Executive Summary Homelessness Strategy Review

Introduction

The Homelessness Act 2002 places a duty on local authorities to publish a new homelessness strategy at least every five years and to take it into account when discharging its functions. Wigan Council’s existing strategy to prevent and respond to homelessness in Wigan was developed and implemented in 2008 and is for the period 2008 – 2013, hence the need for this review.

Between October 2012 and May 2013 the Housing Strategy team undertook a full review of the Homelessness Strategy 2008 – 13 which involved detailed research in terms of analysis of statistics, an analysis of evidence on past performance, consultation with stakeholders and consultation with customers. This document represents the first stage of the Homelessness Review.

The focus of the current Homelessness Strategy has been a proactive preventative approach in tackling the main causes of homelessness; levels of homelessness throughout the borough has been kept to manageable levels due to the critical success factors of homeless prevention including:

- Early and timely intervention
- Providing choice and options
- Arranging housing support

Homelessness figures across the country are increasing, and there are fears it will continue to increase, however, this hasn’t happened as yet in Wigan, but there are indications that pressures are building as during the last quarter demand for prevention services had increased by 58% and numbers in temporary accommodation at the end of March 2013 had increased to 27.

There has also been a notable increase in the numbers of cases with complex needs, the rough sleepers estimate in November 2012 had increased to 15, and 127 people accessed No Second Night Out between 20th October 2012 and 7th June 2013.

There is also growing evidence of people facing real difficulties in managing their income and housing as a result of the downturn in the economy and its impact on the housing market, as well as the changes taking place around the future of social housing and welfare benefits as more people are approaching the homelessness prevention services with multiple debt problems.

Trends

- Nationally, homeless presentations and acceptances are increasing, along with an increase in the use of bed and breakfast, locally the anticipated increase in homelessness presentations due to the impact of welfare reform has not happened as yet. However, the number of prevention cases during quarter 4 has increased by 58%.
- **Presentations and homelessness prevention** - since the previous homelessness strategy there has been a shift towards proactive preventative work and as a result there has been a significant drop in homelessness decisions. When homelessness presentations were at their highest in 2007/08 2116 were recorded now reduced to 616 in 2012/13; alongside this
the number of homeless preventions increased from 376 in 2008/9 to 1404 for 2012/13.

- The number of homeless acceptances has also reduced significantly from 715 in 2007/08 to 219 for 2012/13

![Homelessness Trends Graph]

- The number of housing advice cases has reduced from 956 to 582 – impact from office closures and staff issues
- The number of homeless acceptances due to domestic abuse has reduced from 73 in 2009/10 (11th highest nationally) to 58 in 2012/13. This still remains the main cause of homelessness
- The percentage of cases prevented (46%) is lower than during previous years (2010/11 - 56%, 2011/12 – 52%), which is an early indicator that prevention cases are more complex.
- More prevention cases are achieved when households are assisted to obtain alternative accommodation, as opposed to taking action to remain in their homes; however this is not unusual outcome with such an effective and successful PRS access services in operation.

<table>
<thead>
<tr>
<th></th>
<th>2006/07</th>
<th>2011/12</th>
<th>2012/13</th>
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<tbody>
<tr>
<td>Homeless Presentations</td>
<td>2,752</td>
<td>609</td>
<td>616</td>
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<tr>
<td>Housing Advice cases</td>
<td>0</td>
<td>956</td>
<td>582</td>
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<tr>
<td>Homeless Acceptances</td>
<td>1,051</td>
<td>271</td>
<td>219</td>
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<tr>
<td>Prevention cases</td>
<td>272</td>
<td>1088</td>
<td>1404</td>
</tr>
<tr>
<td>% cases where homelessness successfully prevented by WALH</td>
<td>Not available</td>
<td>49%</td>
<td>46%</td>
</tr>
<tr>
<td>% prevented per 1000 households WALH together with partner agencies</td>
<td>Not available</td>
<td>8.24%</td>
<td>10.02%</td>
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<tr>
<td>Cases in temp at end of year</td>
<td>50</td>
<td>24</td>
<td>27</td>
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<tr>
<td>Average length of stay in temp ↑</td>
<td></td>
<td>62 days</td>
<td>67 days</td>
</tr>
<tr>
<td>Annual B &amp; B costs ↓</td>
<td>£183,500</td>
<td>£841</td>
<td>£694</td>
</tr>
<tr>
<td>Violent relationship breakdown cases ↓</td>
<td>137</td>
<td>76</td>
<td>58</td>
</tr>
<tr>
<td>Rough sleeper estimate ↓</td>
<td>6</td>
<td>11</td>
<td>15</td>
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- **Age** - the age group band with the largest number of accepted homeless households is the 25-44 year old age group with 53% of acceptances in 2012/13. This is followed by those in the 16-24 age group, at 30% of acceptances; and next those aged 45-59 who make up 15%. Older people
make up only 2% of homeless acceptances with extremely few cases of older people aged 75+.

- **Ethnicity** - BME customers accessing prevention services comprise 3.36% of total cases whereas the tenant profile is 5.1%. BME homeless investigation cases make up 7.32% of total presentations and 6.73% of total acceptances. This is slightly higher than the BME tenant profile and may reflect the fact that people from BME backgrounds are in less secure accommodation. Additionally, 9.3% of customers admitted into emergency homeless temporary accommodation are from minority ethnic groups which suggests that there is an over representation of these groups seeking assistance due to homelessness. These figures are based on June 11 to June 12

- **Reasons for homelessness** – the main cause of homelessness for homeless acceptances is violent breakdown of relationship involving partner (58), followed by parents no longer willing or able to accommodate (27), and other relatives or friends no longer willing or able to accommodate (24). The highest reason for housing difficulty (prevention cases) has altered during quarter four 2012/13, with applications being served notice by private landlords showing a large increase (55 cases), affordability is a close second (49 cases), with the former highest reason of parents/relatives asked to leave being the third highest reason (42 cases)

- **Temporary accommodation** - demand for temporary accommodation has fallen during the past 12 months from 292 admissions in the previous year to 257 in 2012/13. However, despite the fewer admissions, the average length of time a household remains in the accommodation increased to 65 days overall with families remaining in accommodation for just over 10 weeks. This is influenced by the availability of suitable accommodation in appropriate areas.

- **Bed and breakfast** expenditure has reduced from £183.5k in 2006/7 to £694 In 2012/13, at a time when nationally the use of bed and breakfast is on the increase

- **Court activity** - Landlord possession activity has increased. Landlord claims increased by 48% in quarter 3 2012 compared to quarter 3 2011. Landlord claims leading to orders also increased by 24% in the same comparative periods.

- **Health related issues** - Good quality, affordable and safe housing is essential to mental and physical wellbeing. Poor housing and homelessness are linked to multiple disadvantage, and can make an episode of ill-health more difficult to manage, or can contribute to increased health problems. Homeless people experience some of the poorest health in our communities. Improving the health of people who are homeless is key to reducing health inequalities and reducing homelessness. Rough sleeping is the most visible form of homelessness, but the vast majority of homeless people live in hostels, and temporary accommodation or living with friends and family. Homeless people experience greater physical and mental health problems. Many people have multiple needs such as mental health and substance misuse problems. There are also high incidents of safeguarding issues such as child protection, adult safeguarding, domestic abuse.

Due to higher levels of health need, homeless people use acute health services disproportionately to the general population. It is estimated that this group uses hospital services at a rate 4 to 8 times greater than the general population. In Wigan the Homeless and Vulnerable Persons Service provides an outreach model of health care and support for people of all ages in a variety of temporary accommodation and community support settings. This
enables homeless people to access primary care, early intervention and health improvement activities more readily.

- **Hospital Discharge** - There is a Hospital Discharge Protocol in place in Wigan which aims to improve access to housing support prior to discharge, however the protocol isn’t achieving its aims as only a small % of those discharged from hospital or those attending A & E are referred to or access Wigan and Leigh housing homelessness services. Also the number of frequent flyers to hospital shows that unsatisfactory outcomes are being achieved from both a health and homelessness perspective.

- **Rough sleepers/complex needs** - There has been an increase in the number of cases with complex needs (drug, alcohol, mental health, offending and numbers of rough sleepers are increasing. Along with 127 cases accessing No Second Night Out from 22nd October 2012 to 7th June 2013, there was an additional 36 cases accessing cold weather provision in 2012/13.

- **Affordability / debt issues** – there has been an increase in the number of cases with housing problems caused by wider affordability / debt / hardship issues approaching the homeless prevention service.

- **Homeless prevention support services** - there is significant demand for all homeless prevention support services.

- **Use of private rented sector** - during 2012/13 235 cases were prevented from homelessness through landlord incentive schemes (bonds, private sector leasing).

**Successes of previous strategy**

The proactive preventative approach of the Homelessness Strategy 2008 – 2013 has meant that homelessness has been kept to a manageable level and the key successes can be summarised as follows:

- Major progress in transforming the homelessness service has been made via preventative strategies. This is evidenced by dramatic falls in presentations and acceptances.

- Roll-out of a range of repossession prevention measures, which has made a significant impact on reducing both landlord and mortgage repossessions.

- Protocol in place between Children & Young People’s Services and Wigan & Leigh Housing regarding housing advice and options for care leavers.

- A recent report on homelessness prevention services across GM rates the cost effectiveness of prevention services as good: the cost per successful prevention case sitting at 61% of the national average and being 5th best value in Greater Manchester. The number of successful preventions per ‘000 households when adjusted for deprivation, is the 4th highest in the region, at 64% of the national average. The profile of the prevention cases indicates that a wide variety of tools are used to facilitate the successful prevention.

- New supported housing scheme for young people with challenging backgrounds accessing training development in order to assist with future employability and gaining the life skills to achieve independent living.

- Development of the Social Letting Agency and improved access to the private rented sector – an additional 820 affordable lettings in the private rented sector since 2009.

- There is evidence of excellent partnership working with agencies – for example HSAP, (all accommodation based services and HOAC), NSNO, (Riverside, The Brick and WALH); WHS (The Council, HOAC, private landlords), Integrated Safeguarding and Public Protection (ISAPP) Team – Police, Probation, Social Care, Housing, IDVA's
An analysis of data and consultation with stakeholders and service users has identified the following gaps in provision:

- There is limited housing options available for single people over 25.
- Lack of supported accommodation for over 25’s who require training/rehabilitation support.
- The demand for smaller accommodation far exceeds supply.
- There is an annual net shortfall of affordable accommodation in the borough, currently estimated to be approximately 277 units. Delivery of additional affordable housing has averaged around 170 homes per annum, over the last five years.
- Within the homeless prevention support services there has been a reduction in throughput figures which suggests that people are staying with services for longer, suggesting blockages caused by lack of available/suitable move on accommodation.
- Emergency Accommodation for young people who are bailed from Court but cannot return home to their family address.
- There needs to be a better strategy for accommodation upon prison release.
- There is a growth in people excluded from the housing register – the new allocations policy will make it more difficult for these clients to get social housing.

Stakeholders and Service Users were consulted via a variety of methods and these included surveys to agencies and service users, focus groups at homeless hostels, and a workshop attended by over 20 homelessness agencies. Key issues raised by stakeholders and service users were:

- **Youth Homelessness** - some agencies are concerned that the protocol on youth homelessness and looked after children isn’t being fully implemented as young people are being accommodated in bed and breakfast or being accommodated out of the area.
- “Education is KEY - there is a need to raise awareness of homelessness and skills needed for independent living”.
- There is growing concern that private landlords are not willing to accept tenants claiming housing benefit.
- **Accommodation** - In terms of accommodation offered, one interviewee who had been homeless a few times stated that the furnished flat he was offered previously was ideal. Previous experience from another interviewee stated that their tenancy began with debts on meters and with no furniture or carpets etc. He felt he had failed before tenancy really got started, and felt no incentive to make it work as it was “a dump”. A general comment was also made about those with a history of drug and alcohol addiction being offered properties in areas where drug use is rife – people are being set up to fail, become addicted once more and end up being evicted again.
- Temporary accommodation standard is very good. There is just not enough to meet needs.
- “Barred from council due to offences”
- “No accommodation available to chaotic people”
- **Customer Focus** - Negative responses were received around long waiting times, not easy to get to Platt Bridge, perceived prejudged attitude of staff to
customers; lack of contact/updates around application status; some staff appear in a bad mood or unfriendly.

- **Effectiveness** – “HOAC is a good service for the homeless when they become homeless but appointments for people being faced with homelessness in the near future would benefit both the service user and Housing”.
- There is a need for training on tenancy management and advice on managing finances
- “Clients from our service are rarely offered money from the prevention fund to deal effectively with preventing/relieving homelessness”.

- **Strategy** - there are gaps in Mediation services, accommodation for care leavers and move on for chaotic service users who require less intensive support but would fail in an independent tenancy even with floating support services.
- **Advice** - is generally good but it is in leaflet form and clients are sent away with no real understanding of what to do next.
- Advice and contact numbers for alternatives when someone is not priority would be a bonus.

### Future strategic priorities

Future strategic priorities should focus around the key themes as detailed below:

#### Target prevention and support services to those most at risk of homelessness

- Target financial literacy support to those with debt problems.
- Improve links with Social Care to address youth homelessness and review protocol for 16 and 17 year olds.
- Support excluded groups to access online advice and support (in conjunction with Community Engagement Team).
- Provide advice and support to people juggling intermittent work and changes of circumstance with benefit claims, e.g. agency workers.
- Look at the training and preparation for tenancy offered in all Temporary Accommodation. Financial management, debt advice and tenancy training could assist individuals prior to their new tenancy, to prevent potential future problems. (HS/ SP)
- Review the prison release accommodation pathway.
- Identify those properties that currently do not qualify as exempt and implement contingency plans.
- Target households with rent and debt problems and provide advice and support on managing money and debt.
- Targeted approach to Discretionary Housing Payment.
- All stakeholders are kept informed of the local welfare assistance and are able to provide advice and assistance to their clients on how to access these services.
- 12 month pilot - Specialist Housing Advice Worker working with victims of domestic abuse and providing advice and assistance on housing related issues to be based with the Integrated Safeguarding and Public Protection Team at Bamfurlong.

### Prevention – earlier intervention
• Develop educational work with young people about housing options, the skills needed to maintain independent living and the reality of homelessness.
• Identify households most likely to be affected by root causes of homelessness and offer support before a crisis.
• Pre tenancy training – to include budgeting skills/money management, household bills, training on managing a tenancy.
• Provide training and support on budgeting and financial inclusion.
• More interventions around rent arrears and eviction.
• Ensure that all individuals and agencies are aware of how to access furniture to minimise the risk that clients will manage the tenancy from the start. (HS via Homelessness Forum)
• Explore using the private rented sector for those clients with addictions or previous ASB issues who have made positive steps in turning their lives around to avoid being offered properties in areas where their issues are still prevalent.
• Re launch hospital discharge protocol.
• Carry out affordability assessments on all housing accommodation offers.
• All agencies understand the referral process on how households can access basic bank accounts or credit union facilities to enable clients to set up direct debit payments.
• Staff are trained and can explain the changes with welfare reform and are aware of when groups start to transition to UC, and can refer customers to sources of support and advice.
• Frontline staff are fully briefed on UC conditionality, sanctions and the process for advance payments.
• Households are provided with relevant checklist or other information to ensure they can successfully access UC on line.
• Disseminate clear information to all stakeholders on the direct payments and alternative payments exception arrangements, to ensure they support households to access these options.
• Frontline staff have an understanding of how the Work Programme operates and any requirements for claimants to access the schemes.

Prevent the use of bed and breakfast/increase in temporary accommodation

• Continue to ensure that whilst clients are supported within TA, they are also being prepared to move on.
• Discharge duty into private rented sector for targeted properties
• Enhance links with employment, education, training for those in temporary accommodation.

Make best use of limited funds and target priority groups

• Assess outcomes of projects funded and analyse impact on homelessness prevention.
• All funded projects to meet strategic priorities.

Work towards the end of rough sleeping

• Complex needs co-ordinator responsible for facilitating offender management group/complex needs panel.
Complex needs co-ordinator to be the key worker for 10 clients referred by OMG/Complex Needs Panel and engage with key services and commissioners at appropriate level to embed the principles of Making Every Adult Matter.

Develop an integrated response across health, housing, and social care.

Personal budgets.

**Partnership working**

- Representatives from Housing Benefit need to engage with key agencies/forums.
- Develop partnerships to improve services to clients with cross cutting issues.
- Sharing of good practice/training/referral protocols.
- Improve links with private landlords, promote provider’s work at Private Landlord Forum, in Private Landlord Newsletter etc.
- Manage the consequences of welfare reform.

**Continuous improvement in homelessness and housing options service**

- Sign post / provide advice and support to people to access employment.
- Provide advice and support on the range of housing options available – including promoting mutual exchanges and home swap direct; shared accommodation project; lodger scheme; transfers; private rented sector access scheme.
- Review access, opening times and appointments to prevent blockages/delays in waiting times.
- Consider the development of a “matching service” for lodgers.
- All customers to receive written advice either by letter or leaflet format.
- Wherever possible, ensure that those taking on new tenancies in both public and private sector do not have “ready made” debts on meters.
- Consider surgeries in temporary accommodation venues (where they do not already happen). If this cannot be carried out in person due to staffing issues, telephone contact (or via a support worker) with those in TA about where their application is up to, what is required of them, properties available etc may assist with move on, and give them a sense of support. (HOAC)
- Ensure full explanation of the processes and what will happen next is given to applicants when they present – review leaflets for this purpose and general advice leaflets.
- Deliver enhanced housing options advice service.
- Housing options team - fully trained on the overall benefit cap, income maximisation, exemptions, back to work and better off calculations.

**What will happen now**

This is a summary of the review findings and recommendations and will be circulated to all members of the homelessness forum, external partners and other council departments for consultation and feedback during July 2013. The review document will be used as the basis for a new homelessness strategy and to inform the shape of housing services in Wigan.

Once all comments and feedback from stakeholders have been received a new Homelessness Strategy will be developed; the homelessness steering group and homelessness forum will be consulted on the new Homelessness Strategy in
September 2013. The final document will go through the Council process for formal approval in November 2013.