

# Guidance for winter Severe Weather Emergency Protocol (SWEP) in Greater London 2023-24

This guidance is produced for London local authority rough sleeping lead officers and their colleagues involved in the provision of services for people sleeping rough in the capital.

This guidance should be read in conjunction with the Homeless Link [Winter Provision and SWEP Toolkit 2023](#), which provides advice for local authorities nationwide.

## 1. Background

SWEP is an emergency humanitarian response to severe weather conditions, the primary aim of which is to preserve life.

Since winter 2017-18, the GLA has provided guidance for London's councils regarding local SWEP plans. This guidance, which was been agreed by all 33 London councils, introduced a trigger point for pan-London SWEP activation of 0°C on any one night to ensure consistency across the capital.

Each borough is expected to make its own local SWEP provisions for those sleeping rough in the area. The capacity of local provision should be informed by an assessment of need undertaken at the borough level.

In addition, the GLA funds 'overflow provision' accessible by any London borough when local SWEP provision reaches capacity.

## 2. Terminology

**SWEP** is Severe Weather Emergency Protocol

**Activation** is the opening of SWEP to new referrals

**Deactivation** is the closing of SWEP to new referrals

**Pan-London activation** is the centrally coordinated activation of SWEP by the GLA across all London boroughs

**Overflow provision** is GLA-funded SWEP provision accessible by all London boroughs when local provision reaches capacity

**In for Good** is the principle under which once a person is supported to access shelter or accommodation they are not asked to leave until they have been assessed and there is a support plan in place to help end their rough sleeping.

## 3. Guidance on borough SWEP provision

The Mayor asks that all London councils adhere to the following minimum standards for SWEP:

- SWEP will be activated for every council across London when any part of the capital is forecast to be 0°C or lower overnight. The GLA will coordinate this pan-London activation of SWEP;

- local SWEP capacity should match the anticipated level of need in the area;
- councils should continue to ensure *at least* the same level of SWEP provision as in the previous year, unless there has discernibly been a reduction in anticipated need;
- councils should ensure that local SWEP options can always be easily accessed, including out of hours, by all outreach teams operating in their borough;
- while SWEP may be provided in a variety of settings, each council should ensure that their accommodation can be easily reached from across the borough or that transport is provided where the location necessitates this;
- councils will endeavour to implement the 'In for Good' principle.

It is also encouraged that councils try to ensure SWEP provision is well suited to the needs and circumstances of the people sleeping rough in their borough. This includes providing tailored SWEP spaces for people who have greater vulnerabilities or barriers to accessing SWEP accommodation. This should be based on the need in the borough but, where relevant, could include:

- women only bedspaces;
- bedspaces for people with high support needs;
- bedspaces for people with dogs;
- bedspaces for couples or groups who may not wish to be separated.

Councils should prepare for the need for daytime SWEP provision in the event of exceptionally prolonged or extreme cold weather. For example, this could be done by arranging 24/7 access to shelter or by working with local partners to extend opening hours or capacity in local day centres.

SWEP is an emergency response, and as such it is expected that councils will work together in that spirit of cooperation. Specifically, providing shelter should not be considered as accepting a local connection or constitute a relief duty.

#### **4. Pan-London overflow SWEP provision**

The GLA funds overflow SWEP provision. Once capacity is full within a given council's individual SWEP provision, SWEP overflow provision will be available for referrals from that councils' outreach service.

When SWEP is active, the SWEP coordinator for an area has the responsibility for notifying St Mungo's at [swep@mungos.org](mailto:swep@mungos.org) and the GLA at [roughsleepingcommissioning@london.gov.uk](mailto:roughsleepingcommissioning@london.gov.uk) when their emergency accommodation is close to capacity and overflow provision may be required. Where possible, notification of anticipated need should be made by midday to allow the overflow provision to prepare.

Where there is capacity within the borough's own emergency provision, it is expected that all those sleeping rough will be accommodated there, rather than in the GLA's overflow provisions.

Councils should ensure that where local SWEP provision is available, these beds can be easily and swiftly accessed at all times by outreach teams, including by the Rapid Response

team. Boroughs are encouraged to thoroughly 'road test' their systems for accessing local SWEP provision (including out of hours) because overflow SWEP cannot be used where local provision isn't full, regardless of any difficulties accessing this.

Arrangements for access to overflow SWEP will be circulated to Local Authority Rough Sleeping Leads along with SWEP alerts when SWEP is activated. As usual, the GLA will collate information from boroughs of their key contacts and planned capacity.

## **5. The 'In for Good' principle**

The 'In For Good' principle aims to minimise the number of people returning to sleeping rough following a SWEP placement. It also ensures that for anyone who does return to the streets, there is a clear plan in place as to how rough sleeping services will support them.

Data suggests that many boroughs employ this approach to good effect and for hundreds of people each winter, a SWEP stay helps end their rough sleeping. As of 1 April 2023, 70% of people who had had a SWEP stay recorded on CHAIN during winter 2022-23 had not returned to rough sleeping.

The 'In For Good' principle means that once someone has accessed SWEP accommodation, they are accommodated until they have been assessed and a support plan is in place to help end their rough sleeping - regardless of whether the temperature has risen above 0°C.

The support plan should:

- be based on an assessment of needs and eligibility;
- include a realistic and achievable move on plan and a nominated lead support agency;
- exhaust all options for Non-UK nationals.

It is recognised that some people will have very limited options due to issues outside of the local authority's control. Under these circumstances, the 'In For Good' principle does not require local authorities to provide indefinite accommodation placements, but councils should still use the opportunity to engage, assess and try to identify longer-term solutions for everyone accommodated during SWEP.

## **6. Public health considerations**

Historically, a large proportion of SWEP provision had been through the use of shelters and communal spaces in commissioned services. The COVID-19 pandemic meant that the nature of service provision, and the specifics of how services are operated had to be reconsidered. Evidence suggests that the rough sleeping population remain vulnerable to respiratory infections (e.g. covid, flu). Therefore, single room accommodation remains the preference to minimise infectious disease transmission.

During winter 2022-23, however, due to a lengthy spell of severely cold weather, limited accommodation, and unprecedented demand, action was taken to increase the number of

people sharing the space in pan-London overflow SWEP provision, with a range of mitigation measures in place. This decision was taken as the risk to life of remaining on the street in prolonged severe cold weather was considered to outweigh the risk to health of the spread of infectious diseases through the use of communal sleeping provision.

The GLA's position for its overflow SWEP provision during winter 2023-24 is that single-occupancy accommodation will always be the first preference. However, as it is very likely that demand for pan-London SWEP accommodation will exceed all available single occupancy bedspaces, some communal sleeping arrangements will be used for SWEP, with mitigation measures in place (See Appendix A). **However, this approach may need to be adjusted, should an increase in the prevalence or severity of respiratory infections, or increase in accommodation options, change the balance of risks.**

Therefore, for those referred into pan-London overflow SWEP provision, the GLA is planning to provide single room accommodation where possible for the most clinically vulnerable or those who require single-occupancy accommodation for any other reason. Alongside this, the GLA will be using communal spaces accommodating up to 25 people, with a range of mitigation measures in place. Mitigation is unlikely to prevent outbreaks, and therefore 2 or more cases in residents and/or staff will be reported to the local health protection team.

This plan for the delivery of the GLA's overflow provision is not given as guidance to councils for local SWEP arrangements. It is recommended that Local Authorities consult the relevant Director of Public Health and/or public health team about their planned use of communal sleeping.

Local authorities can also consult the [operating principles for night shelters](#) published by the Department for Levelling Up, Housing and Communities in August 2022. This outlines key principles for maintaining public health in night shelter settings. There is also extensive national guidance at gov.uk on managing COVID and other infectious diseases.

## 7. Monitoring

Councils and their services should make every attempt to record all local SWEP stays on CHAIN. This should include recording of people accommodated each night and the demographics and support needs of those using the emergency spaces. This will allow councils to monitor use of their own SWEP accommodation and enable a comprehensive evaluation of SWEP provision at a pan-London level, informing future provision, and facilitating further improvements to the protocol in following years. The CHAIN team can provide more information about this at [chain@homelesslink.org.uk](mailto:chain@homelesslink.org.uk).

It is, however, recognised that a requirement to record details on CHAIN can, in some instances, be a barrier to people accessing SWEP. So, while CHAIN recording is strongly encouraged it is not an absolute requirement.

If you have any questions regarding this document, please contact:  
[roughsleepingcommissioning@london.gov.uk](mailto:roughsleepingcommissioning@london.gov.uk).

## Appendix A: Respiratory illness mitigation measures for communal sleeping (≤25 people) in GLA overflow SWEP provision

- Those sharing the provision would be made aware of the potential infection risk.
- Shared accommodation should wherever possible **not** be used for those who are clinically vulnerable and/or have other vulnerabilities, including age.
- Changes (throughput) in those sharing a room should be minimised.
- There should be symptom screening (for respiratory infections) prior to entry.
- A thorough health screening, including vaccination status, would be part of the initial assessment, with access to vaccines offered for all those who are eligible.
- Measures would be in place for rapid recognition of COVID and flu symptoms, rapid testing (for COVID), and isolation of any symptomatic and/or positive cases. COVID tests can be ordered for [higher risk accommodation](#), and details on [who may benefit from treatment for COVID](#).
- Staff with COVID symptoms should follow NHS guidance on [COVID](#) and [Flu](#).
- A range of Infection Prevention Control (IPC) strategies such as hand washing, ventilation, limiting close contact particularly with those who have respiratory symptoms and/or are not vaccinated, and wearing masks in crowded indoor spaces would be in place.
- Enhanced environmental cleaning implemented.
- Ensuring there is a means to contact trace individuals when they move on.
- Opportunities to promote vaccination and GP registration would be maximised.

### Clinical vulnerability criteria

The following list sets out factors that can make an individual more susceptible to respiratory illness. Clinical vulnerability should be considered as part of a wholistic assessment alongside other vulnerabilities. Age and pregnancy should be considered alongside other vulnerabilities. The older the individual the more at risk they will be.

Individuals may be at highest risk of getting seriously ill from COVID-19 and flu if they have:

- Down's syndrome, or another chromosomal condition that affects your immune system
- severe or multiple learning disabilities
- certain types of cancer, or had treatment for certain types of cancer (such as a blood cancer like leukaemia or lymphoma)
- sickle cell disease
- certain conditions affecting your blood
- a kidney disease (on dialysis/transplant list/letter from doctor confirming severe kidney problem)
- severe liver disease
- chronic heart disease
- had an organ or bone marrow transplant
- certain autoimmune or inflammatory conditions, such as rheumatoid arthritis or inflammatory bowel disease
- HIV or AIDS and have a weakened immune system

- a condition affecting your immune system or lowered immunity due to disease or treatment (such as steroid medication or cancer treatment)
- a condition affecting the brain or nervous system, such as cerebral palsy, multiple sclerosis, muscular dystrophy, motor neurone disease, myasthenia gravis, Huntington's disease, Parkinson's disease or certain types of dementia
- certain lung conditions or treatments for lung conditions
- severe Asthma/COPD not controlled by medication or leading to hospital admission in the last year