

**Report: understanding and tackling the broader issues of repeat homelessness in the Bradford district**

**City of Bradford Metropolitan District Council**

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## 1 Executive summary

### 1.1 The experience of repeat homelessness in Bradford

Summaries of service users' experiences of repeat homelessness:

*'If only I'd found someone to guide me into the right services, my housing problems would have ended years ago, saving me years of trouble and saving the government thousands of pounds on expensive supported housing.'* (Ex-drug user, aged 32, in 2<sup>nd</sup> stage supported housing)

*'I don't like going to hostels – I only go there if I'm stuck. I've been homeless since I was 15, and since then I've been on the streets, or in hostels, or Nightstop, because of violence and my partner's anti-social behaviour. People with no family to fall back on deserve the beds more, but sometimes the wrong people are given the places.'* (Young woman aged 26-40 from drug project, now in own house)

*'I've been homeless since I was 13 because of my heroin use, and I've been homeless many times since, because my partner, also a drug user, was violent and kept finding me. When I tried to find somewhere to stay, there was nowhere in Keighley so I slept on the streets. I've had to stay with friends who were still using drugs even when I'd stopped. If I'd got the help I am getting now, I wouldn't have got into the worst positions. I thought the streets were going to be my life. But I've got my own place now.'* (Woman, aged between 26 and 40)

*'We need honesty from the authorities: I know of ten people sleeping in a single room, and two couples on the streets. I've been homeless for seven years, not had anywhere permanent since living with my wife.'* (Man sleeping rough, aged over 40)

*'I was moved to an area where there was anti-social behaviour, racism and drug or alcohol problems, but when I went back to the hostel, I was treated as having failed, though I didn't think I had enough support to help me in my tenancy. Tenancy support is crucial, it should be available everywhere.'* (Woman staying in a women's refuge)

*'I left home because of violence from my husband's parents. But because there were no signs of abuse, I was told to go back. I kept trying to patch it up but it didn't make any difference.'* (Young Asian woman under 25 in a women's refuge)

*'I would have found it useful to have a 'time-out place' to cool down overnight, perhaps two to three times a week. Mediation is very patronising, and puts parents under pressure which rebounded on me, made things worse, or delayed what would have happened anyway.'* (Young person aged under 25 in a hostel)

*'When I moved in, I could have done with more money for furniture and decoration. I left because I couldn't stand being in a place which didn't feel like a home. And there were too many rules about how to behave, like not having a dog – I wanted a dog to make it feel safer and more like a home.'* (Young man aged 19, getting floating support).

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### 1.2 Key findings

- In commissioning this study, Bradford Council set out to research a topic that had not previously been explored in England; there have been no studies of the causes, scale and solutions for repeat homelessness since a study published in Scotland in 2001
- In Glasgow, repeat homelessness has been greatly reduced through:
  - Services which keep in touch with people even if they move around
  - Providing smaller scale supported accommodation
  - Support services offering help beyond managing a tenancy
  - Getting agencies together to look at how to help people with multiple and complex problems.
- This study has shown that more could be done by the housing options service in Bradford by:
  - Tracking homeless applications and prevention/housing options visits to look at what has led to a person being homeless more than once
  - Working with repeat visitors to and with other agencies involved with them to find ways of preventing this pattern being repeated
  - Keeping in contact with people when their homelessness cannot be resolved immediately
  - Making sure that homelessness, housing options, and prevention services aim to provide long-lasting prevention solutions, for non-priority groups as well as for those in priority groups.
- The study found no evidence that any English council has so far adopted this approach, but found, however, examples of other councils putting in place services specifically intended to reduce repeat homelessness, including specialist housing support, psychological services, befriending, and single access points into supported housing, activities which are intended to prevent a second occurrence of homelessness, so that a pattern of repeat homelessness does not develop
- A number of key changes were being put in place at the time when the study was carried out; these changes are expected to make a big difference to the way that homelessness and other housing problems are resolved in Bradford, and to reduce repeat homelessness; there were also examples found in the city of good practice in activities and services which help to prevent and respond to homelessness.
- Repeat homelessness is known to be difficult to define and to measure, but it has proved possible to find out how many people in Bradford have become homeless more than once, or have asked for help on more than once occasion to prevent them losing their homes
- Only 11 households were accepted as homeless twice within the last two years, using the Communities and Local Government (CLG) definition of repeat homelessness, but this significantly underplays the scale of the problem and the workload that comes from repeat incidents. In the last two years:
  - 362 decisions were made in respect of 169 households making homeless applications in Bradford – more than two decisions per household

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- 339 households made contact on 706 occasions seeking help to prevent homelessness.
- The picture is clouded by the fact that some people made more than one presentation within days of a case being closed, though their circumstances had not changed; more significantly, the study showed that many people come back for help more than once because their initial problem has not been resolved with a long-lasting solution, although others may become homeless more than once in unconnected incidents
- A snapshot survey carried out as part of this study found 400 people in Bradford who had been homeless more than once (but had not necessarily sought help from the housing advice service), of whom at least 300 had been homeless more than once in the last two years, and some had been affected by multiple experiences of losing either a temporary or settled home, up to as many as 20 times
- The Scottish study showed that repeat homelessness is most likely to be a problem for single people, who seek help on several occasions, separated by relatively short intervals, as part of a continued period of homelessness combined with stays in hostels and private rented accommodation
- The main groups affected by repeat homelessness in Bradford are:
  - Women who have been subject to domestic abuse/violence, and women escaping forced marriages
  - Single people with drug or alcohol problems
  - Young people who have been abused or who have been in care
  - Families with multiple problems
  - People with long-term mental health problems
  - People involved in the sex industry.
- Service users identified the main causes of people not being able to resolve their housing problems easily as:
  - Not being able to get into the right supported housing in the right part of the district, leading to people moving or losing that accommodation
  - Debt and other financial problems
  - Loss of tenancies, for people without the skills to manage their home
  - Losing private tenancies, often because the tenancy ended
  - Not being able to get the help needed from a housing advice service to resolve their housing problem fully.

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### 1.3 Introduction – background to the research and how it was carried out

Repeat homelessness is defined by CLG as more than one case of homelessness for the same person or family within two years, where the council has a legal duty to find housing for them. Using this definition, Bradford has a relatively low level of repeat homelessness (11 cases in two years) but the number of people coming into its housing advice service on repeated occasions was noticed as being much higher than this. Repeated patterns of homelessness mean that staff can spend time helping to solve someone's problems, or preventing homelessness, only for them to come back again with the same or another problem.

The Council and its housing advice and homelessness agent, Incommunities, wanted to find out what could be done to reduce the number of people who experience homelessness or seek advice on this on repeated occasions. The research was commissioned as part of the Enhanced Housing Options Trailblazer work programme, a programme which is aimed at generally reducing homelessness, and providing more options to help people to get into and keep long-term housing.

The key questions which the Council and Incommunities wanted to answer were:

- What has already been learnt about repeat homelessness and how is repeat homelessness addressed elsewhere?
- What is the scale of repeat homelessness in Bradford?
- What are the main causes of repeat homelessness, and which groups of people are affected most and why?
- Which resources and services currently respond to and prevent repeat homelessness?
- How can services be improved or re-designed to reduce the chances of people becoming homeless more than once?
- How can agencies work together more effectively to reduce and prevent repeat homelessness?
- How can repeat homelessness be best recorded and tracked in future, so that we can see if our policies have worked?

There were seven parts to the research study:

- Analysing the figures about homelessness and prevention case work carried out by Incommunities' housing advice service, and figures showing how supported housing services are used
- Reading other research reports and looking for examples of good practice in tackling repeat homelessness
- Reading through Bradford documents to understand what is happening already
- Reading housing advice service case notes to understand the picture for some individuals in more depth

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- Carrying out a snapshot survey: collecting numbers, mapping services, identifying issues – an electronic survey which attracted responses from 26 organisations
- Asking service users for their views and experiences: five people who had experience of homelessness were trained as peer researchers and, with two consultants, carried out 14 individual or group sessions, involving around 70 people in total
- Asking staff from a range of organisations for their views, through four workshops for staff, attended by 49 people, and interviews with individuals or groups from 25 key organisations.

The researchers would like to thank all those who took part in the study, and in particular the five peer researchers and the 70 people who agreed to share their experiences and views about how to improve the situation in Bradford.

The full report of this study can be downloaded from Bradford Council's website: [www.bradford.gov.uk](http://www.bradford.gov.uk)

### **1.4 The research findings – answering the key questions**

#### *1.4.1 How is repeat homelessness addressed elsewhere?*

The main experience of bringing about a successful decrease in repeat homelessness comes from Glasgow, where this success, mainly in reducing single homelessness, has been attributed to actions to:

- Keep in contact with people when they first present as homeless, closing cases only when it is clear that some change has resulted from the input of homelessness services, and having specialist staff to deal with some groups such as young people
- Provide smaller and more specialist temporary and supported housing which sustains people until they can move on to more independent housing (*"It's like putting a person who has an eating problem into a bakery"* – a quote from a consultee about why the re-provision programme was needed)
- Provide floating support which stays with people regardless of where they move to
- Develop innovative solutions for those with the most complex needs through a case management and review system at a senior level.

The literature review also identified that the greatest danger points for new tenants come after six months and after 15 months, and that tenancy sustainment works best to prevent repeat homelessness when provided as an all-round service which can look at other problems as the tenant wishes, and not just housing-related issues.

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A number of other authorities planned to take innovative actions in their 2008 homelessness strategies. They aim to reduce repeat homelessness by introducing services such as:

- Tenancy liaison officers
- Befriending and peer support
- Activities which help to engage homeless people in taking the steps towards employment, and to address their health and addiction problems.

Another local authority (LA) has developed a homeless psychology service and a website which accompanies training on addressing the emotional and psychological problems that can prevent people from resettling and become a cause of repeat homelessness.

The third pioneering approach being developed to help reduce repeat homelessness by a number of LAs is using recording systems which allow them to show where there are vacancies in supported housing, and to analyse who moves in and out of supported housing. Several of these gateway schemes are in place (for example, in Ealing, Nottingham, and Bristol), and it is thought to have been a successful approach, but in at least one of those places the scheme is being extended in order to track repeat homelessness more effectively.

Other important steps to reducing repeat homelessness identified by many LAs are:

- The provision of floating support, including specialist, generic, and tenure-neutral services
- Prevention protocols for specific groups including people leaving hospital, prison, and care
- Protocols around tenancy loss issues for preventing homelessness amongst vulnerable social housing tenants
- Activities aimed at reducing evictions from supported housing
- Move-on work which increases flows and pathways through supported housing, so increasing the availability of space for others
- Pre-tenancy training
- Training, advice and other initiatives to help to reduce the likelihood of debt occurring or of debts weakening the chances of tenancies being sustained.

### *1.4.2 What is the scale of repeat homelessness in Bradford?*

*Homeless and homelessness prevention work in Housing Advice Service:*

- There is a comparatively high ratio of decisions to acceptances in Bradford, compared to most authorities with similar characteristics
- The previous structure of the advice teams with a split between advice and homelessness assessment functions meant that people were offered prevention advice were then passed on to another member of staff for a homeless



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assessment. The majority were viewed as not homeless, not in priority need, or were intentionally homeless, or contact was lost with the customer

- Bradford has relatively recently (compared to others across the country) changed its advice approach to focus on homelessness prevention or avoidance and this is still bedding in. This is likely to account for the downward trend in repeat prevention contacts. However, this approach has not been fully accepted amongst other partner agencies, and there is evidence of some tension between agencies as a result, and as a result decision-makers in the Housing Advice Service have reported that they have often felt pushed by outside organisations to carry out a homeless assessment, rather than take actions aimed at preventing homelessness, and this may go some way to explain why more decisions were made in Bradford compared to acceptances than in similar authority areas
- It also appears that some of the work done with customers has been housing advice, rather than prevention activity that might have resulted in long-lasting homelessness prevention
- 169 individual households had more than one homelessness application during the two-year period 1 August 2007 to 31 July 2009, amounting to a total of 362 decisions, out of a grand total of 2,866 decisions
- Of those, 31 people were accepted as homeless at their first application, and 11 people were accepted as homeless twice within the two-year period
- The majority of first homeless assessments in respect of people who made a later homeless application resulted initially in a 'not homeless' decision. Records indicate that a significant number of individuals received 'not homeless' decisions more than once. In some cases, there appeared to be no change of circumstances to merit a second application or decision, and some customers waited only a few days between receiving a negative decision and re-applying for homelessness assistance. In other cases, a second decision was relevant because circumstances had changed, or new information had come to light, perhaps as a result of communication from an advocate
- 339 individuals had more than one preventative intervention recorded, accounting for 706 contacts altogether. During that period there is a gradual fall in the number of repeat prevention interventions, which implies that more people are having their issues resolved at their first contact.

### *Using supported housing – Client Record Form analysis:*

- 138 people had more than one entry into supported housing over the two years. Other than those coming from care, the largest group were single homeless people including rough sleepers, and occupiers of bed and breakfast and direct hostels.

### *The snapshot survey of repeat homelessness:*

- The snapshot survey identified 400 people currently in contact with agencies who have been homeless more than once and most recently within the last two years. Most of the 400 people in the survey had become homeless at least twice within the last two years, as opposed to longer intervals between homelessness occurrences

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- Some individuals had been homeless far more than twice – 85 people had been homeless four times or more, and ten had been homeless ten times or more
- Of the 70 service users interviewed for the research, 13 people said they had been homeless on many occasions, and of these, three had been homeless more than 15 times, and three more than 20 times
- Not everyone sought help through the Housing Advice Service:
  - A quarter of the 400 people had not made a homeless presentation within the last two years
  - A quarter (135 people) were thought to have made more than one homeless application despite being homeless more than once.

### *1.4.3 What are the main causes of repeat homelessness and which groups of people are most affected by repeat homeless?*

- The most common causes of the first instance of homelessness is being asked to leave by parents, violent relationship breakdown, and loss of a home with a friend
- Behaviour related to drug and alcohol problems is the most significant cause of a later loss of accommodation, as well as being the main barrier to getting or sustaining accommodation
- Other significant barriers to resolving the housing problem are:
  - Exclusion from social housing for rent arrears
  - Not being thought able to manage a tenancy
  - A criminal record
  - Being too young to hold a tenancy.
- Service users identified several factors which led to them not being able to resolve housing problems, such as:
  - Not being able to get into the right supported housing in the right part of the district, leading to people moving or losing that accommodation
  - Debt and other financial problems
  - Loss of tenancies, for people without the skills to manage their home
  - Losing private tenancies, often because the tenancy ended
  - Not being able to get the help needed from a housing advice /options/prevention service
  - Not having enough to do, to keep out of risky behaviour.
- In all parts of the study, the prime age range for experiencing repeat homeless is the 26-40 age band; there was a small group of young people who first became homeless when aged under 16, who were still homeless in their later teens or even in their 20s
- The largest group of people reported in the survey as being affected by repeated homelessness events is those with drug and alcohol problems, representing 61% of the total

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- Other significant groups are young vulnerable people, particularly those involved with the care system, families including women experiencing domestic abuse, people with mental health needs, and people involved in sex work
- People from black and minority ethnic groups are over-represented amongst repeat presenters, compared to the general population in Bradford.

### *1.4.4 Which resources and services currently respond to and prevent repeat homelessness?*

A large range of agencies, services and initiatives contribute to addressing and preventing repeat homelessness in Bradford, and a series of developments being progressed under the Enhanced Housing Options Trailblazer programme is expected to have a major impact on the problem of repeat homelessness.

Despite the existence of a recent and well-produced directory of homelessness services, there is still evidence of considerable confusion amongst outside agencies and service users about what is available and who does what. There is as yet no list of initiatives aimed at preventing homelessness which is available to agencies which might be referring customers who need these services.

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### 1.5 Effectiveness of Bradford's services in preventing and responding to repeat homelessness

The following table shows the criteria for an effective service preventing repeat homelessness. A traffic light rating system in place against these criteria highlights some of the priorities for action in Bradford.

Table 1

Criteria		How existing services/systems measure up
<b>1 Housing options service</b>		
1(a)	Works with clients from first enquiry to identify triggers for homelessness, and find solutions and support that prevent these problems from becoming a cause for repeated home loss, and provides prevention intervention designed to meet needs of all households – priority and non-priority	This would be a new approach
1(b)	Immediately identifies whether the person has been in previous contact with the service	Currently being done in some cases but not all
1(c)	Assesses whether the potential or actual homelessness is the result of a different factor to a prior occasion, and if this homelessness has the same root as the previous occasion, assesses whether the action taken or advice given has been ineffectual and why, to inform future actions	This would be a new approach

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Criteria		How existing services/systems measure up
1(d)	Endeavours to involve other agencies for people who have been homeless two or more times, to seek ideas about interventions which might break the cycle	This would be a new approach
1(e)	Works with all housing providers and lenders to build activities designed to prevent owners, tenants and licensees losing their homes where possible	Needs more work in relation to private tenants, building a protocol with all social landlords, and more work on preventing loss of homes for non-priority households in supported housing
1(f)	Works with providers of institutions to aim for planned and seamless moves into other accommodation for all service users	More work needed in relation to hospital discharges, prison release, and finding sustainable accommodation for young people leaving care
1(g)	Helps all homeless people to find accommodation, ideally before loss of home occurs but at the latest, on the day they become homeless	More work needed on identifying options earlier, and arranging for accommodation to be available on the day that it is needed
1(h)	Helps find alternative solutions for those for whom there is no duty because they are considered intentionally homeless	This may be achieved, but is dependent on whether accommodation in a particular scheme is available
2 Housing advice or day service		
2(a)	Endeavours to find out why any advice given or action taken previously has not led to the resolution of the housing problem	This would be part of a new approach
2(b)	Seeks to involve other services, such as floating support, where the person does not appear to have the means to resolve their housing problem themselves	Approach needs to be broadened to include all those with complex needs and people who have experienced repeat homelessness

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Criteria		How existing services/systems measure up
<b>3 Supported housing</b>		
3(a)	Minimises voids through efficient and timely responses to referrals, including referrals for applicants about to leave an institution	More work done to ensure that beds are available when people leave institutions without having to wait for an assessment, or for a bed to become available, where there has been some notice given
3(b)	Prevents unplanned moves and evictions, through positive interventions with anyone at risk of losing their placement, and through joint work with commissioners and other providers to ensure the most appropriate placement	Work has started on this but needs to be progressed
3(c)	Ensures that service users who move to more independent housing are prepared and ready for the move, and able to sustain their tenancy	The Tenancy Ready Framework and pre-tenancy training initiative will meet this criterion
3(d)	Ensures that outreach support settles the client into their new home – or arranges this from another support provider	May be more work needed to ensure that resettlement and outreach services are available and arranged for all those in need
3(e)	Identifies people who re-enter their services and why this has occurred, and reviews the support plan in the light of this information and adjusts the work being done with the individual to try to break the cycle	This would form part of a new approach
3(f)	Systematically passes information about patterns of referrals which they cannot respond to, to commissioners of services	This would form part of a new approach

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Criteria	How existing services/systems measure up
3(g) Works with a range of specialist agencies to respond to identified needs and risks so that the client receives holistic support that addresses all of their needs, and is helped to move towards independence, and active involvement in their community, and in employment where appropriate	Risk assessment and management processes need to be reviewed and improved, and there is more to do to engage providers in the work to tackle poor health and worklessness.
<b>4 Criminal justice services, drug treatment services, social care services, health services</b>	
4(a) Acts to resolve housing problems as soon as these occur or become apparent, through referral to internal or external expertise to resolve the problem, where necessary	Many agencies already do this but further work is needed to make sure it is a standard approach, and more input is required from housing services to resolve problems more quickly
4(b) Works in concert with other agencies to resolve an individual's housing and related problems	More joint work could help to resolve problems more quickly
4(c) Shares information across agencies, through use of informed consent and information-sharing agreements where necessary	Effective information sharing is not yet universal
<b>5 Commissioning agencies</b>	
5(a) Commissions services in such a way as to ensure it is clear which service is appropriate for which clients and to meet which needs	A little more information about which group is catered for, and which are not, could help to reduce inappropriate referrals and loss of accommodation
5(b) Ensures that there are services available to identify and work with people coming onto the streets	The needs for street outreach services has been identified but these services are not yet in place

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Criteria		How existing services/systems measure up
5(c)	Builds systems to ensure that emergency and other supported accommodation is available at the point when it is needed	Linked with 1(g). This would ensure that systems for accessing accommodation to be in place
5(d)	Ensures that exclusions and evictions from all types of housing provision services are minimised, by monitoring data and scrutinising individual examples and by encouraging services to work together to enhance access and prevent homelessness, and to assess risks appropriately	This work has started but needs to be progressed
5(e)	Builds systems which allow gaps in service to be identified (by referrers, providers of services, or by service users or their advocates/representatives) and acted upon in a timely manner	(Not clear whether this is in hand or not)
5(f)	Identifies how gaps can be filled through amending existing services or procuring new services	Supporting People are currently carrying out reviews of all provision by sector
5(g)	Ensures that all agencies have appropriate recording systems which help to show trends and effects of new policies and systems	This would form part of a new approach, and would entail further work



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Criteria		How existing services/systems measure up
<b>6 The whole system</b>		
6(a)	Brings agencies together so as to capitalise on the experience, energies, ideas, and resources of all agencies working to address and prevent homelessness in the area, and makes best use of the time people have available to resolve housing problems	More work is needed to make the best use of the resources of all agencies and to work in a more joined-up way
6(b)	Allows agencies to freely identify problems and gaps, to volunteer to work with others to address problems, and to feel that their voice, experience, and contribution is listened to and respected	The tensions between the voluntary and statutory sectors, and between agencies within the sectors, need to be addressed
6(c)	Respects the experience and contribution of service users, and responds to issues raised by them, particularly where these contribute to repeat homelessness	The infrastructure for involving service users is well-developed in Bradford. A further small step will enable service users to see what difference their contribution has made to the homelessness system and provision, particularly in relation to reducing rough sleeping, addressing the needs of sex workers and homeless families who are repeatedly homeless, and young people
6(d)	Enables real-time problems to be discussed and real-time solutions found to prevent and address repeat homelessness	Systems need to be developed to allow agencies to bring current unresolved cases to be discussed in a forum that can help to find the most appropriate solutions
6(e)	Builds strategies which aim to prevent homelessness for all, including ways of addressing the health, care, and employment needs of people who might be at risk of homelessness	There is a robust and widely available homelessness strategy, together with an active and broadly-based group overseeing and leading its implementation

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Criteria		How existing services/systems measure up
6(f)	Identifies realistic programmes of action for resolving issues in the short, medium and long term, and identifies appropriate agencies to work towards completing the actions needed	As above
6(g)	Considers what can be learnt from research carried out locally or elsewhere	The City Council and its partners have sought to learn about the best ways of tackling and preventing repeat homelessness from other research
6(h)	Develops a programme of training and ensures that staff from all relevant agencies have access to appropriate training to help them to resolve and prevent homelessness	There is training available on housing and homelessness issues but there is a need for a more systematic approach to ensuring that agencies whose clients may become homeless are aware of services which can help to prevent homelessness, and how best to access them and to work alongside them

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**1.6 Recommendations:** how can services be improved or re-designed to reduce the incidence of repeat homelessness? In what way does partnership working need to be improved, if repeat homelessness is to be reduced and prevented? How can repeat homelessness be best recorded and tracked in future?

### 1.6.1 Housing options/advice/prevention services

- 1 Develop an out-of-hours service for homeless households not in priority need.
- 2 Provide a greater degree of help for households found to be intentionally homeless.
- 3 Support staff to provide a service which responds to and looks for ways to help all customers to resolve their housing problems in a way that is sensitive to their needs, and helps them to aspire to and obtain long-lasting solutions.
- 4 Develop a system for ensuring that contact is kept with enquirers, wherever possible, until the housing problem has been resolved.
- 5 Ensure there is more help for offenders and drug/alcohol users to resolve their housing problems in good time.
- 6 Develop prevention work and information for private tenants threatened with harassment or illegal eviction.

### 1.6.2 Day services

- 7 Build links with churches and others offering services to homeless people.
- 8 Address potential overlaps in services.

### 1.6.3 Services needed to address rough sleeping

- 9 Develop a street outreach team to make contact with rough sleepers across all the main towns in Bradford City's area.
- 10 Make contact with rough sleepers to identify where people are sleeping rough.
- 11 Develop a case management system for problem-solving for all individuals identified as sleeping rough across the city.
- 12 Develop a pool of a small number of emergency beds shared between several agencies.

### 1.6.4 Supported housing and floating support – provision and access

- 13 Create a single point of contact into supported housing for homeless groups, to ensure that those in most need are able to access the most appropriate supported housing provision, and reduce the time spent by other agencies in trying to find accommodation.
- 14 Publicise in one single document the services which aim to help people to get access to supported housing and floating support, and develop a virtual team.
- 15 Review risk assessment policies of supported housing providers, to ensure that people are not refused places in supported housing because of long-past behaviour or minimal risk of problems from their current behaviour.

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- 16 Develop a support service which maintains contact with the most chaotic group of homeless people.
- 17 Develop additional supported housing schemes for chaotic households.

### *1.6.5 Preventing the loss of supported housing*

- 18 Develop a gate scheme to meet people leaving local prisons and escort them to temporary accommodation.
- 19 Consider the key messages coming from national research and examples of good practice in reducing the loss of supported housing.

### *1.6.6 Increasing access to settled housing*

- 20 Talk to social landlords about their allocation policies and practices, and develop a system for monitoring outcomes of their policies and practices.
- 21 Develop lists of approved/accredited landlords, alongside provision of floating support.
- 22 Provide furniture packs with cookers and other essential items.
- 23 Further publicise the vulnerability definition for Local Housing Allowance and how it should be used.

### *1.6.7 Reducing loss of settled housing*

- 24 Develop an early warning system and a protocol for all social landlords which identifies in good time people at risk of losing their tenancy and prevents evictions.
- 25 Identify need for and develop additional floating support.
- 26 Renew efforts to work with landlords to establish a private landlord forum and accreditation scheme, [to improve standards of management and reduce the loss of private tenancies](#).

### *1.6.8 Improving partnership working*

- 27 Widen the use of the Common Assessment Framework to help with better information sharing and joint problem solving.
- 28 Address tensions between the statutory and voluntary sector, and develop training programmes aimed at ensuring that there is better joint understanding of each agency's aims and way of working.

### *1.6.9 Drug and alcohol users*

- 29 Review the operational protocol for drugs and housing.
- 30 Promote expectation that all drug and alcohol treatment providers actively help to address housing difficulties.

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### 1.6.10 Health and social care services

- 31 Develop better connections and interfaces between mental health and other social care providers, and the housing and homelessness sector, and revive the multi-agency panel for resolving complex cases.
- 32 Improve dialogue between Probation and mental health services.

### 1.6.11 Criminal justice services

- 33 Develop a way of helping people who have been in prison (and others) to recover identification papers.
- 34 Ensure that information flows effectively between partnership/strategic level staff and frontline staff.
- 35 Make use of the Total Place development to engage prison service in earlier identification of housing problems and work to retain tenancies at start of sentences.

### 1.6.12 Reducing repeat homelessness through actions to addressing worklessness

- 36 Develop a programme of meaningful activities which all supported housing providers and treatment agencies can refer into.

### 1.6.13 Recording and tracking

#### 1.6.13.1 Housing advice/option service

- 37 Exploring the use of the same case recording database for both prevention and homelessness cases.
- 38 Provide further training to ensure that they look up each customer by date of birth before recording or dealing with any enquiry.

#### 1.6.13.2 Other services

- 39 Consider adopting a system which allows all agencies working with homeless people to record their involvement and to see who else is working with the person and what is being done to help them, and where they are accommodated.

## 1.7 Next steps

This report will influence the work of the Enhanced Housing Options Trailblazer, the Supporting People Commissioning Body, the Drug Systems Change pilot and Total Place planning work. The Trailblazer Project Management Board will agree an action plan, based on the priorities drawn from the recommendations set out above. The findings are to be widely circulated amongst partner agencies including key strategic public sector and third sector agencies, and relevant service user groups. It is also suggested that the findings be presented to a national audience through conference workshops and articles in journals.

## 2 Background

### 2.1 *The background and context to this study*

- Homelessness prevention is a key element of the government's homelessness strategy,<sup>1</sup> and each local authority is expected to give a high profile to the prevention of homelessness and repeat homelessness within its homelessness strategy.

The new approach to prevention established by the government in 2003<sup>2</sup> set out an aim of looking at all options for preventing the crisis of homelessness, before proceeding with a homeless application. Whilst accepting that a homeless application would need to be triggered in some cases, either because it was already clear that homelessness could not be prevented, or because the applicant wishes to stake their claim to have a formal homelessness assessment carried out, the government encouraged authorities to see this as a two stage process, in which staff carrying out housing options interviews always look to see how the crisis can be averted and housing problems resolved, rather than necessarily assuming that all visitors will want to pursue a homeless application, and a route through into social housing.

This new approach has led to the re-modelling of many homeless services to place the emphasis on prevention and providing information about a range of housing options, but it has not been an easy path for all authorities. Advocates for applicants from within both voluntary and statutory agencies around the country have at times been at odds with a policy seen as gate-keeping rather than taking preventative intervention. In addition, it has been difficult in some areas to bring into play interventions that could make a significant enough difference to stave off the crisis of homelessness for the long term, and only recently the government has emphasised that the housing options prevention approach needs to be strengthened in relation to those in non-priority (or excluded) groups who may otherwise be seen sleeping on the streets<sup>3</sup>.

Prevention has been defined as: "activities that enable a household to remain in their current home, where appropriate, or that provide options to enable a planned and timely move and help to sustain independent living" and CLG identifies three stages of intervention to prevent homelessness:

- Early intervention
- Pre-crisis intervention
- Preventing recurring homelessness.

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<sup>1</sup> *Sustainable Communities: settled homes; changing lives, A strategy for tackling homelessness*, ODPM, 2005

<sup>2</sup> *Prevention of Homelessness Policy Briefing*, ODPM, 2003 (as described in *Homelessness Prevention Guide to Good Practice*, CLG, 2006)

<sup>3</sup> *No One Left Out: Communities ending rough sleeping*, CLG, 2008

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The Code of Guidance on Homelessness<sup>4</sup> preventing homelessness from recurring will involve identifying the problems which had led to homelessness in the first place, in order to provide long-term solutions. The Code then sets out 3 strands of an effective approach to prevent recurring homelessness:

- Effective monitoring (particularly in relation to applications which might fit in with CLG definition of repeat homelessness, whether or not the same authority accepted the duty on both occasions)
- An analysis of the main causes of homelessness among housing applicants who have experienced homelessness more than once, and
- The existence of support services, notably but not only housing-related support, to tackle these causes and help the applicants to sustain tenancies or other forms of settled accommodation in the longer term.

The Code acknowledges that some individuals may not be able to sustain accommodation because of their other difficulties, but that support should be available to help them progress towards that aim.

Although measuring and addressing repeat homelessness was a major strand of government policy earlier in the decade (notably in *Achieving Positive Outcomes on Homelessness*, a 2003 ODPM policy initiative), repeat homelessness has so far been measured in England only in relation to those accepted as statutorily homeless. This is acknowledged as being likely to provide an underestimate; a study of homelessness in Stoke-on-Trent in 2005 reported that repeat homelessness was likely to be significantly underestimated even amongst accepted households.<sup>5</sup> It is also acknowledged as being extremely difficult to measure, as the one major study of repeat homelessness (carried out in Scotland) noted.<sup>6</sup> The challenge is created by a number of factors, including the wide variations in local authorities' administrative practices and recording systems, and the fact that the definition itself is so vulnerable to wide interpretation (this is explored later). In addition, the chaotic nature of some homeless people's lives makes research questions difficult to structure, and it is hard to track the complex pathways many follow, their households may have changed in composition between incidents of homelessness, and their underlying problems may have changed in nature.

In Bradford, the need for a focus on prevention of homelessness was recognised within the joint housing strategy 2008-20, which identifies a number of key actions aimed at helping vulnerable people to access and maintain appropriate homes, and to access employment and training, as part of promoting social inclusion and developing sustainable communities. The need to consider the specific issue of repeat homelessness in more detail arose during the development of the homelessness strategy for 2008-2011, and was set out in the work plan for the Enhanced Housing Options Trailblazer. This identified the need to ensure that prevention activity involved earlier intervention in homelessness

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<sup>4</sup> *Homelessness Code of Guidance for Local Authorities*, CLG, 2006

<sup>5</sup> *The Stoke-on-Trent Homelessness Project*, City of Stoke on Trent, 2005

<sup>6</sup> *Repeat Homelessness in Scotland*, Pawson, H. Third, H. Dudleston, A. Littlewood, M. and Tate, J., Scottish Homes, 2001

## Section 2

cycles, and contained the plan for this research, aiming to improve services offered to vulnerable households and improve tenancy retention.

### **2.2 What is repeat homelessness, and how has the brief been interpreted for this study?**

Repeat homelessness is now defined by CLG as homelessness where an applicant had been previously been accepted by the housing authority, where a main duty (that is, the duty to secure settled housing) was ended within the past two years.<sup>7</sup> Prior to April 2009, the measure was included within the P1E return to the government and set within the Best Value Performance Indicator (BVPI) 214, restricted to those households accepted twice within two years.

A review of the small volume of research carried out across the country on repeat homelessness revealed that people who may have been accepted as homeless may become homeless again in many ways, including:

- Being accepted as homeless and rehoused into social housing but not being able to sustain a tenancy
- Being accepted as homeless, but finding their own solution which breaks down
- Abandoning a homeless application, but finding that returning home (for example, to a home shared with a violent partner) or another solution found has not worked out.

Although this issue is not explored in any detail in Bradford's homelessness strategy, the brief for this study makes it clear that the main reason for commissioning the research is to assess the incidences of repeat homelessness in Bradford and to propose strategies to help tackle this problem, the scale of demand for homelessness services from people who seek help more than once, and that these enquiries are more likely to have come from households not likely to have been accepted as homeless and in priority need. Bradford City Council has recorded very few households as repeat homelessness cases in the past, but it was clear that this did not represent the true picture, and that a number of people were being seen more than once who were not in priority need. It was suggested therefore that the research needed to look at those households who were not being accepted, as well as accepted applicants, and the people whose homelessness was prevented but who became homeless or threatened with homelessness at some later date.

The research brief, however, also indicated that the study would need to consider people who did not seek help from the local authority's contractor, Incommunities, since the vulnerable groups specifically mentioned were young runaways and young people facing exploitation or other abuse, women fleeing domestic abuse or forced marriages, and people with complex needs including mental health problems. It was also seen to be allied to interventions that would aim to make contact with and support excluded groups such as rough sleepers and those with complex and multiple needs, so as to develop services to meet their needs more effectively; experience tells us that many of these households might be homeless more than once, or on many occasions, with a revolving door involving

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<sup>7</sup> P1E homelessness form guidance, CLG, March 2009



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exits from prison, hospital, accommodation with family, and space on the floor or in the spare rooms of friends' houses.

For these groups, the situation might be that they have:

- Received an adverse decision on making a homeless presentation (not eligible, not homeless, not in priority need, intentionally homeless, no local connection) and either the situation was not resolved or the situation worsened, so that the person had to make another homeless presentation
- Sought help on one occasion but on other occasions have tried to resolve their problem through other means
- Not contacted the Housing Advice Service but have accessed housing-related services such as other advice services, day centres and temporary/supported housing
- Not contacted any housing services.

With the aim of making the best use of resources and achieving the right outcomes for people facing homelessness for all types of reason, this study has thus been concerned with a wide interpretation of repeat homelessness.

### **2.3 Key questions asked in this study**

The key questions which this study has set out to answer are:

- What has been already learnt about repeat homelessness and how is repeat homelessness addressed elsewhere?
- What is the scale of repeat homelessness in Bradford?
- What are the main causes of repeat homelessness and what are the main characteristics of those presenting as repeat homeless?
- Which resources and services currently respond to and prevent repeat homelessness?
- How can services be improved or re-designed to reduce the incidence of repeat homelessness?
- In what way does partnership working need to be improved, if repeat homelessness is to be reduced and prevented?
- How can repeat homelessness be best recorded and tracked in future?

### **2.4 Methodology**

The research has been carried out through the following tasks:

- A literature review, and good practice review with local and national organisations
- A review of Bradford documents to understand the local context

## Section 2

- A snapshot survey: collecting numbers, mapping resources, identifying issues – an electronic survey, responses from 26 organisations
- Collecting other data: Supporting People, homelessness, prevention and advice, and other data
- Service user consultation: five peer researchers trained, and 14 individual or group sessions carried out with around 70 people in total
- Stakeholder input: four workshops for staff: attended by 49 people, and further contact with individuals or groups from 25 key organisations
- Review of Incommunities case notes and processes.

Some sources of data and information were not possible to obtain: records of those excluded from or suspended from social housing registers; data about people evicted from social housing; tenancy sustainment data; and time spent by staff in the housing advice teams dealing with different aspects of homelessness and prevention tasks. In addition, an attempt was made to collect information about both the Council and their partners' spend on repeat homelessness, which did not prove to be possible. Whilst those additional pieces of information would have added to our understanding about what is happening currently, they are not critical. Incommunities may find it useful to collect and analyse information about the relative amounts of time spent by housing options staff on different tasks, to help to measure the effect of prevention work.

### **2.5 Format of this report**

The first section of this report looks at the key messages coming from other research on repeat homelessness and related topics.

The following sections seek to answer the key questions, using the analysis of data from all the sources available, and drawing on comments from service users and stakeholders, and on our own observations.

The final section of the report draws together the initial conclusions, and proposes actions to address findings. Good practice examples are included in the section giving our suggestions and recommendations.

The appendices contain a more detailed note on the literature review, a number of case studies, and summaries of the stakeholder and service user consultations.

### **2.6 Acknowledgements**

HQN would like to express our gratitude to the many agencies and individuals who have contributed to the study. In particular, we would like to thank the five peer researchers, Groundswell (who carried out the training of the peer researchers) and Bradford Alliance on Community Care (who provided support on the ground during the consultation period), and all the other service users who gave their views in groups or individual interviews. We are also grateful for the considerable help received from the steering group, from Bradford

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City Council housing research team, and from staff from Incommunities Housing Advice Service and other teams, and for the participation of staff from other agencies in workshops and individual interviews.

### **3 What has been learnt about repeat homelessness and how is it addressed elsewhere? Key messages from the literature and good practice review**

#### **3.1 Key messages from the literature review**

There has been no national research on repeat homelessness in England, but we can learn a great deal from a detailed examination of the issue carried out in Scotland, and other research reports about homelessness help to answer elements of the key questions about repeat homelessness.

Further details of the literature review can be found in appendix two.

##### **3.1.1 Counting and recording repeat homelessness**

- Repeat homelessness can be defined, recorded and reported in a variety of ways
- The Scottish Government requires councils to record full details of all those who present as homeless, along with a unique identifier, and this enables repeat homelessness to be identified more easily across the whole group than is the case in England, where the full details of only those accepted as homeless are required to be recorded, and there is no unique identifier for each applicant
- Even in Scotland, where there is a more robust system for collecting this data, there are different interpretations of the definition of repeat homelessness which can lead to quite different conclusions about the number of people affected.

##### **3.1.2 Causes of repeat homelessness and characteristics of people affected**

- Research in Scotland and Glasgow published in 2001 and 2002 found that the majority of repeat presenters were single, with the new application being one of a series of contacts with the authority during a continued period of homelessness, in which the person will have moved a number of times, often into and out of the private rented sector
- Most repeat presentations are separated by relatively short intervals, and in three-quarters of cases this interval is less than six months, but for those who have longer histories of homelessness and whose circumstances did not change between incidents, the interval was likely to be longer
- The Scottish study reported that there were more repeat presenters who were male, under the age of 34, and with a history of chaotic behaviour and lifestyles than in any other group
- However, half of repeat presenters in Scotland had been accepted as in priority need but either left before an offer of accommodation was made or did not accept the offer
- Women may present as homeless on repeated occasions because of domestic violence incidents but homelessness may start under the age of 16 and may continue for long periods, with a stay in settled accommodation being the exception

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- Key target groups should be:
  - Women who have experienced domestic abuse
  - People with drug and/or alcohol problems
  - People who are homeless because of chaotic lives and/or anti-social behaviour (within or outside temporary accommodation)
  - People discharged from hospital
  - People discharged from prison
  - People who become homeless because of financial problems
  - People who sleep rough
  - Young people including under-16s
  - Women who have experienced long periods of homelessness.

### 3.1.3 Addressing repeat homelessness

- Housing advice/options services need to be asking 'how can we help?', rather than 'who can we help?', through a person-centred approach
- Effective multi-agency work is critical
- Out-of-hours services need to be available for all groups of homeless people
- Any policy that successfully reduces homeless re-presentations for repeat presenters will reduce total presentations to a greater degree, and will reduce the use of temporary accommodation overall; new resources to prevent homelessness should be judged on their effectiveness in reducing repeat homelessness
- As far as possible, staff should reflect the range of people they will be working with, and caseloads should be kept to a manageable level
- Repeat homelessness can be tackled through a combination of activities which:
  - Keep in contact with people when they first present as homeless, and have specialist staff to deal with some groups such as young people
  - Provide smaller and more specialist temporary and supported housing which sustains people until they can move on to more independent housing
  - Provide floating support which stays with people regardless of where they move to
  - Develop innovative solutions for those with most complex needs through a case management and review system at a senior level.
- Failing tenancies which result in repeat homelessness may come about because of the lack of choice of area, or as a result of isolation or lack of skills to manage a tenancy, and the greatest danger points come after six months and after 15 months
- Tenancy sustainment works best to prevent repeat homelessness as a holistic service which can look at other problems as the tenant wishes, and not just at housing-related issues, and helps the person to develop local links.

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### 3.2 Key messages from the review of good practice in Bradford and elsewhere

Repeat homelessness is most often addressed through initiatives and services such as:

- The provision of floating support, including specialist, generic, and tenure-neutral services
- Prevention protocols for groups including people leaving hospital, prison and care
- Prevention protocols for preventing homelessness amongst vulnerable social housing tenants
- Activities aimed at reducing evictions from supported housing
- Move-on work which will increase flows and pathways through supported housing, so increasing the availability of space for others
- Pre-tenancy training
- Training, advice and other initiatives to help to reduce the likelihood of debt occurring or of debts weakening the chances of tenancies being sustained.

Very few local authorities have taken steps to reduce repeat homelessness as a discrete part of their homelessness strategies. Nottingham City Council's homelessness strategy 2008 has reducing repeat homelessness as its third high level priority. Their chosen definition, for the purposes of their strategy, is:

*“homelessness that occurs within two years of a previous episode, whether as a result of loss of permanent or temporary accommodation”*

and the 40 or so individuals and families to whom this part of the strategy and action plan is targeted are seen to be mainly households with the most complex needs and/or most challenging behaviour. The strategy identifies key actions which should help to reduce repeat homelessness for these, and other groups, including the provision of floating support or resettlement for all homeless households rehoused into private or social housing, and ensuring that they are linked into other services which will help to address the causes of homelessness, such as addictions, and mental and other health needs. Over and above the list set out above, which are actions adopted by most LAs, Nottingham's action plan to reduce repeat homelessness also includes the following actions:

- The funding of tenancy liaison officers to work with private sector landlords
- Development of befriending and peer support mechanisms which provides both meaningful activities and vocational training for former homeless people, and support for people going along the pathway towards independence; the Council and its partners are funding the volunteer co-ordinators to develop this scheme
- Actively supporting projects that address NEET (Not in Education, Employment or Training) in homeless communities (both adults and young people), and have encouraged the use of outcome-related goals in relation to meaningful activities for homeless service users
- Activities which help to address health issues, and to monitor the contribution that supported housing providers make to addressing the health needs of their service users.

## Section 3

Reducing repeat homelessness is tackled as part of the homelessness strategy of Brighton and Hove Council, and is also a core objective in its single homelessness strategy. Key actions set out in the homelessness strategy are similar to those being undertaken in Nottingham, with the addition of the development of an integrated support pathway for the following groups:

- Single homeless people
- Rough sleepers
- Young people at risk
- People at risk of offending
- Teenage parents and homeless
- Families.

Service users can move through the pathway in a structured way to different stages of independence, and the pathway also aims to achieve an appropriate balance between low-level preventative floating, and high-level accommodation-based services.

A second key strand of the strategy aimed at reducing repeat homelessness is the homeless psychology service. The service established in February 2006 with a small group of psychological practitioners, and its brief was to develop a support model integrating ideas and techniques from psychological models for use by housing practitioners across the city. It was also to deliver training to housing practitioners and provide a brief therapy service for clients at risk of repeat homelessness. The homeless psychology service works with support providers to address the emotional and psychological problems that can prevent people from resettling and become a cause of repeat homelessness.

Part of the project is a website<sup>8</sup> which provides access to ideas and resources on the key psychological issues for workers delivering housing-related support to homeless people. It has led to a hub for people focused on the issue, has increased competency, developed an online referral route, and experience interchange. Users can find out how best to deliver support to people at risk of repeat homelessness, or learn about motivational interviewing and brief and other types of therapy, and can search the library of resources and other materials.

The third innovative approach which is being developed to help reduce repeat homelessness is the use and analysis of data by a number of authorities to record access to and vacancies in supported housing. Nottingham, Liverpool, Newcastle and the Wirral are at different stages of development of their gateway systems, with several in place now. Nottingham is also currently developing a tracking system, as the gateway system as it stands is not able to track repeat presenters or to identify where and why things go wrong with previous support packages, and what can be put in place to address this.

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<sup>8</sup> <http://www.mortarnet.org.uk/>

### Section 3

Newcastle's system is being developed from their homelessness liaison project, a service for recording referrals, entries into, and moves from supported housing which has been in existence for some ten years or so. Newcastle Homeless Liaison Project (NHLP) staff pass information to agencies about vacancies to suit their clients on a daily basis, and use the information about referrals and movement into and out of the sector to draw conclusions about need for commissioning purposes. The Gateway scheme takes this a step further, with decisions about who will be referred to the supported housing provider to be taken by gateway staff, informed by priorities drawn up by statutory agencies responsible for the client group into which the person falls. This will include rough sleepers, who will be identified as priority by the homelessness service once they are made known to the rough sleeping co-ordinator.

Other systems for tracking entries into supported housing and housing prevention or other work done with homeless households are described in the good practice notes alongside the recommendations in section seven.



### 4 The scale of repeat homelessness in Bradford – analysis of data from existing records

In addition to the snapshot survey, discussed in section 3.2, we sourced a range of other data to help us to understand the picture of repeat homelessness, or repeat enquiries about homelessness, in Bradford. This included client record data from providers of supported housing who are contracted to Supporting People, which came from the national central recording through St Andrew's University, data returned to CLG in the P1e quarterly returns and, most usefully, data from Incommunities housing management system on which is recorded all prevention cases and homeless decisions.

These sources of data were chosen in order to draw conclusions about:

- The numbers of people seeking help from Bradford's Housing Advice Service as homeless on more than one occasion within two years
- The underlying causes of homelessness which led to more repeat presentations, the groups most affected, and the patterns of repeat casework with these groups
- Any features of homelessness and housing prevention casework which could be seen as contributing to the scale of repeat visits
- Whether these conclusions are supported by the scale of repeat entries into supported housing.

Limitations of the recording systems meant that it was only possible to do partial analysis on some of the data, notably because the databases for prevention and for homelessness cases are separate and the reports produced vary in detail. The report from the homelessness database did not include date of birth but calculated age at the date the report was run. Names on the prevention database are not consistently entered. These three factors also mean that the two reports cannot be easily compared to check for names in common and to track people through the system.

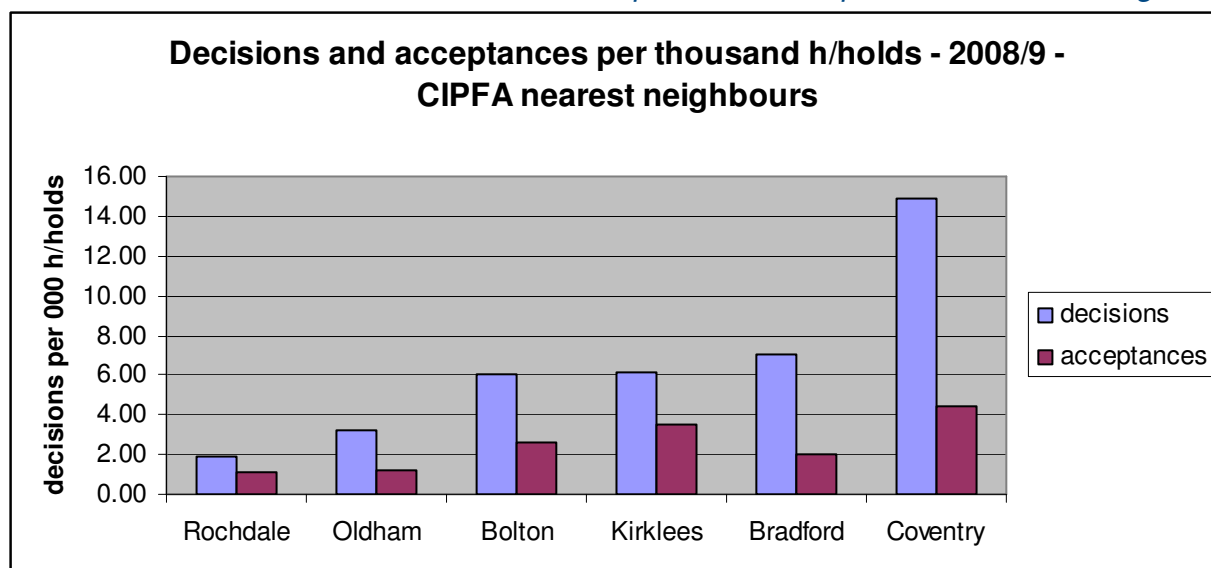
#### 4.1 *Incommunities homelessness data (P1e returns)*

Bradford reports very few repeat homelessness occurrences in the national returns; this is because the definition of repeat homelessness was, until April 2009, the number of applicants who were accepted as homeless having been previously accepted as homeless within the last two years. Bradford is keenly aware that the very low numbers of cases that fulfil this definition are far from the real picture, and that the definition of repeat homelessness as required to be counted in the P1e quarterly returns masks the true scale of the problem.

We did, however, look at Bradford's decision and acceptance rates compared to its nearest neighbours as defined by CIPFA, to see how they compare to similar local authorities in terms of the numbers of decisions taken and numbers accepted, as background information, and to inform the value for money review. Chart one shows Bradford compared to the neighbours with the closest demographic profiles to Bradford, for the rate of decisions and acceptances per thousand households.

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Chart 1 – rate of homeless decisions and acceptances – comparison with near neighbours



This highlights the fact that in Bradford, there is a comparatively high ratio of decisions to acceptances. In 2008/09, there were two acceptances per 1,000 households and seven decisions per 1,000 households, a ratio of 1:3.5, whilst in Kirklees the ratio is 1:17, with a similar rate of decisions (just over six) but a higher rate of acceptances (3.5 per 1,000 households). In this group of authorities with similar characteristics, only Coventry has a higher rate of decision-making, but it has a similar ratio of decisions:acceptances at 1:3.4. Bradford's acceptance rate is, however, in the mid range of the group, which means that a considerable proportion of applications result in negative decisions.

Many authorities are handling homeless applications differently, so that applications are only made when prevention work is, or is likely to be, unsuccessful. This provides better value for money as where every effort is made to prevent or resolve homelessness, thereby reducing application numbers, the costs to the authority are reduced. This is of course only value for money, including the quality of outcome for the customer, if applications are not kept artificially low by not making homelessness assessments or decisions in cases where homelessness has not been prevented.

It is acknowledged, however, that individuals have a right to a homeless assessment, and local authorities have in the past been advised by CLG that it may be better to make a quick decision, albeit a negative one, than to be legally challenged, for example, where the applicant is clearly not in priority need or is not homeless but wishes to make a formal application.

### 4.2 Homelessness decisions

We looked at homelessness decisions taken between 1 August 2007 and 31 July 2009. Of 2,866 recorded homelessness decisions, 362 were for people who had more than one homelessness application during the two-year period: a total of 169 individual households. Of these 169:

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- 152 had two decisions
- Twelve had three decisions
- Four had four decisions
- One had six decisions.

The average time period between application dates was 208 days but the range was considerable. It was apparent that some customers waited only a few days between receiving a negative decision and re-applying.

### 4.2.1 Characteristics of repeat homelessness applicants

#### 4.2.1.1 Age

We only had dates of birth for a small proportion of applicants but we can see that, of all repeat applicants, 19 were people were under 18 years old at the time of their first application. Five of these were accepted at first application, three were found intentionally homeless and the remainder were found to not be homeless.

#### 4.2.1.2 Household types

Eighty-four households had children or a pregnancy and 85 were single and childless or a childless couple (this includes under-18-year-olds).

#### 4.2.1.3 Reasons for application

The reasons for application are shown in table one (the reason was missing in three application records).

*Table 2: reasons for homeless applications for repeat applicants*

Reason for application	No.	% of total
Violent relationship breakdown – partner	73	20.33
Relatives/friends no longer willing	68	18.94
Termination of AST/NTQ/Possession Order	47	13.09
Parents no longer willing	43	11.98
Other reason for loss of private tenancy	22	6.13
Left hospital	18	5.01
Non-violent relationship breakdown	15	4.18
Other	13	3.62
Violent relationship breakdown – associated person	12	3.34
Other violence	8	2.23
Left institution or LA care	7	1.95
Other harassment	7	1.95
Private tenancy rent arrears	6	1.67
Left prison/on remand	6	1.67
LA/Incommunities rent arrears	5	1.39
Mortgage arrears	4	1.11

33

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Loss of NASS accommodation	4	1.11
Racially-motivated violence	1	0.28
<b>Total</b>	<b>359</b>	

The most noticeable factors for multiple repeated applications by the same person are:

- Repeated presentations for violent breakdown in relationship
- Family or friends unwilling to continue to accommodate with movement from one type of insecure home to another.

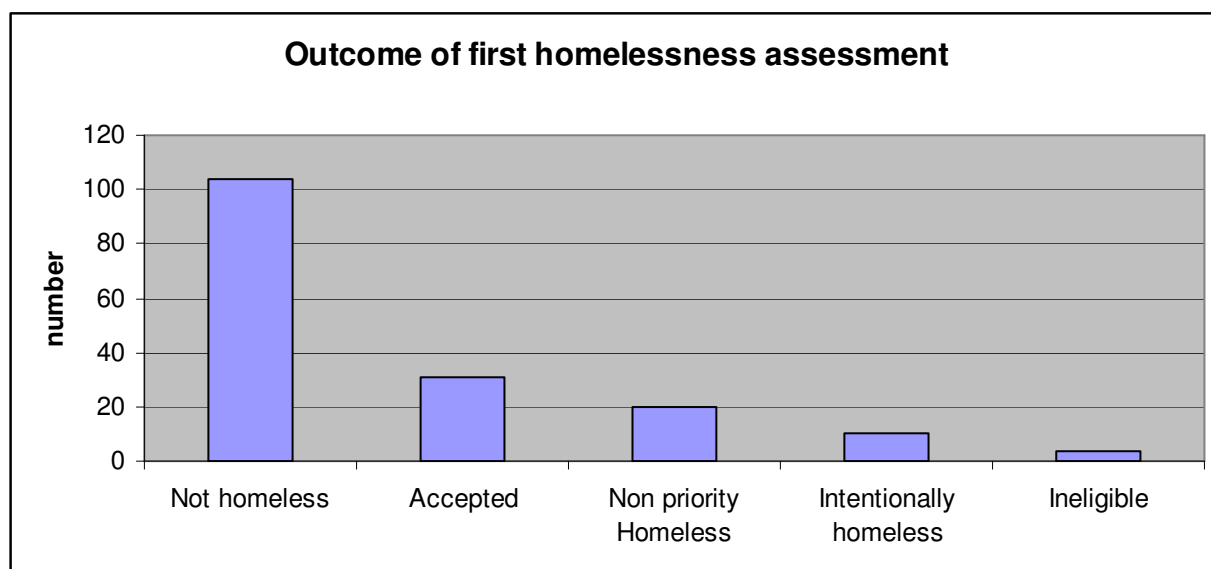
It is unfortunately not unusual for people who are subject to domestic violence to leave and return to their abusive partners many times before making a final break. The most common decision where this has occurred is 'not homeless'. It would be expected that individuals experiencing abuse would be linked into relevant services, such as support and outreach, which may reduce the likelihood of homelessness occurring or reoccurring, but it is accepted that there are many reasons for victims to return and other interventions may not initially reduce the chances of a return to live with the violent partner.

The majority of people who are in insecure accommodation with parents, other relatives or friends were found non-priority need unless their circumstances changed (usually pregnancy).

### 4.3 Outcomes of homelessness assessment

Thirty-one people were accepted as homeless at their first application, and 11 people were accepted as homeless twice within the two-year period we considered. The results of all first applications are shown in the chart below.

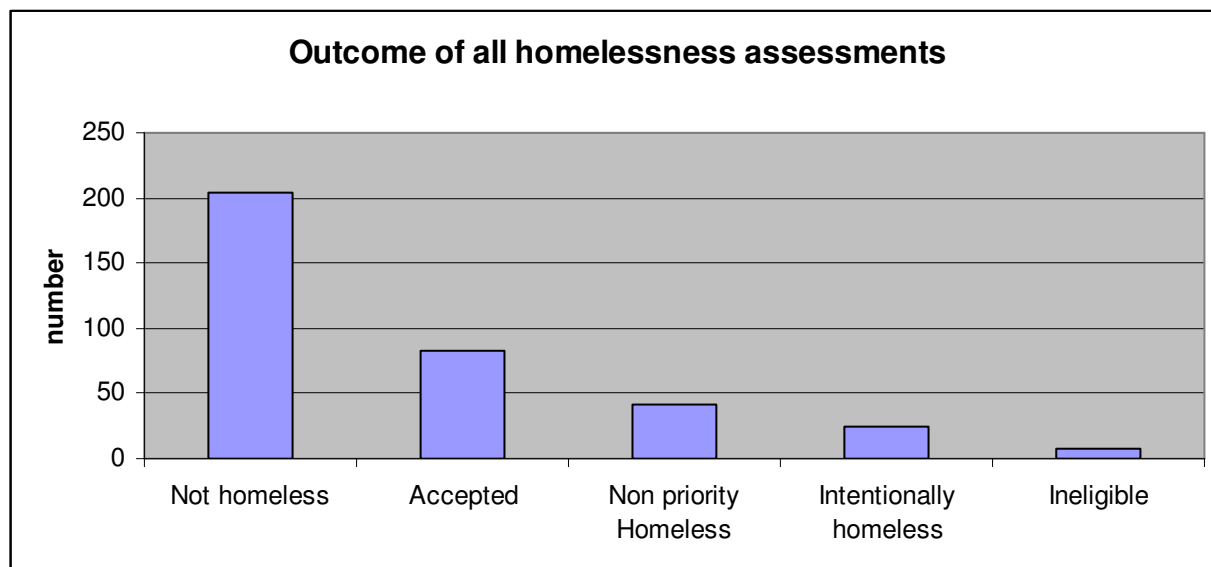
Chart 2



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Of the total 362 assessments for repeat presenters, 83 resulted in acceptance as homeless. The results of all applications are shown in chart 3.

Chart 3



The charts above show that the majority of first homeless assessments in respect of people who made a further homeless application resulted initially in a not homeless decision. Subsequent applications for all repeat presenters resulted in acceptance for 62 households who had not been accepted on the first occasion. This appears to be a high figure, since it indicates that a surprising number of people who returned to receive a different decision on the second occasion. The difference may be accounted for by a change in circumstances between the first and later occasions, different information coming to light, or the decision-maker being swayed by the applicant or their advocates putting the case in a different way. However, in some cases, there was no change of circumstances to merit a second application or decision, and some customers waited only a few days between receiving a negative decision and re-applying for homelessness assistance.

The analysis points to the need for a review of negative decisions made where a subsequent decision was different, to check that there is good quality decision-making on all the occasions, and that there is no significant time being wasted on decisions which are reversed even though there is no material change in circumstances between the different presentations.

### 4.4 *Incommunities data for homelessness prevention*

Incommunities provided HQN with two sets of reports at different stages of the project. We have, for this report, used data from 1 August 2007 to 31 July 2009 as this has the merits of:

- Being the most up-to-date two-year period possible

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- Covering the time period when Incommunities was changing its approach to dealing with homelessness towards prevention as a first and preferred option
- Being more reliable – Incommunities highlighted that the housing IT system had been introduced for housing advice and homelessness work only shortly before the start of 2007 and that some figures earlier in 2007 had not been input.

Incommunities introduced homelessness prevention as a primary aim into the Keighley office from September 2007 as a pilot study. The Bradford office followed a year later and from March 2009 the team has split into homeless prevention and homelessness decision-making. Keighley is by far the smaller office, being used by far fewer customers. We split the data into periods that effectively mirror these two stages of change to see whether these changes have had a measurable impact.

### 4.4.1 *Total preventions recorded*

- From 1 August 2007 to 31 July 2009 (two years), there was a total of 4,498 prevention contacts – an average of 187.42 per month
- From 1 September 2007 to 31 August 2008 (12 months), 2,126 prevention contacts are recorded: an average of 177.17 per month
- From 1 September 2008 to 31 July 2009 (11 months – from the adoption of a preventative approach across whole of Bradford), there were 2,222 preventions recorded: an average of 202 per month.

### 4.4.2 *Number of customers receiving more than one preventative intervention*

- In the two-year period 1 August 2007 to 31 July 2009, 339 individuals had more than one preventative intervention recorded (an average of 14.13 per month) and these accounted for 706 contacts altogether. Of the 339, three people had four prevention episodes
- From 1 September 2007 to 31 August 2008 (12 months), 96 individuals had more than one preventative intervention recorded (an average of eight per month) and within that period these accounted for 220 contacts
- From 1 September 2008 to 31 July 2009 (11 months), 76 individuals had more than one preventative intervention recorded (an average of 6.9 per month) and within that period these accounted for 157 contacts.

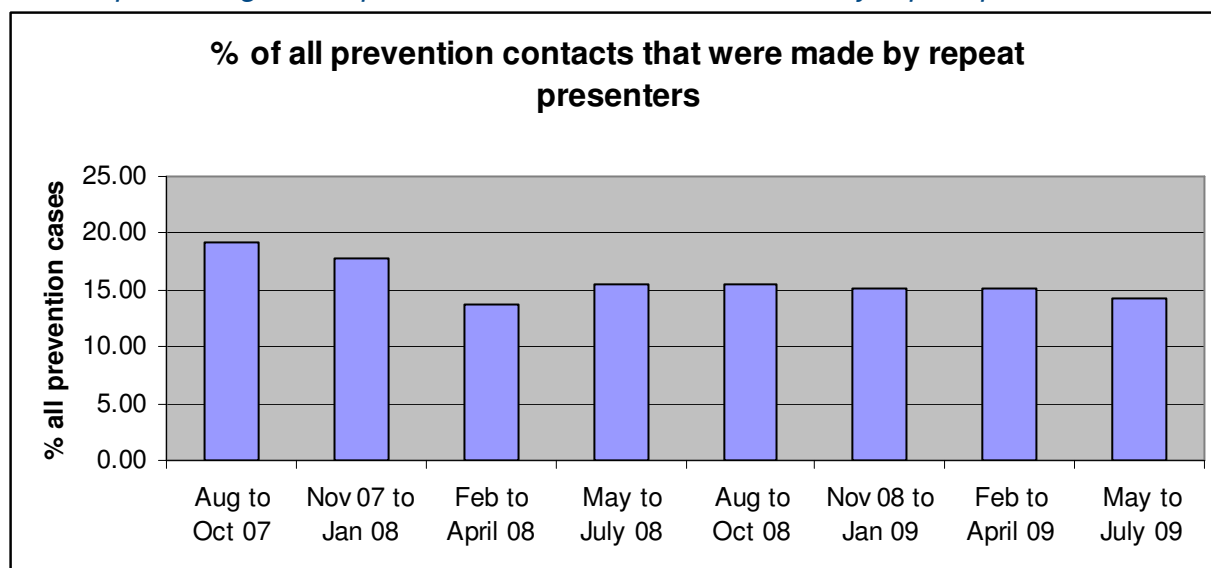
These are substantial numbers and account for significant amounts of advisor time. The trend does however appear to be downwards, which is optimistic. This implies that more people (albeit this is not a very significant increase) are having their issues resolved at their first contact and therefore not having to re-present.<sup>9</sup>

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<sup>9</sup> Note – for convenience we have called repeat preventative interventions ‘presentations’ but clearly these are not homelessness presentations per se

## Section 4

Chart 4 – percentage of all prevention records accounted for by repeat presenters



To help us understand whether there has been any really significant change since a preventative approach was adopted, we looked at two things:

- The time when repeat presenters made their first contact with the Incommunities team
- The time periods between enquiries by the same individual.

Table 3 – the quarter that later repeat presenters made their first enquiries

	Timing of <i>first</i> enquiry – percentage of all repeat presenters
August to October 2007	15.82
November 2007 to January 2008	10.95
February to April 2008	8.33
May to July 2008	10.13
August to October 2008	6.37
November 2008 to January 2009	5.93
February to April 2009	3.35
May to July 2009	2.21

A step change appears to have been made for people seen for the first time after August 2008. This is around the same time that a prevention approach was introduced by the Incommunities advice service across whole of Bradford.

We should be careful about the interpretation of the significant decrease in first enquiries over time: the shorter the time period, the less time individuals have had to come back with further issues. However, when considered alongside the information below about typical time periods between repeat visits, this does look as if it is going in the right direction.

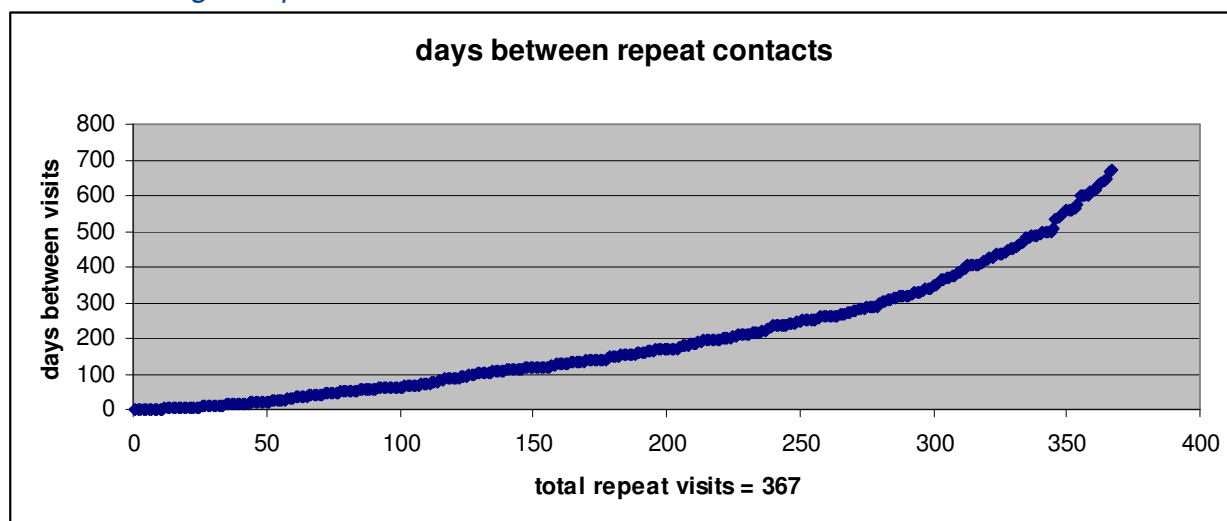
## Section 4

Table 4 – time periods between repeat presentations

	Within one week	Within two weeks	Within three weeks	Within one month	Within three months	Within six months	Within one year	Over one year
Number of repeat visits	14	25	10	8	67	85	95	63
Percent of all repeat visits	3.81	6.81	2.72	2.18	18.26	23.16	25.89	17.17
<b>Sub-totals (cumulative)</b>					<b>33.79</b>	<b>56.95</b>	<b>82.83</b>	

The mean average number of calendar days between repeat visits is 196; only 62 of the 367 repeat visits were made a year or more apart. The next graph shows how the majority of repeat visits are made within a relatively short time span.

Chart 5 – timing of repeat visits

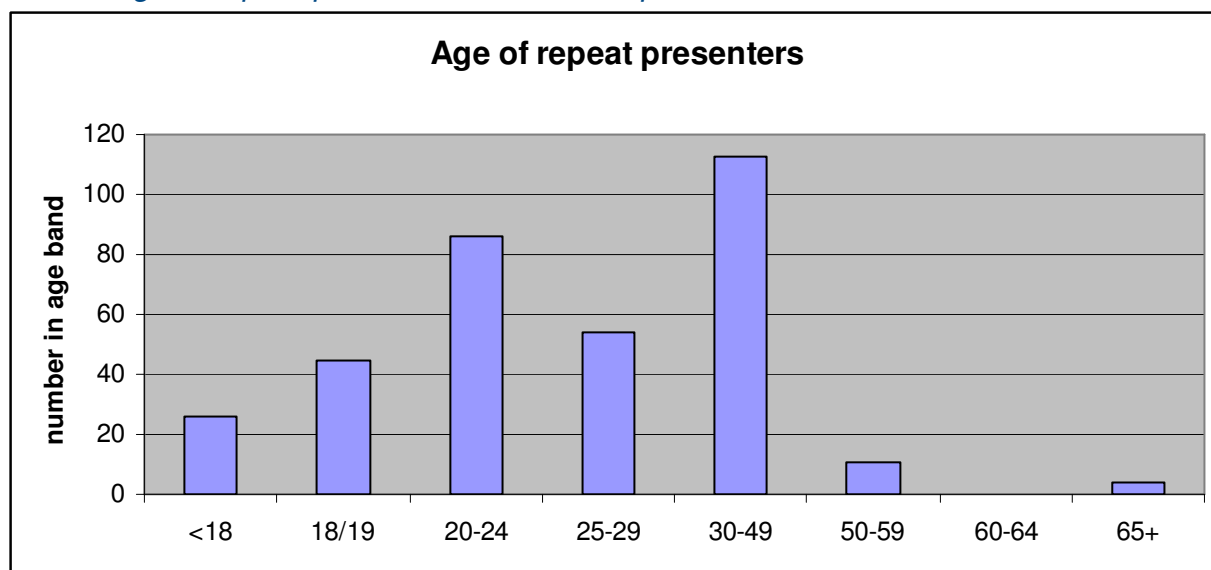


Since almost 34% all repeat visits can be expected within three months and almost 57% within six months, this confirms that the number of repeat presenters is decreasing over time. This will of course only improve significantly if preventative approaches are more long lasting in their impact.



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Chart 6 – age of repeat presenters at their first presentation



Certainly, as we might expect, there is a significant proportion of younger people amongst repeat presenters:

- Around 7.5% of all repeat presenters are 16/17 years old (one person was not quite 16 years)
- Over 13% are 18 or 19 years old
- 16.5% are 20 to 24 years old.

However, it is relatively more common for repeat presenters to be rather older and in fact 39% of all repeat presenters are between 25 and 40 years old, although this is, of course, a wider age range than other bands shown in the chart. This accords with information from the snapshot survey of currently known customers, and shows that repeat homelessness is not just a feature of youth, when people are often thought more likely to lead less ordered lives.

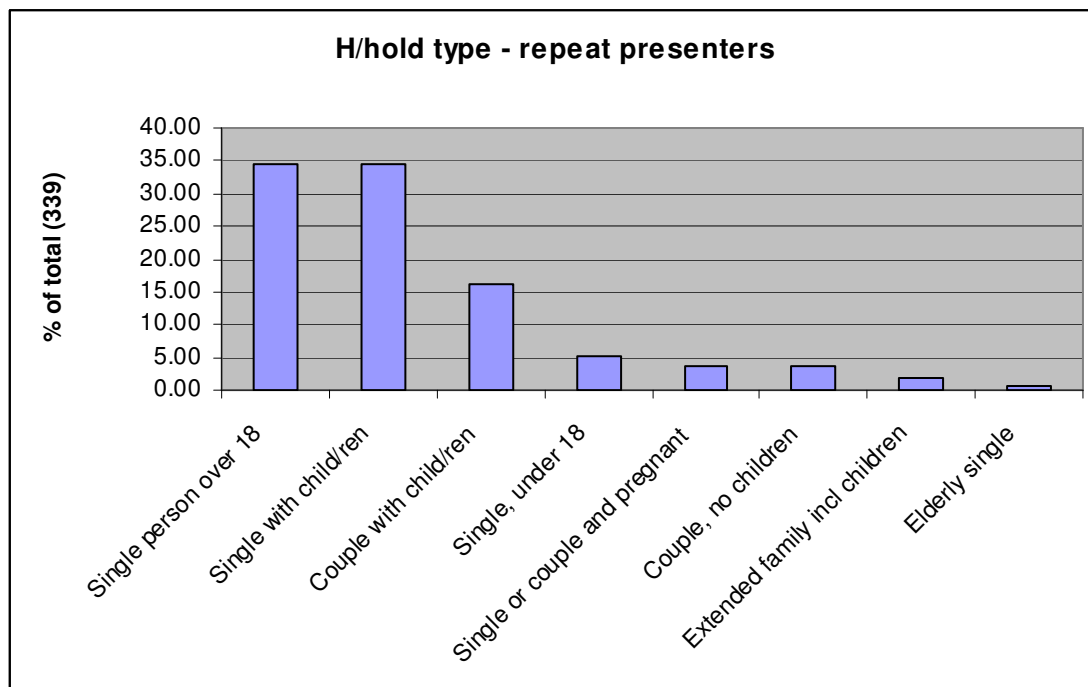
### 4.4.3 Ethnicity

63.72% of all repeat presenters were white British, compared to the 76% of Bradford's population identified through the census in 2001. Non-white ethnic groups represent just over 27% of re-presenters compared to just under 22% in the census 2001. In general, therefore, minority ethnic groups are over-represented amongst repeat homeless presenters as compared to the profile of Bradford's general population, but a note of caution is needed since this is based on census data from 2001. It is acknowledged by the Council that there have been significant changes in Bradford's population in the years since 2001, and it is estimated that by 2011 the district's ethnic minority population will form 26% of the district's total population.

## Section 4

### 4.4.4 Household types

Chart 7 – household types



The chart above amalgamates the household classifications entered onto the system by advice staff. In contrast to the snapshot survey, the majority (over 52%) of repeat presenters to Incommunities (on the prevention side of its work) are households with children. It should be noted that only 18 enquirers were classified by advice staff as under-18 at their first enquiry whereas, by date of birth, there was actually a total of 26. This does not alter this category's ranking, however.

### 4.4.5 Reasons for repeat presentations

We next considered why people sought homelessness advice on their first enquiry by looking at the reason for the presentation. The table below highlights that the top three reasons for seeking help are:

- Family breakdown
- Notice to Quit
- Overcrowding (although not statutory overcrowding).

It should be noted that family breakdowns and losing rented accommodation are commonly at the top of the causes of homelessness along with non-violent relationship breakdown, but that people who are affected by violent relationship breakdown are less likely to receive prevention advice or action as there is often little that can be done to prevent homelessness by the time that the person seeks help.

## Section 4

There is a significant percentage of people who are roofless – ranking fifth in reasons for seeking homelessness assistance – and this confirms to some extent the findings from the snapshot survey, given that people who are sleeping rough are often reluctant to seek ‘official’ help, having had poor experiences in their past or believing that ‘the Council’ will not help them.

*Table 5*

Rank	Cause of first presentation – main groups	Percentage of all re-presenters
1	Family breakdown	23.89
2	Notice to quit (from private rented sector)	17.40
3	Overcrowded	10.62
4	Relationship breakdown	6.78
5	Roofless	6.49
6	Friends breakdown	6.19
7	Domestic violence	6.19
8	Affordability/debt	4.42
9	Disrepair	3.54
10	Violence from outside	3.24
11	Arrears – rent/mortgage	2.06
12	Illegal private sector housing actions	1.77
13	Nuisance	1.77
14	Institution leavers	1.47
15	Repossessions	0.88

The recorded main reasons for later visits may change, for example, rent arrears may become possession order granted. The closer the visits are to each other (and we have seen that most repeat visits occur within six months), the more likely they are to be prompted by the same or a similar issue.

It was not in the remit of the research to follow through the story of each individual, but this is a useful approach to case audit and in assuring the quality of preventative activity. We have talked about the importance of tracking individuals elsewhere in this report.

### *4.4.6 Actions taken to prevent homelessness*

The table below shows the ‘final actions’ (or outcomes) of the first contact made by each repeat presenter. Please note this is a mixture of previous recording categories and the current CLG-required categories – the latter have been used wherever possible.

*Table 6 – prevention action taken*

Final action (where recorded)	Percentage total (total = 310)
Passed to homelessness	22.58
Stayed put	20.00
Lost contact	13.87
Moved to other family/friends	5.16
Stayed in private rented housing	4.19

## Section 4

Final action (where recorded)	Percentage total (total = 310)
Failed prevention	3.87
Accommodated with friends/relatives	3.55
Other help to stay in private rented housing	3.55
Remain in home	3.55
Intervention to stay in private rented housing	2.90
Supported accommodation	2.26
Conciliation	1.94
Found private rented accommodation	1.94
Other	1.94
Council tenancy	1.29
Resolved Housing Benefit issue	1.29
Children Act referral	0.97
Negotiation with housing association	0.97
Bond scheme	0.65
Hostel or house in multiple occupation	0.65
Mediation	0.65
Refused offer – closed	0.65
Debt advice	0.32
Mortgage intervention	0.32
Private rented sector – no bond scheme	0.32
Private rented sector with bond scheme	0.32
Referred to another local authority	0.32

The most common ‘outcome’ or action was to pass the case across for a homelessness decision and we have looked at these in more detail below. Twenty percent of all first enquiries stayed put in their current home, but this category was used extensively prior to the introduction of the more specific CLG classifications, and it is impossible without that additional detail to know what assistance was given to help someone to remain in their current home. Almost 14% of enquiries were closed because of loss of contact – this is concerning as clearly there was no resolution of the situation and inevitably these individuals had to seek help again later on. It is important to understand why and how contact is lost and to reduce these as far as possible. As the literature review records, it was found in Glasgow that keeping in contact with people when their homelessness had not yet been resolved was a positive step to reducing repeat presentations. They introduced a flag system which guided staff to review cases kept open for 28 days after contact appeared to be lost, and to make efforts to trace people and see what the outcomes were to their initial contact.

### 4.4.7 Decisions passed to homelessness

At first enquiry, 70 decisions were ‘passed to homelessness’, of which:

- Twenty-three found ‘not homeless’
- Eighteen non-PN homeless
- Four intentionally homeless
- Eleven accepted homeless.

## Section 4

**Note that 14 cases could not be found in the homelessness decision report.**

Given that 11 households were accepted as homeless, it is particularly important to understand how they came to make a further homelessness enquiry later on and within the two-year timeframe. We have therefore looked at both prevention and homelessness reports for these 11 cases.

*Table 7 – households accepted as homeless who later made homelessness enquiries*

Age when first presented	Household	Prevention decision date	Other information
17	Single	4 September 2007	Presented again in December 2008 (pregnant, 18 years old) – breakdown friends – and had a second homeless decision in January 2009 – not homeless
18	Single	6 September 2007	Presented again as a couple in June 2009 – overcrowded (not statutory) – remained in home
20	Single, one child	3 October 2007	Presented again November 2007 – violence outside the home. No action recorded
25	Single, two children	19 October 2007	Presented again June 2009 – family breakdown – remained in home
17	Single, pregnant	31 October 2007	Presented again April 2009 as single with one child with family breakdown – remained in home
20	Two adults (not a couple)	14 November 2007	Presented again April 2008 – disrepair. No action recorded
29	Couple, 4+ children	7 January 2008	Had an earlier homeless decision June 2007 – not homeless. Presented again just over a year later, recorded as single with three children – found private tenancy
22	Single, one child	17 January 2008	Previously accepted as homeless in February 2007. Presented for a third time in May 2009 as a possession order had been granted – found private tenancy
45	Couple, 1 child	29 January 2008	Presented again March 2009 – debt, not arrears. No action recorded
22	Single, two children	10 July 2008	Had a former homeless decision October 2007 (this occurrence was not on prevention records) – decision was ‘not homeless’. Presented again April 2009 – rent arrears (private tenancy) – remained in home
54	Single	5 September 2008	The two advice episodes were effectively for the same issue and there was only one homeless decision taken after the second enquiry

## Section 4

It has not been possible so far to obtain more detail on these cases (as the report analysing repeat presentations for 08-09 was available only just before this report was due to be completed), to identify what was put in place to prevent recurrence of problems and therefore re-presentation. It is reassuring, however, to see that in the period since the first enquiries for these cases, nobody accepted as homeless after September 2008 has re-presented. This may of course be because those accepted after September 2008 are still in, or have only recently left, temporary accommodation but this seems unlikely because the relatively low and static number of households in temporary accommodation compared to levels of acceptances implies that people are rehoused within a three-month period. Data from Incommunities about length of stay in temporary accommodation confirms that most households stay for less than three months, and this is also confirmed by the Supporting People Client Record Form data (see below) where re-entries to supported accommodation of those who have been accepted as homeless have reduced between the two time periods measured. This suggests that the new approach to housing options is having an impact.

### **4.5 Client Record Form data – Supporting People**

The two-year period used for this dataset was 1 April 2007 to 31 March 2009. We also asked for breakdowns of datasets for the periods September 2007 to March 2008 and September 2008 to March 2009. This gave us two comparable periods to consider the extent of repeat entries to supported housing (not including sheltered housing, and not including floating support). The analysis could only be completed for client records that include a National Insurance number as this is the only field that identifies the client as a unique individual.

Over the full two-year period, 937 individuals were identified as entering supported accommodation, of which:

- 138 people had more than one entry into supported housing
- 121 people (13%) had two entries to supported housing
- Nineteen people (2%) had three entries
- Eight people (1%) had four or more entries.

The client record data does not allow full tracking from time period to time period. When we compare the two six-month periods, therefore, the time period over which re-entry could have occurred is limited to that six-month period. This does reduce the number of repeat entries and the occurrences of repeat entry by individuals, simply because there was less time available within which to re-enter. However, we wanted to look at trends over time:

- For the six-month period September 2007 to March 2008 there were 272 entries to supported housing in total and of these 14 people (5%) entered supported housing twice
- In the six-month period September 2008 to March 2009 there were 316 entries and of these 18 people (6%) entered twice.

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There was therefore a real increase in the number of people who re-entered supported housing.

### 4.5.1 Characteristics of those re-entering supported housing

#### 4.5.1.1 Sex and age

There is a close to equal split in gender of those entering supported housing – 51% are male and 49% are female. Males are more likely to re-enter supported housing than females – 19% compared to 12%.

Age groups of re-entries are shown in the table below:

Table 8

Age group	September 2007 – March 2008			September 2007 – March 2008		
	Total	No. who entered twice	% of age group	Total	No. who entered twice	% of age group
16-20	90	2	2	87	6	7
21-25	45	1	2	42	2	5
26-30	27	2	7	46	2	4
31-35	14	4	29	35	0	0
36-40	28	0	0	35	3	9
41-45	21	1	5	25	3	12
46-50	10	3	30	28	2	7
51-55	21	1	5	13	0	0
56-60	6	0	0	1	0	0
61+	3	0	0	4	0	0

Younger people up to 20 years old have by far the highest rate of entry into supported housing and we might have therefore expected them to have a higher rate of re-entry. In fact it is the 31-to-35 and the 46-to-50 age groups with relatively low entry numbers that have by far the highest rates of (presumably) tenancy failure and therefore re-entry within the six-month period.

#### 4.5.1.2 Statutorily homeless

A significantly higher number of households entering supported housing was recorded in the latter time period as having received a positive homelessness decision. Given the change, this is possibly more an indication of more accurate recording, so some caution should be applied. However, the decrease in numbers who re-enter supported housing after being accepted as homeless is very positive.

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Table 9

September 2007 – March 2008			September 2008 – March 2009		
Total	No. who entered twice	%	Total	No. who entered twice	%
33	4	12	116	3	3

### 4.5.1.3 Ethnicity

Given some of the numbers, this data has been considered for the full two-year period only and shows that re-entry is somewhat more common amongst white customers (includes all white ethnic groups) than non-white groups. However, the variations are small.

Table 10

Ethnic group	Total	No who re-entered	Percentage of group
White	731	122	17
Mixed	52	5	10
Asian or Asian British	107	15	14
Black or black British	37	6	16
Chinese or other ethnic group	2	0	0

### 4.5.1.4 Accommodation prior to entry to supported housing

Again, this data is only provided for the full two-year period. Re-entries from residential care home are most common but the number of entries is small overall. The most significant group re-entering supported housing is rough sleepers – 26 individuals (29% of the group). There is also a high rate of re-entry from occupiers of bed and breakfast and direct access hostels whose occupiers will include high rates of people who also sleep rough – 19 people or almost 13% of these groups. Some of these will be people who have made positive moves from a very short-term home like bed and breakfast to supported housing. However, the high levels overall imply that more needs to be done to engage rough sleepers (and ‘sofa surfers’) so that they are less likely to ‘cycle’ within the support system.

There is also a high level of re-entry from groups accessing what is best described as ‘supported and specialist housing’ including supported housing, foyers and women’s refuges. This group accounts for 33 people (over 22% of all re-entries) and few of these are likely to be the result of positive, i.e. planned move-on into other supported accommodation.

Unsurprisingly, a high number of re-entries are from those living with family and friends – 42 people (over 28% all re-entries). Where it is a family situation, this might be seen as more positive; it is often helpful for people living in these situations to have a break, as this often benefits both the customer and the family and allows reconciliation and extension of the arrangement.



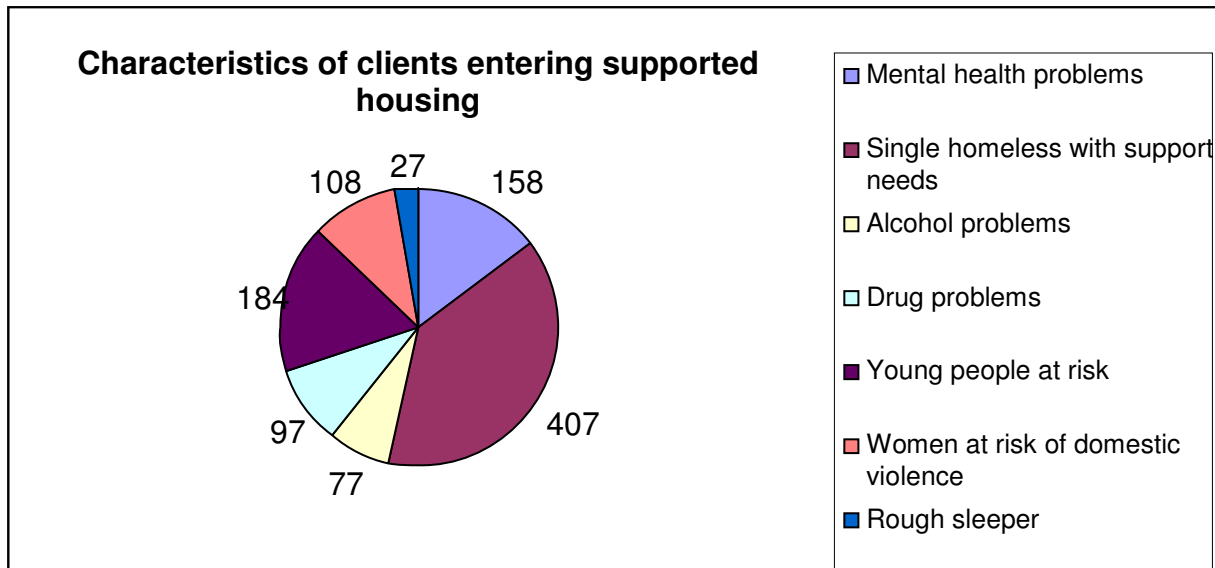
## Section 4

Significant levels of re-entries also occur from prison (three people or 12% of group) and hospital (likely psychiatric) (seven people or 18% of group), but numbers are relatively low and the originating situation is by its nature both temporary and necessary.

### 4.5.2 Primary and secondary characteristics

The pie chart shows the number of clients who were assessed as having one of these characteristics either as a primary or a secondary issue.

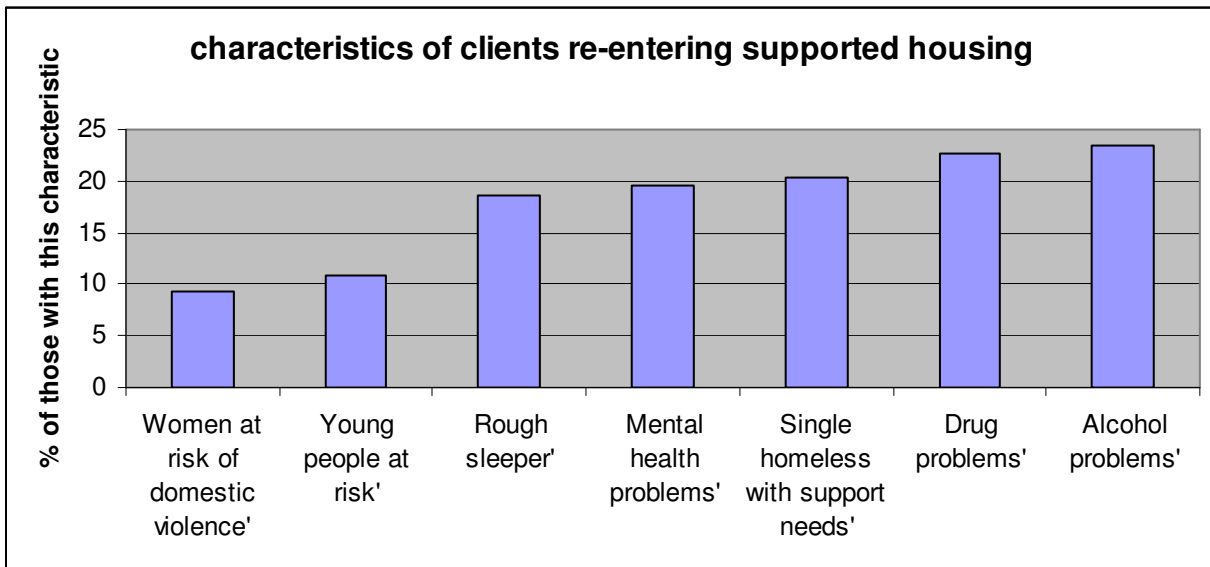
Chart 8



When we look at how likely clients with certain issues are to re-enter supported housing, we find that this is least likely where they are women at risk of domestic violence or are young people, somewhat at odds with the conclusions noted elsewhere in relation to the first group, where both refuges and service users noted that they may return home on repeated occasions before making the final break and moving on permanently. The most common factor is drug or alcohol misuse, unsurprisingly, since this group is reported as frequently losing supported accommodation because of continuing use of substances.

## Section 4

Chart 9



# 5 The scale and nature of repeat homelessness in Bradford – analysis of snapshot survey and service user and stakeholder feedback

## 5.1 How the snapshot survey was conducted and who responded

The snapshot survey carried out in Bradford in June 2009 was aimed at discovering the scale of the repeat homelessness problem in the city, and the characteristics of the people affected. In this section, we will focus on the overall scale of the problem.

The snapshot survey asked agencies to let us know the details of people they were currently working with who:

- Had been homeless more than once
- Were homeless on the last occasion of homelessness within the last two years.

Homelessness was defined as being without accommodation or having to seek help because they were about to lose their accommodation, or needed to find temporary accommodation.

The survey was sent electronically to around 140 email addresses, and we received responses from 26 different agencies, with a further nine saying that they were not able to complete the survey for a number of reasons, usually to do with capacity. One agency which was not able to do so (a drug treatment provider) noted that they had around 100 clients they were currently working with who experienced repeat homelessness, and several responded to the more general questions in the survey (section one), but were unable to extract information to tell us (in section two) about individuals they were currently working with. It should also be noted that a number of agencies sent in returns for several of their services.

Most of the larger housing support and housing advice services responded to the survey, along with almost all of the women's refuges, and several drugs agencies. The main gaps were in relation to statutory social care services, both for children and adults (with the exception of the Leaving Care Service), and Probation and the YOT. It should be noted, however, that the YOT in Bradford reports a very low incidence of homelessness or housing problems amongst its clients, and it is likely that only a very small number of cases would have been included in the survey.

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The breakdown of types of respondents is shown below:

*Table 11*

<b>Types of respondents</b>	<b>Number</b>
Day/outreach services	3
Supported housing/floating support providers	11
Women's refuges	4
Substance misuse services	5
Housing advice	2
Criminal justice service	1
Statutory care service	1

As well as filling in a row of the electronic survey for each person currently involved with the agency with a history of repeat homelessness, agencies were asked (in section one of the survey) to say how many people they thought they deal with in an average year who had been homeless more than once.

### ***5.2 The headline figures – numbers of people experiencing repeat homelessness as shown by the snapshot survey***

The 26 organisations who responded to the survey sent in returns for a total of 414 people. When the identifiers of initials, date of birth and gender were compared, there were 14 records which appeared to be duplicates (eight from Bradford Advice Centre, and five from two different organisations, and one from four different organisations), and removing the duplicates brought the total down to 400.

It is likely that some of the 400 people would also have been clients of the supported housing or housing advice providers, drug treatment agencies, as well as Probation or the YOT. In 2008/09, the Probation teams in Bradford worked with around 105 people who had no or very insecure accommodation at the start of their licence; it is not possible to estimate how many of those were homeless on more than one occasion. The YOT is involved with a small number of young offenders who have housing difficulties to a degree that they are socially excluded or exposed to a risk of harm: ten in total in 2008, and a further six who were placed in B&B or hostels. Most of the YOT's clients with housing difficulties are able to resolve them through accommodation with Foundation/Incommunities.

Overlaps are possible, but less likely, with adults with severe or enduring mental health problems unless they were housed within the supported housing sector, and with families with children who did not experience substance misuse problems. The total of 400 is likely then to be an underestimate, but by how much is difficult to calculate.

Section one of the survey asked agencies to say how many people they estimated that they saw each year who had been homeless before. Responses varied from an estimate based on the total number of people they worked with each year, to an exact number taken from their records. Adding up all these figures and estimates, the total number of

## Section 5

repeat homeless households that these 26 agencies estimate to see in a typical year is 1,244.

This is a very large number, but it must be noted that there will be some overlap between agencies, with some people involved with more than one agency at the same time (for example, the same woman could potentially be counted by the Working Women’s Project, the Day Shelter, Homekey, and a women’s supported housing scheme). It is also clear from the responses that some agencies counted as repeats for this purpose only those who came back to their own service more than once, whilst others looked at how many people they knew had been accommodated by several different housing providers, or had sofa surfed and then been accommodated when that accommodation broke down. This figure, then, does not give us an accurate count of numbers of people who experience repeat homelessness incidents in one year, but provides a guide to the number of moves there are around the city. This too is likely to be an underestimate, whilst indicating a significant yearly cost – to the government, the taxpayer, and to the individual.

It is not possible to say what proportion this presents, either of the total caseload of those agencies, or of the total number of people who might be homeless at any point of time. To do this would have needed considerably more detailed research. It would be interesting to explore the incidence of repeat homelessness were a tracking system of some sort to be introduced in Bradford.

To supplement the information about how many people had been homeless more than once, section two of the snapshot survey also asked how many times people had been homeless, and table 12 shows that the majority (74%) of those with a response for this question had been homeless between one and three times before the most recent incident.

*Table 12 – number of times homeless previously*

Number of times homeless before	Number of returns	Percentage of those with a response for this question
1	80	23
2	112	33
3	61	18
4	33	10
5	20	6
6	13	4
7	4	1
8	7	2
9	1	0
10	3	1
More than 10	7	2
No data	59	
<b>Total</b>	<b>400</b>	

Eighty-five people had been homeless four times or more, and ten had been homeless ten times or more.

## Section 5

It is not possible to cross-reference the findings from the snapshot survey and the service user work, since we were not always provided with initials or dates of birth, but most of the 70 service users consulted did provide information about how many times they had been homeless:

- Around 30 said they had been homeless between two and four times
- Around ten said they had been homeless between five and ten times
- Thirteen people said they had been homeless on many occasions, three more than 15 times, three more than 20 times.

Case study B provides a brief insight into the history of someone who has lost their accommodation more than 20 times since 1990, and more than five times in the last two years.

Together, the two elements of the research show that most people experience repeat homelessness between two and four times, but a significant number are homeless on repeated occasions, with some affected more than 20 times.

The following table shows the length of time between the original and most recent incident of homelessness. From this information, it can be seen that at least 85% (293 people) of the group included in the survey had become homeless twice within the space of two years.

*Table 13 – length of time between the original and most recent incidence of homelessness*

Length of time	Number of returns for this question	%
Less than 3 months	62	18
3-6 months	61	18
6-12 months	91	26
1-2 years	79	23
3-5 years	40	11
5-10 years	11	3
More than 10 years	6	2
<b>Total</b>	<b>350</b>	<b>100</b>

50 records did not respond to this question

Even for those who had been homeless four times or more (just under a quarter of the total with a response for this question), the length of time between the original period of homelessness and the most recent was more likely to be under two years than between three and ten years. Frequent periods of homelessness can thus be seen to be an escalating problem for a small group. The analysis also shows, however, that a number of people who had been homeless only twice or three times had experienced a long gap between the original and most recent incident, with 15 people who had been homeless three times with a gap of up to ten years between the first and last incident.

This appears to follow a similar pattern to the gaps between periods of homelessness for homeless applications and preventions recorded by the Housing Advice Service.

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### 5.2.1 Numbers from the snapshot survey presenting at the Housing Advice Service

The two tables below show that although most people (just over half) were known to have presented as homeless or needing help to find accommodation or resolve their housing problem, almost a quarter were not thought to have presented as homeless on this occasion, and over a quarter on previous occasions. This tallies with the findings of both the service user consultation, and several of the stakeholder interviews, in which particular groups – notably young people and single people – were said to be reluctant to make contact with housing advice because of their previous experience of doing so (this issue will be explored later).

*Table 14 – whether applied as homeless*

<b>Made homeless application within last two years</b>	<b>Total</b>
No – never applied	98
Not sure	64
Pending	7
Yes – accepted as stat homeless	106
Yes – not accepted, intentionally homeless	23
Yes - not accepted, not eligible	11
Yes – not accepted, not homeless	23
Yes – not accepted, not in priority need	40
Yes, accepted but no local connection	4
Yes, but prevention work carried out	10
No data	14
<b>Grand total</b>	<b>400</b>

*Table 15 – previous application as homeless*

<b>Had they ever made a homeless application before this?</b>	<b>Total</b>
Don't know	111
No	134
Yes	135
No data	20
<b>Grand total</b>	<b>400</b>

## 5.3 Basic demographics of the people included in the survey

### 5.3.1 Age and gender

Just over half of the total of 400 were male. This is a lower figure than might have been expected, but can be explained in part by the number of returns from agencies working only with women (refuges and others).

As both the Scottish and Glasgow research found, the age group which is most affected by repeat homelessness is the middle band, in this case the 25 to 40-year-olds. A small number of under-18s and over-60s are affected, with those aged between 18 and 20 and over 40 being affected in larger proportions.

## Section 5

In the service user consultation, seven of the 70 people interviewed said they had become homeless before they were 16; two male and three female. In one case, the homelessness at this young age was related to the threat of a forced marriage.

*Table 16 – male/female age split*

Gender	Age group						Total
	16-17	18-20	21-25	26-40	41-60	61 plus	
<b>Female</b>	6	45	46	77	22	0	<b>196</b>
<b>Male</b>	15	43	25	76	43	2	<b>204</b>
<b>Total</b>	21	88	71	153	67	2	<b>400</b>
<b>Females (%)</b>	1.5	11.25	11.5	19.25	5.5	0	<b>49%</b>
<b>Males (%)</b>	3.75	10.75	6.25	19	10.75	0.5	<b>51%</b>
<b>Percentage of whole age group</b>	<b>5%</b>	<b>22%</b>	<b>6%</b>	<b>38%</b>	<b>22%</b>	<b>0.5%</b>	<b>100%</b>

### 5.3.2 Ethnic origin

In relation to ethnic origin, the table below shows that just under three-quarters of the group were white British, with Pakistani and other Asian or Asian British individuals being most likely to be affected by repeat homelessness of the other ethnic groups. This broadly reflects the profile of enquirers given prevention advice at Bradford Housing Advice Service, which in 2007/08 saw 74% white British and 12% Pakistani, but the pattern for homeless presenters was a little different, with the proportion of white British presenters lower at 69%, a similar proportion of Pakistani presenters (12%), and a larger group of African Caribbean at 9%. The picture for 2008/09 is very similar. There is also little difference in the relative proportions for accepted households.

Of the 70 people involved in the service user consultation, 25 people were from ethnic backgrounds which were other than white British, with most of these being women who had experienced domestic abuse or violence, or a threat of forced marriage. Issues raised by some of those people about language and ethnic origin in relation to repeat homelessness will be covered later.

*Table 17 – ethnic origin*

Ethnic group	Number	Percentage total
African	4	1
Bangladeshi	1	0.25
Caribbean	4	1
Indian	1	0.25
Irish	5	1.25
Other	4	1
Pakistani	26	6.5
White and Asian	2	0.5
White and black Caribbean	10	2.5
Asian or Asian British	17	4.25
Black or black British	2	0.5



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Ethnic group	Number	Percentage total
Irish	1	0.25
Mixed	1	0.25
Other	15	3.75
Pakistani	2	0.5
White and Asian	1	0.25
White and black African	1	0.25
White and black Caribbean	2	0.5
White British	298	74.5
No data	3	0.75

### 5.3.3 Household type

Single people were overwhelmingly the largest group of people experiencing repeat homelessness in Bradford, with 24% having or due to have children. It might have been expected that more people were in couples, since during the service user consultation, we saw eight people who were part of a couple and some stakeholders told us that couples could have difficulty finding accommodation together.

*Table 18 – household type*

Household type	Number	Percentage total
Couple	1	0.25
Couple pregnant (no other children)	6	1.5
Couple with children	9	2.25
Lone parent	73	18.25
Single person	303	75.75
Single pregnant (no other children)	5	1.25
No data	3	0.75
<b>Total</b>	<b>400</b>	<b>100</b>

### 5.3.4 Where people came from and where they wanted to be

In relation to where people originated from, the table below shows that there was a fair spread of original locations around the city. Eighteen percent of those for whom there was a location given came from outside Bradford.

The survey also asked where people wanted to be, and what type of accommodation and support they would like to have, and this is shown in the far right column. The table implies that people are happy to stay in the area where they came from; however, there are different people across the two sets, with, for example, a quarter of the 142 who want to be in the city central coming from outside originally, and around a fifth of the 135 who came from outside the city central wanting to be there now. This provides some comfort that there is a balance of original location and desired location across this particular group. (A map showing the areas listed can be found in appendix four.)

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Table 19 – original home area and desired location of repeat homeless people

Where they came from	Total original home area	Total desired location
Bingley-Shipley-Baildon	26	35
City Central	134	142
City North	43	47
City South	70	65
Craven and Wharfedale	4	5
Villages	2	5
Keighley	26	24
Elsewhere in West Yorkshire	35	29
Elsewhere in Yorkshire and Humberside	9	4
Elsewhere in England, Scotland or Wales, or N Ireland	19	7
Outside UK	4	2
<b>Total</b>	<b>372</b>	<b>365</b>

NB: No data in 28 cases for home area, and 35 for desired area

Table 20 – original home area by desired location

Where they want to be → Where they came from (down)	BSB	CC	CN	CS	CW	E	EWY	EYH	K	No data	OUK	V	Grand total
<b>BSB</b>	19	3	1				1		1	1			26
<b>CC</b>	4	106	6	7		1	5	1		1		3	134
<b>CN</b>	4	4	25	5		1	1		2		1		43
<b>CS</b>	1	10	7	46		2	3		1				70
<b>CW</b>					4								4
<b>E</b>	3	4	1	4	1	2	3			1			19
<b>EWY</b>	3	7	4				13	1	3	2	1	1	35
<b>EYH</b>		2		1			2	2	2				9
<b>K</b>	1	2	1	2		1	1		15	3			26
<b>No data</b>			1							27			28
<b>OUK</b>		3	1										4
<b>V</b>		1										1	2
<b>Grand total</b>	<b>35</b>	<b>142</b>	<b>47</b>	<b>65</b>	<b>5</b>	<b>7</b>	<b>29</b>	<b>4</b>	<b>24</b>	<b>35</b>	<b>2</b>	<b>5</b>	<b>400</b>

### Key

<b>BSB</b>	Bingley-Shipley-Baildon
<b>CC</b>	City Central
<b>CN</b>	City North
<b>CS</b>	City South
<b>CW</b>	Craven and Wharfedale
<b>E</b>	Elsewhere in England, Scotland or Wales, or N Ireland
<b>EWY</b>	Elsewhere in West Yorkshire

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<b>EYH</b>	Elsewhere in Yorkshire and Humberside
<b>K</b>	Keighley
<b>OUK</b>	Outside UK
<b>V</b>	Villages

### 5.3.5 Aspirations about type of accommodation and support

Understandably, most people (three-quarters of those included in the survey) are thought to prefer their own tenancy. Of these, almost two-thirds would require some form of support. Of the remainder, a total of 90 people still need some form of housing with support on site or as a fundamental part of the provision. A small number, 17, were not seen as being able to move forward towards independence at this point, and this is a critical number in terms of the work that needs to be done with people staying in supported housing who are seen as not able to manage their own home, or perhaps a setting with less intensive support, and those who move frequently between supported housing schemes and are unable to stay anywhere long enough to show that they can move forward to more independent settings.

*Table 21 – aspirations for future housing and support*

<b>Preferred next step</b>	<b>Total</b>
Long-term housing with support	12
Specialist supported housing	33
Supported housing – shared flat	20
Temporary accommodation – hostel	15
Own tenancy	106
Own tenancy – shared flat	2
Own tenancy with more specialist floating support	29
Own tenancy with short term or occasional support/resettlement advice	41
Own tenancy, with ongoing floating support	105
No desire to move forward	17
<b>Grand total</b>	<b>380</b>

No data provided in 20 cases

## 5.4 Causes of homelessness and barriers to moving forward from homelessness as shown by the snapshot survey

The question about causes was asked in all parts of our research.

### 5.4.1 Snapshot survey

Respondents were asked to identify the main original cause of homelessness, with up to three choices of cause for this incidence of homelessness, and up to three choices of cause for the most recent incidence of homelessness. The table below shows the main cause in each for each of these occurrences.

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The top causes of repeat homelessness for the original incidence were:

- Parental eviction
- Violent relationship breakdown
- Loss of home with a friend
- Rent arrears/loss of rented home
- Loss of supported housing
- Leaving an institution
- Non-violent relationship breakdown.

For the most recent incidence, the top causes were:

- Loss of home with a friend
- Parental eviction
- Violent relationship breakdown
- Leaving an institution
- Rent arrears/loss of rented home
- Non-violent relationship breakdown.

*Table 22 – main cause of repeat homelessness – original and most recent*

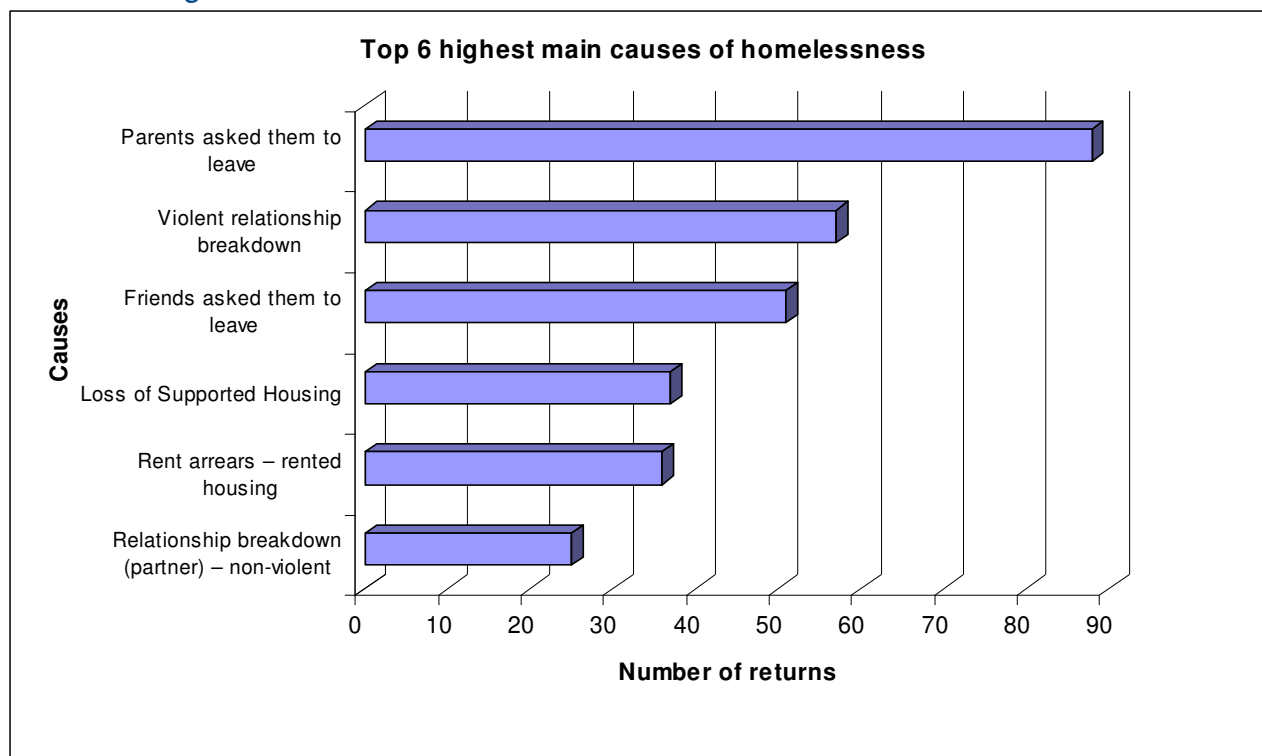
Cause	Main original cause	Main most recent cause
Asked to leave supported housing – drug or alcohol use	15	16
Asked to leave supported housing – non-payment	10	10
Asked to leave supported housing – violence or abuse	12	15
<b>Total asked to leave supported housing</b>	<b>37</b>	<b>41</b>
End of assured shorthold tenancy	12	13
Illegal eviction	1	1
Property closed because of poor conditions or anti-social behaviour	2	3
Rent arrears – rented housing	36	18
Walked out – accommodation unsuitable	9	16
<b>Total loss of rented home</b>	<b>60</b>	<b>51</b>
Parents asked them to leave	88	56
Threat of forced marriage	1	4
Ran away from parental home (under-16s only)	3	0
<b>Total parental eviction</b>	<b>92</b>	<b>60</b>
Relationship breakdown (partner) – non-violent	25	14
Violent relationship breakdown	57	36
<b>Total relationship breakdown</b>	<b>82</b>	<b>50</b>
Leaving hospital, care, prison, or rehab	25	26
Mortgage arrears	4	2
Friends asked them to leave	51	57
Property demolished	4	3

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Cause	Main original cause	Main most recent cause
Racial harassment	3	0
Other harassment	14	16
Fire or flood		1
Squat closed		1
<b>Grand total</b>	<b>372</b>	<b>308</b>

28 blank records for original main cause, 92 for most recent main cause

*Chart 10 – highest six main causes of homelessness*



We have looked further at the most recent causes for each of the main original causes of homelessness. The principal conclusions to draw from this are unsurprising but are shown below:

- People frequently go back to their parents' home having left previously
- There is frequent movement between parents' homes and supported housing, institutions, and friends' homes
- Women frequently return to the home they left because of a violent relationship, but they may also go to their parents' home or that of friends, or to an institution
- There is frequent movement between the houses of different friends
- Having lost a home because of rent arrears, most people move in with friends
- People whose original homelessness came as a result of leaving an institution may move in with a partner, parents or friends, on a temporary basis.

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A further analysis of the returns by cause as well as barriers to moving forward enables a few other conclusions to be drawn:

- People threatened with a forced marriage are also likely to be risk of violence, presumably from a relative
- Other harassment which leads to homelessness is likely to come from a landlord, friend, or partner
- Rent arrears are often linked to relationship breakdowns or to leaving an institution
- Other reasons given for the loss of a home included the breakdown of a foster carer placement or residential care placement, and the end of a supported housing placement.

### 5.5 *Groups most affected by repeat homelessness*

#### 5.5.1 *Client group analysis*

This section of the report covers the scale of the problem for each main group, and the causes and barriers reported by both stakeholders and service users.

The snapshot survey asked what type of vulnerability each person had, and gave three opportunities for stating a vulnerability. There was no data for 22 of the 400 people, and in respect of 69 people, the agency making the return felt they had no other vulnerability other than homelessness. This leaves 309 people who had vulnerabilities that were known about and thought to be relevant.

#### 5.5.2 *Summary*

The largest group of people reported as being affected by repeated bouts of homelessness in the survey is those with drug and alcohol problems, who account for 61% of the people included; 188 individuals or households. Of these, people with drug problems form the larger group. A small number (24 people) were reported as having both problems, and only ten households with drug and/or alcohol problems had or were due to have children. A total of 68 people had an offending history, 22% of the total, but for most this was seen as a secondary issue. People in these groups are affected by difficulties in accessing both supported housing and rented housing, and for some people, losing supported housing is frequently due to their behaviour or use of drugs or alcohol.

A significant number of young people included in the survey were described as vulnerable because of their age or a history of care, a total of 115 young people, 37% of the total, although not all of these were very young, that is, under 18 or even 21. A history of care, or a history of abuse as a young person, can affect people's ability to manage independence in a home of their own and for some time. It is important to note that in Bradford, fewer young offenders have severe housing difficulties than in many other areas, and the collaboration that exists between the YOT and Foundation Housing appears to be able to help to meet most needs. Few young offenders appeared as repeat homelessness presenters in the survey, and most had been involved with the leaving care service. There

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were no under-16s counted in the survey, but it should be noted that amongst the service users interviewed individually or in groups there were seven people who had become homeless when they were under 18, and the need for help for 'young runaways' was identified as an issue by both this group and by several agencies, particularly those working with young people at risk of sexual exploitation.

The next largest group was families affected by either domestic violence or abuse, or forced marriages, or both. This affected 106 households, 34% of the total. Other families who had been homeless more than once comprised a fifth of the total, 61 families. These were likely to be households affected by a fear of violence or harassment, as well as their histories of anti-social behaviour, but in many cases a chaotic way of managing the household's affairs, and failing to engage with agencies, including education and health, is linked to their ability to maintain a home for the family.

People who have mental health needs were highly represented in the survey, despite no statutory mental health teams having responded. A third of the total, 103 households, were thought to have some level of mental health need, but only 31 had this as their main issue.

A smaller group of households – 27 households, 9% of the total – involved sex workers, many of whom had experience of being asked to leave or not being able to access supported housing.

Other groups affected by repeat homelessness, to a smaller extent, are people with learning difficulties or disabilities and refugees, and a very small number of households who had faced racial harassment.

Many of the people included in the survey had more than one vulnerability, with a third having at least three issues which were felt to be relevant. The largest group of these, 42 people in total, had a dual diagnosis of drug or alcohol problems as well as mental health needs. Barriers to moving forward might be their behaviour, as well as difficulties in getting assessments which could help housing agencies to understand the risks involved and what packages of care and support could be put in place.

### *5.5.3 Barriers to resolving housing problems*

Respondents were also asked to note what was stopping people resolving their housing problems and remaining at risk of repeat homelessness, with the opportunity to look at up to three barriers and to note any particular issues not covered in the given list. The three main barriers have been grouped, and the table below shows what the primary barriers are felt to be. This shows that the greatest number of people are affected by being unable to access housing – either supported or social housing – because of addictions, criminal records, debt or other financial problems, not being eligible for a tenancy, or not being able to manage a tenancy. A significant number is shown to be unable to move forward because of fear of harassment or violence.

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Table 23 – main barriers to resolving homelessness, grouped

Group: main barrier to resolving their homelessness 1	Main barrier to resolving their homelessness 1	Total
<b>Age or vulnerability</b>	Lack of literacy	1
	Vulnerable to exploitation	10
<b>Age or vulnerability total</b>		<b>11</b>
<b>Drug/alcohol/addiction</b>	Alcohol use	29
	Drug use	67
	Gambling addiction	1
<b>Drug/alcohol/addiction total</b>		<b>97</b>
<b>Exclusion from social housing</b>	Criminal record	12
	Not able to manage a tenancy	55
	Other debt	5
	Rent arrears	22
	Too young to hold a tenancy	15
<b>Exclusion from social housing total</b>		<b>109</b>
<b>Fear of violence/anti-social behaviour/abuse</b>	Fear of harassment, domestic abuse, or anti-social behaviour	33
<b>Fear of violence/anti-social behaviour/abuse total</b>		<b>33</b>
<b>Finance problem</b>	Does not have deposit/rent in advance	31
<b>Finance problem total</b>		<b>31</b>
<b>No available support/provision</b>	No suitable provision	12
	Support can't be arranged	1
<b>No available support/provision total</b>		<b>13</b>
<b>No recourse to public funds</b>	No recourse to public funds	3
<b>No recourse to public funds total</b>		<b>3</b>
<b>Violence/anti-social behaviour</b>	Other anti-social behaviour	21
	Violent behaviour	13
<b>Violence/anti-social behaviour total</b>		<b>34</b>
<b>Will not accept accommodation provided</b>	No desire to move into a house	5
	Unwilling to accept area or type of settled accommodation available	6
	Unwilling to accept offer of temporary accommodation	7
<b>Will not accept accommodation provided total</b>		<b>18</b>
<b>Grand total</b>		<b>348</b>

52 records with no data

Of the 349 people where a barrier was recorded, 269 had a secondary barrier identified, and 169 had a tertiary barrier identified.

The additional comments made by those who sent in the returns about individuals include a variety of useful points, such as:

*“abandons any accommodation offered”*



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*“has problems with behaviour of his friends in his flat, quite immature, and problems with managing money”*

*“vulnerable to exploitation by others “*

*“lack of social rented housing“*

*“literacy and cultural issues means person is currently unable to manage own tenancy”*

*“health issues: memory loss, forgets to pay bills or purchase food and becomes ill”*

*“chaotic lifestyle”*

The next few pages display information about the scale of need amongst the main client groups and what is causing people in those groups to repeatedly show up as homeless in one setting or another, drawn from:

- The snapshot survey
- Service user feedback and comment, including the peer researchers
- Stakeholder consultation at workshops and interviews.

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Table 24

Scale of need identified amongst repeat homeless	Causes of repeat homelessness/barriers to moving on
<b>Drug and alcohol users, and offenders</b>	
<ul style="list-style-type: none"> <li>• A total of 188 individuals with drug and/or alcohol problems, 61% of the total included in the survey</li> <li>• 106 people had a drug problem, 76 with this as their main problem</li> <li>• 72 people had an alcohol problem, with 38 having this as their main problem</li> <li>• 24 people had both problems</li> <li>• A total of 68 had an offending history, 22% of the total</li> <li>• 17 people had an offending history as their main problem, and 51 as their secondary or tertiary problem</li> <li>• 41 people had a drug problem as well as offending history</li> <li>• 15 had an alcohol problem and an offending history</li> <li>• Ten households with or due to have children were reported as having drug or alcohol problems</li> </ul>	<p><b>Substance misusers</b></p> <ul style="list-style-type: none"> <li>• Repeated violent or abusive behaviour, and non-payment of charges, causes people to be asked to leave supported housing</li> <li>• Use of drugs or alcohol on premises of supported housing not tolerated or drug paraphernalia being found, can lead to repeated eviction</li> <li>• Trying to stay clean/dry when others around the person are using, sharing, or selling substances – some people sleep on the streets, or re-offend in order to go back to prison, rather than stay in a hostel where others were known to be using drugs, and are likely to be homeless again on release</li> <li>• Breaking rules – but felt by service users not always for strong enough reasons</li> <li>• Having to have a clean test before being able to access some of the specialist provision</li> <li>• May lose people halfway through recovery pathway</li> <li>• Not being able to manage a tenancy</li> <li>• Not having enough to do</li> <li>• Debt, and arrears due to delays in moving in, or not completing benefit forms</li> <li>• Criminal behaviour</li> <li>• Not being able to be housed with dogs, and other reasons for being unwilling to stay in hostels</li> <li>• Mental health problems</li> <li>• Lack of help/information to challenge eviction from private rented accommodation, and poor quality of much accommodation in that sector</li> <li>• Forcing people to move to areas they do not want to be in for temporary accommodation</li> <li>• Low self-esteem and low confidence, and inability to make own decisions (e.g.</li> </ul>

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Scale of need identified amongst repeat homeless	Causes of repeat homelessness/barriers to moving on
	<p>following the crowd, within shared accommodation)</p> <ul style="list-style-type: none"> <li>• Homehunter scheme not helping quickly enough</li> </ul> <p><b>Offenders</b></p> <ul style="list-style-type: none"> <li>• Many offenders leave prison with rent arrears: work to retain tenancies and sort out HB for short sentences, or to terminate tenancies quickly at the start of longer sentences, is rarely being done in local prisons</li> <li>• For Home Detention Curfews and Early Releases, release often arranged at very short notice, leading to repeat homelessness if offender had no accommodation to return to – often accommodation arranged with family breaks down very quickly</li> <li>• Relationship between Young Offenders Institute (YOI) and Probation not good enough – when older young people leave YOI, they may come out with no help to access housing</li> <li>• Refusal of referrals to supported housing because of arson offences is often hidden by offenders but not by Probation, leads to person being asked to leave with no other options – but offence may no longer be current or pose a real risk</li> <li>• Lack of up-to-date knowledge and information for frontline Probation staff about provision</li> <li>• Lack of ID can restrict access to supported or other housing</li> </ul> <p>Case studies in appendix one show different factors for single people, drug and alcohol users and offenders, becoming homeless repeatedly</p>
<b>Young people</b>	
<ul style="list-style-type: none"> <li>• A total of <b>115</b> young people were described as vulnerable young people or having been in the care system, <b>37%</b> of the total</li> <li>• 59 people were described as young people leaving care or were included in the survey</li> </ul>	<ul style="list-style-type: none"> <li>• Repeat family breakdown/lack of family support – family disputes (with and without violence) – having to go back into the same abusive situation, or being thrown out by parents, invited back, and thrown out again; where young people act as carers for parents, mediation is used but does not often work</li> <li>• Unwillingness to accept hostel accommodation or to move away from home area</li> </ul>

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Scale of need identified amongst repeat homeless	Causes of repeat homelessness/barriers to moving on
<p>by the Leaving Care Service</p> <ul style="list-style-type: none"> <li>• 20 of the total had drug problems</li> <li>• Ten had alcohol problems</li> <li>• 26 had offending histories, 22 of whom had been in the care system</li> </ul>	<p>(e.g. Keighley vs Bradford) – young people also less likely to turn up for appointments at accommodation outside their home area – results in frequent no shows for some providers</p> <ul style="list-style-type: none"> <li>• Hostels are not the right environment for all young people: can be badly affected by group behaviour, or bullied, and may take on aspects of the chaotic behaviour of others</li> <li>• Learned behaviour for young people in the care system – develops unsettled lifestyles for the future</li> <li>• Young people with no money to get to their accommodation have to go to another place (Connexions) for their fare, may not turn up</li> <li>• Accessing hardship payments is not easy, and if parents will not admit the young person is estranged, they may be homeless for some time or repeatedly</li> <li>• Not enough information disseminated to young people about options including how to get to emergency accommodation</li> <li>• Reluctance to deal with homeless under-16-year-olds</li> <li>• Young people often prefer not to go to Incommunities for help, but go to BCCP or Information Shop</li> <li>• Under-18s currently suspended from housing register automatically</li> <li>• Some landlords are reluctant to take young people even with a bond</li> <li>• Not enough move-on for young people and affordability is an issue</li> <li>• Drug or alcohol problems</li> <li>• Anti-social behaviour or other tenancy breakdown</li> <li>• Racism</li> <li>• Poor private rented properties/landlords</li> </ul> <p>Case studies in appendix one describe some of the causes of repeat homelessness for two young people, and the difficulty of resolving their problems</p>

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Scale of need identified amongst repeat homeless	Causes of repeat homelessness/barriers to moving on
<b><i>People fleeing domestic violence and forced marriages</i></b>	
<ul style="list-style-type: none"> <li>• <b>106</b> households had domestic violence as the reason for vulnerability, 43 of them with this as the primary vulnerability</li> <li>• This is <b>34%</b> of the total</li> <li>• All but two of these were women</li> <li>• 12 households had been involved in threats of a forced marriage, four of them involving domestic violence</li> </ul>	<ul style="list-style-type: none"> <li>• Repeat homelessness caused by partners finding them, so people not feeling safe any more and having to move; uprooting children, and the scale of the decision and effect on children often drives women back repeatedly to their partner, until they eventually get the support and courage to not return</li> <li>• Overcrowding</li> <li>• Not able to manage tenancy</li> <li>• No family support, honour crimes, forced marriage, peer pressure from family status in community</li> <li>• Housing associations are requiring police evidence or other evidence of domestic violence (e.g. from GP) before they will accept women onto their lists, so prolongs the stay in temporary accommodation</li> <li>• Drug and alcohol misuse – and it can be hard to access supported housing for women with drug/alcohol problems as well as experience of domestic abuse</li> <li>• Some extended families are homeless together but cannot be placed in TA together (e.g. a family with children and a woman without) – this divides families and could lead to them going back to an abusive situation</li> <li>• Women experiencing violence may also have been in care, or been in prison, or be involved in sex work; these issues all add to their difficulties in resolving their housing problems</li> <li>• Financial problems and repossessions and loss of tenancy due to the recession</li> </ul>
<b><i>Other families</i></b>	
<ul style="list-style-type: none"> <li>• <b>61</b> families who had been homeless more than once were in families with children, but had not experienced domestic violence, <b>20%</b> of the total</li> <li>• Nine of these households were vulnerable as they were or had been teenage parents</li> </ul>	<ul style="list-style-type: none"> <li>• A number of families have repeated family breakdowns, or may move for no apparent good reason, mostly chaotic families exhibiting ASB and harassment from neighbours</li> <li>• Failure to engage with services – children not in school, health, employment support, support services, advice services, chaotic, transient lifestyles</li> <li>• Lack of family and community support</li> </ul>

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Scale of need identified amongst repeat homeless	Causes of repeat homelessness/barriers to moving on
	<ul style="list-style-type: none"> <li>Many of these households are excluded from social housing because of rent arrears, behaviour, or inability to manage a tenancy, or being unwilling to accept what is likely to be offered</li> </ul> <p>Case study D describes the difficulties sometimes experienced with families who are refusing to work with support agencies, and repeatedly losing their homes</p>
<b>People with mental health problems</b>	
<ul style="list-style-type: none"> <li>31 households had mental health needs as their main vulnerability, and a further 72 as their secondary or tertiary vulnerability, giving a total of 103, or 33%</li> </ul> <p>(NB: no returns from mental health teams)</p>	<ul style="list-style-type: none"> <li>People in this group can be refused supported housing referrals because of an assumed rather than assessed risk</li> <li>A small group of people refuse to take supported housing, especially shared accommodation</li> <li>There is a need for stays longer than two years</li> <li>Repeat homelessness can be caused by a refusal to pay rent or service charges; there is a need to pay LHA direct from the start of a tenancy (it is unlikely to that the threshold for the Mental Capacity Act would be reached for someone in this situation where there were no other critical factors)</li> <li>Concerns about the person's ability to manage a tenancy, their vulnerability to harassment, and rent arrears were seen as the main barriers to moving forward for this group</li> <li>Several agencies identified breakdowns in collaboration and communication about this group as contributing to difficulties in resolving repeat homelessness – there is a multi-agency panel for resolving housing problems for this group but it had not met for a while and it was unclear why this was, and whether both housing and mental health workers had a shared view of its remit and who could request a meeting (the new team co-ordinating casework where people are due to leave hospital should help to address these issues)</li> <li>Other barriers include difficulties in identifying any appropriate solutions, for a small group of people who have lost their accommodation on a number of occasions</li> </ul>

## Section 5

Scale of need identified amongst repeat homeless	Causes of repeat homelessness/barriers to moving on
<b>Sex workers</b>	
<ul style="list-style-type: none"> <li>• 27 households described as sex workers were included in the survey, 9% of the total</li> <li>• Ten of the 27 were homeless because of eviction from supported housing (six for use of drugs or alcohol)</li> </ul>	<ul style="list-style-type: none"> <li>• Some reluctance on the part of supported housing providers (e.g. refuges) to accommodate women who are sex workers – will only take one substance misuser at a time, so it reduces the options</li> <li>• Drug use in particular compounds all efforts to overcome the barriers placed by professional organisations when trying to secure and maintain tenancies</li> <li>• Inability to maintain the level of concentration needed to fulfil the level of bureaucratic requirements placed on individuals</li> <li>• Lack of right kind of support and for more understanding of the complex issues facing them – is improving but more dialogue needed</li> </ul> <p>Case study A shows how difficult it can be for someone in this group to resolve their housing problem, and how they may become homeless on many occasions</p>
<b>People with learning difficulties/disabilities</b>	
<ul style="list-style-type: none"> <li>• 28 people had a learning difficulty/disability, 9% of the total</li> <li>• Only five people had this as their main vulnerability</li> <li>• The remaining 23 had a variety of other problems or needs in addition</li> </ul>	<ul style="list-style-type: none"> <li>• Low level learning disability combined with other problems can compound people's ability to maintain accommodation</li> </ul>
<b>Refugees and others from BME communities</b>	
<ul style="list-style-type: none"> <li>• 15 households were described as refugees, plus one with no leave to remain, and one migrant worker</li> <li>• Three households, none of them refugees, were seen as being homeless more than once because of racial harassment</li> </ul>	<ul style="list-style-type: none"> <li>• Most of this group had lost settled housing, were homeless again after having been asked to leave by friends or relatives, and had no resources to make other arrangements for accommodation</li> <li>• 28 days' notice is seen as not enough to make arrangements for settled housing when refugee status is granted, and this can result in repeat homelessness</li> </ul>

## Section 5

Scale of need identified amongst repeat homeless	Causes of repeat homelessness/barriers to moving on
<b><i>People with complex needs</i></b>	
<ul style="list-style-type: none"> <li>• 193 people had more than one vulnerability, and 102 had at least three vulnerabilities</li> <li>• A small number of people had physical health or disabilities as well as other needs</li> <li>• 42 people had mental health needs as well as drug and/or alcohol problems, with the largest group (29) having both drug problems and mental health needs</li> <li>• Other multiple needs were spread across the full spectrum of needs</li> </ul>	<ul style="list-style-type: none"> <li>• Fair Access to Care Services (FACS) criteria are considered too high to meet needs, but in addition people with multiple needs may have high needs overall but find it difficult to get an assessment – it sometimes depends what route the referrals take, which agency is making it, whether someone gets an assessment and/or a package, especially if they have no involvement with statutory services</li> <li>• Supported housing is not easily accessed by people with multiple needs or no assessment (e.g. people with very poor physical health, or mental health needs as well as a substance misuse problem, or where there has been no mental health diagnosis (there are two specialist services for this group, one accommodation-based scheme of ten beds, and one floating support service)</li> <li>• Challenging behaviour of people with the most complex needs can lead to repeat homelessness, e.g. for people who have no address and will not make arrangements to receive letters about appointments</li> <li>• Vulnerable people may become homeless when their house is taken over for drug dealing</li> </ul>



### 6 Summary of current approaches to repeat homelessness, and issues and gaps identified

A large number of agencies are involved in helping people to resolve repeat homelessness in Bradford. This section of the report summarises what has been learnt about the way in which those agencies work to address repeat homelessness, and identifies where improvements could be made in services, and in partnership arrangements, to reduce the number of people likely to become homeless. Ideas of good practice from elsewhere, as well as existing services in Bradford, are included here.

This study has been carried out at a time when a number of changes are being implemented as part of the Enhanced Housing Options Trailblazer programme. The programme is intended to result in the following developments, many, if not all, of which will reduce the incidence of repeat homelessness amongst one or more groups of people:

- Improved physical environment of the housing options centre – to be more attractive, and more conducive to helping families with children (open moves)
- More prevention of homelessness – to work more closely with landlords and other agencies, provide earlier interventions, and have more joined-up interventions
- A specialist service for under-25s (Tcoy), with personal advisers making contact with all under-25s seeking housing as well as help to resolve homelessness or other acute housing problems
- More effective identification of needs, and development of pathways to address those needs more effectively
- New surgeries for resolving housing problems for people using criminal justice and drug treatment agencies
- Developing more options such as a wider rent guarantee scheme
- Tenancy-ready framework – a pathway out of supported housing, reducing homelessness through a city-wide system and panel for assessing readiness for a tenancy, and pre-tenancy training in use by all agencies (Move-On Strategy)
- Reduced homelessness by helping to improve health, and tackling worklessness and financial exclusion (Open Field)
- Changed culture and perceptions across the city about homelessness and social exclusion, and greater partnership work and inter-agency interventions
- A programme of action around the worklessness issue, including more activities to involve residents in Octavia Court to help them prepare for getting into employment or training.

These changes will sit alongside an improved system for access to social housing (Open Moves), which is designed to enable more single people and others not in priority need, including people who might face repeat homelessness, to bid successfully for Incommunities and other housing in the city.

In addition, a number of new housing support schemes, both accommodation-based and housing-related support, and services which complement housing support, have recently

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been identified and are being procured. This includes services for people with mental health problems, a dual diagnosis, people with mental health problems in BME communities, young offenders, and people with moderate to severe learning disabilities, a range of support services for young people including young people who have experienced sexual abuse, and a team which will work with people with mental health problems who need help to resolve a housing need before they can leave hospital.

It should be noted that it has not been possible, in this short piece of work, to identify and map every service or initiative which contributes to addressing repeat homelessness in Bradford. The suggestions below, therefore, could raise issues which may already be covered within an existing service or initiative, but it is hoped that amongst these and others covered later in the report are new ideas that will help to further address the problem within Bradford.

The following table records possible gaps in services or under-supply noted during the research:

<b>Homeless/housing options/prevention service</b>	<b>Supported housing</b>	<b>Settled housing</b>
<ul style="list-style-type: none"> <li>• Out-of-hours service for non-priority groups</li> <li>• Strategic planning of developments to tackle rough sleeping, case management system, and a communication plan to ensure that service users and agencies working with them understand what is going to happen to change the current picture</li> <li>• Gate scheme in place for people leaving prison, other than for DIP clients</li> <li>• Multi-agency complex case</li> <li>• Up-to-date information about vacant beds in emergency and other supported housing panel</li> </ul>	<ul style="list-style-type: none"> <li>• Wet provision for women</li> <li>• More provision in Bradford, Keighley and Shipley, to meet needs of different groups</li> <li>• A possible shortage of specialist provision for people returning from drug/alcohol rehabilitation</li> <li>• People with no drug or alcohol problem who do not want to mix with users</li> <li>• A need for longer-term supported housing than two years, for a small number of people</li> <li>• Provision for couples</li> <li>• Provision for people with dogs</li> <li>• Record-keeping system about scale of or reasons for loss of supported housing</li> </ul>	<ul style="list-style-type: none"> <li>• Council-led service offering advice and intervention for private tenants threatened with illegal eviction nor harassment</li> <li>• Leaflets and other information about how to access the private rented sector in Bradford, and where to go for help to resolve any problems between landlords and tenants</li> <li>• Protocol between the Council and Housing Associations aimed at preventing evictions</li> </ul>

The following table describes the current picture of service provision, incorporating comments made by agencies and service users about each aspect of service provision.

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Table 25

How services are currently provided	Issues identified by agencies and/or service users
<b>Housing advice, assessment, and prevention services</b>	
<p>The main services which help to resolve homelessness in Bradford are:</p> <ul style="list-style-type: none"> <li>• Bradford Housing Advice Service, run by Incommunities, providing housing advice, prevention, and homelessness assessment services on behalf of the council (three centres currently)</li> <li>• Keyhouse, contracted by the Council and Legal Services Commission to provide general advice and housing advice in Keighley and Bradford</li> <li>• Citizens Advice Bureaux (CAB)(three centres)</li> <li>• Catholic Housing Advice Service (CHAS) contracted by the Council and Legal Services Commission to provide general advice and housing advice in Bradford</li> <li>• Information shop for young people</li> <li>• Youth cafes (six locations currently, two more in development)</li> <li>• Hope Housing</li> <li>• Bradford City Centre Project</li> <li>• Bradford Day Shelter</li> </ul> <p>Housing advice or advocacy work is also part of a number of other activities</p> <p>Services available to private tenants needing help to prevent an eviction or harassment are:</p> <ul style="list-style-type: none"> <li>• Keyhouse – housing advice, and duty service at Keighley court,</li> </ul>	<ul style="list-style-type: none"> <li>• Need for a shift in culture towards prevention for all client groups and for all tenures (this is being addressed through the open moves, the new approach adopted to prevention work through the enhanced housing options trailblazer)</li> <li>• Non-priority homeless not always given sufficient help to find temporary accommodation – need for a consistent and persistent approach including case management for those on the streets</li> <li>• Young people not always keen to access the main services provided at the Housing Advice Service – need for specialist dedicated teams (as will be provided in Tcoy)</li> <li>• Mediation services have long waiting lists, so are not able to act quickly enough when a young person is threatened with homelessness, and are not always able to take into account the pressure being put on a young person who is a carer for a parent who has their own problems such as drug use or violence from a partner</li> <li>• People who resolve their homelessness problem themselves on a short-term basis may be deemed intentionally homeless when this breaks down because it comes to a natural end, or because of their behaviour – sometimes this can lead to longer and repeated incidences of homelessness</li> <li>• Families who have moved out of a private rented tenancy thinking they have been evicted may be seen as intentionally homeless even though there was no deliberate act, just one of ignorance, can lead to a feeling that the rules have been interpreted too harshly</li> </ul>

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How services are currently provided	Issues identified by agencies and/or service users
<p>will send letters to landlords to advise that they may have served a notice which does not comply with the legal requirements</p> <ul style="list-style-type: none"> <li>• CHAS – housing advice and duty service at Bradford Court, and will also write to landlords</li> <li>• CAB – court duty in Bradford and general housing advice</li> <li>• Bradford Housing Advice Service – mainly refers clients to Keyhouse or CHAS, but which may also inform landlords about inadequate notices</li> <li>• Three solicitors doing housing work</li> </ul> <p>There is also a mediation service in place within Bradford, working mainly with families where there is a threat of a son or daughter being asked to leave</p>	<ul style="list-style-type: none"> <li>• No evidence of leaflets on display about tackling problems for private tenancies on display in Bradford, other than those produced by CLG</li> <li>• 11% of Bradford’s housing stock is in the private rented sector, housing strategy identifies that much of it (around 25,600 properties) is below Decent Homes standard and occupied by vulnerable people</li> <li>• Many of the service users interviewed had had short spells in private tenancies</li> </ul>
<b>Day services</b>	
<p>Services are currently provided by:</p> <ul style="list-style-type: none"> <li>• Bradford Day Shelter</li> <li>• Information shop for young people</li> <li>• Youth cafes</li> <li>• Hope Housing</li> <li>• Bradford Working Women’s Project</li> <li>• Drug and alcohol services</li> <li>• A number of churches</li> </ul> <p>Many of these, other than the churches, offer housing advice, as well as a listening service, and services and activities which can help people to look at jobs available, build CVs, use computers, join in groups, and improve health. Some also have washing and</p>	<ul style="list-style-type: none"> <li>• Information about which places of worship offer services to homeless people is not very easy to find</li> <li>• This group of agencies did not seem sufficiently linked into the network of agencies tackling and preventing homelessness</li> <li>• Concerns that some of the current proposals for working with young people might replicate existing arrangements provided within the Youth Service in conjunction with other agencies – a danger of wasting valuable resources, and also of being confusing for young people</li> </ul>

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How services are currently provided	Issues identified by agencies and/or service users
<p>bathing facilities, and offer furniture or clothing. A number of churches and other organisations offer free or cheap meals</p>	
<b>Services addressing rough sleeping</b>	
<p>At the time of the study, there were three services identified as working with rough sleepers, in addition to the cold weather provision which recorded 63 rough sleepers using this provision between December 2008 and March 2009. Accommodation was provided at Norman Bank (the former main site of temporary accommodation), and through Hope House and Bradford Nightstop</p> <p>Bradford Nightstop provides accommodation for under-25s through host families, for up to three nights</p> <p>Hope Housing provides a nightstop service (accommodation for up to three nights with host families) for over-25s. This service opened in November 2008, and is still increasing its stock of volunteers to act as hosts</p> <p>The other scheme is a new offer of emergency accommodation provided by Bradford Cyrenians in conjunction with Yorkshire Housing, Bradford Day Shelter, the Bridge Project and Bevan House. This offers:</p> <ul style="list-style-type: none"> <li>• Accommodation for six men on condition that they engage with a Cyrenians worker one, two or three occasions each week</li> <li>• Housing-related support is offered for up to a year, alongside health, substance misuse, and counselling support</li> <li>• At the end of the year, the tenant may be offered the flat as settled housing, if they meet the criteria of the 'tenancy-ready'</li> </ul>	<ul style="list-style-type: none"> <li>• There have been several formal counts as well as surveys of the scale of the problem, but there is not yet agreement about the scale of the problem across the city, and rough sleepers and agencies working with them have become concerned that the figure identified in the formal count is sometimes being accepted as representing the full scale of the problem</li> <li>• Service users identified large numbers of people occupying derelict buildings (notably a fairly large block of flats near the centre of the city), as well as other structures not intended to be used as accommodation, but were not aware of an agreed way forward for tackling the problem</li> <li>• Hope Housing notes that it has particular difficulty helping two groups, migrant workers and couples, to resolve their housing difficulties</li> <li>• The Homelessness Core Group received a report in July which noted the activity undertaken in the winter of 2008/09 to tackle rough sleeping under the auspices of the cold weather provision, and recommended a way forward for the future. This includes maintaining the rough sleeping multi-agency partnership that co-ordinates the counts and the cold weather provision, advising agencies about how to improve information and support provision for rough sleepers, gathering more information, and setting up a street outreach team. The street outreach team is shortly to be put in place to co-ordinate services working with rough sleepers, make contact with rough sleepers throughout the year, and map out all the services</li> </ul>

## Section 6

How services are currently provided	Issues identified by agencies and/or service users
assessment being developed under the pathway out of supported housing	used by this group
<b>Supported housing and floating support – provision and access</b>	
<p>There is a large supported housing sector in Bradford which works with the homeless sector, and a growing provision of floating support, some of which has recently been changed from dispersed supported housing provided by Incommunities but managed and supported by an outside support agency to become floating support provision. There is also some separate provision (but made in collaboration with Supporting People) by the Bradford District Care Trust for people with mental health problems, dual diagnosis, and substance misusers</p> <p>Floating support is the prime service which prevents people from becoming homeless again once rehoused following a period of homelessness. The Supporting People commissioning body has recently agreed to fund a number of new schemes (mainly floating support, but some posts are dedicated to helping people to access services) which will help to reduce the chances of people becoming homeless once more, including substance users and others in the socially excluded groups, people with longer-term mental health or learning disability needs including people with a dual diagnosis, people with mental health problems from BME groups, and several services for young people including young people at risk of sexual exploitation and young offenders</p> <p>We also noted a number of services and agencies which work with homeless people to assist them to find emergency and other supported housing. Finding the most appropriate available</p>	<ul style="list-style-type: none"> <li>• Staff in referring agencies not always knowing what is available (evidence of staff in some agencies spending considerable amounts of their day trying to find beds in temporary/supported housing)</li> <li>• People having needs that are thought to be too complex so are refused access to the only accommodation available at the time – many of these end up either on the streets/sofa surfing, or in the more unsuitable and less supported private sector (B&amp;B or private lets)</li> <li>• Access to some supported housing may be refused for people who have been evicted several times previously and are not changing their behaviour</li> <li>• Service charge debts – until the debt is paid off, this can exclude people from some provision</li> <li>• People whose behaviour bars them from most if not all hostels (notably violence towards staff or other residents)</li> <li>• Variable risk assessment – common issues were assumptions being made about risk, and blanket bans for some groups</li> <li>• Lack of benefit in payment at the time of the referral or application – delays can lead to further demotivation for the client, and a requirement made by some providers to pay the service charge in advance for people who have a history of poor payment can be impossible to resolve</li> <li>• Overloading of services aimed at helping offenders to resolve housing problems and find emergency accommodation, e.g. particularly in relation to offenders involved with Probation,</li> </ul>

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How services are currently provided	Issues identified by agencies and/or service users
<p>bedspace is a key part of addressing homelessness for people who have been or may become homeless more than once. The following services were identified as playing this role:</p> <ul style="list-style-type: none"> <li>• Bradford Housing Advice Services run by Incommunities (three services currently)</li> <li>• Single pathway into Incommunities supported housing (one post)</li> <li>• Offender housing officers – Probation and Drug Interventions Programme (DIP) (one post for each group)</li> <li>• Drugs and housing liaison post (bridge one post)</li> <li>• Leaving care service – two housing support workers working with children in need (primarily children who have been in residential or foster care) and unaccompanied asylum-seekers</li> <li>• A new post aimed at helping substance misusers and people in the criminal justice system to access supported housing and resolve other housing problems (two days per week)</li> <li>• A new team working between two hospitals aiming to facilitate access to appropriate housing and support for people with mental health problems being discharged</li> </ul>	<p>whose work is deliberately not widely advertised within the Probation Service; even with the addition of the new services, frontline Probation staff feel they will still struggle to get the right help to find appropriate housing solutions for their clients; the service will probably need to focus on the short-term prisoners who are not engaged with Probation on release, who currently have very few other sources of help</p> <ul style="list-style-type: none"> <li>• No single source of information about vacancies in emergency or other supported housing – there had been a website showing where there were vacancies, this had not been kept up-to-date and had lapsed. Both Incommunities and Bradford City Centre Project (BCCP) do a daily ring round to see where vacancies are, and BCCP had a system set up to show where there were vacancies, but this was not widely known about or used by agencies</li> </ul>
<b><i>Preventing the loss of supported housing</i></b>	
<p>There is a programme of work planned to reduce the number of evictions and exclusions from supported housing in Bradford, and once in place; this should also help to reduce the numbers of people choosing to walk out of supported housing</p>	<ul style="list-style-type: none"> <li>• People whose behaviour leads to them being asked to leave on repeated occasions and who do not have the motivation to change</li> <li>• Challenging behaviour of people with the most complex needs</li> <li>• If someone goes into the wrong provision, they may need help to access the right place</li> <li>• Different ground rules and different applications of rules leading to some avoidable or too quick evictions</li> </ul>

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How services are currently provided	Issues identified by agencies and/or service users
	<ul style="list-style-type: none"> <li>• Non-payment of charges – in some places, this can quickly lead to eviction</li> <li>• Supported housing coming to an end without a long-term solution, or with no route out of supported housing, which can lead to deterioration in behaviour</li> </ul>
<b><i>Increasing access to settled housing</i></b>	
<p>The forthcoming programme of action to follow the move-on strategy, the 'tenancy-ready' assessment and panel, and consistent provision of pre-tenancy training, will make a significant difference to helping vulnerable groups to access and sustain settled housing successfully. The reducing availability of social housing often disproportionately affects the chances of vulnerable groups, notably those with obvious barriers to access such as poverty, poor histories as former tenants, and rent arrears</p>	<ul style="list-style-type: none"> <li>• People with poor literacy skills (a significant but underestimated proportion of the population) may find it very difficult to use a computer to find out what properties are available or to make a bid</li> <li>• Getting Local Housing Allowance (LHA) paid directly to landlords – there can be a fight to pay to landlords, a need to justify the reasons (e.g. if no support worker in place), and LHA is paid direct for only short period (eight to 12 weeks) at a time (see below for further explanatory note on this issue)</li> <li>• The LHA issue was raised by many agencies and groups, though some individuals said they had had no difficulty getting people assessed as vulnerable. There had been considerable effort put into establishing a vulnerability definition across the district that would be clear and would allow vulnerable applicants to access the sector where needed. Stakeholders reported, however, that this is not always working well; there may be insufficient knowledge across the sector about the criteria and how they should be used</li> <li>• Single bedroom accommodation is concentrated in Bradford and Keighley – may not meet needs in other areas</li> <li>• There has been some demolition of single person flats (around 130 units) though there has also been new build of single person accommodation over that period</li> </ul>



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How services are currently provided	Issues identified by agencies and/or service users
	<ul style="list-style-type: none"> <li>• People may try to move to a better area away from Bradford but return because their ties are here, so repeatedly become homeless</li> <li>• Offers of poor quality accommodation may be refused</li> <li>• Access to settled housing is particularly difficult for young people at present</li> </ul>
<b><i>Reducing loss of settled housing</i></b>	
<p>Floating support is the primary tool for sustaining tenancies and preventing repeat homelessness. In Bradford, this has been developed alongside effective services such as About Turn and Home Plus. There is also a Family Intervention Project working with families whose children’s behaviour puts the tenancy at risk</p> <p>About Turn, an example of good practice within Bradford, works with all types of household – single people as well as families – who are at risk of losing their homes. It provides both intensive housing management and floating support, and works with around 100 households at a time, mainly households who have a history of note engaging with services, of chaotic ways of operating, or histories of drug and/or alcohol use. About Turn may shortly be extended to work with tenants of other housing associations.</p> <p>Home Plus works with tenants who have a lower level of need for floating support and intensive housing management to help them sustain their tenancies, where there is currently no significant risk of losing their home</p>	<p>Loss of private rented homes:</p> <ul style="list-style-type: none"> <li>• Too many unscrupulous or unskilled landlords, leading to loss of homes when private rented properties change hands, or properties fall into disrepair</li> <li>• Illegal eviction not uncommon, but quite a lot of vulnerable people leave before they legally are required to, possibly because the physical conditions are also very poor, as well as them feeling intimidated or harassed</li> <li>• Landlords or agents often have keys and enter properties without permission, and often tenants have no tenancy agreement, and money is retained from deposits without justification</li> <li>• High service charges (or possibly rents above LHA levels) in the private rented sector are leading to arrears and intentionality decisions</li> </ul> <p>Case study E illustrates the need for more input to help people who are at risk of losing a private tenancy</p>

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How services are currently provided	Issues identified by agencies and/or service users
	<p>Loss of social rented homes:</p> <ul style="list-style-type: none"> <li>• Sign-up is often too quick – the new tenant may have no furniture (can take up to six weeks for Community Care Grant decision), and may not have services, or benefits in place, or enough furniture to make it feel like a home, and sometimes floating support is not in place in time</li> <li>• Not having enough money or skills to decorate</li> <li>• This leads to people starting the tenancy with arrears as they were not able to move in quickly enough</li> <li>• Lack of skills to manage money is a huge cause of homelessness</li> <li>• Lack of choice of housing – people may not be committed to making it work because of a lack of commitment to area</li> <li>• Isolation – low level support, insufficient contact with others, fear of living alone</li> <li>• People giving up a home because they can't move from unsuitable social rented accommodation – area or property</li> <li>• Housing management staff not always recognising that the person has a support need – some people resist being defined as 'vulnerable', and are not always proactive in referring tenants in to floating support; there is a lack of consistency across landlords and areas of the city</li> <li>• Some HAs noted as taking little action before threatening eviction, for example, after short period of non-payment of rent</li> <li>• Where a specialist floating support service is needed, some concern that it would not be provided because this would mean that two services were offering floating support, if the tenant is already receiving support from a generic team</li> </ul>

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How services are currently provided	Issues identified by agencies and/or service users
	<ul style="list-style-type: none"> <li>• Although Incommunities has a flag system to show which of its tenants are vulnerable, not certain that all HAs do so</li> </ul> <p>General issues:</p> <ul style="list-style-type: none"> <li>• Some people unwilling to engage with floating support and they may be unaware of services which may be able to help and advocate on their behalf</li> <li>• People who have been homeless repeatedly may give up far too easily – no confidence or resilience</li> </ul> <p>Case study C illustrates the way that repeated applications might indicate that there is a pattern of behaviour that could be addressed in future</p>
<b><i>Improving partnership working</i></b>	
<p>This is a key part of preventing homelessness and repeat homelessness. There are some good examples of joint working in Bradford, particularly at the more senior (strategic) level and in particular in relation to planning and commissioning of supported housing services</p>	<ul style="list-style-type: none"> <li>• There is in some places a culture of blame-shifting which spoils working relationships and shuts doors</li> <li>• Poor information-sharing can persist as a result of perceived confidentiality requirements</li> <li>• Evidence of a number of instances where frontline staff were working with outdated information and felt out of touch, inevitably affecting their effectiveness with customers</li> <li>• Some experience of poor preparation, poor communication, poor support planning, poor information-sharing and disclosure, poor continuity of care, and a need for a more holistic approach which could lead to greater sustainability</li> <li>• There is a willingness to work together for extreme cases but no solutions</li> <li>• Different priorities between agencies, for example, the need to</li> </ul>

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How services are currently provided	Issues identified by agencies and/or service users
	<p>prevent bed blocking in mental hospitals, can result in rough sleeping or people moving into unsuitable accommodation from which they become homeless again</p> <ul style="list-style-type: none"><li>• Communication of information, changes, and how to apply these in relation to customers is not well communicated within some agencies, and in some cases, to some agencies</li><li>• Complex cases which involve mental ill health needs no longer have a route for joint casework across housing, care and health</li><li>• Some level of tension persists between the council and its voluntary sector partners, primarily around the changes related to adopting a more preventative approach</li></ul>

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### 6.1 Note on Local Housing Allowance (LHA)

Crisis has recently reported on this issue and has raised the question, amongst other issues, about whether the introduction of LHA has affected access to the private rented sector.<sup>10</sup> Their conclusions are fairly clear:

*“In some areas, this is seriously undermining LHA claimants’ ability to access the [private rented sector] as more landlords appear to be unwilling to accept them as tenants... 62% of respondents said paying LHA directly to the claimant made it either more or far more difficult for them to access PRS accommodation and an additional 38% said that fewer landlords will accept LHA claimants as tenants since the introduction of LHA.*

*“Respondents to our survey, many of whom help vulnerable people to find housing in the PRS across the country on a daily basis, are finding there is too much inconsistency in how decisions on vulnerability are made with too many applications for vulnerability being refused without clarity as to what constitutes vulnerability or what evidence needs to be provided.”*

The Crisis survey, carried out with rent deposit/guarantee schemes, housing options services, and lettings/property leasing agencies across the country, identified that it was not always easy to get a vulnerability assessment, with only one in six of the respondents saying that the application was usually successful, and just under half saying that their experience was that even where there was a successful application; this did not always lead to a landlord accepting the person as a tenant or the direct payment being set up. Crisis concludes that under LHA the private rented sector is less accessible, with landlords increasingly reluctant to let their properties to claimants.

Incommunities’ Bond Scheme has been striving to overcome issues surrounding LHA and payments made directly to the client. The Bond Scheme has agreed with the local Housing Benefits team that they will assess whether there is a vulnerability for LHA purposes, and will then submit the assessment and supporting evidence with the HB form. As part of the sign-up stage, the Bond Scheme voids officer will ensure that all necessary forms are completed, and that supporting evidence is in place to ensure a seamless process and payments directly made to the landlord. Where the payments are made to the client, the Bond Scheme Officer ensures that the client opens a Bank Account and a standing order is set up to ensure rent payments are made promptly to the landlord.

The following case study provides an example of this work:

Ms K contacted Bradford Advice Service because she was unable to pay the rent (£450 for four weeks) for her current accommodation. She had been refused Job Seekers Allowance under the hardship ruling so had also been living on handouts from friends for five months. The Housing Options Officer discussed the case with the Bond Scheme officer and Ms K was accepted onto the Bond Scheme, and was offered a one bed roomed cottage with a rather lower rent (£315 a month). A full support package was put in place, along with funding from the prevention fund to help her establish herself in her new home

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<sup>10</sup> **Local Housing Allowance: One Year On** (Crisis, 2009)

# 7 Recording and tracking repeat homelessness

This section of the report looks at how repeat homelessness is recorded and how the options for recording and tracking it will enable repeat presenters to be identified and tracked. The aim of such systems would be to enable agencies working in Bradford to plan interventions to prevent the repeated loss of homes for vulnerable groups, and to assess the impact of these interventions.

## 7.1 Housing advice/options service

### 7.1.1 Changes to the current system

The homelessness and prevention elements of the service have only fairly recently been amalgamated so that housing advice, homeless prevention and homelessness assessment are done by the same people and as such the service is still in transition. Housing options officers now deal with all enquiries, take preventative actions with and on behalf of customers and, where homelessness cannot be prevented, forward recommendations on homelessness decisions to team leaders.

We were provided with two types of data report by Incommunities, and also looked at a number of case notes about individuals who had presented more than once:

- Homelessness prevention cases
- Homelessness decision cases.

It is apparent that although both prevention cases and homelessness applications are recorded on the housing management system (IBS), there are two separate case reporting systems. While homelessness decision case records are for the most part consistently recorded, the way that prevention customer names are recorded is far more random, making it almost impossible to track cases at the point of enquiry. In addition, as older files are currently archived in the Keighley office, it is not easy for staff in the main Bradford office to check the details of applicants who applied before the start of 2008.

A further issue to be considered is what action a member of staff might take when identifying that an enquirer has made either a homeless application or sought housing advice on a previous occasion. There are various options for action; some, but not all, were evident from the case notes read for this study:

- Identifying actions intended to prevent homelessness which did not work, for example, a single homeless person losing supported housing they had been referred to, or a young person being asked to leave their parental home or feeling that they cannot safely stay there, despite earlier mediation
- Identifying actions that were not put in place, for example, failing to take up a place in supported housing, or advice about challenging an invalid Notice to Quit not being acted on by the tenant

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- Re-assessing the help or intervention needed, for example, where a tenant with severe mental health problems is not able to maintain a tenancy on repeated occasions
- Drawing conclusions about patterns of behaviour, for example, a tenant who loses social rented housing on several occasions as a result of violence or harassment from others.

The key conclusions to be drawn about the recording and tracking of enquiries made to the Housing Advice Service are:

- Staff need to be made aware of the importance of checking whether the person has previously sought help from the service, so that an automatic check becomes commonplace
- More care being taken over spelling of names, and over dates of birth, could significantly reduce the chances of repeat presentation being overlooked, and make analysis of data to draw out repeat presentations much easier
- Many such databases will not allow data to be entered on a new record until a check for an earlier entry for this person has been carried out, and it is suggested that this is considered, within, and if possible, between both the homeless and prevention databases
- Staff training should include discussion about the full range of options for action when it is identified that a new enquirer is a repeat customer
- Neither prevention nor homelessness cases should be closed until it is clear that no more prevention or other action can be taken, and new cases should not be opened where housing advice has been given but homelessness has not been prevented.

### *7.1.2 Achieving this shift in focus*

The legislation provides protection for individuals who are, or are potentially, homeless by stating that anyone can make a request to apply as homeless and in that case the authority must assess their homelessness status against the statutory criteria. We know from our work that some external agencies are telling customers to specifically ask for a homelessness assessment or are contacting Incommunities with this request on customers' behalf. We believe that this may reflect a lack of trust in the prevention 'system'. This may not be surprising considering that the prevention approach has been relatively recently adopted. We consider that Incommunities' adoption of a prevention approach and reorganisation of prevention and homelessness decision-making staff is the right way forward but it will take some time for this to work through the system.

In the meantime the Council and Incommunities need to work very closely with referring agencies to discuss the 'new' approach and how it works for individuals to prevent or avoid homelessness and the tools that are available to make this a reality. Agencies must be encouraged to be part of the approach through their own expertise, services and connections with other key parties such as landlords. As in any shift, agencies will require proof that the changes are delivering positive outcomes for customers and that they are not being overlooked or sidelined and that their rights are still being respected. Storytelling

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is a good way to achieve this – real case studies will start to show how Incommunities, with their partners, are making a difference.

We identified a number of cases where prevention had not worked and cases had been referred through for a homelessness assessment. With the change to genericism, this should only occur where prevention can genuinely not resolve somebody's issues and it is of course entirely appropriate that customers in this position should have a formal homelessness assessment.

The other approach is with customers who may present as 'homeless'. An early and careful explanation of the benefits of working with officers to prevent their homelessness, which may include help to move to another home, may help customers to accept this assistance rather than requiring a homelessness assessment unless and until their homelessness cannot be avoided. Customers who are single, have no children and (on assessment) no medical or other vulnerability should have a clear explanation of the Council's likely homelessness duty towards them as part of the process so that they are persuaded to participate in prevention rather than making a homelessness presentation. Incommunities is confident that the new structured approach currently being put in place will result in this way of working being the norm with all customers.

We also note that a significant number of customers who have had a homelessness assessment in the past are more likely to ask for another when their circumstances change – of course this may be entirely appropriate but it is important that customers not only understand the reasons for the earlier decision but are also clear about the other 'tests' that would prevent homelessness acceptance. For example, a customer found 'not homeless' may feel that loss of accommodation on a later occasion would result in a different decision whereas they did not then and still would not meet the test of 'priority need'. Fuller explanations in homelessness cases, even if not included in decision letters, will help customers to understand that repeated homelessness applications will still result in refusal unless or until there are material changes in circumstances. It is obviously also important that customers do understand that they should seek assistance whatever their circumstances as there is still a duty towards them in preventing or resolving homelessness.

In all cases and even where there is an overt request to make a homelessness presentation, using an assessment process that itself would inform a homelessness decision will mean that it is simple and relatively quick to convert the process from 'prevention' to 'homelessness decision' without having to open a new case and start again with the customer: this in itself will save much officer time. This will be supported by the recommended change in recording so that prevention and homelessness cases are recorded on the same database.

### **7.2 Recording and tracking use of other services**

There is currently little crossover of information about the same clients' use of other services, or of tracking between services. As the earlier section on the data available from the client record system has shown, it is still not possible for agencies to track at a local



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level how a client moves between services in that sector, or why they have moved. This makes it very difficult to identify better pathways or more appropriate resources for people who have been, or are, in danger of being repeatedly homeless.

Several supported housing providers noted that they analyse their records to see how many people have entered their service previously. One such agency explained that they use this information to assess whether people who do not appear to want to change their behaviour or lifestyle should be accommodated, since they are not making best use of provision which is meant to be there to help people move forward with their lives (following the approach taken by Places of Change). Adopting this stance, however, means that the homeless people involved (in all probability, a small number) will not be able to access accommodation and support which was originally intended to be emergency provision, and will not be able to access the type of help they need to move forward.

The recommendations in section eight set out a number of options for addressing the need to track the movement of homeless people between supported housing and other services.

## 8 Resources used to resolve repeat homelessness

### 8.1 Use of Incommunities housing options resources

We have not been able to complete a full analysis to arrive at a view about whether resources are used in the most effective way as some of the information was not available within the research period (a time when the Housing Advice Service was being remodelled), and not all the information hoped for about other services was available. Our comments are therefore more limited than we had hoped.

We can use our findings on repeat cases classified as ‘prevention’ and repeat homelessness decisions to give an idea about how resources might be released if a more sustainable approach is taken to individuals approaching for assistance with homelessness issues.

A word of caution: we are conscious that a more sustainable approach to homelessness issues requires more in-depth work with individual customers. This would, at least to some extent, balance out the effect of reducing the input on repeat cases coming into the housing options team. It is also likely to require more external services to be linked into individuals, so this might have an impact on how those services deploy their time. However, as other services are seeing significant numbers of repeat cases, it is probable that a change in practice would require a shift in the point of time that input is provided to an individual, rather than requiring additional resources in either internal or external agencies. Whilst time input may be balanced out with a nil impact on overall resource inputs (and this would have to be assessed in practice), the outcomes for individuals would be significantly improved if a more proactive and holistic approach were adopted.

Using as a basis the last 11 months of data provided (i.e. from the time that a full prevention approach was adopted by Incommunities across Bradford) and the P1e figures for 2008/9 for homelessness cases, the *annualised* data is as follows:

Table 26

	Totals	Percentage of staff time on avoidable activities
Homelessness decisions in the year April 2008 to March 2009 (P1e)	1,302	
Total preventions	2,424	
Avoidable homelessness decisions*	106	8.1% staff time
Avoidable prevention enquiries*	88	3.6% staff time

\* i.e. total decisions/enquiries taken on repeat customers minus the first of either for each individual

Incommunities has been unable to tell us the split of staff time between homelessness decision-making and prevention activities, so we have used data returned by authorities that have undertaken value for money benchmarking for these two activities. Where authorities are operating similarly to Bradford, i.e. are making homelessness decisions only where homelessness has not been prevented, it takes them around twice as long to make a homelessness decision as to deliver a preventative intervention. This is because

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while some of the investigation is effectively completed as part of the prevention case work, some more in-depth investigations are required to reach a statutory decision.

On the above basis we have assumed that around 3.9% staff time is spent on repeat decisions and preventions. If we apply this to the 11 full-time equivalent housing options officers, around 0.43 FTE officer time could be re-focused on ensuring that prevention is sustainable and improving the outcomes for customers who otherwise experience considerable disruption on their lives.

We have considered the rate of decision-making and homelessness acceptances per capita in section 4.1. We see that Bradford makes a relatively high proportion of decisions compared to acceptances, whilst homelessness acceptances are relatively modest compared to its nearest neighbours. As we know from value for money comparisons on homelessness completed by other authorities, this balance (high rate of decisions compared to rate of acceptance) indicates that resources are being spent inefficiently. Authorities should seek a position where decisions are only taken where homelessness cannot be prevented and there should therefore be a lower ratio of decisions to acceptances. This does not imply a higher acceptance rate, but rather a more effective prevention function.

Bradford should therefore seek a position where its decision and acceptance rates are more in line with (most of) its nearest neighbours.

### **8.2 Use of other resources**

In the limited time available in this research study, it has proved very difficult to obtain any information that would allow us to make useful comment on the resources currently spent by all agencies across the city on this work. We were able to identify the total amount spent by the Council on floating support and on housing and other advice, and on tackling domestic abuse, but this represents only a proportion of the expenditure on the full range of city-wide services which might involve helping repeat presenters.

Some useful comments were made by agencies which responded to a question about resources in the snapshot survey:

*“Around 50% of the repeat homeless clients are worked with by two workers who provide services by the hostel liaison worker and the men's clinic worker. Around 70% of our clients who become homeless will become homeless again within 24 months.”* (Drug treatment provider)

*“At least half of the staff team's time is spent working with clients who have been homeless more than once.”* (Young people's project)

*“70% of our residents have been homeless more than once in the last two years, it follows that about 70% of our work is directed towards them.”* (Emergency accommodation provider)

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*“Approximately 15% of overall time is spent on cases of repeat homelessness. In most instances of repeat homelessness there is multi-agency involvement and much input from services such as social services, family workers, drug specialist services.”* (Young person’s supported housing service)

*“Half of all time working with this client group is directly related to homelessness and repeat homelessness over the course of any given year and this has been the case for many years.”* (Bradford Working Women’s Service)

*“Maybe on average 50% more than clients who have not been homeless before.”* (Bevan House)

*“At least 50% of our support time with people who have been homeless more than once.”* (Women’s supported housing)

Possible costs of repeat homelessness are illustrated in a report published by Crisis, which estimated the likely costs to public service providers based on a number of example case studies.<sup>11</sup> One of these studies looked at potential costs resulting from eviction of a single man with alcohol and mental health problems:

**Failed tenancy £3,000**

Includes: lost rent arrears; reletting; possession order and eviction warrant; solicitor’s fees; landlord’s administration

**Temporary accommodation £10,500**

Includes: hostel or refuge; bed and breakfast accommodation

**Support services £2,000**

Includes: outreach worker; advice at hostel or day centre

**Health services £7,000**

Includes: GP visit; services used after minor wounding; services used after serious wounding; treatment for mental ill health; treatment of TB; rehabilitation

**Police and criminal justice £1,500**

Includes: in response to theft from a shop; in response to minor wounding; in response to serious wounding; prison

**Potential resettlement £500**

Includes: interview and processing; floating support

**Unemployment nil**

The value of the output lost (not produced)

**Total for 12 months            £24,500**

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<sup>11</sup> ***How Many, How Much? Single homelessness and the question of numbers and costs***, (Crisis and New Policy Institute, 2003)

## 9 Tackling the problem – recommendations and examples of good practice

Recommendations drawn from the research findings are supported by relevant good practice examples from elsewhere.

### 9.1 *Housing options/advice/prevention services*

- **Develop an out-of-hours service for homeless households not in priority need**, so that emergency accommodation can be found
- **Provide a greater degree of help for households found to be intentionally homeless** – the Home Plus service does help some of the households affected, but agencies working alongside families affected said that there could be more help in some cases to find solutions once an intentionality decision is arrived at
- **Introduce changes in ethos and culture for helping non-priority applicants** – the new Tcoy service is planned to offer a very different service for young people; the changes in ethos and culture (as well practical arrangements) need to be replicated in the service offered to non-priority households, many of whom said that they find that the service is not currently able to help them sufficiently once a non-priority assessment has been made, does not always act to prevent homelessness for this group, and is not always able to identify appropriate emergency accommodation
- **Develop a system for ensuring that contact is kept with enquirers, wherever possible, until the housing problem has been resolved**
- **Ensure there is more help for offenders and drug/alcohol users to resolve their housing problems in good time** – ensure that the new service to be offered in Merchant's House and City Courts has sufficient capacity to offer help to all offenders and substance misusers needing emergency housing
- **Develop prevention work and information for private tenants threatened with harassment or illegal eviction.**

### 9.2 *Day services*

- **Build links with churches offering services to homeless people**
- **Address potential overlaps in services** – discussion is needed about how the new Tcoy services are to be provided might allay concerns about duplication and may identify useful ways for the new services to sit alongside existing provision.

#### **Reducing repeat homelessness for young people – joint work by Bradford Nightstop and the Shipley Youth Café**

Bradford Nightstop provides up to three nights of emergency accommodation for young people aged between 16 and 25 who are placed with hosts in their own homes. It identified in 2007 that too many young people failed to turn up to meet their hosts, or reappear as homeless once again after making use of the service. Typically, 70% of

### Reducing repeat homelessness for young people – joint work by Bradford Nightstop and the Shipley Youth Café

young people who had been accommodated by a host were referred back to the service

An arrangement started with Shipley Youth Café in 2007 means that young people are able to wait at the Youth Café until their hosts are ready for them and in the meantime they are warm and safe, able to have a hot drink, and also to access the other services offered at the café, including joining in with group activities and meeting other young people. In the first year, the number of repeat referrals fell to three, and over the course of the first and second year, to five. For those young people who did not engage with the Youth Service, 31% (57 out of 181) had to be re-referred as homeless again at some later date. The two organisations note that the main reasons for reducing repeat homelessness include more effective joint work, building relationships and trust with young people in a non-judgemental atmosphere, being available out of office hours, and getting young people engaged in activities with others who are not homeless

### 9.3 Services needed to address rough sleeping

- **Develop a street outreach team** to make contact with rough sleepers across all the main towns in Bradford City's area, which would be linked to the case management system for addressing the needs of rough sleepers, and the panel for resolving complex cases
- **Make contact with rough sleepers** to identify where people are sleeping rough
- **Develop a case management system for problem-solving for all individuals identified as sleeping rough** across the city, to be overseen by the strategic group being developed within the homelessness core group
- **Develop a pool of a small number of emergency beds shared between several agencies** – a small number of dedicated beds for this group could help to bring people into the system who have slept rough for a long time, and prevent those who have just come onto the streets from becoming longer-term street sleepers.

**Newcastle** identified in 2007 that there was a larger population of rough sleepers than had been acknowledged before, and that there was a disparity between police, local authority, and voluntary sector estimates of the scale of the problem. The formal count identified only two people bedded down, and four others not bedded down, but a street outreach team (under the adults facing chronic exclusion programme) and other agencies began to identify rather more people in the group, some who were not regularly in contact with any agency

A case management approach has been set up, with a strategic group overseeing it as well as a weekly problem-solving case meeting attended by Probation and drug treatment agencies as well as housing agencies. A rough sleeping co-ordinator acts as a central point of contact for any organisation coming across someone sleeping rough, and she records and tracks everyone identified. This process is matched with a new system to prioritise finding beds in emergency accommodation for anyone found on the streets, and improved co-ordination between the outreach providers, day centres, housing advice

centre, Police, and emergency access providers

The focus in the case meeting is on identifying the obstacles to each individual taking up and maintaining accommodation, and reducing the loss of supported housing. Other elements of the approach being developed are better risk assessment and management, spot purchase of additional support, identifying other solutions needed, e.g. more accommodation for women, and accommodation for couples, and Housing First type schemes), and extension of the case meeting to become a complex problems panel

At Guy's and St Thomas's hospitals in London, the homeless patient's discharge co-ordinator is able to help people being discharged from hospital to find out what work has been done with rough sleepers, and others, before they were admitted to hospital, and to make contact with someone in the homeless sector to work with them to find somewhere for the person to go to on discharge. This ensures they do not go back to the street from a hospital bed, but are taken straight to accommodation. The discharge co-ordinator has access to CHAIN, the London Combined Homelessness and Information System, which has significantly improved the co-ordination between health and housing agencies, the speed with which a multi-agency case meeting can be arranged, and a solution identified. It has reduced the number of people being discharged, only to be back in hospital after another few days on the streets. The post has also meant that hospital staff's understanding of the homeless sector has improved, so they are more aware of what can be done to resolve the problems of people with complex needs

#### 9.4 Supported housing and floating support – provision and access

- **Create a single point of contact into supported housing for homeless groups** – this would simplify the route into supported housing, both emergency and longer stay, and would save time and resources by overcoming the difficulties reported by both service users and agencies of spending hours looking for bedspaces, and not being clear what is available and who provides what; crucially, it would also mean that people would be more likely to access appropriate provision, so would reduce some of the movement between services; other advantages of such a scheme, drawn from existing examples in Nottingham and elsewhere, are set out below; if a web-based system is adopted, this would also be assisted by placing a PC in each Probation office, where computer and internet access can be very limited; the single point of access could also include floating support.

#### Desirable outcomes from a single point of access for short-term supported housing in Bradford

##### There is one central knowledgeable point for matching customers and vacancies

- One central point of contact has all information about vacant spaces and beds about to become available
- The same central point has the waiting list of those who need supported accommodation and those ready to move on from supported housing
- Information is kept up to date about what each supported housing scheme

## Desirable outcomes from a single point of access for short-term supported housing in Bradford

provides and which client groups it can and cannot accommodate

### **VOIDS ARE MINIMISED AND TENANCIES/LICENCES ARE MORE SUCCESSFUL**

- Vacancies can be prioritised for those most in need – rough sleepers, people leaving institutions, people needing to move from another facility
- Vacancies would be used in a timely manner – not waiting for nominations, but able to be held for someone coming out of prison or hospital, if needed
- Better planning
- Vacancies are filled by people who are suitable for that provision
- Provision becomes more sustainable – fewer evictions and exclusions, and fewer unfilled vacancies

### **MOST EFFECTIVE USE OF STAFF TIME**

- Staff in referring organisations save time spent on ringing all organisations trying to find a bed
- Reduces time of supported housing staff spent on evictions, exclusions, dealing with inappropriate referrals, and trying to find alternative accommodation for unsuitable residents

### **BETTER EXPERIENCES AND OUTCOMES FOR RESIDENTS**

- One point of contact to make connection between customer and provider
- Matched with minimum delay into appropriate accommodation and support provision
- More information during process of finding a space
- Other agencies (e.g. Probation) can concentrate on their main tasks
- Shorter stays in temporary/supported housing as the right one is found sooner
- Prevention of homelessness – breaking the cycle of homelessness
- Improved progress towards independence

### **OTHER BENEFITS**

- Tracking of individuals between facilities – reduces repeat homelessness, can identify likely future needs of individuals
- Can identify changing needs of different groups, and gaps in provision, for commissioning purposes
- Removal of delays whilst waiting for supported housing providers' weekly meetings in which decisions are made about referrals
- Improved co-ordination all round and saving staff time can lead to better partnership working as more time to do this



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- **Publicise in one single document the services which aim to help people to get access to supported housing and floating support, and develop a virtual team** – publicity and better communication/collaboration could follow from the development of the single point of access to supported housing as set out above
- **Review risk assessment policies of supported housing providers** – this would overcome the restrictions to access where there are blanket policies in place within the city, and decisions made without fully assessing the risk posed by someone's current behaviour
- **Develop a support service which maintains contact with the most chaotic group of homeless people** – experience of floating support services which take on this role in other cities is that consistent assertive services can make a difference to people with long histories of homelessness
- **Develop additional supported housing schemes for chaotic households** – as well as the Housing First type of scheme, a number of supported housing schemes around the country have focused on helping people in this group to stabilise their drug or alcohol use whilst in accommodation, since it can be extremely difficult to abstain whilst on the streets or sofa surfing (see boxes below about Housing First and Sinclair Project).

### Housing First model

The United States' Housing First model moves chronic street homeless people with multiple and complex needs, who are not considered 'housing-ready', straight from the street into permanent accommodation. This contrasts with the traditional approach in which homeless people have to earn permanent housing through doing well in shelters and transitional (supported) housing. The permanence of the housing means that frequent moves between projects are not required when support needs change, and the model of support goes beyond that normally associated with floating support schemes in Britain. Service users also have the ultimate choice about what services they want to receive, which could include social care and health care as well as support. Bridge Project in Exeter run by Bournemouth Churches Housing Association has adopted this approach, and it is working well. Eighty-three percent of people studied in the review were still in their accommodation after one year, although some of these had spent time away from their accommodation during the year (research carried out alongside the first year funded by Shelter)

### Sinclair Project – dispersed supported housing for drug users (Leeds Housing Concern)

This project, in place since 1999, currently provides 28 bedspaces in shared houses or flats, with a maximum of four beds provided in each carefully mixed house, plus two for younger people, and separate houses for women, with some ring-fenced for DIP and YOT clients. Houses are linked to a day centre with visiting health services, activities, access to staff. Four staff provide a tailored response to contain the problem of people being evicted from other provision for drug use. The scheme provides stable high-quality accommodation which helps people to get to the point of accessing rehab and other treatment, to access appropriate services, and to work on practices for minimising the harm resulting from substance misuse. Although being in treatment is not a requirement of the scheme, 95% of the residents are in treatment within four weeks of moving in. Around 60% of the DIP clients have not re-offended since engaging with the scheme

95

### 9.5 Preventing the loss of supported housing

- **Develop a gate scheme to meet people leaving local prisons and escort them to temporary accommodation** – this would reduce the number of people who fail to turn up at emergency supported housing, and could potentially help them to get benefit claims resolved more quickly, often a source of tenancy and supported housing failures
- **Consider the key messages coming from national research and examples of good practice in reducing the loss of supported housing.**

Homeless Link is currently funded by the Oak Foundation to carry out a three-year research project on this issue, and over the course of the next few months will be producing results of their research, and publicising examples of good practice. These will include examples such as those set out below:

#### Forum Housing

This Merseyside-based housing association, with 301 units of supported accommodation for 16-25-year-olds, 125 staff, and over 2,500 referrals each year, reduced its evictions by 85% in the first year of a new way of working, which continued in the second year. After widely consulting residents, Forum moved away from a more punitive style which involved a series of warnings and threats, to a more solution-focused approach in which a resident's poor behaviour will lead to an action plan and ultimately to a placement recovery conference, usually called by the service user. All decisions to end the placement must be ratified by two managers from elsewhere in the organisation, and there is an audit trail for all decisions. The culture of the organisation has changed a great deal, with evictions more likely to be seen as a failure rather than as an inevitability where there are indications that a service user is not engaging or coping well. As well as more positive outcomes for service users, there have been many other positive spin-offs for the organisation, including improvements in skills of staff, a more consistent set of practices across the whole organisation, and much better relationships with statutory agencies

Other examples of action to reduce evictions include:

- All evictions being subject to scrutiny by the Supporting People team (Nottingham)
- Including evictions and movement between temporary accommodation provision as part of the case management process for people with complex needs and rough sleepers (Newcastle)
- Pathways approaches developed in some areas follow a set path, through the first step of an assessment centre, then into longer-term supported housing, and then into second stage accommodation, with a managed move back to more intensely supported and managed accommodation possible at any time (York and Camden).

### 9.6 *Increasing access to settled housing*

- **Talk to social landlords about their allocation policies and practices, and develop a monitoring system** – to ensure that housing organisations are able to take into account the changes that people have made in their lives (for example, during a stay in rehabilitation, or in reducing rent arrears), and that there are more consistent, transparent processes which are easier to understand for people in vulnerable groups (many with low levels of literacy); the effect of any local lettings policies, and the effect on policies on particular client groups, could also be monitored, along with tenancy sustainment levels
- **Develop lists of approved/accredited landlords, alongside provision of floating support**
- **Provide furniture packs with cookers and other essential items**
- **Further publicise the vulnerability definition for Local Housing Allowance and how it should be used**, across all agencies including landlords and agents, and encourage agencies working with vulnerable groups to highlight any inconsistencies following the promotion of the definition and guidelines.

### 9.7 *Reducing loss of settled housing*

- **Develop an early warning system for all social landlords** – to include a flagging system, case discussion, and agreement about advice, and key contact names in the event of any problems, to be given to social housing tenants when they move in
- **Identify need for additional floating support** – there has been a big increase in the provision of floating support in recent years, and more is planned, but there appears to remain a degree of unmet need, particularly for specialist services, and for better information and more encouragement for housing management staff to make referrals at an earlier date
- **Renew efforts to work with landlords to establish a private landlord forum and accreditation scheme, to promote dialogue with landlords about standards of management, increase access to the sector, work with agencies supporting vulnerable groups, and reduce the loss of private tenancies.**

#### **Preventing Eviction Protocol – Newcastle**

This protocol has been agreed between the City Council (housing, Supporting People, and social care providers) and all major social landlords working in the city. There is a three-step process, involving:

- Identifying and flagging anyone who is vulnerable and at risk of not sustaining a tenancy before they are allocated a home, and referrals for floating support
- A system for resolving problems where any arise early on in the tenancy or at a later date, including case meetings by phone, email, or face-to-face
- Agreed notice arrangements and action plan for next steps, where it looks inevitable that a tenant might lose their home

### Preventing Eviction Protocol – Newcastle

The protocol has so far resulted in a reduction of evictions from Your Homes Newcastle (the arm's-length management organisation) of around 50%, since its introduction in 2006

#### 9.8 Improving partnership working

- **Widen the use of the Common Assessment Framework to help with better information sharing and joint problem solving**
- **Address tensions between the statutory and voluntary sector** – some of the actions being undertaken in the enhanced housing options programme will ease the tension, but it is important that other opportunities are taken. It is suggested that the following are considered:
  - Developing the multi-agency panel idea for tackling complex needs – building on the existing panel for people with mental health problems
  - Promoting a programme of training on homelessness prevention and housing options for all partners, and on tackling issues such as domestic violence and abuse
  - Focusing on partnership work as part of tackling rough sleeping, reducing evictions, and addressing worklessness – and developing structures which enable partners to look at real life cases
  - Using a partnership working assessment tool to identify where the main problems stem from, identifying expectations of key partners, and exploring how the Voluntary Sector Compact can help to improve relationships.

The last part of this section notes further ideas for tackling repeat homelessness amongst particular groups.

##### 9.8.1 Drug and alcohol users

- **Review the operational protocol for drugs and housing** – this protocol amply covers referral and liaison work between substance misuse and housing services, but good practice in other areas includes protocols which aim to develop a consistent approach across a whole district to accommodating drug users in supported housing, setting out principles for minimising evictions when dealing with use of drugs on the premises, supplying or finding drug paraphernalia<sup>12</sup>
- **Promote expectation that all drug and alcohol treatment providers actively help to address housing difficulties** – and ensure that this becomes a part of normal practice, whether through referral or inreach services.

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<sup>12</sup> Management of Drugs on Premises Regional Protocols for Accommodation Providers  
<http://www.drugsandhousing.co.uk/regprot2.07.pdf>

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### 9.8.2 Health and social care services

- **Develop better connections and interfaces between mental health and other social care providers, and the housing and homelessness sector**, including reviving the regular meeting for discussing cases which require multi-agency involvement and development of innovative solutions (see case study G)
- **Improve dialogue between Probation and mental health services** (see case study F).

### 9.8.3 Criminal justice services

- **Develop a way of helping people who have been in prison (and others) to recover identification papers**
- **Ensure that information flows effectively between partnership/strategic level staff and frontline staff**, to ensure that they have up-to-date information about services and changes in services
- **Make use of the Total Place development to engage prison service in earlier identification of housing problems and work to retain tenancies at start of sentences.**

### 9.8.4 Reducing repeat homelessness through actions to addressing worklessness

- **Develop a programme of meaningful activities which all supported housing providers and treatment agencies can refer into** – to include help to increase literacy amongst homeless and socially excluded groups, help to learn skills needed for independence.

#### **Framework (Nottingham) education, volunteering and employment opportunities<sup>13</sup>**

Service users in Framework's services are expected to undertake meaningful activities. This can include education, volunteering, or employment, or being a service user representative. The Framework Academy runs a wide range of courses at different levels, including a series of courses which aim to equip people with the skills to look after their properties once rehoused. This also involves teams of service users learning by doing up properties for people about to move into them

## 9.9 Recording and tracking

### 9.9.1 Housing advice/option service

- **Exploring the use of the same case recording database for both prevention and homelessness cases.** This should be feasible if additional pick list options are added to allow the case to be one of prevention rather than homelessness application. This would ensure that cases can be linked together by searching by date of birth and name

<sup>13</sup> <http://www.frameworkha.org/pages/eve.html>

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- **Whether or not databases are conjoined, staff need training to ensure that they look up each customer by date of birth before dealing with the enquiry so that previous enquiries can be examined and occurrences linked.** This should enable a far more holistic approach to the customer's needs and should also prevent them having to repeat their story to someone who is new to their situation.

### 9.9.2 Use of other services

We would suggest that to address the wider issue of being able to track people moving between services, and to identify more quickly and effectively what has happened to result in the loss of accommodation, or in losing track of individuals, that there is consideration given to adopting one of the following systems.

With our knowledge of the way that agencies work in Bradford, we suggest that the Link system offered by Homeless Link would provide the best option for resolving the issues and problems identified in this research, particularly if it can be combined alongside a gateway type of approach.

#### **a Multi-agency monitoring systems<sup>14</sup>**

This system, developed by Shelter in 1995, has been adopted in a number of local authority areas. This is similar to the system developed by Centrepoint, in use in the past, for example, in County Durham, for all age groups. All agencies working with people who are homeless or seeking help to resolve acute housing problems are invited to take part, including local authorities, and to send in an electronic return for all enquirers. It enables strategic authorities and others agencies to research pathways and the extent of homelessness, to inform planning and commissioning, and share information about activities and approaches, and their effect.

The system enables a quarterly report to be produced for the total homeless population, and for each agency and each client group or age group. It can track individuals through different agencies, to identify which agencies they have contacted, and the outcomes of each contact.

A new MAM system is in development within Merseyside, to cover all five local authority areas, and funded jointly by all five local authorities. Around 90 agencies are so far signed up, but there has as yet been no discussion about how it will fit in with the gateway system being introduced in Liverpool.

#### **b Single point of access (gateway systems)**

This model, being adopted by a number of local authorities, records all enquiries for supported housing, and for floating support in some schemes. The aims and advantages of a single point of access have already been identified (see page 92). A number of local authorities are developing a triage system alongside the gateway, which will help to make initial decisions about which type of service is needed.

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<sup>14</sup> **Common monitoring: A good practice guide** (Shelter, 2004)

[http://england.shelter.org.uk/professional\\_resources/policy\\_library/policy\\_library\\_folder/common\\_monitoring\\_a\\_good\\_practice\\_guide](http://england.shelter.org.uk/professional_resources/policy_library/policy_library_folder/common_monitoring_a_good_practice_guide)

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The gateway system will usually enforce a search of the database before a new record can be entered, and will also identify what went wrong to lead to a service being discontinued in some way. This system is currently being considered for use in a sub-regional scheme to help improve access to supported housing in Bradford, Calderdale and Kirklees.

### **c Client recording system**

The Link system for client recording was originally developed by Resource Information Service (now part of Homeless Link) for the De Paul Trust and is now used by a growing number of local and national supported housing providers as well as across London by agencies working with rough sleepers. It can be used for all agencies within a district (for example, Cambridge City Council, where it is being expanded) and is being considered by a number of other local authorities.

Link is a real-time web-based system, which records information about each client, where they are housed, what other work is being done with them, and by whom, and outcomes. It enables agencies to record all the work they do with their clients. The information can then be shared between projects and viewed centrally by the overseeing agency and locally by each member agency. It is thus possible for any agency to see who else is currently working with someone who has made contact with them, including statutory services. The system also produces reports about individuals, compliant with Supporting People Client Record Form and Outcome reporting systems and the Outcomes Star, and also with CORE, and data about groups of clients or use of particular services.

A similar product is also available from the software company which supports the gateway developments set out above. The CDP SHARP (Supported Housing Assessment Referral Placement) software, currently being considered for use in a sub-regional single point of access, can also record all enquiries for housing advice, in a similar manner to the Link system, and will also record inputs and outcomes on housing-related support, and tackling worklessness.

Amongst the many benefits of this type of system are the potential reduction in duplication of effort – no two agencies would be working at the same time to find accommodation for the same person – and the ability to track where the person has been, what was done with them, and why it worked or did not work. It is also adaptable, to suit an organisation or group of organisations. Homeless Link reports that it takes between four and six months to develop a customised system.

## Appendix one – case studies

### **A Case study from Working Women's Service**

Ms A was thrown out as a teenager due to drug use, and was homeless and sofa surfing for eight weeks, before a hostel place was secured for two weeks. She was asked to leave there because of theft of £10 from a worker's purse (to fund her use of drugs). She slept rough for eight to 12 weeks with no phone and no means of contacting her. Her benefits were stopped due to not receiving mail

When a hostel place became available and a provider agreed to accommodate her (providers usually said that she was too complex/chaotic), the Working Women's Service was unable to contact her to let her know, and she found accommodation with a client who became her long-term partner, despite issues of control and abuse. Ms A stabilised and gave birth to a baby daughter. Due to abuse (past and current) and clinical depression, with limited dual diagnosis support, she relapsed and her baby was removed and she became homeless again

There then followed two years of sleeping rough, sofa surfing, staying with friends/family and squatting. Hostel places could not be secured for the same reasons as above. A private let with a 'friend' was secured but the client was responsible for funding the friend's drugs habit of crack and cocaine and this lasted only four weeks. Another private flat was secured but the client was arrested and given a custodial sentence and the flat was lost. Accommodation was secured through the Homehunter scheme on release from prison but withdrawn before the tenancy agreement could be signed due to rent, housing benefit and utilities arrears

Private accommodation was secured but due to lack of skills and knowledge about how to be a tenant and maintaining a tenancy with limited support, Ms A failed to stay at the property, preferring to stay in a squat where she remained at the point where this case study was written (July 2009)

### **B Case study from service user consultation**

Paul (now 32) was 17 in 1990 when his father first threw him out, and he went to live with his mother, in the North East. He later took over his mother's tenancy but left because of violence in the area, and because he wanted to be nearer friends and family. He spent the next two years moving between his dad's, his mum's and friends' places, sometimes moving after falling out with his host, and at other times having to move because the host moved. In 1999 he moved into his own bedsit, but left there after being burgled twice. During the period 2000 to 2004, Paul moved three more times and had a short spell remanded in custody, before moving into his own flat, but he again moved because of burglary

In 2005, he moved in with his mother again, this time in Bradford. Arguments over use of drugs resulted once more in homelessness. For the first time, in 2006, Paul stayed in temporary accommodation, in accommodation designed for people recovering from drug use. He moved elsewhere out of choice, but his stay at the next scheme didn't work out as he didn't get on with other people staying there. Having moved back to the first accommodation, he returned positive samples indicating continuing drug use, so was



### **B Case study from service user consultation**

asked to leave. Following a brief stay at his mother's, Paul then spent 2007/08 moving between three different supported housing providers, moving because he did not get on with other residents, or for providing positive samples, or because he was bullied by or did not get on with other residents

He has sought help from the Housing Advice Service on a couple of occasions, but has mainly worked with the Bridge Project and Bradford Day Shelter to resolve his housing problems. Paul says that he has been told he is too young (at 32) to be considered for some housing, as there is a lower age limit of 35. He would have liked the chance to show that he is mature enough to be considered for such areas

Paul has now stayed at his current place for around ten months, and is hoping to get his own flat shortly. Altogether, he has had to move or lost his accommodation (permanent and temporary) around 24 times since 1990, at least ten times within Bradford, and five times in the last two years

### **C Case study from Incommunities case note review**

J was 23 when he and R (aged 20 and pregnant) were asked to leave her parents' house after a dispute between R's parents. They were put up in temporary accommodation but were declared intentionally homeless because it was considered that J had caused the argument that had led to J and R becoming homeless – her family accused him of stealing money and also of assaulting her father

About ten months later, J and a new partner (S, aged 18) were asked to leave the friend's house that they had been staying at since they moved out of the temporary accommodation, after they had been assaulted by the friend. On this occasion, it was concluded that there was a duty to house them, and they were rehoused, with their small child, in Bradford

Two years later, J and S (who was pregnant again) came to ask for help again. They said they had been harassed in the area they were living in, and all the windows had been smashed, and they were now too frightened to go back. Incommunities could not find any evidence that they had reported the harassment to the housing office or the police, so advised them to go back as there was no evidence that it was unsafe for them to return. There was also evidence that J has caused the damage to the house, and that the basis of the problems they were having in the area may have been due to conflict with S's drug dealers

A subsequent application was made by S who, after splitting up with J, had moved into a private rented flat but left it because it was in very poor condition. She had returned to live at her father's house, from where she was now threatened with homelessness

### **D Case study from Bevan House**

Ms E is a single mother with two children. On the first occasion that she contacted Horton Housing, she was in the Council's temporary accommodation but had been given notice because of rent arrears and also because she had been deemed intentionally homeless. An appeal on the latter failed because she refused to make efforts to pay off her arrears. She left the property (and disengaged from Horton's services) before the eviction date. She was referred to a women's hostel and was placed on the waiting list for this at the time of disengagement

The second contact came when she was facing eviction again from this hostel, again for arrears issues (and possibly breaking their rules). The hostel staff had been instructed to withdraw their support whilst court proceedings were being taken, and Horton was there to ensure that different agencies were talking with each other, but she did not engage with their staff

The third contact came when she was again in a temporary unit, this time being paid for by social services (as housing had discharged its homeless duty by this point), since there was an unwillingness to remove her children. She again did not want to meet with Horton. She was ultimately offered an Incommunities tenancy with conditions in place (including the type of tenancy and the necessity of engaging with support)

The case illustrates the difficulty of working with families who do not want to engage and may face continual threats of losing their homes despite the efforts of a number of agencies, both statutory and voluntary

### **E Case study from service user consultation**

Mr S has been homeless at least 12 times, mostly due to his use and supplying of drugs, and his reluctance to accept accommodation without his dogs. At the time of the interview, he was about to lose accommodation he had had with his sister. Over the course of the last ten years, he had slept rough in the bus station, and in several derelict houses, had stayed on one occasion in a hostel, had had temporary accommodation with his sister, and had rented several places with his girlfriend. On one occasion, the landlord had taken court action to get possession of the property as he wanted to sell the flat. Mr S had asked for help at the Housing Advice Service, but was told that there was nothing that could be done until the day he was homeless, so he had no other option but to remain the flat until the bailiffs came

### **F Case study from Probation**

Ms C is an offender who frequently self-harms but has not been assessed as being eligible for mental health services through community mental health teams. She is often not contactable, and does not always attend her appointments. It is argued by most supported housing providers in Bradford that her needs are too high for non-specialist provision, but providers of supported housing for people with mental health problems will not accept a referral as there is no report providing a formal mental health diagnosis or assessment. This is partly because of a disagreement about whether she should be assessed by mental health services or by services for people with learning disabilities

### **G Case study from Incommunities case review**

Mr G has paranoid schizophrenia. He has been seen by Housing Advice Service staff on a number of occasions, having given up accommodation (both supported housing and social housing) several times, often because of problems to do with other residents. His living conditions, when he did have a tenancy, were described as squalid, and he has drink and gambling problems which contribute to his difficulties. Mental health and floating support workers agree that he cannot manage a tenancy, but have not been able to agree on a solution that is sustainable

### **H Case study from YMCA**

Young man (17) – father has mental health issues – suspected emotional abuse of his wife although she always refused to accept help. X's father kept threatening to throw him out because he did not have a job/'proper training'. Also used to ring up a lot to complain about X. X used to talk about committing suicide and hating his father. One-to-one support put in place for X, including on-site counselling through Off the Record. His father threw him out twice in total – once during Christmas holiday period at around midnight. Member of staff picked X up and made sure he was in B&B – we were working with X to find alternative accommodation as it was clear that family situation was irretrievable (mother used to ring us up secretly and tell us how badly father was treating him). Managed to get X into supported housing but he was unable to follow rules and despite several warnings he continued to breach rules and was eventually thrown out. X then moved in with a friend

### **I Case study from Leaving Care service**

Young person was accommodated under Section 20 of the Children Act, left residential care 27 April 2009 and went to a voluntary sector supported accommodation on that date. Although placement was fragile our worker continued to work with the young person and attended numerous meetings to shore up the accommodation; this failed and he was evicted on 29 June 2009. Secured an immediate move on to another hostel, but he was evicted again on 9 July 2009, placed in B&B with bail conditions that day. Was arrested as he did not keep to bail conditions and was remanded to foster care on 13 July 2009. On 17 July 2009 was accompanied to court, homeless again as bail conditions specified, on same day placed back into B&B. He is still at the B&B placement (end July). Since 17 July 2009 worker has re-negotiated his stay in B&B on four separate occasions as after ASB the placement broke down. In last two weeks have attended three separate meetings with B&B provider after the YP attempted to steal from establishment, ASB and drug use. No provider is prepared to take this YP at the moment due to nature of offences and current offences pending

### **J Case studies/brief scenarios from West Yorkshire Community Chaplaincy Project (WYCCP)**

'Hanif' is one of hundreds referred to us on a merry-go-round of family breakdown, petty crime, custody, and release into homelessness

'John' was a recovering alcoholic with mental health difficulties due to his mother's death 25 years before. He had been slowly working his way up the Council lists whilst 'sofa-surfing' with friends who drank heavily. He eventually succumbed to peer pressure, has

<b>J</b>	<b>Case studies/brief scenarios from West Yorkshire Community Chaplaincy Project (WYCCP)</b>
	<p>relapsed and returned to chaotic homelessness</p> <p>'Bill' was homeless and addicted but engaging with support and trying really hard to straighten out to show the authorities he was capable of looking after his son whilst his ex-partner was in custody. This spiralled when he received bad news and Bill is now out of contact</p> <p>'Andrew' struggles with bereavement-related mental health difficulties, was awarded 'priority' council status and eventually got a house. He has been unable to cope being there on his own and has been sleeping rough. His physical and mental health have deteriorated and the council are now evicting him</p>

### Appendix two – literature review

#### 1 *Repeat Homelessness in Scotland* (Edinburgh College of Art/Heriot-Watt University and others, for Scottish Homes, 2001)

Scottish local authorities have recorded full details about all applications for some years, through the HL1 recording system. The recording system was modified in 2005 to reduce repeat homelessness, through the introduction of a unique referencing system for each applicant which links the application to associated previous applications.

For the purposes of this study, carried out before that modification, repeat homelessness was generally defined as:

*“Households applying to a local authority as homeless containing adults for whom this is the second or subsequent application.”*

The research involved analysis of data for two-thirds of Scottish authorities, interviews with staff, and in-depth interviews with repeat homeless presenters.

Just over a quarter (27%) of applications involved someone who had previously made a homeless application. Most repeat presentations were separated by relatively short intervals, most under six months.

The majority (70%) of repeat presenters are people whose last previous application did not result in their being rehoused in social housing, either following a return to the accommodation from which their original application was made, or having found their own accommodation following their last application. Only just over half of all repeat presenters (60%) are experiencing a new ‘event of homelessness’. For the remainder, the ‘new application’ is simply one of a series of contacts with the local authority during a continuing episode of insecurity or rooflessness. Only about a fifth of households surveyed had remained in one place between applications, but they rarely considered any of the places they stayed in as permanent. Repeat presenters show a general tendency for households to move away from family and friends into the private rented sector, with almost 30% of repeat presenters applying for housing from this sector.

Most repeat presentations are separated by relatively short intervals, and in three-quarters of cases this interval is less than six months, but for those who have longer histories of homelessness and whose circumstances did not change between incidents, the interval was likely to be longer.

Single people and childless couples account for just over half of the total of repeat presenters – the same as for all homeless applicants. Half of repeat presenters were accepted as in priority need, but less than a quarter actually took up social sector tenancies as a result, so tenancy sustainability did not come into it. The findings implied that over a third of tenancies involving homeless households rehoused by social landlords are not sustained, with more than a quarter of the total failing within six months of the letting. Lack of sustainability could be due to the housing not being affordable, its location, property type, or neighbours. For those rehoused, lack of choice was a big reason for not

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sustaining a tenancy. About a fifth of household survey respondents had turned down permanent tenancy offers following their previous application, whilst others left TA before a decision was made.

The most widely recognised of the scenarios described by repeat homeless presenters related to:

- Victims of relationship breakdown and/or domestic violence (often linked with rent arrears)
- Young single people unable to sustain tenancies (often related to drug addiction)
- Older single people affected by alcohol abuse
- Formerly priority homeless households giving up social sector tenancies due to problems related to the house or neighbourhood.

Recorded rates of repeat homelessness varied substantially between authorities, and the report identified inconsistencies in relation to whether cases were closed, whether there needed to be a new cause of homelessness in between repeat applications, and how applications from households which have changed in their configuration since an earlier application were treated.

The conclusions drawn in the report were mainly focused on recording and reporting repeat homelessness, but also identified that access to benefit advice and mediation is critical, that homeless households should be offered more choice at the point of rehousing, and that good tenancy sustainment was crucial in reducing repeat homelessness.

## **2 *New and repeat homeless presentations to Glasgow City Council*** (David S Morrison, 2002)

This report looked at all homeless presentations made to Glasgow City Council in the period 1992-2001, and the full analysis was carried out on repeat presentations for the period 1996-2001.

This identified that:

- The majority of individuals who present to Glasgow City Council as homeless do so only once and will not present as homeless again if followed up for several years, but:
  - About 40% of individuals will re-present within a year and 15%-20% will continue to re-present in successive years
  - Those people who exhibit repeat homelessness are likely to fall into a pattern of chronic repetition that persists for several years, suggesting the existence of a sub-group with unresolved problems
  - Any cross-section of homeless presentations comprises a majority of people who have been homeless before (60% of presentations were from repeat presenters)

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- Any policy that successfully reduces homeless re-presentations in the 40% or so of homeless repeaters will therefore reduce total presentations by more than 40%
- Being male, under 34 years old, and having been homeless for some specific reasons increases the likelihood of repeat homelessness
- Some reasons given for homelessness confer much lower risks of repetition, but the reasons likely to be linked with repeat homelessness included several which were linked to the behaviour and chaotic lifestyles of many single homeless people with substance abuse and histories of crime.

The paper pointed to a number of key policy implications:

- Any homelessness prevention work will reduce repeat presentations, but as representing as homeless indicates a failure of current services to satisfactorily manage an individual's problems, new resources to prevent homelessness should be judged on their effectiveness in reducing repeat homelessness, since the other groups will probably have resolved their problems anyway
- Prevention work targeted on the groups which exhibit repeat homelessness should have the effect of reducing use of temporary accommodation significantly
- Specific target groups are:
  - People homeless because of anti-social behaviour (within or outside temporary accommodation)
  - People discharged from hospital
  - People discharged from prison
  - People who become homeless because of financial problems.

### **3** *Evaluation of the experiences of single people presenting as homeless in Glasgow* (Deborah Quilgars and Joanne Bretherton, York University Centre for Housing Policy, Feb 2009)

The 2002 research on repeat homelessness reported above formed part of a series of reports which led to a major hostel closure and re-provision programme in Glasgow, carried out between 2005 and 2008. The thrust of the plan was to eliminate the need for large-scale hostels, and to divert single homeless men and women into more suitable accommodation and support options. There was a particular focus on eliminating the need to sleep rough and reducing levels of repeat homelessness in the city, including some people who regularly moved between accommodation in a constant circle. Repeat homelessness was by then almost entirely a problem related to the single homeless population, and remains so – 8% of other households make more than one application, compared to 26% of single applicants (34% of single men and 22% of single women who were not in priority need).

The re-provided services include smaller hostels acting as assessment centres, where multi-faceted assessments identify the best way of meeting complex needs over the

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course of 28 days, before referral to more suitable provision, and more small scale and local services in general.

The hostel closure and re-provisioning programme in Glasgow programme was seen by the Scottish Government to have produced a 'seismic shift' in homelessness service provision in the city. The shift in the type of service provided was seen as mainly positive by service users and stakeholders alike, with many service users identifying much better facilities, and reduced chances of being placed amongst large numbers of other drug/alcohol users (*"It's like putting a person who has an eating problem into a bakery"*) but much higher pressure on the emergency accommodation available and too-slow access to permanent housing.

Glasgow has commissioned a number of evaluation reports since the closure and re-provision programme started, and the following are the relevant conclusions from these reports:

- Over the last five years, the incidence of repeat homeless applications by single households in Glasgow has fallen significantly, from 23% to 10%, nearer the national average in Scotland
- Repeat presentations had fallen more quickly than first presentations
- There had been a slight increase in the number of older (45-59) men presenting but the number of 25 to 44 year-olds had remained fairly constant
- Experience of having slept rough fell from 20% of the sample to 10% over the five years
- Some reasons for presenting as homeless have reduced over time including discharge from prison, and loss of hostel, lodging house or hotel accommodation
- Three levels of prevention can be identified: 'primary' (reducing structural deficits and risks which may lead to homelessness); 'secondary' (interventions aimed at those who are at risk of becoming homeless); and 'tertiary' (preventing repeat homelessness).<sup>15</sup> Glasgow's homelessness strategy is primarily focused on secondary and tertiary prevention (tenancy sustainment and repeat homelessness)
- A further study of tenancy sustainment found that a quarter of lets to homeless and waiting list applicants break down within a year, but previously homeless households were no more likely to lose their tenancies than other tenants
- Nonetheless, prevention work focused on resettlement process and provision of floating support, and developing specialist services with those most at risk of homelessness: prison, care and hospital leavers, refugees, and people with complex needs, and stakeholders identified that much more substantial progress had been achieved in addressing repeat homelessness than tenancy sustainment more generally. Also referred to successes in their own services in addressing the revolving door.

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<sup>15</sup> ***Evaluating homelessness prevention in the EU: Reflecting on the findings of a recent survey of 3,600 households in Germany***, (Busch-Geertsema, 2006).



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As well as the closure and re-provision programme, Glasgow developed a *Statement of Best Practice in Joint Working between Glasgow City Council, Community Health and Care Partnerships (CHCPs) and registered social landlords (RSLs) on Sustaining Tenancies and Preventing Homelessness*, and a Homelessness Integrated Assessment. Both are seen to have contributed to the reduction in repeat homelessness.

Glasgow's Head of Homelessness Services identifies the reduction in repeat homelessness observed today as being the result of four strands of policy and action:

- Improving data recording and quality – notably a flag system which guides staff to review cases kept open for 28 days after contact is initially lost, which has led to more people being traced and contact renewed
- More beds within smaller temporary accommodation schemes which are much more suitable and able to meet individuals' needs, meaning far more sustainable stays in temporary accommodation
- Development of floating support which maintains contact with people regardless of where they move to, including on the streets
- A review group, held with senior staff including social care managers, which identifies the most appropriate solutions for a small group of people with complex cases, supported by care plans which include an accommodation element.

The combination of these approaches, following the earlier research and the closure and re-provision programme, has led to a number of people with very challenging behaviour being kept in accommodation and successfully moving on to permanent housing, and only a small group needing to be considered at the fortnightly case review meeting.

It should be noted that the research also highlighted that different interpretations of the definition of repeat homelessness can lead to quite different conclusions about the number of people affected.

#### **4 *The Support Needs of Homeless Households*** (Geoffrey Randall and Susan Brown, ODPM, 2003)

This in-depth research study into the support needs of homeless households considered both families and single people, and provided much material that was new, and informed a great deal of the thinking about homelessness prevention in England.

In considering the issue of repeat homelessness, the researchers noted that some studies of the issue amongst homeless households in individual boroughs had found much higher rates of repeat homelessness than the Scottish study had identified (in Manchester a study of homeless people in temporary accommodation found that over 40% had been homeless before, and Shelter's Homeless to Home Project in Sheffield [providing tenancy support] showed that 64% of families had been homeless at least once before and 50% had been homeless two or more times before). Conversely, some staff in London authorities suggested that repeat homelessness was less common in their areas, possibly because

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homeless households there were struggling to find housing because of housing shortages rather than their support needs and other problems.

Many of the homeless families interviewed in the 2003 study had made a homeless application at least once before, many of them having been housed in the interim but had lost that accommodation because of relationship breakdown, domestic violence, and rent arrears or other money problems. Randall and Brown suggest that homeless people who apply to local authorities may have substantial support needs that are likely to increase their risk of homelessness and so increase the risk of the problem recurring in the future. Many of the elements of good practice they recommend as helping to reduce the chances of repeat homelessness are similar to those covered below as part of homelessness prevention; additional points included:

- Developing clear and realistic objectives for support services in working with their service users
- Joint working and developing effective multi-agency assessment and service delivery with other support services
- Being responsive to sudden crises that can cause repeat homelessness among some people with chaotic lives, including duty systems which respond to all homeless people
- The provision of childcare, where support services operate in temporary accommodation
- Regular checks on clients in the early stages of the tenancy are important
- As far as possible staff should reflect the range of people they will be working with, for example, to include parents, older people, and people from a range of ethnic origins
- Keeping caseloads down to between 15 and 25 active cases per worker.

### **5** *Evaluating Homelessness Prevention* (Hal Pawson et al, Heriot-Watt University, CLG, 2007)

This is a large report about homelessness prevention which it would not be feasible to summarise for this report. However, one or two key issues about repeat homelessness are worth noting:

- Service user outcomes tended at the time of the research to be monitored only in relation to the client's situation immediately following contact with the service, and this meant that the sustainability of interventions and outcomes was not tested, including moves into assured shorthold tenancies as well as social rented tenancies
- It is important to find sustainable solutions to households accepted as homeless, which would entail identifying the proportion of tenancies (both permanent and introductory) sustained after a given time period
- Housing advice/options services need to be asking 'how can we help' rather than 'who can we help', through a person-centred approach

## Appendix two

- Family mediation can be effective in reconciling relationships for a significant proportion of young adults facing possible homelessness, but authorities need to evaluate whether mediation-assisted family reconciliations were sustained in the medium or longer term, and also to acknowledge that where mediation cannot bring about the retention of the family home for the young person, family support was nonetheless essential in ensuring that the young person manages to sustain his/her own independent tenancy
- The use of alarms provide increased security for women at risk of violence from outside the home and can counter repeat homelessness amongst this group
- There is a high chance of repeat rough sleeping followed by prison in a repetitive cycle, and close liaison between prison-based and external services is critical in helping to identify suitable housing options, but linking the prisoner into local support services is also fundamental to ensuring sustainability, especially where prisoners have had to move across LA boundaries for any reason
- Tenancy sustainment works best when it is provided in the context of helping the person to develop local links, and providing generic services which can look at other problems as the tenant wishes, and not just at housing-related issues
- Schemes which help to secure settled housing even for those with rent arrears (the example given is Telford and the Wrekin's Third, A Third, A Third scheme which pays off a third of arrears, writes off another third, and seeks repayment on the other third) can help to reduce the time spent waiting for rehousing and therefore not only reduce pressure on temporary accommodation, but also reduce the likelihood of the person losing their tenancy.

### 6 *Other messages from research*

This section includes key findings from other research carried out in respect of particular groups of homeless people:

- Young people around the country continued to find the process of seeking help from homeless services sometimes intimidating, and often reported feeling confused, misunderstood and/or powerless when navigating the homelessness system. This led to both agencies and young people calling dedicated housing officers to become more commonplace for helping young people<sup>16</sup>
- An evaluation of exits from Foyers noted that not all social tenancies were stable: some young people felt isolated and gave up the tenancy to move in with friends or a sister, a few found the bills and responsibility too much, and others moved when their domestic partnership broke down and one because of domestic violence. People were at most risk at six and 18 months after moving on from foyers. People whose tenancies failed tended to have been still struggling with problems such as drug or alcohol use, or not being ready to manage a tenancy<sup>17</sup>

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<sup>16</sup> ***Youth homelessness in the UK – a decade of progress?*** (Deborah Quilgars, Sarah Johnsen and Nicholas Pleace, JRF, 2008)

<sup>17</sup> ***What happened next? A report on ex-residents of Foyers*** (Dr Joan Smith and Oonagh Browne, London Metropolitan University, 2006)

## Appendix two

- A study of older homelessness found similar results: tenancy failures were most frequent in the first three months and peaked again after month 15; early failures were associated with the subjects' lack of motivation to settle, or were because the accommodation was ill-prepared, whilst tenancy failures after the fifteenth month were related to disagreements with the housing providers and accumulated problems; and some people abandoned shared houses because they were fed up with waiting for their own flat<sup>18</sup>
- Problems related to sexual orientation can result in repeat homelessness: sexual identity, transgender identity and other vulnerability factors led to repeat episodes of homelessness with some young people disengaging from services and developing a pattern of transient homelessness with long-term rough sleeping, squatting and sofa surfing, often because they were at risk of homophobic abuse or felt unsafe in shared supported accommodation<sup>19</sup>
- Amongst homeless women, repeat homeless appears to be very common – nearly half the women surveyed in this research had been homeless on at least one previous occasion and many had experienced homelessness several times; for some, settled accommodation was an exception in a housing career otherwise characterised by homelessness, and although services were often not able to help, over one in four respondents had first become homeless before the age of 16<sup>20</sup>
- Money problems are the main factor in tenancies being at risk for people rehoused following a period of homelessness, followed by isolation, difficulties in developing good relationships, and integrating into communities, and finding meaningful activities and work.<sup>21</sup>

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<sup>18</sup> ***Resettling Older Homeless People: A Longitudinal Study of Outcomes***, (Maureen Crane, Sheffield University, 2002)

<sup>19</sup> ***Out on my own, Understanding the Experiences and Needs of Homeless Lesbian, Gay, Bisexual and Transgender Youth*** (University of Brighton, 2006)

<sup>20</sup> ***Homeless Women: Still being failed yet striving to survive*** (Crisis, 2006)

<sup>21</sup> ***Keeping Homes: What happens to Broadway's clients after resettlement?*** (Broadway, 2008)

### Appendix three – summary of service user consultation

#### 1 *Methodology*

The aim of the consultation with service users was to establish what were felt to be the main causes of repeat homelessness, which groups it affected most, and how it could be prevented. It was also hoped that the feedback would provide ideas about ways of improving service responses to people who have become homeless, so as to prevent repeat occurrences, and that the consultation would influence other elements of the research.

The brief had identified that there were many different groups who might experience repeat homelessness. In order to try to attract responses from across these groups, and across the city, we had planned to use a range of opportunities including existing service user groups. In the event, it became clear that asking a set of questions in meetings of existing groups would not work for this research, since not only did we want to see only people who had been homeless, but we also wanted to see only those who had experience of repeated incidents of homelessness.

Five peer researchers were recruited from the Speak Out group (homeless service user group), SURF (substance misuse user group), and Bradford City Centre Project service user representatives. Groundswell, a national body working with homeless service users, provided the training for the peer researchers along with HQN, and helped HQN and the five peer researchers to devise the questions to be asked during this part of the consultation.

The questions were asked using a variety of tools such as a timeline which people can use to describe what happened to them since they first became homeless, ranking a series of suggested homelessness prevention activities, and asking people to answer specific questions about the help they had been offered, which had led to positive outcomes, and what improvements they would suggest to lead to more prevention of homelessness.

A total of 70 people were involved in the consultation:

- Two focus groups for women fleeing violence – Bradford and Keighley
- One focus group of women fleeing violence or forced marriage
- Two focus groups of young people – Bradford Foyer and BCCP
- Two focus groups of drug and alcohol users – Bradford and Keighley
- Two focus group with residents of Octavia Court (families)
- Individual interviews with users of a further refuge, the Day Shelter, BCCP, and a drug treatment service
- Individual interviews for service users who could be involved with any agency
- Interviews and group work with five peer researchers.

In addition, three providers asked their service users to answer a short set of questions during house meetings.

## Appendix three

### 2 *Demographics*

Of the 70 people seen:

- The majority were single: eight were in a couple, and 14 had children living with them
- The consultees covered all the age groups up to 65, but the vast majority were under 40
- Twenty-five people were from ethnic backgrounds which were other than white British, with most of these being women who had experienced domestic abuse or violence, or a threat of forced marriage
- Thirty-five were staying in supported housing, including direct access hostels, supported housing, or second stage supported housing; seven were sleeping rough and four were sofa surfing; four were staying with parents or other family; 14 had their own accommodation; six people gave no information about their accommodation.

### 3 *Frequency of homelessness and timescales involved*

In a few cases, homelessness had been experienced only once, despite the request to agencies to involve only those with more experience of homelessness. Not everyone told us how many times they had been homeless. Of those who did say:

- Thirteen people said they had been homeless on many occasions, three more than 15 times, three more than 20 times
- Around ten said they had been homeless between five and ten times
- Around 30 said they had been homeless between two and four times.

Six people had become homeless when they were under 16, at ages as low as nine, 11, and 13.

People with multiple repeated incidents of homelessness who had been homeless for long periods of time (19 years, 13 years, seven years) were likely to be substance misusers who had tried many types of temporary/supported housing, possibly in different parts of the country. Several of the people in this group were now housed and were trying hard to maintain their independence.

Interviewees were also asked which of the places they moved into they thought would be permanent and which they knew were likely to be temporary. A typical example of someone who had been homeless on multiple occasions would include several stays in their own accommodation, which they believed would be long lasting. This would most commonly be with a partner, or in private rented accommodation, but in a smaller number of cases amongst the people interviewed, it would be in council or housing association accommodation.

## Appendix three

### 4 *The causes of repeat homelessness*

The table below highlights the top causes of repeat homelessness as perceived by the different groups of people seen:

<b>Women fleeing domestic violence/ abuse of forced marriage and other families</b>	<b>Drug and alcohol users and other single people</b>
<ul style="list-style-type: none"> <li>• Family breakdown</li> <li>• Relationship breakdown/fleeing domestic violence (DV)</li> <li>• Tenancy breakdown</li> </ul>	<ul style="list-style-type: none"> <li>• Drug/alcohol problems</li> <li>• Family disputes with and without violence</li> <li>• Violent relationship breakdown</li> <li>• Debt, and arrears due to delays in moving in, or not completing benefit forms</li> </ul>
<b>Young people</b>	<ul style="list-style-type: none"> <li>• Criminal behaviour</li> <li>• Breaking rules</li> <li>• Not being able to be housed with dogs</li> <li>• Mental health problems</li> <li>• Unwillingness to accept hostel accommodation</li> <li>• People do not have enough to do so get back into substance misuse, or sleep, or worry</li> <li>• Family breakdown</li> <li>• Parents not helping or supporting their children so some people grow up with chaotic lives</li> <li>• Having to back into the same abusive situation</li> <li>• People following the crowd</li> <li>• People who are housed who are not yet equipped with life skills</li> <li>• Housing advice staff not caring, force people to move to areas they do not want to be in for temporary accommodation, don't provide information about how to get there or what is available, don't explain the options</li> <li>• Low self-esteem and low confidence</li> <li>• Staying in hostels</li> <li>• Housing people who are trying to be clean in areas where there are lots of drug users</li> <li>• Homehunter scheme not helping quickly enough</li> <li>• People evicted from hostels</li> </ul>
<ul style="list-style-type: none"> <li>• Family breakdown and violence from parents</li> <li>• Drugs or alcohol</li> <li>• Being in care</li> <li>• Leaving prison</li> <li>• Debt</li> <li>• Anti-social behaviour or other tenancy breakdown</li> <li>• Racism</li> <li>• Poor private rented properties/landlords</li> <li>• Relationship breakdown</li> <li>• Unwillingness to accept hostel accommodation</li> <li>• Unwillingness to move away from home area (e.g. Keighley vs Bradford)</li> </ul>	

## Appendix three

Domestic violence could be perpetrated by family members with a spouse not being able to intervene, by an employer, or by a spouse or parent. It was also noted that in some refuges, women are asked to leave if they are pursued by a violent partner or family member to the refuge, even if they are not responsible for the person finding them. This, and the cramped conditions in some refuges (see below), was thought to contribute to repeat homelessness.

Young people were often subject to violence or other abuse within their families, and a number appeared to be carers of, or living with, parents with drug, alcohol or mental health problems, where going back home to try again was a frequent occurrence. This was also a feature of the lives of substance misusers, parents (or other family members) who take them back many times.

### 5 *Comments on the services used and which services were not used*

<b>Women fleeing domestic violence/abuse of forced marriage and other families</b>	<b>Drug and alcohol users and other single people</b>
<ul style="list-style-type: none"> <li>• Women's aid services seen as very helpful and supportive, but there were less positive comments about the quality of the accommodation and size of rooms</li> <li>• Tenancy support seen as a crucial service, particularly for women moving on from a refuge</li> <li>• Homehunter seen as very confusing, with some misleading information about areas to choose, and not enough help for people who do not speak English; also not able to help people move easily from Bradford to another place where they would be more likely to be safe</li> <li>• CAB was felt to be a good service but difficult to get to see someone</li> <li>• Housing Advice Service did not always help where people were homeless because of violence from a family member but not at risk of violence from a partner, and some were made to feel they were not entitled to any help or respect. Staff were not always available and processes could take a long time</li> </ul>	<ul style="list-style-type: none"> <li>• Drug treatment agencies such as Bridge and Project 6 were praised for their help in accessing accommodation</li> <li>• The Bradford Day Shelter was also seen by many to have helped them to access accommodation on a number of occasions</li> <li>• Several people identified hostels as not meeting their needs, usually because of the problems and behaviour of others living there</li> </ul>
<b>Young people</b>	
<ul style="list-style-type: none"> <li>• Most young people had used either Keyhouse, BCCP, or the Foyer, and were enthusiastic about the help received</li> <li>• Some young people had used the Youth Information Shop, YMCA, and Connexions, and were positive about the help received</li> <li>• Young people were very likely to be less positive about the help received from Incommunities</li> </ul>	



## Appendix three

Many people felt that the current Homehunter service is difficult to understand and that there needs to be more advice available on how to use it, and which areas would be safe, particularly for people from different ethnic groups. There were also comments that some people are not able to use computers.

The Housing Advice Service was used by a surprisingly low number of people, considering that all had been homeless and most had been homeless a number of times.

### 6 *Suggestions for preventing repeat homelessness*

<b>Women fleeing domestic violence/ abuse of forced marriage and other families</b>	<b>Drug and alcohol users and other single people</b>
<ul style="list-style-type: none"> <li>• Raise awareness of women’s refuges</li> <li>• Increase social housing for all client groups</li> <li>• Provide tenancy support in all areas, i.e. bonds, tenancy sustainment, budgetary help, and increase the amount of tenancy support available</li> <li>• Improve quality and location of housing stock, i.e. fit for purpose, good amenities, suitable homes in good areas with no ASB</li> <li>• Simplify rules/guidelines to obtain social housing</li> <li>• Provide more voluntary services with consistent agendas</li> <li>• Simplify rules/guidelines to obtain social housing and benefits – provide home first then confirm benefits as causes delays</li> <li>• Re-educate frontline staff in organisations on DV issues</li> <li>• Improve the housing advice/options service</li> <li>• GPs should exercise their rights to see patients on their own</li> <li>• Improve the area – could reduce domestic violence, might put less pressure on people</li> </ul>	<ul style="list-style-type: none"> <li>• More supported housing which is tailor-made for groups of homeless people – so that people don’t have to go into services that don’t fit their needs</li> <li>• Improve provision of housing advice services</li> <li>• Debt and financial management, including training, and more help to get direct deductions of rent</li> <li>• Learn more about the causes of homelessness</li> <li>• Improve private rented sector and provide more secure and longer-term tenancies</li> <li>• More activities – giving people more to do, and being part of community</li> <li>• More help for short-term prisoners</li> <li>• More accommodation and help for single homeless men</li> <li>• Make use of empty buildings</li> <li>• More follow-on support for people who have been homeless, and for a longer time</li> <li>• Furniture provision – either fast track Community Care Grant claims, or provide more furniture, so that people can move in more quickly</li> <li>• More agencies in local areas and not just the centre of Bradford, and better advertising to provide help before people become homeless</li> <li>• More housing available in areas where the resident receives support (from staff in accommodation-based support schemes)</li> </ul>

### Young people

- More services for young people – less age discrimination – for under-18s in particular
- Non-judgemental staff who listen to young people and staff who care
- More funding, e.g. for furniture, money for bonds, and for decoration
- More follow-on support for homeless people
- Help to find accommodation if you are intentionally homeless
- More supported housing for young parents
- Help with debt and financial management
- Fewer restrictions, e.g. where you can keep dogs, and other rules which lead to people getting evicted
- Time-out places to cool down overnight, perhaps two to three times a week
- Raise awareness about not having to put up with violence from families
- Overhaul the benefits system

Women in all the refuges suggested a number of ways in which to raise women's awareness about what is available to help to escape from domestic abuse:

- Provide leaflets in GP surgeries, libraries, schools, etc
- Provide helpline numbers which are easy to remember through large print posters and/or radio
- Advertise helpline and assistance on national TV which can be identified by all people from different cultural and ethnic backgrounds, and on Asian TV
- Provide a national 'sign' through sign language for GPs, etc, to identify women in danger, etc.

## Appendix four – stakeholder workshops

### 1 Causes of repeat homelessness/barriers to preventing repeat homelessness

Access to supported housing	Losing supported housing
<ul style="list-style-type: none"> <li>• Still some ignorance of what is available – not enough hard copies of directories, and hard to find information out of office hours</li> <li>• Has been known for people to re-offend to get back into prison rather than stay in a hostel where they know others are using drugs, when they have come out of prison clean</li> <li>• Difficult to access supported housing if have poor health as well as another problem</li> </ul>	<ul style="list-style-type: none"> <li>• Not enough networking in the supported housing sector – if someone goes into the wrong provision, they may need help to access the right place</li> <li>• There are different ground rules and different applications of rules, sometimes applied too rigidly, may lead to avoidable or too quick evictions</li> </ul>
Access to social and other settled housing	Losing settled housing
<ul style="list-style-type: none"> <li>• LHA paid to tenants – fight to pay to landlords, justifying reasons (e.g. if no support worker in place)</li> <li>• LHA paid for only short period (eight to 12 weeks) so have to repeat it</li> <li>• Under-18s suspended from register automatically</li> <li>• Some landlords are reluctant to take young people even with a bond</li> <li>• Not enough move-on for young people</li> <li>• Affordability an issue for young people</li> <li>• Single bedroom accommodation is concentrated in Bradford and Keighley – may not meet needs in other areas</li> <li>• People may try to move to a better area away from Bradford but return because their ties are here, so repeated homelessness</li> <li>• Offer of poor quality accommodation may be refused</li> </ul>	<ul style="list-style-type: none"> <li>• Managing money</li> <li>• Lack of choice of housing – not making it work because of lack of commitment to area</li> <li>• LHA rules and landlord willingness to accept people on benefit</li> <li>• End of private tenancy (assured shorthold)</li> <li>• Support to maintain tenancies</li> <li>• Isolation – low level support, insufficient contact with others, fear of living alone</li> <li>• Sign-up is too quick – may have no furniture (can take up to six weeks for grant decision), services, or benefits in place, and sometimes floating support not in place in time – some people start with arrears as were not able to move in quickly enough</li> <li>• People who have been homeless repeatedly may give up far too easily – no confidence or resilience</li> <li>• Skills to manage a home not developed sufficiently</li> <li>• Housing management staff not always recognising that the person has a support need</li> <li>• Some people resist being defined as ‘vulnerable’</li> </ul>

	<ul style="list-style-type: none"> <li>• Service charge in private rented sector leading to arrears and Intentionally Homeless decisions</li> <li>• People with mental health needs may have needs that are too high for floating support to meet, but they lose supported housing also because of their behaviour</li> <li>• Lack of life skills especially money management</li> <li>• Unscrupulous landlords, private rented properties changing hands, falling into disrepair, could lead to eviction, or to people leaving the property by choice because of conditions</li> <li>• Some people unwilling to engage with floating support</li> <li>• Unaware of services which may be able to help and advocate on their behalf</li> </ul>
<p><b>Homelessness/housing advice service and policy</b></p>	<p><b>Partnership working</b></p>
<p>When people resolve their homelessness problem themselves, but only on a short-term basis, they may be deemed intentionally homeless when this breaks down, either because it comes to a natural end, or because of their behaviour</p> <ul style="list-style-type: none"> <li>• Over-strict rules on intentionally, e.g. families moving from private rented accommodation thinking they have been evicted, may be seen as Intentionally Homeless</li> <li>• Not enough help for people not in priority need</li> <li>• Is it too easy for people to lose priority status?</li> </ul>	<ul style="list-style-type: none"> <li>• Poor preparation, poor communication, poor support planning, poor info-sharing and disclosure, poor continuity of care – need for a holistic approach – sustainability</li> <li>• Culture of blame-shifting spoils working relationships – shuts doors</li> <li>• Poor information sharing as a result of perceived confidentiality requirements</li> <li>• Inadequate links and joint working between agencies</li> <li>• Willingness to work together for extreme cases but no solutions</li> <li>• Different priorities within agencies, e.g. bed blocking and requirement to move on from mental hospitals can result in rough sleeping or unsuitable accommodation</li> </ul>

## 2 Causes and barriers for individual client groups

### 2.1 Asylum-seekers

- Speed of loss of accommodation once asylum-seekers have leave to remain
- Insufficient supported housing – single adults.

## Appendix four

### 2.2 *Substance misusers*

- Location of recovery home – too close to other misusers
- May lose people halfway through recovery pathway.

### 2.3 *Offenders*

- Short custodial sentences – may have signed away their home, lose the home when HB stops, or when arrears build up or the property is damaged (prison leaving protocol not known to most participants)
- People may leave prison with the same issues they entered with
- Relationship between YOI and Probation not good enough, so when (older) young people leave YOI, may come out without help to access housing.

### 2.4 *People with complex needs*

- Support not lasting long enough for people with long-term problems, e.g. learning difficulties, substance misuse, mental health problems
- There is limited support for people with many other factors that come with homelessness, e.g. mental health needs, substance misuse, and lacking housing management skills
- Often more than one cause of repeat homelessness
- Failure to engage with services – children not in school, health, employment support, support services, advice services, chaotic, transient lifestyles
- Eligibility criteria (in general).

### 2.5 *Domestic violence*

- Domestic violence – unable to manage tenancy
- No family support, honour crimes, forced marriage, prostitution
- Housing associations are requiring police evidence or other evidence of DV (e.g. from GP) before will accept women onto their lists.

### 2.6 *People with mental health needs*

- Support not available for people where there is an undiagnosed mental health issue
- Personality disorders and dual diagnosis both contributing to repeat homelessness
- Mental health issues not being treated – can be rehoused but break down because of mental health, so not support
- May have higher support needs than floating support can cope with (five to ten hours)
- High support provided is mostly hostel-based, can lose that too because of hygiene
- Mental health needs may not be disclosed and therefore not diagnosed.

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### 2.7 *Young people*

- Repeat family breakdown/lack of family support – thrown out by parents, invited back and thrown out again
- Learned behaviour for young people in the care system – develops unsettled lifestyles for the future
- Young people less likely to turn up for appointments at accommodation outside their home area – results in frequent no-shows for some providers
- Young people with no money to get to their accommodation have to go to another place (Connexions) for their fare
- Accessing hardship payments is not easy, and if parents will not admit the young person is estranged, they may be homeless for some time or repeatedly
- Not enough information disseminated to young people
- Reluctance to deal with homeless under-16-year-olds
- Hostels are not the right environment for all young people: can be badly affected by group behaviour, or bullied, and may take on aspects of the chaotic behaviour of others
- Young people often prefer not to go to Incommunities for help, but go to BCCP or Information Shop.

### 2.8 *Families*

- Fleeing domestic violence – partners finding them, not feeling safe anymore, uprooting children often drives women back, and it is a big decision to take, so people repeatedly go back to partner, may eventually get the support to not return
- A number of families have repeated family breakdowns, or may move for no apparent good reason, mostly chaotic families exhibiting anti-social behaviour and harassment from neighbours
- Some extended families are homeless together but cannot be placed in TA together (e.g. a family with children and a woman without) – this divides families and could lead to them going back to an abusive situation
- Lack of family and community support.

### 2.9 *BME households*

- Lack of outreach for BME specialist services
- Incommunities try hard to find best area for rehousing.

### 2.10 *Sex workers*

- Need for more understanding of the complex issues facing them – is improving but need for more dialogue

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- Some reluctance on the part of supported housing providers (e.g. refuges) to accommodate women who are sex workers – will only take one substance misuser at a time, reduces the options.

### 3 *Recommendations*

#### 3.1 *Preventing repeat homelessness – better partnership working*

- Better communication between agencies
- A better understanding of the role of different agencies (statutory/voluntary), who is involved, and an awareness of responsibility
- Multi-agency panel for vulnerable groups (all agencies signed up to)
- All agencies to persevere with difficult clients
- Better communication between housing providers and Housing Benefit to stop residents getting ridiculously high rent arrears
- Single access point for all agencies to contact for homeless issues
- Develop innovative solutions for hard core cases where multi-agency approach has failed in the past
- Understanding the whole of someone's story and passing the story on
- Frontline experience needed by decision-makers
- Need for comprehensive training for services/housing options on other services in Bradford area
- More use of Common Assessment Framework, better sharing of information
- Build on what has been done before rather than replacing it entirely in a different organisation/sector
- Ensure ongoing dialogue regarding service improvement is channelled through the Homelessness Core Group and this group is open/accessible.

#### 3.2 *Housing advice options service*

- Support staff to provide a service which responds to and looks for ways to help all customers to resolve their housing problems in a way that is sensitive to their needs, and helps them to aspire to and obtain long-lasting solutions
- Housing advice service environment needs to be more child-friendly
- Need for satisfaction/evaluation forms for people using housing options service
- Out-of-hours service for non-priority homeless
- Help for people even if intentionally homeless.

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### 3.3 *Preventing repeat homelessness – better access to accommodation*

- More social rented housing
- Allow for people's change in lifestyle and their progress so poor housing history does not stop them getting housing, and reduce chances of people being barred for arrears
- Active help to overcome lack of identification papers
- Extend the bond scheme to all
- Single assessment for housing providers (too many forms to complete)
- Easier access to rented housing around the borough, suited to the individual's needs and within appropriate communities, with more transparent information about properties available and the allocation process
- A change in the scoring system with housing associations – more consistent, standardised, easier to understand/transparent
- Increase housing association nominations and encourage them to house more risky tenants
- Set up housing association housing panel for more difficult cases, all landlords to do their bit and take a quota
- Private sector leasing for high risk groups
- Develop work with private landlords – minimise risk through tenancy-ready scheme
- Lists of approved/accredited landlords, alongside provision of floating support
- Affordable furniture packs with all the basics
- Incommunities have set up an acceptable behaviour contract for women who are sex workers (not bringing clients back to the property) – could be done by other providers of settled or supported housing.

### 3.4 *Preventing repeat homelessness – preventing the loss of temporary/supported accommodation*

- Identifying needs prior to or during stay in temporary accommodation
- New ways with supported housing to prevent residents accruing service charge/rent arrears
- Apply other examples of reducing evictions from supported housing (e.g. Forum Housing in Merseyside)
- More outreach/floating support services to be available – intervention as early as possible
- Better support/links to other agencies when duty is discharged by LA and people lose TA
- This should be rare – increase intensity of support, change worker if client does not engage.



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### 3.5 *Preventing repeat homelessness – getting earlier advice/intervention*

- Better communication between individuals and social landlords giving better advice and support
- Better information for people claiming benefits around Housing Benefits and implications if they don't complete forms/change of circumstances
- When people sign up for social housing they are given information or even better a contact name they can speak to if they are harassed, to help them remain in the tenancy
- Joined-up working, e.g. specialist liaison for housing for other agencies to contact – early warning protocol
- More marketing and promotion of services so people access early on before they reach a crisis
- 'Invest to Save' – resource support/advice services dealing with lower level needs as a priority to prevent homelessness
- Work with landlords (private) to make sure they can provide tenants with information on advice/support agencies
- Making sure there is better assessment so that support can be better targeted – use opportunity of people in TA to identify needs for support, etc.

### 3.6 *Preventing repeat homelessness – preventing the loss of settled housing*

- More floating support and identify the need for it earlier
- Develop landlord forum and accreditation
- Increased emphasis on tenancy relations work preventing eviction
- Better communication between social landlords and government agencies, e.g. Housing Benefit so rent arrears do not build up at start of tenancy
- System for identifying early warning signs and multi-agency intervention
- Opportunities for local residents to meet up and discuss concerns in their neighbourhood
- Give families more choice of areas, so they can be sure the area is suitable
- Identify support agencies in the area people are moving into.

### 3.7 *Preventing repeat homelessness – client group-specific suggestions*

- Support for parents of drug-using teenagers
- Education on housing issues – to spread knowledge of what's available/who can help
- Multi-agency co-ordination for people with enduring mental health needs
- Need for better links for people with lower level mental health needs – especially if not Care Programme Approach
- Bond scheme and rent in advance needed by young people

## Appendix four

- Out-of-hours advice service for young people, with a freephone number, and responsive to young people and their families/carers
- End age restrictions in social rented stock
- Connexions worker based in benefits office
- More training for frontline staff, e.g. on domestic violence
- Named workers at housing options for families experiencing domestic violence
- A better understanding of domestic violence within the BME communities, of appropriate language interpreting services
- Set up personality disorder unit – works with chaotic people
- Provide support to families to maintain sharing arrangements in short term to allow time to plan for move, e.g. young people living with parents.

Appendix five – Bradford district map



HQN is the largest independent housing training and consultancy company in the UK. Over 750 housing organisations nationwide subscribe to The Housing Quality Network which provides high quality briefings and workshops on a wide range of issues affecting the sector. We also run a number of specialist networks, provide bespoke consultancy and research, in-house training, interim management (The Pool) and executive recruitment (The Source) services and host a comprehensive programme of conferences and seminars.

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