canals may be

¹ Watch our webinar on responding to severe and extreme weather: <https://vimeo.com/990148184?share=copy>

particularly at risk, but there may be less obvious flood risks, for example, drains or gullies. Standing water, puddles and flooding may continue to be a risk after rainfall has stopped. As well as increased risk of drowning, being stuck in the rain and being unable to change out of wet clothes/shoes afterwards can lead to a range of health problems, including trench-foot. There is also an increased risk of loss or damage to belongings such as identification documents.

Heatwaves: People experiencing homelessness are at a heightened risk of developing heat-related illnesses due their inability to keep cool (owing to a lack of shelter) and reduced access to showers and drinking water. In their 'Dying Homeless Project'², The Museum of Homelessness found that there were actually higher numbers of deaths of individuals in the summer, despite the common belief that more people die in the winter months. Needs are likely to be more urgent during daylight hours, so a different approach to SWEP may be needed.³

In addition to the direct risks associated with severe weather, the actions people might take to protect themselves from severe weather can also increase the risk of harm and death. People might find cover in unsafe places e.g., large, lidded bins, which can result in crush injuries or death if the bin is emptied. They might enter buildings or properties without permission, including derelict structures, with associated risks around fire safety and building collapse. People may also increase their substance use as a coping mechanism during bad weather. Attempting to keep safe and dry in bad weather increases the risk of death and injury to people without shelter.

What is winter provision?

In many areas, organisations operate emergency access accommodation throughout the winter period. These are often operated continuously between November and March, are commonly run by community or faith-based groups, and usually make extensive use of volunteers. Some LAs directly commission or work in partnership with voluntary agencies to provide extended winter provision.

These winter accommodation models in the past have tended to be 'night shelters', usually involving dormitory style rooms with camp beds either in a fixed location or 'roaming' models where several different venues are used. These models are usually open only to provide overnight accommodation and with varying degrees of support

² <https://museumofhomelessness.org/dhp>

³ Read our guidance on supporting individuals during hot weather: <https://homeless.org.uk/knowledge-hub/hot-weather-sweep/>

and help with move on. Access, referral routes, and eligibility criteria vary, but tend towards an 'everyone in' approach ensuring that anyone on the streets can access regardless of immigration status and entitlements.

This provision has played a significant role in minimising harm and death to people who might otherwise sleep rough and have helped engage people whom other services have struggled to engage. Due in part to Covid-19, many providers of winter shelters have been changing their approach; offering more support, extended opening times, move on support pathways, and many have been remodelled to include single room accommodation. The overwhelming majority of winter projects last winter consisted of single room accommodation and there are increasing numbers of projects looking to permanently remodel away from shared sleeping spaces.

What is SWEP (Severe Weather Emergency Protocol)?

Having adequate winter provision helps minimise the need for additional emergency accommodation in periods of severe weather. However, every LA should still have a Severe Weather Emergency Protocol (SWEP) which is used when severe weather is forecast. SWEP is a locally agreed procedure and offer, followed to minimise harm or death to anyone who might be sleeping rough, through the provision of emergency accommodation to support someone off the streets immediately. A local SWEP document is often published on the LA website or shared with local agencies.

Protocols should be flexible based on empathy for people sleeping rough in severe weather, rather than sticking to a fixed approach. LAs should consider factors such as wind chill, snow coverage and duration of extreme weather when considering provision. The protocol should aim to prevent deaths on the streets so if this means increasing the number of beds and opening for longer, the LA should do everything it can to facilitate SWEP and prevent harm. The protocol should be implemented (i.e., accommodation made available) on the first night when the agreed activation trigger is reached.

Historically, the minimum SWEP response used by many LAs was a forecast of zero degrees, or below zero, for three consecutive nights. The three-night guideline was an attempt to define 'severe weather', but a common-sense approach is now widely adopted as standard practice, where SWEP triggers take into account weather warnings, near-freezing temperatures, rain, snow, wind chill, gales or heat.

Homeless Link

In areas where rough sleeping is not always an issue, including rural areas or where numbers are very low, there should still be a SWEP plan to ensure suitable accommodation can be provided quickly should the need arise. This could be through delivering SWEP in partnership with neighbouring authorities.

The LA should allocate responsibility to one of its team for monitoring the weather forecast (agree to use a single forecast e.g., Met Office), activating SWEP, and ensuring suitable provision is available. The UK Health Security Agency (UKHSA) has set up a 'Cold-Health Alert' system, where you can sign up to receive alerts⁴ when the weather conditions have the potential to impact the health and wellbeing of the population.⁵ A rough sleeping or homelessness co-ordinator is the most likely person to take the lead on implementing SWEP.

As with winter provision, SWEP operates outside usual eligibility and entitlement frameworks that govern access to housing. It should be accessible to everyone, including all those who may otherwise be excluded from service; people with restrictions due to immigration status, people who may have previously been excluded or banned from services, and those with no local connection.

Targeting individuals should be on the basis of need, not housing entitlement. Where possible, LAs should work closely with outreach teams, day centres, police/community safety or other agencies supporting people experiencing homelessness, to identify and target people known to be sleeping rough.

Verification (confirming that someone has been seen sleeping rough) is sometimes used to ensure that people who are most in need are prioritised for accommodation, however a flexible approach should be adopted.⁶ People should not be sent back onto the streets to be verified.⁷ Bear in mind that individuals often have good reasons for concealing their sleep sites, for example, due to vulnerability to assault or fears of enforcement, and so **verification of rough sleeping should not be used as a barrier to offering SWEP.**

⁴ Sign up to receive alerts here: <https://www.gov.uk/guidance/weather-health-alerting-system>

⁵ Read the UKHSA's guidance on supporting vulnerable people before and during cold weather: <https://www.gov.uk/government/publications/cold-weather-and-health-supporting-vulnerable-people/supporting-vulnerable-people-before-and-during-cold-weather-people-homeless-and-sleeping-rough#aboutcha>

⁶ Read the findings from our focus group regarding rough sleeping verification: <https://homeless.org.uk/knowledge-hub/rough-sleeping-verification/>

⁷ Read our principles for rough sleeping outreach: <https://homeless.org.uk/knowledge-hub/principles-for-rough-sleeping-outreach/>

Planning ahead

- Winter and SWEP provision plans should be agreed by the end of September (or as soon as possible) and should be reviewed annually after each winter.
- Provisions should be planned by each LA in partnership with voluntary, faith, and community partners.
- LAs should use multi-agency meetings and forums to plan SWEP and winter provision. Key stakeholders will include: Housing Options, other LA teams (for example Community Safety, Public Health and Adult Social Care), local housing providers, people with lived experience, outreach teams, health services, police, churches, faith groups, other charities & community groups and day centres.
- Work with other local authorities/sub-regionally to coordinate provision, including joint commissioning of support teams.
- Keep updated about who is sleeping rough and their support needs and accommodation preferences.
- Monitor temperatures and communicate with partners to ensure provision can be implemented quickly.
- Encourage multi-agency communication daily in order to coordinate SWEP so that everyone can access provision – this could be daily emails and phone calls about activation and options.

Choosing an accommodation model this winter

Single occupancy accommodation options

As well as providing a safer environment which reduces the likelihood of transmitting Covid-19 and other communicable illnesses, single occupancy options provide more privacy and safety for specific groups, such as women and LGBTQ+ people. They are generally preferred by people experiencing homelessness, allow for greater engagement and more personalised support, and appear to be more successful in achieving longer term outcomes for people.

Whilst it may not always be achievable, LAs and providers should make every effort to provide self-contained accommodation or single room options for people sleeping rough. Models could include:

- **B&B and hotel rooms** – either used on a nightly booking arrangement or through a block booking arrangement.
- **Privately rented houses and flats** that have been purchased, leased, or rented by a service provider and used as shared houses or Houses in Multiple

Occupation (HMOs) where guests have use of their own room, sometimes an en-suite room, or with some sharing of facilities such as bathroom and kitchen.

- **Hostels and supported accommodation** allocating specific rooms or areas including 'crash pads' for emergency use.
- **Temporary or modular structures such as 'pods'** which have been placed on sites owned by service providers or LA's, providing short term self-contained units.
- **Vacant council buildings** being temporarily allocated as emergency accommodation which are either self-contained or adapted as shared houses with single bedrooms.
- **Student accommodation**
- **'Nightstop' or hosting models** where guests have their own bedroom living in a house with a host.

Providing more dispersed and self-contained accommodation options is likely to mean that additional support and resources (such as food) will need to be mobilised to meet the needs of people being housed. Working with partner agencies to adapt existing provision or create new support packages will be essential.

When planning SWEP and/or winter provision, agencies should check that they have suitable accommodation for different groups e.g., women, couples, young people, and people with dogs⁸. In any type of provision, support should be provided to assist people to meet their needs and achieve positive move-on if possible.

Communal accommodation models

MHCLG's operating principles for night shelters⁹, updated in November 2023, prioritise the use of single room accommodation options where possible.

The Government (and Homeless Link) therefore continue to encourage the provision of self-contained or single room provision as the preferred model. However, the Government acknowledges that there may be 'limited occasions' where a communal model may be put into place to prevent people rough sleeping.

The operating principles recommend that where there are plans for communal sleeping models, advice is sought from the local Director of Public Health prior to opening, so that

⁸ StreetVet is a charity delivering free essential veterinary care and services to the pets of people experiencing homelessness in multiple locations around the UK: <https://www.streetvet.co.uk/>

⁹ <https://www.gov.uk/guidance/operating-principles-for-night-shelters>

advice can be provided on how to keep people safe from communicable diseases in such settings.

Insurance

When using spaces for emergency/winter shelter accommodation, providers should check that their insurance policy covers the activity in the space being used. Most organisations providing severe weather interventions already work with people sleeping rough, so existing insurance is likely to be adequate. Unless there is change of use with regards to a building or space, changing your policy may not be necessary. If you are still planning on using a church or a town hall you may need to check what, if any, restrictions your policy has. Whilst rare, serious incidents can happen in temporary provision, so make sure you are adequately covered. Most companies can insure spaces relatively quickly, so this need not be a barrier to offering support.

Covid-19 & other public health risks

People experiencing homelessness are likely to have underlying health needs and may be more vulnerable to infection. Public health risks should be considered by all service providers and particularly where there are shared living spaces, or if communal sleeping models are being used due to the high risk of transmission in shared air spaces.

Although there are no longer specific regulations in place around Covid-19¹⁰, it is recommended that night shelters apply simple principles to help them stay in control of infection:

- Ensure there is adequate ventilation in communal spaces by uncovering vents and opening doors and windows.
- Guests, staff, and volunteers should wash their hands regularly.
- Accommodation providers should be prepared to support social distancing for those who wish to do so and have face masks for those who wish to wear them.

If someone tests positive for Covid-19, they should follow guidance for those with respiratory symptoms. It is recommended that providers support guests and staff testing positive to self-isolate. There should be clear arrangements made for how the provider will enable self-isolation where required.

¹⁰ See the UKHSA's suite of guidance resources on Covid-19: <https://www.gov.uk/government/collections/coronavirus-covid-19-list-of-guidance>

From April 2024, the UKHSA will no longer supply free Covid-19 Lateral Flow Device (LFD) tests to settings in England for use in the event of a suspected outbreak of Covid-19. (An outbreak is defined as 2 or more linked cases of Covid-19 within 14 days.) The only exception to this is for [individuals who are eligible for Covid-19 treatment](#) who will continue to be eligible for free symptomatic tests.¹¹ Staff should identify service users who are eligible for Covid-19 treatments and ensure they can access Covid-19 testing if required.

It is advisable to maintain a positive relationship with your local Director of Public Health who can provide expert advice to ensure that everyone accessing your accommodation provision stays healthy and is protected from threats to their health.

Health impacts of cold weather

Exposure to cold weather can include the risk of hypothermia, especially for those with a cognitive impairment (including as a result of dementia, traumatic brain injury or from drug and alcohol use) who are less able to recognise that they feel cold.¹² Other health impacts may include:

- Accidents and injury (e.g., by slipping on ice during cold conditions).
- Risk of delayed medical care as severe and/or deteriorating health may be dismissed as sleeping or intoxication.
- Air pollution tends to worsen on very cold, clear days, which can in turn increase the risk of respiratory problems.

More information on the health effects from cold weather can be found in the UKHSA's Adverse Weather & Health Plan.¹³ The Government has also published a 'Cold Health Alert' (CHA) action card¹⁴ to support services to prepare for and respond effectively to cold weather, along with the UKHSA's toolkit to help local organisation plan and deliver warm spaces.¹⁵

¹¹ For more information, including how to order tests, see Homeless Link's Covid-19 information webpage:

<https://homeless.org.uk/knowledge-hub/covid-19-general-resources/>

¹² <https://www.gov.uk/government/publications/cold-weather-and-health-supporting-vulnerable-people/supporting-vulnerable-people-before-and-during-cold-weather-people-homeless-and-sleeping-rough#health-impacts-of-cold-weather>

¹³ <https://www.gov.uk/government/publications/adverse-weather-and-health-plan>

¹⁴ <https://www.gov.uk/government/publications/cold-weather-plan-action-cards-for-cold-weather-alert-service/cold-health-alert-action-card-for-health-and-social-care-providers>

¹⁵ <https://www.gov.uk/government/publications/warm-spaces-in-england-an-evidence-review-and-toolkit/warm-spaces-in-england-an-evidence-review-and-toolkit-for-local-organisations>

- Liaise with Public Health and other health colleagues to reduce the risks posed by exposure to cold weather.
- Link with local GPs or clinics to offer people ways to manage their health; people can be referred to GPs as temporary patients .
- NHS cards can be created to help people access GP registration¹⁶.
- Arrange for health professionals to visit individuals in a proactive and responsive way to ensure health is monitored and support is provided when needed.

Funding options

There are a number of possible options for funding emergency accommodation which will depend on the model and scale of provision, the extent of volunteer input, and other non-financial support.

- Consider how far the provision can be funded by the LA (or all LAs if it's a cross-borough model). This could include the use of grants including the Rough Sleeper Initiative (RSI).
- The 'Night Shelter Transformation Fund'¹⁷ was launched in July 2022 providing £10m funding across three years to transform communal provision.
- Some projects can claim Housing Benefit¹⁸ for the accommodation provision. Where this is possible, organisations should work closely with the local Housing Benefit team to ensure applications are processed quickly.

Using a diverse range of funding streams can make a service more resilient to the threat of cuts, and LA funding is often supplemented by voluntary donations and organisational funding streams. Services can also appeal to businesses and members of the public for 'in kind' donations; social media can be useful for this. These resources can be maximised by advertising for specific items that are needed such as toiletries, food, and travel vouchers. It is important to start putting plans in place for funding early, well before the winter period, and often as soon as the previous year's services have closed.

¹⁶ See <https://www.england.nhs.uk/blog/everyone-is-welcome-in-general-practice/>

¹⁷ <https://homeless.org.uk/what-we-do/grants-and-investment/the-night-shelter-transformation-fund-2023/>

¹⁸ Watch our webinar on Housing Benefit and supported accommodation: <https://homeless.org.uk/knowledge-hub/supported-housing-and-housing-benefit/>

Identifying need

Planning should be based on current local need, including where there may be an unexpected demand/exceptionally severe weather. Use available data sources such as intelligence from outreach and other partners (such as street pastors and park wardens), CHAIN or another database of local rough sleeping intelligence, and StreetLink referrals. Speak to people sleeping rough and seek to co-produce provision, as this is likely to increase take-up and positive outcomes¹⁹. You will need to know not only numbers, but support needs, types of housing and support that will be suitable, and how much provision may be needed for those with specific demographics e.g., women, young people, people with restricted eligibility, couples, LGBTQ+ people and people with dogs.

Recording, monitoring & sharing data

Capturing the demographic and support needs of individuals accessing SWEP and extended winter provision helps LAs and providers to plan effectively for the future. Recording information can be tricky when the service is being delivered quickly, but sharing information between services can save time and resources. LAs and their partners are each responsible for ensuring they understand and comply with data protection legislation.²⁰

Relevant information about a person's situation can help identify and respond to support needs, ensure future provision is effective, and monitor whether current provision is serving people equally. Bear in mind that some people may be unwilling to disclose much information initially and this should not automatically exclude them from provision. Keep data collection under review to ensure it is relevant but where possible, record²¹:

- Names, contact numbers and emails
- Demographic data: gender identity, age/date of birth, nationality, ethnicity
- Primary support needs
- Length of time sleeping rough
- Previous contact with services, including past use of SWEP/winter shelters

¹⁹ <https://homeless.org.uk/knowledge-hub/co-production-toolkit/>

²⁰ See our resources on GDPR: <https://homeless.org.uk/search/?q=gdpr>

²¹ A template monitoring form and tool produced some years ago may still be useful:

<https://homeless.org.uk/knowledge-hub/guidance-on-cold-weather-provision-swep-and-heatwaves/>

- Where clients move on to when they leave e.g., return to the streets, positive move on etc.

Ideally there will be regular contact from the SWEP Coordinator in order to engage people, including those placed in B&B, in order to find positive move on and to ensure individuals don't 'fall between the gaps'. Coordinators must ensure that nobody is placed and then forgotten, and that there are procedures for closing SWEP cases and recording outcomes. Accountability for checking welfare and move on should rest with a named person or team, if not with the coordinator themselves.

Communication

Simple and effective communication is essential. If SWEP is going to open, this information needs to be shared quickly and as widely as possible, for example, via the website and social media channels of the LA and partners, through local media and other platforms e.g., digital displays at transport hubs or areas of high footfall. There is little point in a LA activating SWEP if it's not communicated effectively. Referral routes should be shared with police, outreach, hostels, and other teams/services who may be in touch with people sleeping rough. If it isn't possible to publicise the address of SWEP provision, ensure the referral route/point of contact is publicised (e.g., via Housing Options or support providers), plus 'out of hours' arrangements.

Bear in mind that staff from other sectors may need more information to understand what is being offered and who it is intended for, to reduce the risk of inappropriate referrals. Hospitals, police, and social service teams should be clear about when and how they can make referrals.

The public should be made aware of StreetLink²², so that referrals can be made alerting LAs about people seen sleeping rough in their area. You could also advertise a local telephone number and a statement along the lines of '*No-one needs to sleep rough - [insert Local Authority name] will ensure everyone has access to shelter. If you are concerned, visit the StreetLink website.*' A single referral point is easier to disseminate than details of different arrangements, especially if your SWEP provision is spread across several providers. Use local newspapers, social media, and email networks to communicate with as many people as possible.

²² <https://thestreetlink.org.uk/>

Logistics

Project logistics, such as when services will open and close, when people can be booked in, and how people can be referred, need to be planned well in advance of the winter months. Clear procedures, written in plain English, should be put in place, and communicated effectively to staff, volunteers, partner organisations and potential guests. A single point of contact or coordinating team can play a vital role in making best use of resources and getting people into SWEP quickly and safely. Consider how people will access SWEP out of hours and where the access point will be located – wherever possible, avoid people having to wait for outreach teams to find them.

If using communal accommodation, open services late afternoon/early evening to provide more time for booking in, risk assessment and support work. If possible, complete booking in processes with people earlier in the day, to reduce delays and frustrations at night. Later check-out times, with links/transport to move-on accommodation or other services increase your opportunities to engage people with support, as well as reducing the risk of disruption to the neighbourhood if groups leave without anywhere to go. Causing disruption or disturbance to neighbours could affect planning permission for future provision, so attention should be given to how the service will manage the times when people are entering and exiting the building and work out how to minimise any negative impact.

While policies and procedures should be in place, try to be flexible – it can be difficult for people who are rough sleeping to follow procedures, especially if it means travelling to appointments at fixed times. Staff should make decisions based on assessment of need and risk, with prevention of harm as a priority.

Top tips:

- Don't forget the essentials: catering, bedding, laundry etc.
- Introduce daytime booking-in slots so that staff can fully assess and explain how the service will work.
- Stay open until Monday (if SWEP is activated on a Friday) to improve coordination with other support services
- Fund travel for people to access the accommodation provision to encourage take-up.

Support and move-on

Many individuals accessing SWEP/winter provision may have additional support needs as well as their immediate need for shelter. Accommodation should be linked to support, either on-site or via a partner agency. It may be that staff from other services can come to the accommodation provision to engage with people during SWEP to avoid people having to visit external services.

Support might include:

- Access to move-on accommodation
- Physical healthcare
- Mental Health support
- Substance use services
- Benefits advice
- Employment/education
- Immigration advice
- Creative/leisure activities.

It is good practice to listen to what the individual themselves wants and to recognise and build on their strengths as part of working collaboratively to solve immediate problems.²³ SWEP/winter provision often provides an opportunity to engage individuals who have been reluctant to accept support in the past, or people who are new to the streets, where a connection with services can avoid their situation getting worse. Support should be provided by experienced staff with a range of flexible options offered.

While individuals should always be encouraged to accept the support that is provided, this should not be a condition of accessing accommodation. Some people may not feel ready to accept support, or the support offer might not be right for them, and this should be respected. The priority is to reduce the risk of immediate harm in severe weather. Continue to offer support over time, as people may become ready for change later on. It is good practice to have a lead worker for people with the most complex needs, to build a strong relationship with the individual and navigate them through services and systems that can be bewildering.²⁴

²³ See our resources on strength-based practice: <https://homeless.org.uk/knowledge-hub/being-strengths-based/>

²⁴ Read our practice development tool for being trauma-informed: <https://homeless.org.uk/knowledge-hub/how-to-make-your-homelessness-service-trauma-informed/>

Staffing and volunteers

Services need committed and trained teams who are able to work flexibly and who have a good knowledge of the homelessness sector. A combination of paid staff and volunteers often works best to respond to the unpredictable nature of SWEP and extended winter projects.

- Professional boundaries training²⁵ is essential for volunteers. Training should also cover areas such as safeguarding²⁶, effective communication and de-escalation of challenging behaviour²⁷, risk assessment, mental health, and drug and alcohol use. A range of free webinar recordings on different topics can be found on our knowledge hub²⁸ as well as free bitesize E-Learning²⁹.
- Try to utilise volunteers' skills appropriately and offer a range of tasks according to levels of experience and skills. Tasks for less experienced volunteers could include cooking, cleaning, sorting out bedding, providing social and well-being activities.
- If volunteers are to carry out any one-to-one support, they should have a Disclosure and Barring Service (DBS) check³⁰ which typically requires a longer lead-in time, but DBS checks won't be necessary for every volunteer.
- Actively recruit volunteers with lived experience of homelessness and consider diversifying your team (e.g., gender, ethnicity, sexuality, age, languages) to improve service provision.
- Volunteers should not be put at risk. A clear induction, supervision³¹ and support pathway should be put in place so that they can raise concerns and develop their skills effectively. There should be simple protocols for responding to incidents, covering on-call access where experienced staff are not present, and contact details for external agencies.

²⁵ <https://homeless.org.uk/team-training-courses/professional-boundaries/>

²⁶ Access our free bitesize E-Learning on safeguarding: <https://homeless.org.uk/knowledge-hub/bitesize-learning-multiple-and-complex-needs/>

²⁷ Access our free bitesize E-Learning on managing challenging behaviour: <https://homeless.org.uk/knowledge-hub/bitesize-learning-managing-bitesize-behaviour/>

²⁸ <https://homeless.org.uk/knowledge-hub/?types=webinar>

²⁹ <https://homeless.org.uk/news/free-online-training-from-homeless-link/>

³⁰ <https://homeless.org.uk/knowledge-hub/dbs-checks-in-recruitment/>

³¹ Read our guidance on Psychologically Informed Management, including briefing on supervisions and inductions: <https://homeless.org.uk/knowledge-hub/psychologically-informed-management/>

For more information on supporting volunteers, please see our resources³². We also have a leaflet to print and give out to new and existing volunteers who will be involved in rough sleeping outreach teams, [downloadable here](#).

People refusing shelter

Services regularly report difficulties in persuading some people to access accommodation, even during extremely cold weather. There are a range of reasons why people refuse and, ultimately, individuals with capacity may make choices that other people find hard to understand. At the same time, rough sleeping is a high-risk situation, and people might find it harder to make decisions if they are exhausted, hungry, afraid, in pain, using substances etc. There is a balance to be struck between respecting the choices and autonomy of the individual and continuing to make offers of support and checking on that person's welfare. Many services have experienced someone refusing a bed for years, until one day they are ready to access support. Continue to monitor and support people who refuse to accept shelter through making frequent visits and providing resources and information.

Outreach teams³³ should be having regular conversations to understand people's reasons for refusal. They should share information about the health risks associated with severe weather and highlight the increased risk for people using substances and for those whose health is already compromised. Ask what the right housing offer is to bring them indoors and see if this can be arranged.

If someone continues to refuse help during severe weather despite being at risk of, or already experiencing harm, it may be grounds to engage statutory services such as emergency services and mental health teams. Understanding the Mental Capacity Act (MCA) and working closely and persistently with mental health services may be the right route to safeguard vulnerable people during severe weather³⁴.

Concerned that someone does not have capacity?

If you are concerned that a person does not have capacity to make the decision to accept SWEP in cold weather, the Mental Capacity Act may apply. The Mental Capacity Act Toolkit³⁵ is designed to provide information about legislation, and step-by-step forms which can be completed to establish whether intervention can take place. It may be

³² <https://homeless.org.uk/knowledge-hub/managing-volunteers-in-homelessness-services/>

³³ Read our principles for rough sleeping outreach services: <https://homeless.org.uk/knowledge-hub/principles-for-rough-sleeping-outreach/>

³⁴ <https://homeless.org.uk/knowledge-hub/mental-health-and-homelessness-resources/>

³⁵ https://homelesslink-1b54.kxcdn.com/media/documents/Using_the_Mental_Capacity_Act_2018.pdf

appropriate to use the MCA to frame the case for a Mental Health Act assessment or for emergency services to take the person to hospital if at risk (including if physically unwell or intoxicated). People's ability to make decisions about accepting offers of housing may be impacted by needs such as autism³⁶ and brain injury³⁷ or speech, communication, and language needs³⁸. Evidence suggests that there are higher rates of these needs in people experiencing homelessness.

Managing risk and creating a safe environment

The low threshold nature of SWEP/winter provision can increase risk across a number of areas, both for people using, and delivering the service. Examples include people accessing unfamiliar facilities, people who have been excluded from services, people that you have little information about, or people who are reluctant to engage.

Brief individual safety plans should be completed, with the aim of identifying and managing risk, rather than as a basis for exclusion. Ask people about ways to help them manage/avoid risky behaviour and what might help them to stay safe and use the service appropriately. Focus on their skills and strengths – ask about past examples of successful engagement with housing and support. Consider any risk from others.

Where possible, brief and relevant information should be requested from an agency that knows the individual. Developing a working relationship with the Police can mean that checks are done quickly. If a high level of risk is identified, this should not be seen as an automatic reason for exclusion, but as an opportunity to put measures in place, to make the provision as safe as possible, or to make an alternative plan, e.g., B&B instead of a room with shared facilities, joint support working etc. Staff skills and training can make a big difference in how a service manages risk, for example, skills around boundaries, communication, and trauma-informed approaches.³⁹

Think about escalating responses in your safety plans – ask the person what steps can reduce the risk, how staff/volunteers can help them to engage within the conditions and expectations of the project and discuss what will happen next if the situation becomes unsafe for them/others. Speak to the Police about notifying them of incidents and exclusions, as they may be able to check on someone's welfare. Any decision to ask

³⁶ See the Autism & Homelessness Toolkit: <https://homeless.org.uk/knowledge-hub/autism-and-homelessness/>

³⁷ See our guidance on brain injury & homelessness: <https://homeless.org.uk/knowledge-hub/brain-injury-and-homelessness/>

³⁸ See our guidance on communication needs & homelessness: <https://homeless.org.uk/knowledge-hub/speech-language-and-communication-needs/>

³⁹ Read our guidance on understanding trauma-informed approaches: <https://homeless.org.uk/knowledge-hub/trauma-informed-care-and-psychologically-informed-environments/>

someone to leave during severe weather should be made carefully, with reasons recorded and reviewed at the earliest opportunity. Health and safety regulations around buildings and staffing should operate in line with standard procedures. Policies around controlled substances⁴⁰, alcohol use, working with vulnerable adults and offenders should be in place, clearly communicated, and adhered to. Alcohol and substance use can be a key area of concern for services operating during severe weather and, while it should not be a barrier to support, suitable agencies with the experience and resources to respond should be involved in the delivery of the service.

Bear in mind that people who are alcohol dependent are at risk of alcohol withdrawal seizures, which can be fatal. Some services allow drinking, some ask for abstinence overnight but hold cans ready for when people wake up, while others have developed policies to allow controlled drinking in a designated area. It's important that people don't have to decide between the risk of severe weather and the risk of alcohol withdrawal. It might be helpful to focus on someone's behaviour when they arrive as the benchmark to assess risk, rather than having a blanket policy that assumes all alcohol use is unmanageable.

In some cases, people may be reluctant to accept a bed if their routine is to be very active at night (sometimes, but not always, related to their drug use). To reduce risks for these people, it might be that they are encouraged to come for a meal and to warm up even if they don't want a bed, or in shared space models, they are able to use a sit-up service/reception room to come and go rather than having to bed down, without disturbing other guests. People who experience insomnia and heavy smokers might also appreciate these options.

Services can reduce the risk of challenging behaviour by creating a pleasant, comfortable and safe environment. Offering food, activities, and entertainment, as well as training staff and volunteers to be welcoming and non-judgemental, can help people relax, interact positively with others, and reduce feelings of unease, in turn reducing the likelihood of incidents of aggression.

⁴⁰ Read our guidance on supporting people who are using drugs, including how to write a drugs policy: <https://homeless.org.uk/knowledge-hub/supporting-people-who-use-drugs/>

Move-on

Identify routes out of emergency provision into hostels, private rented, social housing, and specialist accommodation so that people do not have to return to the streets. As well as saving lives, SWEP and extended winter provision should support people off the streets for good.

LAs should be working with providers to remove barriers to move on, which may include ensuring people have homelessness assessments. Consider options for people who might struggle to find accommodation otherwise e.g., those assessed as having a high level of risk and/or vulnerability, those with restrictions due to immigration status, couples, or those with pets that they will not live without. Partnerships between support agencies, outreach teams and local authorities can facilitate getting clients into stable accommodation and where there is lower provision or demand, consider options for spot purchasing or joint commissioning. SWEP and extended winter provision can reduce or end rough sleeping – it is an emergency response with the potential to achieve much more.

For non-UK nationals who do not have settled immigration status or have limited access to public funds, move on options can be particularly challenging. Access to help and support from qualified advisers is critical. For more information about working with people who have restrictions due to immigration status (including asylum seekers) please see our other guidance and resources⁴¹.

Top tips:

- Ensure everyone has a homeless assessment with the LA
- Engage immigration advice services for those who have restrictions due to their immigration status
- Commit to finding move-on accommodation for all individuals before they are asked to leave
- Keep provision open until all placements have been made
- Consider how people can be supported around pre-tenancy education whilst they are accessing cold weather provision
- Work with partners to find rent deposits for hostel residents so that hostel spaces are freed up for severe weather clients
- Use starter tenancies and assistance via bond schemes for move on to suitable accommodation

⁴¹ <https://homeless.org.uk/knowledge-hub/supporting-people-with-restricted-eligibility-due-to-their-immigration-status/>

- Use dedicated staff to assess and support people to move on
- Make agreements for sharing needs and risk assessments to enable quick transfers from SWEP provision to permanent housing
- Build trusted professional relationships with those who access SWEP; responding quickly and effectively to interest in move on accommodation.

Further information and support

Housing Justice is a charity that supports faith and community groups that operate winter provision. Faith groups can become members of the Housing Justice Winter Night Shelter Network and can access support and good practice resources.⁴²

Please get in touch by emailing joanna.turner@homelesslink.org.uk if you have any further questions or comments on this guidance or wish to share intelligence or practice examples.

Our Partnership Team work across England to support Homeless Link Members, local authorities, and their partners, to work together to end rough sleeping and homelessness. Find your Partnership Manager [here](#).

⁴² <https://housingjustice.org.uk/night-shelters/operating-principles-for-night-shelters>

What We Do

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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**Let's End Homelessness
Together**

