Implementing Housing First across England, Scotland and Wales

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About us

**Crisis** is the national charity for homeless people. We are committed to ending homelessness. Every day we see the devastating impact homelessness has on people’s lives. Every year we work side by side with thousands of people, to help them rebuild their lives and leave homelessness behind for good.

Through our pioneering research into the causes and consequences of homelessness and the solutions to it, we know what it will take to end it.

Together with others who share our resolve, we bring our knowledge, experience and determination to campaign for the changes that will solve the homelessness crisis once and for all.

We know that homelessness is not inevitable. We know that together we can end it.

**Homeless Link** is the national membership charity for frontline homelessness agencies and the wider housing with health, care and support sector. We work to improve services through research, training and guidance, and to promote policy change that will ensure everyone has a place to call home and the support they need to keep it.
Executive summary

The Housing First model and the ethos on which it is based is simple yet radical; it works precisely because it hands choice and control, rights and responsibilities back to homeless people. It is ultimately a relationship-based approach to change, yet its success also depends on access to stable and affordable housing and the ability to draw in from a wide range of services the personalised support that the individual needs, as far as possible, when and in the format in which they choose it.

It is challenging to achieve this in the current welfare and housing systems in Great Britain. Whilst there are strong moral and financial drivers for the roll-out of Housing First, the systemic and cultural change necessary to achieve this is significant. There is a risk that the fundamental principles of the model get ‘diluted’, including the support offered and caseload sizes, in the rush to scale up, thereby reducing its success and longevity of the programme.

This piece of work was jointly commissioned by Crisis and Homeless Link to review and analyse existing evidence in order to identify what is needed to support the implementation of Housing First across Great Britain. A key part of this commission has been to undertake secondary analysis of existing datasets to estimate the size of the cohort for Housing First.

Using existing literature and policy documents, 20 in-depth interviews and bespoke analysis to define the current Housing First cohort, key findings from the report include:

- Housing First is still in its infancy across Great Britain but has been gathering strong political backing across England, Scotland and Wales to differing scales. The Westminster Government has committed £28 million to pilot Housing First in Greater Manchester, the Liverpool City Region and the West Midlands. The Scottish Government have allocated £21 million for rapid rehousing and Housing First. The Welsh Government now funds ten pilot projects to test different delivery approaches of Housing First.
- There is clear consensus amongst researchers and practitioners that Housing First is effective for homeless people who have high, multiple and complex needs. Interviewees agreed it should be targeted at those who no other housing approach has worked or is likely to work. There is less definitive evidence about how the model
can be applied or adapted for other cohorts, but there are positive examples of projects developed for young people, women offenders and those experiencing domestic abuse in Great Britain and internationally.

- If implemented at scale tomorrow the research estimates the Housing First cohort in England, Scotland and Wales are: (see Table above)

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<th></th>
<th>England</th>
<th>Scotland</th>
<th>Wales</th>
<th>Total GB</th>
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<tr>
<td>Higher Estimate</td>
<td>29,700</td>
<td>1,500</td>
<td>1,100</td>
<td>32,250</td>
</tr>
<tr>
<td>Lower Estimate</td>
<td>16,450</td>
<td>1,350</td>
<td>600</td>
<td>18,400</td>
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- Housing First can only work if suitable housing can be identified and accessed. A stable base, choice and security of tenure are central to putting the principles into practice. Practitioners were in agreement that building trust and relationships with private and social landlords was essential to enabling a supply of suitable local properties. In parts of GB where the private rented sector is unaffordable to those in receipt of welfare benefits it has been important for projects to work strategically to lever in social housing.

- There are currently very localised approaches to housing supply for Housing First which is supporting small numbers of people. If scaled up there would need to be greater investment in new supply with a view to using both new and existing stock for Housing First. Significant national commitment to housing development is an essential part of this and should be considered through the following mechanisms: creation of a local/social lettings agency; a national housing association; reviews of local allocations policies; and acquisition of long lease private sector properties.

- Welfare reform interacts with different local housing markets across GB to create reoccurring challenges. These include the spare room subsidy putting pressure on limited number of one bedroom properties; the shortfall between LHA and average rents in some parts of GB; Shared Accommodation Rate (SAR) for under 35s restricting access for some people in this age group; the introduction of Universal Credit creating concern for PRS landlords who are becoming increasingly risk averse; increasing conditionality within the benefits system which puts individuals at risk of financial instability and conflicts with the strengths based ethos of Housing First.

- Current practice is helping to reduce barriers related to welfare reform but if the UK Government is serious about rolling out Housing First the Department for Work and Pensions should review its exemptions policy in relation to SAR, benefit cap, welfare conditionality and sanctions to include Housing First alongside other groups of people experiencing homelessness.

- Interviewees highlighted a number of principles in the Housing First model that were being used in current practice through the provision of support. These included, working with commissioners or funders who are flexible and committed; retaining a small caseload and a high degree of operational flexibility; having leadership and management who are committed to the model and can articulate why and how it differs from traditional approaches, and recruiting a high calibre of staff including those with lived experience of homelessness. Staff training and access to clinical supervision and strong partnerships with the public, third and private sectors were also essential to the strategic and operational implementation of Housing First.

- If Housing First is implemented at scale it will require significant
changes to cross commissioning and funding models to give support providers, tenants and landlords enough confidence that the support will not be time limited. Pooled budgets and joint commissioning of Housing First by health, Criminal Justice and Adult Social Care has the potential to share the costs, and risk, across agencies and provide greater security for Housing First. In addition, there needs to be adequate funding of key services to prevent people’s needs from escalating – including mental health, substance misuse and domestic abuse – and better joint working across these using a ‘no wrong door’ policy for people with co-occurring conditions.

- More widely there needs to be a consistent understanding of what is (and is not) Housing First which could be supported by a national method of accrediting the model and strong national leadership to provide strategic oversight of Housing First in each nation.

- There is a strong case for consistent data collection across GB in relation to homelessness and people with complex needs, ideally including data linkage across health, housing/homelessness and criminal justice, substance misuse, welfare benefits, employment services and immigration. This will help us to understand the potential cost benefits of Housing First, to identify the local cohorts who might be best suited to Housing First, and those who achieve good outcomes from other, ‘traditional’ supported housing models.
Chapter 1: Introduction

1.1 The purpose of this report

There is a groundswell of interest in Housing First across Great Britain (GB) at the moment. This is being driven both at government level in each of the three nations, and also by providers, commissioners and other innovators on the ground. This direction of travel is has been influenced by the substantial evidence base which demonstrates that Housing First can provide an effective and sustained exit from homelessness for the very cohort for whom existing homelessness, criminal justice, and health services have been least successful (Mackie et al, 2017).

The Housing First model prioritises getting people getting people quickly into stable homes. From this point, any other support needs they might have – such as alcohol and drug dependency, physical and/or mental health problems – are addressed through coordinated and intensive support. Central to concept of Housing First is that permanent housing is provided without a test of having to be ‘housing ready’. Furthermore, maintaining the tenancy is not dependent on the tenant using support services.

The Housing First model and the ethos on which it is based is simple yet radical; it works precisely because it hands choice and control, rights and responsibilities back to homeless people. It is ultimately a relationship-based approach to change, yet its success also depends on access to stable and affordable housing and the ability to draw in from a wide range of services the personalised support that the individual needs, as far as possible, when and in the format in which they choose it.

This is challenging to achieve within current welfare systems within GB for a number of reasons: public services have historically operated in silos; there is, in much of GB, a shortage of secure and affordable housing; increasingly tight resources have tended to be rationed on the basis of ‘compliance’ and ‘eligibility’; with a tendency to measure the success of services on cost, outputs and ‘throughput’, rather than outcomes.

Whilst there are strong moral and financial drivers for the roll-out of Housing First, the systemic and cultural change necessary to achieve this is significant. There is a risk that the fundamental principles of the model get ‘diluted’, including the support offered and caseload sizes, in the rush to scale up, thereby reducing its success and longevity of the programme.
This piece of work was jointly commissioned by Crisis and Homeless Link to review and analyse existing evidence in order to identify what is needed to support the implementation of Housing First across GB. A key part of this commission has been to undertake secondary analysis of existing datasets to estimate the size of the cohort for Housing First.

We were keen to draw learning about implementation from both research and practice, from GB and beyond. We felt it was important to start with what is already working well in local Housing First projects across GB, to consider what it might mean to implement the principles of Housing First (detailed in the following section) in practice, and what enables this. At the same time, we also considered the policy contexts of each of the three nations and spoke to government representatives and those who have a national perspective. This report presents the findings of this ‘bottom-up’ and ‘top-down’ snapshot of what is needed to support the wider implementation of Housing First.

1.2 The evidence base

This report is based on the collection and analysis of the following data:
- A rapid evidence review, which identified and reviewed 69 recently published articles and reports on Housing First, with a focus on implementation rather than effectiveness. These include international (written in English or French only) and GB publications, from both academic and ‘grey’ literature. We recorded key findings from these documents against each of the Housing First principles (presented in the next section) and produced an interim report summarising this exercise.
- Review of 8 relevant policy documents from GB to provide context.
- Twenty in-depth (each lasting approximately 1 hour) qualitative interviews with practitioners, civil servants, housing and/or support providers and policy officers. The organisations which these interviewees represent are included in Appendix 4.
- A quantitative element, which involved:
  - Scoping the existing data on the potential cohort for Housing First;
  - Correspondence with 12 organisations, leading to more detailed discussions/ data exchanges with 5; and
  - Secondary analysis of four key datasets to produce a range of estimates.

We have worked closely with Crisis and Homeless Link throughout this project, liaising with researchers engaged in complementary Housing First studies to minimise duplication and make the most effective use of resources.
2.1 What is Housing First?

Housing First uses ordinary housing, such as private rented or social rented flats, as a first step to recovery. It is designed to house homeless people with high needs in their own, settled homes as quickly as possible and to provide the support they need, at their own pace, and for as long as they need it, to sustain their tenancy.

The service contains two key elements:

1. **Housing**: which is provided as quickly as possible and without conditions (outside those of an ordinary tenancy) in mainstream housing, such as private or social rented flats. Crucially, the model gives the individual a stable base from which recovery is possible.

2. **Support**: which is provided consistently but flexibly and without time limits by workers who have the skills and time to build a trusting relationship. In the Intensive Case Management version of the model which has been used to date in GB, these workers then draw in support from other agencies where needed. (This is in contrast to the Assertive Community Treatment version more common in the USA and Canada in which health and mental health services are directly provided by the Housing First service). Crucially, the model puts the individual in control of their own rehabilitation by giving them choice over whether, when, how and with whom they engage.

2.1.1 The Housing First Principles

There have been significant variations in how Housing First has been delivered in different countries and local contexts, and in response to varying policy and legislative contexts, housing markets and welfare systems. This has led to considerable debate about what the core components of the model are and how they promote or hinder its effectiveness. Higher 'fidelity' to the original model established by Sam Tsemberis in the New York Pathways to Housing project in the 1990s seems to be associated with better outcomes, but there is still significant diversity in the models used by projects describing themselves...
as ‘Housing First’. In an attempt to promote consistency in England, Homeless Link (2016) developed a set of seven principles for the English context, based on those already tested by Tsemberis and from the more recent Housing First Europe Principles (Pleace, 2016, c.2). These also align with the Housing First Scotland principles and the Welsh government’s Housing First national principles and guidance for Wales. Homeless Link’s seven principles (Homeless Link, 2016) are:

1. People have a right to a home
2. Flexible support is provided for as long as it is needed
3. Housing and support are separated
4. Individuals have choice and control
5. An active engagement approach is used
6. The service is based on people’s strengths, goals and aspirations
7. A harm reduction approach is used

Whilst recognising that Homeless Link covers England only, we have used these principles as a framework for analysing the data we have collected and reviewed in this project.

In the following sections, we summarise the state of development of Housing First in each of the three nations in GB, including an overview of local and national initiatives to date and a summary of the relevant policy and legislative differences.

### 2.2 Housing First in England

The last five or six years have seen an increasing number of, mostly small-scale Housing First pilots, scattered across the country. In 2014, Pleace and Bretherton (published 2015) evaluated nine English pilots for Homeless Link, and identified a number of positive outcomes from these small-scale services, despite typically precarious funding. Homeless Link has since established Housing First England, developing a set of principles, guidance, toolkits and a range of resources with the aim of ‘building a national Housing First movement’.

Most of the funding for Housing First support services in England has come from local authorities, though there are some exceptions to this, most notably where Housing First projects have been incubated within some of the ten Big Lottery’s Fulfilling Lives (Multiple and Complex Needs) areas.

In 2016, Housing First Europe and the then Department of Communities and Local Government jointly-funded a Housing First Feasibility Study for Liverpool City Region, led by Crisis (Blood et al, 2017). This study considered the feasibility of implementing Housing First at scale within the newly created combined regional authority area. Since the report’s publication, the government has announced £28 million of additional funding for three regional Housing First pilots within the devolved combined regional authorities of Liverpool, Manchester and Birmingham. Process and impact evaluations will be conducted across the programme, including some form of control trial within the methodology. These pilots represent an important opportunity to test out whether and how the opportunity for systems change created by regional devolution supports the development of Housing First effectively and at a far greater scale than previously delivered in England.

The government has made a commitment to end rough sleeping by 2027 and halve it by 2022 and they see Housing First as one of the means of achieving these goals. The

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The cross-departmental nature of the work was felt, by those we interviewed, to represent a significant opportunity to think across traditional ‘silos’ in order to end homelessness.

Meanwhile, the introduction of the Homelessness Reduction Act, which came into force in April 2018, formalises homelessness prevention within the statutory system. New, universal, homelessness prevention and relief duties are placed on English local (housing) authorities, extending the requirement to assist someone at risk of homelessness from 28 days to 56 days. Anyone who is homeless is entitled to assistance to secure accommodation. The Act also creates duties for other public services to make a referral to local authorities if they think someone is at risk of homelessness.

This means that, if a person with complex needs is homeless or is at risk of homelessness they should be referred, or can self-refer to the local authority, who might then consider Housing First as a response to prevent (further) homelessness. More widely, the Act strengthens the preventative framework within which Housing First must surely sit; if we are to support those with the highest level of needs to exit homelessness, it makes sense that we must also work to reduce the size and homelessness pathways of the next cohort waiting to take their place. This is one of the key reasons why Housing First can only work to end homelessness where it is part of an integrated homelessness strategy.

An increasing number of Housing First projects are being delivered at local level across England. Homeless Link recently released (Homeless Link, 2018c) an overview of Housing First in England. In summer 2017, it identified 32 active Housing First providers, though many are very new (around half of these have been operating for less than 18 months); and most operate on a very small scale (26 of the active services can support 350 individuals between them at any given time). Two-thirds are local authority funded, with the average length of funding being 1 to 2 years. Rice (2018) highlights the risks which short-term funding of support pose for Housing First; we consider this question in more detail in Section 5. Crisis (2018) argues the need for long term investment and funding cycles for Housing First to be truly effective.

Crisis, Homeless Link and St Mungo’s have recently commissioned a number of studies to bolster the Housing First evidence base in England: this has included both primary research (Homeless Link, 2018b; Rice, 2018 [both forthcoming]) and evidence reviews (Mackie et al, 2017; Pleace, 2018).

### 2.3 Housing First in Scotland

Turning Point Scotland has been running a Housing First scheme in Glasgow since 2010 which now has over 50 tenants, making it the largest and longest-established scheme in GB. In the last few years, momentum has gathered in the city around this project, with the involvement of the Glasgow Housing Network. There are currently discussions with providers to roll out a citywide Housing First programme, which would involve shutting down 50 supported accommodation units and replacing them with one-bed properties. Some traditional supported housing would be retained, since there is a recognition that some people will still want this and that it may be more economical for some groups.
The profile of Housing First across GB has been raised considerably in the last two years, and there is now backing for the model from the Scottish Government and recognition of it in parliament by the First Minister. There is political consensus that Housing First is the most effective service for homeless people with multiple complex needs, and that it should be implemented across GB and at greater scale. Housing First is a key part of a strong strategic drive from the Scottish Government, working in collaboration across the public and third sector, to end rough sleeping and homelessness, including focusing on its prevention. This work is being driven by the Homelessness and Rough Sleeping Action Group, set up to recommend to Scottish Government Ministers the actions and solutions needed to eradicate rough sleeping and transform the use of temporary accommodation in Scotland. 3 The group published recommendations in March 2018, 4 including that local authorities should ensure the investment, planning and allocation of housing to support both the prevention of and response to homelessness. Specifically, they recommend that:

- Housing First is the default option for people with complex needs, to be built into the Code of Guidance;
- Local authorities develop five year strategies to move towards a rapid rehousing approach by default which includes Housing First for those with complex needs
- A national delivery group focuses on the scaling up of Housing First to national level.

Scottish Government has identified an additional £50 million of funding over five years, with a health funding contribution of £1.5 million over the first two years, to develop their transition to a Housing First and rapid rehousing approach. This will include £21 million for rapid rehousing and Housing First.

Scottish Government is also working strategically within an innovative collaboration to develop a national Housing First programme, which has been given considerable momentum and £3 million of funding by Social Bite, a social enterprise led by Josh Littlejohn. This is working initially in four cities - Edinburgh, Glasgow, Aberdeen and Dundee, where Littlejohn has pledges of 600 social housing properties from Registered Social Landlords and local authorities. Social Bite is funding the support (which is likely to be delivered via a consortium) for an initial period of two years, alongside a comprehensive evaluation.

This recent activity builds on a strong legislative framework: in 2012, changes to the Homelessness etc. (Scotland) Act (2003) came into force which placed a duty on local authorities to find settled accommodation for all (i.e. not just those assessed as being ‘in priority need’) eligible applicants who are unintentionally homeless, and to provide temporary accommodation while their applications are being assessed. This removed the category of ‘priority need’.

A comprehensive review published in February 2018 by the Local Government and Communities

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3 The HARSAG group was chaired by Jon Sparkes and included Russell Barr, Former Moderator, Church of Scotland, Maggie Brunjes, Glasgow Homeless Network, Mike Dailly, Govan Law Centre, David Duke, Street Soccer, Suzanne Fitzpatrick, Herriot Watt University, Josh Littlejohn, Social Bite, Lorraine McGrath, Simon Community/Streetwork, Susanne Miller, Glasgow City Council, John Mills, Fife Council & ALACHO, Shona Stephen, Queens Cross Housing Association, Alison Watson, Shelter Scotland

Committee⁵ has identified ways in which the Housing Options approach can be further improved. The report also argues that Housing First should be implemented, alongside other approaches and as part of a whole-systems approach to preventing homelessness.

The Scottish Government has also recently introduced a new form of tenancy for the private rented sector. The Private Residential Tenancy, which came into force in December 2017 for new tenancies, replaces the two different types of tenancy previously in use within the sector with the aim of improving security, stability and predictability for tenants, appropriate safeguards for landlords, lenders and investors, and greater clarity for all parties. This should improve the suitability of the private rented sector for use by Housing First projects and other housing-led responses to homelessness.

2.4 Housing First in Wales

Wales is at a relatively early stage in the development of a national approach to Housing First, though there has been a recent growth in momentum around the topic.

The Welsh Government introduced – three years ahead of the UK Government – a universal homelessness prevention duty. The Housing (Wales) Act (2014), which came into force in April 2015, created a statutory duty to ‘help to prevent’ homelessness (under S66) and to ‘help to secure’ accommodation (under S73) where this fails and/or a person is already homeless when they present. These duties hold regardless of whether or not someone is deemed ‘intentionally homeless’ and/or in ‘priority need’. However, the ‘duty to secure’ accommodation (where these preventative stages have not succeeded) still applies only to those who have been judged as being unintentionally homeless, in priority need and have not ‘unreasonably’ failed to cooperate with the previous offers of help to prevent/ secure. The law does not, therefore, go as far as the Scottish Government in removing the priority need category altogether, though this step is currently being discussed and anticipated in Wales. However, the changes to the legislation have significantly strengthened the preventative duties of local authorities and increased the volume of their Housing Options/ Housing Solutions work.

Despite this, Wales has seen an increase in rough sleeping in recent years (Fitzpatrick et al, 2017) and this has prompted a recognition that some people, who are already homeless but may not be in ‘priority need’ require different solutions. Welsh Government made available additional ‘transitional’ funding in 2017 to reduce rough sleeping, and this has included ten ‘start-up’ projects to develop and launch Housing First in different parts of the country. Welsh Government hopes these will help to test out the impact of different delivery partnerships and approaches and, in particular, the learning in relation to housing management, community relations and the impact on existing allocations systems. The Equality, Local Government and Communities Committee is undertook an Inquiry into Prevention and Tackling Rough Sleeping in Wales which published a report in April 2018 and the Welsh Government published their response in June 2018. This includes a recommendation that the Welsh Government should consider strengthening the Housing First – National Principles and Guidance

⁵ The Housing First Section of this report can be found here: https://digitalpublications.parliament.scot/Committees/Report/LGC/2018/2/12/Report-on-Homelessness#Housing-First-pilots-in-Scotland
for Wales with an expectation that local authorities should offer Housing First as a default approach to rough sleepers, and was agreed in principle.

In February 2018, Welsh Government published Housing First – National Principles and Guidance for Wales. This endorsed the eight core principles of Housing First as set out by Housing First Europe, and which are very similar to those proposed by Homeless Link (see section 2.1 above). The Welsh Government is particularly keen to see models which involve a key worker working with a person from the streets (or other setting) into and within their own property, and which use individual budgets to incentivise the individual and enable them to make further choices about their homes and their recovery.

The principles were published alongside the Welsh Government’s Rough Sleeping Action Plan (2018), which includes the action, by October 2018, to:

‘Encourage the application of Housing First principles (and review experiences of implementation) to enable rough sleepers to find settled accommodation, including the use of individual budgets to aid resettlement and incentives to improve access to the private rented sector’. (p.6)

Welsh Government has committed an additional £10 million within the 2018/19 budget to be spent on homelessness; £6 million will go into core revenue grant funding to local authorities, and £2.8 million will be paid via the Homelessness Prevention Grant (and, although local authorities can decide exactly how this is spent, there is an expectation that some of this will be used to fund Housing First). Decisions regarding how the remaining £1.2 million will be spent will be made following the publication of a further round of evaluation and research.

The Wallich has been running a Housing First project commissioned by Ynys Môn/Isle of Anglesey County Council since 2012. Working mostly with private sector landlords due to lack of social housing on the island, the project has succeeded in engaging with and resettling an original cohort of about a dozen long term rough sleepers. Newer referrals tend to be more preventative (e.g. people coming out of prison, detox or psychiatric units, or those with complex needs who are ‘sofa-surfing’).

New Housing First projects are now beginning to emerge as a result of the recent round of government funding, for example: the Salvation Army has been working with Cardiff Council to design, develop and instigate the city’s first ever Housing First pilot; and Conwy and Denbighshire councils are developing a jointly commissioned project, with an initial capacity of 10 units (Blood et al, 2018) Cymorth Cymru, the umbrella body for providers of homelessness support, has recently established a Housing First Network.

Chapter 3: Identifying the cohort

In this section, we consider the target cohort for Housing First and how it might be defined, estimated at GB level, and identified through referral and assessment procedures at a local level.

3.1 Who should Housing First target?

There is a clear consensus amongst researchers and practitioners that Housing First is effective for homeless people who have high, multiple and, complex needs. In particular, it has achieved very high tenancy sustainment rates (with around 80% remaining in their tenancies after one year) for those who have previously been stuck in the ‘revolving door’ of services and/or have experienced repeated or long-term homelessness (Pleace, 2018).

Since Housing First requires a significant and open-ended commitment of resources, its use must be targeted at those for whom it has the potential to be cost effective. This is likely to include those who have experienced or are at serious risk of experiencing a high cost and low effectiveness pathway through services, including criminal justice, health and social care as well as housing (Bretherton and Pleace, 2015; Blood et al 2017).

There was a consensus from the projects interviewed that Housing First should be targeted at those for whom no other housing approach has worked or would be likely to work. Where people have very high or unpredictable care needs (for example in relation to end-of-life care), Housing First may not be practical or cost effective; however, other needs or presenting issues should not be assumed to be a barrier to tenancy sustainment if the right type and intensity of support is provided.

A number of practitioners reflected on how surprised they had been that Housing First had worked for some people, whom they thought would not manage to stay in the properties. A worker on one scheme described how a client who had found it very hard to
stay in a hostel for any period of time without incident or imprisonment had successfully sustained their Housing First tenancy.

Interviewees also made the point that Housing First needs to target those with the highest needs if it is to demonstrate a fair use of limited resources. One interviewee argued that, if we were waiting in Accident and Emergency with a twisted ankle, we would accept the fairness of having to wait longer, while someone who has been in a road traffic accident is triaged through. This is similar to the argument which politicians and officers may need to make to those who are waiting for re-housing from hostels, short-term or unsuitable housing, to challenge the perception that Housing First clients are ‘queue jumping’.

Ending Rough Sleeping in Scotland: An interim report on the activity of the Homelessness and Rough Sleeping Action Group (HARSAG, 2018), set up to recommend to Scottish Government Ministers the actions and solutions needed to eradicate rough sleeping and transform the use of temporary accommodation in Scotland, sets out recommendations for responding to rough sleeping in Scotland. Based on the evidence they state that:

For people with complex needs we should also be adopting a rapid access to housing approach, such as Housing First, as evidence identifies this as a highly effective solution to both ending their rough sleeping and tackling the other support needs they have at the same time. Although, it is recognised that this is not a one-size-fits-all approach and there needs to be a range of intermediary low threshold or open access emergency accommodation options (p.12).

Specifically, Recommendation 8 of the report asks the Scottish Government to:

Ensure that people sleeping rough and experiencing multiple forms of exclusion are supported to secure permanent accommodation as quickly as possible, according to the best evidence available. Scottish Ministers should announce a default to Housing First as part of a rapid rehousing model for people sleeping rough and experiencing multiple forms of exclusion. This expectation should be included in a revised Scottish Government Code of Guidance on Homelessness (p. 15).

‘Scaling up’ Housing First suggests a move from the use of Housing First (often as a ‘pilot’), as a last resort for those for whom every other approach has failed to one in which Housing First is offered much more widely to people with complex needs, ideally at an earlier stage of their ‘journey’ through housing instability and homelessness. There will be some individuals for whom Housing First is not suitable: there will be some people who – even with active engagement and support - do not want to take on their own tenancy at this point in time; there may be some who have such high physical care needs that they need to be in an environment where carers and nursing staff can provide higher levels of support and monitoring. Turning Point Scotland suggested that, based on their experience, Housing First might be suitable for around 80% of this cohort.

This further strengthens the argument that Housing First needs to be planned and delivered as an integrated part of a wider homelessness prevention system, including a menu of housing and support options.
3.1.1 Different cohorts
There is much debate, but less definitive evidence, about whether and how the model can be applied or adapted for other cohorts: in this section, we consider young people, (ex-) offenders and survivors of domestic abuse.

Young people
The Housing First model was not originally set up with the needs of young people in mind and the evidence for how it can be made to work for this group is still emerging. Potential objections include whether people are likely to want and be ready for a stable home at this stage of their life course, or whether they may be more at risk of social isolation living alone. Young people will of course have diverse needs, circumstances and preferences, which suggests that different forms of Housing First – personalised for them (as for any age group) – could and should be offered as part of a wider spectrum of options, including family-based supported lodgings, foyers and shared housing. The Housing First principles around choice and providing support when the person wants it, and for as long as they want can certainly be applied to supporting young people - ideally alongside flexible support to access education, training and employment. However, for younger people – perhaps more so than for older adults – there is no ‘one size fits all’ (FEANTSA Youth Network, 2017).

There are already some Housing First projects aimed at young people. For example, the Edinburgh-based Rock Trust working in collaboration with Almond Housing Association launched a two-year pilot in GB in September 2017 in West Lothian. The project is focused on housing care leavers in permanent housing, and started with five properties.

From outside of GB, a modified version of Housing First has been evaluated in Limerick, Ireland (Lawlor and Bowen, 2017), in which young people aged 18-24 are offered high quality housing and support for an unspecified time period – this is not intended to be permanent, but rather to be ‘open-ended transitional’ housing, which responds to the developmental needs and individual preferences of the younger person. Key messages are that the building of relationships with a consistent key worker is of great value; and that support into education, training and employment is particularly important to support the longer-term stability of this cohort. There is also a strong Canadian model, This is Housing First for Youth (HF4Y) which has recently updated their guide. The programme includes a framework to provide communities and funders with a clear understanding of what Housing First is, and how it can work to support young people who experience, or are at risk of, homelessness.7

The restriction of Local Housing Allowance to shared room rate for the under 35s can be a barrier to developing Housing First solutions for this age group, since it imposes shared living on individuals who may find this particularly difficult. There are some relevant exemptions:

- The shared accommodation rate should not apply to those over 25 who can show they have:

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7 Gaetz, S. (2018) A safe decent place to live: Towards A Housing First Framework for Youth. Canadian Observatory on homelessness
Implementing Housing First across England, Scotland and Wales

- lived in homeless hostels for at least three months and accepted rehabilitation or support services before moving to the private rented sector (though this ties us back into the ‘staircase model’)
- are a former prisoner and are managed under the Multi Agency Public Protection Arrangements (MAPPA)
- Those in receipt of disability benefits (PIP, middle or high rate DLA or armed forces independence payments) are exempted.
- Care leavers are exempted from the shared room rate, but only up to age 22, which does not support longer term stability.
- The three Housing First pilots in England are exploring the introduction of an exemption from the Shared Accommodation Rate.

(Ex-)Offenders

Bramley et al (2015) in their report for Lankelly Chase found that around 48% of those who are homeless had come into contact with the criminal justice system: the majority of this group had a substance use issue. Some of this group will be regular but ‘low tariff’ offenders, who are frequent attenders at custody suites and receive regular short prison sentences, often because they do not have a stable address to which a community sentence could be issued. Others have left prison without accommodation following longer sentences. In our recent research with homeless people in both Liverpool City Region (Blood et al 2017) and for Conwy and Denbighshire Councils (Blood et al 2018), we have identified a number of challenges facing homeless prison leavers, including blanket exclusions from common housing allocation systems and a disjointed pathway into temporary accommodation from prison.

The evaluation of Threshold’s specialist Housing First project for women offenders has demonstrated significant reductions in offending rates (Quilgars & Pleace, 2017). The project is the first significant attempt to develop a specialist form of Housing First, targeted on homeless women who had a history of offending and as well as reducing offending rates the evaluation has shown effective links to services to address domestic abuse and impact on emotional health and wellbeing. The Ministry of Justice (which covers England and Wales) told us they are very interested in piloting Housing First with ex-offenders, initially with people who are released from prison, either rough sleeping or homeless. They would like to gauge the overall benefits (especially in relation to reducing offending, but also to linked outcomes such as reducing drug use), and then to explore the potential for rolling this out. They recognise considerable similarities between some ex-offenders and the cohort of people with multiple and complex needs for whom Housing First has been proven successful. They are keen to build a stronger evidence base regarding which cohorts of offenders Housing First might work best for in relation to gender, offence type, sentence type, or other needs such as mental health or substance use.

Interviews conducted found that The Ministry of Justice is ready to take forward discussions with the Ministry of Housing, Communities and Local Government and the Welsh Government to discuss the feasibility of setting up pilot schemes, though funds have not yet been allocated to this, and the Ministry of Justice is operating within a context of significant financial constraints. They are, however, currently running

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8 In Europe the ‘staircase’ metaphor is often used to describe shelter/housing systems where an individual’s progress is through a series of separate residential services – typically emergency shelter programmes, transitional housing and supportive housing. People are only placed in independent housing when they exhibit sufficient evidence of ‘housing readiness’. They are founded on a ‘treatment first’ philosophy which assumes that sobriety and/or psychiatric stability are necessary preconditions for independent living.
a number of related housing-related pilots, including working with the Ministry of Housing, Communities and Local Government to reduce barriers to the accommodation of ex-offenders in the Private Rented Sector.

Survivors of domestic abuse

We heard that, in England, recent DCLG funding for domestic violence services has led to the development of dispersed supported housing for survivors of domestic violence and abuse in a number of areas, some of which is being delivered in accordance with the Housing First principles, for example, one being run by Threshold in East Manchester. Threshold, which has been running a specialist Housing First scheme for women offenders with complex needs in East Manchester since 2015, told us that almost all of the women they support, not only in their specialist domestic violence project but also in their project for women offenders, are survivors of domestic abuse. They explained that:

“Lots of people don’t want to go into a refuge; they want to be in control of reducing their own risk of harm; so we do some very practical work them, helping them build safety plans, so they choose how they are going to make themselves safe.”

A key recommendation coming out of the APPG for ending homelessness included the need for MHCLG and the Home Office should provide joint funding for new Housing First models for survivors of domestic abuse.³

3.2 Sizing the cohort for Housing First in GB

Whilst there seems to be a consensus that Housing First is best targeted at those with high levels of complex needs, estimating the size of this diverse group at a national or GB-wide level requires a number of assumptions to be made. Data on people with complex needs is often lacking, and where it exists, it can be challenging to determine whether these needs are ‘high’ and whether the label of ‘high’ needs has been consistently understood or applied.

As part of this commission, we were asked to size the potential cohort for Housing First in England, Scotland and Wales, producing a range of numbers, rather than a single figure, given the different available data-sets and varying assumptions which could be made.

Our estimate focuses on the number of people who would require Housing First were it to be implemented at scale tomorrow; we have not attempted to model subsequent new demand over time. It is difficult to anticipate the impact on additional demand moving forwards were Housing First to be implemented as part of a wider system change which puts appropriate emphasis on effective homelessness prevention. We would expect demand for Housing First to reduce over time, but estimating by how much over the whole of GB requires too many assumptions to be made.

In the following section, we discuss some of the implementation questions that arise from these estimates, in relation to phasing and the balance between Housing First and other models of supported housing. However, we begin by estimating the number of people who fall into

³ All-Party Parliamentary Group for Ending Homelessness: Homelessness prevention for care leavers, prison leavers and survivors of domestic violence, July 2017
the target cohort for Housing First services, i.e. those who:

• Are currently homeless; AND
• Have complex or multiple support needs: Given that we are looking for those with the highest levels of need, we have included only those with some history of mental health issues, substance misuse and offending behaviour. However, we recognise that there is a distinction between the number and severity of needs, so in practice a person with two out of the three needs may have a higher level of need than a person with all three. In practice, we would not necessarily recommend that people are only eligible for Housing First if they have all three of these needs, but for the purposes of our high level, data-based estimate, this was felt to the best available proxy.

We looked at the data from two existing studies on homelessness and complex needs:

The first was the ‘Hard Edges’ research conducted by Bramley et al in 2015, which sought to map multiple disadvantage in England. This study estimated that, in 2010/11, there were 186,021 homeless people, of whom, 23,751 had experienced issues with mental health, substance misuse and offending.

Since this estimate was for England only, we used the national breakdowns from a GB-wide study for Joseph Rowntree Foundation (Bramley et al 2017), which estimated those who experienced destitution as a result of complex needs. We created ‘multipliers’ from this study which we then applied to the Hard Edges findings in order to estimate the equivalent figures for Scotland and Wales.

Since the Hard Edges study drew on data from 2010/11, and homelessness levels have risen significantly in the last eight years, we used Bramley’s (2017) work for Crisis to estimate ‘core homelessness’ to create a multiplier for each nation which reflects this increase to 2016.

We assumed that only 90% of this cohort would, at any given time, be in a position to accept a Housing First offer – the remainder might, for example, be in prison, hospital or ‘hidden’ from services, e.g. staying with someone else temporarily.

This produced an estimate of the Housing First cohort across GB of 32,260 people. The table in Appendix 1) shows the figures at each stage of this calculation for each nation.

Secondly, we used as our starting point the estimate of the total homelessness population across GB in Bramley’s (2017) study of core homelessness for Crisis, which was considerably lower than the Hard Edges estimate. However, this did allow us to estimate homelessness in each GB nation and add the multipliers as before to estimate this for 2016.

In order to estimate the proportion of this core group with all three out of mental health, substance use and offending issues, we used the Hard Edges (Bramley et al 2015) finding that 12.8% of the homelessness population had these three additional needs.

Again, we assumed that only 90% of this cohort would be in a position to accept a Housing First offer at any given time. This produced a total estimate for GB of 18,376. We break down the figures at each stage of this calculation for each nation in the table in Appendix 1.

Our (rounded to the nearest 50 people) estimates of the current Housing First cohort in England, Scotland and Wales are:
Identifying the cohort

Identifying the cohort

Appendix 2 shows the breakdown of the estimates for England into regions. As the Hard Edges study noted, this cohort is likely to be concentrated in particular areas: urban areas, both ‘core’ cities and former manufacturing towns; some coastal areas, including major seaside resorts and former port cities; and certain London authorities, namely the ‘central’ boroughs of Islington, Camden, Tower Hamlets and Westminster’ (Bramley et al 2015, p.23). Although this study focused on England, it similar patterns are likely to exist in both Scotland and Wales.

3.3. Implementation considerations

Having estimated the potential demand for a scaled-up Housing First programme as being somewhere between 18-32,000 people across GB, a number of key questions regarding implementation remain.

What is the balance of need for Housing First and other forms of supported housing?

In our Housing First Feasibility Study for Liverpool City Region (2017), we explored the feasibility of a phased transformation from the current system, in which the majority of commissioned housing support is provided in traditional supported housing projects and hostels, to a primarily housing-led response to homelessness, which would ultimately be funded from the current funding envelope of commissioned supported housing. Our vision for the Liverpool City Region included a substantial Housing First programme targeting those with the highest and most complex needs as part of an integrated strategy, including strengthened homelessness prevention, rapid re-housing with the option of a lighter touch floating support offer for those who are likely to need less intensive support once re-housed, and some residual supported housing. The question of exactly how much ‘residual’ supported housing would be needed within such a system, and what its specific role or roles might be is contentious. It is also difficult to answer, given the current lack of reliable evidence regarding which cohorts benefit from which models of traditional supported housing in GB and under which conditions.

In Finland, where Housing First has been implemented at scale and with a good level of success, the purpose of the ‘residual’ hostel accommodation is to provide emergency and very short-term accommodation whilst a tenancy is identified. However, in order to deliver sufficient Housing First units at scale, the Finnish strategy – certainly in its earlier phases - included the conversion of existing communal, institutional services into blocks of self-contained apartments, in order to provide ‘congregate’ models of Housing First (Pleace 2015).

If Housing First were to be implemented at scale across GB, the balance between and targeting of ‘traditional’ supported housing models (including both hostels and floating support services) and Housing First (which has ‘high fidelity’ to the principles) will need to be agreed and phased locally and in partnership with supported housing providers. This will be influenced by the future funding of supported accommodation and will

<table>
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<th>England</th>
<th>Scotland</th>
<th>Wales</th>
<th>Total GB</th>
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</thead>
<tbody>
<tr>
<td>Higher Estimate</td>
<td>29,700</td>
<td>1,500</td>
<td>1,100</td>
<td>32,250*</td>
</tr>
<tr>
<td>Lower Estimate</td>
<td>16,450</td>
<td>1,350</td>
<td>600</td>
<td>18,400</td>
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*NB: The GB totals were rounded after summing the accurate figures, so they may not equal the totals of the rounded national figures.
depend locally on these two factors, and the interplay between them:
- The existence, scale, location, quality of accommodation and outcomes of ‘traditional’ supported housing in the area; and
- The nature of the housing market – if a steady supply of tenancies cannot be identified then ‘emergency’ supported housing inevitably becomes longer term.

**How might Housing First be phased in relation to this cohort?**

Thirteen out of the seventeen Housing First services responding to Homeless Link’s (2018) survey said that, in addition to using a definition of complex needs to ascertain suitability for the service, they also sought to target (though usually not exclusively) those who had not had their needs met by traditional support services. Homeless Link (2018) argues that, whilst it may be understandable to prioritise those who already have long histories of homelessness and multiple exclusion, there is a thin line between adopting such a policy and ending up creating a ‘Failure First’ system in which only those who have spent years being excluded by services are offered ‘Housing First’.

It is noticeable that Housing First projects that have been running the longest in GB have, over time, have tended to lower their thresholds and accept more ‘preventative’ referrals. For example:

- **St. Mungo’s Housing First in Haringey** was initially commissioned to target those with complex needs who have spent three or more years in the local authority homelessness pathway. However, over time, flexibility has been introduced and it has been agreed that people who have recently moved into the pathway can be directly referred by the council’s Outreach team, rather than waiting for them to get ‘stuck’ in the pathway for three years before they become eligible. The criteria for this new source of referrals is being agreed collaboratively between the Project, the Outreach Team and the Commissioner.

- **Housing First in Ynys Môn/Isle of Anglesey** initially supported a dozen individuals, most of whom were long-term rough sleepers. Over time and due to the success of the project, there are now far fewer rough sleepers and the project has succeeded in building effective relationships with health, social care and criminal justice partners. The project is now picking up new referrals at key transition points, such as leaving prison, detox or hospitals or those who are ‘sofa-surfing’. Some of this cohort have needed lower levels of ongoing support, so the project has evolved accordingly.

If Housing First were to be rolled out at scale, it might make sense to begin by consciously targeting the ‘backlog’ of long term homeless people with complex needs in the early phases, then broadening out to take a more preventative approach further down the line. This would mirror the approach taken in Finland, where Housing First was initially introduced at scale under the ‘Paavo I action plan’ to tackle a ‘long-term’ population, on whom resources were being expended without resolving their homelessness (Pleace 2017). In the later ‘Paavo II action plan’, a much wider, preventative and housing-led strategy was implemented with the more ambitious aim of ending homelessness altogether.

However, there may equally be an argument for offering some places more preventatively from the very outset. Strategically, this will need to be a political decision, probably best taken locally and in partnership with other key agencies, and to fit with the wider homelessness strategy in an area. Practically, we would envisage each individual referral being assessed based on their personal circumstances and we discuss the key learning from
Identifying the cohort

existing Housing First projects in relation to this in the following section.

For the purposes of this report, we felt it might be useful to provide an estimate of what might be described as the ‘backlog’ cohort, i.e. that sub-set of the target cohort for Housing First which has already been homeless for some time and who are likely to be the primary focus during the early phases of scaling up. We defined this group (in addition to meeting the complex needs and current homelessness criteria for the wider Housing First cohort discussed above) as having been homeless for at least two years (or having used homelessness services at least three times in that period).

We engaged a number of different stakeholders in order to identify the proportion of homeless people with complex needs in different settings who fell into this additional category of long term homeless. We found that:

1. 21.5% of those found sleeping rough in London between October and December 2017 who had noted support needs in relation to alcohol, drugs and mental health also met the criteria for RS205 (entrenched rough sleepers) within the CHAIN database.\(^\text{10}\)

2. 19.3% of people recorded on the Mainstay system in Liverpool as in receipt of some form of homeless service (including street outreach services) and who met the criteria for complex needs – very high risk in relation to two out of the three domains of mental health, substance misuse or offending) had been homeless for two years or had presented at least four times for service over that period.

3. 63% of people going through the homeless pathway in the London Borough of Camden that had two or three additional needs (out of mental health, drug abuse, alcohol abuse or offending behaviour) had been in the homelessness pathway for at least two years.

4. 48% of the service users of Middlesbrough supported housing services who had at least two additional needs (from mental health, substance misuse or offending behaviour) had been homeless for at least two years.

We also requested additional data analysis on the *Nations Apart* dataset (Mackie & Thomas 2014) which showed that 30% of the homeless people interviewed as part of that study who had identified two or three additional complex needs also said that they had experienced more than two years in “temporary housing”.

Although it was difficult to discern a clear pattern from these figures, we felt that this figure of 30% was a reasonable mid-point. We estimate then, that around 30% of the potential cohort for Housing First has also been homeless and/or in the homelessness ‘system’ for at least two years. These figures are shown in the table below in brackets for the medium and higher estimates in each of the three nations and across GB:

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</thead>
<tbody>
<tr>
<td>Higher Estimate</td>
<td>29,700(8,900)</td>
<td>1,500(450)</td>
<td>1,100(350)</td>
<td>32,250(9,700)</td>
</tr>
<tr>
<td>Lower Estimate</td>
<td>16,450(4,900)</td>
<td>1,350(400)</td>
<td>600(200)</td>
<td>18,400(5,500)</td>
</tr>
</tbody>
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\(^{10}\) NB: the figures for CHAIN because it gathers data from rough sleepers, unlike those for people in receipt of homelessness services and registered on local authority databases (i.e. in Liverpool, Camden and Middlesbrough) will include migrants who do not have recourse to public funds.
3.4 How is the cohort currently identified by local Housing First projects?

Existing Housing First projects have developed and evolved varying referral routes, eligibility criteria and assessment processes, depending on their funding and commissioning arrangements and the nature of the partnerships in each area. If Housing First is to be ‘scaled up’ across GB, it will need to be done in a way that respects and allows sufficient flexibility for such local development, whilst taking into account the following key points that emerge from ‘bottom up’ practice:

**Partnership working is vital**

Even where Housing First is being implemented at a small scale, the value of partnership working – often through multi-agency panels or steering groups – is clearly vital. Making referral decisions, identifying housing options, and coordinating how different agencies will support individuals are the key operational tasks of such groups. Experience from existing projects suggests that the very process of partners coming together to make referral decisions seems to promote joint working, information sharing and the development of a shared vision. If Housing First is to ‘scale up’ and create system change for people with complex needs, all key partners – from housing, criminal justice, social care, health and mental health – will need to have their ‘skin in the game’.

**The Two Arches Project in Sheffield**

set up a collaborative group including representatives of the local authority, the project evaluators, contract managers and partners from public health and mental health, who make referrals which the project then assesses for suitability.

Strong local partnerships which support data sharing and a collaborative (rather than a ‘buck-passing’) approach to working with this cohort are a key foundation for the development of an effective Housing First project. In England, this has sometimes grown out of a Making Every Adult Matter (MEAM) or similar – approach to partnership working around complex needs.

MEAM is a coalition of charities in England (Homeless Link, Mind and Clinks) which has developed a set of tools and a network of support for local areas wishing to develop a coordinated, multi-agency response to people with complex needs. A recurring theme from our research was that local partnerships need to have a shared vision of the Housing First principles as their starting point.

We heard that there can be resistance initially to Housing First from a range of stakeholders, including commissioners, providers and partner agencies. Reasons given can include: experiences of previous failure; anxieties relating to risks of damage, anti-social behaviour, or social isolation in tenancies; or the general threat of a new approach, which represents a move away from a paternalistic to a co-produced way of working. One provider told us they often encountered very low expectations of this group of people. In Blood et al (2017), this viewpoint was typified by the comment, ‘This [living in a hostel] is as good as it will ever get for them’.

Longer-established projects explained that proof of success over time, disseminated by word-of-mouth, had helped them to overcome much of this resistance. This included the homeless community itself, especially where people with lived experience

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11 More information on the MEAM approach can be found on their website http://www.themeamapproach.org.uk/the-meam-approach/
have been actively involved in the design and delivery of the project.

**Referral decisions need to be co-produced**
The Housing First principles should inform the process of referral and assessment. For example, Housing First must give individuals choice and control, which means that the decision about whether or not an individual is suitable for the model needs to be made with them, not to or about them. The principles of flexible and strengths-based support should define the values and ways of working with the cohort right from the outset, by outreach services which feed into and/or are run by Housing First projects. In practice, this means working on the terms, at the pace, and to the goals of each individual.

Some well-established projects described working with some clients for very many years, and knowing them very well. The Scottish Homeless and Rough Sleeping Action Group (2018) recommends that:

* A by-name approach to people who are actually sleeping rough, enabling multi-agency responses and effective monitoring of improvements and resource requirements in real-time will be key to supporting swift, person centred, housing led responses.

Some of the practitioners we interviewed noted that some rough sleepers’ first inclination is to say ‘no’ to the offer, so the principle of active engagement is also vital at this stage. The direct provision of assertive outreach by Housing First teams, or close working with outreach teams who fully understand the principles of Housing First is therefore key. All practitioners we spoke to emphasised the importance of skilled staff working to build effective relationships with potential Housing First clients from the outset, as these relationships are key to the individual’s success in gaining and then sustaining a tenancy.

- **St Mungo’s and Threshold** both emphasised the importance of ‘assessment’ as a chance to really explain the principles of Housing First and how the service works to the referee:

  “This is as much to see that they think the service is right for them as the other way round”. (Threshold)

- **Two Saints** describe their assessment process as ‘light touch’, with the focus being on engagement. They use a simple assessment tool where a person is on the street, which mainly highlights support needs and identifies some actions for when they move into a property. They recognise that some of those referred have a long history of being excluded or let down by services, and so they place more focus on engaging them and building trust, highlighting that they are not from the local authority and taking time to explain how Housing First works. Although anyone can refer into the project, the decision about who will be offered the service is made between the project and the individual.

**Using data and formal measures**
We heard that there has been some use made of the CHAIN rough sleeping database in London to cross-refer and check information about potential referrals for Housing First projects. Some existing projects make use of the New Directions Team Assessment (‘Chaos Index’)

Implementing Housing First across England, Scotland and Wales

• **Inspiring Change Manchester**, a Fulfilling Lives project\(^{13}\) which has ‘incubated’ Housing First, explained that they have identified those most in need of and best suited to Housing First out of their existing caseload of a hundred people with complex needs. The Fulfilling Lives projects all use the Chaos Index as a means of identifying the 100 individuals with the highest levels of complex needs in the city which form the project’s caseload. Within that, and as their Housing First service has gradually expanded, Inspiring Change Manchester has prioritised those who needs are being caused by long-term homelessness. At the time of interview, a quarter of their caseload were being supported in Housing First and they plan to continue growing this number.

• **Both Threshold and Two Saints** use the Chaos Index to inform referral decisions, on the basis that this can help to ensure that people with the highest levels of complex needs are being targeted. However, neither service applies a strict cut-off in recognition that the scoring process is inevitably subjective and may well change for an individual over time: it does not follow from a high score that someone will necessarily be suitable for Housing First, or from a low score that they will not.

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3.4.1 Identifying the cohort: considerations for scaling up

The evidence reviewed in this section suggests that the following actions are needed to support the identification of the cohort for the wider implementation of Housing First in GB:

• Improving the consistent collection and sharing of data regarding people with complex needs experiencing or at risk of homelessness to support strategic planning and the identification of suitable individuals for Housing First. Data sharing can also help to build a clearer understanding of the wider cost effectiveness of Housing First across sectors.

In Fife, local research has been undertaken on the ways in which homeless people are currently using hospital and other health services, by linking data. It is hoped that, when published, the report will provide additional leverage to engage health providers in Housing First in the city.

• Strengthening partnerships with Health, Criminal Justice, Housing, Social Care, DWP, etc. across GB and locally so that a shared strategic vision can be developed for Housing First and effective referral processes established at local level.

• Ongoing dissemination of personal success stories and the findings of service-level evaluations, to build confidence in the model and a better understanding of those for whom it might work best.

The Housing First England website\(^{14}\) includes a number of personal stories of people who have been successfully resettled in Housing First.

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\(^{13}\) Fulfilling Lives is a Big Lottery Funded project in England, which has invested £112 million in partnership projects working with people with complex needs in 10 cities.

\(^{14}\) https://hfe.homeless.org.uk/life-stories
Chapter 4: Housing supply

Needless to say, Housing First can only work if suitable housing can be identified and accessed. In this section, we begin by exploring the implications of the Housing First principles for housing supply, before considering the learning from existing small-scale Housing First projects in relation to securing housing. We dedicate a section to considering the impact of welfare reform on Housing First, before presenting a menu of possible mechanisms for levering in housing supply at sufficient scale to roll out Housing First in different housing markets.

4.1 Putting the principles into practice

Housing First removes the idea that someone in the homelessness system needs to be judged as ‘housing ready’ before they are allocated a property. As the first principle argues, everyone has a right to a home.

A stable base

The Housing First model works because having a home provides a secure base from which recovery, in a number of forms, might begin (Groundswell, 2017; Pleace 2018; Mackie et al, 2017). The literature talks about ‘ontological security’ or well-being arising from the consistency of having a home (Padgett, 2007), which is key to the process of rehabilitation.

Having control over your own living space is associated with positive outcomes: in the early Housing First pilots, people appreciated being able to ‘come and go as they please’, without adherence to curfews, rules or the needs of others (Bretherton and Pleace, 2015, p.48).

Having a stable home gives someone who may previously have lost their citizenship a real stake in the community: it confers on them a set of ‘real-life’ (rather than service-generated) rights and responsibilities to which – with support – they must adhere. As one of the providers we interviewed explained: ‘The flat is a real incentive to make it work’.
**Housing choice**

Choice in housing - as in all other aspects of the service - is absolutely central to how and why the model works. A Housing First scheme therefore needs to be able to access a range of housing options, so it can offer as much choice as is reasonable and practical in the mainstream local housing market. Solutions should be built around the individual and their preferences and circumstances, though these will inevitably be constrained by the local housing market and funding systems. This is especially relevant in areas of high demand, where people may have to wait a while for a suitable property to become available. Bretherton and Pleace (2015) found that people’s expectations were shaped by the general housing context and that this was not problematic in itself. However, it clearly makes sense to try and reduce waiting times for potential Housing First tenants as much as possible, and our interviewees suggested that being able to offer help quickly makes it easier to engage people.

One provider explained how they offered ‘housing choice’ even though they were not able to offer a huge range of housing options because of the nature and location of most of the stock which their parent housing association owned. ‘Housing choice’ for them involved starting with the person (rather than the available properties); exploring what matters to them and why; and helping them to express their aspirations. Sometimes these needed unpicking to help them distinguish the essentials from the desirables. At each stage, the person is supported to make an active and empowered choice regarding their housing options.

There is no definitive evidence about the impact of a person choosing to stay within an existing community versus moving elsewhere. There is evidence of some service users consciously ceasing to see their friends from their previous homeless social life when gaining their own home (Bretherton and Pleace, 2015). In London-based projects, moving to an outer London borough is the norm, with mixed results for the service user based on their circumstances (Howe, 2017).

**Security of tenure**

There is some debate in the sector about how essential a secure tenancy is to the fidelity of the model. If people are to get a real sense of having a ‘stable base’, it is important that they do not feel this is time-limited or likely to be taken away with little notice. However, the reality is that secure tenancies are extremely hard to access in parts of GB, especially where there is a shortage of affordable housing. Whilst the security of the PRS is less than ideal as a housing option to adhere with the fidelity of the model, the role of Housing First is to guarantee a new tenancy if this becomes at risk and support the individual to find an alternative home. A range of approaches has therefore been taken to try and square this challenge:

- **The Housing First Pilot led by Depaul** in Northern Ireland (CIH, p.9) secured social housing by joint-working with the Housing Executive; the pilot was able to actively engage people on the street and register them directly to the common housing list. Those on the Housing First programme who were housed within the private rented sector, were allowed to remain on the common waiting list in case their tenancy broke down or a social tenancy that better matched their needs and preferences became available.

- **The St. Mungo’s Housing First project in Haringey** has successfully used the private rented sector (PRS) to house people, and if those tenancies have ended, then they have supported the tenant to find another PRS property and move to
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a new house. Although this can be unsettling, in the London market it is not seen as unusual for people to move more regularly within the PRS, and the project approaches this situation pragmatically, whilst recognising that the ideal is of a local authority tenancy for life.

In France, Housing First has been implemented using a number of tenancy variations, for different cohorts in different settings. These have included the use of a ‘sliding lease’, in which the provider holds the tenancy and sub-leases it to the client, or a ‘back-up lease’, in which the provider takes on a tenancy terminated following problems, continues to lease it to the tenant and supports them until they are able to resume the tenancy in their name. France has also piloted Housing First in situations of domestic abuse, where the perpetrator is removed, re-housed and supported, and the survivor/family are maintained in their previous home with a package of support.

Although it may not be possible to insulate Housing First tenants from the housing market in some parts of GB, it is crucial that the separation is maintained between the tenancy and the support provision. For example, if progress to a more secure tenancy is conditional on successful engagement with support services, then ‘Housing First’ effectively becomes another version of the staircase model it is intended to replace. Pleace and Bretherton (2015) provide an example in which security of tenure in the private rented sector was increased for Housing First tenants via a two-year shorthold tenancy. However, since the renewal of the lease was conditional upon receiving ongoing support, the scheme is not faithful to the principles of Housing First. As Pleace and Bretherton (2015, p.22) note: ‘This meant that, if someone’s support needs fell, they could theoretically be asked to move on from housing provided’.

Dispersed v. congregate models

Although congregate models of Housing First are more common in North America, and were also successful in the initial stages of the Finnish model, overall the evidence seems to indicate that individual tenancies in ‘ordinary’ self-contained properties scattered in the community work best (Mackie et al, 2017, p.105). Those we interviewed explained that one of the key reasons that Housing First seems to work for many of this cohort is that they move away from living with other people, who in many cases share some of the same issues. In addition, congregate models may perpetuate the sense that homeless people are ‘other’, rather than seeking to integrate them back into mainstream communities (Pleace, 2018).

We heard of a couple of individual examples in which shared tenancies or very small scale congregate models had been successful. The key criterion for success here is choice: there is a huge difference between deciding that you would like to share a property with someone else and being told that you will have to. What is less clear at present is whether and how Housing First can be made to work for those under 35 who, under the Local Housing Allowance system, have no choice but to share within the private rented sector – a point to which we return below.

There may be economies of scale from small scale congregate models where people need high levels of personal – or even palliative - care, perhaps along the lines of an ‘extra care’ model for people with complex needs. However, any congregate model will need excellent management to ensure that the Housing First principles are adhered to, institutionalisation is avoided and positive relationships between tenants and with the wider community are maintained. We have already seen how important it is for the individual to choose the area in which they live. This may involve striking
a balance between breaking and preserving existing social networks. Creating a ‘ghetto’ of Housing First tenants can create risks for community relations, housing management and individual rehabilitation.

4.2 What’s enabling housing supply in existing Housing First projects?

We interviewed people who have set up Housing First in varied housing markets. Even from this small sample, it is clear that there are very localised differences in housing supply and that there is no one-size-fits-all approach. For example, some London boroughs are managing to use the private rented sector, where the Two Arches project in Sheffield reported that private rents were going up and making this accommodation option prohibitive. Some projects guarantee rent to attract private landlords; others avoid this sector entirely because of the lack of tenancy security, the potential additional cost, and the inferior quality of the housing stock. However, despite these variations, there were common themes here regarding what is enabling housing supply at a local level. Under the current scale of Housing First, housing is only being accessed in a locality in very small numbers. If Housing First was to be scaled up there would need to greater investment in new supply with the view to using both new and existing stock for Housing First purposes as well as wider need for low income households and other homeless people.

Building relationships with landlords in both the private and social rented sectors

All the practitioners interviewed explained how building trust and relationships with landlords over time was essential to enabling a supply of suitable local properties. Landlords need to be reassured about the levels of support, the reliable payment of rent and what will happen if there is damage to the property, and this is the case even where the support organisation is part of the same organisation or group as the landlord. The Turning Point Glasgow evaluation highlighted the investment of staff time to engage and reassure housing providers and stakeholders at every level (Johnsen, 2013). A common pattern here is that trust and reputation is built gradually once the success of the model has been proven, using the properties of a few pioneer landlords.

- **Inspiring Change Manchester (ICM)**, has drawn its 25 Housing First properties to date from both social and private landlords across the city: all are mainstream tenancies. A lot of housing associations signed up at the start of the pilot: some were proactive, sending a representative to the steering group and offering properties; others were happy to be approached when ICM was looking for something specific for a particular individual. The Housing First project has been able to build on the relationships which their host organisation, Shelter, has with the city’s private rented sector. There have been a few times when a small amount of investment has been required to bring a private rented property up to a decent standard. However, the National Landlords Association has been really supportive and some private landlords with large portfolios have been keen to support; they realise that they have a point of contact through ICM, which they do not have in standard tenancies.

- When they launched a Housing First project in Ynys Môn/Isle of Anglesey, the Wallich set about building relationships with local private landlords, initially identified through the council’s PRS liaison officer. The landlords’ major concern was ensuring that the rent was paid regularly; some were sufficiently reassured by the fact that tenants
would be receiving intensive support. Over time, the project has built excellent relationships with lots of private landlords; it almost acts now like a social lettings agency, matching individuals with landlords and properties. The staff warn that spending too much time worrying about where the housing will come from at the start of the project can risk stalling it before it begins: once the project is up and running, effective relationships between landlords and support staff can be built.

**Strategic influencing**

In some parts of GB, where much of the private rented sector is unaffordable to those on benefits, it has been important for projects to work strategically to lever in social housing. This may involve setting up processes to enable access, such as panels to approve ‘fast-tracking’ into properties as they become available. Although relationship-building with landlords will always be important, it is likely that this kind of strategic influencing will be even more important if Housing First is to be scaled up and there will need to be greater focus on investment of new supply as highlighted above.

**Capital or revenue funding**

Some providers have built or converted their own properties; for example, Two Saints have converted their offices into flats for the Housing First project.

Depending on the tenure and approach used, Housing First projects will need a budget for housing covering:

- Rent deposits;
- Personal budgets for furnishing accommodation (for example, in Ynys Môn/Isle of Anglesey each tenant has a £1000 budget which can be spent furnishing and personalising homes or accessing social, leisure or educational opportunities);
- Replacements/ repairs; and
- Sympathetic, sensitive and informed housing management, which might include basic practical support or ‘tenancy building’ (Littlewood, 2017), for example to bleed a radiator.

**Housing brokerage with individuals**

An honest, ‘adult’ conversation between the Housing First client and someone who has excellent knowledge of local housing options was felt to be key to enabling the principle of choice. This needs to be realistic about availability and affordability (Littlewood, 2017) and must avoid being defeatist or punitive: the aim is to support the individual to make their own personal trade-offs and help them to identify creative potential solutions.

**4.3 Welfare reform**

Welfare reform interacts with different local housing markets across GB to create recurring challenges:

- The Spare Room Subsidy has put a lot of pressure on the limited numbers of 1-bed properties in some parts of the country. For example, around half of the dwellings in London are flats, but this falls to between 8 and 12% in the East Midlands, the North West, Wales and the Yorkshire and Humber.\(^{15}\)
- Local Housing Allowance (LHA): in some parts of GB, there is a greater shortfall between LHA rates and average market rents than in others, making much of the PRS unaffordable for those on benefits.
- Under 35s shared room rate: This effectively means that the benefits system will not fund accommodation for this age group unless it is in a shared house, which is a real challenge to the Housing First model, though innovation, as seen

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\(^{15}\) Dwellings stock: by region and type of accommodation, 2008, ONS
in the previous chapter, is starting to appear. The shared accommodation rate should not apply to those over 25 who can show they have:

• lived in homeless hostels for at least three months and accepted rehabilitation or support services before moving to the private rented sector (though this ties us back into the ‘staircase model’
• are a former prisoner and are managed under the Multi Agency Public Protection Arrangements (MAPPA)
• Those in receipt of disability benefits (PIP, middle or high rate DLA or armed forces independence payments) are exempted.
• Care leavers are exempted from the shared room rate up to age 22, but this does not really support the planning of long term housing.

• Introduction of Universal Credit: is creating concern amongst PRS landlords, who are becoming increasingly risk averse in relation to state-funded tenants, especially in areas where demand from other groups is high.

Outside of housing costs, the increasing ‘conditionality’ within the benefits system poses significant challenges to this cohort: ongoing receipt of benefits is conditional not only on a person’s needs but their ability to comply with (and demonstrate they have complied with) a series of conditions. Research conducted for Crisis in 2015 (Reeve, 2017) found that the homeless population was nearly four times as likely to be sanctioned for failure to comply than the wider claimant population, despite the majority telling researchers that they agreed with the principle of conditionality and were keen to get back into work. The research found that homeless claimants, especially those with substance use, mental health and/or literacy issues, were disproportionately impacted by requirements to apply for multiple jobs online each week. Access to the internet; having a fixed address to which post could be sent; money and clothes to travel to interviews and courses; and managing conflicting appointments and demands were common barriers.

Housing First should help individuals overcome some of these barriers – e.g. through having a permanent fixed address, help from support workers to manage conflicting appointments and demands, and advocacy for people, e.g. to apply for sickness/ disability rather than jobseeker’s benefits. However, current Department of Work and Pensions policy and practice does pose a threat to the ability of Housing First tenants to reliably fund their subsistence through benefits. Since this cohort will – by definition – include those with the highest levels of complex needs, some may be a long way from realistically gaining employment, yet, given the increasingly stringent regulations surrounding Employment Support Allowance and Personal Independence Payments, may struggle to access or remain on sickness and disability benefits long term. Moreover, the punitive ethos of conditionality conflicts with the strength-based ethos of Housing First – a tension which frontline workers may find themselves trying to manage, as the self-esteem which they are seeking to restore is knocked back by sanctions or the demoralising process of having to apply for jobs which you are unlikely to secure.

Whilst this policy ultimately needs to be reviewed by the Westminster government if these barriers are to be fully removed, our work to explore the feasibility of Housing First in both Liverpool City Region and Conwy and Denbighshire, North Wales suggests that the Department of Work and
Pensions at a local level is often keen to engage and find ways of working in partnership with Housing First projects. We recommend that they be routinely included in partnerships at the earliest stages of developing Housing First at scale.

Our research highlighted how current practice is helping to reduce these barriers:

- The Scottish Government is working to mitigate some of the problems created by welfare reform, which, in addition to the issues cited above, leaves some people without recourse to public funds and others receiving sanctions. It does this through discretionary payments, such as Discretionary Housing Payments.
- The landlord, claimant or their representative can request an Alternative Payment Arrangement (APA), which is a managed payment of Universal Credit housing costs direct to the landlord. This – along with support from Housing First workers to claim benefits and manage personal finances - can reduce landlords’ concerns about the payment of rent, assuming the APA is set up without administrative error right from the start of the tenancy. 
- Securing an exemption for Housing First tenants from Universal Credit and the other aspects of Welfare Reform listed above may have a number of advantages in relation to housing supply and choice. Exemption could potentially allow 2- or even 3-bed properties to be used where they are in greater supply than 1-beds, and/or where they have other features which meet the tenant’s needs (e.g. accessibility, location, etc). It would make Housing First outside of shared models a possibility for those under 35 and could increase landlord confidence in the reliability of rent payments.
- If private rented accommodation is to be used, the property would need to be leased from the landlord by the support provider (i.e. a Registered Provider or charity) who would then issue a tenancy directly to the tenant. This model has the added potential to facilitate a longer-term tenancy, but it means that the provider will need to hold all the risks, which has to be costed into the model.
- The housing and (at least some of the) support need to be provided by the same organisation. This may seem on the surface to run contrary to principle 3 (that “Housing and...
Support are separated’). However, there is nothing in the practice and policy evidence that suggests the housing and support cannot be provided by the same organisation; the key factor seems to be that they are not conditional on each other, i.e. if the tenancy fails, the team continues to support the person, and that if the person no longer wants the support, they do not lose the property. In the literature and in the interviews, this is often described as the ‘stickiness’ of the support (Littlewood, 2017, p.77; Mackie et al, 2017, p.31).

4.4 Mechanisms to lever in housing supply for the scaling up of Housing First

It is clear from Finland’s experience of delivering Housing First at scale that a significant national commitment to housing development is essential. Constructing and purchasing new, affordable housing was one of the most important goals of the Finnish National Programme to reduce long-term homelessness between 2008 and 2011. Municipalities, cities and other organisations bought and built housing, often with government support. The Y-Foundation has been the key developer of properties for Housing First and, with over 16,500 apartments in 50 cities, it is the fourth largest social landlord in the country.

There would need to be mechanism to assist this happening in Great Britain, either the set up of national housing associations as has been done in Finland or a scalable social lettings agency model which was presented as a solution in the Liverpool City Region study to procure and manage properties.

In this section, we consider a menu of options for improving housing supply, some of which will work better in some types of housing markets than others.

Removing barriers related to welfare reform

As we saw in the previous section, welfare reform is acting as a significant barrier to housing supply, especially in areas where there is a dearth of one-bedded properties (but an over-supply of 2- or 3-bed properties). In such areas, exemptions to welfare reform for Housing First would help the supply of properties for Housing First.

If the UK Government is serious about rolling out Housing First, the Department of Work and Pensions should review its exemption policy to include the model alongside other forms of supported housing. For example, at present, the shared room rate does not apply to over 25’s who have lived in homeless hostels for at least three months and accepted rehabilitation or support services before moving to the private rented sector. It would make sense for a similar exemption to apply to those moving into Housing First, whether they have come directly the streets or from a hostel.

Improving security of and access to the private rented sector

The change in legislation in Scotland (highlighted above) which gives greater security of tenure within the private rented sector may make such properties more attractive to Housing First projects. Crisis is currently funding the evaluation of a new Housing First model with the private rented sector in Glasgow.

There are clear benefits from being able to draw in housing stock flexibly from a number of different landlords, and ideally across local authority boundaries. While a dedicated housing broker building relationships can achieve this at a relatively small scale over time, a social lettings agency may enable this to happen more quickly and at greater scale. Such a body has the potential to act as an intermediary, perhaps offering a menu
of services to landlords ranging from tenant matching to a full housing management service on a long-term lease. Homeless Link has been working with Homefinder UK to explore whether a web-based platform can be created to support social lettings agencies.

Facilitating access to social housing
Consortia of committed social housing providers supplying a jointly or regionally commissioned project are already beginning to emerge in some parts of GB:

In the Greater Manchester Combined Regional Authority, 15 Registered Providers have come together and identified 200 properties for the re-housing of homeless people through a Social Impact Bond. In our interviews, we heard that the Metro Mayor has been able to create the space and impetus for this to happen.

In some areas of Scotland, local authorities have already joined together to form hubs to deliver Housing Options. These could be used to deliver Housing First.

• In Scotland, as we saw in Section 2, a combination of private investment and political will has secured pledges of around 600 properties from social landlords (both registered social landlords and local authorities) for the development of Housing First at scale across four cities. This innovative approach is being driven by Social Bite, a social enterprise led by Josh Littlejohn, with financial governance being provided by the Cora Foundation. The initiative has not ruled out using private rented sector properties in future, but has started with social rented sector as it believes it is easier to get buy-in and do this at scale. The initial funding of support for two years has helped to secure properties. After the two years, the ambition is to sustain the support through funding from philanthropy or government.

Clear messages from the National Housing Federation and Placeshapers in England were that their member housing associations needed to be reassured about ongoing funding for support and the engagement of health and criminal justice partners if they are to commit properties for Housing First, especially where capital investment is required. Those already providing congregate supported housing also need clarity about how Housing First will be integrated within a wider homelessness and supported housing strategy and what this will mean for their existing schemes.

• As part of a drive to end homelessness in the borough, London Borough of Southwark are in the process of transitioning their traditional Housing Options services to a housing-led model, using Trailblazer funding. They are using council housing stock to provide secure tenancies. Existing local authority housing staff will deliver the support, rather than a third sector provider. The staff will be receiving specialist training from experienced workers as they currently have limited experience of this client group. In order to ensure continuous appropriate support, clients will remain on other project caseloads in the meantime so that the support remains.

In some areas, levering in social housing will require a review of common allocation policies. In the Liverpool City Region, for example, we found that blanket bans on those who had committed an offence in the previous 12 months, presented a barrier to Housing First at scale (Blood et al 2017).
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Capital investment in building/re-modelling properties

In the longer term, the three national governments have targets to build new housing, including social and affordable housing:

- 50,000 homes are being built in Scotland over the course of this parliament, 35,000 of which will be social housing, though it is not yet clear how these will be allocated.
- Welsh Government has set a target to build 20,000 affordable homes, including 14,000 for rent by 2021;
- The Westminster Government has a target to build 1 million homes by 2020, though only around 1 in 5 of these are, currently, being built as ‘affordable’. ‘Affordable’ properties are provided by housing associations for rent, however they can charge up to 80% of the private rental value, rather than being limited to the guideline rents set by the national rent regime.

Some local authorities have established their own housing companies to develop new affordable homes, such as Birmingham Municipal Housing Trust which has already built over 2000 such properties. Greater Manchester Combined Authority is embarking on a radical re-write of the Greater Manchester Spatial Framework and hopes to lever in land from the NHS for development through this exercise.

Given the relatively small numbers of properties needed for Housing First, earmarking even a tiny percentage of such new properties could make a significant impact on the implementation of Housing First. Our interviewee from the Greater Manchester Mayor’s Office argued for greater devolution of housing powers from central government to help regional authorities manage their local housing markets better.

Meanwhile, Big Society Capital’s Housing First Transition Fund in Glasgow is a financial offer to local partners to allow scalability by ‘providing repayable loans to facilitate ‘safe’ disinvestment in hostel buildings and other congregate forms of accommodation and reinvestment in scatter site housing’ (Littlewood, 2017, p.35). This might, for example, involve buying properties, converting existing properties into one-bedroom flats, or building new properties. It could potentially include the conversion of properties such as low demand sheltered housing, de-commissioned care homes, former hospital buildings, or hostels to create congregate Housing First schemes or mixed developments in which Housing First apartments are ‘pepper-potted’.

There has been a flurry of interest in modular housing for homeless people in GB and whilst this is often, by definition, only intended as a temporary option, this may well have a part to play within a Housing-led system. Acquisition or long-lease of private sector properties.

In areas where there are high levels of empty homes in the private sector, there may be scope for social impact bonds to bring these back into use, especially where vocational training and employment opportunities for people with experience of homelessness can be created in the process.
Chapter 5: Provision of support

A number of the Housing First principles inform how support is provided within the model:

- Flexible Support is provided for as long as it is needed;
- Housing and Support are separated;
- Individuals have choice and control;
- An active engagement approach is used;
- The service is based on people’s strengths, goals and aspirations, and
- A harm minimisation approach is used.

5.1 Putting the principles into practice

**Flexible Support is provided for as long as it is needed**

This principle is perhaps the most challenging to deliver within traditional commissioning cycles, yet it is probably the one which distinguishes ‘Housing First’ most clearly from other forms of floating support (Homeless Link, 2015, p.23). Just because there is no upper time limit for the provision of support, it does not follow that all clients will need intensive support for the rest of their lives. The learning from practice and research (e.g. Johnsen 2013, Howe 2017) to date is that the support needs of most Housing First tenants will typically taper over time; but, whilst commissioners may be reassured by this, there should not be any pressure to ‘close cases’ or generate ‘throughput’. Instead, the choice and control in relation to the nature and duration of the support is placed firmly in the hands of the tenant. Housing First tenants have the option, freedom and choice to re-engage at any point: there is no punitive element involved in the support mechanism. ‘Flexibility’ should involve options for support to lie dormant for periods, but then be quickly resumed if the tenant feels they are at risk of relapsing or experiences some other crisis, without needing to be re-referred, re-assessed and wait for an available place.

This ‘stickiness’ seems to lie at the heart of the model and why it works for this group, who have typically experienced multiple trauma and loss, compounded by multiple exclusions from services; yet it requires a radical re-think of how services are commissioned and delivered:

‘The culture shift of Housing First is going to be a challenge, I think. That idea that you stick with people, that you are persistent and assertive..... that you don’t evict people if things aren’t working out, that
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it is more of an understanding service than a penalising one."

(Policy officer)

FLIC in Islington and Camden (Cornes et al, 2015) highlight the benefits of a focus on relationship building in contrast to the time-limited, conditional, task-focused nature of most services, not only for clients but also for workers who can ‘deliver good quality work support (best practice) that other agencies can only aspire to’ (p.22).

Pleace (2018) reports that the UK (in line with Italy) has experienced ‘funding sunsets’ as time-limited funding to pilot projects has ended. Such funding arrangements make it hard to promise ongoing support. There is a debate around this issue across the sector, with some holding the view that if a project is only able to provide support for a time limited period, then it cannot properly be defined as Housing First. In the current context, it is hard to imagine any project being awarded permanent funding, so re-application for funding is likely to be par for the course. The key distinction perhaps is whether the project commits itself to finding a way to fund on-going support and makes an offer of on-going support to the client, or whether it effectively passes on its own funding timetable to the client in the form of a time-limited support offer. This is, however, an issue which will need to be addressed if Housing First is to be ‘scaled up’ (Rice 2018) and, as we saw in the last chapter, can be a sticking point for social landlords.

Some projects we interviewed told us they sometimes refer people onto local floating support services when they decide they no longer need the intensive support provided by the Housing First project. Staff at Housing First in Haringey reflect that floating support provision differs depending on the local authority, and that one of the boroughs where they house people has specialist mental health floating support. They do recognise the limitations of this provision, but feel that it can be adequate for people who have sustained their tenancy for a considerable period (e.g. 2 years) and whose support from the Housing First service has tapered off during this time.

Another key element of ‘flexible support’ is the capacity of the service to engage the tenant in mainstream services. In the ‘Assertive Community Treatment’ model originally developed by Sam Tsemberis in New York in the 1990s, health, mental health and substance use services were provided directly by Housing First. Given the existence of the NHS, Housing First has typically been delivered in GB using an alternative model of ‘Intensive Case Management’, in which the Housing First workers support their tenants to access mainstream services. This certainly makes Housing First a cheaper model to commission, and it has advantages in terms of its potential to support social re-integration. As one of the practitioners we interviewed explained:

“Housing First instantly removes the ‘homeless’ label – so people aren’t in ‘homeless healthcare’ etc. This group have almost all had huge trauma in their pasts and are just not getting anything like equality of access to health (including mental health) services”.

However, effective case management also requires strong partnerships at both operational and strategic levels and the capacity to advocate strongly for clients at times.

Another key aspect of ‘flexibility’ is that the nature of the support in Housing First responds, at any given time, to
what the individual needs and chooses (in other words, they decide what they need, not the workers). Support may involve emotional and psychological support; help to build or rebuild community and familial relationships; to access leisure, educational, social or voluntary activities; to manage the tenancy; to budget and claim benefits. Threshold explained that sometimes their workers will spend days in court with a woman, supporting her while she fights for custody of her children.

Johnsen (2015) emphasises the importance of peer support and networks as a core part of the support offer. Many of the projects we interviewed had recruited people with lived experience as part of the paid team and/or as volunteers, and reported that these were able to work very effectively with this client group, though again this requires an ongoing commitment of resources to develop and sustain peer support structures.

• Housing and support are separated
As we saw in the previous chapter, the removal of any conditionality between the tenancy and acceptance or use of support offered is absolutely vital to the Housing First model. This means that people can keep their tenancies even if they do not engage with the support offered; it also means that they retain the support should their tenancy break down. The support 'sticks' even if the person goes to prison, returns to the streets, is admitted to hospital, or decides to move in with a new partner.

Some projects have separate housing support and tenancy support workers, and see this as an effective way of providing the necessary support, whilst keeping the separation clear. Where one worker may need to have a difficult conversation about issues with the tenancy, the other can provide support to the tenant to help resolve these. This responds to a conflict of interest between case manager and landlord roles which Clifasefi et al (2016) observed can otherwise impact negatively on tenants and their relationships with the service.

Projects reported that the lack of coercion to attend mental health or drug and alcohol services actually seems to motivate tenants to sustain their tenancies. This runs against common perceptions in services that compliance with treatment should be made a pre-requisite or condition of ‘housing readiness’.

• Individuals have choice and control
Pleace (European Observatory on Homelessness, 2012) argues that choice can relate to many elements of service provision:

- Location
- Whether or not to accept a property
- Type of property
- Furnishings
- Whether or not to accept the support that is offered
- How to use leisure time
- Whether or not to continue using alcohol and drugs

There is evidence in the Housing First literature that being given greater choice leads to better and more sustained outcomes for this cohort (Collins et al, in Watson et al, 2017). Woodhall-Melink (2016) in their review of international evidence, found that Housing First tenants perceived that they have greater choice than those in traditional services and that this was associated with reduced mental health symptoms (p.292) and increased psychosocial integration (p.295).

The projects we interviewed gave us a number of practical examples of ways in which they support individual choice:

- Taking time to help clients to understand the choices available to them, and support them through the decision-making process,
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without giving advice or making judgements
• Lack of coercion throughout the engagement: no threats or warnings in relation to the provision of support (one project provided a comparison here with practice in most hostels, whereby if a service user swore at a member of staff in a hostel, they would most probably be given a warning of eviction)
• Using personal budgets so people can realise their choices – to go on a camping trip, to buy soft furnishings for their home, or to invest in a fishing rod or guitar;
• Meeting clients where they want to meet – e.g., at their flat, or in the library or a café.

As the Team Leader at Threshold explained:

“We’ve all worked in services that are supposed to be client centred but then they’ll say ‘you’ve got 2 hours support a week, but you can choose how you use it’ – well, to me that’s not client centred...[In Housing First] the choice runs through everything – they choose their own risk management plan, what they want to work on, how they want to recover, how and when we speak to them...We don’t impose any of our decisions on them... This is probably the first time ever these people have been treated as adults and human beings”.

• An active engagement approach is used
The projects we interviewed felt that consistent relationships with a key worker or a small number of workers in a team was fundamental to being able to actively engage this cohort, especially where there has been trauma and people feel they have been let down by professionals and others in their lives. Such continuity can enable a trusting relationship to be built. Active engagement begins before the tenancy so the project can support a person into the right tenancy. At the Two Saints project, Housing First support workers initially work alongside the existing outreach team, and provide support to individuals for up to two months before they move in. At the Glasgow Turning Point project, staff go out looking for clients in places they might be on the streets if they miss appointments. We heard that workers or volunteers with lived experience are often able to engage effectively with people and were felt to be a key asset to teams.

The relationship with tenants was described as more of a ‘partnership’, or the sort of unconditional relationship you might have with a close family member, than a traditional professional – service user relationship. One project explained,

“We work outside of normal professional boundaries: we don’t ever give up on someone.”

Staff at all projects described the importance of frequently returning to see clients again and again after difficult contacts, or when people have refused to see
Provision of support

them. Threshold described this as being ‘consistent and persistent’. In this service, workers offer a daily check-in call with all tenants, every single day of the year.

“People can tell us they are fine and that they don’t need us, but the key thing is that we have asked, offered and checked”.

The staff at the St. Mungo’s project in Haringey identified the importance of being reachable on mobile phones and getting back to people’s messages and texts as soon as possible if they are tied up with another client.

• The service is based on people’s strengths, goals and aspirations

There are very few direct references to strengths-based approaches in the Housing First literature or detailed explanations of what this might mean in practice. The belief that everyone has the capacity to change certainly runs – at least implicitly – throughout the model, with improving self-esteem as a key mechanism for achieving this. Co-producing and working to ‘a small and well-defined set of person-centred outcomes’ (rather than service- or commissioner-driven outcomes) is a key feature of the Housing First service on Ynys Môn/Isle of Anglesey (CIH, 2017). Turning Point Scotland similarly describes ‘small steps’ (Johnsen, 2012). The original Pathways model in New York emphasises enablement and promoting capacity and self-reliance, rather than ‘doing for’ people (Pleace, 2012). Homeless Link (2018a) includes ‘asset-based approaches’ in its skills and learning needs of Housing First workers.

Elsewhere (Blood & Guthrie, 2018) we have argued that the core principles of strengths-based practice include:

1. **Collaboration and self-determination**, which requires a genuine transfer of power to the client;
2. **Relationships are what matter most**: within this, the relationship with the worker is the service;
3. **Everyone has strengths and something to contribute**: there are real skills in enabling a person to identify and apply these (which we discuss in more detail below);
4. **Stay curious about the individual**, remembering that all behaviour (even during psychosis, intoxication or where there is severe cognitive impairment) has a function;
5. **Maintain hope** – in the capacity to change behaviours that have become ‘entrenched’ or to re-build broken relationships;
6. **Permission to take risks** – both in our practice and for our clients, using a positive risk taking rather than a defensive, risk averse approach to risk management,
7. **Build resilience** – our interventions should seek to strengthen and support, not replace, the person’s networks, their own capacity to cope and other ‘natural’ (i.e. non-service based) resources.

At Threshold, all Housing First staff and volunteers receive role-specific training in strengths-based training: the service manager explains that this is not something that comes naturally to most people, regardless of personal or professional background – they need to be taught it. They will help tenants look for and identify the assets they have already demonstrated and developed in their lives – perhaps through their offending, through financing a drug habit, surviving on the streets or in an abusive relationship. They then work with tenants over time to try to find very practical ways in which they can turn these into something positive. For example, the Team Leader explained:
“Maybe someone was committing fraud – they were meeting people in the streets and telling them they needed money for a particular reason, and we ask them to describe the skills they used – they will probably say ‘nothing’, they are thinking about themselves through a real deficit model - but we’ll say, ‘to get money off that person, you used your communication skills, you used non-verbal communication, you made people feel at ease, you used language to influence people’. Once we’ve identified some of the skills a person has, we will then work on putting them into practice in a positive area of their lives – ‘Ok, let’s plan a communication, using all those skills and talk to your housing officer, explain about your anti-social behaviour and stop you being evicted’. Over time, we might be looking with them at how those skills can be used in a voluntary setting, perhaps with a longer-term view to a job in sales, campaigning or market research, or something like that”.

Staff at St Mungo’s in Haringey explained how they take a strengths-based approach to helping someone understand their rights and responsibilities as a tenant. Projects also described supporting clients to find and pursue interests, hobbies and passions – this might involve going along to a yoga class with someone (at least until they feel confident to go alone) or going out to buy art materials with them. Many of the stories of those who have managed to re-build their lives through Housing First, involve a new or re-kindled passion or talent – caring for horses by volunteering at a local stable, or getting back into fitness (See Life Stories at https://hfe.homeless.org.uk/life-stories for examples).

- A harm minimisation approach is used

A recent review of the US and Canadian Housing First literature found a gap in relation to the explicit and consistent definition of ‘harm reduction’ (Watson et al, 2017). This gap has also been identified in practice: in the Clifasefi et al (2016) study of a single-site Housing First project in Seattle, they found that many of the staff, although agreeing in principle with harm reduction, were unsure of how to embody it in their day-to-day roles.

In the UK, we have seen declining political and financial support for harm reduction in drug policy recent years (IDPC, 2017). Against this backdrop, it is more important than ever to be clear about what this should mean in practice in Housing First schemes. The focus tends to be on the fact that people are not required by Housing First to be abstinent in order to be given a property; there is less guidance on the active ongoing harm reduction support they should be offered once housed.

In his description of Pathways Housing First, Pleace (2012) explains that the project’s ‘harm reduction’ approach is centred on respecting an individual’s current wishes and behaviour, with the aim of encouraging them to use drug and alcohol services, rather than requiring them to do so or to abstain.

Key principles of the harm reduction include:

- A recognition that there a continuum of substance use, with some forms being safer than others;
• A focus on the quality of individual and community life as the primary goal, rather than abstinence per se;
• A belief that drug users themselves must be the agents of their own change and should have a voice in the design of programmes to support them;
• Therapeutic approaches should promote an honest but challenging dialogue to help people understand their own drug use and motivate them to change.


The projects we interviewed explained what this meant in practice for them:

• Not expecting or pressuring people to be drug free or committed to drug treatment, either before or after they have taken on the tenancy.
• Supporting people to use drugs as safely as possible, e.g. through accessing needle exchanges, switching from Heroin to Methadone, if they choose to.
• Working with people to make sure that their drug or alcohol use does not impact negatively on workers, neighbours, visitors or their tenancy, e.g. packing away/ disposing safely of drug paraphernalia.
• Using techniques such as motivational interviewing, which can support clients to achieve their personal goals in relation to addictions.

Homeless Link highlights the fact that ‘harm reduction’ does not just include drug and alcohol use but also refers more widely to physical and mental wellbeing. Threshold described harm reduction in relation to domestic violence and abuse (all the women they support are ex-offenders, but have also all experienced domestic violence and abuse). Staff use their training in trauma-informed approaches to help women understand how memory, feeling and behaviour can influence each other and affect how they react to things. Using this understanding, they are then supported to manage their own personal and practical safety plan to manage the risks of living independently.

5.2 Putting the principles into practice

The following key themes emerged from our interviews as supporting these principles into practice.

Pioneering mind set and clear vision
• A ‘can do’ mind set by project directors, managers, staff, commissioners and people with lived experience who are determined to ‘sell’ the success of the model to build wider buy-in.
• Delivering successful outcomes locally, and supporting individual rough sleepers to sustain tenancies where services had previously not worked for them, has helped persuade partners to engage and commissioners to commit longer term funding to this model.

Well established projects
• Projects which are well established and have a good understanding of the needs of this client group and how to work with them effectively.
• Projects and staff having existing and in some cases very long-term relationships with local rough sleepers, which enables effective relationships to be built and enables people to move successfully into tenancies and then sustain them.
• Projects being able to draw on a range of assets within their own organisations and through partnerships, these might include:
  • Structures and networks to support coproduction and volunteering by people with lived experience;
• Recovery communities and social enterprises that offer a range of activities, social networks and educational, training and volunteering opportunities;
• Access to people who can provide expert advocacy, e.g. in relation to child protection, mental health, accessing the right healthcare, etc.

Commissioners or other funders who are flexible and committed
• Commissioners who are willing to make a longer-term commitment to funding.
• Effective commissioned projects described having an excellent relationship with their commissioners, which involved a high degree of trust, and a learning-focused and dialogue-based approach to performance management.
• Avoiding the rigid use of targets and performance indicators while maintaining a requirement to adhere to the core principles of Housing First: if staff are to have the time and flexibility to work in this way, they need to be freed up from unnecessary paperwork and reporting. Setting too many targets for projects can create perverse incentives, e.g. to accept referrals from less chaotic individuals, to pressure people to taper their support, etc.

Highly effective recruitment of staff
• The funding to attract and retain the right calibre of staff. This must be seen as a ‘senior’ housing support role, requiring a high level of autonomy, skill and knowledge.
• It can be good to have a team with a balance of experience, so that they can support one another in dealing with issues that arise, for example, mental health or learning difficulties, and bring different perspectives (e.g. drawn from lived as well as professional experience).
• Recruitment and selection weighted more towards values, competence and resilience, than experience, skills and qualifications.

Leadership and management
• Managers who really understand the model, can articulate why and how it differs from traditional approaches, and can find ways to implement it within local settings.
• Models of staff management which support the pro-active, autonomous, responsible and creative culture of Housing First and support the demands of the role.

Two Saints describe their strong, committed team leaders as being absolutely key to delivering an effective Housing First service. They are designated to the model, and therefore not pulled into other work. They need to stay very close to their staff and are there almost daily, providing frequent opportunities for reflection and learning. Most managers have been support workers themselves and have developed through this experience. The project also provides free and confidential external support to its staff.

Threshold has recently started to use a questionnaire (bought from a specialist training company) which screens candidates for Housing First posts according to their personal resilience before inviting them to interview.

Two Saints explain how, although knowledge of homelessness, mental health, substance use and criminal justice systems is certainly desirable, they look first and foremost for people with ‘stickability’, who believe in the model, are resilient, able to deal with a challenge and who can build good relationships.
Staff training and access to clinical supervision

- Staff should be trained and clinically supervised in a range of psychologically-informed approaches and skills, e.g. trauma-informed, motivational interviewing, cognitive behavioural, attachment-informed approaches.
- Induction training (and ongoing supervision) also needs to consider and keep revisiting Housing First boundaries and impact on work-life balance: the model can require a lot from people emotionally (especially if they have lived experience themselves) and this needs to be recognised and supported effectively.
- Staff also need to be flexible, creative and practical – willing and able to show someone how to bleed a radiator, or do mindfulness with them.

Turning Point in Glasgow would like to bring in psychologists to enable proper reflective practice supervision, which is seen as important to support people working with vulnerable clients with very complex needs. They would ideally like to have a Community Psychiatric Nurse on their team, both to provide direct support to clients and second tier support to workers.

The involvement and employment of people with lived experience

Most of the projects we interviewed are recruiting ‘peer support workers’ - people with lived experience, sometimes former clients, who are often able to work very effectively with this client group. These individuals can model and inspire tenants that recovery is possible. Projects also describe the learning that people with lived experience bring to staff: by talking about the journey they have been on, staff can really understand the experience of clients and how to engage with them.

- Turning Point Scotland in Glasgow pay peer support workers the same rate as a regular worker: they find that those with personal past experience of addictions are particularly effective at enabling change with clients who are currently using drugs.
- Two Saints have apprenticeships for people with lived experience.
- The St. Mungo’s project in Haringey is planning to develop peer support groups.
- Threshold has a volunteering programme which allows people with lived experience to ‘test the waters’. Those that are then willing and able to do more are usually employed initially on a reduced number of hours, with ‘a big support package around them and lots of honest conversations about their personal triggers’.
- Inspiring Change Manchester explained that a lot of those who have really thrived in Housing First tenancies have been involved in governance or have set up or joined various activities and recovery communities within the Fulfilling Lives project: ‘they feel they are part of a community’. It has helped having the infrastructures in place, including peer groups, volunteer and traineeships programmes, and coproduction. The Programme Manager explained:

‘so if you don’t have that, you need to design and cost it in from the outset... The people with lived experience have generated lots of the ideas around how to make Housing First work – so it is really key to get them involved at the design and governance not just the delivery and peer support stages of the project’.

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17 Homeless Link have developed a series of four documents within their Guidance & Toolkits called ‘Tips from frontline professionals’. The topics covered are: Working with social landlords, Skills needed by Housing First Workers, Involving People with Lived Experience and Measuring residents’ progress the publications can be found online at https://hfe.homeless.org.uk/resource/guidance-toolkits
Small caseloads and a high degree of operational flexibility
• There was a consistent message that small caseloads are key to allowing the time for the relationship-building and operational flexibility outlined in this chapter. In practice, these means a typical caseload of 5-7, ideally consisting of a mix of longer term and newer cases, since the most intensive support is generally needed in the early months.
• Provision was seen to be less effective when staff held a mix of Housing First cases and those with lower support needs because of the complexity of cases and the time needed to work effectively.

Good relationships with other local service and housing providers
• The ability to build effective relationships with partners at all levels of the service, including:
  • Management working together to develop the service and address the issues that will arise.
  • Support workers building effective relationships with other professionals, e.g. local mental health teams to provide broader packages of support for tenants.
  • Other partners recognising the status and degree of involvement of the Housing First team (e.g. rather than assuming that a GP or social worker who sees the person infrequently will necessarily have a better understanding of their needs).

We consider this in more detail in the following section on partnerships.

5.3 Partnerships
Working with partner agencies from the public, third and private sectors is essential both strategically and operationally to the implementation of Housing First, and their involvement comes in many forms:
• As funders and commissioners (primarily Local Authorities)
• As providers of housing stock (PRS, LA and housing associations)
• A source of referrals (Health, CJS, Third sector, Local Authority)
• As providers of support services for Housing First tenants (Social Services, Substance Misuse, Health, Education and third sector providing specialist support)

The set-up of local services is different in almost every area, and from the projects interviewed as part of this study, we can see that each project has to be developed to reflect local provision, for example, the way that local social housing stock is owned, managed and allocated. There will be considerable variations in the ways that local health services are configured, the third sector has grown organically and provision looks entirely different at a local level and the private rented sector is to a great extent market-driven and localised.

There are also other considerations when thinking about engaging with partners; local capacity will vary depending on funding, commissioning decisions, and political priorities. There are many examples of strong collaboration enabling and driving the implementation of Housing First at a local level.

5.3.1 What’s needed to implement the principles?
• Political will: this is particularly evident at a national level in Scotland, where the First Minister has supported Housing First in parliament and there has been a parliamentary committee considering how to end
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rough sleeping. This also plays out at a local authority level, where political support is key, and at regional combined authority level, where the political leadership of the mayor can effect real change.

- Public services who are bought into and understand the Housing First model. This is especially important within local housing departments, but also with health, policing, probation and drug services.
- Local landlords – both Housing Association and PRS, who are willing to take the initial ‘leap of faith’ in housing this cohort.
- Commissioning and Homeless Prevention Strategies which include Housing First.

5.3.2 What is enabling this to happen?

- Housing First projects influencing local partners, by sharing successes and building local support. We heard how managers and staff in organisations are often initially sceptical that Housing First can work with some of the people they have had on their caseloads for many years. Once they have seen that Housing First works and how professional its teams are, projects reported clear changes in the behaviours of partner agencies towards them and their clients.
- Being able to demonstrate cost effectiveness: this may not be sufficient to lever in funding for Housing First, but it can certainly help to secure partnership working.
- Internal champions in Local Authority Housing departments who will ‘sell’ the model and its effectiveness to others.
- Where Housing First has grown out of existing organisations – housing or support providers, there can be mutual benefits, both in terms of drawing on existing infrastructure, knowledge and relationships, and in terms of slowly challenging the wider organisational culture.
- Housing First workers advocating effectively for their clients, and explaining how the model works.
- There is some evidence that the NHS is beginning to buy into the model in some areas, especially where there are integrated commissioning teams. Rice’s (2018) review for Homeless Link describes some emerging initiatives to pool budgets in order to fund Housing First.

Two Saints will be funded by health for a Housing First project with 10 people who are frequently going into A&E. They have also provided Housing First for people with serious mental health needs – these places have been spot purchased by Portsmouth and Solent NHS Trust. This is an integrated commissioning team between the local authority and NHS. The NHS Trust identifies clients, and Two Saints then proposes a package, though there is some ongoing flexibility. From a health perspective, this model represents much better value for money than residential services and, without it, there are limited alternatives for these clients.

5.3.3 What is getting in the way?

- The under-resourcing of statutory services, which means that they are often limited in the preventative work they can do with people. Examples were provided of the increasing thresholds for mental health support.
- Lack of awareness of the Housing First model, means that some projects (even where they are local authority funded) are having to fight to get referrals to the service as the local authority Pathway tends to opt for the more traditional routes.
- Some other services think that more support and control is needed for these clients.
- Lack of financial models which can demonstrate the cost benefits down the line to other services, e.g. health and the criminal justice system, of investing in Housing First.
Scaling up

Chapter 6: Considerations for scaling up Housing First

There is now both the evidence and the political momentum to expand the implementation of Housing First across GB. By starting with the learning from practice and research, we have sought to identify what needs to be in place on the ground to make this happen.

There are clear benefits of being able to offer the model to more of the cohort we identified in Section 3, and in parts of GB where there is currently no Housing First provision. We are still in the early stages of Housing First with recent research\(^\text{18}\) indicating we are supporting around 350 clients in England at any one time, any scaling up would need to be managed in a planned way in the context of adhering to the principles and with regard to other solutions to ending homelessness locally. Some of those we interviewed highlighted a number of risks should Housing First be ‘rolled out’ in a way which overlooks these practical considerations. These included:

- The model gets diluted in a ‘race to the bottom’ on price – the quantity and quality of the support, and the genuine coproduction of the service locally would be most at risk.
- The decisions about whether to fund Housing First models or existing supported housing projects are driven by funding stream rules and budgets, rather than by proper local strategic decisions. This may have negative implications for other parts of the homelessness system, leading to staff shortage, confusion between services, or competition for funding and clients.
- Other services needed to support Housing First tenants are not commissioned to reflect any additional or altered need created by the scaled-up service.
- Projects grow at a rate which makes it difficult for them to preserve their culture:

> “If this is scaled up and not kept high fidelity to the model and very true to the values and the culture, then it won’t work. And that really needs to be considered when scaling up – retaining that different...”

**Considerations for scaling up Housing First**

*culture and quality services, and maybe done quite slowly, because you’ve got to have everyone on board, haven’t you?*  
Housing First Manager

In order to reduce these risks, the implementation of Housing First across GB should take account of the following recommendations:

**A whole-systems, integrated approach**

- Housing First needs to be ‘scaled up’ within a wider context of systems thinking at a local and national level. This needs to include, as a minimum, systems thinking in relation to the interfaces between: existing services aimed at preventing and ending homelessness, women experiencing violence and abuse, prison and offender pathways, mental health services, general health, drug and alcohol services, and social care provision.
- It needs to be part of an integrated national strategy for preventing and responding to homelessness, but which allows enough flexibility for the strategy to be tailored and co-produced within local contexts.
- The roll-out needs to focus on the values underlying Housing First and link these to legislative frameworks, such as the Equality Act 2010 and the Human Rights Act: Housing First is about improving access to mainstream society for the most marginalised.
- Strong national leadership is required to provide strategic oversight of Housing First in each nation. This should ensure the successful delivery across different geographies and that the overall programme is successful in its fidelity, housing targets, evaluation etc. Given the need for co-ordination across government departments in each nation, this would provide leadership and focus to those efforts.
- Overall targets for the delivery and sustainability of Housing First should be aligned with local homelessness strategies which assess overall need and response of holistic homelessness services in their area. These should include targets for the supply and accessibility of affordable homes for people at risk and experiencing homelessness and will help local areas commission Housing First services at the right scale and model to suit their needs. In Scotland, the provision of Housing First units should be identified as part of the new Rapid Rehousing Transition Plans.

**Cross commissioning and funding models**

- Longer term commissioning and funding cycles, which can give landlords, support providers and tenants enough confidence that the support will not be time-limited. National funding programmes and policy decisions can clearly help this, as can the longer term regional devolution deals (see Rice 2018 for more discussion of this).
- Pooled budgets and (joint) commissioning of Housing First by Health, Criminal Justice and Adult Social Care has the potential to share costs and risks across agencies and create greater security for Housing First support models (Rice, 2018). There needs to be clear recognition that those with complex needs are also the responsibility of health and social care services with homelessness and contact with criminal justice being a symptom of their underlying needs. If it is to be done at scale, this will require bold national/ regional and cross-departmental leadership.
- Commissioning models and communities of commissioning practice, which support Housing First (and other transformational models) by focusing on tenancy sustainment and the experiences of tenants as the primary outcome(s), rather than setting targets related to a number of...
outputs or to ‘throughput’. The development of Housing First seems to be supported where there is already strong infrastructure in relation to the engagement of people with lived experience, a community, voluntary and social enterprise sector running recovery networks and resources, and access to specialist knowledge for advocacy. To enable this to happen more consistently, areas will need to develop coordinated, cross-sector approaches for people experiencing multiple disadvantage. This will require adequate funding for key services that prevent people’s needs from escalating, such as mental health services, substance misuse services and domestic violence services, better joint working across these areas, and for commissioners to follow the principles of ‘no wrong door’ for people with co-occurring conditions. Where this infrastructure needs developing alongside, this needs to be factored in in terms of costs, time and other resources; emerging learning from practice suggests that personal budgets could be part of this approach.

A bold commitment to improving the supply of and access to housing for homeless people

It will not be possible to implement Housing First at scale without taking bold steps to improve the supply of housing to those who are experiencing or are threatened with homelessness. These might, for example, include:

- the development of new social properties (e.g. through a capital funding programme for social landlords),
- acquisition or long-lease of private sector properties,
- the conversion of properties such as low demand sheltered housing, de-commissioned care homes, former hospital buildings, or hostels to create congregate Housing First schemes or mixed developments in which Housing First apartments are ‘pepper-potted’;
- bringing empty properties back into use (perhaps using social investment and providing training and employment opportunities to people with lived experience in the process), or
- A number of steps should also be taken to improve access to existing properties in both the private and social rented sector for people who are experiencing or are at risk of homelessness, including:
  - The creation of social/local lettings agencies which can identify, inspect, maintain, lease and/or manage properties from the private (and potentially the social) rented sector(s);
  - Reviews of local allocation policies and systems to challenge and remove punitive blanket bans on those with past records of substance misuse, offending, rent arrears, etc;
  - Continual financial support for new housing benefit claimants and those transferring to Universal Credit needs to be assessed. This should be administered so that landlords are assured of continual rental payments and incentivised to make properties available to claimants. Exemptions from the Shared Accommodation Rate, benefit cap and welfare conditionality and sanctions should be considered alongside other groups of people experiencing homelessness.
A shared understanding of the model and its values
• A shared and consistent understanding of what is (and is not) Housing First: the principles are a good starting point; however, a more detailed understanding through training and networks must be developed in order to disseminate a shared understanding of what these mean in practice.
• This could be supported by a national method of accrediting Housing First, which focuses on testing fidelity to the core principles, especially in relation to the quality and nature of the support provision. This would need to be flexible enough to allow for local variation in implementation (especially across very different geographies and housing markets) but could provide more detailed assurance regarding some of the ‘softer’ principles. A fidelity review is being undertaken by Homeless Link as part of the three English Housing First pilots in greater Manchester, Liverpool City Region and the West Midlands Combined Authority.

Data and evaluation
• Consistent data collection across GB in relation to homelessness and people with complex needs, ideally including data linkage across health, housing/homelessness and criminal justice: this will help us to understand the potential cost benefits of Housing First, and also to identify the local cohorts who might be best suited to Housing First, and those who achieve good outcomes from other, ‘traditional’ supported housing models.
• Connected to the above, the case for improving the way data is linked and shared across a range of statutory services (including health, homelessness, housing, criminal justice, substance misuse, welfare benefits, employment services and immigration) could identify support needs, the extent to which needs are being met and therefore who might benefit from a Housing First model. It would also help show the cost effectiveness of interventions and how to improve prevention services to identify people with multiple needs at an earlier stage.
• Building evaluation of Housing First in from the outset, so we can grow the evidence base around what works, for whom and under what circumstances. The opportunity for a comprehensive national evaluation of the three combined regional authority pilots in England, including a control trial, should create the opportunity to build the evidence base needed to secure financial input from the NHS, Criminal Justice and others.
• Collect and publish data on the fidelity and outcomes of Housing First projects. A shared outcomes and fidelity framework for the three nations is critical. The framework will provide a consistent way of collecting and sharing information and measuring success. Outcomes should relate to housing sustainment rates, health and wellbeing, and reductions in criminal activity and anti-social behaviour. It should be noted that a framework will also be needed to collect information on the adherence to the principles of Housing First. Rigid outcome only measures rarely account for the ‘distance travelled’ by an individual and will undermine the principle of clients controlling their support pathways/goals which is so central to Housing First. This can often lead to the ‘parking’ of people who require greater and more specialist levels of support.
References


Implementing Housing First across England, Scotland and Wales


Implementing Housing First across England, Scotland and Wales

Appendix 1: Table showing the stages of calculating Housing First cohort size estimates

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<tr>
<th>Method 1</th>
<th>England</th>
<th>Scotland</th>
<th>Wales</th>
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<tr>
<td>Homeless, 2011 (Hard Edges report)</td>
<td>186,021</td>
<td></td>
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<tr>
<td>Homeless + 3 Complex Needs*, 2011 (Hard Edges report)</td>
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<tr>
<td>Homeless + 3 Complex Needs, 2011 (using multiplier from Destitution report)</td>
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<td>1,237</td>
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<th>Wales</th>
<th>GB</th>
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<td>3,500</td>
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<td>1,711</td>
<td>447</td>
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</tr>
<tr>
<td>90% assumed to be available for H1st at any given time</td>
<td>16,434</td>
<td>1,356</td>
<td>586</td>
<td>18,376</td>
</tr>
</tbody>
</table>

*3 complex needs = substance misuse, mental health issue, offending behaviour
The studies and reports from which we have drawn secondary data are listed at Appendix 3.
### Appendix 2: Housing First Cohort Numbers – Divided by English Region

<table>
<thead>
<tr>
<th>Region</th>
<th>Distribution of High Estimate Numbers</th>
<th>Distribution of Low Estimate Numbers</th>
<th>Distribution of Immediate Priority Numbers</th>
</tr>
</thead>
<tbody>
<tr>
<td>North</td>
<td>1876</td>
<td>1039</td>
<td>349</td>
</tr>
<tr>
<td>Yorks &amp; Humber</td>
<td>3484</td>
<td>1929</td>
<td>647</td>
</tr>
<tr>
<td>North West</td>
<td>5058</td>
<td>2801</td>
<td>939</td>
</tr>
<tr>
<td>East Midlands</td>
<td>2597</td>
<td>1438</td>
<td>482</td>
</tr>
<tr>
<td>West Midlands</td>
<td>3334</td>
<td>1846</td>
<td>619</td>
</tr>
<tr>
<td>South West</td>
<td>2752</td>
<td>1524</td>
<td>511</td>
</tr>
<tr>
<td>East</td>
<td>2821</td>
<td>1562</td>
<td>524</td>
</tr>
<tr>
<td>South East</td>
<td>3481</td>
<td>1928</td>
<td>647</td>
</tr>
<tr>
<td>London</td>
<td>4276</td>
<td>2368</td>
<td>794</td>
</tr>
</tbody>
</table>
Appendix 3: Sources of data used to scale the size of the cohort


Appendix 4: Organisations interviewed to inform this report

NB: In some organisations, we interviewed more than one individual

**National/ policy organisations**
- Crisis Policy Leads
- Greater London Association
- Greater Manchester Mayor’s office
- Ministry of Housing, Communities and Local Government
- Ministry of Justice
- National Housing Federation
- Placeshapers
- Scottish Government (Homelessness Team)
- Welsh Government (Homelessness Team)
- Welsh Local Government Association

**Housing First providers**
- Inspiring Change Manchester
- Sheffield Housing First
- St Mungo’s Haringey Housing First
- The Wallich, Isle of Anglesey
- Threshold
- Turning Point Glasgow
- Two Saints