

Support for

people experiencing

single homelessness

in England

Annual Review 2019



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Produced by

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Executive Summary

For the past 12 years, Homeless Link has produced an annual review of the available support for people experiencing 'single homelessness' in England.¹ These individuals are less likely than families to be entitled to housing by their local authority,² and therefore, often must rely on homelessness charities for accommodation, advice and other forms of support. This study provides vital evidence of the support provided by these services and is the only available data source of its kind for the homelessness sector in England.

The findings are based on five key data sources, including a representative survey of 387 accommodation projects and 72 day centres from across England, conducted in September to November 2019. The findings provide a detailed overview of the nature and availability of key services, the challenges and opportunities faced by the sector, the needs and circumstances of the people accessing services, and the various ways in which the sector helps people to move out of homelessness and achieve other positive outcomes in their lives*.

Trends in single homelessness

- In 2019, a total of 4,266 people were estimated to be sleeping rough in England on any given night, representing a 9% decrease from the previous year.
- In April 2019–June 2019 local authorities made 14,000 main homelessness duty decisions. 3,420 people were found not to be in priority need and were still homeless at this point. The introduction of the Homeless Reduction Act has changed the landscape for single homeless people in England, with many now owed additional prevention and relief duties by their Local Authority. In April 2019 - June 2019 35,950 people were assessed as owed a prevention duty and 32,220 people were assessed as owed a relief duty.

Availability of homelessness services

- There are currently an estimated 991 accommodation projects in place for individuals experiencing single homelessness in England.
- A total of 181 day centres currently operate throughout England.
- Homeless England data³ indicates that over the past year, there has been a reduction in both the number of accommodation projects (-9%) and the number of day centres (-3%).
- The number of bed spaces in accommodation projects in England has decreased by 3% over the past year, and now stands at 33,898.
- 55% of responding accommodation services reported no change in funding over the period from April 2018 – March 2019, with 27% reporting a decrease, and 19% reporting an increase.

Delivery of services

- Accommodation providers and day centres provide a wide variety of services to help people address their needs. These services are delivered either in-house on the service premises, or via referral to an external agency.

¹The term 'single homelessness' is a commonly used term in the homelessness sector. It does not denote relationship status and is shorthand for 'people who have no dependent children in their household and who are not owed a statutory homelessness duty by a local authority.' The term can cover couples. Throughout this report we refer to single homelessness, and single homeless people. In both cases, this is the group to which we refer.

² Crisis (2018), *The homelessness monitor: England 2018*, Available at: https://www.crisis.org.uk/media/238700/homelessness_monitor_england_2018.pdf pg.57.

³ Retrieved from Homeless England database of services, held by Homeless Link <https://www.homeless.org.uk/search-homelessness-services> accessed 15 January 2019.

- People who are experiencing homelessness continue to face difficulties in accessing mental health services.
- Services offered in-house are less likely to have access barriers than services offered externally.

Outcomes, move on, and service development

- 74% of accommodation projects provide support to clients once they have moved on from the service, of which 75% provide informal move on support.
- In April 2018 – March 2019, 54% of people accessing accommodation services moved on positively from services. 16% exited in an unplanned move.
- Moving into employment remains a challenge for those accessing accommodation services.
- People accessing accommodation services face significant structural barriers in moving on from homelessness services. Accommodation providers reported that 24% of their clients were ready to move on but were unable to. Of this total, 36% had been waiting six months or longer.
- Respondents identified the lack of accommodation available at the Local Housing Allowance rate (72%) and being excluded from housing providers due to 'previous debt, or rent arrears' (70%) as significant contributory barriers.

*Since the data was collected for the 2019 Annual Review, the homelessness sector has faced an unprecedented challenge with the outbreak of the COVID-19 virus. At the time of publication, it is too early to understand the implications that this will have on individuals, services and staff across England. However, this is likely to be profound, with the capacity, resourcing, practice and composition of services likely to look very different in 12 months time. We remain committed to understanding and evidencing the work within the sector so that we can continue to support it over the challenging period ahead.

Chapter 1: Introduction

For the past twelve years, Homeless Link's national study on support provided by the homelessness sector in England, has provided crucial evidence to inform policy and practice. By exploring key trends in single homelessness and the nature and availability of support, this twelfth edition of our *Support for Single Homeless people in England: Annual Review* makes an important contribution to the evidence base on single homelessness provision in England. The research aims to help service providers, commissioners, policy makers, and local authorities, understand and respond to the needs of people experiencing homelessness.

Methodology

The findings featured in this report are drawn from the following five key data sources:

1. Telephone and online survey from **387 accommodation projects** (38% response rate), conducted during November and December 2019. Key topics include: services provided, move on, funding, outcomes and client characteristics.
2. Telephone and online survey from **72 day centres** (39% response rate). Key topics include: services provided, funding, outcomes and client characteristics.
3. Existing data on homelessness trends, including national statutory homelessness and rough sleeping figures as published by the MHCLG.
4. Homeless England database figures on project and bed space availability.⁴
5. Case studies of certain projects and initiatives in England.

The Appendix (pg.47) provides further details on the survey methodology, including our sampling approach. For both accommodation providers and day centres **we achieved 95% confidence intervals of ±5%** and stratified each project type by region. For accommodation providers and day centres combined, the available sample size of 1,396 projects required 302 interviews to be completed to achieve the confidence interval of ±5%. We achieved considerably higher with 72 day centres and 387 accommodation providers resulting in a **459** overall sample. The findings from the survey are therefore representative and generalizable to the wider homelessness sector in England.

Data accuracy

The survey asked services to provide data for the period of April 2018 – March 2019, allowing a year on year comparison with last year's report. Certain questions ask for 'snapshots' of data relating to client records of 'last night' and 'last year'. Within different homelessness services, amounts and methods of data collection tend to vary however, and some survey responses may therefore be based on informed estimates provided by the responding organisation, rather than exact figures. To better understand the accuracy of the data provided, respondents were asked whether they have provided exact figures or informed estimates. (Table 1).

⁴ This database is managed by Homeless Link and holds information on approximately 991 services. Although the data is not live, it is updated regularly and considered to be the most accurate data source on homelessness services in England. Data on the availability of services and bed spaces were extracted from the Homeless England database, allowing a comparative analysis with previous publications of the Annual Review.

Table 1: Data accuracy, Annual Review Survey 2019

	Accommodation providers	Day centres
All exact figures	11%	12%
Mostly exact figures	44%	29%
About half and half	22%	10%
Mostly estimates	17%	34%
All estimates	6%	15%

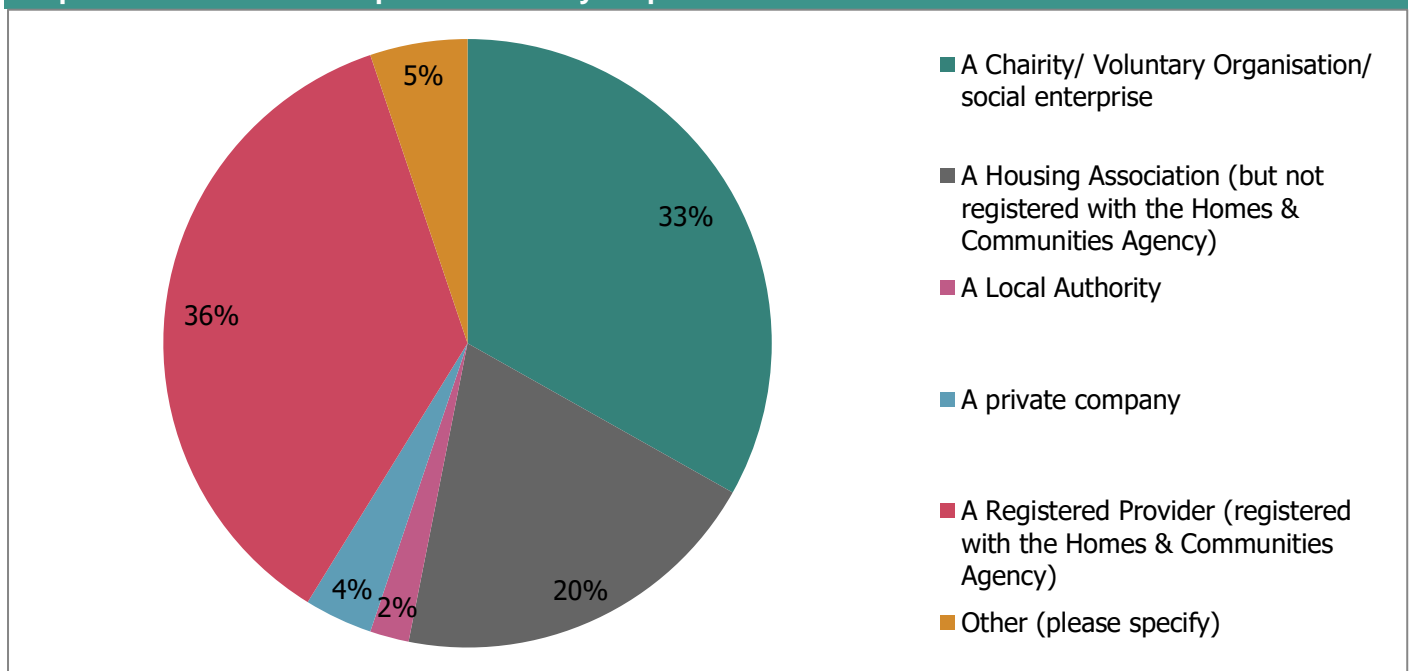
Accommodation providers (N: 309) Day centres (N: 59)

Accommodation projects provided mostly exact figures, with day centres mostly providing estimates. When compared to accommodation projects, day centres often face issues that can impact their ability to collect systematic data about people accessing their services, such as: inadequate IT facilities, absence of formal key working process, limited time and reliance on volunteers.

Accommodation provider respondents

Graph 1 shows the various types of accommodation providers that responded to our survey. Most respondents were organisations registered with the Homes and Communities Agency (139), charity/voluntary or social enterprise organisations (128), and Housing Associations (77).

Graph 1: Accommodation provider survey respondents 2019



N: 386

Chapter 2: Homelessness in England

This chapter provides an outline of the various categories of homelessness and explores recent evidence of trends in the numbers and geographical distribution of single homelessness in England. The findings are based on an analysis of statutory homelessness and rough sleeping data as published by the Ministry of Housing, Communities and Local Government (MHCLG).

Key headlines

- The 2017 Homelessness Reduction Act came into effect on 3 April 2018. This significantly extends the support that single homeless people are entitled to from their local authority by introducing prevention and relief duties for those at risk of, or currently, homeless.
- In April 2019 – June 2019⁵ local authorities made 14,000 main homelessness duty decisions. 3,420 people were found not to be in priority need and were still homeless at this point.
- In 2019 a total of 4,266 people were deemed to be sleeping rough in England on a single ‘typical’ night in autumn 2019, representing a 9% decrease from the 2018 figure of 4,677. This is the highest percentage decrease since 2010. However, the figure still demonstrates an increase of people sleeping rough by 141% since 2010.

Types of homelessness

The term ‘homelessness’ has a broad meaning and does not only cover those sleeping rough or those housed by their local authority in temporary accommodation. People experiencing homelessness face a wide array of circumstances that are captured within certain defined categories and are measured in a number of ways. The Housing Act 1996 provides a legal definition of homelessness, and states that a person is homeless if they do not have a home in the UK or anywhere else in the world. Local authorities will use this definition, alongside other key criteria (see below), to determine statutory entitlements and to allocate housing to people and families who are experiencing homelessness. The main categories of homelessness can be summed up as follows:

Statutory homelessness

This term covers all households (i.e., families or individuals) who are owed a homelessness duty by their local authority. The 2017 Homelessness Reduction Act (HRA) significantly amended homelessness legislation and expanded the definition of statutory homelessness to include those threatened with homelessness from within 28 days to 56 days. A household approaching a local authority for assistance on or after the 3 April 2018 would be assessed under different criteria than was previously the case. Local authorities are required to make inquiries into a homeless application whenever they have reason to believe that an applicant household may be homeless or threatened with homelessness within 56 days.

The Housing Act 1996 (Part VII) specifies four main groups that are defined as having priority need: households with dependent children; pregnant women; those who are threatened to become homeless

⁵ The data presented here covers Apr-Jun 2019, whereas the data presented by research participants covers Apr 2018-Mar 2019. MHCLG live tables on homelessness available at: <https://www.gov.uk/government/statistical-data-sets/live-tables-on-homelessness>

because of an emergency (such as a flood); and those who are vulnerable.⁶ The 2017 HRA created new statutory duties that are owed irrespective of whether the applicant may or may not have priority need or whether they are considered to be intentionally homeless. As single homeless people do not have dependent children, it is unlikely that they will be found to be in priority need, and the 2017 HRA therefore significantly extends the help they are entitled to receive from local authorities.

Households who are statutorily homeless and eligible for assistance are now owed one or more of three statutory duties:

Prevention duty: The local authority must try to prevent a household who is threatened with homelessness within 56 days from becoming homeless (e.g., help to stay in current home);

Relief duty: The local authority must try to relieve homelessness, that is to help households who are homeless secure alternative accommodation;

Main homelessness duty: The local authority must secure accommodation for households whose homelessness cannot be prevented or relieved, if they are eligible. People are considered eligible for accommodation from their local authority if they meet the criteria set out in the Housing Act 1996: i) eligible for assistance; ii) homeless; iii) in priority need; and, iv) not intentionally homeless.⁷

As mentioned above, the priority need criteria include households with dependent children, pregnant women, people threatened with homelessness due to an emergency, and those who are vulnerable. The category of 'vulnerable' is particularly significant for single homeless people (i.e. those without dependent children), as it is the primary way that they can be found to have priority need and therefore be entitled to the main homelessness duty. Many single homeless people requesting homelessness-related assistance from local authorities will not meet the priority need criteria and therefore will not qualify for emergency or permanent accommodation. This report explores how homelessness support services provide an alternative source of support for single homeless people.

Single homelessness

This term covers individuals or couples without dependent children who are homeless but are unlikely to meet the priority need criteria of homelessness legislation (see above) and therefore do not qualify for temporary or permanent accommodation from their local authority. Many people experiencing single homelessness will stay in short-term accommodation (e.g. hostels, shelters and temporary supported accommodation) provided by the voluntary homelessness sector, while others may end up sleeping rough or remain hidden.⁸

Hidden homelessness

⁶ The Homelessness (Priority Need for Accommodation) (England) Order 2002, extended the definition of 'vulnerable' to include: mental health problems; physical or learning disabilities; old age; leaving prison or the Armed Forces; care leavers; being at risk of violence (or threats of violence); other special reasons.

⁷ For further information on each of these criteria see Fitzpatrick, S., Pawson, H., Bramley, G., Wilcox, S., and Watts, B. (2017) *The homelessness monitor: England 2017*. London: Crisis.

⁸ Crisis (2017) *Moving on: Improving Access to Housing for Single Homeless People in England*, https://www.crisis.org.uk/media/237833/moving_on_2017.pdf This report includes estimates of the scale of single homelessness in England and includes an eight-part classification of homelessness

Many single homeless people sleep out of sight in squats, sleeping on someone's floor, sofa-surfing with friends, sleeping on night buses/underground trains/airports or sleeping rough in concealed locations.⁹ These individuals will often be hidden from available services and as a result will not receive the advice and support that they need. Whilst people experiencing hidden homelessness are generally not captured in official statistics¹⁰, research suggests that a significant number of single homeless people will have experience of hidden homelessness.¹¹

Rough sleeping

This term covers the experience of people who sleep outside or in buildings or places that are not designed for human habitation (e.g. car parks, cars, stations and doorways).¹² This is the most visible form of homelessness and is a dangerous and isolating experience that can have a severely detrimental impact on an individual's physical and mental health and wellbeing.

Within the context of an upward trend in the number of people sleeping rough between 2010 and 2017, the Government introduced a series of programmes to help tackle this. This has included the Rough Sleeping Initiative, which now provides funding to 276 councils. The fund is designed to support the establishment or enhancement of coordinated local services for rough sleepers, or those at risk of sleeping rough. Additionally, the Housing First pilots, established in 2018 in the West Midlands, Greater Manchester and Liverpool City Region, provides stable, affordable accommodation and intensive wrap-around support to rough sleepers with the most complex needs, supporting their recovery and helping them to sustain their tenancies.

This approach is anchored by the 2018 cross-government Rough Sleeping Strategy¹³, which is designed to help people who are currently sleeping rough and to put in place the structures that will end rough sleeping completely. The strategy is built on three core pillars:

- Preventing rough sleeping by providing timely support to those at risk;
- Intervening to help people already on the streets to get swift, targeted support;
- Helping people recover, find a new home quickly, and rebuild their lives.

At the 2020 Budget, the Government announced £381m to help get rough sleepers off the streets and into longer-term move-on accommodation. Additionally, as part of the Government response to COVID-19, the Secretary of State for Housing, Communities and Local Government announced that Dame Louise Casey will head a Taskforce to lead the next phase of the Government's support for rough sleepers during this pandemic.

Homelessness trends

⁹ Reeve, K. and Batty, E. (2011) *The hidden truth about homelessness. Experiences of single homelessness in England*, https://www.crisis.org.uk/media/236815/the_hidden_truth_about_homelessness.pdf

¹⁰ Some data sources, i.e. the English Housing Survey do attempt to collect information about some elements of hidden homelessness i.e. sofa surfing, however due to the nature of hidden homelessness this will not be able to identify everyone.

¹¹ Reeve, K. and Batty, E. (2011) *The hidden truth about homelessness. Experiences of single homelessness in England*, https://www.crisis.org.uk/media/236815/the_hidden_truth_about_homelessness.pdf

¹² Since 2010, national rough sleeping statistics have used the following definition: 'People sleeping, about to bed down (sitting on/in or standing next to their bedding) or actually bedded down in the open air (such as on the streets, in tents, doorways, parks, bus shelters or encampments). People in buildings or other places not designed for habitation (such as stairwells, barns, sheds, car parks, cars, derelict boats, stations, or "bashes")'.

¹³ The Rough Sleeping Strategy (2018) MHCLG

Different definitions of homelessness, the lack of a single approach to measuring single homelessness, and the hidden and mobile nature of many people's experiences, make quantifying single homelessness particularly challenging.

Until recently local authorities have not been required to record the scale or needs of single homeless people, with the result that official statistics (based on a P1E returned from each local authority) are likely to have underestimated the issue. The Homelessness Reduction Act 2017, (implemented 3 April 2018) changed the way local authorities collect data on statutory homelessness. In April 2018, the new Homelessness Case Level Information Collection (H-CLIC) replaced the P1E aggregated data return. H-CLIC includes more details on people's support needs, reasons for becoming homeless, length of time in temporary accommodation and outcomes of each prevention case. The broader definition of homelessness beyond those only defined as in priority need, means that more information will be available on other households, including single homeless people.

Statutory homelessness

Government statutory homelessness statistics can be used to understand short and long-term trends in homeless households who approach their local authority and are assessed or granted assistance. People considered to be 'not in priority need' by their local authority are most likely to be single homeless people (see above).

Statutory Homelessness data for quarter 1 of 2019, April to June, was released by MHCLG based on H-CLIC data¹⁴. In 2018 changes were made in the method of reporting statutory data. Therefore, this year's figures are only comparable to data from 2018 and not directly comparable with years before this.

- Between April – June 2019, 72,190 homelessness assessments were made under the new prevention and relief duties. A total of 68,170 people were assessed as being owed a statutory duty. 35,950 (53%) were owed a prevention duty, 32,220 (47%) were owed a relief duty.
- In April 2019 – June 2019 local authorities made 14,000 main homelessness duty decisions. 8,360 were accepted as being owed the main duty. 3,420 people were found not to be in priority need.
- Of the 68,170 households owed a homelessness duty, 30,670 were identified as having support needs. The most common support need was mental health, which was reported by 14,950 households.
- The most common accommodation type at the time the household approached the local authority was private rented accommodation (18,400), followed by living with family (15,980 households).
- Of those who were assessed as being owed a duty 1,650 people were deemed to be rough sleeping at the time of making a homeless application, and a total of 4,030 people had a history of rough sleeping.
- The most common reason for becoming homeless was friends or family being no longer able or willing to accommodate (17,140 households), followed by the end of an assured shorthold tenancy (14,350 households).

¹⁴ MHCLG caution that there may be some misreporting as Local Authorities adjust to the new system of collecting and reporting data. Further information can be found on the contents page of the live tables available at: Ministry of Housing, Communities and Local Government, Live Tables on Homelessness, accessed 12th January 2020: <https://www.gov.uk/government/statistical-data-sets/live-tables-on-homelessness#statutory-homelessness-live-tables>

Rough sleeping

Local authorities across England carry out an annual snapshot estimate using one of three approaches; either a count-based estimate, an evidence-based estimate, or an evidence-based estimate including a spotlight count. The snapshot estimate provides information on the number of people sleeping rough on a single ‘typical’ night in Autumn (between the 1st October and the 30th November).

Local authorities choose an approach based on what would provide their area with the most accurate and precise figure, using either a count-based estimate of visible rough sleeping, an evidence-based estimate with intelligence from partner agencies, or an estimate informed by a spotlight street count, where a street count is undertaken in hotspot locations on the chosen ‘typical’ night. All three processes record only those people seen, or thought to be, sleeping rough on a single ‘typical’ night. They do not include everyone in an area with a history of sleeping rough, or everyone sleeping rough in areas throughout the October to – November period. Each local authority’s rough sleeping snapshot estimate is independently verified by Homeless Link.

In Autumn 2019, the downward trend from 2018 continued, with 4,266 people estimated by local authorities to be sleeping rough on a single ‘typical’ night. This represents a 9% decrease from 2018 (Table 3) and was the highest national percentage decrease in ten years. The figures do however show an increase of 141% since the current methodology for measuring rough sleeping was introduced in 2010.

Table 2: Rough sleeping in England 2010 – 2019

	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
Number of rough sleepers	1,768	2,181	2,309	2,414	2,744	3,569	4,134	4,751	4,677	4,266

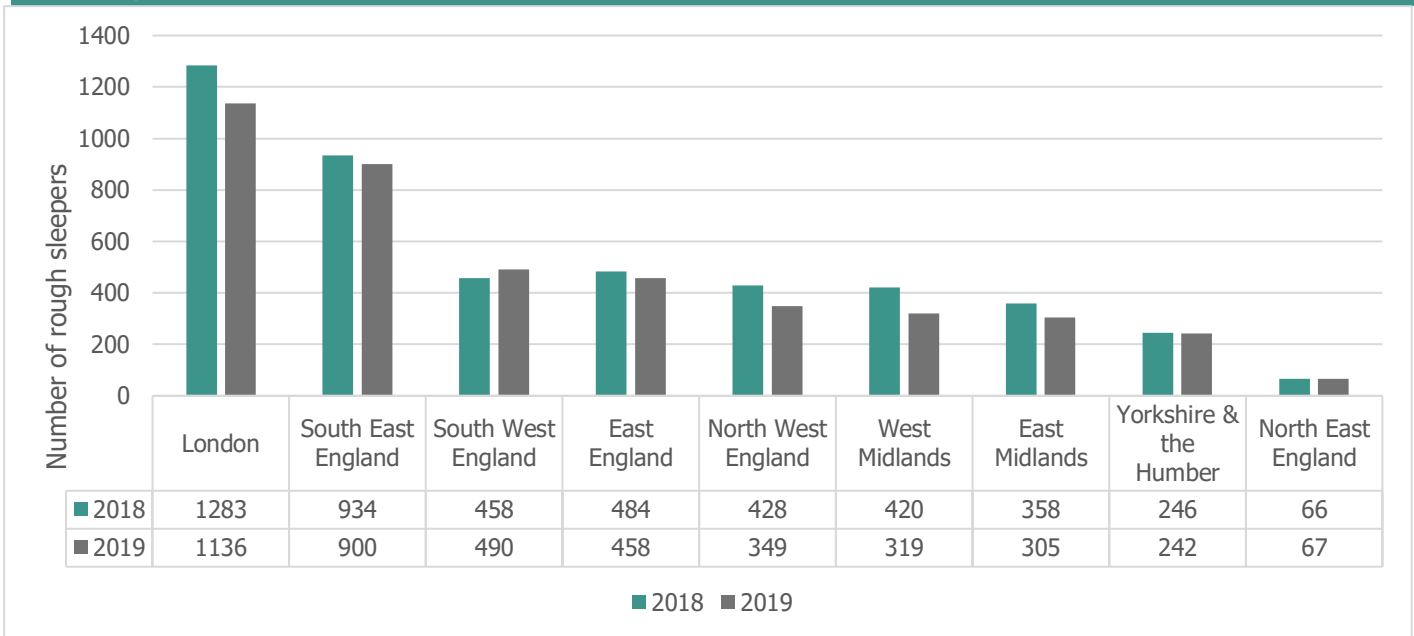
Table 3: Rough sleeping in England 2010 - 2019

	2010 2019	-2011 2019	-2012 2019	-2013- 2019	2014 2019	-2015 2019	-2016 2019	-2017- 2019	2018- 2019
Percentage change	+141%	+96%	+85%	+77%	+55%	+20%	+3%	-10%	-9%
Numerical change	+2498	+2085	+1957	+1852	+1522	+697	+132	-74	-411

Regional trends in rough sleeping

There are regional variations in the numbers of people seen sleeping rough. The South West of England saw the greatest increase in the number of people seen rough sleeping in 2019 when compared to 2018 (Graph 2). The North West, West Midlands and London saw the largest decreases in rough sleeping in 2019, when compared to the previous year (Graph 2).

Graph 2: Number of people sleeping rough in England, by region, 2018- 2019 (annual snapshot estimate)

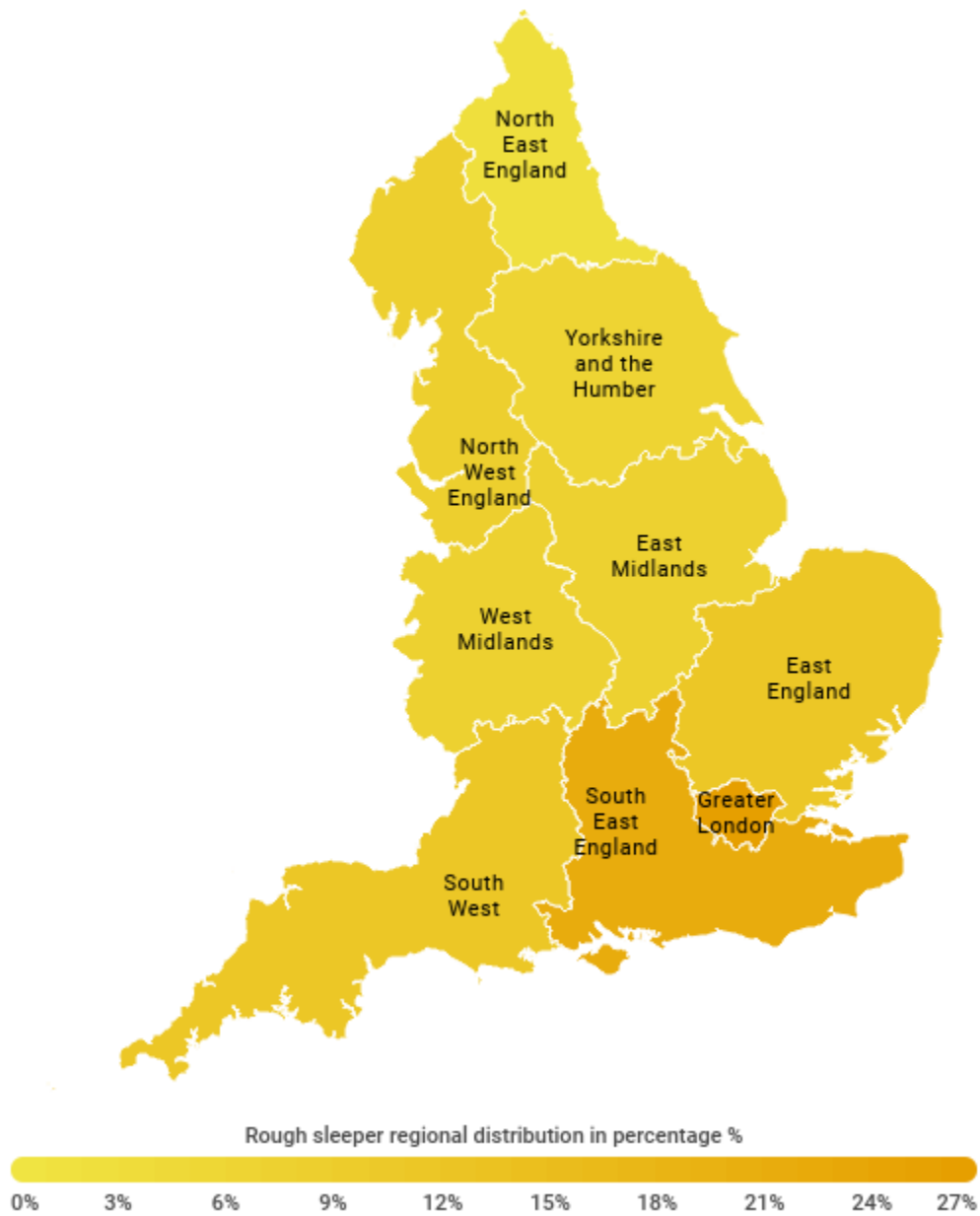


In terms of overall distribution of rough sleeping across England, London and the South East reported the highest number of rough sleepers, with the North East reporting the lowest numbers (Table 4).

Table 4: Rough sleeper regional distribution: annual snapshot estimate

	% of total
	2019
North East	2
Yorkshire & the Humber	6
East Midlands	7
West Midlands	7
North West	8
East England	11
South West	11
South East	21
London	27

Figure 1: Proportion of the total number of people sleeping rough on a single night in autumn 2019 by region



The following case study gives emphasis to the need for a multidisciplinary approach in engaging with people sleeping rough and demonstrates that the solution to ending rough sleeping requires more than the provision of adequate bed spaces.

Case study 1: Brighter Futures - A Multidisciplinary Outreach Approach

Brighter Futures is an organisation that supports people to live more independently by providing support with mental health, recovery, wellbeing, employment, skills, training, supported housing/ accommodation and homelessness and outreach services.

The rough sleeping outreach team works year-round to support people who are sleeping rough to move into accommodation. The following case study demonstrates how wrap around support and a multidisciplinary approach can help people to move away from sleeping rough. This case study highlights that rough sleeping is not just a housing problem.

Michael* is a 39-year-old male. He has drug induced psychosis and depression. He has a history of alcohol dependence and has historically been a user of New Psychoactive Substances (NPS) and Cannabis. Michael had lived with family up until the time that he physically assaulted his father. The police and other criminal justice agencies were involved as a consequence of this assault and the situation culminated in him rough sleeping. Michael has made sleeping areas under bridges of main roads. He has divided thoughts as to why such an area was his preferred choice. Initially he had suggested that it might help to “drown out” the voices in his head, but recently disclosed that isolating himself in this location was an attempt to ensure negative associates would not choose to frequent there.

Michael’s rough sleeping location has caused significant consternation from professionals and members of the public. Michael was supported by our Rough Sleeper Outreach team and our Mental Health Service intervention (Early Intervention Team) to move to a safe house. This was successful in the short term, but due to feelings of isolation Michael later abandoned the property.

A well organised road closure/rolling roadblock and supporting of Michael via our Rough Sleeper Outreach and Mental Health Service intervention (Early Intervention Team) to a potentially safe house to occupy, proved to be a success in the short term, but feelings of isolation in the property resulted in abandonment.

He has built an excellent rapport with Early Intervention team (EIT) and, with regular meetings, EIT have helped to address his benefits and diversionary activities to using NPS and have supported him to take controlled medication to treat his psychosis.

Numerous discussions about Michael’s case took place at the Rough Sleeper Action Group (chaired by Brighter Futures and attended by the Local Authority and other local organisations) and at a number of Multi-Disciplinary Team Meetings. Actions from these forums led to his inclusion on the Supported Letting project and allocation of a Tenancy Sustainment Worker, funded by the MHCLG’s Rapid Rehousing Funding Pathway. Through the EIT and the Tenancy Sustainment Worker the aim was to support a sustainable housing plan with Michael. After several months Michael elected to take on a room at Salvation Army (SA). Despite this accommodation being secured, Michael’s mental health deteriorated and this resulted in abandonment.

In the time since, Michael’s positive engagement with Mental Health Services and continued use of anti-psychotic medication has led to a more tenable relationship with family. This coupled with the support of a Tenancy Sustainment Worker, who has continued to work with Michael despite tenancy breakdown and a return to rough sleeping, has enabled trust to be built and a more psychologically informed approach to be taken**. Michael has only spent a handful of occasions at the bridge location since and discussions with our substance misuse outreach worker are now taking place to address self-medication via use of NPS. The overall aim is a sustainable tenancy for Michael which will be secured via the local authority.”

*The name we have used in this case study is a pseudonym.

** Psychologically Informed Environments (PIE) are services that are designed and delivered in a way that takes into account the emotional and psychological needs of the individuals using them. The concept of PIE emerged following discussions of a multi-agency working group, convened by the Royal College of Psychiatry, interested in community mental health provision in the UK. It was recognised that high numbers of homeless people have needs around mental and psychological wellbeing. However, any service working with vulnerable people can become a PIE.

Chapter 3: Availability of homelessness services

This chapter explores the availability of accommodation services and day centres in England. Drawing on findings from analysis of the Homeless England database and the survey with services from across England, it discusses key characteristics of existing provision and changes in this provision over the past year. The final section discusses the sector's resources and capacity.

Key headlines

- There are currently 991 accommodation projects for single homeless people in England.
- A total of 181 day centres currently operate throughout England.
- Over the past year, there has been a reduction in the number of day centres (-3%).
- The number of bed spaces in England (33, 898) has decreased by 3% from last year.
- The number of accommodation services (991) has decreased by 9% from last year.
- 55% of accommodation providers reported no change in funding since last year, 27% reported a decrease, and 19% reported an increase.
- The main funding source for accommodation projects comes from housing benefit (44%). The main source of funding for day centres comes from fundraising and donations (45%).

Definitions

Homelessness provision is described in various ways, and accommodation projects and day centres differ in size, as well as in the level and nature of support offered. The following definitions cover the key features of both forms of provision:

Accommodation projects

These services provide both short and long-term accommodation and generally aim to support people to prepare for independent living. Examples of accommodation projects include foyers, supported housing schemes and hostels. The level of support, access criteria, and target groups vary between projects. Some services offer lower level support; this is usually for those who are homeless or in housing need but otherwise fully capable of independent living. Other services offer high-level support for those who have support needs besides their accommodation needs and often face a number of barriers to independent living. Not included in this report are night shelters, No Second Night Out Assessment Hubs, emergency accommodation such as winter shelters, and specialised services that specifically target people with needs relating to substance use, mental health, and offending.¹⁵

Day centres

Day centres offer non-accommodation-based support for those sleeping rough and/or those who are either experiencing or at risk of other forms of homelessness. Day centres are usually provided and run by voluntary, faith or community organisations¹⁶ and have often emerged in response to a local need. The way individual projects are set up will be informed by varying histories, working ethos, and key principles, and will operate in different ways.

¹⁵ These measures are excluded due to the fact that they are unable to answer most of the survey questions.

¹⁶ Findings from a survey of 124 day centres, showed that the majority were run by voluntary sector homelessness organisations (43%) or religious organisations (27%). <https://www.kcl.ac.uk/scwru/pubs/2005/Crane-et-al-2005-Homeless.pdf>

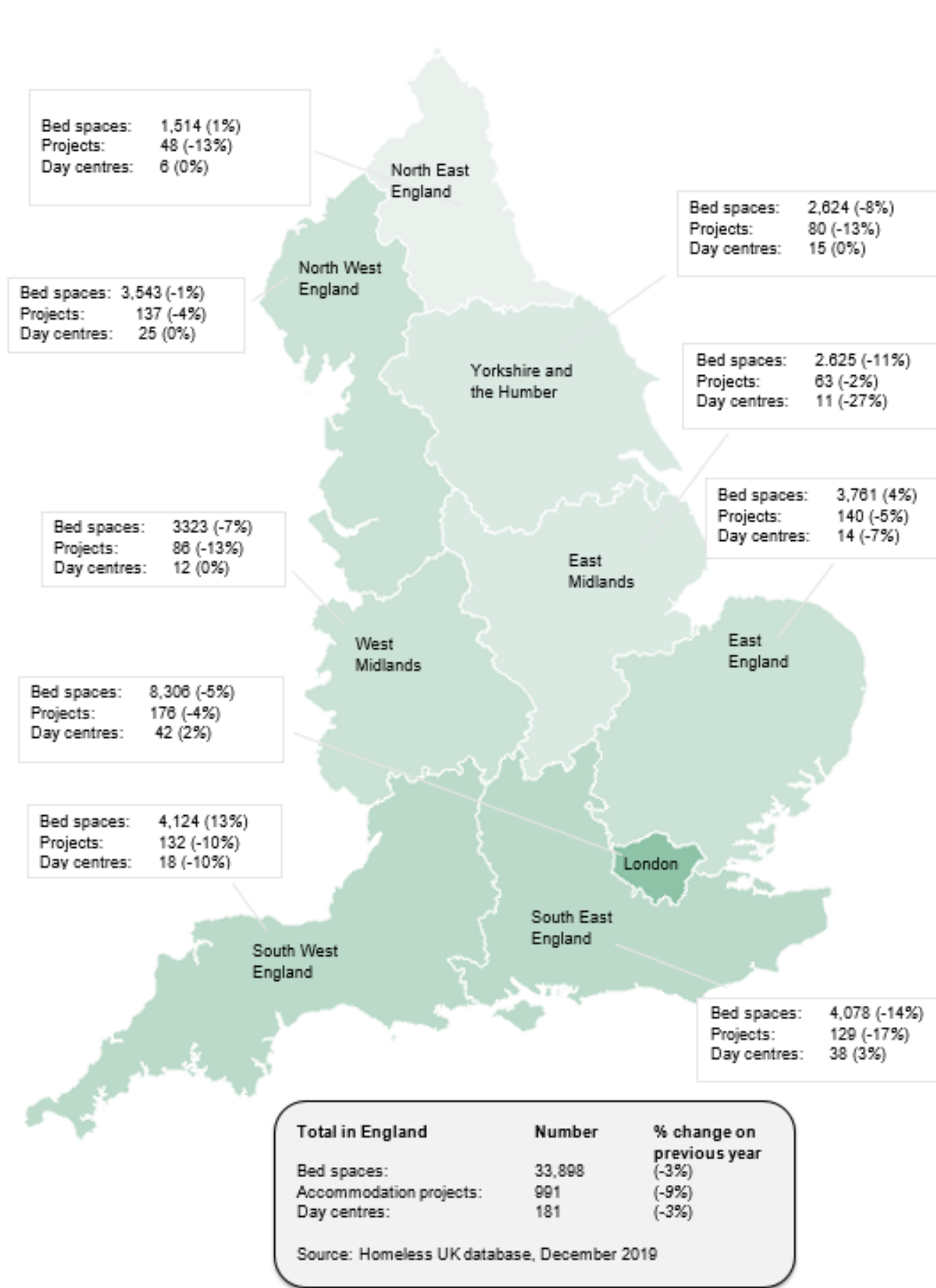
Availability of homelessness services

Data from the Homelessness England database identifies 991 accommodation projects for single people who are homeless in England, representing a 9% decrease from the previous year's figure of 1,085. The number of homelessness day centres has also decreased by 3% to a total of 181.

Bed spaces in accommodation projects have decreased by 3% to a total of 33,898. This year's figure of 33,898 represents an overall decrease of 22% since 2010 (when the total number was 43,655).

The map below shows that the scale of provision for single homeless people varies regionally. East, North East and South West have had an increase in the number of bed spaces. All regions have seen a decrease in the number of accommodation projects. The number of day centres has stayed the same in most areas, with the exception of East Midlands (-27%) and South West (-10%).

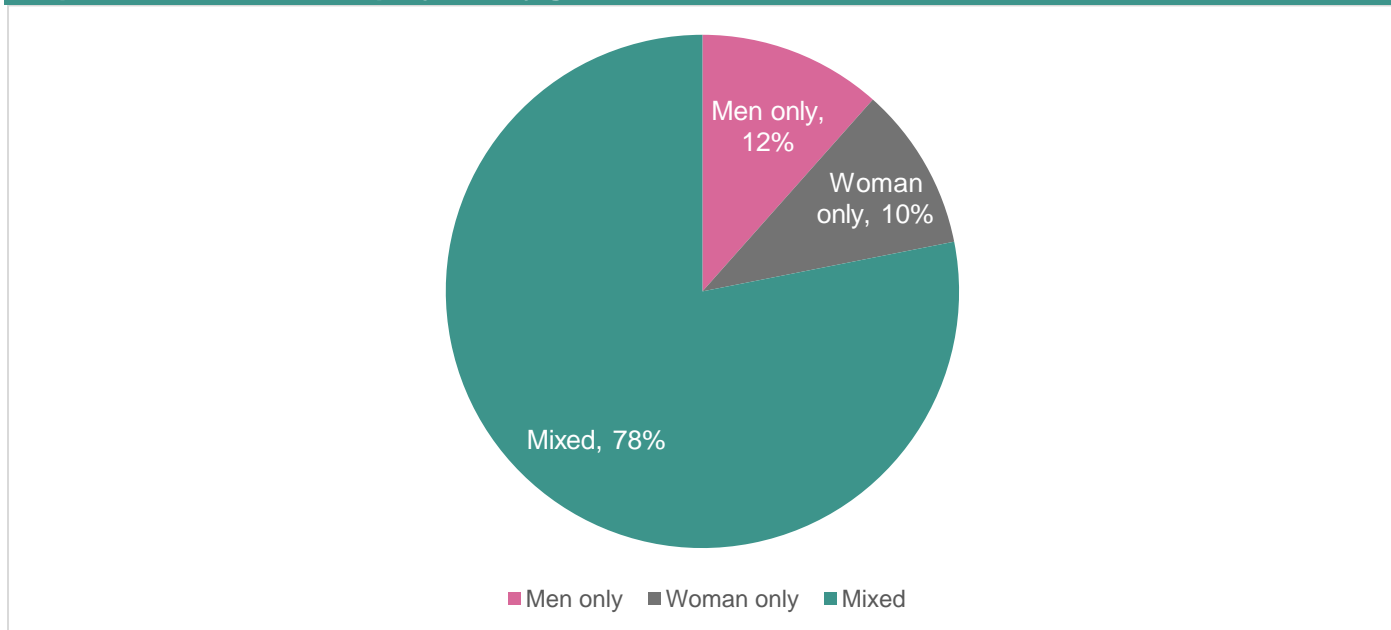
Figure 2: Heat map of bed spaces in England, by region



Availability of accommodation projects by gender

A total of 78% of accommodation projects in England provide mixed accommodation, with others offering male (12%) or female-only accommodation (10%). Compared to last year, there has been an increase of 1% in the proportion of mixed projects, and a decrease of 1% of female-only projects. There is no change in the percentage of male-only projects.

Graph 3: Accommodation projects, by gender



Source: Homeless England, N=1064

Availability of youth-specific projects

Since the causes, experiences and consequences of youth homelessness often differ from those of adults, the policy and practice responses should also be different.¹⁷ In England, there are 389 services specifically for young people aged 16-25 (39% of total). Although slightly lower than last year, this number still reflects a high proportion of youth-specific projects providing support that is tailored to the needs of young people who are homeless or at risk of homelessness. The following case illustrates how services are adapting to local needs:

¹⁷ FEANTSA (2017) Locked out: Housing solutions for vulnerable young people transitioning to independence. Available at: <http://www.feantsa.org/download/report-chloe-eng5472656428791867789.pdf>

Case study 2: Porchlight – The Be You Project (Prevention)

Porchlight noticed how young people who were LGBT+ were at a higher risk of homelessness and staff were increasingly seeing more LGBT+ young people access accommodation services.

The BeYou Project connects young people in Kent who are lesbian, gay, bisexual, trans, non-binary or are questioning their sexual orientation and/or gender identity. The service offers a safe, welcoming and non-judgemental space where young LGBT+ people can meet to socialise, have fun and mutually support each other.

Currently, this is enabled through the following activities:

Youth club sessions are delivered on a weekly basis in every district of Kent. The sessions run after school or in the evenings by a member of staff and a volunteer. Each session is structured to provide a setting where the young people can build trusted and positive relationships with each other, members of staff and volunteers. The aims of the sessions are to create safe spaces for age-appropriate socialising with other young people in the LGBT+ community and to help young people to feel less isolated.

The young people are able to discuss any issues they are experiencing within their families or at school as well as to speak to members of staff about their health, relationships or gaps in knowledge.

Since the start of the service to the beginning of May 2019, more than 300 young people have attended youth club sessions across 12 hub locations in Kent. In total there have been almost 300 youth sessions delivered in the county.

The website (www.thebeyouproject.co.uk) provides information on a range of LGBT+ topics including coming out, staying safe, support for parents/carers and teachers, sexual health, mental health, homelessness/housing support, abuse including domestic violence and bullying, and crisis support.

In the 12 months since The BeYou Project launched, the service has seen rapid growth in service access and has been demonstrating its positive impact on the lives of LGBT+ young people and their families. Porchlight's LGBT+ services for young people will be developed with the overarching aim of establishing a range of services which prevent young people in the LGBT+ community from becoming homeless, including:

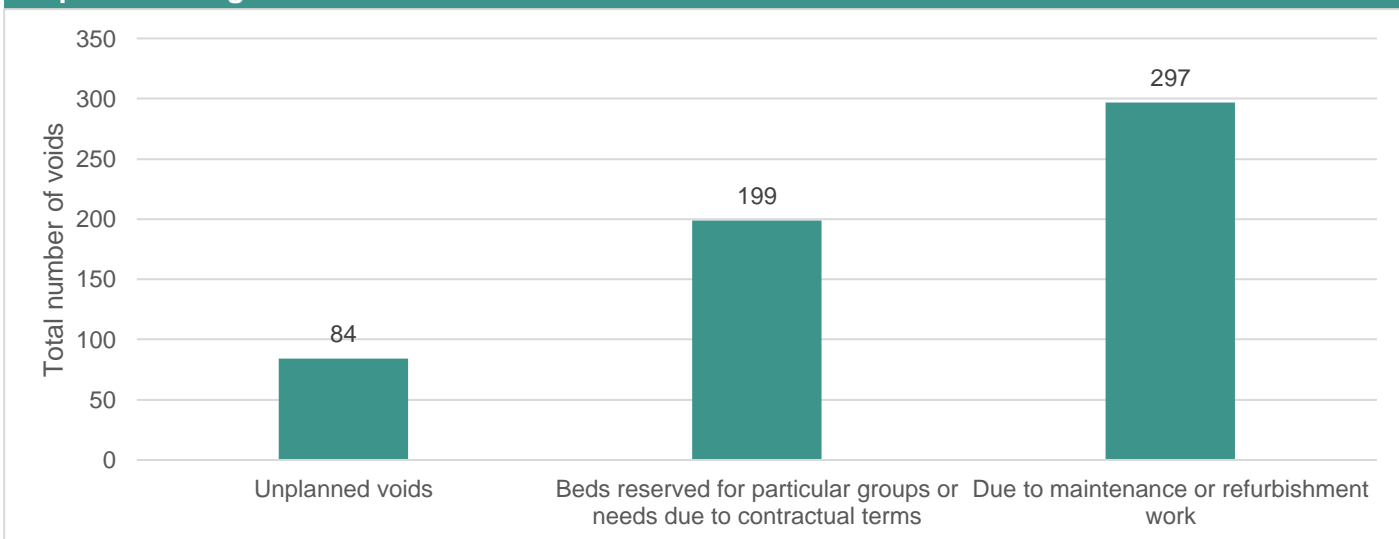
- expanding the current services to target those LGBT+ individuals most at risk of homelessness through delivery of 121 support and parent support sessions
- becoming the single point of access to LGBT+ related information for young people in Kent via The BeYou Project website
- equipping other relevant support agencies, commissioned providers or youth organisations with the tools to offer a more effective delivery of support for LGBT+ young people accessing their services
- providing supported accommodation which is specifically for LGBT+ young people who have become homeless
- providing positive and progressive support for young people and their families across the local communities in Kent. Ultimately these services will provide safe spaces – digitally, emotionally and physically – in the community. These spaces will enable young people who identify as LGBT+ to access support, advice and guidance as they navigate their relationships, health and housing.

The service aims to expand Porchlight's work with LGBT+ young people to help them develop the skills and confidence to be active members of their local community, as well as providing the support, understanding or information they may not be able to access at home or at school. This work will aim to be preventative in nature to avoid young people having to access more expensive intervention in the future such as homelessness services.

Bed night voids

To create a picture of the level of demand, the accommodation survey asked respondents whether they had any voids (empty beds) the previous night. Some providers are contracted to maintain a certain number of empty beds to meet particular groups such as rough sleepers. The graph below looks at how many of the voids were reported to be due to: unplanned voids, beds reserved for particular groups or needs due to contractual terms, or due to maintenance or refurbishment work. Respondents reported the total number of voids separately from the reason for these voids, and not all respondents provided a breakdown of reasons.

Graph 4: Bed night voids



N: 264

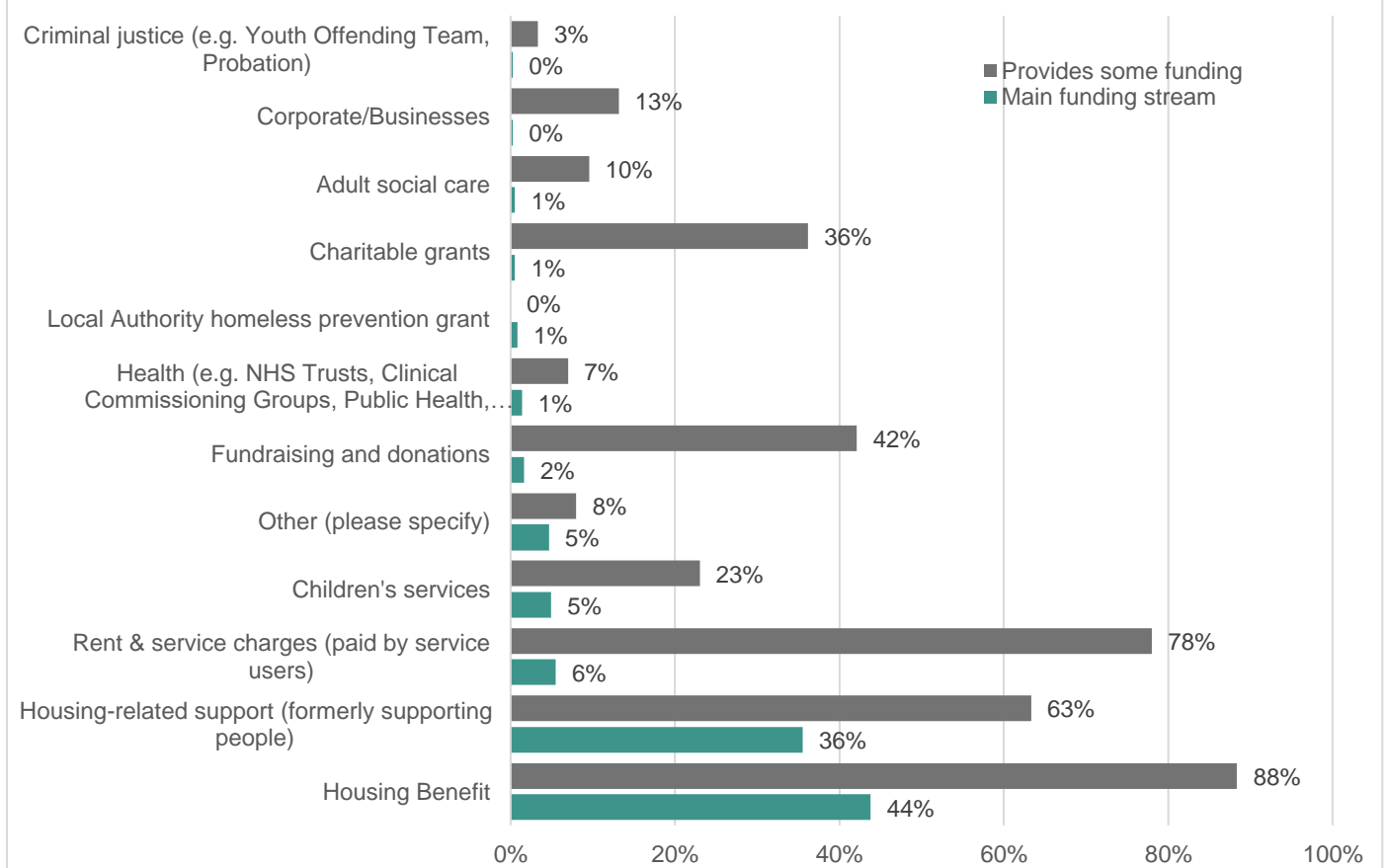
- 347 respondents (90% of projects) reported in aggregate a total of 724 voids.
- 41% of reported voids (across 108 projects) were due to maintenance or refurbishment.
- A total of 67 projects (19% of respondents) reported 1 void, which was the most common number of voids.
- 138 projects (40% of respondents) were operating at full capacity (i.e., reported 0 voids)

Given the low rate of voids overall and a high percentage due to maintenance or refurbishment work, the findings suggest there is limited spare bed capacity within the homelessness sector in England.

Funding

The survey explored how accommodation providers and day centres in England are funded and how this has changed over the past year. The majority of accommodation providers reported receiving funding from Housing Benefit (88%), rent and service charges (78%), and housing-related support (formerly supporting people) (63%). The most common source of funding for accommodation providers is Housing Benefit (88%) (Graph 5).

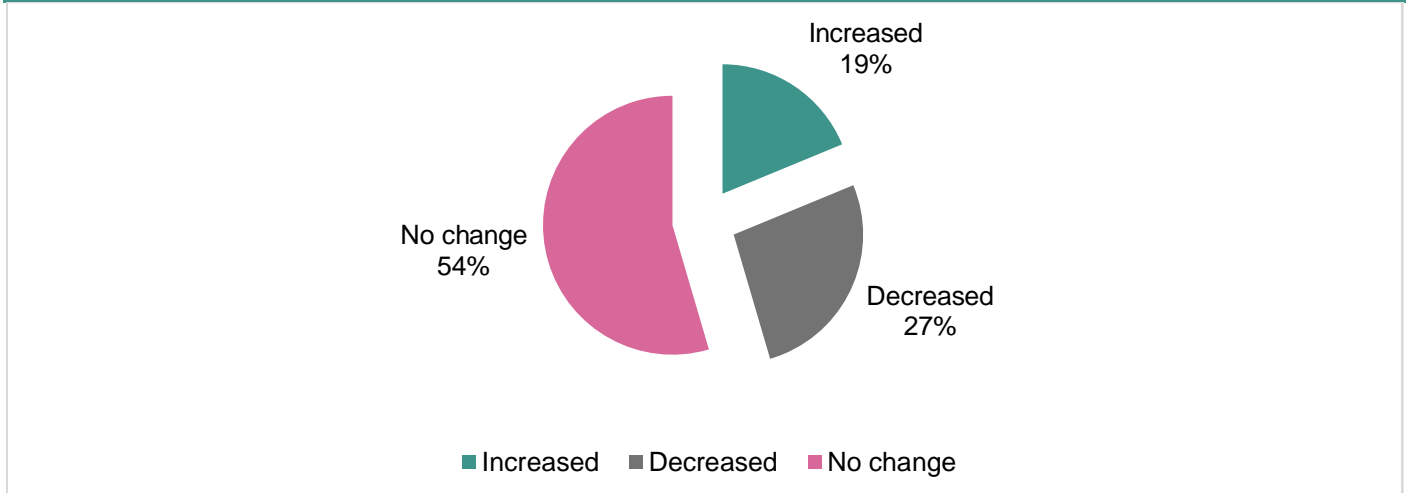
Graph 5: Funding sources for accommodation projects



Main funding (n:363), Some funding (n:366)

Most accommodation projects reported that since 2018 their funding has remained the same (55%). A smaller, but still considerable group reported a decrease (27%) or an increase (19%) in funding (Graph 6).

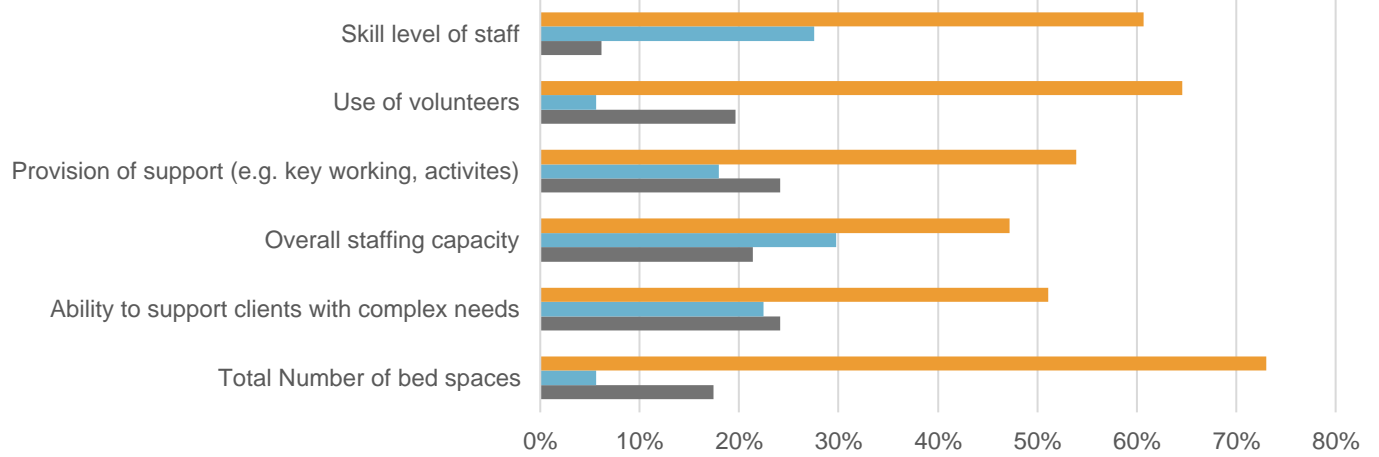
Graph 6: Overall funding compared to the last financial year for accommodation projects



N: 341

The survey explored the effects of funding changes on the services provided by accommodation projects (Graph 7). It is encouraging to note that accommodation providers were more likely to report an increase in bed spaces (17%) rather than a decrease (6%). A fifth (20%) reported an increase in volunteers. However, accommodation providers also reported a range of negative impacts, such as a drop in overall staffing capacity (30%), in the skill level of staff (28%), and in their ability to support clients with complex needs (22%).

Graph 7: The effects on services after funding change



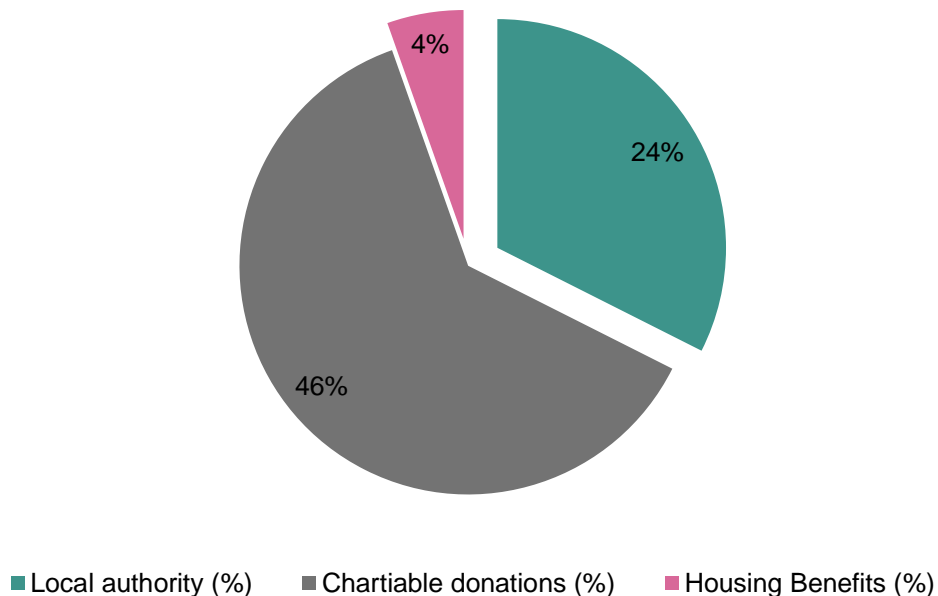
	Total Number of bed spaces	Ability to support clients with complex needs	Overall staffing capacity	Provision of support (e.g. key working, activities)	Use of volunteers	Skill level of staff
■ No change	73%	51%	47%	54%	65%	61%
■ Decreased	6%	22%	30%	18%	6%	28%
■ Increased	17%	24%	21%	24%	20%	6%

N: 178

Day centre funding

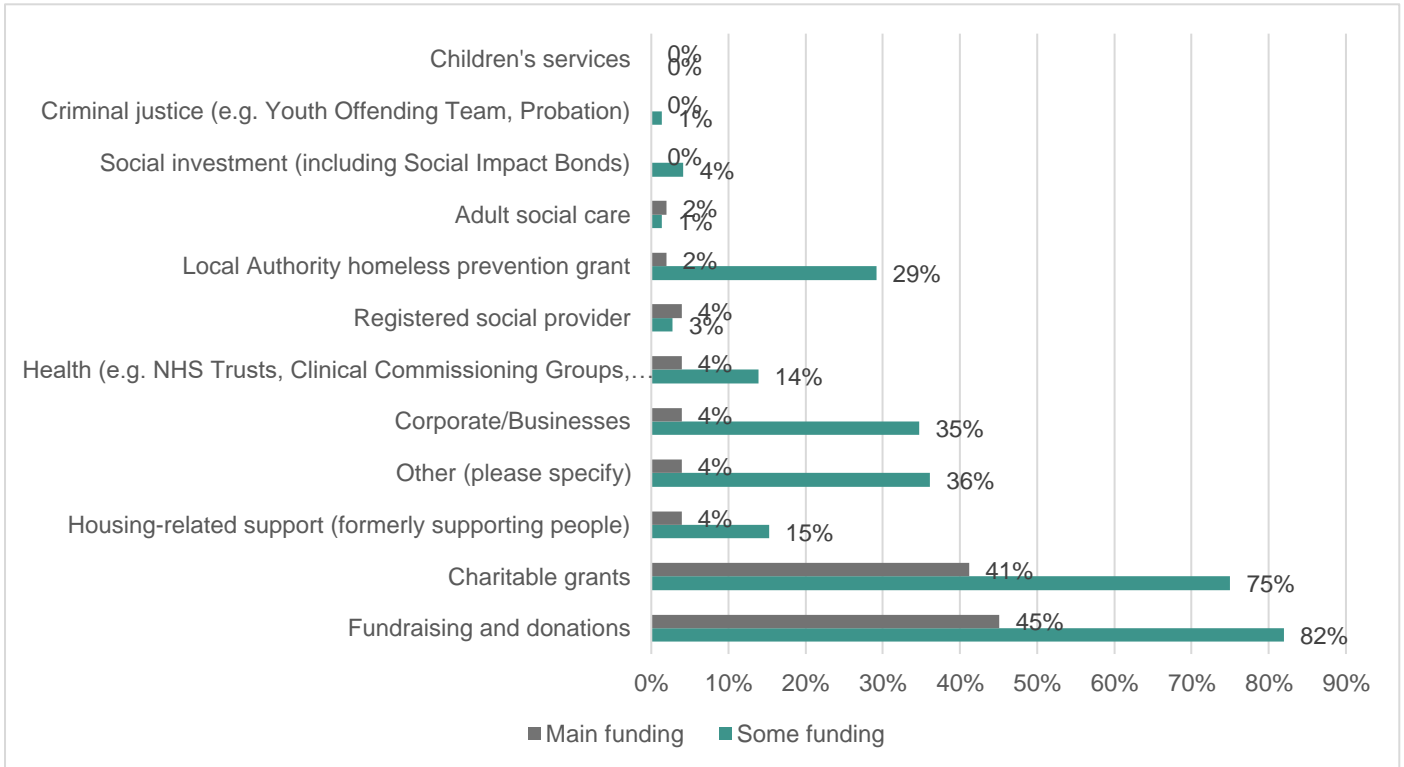
Compared to accommodation providers, day centres are much less likely to receive funding from statutory sources (Graph 8). The majority of day centres receive some funding through fundraising and donations (82%) or charitable grants (75%) (Graph 9).

Graph 8: Funding proportion for day centres



N: 54

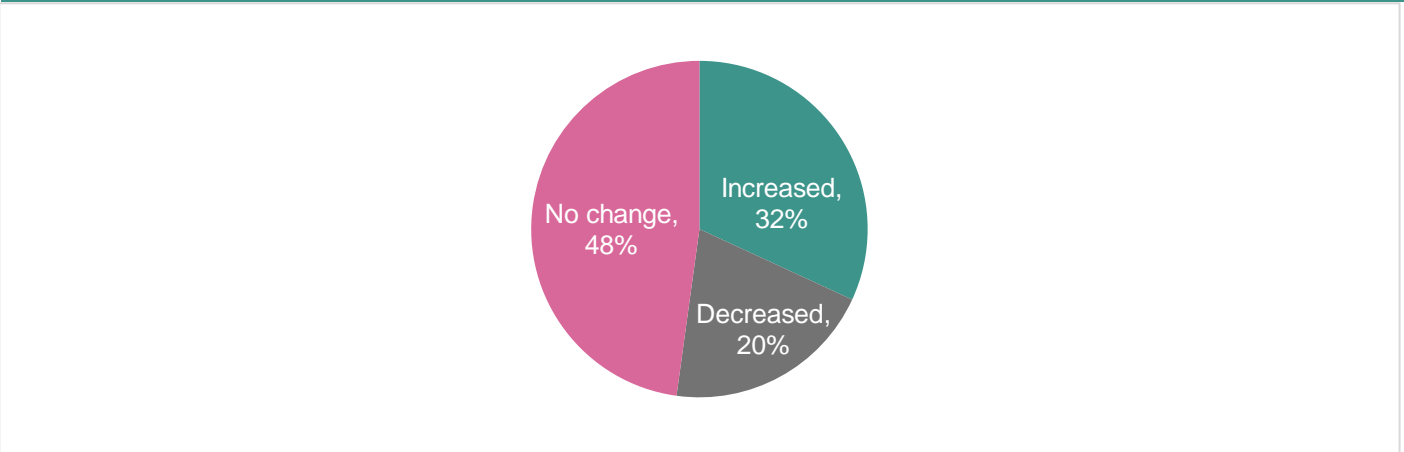
Graph 9: Funding sources for day centres



Main funding (n: 51), Some funding (n: 70)

Since the last financial year, 48% of day centres had not experienced any change in funding, whilst 32% experienced an increase and 20% a decrease.

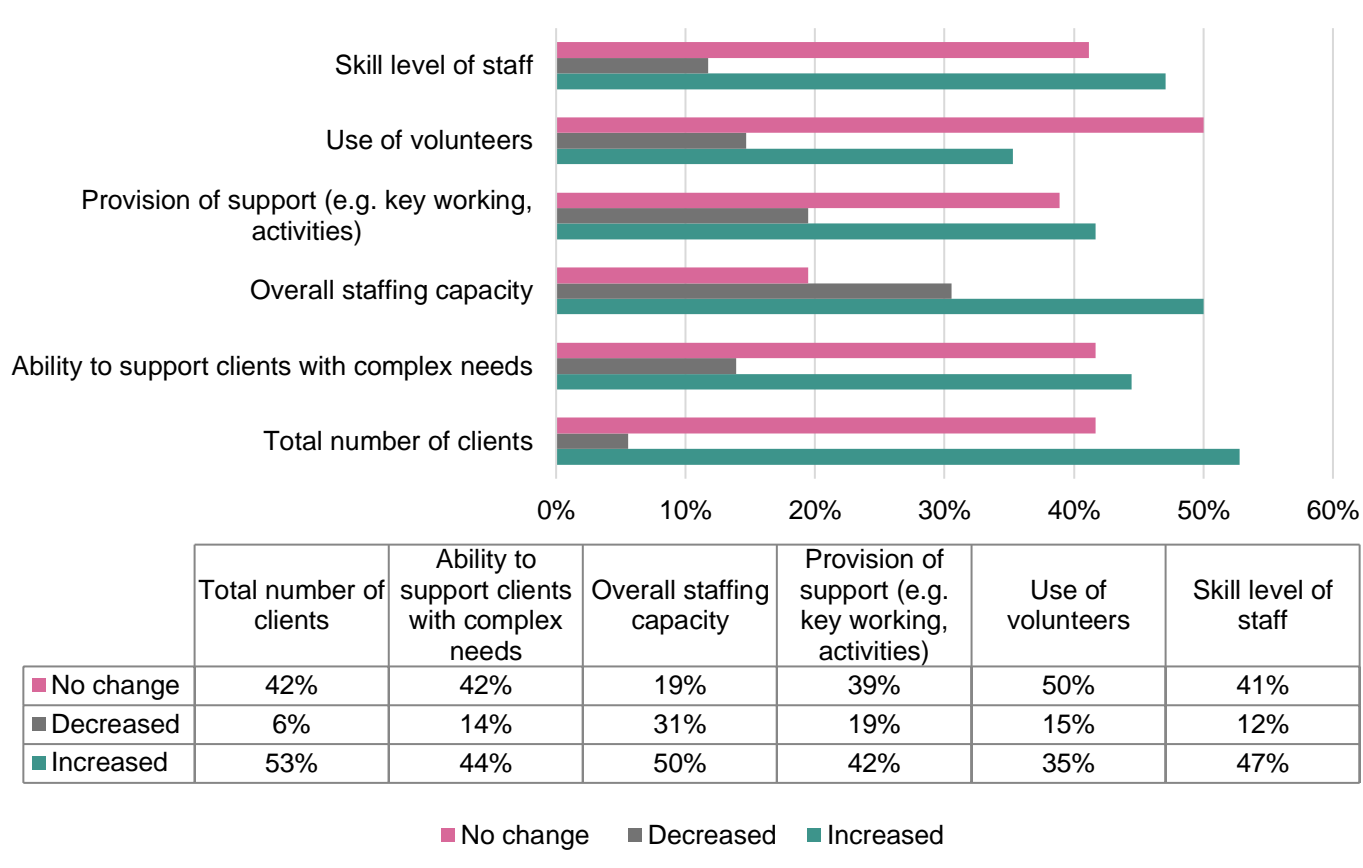
Graph 10: Overall funding compared to the last financial year for day centres



N: 69

The survey explores the effect of funding changes on day centres services. Just over half of day centres (n: 36) reported an increase in the use of volunteers (36%) and just under half the respondents reported an increase in the total number of clients (44%). However, a number of day centres (31%) also reported a decrease in overall staffing capacity (i.e. number of staff employed by an organisation).

Graph 11: The effects on day centre services after funding change



N: 36

Chapter 4: Use and delivery of services

This chapter explores the characteristics and support needs of single homeless people. Drawing on findings from the day centre and accommodation survey, it looks at the main services provided by homelessness organisations, and the barriers homeless people face in accessing support.

Key headlines

- The majority of people experiencing 'single homelessness' and accessing accommodation (64%) and day centres (81%) are male.
- The proportion of women accessing accommodation (28%) and day centres (19%) remains relatively low.
- 35% of people accessing accommodation services and 13% of those accessing day centres are young people aged 18-25.
- Mental health is the most common support need of those accessing day centres and accommodation services.
- Homelessness accommodation providers and day centres provide a wide array of services - from life skills to basic needs provision.

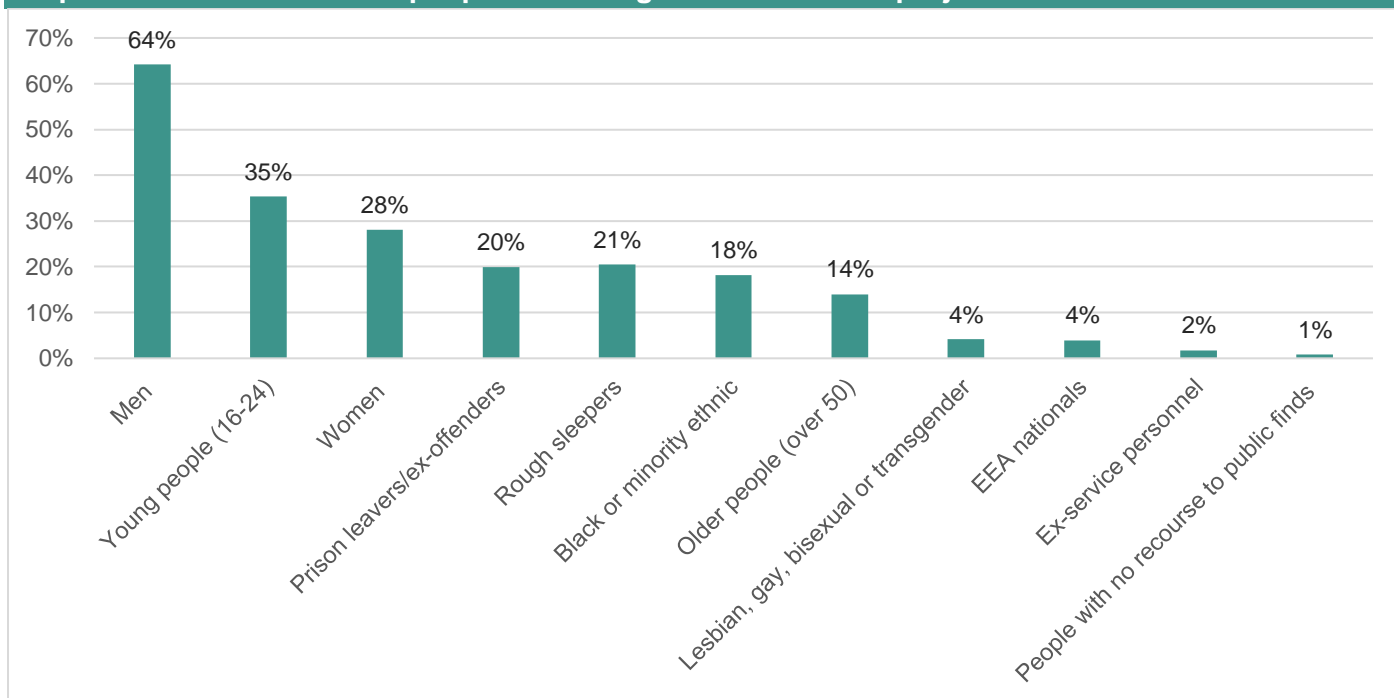
People experiencing 'single homelessness': characteristics

The survey asked accommodation providers to provide estimates on the socio-demographic information about those accessing their services 'last night.' The findings indicate that the majority of homeless people accessing accommodation projects (64%) as well as day centres (81%) are men (Graph 12 & 13). Research has however shown that both women¹⁸ and young people¹⁹ (aged 16-24) will tend to stay in 'hidden homeless' situations (e.g. sofa surfing) rather than access services. Many single homeless women and young people may therefore not be captured in statistics.

¹⁸ Crisis (2008) *Policy briefing: Homeless Women Briefing*, Available at: http://www.crisis.org.uk/data/files/publications/2945Homeless_women_policy_recommendations.pdf

¹⁹ Homeless Link (2018) *Young and Homeless 2018*, Available at: <https://www.homeless.org.uk/sites/default/files/site-attachments/Young%20and%20Homeless%202018.pdf>

Graph 12: Characteristics of people accessing accommodation projects



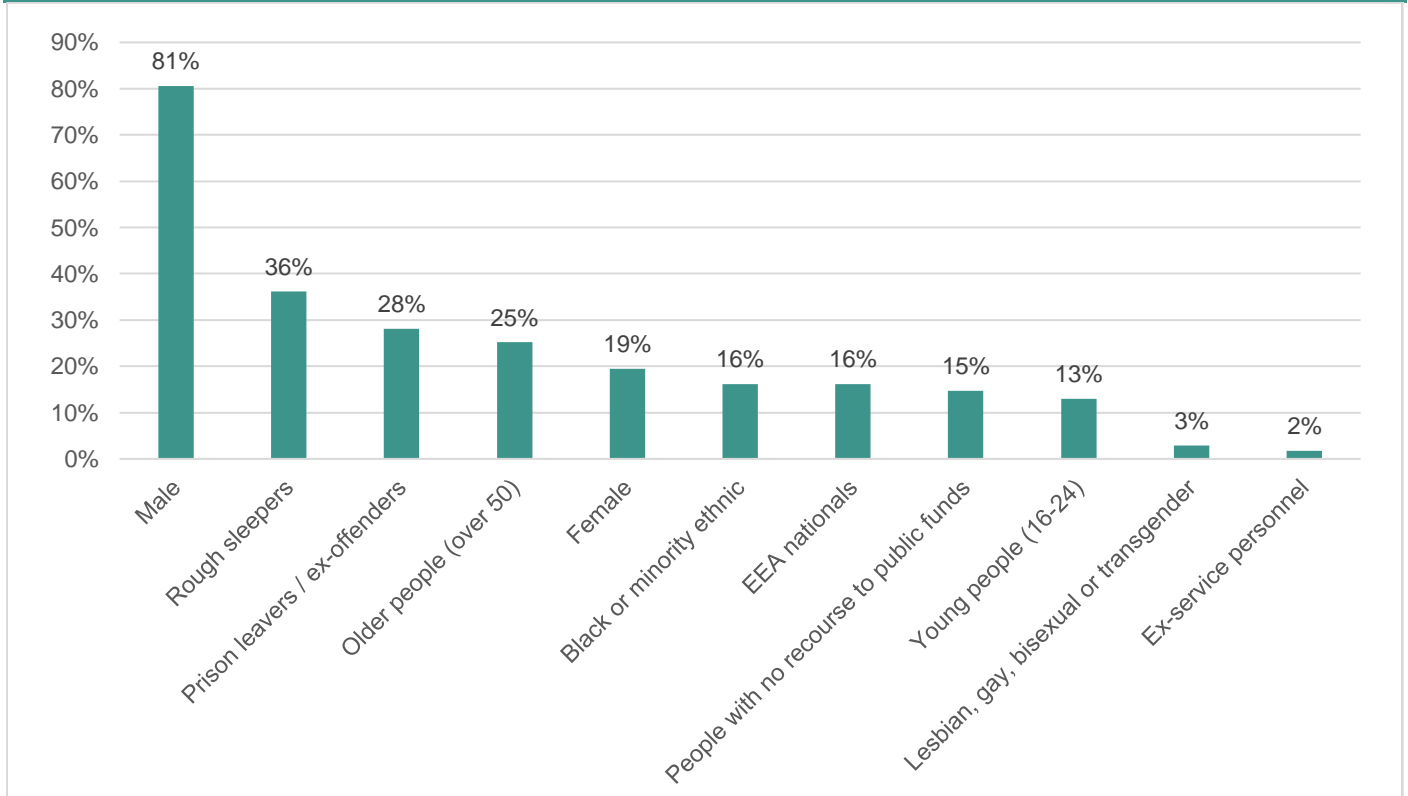
N: 331

The findings from this year’s study indicate the following socio-demographic trends: accommodation providers support more young people (35%) than older people (14%). Day centres support a greater proportion of older people (25%) than young people (13%). Women are more likely to access accommodation services (28%) than day centres (19%).

People sleeping rough access day centres (36%) at a much higher rate than accommodation projects, which serves to illustrate the role of day centres in providing services to those who are on the streets. The seemingly low proportion of people who identify as lesbian, gay, bisexual and transgender plus (LGBT+) should be treated with caution as previous research suggests that LGBT+ people are over-represented in the UK homelessness population, and accurate recording of sexual identity may not be common practice within services.²⁰

²⁰ The Albert Kennedy Trust (2014) *LGBT Youth Homelessness: A UK National Scoping of Cause, Prevalence, Response and Outcome*, Available at: <https://fostercarerresources.files.wordpress.com/2015/02/lgbt-youth-homelessness-scoping-report.pdf>

Graph 13: Socio-demographic characteristics of day centre clients

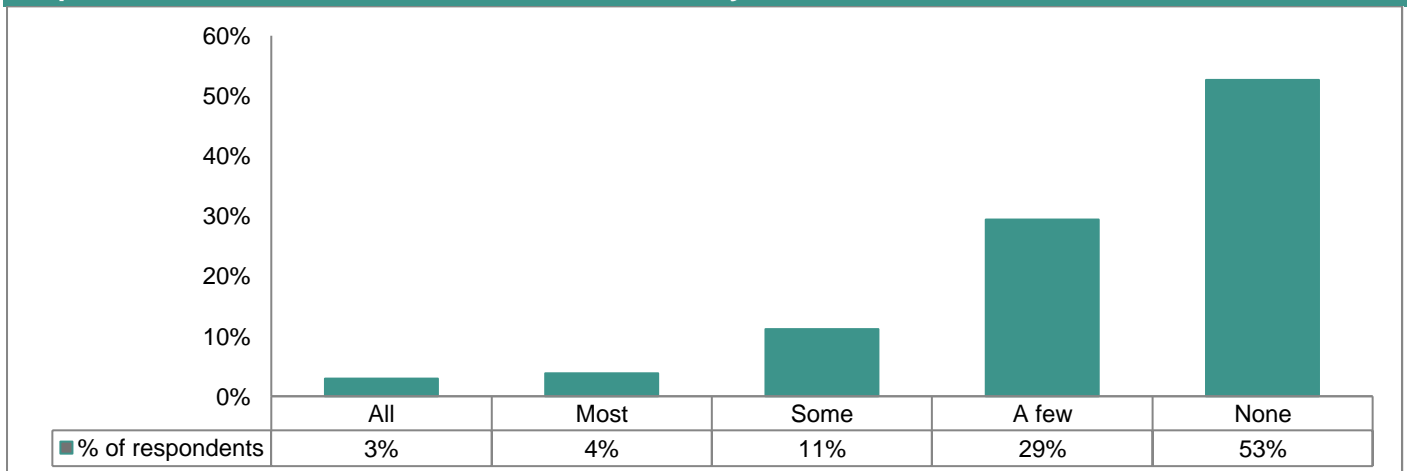


N: 56

Support needs

Service providers were asked for information on the support needs of people accessing their services 'last night.' Only 3% of accommodation providers reported that all of their residents had no support needs other than housing needs. In contrast, 53% of accommodation providers responded that all of their residents had support needs beyond their accommodation needs.

Graph 14: Accommodation clients with no needs beyond their accommodation need



N: 340

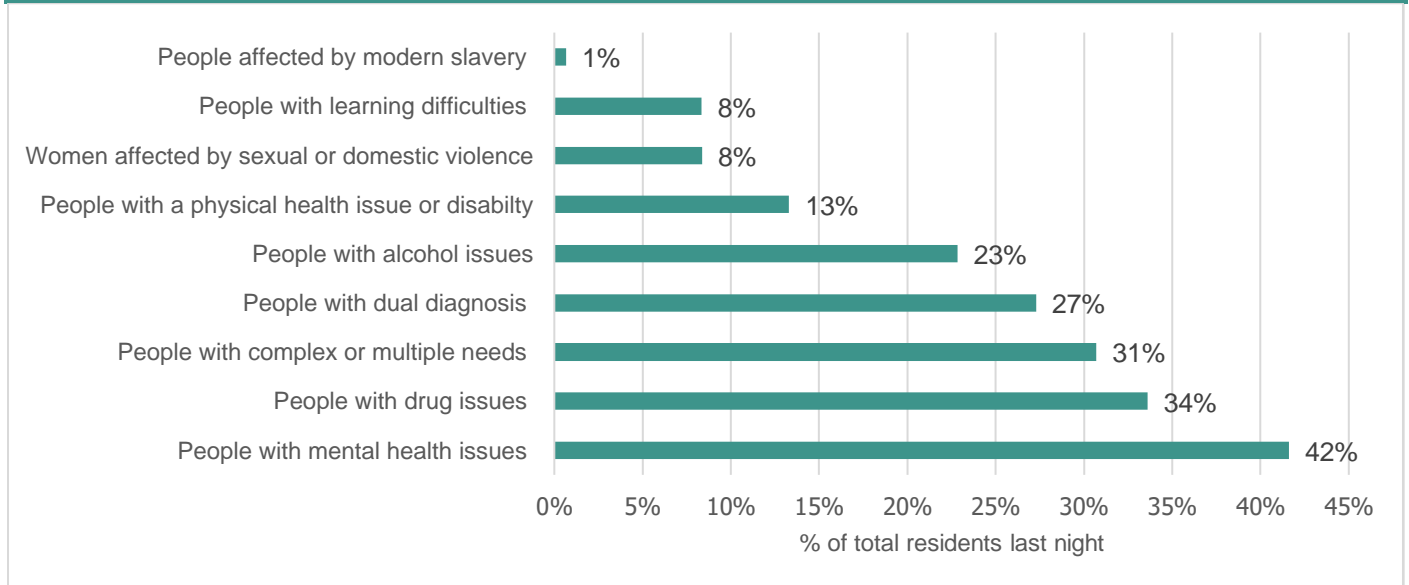
Mental health issues are the most commonly reported support need experienced by people accessing accommodation providers (42%) as well as day centres (50%), reflecting earlier studies showing that mental health problems are particularly prevalent among people experiencing homelessness (Graph 15 & 16).²¹

Many people with complex needs access day centres (31%) as well as accommodation providers (31%). Complex needs are defined in this study as experiencing two or more of the following support needs: mental health, alcohol or drug abuse, learning difficulties, or offending behaviour.

Substance misuse can be a cause or a consequence of people becoming homeless, and accommodation providers reported that 34% of people accessing their services faced drug issues, and 23% faced alcohol issues. Day centres reported that 37% of their clients experienced alcohol problems, and 37% had drug problems.

The number of people presenting with a dual diagnosis of both mental health and substance abuse issues was high among both accommodation providers (27%) and day centres (34%). Other research has shown that people experiencing homelessness who have a dual diagnosis face significant difficulties in accessing counselling and other mental health services.²²

Graph 15: Support needs of accommodation project residents

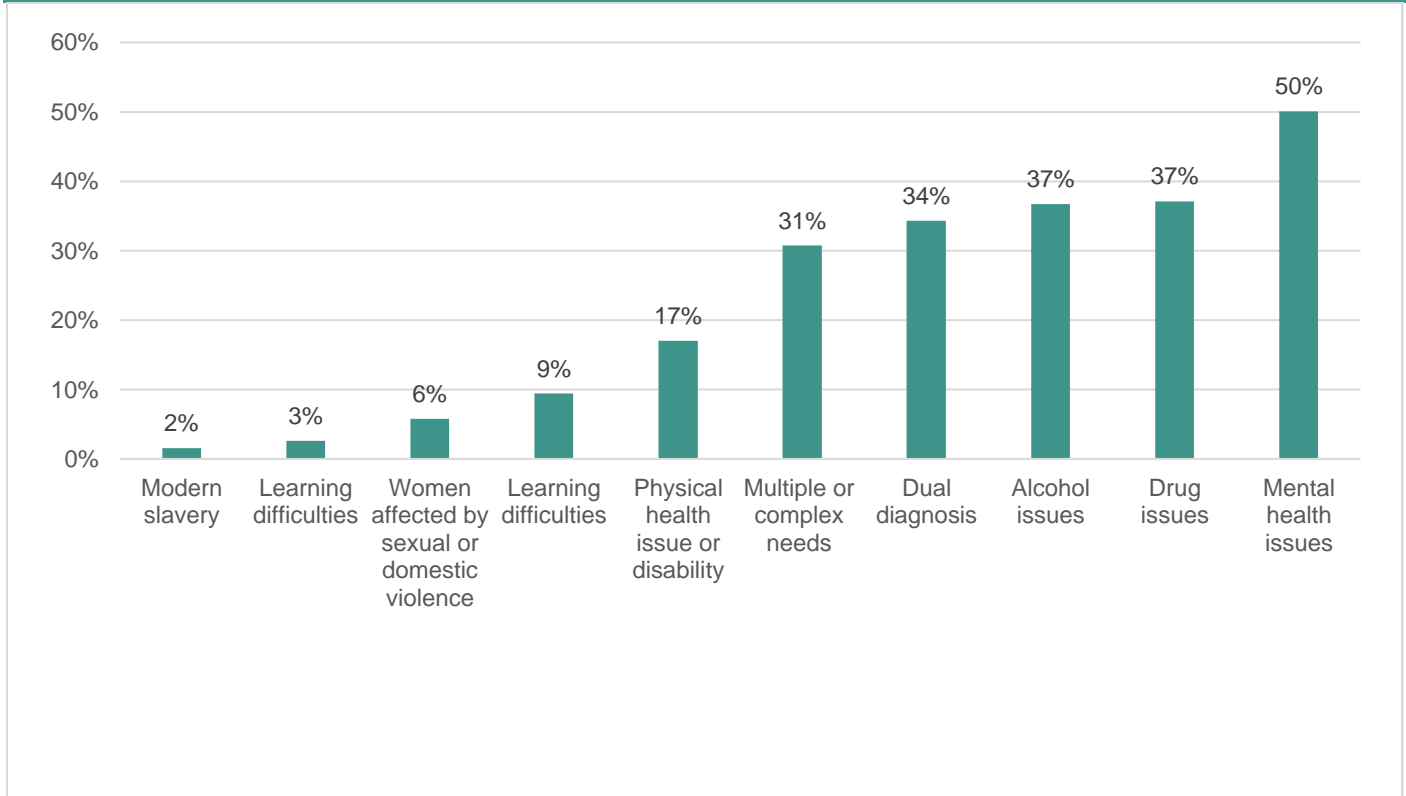


N: 305

²¹ Homeless Link (2014) *The Unhealthy state of homelessness: Health audit results 2014*, <https://www.homeless.org.uk/sites/default/files/site-attachments/The%20unhealthy%20state%20of%20homelessness%20FINAL.pdf>

²² Homeless Link (2018) *The Future Hostel*, https://www.homeless.org.uk/sites/default/files/site-attachments/The%20Future%20Hostel_June%202018.pdf

Graph 16: Support needs of day centre clients



N: 53

Previous research has shown that many single homeless people have faced significant disadvantages, such as experiences of trauma, complex trauma, and adverse childhood experiences.²³ The following case study provides an example of how providers can adapt their practice to effectively support people with experiences of trauma.

²³ Crisis (2014) *Nations apart? Experiences of single homeless people across Great Britain*, Available at: https://www.crisis.org.uk/media/20608/crisis_nations_apart_2014.pdf

Case study 3: Coastline – Psychologically Informed Environment (PIE)

Coastline have delivered supported accommodation services to people experiencing homelessness since 2007. Services are predominantly funded through Cornwall Council commissioning and housing management related services funded by rents and service charges.

Coastline owns and delivers the only direct access crisis accommodation service in the county for single adults who are homeless from Chi Winder in Pool. These individuals are usually experiencing multiple disadvantages and typically stay in the service for no more than six weeks.

Individuals in the accommodation are supported to address any immediate support needs including but not limited to securing suitable accommodation, making a planned move, making links to healthcare, substance misuse, mental health, offender and other complex needs support services as appropriate.

Chi Winder facilities

The building offers 18 bedsits with their own en-suite facilities. The ground floor has a large communal well designed area, in-house GP surgery, commercial standard kitchen, laundry, IT areas, staff offices and individual meeting pods.

Coastline's approach

Coastline's homeless service takes a Psychologically Informed Environment's (PIE) approach to their work with individuals who have often experienced multiple traumas in their life, and who are usually coping with a complex range of needs which can include domestic violence, drug and or alcohol dependency, poor physical and mental health.

Being a PIE service means they aim to create places of physical and psychological safety for those who approach for help. Coastline constantly works to reflect on their practice as a team, to learn from what they have heard and seen clients experience and to improve our ability to respond professionally, safely and appropriately to those who are rough sleeping. The building design and interior layout and decoration was chosen specifically to create places of safety, openness and light to support their PIE approach.

Since Coastline moved into Chi Winder in September 2019, all 18 ensuite rooms have been full at all times. More than 79 individuals have been accommodated in Chi Winder, with 54 more moving through the service on a very temporary 1-2 night basis whilst waiting for a bed to become available either in Chi Winder or in other provision. This is made possible by provision of an additional 5 sit up beds being available per night.

Services

Homeless service staff and volunteers alongside Coastline client involvement partners and external partners will help to deliver the following services from Chi Winder

- Needle Exchange – in partnership with Addaction
- Health for Homeless GP surgery
- Gardening group
- Life skills courses including pre tenancy skills, health and wellbeing programme, and managing money
- Catering skills courses
- Volunteering opportunities
- Peer support work

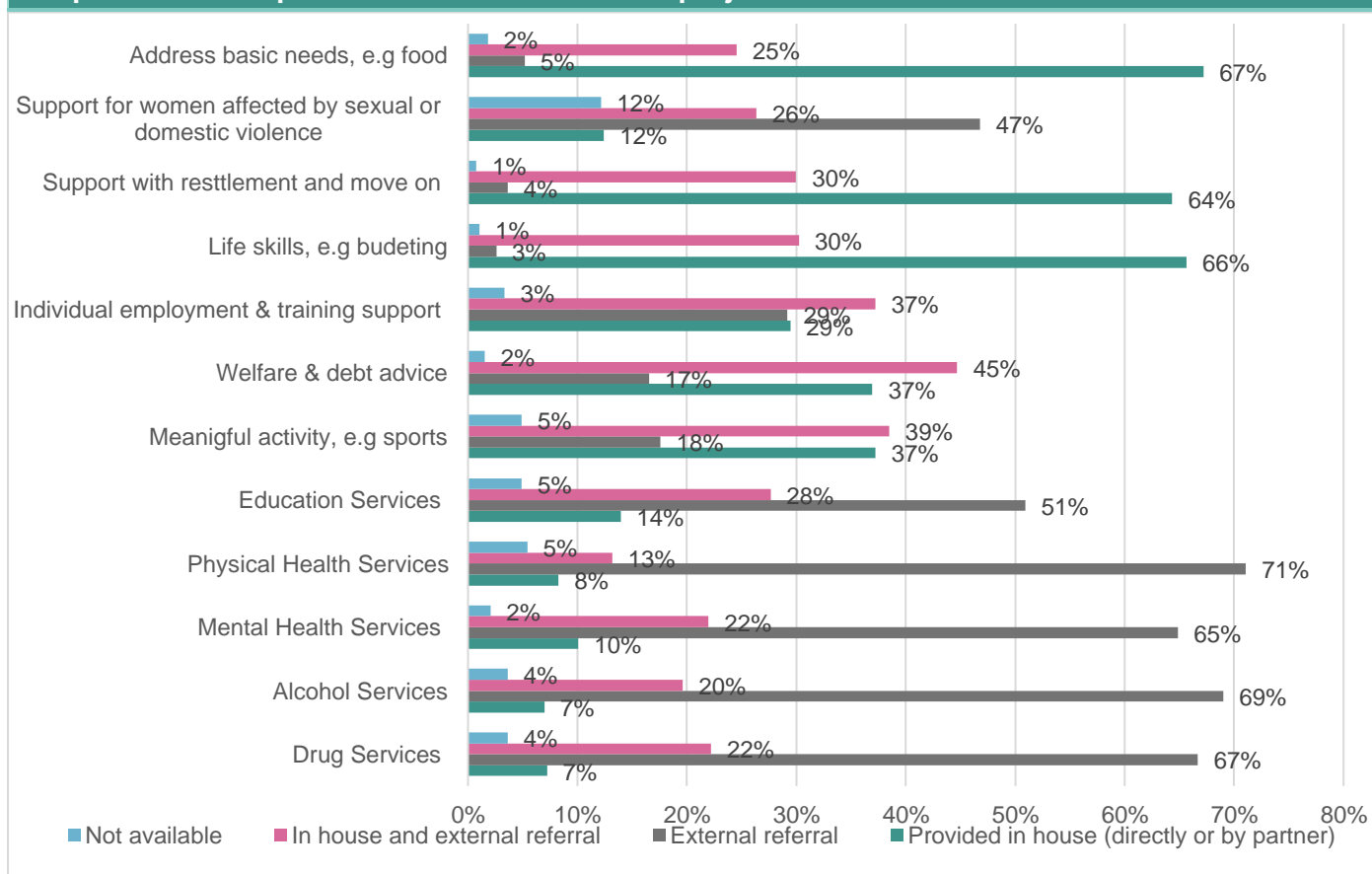
Service Provision

Accommodation providers and day centres provide a range of services to help people address their support, care, and practical needs. Most services report not being equipped to meet all clients' needs directly and will often work in partnership with other voluntary or statutory organisations to provide a wide range of support services. These services can be provided in-house at the services' premises, externally at another service, or both.

Among accommodation providers, services that address basic needs (67%), life skills services (66%), and move on and resettlement support (64%), are usually provided in-house. Physical health (71%), mental health (65%), alcohol (69%), and drug (67%) services are mostly provided externally. Welfare advice (45%) and employment training (37%) were provided both externally and internally (Graph 17).

This year providers were asked about the availability of support for women who had been affected by sexual or physical abuse, and 12% of the respondents reported that this service was not available.²⁴

Graph 17: Service provision at accommodation projects

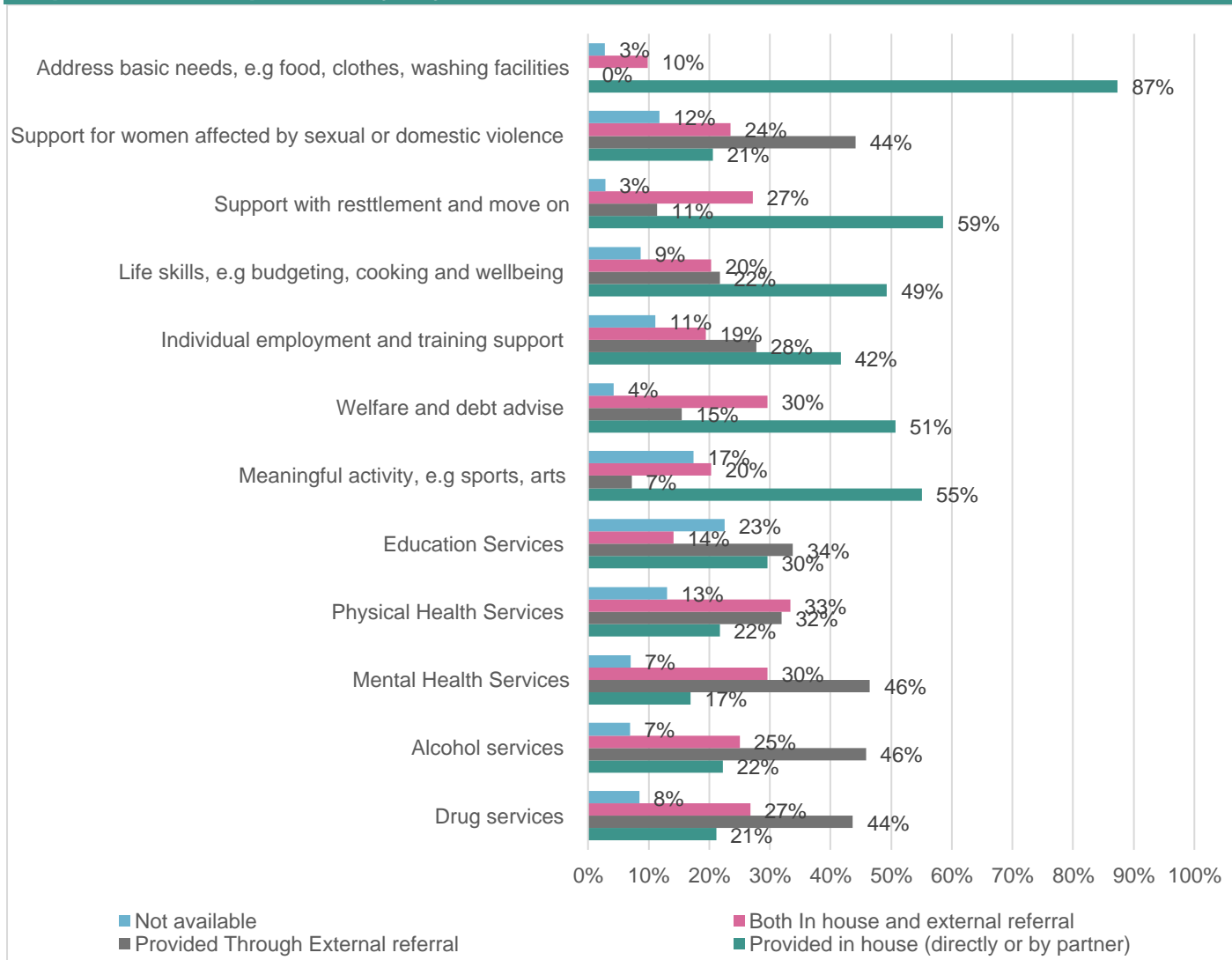


N: 387

²⁴ For further information see forthcoming - Research to explore approaches to supporting homeless women facing multiple disadvantage, Young and Horvath (2019)

Among day centres, basic provision such as food, washing facilities and clothes, is the most commonly provided service (87%), highlighting the role that these services play in meeting people’s immediate needs. A significant proportion also reported that they directly provide meaningful activities (55%), move on support (59%), and welfare and debt advice (51%) (Graph 18). These findings demonstrate the important role of day centres in offering not only basic provisions, but also a wide range of services that help tackle the complex underlying issues associated with homelessness and rough sleeping.

Graph 18: Services provided by day centres



N: 72

The survey findings show that individual employment and training support is part of the service provision at both day centres (42% in house) and accommodation services (20% in house).

Barriers to accessing services

The survey explored the barriers that people face in accessing services. Accommodation providers most commonly reported refusing access to their services as a result of people being deemed too high risk (83%) or too high need (71%) (Graph 19). These findings support other research indicating that people with multiple and complex needs can face significant barriers in accessing support²⁵ and highlight the need for increased

²⁵ Homeless Link (2018) *The Future Hostel*, https://www.homeless.org.uk/sites/default/files/site-attachments/The%20Future%20Hostel_June%202018.pdf

specialist provision for this cohort. Without specialist commissioning, service providers often struggle to provide the flexible but intensive one-to-one support required by people facing multiple disadvantage and to accommodate unpredictable behaviour. Provision for people with drug or alcohol dependency, people at risk of domestic abuse and offenders each account for an estimated one per cent of all supported housing units across Great Britain.²⁶ The following case study provides insight into how adopting a collaborative way of working can help clients with multiple disadvantage reach positive outcomes.

²⁶ Blood I, Copeman I & Finlay S (2016) Supported accommodation Review: The scale, scope and cost of the supported housing sector

Case Study 4: Making Every Adult Matter (MEAM) – Collaborative working

Norwich

The Norwich MEAM Approach work was started several years ago by Norwich City Council in partnership with statutory and voluntary sector agencies. These partners worked together, alongside people with lived experience, to develop a new approach called Pathways to support homeless people in the city experiencing multiple disadvantage.

Pathways is a commissioned intervention delivered by a consortium of local voluntary sector agencies. Pathways staff adopt a personalised approach to support, building on individuals' strengths and recognising the impact of the trauma they have experienced. They are supported by a cross-sector operational group, which meets to solve problems and ensure coordinated offers of support.

A senior multi-agency partnership board oversees the Pathways work and a similar partnership approach focused on women facing multiple disadvantage and domestic abuse. The board's role is to "create long-term improvements in systems, commissioning and policy which will lead to accessible, coordinated and responsive support for people facing multiple disadvantage, enabling them to manage the challenges they face". The board aims to amplify the voice of people with lived experience, disseminate identified best practice and learning, take collective action to remove systemic barriers to progress, and facilitate close working relationships between partners at a strategic level. The board is attended by representatives from the city and county councils, the Clinical Commissioning Groups (CCGs), Public Health, Community Rehabilitation Company (CRC), prisons, police and voluntary sector leaders.

To date, Pathways has supported over 80 'MEAM clients' across the city. An independent evaluation of the work has shown that multi-agency working was cited by the majority of stakeholders as a key strength of the Norwich Pathways work.

Doncaster

Over the last two years, Doncaster has developed an innovative 'whole system' model to tackle rough sleeping, called the Doncaster Complex Lives Alliance, which integrates the work of Doncaster Metropolitan Borough Council, Community and Acute NHS Trusts, primary care, housing, criminal justice and community, voluntary and faith organisations. The MEAM Approach has helped to shape this work.

The Alliance was formed in response to an increase in rough sleeping and was developed using a participatory design process, which has ensured an ongoing commitment to a user-centred and strengths-based approach.

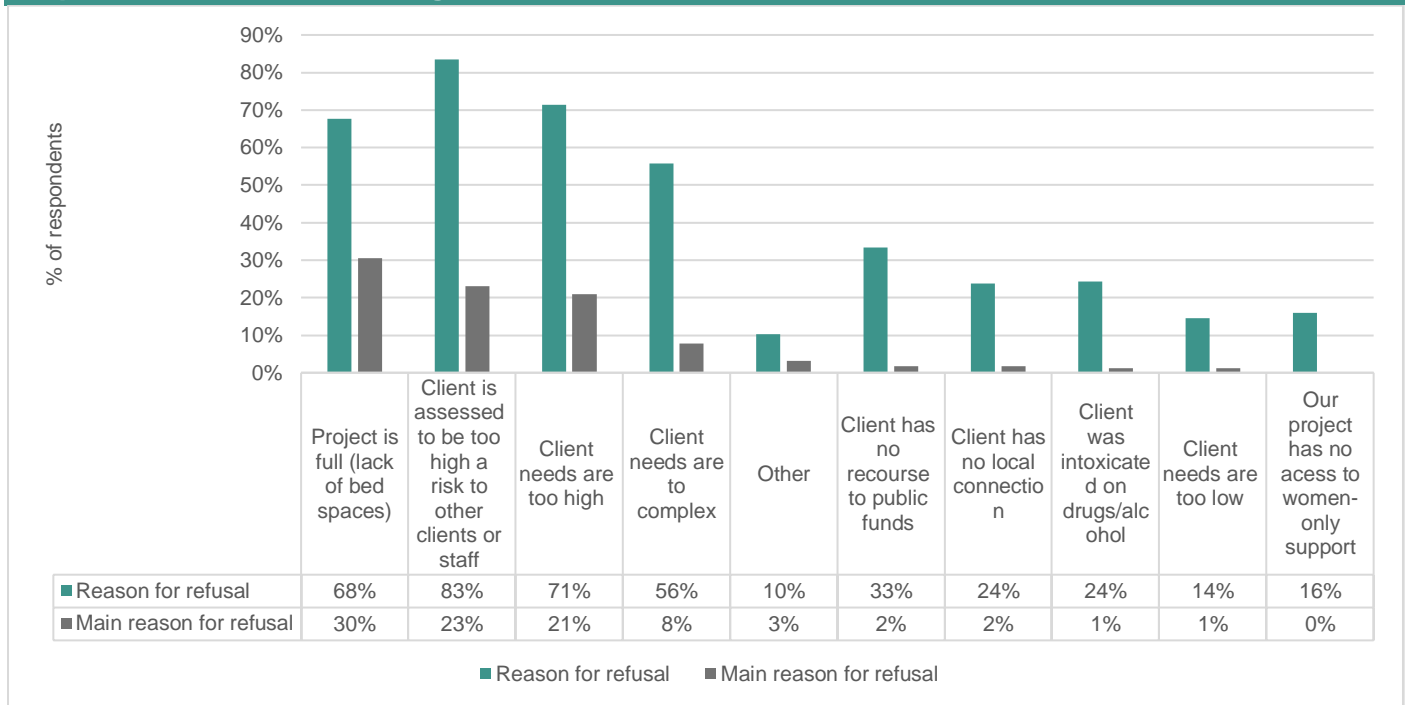
At the core of the Alliance is an integrated, multi-disciplinary delivery team including a manager, senior caseworker, three intensive MEAM support workers, six system navigators and specialist housing, assertive outreach workers, substance misuse, mental health, criminal justice, housing benefit and trauma workers. Included in the team is lived experience. There is also aligned support from the police, town centre officers, hostel/housing providers and health agencies. These professionals meet regularly taking a 'pragmatic problem-solving approach', requiring flexibility across all partners.

A responsive governance structure ensures that when system barriers are identified which cannot be solved by frontline workers, they are escalated and addressed by more senior partners in the system. A 'Bronze, Silver, Gold' escalation model is used, bringing together chief executives and senior managers to develop flexible approaches. The Gold Group is chaired by the Chief Executive of Doncaster MBC.

To date the Alliance has worked to support 115 people facing multiple disadvantage, all previously rough sleeping. Ninety of these people are now settled and stabilised in accommodation settings, being supported by key workers and wrap around support plans, and showing improvements relating to drug and alcohol misuse, physical health and offending behaviours.

Lack of bed spaces was identified as the most common main reason for refusing access to the service (30% of respondents), in turn indicating that demand for accommodation and support from the homelessness sector surpasses available capacity. Accommodation providers are unlikely to refuse access to a service because client needs are too low or on the basis of drugs/alcohol intoxication (Graph 19).

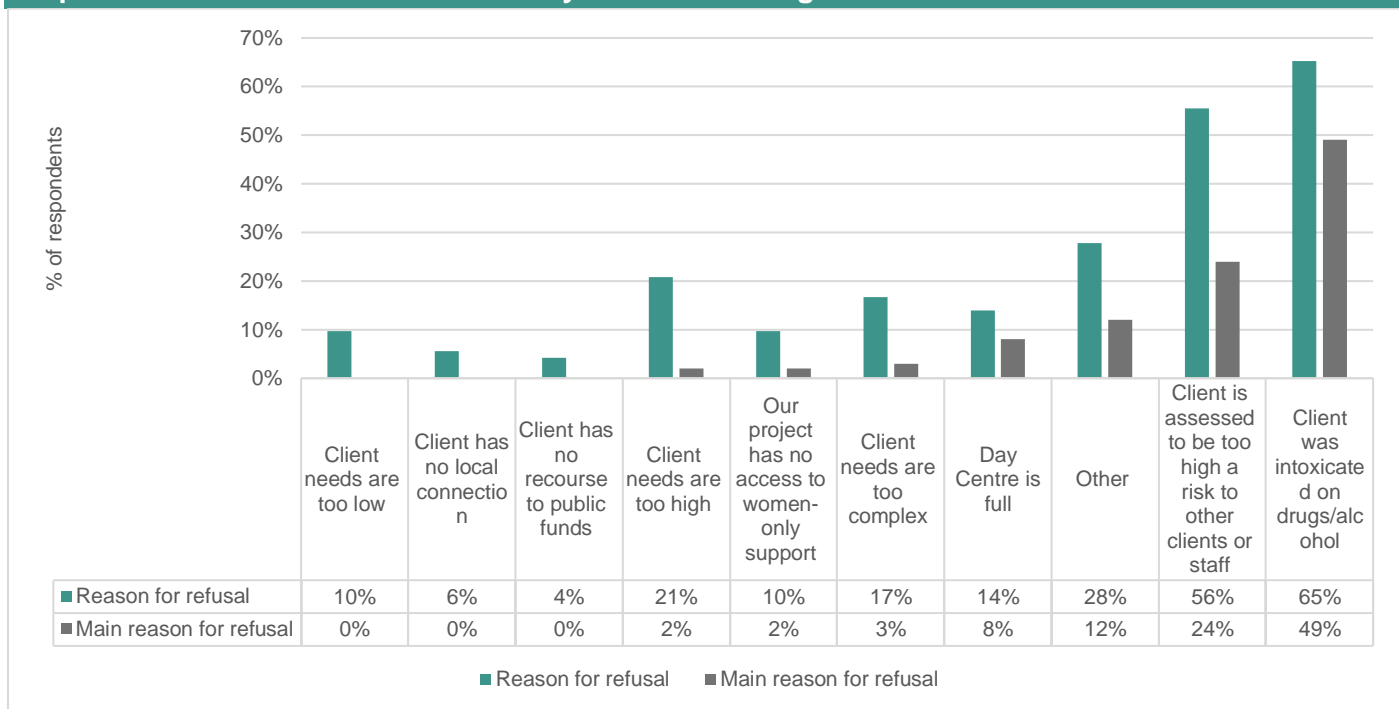
Graph 19: Reasons for refusing access or referrals to the service



Reason for refusal (n: 375) Main reason for refusal (n: 365)

Assessments that clients are too high-risk are also a key factor for refusing access to day centres, with 56% of services identifying this as a reason for refusing access (Graph 20). Day centres are less likely to refuse people access because their needs are too high, and only 21% reported having turned people away for this reason. 65% did report that they may refuse access to people who are intoxicated on drugs or alcohol. Day centres almost never turn people away on the basis of limited capacity, low support needs, or having no recourse to public funds.

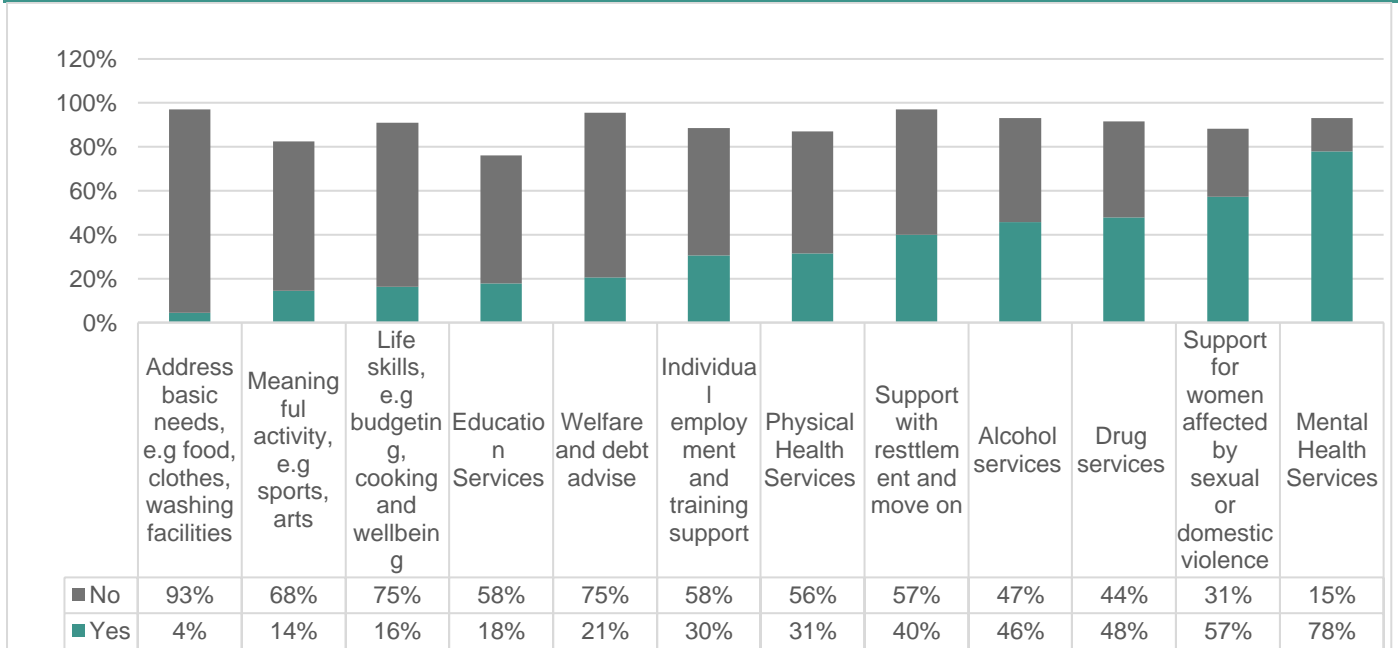
Graph 20: Most common reasons for day centres refusing access or referrals



Reason for refusal (n: 72) Main reason for refusal (n: 59)

Homelessness services will work with a variety of external partners, including but not limited to: adult social care, learning disability services, employment, education and training support services, the criminal justice system and women’s services.²⁷ This in turn allows a wide range of support to be provided. Day centres reported that people using their services were most likely to face problems in accessing mental health services (78%), drug services (48%), and alcohol services (46%). Women also faced difficulties in accessing support for those affected by sexual or domestic violence (57%) (Graph 21).

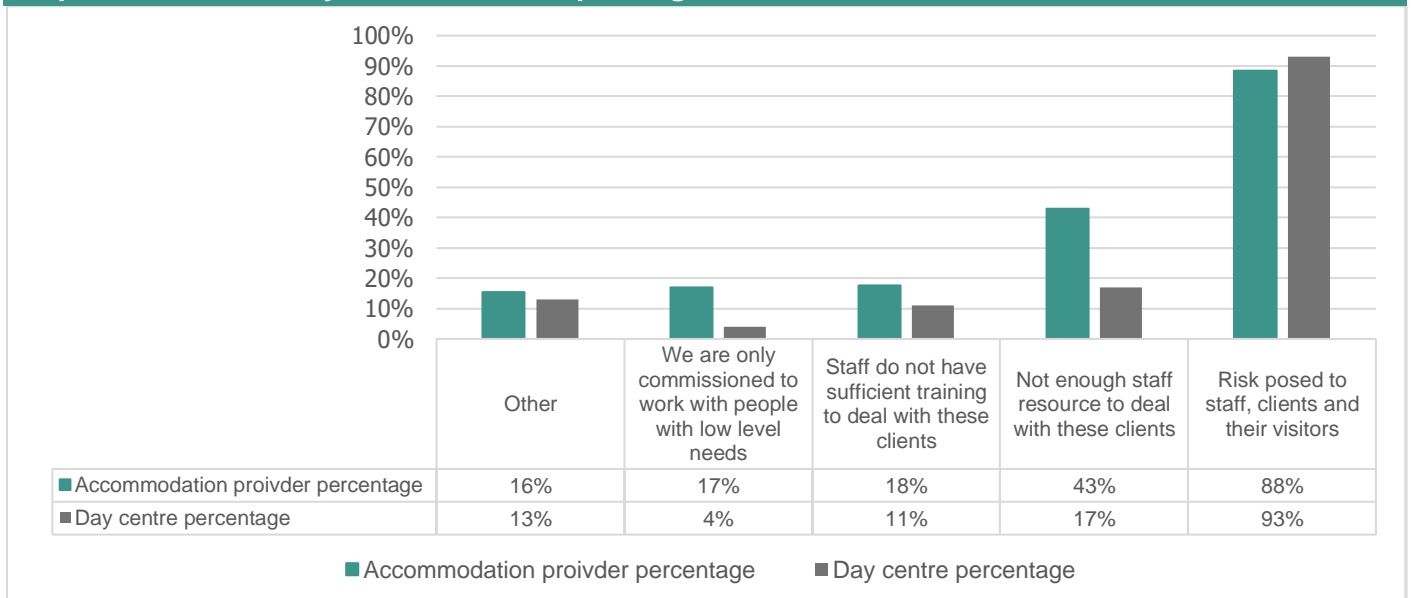
Graph 21: Problems accessing services for day centre clients



N: 72

Homeless Link’s previous Annual Review reports (2015 – 2018) have consistently shown that people with high and complex needs face significant barriers in accessing services.²⁸ This year’s survey asked providers to give reasons for refusing access to this client group, with both accommodation providers (88%) and day centres (93%) reporting that the risk posed to staff, clients, and their visitors is the main reason that they may refuse access. Lack of staff resources and lack of staff training to deal with people presenting with high or complex needs were also identified as key reasons (Graph 22).

Graph 22: Reasons why clients with complex/high needs are refused access or referral



Accommodation Project (N: 347) Day Centre (N: 46)

In an open text question, accommodation providers were asked to comment on the barriers that people experiencing homelessness face in accessing services. Issues relating to the waiting times to access

²⁸ <https://www.homeless.org.uk/facts/our-research/annual-review-of-single-homelessness-support-in-england>

services, in particular mental health services, came up most frequently. Concerns were also raised that those with drug/alcohol addiction were often refused access to mental health services.

Difficulties accessing external support services due to a variety of factors: long waiting lists, distance from project, cutting of local services e.g. no local rehab facilities, change in focus of services e.g. mental health teams focused on clients in crisis rather than long term monitoring'. (In-text response)

'Dual diagnosis - mental health services reluctant to work with people who have alcohol/substance misuse issues.' (In-text response)

'Lack of mental health services, lack of funding in mental health. High threshold. Clients have to be in a really bad state before they can get any help.' (In-text response)

Chapter 5: Outcomes, move on, and service developments

The main aim of services across England is to end people's homelessness, whether by providing a supportive pathway towards independent living or a stable home with the support they need to maintain it, such as in the case of Housing First .²⁹ This chapter draws on the accommodation survey findings to explore key trends in relation to move on and the process of recording outcomes. This final section will examine key approaches and models adopted by the sector.

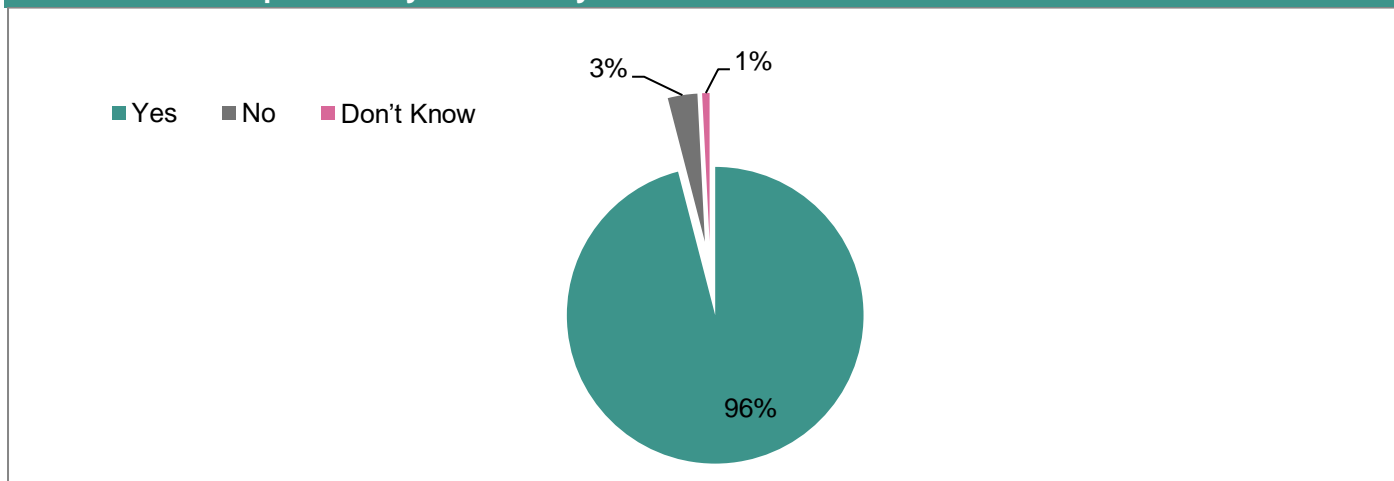
Key headlines

- The majority of accommodation services record outcomes achieved by individuals accessing their services (92%).
- In April 2018 – March 2019, 54% of people accessing accommodation services moved on positively from services. 16% exited in an unplanned move.
- 74% of accommodation providers in England continue to support individuals after they move on from services.
- 72% of accommodation providers in England report that a lack of accommodation available at the Local Housing Allowance is preventing people from moving on from their services.

Outcomes

Outcomes are defined here as the changes that take place as a result of interventions and services. The findings suggest that the majority of homelessness organisations use outcomes data to measure changes in the individuals accessing their services (Graph 23).

Graph 23: Do you currently record information about client outcomes?



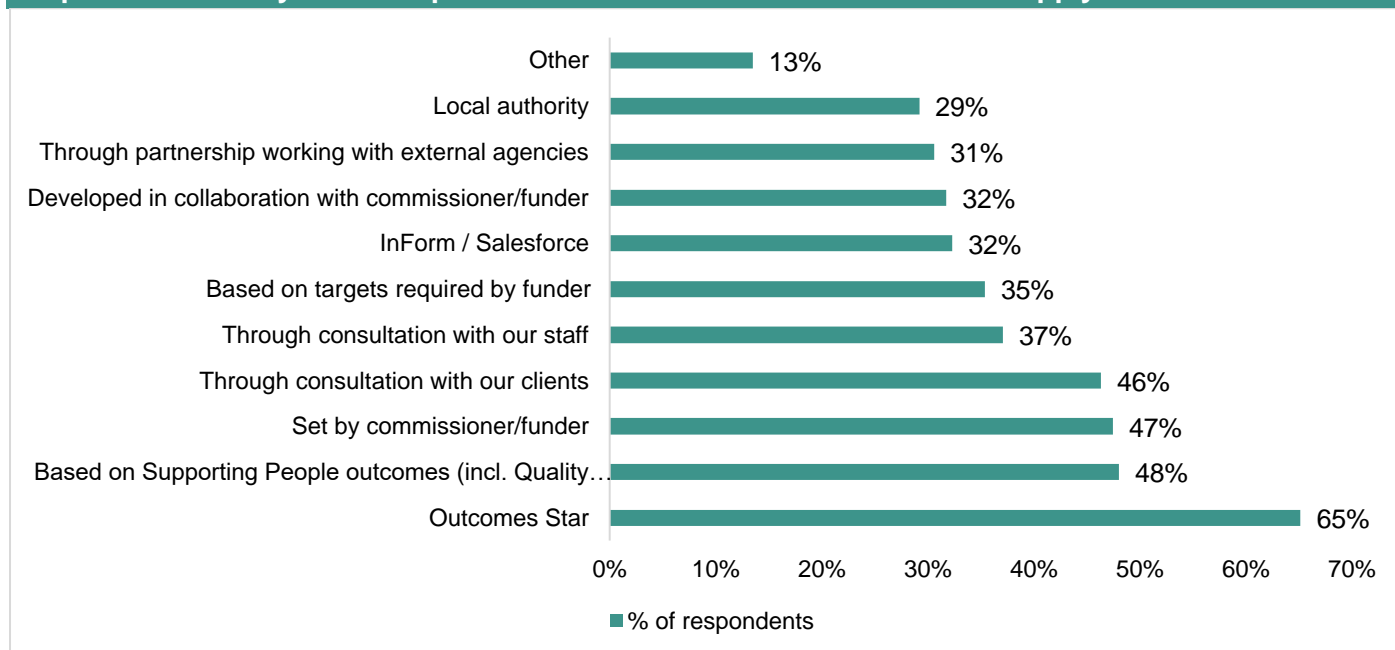
N: 372

Collecting and analysing outcomes provides essential evidence of the impact of the services for individuals, and whether services are meeting their targets. 87% of accommodation providers (303 services) who collect outcomes reported using outcomes to demonstrate the effectiveness of their services.

²⁹ Homeless Link (2018) *The Future Hostel*, https://www.homeless.org.uk/sites/default/files/site-attachments/The%20Future%20Hostel_June%202018.pdf

Other research has shown considerable diversity in the range of outcomes collected and measurement tools that are used by homelessness services.³⁰ This study indicates that homelessness services also draw upon a range of processes and collaborations to develop outcomes measures, just short of half of the respondents (48%) reporting using the original Supporting People Outcomes Framework³¹ (including the quality assessment framework) and the Outcomes Star (65%) (Graph 24). A large proportion of services also reported drawing on consultation with clients (46%) and staff (37%), which indicates that the development of outcome measures is often a collaborative process.

Graph 24: How did you develop these outcomes measures? Tick all that apply.



N: 356

Accommodation providers were asked to report on the outcomes achieved by their residents over the past 12 months (Graph 25). The findings suggest that preventing clients from becoming homeless is the most commonly achieved outcome. This can cover tertiary homelessness prevention, which targets people who are already affected by homelessness and focuses on minimising repeat homelessness.³²

A number of respondents also reported that over the past 12 months, all or most of their clients had improved physical health (49%) and mental health (43%). 83% said most had reduced offending, and 31% said that most of their clients better managed their drug or alcohol intake. These findings illustrate the wide range of benefits that can be experienced by those accessing homelessness services.

The responses however suggest that accessing employment can be difficult for those experiencing homelessness. Employment support can be less well embedded in-service delivery than other support services,³³ rent levels in hostels can pose a significant barrier to accessing employment and when people lack a stable and settled home it can be very difficult to find and maintain employment. Homelessness can also create or exacerbate a range of other issues that make it difficult to access or maintain employment,

³⁰ Homeless Link (2017) *Measuring Outcomes in Homelessness Services: A Scoping Exercise*

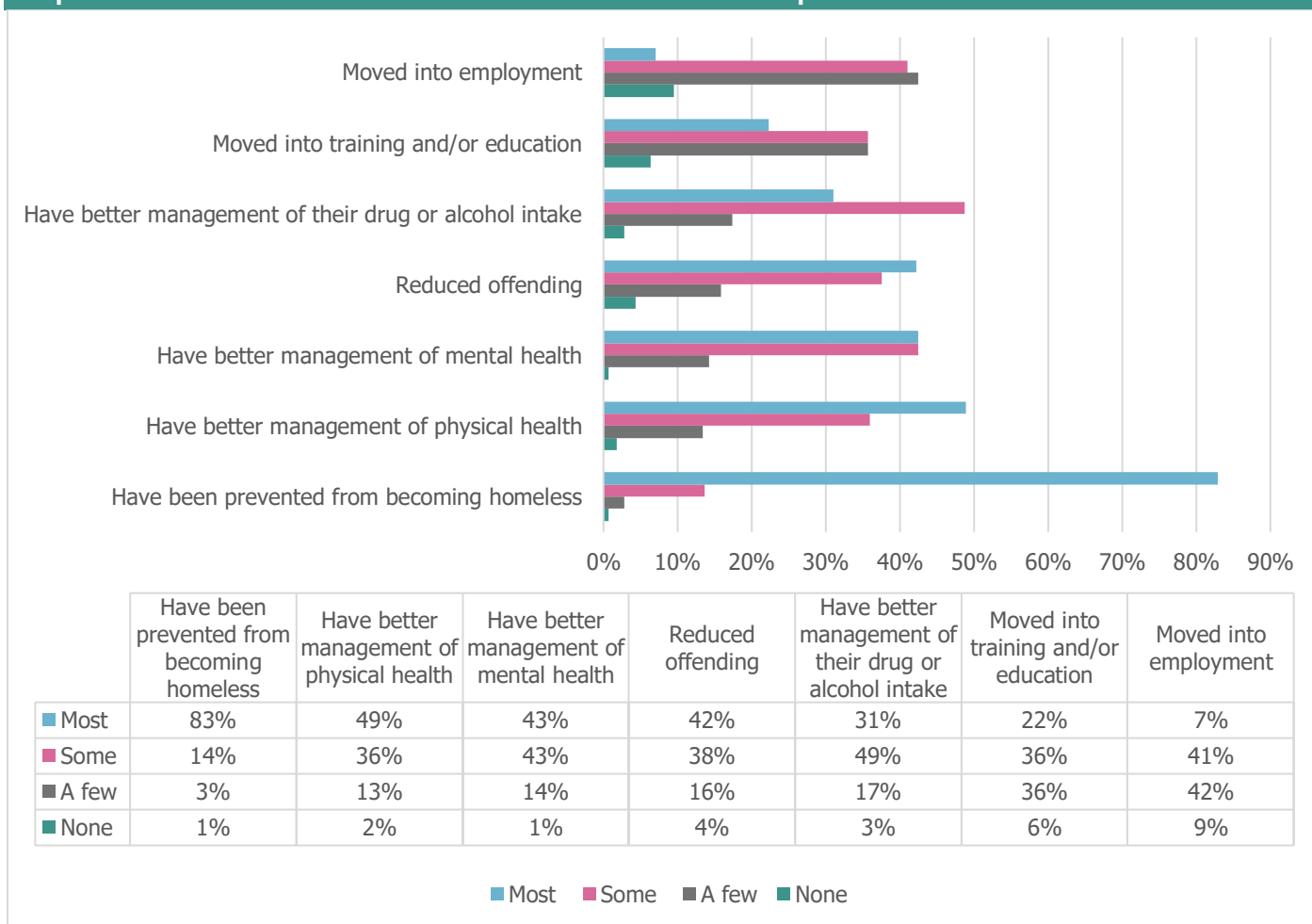
³¹ All Supporting People funded services were requested to provide information under five high level outcomes, including: economic wellbeing, enjoy and achieve, be healthy, stay safe, and make a positive contribution.

³² Homeless Link (2017) *Preventing homelessness before it begins: case studies from the homelessness sector*, <https://www.homeless.org.uk/sites/default/files/site-attachments/Prevention%20research%202018.pdf>

³³ Homeless Link (2014) Evidence Review on Homeless Hostels

such as mental or physical ill health, stigma and discrimination, substance misuse, and having a criminal record.

Graph 25: Outcomes for accommodation residents over the past 12 months



N: 277-287

Move on

In an open text question, respondents were asked about the main difference that their service makes in the lives of their clients, with most respondents mentioning the importance of providing stable and secure accommodation and support to empower clients to live independent lives in the future. Many mentioned providing support with life skills such as support with independent living skills, managing debt, reducing risk taking behaviour, building self-esteem and improving mental health.

‘We provide vulnerable young people with stable, supportive accommodation and services to allow them to develop their skills and work towards independence.’ (In-text response, accommodation provider)

‘Safeguarding some the most vulnerable members of society, providing them with a safe place to live and access to coaches to support with their individual needs, to build their self-confidence, aspirations and engagement with society’. (In-text response, accommodation provider)

‘Accommodation gives clients a chance to rebuild lives from being street homeless. It allows for clients to address addiction, mental health, debt, physical health and a meaningful use of time. It allows clients to gain those independent skills and processes to maintain their own property moving forward.’ (In-text response, accommodation provider)

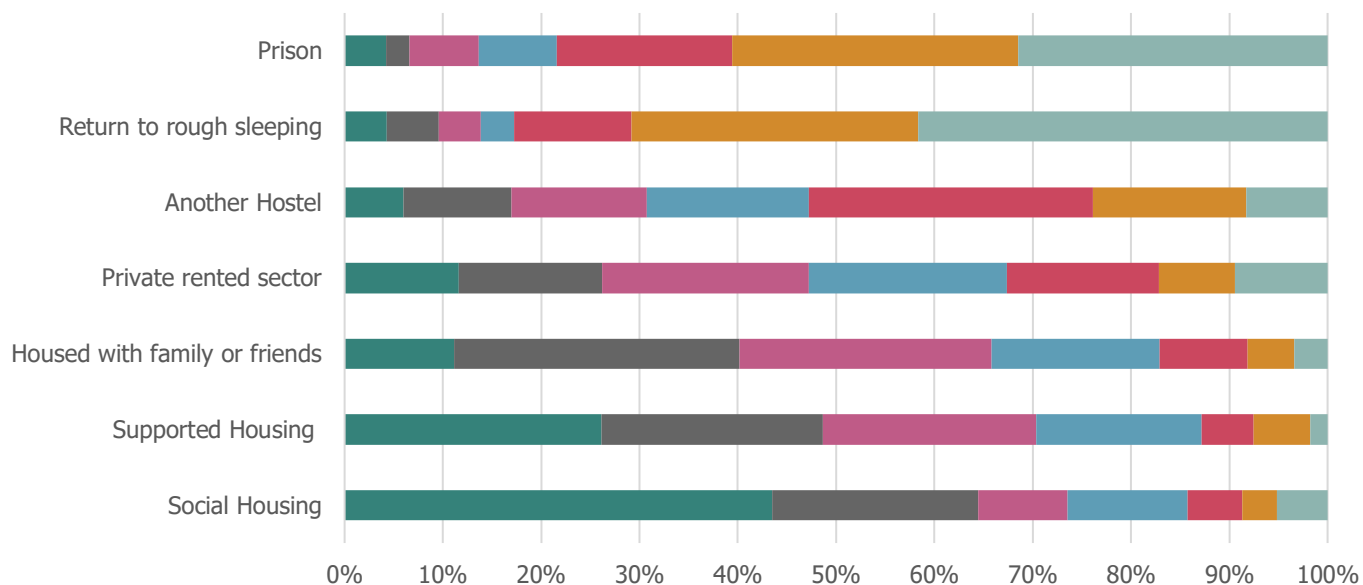
Responding accommodation providers (n: 248) reported that between April 2018 and March 2019, a total of 10,958 people moved on from their services in a planned move (e.g., to other accommodation, or housed with friends or family), which represents 54% of the total number of clients supported during this time. Respondents (n: 252) also reported that 16% of clients left following an unplanned move (e.g., eviction or abandonment).

Accommodation providers were asked to rank the move on destinations for people leaving their service in the past year (Graph 26). Respondents identified social housing as the most common move on destination and return to prison and rough sleeping as the least common. Other research by Homeless Link has shown that homelessness services in England deliver a range of interventions to support people to move on from homelessness.³⁴

³⁴ Homeless Link (2018) *Moving on from homelessness: How services support people to move on*.

<https://www.homeless.org.uk/sites/default/files/site-attachments/Moving%20on%20from%20homelessness%202018.pdf>

Graph 26: Most common move on destinations. 1 is most common, 7 is least common



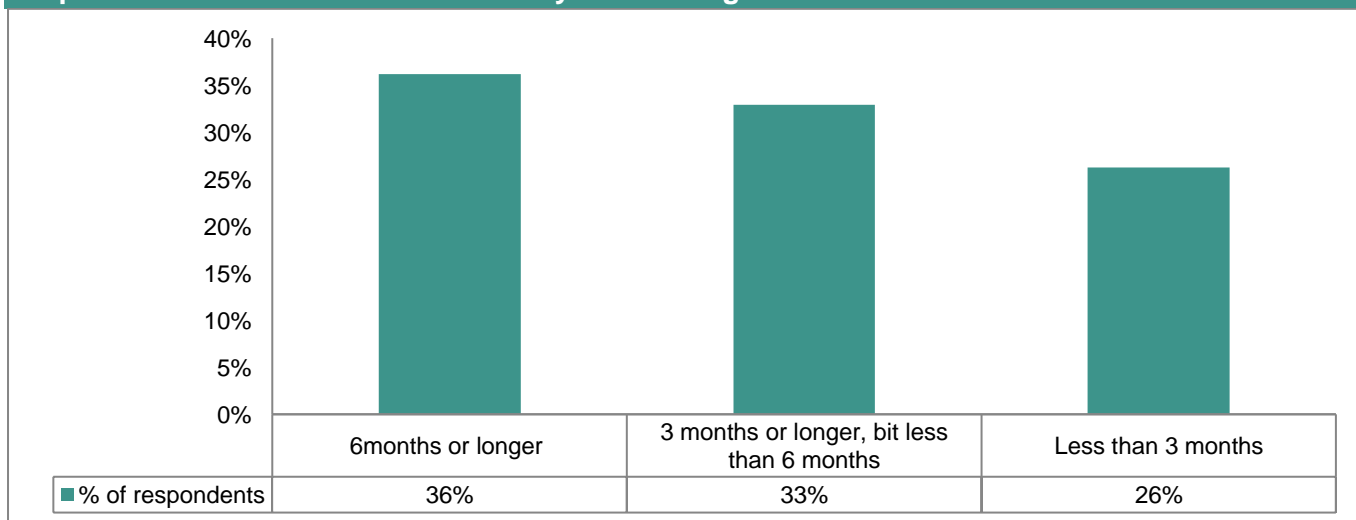
	Social Housing	Supported Housing	Housed with family or friends	Private rented sector	Another Hostel	Return to rough sleeping	Prison
1	43%	26%	11%	12%	6%	4%	4%
2	21%	23%	29%	15%	11%	5%	2%
3	9%	22%	26%	21%	14%	4%	7%
4	12%	17%	17%	20%	17%	3%	8%
5	6%	5%	9%	15%	29%	12%	18%
6	4%	6%	5%	8%	16%	29%	29%
7	5%	2%	3%	9%	8%	42%	31%

■ 1 ■ 2 ■ 3 ■ 4 ■ 5 ■ 6 ■ 7

N: 209-253

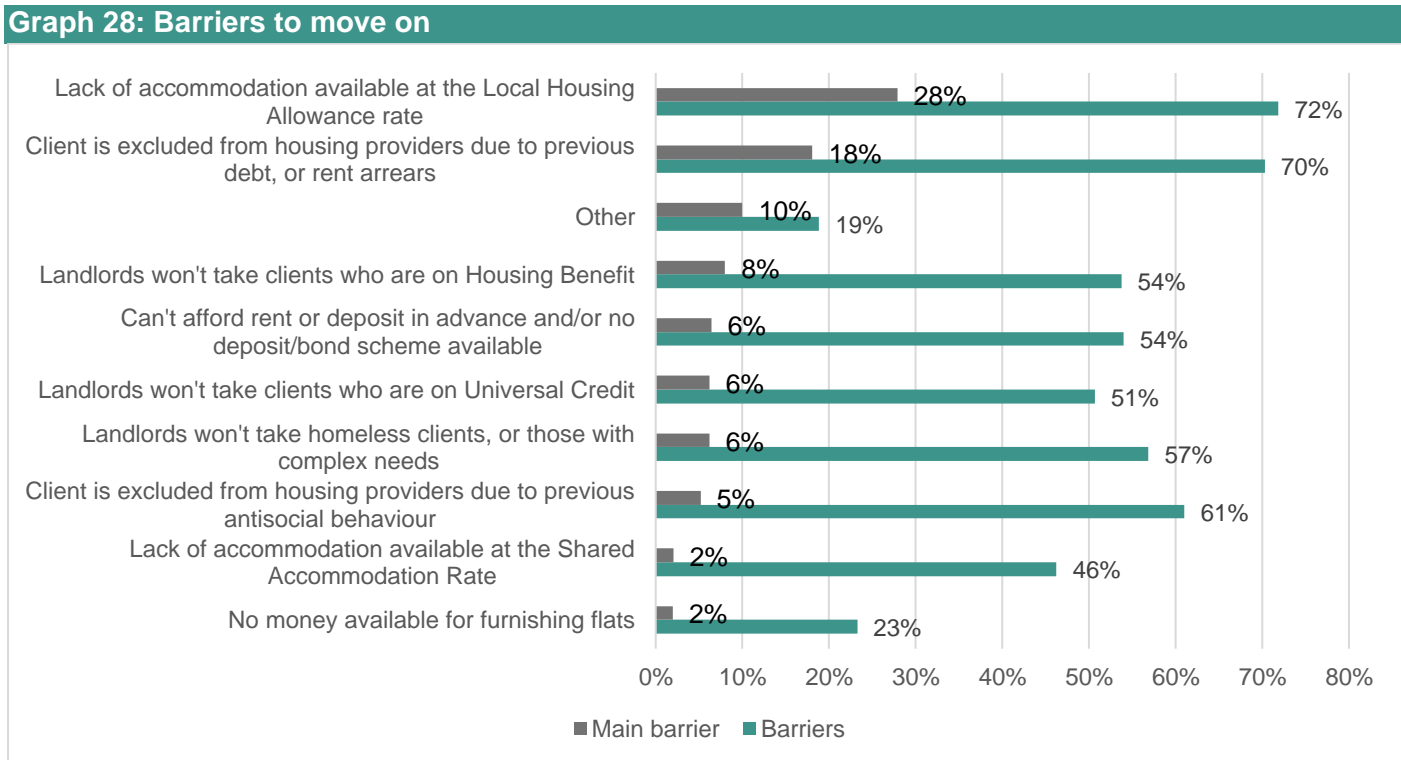
The findings do however also indicate that many people face barriers in moving on from homelessness services. Accommodation providers reported that 2,864 people (24% of clients) were ready to move on but were unable to. Of this total, 36% had been waiting six months or longer (Graph 27).

Graph 27: Accommodation clients ready and waiting to move on



N: 291

Respondents identified the lack of accommodation available at the Local Housing Allowance rate³⁵ as both as the most common contributory barrier (72%) and also the main barrier (28%) preventing people from moving on from homelessness services (Graph 28). Many respondents also identified as barriers to move on that their clients were excluded by housing providers due to previous debt, or rent arrears (70%) and/or due to previous antisocial behaviour (61%). Another key barrier to moving on was a reluctance of landlords to take on people who are in receipt of benefits (57%).

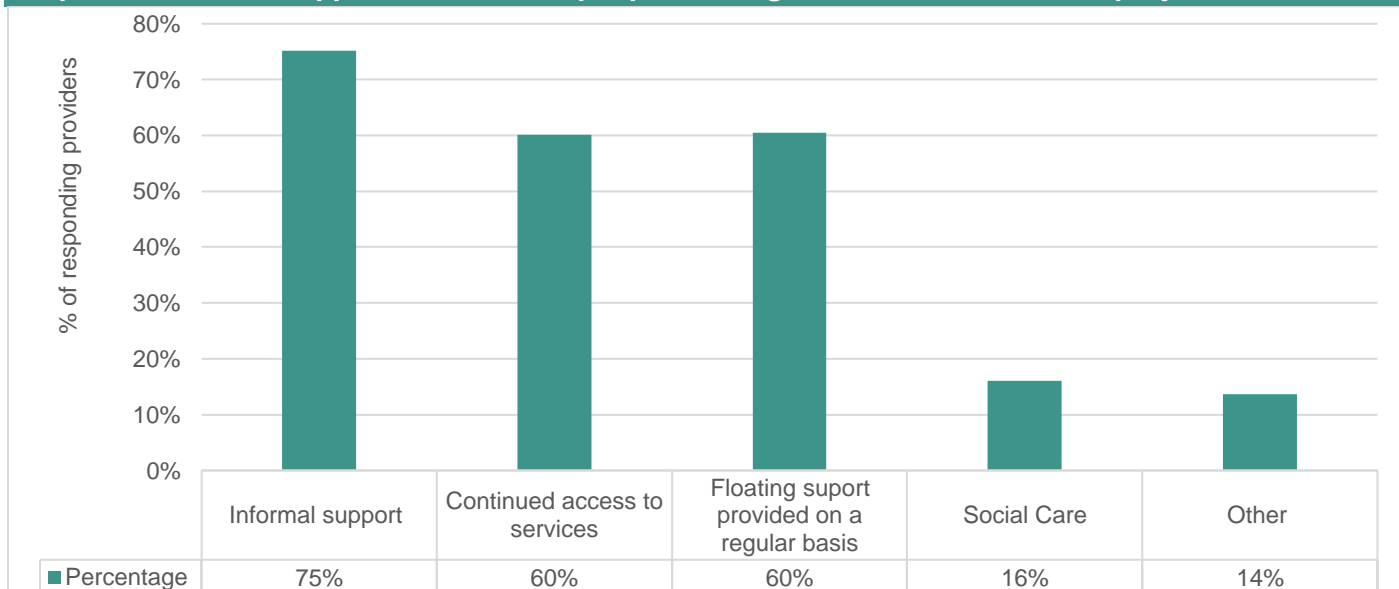


Main Barriers (N: 357) Barriers (N: 373)

75% of **homeless** accommodation providers said they continued to support clients after they had moved on, with the majority reporting this support to be informal, such as contacting people on an ad hoc basis or when they needed help (Graph 29). A significant proportion also provided continued access to services based at the organisation (e.g., drop in sessions, employment sessions, advice).

³⁵ In March 2020 in response to COVID-19, the Government restored the Local Housing Allowance rates for Universal Credit and Housing Benefit claimants so that they are set at the 30th percentile of market rents. The period of data collection for the Annual Review pre-dates this change.

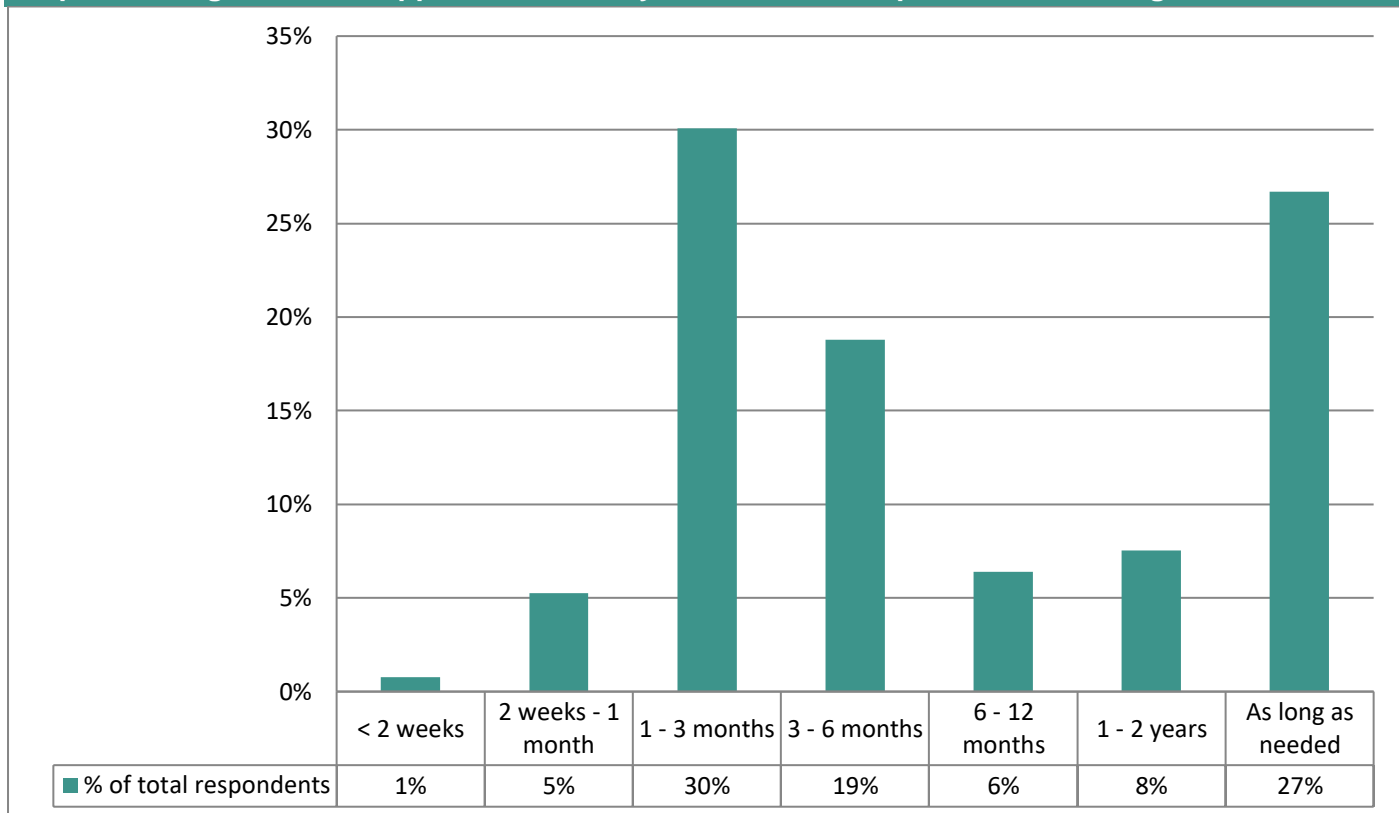
Graph 29: Move on support available for people moving out of accommodation projects



N: 286

57% of the respondents provided move on support for up to six months, and 28% stated there to be no set time limit.

Graph 30: Length of time support is offered by accommodation providers following move on



N: 266

Accessing accommodation

There are many different approaches and types of intervention used within the homelessness sector to access and maintain accommodation. This includes prevention services (77%) which provide people with the ways and means to address their housing and other needs and thereby hopefully avoid homelessness (Graph 31). Other approaches used by the sector include rent/bond deposit schemes (54%) to help those who cannot afford the cost of a deposit to access accommodation from private landlords, floating support services (72%), and shared accommodation schemes (57%).

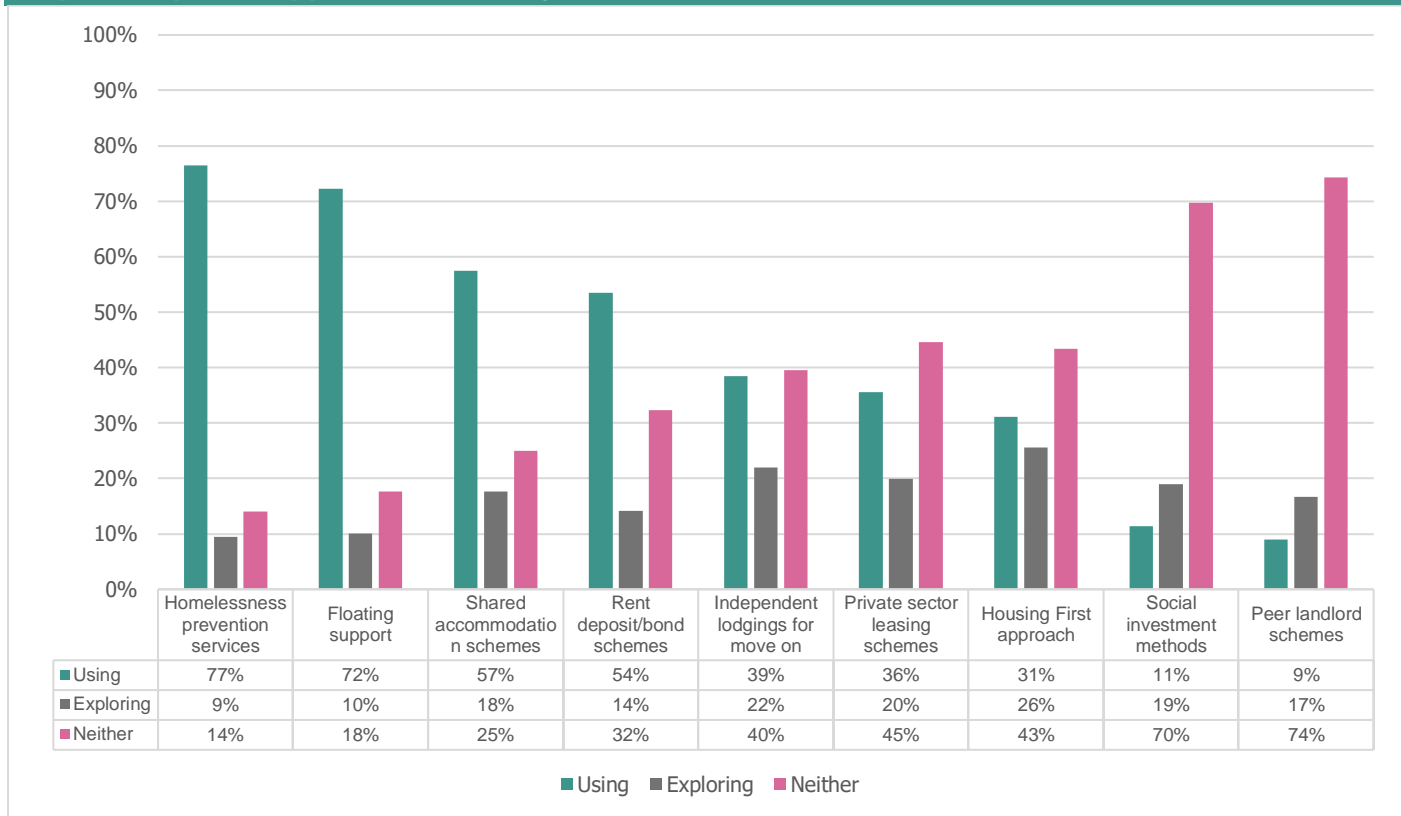
Some other approaches used by the sector include social investment, which offers repayable finance to achieve a social but also financial return. Peer Landlord schemes, a model of affordable shared housing for people with one tenant assuming peer landlord responsibilities are also sometimes used (9% of accommodation providers use this approach). Private sector leasing schemes which involve private landlords leasing their houses to a third-party provider who can in turn let to people who are homeless are used by 36% of accommodation providers in England.

The findings show a growing momentum of Housing First services in England, with over 50% of accommodation providers in England using or exploring this approach. Housing First is an internationally evidenced-based approach that provides people with multiple and complex needs with access to independent housing along with intensive support.³⁶ Evidence suggests that the approach effectively ends homelessness for 70-90% of people who access it and helps some of the most excluded people in society improve their lives.³⁷

³⁶ <https://www.homeless.org.uk/our-work/national-projects/housing-first-england>

³⁷ For more information about Housing First and the evidence available to support the approach please see: <https://www.homeless.org.uk/our-work/national-projects/housing-first-england>

Graph 31: Specific approaches used by accommodation services



N: 381

Conclusion

This report helps us to understand what we mean by the homelessness services, who they support and the practical responses they offer to those who access their support. Whilst there is significant diversity in the various accommodation and support options covered by the term 'homelessness services', the findings of this study indicate that despite operating in a challenging funding climate,³⁸ ³⁹many accommodation providers and day centres in England provide a range of services to meet people's needs. The research shows that these services help a significant proportion of the people who access their services to achieve a range of positive outcomes including improved health, reduced offending and reduced alcohol and/or drug consumption.

The findings demonstrate that despite facing structural challenges – including a distinct lack of affordable accommodation and lack of investment in critical support services – many accommodation providers are reporting that people are moving on positively from their services. The Annual Review 2019 shows that the sector continues to evolve in terms of the initiatives offered to help people access and sustain accommodation, including shared accommodation schemes, social investment methods, and Housing First.

The sector does however continue to face significant barriers, with 18% of people that are currently being accommodated ready to move on from services but unable to do so, and 40% having had to wait six months or longer. Without a dedicated and significant effort to tackle the structural causes of homelessness – poverty, housing supply, and welfare reforms – the extent to which the sector can help people move out of homelessness will be limited.

The Annual Review 2019 highlights certain areas that warrant further exploration, such as the ongoing barriers for those needing to access mental health services, and the reasons, consequences, and possible solutions for the high rates of service refusals of those with multiple and complex needs.

Since the data was collected for the 2019 Annual Review, the homelessness sector has faced an unprecedented challenge with the outbreak of the covid-19 virus. At the time of publication, it is too early to understand the implications that this will have on the individuals, services and staff across the country. However, this is likely to be profound, with the capacity, resourcing, practice and composition of services likely to look very different in 12 months time. We remain committed to understanding and evidencing the work within the sector so that we can continue to support it over the challenging period ahead.

³⁸ A report by the National Audit Office published in 2017 found that spending on overall housing services has fallen by 21% in real terms since 2010, including a 59% real terms decrease in Supporting People funding (housing-related support). Ref: National Audit Office, Homelessness: report by the Comptroller and Auditor General, September 2017

³⁹ Bovill Rose C & Oakley M (2020) Local authority spending on homelessness: 2020 update WPI Economics

Appendix 1: methodology

The findings featured in this report are drawn from the following five key data sources:

1. Telephone and online survey from 72 day centres (39% response rate)

A combination of telephone and online surveys were conducted between November 2019 and mid-December 2019. Of a total of 184 services, 72 (39.12%) day centres responded. There were 95 total responses, with 76% meeting the inclusion criteria. Responses were excluded if were a) a duplicate b) incomplete (answering less than 25% of the survey).

2. Telephone and online survey from 387 accommodation projects (38% response rate)

A combination of telephone and online surveys were conducted between November 2019 and mid-December 2019. Of a total of 1,212 services, 366 (30.2%) accommodation projects responded. There were 504 total responses, with 77% meeting the inclusion criteria. Responses were excluded if were a) a duplicate b) incomplete (answering less than 25% of the survey).

For both accommodation providers and day centres we achieved 95% confidence intervals of $\pm 5\%$ and stratified each project type by region and local authority. This in turn allowed us to generalise the findings to the wider sector.

3. Existing data on homelessness trends

The report includes analysis of existing data sources on statutory homelessness and rough sleeping figures as published by the Ministry of Housing, Communities and Local Government. The figures were analysed by means of Excel.

4. Homeless England database

This database is managed by Homeless Link and covers information on approximately 911 services. Although the data is not live, it is updated regularly and is the only data source on the number of homelessness services in England. Data on the availability of services and bed spaces were extracted from the Homeless England database, allowing a comparative analysis with previous publications of the Annual Review.⁴⁰

5. Case studies

Four case studies were compiled to further evidence the key topics addressed in the research and to provide in-depth examples of various types of provisions in England. The case studies were selected from among our members and are based on local information on good practice.

Sampling approach

The sample structure was a vital part of this survey. Homeless Link ensured that the profile of the projects interviewed closely represented the profile of the sector's projects (accommodation or day centre) as a whole. For this survey, we achieved 95% confidence intervals of $\pm 5\%$ for the survey results from accommodation providers as a discrete group, and from the aggregated grouping of accommodation providers and day centres.

⁴⁰ All Homeless Link Annual Review reports are available at: <https://www.homeless.org.uk/facts/our-research/annual-review-of-single-homelessness-support-in-england>

Providers were contacted initially by email, with follow up by phone and email. Surveys were conducted over the phone and online according to individual preference and we attempted phone contact with each provider three times in addition to the email invitations in order to invite response.

For accommodation providers only, the available sample numbers 1,024 projects. This required 292 interviews to be completed to achieve the confidence interval of $\pm 5\%$. We achieved significantly above this with **387** respondents.

For accommodation providers and day centres combined, the available sample size of 1,396 projects required 302 interviews to be completed to achieve the confidence interval of $\pm 5\%$. We achieved considerably higher with 72 day centres and 387 accommodation providers resulting in a **459** overall sample.

Within each of the two project types, we stratified by region to ensure that there were no unexpected skews in the data which can at times occur within a purely random un-stratified sample. Using the original sample, we calculated regional quotas which were set to ensure that the samples from each project type reflected the actual distribution of projects across England.

	ALL	Telephone	Online
Accommodation Providers	387	80	307
Day Centres	72	24	48
Total	459	104	355

In the case of day centres, the regional quotas were closely followed and quotas were near met. In the case of the accommodation projects, quotas were adhered to the best of our ability for the phone interviews, but it was not possible to control for responses through online survey responses. This impacted our ability to ensure that the regional quotas were met in all areas. The survey was conducted externally by 'Social Engine'.

REGION	Day Centres Regional Quota		Accommodation Providers Regional Quota	
	Target %	Achieved %	Target %	Achieved %
East	8.0%	12.0%	12.1%	15.8%
East Midlands	8.0%	10.0%	12.9%	7.1%
London	20.0%	24.0%	12.6%	17.1%
North East	4.0%	6.0%	7.1%	6.8%
North West	14.0%	24.0%	11.8%	12.1%
South East	19.0%	30.0%	12.1%	11.6%
South West	10.0%	16.0%	11.8%	15.0%
West Midlands	8.0%	12.0%	10.0%	7.1%
Yorkshire & the Humber	10.0%	10.0%	9.5%	9.2%
Total	100.0%	144.0% (+44%)	100.0%	101.8% (+1.8%)



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.

Let's end homelessness together

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